



# Somali Refugee Women of Childbearing Age



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## Background

- High rates of C-sections have been noted amongst Somali Refugee Women who do not receive prenatal care
- Somali Refugee Women of Childbearing age perceive pregnancy as a natural process and they are not 'sick'
- Therefore, despite efforts by healthcare providers to encourage early prenatal care, Somali Refugee Women either do not seek any prenatal care or wait until late in the pregnancy

## Purpose

The purpose of this project was to explore Somali Refugee Women of childbearing age regarding their unwillingness to seek early prenatal healthcare services.

The outcome is to identify strategies for improving the initiation of early prenatal care by Somali refugee women of childbearing age

A secondary outcome is to prevent poor birth outcomes.

## Methods

- Quality improvement project
- Created Community Advisory Board to help develop project with community input.
- Created healthcare team to help develop project with healthcare provider input

## Community Advisory Board (CAB)

- Reviewed and advised on:
  - mission,
  - vision,
  - goals and
  - activities
- Monthly meetings
- Members:
  - Community partners
  - Professionals within the community



## Healthcare Team

- Supported community assessment activities
  - CAB and
  - SRW interview data
- Interdisciplinary Members:
  - Executive Director Community Based Organization
  - Advanced Practice Nurse
  - Community Health Promotion Specialist



## Participants

- Somali Refugee Women (N = 13)
- Residents of a large Southern California community.
- Willing to discuss perceptions of barriers to prenatal care,

## Instruments

- Demographic Data
- Interview Guide: Developed for Quality Improvement project

## Data Analysis:

- Responses manually recorded
- Thematic Analysis
- Matrix developed to explore patterns

## Findings: Demographic Data

- Age: 22-45  
Income: <\$24,000/year  
Education:
- No formal education: 69%
  - College education: 31%



## Findings: Themes

### Evil Eye

#### Curse or Bad luck

*"they do not share because of fear of "evil eye"*

## Limited Support from Spouses

### Women have all of the household and child care chores

*"Our husbands are not supportive with childcare and household responsibilities"*

*"Somali men leaving little time for their pregnant wives to obtain healthcare"*

## Limited Resources

*"No insurance or Medi-Cal"*  
*"They have no regular doctor or nurse practitioner because of language barriers and transportation"*  
*"Somali healthcare providers"*



## Physicians Just Don't Understand

### SRW did not feel that healthcare providers understood their culture or beliefs

*"Doctors do not understand our issues"*

## Modesty

### Somali women do not share pregnancy with others because of modesty"

*"A 99% of Somali women prefer a female practitioner if there is physical touch"*

*"70% and 75% of Somali women do not seek a doctor [a healthcare provider] because they feel shy about sharing their personal business with others. Therefore, they wait to see a doctor at six to seven months of pregnancy".*

## Confidentiality

### Interpreters share confidential information with the community

## But I'm Not Sick

*They do not go and see a doctor unless they are sick. Not being not ill and seeing a doctor cost the government a lot of money. They save money by not visiting healthcare providers.*

## MCH Nursing Leadership Journey

### Challenge the Process

The beliefs of Somali Refugee Women of childbearing age beliefs to accessing quality prenatal healthcare related to their health beliefs

### Inspire a Shared Vision

Community members recognized need for SRW of childbearing age to utilize early access to prenatal health services and have healthy pregnancies and babies

### Enable Others to Act

Met with Somali community members and challenged them to identify barriers to Somali Refugee Women of childbearing age accessing prenatal care.

### Model the Way

Talked with Somali Refugee Women to find out their views on barriers to accessing prenatal care

### Encourage the Heart

Shared findings with advisory group  
Thanked and acknowledged contributions of each advisory group Member

## Acknowledgements:

### Community Advisory Board (CAB) (Alphabetical Order)

Rahmo Abdi, International Refugee Girls Association/Somali Youth United  
Sahra Abdi, United Women's East African Support Team/City Heights Hope  
Safiya Abdurahman, Horn of Africa  
Ralph Achenbach, San Diego Refugee Forum  
Kayti Buehler, Buehler, Both Doula (My San Diego Doula)  
Bonnie Copland, Central Region Public Health Center Manager  
Yasmin Hamud, Center for Bridging Communities  
Fadumo Jama, Somali Family Services  
Ahmed Malinomar, City Youth &Family Outreach  
Bill Oswald, Springfield College (San Diego Campus)  
Ramla Sahid, Mid-City CAN



### Interdisciplinary Team (IT) (Alphabetical Order)

Amelia Barile-Simon, Community Health Promotion  
Bonnie Copland, Central Region Public Health Center Manager  
Yasmin Hamud, Center for Bridging Communities  
Shelley Parker, RN, MSN, PHN, Central Region Public Center