IMPROVING THE QUALITY OF REFUGEE HEALTH: A COMMUNITY SPEAKS

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Disclosure

• The author and presenter has nothing to disclose.
• No conflict of interest.
Objectives:

• Develop awareness on the needs of resettled refugees.
  • Expanded content outline: Present the current resettlement program and the identified gaps that the resettled refugees experiences.

• Discuss the significance of community needs assessment (CNA) in developing community based health program.
  • Expanded content outline: Illustrate the use of a community needs assessment framework to identify challenges and develop programs in partnership with the community.
WHO is a REFUGEE?

UNHCR: Article 1A(2) of the 1951 Convention defines as a refugee any person who

“As a result of events occurring before 1 January 1951 and owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his [or her] nationality and is unable, or owing to such fear, is unwilling to avail him [or her]self of the protection of that country; or who, not having a nationality and being outside the country of his [or her] former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it.”

(www.unhcr.org)
Note: The data for forcibly displaced people is different from people/population of concern, the latter is based on a well defined parameter per UNHCR OAU Convention of 1969 therefore less. The former will contain the data from the latter but not reversible.
Where do the world’s refugees come from? | mid-2014

(in millions)

mid-2013  end-2013  mid-2014

US Refugee Resettlement Program (ORR)

**GOAL:** Assist refugees to attain self-sufficiency and independence

- United States Government
- 8 months program or less

Service Providers by state: Voluntary Agencies (VOLAGS)

- Health care
- Education
- Housing
- Food Allowance
- Workforce development training
Community Needs Assessment

Mobilizing for Action through Planning and Partnerships (MAPP)

- Community-driven, community owned
- Strategic planning process
- For community improvement

http://archived.naccho.org/topics/infrastructure/mapp/framework/mappbasics.cfm
MAPP Principles

• Systems Thinking
• Dialogue
• Shared Vision
• Data
• Partnership and Collaboration
• Strategic Thinking
• Celebration of Success

http://archived.naccho.org/topics/infrastructure/mapp/framework/mappbasics.cfm
Community Needs Assessment, Fall 2015

- Focus: Health

- 4 months to 4 years, post RRP

- Africans, South Americans, Asians (Somalia, Burundi, Kenya, Congo, Colombia, Burma)

- 21 interviewed, 5 excluded, 1 refused to be included

- Age group by birth year: 1970 (10), 1960 (1), 1980 (1), 1990 (3)

- Male 6, Female 10
<table>
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<td>Oral Care</td>
<td>1</td>
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<tr>
<td>Mental Health</td>
<td>1</td>
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</tbody>
</table>

N=16
MD/Clinic Visit Profile (1 year)

- >5 times: 14
- <5 times: 5
- Obstetrics care: 2
- Sick: 2
- PE/Immunization/TB: 10
- Dental Problem: 1
- Mental Health: 1
Respondents

Gender

- Female: 6
- Male: 10

Birth Year

- 1960: 3
- 1970: 7
- 1980: 3
- 1990: 3
Health Care Service Utilization based on Refugee Health Practices, N=16
Community Needs Assessment

- Low English language proficiency
- Socio-cultural discordance
- Limited understanding of the US health care system

OTHERS:
- Lack of knowledge: Insurance system, Payments
- Unknown Concept: Preventive Care
- Lack of physical activity
- Socio-cultural discordance with providers
- Basic health care
Refugee Population Challenges

- Trauma, psychological, mental health
- Resettlement, refugee camps – life and health conditions
- Post Resettlement – nutrition, activity
- Socio-Cultural variance

(Agbenyiga, Barrie, Djelaj, & Nawyn, 2012; Boise, Tuepker, Gipson, Vigmenon, Soule, & Onadeko, 2013; Mirza et al., 2014; Morris, Popper, Rodwell, Brodine, & Brouwer, 2009; Pavlish, Noor, & Brandt, 2010; Wagner et al., 2013)
Problem Statement

Risk of poor health outcomes among resettled refugees post RRP from the date of arrival at target community, which is indicated by increase utilization of emergency room, lack of preventive health, lack of knowledge of the US healthcare system and results from low English proficiency, socio-cultural discordance and influenced by providers limited socio-cultural awareness and lack of comprehensive culture sensitive health education program in the community.
Priorities:

• Priority 1: Education in English Language (ESOL), General Health

• Priority 2: US Health Care Infrastructure and Services

• Priority 3: Orientation to US Socio-cultural Practices

• Priority 4: Cultural Discordance in Childcare
Immediate Community-based Education Programs:

• English as a Second Language Education
• Common Illnesses, First Aid
• US Health Care System and Services
• Nutrition and Diet
• Social and Cultural Education
• Neighborhood Safety and Healthy Living
Fall 2016

Comprehensive Culture-Sensitive Health Education Program

- Topics based on refugees needs
  - Physiologic, Mental, Physical
- Community cultural immersion
- Case Management

- Collaborative Effort
- Community health advisory
- Refugees as facilitators, navigators, teaching assistant
The Community: Assets and Barriers

- Structural
- Individual
- Community Partners
- Actual and Potential Policies
The community . . .

We can never give to the community. Everything is there and theirs from the beginning. We can increase awareness, connect people, and validate respect for culture and the many ways of knowing, believing, and doing. It is essential to trust in the people to decide for themselves what is best and most needed even if those needs are different from funding priorities and our preferred action plan (van der Velde, Williamson, & Ogilvie, 2009, p. 393).
Long-Term Plans:

- Community partnership.
- Re-evaluation of current resettlement program and policies.
- Information Technology, epidemiological database
- Community resources and infrastructure
- Community safety issues
- Comprehensive culture competent case management (Joshi, et al. 2013).
- Community refugee navigators
- Improve national refugee organization network
A Community Forum
“The story about his life in and escape from Sierra Leone was tragic, however his experiences as a refugee were just as dramatic. He used the metaphor of standing on a small island in the middle of the ocean surrounded by endless water yet dying from thirst and dehydration due to the inability to access drinking water; the "American dream" is all around a refugee but he is unable to access it due to multiple barriers including language and culture.” (Refugee Statement)
References


References


