Domestic Refugee Health Trends & Cultural Considerations

“He who has health, has hope. And he who has hope, has everything.”
~ Arabian Proverb
Refugees flee their country not for economic gain but to escape persecution, the threat of imprisonment and even threats to their lives. They need a safe haven where they can recover from mental and physical trauma and rebuild their hopes for a better future.
Refugee Countries of Origin

http://www.worldmapper.org/display.php?selected=14
HIV/AIDS Global Disease Burden

Diabetes Global Disease Burden

Map obtained from WorldMapper utilizing data from the World Bank’s 2005 World Development Indicators.
http://www.worldmapper.org/display.php?selected=239
Tuberculosis Global Disease Burden

Malaria Global Disease Burden

Undernourishment Global Disease Burden

http://www.worldmapper.org/display.php?selected=178
National Resettlement Statistics

Number of Arrivals Eligible for Refugee Benefits by State
FYY 2010 & 2011

Data Source: FY2012 Social Services Allocations Report by State
Refugee Arrivals by County, FFY 2013

Data Source: FL DOH Refugee Domestic Health Assessment System
New Arrivals Eligible for Refugee Health Services by Country of Origin, FFY 2013

- Sudan, 71
- Colombia, 95
- Egypt, 252
- Burma, 345
- Other, 441
- Haiti, 471
- Iraq, 473

Cuba, 28,893

Data Source: FL DOH Refugee Domestic Health Assessment System
Refugee Health Services Provided

Services offered by County Health Departments include:

- Medical history review
- Physical assessment
- Communicable disease screening
- Chronic disease screening
- Hepatitis screening
- Parasitic infection screening
- Malaria & Lead screening
- Health education
- Immunizations
Refugee Children from Select Countries of Origin Testing Positive for the Presence of Lead, FFY 2012

Data Source: FL DOH Refugee Domestic Health Assessment System
Percent of Positive TB Results from Select Countries of Origin, FFY 2012

Data Source: FL DOH Refugee Domestic Health Assessment System
Percent of Abnormal Ova and Parasites Results from Select Countries of Origin, FFY 2012

Data Source: FL DOH Refugee Domestic Health Assessment System
Cuba

• Health Concerns
  – Diabetes
  – Hypertension
  – Communicable disease exposure in transit
  – Mental health concerns

• Cultural Considerations
  – Strong sense of community & family values
  – Well-versed in medical care and preventive medicine
  – Integration challenges related to adjustment to U.S. values & benefits (particularly youth)

Sources: FL DOH Refugee Domestic Health Assessment System
Iraq

• Health Concerns
  – Diabetes
  – Hypertension
  – Mental health concerns (anxiety, trauma from war, & survivors of torture)
  – Dental needs
  – Advanced medical needs including cancer, kidney disease/failure, heart disease

• Cultural Considerations
  – Mostly well-educated & come from wealthy families or backgrounds
  – Privacy of family matters/male and female dynamics
  – Strong religious beliefs
  – Family is center of life
  – Victims of trauma & torture

Sources: FL DOH Refugee Domestic Health Assessment System
Burma/Myanmar

• Health Concerns
  – Nutrient deficiencies
  – Parasitic infections
  – TB exposure
  – HIV/AIDS
  – Hepatitis B
  – Mental health
  – Alcoholism & Substance Abuse

• Cultural Considerations
  – Coining & Cupping are common practices
  – Alcoholism & substance use
  – Domestic violence
  – Mental health views
  – Medicinal beliefs
    • Balance of hot and cold
    • Food linkage to health issues
    • Blood letting

Democratic Republic of Congo

• Health Concerns
  – Tuberculosis exposure
  – HIV
  – Parasitic Infections
  – Malnourishment
  – Hypertension
  – Vision
  – Mental Health (trauma & torture)
  – Sexual & gender-based violence

• Cultural Considerations
  – Loose family structures
  – Limited English proficiency & ability to read/write
  – Religious & strong belief in power of prayer
  – Western medicine is generally accepted & usually complements traditional practices
  – Little understanding of mental health practices & diagnoses
  – Spousal abuse & physical discipline of children is common

Sources: FL DOH Refugee Domestic Health Assessment System
Haiti

• Health Concerns
  – Tuberculosis exposure
  – HIV
  – Mental health (especially after the earthquake)
  – Parasitic infections
  – Malnutrition

• Cultural Considerations
  – Acceptance of western medicine although many practice traditional medicine due to lack of medical care in Haiti
  – Don’t always access U.S. health care
  – Strong religious beliefs & voodoo practices
  – Strong family ties

Sources: FL DOH Refugee Domestic Health Assessment System
Title VI & Refugees

• Requires Federal agencies to examine the services they provide, identify any need for services to those with limited English proficiency (LEP), and develop and implement a system to provide those services so LEP persons can have meaningful access to them.
• Agency plans should provide for such meaningful access consistent with, and without unduly burdening, the fundamental mission of the agency.
• Requires that the Federal agencies work to ensure that recipients of Federal financial assistance provide meaningful access to their LEP applicants and beneficiaries.
• Know where to access LEP documents & ensure your agency has access to on-site or telephonic interpreters to provide informed care and treatment.
Displays of Cultural Competence

- Ensure your clinic appears inviting to a diverse population (posters, materials available in multiple languages, etc.)
- Post miniature flags of countries served or have a map where clients can mark their country of birth/origin
- Post information about language access and right to an interpreter
- Greet clients in their native language
- Hire bilingual staff, if possible
- Take your time with the patient and begin with a pleasant neutral conversation
- Read about the cultural beliefs and history of your clients to better understand their background and how they may perceive western medicine (but don’t assume the background applies to all from that culture)
- Understand how medical decisions are made in the family structure – in some cases one family member may make medical decisions for the family
- Be sensitive when providing services to clients who may have experienced sexual violence
Helpful Resources

Educational Materials

• Refugee Health Information Network
• USCRI Food and Nutrition Handouts
• Ethnomed
• Health Information Translations
• Medline Plus
• National Resource Center on Advancing Emergency Preparedness for Culturally Diverse Communities

Cultural Backgrounders

• Cultural Orientation Resource Center/Center for Applied Linguistics
• Florida Center for Survivors of Trauma and Torture
Questions?

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