NEEDS ASSESSMENTS WITHIN THE REFUGEE COMMUNITY

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Nationalities Service Center
Session Overview

- Background
- Needs Assessment Examples
- Take Away Points
- Question and Answer
Refugee Resettlement in Philadelphia

- Nationalities Service Center (NSC)
- Hebrew Immigrant Aid Society (HIAS PA)
- Lutheran Children and Family Services (LCFS)

Philadelphia Total ~ 800+ arrivals annually

Unique Programs:
- Philadelphia Refugee Health Collaborative
- Philadelphia Refugee Mental Health Collaborative
- Philadelphia Partnership for Resilience
Refugee Arrives in Philadelphia (~ 850 per year)

HIAS Pennsylvania
Nationalities Service Center
Lutheran Children & Family Service

2013

Coordinator

Jefferson Family Medicine Associates
Penn Center for Primary Care
Drexel Women’s Care Center
Children’s Hospital of Philadelphia
Nemours Pediatrics
Einstein Community Practice
Einstein Pediatric Clinic
Fairmount Primary Care Center

philarefugeehealth.org
PRHC Coordinator: Gretchen Wendel (215.893.8400)
Health Services: What NSC Provides

- Orientation to US health care system
- Enrollment in Refugee Medical Assistance (RMA)
- Schedule and escort to domestic health screening appointment
- Schedule and escort to follow up testing and/or specialist care as needed
- Medical case management for complex cases
A Closer Look: Health Orientation

- Health Insurance Coverage
- What to Expect at Your Doctor
- Confidentiality at Your Doctor’s Office
- Prescriptions and Pharmacy
- Specialists and Referrals
- Sick Visits and Emergencies
- Affordable Care Act Options

- Average Days to Orientation = 14.4
Needs Assessment Overview

- Refugee populations have individual needs and priorities
- Limited literature
- “Development and refinement of well established approaches to understanding the needs of a local population”
- Literature describes health needs assessments to be successful way to systematically ensure health of a population is served in the best way
Needs Assessments Conducted

- Topic Specific
  - Women's health
    - Reproductive and sexual health
    - Pregnancy and Prenatal Care
  - Dental
- Specific Population/Age
  - Geriatric
  - Congolese
- Health access and perceptions
- And Many More...
Limitations

- Small-scale needs assessments
  - Need to be careful about generalizations
- Language
  - High cost interpretation vital to success and inclusivity
- Participant selection
  - Convenience sample increases bias
Women’s Health
Women’s Health & Pregnancy Needs Assessment

- **Needs assessment surveys:**
  - Preventative/Reproductive health
    - Desire to have (more) children
    - Family planning, birth control
    - Women’s health education
  - Pregnancy
    - WIC
    - Cribs/Car sets
    - Labor and delivery
Preventative/Reproductive Health

- Asked questions about:
  - Support utilized
  - Support needed
  - Additional steps NSC can take

- Surveyed 9 women refugees
  - 33% had used birth control in the past/present
  - 44% reported they do not discuss birth control with partners
  - More comfortable in women-only groups for these topics
Reproductive Health Needs Assessment

- Desire for Family Planning education
- Increased need for community education and women’s rights
- Fear health effects of contraception
- Need for culturally competent care
- Limited health literacy
Reproductive Health Next Steps

- Single sex reproductive health group education/workshops for men and women
- Coordinate with coexisting community efforts
- Increased collaboration with Family Planning counselors and clinicians
- Greater utilization of city resources and family planning programs to provide free Family Planning
Pregnancy Needs Assessment

- Did you have any trouble finding the Labor & Delivery floor when you went into labor?
- Did anyone go with you for your delivery? If yes, who and was it helpful?
- Did NSC and Jefferson prepare you for your delivery? If no, what can we do better?
- Was there anything you wished you had known before your delivery?
<table>
<thead>
<tr>
<th>Concerns</th>
<th>Solution</th>
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<tr>
<td>Unclear where to go for delivery</td>
<td>Picture booklet and/or tour to demonstrate where to go when women goes into labor (include map of hospital)</td>
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<td>Tours for women getting close to their due date, to show them from NSC where the hospital is, and where the L&amp;D floor is</td>
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<td>Contact Clinics about how they inform clients</td>
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<td>Transportation after delivery</td>
<td>Include information on arranging own transportation in informational booklet i.e. don't call ambulance, call a taxi, etc.</td>
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<td>Communicate with clinics on what the current process is for discharge/arranging transportation</td>
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<td>Help to arrange transportation</td>
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<td>Preparation for postnatal care</td>
<td>Help link clients to necessary resources-- Cribs for Kids and car seat program</td>
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<td>Assistance with budgeting for diapers, baby food, etc. (have them work with self-sufficiency/employment to discuss need for certain level of income</td>
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<td>Breast Feeding</td>
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<td>Care for infant; shots, visits</td>
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<td>Gift cards/ other resources for goods</td>
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Next Steps: OB Care

- Pregnancy Outreach Strategy
  - Connection to prenatal care
  - Intake education session with pregnancy information
  - Help getting crib/car seats
  - Labor and Delivery Tour
  - Scheduled follow-up calls
Pregnancy Needs Assessment: Lessons

- Better understanding of women’s health among refugee women
- Know how to better direct education and services to pregnant women
- Limitation: Congolese population was not represented in this study
Dental Needs Assessment
Dental Health Needs Assessment

- 30 responses
  - 16 Bhutanese
  - 5 Burmese
  - 5 Sudanese
  - 4 Iraqi
- 17 Female, 13 Male
Dental Needs Assessment Survey

- 22-questions examining clients’:
  - History of dental visits
  - Current use of US dental services
  - Current/past dental habits
  - Self-perceived barriers to dental care
  - Fears of dental visits
  - Knowledge of healthy habits (flossing, water)
  - Dental habits of children
Dental Care Recommendations for Resettlement Agencies

- Provide hands-on examples/education, especially flossing
- If the person has never been to the dentist, address issues of fear and assure client the dentist is safe and trustworthy
- Ensure client knows of a dentist in their area that accepts their new insurance
- Emphasize the importance of 6 month check-ups and preventive care - not just when something is wrong
Recommendations for Dental Care Providers

- Emphasize preventive care
- Provide floss and how to use it
- If an interpreter is available on certain days, make that information easily accessible
- Be aware of betel nut use among Bhutanese and Burmese populations, which has been shown to have negative impact on oral health
Geriatric Needs Assessment
Geriatric Refugee Needs Assessment

- Growing age group of refugees
- Interviewed 6 Iraqi and 6 Bhutanese refugees
- Topics included:
  - Demographics
  - Health and functional status
  - Social roles and activities
  - Stress
  - Knowledge of and access to programs
Geriatric - Common Themes

- **Health & Functional Status**
  - Difficulty managing conditions, health literacy, navigating health insurance

- **Social Roles & Activities**
  - Decreased social engagement, poor mobility, lack of activity

- **Sources of Stress**
  - Language barriers, concern for family members, environment, financial uncertainty

- **Knowledge of & Access to Programming**
  - Language barriers, frustration with PCA
Recommendations for Senior Refugees

- **A Place for Programming – Gardening**
  - Connect with peers; Respite for caregivers; exposure

- **Specialized Instruction**
  - ESL, Health Literacy, Insurance Navigation
  - Public Transportation

- **Community Health Workers**
  - Home/follow up visits
  - Prevention strategies

- **Partnership with OT/PT Programs**
Next Steps for Geriatric Population

- Asset Mapping
- Partnerships
  - Social Service Organizations
  - OT/PT Programs
- Education/training
- Future Research
  - Caregiver Focus Groups
  - Resource Guide
Congolesse Needs Assessment
Congolesse Health Needs Assessment

- Interviewed 13 Congolese adult refugees
- Interview covered:
  - Basic needs and support
  - Stress
  - Nutrition
  - Health care
  - Debriefing
Congolese Needs Assessment Results

- Basic needs and supports
  - Grateful for support
  - Concern about not having enough money to cover basic expenses
- Stress
  - Felt welcomed and supported by NSC and community
- Nutrition
  - Concerned food stamps not enough to feed family
- Health care
  - Positive experiences
  - Difficulties with follow-up and specialist appointments
Congolese Assessment: Lessons Learned

- Budgets to be addressed in more detail
- Males predominated the conversations
- Unrealistic expectations related to assistance needed and what can realistically be provided
Health Access and Perceptions of Newly Arrived Refugees

- Interviews conducted with 83 participants
  - Bhutanese - 44
  - Iraqi – 12
  - Burmese – 11
  - Eritrean – 11
  - Sudanese – 5
- 52% Male, 48% female
- Age range: 4 months to 83 years
  - 31% under 18 – not interviewed directly
Health Access & Perception Results

- **Access to care**
  - Inability to schedule medical appointments
  - Insurance concerns

- **Health care utilization**

- **Resettlement agency support**
  - Desire for more scheduling and escorting help
  - 75% recalled little to no information from health orientation

- **Health clinic care**
  - Phone interpretation sufficient
  - Only 3 expressed complaints over care

- **Perceived health status**
  - 53 reported better health, 23 same, 7 worse
Health Access & Perception Lessons

- More focus on helping get insurance post-RMA
- Health orientations more interactive
  - Questions
  - Props
- More focus on single/free cases
- Language access in making appointments
  - “Secret shoppers”
TAKE AWAY POINTS
Lessons Learned

- Small-scale needs assessments can make a big difference
- Real-time learning
  - Health orientation
    - More interactive
    - Take away items
  - Pregnancy
    - Extra case management
- Better support for free cases
Take Away Points

- Each population has different needs
  - Some literature focuses on immigrant/refugee populations as one population

- Timeliness
  - Address cultural differences early

- Increased refugee literature needed
- Student Projects
- Future needs assessments in progress
Local Research

Due to the hard work of PRHC partners, Philadelphia is becoming a major hub for refugee health in the United States. Below is a list of research projects on refugee health that are in progress or have been completed in the Greater Philadelphia Area. If you are interested in finding out more about a specific project, learning best practices, or collaborating with other researchers, please see each projects custom page below for more information. To post your own research project, please fill out the following form with information about your project. Both students and professional researchers are encouraged to apply.

Click here to submit your current or past research project.

Search Research Projects by:

POPULATION
- Bhutanese Refugees
- Burmese Refugees
- Eritrean Refugees
- Sudanese Refugees
- All Populations

RESEARCH TOPICS
Questions?

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