

PHC 4464
Introduction to Health Disparities

Refugee Health
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Introduction to Health Disparities

Objectives

- Understand how the “refugee experience” can influence health outcomes
- Describe health needs among several refugee populations
- Recognize the importance of culturally congruent health promotion and services

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Terminology

Refugee

“A person who owing to a 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 nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country”

- Quoted from the 1951 Refugee Convention

Source: <http://www.unhcr.org/en-us/refugees.html>

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1951 Refugee Convention

- Ratified by 145 State parties
- Defines the term “refugee”
- Refugees should have access to health services equivalent to that of the host population
- Core principle is non-refoulement

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Terminology

- **Asylum seeker:** A person whose request for sanctuary has yet to be processed
- **Internally displaced people (IDPs):** People who have left their home (often for reasons similar to refugees), but who are still living within the border of their home country
- **Stateless person:** People without an official nationality
- **Returnees:** Refugees (or internally displaced people) who have returned to their homes

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Terminology

Click on the play icon to the right to watch the video
(video will open in a new window)

Source: <https://www.youtube.com/watch?v=25hw5iK8u>

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65.3 million
forcibly displaced people worldwide

Refugees
21.3 million
12 million under UNHCR mandate
9.2 million Palestinian refugees registered by UNRWA

Stateless people
10 million

Refugees resettled
107,100
in 2015

Source of Infographic: UNHCR

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- Refugees can come from any country, if they have:
- Well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion

53% of refugees worldwide came from three countries

Somalia 1.3m
Afghanistan 2.7m
Syria 4.9m

Source of Infographics: UNHCR

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Recent historical events resulting in increased refugee populations

- Repression in Burma
- War in Syria
- U.S. invasion of Iraq
- South Sudanese Civil war
- Civil conflict in Columbia

Source : UNHCR

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Where the world's displaced people are being hosted

12% Americas
6% Europe
39% Middle East and North Africa
14% Asia and Pacific
29% Africa

Top hosting countries

Jordan 654,300
Ethiopia 736,100
Islamic Republic of Iran 979,400
Lebanon 1.1m
Pakistan 1.6m
Turkey 2.5m

Source of Infographics: UNHCR

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Health of refugee population

- Traumatic events prior to leaving a home country
- Limited resources when escaping their homeland
- Refugee camps vary greatly in their infrastructure and availability to provide resources
 - Often physically safer, but lack resources
 - Lack of water and food
 - Crowded conditions

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Health of refugee population

- High risk of mortality
- Greater risk for many illness, including:
 - Diarheal diseases, malnutrition
 - Infectious diseases such as measles, acute respiratory infections, malaria, etc.
- Reproductive and sexual health services vary
 - Many have experienced rape

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Health of refugee population

- Refugee health remains a concern even after resettlement to a foreign country
 - New systems of care
 - New culture
 - Physical health
 - Mental health
 - Depression
 - Post-traumatic stress disorder

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United States Policies on Refugees: The Refugee Act of 1980

- Created The Federal Refugee Resettlement Program
- Effective resettlement of refugees and to assist them to achieve economic self-sufficiency as quickly as possible after arrival in the United States

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United States Policies on Refugees: Other policies

- Torture Victims Relief Act of 1998 (TVRA)
 - People who have suffered from torture may be in need of rehabilitation services
- Victims of Trafficking and Violence Protection Act of 2000/ Wilberforce Trafficking Victims Protection Reauthorization Act of 2008
 - Combats trafficking in persons, especially into the sex trade, slavery, and involuntary servitude
 - Reauthorizes certain Federal programs to prevent violence against women, and for other purposes

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U.S. refugee populations

- In 2016, the highest number of refugees came from:
 - Democratic Republic of Congo: 16,370
 - Syria: 12,587
 - Burma (Myanmar): 12,347
 - Iraq: 9,880
 - Somalia: 9,020

Source: Krogstad & Radford [Pew Research Center], 2017.

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Refugees entering the United States

- Refugees enter the U.S. already approved by the [State Department's Bureau of Population, Refugees and Migration](#).
- Applications are screened by the State Department, the Department of Homeland Security's U.S Citizenship and Immigration Services and other federal agencies.
- Once approved, refugees undergo a health screening, and most also go through cultural orientations outside of the U.S.
- Process can take up to 18 to 24 months.

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Refugees resettling in the United States

- California, Texas, and New York: Together home to almost 25% of the US refugees in 2016
- Other states taking in significant numbers of refugees included: Michigan, Ohio, Arizona, North Carolina, Washington, Pennsylvania and Illinois
- Delaware and Hawaii took in no refugees.

Source: Krogstad & Radford [Pew Research Center], 2017.

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US Refugee Services

- The Office of Refugee Resettlement proposes and implements national policy for the refugee resettlement program
- Six guiding principles:
 - Appropriate Placement and Services
 - Client-Centered Case Management
 - Newly Arriving Refugees
 - Health and Mental Health Services
 - Outreach
 - Data Informed Decision-Making

Source: U.S. Department of Health and Human Services, 2016

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US Refugee Services: Health Promotion

- Incorporates a framework of health services from arrival to self-sufficiency, ranging from attending health orientation and education classes, to accessing health services, and obtaining affordable ongoing health care.
- A special emphasis placed on:
 - Health literacy
 - Access to health and emotional wellness services, and
 - Access to affordable health care beyond the initial services provided upon arrival into the United States.

Source: U.S. Department of Health and Human Services, 2016

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US Refugee Services: Health Insurance

- Refugee Medical Assistance (RMA)
 - Available for up to eight months
 - Some refugees may be eligible for Medicaid or the Children's Health Insurance Program (CHIP)
- Eligible for health coverage options under the Affordable Care Act (ACA)

Source: U.S. Department of Health and Human Services, 2016

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US Refugee Services: Mental Health

- Mental health, or *emotional wellness*, and physical health are linked
- Emotional wellness is essential to a person's well-being, interpersonal relationships, and the ability to live a full and productive life.
- Special focus on:
 - Raising awareness and removing stigmas
 - Conducting culturally competent mental health screenings
 - Facilitating strengths-based mental health case management services
 - Developing partnerships to increase access to care
 - Promoting resiliency factors and mental health education

Source: U.S. Department of Health and Human Services, 2016

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Health concerns of US based refugees

- Major depression
- Impairment in daily activities due to pain
- Poor self-reported health
- High rates of chronic diseases

Source: Yun, Mohamad, Kiss, Annamalai, & Zimmerman, 2016

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