



CHA's Refugee Initiative

"IF A STRANGER LIVES WITH YOU IN YOUR LAND, DO NOT MOLEST HIM. YOU MUST COUNT HIM AS ONE OF YOUR OWN COUNTRYMEN AND LOVE HIM AS YOURSELF — FOR YOU WERE ONCE STRANGERS YOURSELVES IN EGYPT."

(LV 19:32-34)

Stresses Experienced by Refugees

Before Escape

- Imprisonment/detainment
- Killed or missing family members
- Loss of home and livelihood
- Poor health
- Physical abuse

During Escape

- Poor health and malnutrition
- Physical assault (including rape)
- Robbery
- Anxiety over future

After Arrival

- Low social and economic status
- Language barriers
- Social and cultural isolation
- Discrimination
- Family dislocation
- Uncertain legal status
- Joblessness

In response to the growing needs of refugees in the United States, the Catholic Health Association (CHA), in partnership with Catholic Charities USA and the U.S. Catholic Conference Office of Migrant and Refugee Services, is embarking on an initiative to help refugees find health care and employment as they settle in this country—the Catholic Collaborative Initiative on Refugees. Our first step was to explore how CHA members were already involved helping refugees, what activities they were pursuing, what were their barriers, and what strategies they used to work through the challenges.

Through *Health Progress*, *Catholic Health World*, and our website (www.chausa.org), we asked members to tell us about their experiences. Following is the first wave of response received. If your organization is working with refugees, either by helping them to access health services or to find jobs, please contact Julie Trocchio at CHA at 202-296-6320 or jtrcch@chausa.org.

Vietnamese Health Project, Springfield, MA

Since 1994, Mercy Hospital, Springfield, MA, has run the Vietnamese Health Project. This project provides case management, transportation, referral, and medical interpretation for Vietnamese immigrants. Special areas of focus for the project include prenatal and perinatal care and primary health. The coordinator takes a very active role in the Springfield community and at the state level as an advocate for the Vietnamese population. All staff in the project are bilingual Vietnamese.

The project has worked with several advisers during its six-year history, including the Vietnamese American Civic Association, the Massachusetts Prevention Center, the Massachusetts Immigration and Refugee Association, the Massachusetts Department of Public Health, Community Network #4, and the Spanish-American Union.

As the major provider for health care to the area's entire Vietnamese population, the project has encountered several logistical problems: a lack of transportation, few medical interpreters in private physician offices, and distrust of English-speaking physicians who don't incorporate Asian practices in their treatment or intervention plans. To solve this last problem, the project has sponsored extensive in-service training on cultural issues, which has been met

with great success and support from medical staff.

As a result, the Vietnamese community has benefited from access to primary care physicians, entitlement benefits, health education, and prenatal care. At any given time, the program maintains files on 300 to 350 participating patients.

Medical Services for Refugees, Cleveland

Catholic Charities Health and Human Services collaborates with the Sisters of Charity of Saint Augustine Health System to run the Medical Services for Refugees program in Cleveland. This initiative is run from the Office of Migration and Refugee Services of Catholic Charities Parish Services and the Cuyahoga County Physician Network. This program originally responded to the urgent medical needs of Kosovar Albanians during the Kosovar crisis of 1999, which coincided with the closing of an area hospital that served refugees.

The Cuyahoga County Physicians Network, owned by the UHHS/CSAHS-Cuyahoga Inc. partnership, donates myriad medical services—including surgery, prosthetics, and general medicine—to refugees arriving with acute medical needs. They also treat refugees who cannot access medical services because they are awaiting Medicaid approval or have lost Medicaid because of income eligibility levels. With a special identification card, refugees are able to receive care from multiple sites in the area.

Although challenges have been omnipresent—a lack of interpreter services (including bilingual or bicultural physicians) and cultural competency training for medical staff—the benefits to the population have been significant. Since inception, the collaboration has donated more than \$80,000 of in-kind services to more than 200 refugees. Now all refugees in the area who arrive through the Office of Migration and Refugee Services, regardless of country of origin and ability to pay, receive initial health screenings and/or ongoing medical care from this program.

Unity Neighborhood Health Center, St. Louis

Unity Neighborhood Ministry, an extension of Unity Health (a member of the Sisters of Mercy Health System), St. Louis, oversees the Unity Neighborhood Health Center. This center was created to provide primary care and social services for the poor in south St. Louis, with special emphasis on the refugee population. Approximately 75 percent of the patients at the health center are non-English speaking or have limited English proficiency. Most are Bosnian, Vietnamese, Hispanic, or Somali. The "Bridges to Understanding" program at the center provides interpretation, translation, and transportation for these refugees to secure access to primary and preventive health care.

The program's partners have included the Language Access Metro Project, providing interpretation/translation and cultural training; International Institute Services, providing employment opportunities and job training; Catholic Refugee Services; and the John F. Kennedy Clinic at St. John's Mercy Medical Center, providing specialty medical care.

Serving such a diverse population has its challenges. Barriers to health care have included few bilingual medical professionals, a lack of existing service delivery models, funding for interpretation and document translation, transportation, and lack of community understanding of cultural issues.

Despite these barriers, the Unity Neighborhood Health Center has reduced communication barriers that bar refugees and immigrants from access to health care and social service support, facilitating greater trust between patient and provider and improving compliance and overall health.

Asian Senior Assistance Program, San Jose, CA

The Catholic Community Initiative in San Jose, CA, sponsors the Asian Senior Assistance Program. This project was originally designed to identify and treat depression in elderly Asian immigrants, but expanded to diagnosing medical conditions and securing appropriate medical care. Specific programs include exten-

sive health assessment initiatives, a senior center, field trips, home assessments, outreach, and exercise and spirituality classes.

Partners of this project include Catholic Charities of Santa Clara County, O'Connor Hospital, and Santa Clara University. In addition, a solid network of physicians, social workers, and case managers has been key to operation effectiveness.

More than 200 Asian seniors in the program's area have benefited from these services. The elderly population of immigrants commonly have feelings of displacement and depression, which in this project have been alleviated by proper medical attention and interactive social programs.

La Posada Providencia, San Benito, TX

The Sisters of Divine Providence, St. Louis, sponsor La Posada Providencia, a refugee shelter in San Benito, TX. Hispanic refugees are referred to La Posada by legal representatives who work with the Immigration and Naturalization Service. Refugees stay at La Posada for a day or until their legal status is determined and they can move to a permanent home. In addition to this emergency shelter, La Posada provides health care access and assistance paid for or donated by area dentists, doctors, and pharmacists.

This program is benefited by several partners, including the Daughters of Charity; FSC Foundation; Christian Brothers Conference; Missionary Sisters of the Immaculate Heart of Mary; Divine Providence Foundation, Pennsylvania; SC Ministry Foundation; Sisters of Charity; Sisters of Divine Providence, St. Louis Province; the Sisters of St. Francis of Philadelphia, the Social Justice Fund; Sisters of St. Francis of Tiffin, OH; U.S. Catholic Conference, Environmental Justice Project; and the U.S. Catholic Conference, Office of Migration and Refugee Services.

Financial and budgetary needs for La Posada, as for all these programs, are an ongoing concern. In addition, hospitalization costs for refugees who arrive with injuries are increasing. Hospitals, doctors, and pharmacists are extremely generous but cannot provide limitless services. However, before La Posada opened, no facility existed for refugees. Since 1989, more than 3,000 individuals have been given safe housing, food, clothing, and medical and dental care.



—Carrie Stetz

Adapted from Dennis J. Hunt, PhD, Center for Multicultural Human Services, Falls Church, VA.

Lessons Learned

All these programs, despite the variety of focus, geographic location, and populations served, have learned similar lessons in their work with refugees and immigrants. They have this wisdom to share.

Begin with a Plan Start with a needs assessment and define your current resources before jumping in.

Get Diocesan Support Secure support and approval from the local bishop and diocese from the beginning of the project.

Secure Training Train all staff in the project sufficiently regarding cultural issues and practices to gain trust

from the population being served. Extensive in-service training for health care professionals, office staff, and volunteers is vital to program success.

Partner When Possible Cooperate and collaborate with other area nonprofits and for-profit companies who may have similar goals or who have related experience you can draw upon. For example, the Vietnamese Health Project worked with the Spanish-American Union to receive advice and information.

Form Alliances Work closely with area businesses and local professionals. These individuals can provide the "nuts and bolts" for your project, such as building materials or skilled volunteers.

Document Your Successes and Failures Perform regular, thorough evaluations of the project so that data are available to report to authorities and to secure and increase funding.

Share Stories Spread the word by telling your story whenever possible. Caring volunteers will emerge when you continually talk about the challenges and stresses your refugee population faces.

Celebrate Small Successes Know when to be proud of small accomplishments. Caring for refugees and immigrants can be challenging, emotionally difficult work. Celebrate every goal that you meet.

JOURNAL OF THE CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES

www.chausa.org

HEALTH PROGRESS®

Reprinted from *Health Progress*, January-February 2001
Copyright © 2001 by The Catholic Health Association of the United States
