

Refugee Mental Health and Primary Care



Connecting Early to Primary Care

- Complete medical history and exam
- Screening for infectious and chronic disease
- Management of acute and chronic conditions

Relationship

- Prenatal care, well baby/child care
- Family planning
- **Mental health**
- Referrals as needed: medical, social, community

**Stress and trauma may manifest
in different ways at different
points in the migration trajectory**



***People may need and want
different supports***

Common concerns

- Sleep disturbance
- Symptoms of depression
- Symptoms of anxiety
- Symptoms of post-traumatic stress disorder
- Somatic symptoms: chronic pain, headaches, etc
- Learning, concentration, memory difficulties
- Fatigue



Exposure to trauma does not necessarily lead to post-traumatic stress disorder



Mental health strongly influenced by conditions of migration and resettlement



Post-Migration and Well-Being

- Uncertain immigration status
- Communication/language gaps
- Employment
- Poverty/financial stressors
- Housing instability
- Separation from family and ongoing insecurity
- Loss of social status
- Acculturation
- Gender and family role changes
- Social isolation
- Discrimination, racism
- Unmet expectations



Mental health strongly influenced by conditions of migration and resettlement

Prioritize resilience promotion over illness management

Focus on meeting social concerns

Promoting Resilience

Safety

Learning
English

Education

Recreation
and exercise

Safe housing

Employment

Health care

Friendships
and social
connections

Financial
stability

Community Partnerships

Refugee
shelters

Settlement
agencies
and workers

Language
schools

Community
centres

Social
assistance
agencies

Public
schools

Public Health
Agencies

Community-
based
counsellors

Employment
agencies

Role of primary care providers

- Supportive counseling
- Education
- Counseling on lifestyle changes
- Connecting with social and community resources
- Pharmacotherapy as needed
- Referrals to mental health specialist as needed



Relationships, trust, time



Do NOT specifically screen for exposure to trauma

- *May cause more harm than benefit in well-functioning individuals*
- *Be alert for somatic symptoms and functional impairments that may signal underlying mental health issues*

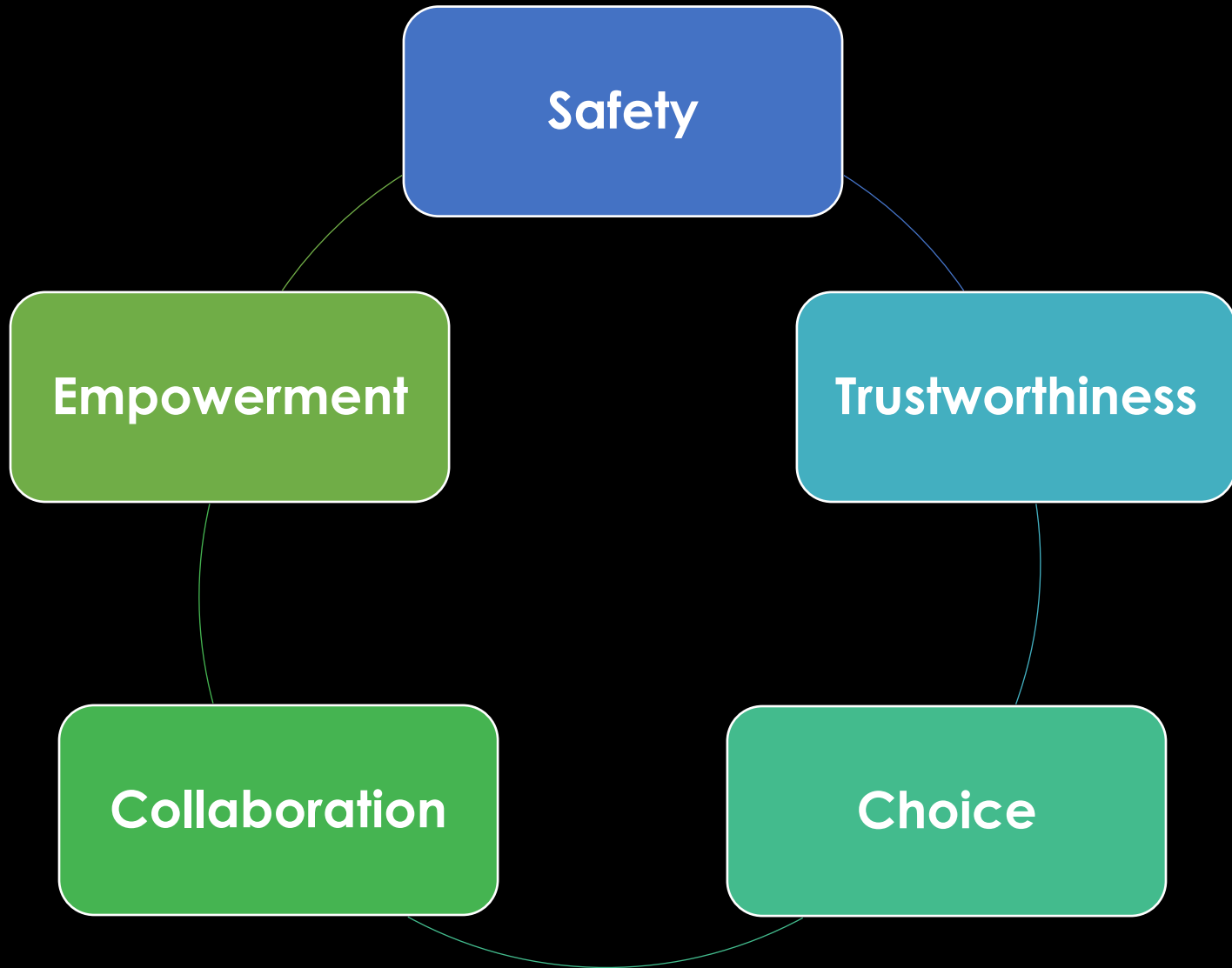
GUIDELINES

CMAJ

Evidence-based clinical guidelines for immigrants and refugees

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Principles of Trauma-Informed Care



Cultural Humility

- Ongoing self-reflection and self-critique
- Reflect on our own values, perspectives, biases
- Question assumptions
- Consider power imbalances
- Seek to understand other person's values, beliefs, priorities
- Validation of individual/family's strengths and resilience



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“While every refugee's story is different and their anguish personal, they all share a common thread of uncommon courage – the courage not only to survive, but to persevere and rebuild their shattered lives.”

*Antonio Guterres, former U.N. High Commissioner for Refugees, 2005
Current UN Secretary General of United Nations*



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