

Caring for Refugees in Clinical Practice

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Learning Objectives

The Journey of a Refugee

Barriers in access to care, COVID

Health Considerations: Adults, Pediatrics

Bonfenbrenners Ecological Theory

Creating a Healing Environment

EMPOWER: pilot trial with family systems during COVID



Lens

- **Approach clinical work w/ humility, respect**
- **Gratitude**



Background

- **Neuroscience Wellness: brain trauma, rehabilitation, neurodevelopment**
- **Systems: neuro-enviro-cognitive-psycho-social**
- **Implicit biases, blind spots**

Refugees

United Nations High Commissioner for Refugees (UNHCR)



Created in 1950 in aftermath of WWII millions of Europeans who fled or lost homes

What are the Definitions:

Refugee,

Asylum seeker/refugee candidate,

Immigrant



Who is a refugee?



- **A refugee is someone who has been forced to flee his or her home because of war, violence or persecution.**
- **They are unable to return home unless and until conditions in their native lands are safe for them again.**
- **An official entity such as a government or the United Nations Refugee Agency determines whether a person seeking international protection meets the definition of a refugee, based on well-founded fear.**
- **Those who obtain refugee status are given protections under international laws and conventions and lifesaving support from aid agencies, including the International Rescue Committee.**

Seeking Refugee Status



Asylum seeker:

- **international protection from dangers in their home country, but whose claim for refugee status hasn't been determined legally.**
- **Most often asylum seekers must apply for protection in the country of destination**
 - they must arrive at or cross a border in order to apply.
- **Must be able to prove to authorities there that they meet the criteria to be covered by refugee protections.**
- **Not every asylum seeker will be recognized as a refugee**
- **Those arriving at the U.S. border are being depicted as “illegal immigrants,” BUT**
- **crossing an international border for asylum is not illegal**
- **An asylum seeker's case MUST be heard, according to U.S. and international law.**
- **# of refugees admitted determined by President and Congress each year.**
 - 1990s-2016 years 100,000+ admitted
 - Significantly fewer 2016-2020
 - Current promises of 100,000+/year

Immigrant

- **An immigrant is someone who makes a conscious decision to leave his or her home and move to a foreign country with the intention of settling there.**
- **Immigrants often go through a lengthy vetting process to immigrate to a new country.**
- **Immigrants research their destinations, explore employment opportunities.**
- **Free to return home whenever they choose.**

Migrant

Who is a migrant?

A migrant is someone who is moving from place to place (within his or her country or across borders), usually for economic reasons such as seasonal work.

Similar to immigrants, they were not forced to leave their native countries because of persecution or violence, but rather are seeking better opportunities.

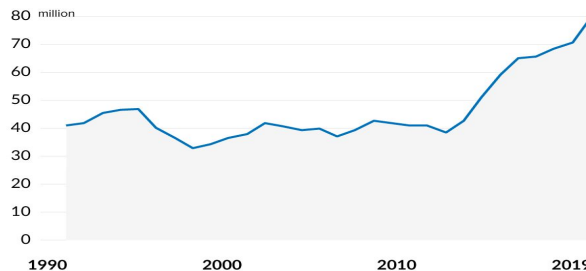


<https://youtu.be/tY7WWD6tCAM>

World Figures at a glance

79.5 MILLION forcibly displaced people worldwide at the end of 2019

Source: UNHCR / 18 June 2020



45.7M Internally displaced people

Source: IDMC

4.2M Asylum-seekers

3.6M Venezuelans displaced abroad



1% of the world's population is displaced



80% of the world's displaced people are in countries or territories affected by acute food insecurity and malnutrition



73% Hosted in neighbouring countries *



68% Came from just 5 countries *

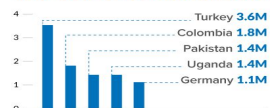


40% of the world's displaced people are children



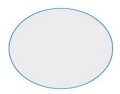
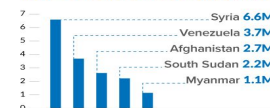
85% Hosted in developing countries *

TOP HOSTING COUNTRIES



* Data includes UNHCR refugees and Venezuelans displaced abroad

TOP SOURCE COUNTRIES



4.2M Stateless people



2M Asylum applications (in 2019)



107,800 Resettled to 26 countries (in 2019)



5.6M Returnees (in 2019)



UNHCR
The UN Refugee Agency

employs **17,324** personnel in **135** countries
(as of 31 May 2020)

We are funded almost entirely by voluntary contributions, with 86 per cent from governments and the European Union and 10 per cent from private donors

Migration phases

Pre:

Migration:

- *changed reality....no longer a short term or temporary phenomenon*

Length of stay in camps, processing time for asylum status

Post:

Resettlement (CRR study and lessons learned)

Assimilation vs. Integration

Research on optimizing outcome...lessons learned CRR:

Language

Education pre, intergenerational language discord,

Employment

Keeping culture

Case study

Marwa:

55 year old female

Refugee from Syria: 7 year journey, refugee camp in Turkey 2 years

Arrived 2 weeks ago into USA with son, daughter in-law, granddaughter

Resettling in Norwalk,CT by IRIS resettlement w/ sponsorship

1st clinic appointment with you

Break outs questions 20 minutes

1. What do you want to research before she arrives to clinic?
2. How do you create a welcoming, healing environment?
3. ID migration phases: pre, during, post
4. What physical health problems can you anticipate
5. What mental and brain health problems can you anticipate
6. What barriers in accessing follow-up/compliance to care do you anticipate and how do you overcome these?

Case study findings

What do you want to research before she arrives to clinic?

Case study findings

What do you want to research before she arrives

Language spoken

Typical journey and trauma for syrian refugee...what do we know?

Syrian Culture and Traditions:

Male or female doctor? Interpreter?

History w/ medical community

Family system

Education level

Types of food/nutrition

Break out group questions

How do you create a welcoming,healing environment?
Clinical vs. healing...



Case study findings

ID migration phases:

Pre:

During:

post:

Case study findings

ID migration phases:

Pre: Syria pre war

**During: War, internal travel 5 years, 2 years
refugee camp**

post: USA, housing? Employment? culture?

Medical conditions Anticipated

Medical conditions (Amara 2014, Muller 2018)

Communicable Diseases

Nutritional Deficiency: D, B

Impact of Chronic Stress: inflammatory response on body

Hypertension

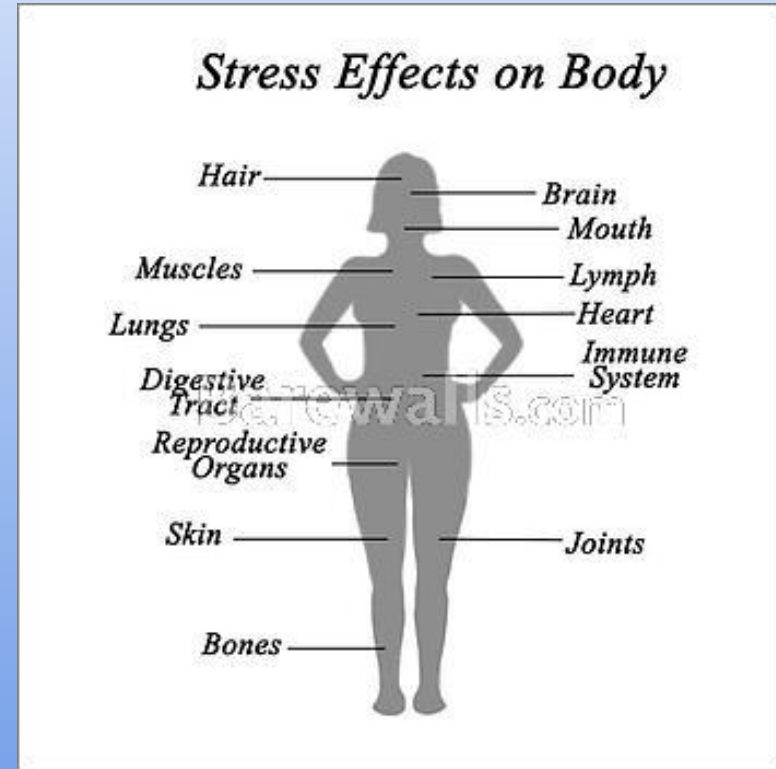
Musculoskeletal: back, knees

Diabetes

Respiratory

Chronic Pain: headaches

Sleep Disorder: COPD, Insomnia



Mental and Brain Health

Psychological Symptoms:

Neurological:

Mental and Brain Health

Psychological Symptoms:

- *Depression, Anxiety, PTSD*

I feel guilty for surviving....

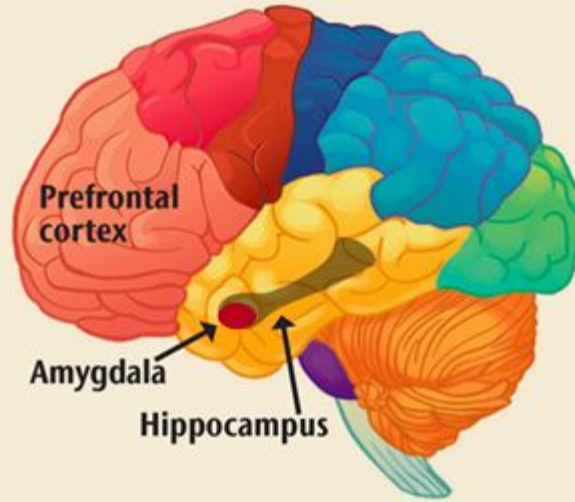
Neurological:

- Consider neuro-insults (TBI, *Vascular*)
- *Impact of Stress on the Brain*
- *Cognition*

Stress on the Brain (McEwen, 1968+)

- Delineate the mechanisms by which **stress hormones** can impact on the human brain
- Highest density of receptors for glucocorticoids are found in the hippocampus, amygdala and frontal cortex
- Three brain regions involved in memory, new learning processing and emotional regulation.
- Studies have shown that chronic exposure to stress is associated with reduced volume of the hippocampus and that chronic stress can modulate volumes of both the amygdala and frontal cortex

Stress on the Brain



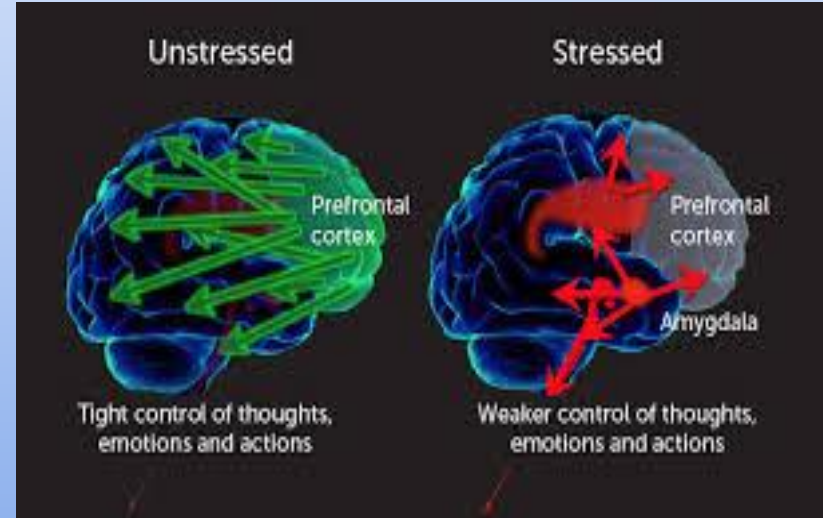
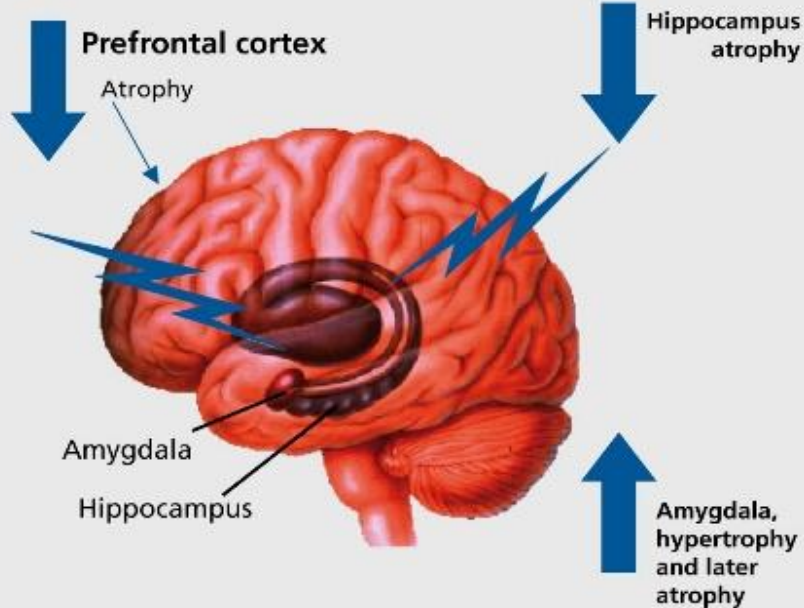
Prefrontal cortex: Highly developed part of the frontal lobe that plays a role in the regulation of complex cognitive, emotional, and behavioral functioning

Amygdala: The emotional center of the brain

Hippocampus: Involved in forming, storing, and processing memory

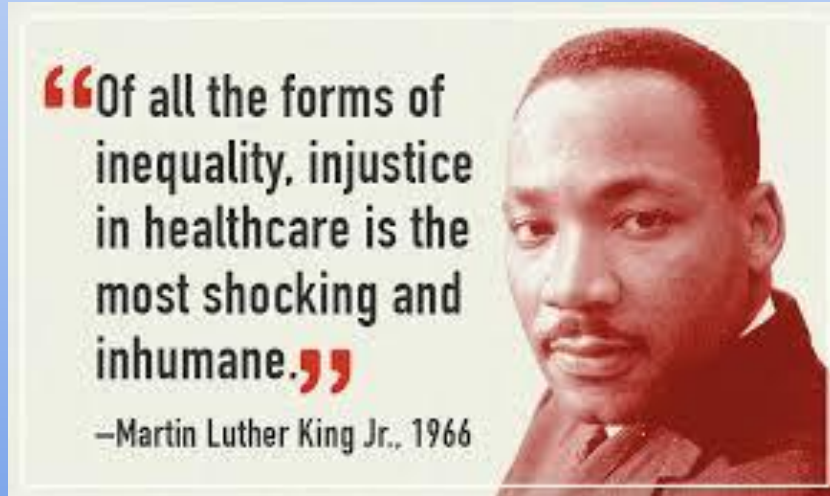
Chronic Stress on Brain

The brain under stress: structural remodeling



Case study findings

What barriers in accessing follow-up/compliance to care do you anticipate and how do you overcome these?



Many Barriers to Accessing Care for Refugees



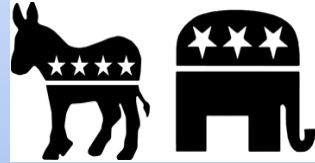
Language



Literacy



Culturally
Concordant
Providers



Changing
Political
Landscape



Provider
Trust



Unique
Stressors



Culturally Sensitive
Screening

Clinical Goals:

Urgent

Get her to come back

BREAK: Return 10 minutes

Pediatrics: What about Refugee Children?



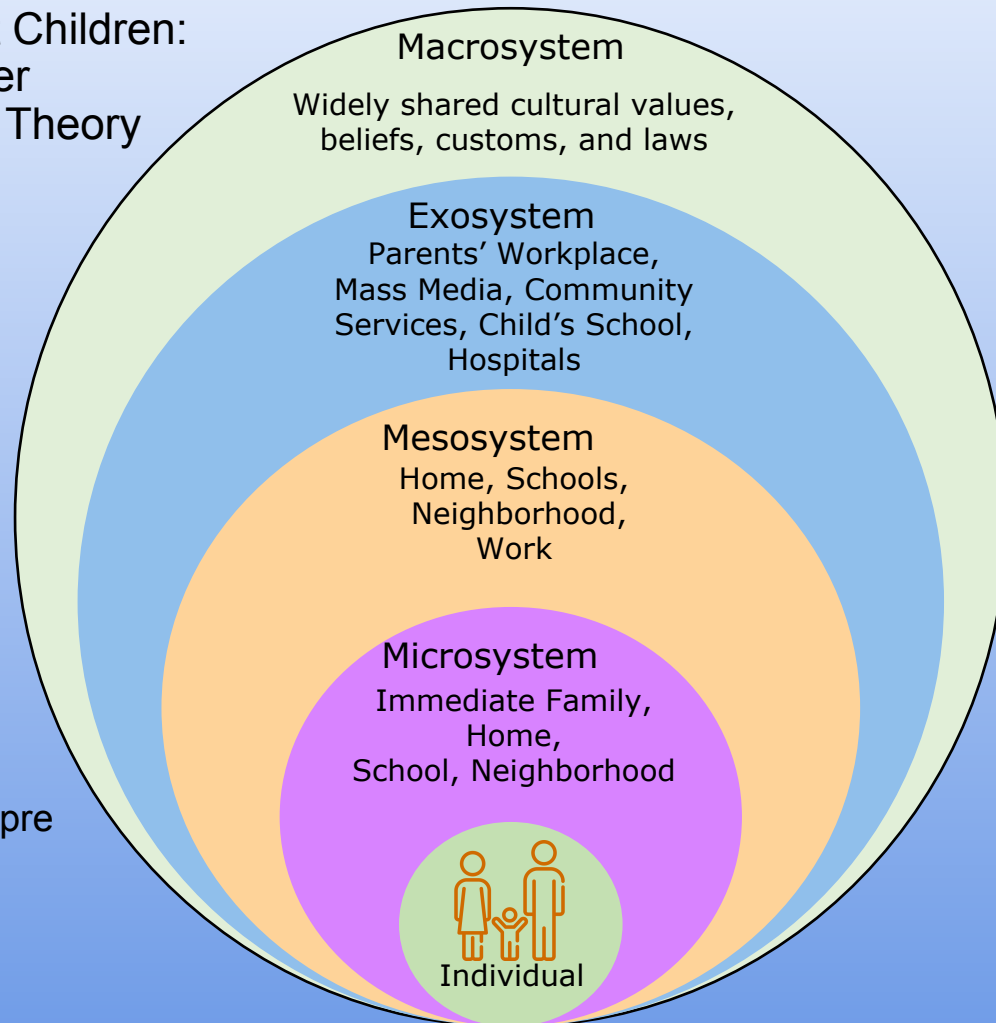
Pediatrics: What about Refugee Children?

- **Risk factors to consider on physical and mental health**
 - Pre, Migration, Post phases
- **Similar CD, Nutrition, Stress implications but on developing system**
 - in-Utero to present to across their lifespan
 - Neurotoxin exposures
 - Lack of exposure, interruptions
 - Parent-child interaction: mental health

Pediatric Mental Health (Batencourt, 2015)

- **Significant disparities in the mental health of refugee children and adolescents resettled in the United States compared with youths in the general US population.**
- **Refugee youths experience overall greater psychological distress than those in the general population and in comparison to other youth who experience ACEs.**
 - **the refugee experience, including flight from country of origin, displacement in a refugee camp, and third country resettlement, increases risk of being exposed to multiple ACEs that accumulate and place at risk for mental health outcomes.**
- **Prevalence of posttraumatic stress disorder and depression among resettled refugee children is estimated to be as high as 54% and 30% compared with an estimated 5% (posttraumatic stress disorder) and 11% (depression) of youths with these disorders in the general population.**

Framework to Support Children:
Bronfenbrenner
Ecological Systems Theory



Implications of Eco system pre
and post migration



"It was the experience of **becoming separated from your family**. It's difficult. My kids grew up around many of their cousins and all of their grandparents and family, and when we came here, it felt a little lonely."



Father

When we first came, it was very difficult, because the children back home, they grow up in a very free way. When **they come here, it's like being in a cage** for them when they're inside of the house. They're not used to that.



Mother

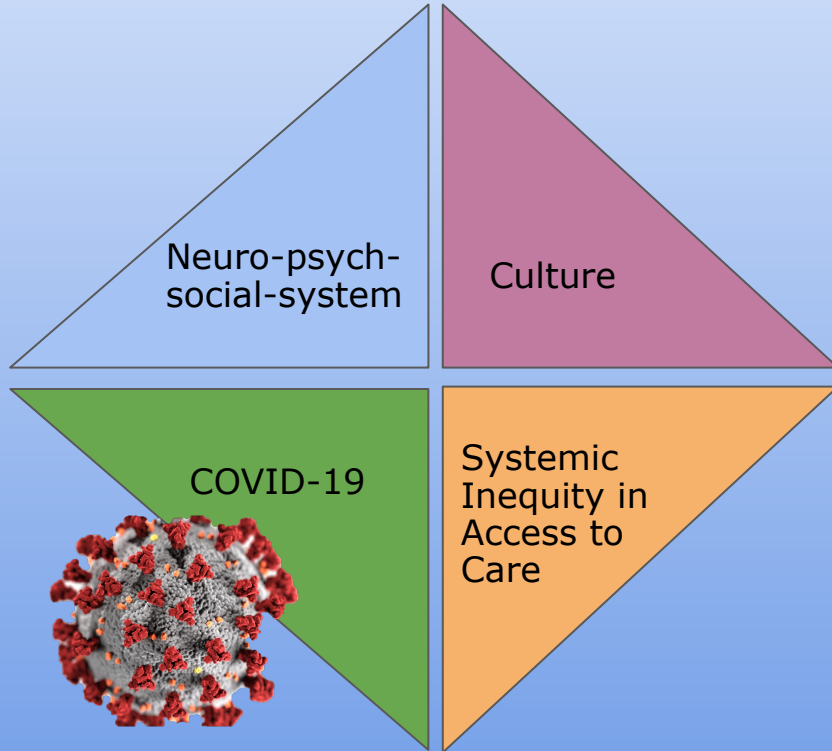
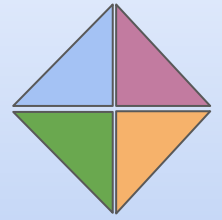
Change the outcome.....

Development of preventive mental health intervention for refugee families in resettlement (Weine 2014)

Characteristics

- Feasible
- Adaptable
- Culturally tailored
- Time focused
- Prosaicness
- Effective

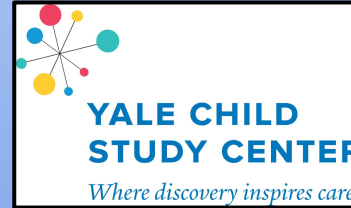
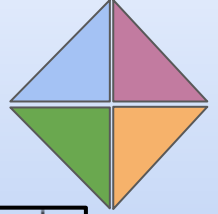
Program Development Through Collection of Lenses

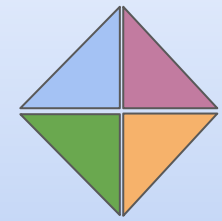


EMPOWER:

Emotions
Program
Outside the Clinic with
Wellness
Education for
Refugees

EMPOWER Team & Community Partners: Addressing Systemic Inequities through Partnerships





Program Development Through Collection of Lenses

Neuro-psych-social-system lens

Implications of adverse experiences on neural circuits of executive functioning:

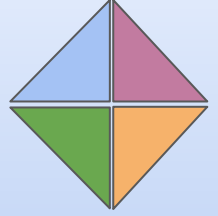
- Trauma to child and family system
- Lack of exposure, interruptions in development
- Neurotoxins (ex., lead)

Convergence of research of benefits of:

- Social Emotional Learning (Barchard, K., 2016)
- Executive Functioning Rehabilitation (Diamond, A. 2014)
- Family System Interventions (Rothbaum, F., 2004)



(Gunner, M., 2007)



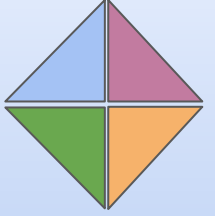
Program Development Through Collection of Lenses

Culture

Integration and Integrity

- Culture and Traditions
- Language
- Family System
- Perceptions of Mental and Physical Health

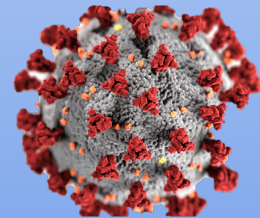




Program Development Through Collection of Lenses

COVID-19

- Fear
- Misinformation
- Isolation
- Rapid financial and survival stress in parents
- Abrupt disconnection with cognitive and social stimulation



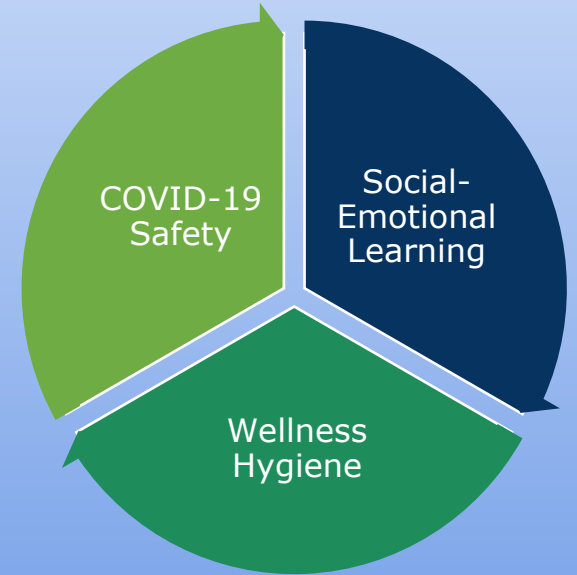
What is EMPOWER?

Emotions Program Outside the Clinic with Wellness Education for Refugees

Culturally-informed, innovative health education and prevention program

- Planned in collaboration with community partners
- Evidenced-based program components →

Developed & piloted in 2020 with community partners



EMPOWER Summer 2020 Pilot

EMPOWER Pilot Goals:

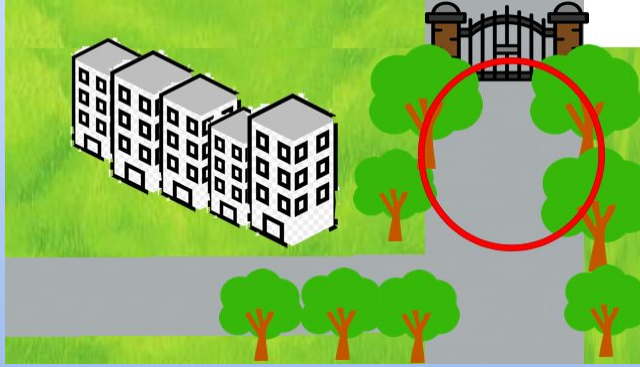
- Short term...
 - Establish trust and delivery feasibility
 - Introduce Social-Emotional language and wellness tools
 - Safe outlet for kids to get outside, social interactions
 - Create routine
- Long term...
 - Build community and overcoming barriers
 - Improve social-emotional, mental and physical wellbeing

EMPOWER Pilot Participants and Context

- With Families Units from Afghanistan
- Participants – Direct & Indirect
 - During Covid-19 Pandemic
- In-person and by Zoom

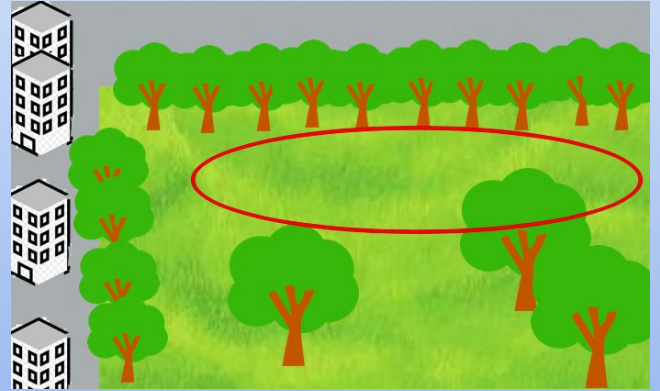


Neighborhood Drop-In



Location 1:

- Group 1:
 - 4 families
 - 11 children
- Group 2:
 - 4 families
 - 9 children



Location 2:

- Group 3:
 - 4 families
 - 10 children
- Group 4:
 - 3 families
 - 11 children

COVID-19 Curriculum Components

COVID-19 Safety

- PPE to families
- Socially distanced units



COVID-19 Curriculum Components (Multi-Lingual)

د کرونا وایرس (کوویډ - 19) علایم او نښې

د کوویډ-19 نښې وپېژنئ، چې پکې لاندې شامل کېدې شي:

د عضلي درد | تپ | تب | ساره | ساه لېږد یا په ساه اخیستلو کې ستونزه*

د غوږل یا پوښې نوي خرابه | د سوسې غوږ | ساه لېږد یا په ساه اخیستلو کې ستونزه*

نښې له متوسطه تر سختې ناروغۍ پورې کېدې شي، د کوویډ - 19 لامل کېدونکې وایرس سره ستاسې مخامخ کېدو وروسته 2-14 ورځو په لړ کې علایم راپکاره کېدې شي.

*مددلاسه د روغتیا پاملرنې غوښتنه وکړئ که چېرې یو څوک د کوویډ-19 نښو بیړنی ځیرتیا ولري.

- ساه اخیستلو کې تکلیف
- د وینښو یا وین پاتې کېدو نالواتیا
- دوام لرونکې درد یا په سینه کې فشار
- د شونډو یا مخ شین کېدل
- نوي ګوښتیا

دا لیست ټول ممکنه نښې ندي، مهرباني وکړئ د ټورو عناصو لپاره چې شیدې یا د اندېښنې وړ وي د خپل ډاکټر سره مشوره وکړئ.

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:

Cough | Fever | Chills | Muscle pain

Shortness of breath or difficulty breathing* | Sore throat | New loss of taste or smell

Symptoms can range from mild to severe illness, and appear 2-14 days after you are exposed to the virus that causes COVID-19.

*Seek medical care immediately if someone has emergency warning signs of COVID-19.

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

اعراض و علائم وایرس کرونا (کوویډ-19)

علامه کوویډ-19 را بشناسید که بشمول موارد ذیل است:

درد عضلانی | لرز | تب | ساره

از دست دادن حس طعم یا بو | گلودرد | تنگی نفس یا سختی ستن

اعراض و علائم مریضی ممکن است خفیف الی شدید باشد و 2 الی 14 روز بعد از قرار گرفتن در معرض وایرس که موجب کوویډ-19 است، ظاهر شود.

*مرکز عاجل مراقبت طبی بخواهید اگر کسی علامه عاجلی اضطراب کوویډ-19 داشت.

- مشکل تنفسی
- درد مداوم یا فشار در صدر (سینه)
- کجی
- نتوانی در بیدار شدن یا بیدار ماندن
- درد مداوم یا فشار در صدر (سینه)
- تیره رنگ شدن لبها یا صورت

این لیست همه علامه ممکن را شامل نمی‌شود. لطفاً در حومه سایر اعراض و علامه شدید یا موشکی کننده، با ارائه‌دهنده خدمات صحتی خود در تماس شوید.

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

Social-Emotional Language Curriculum Components

Pashto Translation:

How Are You Feeling?

Dari Translation:

په غوسه (Pa Ghusa)  غوسه (Chamgin) ANGRY	بوري (Bori)  بسته (Khatla) BORED	باور کول (Bawar Kawaly)  مؤمن (mulmaeen) CONFIDENT	دیده کېدل (Dood Kedaly)  مشلو (Shargardan) CONFUSED
نهيلى شوي (Nehley Shway)  ناب (Na-Omid) DISAPPOINTED	شرمېلى (Sharmedaly)  خجسته زده (Khollee-zade) برگسته (Barandobhta) EMBARRASSED EXCITED	خوش (Khosh)  برگسته (Barandobhta) EXCITED	خپه (Khata)  خپه (Khata/Na-omid) FRUSTRATED
بدمرغه (Badmirgha)  بدخالي (bad-khali) GRUMPY	گناه کار (Gناه کار)  گناهگار (Gناهگار) GUILTY	خوشحال (Khoshal)  خوشحال (Khoshal) HAPPY	مېله مندل (Hila mand)  مېله مندل (Hila mand) HOPEFUL
وېږي (Wegily)  غوسه (Gusha) HUNGRY	خپه (Khata)  غوسه (Chamgin) SAD	وېږي (Wegily)  ترسعه (Tarsecca) SCARED	شرم وړي (Sharm woy)  کمزور (kam-roy) SHY
ناروغ (Narogh)  بیمار (Bemar) SICK	خوب (Khob)  خواب لود (Khawab-lood) SLEEPY	فشار راوړل (Fisher Rawar)  استرس (Estereess) STRESSED	اندېښنه (Andelshu)  نگران (Nigaran) WORRIED

My Moods, My Choices™



Social-Emotional Language Curriculum Components



Memory Matching Game



Wellness Hygiene Curriculum

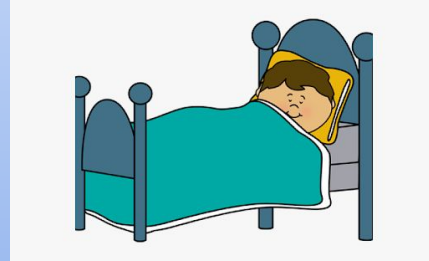
Exercise



Nutrition



Sleep



Electronics



Pilot Evaluation

Preliminary Results: Qualitative and Quantitative

Pilot Data: Feasibility, Satisfaction, Continuation of Activities

Programmatic Outcomes (N = 13)	n (%)
Program Feasibility	
Reported challenges with understanding (n, %)	0 (0%)
Reported challenges with travel (n, %)	0 (0%)
Reported challenges with zoom (n, %)	4 (30.8%)
Reported challenges with time/timing (n, %)	0 (0%)
Program Satisfaction	
Would enroll again? (n, %)	13 (100%)
Would recommend to friend? (n, %)	13 (100%)
Worthwhile? (n, %)	13 (100%)
Yoga	
Children still doing yoga?	9 (69.2%)
Times per week children do yoga (median, range)	2 (0-14)
Parent has tried yoga (n, %)	6 (46.2%)
Parent interested in learning more about yoga (n, %)	12 (92.3%)

Pilot Data – COVID-19 Knowledge

COVID-19 History & Recall (N = 13)

COVID-19: Personal History

Personal history of COVID-19, n (%)	0 (0%)
Immediate Family Member had COVID-19, n (%)	1 (7.7%)

COVID-19: Spontaneous Recall

Number of symptoms correctly recalled, median (range)	5 (3-7)
Number of protective measures correctly recalled, median (range)	4 (3-7)

COVID-19: Hoax

Answered “no:” Do you think COVID-19 is a hoax? (n, %)	13 (100%)
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Pilot Data – Emerging Themes from Parents:
“Learning Through Their Eyes”

I learned through my kids.

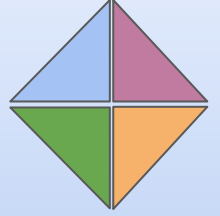
Before, the kids were at home with no physical activity. [Now,] they're active and **inspired us** to be active too. I was not involved directly in the class; I had two jobs but when I came back I saw they were playing at home.

Pilot Data – Emerging Themes from Parents:
“Learning Through Their Eyes”

Before, my wife and I were thinking, ‘Just take the kids outside and take them to the mall and bring them home as activity.’ But that’s not a real activity.

After, we’ve seen several...activities and games you do with the kids. Now, we know if we sit with them and do a real activity, do painting and requesting things to do, that will be more helpful than just taking them outside and then bringing them home.

We have **to be more meaningful** with what we are doing with them. They can learn something from us. That was a really good outcome from this program for me and my wife.



EMPOWER: Next Steps

- Developed manual, established feasibility
- Trust & community partnership remains central
- Now: Planning summer 2021 with more children and family systems
 - Ongoing collaborations with community organizations
 - Plan to include community champions and facilitators

Takeaways

- **Clinical Approach: Humility and Gratitude**
- **Healing Environment**
- **Think SYSTEMS: body, brain, family, ecological**
- **Think Late Effects as you treat patients longitudinally**