The Mental Health of Refugees in the United States: 
Current Context and Areas for Improvement
Who is a Refugee?

A refugee is 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 to or, owing to such fear, is unwilling to avail himself of the protection of that country..."

UNHCR, Article 1, The 1951 Convention Relating to the Status of Refugees
Refugee

Asylee

Immigrant
Durable Solutions

Repatriation  Integration  Resettlement
• 50 million plus displaced people worldwide
• 10.3 million refugees
• Average of 120,000 proposed for resettlement to a 3rd country in a given year
• 70,000 proposed in USA
• Approximately 2,000 in King County in a given year
A Few Other Numbers to Consider…

80% of all refugees in the world are hosted by DEVELOPING nations

45% of refugees are children

Since 1980 more than close to 2 million refugees have been resettled in the United State

Every year the United States grants between 20,000 and 40,000 individuals asylum
The Refugee Experience
Triple Trauma Paradigm

Fleeing

Encampment or Exile

Resettlement
Considerations - Broader Context

- **Fleeing**
  - What situation has brought them here? Violence, religious persecution, ethnic cleansing, the combination of all three?
  - *Example – Impact of soldiers coming into town raping and pillaging vs. impact of systematic oppression (frozen out of jobs, education) because of your religion and practicing your religion for decades in secret because of fear of jail*
Encampment or Undocumented

- Were they encamped? If so, for how long and under what conditions?
  - Example – Impact of not being allowed to work for 30 years; lack of micro-nutrient rich foods; lack of social justice system.
- Were they illegal in another county?
  - Example – Impact of little access to medical care, employment, education; high incident of bribery, being forced into unsafe working and housing situations; round-ups by authorities.
Resettlement
90 Days of Resettlement Casework

http://vimeo.com/7045430
### Resettlement Example – Family of 4

<table>
<thead>
<tr>
<th>Income</th>
<th>Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>@ $4,500 for family – R &amp; P</td>
<td>$1,800 housing – 1&lt;sup&gt;st&lt;/sup&gt; and deposit</td>
</tr>
<tr>
<td>$486 TANF (cash)</td>
<td>$250 – set up utilities</td>
</tr>
<tr>
<td>$351 (food benefits)</td>
<td>$100 electric</td>
</tr>
<tr>
<td>Total CASH = $4,986</td>
<td>$80 water, sewer, garbage</td>
</tr>
<tr>
<td></td>
<td>$75 Phone</td>
</tr>
<tr>
<td></td>
<td>$400 furniture</td>
</tr>
<tr>
<td></td>
<td>$250 clothes and incidentals</td>
</tr>
<tr>
<td></td>
<td>$200 food (additional)</td>
</tr>
<tr>
<td></td>
<td>$3,155</td>
</tr>
</tbody>
</table>

Leftover amount = $1,831 in savings

Future Rent, Food and Utilities = $1355 but only $486 in income
Common Challenges

- History
- Systems are difficult to navigate
- Mismatch of skills and education
- If encamped, often little history of education or employment (what works as survival in one setting does not work in another)
- Lack of English – impacts ability to adequately understand or communicate needs
- Transportation
- Adjustment time is short and pressured with little safety net
- Little IF ANY social capital – impacts ability to find emergency assistance, care for children, employment
- Separation from traditional support

*Reaching U.S. does not always translate to “safety.” Refugees often cite resettlement as MORE stressful than trauma events.*

http://vimeo.com/7045430
Causes of Poor Mental Health and Mental Illness

Endogenous

- INSIDE the Body
- Biological
- Genetic
- Chemical
- Schizophrenia, Bipolar Disorder, some depressions, etc.

No higher rate than any other population
Causes of Poor Mental Health and Mental Illness

**Exogenous**
- Outside of the body
- Things that influence mental health
- Family
- Outside Events
- Large Disruptions
- Lack of Hope
- Resettlement

Diagram:
- Basic Needs
- Home Life
- Health
- Safety
- Opportunity
- Community Connection
- Societal Worth
Refugees Have Poorer Mental Health

- Higher rates of depression
- Higher rates of anxiety problems, including post-traumatic stress disorder
- In some cases, like PTSD – 10x the rate
- Torture has been estimated at 5 to 35% depending on population
Why?

- Critical predictor of developing exogenous depression
  - External Stressors and Loss

- Critical predictor of developing PTSD
  - Previous trauma
  - Intensity, frequency, duration
Results

Poor Sleep

Sadness

Anxiety
Isolation

Nightmares

Poor Memory
Refugees are underrepresented in community mental health agencies

WHY?
Challenges Related to Delivering Mental Health Services
• Difference in Meaning of “Mental Health”
• Different experience with the Mental Health system (psychiatric hospitals, oppressive use of system, etc.)
• Different repercussions of having a “mental health” issue
• No experience with effective treatment
Differing Causes / Different Solutions
Provider Level

- Most community mental health is oriented towards a WESTERN cultural model
  - Individual
  - Focus on feelings
  - Biomedical Model
“Look at it this way. If your problem belonged to someone else, it wouldn’t seem like any big deal at all!”
Cross Cultural Issues

“It is your life! You should find your own way to achieve your goals in life. You can build your own individual happiness!”

“You should continue the ways of your fathers. It is not important what you want in your life. Your life is the investment of our forefathers before you. You should fulfill the role that your family gave you!”
Cultural Indexes

- Low power distance vs. High power distance (PDI)
- Individualism vs. Collectivism (IDV)
- Normative vs. Pragmatic
- Masculine society vs. Feminine society (MAS)
- Low uncertainty avoidance vs. High uncertainty avoidance (UAI)
Comparison Russia and USA

Comparison China and USA

China in comparison with the below

<table>
<thead>
<tr>
<th></th>
<th>PDI</th>
<th>IDV</th>
<th>MAS</th>
<th>UAI</th>
<th>LTO</th>
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</thead>
<tbody>
<tr>
<td>China</td>
<td>80</td>
<td>20</td>
<td>66</td>
<td>30</td>
<td>118</td>
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<tr>
<td>United States</td>
<td>40</td>
<td>91</td>
<td>62</td>
<td>46</td>
<td>29</td>
</tr>
</tbody>
</table>

Comparison Mexico and USA

Provider Level

- Tools to screen and assess are rarely normed on cross-cultural populations, especially those that are foreign-born
- Interpreters are expensive and hard to find
- Therapists are unsure how they feel/understand aspects of culture (arranged marriage, perceptions around spirits, witchcraft, ghosts, etc.)
- Few translated documents
Provider Level

- Therapists don’t know how to deal with the level of client’s trauma
- Therapists are often unwilling to deal with the critical case management/self sufficiency needs that re-traumatize clients
- Therapists have had no training in how to deliver services to foreign-born populations and are nervous they will not be able to do a good job
Refugee Groups
Refugee Groups

• Current arrivals:
  • Iraqi
  • Somali
  • Burmese
  • Bhutanese
  • Afghan
  • DRC
  • FSU - varied
Advocacy Areas

Government Level:

- Resettlement Reform
- Strengthening safety net systems: Food Stamps, TANF, etc.
- Continued investment by State in employment, ESL, language access, etc.
Advocacy Areas

Mental Health Systems Level:
- Meaningful funding and consideration for language access
- Training in how to deliver cross cultural services that goes beyond American-born.
- Willingness to reform systems from “one size fits all” models of efficiency to flexible systems of care
- Research into alternative interventions
- Flexible time frames
- Meaningful research into effective interventions
Advocacy Areas

**Practitioner Level:**
- Examination of own culture
- Value of case management/restoring losses
- Appreciation of traumatic background without ascribing everything to trauma
- Appropriate translation of information, screening tools, diagnostic measures.
- Flexible time frames
- Meaningful research into effective interventions
Advocacy Areas

- Personal Level:
  - Expansion of the conversation – what do refugees contribute?
  - Volunteer – HealthRight; Volags; Etc.
  - $$$
A World Without Refugees....
Further questions...

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