

# Cultural Wellness Perspectives on Mental Health and Disability: Supporting Immigrants and Refugees in Iowa

June 20, 2023

## LUTHERAN SERVICES IN IOWA

**IMMIGRANT AND REFUGEE COMMUNITY SERVICES** 

#### Sarah Van Gorp, LISW



#### Specialties:

- Serving former refugee and immigrant individuals
- Global Mental Health
- Trauma-informed healing

Sarah has experience providing therapy to children and adults, and she partners with trained LSI interpreters to meet their individual needs. She enjoys collaborating with physicians and other supportive resources to wrap care around each individual she serves.



## Cultural Wellness Perspectives on mental health and disability: Supporting Immigrants and Refugees in Iowa



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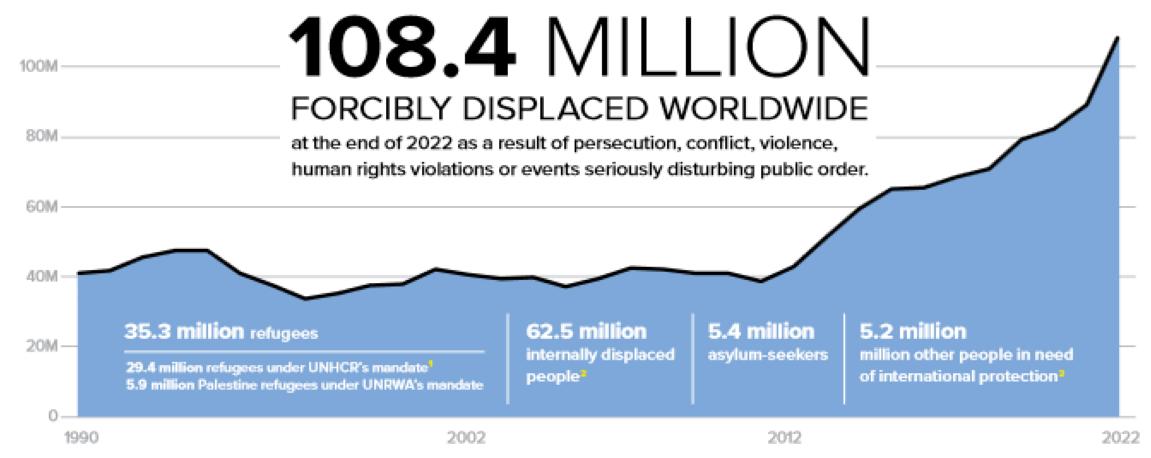
Cultural Perspectives on Mental Health and Disability Best Practices on Communication

Resources available Community Collaboration





#### Understanding the population data:

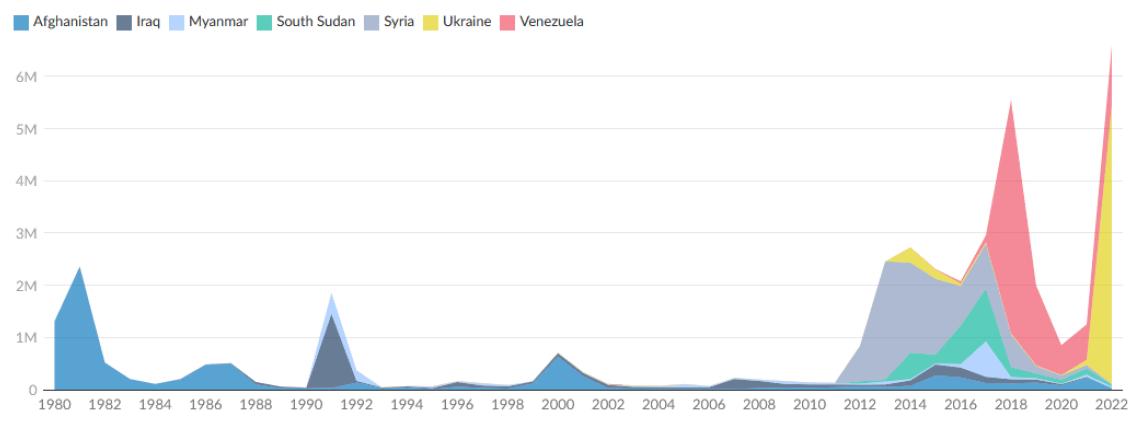


Source: UNHCR (all data in this presentation from Figures at a Glance or Global Report unless otherwise noted)



#### Understanding the population data:

#### Largest forced displacement flows across borders 1980 - mid-2022



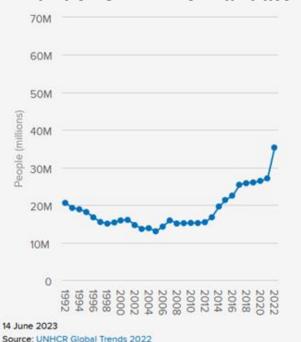
Source: Forced displacement flow dataset

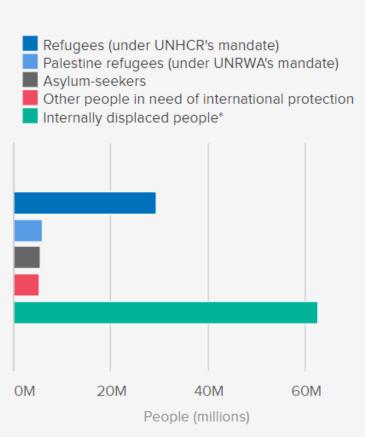
#### Understanding the population data:

#### 35.3 million refugees

 29.4 million refugees under UNHCR's mandate

 5.9 million Palestine Refugees under UNRWA's mandate



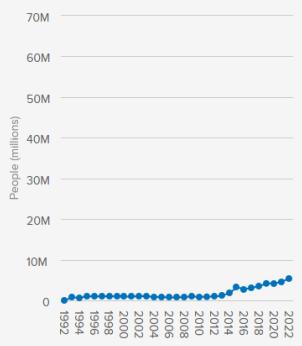


14 June 2023

\* Source: Internal Displacement Monitoring Centre

Source: UNHCR Global Trends 2022

#### 5.4 Million Asylum Seekers



14 June 2023

Source: UNHCR Global Trends 2022

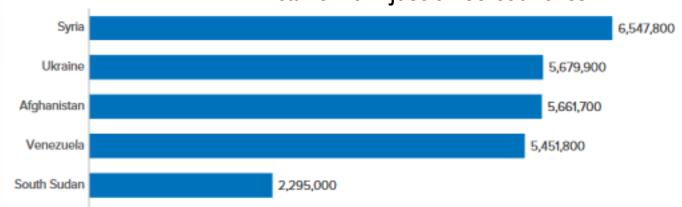


#### Who qualifies for refugee status?

#### Well-founded fear of persecution based on:

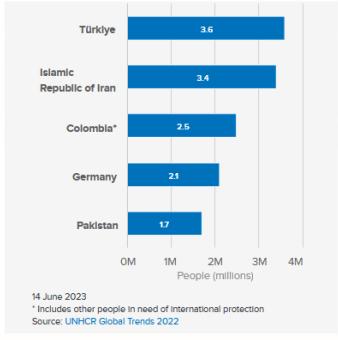
- Race
- Religion
- **Nationality**
- Social Group
- Political Opinion

Major source countries 52% of all refugees and other people in need of international protection came from just three countries.



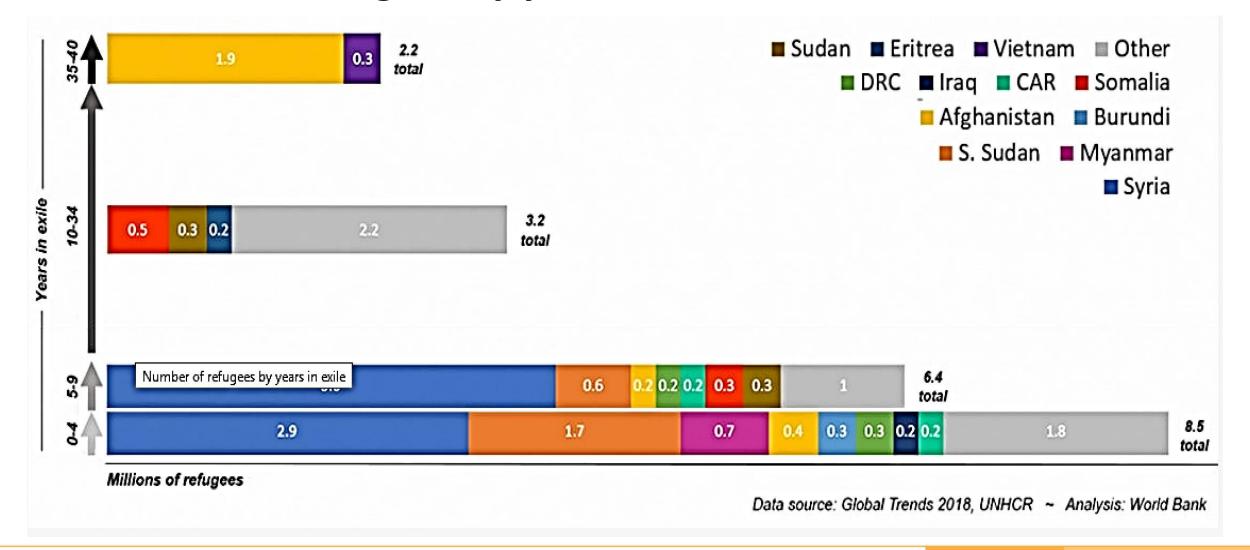
#### Major hosting countries

Turkey hosted nearly 3.6 million refugees, the largest population worldwide, followed by the Islamic Republic of Iran with 3.4 million





#### Number of Refugees by years in Exile - at the end of 2018



#### Waiting for what?

#### **Return** ("voluntary repatriation")

• 4 million in the last 10 years

#### Remain ("local integration")

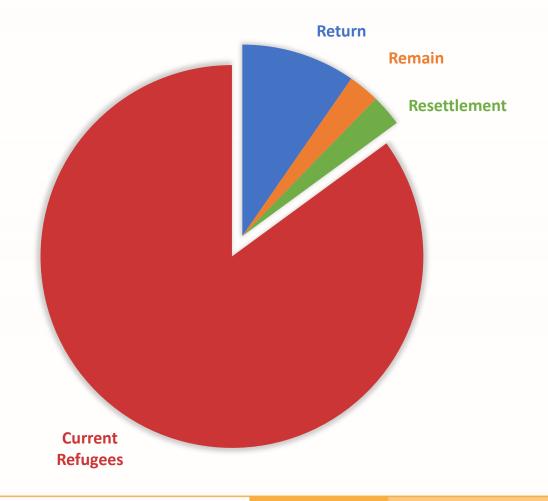
1.1 million over the last 10 years

#### Resettlement

1.1 million over the last 10 years

#### **Current # Refugees**

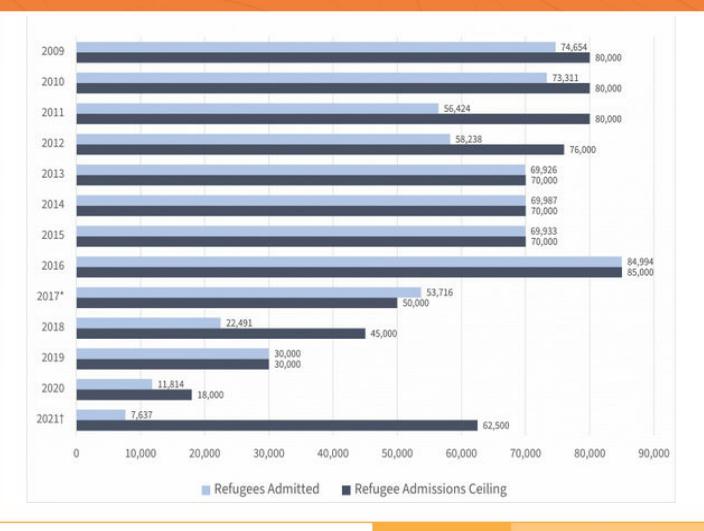
• 35.3 million people



## Refugee Admission Ceiling and Refugees Admitted FY2009 to August 31, 2021

## 2023 Presidential Determination: 125,000 people

**Source:** The US Department of State The Bureau of Population, Refugees, and Migration (PRM), "Refugee Admissions Report as of August 31, 2021." <a href="https://www.wrapsnet.org/archives/">https://www.wrapsnet.org/archives/</a>



#### **Important Vocabulary**

#### **Undocumented Immigrant**

Refers to people who are not citizens and live in the country without legal immigration status, includes people who entered the country without proper permission as well as those who no longer have valid visas

#### **Internally Displaced**

A person who has fled their home but is still within their country of origin because they are not able to leave the country. They may be persecuted or in immediate danger.

#### **Secondary Migration**

A Refugee who originally settles in one state and then moves to another state after initial placement.





#### **Important Vocabulary**

#### Interpreter

a person who explain the meaning of (information, words, or actions), especially one who explains speech orally. Professional interpreters must past fluency and confidentiality trainings or exams.

#### **Translator**

A person who communicates the meaning of a source-language text by means of an equivalent target-language text. Professional translators must past fluency and writing trainings or exams.

#### **Family or Friend**

family members and friends may not have the relevant training or ethical standards as professional interpreters. Interpreters should be neutral and passive, which may prove difficult for family.





## Cultural Perspectives: How do peers understand the client

The U.S. healthcare system is complex and can be difficult to understand and navigate, especially for a refugee or immigrant coming from a country with limited healthcare services. Because resettlement services are time limited, it is important for care providers to work with other professionals to coordinate care for persons with disabilities.

To best serve refugees with disabilities, providers need to consider the client's history, life and experience in the country of origin or host country, and cultural perceptions of disability. Stereotypes are not for assumptions, but for background information to understand how this client may or may not be impacted by history, politics, resilience. Asking relevant questions can help build rapport, understand past support and services, and overcome power imbalances.

- Afghanistan
- Bhutanese Nepali Speaking
- Democratic Republic of Congo
- Mexico

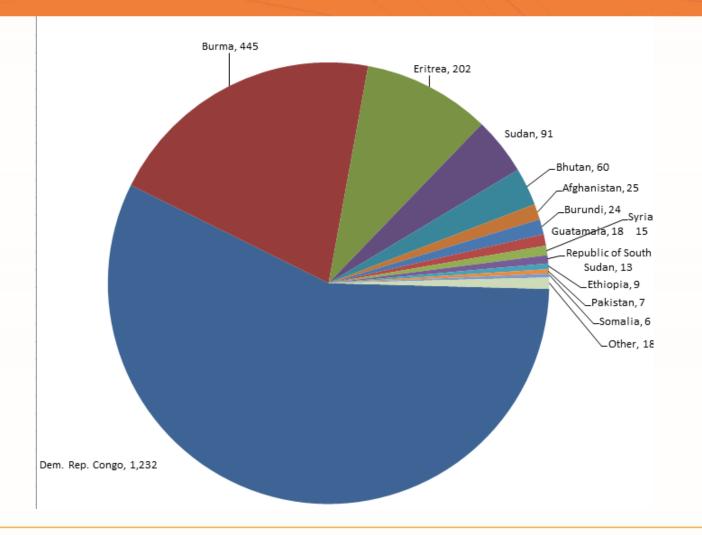
- Iraq and Syria
- Myanmar/Burma
- Somali
- Sudan

Reference to Nationalities Service Center, Philadelphia Gulf Coast Jewish Family and Community Services, National Partnership for Community Training



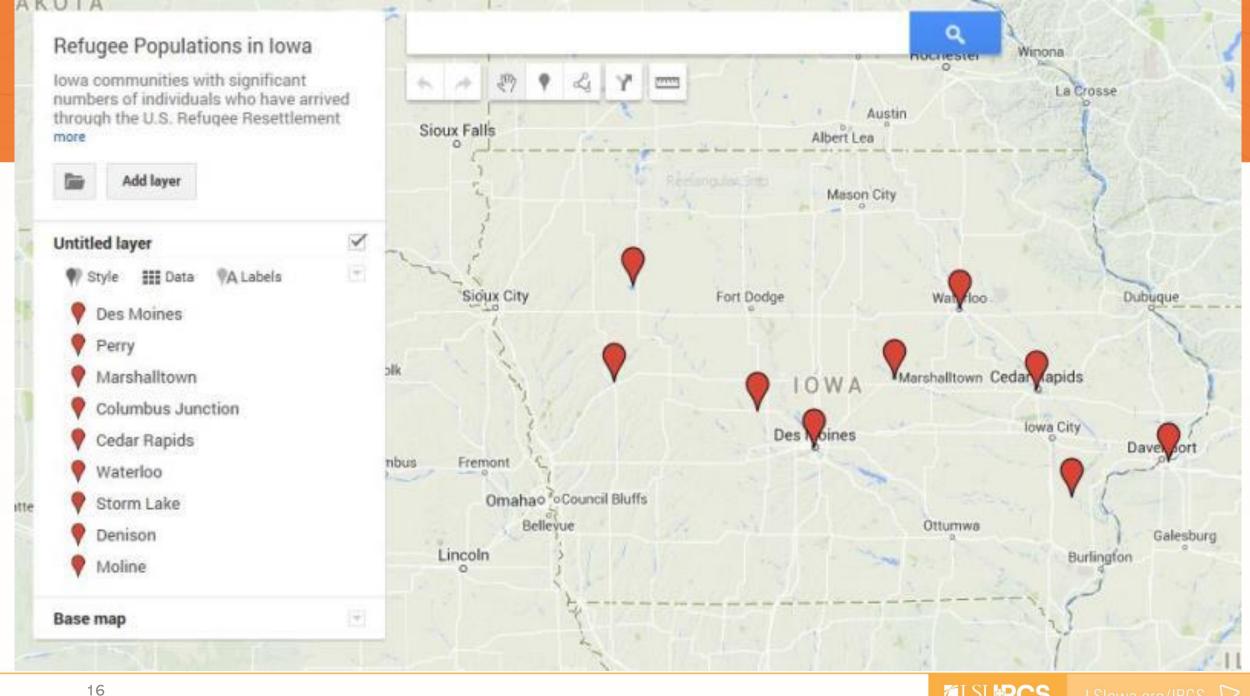


#### **Iowa Resettlement 2018-2022**



Dem. Rep. Congo	1,232
Burma	445
Eritrea	202
Sudan	91
Bhutan	60
Afghanistan	25
Burundi	24
Guatamala	18
Syria	15
Republic of South Sudan	13
Ethiopia	9
Pakistan	7
Somalia	6
Uganda	4
El Salvador	3
Iraq	3
Nepal	3
Honduras	2
Kenya	2
Rwanda	1





## Cultural Perspectives on Mental Health and Disability

Responding in the cycle.



#### **Cultural Perspectives: Idioms of Distress**



Screening instruments and diagnoses may have limited use with diverse populations.



Expressions of psychological problems can be culturally specific Example: Paranoid thoughts in the context of oppressive governments.



Culture is needed in understanding phenomena that might be construed as mental illnesses in Western medicine.

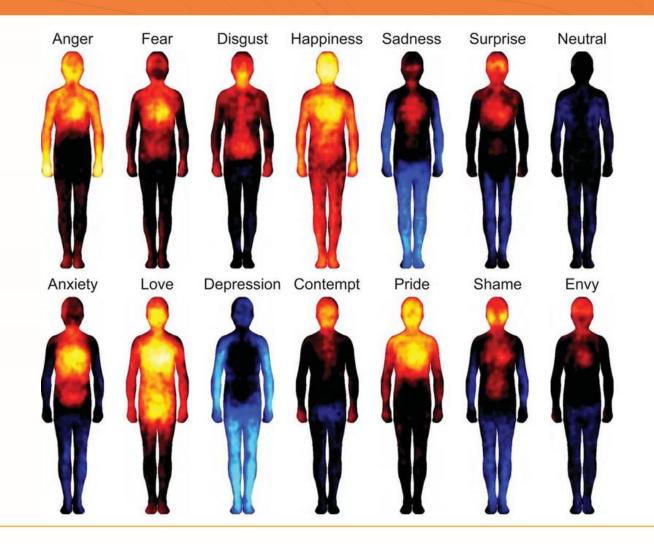
#### **1** Cultural Perspectives: Idioms of Distress

- Bhutanese Nepali Speaking: dukha laagyo (sadness), dar laagyo (fear), Jharko laagyo (irritation), jiu sukera gayo (drying of the body), kat kat khanchha (tingling and burning sensations)
- Democratic Republic of Congo: Erisire (madness/depression/ anxiety/manic); Amutwe Alluhire (tired head/saddness/irritable); alluhire (confused/loneliness)
- Mexico: ataque de nervios (attack of the nerves), susto (fright)
- Iraq and Syria (Arabic): Hazin/taaban nef seyan or taabt (sadness/distress), tired in my soul, drained
- Myanmar/Burma: seik hpizimu (stress/mind or spirit suppression), seik lo 'shaa (falling, faintness, unsteadiness, "anxiety" or worry), seik da'kya (spirit falling/depression/heart falls down) seik daan yaa (heart touch hit/mind injury)
- Somali: somatic descriptions I can't even touch my head (headaches), A very hot wind is blowing through every nerve (anxious)





#### **Cultural Perspectives: Idioms of Distress**



Lauri Nummenmaa,

a psychologist at Aalto University who

led the study.

Published in

Proceedings of the

National Academy of Sciences.

TALSI HRCS

#### **Cultural Perspectives: Cultural Competence/Humility/Hospitality**

#### **Psychological Treatment** of Ethnic Minority Populations Council of National Psychological Associations for the Advancement of Ethnic Minority Interests The Asian American Psychological Association (AAPA) The Association of Black Psychologists (ABPsi) The National Latina/o Psychological Association (NLPA) The Society of Indian Psychologists (SIP) November 2003

#### Awareness: "Culturally competent therapists..."

- Are aware and sensitive to their own racial and cultural heritage and value/respect differences. They are aware that their worldviews are only one of many and that care must be exercised when using a worldview to make determinations of normality or abnormality. Differences are not seen as necessarily deviant or pathological.
- Are aware of their own background/experiences and biases and how they influence pathological processes. They make conscious efforts to not impose their biases upon culturally diverse groups.
- Recognize the limits of their competencies and expertise. They realize that it is unethical to work with culturally diverse populations without specialized training or expertise.
- Are comfortable with differences that exist between themselves and others. They realize that discomfort over differences can hinder an effective therapeutic relationship.
- Do not profess "color blindness."





## Cultural Perspectives: Cultural Competence/Humility/Hospitality

#### Awareness: "Culturally competent therapists..."

- Are in touch with negative emotional reactions toward racial/ethnic groups and can guard against their detrimental effects on persons of color.
- Are aware of stereotypes and preconceived notions they may hold for specific populations other than their own.
- Respect religious and/or spiritual beliefs of others. They avoid making judgmental evaluations of clients whose belief systems differ from theirs.
- Are aware of that we live in a pluralistic environment and that we are a multicultural and multilingual society. They value bilingualism as indicative of increased skill acquisition and recognize that it does not reflect negative bias toward the larger society.



# Best Practices on Communication

Connecting with others.



#### **Best Practices on Communication**

#### THEY TOOK YOUR HOME FROM YOU Now They Call You Refugee

Home is a language you grew in your mouth that now no longer exists anywhere but inside your heart and head.

Home is where you had to teach your children how to run from men who are dressed in war and blood.

Home is now a legend a story of where you grew up, happy and safe before they set your entire world aflame.

Home is where you ran to the sea because the place you once belonged to, now no longer remembers your name.

> Home was your refuge. Now, after cruelly taking it from you, they call you a refugee.

> > Nikita Gill



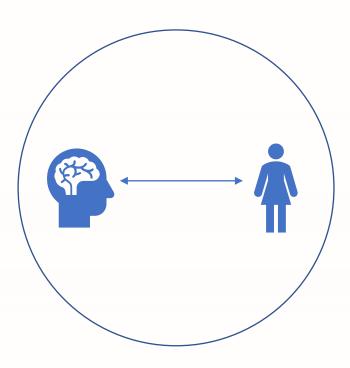


## Best Practices on Communication: The Mind and Body are One

It's common for people to describe mental health in somatic ways — body ache and other physical or "socially acceptable" ailments rather than in description of emotion.

People may also have culturally specific ways of understanding, making meaning of, and recovering from trauma.

- Spiritual perspective
- Rituals
- Connections with community members
- Experiences with service providers
- Attitudes about who, where, and how to seek help





#### Best Practices on Communication: The Mind and Body are One

- Loss affects people differently, from anger to complicated grief, breakdown of relationships and trust, PTSD symptoms
- Post Traumatic Resiliency and Growth people may utilize experiences to help others
- Lack of trust and continued use of previous adaptive/survival responses
- Substance abuse and use of medications/treatments from other countries
- Drop out of services









- Consider how you greet people, what you offer for hospitality when they arrive to your office
- Consider communication styles, eye contact, and touch
- Consider who you include and how, who makes service decisions for the person/family
- Consider how you explain services
- Consider learning about the cultures of your community before they walk in your door
- Consider historic distrust of government or community services
- Consider experiences of restricted speech and public opinion
- Consider cultural taboo and stigma with specific topics
- Consider how much of their story you ask people to tell, when, and to who





- People avoid talking about mental health symptoms openly, but expect Doctors to ask
- People will go to therapy if recommended by a doctor, and they know how to reach the service
- Use body language and facial expression to enhance connection across languages
- Initiate direct questions about mental health in historical context
- Expect a physical description of mental health symptoms questions should be asked in a physical sense
- Provide psychoeducation
- Plan for extra time (twice as long with interpretation)
- Use family as ally, but not interpretation
- Interview some children or spouses separately, with explanation and context





- Be aware of the effect of the staff intentions and effect on the helping relationship
- Be aware that the conventional idea of mental health is not always sufficient to respond to the complexity of psychosocial needs of war-torn societies
- Be aware of the long-term process of intervention
- Enter collaborative partnerships with local resource persons, services, and organizations
- Enhance collaboration between professionals of different fields of knowledge; encourage interdisciplinary teams
- Be mindful of the community affect, not just individual symptoms
- Care for workers in order to avoid burn out and vicarious trauma









- When using interpretation, modify the English words used:
- Be clear. Say what you mean without using jargon like "I get it", "you bet", "same here"
- Use short words, short sentences and short paragraphs
- Use one idea per sentence
- Use clear examples that show what you mean
- Talk to your client directly, use 'you'
- Be specific and consistent. Keep language simple
- Avoid even simple abbreviations.
- Explain the context of what you are saying. What background information would be needed (history, environment, instructions) in order to understand.
- Consider symbolic literacy and using images, instead of print





## Resources Available & Community Collaboration



Make connections and use community resources.

#### Status and connection to community supports

#### Refugee

#### **Status**

- Refugee status upon arrival
- Adjust status to Legal Permanent Resident (LPR) after 1 year in U.S.
- Eligible for citizenship after 5 years in U.S.

#### Rights

- Certain social and health service benefits immediately, but end after
   5-7 years unless citizenship is gained
- Immediate and indefinite work eligibility

#### Responsibilities

Repayment of Travel Loan



#### **Immigrant**

#### Status

- Legal Permanent Resident status according to individual visa classification "Green Card Holder"
- Eligible for "full range of programs" after working 5 years or military service
- SSI eligibility with disability status, food stamp eligibility for 65+ and children

#### Rights

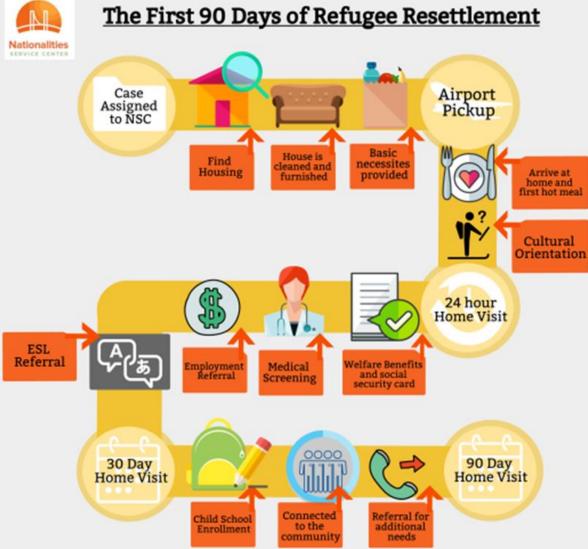
- Only as long as the visa is valid
- Not allowed Medicaid, FIP or Food stamps until after 5 years
- Emergency Medicaid option for pregnancy Responsibility
- Maintain current visa



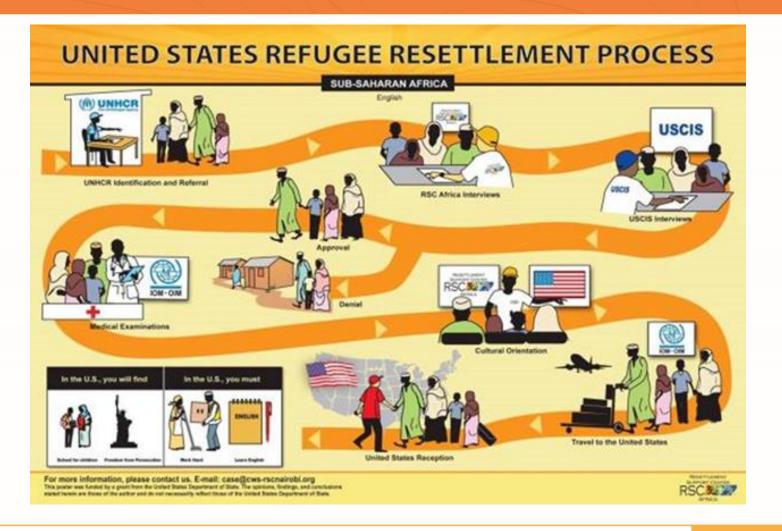


## Community Collaboration Resettlement Agencies

- Lutheran Services in Iowa
- USCRI US Committee for Refugees and Immigrants
- Catholic Charities
- International Rescue Committee



#### **Resettlement Process Before Arrival**



## History

Lutheran Services in Iowa has a legacy of assisting people who have migrated to lowa from around the world.



Since 1947, our programs have served immigrants and refugees to help them thrive in their communities and achieve their goals.













## 3 What we do

LSI has served children and families for more than 150 years. We are made up of more than 700 team members in 25 offices statewide.

Our services outside of Immigrant and Refugee Community Services include:

- \* Behavioral Health Intervention Services
- Family Centered Services
- \* Residential Treatment Services
- Early Childhood Services
- Mental Health Services
- Foster Care and Adoption
- Services for People with Disabilities

#### **Education & Workforce**



Citizenship

Classes prepare students who are eligible for the U.S. Citizenship Exam, and connect them with immigrant legal services to complete their application.



**Community Based English Language Learning (CBELL)**  Community Based English Language Learning provides English classes, and the program also focuses on helping students learn social skills and cultural awareness to enable them to thrive in their new communities.



Workforce and Career Services

Services include orientation to the US workforce, job readiness training, career exploration and planning, job placement, recertification, and industry-specific training that assists immigrants in building longer-term financial stability.

#### **Economic Development**



**Child Care Business Development Program** 

Former refugees participate in training to start in-home child care businesses. This creates a stable source of income for the provider and allows families to know their children are cared for by someone who speaks their language and shares their culture.



**Global Greens** 



© @LSIGlobalGreens

Through this program, farmers are able to reconnect with agriculture and food production. Farmers have access to gardens and land, learn about U.S. agriculture, and receive support as they sell produce through the Global Greens Farmers Market and Community Supported Agriculture (CSA) produce subscription.



Volunteer Income Tax Assistance (VITA)

Taxpayers with limited English language skills and those who are immigrants or former refugees are supported by volunteers who file their taxes accurately, for free, and without the risk of fraud.

#### **Economic Development**



**Community Navigator Program** 

A statewide partnership, supported by the U.S. Small Business Association, that connects immigrant, refugee, and underrepresented business owners with resources such as counseling, technical assistance, and support in accessing loan products with favorable interest rates.



**Match and Save Program** 

Financial education is provided to individuals and families to build their new life in Iowa. With support from LSI staff, participants work with local financial institutions to save for a home, auto, business, or academic purchase.

#### **Family Services**



Resettlement





Trafficking Victims
Assistance Program

Trauma-informed, culturally appropriate support is provided to foreign-born survivors of human trafficking. Services include help in achieving certification from the U.S. Health and Human Services Office of Refugee Resettlement, financial assistance, connections to immigration legal assistance, medical services, counseling, and more.



Family Reunification Services

Services are designed to safely reunite immigrant children with their guardians or sponsors in Iowa and find success in their homes and community. Case managers conduct home studies to ensure the environment in which a child will be placed is safe and healthy. Safe Release Services offer onsite fingerprinting services at LSI locations in Des Moines and Sioux City.

#### **Family Services**



This program supports the goals and cultural values of individuals, families, and communities by providing mental health care in a clinical setting. Services are designed in an integrated way, considering the mind, body, and community needs.



LSI provides specialized support services to refugee and immigrant populations that face unique barriers to self-sufficiency and for special populations including adults over 60, youth and families involved with the courts, and populations that have entered the country as humanitarian parolees.

#### **Post Resettlement Services and Support**

\*Call or search online for most updated services, address, and phone number

- Bureau of Refugee Services Statewide (DHS connections for public assistance)
- Catherine McAuley Center (Cedar Rapids)
- IC Compassion (Iowa City)
- Monsoon (DV Advocacy for Asian and Pacific Islanders) (Sioux City, Des Moines, Iowa City, other)
- NISAA (DV Advocacy for African Families) (Des Moines, Iowa City, other)
- SAFI (Support (primarily for DV) for Arab Families in Iowa) Des Moines, other
- Iowa International Center (Des Moines)
- Proteus statewide
- EMBARC Ottumwa, Marshalltown, Des Moines, Other
- Find Hello app





#### **Post Resettlement Services and Support**

\*Call or search online for most updated services, address, and phone number

- UNI New Iowans Center for resources and connections, information
- lowa Migrant Movement for Justice
- LUNA (DV Advocacy) Latino/a statewide
- Latino Helpline phone
- Mary Treglia House Sioux City
- o Refugee Alliance of Central Iowa <a href="https://www.refugeeallianceofcentraliowa.org/resource-guide">https://www.refugeeallianceofcentraliowa.org/resource-guide</a>
- Community Colleges
- Public Health offices
- State Refugee Health and Mental Health coordinator
- o 988 line





#### **Contact Us!**



#### **CONNECT WITH US**

LSIowa.org/IRCS

Facebook: @LSI.IRCS



#### **MAKE A DONATION**

Network for Good:

www.donatenow.networkforgood.org/lsirefugee



#### **VOLUNTEER**

email volunteer@LSlowa.org
LSlowa.org/volunteer

#### Sarah Van Gorp

Sarah.vangorp@LSlowa.org | 515-452-6427

#### Additional Upcoming Topics



A Life in the Community: The Goals of Olmstead

August 15, 2023 | 10:00AM - 11:30AM | Virtual Registration through Zoom



**Understanding Rights and Restrictions** 

August 2023 | Time TBD | Registration Coming Soon

