

Global Communities: Law Enforcement & Mental Health

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August 30, 2012



Presentation Overview



- Refugee Populations
- US Resettlement
- NC Refugees
- Mental Health
- Other Considerations
- Suggestions
- Resources

Refugee Populations

- Refugee
- SIV
- Asylee
- Cuban/Haitian Entrant
- VOT
- Ameriasian



US Resettlement Structure

- 10 national resettlement agencies + affiliates
- ORR/ACF
- Self-sufficiency/Integration
 - Community Orientation
 - Employment Programs
 - Case Management
 - Local community support
- Public/Private partnership



Refugee Support Systems

- Resettlement Agencies
- Public Schools
- Dept. of Human Services
 - Health Clinics
 - WIC
 - Medicaid
 - Food Stamps
 - TANF/Workfirst
- Volunteers, Faith-based, Businesses
- Refugee Community

NC Refugees

- Bhutan, Burma, Burundi, Former Soviet, Cuba, Columbia, Eritrea, Ethiopian, DRC, Iraq, Iran, Somalia, Vietnam, Zimbabwe
- 9 VOLAGS
- Wake, Durham, Orange, Buncombe, New Hanover, Craven, Guilford, Davidson, Randolph, Forsyth, Mecklenburg
- Primary and Secondary Migration
 - Initial resettlement destination
 - Reunification
 - Employment opportunities
- Wayne, Johnson, Chatham, Robeson, Richmond, Nash, Edgecombe

Refugees & Mental Health



Factors Impacting Mental Health

- Trauma
- Stressors related to resettlement
- Acculturation
- Social Isolation

Trauma

- War and persecution
- Displacement from their home
- Flight and migration
- Poverty
- Family/Community Violence

Resettlement Stress

- Financial stressors
- Difficulties finding adequate housing
- Difficulties finding employment
- Effects on family
- Loss of community support
- Lack of access to resources
- Transportation difficulties

Acculturation Stress

- Conflicts between new & old cultural values
- Cultural misunderstandings
- Language barriers
- Struggle to form an integrated identity including elements of their new culture and their culture of origin

Isolation

- Loneliness and loss of social support network
- Discrimination
- Harassment
- Feelings of not “fitting in” with others
- Loss of social status

Signs of Struggle

- Problems with emotion regulation
- Irritability/Hyperarousal
- Hyper-vigilance
- Isolation
- Trouble concentrating
- Loss of trust
- Aggressive behavior
- Abuser-victim paradigm
- Substance abuse
- Organic Impairment
- Disorientation/confusion
- Self-injury

Further Considerations:

- Fear of authority
- Mistrust and fear of new systems
- Language
- Body language
- Cultural beliefs/practices
- Opinions about health and disclosure
- Misdiagnosis based on cultural breakdowns
- Need for health literacy education
- Insurance

Suggestions:

- Learn developmental responses to traumatic stress
- Help reduce trauma reminders in environment
- Learn about cultures of origin in service areas and use cultural brokers
- Establish rapport with refugee communities early on
- Provide culturally and linguistically sensitive services
- Respect existing roles in family unit/community
- Collaborate with local mutual assistance agencies
- Be a part of education efforts

Suggestions:

- Help connect to cultural, religious, mentoring and community organizations
- Refer to trained mental health providers when appropriate
- Remember strengths contributing to resilience!

Resources

- Refugee Backgrounders: www.cal.org
- Children's Hospital Center for Refugee Trauma and Resilience (CHCRTR): <http://www.chcrtr.org/>
- Florida Center for Survivors of Torture: <http://gulfcoastjewishfamilyandcommunityservices.org/refugee/>
- Refugee Health Technical Assistance Center: <http://www.refugeehealthta.org/>

Thank you.

For more information:

www.refugees.org

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