

# ARCHI QUARTERLY BREAKFAST

September 5, 2018

# WELCOME & INTRODUCTIONS

Mike Carnathan, Atlanta Regional Commission

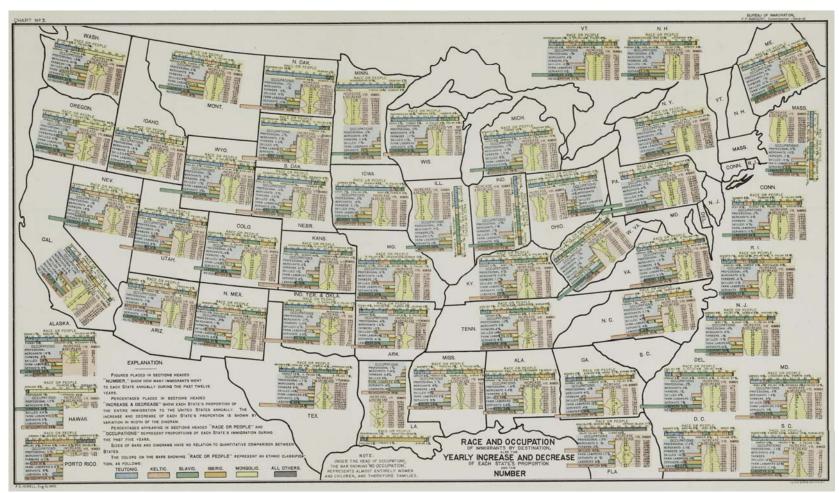


# HEALTH IS A HUMAN RIGHT

RACE AND PLACE IN AMERICA

WHERE: College of Law Research Centers and Institutes 4th Floor 85 Park Place Atlanta, GA 30303

OPEN TO THE PUBLIC: Monday-Friday 9 a.m. - 5 p.m.

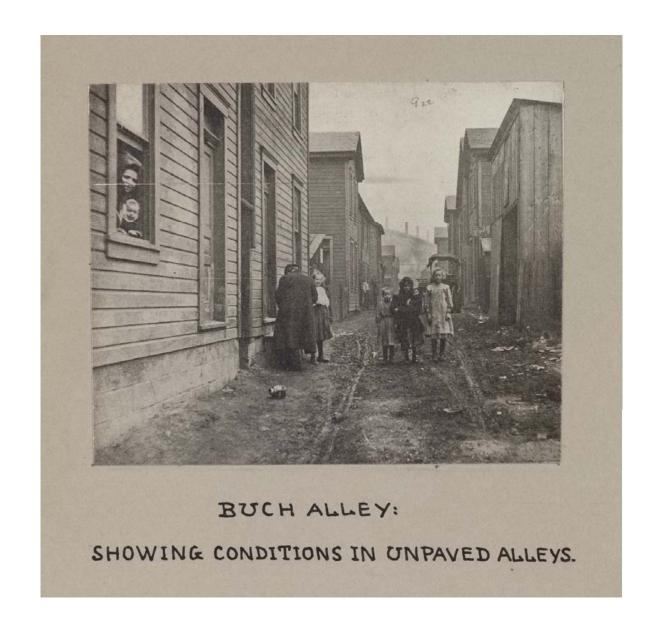




Julius Bien & Co., Races, Immigration: United States. Immigration to the United States: Chart No. 3: Race and Occupation of Immigrants by Destination, also the Yearly Increase and Decrease of Each State's Proportion and the Number, 1903. Courtesy of Harvard Art Museums/Fogg Museum, Transfer from the Carpenter Center for the Visual Arts; Social Museum Collection, 3.2002.3530

# Buch Alley in Pittsburgh, ca. 1903

Courtesy of
Harvard Art
Museums/Fogg
Museum,
Transfer from
the Carpenter
Center for the
Visual Arts;
Social Museum
Collection,
3.2002.41.1





Cramped El Bracero living quarters, photograph by Leonard Nadel, 1956
Courtesy of Leonard Nadel Bracero Photograph Collection, Division of Work & Industry, National Museum of American History, Smithsonian Institution

Mexicans
entering the
United States
immigration
station, El Paso,
Texas, June 1938,
photograph by
Dorothea Lange
Courtesy of
Library of
Congress, Farm
Security
Administration
Collection, LCDIG-fsa-8b32436





## **AGENDA**

- Health Equity: The Immigrant and Refugee Experience
- Padam and Purna's Path in Clarkston
- Perspectives from Community-Based Organizations
- Announcements & Closing



# HEALTH EQUITY: THE IMMIGRANT AND REFUGEE EXPERIENCE

Pierlugi Mancini, Multicultural Development Institute, Inc.

#### Immigrants, Refugees, Trauma and Adverse Childhood Experiences

**ARCHI Quarterly Breakfast** September 5, 2018 Atlanta, Georgia

Multicultural Development Institute, Inc.

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## **IMMIGRATION**



#### **Immigration**

- Voluntary
  - Individual or family decide to move
- Involuntary
  - Familial
  - Social
  - Political

- Slavery
- Human trafficking
- Sex trafficking

- Refugees
- Asylee
- Documented
- Undocumented
- Unaccompanied children



#### Reasons For Immigration

- Improve economic level
  - Temp Make money to build a house/buy car
  - Permanent stay
- Improve quality of life
- Improve educational level
- Avoid/Escape political persecution
- Unite with family already in U.S.
- Curiosity (especially adolescents)



#### Immigrants vs. Refugees/Asylees

- Difference in legal status: refugee vs. immigrant, documented vs. undocumented
- Differences and similarities in experiences
- Differences in access to services
- Other special groups: unaccompanied minors, asylum seekers, temporary protected status



#### Immigration trends

- There were 43.2 million foreign born immigrants living in the US in 2015.
- This represents 13.4% of the nation's population
- Expected to be 78 million by 2065





#### Numbers

- 51.2 million displaced world wide (UNHCR, 2013)
- Approximately half under the age of 18 (UNHCR, 2013)
- 810,000 under the age of 18 resettled in the US since 1980 (BRYCS, 2012)
- Between 1994 and 2014, the percent of immigrant youth living in the United States increased from 18 to 25% (Child Trends Data Bank, 2014).
- By 2040 it is projected that 50% of the youth in the U.S. will be children who were either born outside the US and immigrated, or whose parents are immigrants (Filindra et al., 2011)



#### Numbers

- A total of 69,975 persons were admitted to the US as refugees in 2014.
- Leading countries were Iraq, Burma, Somalia and Bhuttan.
- During 2014, 23,533 individuals were granted asylum affirmatively by DHS
- 8,775 were granted asylum defensively by DOJ
- Leading countries granted asylum were China, Egypt, and Syria.
- Since 2016 drastic reductions, last year less than 20,000



#### All experience trauma

- Pre-migration, migration, and resettlement
- Direct exposure to or witnessing of violence
- Sexual assault and gender-based violence
- Torture and detention
- Disruption of family and community
- Lack of access to basic resources (food, water, medical care, shelter)
- Long journeys on foot, living in refugee camps



# Unique Experiences of immigrant Children and Adolescents

- Trauma and displacement
- Early childhood deprivation
- Developmental issues
- Parental trauma, impact on parenting
- Displacement, impact on family
- Acculturation, resettlement, isolation stressors
- Prior school experience



#### Immigrants and Mental Health

- Those with high exposure to trauma at risk for PTSD, depression, anxiety, sleep problems, somatic complaints, behavioral, conduct, and school problems
- Symptoms may diminish and recur over time
- ■Role of parental adjustment
- ■Importance of social environmental stressors
- Resilience

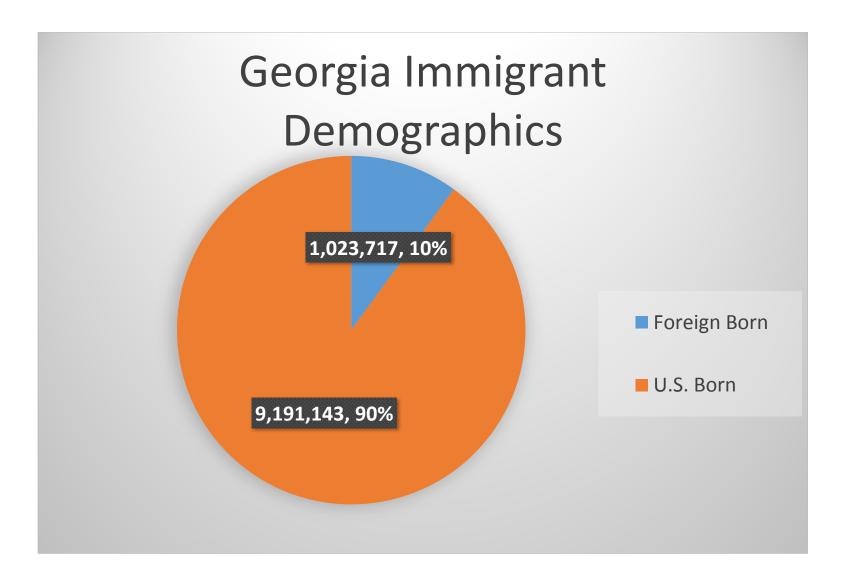
For summary of literature on Children and Adolescents see http://www.apa.org/pubs/info/reports/refugees-full-report.pdf



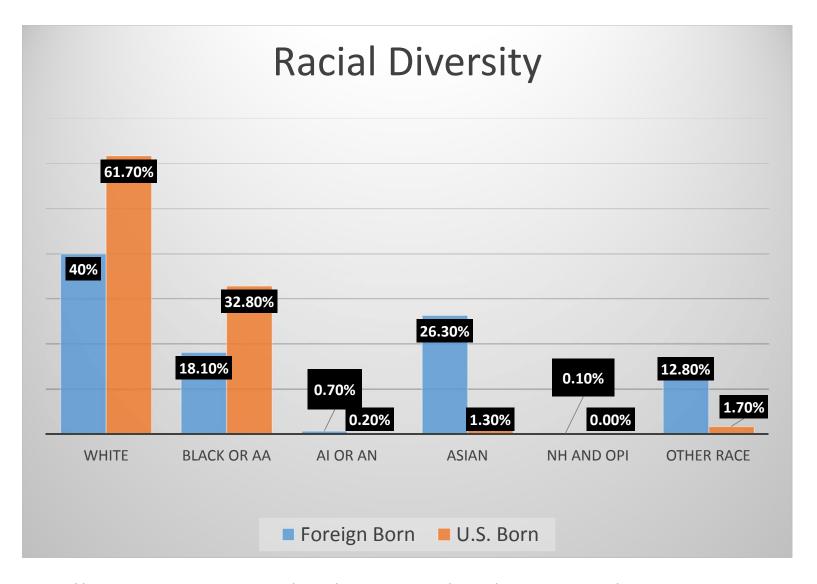
# What we know about the immigrant population in GA?



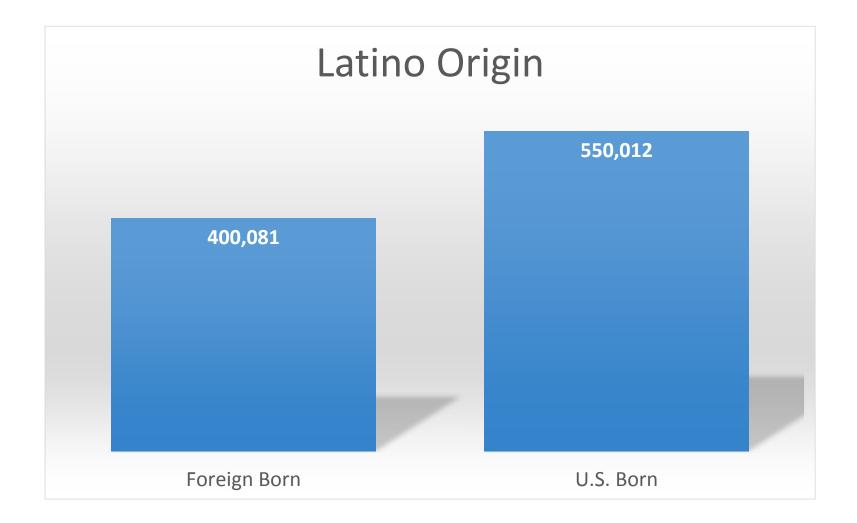




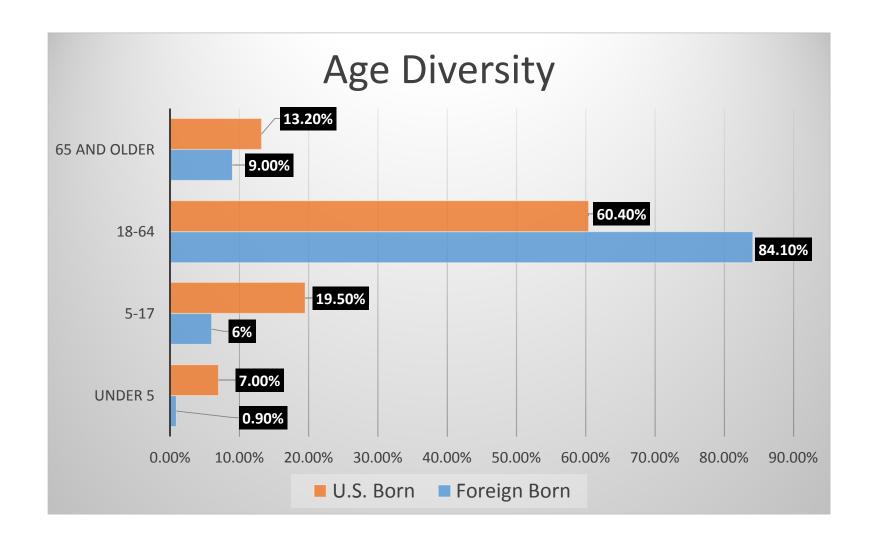




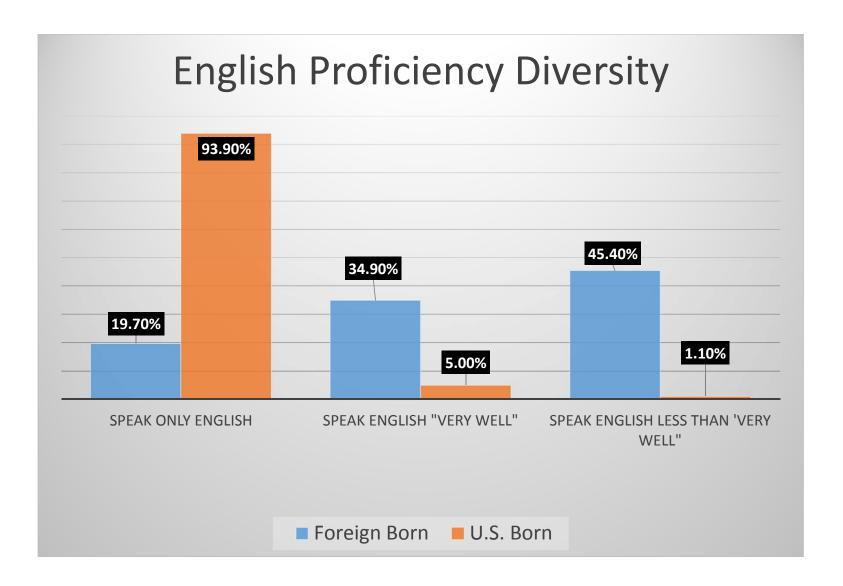




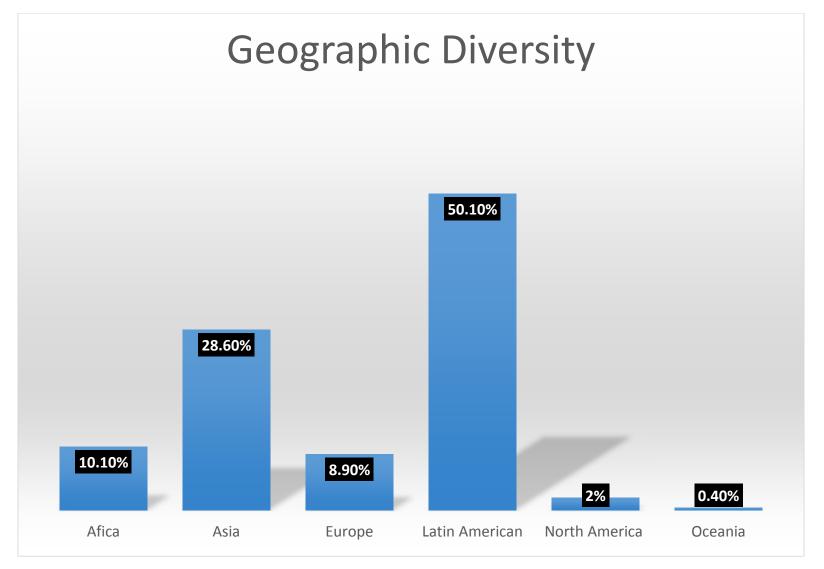






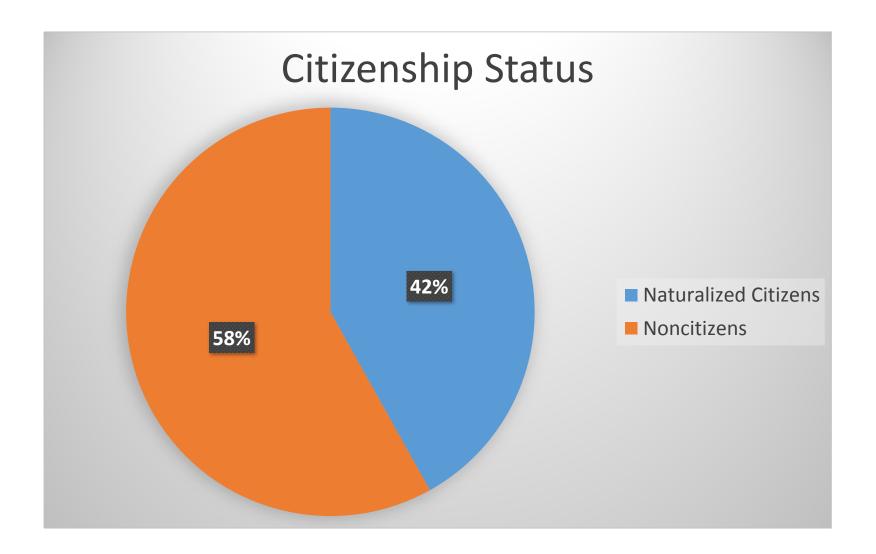




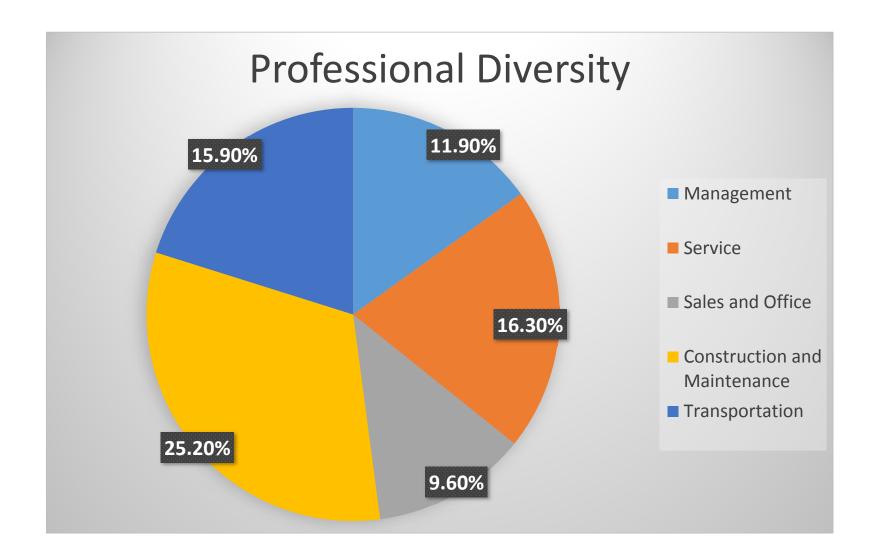




http://www.migrationpolicy.org/data/state-profiles/state/demographics/GA

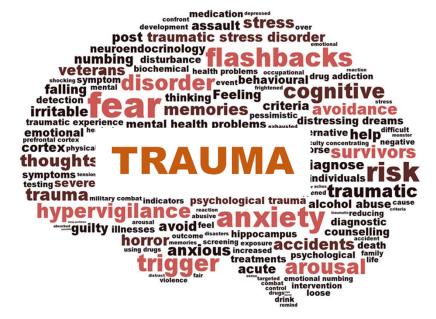








#### TRAUMA



#### Trauma

- An emotional shock that creates significant and lasting damage to a person's mental, physical and emotional growth
- Traumatic experiences can significantly alter a person's perception of themselves, their environment, and the people around them. In effect, trauma changes the way people view themselves, others and their world.
- Can impact safety, well-being, permanence



#### Prevalence

- Over 90% of mental health clients have trauma histories.
- In state hospitals, estimates range up to 95%.
- 90% or more of women in jails and prisons are victims of physical or sexual abuse.
- Up to 2/3 of men and women in substance abuse treatment report childhood abuse or neglect.
- Similar statistics exist for foster care, juvenile justice, homeless shelters, welfare programs, etc.
- 25-30% of disaster survivors develop PTSD, but 100% will likely experience some form of trauma.



## Vulnerable Populations

- Children & women
- American Indian/Alaska Native
- Veterans
- Refugees and immigrants
- People who are homeless
- People who are institutionalized in mental health or criminal justice systems



#### Exposure to Trauma

#### Trauma can be:

- A single event
- A connected series of events
- Chronic lasting stress

Trauma is under-reported and under-diagnosed.



## Types of Traumatic Experiences

- Loss of a loved one
- Abandonment
- Accidents
- Homelessness
- Community/school violence
- Bullying, including cyber-bullying
- Domestic violence
- Neglect
- Frequent moves

- Serious medical Illness
- Physical abuse
- Sexual abuse
- Emotional/verbal abuse
- Man-made or natural disasters
- Witnessing violence
- Terrorism
- Refugee and War Zone trauma.

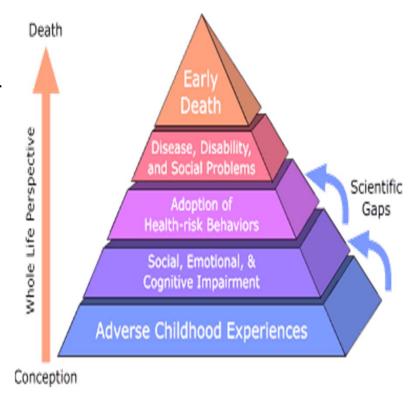


#### ACE Study Pyramid

Bridging the gap between childhood trauma and negative consequences later in life

50% of study participants reported at least one adverse childhood experience

25% reported at least two or more untreated trauma

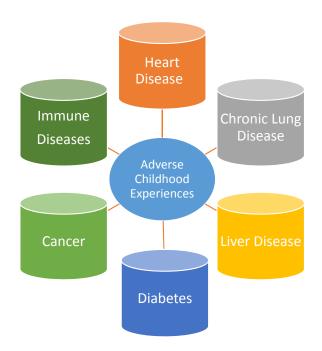




#### Adverse Childhood Experiences

Adverse childhood experiences increase the risk of:

- Heart Disease
- Chronic Lung Disease
- Liver Disease
- Diabetes
- Cancer
- Immune Disease

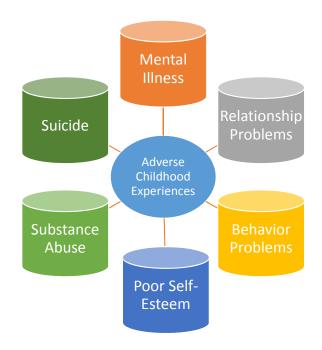




#### Adverse Childhood Experiences

Adverse childhood experiences increase the risk of:

- Mental Illness
- Relationship Problems
- Behavior Problems
- Poor Self-Esteem
- Substance Abuse
- Suicide





#### What does this mean?

- With an ACE Score of 4 or more, the majority of adults are at significantly higher risk factors for these diseases and health risk behaviors.
- Adults with ACE score ≥4 are 460% more likely to have lifetime history of depression.
- Male child with ACE score of 6 has 4,600% increase in likelihood of later becoming IV drug user.
- Can cause impairments in many areas of development



#### Impact of Trauma, cont.

- Mood Regulation difficulty identifying & controlling emotions & internal states
- Behavioral Control poor impulse control, self-destructive behavior, aggression, risk taking behavior
- Dissociation feeling detached, as if observing something happening to them that is not real
- Cognition difficulty focusing & completing tasks or anticipating future events; learning difficulties & problems with language development
- Self-concept feeling shame/guilt; low self-esteem, disturbed body image
- Loss & Betrayal loss of part(s) of their life; distrust of others
- **Powerlessness** perceive self as victim; have no say in what happens to them; unable to control their lives, etc.



#### Three "E"s" of Trauma

- Event the event and circumstances, the threat, harm or potential of harm
- Experience individual perception of the event, development, culture, shaped by feelings of powerlessness/guilt
- **Effect** adverse effects (what, duration, severity), degree of ability to cope, degree of support, any altering of neurobiological makeup and on-going health & well-being



# How migration and anti-immigrant sentiment affects the mental health status of this population





#### **STRESSORS**

- School Stressors
- Family Stressors
- Community Stressors
- Resettlement Stressors
- Acculturation Stressors
- Isolation Stressors



### PRIMARY MENTAL HEALTH PROBLEMS



#### Consequences of traumatic stress

- Social
  - Drug abuse
  - Anti-social behavior
  - Isolation/withdrawal
- Psychological
  - Posttraumatic Stress Disorder
    - Reexperiencing, Avoidance, Hyperarousal
  - Depression
  - Conduct disorder
  - Emotion Regulation
- Academic. . .





#### Disorders

#### **Internalizing Disorders**

- Depression
- Anxiety
- Suicide
- PTSD

#### **Externalizing Disorders**

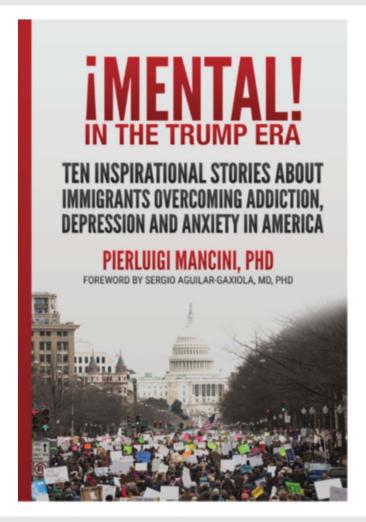
- Conduct Disorder
- Substance Use Disorder



#### Focus on Culture









## Culture: Complex, Dynamic And Diverse

#### Culture influences

- World view
- Perspectives on mental health and disease,
- The way psychological problems are expressed,
- Help-seeking behaviors and
- Interactions with health-care providers.



#### Improve Services

- Organizational Cultural and Linguistic Competence Plan
- Comprehensive, community based services—holistic approach (e.g., assess all needs, resources, collaborate with school, community)
- Provide culturally competent services (e.g., respect cultural beliefs, client-focused goals, cultural brokers from community)
- Integrate evidence-based practice with practice-based evidence (e.g., assess history with care, psycho-ed, strengths-based, use trauma treatments flexibly)



#### Decrease Immigrant Barriers to Care

- Reluctance to seek out services
  - Stigma around mental health
  - Lack of resources
- Families overwhelmed by their own migration experiences
  - May not be able to recognize needs of children
- Unaware of what services are provided/Services not helpful
- Lack of linguistic and cultural accessibility
- Limited referral networks from schools, pediatrics etc.
- Different explanatory model/different solution



#### Key Aspects of Treatment Engagement

- Reducing Stigma
- Increasing access by creating more responsive service systems
  - Cultural and Linguistic responsiveness
- Enhancing education for practitioners
- Developing community and systems partnerships
- Working with members of specific cultural groups
- Meeting needs of families
- Cultural context and language Cultural and Linguistic Competence Plan
- Ongoing partnerships



#### Access to services

- Build partnerships between gateway providers (religious and community leaders) and mental health professionals
  - Understanding each other's approach
  - Respecting and supporting each other's approach
- Bring parents into the process
  - Outreach and education, anti stigma efforts
- Position mental health services in service systems that are accessed (e.g. schools)









## PADAM AND PURNA'S PATH IN CLARKSTON



#### REFLECT

#### Consider the following questions with your table:

What surprised you about this story?

What does this story have to do with health?

Is this story a part of Atlanta's narrative? Why or why not?



# PERSPECTIVES FROM COMMUNITY-BASED ORGANIZATIONS

Jim Neal, Friends of Refugees Aixa Pascaul, Latin American Association

Moderator: Robyn Bussey, ARCHI

## ANNOUNCEMENTS & CLOSING

Shannon Sale, Grady Health System

#### **ATLANTA TRANSFORMATION SCENARIO**



**FAMILY PATHWAYS** 



**EXPAND INSURANCE** 



**INNOVATION FUNDS** 



**GLOBAL BUDGETING** 







**HEALTHY LIFESTYLES** 



#### **ARCHI PARTNERS**

**Alliant GMCF** 

**American Cancer Society** 

American Diabetes Association

Arthur M. Blank Family Foundation

Atlanta Community Food Bank

Atlanta Community Health Interfaith Partners

Atlanta Housing Authority

Atlanta Humane Society

Atlanta Neighborhood Development Partnership

(ANDP)

Atlanta Regional Commission

Atlanta Volunteer Lawyers Foundation

BlueFlowers.org

CareSource

Carter Center

Charitable Connections

ChildKind

Children's Healthcare of Atlanta

CHRIS Kids, Inc.

Clayton State University, School of Nursing

Club E. Atlanta

Common Market Georgia

Community Foundation for Greater Atlanta, Inc.

Community Health interfaith Partners

Community of College Park

Concerned Black Clergy

**DeKalb County Board of Health** 

**DeKalb County Government** 

Diabetes Community Action Coalition, Inc.

Emory Fugua Center for Late Life Depression

**Emory Healthcare** 

Emory University - Urban Health Program

**Enterprise Community Partners** 

Families First, Inc.

Friends of Refugees

**Fulton County Government** 

**Gateway Center** 

Georgia Alliance for Health Literacy

Georgia Center for Nonprofits

Georgia Department of Public Health

Georgia Global Health Alliance

Georgia Health Policy Center

Georgia Institute of Technology

Georgia Primary Care Association

Georgia State University

Georgia Supportive Housing Association

Georgia Watch

Get Georgia Reading

**Global Dialoques** 

Grady Health System

Health Equity Advocacy & Resource Center

Health Management Associates

Health Promotion Action Coalition, Inc.

Hillside

Historic Westside Gardens Atl. Inc

I Can Be The Change

Insure Georgia

Jesse Parker Williams Foundation

Jesus Set the Captive Free

Kaiser Permanente of Georgia

Ladybug for Girls Foundation, Inc.

Legacy Community Housing Corporation

Live Living International Foundation

Marcus Autism Center

Mental Health America of Georgia

Metro Atlanta Urban Farm

Metropolitan Counseling

Muni Cares, Inc.

**Oakhurst Medical Centers** 

**Odyssey Family Counseling Center** 

One Talent Inc.

Open Hand Atlanta

Partnership for Southern Equity

Perkins & Will

Piedmont Healthcare

Resurgia Health Solutions

Rimidi, Inc

RiteAid Pharmacy

Saint Joseph's Health System/Mercy Care

Saving Our Sons & Sisters International

Shepherd Center, Inc.

South Fulton Human Services Coalition

Southside Medical Center

TechBridge

TQIntelligence, Inc.

Truly Living Well

United Way of Greater Atlanta

Veterans Empowerment Organization

Visiting Nurse Health System

Voices of Georgia's Children

Wellcare

Wellstar Health System

West End Medical Center Inc.





#### **UPCOMING EVENTS**

Tri-Cities Community Meeting September 18<sup>th</sup> McClarin High School, from 10a-12p, register <u>here</u>

Just Energy Summit: September 21<sup>st</sup> – 22<sup>nd</sup> www.justenergysummit.org

**Health Connect South: September 27<sup>th</sup>** 

Free registration for ARCHI members using this <u>link</u>

Transformation Academy launches October 6<sup>th</sup> www.atltransformationalliance.org

**Next ARCHI Quarterly Breakfast: December 5<sup>th</sup>** 



#### THE REFUGEE JOURNEY TO WELLBEING



Photo © UNICEF/UNI197517/Gilbertson VII: Greece, 2015: Kadouni, laughs with the Syrian boy he is carrying ashore near the village of Skala Eressos, on the island of Lesbos. A refugee from Syria himself, he assists and welcomes refugees and migrants arriving by sea.

Through October 5, 2018

DAVID J. SENCER CDC MUSEUM

Centers for Disease Control and

Prevention

1600 Clifton Road, NE, at CDC

Parkway

Atlanta, Georgia 30329

