

Shared Frustrations in Health Care Visits ©

Jane Dyer, CNM, MBA, PhD, FACNM*

Aster Tecle, PhD*

Josie Decker, FNP, DNP*

* No relationships to disclose



Utah as a Resettlement Site

- Office of Refugee Services
- IRC (42% - 24 mos) & Catholic Community Services (58% - 6 mos)
- Refugee and Immigrant Center - Asian Association (2 yrs)
- Local culture and dominant church influence



Demographics of Resettled

Gender

- 53% - male
- 47% - female

Countries of Nativity

- Somalia
- Iraq
- Sudan
- DRC
- Burma (Karen)
- Iran
- Afghanistan
- Bhutan
- 56 other countries



Ages

- <15 – 37%
- 15-24 – 20%
- 25-44 – 30%
- 45-64 – 9%
- 65-84 – 3%
- > 85 – 1%

Major health issues

- TB
- Parasites
- Impaired vision
- Hypertension
- Asthma
- Diabetes
- Hearing loss
- Mental Health



Redwood Community Clinic

- West side location
- Multispecialty
- University affiliated
- Early introduction



Participant Criteria

RW Healthcare Worker

- Male or female
- 18 or older
- Work at RW > 6 mos
- RN, MA, MD/DO, PA, NP

Somali Community

- Male or female
- 18 or older
- Born in Somali or Kenya
- Resettled in US > 6 mos
- Receiving care at RW



Focus Groups

- Provider – (audio recorded)
 - RNs, MAs
 - Physicians, PAs, NPs
- Somali Community
 - Women
 - Men



Process





- IRB approval
- Recruitment
 - Poster in staff lounge
 - Referrals from RW contacts
 - Somali community contacts
- Waiver of Consent
- Incentives
- Audio recordings – provider group
- Translation and note taking
- Transcription
- Analysis
- Distribution of results

Question Guide

- Talk about what has gone well when having an appointment at RW / with these two groups of patients and their families.
- Talk about any frustrations you have experienced during the healthcare encounter.
- What do you think the problems are?
- What would you ideally like to see changed?
- How do you think this change could happen?
- What can be done specifically?
- What is an effective way to inform others at Redwood Community Clinic?

Results



Groups



Somali Women – 2 groups = 12

- Age
 - 18-24 – 1
 - 25-29 – 2
 - 45-49 – 2
 - >50 - 7
- Years in US
 - 1-4 - 2
 - 5-9 – 6
 - 1-14 - 2
- Types of care / problems
 - Immunizations – 8
 - Stomach / bowel - 7
 - Head – 7
 - HTN – 5
 - Cholesterol – 3
 - Lungs or breathing – 1
 - Muscle / bone – 1
 - Pregnancy / female – 1
 - Thyroid - 1



Somali Men – 1 group = 5

- Age
 - 18-24 – 1
 - 25-29 – 1
 - 35-39 - 1
 - 45-49 – 1
 - >50 - 1
- Years in US
 - <1 – 1
 - 1-4 - 2
 - 5-9 – 1
 - 10-14 - 1
- Types of care / problems
 - “Check ups” - 4
 - Immunizations – 3
 - Head – 3
 - Heart – 1
 - HTN – 1
 - Cholesterol – 1
 - Lungs or breathing – 1
 - Muscle / bone – 1
 - Male – 1
 - Thyroid - 1



Providers/Nurses – 2 groups = 27

- Age
 - <28 - 4
 - 28-34 - 8
 - 35-39 - 5
 - 40-44 - 5
 - 45-49 - 2
 - 50-54 - 2
 - 55-59 - 1
 - >60 - 0
- Gender
 - Male - 6
 - Female - 22
- Total years in Practice
 - 1-4 - 5
 - 5-7 - 6
 - 8-10 - 8
 - 11-14 - 1
 - 15-19 - 1
 - 20-29 - 0
- 90% at RW for < 7 yrs



- Portion of Patients - Somali Refugees

- 5-9% - 5
- 10-14% - 5
- 15-19% - 2
- 20-24% - 5
- 25% - 10

- Age/Gender of Majority of Refugee Patients in Practice

- women > 18 y/o – 4 – 12%
- men > 18 y/o – 3-5%
- children < 18 y/o- 4 – 11%

- Provider Type

- DO - 1
- MD - 3
- APRN - 1
- PA – 2

- Specialty

- Family Med - 4
- OB/GYN - 1
- Urgent Care - 1
- Internal Med - 2
- Pediatrics - 1

- RN/MA - 18



Themes



Mutual Appreciation

- Provision of care
 - *Grateful to get care*
 - *High quality care*
 - *Fun to see the kids grow up*
 - *Caring demonstrated by providers; liked their provider*
- Somali Culture
 - *Family oriented*
 - *Non-litigious*
 - *Not narcotic seeking*
- Linguistic abilities
 - *Impressive that patients speak multiple languages*



Accessing Care


- Appointments
 - *Usually made by English-speaking member of family*
 - *PC in 3-7 days and longer for specialty but understand; didn't remember instructions & appointments*
- Transportation
 - *Poor public transportation with routes that don't work for some*
 - *Was available when first arrived but not later*
- Insurance
 - *Coverage is confusing*
 - *Medicaid doesn't pay for general physicals*



Navigating Healthcare System

- Reception rules
 - *Fifteen minutes late and they won't be seen when providers aren't on time; co-pay not immediately available so not seen*
 - *No appointments after 5pm*
 - *Should understand why many birthdays are January 1*
- Different levels of care
 - *Don't know when to go where*
- Continuity of care
 - *See many different providers*
 - *Don't they read the medical record?*
 - *Why do I have to keep coming back?*



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- Interpreters / Case Managers
 - *Need to make eye contact (not as important for providers)*
 - *Daughter acted as interpreter for mother – not good*
 - *Two providers need an interpreter and only one available; none show up*
 - *What kind of information are they really providing?*
 - *Case managers change all the time and we don't know*
 - Care management
 - *Appointment made for 1-2 people and 5-6 show up with problems*

Understanding Health and Illness

- Understanding symptoms
 - *What is meant by whole body pain or headaches?*
 - *How does PTSD manifest?*
- Prescriptions
 - *If I get one, then it is a good visit*
 - *Nurses and pharmacists are very good at explaining*
 - *Confusion about reasons for refills*
- Self care
 - *Don't change diet or exercise even when instructed*
 - *Use "traditional" remedies and prayer before and during care but didn't always divulge*



Solutions



Transportation

- *Better public transportation*
- *Continue to make transportation available longer*
- *Understand if they are late; bend the rules*



Appointments

- *Make next appointment prior to person leaving clinic especially referrals*
- *Check contact information each visit by several people*
- *Have longer first appointments*



Cultural Understanding

- *Nurses from Somali culture most important*
- *Translation of materials – immunizations*
- *Cultural education for providers and receptionists*
 - *Traditions*
 - *Religious beliefs*
 - *Symptoms*
 - *Whole-body pain*
 - *PTSD*
 - *Pain*
 - *fever*



Education

- *Recognition of existing patient education and orientation efforts but need more*
- *Types of appointments*
 - *PC, preventative, urgent, emergency, follow up*
- *Making appointment for each person with a concern*
- *Reasons for refills*
- *Providers need education about resources and roles; coordination with other groups providing services to refugees*

Interpretation / Case Management

- *Case manager on site*
- *Interpreter arrive with patient*
- *Obtain records from other sites, groups - EMR*
- *Need an interpreter or case manager who is also a cultural liaison*



Sharing Information

Community

- Presented at existing Somali group gatherings
- Provided information to IRC & CCS
- Education incorporated into existing Somali community meetings

Providers

- Presented at monthly provider meeting
- Discussions initiated with clinic administration
- Plans for initial appointments by interprofessional team of health sciences students under supervision

