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THE EXPERIENCE OF REFUGEES ACCESSING HEALTH AND SOCIAL SERVICES IN CALGARY: A HEALTH CARE AND SOCIAL PROGRAM PROVIDERS' PERSPECTIVE

Alda Garunia, GN

Institute for Community and Prosperity

Mount Royal University

Winter 2016

Principal Investigator: Judy Gleeson, PhD



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WHY



RICHARD LAUTENS / TORONTO STAR

[HTTP://WWW.THESTAR.COM/NEWS/GTA/2013/06/17/TORONTO_RALLY_URGUES_OTTAWA_TO_REVERSE_REFUGEE_HEALTH_CUTS.HTML](http://www.thestar.com/news/gta/2013/06/17/toronto_rally_urgues_ottawa_to_reverse_refugee_health_cuts.html)

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The Experience of Refugees Accessing Health and Social Services in Calgary: A Health Care
and Social Program Providers' Perspective

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In Completion for the Faculty of Community and Prosperity

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“EVERYONE HAS THE RIGHT TO A STANDARD OF LIVING ADEQUATE FOR THE HEALTH AND WELL-BEING OF HIMSELF AND OF HIS FAMILY, INCLUDING FOOD...MEDICAL CARE AND NECESSARY SOCIAL SERVICES...”

United Nations, 1948

BACKGROUND



Refugees in Canada

- A refugee is defined by Alberta Human Services as a person fleeing their own country for another because of a well founded fear of persecution (Alberta Health, 2016).
- 25,920 refugees settle from Syria since November, 4, 2015 (Government of Canada, 2016)
- As of February 2016, approximately 3,000 refugees were resettled in Alberta alone (Alberta Health, 2016)

The Interim Federal Health Program

- Pre 2012:
 - *insurance coverage on: medications, social services, vaccines, health assessments, psychological services and dental care*
- 2012 – 2015
 - *No insurance coverage for medications, chemotherapy, prosthetics, assistive devices, dental care, vision care, emergency services, psychological services*
- Current
 - *Liberal government fully reinstated IFHP*

REFUGEES IN ALBERTA



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Coverage

1. *Apply for coverage under the Alberta Health Care Insurance*
2. *Coverage for services to be provided under IFHP for 1 year , coverage for medication will be covered under the IFHP*
(Alberta Health, 2016, para 1).

Medavie Blue Cross

- *Health care providers providing services to refugees in Alberta as of January, 13, 2016*
- *Agencies providing social programs to refugees*
- *Various cities across Alberta*



EXPERIENCE OF REFUGEES



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- Refugees are twice as likely to encounter difficulty in accessing healthcare in comparison with other immigrants (Evans et al., 2014, p.3).
- Lack of information on how to access healthcare, language and communication are a major barrier to accessing necessary health services (Lan Fang, Sixsmith, Lawthorn, Mountain & Shahrin, 2015; Edge & Newbold, 2012; Campbell, Klei, Hodges, Fissman & Kitto, 2014).
- Refugees tend to arrive to Canada with less social capital, and delay seeking care because of insurance reasons (Caulford & D'Andrade, 2012; McMurray, Breward, Breward, Alder & Arya, 2013).

“REFUGEES ALSO FACE SOCIAL, CULTURAL AND ECONOMIC
HARDSHIPS IN HOST COUNTRIES. BARRIERS TO ACCESSING
SERVICES INCLUDE LANGUAGE, LIMITED FINANCES,
TRANSPORTATION, MISTRUST OF SERVICE PROVIDERS,
INSUFFICIENT INFORMATION ABOUT HEALTH AND SOCIAL
SERVICES AND DISCRIMINATION”

(Stewart et al., 2014, p. 1143)

HEALTH AND SOCIAL PROGRAM PROVIDER EXPERIENCE



- Canadian Doctors for Refugee Care [CDRC] (2015) “...resettled refugees are suffering or will suffer tremendous hardship by not being able to access medications. They are at risk of severe complications.” (para.17).
- The Canadian Nurses Students’ Association [CNSA]
- Canadian Nurses Association [CNA]
- Canadian Association of Social Workers [CASW]





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WHAT IS THE EXPERIENCE OF REFUGEES
ACCESSING HEALTH AND SOCIAL SERVICES IN
CALGARY BASED ON THE HEALTH CARE AND
SOCIAL PROGRAM PROVIDERS' PERSPECTIVE?



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METHOD

Method

- Qualitative research approach
- Thematic analysis of data collected from a questionnaire

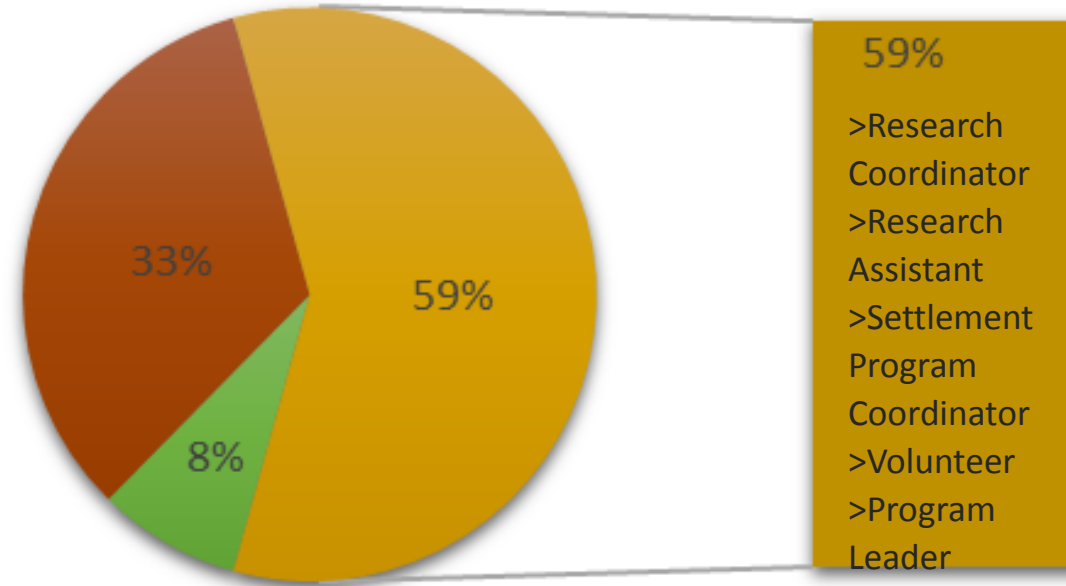
Recruitment and Participants

- Employees within Calgary directly serving the refugee population including: physicians, nurses, administrative staff, social workers, case managers, career and employment consultants, volunteers, managers, etc.
- Convenience Sample
- Primacy Health Clinic, Calgary Catholic Immigration Society, Mosaic Primary Care Network, Foothills Hospital Emergency Department, Alberta Works Marlborough and Radisson Center

Ethical Considerations

- Approved by Mount Royal University Human Research Ethics Board

Q: What is your role in the organization?



■ Doctor/Physician

■ Social Worker

■ Nutritionist

■ Manager

■ Secretary

■ Nurse

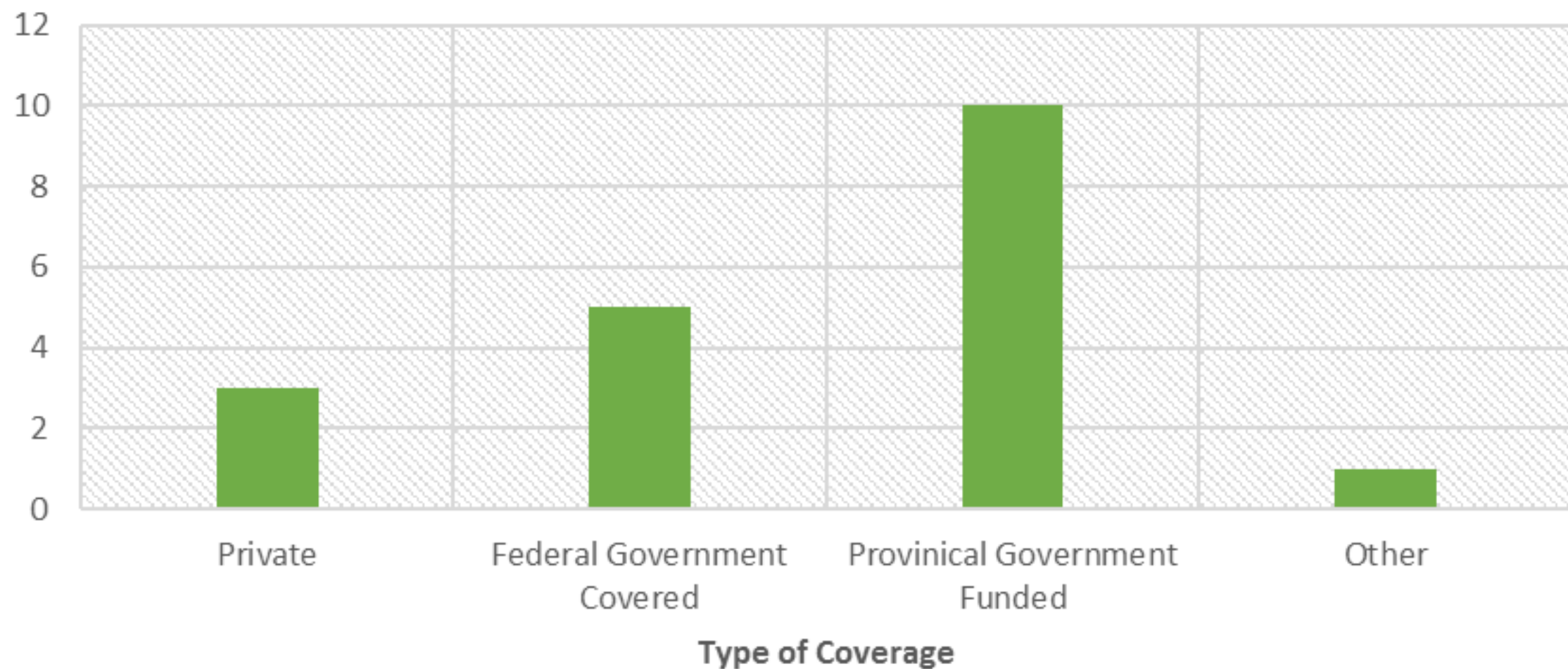
■ Career and Employment Consultant

■ Case Manager

■ Unit Clerk

■ Other

Q: What kind of health care coverage do you commonly see in your organization?



“THE CUTS TO THE IFHP MEANT THAT THE GOVERNMENT OF AB EXPANDED ITS MEDICAL COVERAGE SO THAT REFUGEE CLAIMANTS WHO WERE PREVIOUSLY NOT ELIGIBLE FOR ASSISTANCE UNDER THE AB WORKS INCOME SUPPORT PROGRAM NOW WERE. THIS MEANT A CHANGE IN INTAKE PROCEDURES AND A REVIEW OF EXISTING CLIENTS WITHOUT COVERAGE”

(Respondent 4)

Down Valley
COLLEGE



Alberta Health Services



Calgary Board of Education



CIWA
Calgary Immigrant Women's Association



THE CITY OF
CALGARY

Alberta
Education



Alberta

FINDINGS



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Language Barriers

*“Language barriers, limited English makes it very **difficult for refugees to seek out the help they need to express their concerns and address these problems....**” (Respondent 10).*



Culture

*“...At the same time, **cultural differences**. Some refugees have mental health issues but **they do not want to be accessing services**” (Respondent 8)*

*“...culture plays a **big role** where some chose to address their **health naturally rather than seeking medical attention**” (Respondent 9)*

FINDINGS

Information on Services and Accessing Services Available

*“...Lack of information - where do I go?
Am I eligible? How do I make an
appointment?” (Respondent 3)*

Transportation



FINDINGS



Suggestions for Improving Access to Services

- Improving Translation Services
- Enhancing Connections Between Disciplines
- Expanding Cultural Competency with Health and Social Care Providers
- Improving Available Programs and Developing a Branch of Refugee Healthcare



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RECOMMENDATIONS

- Increase communication between various agencies and sectors involved in refugee health and welfare
- Further research in: social and health agencies and sectors within Calgary to facilitate further understanding of dynamic situation.
- Research within the refugee community itself to understand the experience of the population accessing the available health and social programs available in Calgary.
- Creation of specialist nurse position to support refugees within the community, support other health and social care providers with facilitating communication and involvement with the refugee population.

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