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COMMITTEE

Promoting Refugee Women's Mental Health and Wellbeing

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Overview of IRC in Atlanta

Program components & implementation

Screening and referral findings

Lessons learned

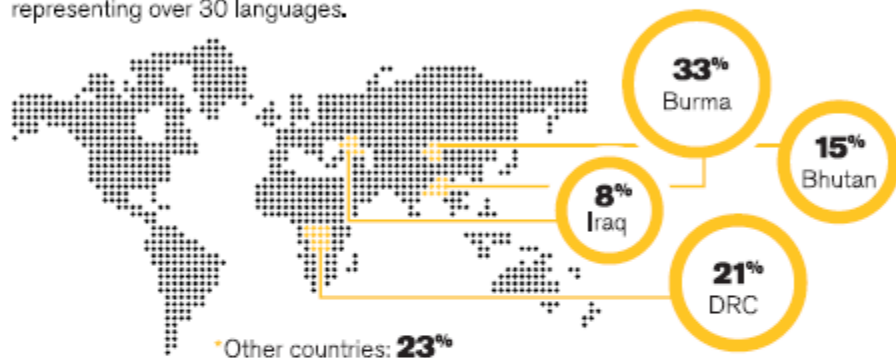
IRC in Atlanta: 2015 at a Glance



Over **3,575 individual refugees** were served across all program areas in 2015.

WHO WE SERVE

In 2015, **1,025 refugees** resettled in Georgia from **more than 20 countries** representing over 30 languages.



MAJOR PROGRAMS

Resettlement



Health & Wellness



Education & Learning



Economic Empowerment



Immigration Services



Citizenship Preparation

OUR SUCCESSES

2015 was one of the **most successful** years of job placements in the IRC in Atlanta's 35 year history.



544 newly-arrived refugees received full-time jobs within **6 months** of their arrival in Atlanta. **88%** of those jobs offered workplace benefits.



288 women participated in our health education and women-centered English classes and received access to women's health and family planning services.

944 refugees served in adult education programs, including cultural orientation, multi-level English classes and vocational skills training.

269 refugee youth participated in our after school and summer programs.



1,531 clients provided with immigration services, including **518** with support in applying for U.S. citizenship. **98%** of applicants successfully achieved U.S. citizenship.

551 volunteers contributed **38,898 hours of service**, deepening our engagement in the Atlanta metro area while helping clients to fully integrate into their communities.



Connecting with women during the early months of resettlement has the potential to impact their long-term well-being and success in the U.S.



Mental Health Program

Access to Quality Mental Health Services

Screening: emotional distress, GBV, torture

Newly arrived adult clients

Client referral to community providers

Intensive case management services



Mental Health Program

Supportive Infrastructure

Screening after cultural orientation with interpretation

Staff training: trauma informed care, interpretation

Self care and psychologist consultation

Collaboration across all IRC in Atlanta programs



Mental Health Program

Health Promotion & Community Partnerships

Mental health literacy

Ongoing & sustained collaboration with community partners



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Emotional Distress Screening





Emotional Distress: Findings

RHS-15: anxiety, depression, PTSD

Emotional distress: 75% of 75 women exhibited symptoms of anxiety, depression or PTSD; little variation noted by global region

Support: 36% of women expressed a need for and accepted referral; wide variation noted by global region (14%-100%)



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Bridge to Safety: Screening for Gender-based Violence

Bridge to Safety

Screening

- Proactive screening of all newly arrived female refugees
- Tested two screening methods

Support

- Safety Planning
- Referrals for legal, health, and/or psychosocial support services

Partnerships

- Establish partnerships with DV/SA providers to ensure referral networks and effective response for survivors and their families

Training for all frontline staff on how to support survivors



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Direct Screening for Violence

Directions: This screening will help identify clients who have experienced gender-based violence in the past or are experiencing violence now and need help. Complete screening in-person as part of an existing individual meeting; a separate meeting should not be scheduled only for screening. Screenings must be conducted in a private space with no one else present other than the client and an interpreter (in-person or phone) if needed and if the client consents. Information from this screening MUST BE KEPT CONFIDENTIAL and can only be shared if the client signs a release of information or if the client is a danger to her(him)self or others.

A note to the interviewer: There are a lot of factors that will affect whether or not survivors feel comfortable disclosing their experiences to you. Some survivors are more comfortable with someone of the same sex, ethnic group, or who speaks the same language as themselves, whereas others are more comfortable with someone of a different sex, ethnic group, or language. If you have the impression that the client you are screening may not be comfortable disclosing experiences of violence to you, discuss with your Supervisor the possibility of identifying a different staff member to complete this screening.

Introduction: "Some of the women we see at IRC have been hurt by a family member, someone they know, or a stranger. This can happen in the US, back home, or anywhere. Sometimes women are too afraid to talk about being hurt since they think it is very personal, that no one will understand, or that it was their fault. Because many women experience violence, and because there is help available, we have started asking every woman if she is being hurt by anyone. I am going to ask you a few questions about your experiences. You do not have to answer any of these questions if you do not want to. All you have to do is tell me you don't want to answer. You don't need to explain why. [If you want to talk to someone but prefer to talk to a woman, let me know and I can connect you to one of my colleagues for support.]

It is important for you to know that I will keep what you tell me confidential, including any notes I write down. This means I will not tell anyone other than my supervisor (including anyone in your family) what you tell me unless you ask me to or unless it is information I need to know because a child is in danger. I want you to trust and so that you can make decisions about you have any questions about what I just explained.

AFTER completing the screening, if there is an answer: "Even if you do not face these problems, you know that IRC is a safe place to come to for help. Sometimes clients tell me they do sometimes bad things that happened in the past, and I want you to know that you can come to IRC for help."

National Domestic Violence Hotline: 1-800-799-7233
(Insert local hotlines here)



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Direct Screening for Violence

For the interviewer:

Client Name/ID: <input type="text"/>	Completed By: <input type="text"/>	Date: <input type="text"/>	Staff Time Spent: <input type="text"/>
Language Used: <input type="text"/>	Interpreter Present? <input type="checkbox"/> Phone <input type="checkbox"/> In-person <input type="checkbox"/> No <input type="checkbox"/>	Interpreter Time Spent: <input type="text"/>	
Date of Arrival: <input type="text"/>	If client discloses violence, date of disclosure: <input type="text"/>		

- Does someone in your family try to control where you go, what you do, or what you say in a way that makes you feel afraid or helpless? Yes No Don't know No answer
- Have you ever been threatened or physically hurt by your partner or someone you know? Yes No Don't know No answer
 - Have you ever had any serious injuries as a result? Yes No No answer N/A result
- Have you ever been forced to participate in sexual activities that made you feel uncomfortable or unsafe? This could be by your partner, a stranger, or someone you know. Yes No Don't know No answer
- If any of these situations has happened to you, have you ever told anyone about it before? If so, who did you tell and what happened?

- Does someone in your family try to control where you go, what you do, or what you say in a way that makes you feel afraid or helpless?
- Have you ever been threatened or physically hurt by your partner or someone you know?
- Have you ever been forced to participate in sexual activities that made you feel uncomfortable or unsafe? This could be by your partner, a stranger, or someone you know.
- If any of these situations has happened to you, have you ever told anyone about it before? If so, who did you tell and what happened?
- Do you feel safe going home after this appointment today?



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Bridge to Safety: Findings



Bridge to Safety: Findings

GBV: 21% of 68 women who were screened directly disclosed an experience with domestic violence or sexual assault

Support: 79% of women who disclosed expressed a need for and accepted referral

Co-morbidity: 100% of women who disclosed also screened positively for emotion distress



Lessons Learned

1. Women are open to talking about issues, but they need ongoing support to accept referrals and attend services
2. Staff need ongoing training and self care support
3. Community providers must be culturally informed & provide linguistically appropriate interpretation
4. Sustaining partnerships is an ongoing process



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Contact us

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Thank you

