How Communities Can Respond to Grief

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Tweet us your questions and thoughts during the webinar! @NPCT_Refugee
Overview

- Introduction
- Grief in a refugee context
- Signs and symptoms
- Coping
- Mental health screening
- Mental Health First Aid (MHFA)
Grief

- Grief is a natural response or reaction to loss and trauma
- It is multifaceted and occurs in various situations
- Loss of loved ones, loss of property, loss of citizenship/status, loss of serious relationship/divorce, loss of social capital
- Culture and context play a strong role in shaping grief reactions following loss and trauma
Grief in a Refugee Context

❖ **Pre-Resettlement**
- **Traumatic events**
  - Detention and abuse
  - Traumatic loss
  - Exposure to conflict
- **Living difficulties**
  - Uncertain future
  - Lack of basic needs
  - Threat to family
- **Funerals & Rituals**
  - Normal process
  - Interruption

❖ **Post-Resettlement**
- **Adaptation difficulties**
  - Social capital
  - Family relationship
  - Language and culture
  - Loneliness and isolation
- **Funerals & Rituals**
  - Normal process
  - Modification
Signs and Symptoms of Grief

- Physical
- Emotional/Psychological
- Behavioral
Coping with Grief

- Coping strategies vary depending on health, coping styles, culture, family support, and other life experiences
  - Rituals, prayers, pilgrimage
  - Spirituality
  - Exercise or other distractions
  - Exhibiting positive changes from the experience of loss
  - Self-destructive activities (e.g., excessive drinking, illegal drugs, violence)

- Coping also depends on family and community support

- Prolonged grief may be addressed through community engagement and professional services
  - Support groups
  - Mental Health First Aiders
  - Evaluation from PCP
  - Counseling services
### Refugee Mental Health Screening

<table>
<thead>
<tr>
<th>Total number of states conducting mental health screening</th>
<th>RHS-15 only</th>
<th>RHS-15 + others</th>
<th>Others only</th>
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<tbody>
<tr>
<td>31</td>
<td>16</td>
<td>9</td>
<td>6</td>
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*Source: As reported to ORR*
Mental Health First Aid (MHFA) is the initial help offered to a person developing a mental health or substance use problem, or experiencing a mental health crisis. The first aid is given until appropriate treatment and support are received or until the crisis resolves.

- Originated in Australia and currently used in 23 countries
- Adult course for individuals 18 years of age and older; available in both Spanish and English
- Youth MHFA is designed to teach adults how to help an adolescent (ages 12-18) experiencing a mental health or addiction challenge or crisis; available in Spanish and English.
- MHFA included in SAMHSA’s National Registry of Evidence-based Programs and Practices
Who We’re Reaching with Mental Health First Aid Training

- 80% (N=700): Refugees
- 20% (N=177): Refugee Serving Staff

Country of Origin

- Bhutanese: 579
- Burmese: 43
- Congolese: 26
- Iraqi: 10
- Somali: 13
- Others: 29
Refugees and Resettlement Staff Trained in MHFA by State (N=877), 2014 – 2016

- Pennsylvania: 283
- Texas: 109
- Nebraska: 104
- Minnesota: 85
- Ohio: 81
- New York: 60
- Kentucky: 30
- Arizona: 27
- Alaska: 27
- Vermont: 24
- Iowa: 20
- Tennessee: 20
- Georgia: 7
- Iowa: 20
- Vermont: 24
- Alaska: 27
- Arizona: 27
- Kentucky: 30
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What Participants Learn

- **Risk factors and warning signs** of mental health and substance use problems
- **Information** on common mental health problems (e.g., depression, anxiety, trauma, psychosis) and substance use
- **A 5-step action plan** to help someone who is developing a mental health problem or in crisis
- Available evidence-based professional, peer and self-help resources
A Case Vignette

Ms. Flower is a newly arrived refugee. She was raised by a single mom along with four younger siblings. Her father died in the refugee camp due to chronic physical and mental illness. Ms. Flower had witnessed harassment of her parents by the security forces in her country of birth. Her father was arrested, tortured and imprisoned before becoming a refugee. Six months after her arrival in the United States, Ms. Flower got married. She still felt responsible to support her mom and other siblings even after marriage; she continued to send a monthly financial contribution to her mom to cover rent and utilities. Soon after marriage, she migrated to another state with her husband, away from community members who shared her language and culture. Ms. Flower and her husband have limited English proficiency. They started working in the same meat packing company. In the workplace, Ms. Flower made new friends and often hugged them. Her husband did not like her hugging other men at the workplace, and was jealous of her closeness with her male friends. Ms. Flower and her husband developed a bad relationship at home. Ms. Flower was hesitant to divulge this domestic conflict with friends and relatives. Over time, she became less interactive and isolated.
## Why Mental Health First Aid

<table>
<thead>
<tr>
<th>Mental health problems are <strong>COMMON.</strong></th>
<th>Learn how to <strong>NOTICE</strong> when someone needs help</th>
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</thead>
<tbody>
<tr>
<td><strong>STIGMA</strong> is associated with mental health problems.</td>
<td><strong>UNDERSTANDING.</strong> Promote</td>
</tr>
<tr>
<td><strong>PROFESSIONAL HELP</strong> is not always on hand.</td>
<td><strong>SUPPORT ONE ANOTHER.</strong> Encourage community members to</td>
</tr>
<tr>
<td>Individuals with mental health problems often <strong>DO NOT SEEK HELP</strong></td>
<td>Help more people <strong>GET THE HELP THEY NEED.</strong></td>
</tr>
<tr>
<td>Many people are not well informed and don't know <strong>HOW TO RESPOND.</strong></td>
<td><strong>INTERVEN.</strong> You might <strong>SAVE A LIFE.</strong></td>
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</tbody>
</table>

*Source: mentalhealthfirstaid.org*
Where Mental Health First Aiders Can Help

- Prevention
- Early Intervention
- Treatment

Where Mental Health First Aid can help on the spectrum of mental health interventions

Source: mentalhealthfirstaid.org
Questions

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MENTAL HEALTH FIRST AID/GARDEN OF HOPE

Azeb Yusuf
February 15th, 2017
Refugee Perspective of Mental Health

Depending on the country of origin, refugee populations’ perspective of mental health may be different.

- Ethiopia
- Burundi
- Congo
- Iraq
- Somali
Mental Health First Aid (MHFA)

Mental Health First Aid training was highly needed in Houston due to the increasing number of completed suicides in the following refugee populations:

- Ethiopian
- Eritrean
- Bhutanese
Grieving Process

Grieving processes are primarily conducted in collaboration with:

- Mosques
- Churches
- Communities
- Social Services
Why I chose Mental Health First Aid

From a personal perspective, I chose Mental Health First Aid education for the refugee community, based on first-hand experience of losing a co-worker and the community’s rejection of common, Westernized services offered by health care service providers.

- Psychiatrist
- Q & A
- Misdiagnosed
Mental Health First Aid

Mental Health First Aid hosted by the Office of Refugee Resettlement staff was very successful in part because it involved

- Faith-Based Organizations
- Different community leaders
Understanding Mental Health

For many refugees it has been very difficult to express the need for mental health services. Due to the Mental Health First Aid training, we were able to understand specific terminology for mental health disorders utilized by health care providers in the U.S., such as:

- Depression
- Post Traumatic Stress Disorder (PTSD)
- Anxiety
- Schizophrenia
Garden of Hope/Mental Health

The project is funded by the City of Houston Health Department and incorporates:

- Community awareness
- Education
- Gardening activities
Resettlement

The first “home” for refugees must focus on providing accurate information, services on a case by case basis, and training to staff members, especially those working with complex medical cases. Important components of any training (also included in MHFA) are as follows:

- Basic Medical Terminology
- Resources
- Listening & Problem-Solving Skills
Thank you.

AZEB YUSUF
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