

Strategies for responding to the psychosocial needs of Afghan communities: Two state approaches

October 2, 2023

Minnesota Center of Excellence in Newcomer Health

Acknowledgment

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Learning Objectives

- Identify how states can more effectively identify and meet the psychosocial needs of Afghan Newcomers
- Explore two approaches to community needs assessment
- Learn strategies and tactics for forming sustainable partnerships for responding to emergent psychosocial needs
- Explore two strategies for capacity building across different phases of community resettlement
- Describe at least one creative utilization of existing infrastructure and relationships during a rapid response

Today's Speakers



Jan Jenkins, PhD
Colorado Refugee
Services Program



Cathy Vue, MPH
Washington Department of
Social and Health Services



Patricia Shannon, PhD, LP
School of Social Work,
University of Minnesota
(Moderator)

Strategies for responding to the psychosocial needs of Afghan communities: Colorado

Jan Jenkins, Ph.D.
State Refugee Mental Health Coordinator
Colorado Refugee Services Program



COLORADO
Department of Human Services

Initial Response

- Colorado Refugee Services Program (CRSP)
 - Small Staff
 - No Mental Health Coordinator
- Influx of Office of Refugee Resettlement (ORR)-eligible Afghans and Funding
 - Meant increasing capacity & tapping existing resources
 - Created State Refugee Mental Health Coordinator position
 - Hired staff
 - Some temporary
 - Partnership with Community Foundation

Refugee Mental Health Coordinator

- Dedicated focus on mental health
- **Needs Assessment with Stakeholders**
 - General mental health (MH) clinics, specialty MH clinics and community organizations serving refugees, resettlement agencies, medical screening clinics, health department and CO Newcomer Center of Excellence
 - Conduct needs and capacity assessments
 - Build partnerships



Needs Assessment

- Statewide
 - Needs vary across state-mountains/rural vs. Metro Denver
- Immediate vs. Intermediate-long term needs/goals
- Build and Strengthen Partnerships
 - Existing partners-collaboration, immediate needs
 - New Partnerships-expand capacity, widen psychosocial network, enhance cultural responsiveness
 - Collaboration with Rose Community Foundation- enhance capacity
 - Contracts, fiscal, community reach

Immediate Need

➤ Mental Health Screening of Afghans

- Consistency and Reach
 - Expanding Capacity
 - Enhancing Quality
- Address Challenges
 - Volume
 - Transportation
 - Staffing Shortages



What's At Stake

- Minimizing impact of trauma
 - Facilitating successful community integration
- Identifying mental health needs quickly and providing care
- Increasing Afghans' awareness of available mental health support
- Normalizing stress responses to traumatic events
- De-stigmatizing accessing mental health care

Screening Model

- Community MH partners outside of screening sites
 - University of Colorado Medical School Refugee and Immigrant Clinic
 - Asian Pacific Development Center
- Go to Afghans vs. having them come to us
 - Reduce transportation challenges
 - More relaxed setting
 - Re-establish regular screening protocol
 - Refugee Health Screener-13 (from RHS-15) and clinical interview
- Additional time
 - Take time needed to hear how Afghans were doing
 - Provide support and education
 - Continuity of care from mental health screening to services

Efficacy

- Compared to Primary Care Provider during the Domestic Medical Exam (DME) conducting MH screening
 - More Afghans identified with MH needs using enhanced model
- Acceptance of mental health referrals and transition to care
- Pilot project with small sample size
 - N=91 (39 females, 52 males)
 - Preliminary findings inform decision making



Impact of screening model

Percentage of Afghans Identified with MH Needs

PCP MH Screening in DME	9%
Enhanced Screening Model	31%

Enhanced Screening Acceptance of MH Referrals

Overall Percentage of those screened	22%
Women	31%
Men	15%
Percentage of those accepting referrals who had negative RHS score	7%

Intermediate-Longer Term Needs

- Mental Wellness Requests for Proposals (RFPs)
 - Negotiate Contract-partnership with Rose Community Foundation
- Establish Priorities
 - Expand programs to more of state
 - Widen community partnerships
 - Ethnically-based and
 - Smaller organizations without federal funding
 - Broaden concept of mental wellness
 - Include prevention, education so symptoms don't escalate
 - Meets ORR objectives - decrease social isolation and stigma associated with mental health

Intermediate-Longer Term Needs (continued)

➤ RFPs

- Strengthen Network of Collaborating Partners
- Innovation in grant proposals
- Selection of populations to serve
 - Draw from different funding streams
 - ORR-eligible Afghans
 - ORR-eligible Ukrainians
 - All ORR-eligible

Lessons Learned – Immediate and Future Needs

- Build the plane while flying
 - Address immediate needs
 - Plan for longer term, execute initial steps
 - Tap existing partners for immediate needs
 - Build sustainable partnerships for future needs
 - Align funding sources and methods with program goals for immediate and intermediate needs
 - Short-term vs. intermediate term contracts

Lessons Learned – Staffing & Partners

- Align staffing with needs & funding
 - Need dedicated mental wellness staff?
 - Temporary vs. permanent positions?
 - Build sustainable capacity
- Diversify Partnerships
 - Capacity building, technical assistance as needed=investment in the future
- Strengthen Network Collaboration



Lessons Learned – Funding & Flexibility

- Anticipate Funding Fluctuations
 - Funding for specific populations
 - Limited time frame
 - Federal policy changes
 - Preparation of contractors
- Be prepared to change directions quickly

Contact and Additional Information

Jan Jenkins, Ph.D.

Colorado Refugee Mental Health Coordinator

jan.jenkins@state.co.us

[Colorado Refugee Services Program \(https://cdhs.colorado.gov/crsp\)](https://cdhs.colorado.gov/crsp)

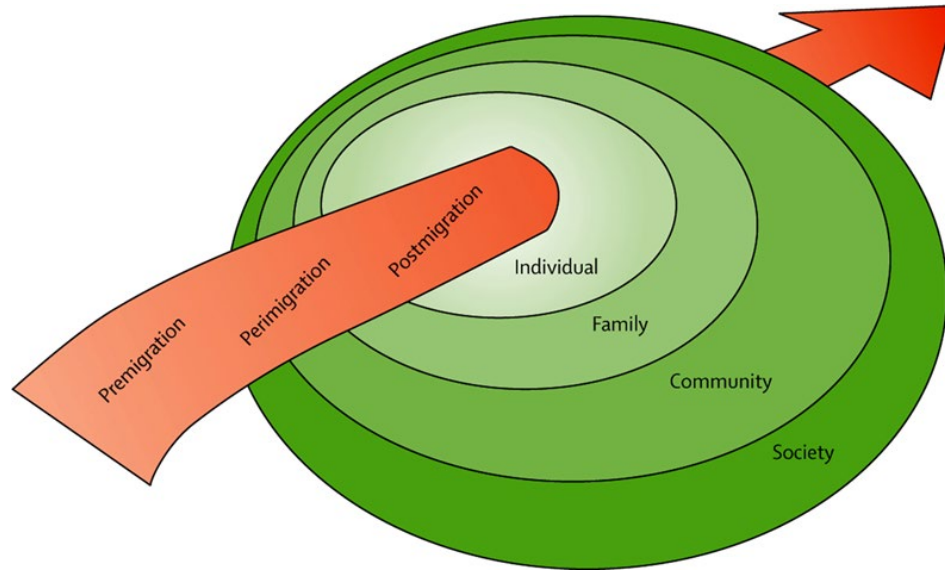
Building the Plane While Flying It:
**Washington's Response to
Afghan Mental Health Needs**

Cathy Vue, MPH (she/her/hers), Health and Wellness Program Manager

WA DSHS Office of Refugee and Immigrant Assistance

October 2, 2023

Mental Health & Migration



Key Health Milestones



- Overseas medical examination



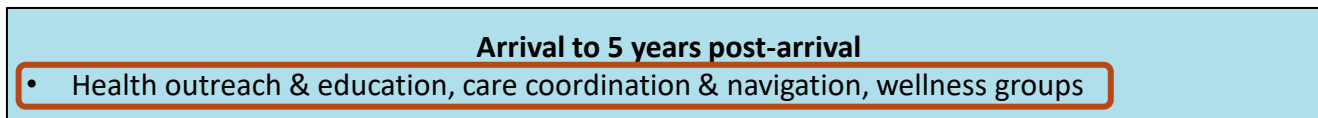
- Health insurance enrollment
- Domestic medical screening, including emotional wellness screening
- Establish primary care



- Primary care follow-up
- Immunizations per catch-up schedule

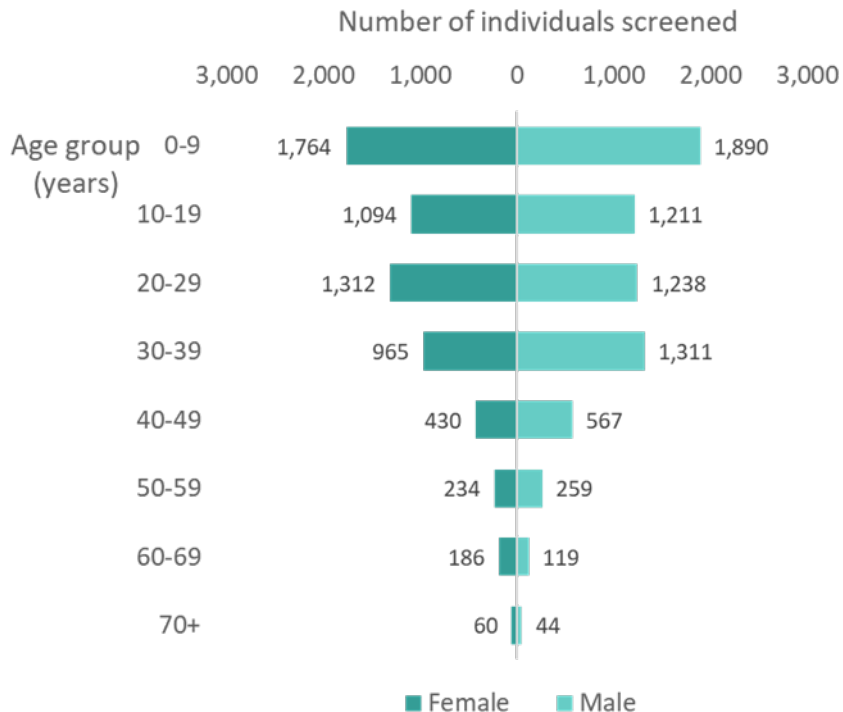


- Immunization adjustment of status examination (I-693)



Who is arriving into Washington? Age, Gender, and Pregnancy Status

Individuals who received a domestic medical exam, FFY 2018 – 2022, WA State N=12,684



44% (n=5,535) of individuals are children <18 years old

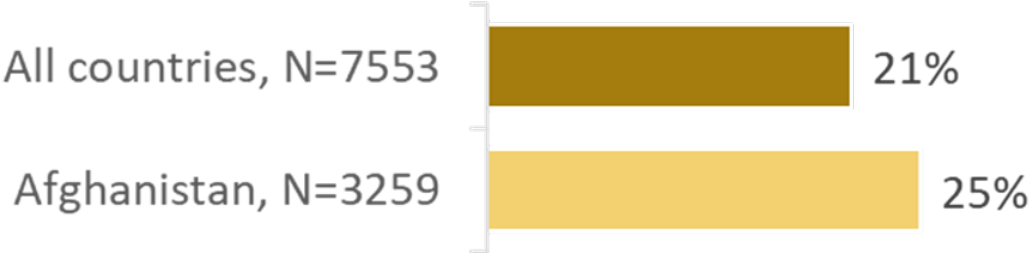


12% (n=363) of women 14-44 years old were pregnant at the time of screening

2% (n=229) of individuals were 65 years or older at the time of screening

% Positive for Emotional Distress by Country of Origin

Individuals ≥ 14 years old screened using Refugee Health Screener (RHS-15),
FFY 2018 – 2022, WA State



*Positive RHS-15 indicates emotional distress

ORIA Funding

**2017 and
before**

- ORR Refugee Set-Aside Funding (RSS)
- 3 service providers
 - MH 1:1 Counseling
 - Support Groups
 - Workshops

2018-2020

- ORR Refugee Set-Aside Funding (RSS)
- 1 service provider
 - MH 1:1 Counseling
 - Support Groups

Community Mapping 2020

What's everyone saying?

Refugee MH Providers

- Limited Capacity
- Training Needs
- Medicaid Reimbursement Model
- Limited MH Psychosocial Services

Refugee Clinics

- Declination to MH Referrals (RHS-15)
- Long Wait Times for Clients
- No Centralized MH "Hub"

VOLAG and Service Providers

- Long Wait Times for Clients
- Limited Options for Refugee MH
- Training Requests
- Limited MH Support Services

Ethnic Based Organizations

- Mental Health Stigma
- Limited MH Professionals from refugee communities

Refugee MH Program 2.0

- **Program Focus Areas**

Training

Partnerships/
Connection to
Services

Direct/
Support
Services

Workforce
Development

Policy

- **Program Goals**

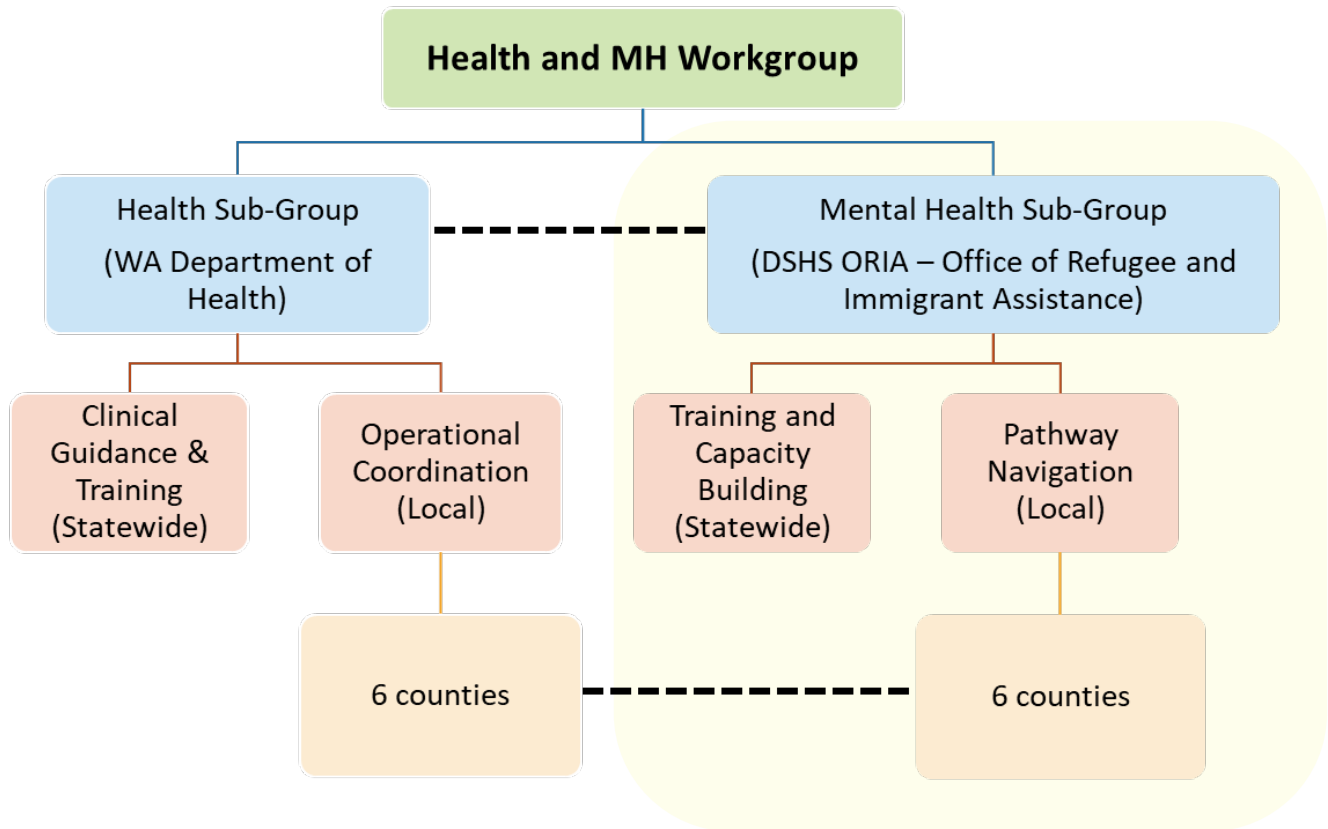
- Increase MH training, capacity, and networking for refugee-serving agencies;
- Improve coordination of MH referrals and connection to services; and,
- Reduce barriers and gaps in mental health support services for refugees;
- Increase the refugee MH workforce.

Life Changing Events

- January 2020 - COVID-19
 - Worldwide pandemic
- August 2021 - Evacuation from Afghanistan
 - Operation Allies Welcome
- February 2022 - War in Ukraine
 - Uniting for Ukraine



Afghan Response Health & MH Workgroup



WA Afghan Emotional Wellness and Mental Health Work Group

- **Goal:** To support the emotional wellness of incoming individuals from Afghanistan by increasing access to mental health, behavioral health, and psychosocial support programs, services, and practices in both community and clinical settings
- **Activities:**
 - **Communication:** Provide situational updates focused on health (clinical and MH/BH)
 - **Coordination:** Support systems navigation and planning of MH/BH programs/services
 - **Training:** Technical assistance for MH/BH-related topics
- **Deliverables:**
 1. WA Afghan Emotional Health and Wellness Community Resource Directory
 2. Community Scan on Afghan Emotional Wellness Gaps and Needs
 3. Training and Skills Building Needs Assessment related to MH/BH

WA Afghan Emotional Wellness and Mental Health Work Group (continued)

- **Participants:** Refugee behavioral health agencies, public health, integrated BH clinics, resettlement agency case management health leads, community-based organizations, state agencies.
 - *Ask: Mental Health/Behavioral Health Subject Matter Experts (SMEs)*
 - *Ask: Afghan Health Subject Matter Experts (SMEs)*
- **Logistics:** Weekly meetings in October to provide feedback on activities and updates, build infrastructure. Transition to bi-weekly meetings in November and onward.

Mapping & Community feedback regarding Mental Health

- **Applied the focus areas...**

Training & Professional Development

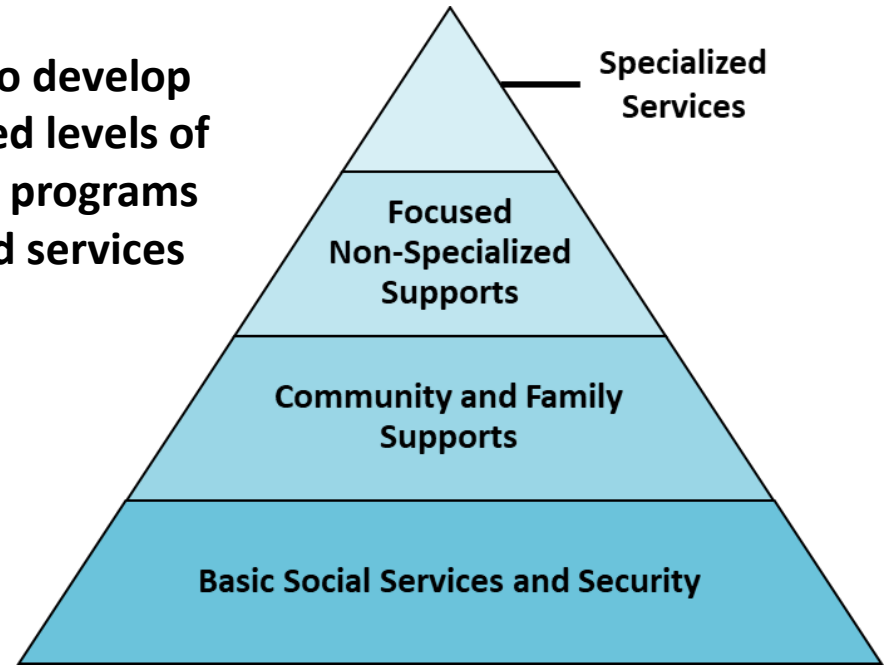
Partnerships & Connection to Services

Direct & Psychosocial Support Services

MH Workforce Pathway

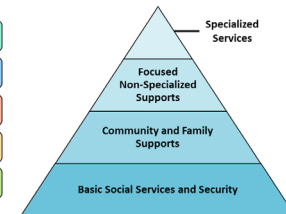
Policy

... to develop
tiered levels of
MH programs
and services



Inter-Agency Standing Committee MHPSS Intervention Pyramid
[IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings, 2007 \(https://interagencystandingcommittee.org/mental-health-and-psychosocial-support-emergency-settings-0/documents-public/iasc-guidelines-mental\)](https://interagencystandingcommittee.org/mental-health-and-psychosocial-support-emergency-settings-0/documents-public/iasc-guidelines-mental)

What does this look like? Services by Focus Area



	Training & Professional Development	Partnerships & Connection to Services	Direct & Psychosocial Support Services	MH Workforce Pathway	Policy
Specialized Services			*Medicaid		
Focused Non-Specialized Supports	Psychological First Aid (PFA) to Support Clients Affected by the Crisis in Afghanistan	MH Navigation Program Afghan Core Health Team at FQHC	Trained Peer-led support groups	Peer Support Specialists	
Community and Family Supports			Community-led support groups		
Basic Social Services and Security					

Refugee Health Promotion – Providers & Scopes of Service

Provider (county)	Health Education & Outreach	Health and/or Mental Health Navigation	Wellness Groups	Other
Afghan Health CBO			X	X
Adult Hospital Clinic (Complex Medical)		X		
Peds Hospital Clinic (Complex Medical)		X		
Federally Qualified Health Center		X		
Resettlement Agency	X	X	X	
Resettlement Agency (Complex Medical)		X		
Community Mental Health CBO	X	X	X	
Ukrainian CBO/Community MH			X	
Resettlement Agency	X		X	
Ukrainian Health CBO	X		X	

Lessons

- Value of partnerships
- Community level of readiness
- Funding doesn't solve everything... at least not right away
- Adaptation of model to other communities and regions
- This is hard work. This is valuable work.

Acknowledgments

Contact Information:

Cathy Vue

cathy.vue@dshs.wa.gov

- Contracted Providers and Community Partners
- Jennifer Malloy, WA DSHS ORIA Administrator
- Jasmine Matheson, WA State Refugee Health Coordinator
- DSHS Office of Refugee and Immigrant Assistance, Contracts, Fiscal
- DOH Refugee Health Team
- ARHC and ARHC MH Sub-Committee
- Office of Refugee Resettlement, Refugee Health Division
- My Partner
- [Switchboard \(https://switchboardta.org/\)](https://switchboardta.org/)

Questions?



Center of Excellence Reminders!

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https://public.govdelivery.com/accounts/MNMDH/subscriber/new?topic_id=MNMDH_463) for training announcements and other guidance and resources.

Upcoming trainings at

[Center of Excellence in Newcomer Health: Webinars](http://www.health.state.mn.us/communities/rih/about/coe.html#webinar)
(www.health.state.mn.us/communities/rih/about/coe.html#webinar)

NEWCOMER HEALTH



This ECHO series is designed to increase medical providers' knowledge of the resettlement and health issues of newcomers, including refugee, immigrant and migrant (RIM) populations. It will review resettlement pathways, evidence-based screening recommendations, and more common diagnoses and treatment approaches for pediatric and adult populations.

Sessions include brief didactic presentations by immigrant health experts and discussion of participant-submitted cases. Participants are highly encouraged to submit de-identified patient cases for group discussion and expert consultation.

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Last Tuesday of the month
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UPCOMING SESSIONS

- OCTOBER 25**
Introduction to Refugee Resettlement
- NOVEMBER 29**
Afghan Health Considerations
- JANUARY 31**
Ukrainian Health Considerations



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