



Heartland Health Outreach, Inc.

# PREGNANCY & POST-PARTUM SUPPORT GROUP FOR REFUGEE WOMEN: USING CULTURAL HUMILITY TO FACILITATE A MULTI-AGENCY COLLABORATION & LAUNCH A COMMUNITY-BASED PROGRAM

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## BACKGROUND

Rates of prenatal care within refugee populations are low, both in Chicago and around the world (Gagnon, Zimbeck, Zeitlin, & The ROAM Collaboration, 2009). A group of Chicago-area resettlement agencies, noting that fear and misconceptions prevented many of their pregnant refugee clients from accessing prenatal care, decided to create a multicultural pregnancy and post-partum support group providing culturally-sensitive educational workshops and social support for refugee women (Murray, Windsor, Parker, & Tewfik, 2010). External funding and technical support was secured through a collaborative relationship with Women's Health Foundation, who jointly convened this project along with Heartland Health Outreach Refugee Health Programs.

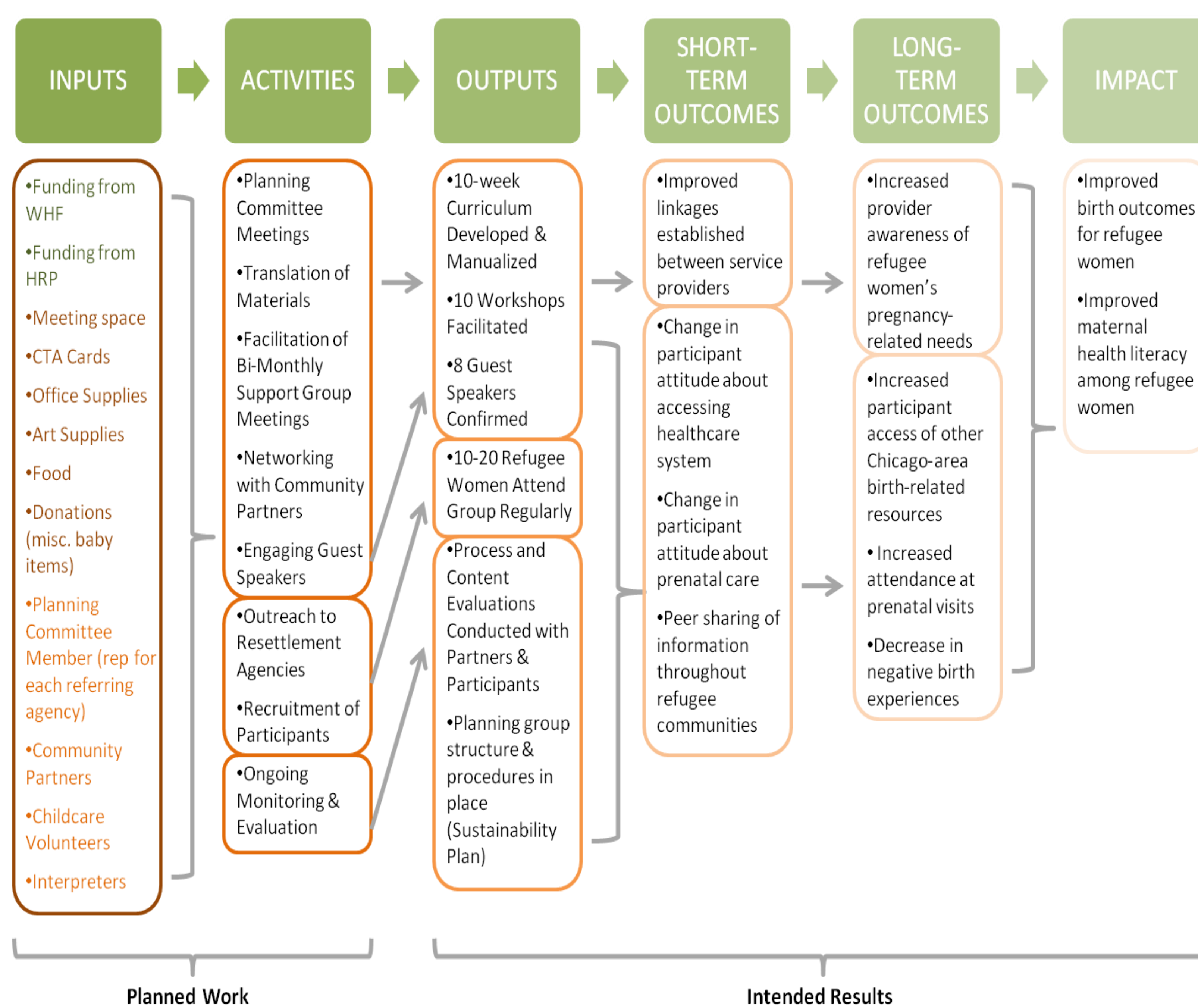
### Planning Committee Partner Agencies



## PURPOSE

In addition to the stress of resettlement and adjustment, refugee women who are pregnant face the challenge of navigating pregnancy and delivery in an unfamiliar culture and healthcare system. The purpose of this effort is to improve maternal health literacy, build capacity to navigate the healthcare system and decrease social isolation among pregnant and post-partum refugee women. This intervention has the secondary purpose of creating new linkages between participants and resources external to the resettlement agencies that are locally available but typically inaccessible.

## LOGIC MODEL



## COMMUNITY HEALTH PROFILE

Support group participants are 29 newly-resettled pregnant or recently post-partum refugee women from Bhutan, Burma, Burundi and Iraq. While each ethnic group brings unique health concerns, certain chronic physical and mental health conditions, exacerbated by poor camp living conditions and lack of access to healthcare, may be expected (Min. Dept. of Public Health, 2010). Social isolation is common. Limited English language ability and low health literacy are barriers to health education. Most are eligible for Medicaid, food stamps and other governmental benefits.

### Support Group Pilot Curriculum

WEEK	TOPIC	FACILITATOR
Week 1 - 1/12/11	Welcome & Introductions	Support Group Planning Committee
Week 2 - 1/26/11	Pregnancy 101	Planned Parenthood of Illinois
Week 3 - 2/9/11	Childbirth & the US Healthcare System	Birthways, Inc.
Week 4 - 2/23/11	Promoting Pelvic Health through Pregnancy and Beyond	Women's Health Foundation
Week 5 - 3/8/11	Hospital Field Trip & Tour of Birth Center	Illinois Masonic Hospital
Week 6 - 3/23/11	Good Nutrition during Pregnancy	Planned Parenthood of Illinois
Week 7 - 4/13/11	Promoting Good Mental Health	International FACES, Heartland Health Outreach
Week 8 - 4/27/11	Early Childhood Development & the Importance of Play	Chicago Children's Museum
Week 9 - 5/11/11	Prenatal Yoga	YogAdenia
Week 10 - 5/25/11	Group Baby Shower & Wrap-Up	Support Group Planning Committee

## INTERVENTION PLAN

A planning committee comprised of representatives from six refugee service providers and Women's Health Foundation formed to create and implement the support group. The planning committee developed the curriculum based upon observed needs of refugee participants. Educational workshops are facilitated by expert guest speakers from external partner organizations. Participants are recruited by planning committee members. Attendance incentives include CTA cards, snacks and childcare. On-site interpretation is provided.

## EVALUATION PLAN

### PHASE 1

- Output Tracking in Monthly Service Log
- Attendance Data at Support Group Sessions
- Observational Data from Support Group Sessions
- Partner Satisfaction Surveys
- Semi-Structured Interviews with Guest Presenters

### PHASE 2

- Structured interviews and focus groups with participants

## PRELIMINARY FINDINGS

Eight support group meetings have been facilitated to date. Phase 1 preliminary findings are the following: **Attendance data** reveals sporadic and regular attendance at the individual and group level. **Planning committee members** report a high degree of satisfaction with the collaboration and value the support group as a service to their clients. Despite cultural and linguistic challenges, **guest presenters** express interest in future collaboration. **Observational data** indicates that educational workshops may be an acceptable format for learning and selected topics are relevant. Level of engagement varies among participants and across sessions. Social support building across linguistic lines is challenging to foster. Quality of interpretation varies.

## IMPLICATIONS

A multi-cultural support group providing targeted, relevant educational workshops may be a culturally-appropriate way to improve maternal health literacy among refugee populations. Building health literacy and self-efficacy among refugee women as well as service provider awareness of refugee health concerns may contribute to better birth outcomes.

## ACKNOWLEDGEMENTS

Many thanks to members of the planning committee for their collaborative spirit, to guest presenters and their organizations for their time and expertise, to volunteers and donors for their support. With gratitude to support group participants for sharing their time, culture and pregnancy experiences.

## CONTACT

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