Battered But Not Broken-
Mental Health Issues in
Newly Arrived Refugees.
Feb 2012
Meb Rashid MD
Crossroads Clinic
Women’s College Hospital

www.nytimes.com
# Immigration to Canada (CIC 2011)

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>%</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Economic Immigrants</td>
<td>156,077</td>
<td>62.7%</td>
<td>Skilled worker, business class, live-in caregivers</td>
</tr>
<tr>
<td>Family class</td>
<td>56,419</td>
<td>22.7%</td>
<td>Include spouses/partners, parents, grandparents and children</td>
</tr>
<tr>
<td>Refugees</td>
<td>27,852</td>
<td>11.2%</td>
<td>GARS, Refugees landed in Canada, privately sponsored, refugee dependents</td>
</tr>
<tr>
<td>Other</td>
<td>8,309</td>
<td>3.3%</td>
<td>Mostly H&amp;C applicants</td>
</tr>
<tr>
<td>Total</td>
<td>248,660</td>
<td>100%</td>
<td></td>
</tr>
</tbody>
</table>
Permanent Residents, 1860-2004
Permanent Residents to Canada

Canada – Permanent residents as a percentage of Canada’s population, 1860 to 2008

Facts and Figures: CIC 2008
### Permanent Residents to Canada

<table>
<thead>
<tr>
<th>Country</th>
<th>Total Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>China</td>
<td>29,049</td>
</tr>
<tr>
<td>Philippines</td>
<td>27,277*</td>
</tr>
<tr>
<td>India</td>
<td>26,122</td>
</tr>
<tr>
<td>US</td>
<td>9,723</td>
</tr>
<tr>
<td>UK</td>
<td>9,566</td>
</tr>
<tr>
<td>France</td>
<td>7,300</td>
</tr>
<tr>
<td>Pakistan</td>
<td>6,214</td>
</tr>
<tr>
<td>Iran</td>
<td>6,065</td>
</tr>
<tr>
<td>Korea</td>
<td>5,864</td>
</tr>
<tr>
<td>Morocco</td>
<td>5222</td>
</tr>
</tbody>
</table>

Source: CIC Facts and Figures
Definition of Refugees

- 1951 Geneva Convention Relating to the Status of Refugees:
  - a person owing to a well-founded fear of being persecuted
  - for reasons of race, religion, nationality, membership of a particular social group, or political opinion, is outside the country of their nationality
  - is unable to or, owing to such fear, is unwilling to avail him/herself of the protection of that country

zsoleimani.com
Refugee Migration - Global

- Over 15 million refugees in 2010
- (27 million internally displaced people)

<table>
<thead>
<tr>
<th>Source Country</th>
<th>Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>3 000 000</td>
</tr>
<tr>
<td>Iraq</td>
<td>1 600 000</td>
</tr>
<tr>
<td>Somalia</td>
<td>770000</td>
</tr>
<tr>
<td>DRC</td>
<td>676 000</td>
</tr>
<tr>
<td>Burma</td>
<td>415 000</td>
</tr>
<tr>
<td>Colombia</td>
<td>395 000</td>
</tr>
<tr>
<td>Sudan</td>
<td>387 000</td>
</tr>
</tbody>
</table>
Refugee Receiving Countries

<table>
<thead>
<tr>
<th>Countries</th>
<th>Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pakistan</td>
<td>1 900 000</td>
</tr>
<tr>
<td>Iran</td>
<td>1 073 000</td>
</tr>
<tr>
<td>Syria</td>
<td>1 005 000</td>
</tr>
<tr>
<td>Germany</td>
<td>564 000</td>
</tr>
<tr>
<td>Jordan</td>
<td>450 000</td>
</tr>
<tr>
<td>Kenya</td>
<td>402 000</td>
</tr>
<tr>
<td>Chad</td>
<td>347 000</td>
</tr>
<tr>
<td>China</td>
<td>300 000</td>
</tr>
<tr>
<td>USA</td>
<td>264 000</td>
</tr>
</tbody>
</table>

- 47% are women
- Canada is 17th on the list
## Refugees-2011

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gov’t assisted refugees</td>
<td>7,365</td>
<td></td>
</tr>
<tr>
<td>Refugees landing in Canada</td>
<td>10,741</td>
<td>Immigration Health Exam done in Canada once claim is submitted</td>
</tr>
<tr>
<td>Privately sponsored refugees</td>
<td>5,564</td>
<td></td>
</tr>
<tr>
<td>Refugee dependents</td>
<td>4,182</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>27,852</td>
<td></td>
</tr>
</tbody>
</table>

Source: CIC Facts and Figures 2012
Source Countries-Refugee Claimants (2012)

1. Hungary 1,882
2. China 1,774
3. Croatia 875
4. Pakistan 853
5. Korea DPR (north) 719
6. Nigeria 707
7. Colombia 692
8. India 684
9. Slovak republic 461
10. Saint Lucia 430

Source: Canadian Council for Refugees

http://gbgm-umc.org
What Do We Know About the Mental Health of Refugees

Research is often inconsistent

Overarching trends

- higher rates of PTSD, depression, chronic pain, somatic complaints

- exposure to torture strongest predictor of PTSD
The SE Asian Refugee Migration

- Over 60,000 refugees (mostly from Vietnam) arrived in Canada in 1980-81
- 40,000 were privately sponsored
- The Vietnamese migration may have been the best studied of all refugee migrations to Canada

Beiser M. *Resettling Refugees and Safeguarding their Mental Health: Lessons Learned from the Canadian Refugee Resettlement Project*. Transcult Psych 2009; 46: 539-583
The SE Asian Refugee Migration

- After 10 years there was a lower rate of unemployment than in the Canadian born population (BC)
- Rates of mental health issues were lower upon arrival than in the general population - rates dropped significantly with increased time in Canada

Beiser M. Resettling Refugees and Safeguarding their Mental Health: Lessons Learned from the Canadian Refugee Resettlement Project. Transcult Psych 2009; 46: 539-583
Cambodian Refugees in the US

- 586 adults aged 35-70 who lived in Cambodia during the Khmer Rouge reign and immigrated to the US prior to 1993
- Face to face interviews in Khmer language
- 99% experienced near death due to starvation and 90% had a family member of friend murdered

Cambodian Refugees in the US

- Rates of PTSD were 62%
- Rates of Depression were 51%
- Low rates of alcohol use
- Older age, poorer English speaking proficiency, unemployment, being retired or disabled, living in poverty were all associated with mental health issues

(My) Mistakes in the Care of Newly Arrived Refugees:
Lesson #1-Do Not Overemphasize pre-migration HX

-often previous trauma has been addressed
-not everyone is “broken” from previous trauma
-repressing trauma may be an important coping mechanism particularly upon arrival
Lesson #2 - Don’t underestimate the impact of post-migration stressors

Post migration struggles
- uncertainty about immigration status
- loss of social status
- loss of family and concern about family left behind
- difficulties in adaptation and acculturation
- language acquisition
- discrimination
Lesson #3 - Appreciate different manifestations of mental health issues at different points in the migration trajectory

- Often hope and optimism when immigration status is resolved; may be a delay in presentation of symptoms
Lesson #4-Chronic PTSD is often resistant to Rx

- CCIRH rated evidence around Rx of PTSD to be of low quality; are high rates of adverse events (re-experiencing traumatic, withdrawal from active Rx)
- Address individual symptoms
- Adaptation may be the rx
Lesson #4-Chronic PTSD is often resistant to Rx

“I take inspiration from the most heinous of situations
Creating medication out my own tribulations”

K'NAAN - TAKE A MINUTE LYRICS

Exposure therapy vs cognitive behavioral therapy?
Lesson #5-Not all refugees will seek out services at health care institutions

That may be OK—other forms of rx available in the community; need to check in on impact of any potential mental health issues
Lesson #6-Gender does make a significant difference

Pre-migration trauma and the impact may be different

Refugee Resettlement Project showed depression often manifested in men earlier post migration

Language acquisition may be a greater challenge for women
Lesson #7 - The development of a trusting relationship is essential to identify and help address mental health issues in Newly Arrived Canadians.

- Engagement with primary care services where people feel safe and comfortable
- Developing trusting relationships
- Allows for addressing symptoms as they develop
Addressing Mental Health Issues in Newly Arrived Refugees

- Access to Primary Care Services soon after migration
- Specialized services best able to address the needs of high needs refugees
- Multidisciplinary services including social workers, and trained interpreters

Kristofer Dan Bergman, 2005
Changes to Federal Health Insurance coverage for Refugees

Those currently affected

- Delay in initiating IFH, failed claimants
- All have lost coverage of “supplementary services”
- Newly arrived refugee claimants from certain countries have essentially no coverage including for mental health services

Confusion about existing coverage

- Less likely to contact health care providers before people decompensate
- Uncertainty about future coverage
- Problems with people receiving wrong coverage
Response from Health Care Providers

- Overwhelming
- Twenty national health care organizations have publicly opposed the cuts
- Editorials in medical journals
- National surveillance system in place

http://www.mideastdaily.org
National Organizations

- College of Family Physicians of Canada
- Royal College of Physicians and Surgeons of Canada
- Canadian Association of Optometrists
- Canadian Association of Social Workers
- Canadian Dental Association
- Canadian Medical Association
- Canadian Nurses Association
- Canadian Pharmacists Association
- Canadian Association of Community Health Centres
- Canadian Doctors for Medicare
- Canadian Association of Midwives
- Registered Nurses Association of Ontario
- Canadian Federation of Nurses Union
- Canadian Psychiatric Association
- Canadian Paediatric Society
- Association of Medical Microbiology and Infectious Diseases Canada
- Médecins du Monde
- Public Physicians of Canada
- Ontario’s Council of Medical Officers of Health
- Canadian Association of Occupational Therapist

www.nowpublic.com
While every refugee's story is different and their anguish personal, they all share a common thread of uncommon courage – the courage not only to survive, but to persevere and rebuild their shattered lives.

Antonio Guterres, U.N. High Commissioner for Refugees, 2005