



Sustainable Funding for the Family Strengthening Intervention for Refugees (FSI-R)



PROGRAM AIMS

The following are some aims of the FSI-R:

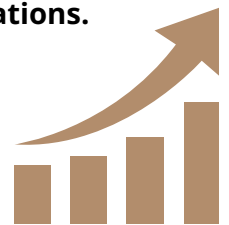
- Holistic health and wellbeing of children and caregivers.
- Strengthened communication between and among children and caregivers.
- An improved understanding between family members and conflict management.
- Increased child engagement with schoolwork and for families to gain a better understanding of United States school systems.
- Strengthened father-engagement.
- Increased understanding of raising children in the United States, while also maintaining one's culture and values.

BACKGROUND

Approximately **1.1 million refugees** have resettled in the United States between 2001 and 2022. However, a majority of resettled individuals do not receive **sufficient mental health services** due to stigma and scarcity, despite being at higher risk of poor mental health outcomes in comparison to host populations. Furthermore, there remains a **gap in the accessibility of culturally adapted services** for refugee populations that promote mental health and family functioning.

Since 2004, the Research Program on Children and Adversity (RPCA) has been working on developing and delivering a **family strengthening intervention** established for refugees, by refugees. The intervention takes a **culturally responsive approach** to skill-building and psychoeducation to **(a)** improve parenting practices; **(b)** help caregivers understand the effects of trauma on family functioning and the risk of intergenerational conflict; and, **(c)** enable parents to advocate for and better navigate resources to address their family's **social, physical, and mental health needs**. Program modules are delivered by trained peer facilitators of the family's respective cultural background at the family home or convenient location. The intervention is available for Bhutanese, Somali Bantu, and Afghan families, but can be **culturally adapted for further populations**.

SUSTAINING AND SCALING THE FSI-R



Due to its promising preliminary results, the RPCA hopes to **expand the scope** of the FSI-R to reach a larger span of families who could benefit from the program. This would require **consistent coverage** by a **reliable funding source**. However, there are an **insufficient amount of funding** sources for prevention programs, specifically for peer-based prevention programs for refugee mental health. Furthermore, federal and state grants are **limited and competitive**. However, with refugee resettlement increasing in the United States, it is pivotal that **evidence-based and culturally relevant** resources exist for resettling families.



LEVERAGING THE AFFORDABLE CARE ACT

One promising approach to **scaling and sustaining** the FSI-R is by **leveraging the Affordable Care Act (ACA)**. The reform law has established grounds for a more equitable healthcare system and recognizes the importance of **prevention-based healthcare** in promoting community health and wellness. The ACA also recognizes the unique strengths of **community health workers (CHWs)** and includes provisions to promote their role in service delivery.

THE NATIONAL PREVENTION STRATEGY'S EMPHASIS ON COMMUNITY HEALTH WORKERS

The National Prevention Strategy called for by the ACA emphasizes the need for **community-based preventive programs** to establish healthy community environments. Furthermore, the initiative underscores the role **community health workers** play in facilitating the use of and access to services, specifically within marginalized communities. The **peer-based delivery model** is a pivotal aspect of the FSI-R, as peer facilitators have the most local knowledge, access to, and understanding of the **respective refugee population's** culture, values, and beliefs. Similarly, a key aspect of the ACA's initiatives is to **eliminate barriers to access** of quality health programs, noting that community health workers who understand their client's **background and speak their language** are able to deliver higher quality of care.



THE AFFORDABLE CARE ACT'S PRIORITIZATION OF COMMUNITY WELL-BEING

The Affordable Care Act's **prioritization of community well-being** through a preventative lens and emphasis on the role of culturally competent community health workers to **facilitate program delivery for marginalized populations** directly aligns with the aims of the FSI-R. Therefore, the Affordable Care Act offers the opportunity for the RPCA to further **scale and adapt** the FSI-R to reach resettling families who could benefit from the intervention.

References

- 1) Bovbjerg RR, Eyster L, Ormond BA, Anderson T, Richardson E. Integrating Community Health Workers into a Reformed Health Care System. The Urban Institute, 2013.
- 2) Bovbjerg RR, Eyster L, Ormond BA, Anderson T, Richardson E. The Evolution, Expansion, and Effectiveness of Community Health Workers. The Urban Institute, Washington, DC: The Urban Institute, 2013.
- 3) Bridgett DJ, Burt NM, Edwards ES, Deater-Deckard K. Intergenerational transmission of self-regulation: A multidisciplinary review and integrative conceptual framework. Psychological Bulletin. 2015;141(3):602-654. doi:10.1037/a0038662
- 4) How Many Refugees Are Entering the US? USAFacts. July 12, 2023. <https://usafacts.org/articles/how-many-refugees-are-entering-the-us/>.
- 5) Katzner A, Morgan M. Affordable Care Act Opportunities for Community Health Workers: How Medicaid Preventive Services, Medicaid Health Homes, and State Innovation Models are Including Community Health Workers. 2014. <http://www.chplp.org/wp-content/uploads/2013/12/ACA-Opportunities-for-CHWs-FINAL-812.pdf>.
- 6) National Prevention Council. Annual Status Report. 2014. http://www.surgeongeneral.gov/initiatives/prevention/about/annual_status_reports.html.
- 7) National Prevention Council. 2011. Review of National Prevention Strategy. U.S. Department of Health and Human Services, Office of the Surgeon General. June 2011. <https://www.hhs.gov/sites/default/files/disease-prevention-wellness-report.pdf>.
- 8) Review of Five Key Themes for Improved Mental Health Care for Refugees and Migrants. 2023. World Health Organization. October 10, 2023. <https://www.who.int/news/item/10-10-2023-five-key-themes-for-improved-mental-health-care-for-refugees-and-migrants#:~:text=The%20prevalence%20of%20common%20mental,risks%20of%20depression%20and%20anxiety>.
- 9) Shaw FE, Asomugha CN, Conway PH, Rein AS. The Patient Protection and Affordable Care Act: opportunities for prevention and public health. Lancet. 384(9937):75-82. doi:[http://dx.doi.org/10.1016/S0140-6736\(14\)60239-2](http://dx.doi.org/10.1016/S0140-6736(14)60239-2).
- 10) Song, Suzan, and Sara Teichholtz. n.d. Review of Mental Health Facts on Refugees, Asylum-Seekers, & Survivors of Forced Displacement. Edited by Steven M. Weine and Sejal Patel. American Psychiatric Association Division of Diversity and Health Equity. "Scope of the Problem." n.d. <https://www.psychiatry.org/getmedia/9d2d6e1e-babc-4e04-8f01-16f3f75f1cd/Mental-Health-Facts-for-Refugees.pdf>.
- 11) U.S. Department of Health and Human Services Office of the Surgeon General National Prevention Council. National Prevention Strategy. Washington, DC, 2011.
- 12) Viswanathan M, Kraschewski J, Nishikawa B, et al. Outcomes of community health worker interventions. Evid Rep Technol Assess (Full Rep). 2009;(181):1-144, A1-A2, B1-B14, passim. <http://www.ncbi.nlm.nih.gov/epp-prod1.lul.harvard.edu/books/PMH0008292/>.