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2016 Refugee Health Needs Assessment in Omaha, Nebraska

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Purpose

The refugee population in Omaha, Nebraska has exponentially increased over the past decade and will continue to increase, bringing global health matters to our backyard. The purpose of this study is to assess refugee's perceived needs, barriers, and preferences regarding health care to address them justly.

Methods

Design: quantitative survey. Paper surveys were distributed and collected by reaching out to the community, community leaders, and attending different refugee related events. Refugees that were 19 years of age or older were eligible to take the survey.

Statistical Analysis: IBM SPSS Statistic 23 was used to analyze the data.

Results

Sample: A total of 291 paper surveys were completed. Mean age of participants was 36.22 years, 62.5% female, and 69.7% are refugees from Burma/Myanmar.

Top 3 Rankings of Important Things to the Refugee Community (n=273)

- Improving my ability to speak English
- Education
- Feeling Healthy

Top 3 Rankings of Important Things to the Refugee Community (n=256)

- Learning skills for living in the US
- Having enough money to make ends meet
- Improving my ability to speak English

Top 3 Reasons Refugees don't use Health Care Facilities (n=107)

- My Health Problem is Not Serious
- Language Difficulties
- Don't Have Insurance

Top 3 Rankings of Difficult Things to the Refugee Community (n=256)

- Improving my ability to speak English
- Learning skills for living in the US
- Having enough money to make ends meet

Time Living in Nebraska (n=279)

- 0.4
- 3.6
- 8.3
- 4
- 16.2
- 24
- 43.7

Level of School Completed (n=283)

- 26.7
- 23.3
- 13.2
- 21.6
- 15.7

Source of Health Information (n=279)

- 71.7
- 36.2
- 24.7
- 15.4
- 11.5
- 6.5
- 2.5
- 1.8

Discussion & Conclusions

- Majority of refugees have been in NE for over 5 years but still have difficulties living in the US.
- Top 3 ranking of difficulty reported were in regards to navigating being accustomed to the US.
- Health care organizations that accept patients with no insurance need to reach out to refugees and their community leaders to promote their services.
- Refugees’ main source of health information are from family and friends.
- The results of this health needs assessment will contribute to our ability to prioritize refugee health issues.
- The results will be compiled into a report to distribute to the local jurisdictions and partners.

Recommendations

- Providers need to utilize community leaders to optimize health education and promotion.
- Health care organizations need to provide equitable language services.
- Have education acceleration programs catered to refugees.
- More English-Language programming is needed to address the most important, yet the most difficult need for refugees.

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