Self-reflected Health Status of Refugees: A reflection of the healthy immigrant effect?

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Outline

• Background Information
• Study design
• Results
• Discussion
• Conclusion
Healthy Immigrant Effect (HIE)

- immigrants are generally healthier than the Canadian born upon arrival, but their health deteriorates over time
Current evidence in immigrants

- Pregnancy outcomes
- BMI measurement
- Cardiovascular outcomes
Current evidence: Self-reported health

National Population Health Survey/ Longitudinal Survey of Immigrants

In general, would you say your current health is:

- Excellent
- Very good
- Good
- Fair
- Poor
• Initial data
  - Immigrants 6 months after arrival – 97% rate health as good, very good or excellent
  - Canadian born – 88%

• Follow-up data
  - Deterioration of health: RR 2.8 of transition from good/v. good/excellent to fair/poor in recent (<ten yrs) non-European immigrants.
Proposal

Evaluate the self-reflected health status of refugee clients at Access Alliance: does it reflect the healthy immigrant effect (HIE)?
Healthy ‘refugee’ effect?

**Immigrants**
- Majority
- Economic/family
- Skilled workers
- Increased support

**Refugees**
- Harsh circumstances
- Limited skills
- Less support
Healthy ‘refugee’ effect?

**Hypothesis:** Refugees should see an improvement to health status with time in Canada – in contrast with the HIE.
Study design

- Cross sectional survey of clients administered at Access Alliance Community Health Centre from Dec/08 to Jan/09
- Jointly administered with a survey on determinants of health
Questionnaire

1. How old are you: _______________
   *(If client is under 18, do not continue with the survey)*
2. What is your gender? □ Male □ Female □ Other
3. Are you pregnant? (ask female patients only) □ Yes □ No
4. What is the reason for your visit to the Access Alliance clinic or satellite today?
5. In what year/month did you come to Canada to live?
6. What was your immigration status on arrival in Canada?
   □ Government Assisted Refugee (referred by COSTI)
   □ Privately Sponsored Refugee (by charity, church or community group)
   □ Refugee Claimant
   □ Landed Immigrant
   □ Other (Please specify): __________________________
7. In general, would you say your current health is:
   □ Excellent
   □ Very Good
   □ Good
   □ Fair
   □ Poor
8. Since your arrival to Canada, do you feel that your health has:
   □ Improved □ Stayed the same □ Deteriorated (Gotten worse)
Results

Goal = 200 Surveys

Number surveyed
n = 200

Exclude pregnant women

Exclude non-refugees

n = 114

< 6 months in Canada
n = 17

> 5 years in Canada
n = 18
Results

- General characteristics and country of origin for survey participants as compared to all Access alliance clients.

<table>
<thead>
<tr>
<th>Country of Birth</th>
<th>Survey participants</th>
<th>Access Alliance Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>18.4%</td>
<td>13.7%</td>
</tr>
<tr>
<td>Myanmar/Burma</td>
<td>13.2%</td>
<td>6.3%</td>
</tr>
<tr>
<td>Colombia</td>
<td>8.9%</td>
<td>7.3%</td>
</tr>
<tr>
<td>Portugal</td>
<td>6.8%</td>
<td>6.3%</td>
</tr>
<tr>
<td>Iran</td>
<td>5.3%</td>
<td>3.5%</td>
</tr>
<tr>
<td>Brazil</td>
<td>4.7%</td>
<td>4.3%</td>
</tr>
<tr>
<td>Eritrea</td>
<td>4.2%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Thailand</td>
<td>3.2%</td>
<td>2.9%</td>
</tr>
<tr>
<td>Mexico</td>
<td>2.6%</td>
<td>4.8%</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>1.6%</td>
<td>2.1%</td>
</tr>
<tr>
<td>Argentina</td>
<td>1.1%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Iraq</td>
<td>1.1%</td>
<td>1.0%</td>
</tr>
<tr>
<td>Sudan</td>
<td>1.1%</td>
<td>2.5%</td>
</tr>
<tr>
<td>Pakistan</td>
<td>1.1%</td>
<td>2.1%</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>0.5%</td>
<td>3.5%</td>
</tr>
<tr>
<td>Somalia</td>
<td>0.5%</td>
<td>0.7%</td>
</tr>
<tr>
<td>India</td>
<td>0.0%</td>
<td>1.3%</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>0.0%</td>
<td>0.9%</td>
</tr>
</tbody>
</table>
Results

- Comparison of general characteristics of the sub-groups

<table>
<thead>
<tr>
<th></th>
<th>Under 6 months</th>
<th>Over 5 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>N=</td>
<td>17</td>
<td>18</td>
</tr>
<tr>
<td>Age</td>
<td>39 years</td>
<td>41 years</td>
</tr>
<tr>
<td>Gender</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td></td>
<td>53%</td>
<td>47%</td>
</tr>
<tr>
<td></td>
<td>15%</td>
<td>15%</td>
</tr>
<tr>
<td>Country of origin</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Middle East</td>
<td>23.6%</td>
<td>5.6%</td>
</tr>
<tr>
<td>South Asia</td>
<td>17.7%</td>
<td>11.2%</td>
</tr>
<tr>
<td>South-east Asia</td>
<td>17.7%</td>
<td>0%</td>
</tr>
<tr>
<td>Africa</td>
<td>11.8%</td>
<td>0%</td>
</tr>
<tr>
<td>Central/South America</td>
<td>23.6%</td>
<td>50.4%</td>
</tr>
<tr>
<td>Western Europe</td>
<td>0%</td>
<td>16.8%</td>
</tr>
<tr>
<td>Eastern Europe</td>
<td>0%</td>
<td>5.6%</td>
</tr>
</tbody>
</table>
Results

Self-reflected health status of new and long-term refugees

<table>
<thead>
<tr>
<th>Time in Canada</th>
<th>Good, Very Good or Excellent</th>
<th>Poor or Fair</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 6 months</td>
<td>71%</td>
<td>29%</td>
</tr>
<tr>
<td>&gt; 5 years</td>
<td>53%</td>
<td>47%</td>
</tr>
</tbody>
</table>

- Good, Very Good or Excellent: 71% in < 6 months, 53% in > 5 years
- Poor or Fair: 29% in < 6 months, 47% in > 5 years
### Change in health status

<table>
<thead>
<tr>
<th></th>
<th>&lt; 6 months</th>
<th>&gt; 5 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve</td>
<td>44%</td>
<td>19%</td>
</tr>
<tr>
<td>Stay the same</td>
<td>50%</td>
<td>63%</td>
</tr>
<tr>
<td>Deteriorate</td>
<td>6%</td>
<td>19%</td>
</tr>
</tbody>
</table>
Discussions

• Refugees (duration <6 months) have lower self-reflected health scores compared to immigrants and the Canadian born (71% vs 97% vs 88% respectively)

• New refugees found to rank their self-reported health higher than long term refugees
Discussions

• But there is some evidence to suggest that refugees self-reflected health status deteriorates over time in Canada.

• Opposes initial hypothesis and supports the extension of the healthy immigrant effect to refugees.
Discussions

• Possible reasons?:
  - No selective immigration policies that pre-selects the ‘healthy’
  - Greater susceptibility to determinants of health - housing, income, poor education
  - Multiple barriers to accessing health - language, transportation, education
Limitations

1. Cross sectional nature - do not follow participants
2. Only 114 participants included. Subgroups have small numbers
3. Effect of acute illness
4. Administered at Access Alliance - only clients in the office participated
5. Translated into 5 languages only
Conclusion

- Proposal: Evaluate the self-reflected health status of refugee clients at Access Alliance: does it reflect the healthy immigrant effect (HIE)?
  - Refugees initially rank health lower than immigrant/Canadian counterparts
  - Not immune from HIE: decline in health status
  - Unexpected to our hypothesis
  - Complex relationship & multiple factors in refugee health transition
Conclusion

• Future directions:
  - Include in analysis group between 6 months and 5 years
    • How does this group compare?
  - Further analysis of determinants of health to determine if any correlation
Acknowledgements

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  – Dr. Yogendra Shakya
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  – Staff and volunteers at AA
Questions?