

# An Integrated Holistic Health Service Model for Refugee Women: Promoting Access, Equity and Culturally Appropriate Services.



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# The Migrant Health Service



- > **State Government funded specialist primary health care service since 1992**
- > **Humanitarian refugees and asylum seekers**
- > **A range of clinical programs see approx 1,200 – 1,300 clients per year**
- > **GP clinics**
- > **Nursing clinics**
- > **Counseling**
- > **Bi Cultural workers and Interpreters**
- > **Groups, training and education**
- > **Best practice protocols, advocacy, research, national networking and input into refugee health policy development etc.**

# Women from refugee back ground



- > **80% of worlds refugees are women and children**
- > **Approx13,000 refugees per year come to Australia**
- > **May spend long periods in refugee camps or in exile**
- > **Families often headed by women**
- > **Refugee women are not a homogenous group**

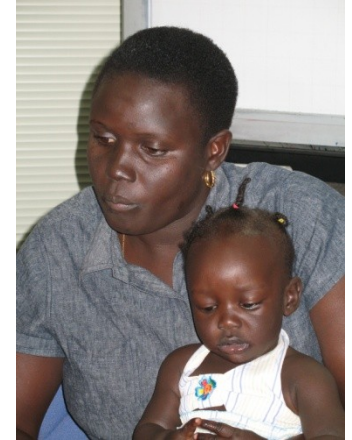
# An Integrated Holistic Model



> **MHS provides a 'one stop shop' model**

> **Holistic approach**

> **Women's Programs**



> **This program operates on the following principles:**

- **Promoting Feminist Practise**
- **Providing Culturally Appropriate Services**
- **Contributing to Best Practise Standards**



# Feminist practise



- > **Women's centered approach – women working with women**
- > **Acknowledge that women from refugee backgrounds face multiple disadvantages within the health system**
- > **History of gender based violence**
- > **Sensitive but explicit sexual health history taking**
- > **Provide information and education to enable women to make informed choices and give informed consent to procedures**
- > **Take time to ensure women are relaxed and in control**
- > **Women often have negative experiences of reproductive health services**
- > **Female Genital Mutilation**

# Culturally Appropriate Services



- > **All female staff**
- > **Acknowledge Religious and Cultural backgrounds**
- > **Adequate time**
- > **Explanation and education**
- > **Culturally women frequently come from collectivist societies**
- > **Provide translated material**
- > **Staff trained to be culturally sensitive**
- > **Promote access even when women have external GP**

# Best Practise Standards



- > **Development of women's health protocols**
- > **Research**
- > **Publications and resources**
- > **Support Groups**
- > **Training for staff**
- > **Community development**
- > **Peer Education program**
- > **Health promotion events**
- > **National networking and advocacy**



# Importance of dedicated women's health programs for women from refugee back grounds

- > **Promotes access and equity and ensures that women don't get lost and neglected within the mainstream health system.**
- > **Ensures women receive the physical and emotional support required for them to transit into resettlement and thus reduce stress, anxiety and mental health issues.**
- > **Facilitates successful resettlement by building on the strengths and capabilities the women have to get to this point.**





Thank you



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