

A Community Based Participatory Research Initiative: Addressing Alcohol Use in the Refugee Population from Burma

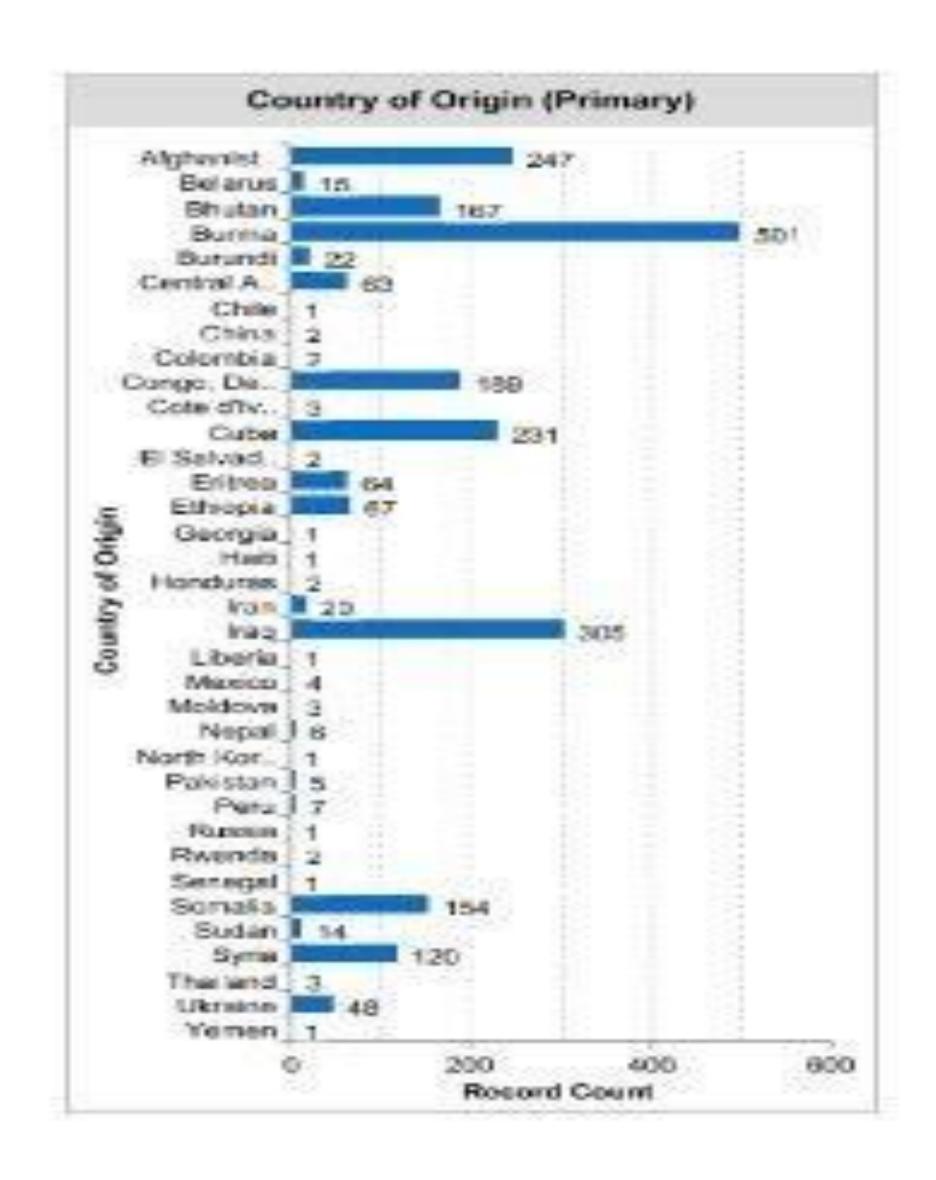


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Background

- Burma, also known as Myanmar, has been riddled with sectarian violence and political strife for over 50 years
- Since 2006, an estimated 159,692 refugees from Burma have sought safety in the US making refugees from Burma the largest group of refugees over the past decade¹
- Approximately 5,000 refugees from Burma currently reside in Colorado¹
- Once refugees arrive, they have significant difficulty navigating the complex U.S. healthcare system compounding already large health disparities that pervade this population.²
- Mental health problems often go unrecognized and untreated⁴ despite the fact that refugee populations are reported to have higher rates of mental health disorders.⁵
- There is a strong association between substance use – particularly alcohol – and mental health problems,⁶ and refugee populations report rates of alcohol use that are comparable to those in Western countries.⁷
- This highlights the need to address substance use in this vulnerable population.



Project Aim

To develop, implement and evaluate a culturally effective intervention targeting alcohol use in the refugee community from Burma residing in Colorado.

The key principles of CBPR:

- 1. Recognize community as a unit of identity;
- 2. Build on strengths and resources within the community;
- 3. Facilitate collaborative, equitable involvement of all partners in **all** phases of the research;
- 4. Integrate knowledge and action for mutual benefit of all partners;
- 5. Promote a co-learning and empowering process that attends to social inequalities;
- 6. A cyclical and iterative process;
- 7. Address health from both positive and ecological perspectives;
- 8. Disseminate findings and knowledge gained to all partners; and
- 9. Long-term commitment by all partners.8

Phase 1:

Community Partnership & Issue Identification

2014-2015

- Identified a community partner:
 - Youth Advisory Board composed refugee youth and young adults
- Identified a priority health issue and held monthly meetings with the advisory board to:
 - Explore health literacy challenges in the community from Burma
 - Narrow down a specific health topic that's important to the community: alcohol use
 - Discuss potential health literacy interventions for reducing alcohol use, including approaches for addressing cultural, language and generational barriers

Formative Research Findings

Formative studies conducted to guide Phase 2 included:

1. Community Member Assessments:

 Orally administered substance use assessments to a small sample of refugees from Burma in the Denver metro area

2. Key Informant Interviews:

 Interviewed a small group of leaders from the metro area Burma refugee community about substance use among community members

Phase 2:

Partnership Development & Intervention Mapping

Formal Needs Assessment:

- Conduct formal needs assessment and problem analysis through orally administered community surveys and key informant interviews with the aim to identify the community's perception of:
 - Scope of current alcohol use
 - Causes and consequences of problematic alcohol use
 - Resources and treatment options
 - Health literacy regarding alcohol use

Results of Qualitative analysis

Community Member Assessments:

Community members perceive that:

- Alcohol use is most common among males in the population
- Alcohol misuse is not isolated to a single ethnic or religious group
- Alcohol misuse is tied directly to use within the refugee camps
- Stigma around alcohol use is common
- Alcohol is negatively affecting the family structure, employment, and social outcomes
- Individuals may not seek help because of a lack of confidentiality and lack of culturally available interventions

Phase 3:In Progress

Intervention Development & Evaluation

- Develop and implement a culturally appropriate intervention to address alcohol use in the refugee community from Burma
- Evaluate effectiveness of intervention in improving health literacy and outcomes

Conflict of Interest:

The authors report no conflicts of interest

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