**BACKGROUND**

- The Refugee and Immigrant Health and Wellness Alliance (RIHWA) started in early 2018, as part of a partnership between Emory and Georgia State University.
- RIHWA is funded by a year-long planning grant from the Kaiser Permanente Foundation.
- The community assessment is intended to inform RIHWA’s initiatives to improve the health and wellness of refugees and immigrants in Clarkston, GA.

**POPULATION**

The Clarkston community:
- Community Service Organizations
- Health Services
- University Partners & Schools
- Resettlement Agencies
- Government Representatives

**OBJECTIVES**

- To interview community organizations who primarily serve refugee/immigrant community members.
- To assess community perspectives and hear community voices on health and wellness.
- To present results to the RIHWA steering committee to inform future initiatives.

**COMMUNITY ASSESSMENT METHODS**

- Qualitative interviews began June 25, 2018 and are ongoing.
- Interviews are in-person or on the phone and range from 15-60 minutes.
- At least two interviewers were present during each interview.
- Interviews were conducted in English.
- Thematic analysis with MaxQDA.

**PRELIMINARY RESULTS: HEALTH OUTCOMES**

**Health Needs**

- **Patient Navigation**
  - Lack of knowledge and support for refugees and immigrants to access healthcare and clinics.
  - Those working in healthcare lack information sharing systems.
- **Insurance**
  - Very difficult to understand and many become uninsured after temporary Medicaid runs out.
- **Interpretation**
  - A non-negotiable necessity as the healthcare system is often inaccessible for those without strong English skills.
  - Lack of adequate translation services can lead to confusion and misunderstandings in terms of health.
- **Mental Health**
  - Deficit of resources for community members.
  - Often considered a secondary issue among other more pressing concerns (e.g. employment, housing).

**NEXT STEPS**

- Complete final interviews.
- Complete coding and analysis.
- Conduct listening sessions with community members.
- Write final report and present back to RIHWA steering committee.

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- Local, state, and federal government officials.
- Representatives from resettlement agencies.
- Local healthcare providers.
- Community organizations and nonprofits.