We know many factors contribute to individual health.

Some barriers particularly affect immigrant and refugee patients. Our research highlights the need for immigration status/country of origin to be included as a significant social determinant of health.
Current climate creates fear and mistrust...

- Magnifies the effects of these and other barriers
- Leads to underutilization of health care systems and services
- Puts the health of the individual, family, and community at risk

We call this the “chilling effect.”
In Denver, 16% of residents are foreign-born.

Individual neighborhoods range from 4% to 39%.
Achieving Better Health Through Collaboration

The Mile High Health Alliance brings together diverse stakeholders from medical care, behavioral health, public health, local government agencies, social service and community based organizations and other groups within and beyond the health sector.
Many perspectives leads to new insights
We are addressing the “chilling effect” by:

- Surveying members to assess the extent of the problem (Phase I)
- Convening community members to deepen understanding (Phase II)
- Identifying strategies for mitigating effects
- Testing solutions to develop best practices
- Scaling successes, including in other service sectors
Two out of three providers nationally have noticed recent changes in behavior*

Over 2/3 of the clinics in our coalition reported:

- decrease in appointments made even at well-established health centers (17-20% on average)
- increase in cancellations and no shows (19% on average)
- increase in requests for mental health services stemming from persecution related stress (20%)

*National poll, Migrant Clinicians Network, Jan/Feb 2018
Community health centers in our coalition also reported taking action, especially training staff on:

- how to handle questions about rights and information sharing
- patient navigation
- cultural competency
- patient-provider communication
- providing patients resources and materials in various languages
We convened affected community members to deepen understanding

- Honor community expertise
- Leverage existing relationships with coalition members and trusted community groups and leaders
- Remove as many barriers as possible (childcare, food, proximity)
- Make it safe and comfortable to share honestly (known places, protect confidentiality)
“There is fear of asking for necessary services thinking that it may affect our chances of obtaining documentation status.”
“The receptionists don’t treat us well. We don’t confront them because they might call the police. They know that we will not stand up for ourselves.”
“You can go see the doctor but sometimes you can’t afford the treatment. People are embarrassed to say they can’t afford the medicines.”

“We don’t want to lose days at work to go to an appointment.”
“Since this past year, people don’t want to go anymore. They are afraid that the doctors or the clinics might give their information to the immigration department and that might get them detained or deported.”
Community members said barriers to health care access include:

- Fear of deportation due to immigration status and lack of knowledge of information protection and privacy laws

- Treatment by clinic staff, including interpersonal dynamics within different communities. If people don’t feel respected, patients will seek care elsewhere, possibly in a non-medical setting or forego care

- Limited health system literacy and language barriers

- Lack of health insurance and not understanding payment systems

- Difficulty seeing a specialist
Intervention efforts must focus on privacy, safety and well-being of immigrant and refugee communities.

Strategies must consider the challenges these communities face and try to make things easier and care more accessible.
We propose the following strategies

• Prioritize patient education, especially health system literacy

• Emphasize ongoing staff training on equitable, empathic service and care, throughout the organization, but especially front-line staff

• Move outside the current systems and structures and meet immigrants where they are
We expect current trends to continue and perhaps increase.

Public Charge is a tool that ICE can use to determine eligibility for legal residence. A proposed change in the Public Charge rule may expand the types of public benefits that can be used by ICE to deny status for immigrants.
Special thanks to:

MHHA Member Organizations

The Denver Foundation
The Rose Community Foundation

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What do you think?

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