Evaluation of the Impact of an Interprofessional Refugee Health Elective
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Introduction
• Annually, Colorado receives approximately 1,100 refugees, representing over 60 countries
• Numerous barriers prevent refugee patients from receiving quality medical care
• Considerable value has been demonstrated in interprofessional education (IPE) as a means of positively affecting patient care
• Refugee health electives have a positive effect on medical student perceptions and awareness of refugee patients

The Refugee Health Elective (RHE) curriculum comprised of eight weekly one-hour sessions:

- Session 1: Lecture: Who is a refugee?
- Session 2: Panel: My life as a refugee
- Session 3: Panel: Refugee resettlement in the U.S.
- Session 4: Lecture: Common medical issues affecting refugees
- Session 5: Lecture: Psychological issues and refugees
- Session 6: Lecture: Common oral health issues affecting refugees
- Session 7: Panel: Refugees and the health care system
- Session 8: Problem-Based Learning: Challenges and ethical dilemmas of providing culturally effective care

Goals
• To expand the RHE to include medical students as well as students from other health professions
• To evaluate the impact of an IP refugee health elective on student perceptions of the following primary outcome measures:
  - Knowledge of the refugee resettlement process in Colorado
  - Knowledge of common medical, dental, and psychosocial issues facing refugees
  - Awareness of the influence of cultural perceptions and logistical barriers on health-seeking behavior, compliance and health outcomes in the Colorado refugee population
  - The value of IPE in refugee patient care

Methods
• Participants included students from the dental, medical, nursing, physical therapy (PT), and public health (PH) programs on the Anschutz Medical Campus
• A 21 question pre- and post-elective attitudinal survey was administered to students
• The survey utilized a Likert scale with the following choices: strongly disagree, disagree, neutral, agree, strongly agree (quantified as -2, -1, 0, 1, and 2, respectively)
• Students were asked to rate the extent of their beliefs regarding the primary outcome measures described above
• Survey results were analyzed by an independent-sample t-test and a one-way between-groups ANOVA

Results

Study Population

<table>
<thead>
<tr>
<th>School</th>
<th># of participants Pre-Survey</th>
<th># of participants Post-Survey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical</td>
<td>19</td>
<td>19</td>
</tr>
<tr>
<td>Dental</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Nursing</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>PT</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>PH</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>39</td>
<td>32</td>
</tr>
</tbody>
</table>

Improvement in Self-Perception Scores by School

<table>
<thead>
<tr>
<th>School</th>
<th>Improvement</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical</td>
<td>0.6</td>
<td>&lt;0.05</td>
</tr>
<tr>
<td>Dental</td>
<td>0.5</td>
<td>&lt;0.05</td>
</tr>
<tr>
<td>Nursing</td>
<td>0.7</td>
<td>&lt;0.05</td>
</tr>
<tr>
<td>PT</td>
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<td>&lt;0.05</td>
</tr>
<tr>
<td>PH</td>
<td>0.4</td>
<td>&lt;0.05</td>
</tr>
</tbody>
</table>

Discussion

Limitations:
• Pre- and post-elective survey responses were not individually linked
• Outcome measures were self-perceived and may not be representative of reality
• No control cohort of students not participating in the elective to account for confounding factors in the curricula of various health professional programs
• Small sample size
• Single institution

Conclusions:
• The IP RHE significantly improved overall self-perception scores of students in the dental, medical and nursing programs
• Significant improvement was not observed among PT and PH students likely driven by small n values
• Among all students, the IP RHE significantly improved:
  - Knowledge of refugee health issues
  - Awareness of the influence of cultural perceptions and logistical barriers on the delivery of medical care to refugees
• The elective did not significantly improve student perceptions of the value of IPE with high-scoring perceptions at baseline

Future directions:
• Reproduce the benefits of an IP refugee health elective by:
  • Surveying elective participants in the future
  • Dissemination to other institutions
• Assess whether students who took the elective have more successful interactions with refugee patients in the clinical setting
• Correlate the IP refugee health elective with improved health outcomes for refugee patients by examining factors such as follow-up rates in clinics where providers have received IP refugee health training

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References


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