

# BRIDGING THE GAP

PARTNERSHIPS FOR CHANGE IN REFUGEE CHILD & FAMILY HEALTH

NEWSLETTER #12 NOVEMBER 2016

**“It's been such a profound insight into the refugee journey and the response we can have to trauma.”**

PARTICIPANT FROM PROFESSIONAL DEVELOPMENT IN THE SOUTH EAST

This edition of the newsletter is dedicated to professional development; completed across all Bridging the Gap implementation sites this October.

## The journey to recovery

Professional development activities have been focused on understanding the trauma associated with the refugee experience, the challenges of settlement, and resilience and recovery – and the part we all play as clinicians, policy makers and researchers in supporting recovery.

Unique to Bridging the Gap professional development is the approach to co-facilitation of modules for sustainable training to support the health workforce in providing responsive care to vulnerable families.

Over 70 people have been involved in Bridging the Gap professional development in the past month. Maternal and child health nurses, midwives, obstetric registrars, GPs, interpreters and bicultural workers have attended sessions on motherhood and the refugee experience, incidental counselling, safety planning and engaging interpreters in care.

Participant evaluations have been overwhelmingly positive, noting what they found useful:

*The ways we can simply provide empowering open relationships with women. Loved the information too!*

*Visualisation exercise to understand somewhat how seeking refuge feels and fear of war or trauma*

Participants will be invited to participate in an online evaluation survey in the coming weeks.



Attendees of professional development in the SE

Please complete the survey as it helps the organisers to continue to refine the modules to meet your needs.

## I've attended professional development, what next?

Professional development in the refugee experience is pivotal for underpinning the Bridging the Gap quality improvement initiatives and goes hand in hand with organisational change. Here, some participants reflect on what they will do differently as a result of attending professional development:

*Be more aware of supporting staff to support and care for women and families*

*Being aware of my interactions with others and be curious of others' stories*

*Mindful of potentially traumatic experiences of refugee women*

*Ask about patient's refugee experience. Expect history of trauma in refugee population*

## PARTNER ORGANISATIONS

MURDOCH CHILDRENS RESEARCH INSTITUTE

VICTORIAN FOUNDATION FOR SURVIVORS OF TORTURE

MONASH HEALTH

WESTERN HEALTH

CITY OF GREATER DANDENONG

CITY OF WYNDHAM

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DEPARTMENT OF EDUCATION AND TRAINING

MUNICIPAL ASSOCIATION OF VICTORIA

MERCY HOSPITALS VICTORIA

VICSEG NEW FUTURES

## Introducing Jennifer Addy

Jennifer Addy has been exceptionally busy over the last month, facilitating her specifically tailored session on Motherhood and the Refugee Experience at each professional development session. Jen is a Psychologist who has worked in the torture and trauma field for over 15 years. She is a graduate of the Harvard University Global Mental Health program and has worked in detention centres and in the community as a torture and trauma therapist and clinical supervisor. Her experience includes working with victims of human trafficking, asylum seekers, refugees, homeless youth and victims of domestic violence. More recently she has worked in program management and coordination roles in the asylum seeker sector and is currently working in organisational and professional development at Foundation House. We asked Jen:

### **Explain your role and the aspects you like working on:**

My role is primarily working with teams and organisations to increase their knowledge and skills about working with families with a refugee background and survivors of torture and trauma. I particularly enjoy providing professional development to all levels of an organisational system, from the front of house staff to the head of organisation. I feel that every person in an organisation can have a lasting and meaningful impact on the experiences of refugee families and therefore can be a part of their recovery from the pervasive effects of violence and persecution.

### **What have you enjoyed about working on Bridging the Gap professional development?**

Bridging the Gap is a very special project because it has brought together researchers, policy makers, practitioners and clients to produce effective and innovative system changes. Partnering with the Healthy Mothers Healthy Families group at Murdoch Childrens Research Institute has been a wonderful experience. Bridging the Gap combines the practice knowledge from Foundation house with the research and advocacy skills of the institute;

this has resulted in a highly effective and functional partnership.

### **What would you like participants to take away from professional development?**

I would like participants to walk away with an understanding of what women and families from a refugee background may have been through and how these experiences may impact how they access, receive and respond to health services. I hope that by experiencing the resilience and suffering that co-exists in the lives of so many people escaping war and persecution that participants gain a level of empathy that shapes all future interactions with people from refugee backgrounds. At an organisational level I would like every organisation we work with to look at their policies, structures and protocols with fresh eyes, an openness to change and a desire to provide the best possible service to these clients.

### **What are your hopes for Bridging the Gap?**

I hope that Bridging the Gap continues to expand in both size and influence in the coming years. I feel that Victorian maternity and child health services could lead the world in being trauma informed. I hope for a health system which is innovative and flexible enough to respond to the needs of emerging and existing communities and where health services are imbedded in existing social and cultural structures.



**Jennifer Addy**

## Publications

### **Bridging the language gap: a co-designed quality improvement project to engage professional interpreters for women during labour.**

In August this paper and an accompanying policy and practice brief were published reporting the learnings and achievements of the Bridging the Gap initiative Language in Labour. Written by managers at Dandenong Hospital and researchers the paper concludes that:

Improving interpreter engagement in high intensity hospital birth suites is possible with supportive leadership, multidisciplinary co-design and within a framework of quality improvement cycles of change.

Please access the paper here: <http://www.publish.csiro.au/ah/AH16066> and the policy and practice brief on the Bridging the Gap website (see over)

## DHHS announcements

In September the Minister for Health, Jill Hennessey launched the **2016 -2017 State budget for refugee and asylum seeker health and wellbeing Victoria**. Please see here: <https://www2.health.vic.gov.au/about/publications/factsheets/2016-17-budget-launch-refugee-asylum-seeker-fact-sheet>

**Targeting zero: supporting the Victorian hospital system to eliminate avoidable harm and strengthen quality of care**, Duckett et al, October 2016:

The announcement of reforms to Victorian Quality and Safety in healthcare follows a review of a cluster of perinatal deaths in Victoria.

### **Key findings from the review are:**

- Across all modern health systems, despite concerted efforts, avoidable harm and variability in care occurs. Avoidable harm occurs because of gaps in systems, rarely because of individuals or malice.
- Variability means valuable knowledge is not being implemented widely so many patients are receiving care that diverges from best practice.

- 1 in 10 patients suffer complications from a hospital stay, with half being avoidable. Most have minor impacts but a significant minority ends in disability and death.
- The outcomes are devastating for families and costly across the system. Fixing this is not straightforward.

The full review with recommendations can be found here:

<https://www2.health.vic.gov.au/hospitals-and-health-services/quality-safety-service/hospital-safety-and-quality-review>

## About Bridging the Gap

Bridging the Gap is a partnership between Healthy Mothers Healthy Families research group at Murdoch Childrens Research Institute and the Victorian Foundation for Survivors of Torture (Foundation House), maternity and maternal & child health services in Melbourne's south east and west, local and state government.

Bridging the Gap is supported by contributions from the partner organisations and a partnership grant from the National Health and Medical Research Council (2013-2017).

For more information about Bridging the Gap: <https://www.mcric.edu.au/bridging-the-gap>

This newsletter has been prepared by the Healthy Mothers Healthy Families research group at MCRI. For more information please contact:

Wendy Dawson  
✉ [wendy.dawson@mcric.edu.au](mailto:wendy.dawson@mcric.edu.au)  
☎ 9936 6051

Danielle Vanpraag  
✉ [danielle.vanpraag@mcric.edu.au](mailto:danielle.vanpraag@mcric.edu.au)  
☎ 9936 6084

Elisha Riggs  
✉ [elisha.riggs@mcric.edu.au](mailto:elisha.riggs@mcric.edu.au)  
☎ 9936 6646

Jane Yelland  
✉ [jane.yelland@mcric.edu.au](mailto:jane.yelland@mcric.edu.au)  
☎ 9936 6673