

FOSTERING WELLNESS AMONG SPANISH-SPEAKING REFUGEE WOMEN



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Refugee Children Center

- Non-profit organization located in North Hills, California
- Founded by Pastor Fred Morris in 2015 as a response to the wave of unaccompanied minors crossing the border
- Organization's vision: " A holistic approach while empowering them through education and an understanding of collaboration (Refugee Children Center, 2021)
- Structured under two departments: Immigration Legal Services and Children and Families Department
- Immigration Legal Services offers include immigration court proceedings, reunification processes, and assistance with United States citizenship and immigration services (USCIS) forms
- The Children and Families Department offers social services, enrichment activities for children and caregivers, and a basic needs and food relief program

Summary of Needs Assessment

Three key areas of need unveiled at the Refugee Children Center:

1. Women's wellness
2. Youth empowerment
3. Adolescents social-emotional wellness

Literature Review

- Person-centered approach within a community-based program can help identify where other programs can co-exist to fulfill the participants needs (Lord & Munoz, 2023)
- Language and health literacy should be considered when conducting evaluations and profiles, as it can significantly influence the effectiveness of therapeutic interventions (Lord & Munoz, 2023)
- Narrative methodologies can be utilized to obtain a broader perspective of their occupational needs through storytelling (Im et al., 2020)
- Acknowledging social determinants such as economic policies and systems, development strategies, and societal norms can help identify the influence it has on the individual's health (Doll et al., 2023)
- Stigma, limited acceptance rates to program and treatments, language limitations, and a lack of knowledge about services have been revealed as barriers that refugees encounter (Schlaudt et al., 2020)

Individualized Learning Objectives

1. By the sixth week of the DCE, the capstone student created the program curriculum with weekly themes associated with the eight dimensions of wellness of the Substance Abuse and Mental Health Services Administration (SAMHSA)
2. By the end of DCE, the capstone student implemented and facilitated a seven-week wellness program for refugee women to increase QOL, occupational engagement, and community reintegration
3. By the end of DCE, the capstone student assessed the effectiveness of the program

Project Description and Implementation

A seven-week community-based wellness program designed to encompass the eight dimensions of wellness. Each dimension was broken down each week, and participants were able to gain valuable occupational skills and strategies to enhance their overall well-being and quality of life (QOL)

Qualifications included:

- 1) English or Spanish-speaking refugee women
- 2) At least 18 years old
- 3) Identified as a woman
- 4) Active participants in the community served by the Refugee Children Center

Week 1-3

- Conducted needs assessment
- Distributed flyers/brochures

Week 1-6

- Developed curriculum
- Created pre/post surveys

Week 7-13

- Facilitated workshops once a week for seven weeks

Week 13-14

- Administered post-surveys
- Analyzed and interpreted data

Evaluation and Project Outcomes

Seven participants completed the anonymous pre and post-survey

- Composed of **11 multiple-choice and two open-ended questions**

- Items found in part two of the survey required participants to **rate their responses on a scale of one through ten**, rating their overall well-being, physical activity, nutritional habits, sleep, and stress levels

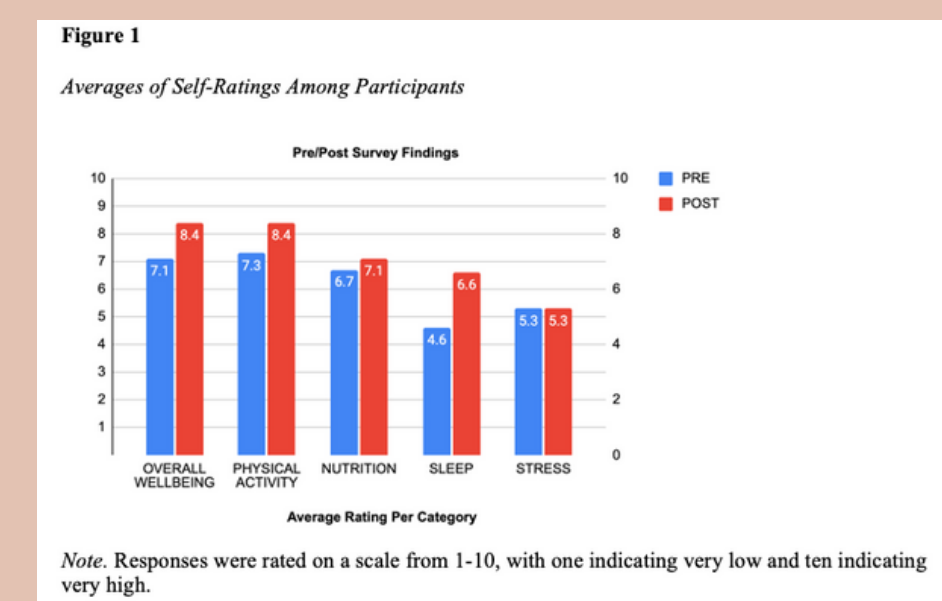


Table 1
Nonparametric test: Wilcoxon Signed-Rank Test Findings

Item	Pre-Test Mean	Post-Test Mean	Change	p	Effect Size
Overall Well-being	7.143	8.429	1.286	0.195	0.393
Physical Activity	7.286	8.429	1.143	0.336	0.238
Nutrition	6.714	7.143	0.429	0.446	0.133
Sleep	4.571	6.571	2.000	0.086	0.607

- The average self-ratings among participants, illustrated in a column chart, revealed an **increase in four out of five items**
 - Item four, sleep, demonstrated a large difference in value, implying a significant change
 - Item five, stress, was not listed due to no change in value
- A non-parametric test, the **Wilcoxon-signed rank test**, was used to interpret the p-values
 - Items one through four did not approach the significance level of **0.05**,
 - Sleep claimed a p-value of **0.086**, indicating the closest value to the significance level
 - The effect size fell within the small range (Lakens, 2013), claiming a small observable change

Guiding Theoretical Frameworks

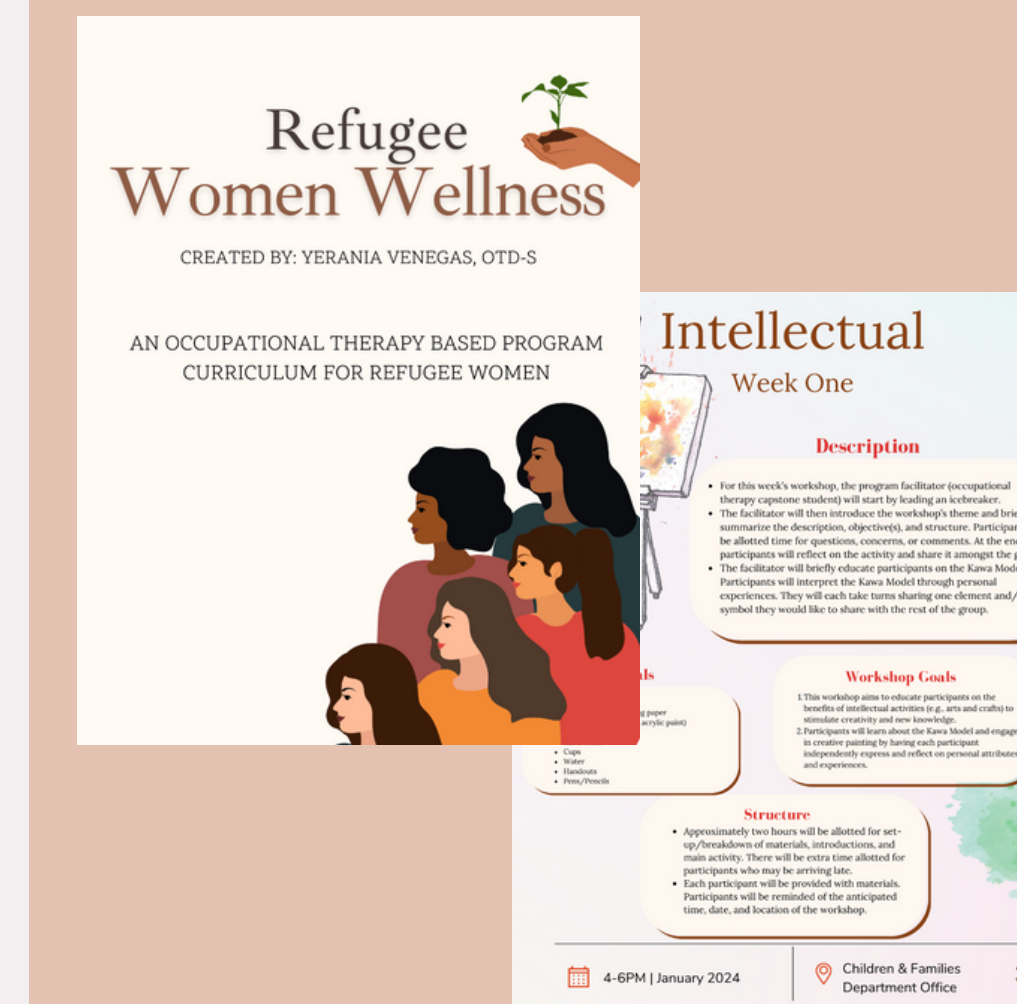
SAMHSA's Eight Dimensions of Wellness

- Encompasses emotional, physical, occupational, intellectual, financial, social, environmental, and spiritual dimensions (SAMHSA, 2016)

The Model of Human Occupation

- Allowed the capstone student to understand how clients engage with their environment, the motive behind the interaction, and how these interactions can be modified and adapted to enhance their occupational engagement (MOHO, 2016)

Scholarly Deliverables



Scholarly deliverables include:

- English and Spanish digital pre and post-surveys
- Completed group program curriculum
- Educational handouts and activity handouts

The Refugee Children Center takes ownership of the scholarly deliverables and oversees program implementation. The organization may expand on the existing program and utilize ongoing research to enhance results

Scan the QR code to view



References



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