



Child Safety Basics: Intervention with Resettled Refugees

Safe Kids Worldwide Childhood Injury
Conference 2013

Sarah Haverstick, CPSTI

Objectives

- Review the development of the refugee safety class series in Nashville, Tennessee.
- Discuss the challenges of working with refugee populations in the community.
- Discuss the opportunities to replicate a similar initiative in your own community.

BACKGROUND

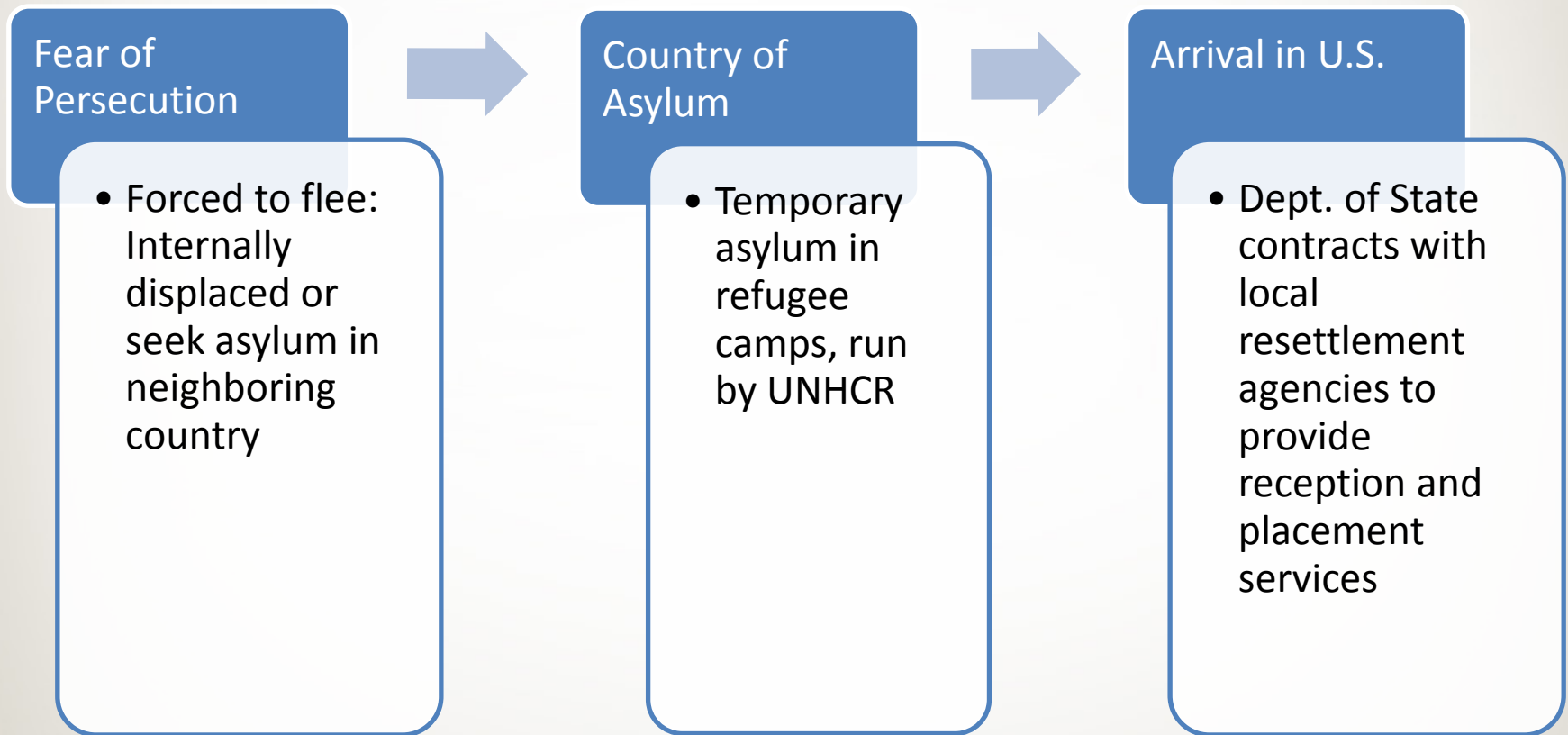
Safe Kids Cumberland Valley

- Lead agency: Monroe Carell Jr. Children's Hospital at Vanderbilt
- Location: Nashville, Tennessee
- Coverage area: 41 counties in Middle Tennessee
- Approximately 40 – 50 active coalition members:
 - Safe Kids Buckle Up
 - Safe Kids Walk This Way
 - Program for Injury Prevention in Youth Sports
 - Water Wise Middle Tennessee
 - Safe Sleep
 - Refugee Project

Who are refugees?

- Any person who has left their country of origin and is unable or unwilling to return (or avail themselves of the protection of that country) because of persecution or a well-founded fear of persecution on account of race, religion, nationality, membership in a particular social group, or political opinion.

How Does a Refugee Come to the U.S.?



What Happens After Arrival?

Arrival

- Met by resettlement agency
- Orientations (health, culture)



Initial Enrollments

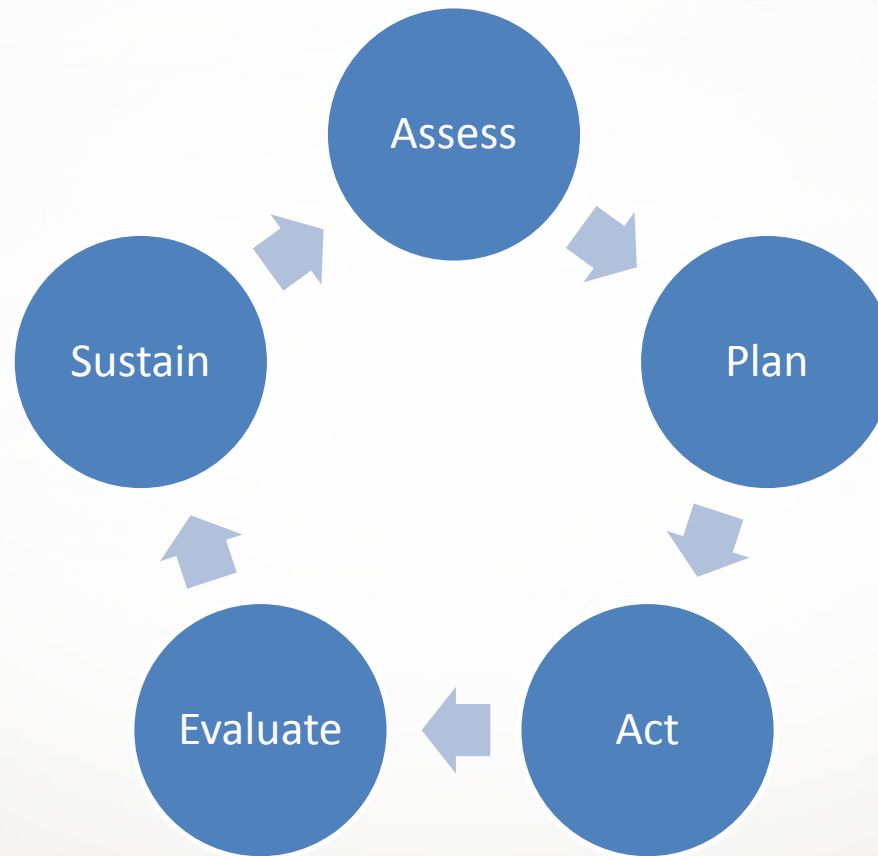
- Entry med screening; Medicaid eligibility
- 30 - 90 days resettlement services; Food Stamps; school system

Follow Up

- Short-term (Employment services) – up to 8 months
- Long-term (Employment/Social services) – up to 5 years

OUR PROJECT

Project Development Cycle



Assess

January
2010

- Request from Metro Public Health Department presented at Safe Kids meeting.

Spring
2010

- Ongoing discussion with Safe Kids partners during coalition meetings.

Assess

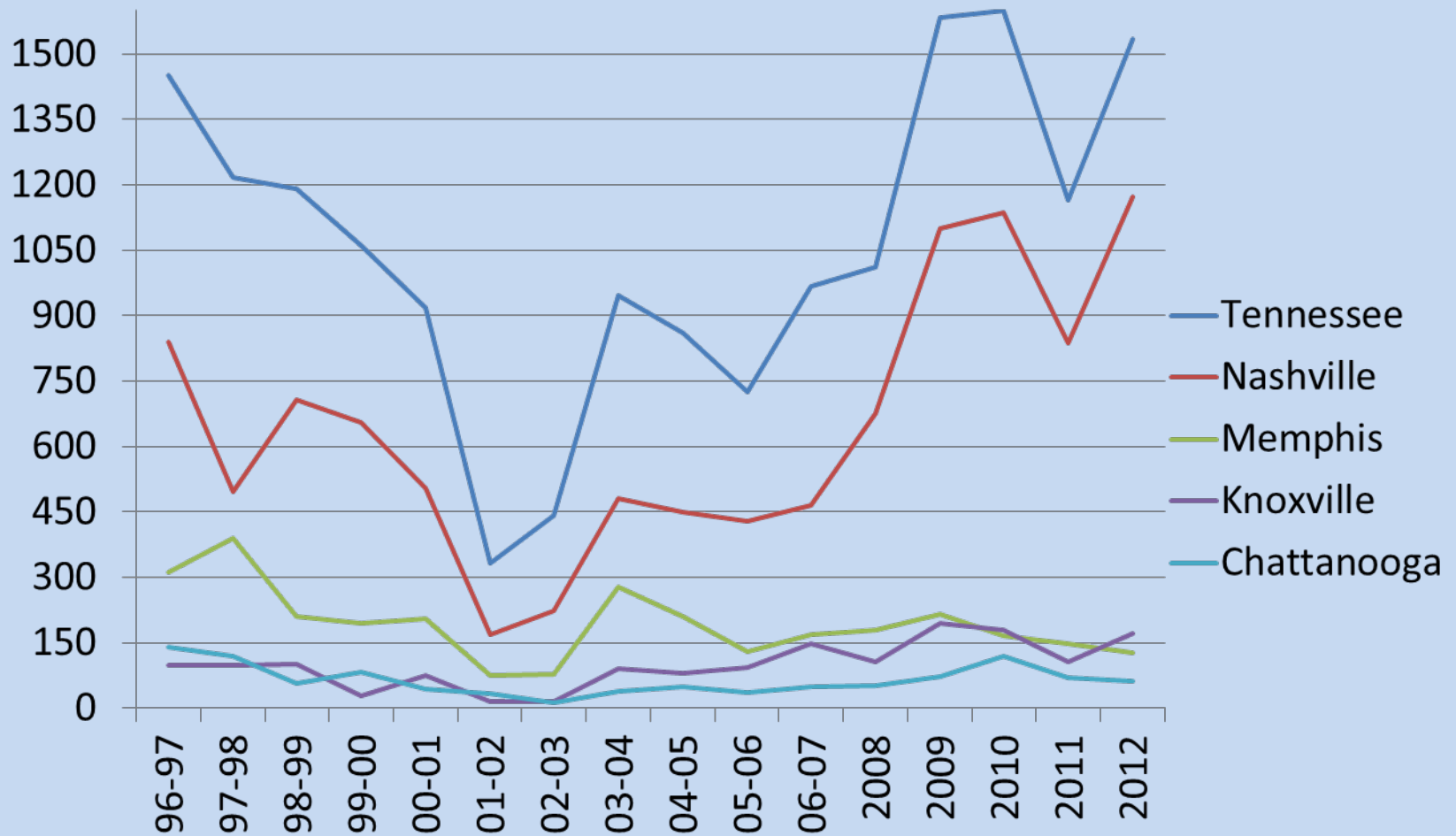
- MANY Questions:
 - Which refugee populations should we work with?
 - How do we find participants?
 - How do we provide interpretation?
 - Do we need to translate materials?

Plan

Summer
2010

- Research local **refugee resettlement agencies**.
- Research and discussions with resettlement agencies re: need of local refugees.

Refugees in Tennessee

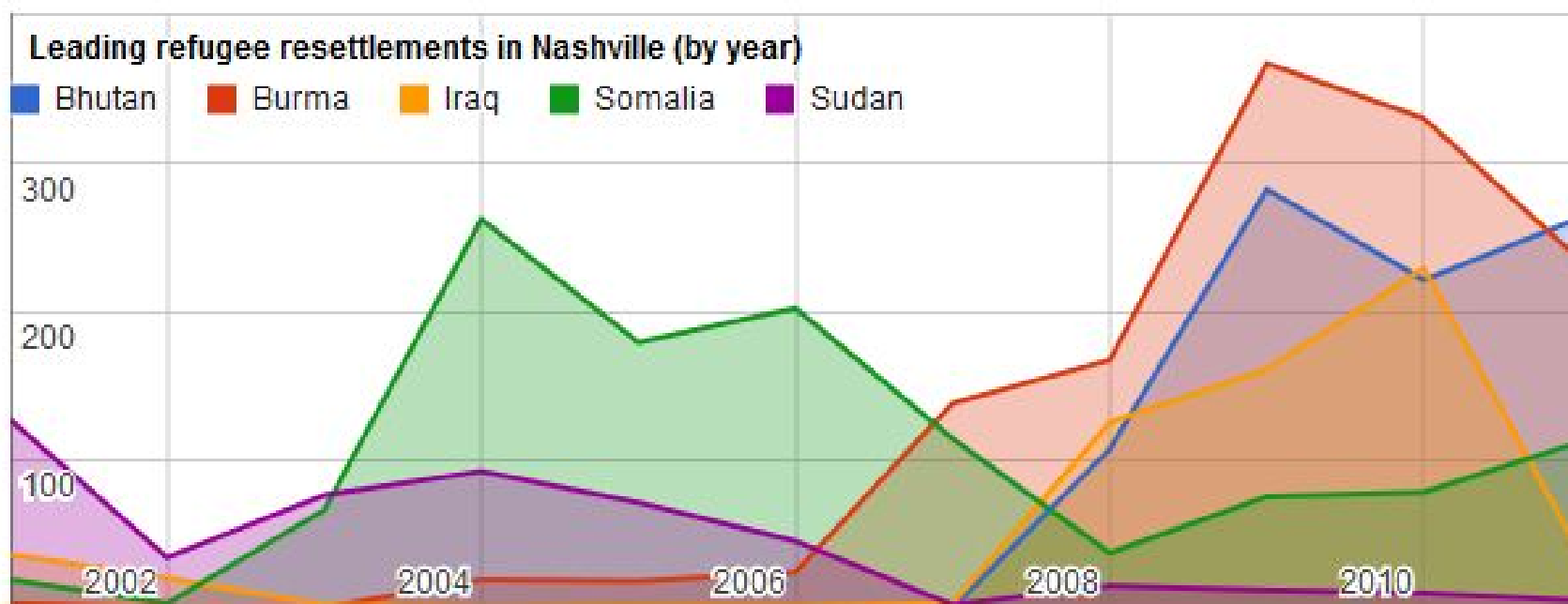




Leading refugee resettlements in Nashville

The largest refugee communities in Nashville are from Bhutan, Burma, Iraq, Somali and Sudan. The chart shows how many refugees from these nations arrived from 2001 through 2011.

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Source: U.S. Department of State

Plan

- Basic safety issues addressed by expert community partners:
 1. Calling 911 (Emergency Communications Center)
 2. Emergency Preparedness (Nashville Fire Department)
 3. Cooking Safety (Nashville Fire Department)
 4. Poison Prevention (Tennessee Poison Center)
 5. Home Safety/Water Safety/Safe Sleep (Health Department)
 6. First Aid/Child Abuse (Children's Hospital)
 7. Pedestrian/Bike Safety (Children's Hospital)
 8. Child Passenger Safety (Children's Hospital)
- Pre/post test utilized to gauge participant change in knowledge.
- Corresponding safety products distributed to participants.
- Cultural background training provided to all speakers.

Act/Evaluate

Safe Kids Cumberland Valley
Class #1 – Calling 911/Smart 911

PRE-TEST

1. Should you call 911 if someone hurts you?

YES 

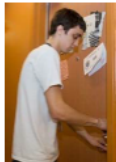
NO 



2. Should you call 911 if you are locked out of your apartment?

YES 

NO 



3. Should you call 911 if your apartment is on fire?

YES 

NO 



Act/Evaluate

Winter 2011

- Pilot in (Congolese)

Debrief meeting
and changes to

Fall 2011

- Second round (Congolese, Burmese)

Debrief meeting
and changes to
curriculum.

Fall 2012

- Third round (Congolese, Burmese, Malali Bantu)

Debrief meeting
and changes to
curriculum.

Summer 2013

- Fourth round of classes (Congolese, Burundi, Rwandan)



Sustainability

Line Item	Total Cost	Provided By
Safety Products	\$1,900	Children's Hospital
End of Class Celebration	\$50	Children's Hospital
Printing	In-kind	Partners & Children's Hospital
Interpreter Services	In-kind	Catholic Charities
Meeting Space	In-Kind	Catholic Charities

Sustainability

- No one agency bears the brunt of the course load – **many Safe Kids partners engaged** = small individual time commitment for each agency.
- **Partnership with resettlement agency** – enhances and benefits their work with refugees.

LESSONS LEARNED...

Results

- Pilot (Burmese)
 - Average Participants/Class: 16 adults (representing 42 children)
 - **Pre-Test Average: 55%**
 - **Post-Test Average: 83%**
- Second Round of Classes (Burmese)
 - Average Participants/Class: 19 adults (representing 50 children)
 - **Pre-Test Average: 83%**
 - **Post-Test Average: 96%**
- Third Round of Classes (Somali Bantu)
 - Average Participants/Class: 6 adults (representing 39 children)
 - **Pre-Test Average: 76%**
 - **Post-Test Average: 87%**

What Works...

- Meeting at an apartment complex near the community.
- Having an advocate inside the community.
- Providing interactive sessions.
- Walking around outside to demonstrate safety lessons.
- Recognition for class participants.

Hands-on Demonstration



Use of Pictures/Images



Challenges

- Language barriers.
 - Multiple dialects (Burmese).
 - Low literacy levels in native languages.
- Lack of familiarity with surveys, pre/post tests.
 - Group answers.
 - Interpreters providing “leading” interpretation.
- Unfamiliar language/concepts.
- Transportation to class.
- Limited vehicles for car seat installations.

Successes

- Developing relationship with different populations – willingness to learn, desire to share with others.
- Connecting families to other resources.
 - Ex: Burmese child with special needs referred to car seat clinic.
- Partnership with resettlement agency.

“The Safety Education Sessions are such a great help to our Burmese Community. We learned so many things from each class. As we live in Myanmar and Refugee Camp, it’s a big gap to adapt here. There are no 911, no car seat, no parking lot, no fire detector or cooking facilities & not use to have things from USA. Most of all things are new. We really appreciate for your choosing our Burmese Community to learn more about safety. It’s a precious lesson educating us. Useful for our daily life.

On behalf of our Burmese Community, I would like to say again thank you very much. **You make us a better life & home."**



OPPORTUNITIES FOR REPLICATION

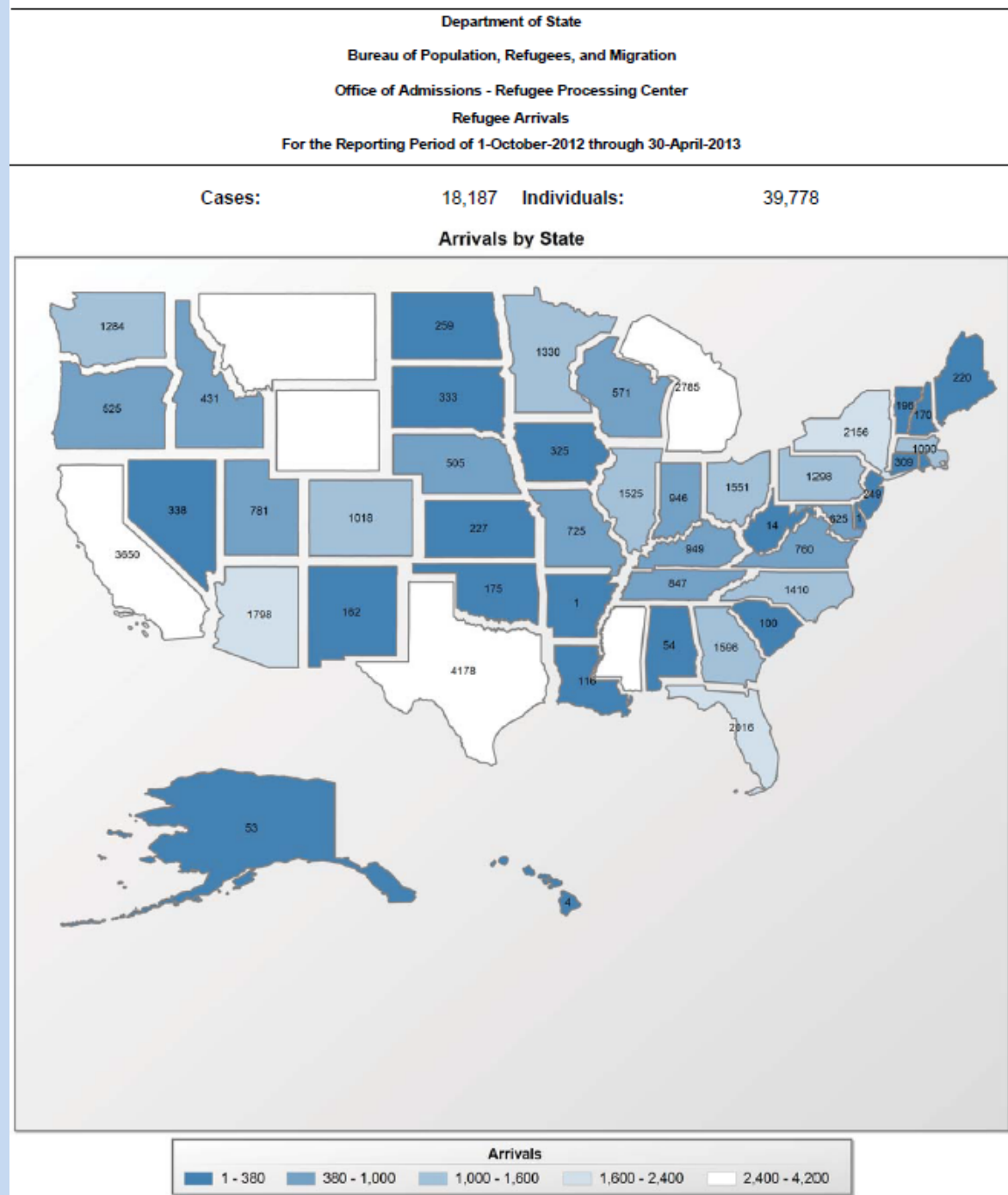
Opportunities for Your Program

- Find a local resettlement agency.
 - National Voluntary Agencies
 - Church World Service (CWS)
 - Ethiopian Community Development Council (ECDC)
 - Episcopal Migration Ministries (EMM)
 - Hebrew Immigrant Aid Society (HIAS)
 - International Rescue Committee (IRC)
 - US Committee for Refugees and Immigrants (USCRI)
 - Lutheran Immigration and Refugee Services (LIRS)
 - United States Conference of Catholic Bishops (USCCB)
 - World Relief Corporation (WR)
- Establish a contact with the resettlement agency.
 - www.acf.hhs.gov/programs/orr/resource/orr-funded-programs-key-contacts



- Become knowledgeable about the refugees in your community.

- Refugee Processing Center:
www.wrapsnet.org
- Admission & Arrival Reports (many reports available, broken down by state, city, language, nationality, origin, etc.)



Opportunities for Your Program

- Start small. Do not attempt to translate all materials – get to know your population first!
- Be flexible.
- Be prepared for large families with limited resources.
- Work with existing Safe Kids contacts.
- Utilize in-kind support from partner agencies to minimize budget.



Thank you!

Sarah Haverstick

sarah.haverstick@vanderbilt.edu

615.936.7656