



African Immigrant Health and Wellness

A Community Health Needs Assessment in
West and Southwest Philadelphia



Project Team



Kent Bream, MD



Cristle Ike



Gabriela Montes de Oca

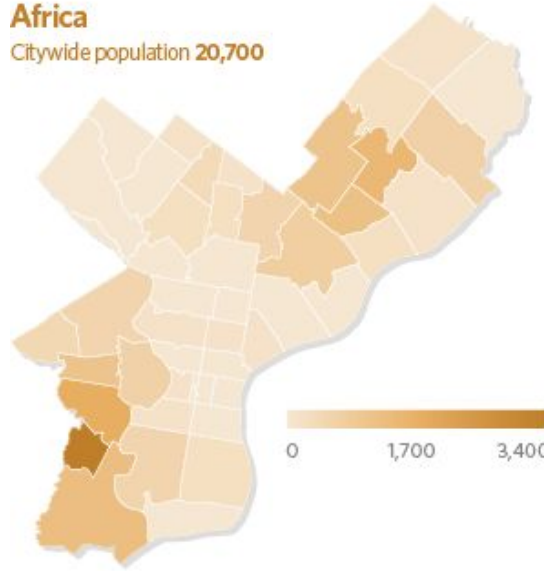


Thomas Statchen

Background



Africa
Citywide population 20,700



- Number of Black immigrants in Philadelphia has increased by **121%** (majority from African countries)
- Largest percentage of African immigrants in Philadelphia reside in the **Southwest** region, making up over **20% of the population**

1. U.S. Census Bureau (2019)
2. Pew Research Center, January 2022, "One-in-Ten Black People Living in the U.S. Are Immigrants"
3. Image Source: U.S. Census Bureau, American Community Survey, five-year estimates, 2012-2016

Motivation for Project

- Disproportionate rates of **chronic diseases** (ex: HBV and hypertension) and high rates of **stress**
- **Navigating** the complex healthcare system (insurance, language, cultural differences)
- **High morbidity rates that have been observed by HUP providers:**
 - Increased utilization of emergency services for care of chronic diseases
 - Increased utilization of emergency services late in progression of disease
- **Ethnic enclave and identifiable community**

Study Design

Community Health Needs Assessment (CHNA):

A process in which an individual or team collaborates with a community to identify certain healthcare needs in a certain community for the sake of programming, changing legislation, and more

Information, Research,
and Data Collection

Prioritization and
Strategy Design

Implementation and
Action

Study Aims

01

Assess health
needs, barriers,
and assets in the
African Immigrant
community

02

Prioritize needs
and generate
potential solutions
in partnership with
community
members and
organizations

03

Implement
programming with
the community and
Penn Medicine to
address
population's needs

Research Timeline

Information, Research,
and Data Collection

Prioritization and
Strategy Design

Implementation
and Action

Phase 1a

Semi-Structured
Interviews

Phase 2

Focus Groups

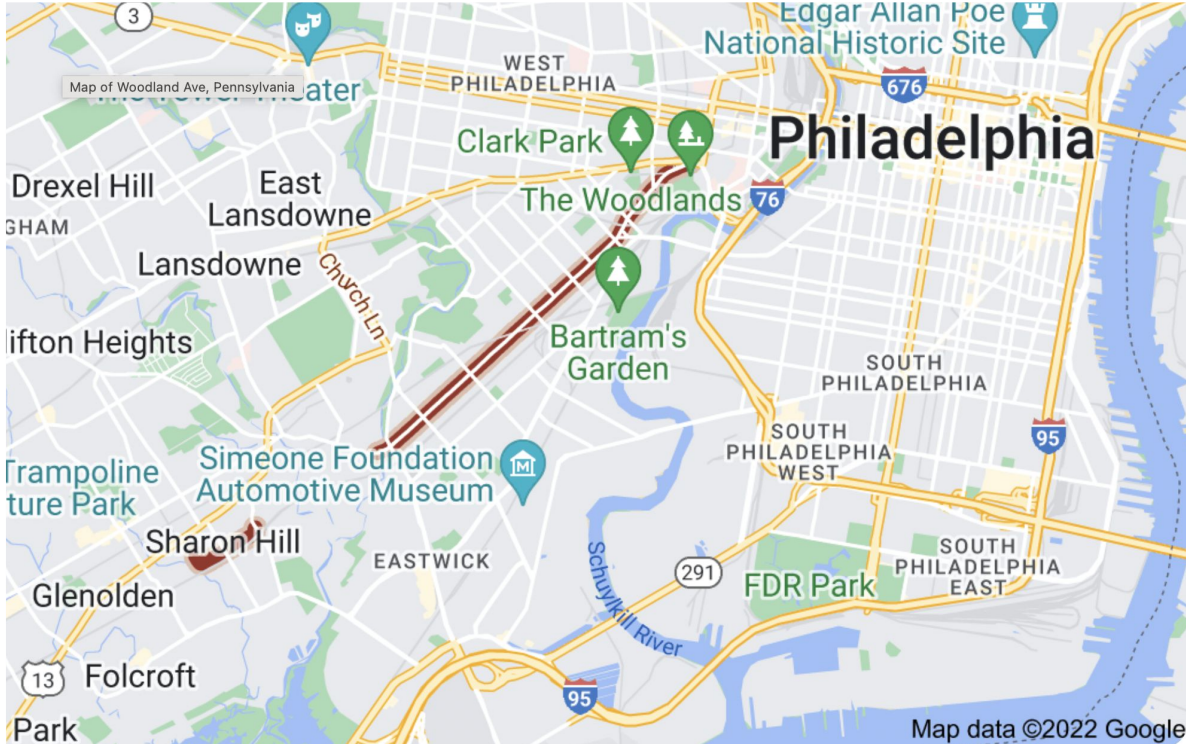
Coding Interviews

Phase 1b

Implementation

Phase 3

Methods - Interviewing



- Key Informants and community members
- **Snowball sampling** to recruit others
- Collaborating with community organizations
- Talking with passerbys

Methods - Interviewing

Interview questions cover **healthcare experiences, opinions on the community, healthcare accessibility**, etc:

“What are the biggest health issues that concern you or other community members where you live?”

“What is your first course of action if you or someone you know is sick?”

“In what ways does your healthcare provider make you feel understood?”

-



Methods - Coding

Interviewer: What are the biggest issues that concern you or other community members where you live?

Speaker: Um, I think lack of, um, maybe education. You know, in terms of people knowing where to go get services, or what service they are entitled to, or where they can get healthcare, or, you know, what, or I guess also the reasons why they should go to the emergency room versus going to their outpatient or PCP primary care provider, that's if they have one. Um, so I think that and not having insurance as well can play a part in that so people end up in the emergency room when things have gotten worse for them. So I think a lack of education, not knowing the resources people have, and a lack of education in terms of healthcare, what they can get and where they can go for services.

Interviewer: Right, right. So could you elaborate more on what you have noticed when people choose to go to the emergency room versus the primary care that may be available to them?

Speaker: I think um, from conversations with people, you know, maybe the elderly, it's like when they have, I don't know, like a headache, it's like "Oh I need to go to the emergency room" but I think also that stems from the fear of "Oh I'm older so I could be exposed" or they have all these different symptoms and they think "It's because I'm older, so I need to go to the ER so I can be seen faster" rather than "we need to call my PCP [if they have one] and wait for an appointment two weeks when I need something now" or "my PCP will not answer me, so I need to go to the ER to get immediate attention." Yeah.

Interviewer: I see...

Resource Availability

Health Beliefs
(Treatments)

Access to Care (Barrier)

Health Insurance

Health Resources
(Emergency Room)

Health Beliefs
(Illness)

Aging

Wait Times

Advertising/Outreach



Preliminary Results

- Navigation and Access to Care
 - Mitigating cost (ex: lack of access to insurance)
 - Immigration protection
 - Evidence of a **fragmented community health system**
 - Many organizations are providing very similar but limited care for different populations
 - Lacking licensed practitioners
- 

Next Steps

Phase 1a

Semi-Structured
Interviews

Phase 2

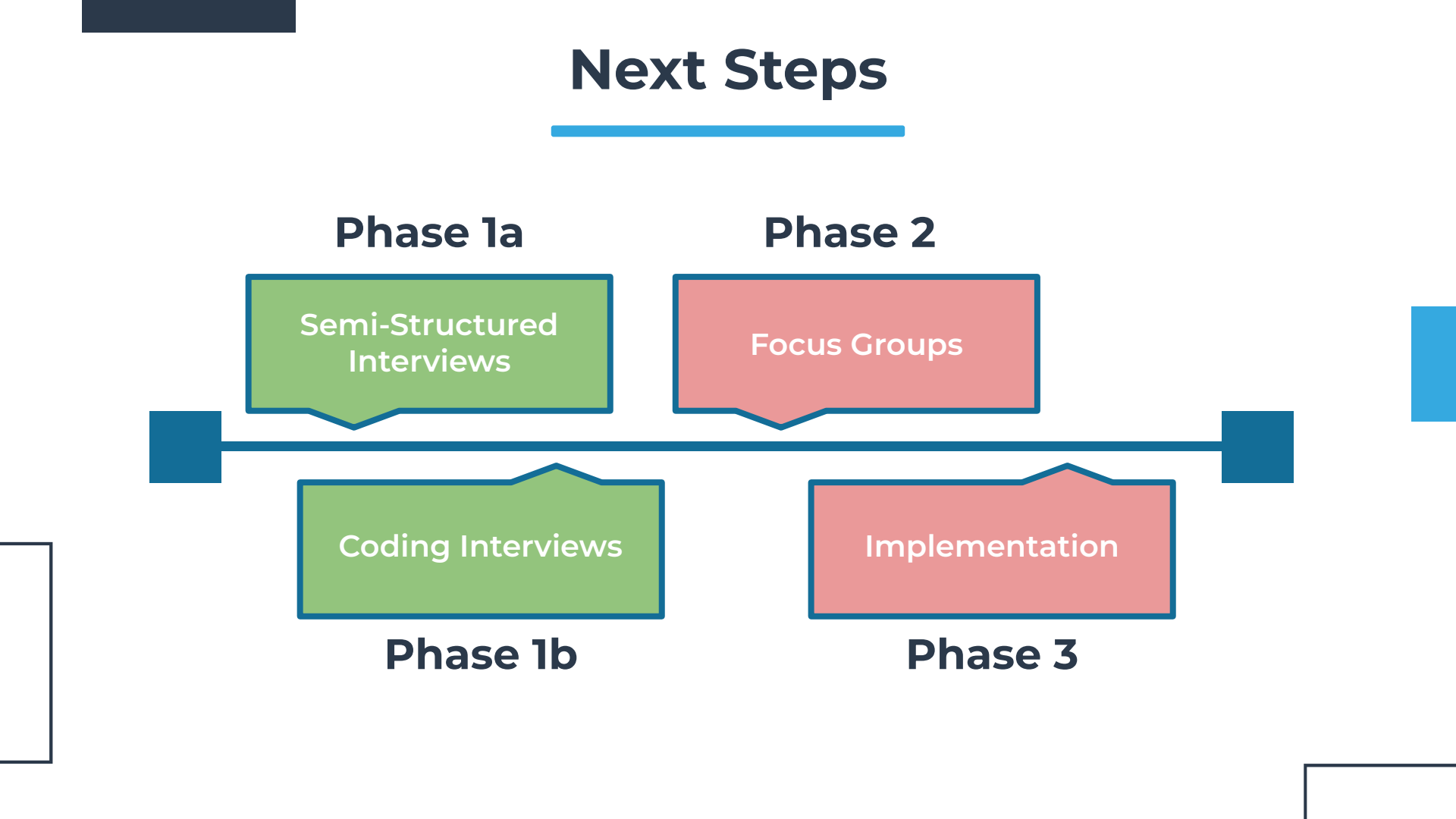
Focus Groups

Coding Interviews

Phase 1b

Implementation

Phase 3



My Role

1

Working on
interview guide
and
interviewing

2

Creating a
Codebook

3

Coding
Interviews and
Field Notes

4

Building and
Maintaining
Community
Collaborations

5


Creating
Focus Groups

What I've Learned

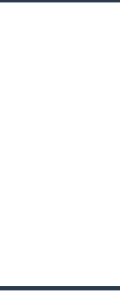
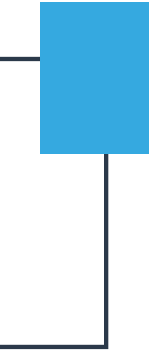
- How to build and maintain collaborations with community organizations
- Organizations act as gatekeepers for controlling access to community members
- How to code to focus on justice and system change instead of the historically marginalized
- My love for Implementation Research!



Thank You!

- Dr. Kent Bream, MD
 - Thomas Statchen
 - Gabriela Montes de Oca
 - Joanne Levy and LDI
 - SUMR 2022
- 

Questions?



Bibliography

1. U.S. Census Bureau (2019). American Community Survey. Retrieved from <https://www.policymap.com/>.
2. Pew Research Center, January 2022, "One-in-Ten Black People Living in the U.S. Are Immigrants"
3. U.S. Census Bureau, American Community Survey, five-year estimates, 2012-2016
4. RMS Blog Staff (2014). 7 Components of a CHNA | Community Health Needs Assessment
5. Freeland, Catherine, et al. "Barriers to hepatitis b screening and prevention for african immigrant populations in the united states: A qualitative study." *Viruses* 12.3 (2020): 305.
6. Vaughn, Lisa M., and Miranda Holloway. "West African immigrant families from Mauritania and Senegal in Cincinnati: A cultural primer on children's health." *Journal of community health* 35.1 (2010): 27-35.
7. Covington-Ward, Yolanda, Kafuli Agbemenu, and Annamore Matambanadzo. "" We feel like it was better back home:" Stress, Coping, and Health in a US Dwelling African Immigrant Community." *Journal of health care for the poor and underserved* 29.1 (2018): 253-265.
8. Olukotun, Oluwatoyin, Lucy Mkandawire-Valhmu, and Peninnah Kako. "Navigating complex realities: Barriers to health care access for undocumented African immigrant women in the United States." *Health care for women international* 42.2 (2021): 145-164.