

# Syrian Refugee Women: A Vulnerable Population Struggles to Find Care

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## INTRODUCTION

Canadians pride themselves for having a health system founded on the principles of universality and accessibility. Over the next few years, the system must address the health-related needs of Syrian refugees in Canada. Between November 2015 and September 2016, Canada welcomed 31,444 refugees from Syria and is currently processing another 20,261 applications.<sup>1</sup> Compared to the previous intake of 1,306 Syrian refugees in 2013, this represents a large influx of citizens that will undoubtedly strain the health system.<sup>2</sup> To manage this increased resettlement commitment, the government has adopted a targeted approach to resettlement by prioritizing the needs of women, a particularly vulnerable group among refugees due to their possible history with sex and gender-based violence.<sup>3,4</sup> In order for the health system to truly match the values it was founded upon, there is a need to address the specific health challenges faced by refugees and, in particular, the challenges faced by refugee women once they arrive in Canada.

## MENTAL HEALTH SERVICES

It would come as no surprise that refugees may be exposed to many stressors, which place them at a higher risk for mental illness. This is especially critical for women refugees, as gender is a critical determinant of mental health. Studies have shown that depression, anxiety, and sexual domestic violence affect women to a much greater extent than men across most countries and settings.<sup>5</sup> In fact, female refugees from Syria have

repeatedly reported rape or fear of rape as the chief motivation to flee the country.<sup>6</sup> Moving forward, it will be important to monitor the mental well-being of women refugees in Canada and offer programs that will support their health. As the healthcare of refugees has been primarily coordinated at a provincial level, it is critical for each province to organize and support mental health services for refugees, rather than relying on direction from the federal government. For example, in Ontario, the Central Local Health Integration Network funds an organization called Across Boundaries, which provides ethno-culturally specific and gender-sensitive mental health services.<sup>5</sup> Existing programs such as Across Boundaries can act as models for policymakers when they are planning for the services needed to address the mental health challenges of Syrian refugee women.

## PRIMARY CARE

While access to primary care is a concern for the general immigrant population, this challenge is magnified with refugees given their turbulent past. Refugees are nearly twice as likely to report poor health within four years of their arrival as compared to the general immigrant population, thus it is important that they engage with the primary care system.<sup>7</sup> A barrier to accessing primary care is the lack of information regarding system navigation, a phenomenon that is especially pronounced among women refugees, as they are less likely to gain language proficiency compared to male refugees.<sup>8</sup> Community navigators are trained healthcare workers who link patients to healthcare providers and support patients to