

DOCUMENT RESUME

ED 334 312

UD 028 130

AUTHOR Muecke, Marjorie A.
 TITLE Nursing Research and Practice with Refugees. Southeast Asian Refugee Studies. Bibliography. Occasional Papers, Number 10.
 INSTITUTION Minnesota Univ., Minneapolis. Southeast Asian Refugee Studies.
 REPORT NO CURA-90-13
 PUB DATE 90
 NOTE 39p.; A publication of the Center for Urban and Regional Affairs (CURA).
 PUB TYPE Reference Materials - Bibliographies (131)
 EDRS PRICE MF01/PC02 Plus Postage.
 DESCRIPTORS *Cultural Influences; Ethnic Groups; *Health Needs; Methods; Nurses; *Nursing; *Nursing Research; *Refugees
 IDENTIFIERS *Exploratory Studies

ABSTRACT

This 99-item bibliography gathers the widely dispersed nursing literature on refugees, including unpublished master's degree theses and conference proceedings. Nurse researchers, more than researchers in other health care fields, have undertaken exploratory studies to document and interpret the health beliefs and health care practices of various groups of refugees. The bibliography is arranged according to the following refugee groups: (1) Afghan; (2) Arab; (3) Cuban and Haitian; (4) El Salvadoran; (5) Ethiopian; (6) Indochinese and general Southeast Asian, including Cambodian, Vietnamese Chinese, Pmong and Mien, Lao, and Vietnamese; (7) Iranian; (8) Polish; and (9) Tibetan. In each section, annotated citations to empirical studies, which represent the cutting edge of nursing interpretation of the refugee phenomena and are the least accessible, precede unannotated citations to practice-focused publications appearing in books or journals. All publications cited are in English. (FMW)

 * Reproductions supplied by EDRS are the best that can be made *
 * from the original document. *

Bibliography: Nursing Research and Practice with Refugees

Southeast Asian Refugee Studies

Occasional Papers

U. S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

- This document has been reproduced as received from the person or organization originating it.
- Minor changes have been made to improve reproduction quality.
- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

"PERMISSION TO REPRODUCE THIS
MATERIAL HAS BEEN GRANTED BY

J. Weir

Mum. Univ.

TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)."



Number Ten
by Marjorie A. Muecke

BEST COPY AVAILABLE

Bibliography: Nursing Research and Practice with Refugees

Southeast Asian Refugee Studies

Occasional Papers

Number Ten

**by Marjorie A. Muecke
Department of Community Health Care Systems
School of Nursing SM-24
University of Washington
Seattle, Washington 98195**

**Southeast Asian Refugee Studies Project, Center for Urban and Regional Affairs
University of Minnesota, Minneapolis, Minnesota, 1990**

SOUTHEAST ASIAN REFUGEE STUDIES OCCASIONAL PAPERS

Series Editor: Bruce T. Downing

- Number One: *A Bibliography of the Hmong (Miao)* out of print
Compiled by Douglas P. Olney
- Number Two: *White Hmong Language Lessons*
By Doris Whitelock
- Number Three: *White Hmong Dialogues*
By David Strecker and Lopao Vang
- Number Four: *Training Southeast Asian Refugee Women for Employment:
Public Policies and Community Programs, 1975-1985*
By Sarah R. Mason
- Number Five: *An Annotated Bibliography of Cambodia and Cambodian Refugees*
Compiled by John Marston
- Number Six: *Southeast Asian Refugee Youth: An Annotated Bibliography*
Compiled by Ruth E. Hammond and Glenn L. Hendricks
- Number Seven: *The Hmong: An Annotated Bibliography, 1983-1987*
Compiled by J. Christina Smith
- Number Eight: *I Am a Shaman: A Hmong Life Story with Ethnographic Commentary*
By Dwight Conquergood, Paja Thao, and Xa Thao
- Number Nine: *The Life of Shong Lue Yang: Hmong "Mother of Writing"*
By Chia Koua Vang, Gnia Yee Yang and William A. Smalley
(translated by Mitt Moua and Yang See)

A publication of the
Center for Urban and Regional Affairs
University of Minnesota
330 Hubert H. Humphrey Center
301 19th Avenue South
Minneapolis, MN 55455

1990

Publication No. CURA 90-13

TABLE OF CONTENTS

	Code	Page
INTRODUCTION		1
REFUGEE ETHNIC GROUPS		3
AFGHAN	001	5
ARAB	002-006	5
CUBAN, HAITIAN	007-010	6
EL SALVADORAN	011-013	8
ETHIOPIAN	014-015	9
INDOCHINESE, SOUTHEAST ASIAN (General)	016-041	9
CAMBODIAN	042-063	15
CHINESE, VIETNAMESE	064	21
HMONG, MIEN	065-072	22
LAO	073	24
VIETNAMESE	074-083	25
IRANIAN	084	27
POLISH	085	28
TIBETAN	086	28
GENERAL REFUGEE HEALTH ISSUES	087-099	29
AUTHOR INDEX		33
SUBJECT INDEX		35

INTRODUCTION

Nurses, perhaps in greater numbers than any other health professional group, have worked directly with refugees both in refugee camps and in resettlement. In the United States, nurses provide first contact for refugees' encounters with the health care system. Clinical practice concerns with refugees have generated a spate of nurse-authored publications, and led nurse researchers to engage in the study of refugees. This thoughtful work could provide a basis for improving the quality of health care of refugee patients and clients—were it locatable and accessible.

Nursing literature on refugees is, however, broadly dispersed across subfields of nursing, particularly public health and maternal-child nursing, and across related fields, such as medicine, public health and the social sciences. Much of nursing research rests unpublished in master's degree theses or conference proceedings. This fragmentation of the literature has prevented cross-fertilization of thought and progressive development of nursing research with refugees.

The purpose of this bibliography is to redress the gap in nursing knowledge of refugee phenomena that is due to the poor circulation of this limited but expanding body of information. It is important to make nursing perspectives on refugees explicit in order to establish refugees as a legitimate focus of nursing inquiry. Nursing research with refugees is essential to develop nursing knowledge, and to inform nursing practice. Research is needed to make information on refugees better known and more adequately understood among the mainstream health care professions, and to inform clinical practice so that through it, health care providers can more effectively minimize the special health risks of refugees.

Nurse researchers, it appears, more than researchers in other health care fields, have undertaken exploratory studies as a means to document and interpret the health beliefs and health care practices of various groups of refugees. This reflects the nursing profession's central focus on patients' responses to actual or threatened health problems, and nursing's recognition that such responses are inevitably cultural in nature. A search through Dissertation Abstracts International vols. 39-49 (January 1979-March 1989) retrieved two nursing dissertations on refugees, Aroian 1988 and Egan 1984, both of which demonstrate central concern with inter-cultural communication with refugee groups resettled in the United States.

The bibliography is organized by refugee ethnic group. In each section, the annotations of empirically designed research studies precede a non-annotated list of practice-focused publications. Because research represents the cutting edge of nursing interpretation of refugee phenomena and comprises the least accessible category of nursing literature on refugees, the citations for all the studies in this bibliography are annotated in detail. The letter R is added as a suffix to each of their code numbers. Practice-focused articles that have been published in journals or books are not annotated because of their greater accessibility. The citations are exclusive to documents written in the English language.

REFUGEE ETHNIC GROUPS

AFGHAN

001

Magee, R.

1987 "Nursing aid: on the front-line." *Nursing Times* 83(23): 44-45.

The author trained Afghan women refugees in Pakistan to be lay health visitors.

ARAB

002R

Lipson, Juliene G. and Afaf I. Meleis

1989 "Methodological issues in research with immigrants." *Medical Anthropology* 11: 325-337.

The paper identifies methodological issues frequently encountered in conducting health research with immigrants (refugees are a class of immigrant), and describes several strategies that can improve the quality of research with immigrants. The study from which examples were drawn to illustrate the points of the discussion examined relationships between the immigration experience, ethnicity and health status, and beliefs and behavior among a convenience sample of 88 Armenians and Arabs in the United States. The interview schedule was administered orally in the language of the subject's preference. The schedule included semi-structured questions and structured tools such as the Cornell Medical Index, the Bradburn Morale Scale, and a Health Risk Appraisal. Issues discussed in the report are: access to informants and distrust; interviewing style; reciprocity; non-termination of the relationship with the subject; consent for participation; accuracy of data. Three research strategies are considered: providing a structure for reciprocity; devising ways of encouraging trust; and triangulation.

003R

Lipson, Juliene G., Alice E. Reizian and Afaf I. Meleis

1987 "Arab-American patients: a medical record review." *Social Science and Medicine* 24(2): 101-107.

An exploratory study to describe the help-seeking behavior of Arab-American patients and to determine if medical records identified culturally-related care needs. The study involved a review of 106 charts of patients with Arabic surnames who utilized outpatient, inpatient, or emergency facilities of a university medical center or a public teaching hospital from 1975 to 1981. The findings revealed more about charting habits of health professionals than about unique characteristics of patients in this ethnic group. Notes that indicated potential or actual problems related to culture shock and adjustment were almost non-existent, and information on English capability was lacking in more than half of the records examined. Diagnosis and treatment were thoroughly documented in every chart.

CUBAN, HAITIAN

004R

Reizian, Alice and Afaf I. Meleis

- 1986 "Arab-Americans' perceptions of and responses to pain." *Critical Care Nurse* 6(6): 30-37.

The study reports on the meaning of pain found among a sample of 102 inpatients and outpatients and through clinical experience with a *Mideast Study of Immigrants' Health Adjustment*. The subjects experienced high levels of anxiety both in anticipating and in undergoing painful procedures, and tended to react by seeking immediate relief through vocal and expressive behaviors. There is a discussion of implications for nursing care.

005

Burgess, H.A.

- 1987 "Into the Sudan...nursing in a refugee camp." *American Journal of Nursing* 87(7): 927-929.

006

Wighton, S.

- 1987 "Letter from Beirut: nursing under siege." *Nursing Times* 83(39): 38-39.

Primary health care in a Palestinian refugee camp.

CUBAN, HAITIAN

007R

Carter, Michael A.

- 1983 "Cuban adolescent adjustment to the United States following the 'Freedom Flotilla'." In J. Uhl (Ed.), *A Transcultural Challenge: From Discovery to Action*. Proceedings of the 8th Annual Transcultural Nursing Conference, Atlanta, Georgia, 1982. Salt Lake City, Utah: The Transcultural Nursing Society.

A brief, poignant, ethnographic study of twenty-four teenage Cuban males who had been incarcerated in Cuba and forced to leave for the United States in the 1980 "Freedom Flotilla," and reincarcerated in Denver, where the researcher provided them health care services. Health problems are described, and a mini case study of one boy presented.

008R

DeSantis, Lydia

- 1985 "Childrearing beliefs and practices of Cuban and Haitian parents: implications for nurses." In M.A. Carter (Ed.), *Proceedings of the Tenth Annual Transcultural Nursing Conference* (pp. 54-79). Salt Lake City, Utah: The Transcultural Nursing Society.

A descriptive comparative study of the childrearing beliefs and practices of thirty Cuban and thirty Haitian mothers in Miami-Dade County who had lived in the United States no more than four years and had children under twenty years of age. The subjects were recruited by convenience through churches and the Department of Health. The Haitians were in the process of trying to obtain political asylum in the United States, and were not eligible for federal programs; many were reluctant to utilize health and welfare services from fear of deportation. Although many of the Cubans' legal status was similarly ambiguous, some were legally defined as refugees and so eligible for federal assistance, and all had a large and relatively affluent resident Cuban community to buffer them from mainstream society. Data were collected by a 110-item questionnaire derived from Whiting et al.'s (1966) *Field Guide for a Study of Socialization*. Data were analyzed by frequency distribution; validity was enhanced by literature reviews and consultation with health care professionals and social scientists. Both groups had predominantly nuclear family structures, but the kin network of the Cubans was much larger than that of the Haitians. Haitian mothers had only their spouses and children to rely on for assistance, whereas 23 percent of Cuban mothers lived in extended family households and 53 percent had kin living nearby. Major differences were found in child discipline between the two groups, with Cuban mothers using punishment related to reasoning, denying privileges, or confinement, while Haitian mothers primarily employed some type of hands-on punishment. Cuban mothers also expressed more concern about the psycho-emotional aspects of child care, and Haitian mothers, about the physical aspects.

See other reports from this study: 1) "A comparison of cultural beliefs of Cuban and Haitian parents: effects of acculturation on childrearing and parent-child health." *Proceedings of the First Annual Conference on Contemporary Nursing: Transcultural Nursing* (pp. 58-87). St. Thomas, U.S. Virgin Islands: Virgin Islands Nurses' Association. 1986. And 2) "Cuban and Haitian perspectives on child health: a transcultural view." In J.F. Wang, P.S. Simoni and C.L. Nath (Eds.), *Proceedings of the West Virginia Nurses' Association Research Symposium. Nursing: Power through Excellence* (pp. 183-201). Charleston, West Virginia: West Virginia Nurses' Association Research Conference Group. 1988.

009R

DeSantis, Lydia

- 1986 "Infant feeding practices of Haitian mothers in south Florida: cultural beliefs and acculturation." *Maternal-Child Nursing Journal* 15(2): 77-89.

See DeSantis 1985 above for methodology. This study explores socioeconomic and cultural factors affecting the decision of infant feeding preferences among Haitian mothers. It found that while most women believed breastfeeding was a better feeding choice, only one of the thirty breastfed her United States-born infant. Haitian ethnomedical beliefs about breastmilk and bottlefeeding are discussed, and reasons the women opted for bottlefeeding in the United States are identified.

EL SALVADORAN

010R

DeSantis, Lydia and J.T. Thomas

- 1987 "Parental attitudes toward adolescent sexuality: transcultural perspectives." *The Nurse Practitioner* 12(8): 43-48.

See DeSantis 1985 above for methodology. This study of Cuban and Haitian childrearing practices clearly demonstrates two divergent parental views of adolescent sexuality. The authors also provide nurse practitioners with suggestions for the development of sex education programs for Cuban and Haitian parents and children.

EL SALVADORAN

011R

Anderson, Jerelyn

- 1986 "Health seeking behavior of Salvadoran refugees." MN thesis, University of Washington, Seattle, Washington. (154 pp.)

Examined the health-seeking behavior of five Salvadoran refugees in Seattle (but not in sanctuary) using Chrisman's (1977) health-seeking process model. Illness causation was ascribed to emotions, the spiritual realm, hot-cold imbalances and physical factors. The lay referral network was a critical source of support. Although the data were consistent with Chrisman's model, the model was not sufficiently broad to account for three themes expressed by the subjects: financial stress, communication barriers, and fate.

012R

Boyle, Joyceen S.

- 1989 "Constructs of health promotion and wellness in a Salvadoran population." *Public Health Nursing* 6(3): 129-134.

This study explored health-promoting beliefs and practices of fifty-three Salvadoran refugees (seventeen women, thirty-six men; ages 17-53 years) through focused and open-ended interviews and participant-observation over one and a half years. The informants were recruited by network sampling techniques in an urban community of an inter-mountain state. Four major constructs of health promotion were derived from the literature as a basis for the interview questions: nutrition and weight control, exercise and physical fitness, stress management, and social support and help. Theoretical constructs that were developed from the data suggested that complex constellations of family, supportive friends, religious affiliations, and work opportunities enhanced well-being. Personal health practices related to fresh air, sleep, and good nutritional practices were considered important by the informants.

013

Umanzor, S.

- 1986 "Nightmare in El Salvador: a nursing student's story." *Journal of Christian Nursing* 3(2): 10-12.

ETHIOPIAN

014R

Swenson, C.J.

- 1986 "Maternal-newborn health care in an Ethiopian refugee camp?" *New Mexican Nurse* 31(4): 6-7.

015

Trites, P.

- 1985 "An Ethiopian experience." *Canadian Nurse* 81(10): 13-16.

INDOCHINESE, SOUTHEAST ASIAN (General)

016R

Catlin, Mary C.

- 1987 "Relapsed tuberculosis in Indochinese refugees after short course chemotherapy in Southeast Asia." MPH thesis, University of Washington, Seattle, Washington.

Report of a study of the relapse rate experience of Indochinese refugees after treatment with a short course of tuberculosis treatment regimen. United States case reports of tuberculosis among Indochinese refugees were searched for a history of previous treatment. Eight cases of relapses were found among an estimated 776 refugees who were covered in the reporting system. This suggested a minimum known relapse rate of 1 percent, which was comparable to a 2 percent relapse rate from the standard tuberculosis treatment regimen.

017R

Holloway, Ailsa J.

- 1981 "Identification of health-related helping relationships among Southeast Asian refugee families." MA thesis, School of Nursing, University of Washington, Seattle, Washington. (109 pp.)

This thesis supported the hypothesis that refugees from Southeast Asia depend essentially on their primary group and immediate social network for health-related help and support. Data were gathered from a convenience sample of twenty-two households in a low-income housing project in Seattle; ethnic groups included Hmong, Khmer, Lao and Vietnamese. Data were gathered by the investigator through ethnographic observation and questionnaire; interviews were audio tape-recorded. The findings stressed the functional importance of lay health consultants within the study households. The discussion includes description of the informal social networks (within families and between friends), and patterns of help-giving and help-seeking in general, and for the care of persons who are ill.

018R

Kramer, Elizabeth C.

- 1983 "An exploration of the role of intermediary in Southeast Asian refugee adaptation." MN thesis, University of Washington, Seattle, Washington. (122 pp.)

An exploratory study of the role of service agency : Southeast Asian refugee community intermediaries. Twenty-one workers at voluntary and governmental agencies serving the Indochinese refugees of Tacoma, Washington (five were volunteers, sixteen were paid employees), were interviewed individually and in groups. In the individual sessions, areas not appropriate for group discussion were probed, and other areas elaborated upon. The interview schedules were developed and pilot tested by the researcher with agency-based Southeast Asian culture brokers in Brisbane, Australia. Findings showed that the intermediaries responded to a wide variety of expectations from both agencies and Southeast Asians, and that they promoted refugee clients' independence in immediate orientation, health care, education, employment, transportation, and legal affairs. Problems they reported included unrealistic expectations of them by clients, rudeness from Americans, and lack of job security due to uncertain funding. Close collaboration between health care providers and such intermediaries is strongly recommended.

019R

Muecke, Marjorie A.

- 1985 "Ethnic variation in birth outcome: a study of Southeast Asian and non-Asian pregnancies in Seattle." In M.A. Carter (Ed.), *Proceedings of the Tenth Annual Transcultural Nursing Conference* (pp. 80-88). Salt Lake City, Utah: The Transcultural Nursing Society.

A case-comparison study based upon medical records data 1979-1983 from a university hospital serving refugees resettled in Seattle from Indochinese countries. Ethnicity was studied both with the Southeast Asian group (six ethnic groups) and across groups, between them and non-Asian women. The 117 Southeast Asian women were matched for prepregnancy weight and parity with ninety-five controls. Bivariate and partial correlation analysis of relationships among sixty-six variables was conducted within and between groups. Ethnic variation among the Southeast Asian women was *not* associated with intrapartum risk score, gestational age at delivery, birth weight, or hepatitis B antigenicity; it was associated with height, parity, attendance at prenatal classes, total weight gain in pregnancy, use of fetal monitor, amount of anesthesia used during delivery, and use of episiotomy. Chinese women experienced the most technological assistance in birthing, and Hmong, the least. Lifestyle characteristics were significantly different between the non-Asian and Southeast Asian women. Each ethnic category had different risk factors for pregnancy outcome: non-Asians' risk factors were cigarette smoking and unmarried status; Southeast Asians' risk factors were short stature, hepatitis B antigen, and nonattendance at prenatal classes. Finally, there were ethnic differences in weight gain and pregnancy outcome: Hmong, Lao and Mien had lower weight gains, a higher proportion of precipitous deliveries, and less anesthesia; Chinese, Vietnamese and non-Asian women had larger weight gains, longer first stages of labor, and more anesthesia. Southeast Asian women gained a mean of 10.4 pounds less than non-Asian women; and Southeast Asian birthweights were a mean of 285 grams less than those of non-Asians.

020R

Pickwell, Sheila M.

- 1982 "Primary health care for Indochinese refugee children." *Pediatric Nursing* 8(2): 104-107.

Reports the findings of the major clinical problems found through the Early and Periodic Screening Diagnosis and Treatment program (EPSDT) in San Diego, California, among 400 elementary school children from Indochina (Cambodian, Hmong, Lao, and Vietnamese). Health histories were obtained from parents by trained translators who were themselves refugees from Indochina. Findings included: immunizations were incomplete for 83 percent; 49 percent had dental caries or periodontal disease; 1.5 percent had active tuberculosis; 25 percent had skin lesions; 15 percent had chronic otitis media; 13 percent had hemoglobin less than 11 gm; and 9 percent had musculoskeletal deformities.

021R

Quiring, Ellen S.

- 1981 "A description of the prevalence of tuberculosis in Indochinese refugees." MN thesis, University of Washington, Seattle, Washington. (41 pp.)

A cross-sectional study of all (n = 723) Indochinese refugees who entered the United States through Seattle from May 1979 through January 1980 under sponsorship of the International Rescue Committee (IRC). The investigator was a volunteer nurse in the IRC health screening of the refugees. Fifty-four subjects were lost to follow-up of tuberculosis (PPD) skin test results. Positive PPD results were found in 30.5 percent of the 669 subjects; prevalence was highest (52.6 percent) among the Vietnamese (n = 209), and lowest (3.8 percent) among the Hmong (n = 78); prior vaccination with BCG may have yielded false positive PPD results. Ten of the 194 positive skin test reactors were found to have active tuberculosis, yielding a 1.5 percent total prevalence rate of tuberculosis, and a 29.0 percent total prevalence of PPD positiveness without active tuberculosis. The findings indicate the usefulness of controlling prevalence studies among the Indochinese for ethnicity, not only for country of origin.

022R

Richman, Debra and Suzanne Dixon

- 1985 "Comparative study of Cambodian, Hmong, and Caucasian infant and maternal perinatal profiles." *Journal of Nurse-Midwifery* 30(6): 313-319.

A medical chart review of perinatal parameters of twenty-five Cambodian and twenty-five Hmong women and their newborns, and a comparison group of twenty-five Caucasian (non-Hispanic) mother-infant pairs who delivered at the University of California's San Diego Medical Center from March 1980 to June 1981. Ponderal indices and measures of gestational maturity were the same across groups. The refugee women had higher parity and gravidity, were shorter and lighter at the onset of pregnancy, and had a higher incidence of infectious disease than the comparison group. However, the refugee women had fewer perinatal complications, including a lower caesarean section rate.

023R

Sutherland, John E., Robert F. Avant, Walter B. Franz III, Carlos M. Monzon and Nancy M. Stark

- 1983 "Indochinese refugee health assessment and treatment." *The Journal of Family Practice* 16(1): 61-67.

The final author, Stark, was a nurse, others were physicians. The study reports clinical data on 426 refugees from Cambodia, Laos and Vietnam who were examined and treated at the Mayo Clinic from 1975 to mid-1981. Only the hematology findings are analyzed by country of origin; hematologic genetic disorders accounted for most of the 25 percent incidence of microcytosis. Found that counselling was necessary in 17 percent of adults with psychosomatic problems or psychiatric disorders. The prevalence rate of intestinal parasites was 82 percent. Hepatitis antigen was positive in 13 percent.

024

Gallo, Agatha M., Jane Edwards and Judith Vessey

1980 "Little refugees with big needs." *RN* 43: 45-48.

025

Gordon, Verona C., Irene M. Matousek and Theresa A. Lang

1980 "Southeast Asian refugees: life in America." *American Journal of Nursing* 80: 2031-2035.

026

Grasska, M. and T. McFarland

1982 "Overcoming the language barrier: problems and solutions." *American Journal of Nursing* 82: 1376-1379.

027

Hollingsworth, Andrea O., Linda P. Bworn and Dorothy A. Brooten

1980 "The refugees and childbearing: what to expect." *RN* 43: 45-48.

028

Koval, Denise and Ann-Marie Walsh-Brennan

1980 "Exotic diseases you're sure to see more of." *RN* 43: 73-81.

029

Kubota, Jan and Kara J. Matsuda

1982 "Family planning services for Southeast Asian refugees." *Family and Community Health* 5(1): 19-28.

030

Leyn, Rita B.

1978 "The challenge of caring for child refugees from Southeast Asia." *Maternal-Child Nursing* 3: 178-182.

031

Lung Association of Mid-Maryland

- 1980 *A Transcultural Look at Health Care: Indochinese with Pulmonary Disease; A Symposium for Nurses and Other Health Care Providers.* Rockville, Maryland: Nursing Education Committee, Lung Association of Mid-Maryland. Papers by: Marie Bourgeois; Madeleine M. Leininger; and Edith L. Wilson.

032

Moul, P.

- 1980 "The birth of a vision...The Center for the Indochinese, Philadelphia, PA." *Nurses Lamp* 31: 1-2.

033

Muecke, Marjorie A.

- 1983 "In search of healers: Southeast Asian refugees in the American health care system." *Western Journal of Medicine* 139: 835-840.

034

Muecke, Marjorie A.

- 1986 "Somatization among refugees from Southeast Asia reconsidered." In *Proceedings: The Next Decade: The 1986 Conference on Refugee Health Care Issues and Management* (pp. 32-41). Madison, Wisconsin: Department of Health and Social Services, 29-30 September.

035

Muecke, Marjorie A.

- 1983 "Caring for Southeast Asian refugee patients in the USA." *American Journal of Public Health* 73(4): 431-438.

036

Nguyen, S.D.

- 1984 "The psycho-social adjustment and the mental health needs of Southeast Asian refugees." *Canadian Journal of Psychiatric Nursing* 25: 6-8.

037

Pickwell, Sheila M.

- 1981 "School health screening of Indochinese refugee children." *The Journal of School Health* 51(2): 102-105.

038

Pickwell, Sheila M.

- 1983 "Nursing experiences with Indochinese refugee families." *The Journal of School Health* 53(2): 86-91.

039

Santopietro, M.-C. Smith

- 1981 "How to get through to a refugee patient." *RN* 44: 42-44, 46-49.

040

Santopietro, M.-C. Smith and B.A. Lynch

- 1980 "What's behind the 'inscrutable' mask?" *RN* 43: 55-61.

041

Thompson, Jan L.

- 1981 "Synchronic paradigm development and mystification in transcultural nursing research: the case of Indochinese refugees." In *Proceedings of the 7th National Transcultural Nursing Conference, September 1981*.

CAMBODIAN

042R

Braile, Margaret E.

- 1981 "The prevalence of Hepatitis B surface antigenemia in Indochinese refugees." MN thesis, University of Washington, Seattle, Washington. (31 pp.)

This descriptive correlational study was conducted to determine the relationships of age, sex, and ethnicity to Hepatitis B antigenemia among refugees recently resettled in Seattle from Southeast Asia. The sample was recruited by convenience from a community clinic serving that population. Secondary analysis of data from the records of all refugees who were screened for HBsAg between January and July 1980 involved 237 cases over age 14 years. Chi square analysis of the data found no significant ($p = 0.05$) differences in hepatitis B antigenemia by sex, age or ethnicity. However, prevalence did vary by ethnic group: it was zero among Cambodians ($n = 29$), and highest, 16.5 percent, among Lao ($n = 97$). Twenty-seven of the 237 screened were found to be HBsAg+, yielding a total prevalence rate of 11.4 percent.

043R

Faust, Shotsy C.

- 1982 "Congruence of communication among the primary care provider, the interpreter and the Cambodian refugee client." MN thesis, University of Washington, Seattle, Washington. (87 pp.)

The study describes the extent of congruence in comprehension of medical-nursing provider diagnosis and adherence to the therapeutic regimen between the English language primary care agency and its Cambodian refugee client. Subjects were recruited by convenience through a community clinic where they had sought care in spring 1982. The clinic interpreter served as intermediary between the researcher and the client. Data on the diagnosis and the therapeutic regimen were gathered from the fifteen providers who had assessed each subject at the clinic, from their documentation of the visit, and two days later, in a home interview with each Cambodian subject. It was found that provider-interpreter partners had almost perfect congruence of communication, but the interpreter-client and provider-client pairs demonstrated congruence only half of the time. Demographic variables were poor predictors of those at risk for incongruent communication.

044R

Frye, Barbara

- 1990 "The process of health care decision making among Cambodian immigrant women." *International Journal of Community Health Education* (in press).

A qualitative study of the congruence between health beliefs and behavior reported by thirty Cambodian women who resettled as refugees in southern California. Data on 226 illness episodes that occurred in 157 family members over an eight-month period were collected in the Khmer language during home interviews. Informants reported a strong maternal role in health care decision making for all ages of children, and an individualistic pattern of decision making by adults. The women attributed illness etiology to humoral imbalances and undertook treatments from both scientific and traditional systems. They tended to access care in settings of linguistic and cultural comfort regardless of spatial distance. They reported chronic degenerative diseases, stress and reproductive complications frequently. Women and adolescents appeared to be at high risk for cultural stress.

045R

Glidden, Catherine L.

- 1986 "Infant feeding practices among recently arriving Khmer mothers." MN thesis, University of Washington, Seattle, Washington. (63 pp.)

A convenience sample of twenty-three Cambodian mothers living in a Seattle apartment complex was selected for two-phased interviewing on their beliefs and practices related to infant feeding. A trained Khmer female interpreter acted as intermediary and conducted the interviews in the homes of the subjects. At the first interview she collected demographic information and assessed the subjects' preferred social relationships with Khmer neighbor women. The second interviews were conducted as focus groups. The focus group sessions were audio

tape recorded, and translated and transcribed in English immediately after the sessions. The investigator completed a Group Observation Tool and performed content analysis of the English transcript. A second reader, a Master's degree prepared nurse, performed content analysis of the transcripts independently for comparison to enhance reliability. The women were 20-49 years of age; had been in the United States 0.5 to 60 months; had delivered seventy children prior to arrival in the United States and breastfed sixty-four of them; had delivered sixteen children in the United States and breastfed one of them. Seventy percent were receiving W.I.C. support; 50 percent were living with husbands at time of interview. The women identified many differences in their infant feeding practices that they associated with their resettlement in the United States and with efforts to raise healthy babies.

046R

Jensen, Marilee M.

- 1988 "Cambodian women refugees: personal perceptions of their refugee experience." MN thesis, University of Washington, Seattle, Washington. (85 pp.)

This exploratory study was designed to elicit Cambodian women's views of problems they had in refugee camp and since resettlement in the United States, and to identify their coping strategies. The women were accessed through an Asian counselling service. A staff interpreter selected the six women on the basis that each had lived in Cambodia under the Khmer regime (1975-79), left Cambodia when at least age 18 years, and had lived in the United States less than three years. Data were collected by a two-hour audio tape recorded interview in each subject's home or preferred site using a semi-structured interview guide that consisted of open-ended questions with probes for types of problems that had been reported in the literature. Content of the interview transcriptions was analyzed for themes (Holsti 1975). Problem themes derived from recollections of refugee camp experiences included fear, deprivation, powerlessness, sexual vulnerability, and sorrow. Problem themes identified for time in the United States included initial relief, sorrow, and loss, followed by language barriers, loss of status, poverty, loneliness, parent-child conflict, health, and conflict in role as a woman. Some themes varied by socioeconomic status prior to the Khmer Rouge regime, by age, and by age of children. Common coping strategies were family, religion, and a Cambodian value of endurance.

047R

Kulig, Judith C.

- 1988 "Conception and birth control use: Cambodian refugee women's beliefs and practices." *Journal of Community Health Nursing* 5(4): 235-246.

Thirty Khmer women and one *crou khmer* (Khmer healer) were recruited through purposive sampling in urban western Canada. They were interviewed in their homes by nurses through female bilingual Cambodia-born translators about their understanding of conception and its relationship to use of birth control. The study found that all the women recognized the importance of the menstrual cycle, although there was no consensus about when conception could occur. Use of herbal medicine and "traditional practices" were common among the women studied.

048R

Kulig, Judith C.

- 1988 "Childbearing Cambodian refugee women." *The Canadian Nurse* 84(6): 46-47.

Reports on the study reported in the *Journal of Community Health Nursing* 1988. Includes description of beliefs about fetal development, prenatal and postnatal self-care reported by the informants.

049

Lazorik, Donna L.

- 1984 "Pilot study to develop a tool to elicit Khmer beliefs about the causes of illness." MS thesis, School of Nursing, Boston University, Boston, Massachusetts. (53 pp.)

Applied attribution theory to Khmer health care seeking behavior. Studied ten Khmer in the Boston area who were at least 20 years old before leaving Cambodia and in the United States less than five years, each recruited by snowball technique. Gathered data from an open-ended interview guide (in English) in the informant's home. Informants attributed their symptoms to both natural and supernatural causes. The concept of *k'chall*, bad air in the body, was essential to the health belief systems they expressed.

050R

Lenart, Janet C.

- 1989 "An exploratory study of Cambodian refugee women's childrearing beliefs, knowledge and informational sources." MPH thesis, University of Washington, Seattle, Washington.

Reports a cross-sectional study of a convenience sample of forty Cambodian women whose children received primary health care at one of two community clinics in Seattle. Interviews were conducted in the women's homes by a female Cambodian professional health care interpreter in the presence of the investigator. The study found a large age difference between the women's oldest and youngest children (mean 10 years). Relative to natives, Cambodian women differed in later or less use of books and reading with their children, avoidance of placing infants in the prone position, older age at weaning from the bottle, and belief in human reincarnation. Differences in home treatment of common illnesses and in disciplinary measures were also found.

051R

Miller, Kathleen M.

- 1986 "An exploratory study of the illness beliefs and practices of a group of Cambodian refugees." MS thesis, School of Nursing, University of Rochester, Rochester, New York. (98 pp.)

Applied Kleinman's (1980) explanatory model of illnesses that prompted refugees to seek care. Interviewed bilingual key informants and, with the assistance of an interpreter, a convenience sample of ten refugees from Cambodia who presented themselves or members of their families for health care at an

ambulatory clinic in upper New York state. Found that most of the health beliefs evolved from exposure to both traditional Khmer and to Western practices, and had been modified by personal experiences and oral interpretations. The explanatory models also varied by length of stay in the United States.

052R

Sassi, Lisa

- 1987 "Khmer adolescents exiting Thailand: stress and coping profile." MN thesis, University of Washington, Seattle, Washington. (113 pp.)

An exploratory study of stress and coping among all ($n = 71$) Khmer adolescents (ages self-reported as 11-17 years) in the Preparation for American Secondary Schools (PASS) program at the Phanat Nikhom Refugee Processing Center in Thailand, November 1986. Data collection instruments were administered orally and in writing (in both English and Khmer) by a Khmer-speaking teacher. They included demographic information; a modified Youth Adaptation Scale (Bealle and Schmidt 1984) to identify life events/hassles; the Hopkins Symptom Checklist (Mollica et al. 1986) to identify symptoms of anxiety; and a tool developed by the investigator to assess coping strategies by using vignettes as prompts for eliciting preferred strategies for coping with perceived stressors. Youth with higher anxiety symptom scores (equal to or over 1.5) were found to have significantly higher life event scores by the Mann-Whitney U test. Older females had higher anxiety and life event scores than younger females and than all males. The most frequently reported anxiety symptoms were headaches, faintness, dizziness or weakness, and feeling restless. The most frequent life events reported by the high anxiety symptom group were unexpectedly *not* traumatic, but reflected daily hassles: getting a little sick (90 percent), going to the doctor or dentist (90 percent), making new friends (80 percent), and having trouble with school work (80 percent).

053

Wood, Susan P.

- 1981 "Cambodian families in a refugee processing center: Parental attitudes and childrearing practices." M.S. thesis, School of Nursing, Yale University, New Haven, Connecticut.

The researcher conducted structured interviews with 202 families in which there was at least one child under the age of 7 years in a processing center in Thailand in 1982. Cambodian staff observed and recorded information in breastfeeding, toilet-training, discipline, and children's responsibilities in the homes of new families. Open-ended interviews were also conducted with professionals in education, health and social services, and randomly selected Cambodian parents in three other refugee camps in Thailand. Results are framed against a social-political-religious background of the Cambodian people. The findings are presented in terms of attitudes toward children, including parent-child relationships, attitudes toward men/sons and women/daughters, sex differences in childrearing, and family size and family planning. In addition, childrearing practices are analyzed and discussed. In addition, the researcher noted that disruptions in the families' lifestyles were "enormous."

054

By, Pheng Eng

- 1986 "Family planning: the perspective of a Cambodian public health nurse." In B.S. Levy and D.C. Susott (Eds.), *Years of Horror, Days of Hope: Responding to the Cambodian Refugee Crisis* (pp. 214-215). New York, New York: Associated Faculty Press, Inc.

055

Frye, Barbara

- 1990 "The Cambodian refugee patient: providing culturally sensitive rehabilitative nursing care." *Rehabilitative Nursing* (in press).

056

Grosvenor-Rosenblatt, A.

- 1986 "The early days of Sa Kaeo: a volunteer worker's experience." In B.S. Levy and D.C. Susott (Eds.), *Years of Horror, Days of Hope: Responding to the Cambodian Refugee Crisis* (pp. 37-41). New York, New York: Associated Faculty Press, Inc.

057

Kemp, C.

- 1985 "Cambodian refugee health care beliefs and practices." *Journal of Community Health Nursing* 2(1): 41-52.

058

Knaub, C.J.

- 1986 "The perspective of an American public health nurse." In B.S. Levy and D.C. Susott (Eds.), *Years of Horror, Days of Hope: Responding to the Cambodian Refugee Crisis* (pp. 183-188). New York, New York: Associated Faculty Press, Inc.

059

Lenart, Janet

- 1987 "Cambodian refugees will benefit from nurse's travel." *American Nurse* 19(8): 5,26.

060

Ratnavale, D.N.

- 1986 "The mental health of refugees and relief workers." In B.S. Levy and D.C. Susott (Eds.), *Years of Horror, Days of Hope: Responding to the Cambodian Refugee Crisis* (pp. 152-161). New York, New York: Associated Faculty Press, Inc.

061

Rosenberg, J.A.

- 1986 "Health care for Cambodian children: integrating treatment plans." *Pediatric Nursing* 12: 118-125.

062

Rosenberg, J.A. and S.S. Givens

- 1986 "Teaching child health-care concepts to Khmer mothers." *Journal of Community Health Nursing* 3(3): 157-168.

063

Van der Westhuizen, M.

- 1980 "Kampuchean refugees—an encounter with grief." *The Australian Nurses Journal* 10(2): 53.

CHINESE, VIETNAMESE

064R

Jorgensen, Patricia L.

- 1981 "Food intake patterns of a group of adult ethnic Chinese-Vietnamese refugees as a reflection of their nutritional status and rate of acculturation." MA thesis, School of Nursing, University of Washington, Seattle, Washington. (100 pp.)

A descriptive study of eight Chinese-Vietnamese women refugees who had been in the United States six to twenty-four months. The women were selected by a Vietnamese outreach worker of a city clinic of the Pacific Northwest. A trained interpreter (herself a Chinese-Vietnamese former refugee) was hired to conduct home interviews using a structured interview schedule to elicit the meanings the women attached to food use. Data collection also included a three-day food record, a food frequency questionnaire, a food avoidance list, market purchases record, and anthropometric measures (height, weight, wrist size, triceps skinfold thickness, and mid-upper arm circumference—all taken by the investigator). It was found that ethnic main-dish food items comprised 60-84 percent of all main-dish items eaten; new snack foods comprised from 0-60 percent of all new foods tried. Foods avoided were American canned vegetables, beer/wine/liquor, hot cereal, yogurt, candy, and fresh fish. Evidence of daily intake suggested insufficient intake of iron, calcium and vitamin A.

HMONG, MIEN

065R

Crassweller, Julie

- 1986 "The paradox of opium addiction among Southeast Asian refugees: panacea or problem?" MN thesis, University of Washington, Seattle, Washington. (94 pp.)

An exploratory study to assess the meaning of opium addiction to refugees resettled in urban United States from the hills of Laos. Prior to beginning the study, the author participated for several months in regular meetings of an opium treatment group of Mien that was organized by a voluntary social service agency. Seven group members became subjects in the study. Becker's health belief model (1974) structured the study of beliefs about withdrawal from addiction. The researcher developed a tool with open-ended questions for data collection; it was administered by a trained Mien interpreter under the supervision of the researcher. Contents of the transcriptions of each interview were analyzed for themes. Findings included reasons for original and ongoing opium use. Primary reasons for original use were medicinal, to alleviate symptoms of pain, respiratory congestion, or diarrhea, all being common and debilitating symptoms associated with life in the hills of Laos. The major reason for continued use in the United States was addiction.

066R

Doutrich, Dawn and Lydia Metje

- 1989 "Cultural factors and components of prenatal care for the Hmong and Yiu-Mien." Master's Research Project, School of Nursing, University of Oregon Health Sciences, Portland, Oregon.

A descriptive study of perceptions of Western prenatal care by Hmong and Yiu-Mien. Two semi-structured data collection tools were administered to three groups: ten Hmong, nine Yiu-Mien, and fifteen non-Hmong, non-Yiu-Mien who lived or worked with one or both groups. Concepts important for prenatal care that emerged from the data were "shyness" in discussing pregnancy; concern over early marriage, early childbearing, and noncompletion of high school; and strong positive value of children. Hmong and Yiu-Mien informants' desires related to prenatal care included: modesty and less intrusive examinations, a consistent female as provider, allowance for involvement of elders and leaders in their decision-making, and right to take control over their own bodies, to have the choice implied by informed consent.

067R

Faller, Helen S.

- 1985 "Perinatal needs of immigrant Hmong women. surveys of women and health care providers." *Public Health Reports* 100(3): 340-343.

This study was an exploratory pilot investigation conducted in the Denver-Boulder area in 1981. Several interpreters interviewed thirty-two Hmong women in a variety of settings using three different interview styles: individual, spousal couple, and a group of women. Women were most responsive in the group setting. Problems in provider use of an interpreter are discussed. In addition to the

interviews, a questionnaire was sent to fifty-one health care providers that represented the states with the largest Hmong populations. Those twenty-eight who responded identified family planning and nutrition as the foremost health problems among the Hmong. There were no infant deaths or incidents of maternal hypertension, toxemia or diabetes reported.

068R**Hahn, Robert A. and Marjorie A. Muecke**

- 1987 "The anthropology of birth in five U.S. ethnic populations: Implications for obstetrical practice." *Current Problems in Obstetrics, Gynecology and Fertility* 10(34): 133-171.

This study examines the prenatal and natal customs and characteristics of five U.S. ethnic populations (middle-class white, lower-class black, Mexican-American, Chinese and Hmong). For each group, statistical descriptions of the effects of ethnicity on prenatal behavior and birth outcomes are given. Then, summary formulations of the birth cultures (beliefs, values and customs regarding conception, pregnancy, birth, and the puerperium) are given. Finally, general and specific responses to the cultural variations are recommended for primary care and obstetric setting.

069R**Lee, Patricia A.**

- 1986 "Health beliefs of pregnant and postpartum Hmong women." *The Western Journal of Nursing Research* 8(1): 83-93.

Accessed Hmong women by the snowball technique (10 percent refusal). With a bilingual male Hmong village health worker, interviewed forty-three pregnant women in their homes about the beliefs and health behaviors during pregnancy, labor and delivery, and care of the newborn. Similar interviews were conducted with thirty-four postpartum Hmong women to elicit their beliefs about breastfeeding, weaning, and family planning. Questionnaire items also addressed attitudes towards immunizations.

070R**Libby, Sr. Mary Rose**

- 1984 "The self care practices of the Hmong hilltribe refugees from Laos." MN thesis, University of Kansas, Lawrence, Kansas.

Applied Orem's theory of self care in this descriptive study of self care practices among Hmong resettled in a Kansas city. A convenience sample of fifteen Blue Hmong adults (nine men, six women) were interviewed in their homes by a male Hmong interpreter in the investigator's presence. Responses were tape recorded and subjected to content analysis. Findings include descriptions of self care beliefs and practices related to prevention, sickness, nutrition, and emotional health. Implications for nursing are also discussed.

071R

Pake, Catherine E.

- 1986 "Herbal medicines used by Hmong refugees in Thailand." MPH thesis, University of Minnesota, Minneapolis, Minnesota.

A key informant study of medicinal plants described by nine Hmong herbalists (five females, four males; ages 46-74) during interpreter-enabled interviews. The herbalists were refugees in Phanat Nikhom, Thailand, awaiting resettlement to the United States; the investigator was a public health nurse at the same camp. The interviews yielded 174 references to 153 different plants, 21 of which were referred to by two informants (of these, 60 percent were not used for the same indications). Plants were identified by matching Hmong name and plant specimen with descriptions in the Ninghon and Siu-cheong text, *Chinese Medicinal Herbs of Hong Kong*.

072

Lee, Patricia A.

- 1986 "Traditional medicine: dilemmas in nursing practice...Hmong refugees." *Nursing Administration Quarterly* 10(3): 14-20.

LAO

073R

Muecke, Marjorie A.

- 1987 "Resettled refugees' reconstruction of identity: Lao in Seattle." *Urban Anthropology* 16(3-4): 273-290.

Analysis of a case of a Lao ghost haunting refugees from Laos who have resettled in Seattle demonstrates that their cultural reintegration requires not only the accommodation to American behaviors and beliefs that is the concern of resettlement policies and programs. Their integration into American society also requires reevaluation of their heritage as ethnic Lao. The necessity for the reevaluation stems from confusion, uncertainty and suffering over their ethnic identity. As refugees, as people who have fled their homeland and heritage, and settled permanently in a foreign continent, are they still Lao? The paper documents part of their search for cultural answers to the questions: "Why are we refugees?" "Can we be Lao even in American cities?" and "Were we wrong for leaving our country and loved ones behind?" By answering such questions, they reconstruct their view of themselves in their new context.

VIETNAMESE

074R

Egan, Maura G.

1984 *Social Adaptation in Foster Families Caring for Unaccompanied Refugee Minors from Vietnam*. Ph.D. dissertation. School of Nursing, University of Washington, Seattle, Washington. (258 pp.)

1985 Also in: "A family assessment challenge: refugee youth and foster family adaptation." *Topics in Clinical Nursing* 7(3): 64-69.

Data were collected through structured interviews with forty-three foster parents in the Pacific Northwest and fifty-six refugee youth from Vietnam who were participating in one of the largest Unaccompanied Refugee Minors Programs in the United States. Five instruments were used to gather data in home interviews: one each for foster parents and youth; the family APGAR (Smilkstein 1978); the Family Environment Scale (Moos and Moos 1981); and the Vietnamese Depression Scale (for foster youth only; Kinzie, Manson, Vinh, Tolan, Anh, and Phoc, 1982). Each scale was translated into Vietnamese and back-translated by different bilingual interpreters, and was administered by trained bilingual Vietnamese interpreters in the presence of the investigator. The Double ABCX Model of Foster Family Adaptation (McCubbin and Patterson 1982) guided the definition of family-level variables. For the families studied, factors associated with more successful adaptation included the foster parents and foster child being of the same ethnicity, the foster family being in the adolescent phase of childrearing, and longer duration of participation in the foster family program.

075R

Flaskerud, Jacqueline H. and Nguyen Thi Anh

1988 "Mental health needs of Vietnamese refugees." *Hospital and Community Psychiatry* 39(4): 435-437.

Gathered needs assessment data from eighty-one randomly selected mental health center records of Vietnamese psychiatric patients 1981-83, and from interviews with twenty key informants selected for their knowledge of refugee needs and service utilization patterns. A large majority of patients had experienced major war- and refugee-related traumas, and were separated from significant family members. Concludes that living within an ethnic community would be crucial for development of a social support network.

076R

Flaskerud, Jacqueline H. and Adeline M. Nyamathi

- 1988 "An AIDS education program for Vietnamese women." *New York State Journal of Medicine* 88: 632-637.

A pre-post study of the effects of an AIDS education program (a didactic slide-tape program) on the knowledge, attitudes and practices of 369 Vietnamese clients of a Women, Infants and Children (WIC) program in Los Angeles. The study used a nonequivalent control group design. There were no significant differences between the two groups, but within the experimental group, significant gains occurred in knowledge and positive changes in attitudes and intended practices.

077R

Flaskerud, Jacqueline H. and E.Q. S.

- 1986 "Pilipino and Vietnamese clients: utilizing an Asian mental health center." *Journal of Psychosocial Nursing and Mental Health Services* 24(8): 32-36.

Integrates findings on fifty Pilipino and fifty Vietnamese clients of an Asian mental health center with findings reported in the literature on the same groups for demographic characteristics, somatization, and utilization of services. Recommends continuing the clinic's "culture-compatible" approaches.

078R

Wadd, Lois

- 1983 "Vietnamese postpartum practices: implications for nursing in the hospital setting." *Journal of Obstetrical and Gynecologic Nursing* 90: 252-258.

Twenty ethnic Vietnamese families were recruited by convenience from the Salt Lake City, Utah area for interviews by the author with a native Vietnamese interpreter. The study found that special dietary and activity proscriptions were widely practiced by primiparae, and less rigidly practiced by multiparae. Activity proscriptions included the avoidance of cold in the form of drafts and showers, avoidance of sexual intercourse postpartally. Bed rest and other limitations of activity were also important to the informants.

079

Calhoun, M.A.

- 1986 "Providing health care to Vietnamese in America. what practitioners need to know." *Home Health Care Nurse* 4(5): 14-19, 22.

080

Dobbins, E., B.A. Lynch, D. Fischer and M-C. S. Santopietro

- 1981 "A beginner's guide to Vietnamese culture." *RN* 44: 44-45.

081

Grasso, C., M. Barden, C. Henry and M.G. Vieau

- 1981 "The Vietnamese American family and grandma makes three." *Maternal Child Nursing* 6(3): 177-180.

082

Stringfellow, Louise

- 1978 "The Vietnamese." In A.L. Clark (Ed.), *Culture Childbearing Health Professionals* (pp. 175-182). Philadelphia, Pennsylvania: F.A. Davis Co.

083

Taylor, P.

- 1975 "ANA works to bridge gap for Viet nurse refugees." *American Nurse* 7: 5.

IRANIAN

084R

Lawson, Lauren V.

- 1986 "Characteristics of social network contacts recruited by Iranian Baha'i refugees." MN thesis, University of Washington, Seattle, Washington. (70 pp.)

A descriptive field study of the role of social network contacts and brokers in the process of adaptation to the United States among fourteen Iranian Baha'i refugees. The sample was recruited by convenience through three intermediaries known to the researcher. There were six women and eight men; each had left Iran after 1979 when at least 18 years old, and settled in the United States within twenty months. Interviews were conducted in the homes of the subjects using a structured guide with open-ended questions. Interviews were audio tape recorded, and transcribed. Data were processed with descriptive statistics and content analysis. There was strong dependence on family and like-group members for solving problems of adaptation such as loss of sources of self-esteem, inability to communicate competently, and perceived inability to function socially. Those most depended upon had the characteristics of culture-brokers: they were Iranian Baha'i refugees with greater experience in the United States social system and with better English language skills.

POLISH

085R

Aroian, Karen J. and Carol A. Patsdaughter

- 1989 "Multiple-method, cross-cultural assessment of psychological distress." *Image* 21(2): 90-93.

Reports on the validity of cross-cultural two-language use of a standardized instrument to measure psychological distress (the Brief Symptom Inventory [BSI]). The sample was twenty-five adult Polish refugee-immigrants in Seattle-Tacoma, Washington. In-depth interviews supplemented micro- and macro-level observations to triangulate with the BSI data. The importance of instrument translation for cross-cultural use and the need to incorporate multiple-method assessment into both clinical practice with ethnic populations and cross-cultural research are discussed.

TIBETAN

086R

Staiger, Patricia M.

- 1985 "Patterns of illness behavior and illness decision making models of Tibetan refugees." MN thesis, University of Washington, Seattle, Washington. (104 pp.)

A descriptive study of patterns of illness behavior and decision making among Tibetan refugee clients of an allopathic medical hospital (n = 9) and of a traditional Tibetan medical center (n = 11) in Dharamsala, India. Health care providers served as intermediaries, and interviewed by the investigator with the assistance of a Tibetan interpreter using a structured interview guide with open-ended questions that was developed by the investigator. The guide requested demographic information, and comprised adaptations of Kleinman, Eisenberg, and Good's (1978) questionnaire for eliciting a client's explanatory model of illness, and Lee's (1978) interview schedule used to study symptom definition and treatment action. Data were analyzed by content analysis (Holsti 1968) and, to identify decision making patterns associated with type of health care sought, by the chi square statistic. Age differentiated the clients of the two types of health care agency, with persons over forty attending the Tibetan clinic, and those under forty, the allopathic hospital. The illnesses reported by Tibetan medicine clients were chronic and perceived as moderately to gravely severe. Allopathic clients' illnesses were more likely to be acute and perceived as mild to moderately severe.

GENERAL REFUGEE HEALTH ISSUES

GENERAL REFUGEE HEALTH ISSUES

087

Ahoy, C. and M. Jung

- 1985 "Community health nurses working with refugee populations." In S.E. Archer and R.P. Fleshman (Eds.), *Community Health Nursing* (3rd edition) (pp. 296-324). Monterey, California: Wadsworth Health Sciences.

088

Cass, R.

- 1986 "Refugee clinic: Los Angeles nurses battle a growing health crisis." *Journal of Christian Nursing* 3(2): 4-8.

089

Coakley, T.A., P.R. Ehrlich and E. Hurd

- 1980 "Screening in a family clinic." *American Journal of Nursing* 80: 2032-2035.

090

Cowgill, G. and G. Doupe

- 1985 "Recognizing and helping victims of torture." *The Canadian Nurse* 81(11): 19-22.

091

Cronin, C.

- 1976 "Ten anh la gi? 'What's your name?'" *Imprint* 23: 38-39.

092

Davies, M. and M. Yoshida

- 1981 "A model for the cultural assessment of the new immigrant." *The Canadian Nurse* 77(3): 21-23.

093

Drape, P.J., C.R. Patrick and C. Kemp

- 1987 "Addressing the needs of underserved populations in community health nursing education." *Public Health Nursing* 4(4): 236-241.

GENERAL REFUGEE HEALTH ISSUES

094

Kubricht, D.W. and J.A. Clark

1982 "Foreign patients: a system for providing care." *Nursing Outlook* 1: 55-57.

095

Laborde, J.M.

1989 "Torture: a nursing concern." *Image* 21(1): 31-33.

096

Leyn, R.B.

1985 "Culturally appropriate care: the case of immigrants." *Topics in Clinical Nursing* 7(3): 48-56.

097

Mercer, E.

1981 "A 'professional' approach to helping immigrants and refugees." *The Canadian Nurse* 77(3): 20.

098

Summers, L.

1987 "Tuberculosis. a persistent health care problem." *Journal of Nurse Midwifery* 32(2): 68-78.

099

Williamson, R.

1987 "Rosy Williamson: a one-nurse relief agency [interview by Melodee Yohe]." *Journal of Christian Nursing* 4(2): 22-25.

AUTHOR INDEX

- Ahoy, C. 087
Anderson, Jerelyn 011R
Aroian, Karen J.085R
Avant, Robert F. 023R
Boyle, Joydeen S. 012R
Braile, Margaret E. 042R
Brooten, Dorothy A. 027
Burgess, H. A. 005
Bworn, Linda P. 027
By, Pheng Eng 054
Calhoun, M.A. 079
Carter, Michael A. 007R
Cass, R. 088
Catlin, Mary C. 016R
Clark, J.A. 094
Coakley, T.A. 089
Cowgill, G. 090
Crassweller, Julie 065R
Cronin, C. 091
Davies, M. 092
DeSantis, Lydia 008R, 009R, 010R
Dixon, Suzanne 022R
Dobbins, E. 080
Doupe, G. 090
Doutrich, Dawn 066
Drapo, P.J. 093
Edwards, Jane 024
Egan, Maura G. 074R
Ehrlich, P.R. 089
E.Q.S. 077R
Faller, Helen S. 067R
Faust, Shotsy C. 043R
Fischer, D. 080
Flaskerud, Jacqueline H. 075R, 076R, 077R
Franz, Walter B. III 023R
Frye, Barbara 044R, 055
Gallo, Agatha M. 024
Givens, S.S. 062
Glidden, Catherine L. 045R
Gordon, Verona C. 025
Grasska, M. 026
Grasso, C. 081
Grosvenor-Rosenblatt, A. 056
Hahn, Robert A. 068R
Henry, C. 081
Hollingsworth, Andrea O. 027
Holloway, Ailsa J. 017R
Hurd, E. 089
Jensen, Marilee M. 046R
Jorgensen, Patricia L. 064R
Jung, M. 087
Kemp, C. 057, 093
Knaub, C.J. 058
Koval, Denise 028
Kramer, Elizabeth C. 018R
Kubota, Jan 029
Kubricht, D.W. 094
Kulig, Judith C. 047R, 048

AUTHOR INDEX

- Laborde, J.M. 095
Lang, Theresa A. 025
Lawson, Lauren V. 084R
Lazorik, Donna L. 049
Lee, Patricia A. 069R, 072
Lenart, Janet 050R, 059
Leyn, R.B. 096
Leyn, Rita B. 030
Libby, Sr. Mary Rose 070R
Lipson, Juliene G 002R, 003R
Lung Association of Mid-Maryland 031
Lynch, B.A. 040, 080
Magee, R. 001
Matousek, Irene M. 025
Matsuda, Kara J. 029
McFarland, T. 026
Meleis, Afaf I. 002R, 003R, 004R
Mercer, E. 097
Metje, Lydia 066
Miller, Kathleen M. 051R
Monzon, Carlos M. 023R
Moui, P. 032
Muecke, Marjorie A. 019R, 033,
034, 035, 068R, 073R
Nguyen, S. D. 036
Nguyen, Thi Anh 075R
Nyamathi, Adeline M. 076R
Pake, Catherine E. 071R
Patrick, C.R. 093
Patsdaughter, Carol A. 085R
Pickwell, Sheila M. 020R, 037, 038
Quiring, Ellen S. 021R
Ratnavale, D.N. 060
Reizian, Alice 004R
Reizian, Alice E. 003R
Richman, Debra 022R
Rosenberg, J. A. 061, 062
Santopietro, M.-C. Smith 039, 040, 080
Sassi, Lisa. 052
Staiger, Patricia M. 086R
Stark, Nancy M. 023R
Stringfellow, Louise 082
Summers, L. 098
Sutherland, John E. 023R
Swenson, C.J. 014R
Taylor, P. 083
Thomas, J.T. 009R
Thompson, Jan L. 041
Trites, P. 015
Umanzor, S. 013
Van der Westhuizen, M. 063
Vessey, Judith 024
Vieau, M.G. 081
Wadd, Lois 078R
Walsh-Brennan, Ann-Marie 028
Wighton, S. 006
Williamson, R. 099
Wood, Susan P. 053
Yoshida, M. 092

SUBJECT INDEX

- AIDS 076R
- APGAR 074R
- Arab-Americans 002R, 003R, 004R, 005
- Birth control 047R
- Birth outcome 019R, 068R
- Bradburn Morale Scale 002R
- Brief Symptom Inventory 085R
- Cambodian adolescents 044R
- Cambodian refugees 042R, 043R, 044R, 046, 047, 050, 051, 053, 054, 055, 056, 057, 058, 059
- Cambodian refugee women 044R, 045R, 046R, 047R, 050R, 054, 058
- Childbearing 027, 048, 066, 082
- Childrearing beliefs and practices 007R, 009R, 050, 053, 074
- Children 007R, 009R, 020R, 037, 044R, 045R, 046R, 050R, 053, 061, 066, 076R
- Chinese-Vietnamese refugees 064R
- Cornell Medical Index 002R
- Cuban adolescent 007
- Culture brokers 018R
- Double ABCX Model 074R
- Families 017R, 078R
- Family Environment Scale 074R
- Focus group 045R
- Foster parents 074R
- Haitian mothers, parents 007R, 008R, 009R
- Health assessment 023R
- Health Belief Model 065R
- Health beliefs 044R, 051R, 069R
- Health care seeking 049
- Health promotion 012R
- Health risk appraisal 002R
- Help-seeking behavior 003R
- Herbal medicines 071R
- Hmong 071R, 072
- Hmong women 022R, 067R, 069R
- Hopkins Symptom Checklist 052R
- Identity 073R
- Illness behavior 086R
- Illness beliefs 051R
- Illness episodes 044R
- Indochinese refugees 016-041
- Infant feeding practices 008R, 045R
- Interpreter 043R, 045R, 046R, 050R, 051R, 064R, 065R, 067R, 070R, 071R, 074R, 078R, 086R
- Iranian Baha'i refugees 084R
- Lao 017R, 020R, 023R, 073R
- Lay health consultants 017R
- Medical chart review 012R
- Medical records 003R, 019R
- Mental health 036, 075R, 077R, 060
- Methodological issues 002R
- Mien 065R, 066R
- Network sampling techniques 012R
- Opium addiction 065R
- Pain 004R, 065R

SUBJECT INDEX

- Perinatal 022R, 067R
- Postpartum practices 078R
- Pregnancy 019R, 022R, 066R, 068R, 165R
- Polish 085R
- Primary care provider 043R
- Primary health care 006, 020R, 048R
- Psychological distress 085R
- Research instruments
 - Bradburn Morale Scale 002R
 - Brief Symptom Inventory 085R
 - Cornell Medical Index 002R
 - Family Environment Scale 074R
 - Hopkins Symptom Checklist 052R
 - The Family APGAR 074R
 - Vietnamese Depression Scale 074R
 - Youth Adaptation Scale 052R
- Risk factors 019R
- Salvadoran 011R, 012R
- Self care practices 070R
- Social network 017R, 084R
- Southeast Asian 017R-019R, 025, 029, 033, 035, 036, 065R
- Southeast Asian refugee families 017R
- Stress 011R, 011R, 044R, 052R
- Tibetan refugees 086R
- Translation 085R
- Tuberculosis 016R, 020R, 021R, 098
- Unaccompanied refugee minors 074R
- Vietnamese 017R-021R, 064R, 074R-082,
- Vietnamese Depression Scale 074R
- Vietnamese families 078R
- Youth Adaptation Scale 052R



CENTER FOR URBAN AND REGIONAL AFFAIRS

University of Minnesota
330 Hubert H. Humphrey Center
301 19th Avenue South
Minneapolis, Minnesota 55455
(612) 625-1551