



## Extended Research Article

# Opportunities and practices supporting responsive health care for forced migrants: lessons from transnational practice and a mixed-methods systematic review

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## Plain language summary

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# Plain language summary

## Our question

How can we improve and shape health care to better respond to refugee and asylum-seeking communities?

## What we did

We (1) gathered the views of local refugee and asylum-seeking communities, healthcare staff and other stakeholders (such as council and community workers) about their ideas for improvements in healthcare provision; (2) searched for research articles on our topic and summarised the evidence; (3) sought current examples of high-quality health services for people who are refugees or seeking asylum to find out how they worked and what we could learn from them.

## What we found

Our summary of the research articles showed that refugee and asylum-seeking communities benefit from health services that:

- deliver care in groups and in places that are familiar
- support understanding and confidence in local systems
- are delivered by people who they trust, who have some shared understanding or interest in refugee experiences and different cultures or a shared language.

The case study services showed:

- a willingness to try new ways of working
- that creating welcoming spaces and building trust with patients is possible
- the importance of showing an interest and taking action in relation to someone's health and their interests, hopes and broader situation
- that a total commitment to communicating well, using good interpreters, and sometimes bilingual workers and peers, was essential.

Our learning from stakeholders informed our research decisions and was incorporated into a map of important healthcare people and places and a table of possible responsive healthcare actions.

## Conclusions

Our study showed that health care must be flexible, be interested in individuals and culture, committed to communication and learning, and support people to live meaningful lives. We recommend that a wide range of traditional and non-traditional health providers, such as community leaders, peers, schools and settlement services, work together to improve care.

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