

A PARISH NURSE WORKS WITH REFUGEES FROM BURUNDI

‘GOD BROUGHT AFRICA TO ME’

BY MARY BETH BASCH, B.S.N., RN

For a long time I have felt that you don’t have to leave your country to do mission work — just get in your car and drive 20 minutes across town. In the Cincinnati area, one of those mission spots is the subsidized housing project called Millvale. A small group of refugees from Burundi live there, sponsored by St. Leo’s Church, and I am their parish nurse.

Imagine their lives. Imagine that you find yourself in the midst of a civil war, surrounded by persecution, death, destruction and unimaginable atrocities. If you survive, you find yourself exiled to live in a primitive camp of others like you. Home is a tent. There is no running water, no electricity or gas, no employment, limited education, food and medical care.

There also is no way out because your country is in turmoil.

Imagine next that you are told the camp is closing and you must leave, but peace and safety are nowhere in sight. You put your fate in the hands of strangers who offer a chance at building a new life, far away. Loved ones, familiar places and things — these all will be left behind for ... what? There are rumors in the camp that when you arrive in the new place, you will be separated from your children and turned into fertilizer. In essence, you may be going to your death.

Can you imagine the fear, the helplessness, the panic and the trauma?

This is what it was like for thousands upon thousands of Burundians. Their African country has been plagued with political unrest and genocide between the Hutu and Tutsi tribes, much like the better-known conflicts in Rwanda. The U.S. Conference of Catholic Bishops agreed to



Photos by D.A. Fleischer

bring some Burundian refugees to this country, and Catholic Charities Southwestern Ohio, one of the organizations that works with refugee resettlement, brought these families to Cincinnati.

As a parish nurse for Good Samaritan Hospital, part of Cincinnati’s TriHealth network, I work in Millvale’s low-income neighborhood.

Early in 2008 I began to hear about refugees living in the area who needed help getting health care. While I was familiar with advocating for the poor and working with a diverse population, I had never worked with refugees before, let alone with a population with such challenging language barriers as the refugees from Burundi. From my office in St. Leo’s Church, where the Burundians come to worship, I learned more than I could ever imagine.

My new clients face the struggles of learning a new way to live, including navigating government agencies, using money, going to school, traveling by bus and trying to access health care. They need jobs, but it is difficult to find employment without being able to read, write or speak English. Farming skills from their native land are of no use here; the few employment options include hotel kitchen or housekeeping jobs or picking up trash, work that doesn’t require an education or much in the way of language.



Antonia Bariyumilza (seated) and parish nurse Mary Beth Basch enjoy a session during which Burundian women make purses to be sold at a local market.

As a parish nurse, I minister to Burundians of all ages. I help them navigate the health system to take care of basic health needs, lingering ailments from their time in camps, disabilities and everything in between. My job is to do whatever I can to ensure they do not fall through the cracks when it comes to medical care, regardless of their employment status or ineligibility for programs such as Medicaid or Social Security disability.

The Burundians speak mostly Kirundi or Swahili, two dialects I am sure I will never learn. Fortunately, I was able to access interpreters so I could get busy helping the nearly 130 refugees that now call my nursing territory home.

My first visit was with a woman who was feeling so poorly it was affecting her ability to parent. The home was overcrowded. Food was scant. Some had lost jobs to the unstable economy. I remember nervously dialing the phone interpreter and asking for someone who could speak Swahili. I had to laugh at myself when I realized I was talking loudly, as if yelling in English would help the woman understand what I was trying to say. After listening to the woman's complaints through the telephone interpreter, it became apparent a new baby was on the way. Immediately I needed to help her get prenatal care and necessary baby supplies. Within two weeks, I had discovered three other Burundians who were pregnant. They too needed health care and a plan for where they would deliver their babies.

I began to notice the needs of my refugee client base growing rapidly amidst an inability to assimilate. According to Catholic Charities Southwestern Ohio, which sponsored the Burundians, most

refugees from other countries typically assimilate within 18 months, but this is not the case with the Burundians.

Maybe it is because they have lived in exile for so long — some for decades in refugee camps.

Maybe the bad U.S. economy added pressure. Some Millvale residents reacted with harassment and break-ins when they perceived the Burundians were getting special favors — furniture, appliances, household necessities — to start their new lives.

It became clear to me that the community was in crisis. The Burundian women were struggling with social isolation, making it even harder for them to gain language skills. The children were acting out at school. The men were having a difficult time finding jobs and an even more difficult time accepting changes in their traditional roles. In the U.S., if a Burundian wife finds a job, her husband must

stay home to care for the children. In Africa, that would be an unthinkable reversal.

I worked with the staff of St. Leo's Church and other service providers to develop a women's group to help meet the needs of this special population. Their African culture is paternalistic, and it is not unusual for women to be mistreated, abused or viewed as property. Most of the men were grasping the English language better than the women, which contributed to the women being left behind in the assimilation process.

With the help of many volunteers, there is now a weekly support group for the Burundian women. Each Thursday we gather in the rectory at St. Leo's for the entire day. Together we are discovering what we hope will help these families adjust



Caliniya Banzinyubusa chooses a fabric during a monthly arts and crafts session.

more easily. First, we pray. These women have enormous faith. Even though they have faced unimaginable atrocities, they demonstrate that their faith in God is unshakable.

During our meeting time, the women also learn English, which is critical to helping them adjust to their new lives. One of our volunteers has many years of experience teaching English as a second language, skills he is now employing to teach the Burundians.

Next, the women go into the kitchen to break bread, build community and learn a bit about nutrition. I heard stories about the Burundians receiving food from the local food pantry that they didn't know how to cook — they had never seen some of these items before and couldn't read the cooking instructions. Imagine eating raw macaroni out of a box, and the cheese powder too!

Once a month, Visionaries and Voices, a local organization that teaches art to folks with disabilities, comes to teach crafts to the women. It's therapeutic and can help build a person's self-esteem as well as bring in potential income from making and selling items at a local market.

The women have had minimal access to traditional health care, much less to the wellness and prevention programs that are mainstream here in the United States. An important part of our support group time is the opportunity for them to ask questions about health care in a safe, informal, non-intimidating setting. It also has become evident as we work with the women that the Burundian men could benefit from a support group of their own. Plans are underway to get this started.

It has been just over a year since I met my first Burundian refugee. As it is with all community health care, the nature of my work has been defined by the needs of the folks who live in the territory I cover.

To say that the work with the refugees has been challenging is an understatement. It is the work of a pioneer who explores new territory. It is the work of imagining unlimited potential made possible by compassion and creativity, as well as providence in God.

There have been difficult times in my life when I have needed to be strong and courageous; these women have shown me a deeper version of these virtues. They have

taught me lessons about more than just survival, rather, about thriving. In their most challenging struggles, they continue to have hope — and together we work towards a better future.

I tell people that others go to Africa to do this work, but God brought Africa to me. God also brought community support from Good Samaritan Hospital, TriHealth, St. Leo's Church and the countless others who have given of themselves to help improve the lives of their Burundian neighbors. The work is a communion where everyone involved is fed, changed for the better and made open to new possibilities.

MARY BETH BASCH is a parish nurse for Good Samaritan Hospital, Cincinnati.

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