

# Regional refugee health nursing - RNA members survey feedback

## Challenges of regional refugee health nursing

- Interpreting - lack of interpreters (onsite), lack of experience/ willingness to use interpreters from “mainstream” health staff - even when interpreter use supported by local policy it is frequently not into practice, and may be difficult to put into practice if interpreters are not available.
- Lack of staffing - refugee health nurses, settlement staff (often inexperienced new grads), limited staffing restricts ability to “flex up” in response to sharp increase in arrival numbers.
- Lack of capacity/ skills in local health services including bulk billing GPs, specialist services, female health staff, disability services.
- “Community views”
- Lack of support.
- Lack of locally relevant resources/ translated materials.
- Infrastructure - public transport.
- Isolation - services in metropolitan areas don’t understand challenges of working in regional areas.

## What is rewarding about working in a regional area?

- Smaller population means more continued contact with patients and closer working relationships with other health providers
- *“Clients are part of the community and someone will let you know if they are falling through the cracks”*
- *“Clients quickly become part of a community and by living and working in the same community you become a trusted member of that community also.”*
- *“Clients have the chance of good long term outcomes due to improved housing affordability and employment options.”*
- *“Seeing families happy and settling into their new community in spite of all they have been through in the past.”*

## How does RNA support refugee health nurses in regional areas?

- Connection and collegiality
- Access to resources, support and education

- Interstate transfer process/ form
- Workshops
- Annual face to face
- Contacts for support

**How else could RNA support refugee health nurses in regional areas?**

- More feedback re interstate transfers
- Newsletters - to include information on Australian and global refugee issues
- Advocate for government to measure service performance against policy - e.g. interpreter use
- Continue to support RHNs working regionally to attend meetings/ networking/ professional development events with RHNs from other areas
- Greater advocacy for refugee health workers in regional areas to leverage additional support