

March 2024

Home Visits: A Way to Build Genuine Connection and Learn from a Vulnerable Refugee Population

Shirley M. ElFishawy

Wayne State University, gh3777@wayne.edu

Follow this and additional works at: https://digitalcommons.wayne.edu/som_srs

 Part of the [Medicine and Health Sciences Commons](#)

Recommended Citation

ElFishawy, Shirley M., "Home Visits: A Way to Build Genuine Connection and Learn from a Vulnerable Refugee Population" (2024). *Medical Student Research Symposium*. 350.

https://digitalcommons.wayne.edu/som_srs/350

This Research Abstract is brought to you for free and open access by the School of Medicine at DigitalCommons@WayneState. It has been accepted for inclusion in Medical Student Research Symposium by an authorized administrator of DigitalCommons@WayneState.

Abstract for 2024 Medical Student Research Symposium

Title: Home Visits: A Way to Build Genuine Connection and Learn from a Vulnerable Refugee Population

Abstract:

Among non-immigrant populations, maternal psychosocial stress was associated with impaired maternal bonding. Parents' stress and depressive symptoms were associated with lower levels of supportive coparenting and impaired child development. To date, no studies have evaluated whether coparenting is related to maternal bonding in immigrant families. The goal of this study was to examine the relationship between maternal psychosocial stress (acculturative stress, posttraumatic stress, maternal depression), coparenting, and maternal bonding with the child among a sample of Arab-American immigrant and refugee mothers. As a first-generation Egyptian-American medical student, I was part of the team who went to the homes of immigrant mothers. My colleague and I followed the study protocol for data collection. Mothers would complete the consent forms, then the survey questions, and I would use the Bayley-V Standardized Scales of Infant & Toddler Development to assess the child's development. Arab American immigrants and refugees are vulnerable and have undergone unique trauma, which can make traditional methods of conducting research more challenging. Quantifying trauma, bonding, and building trust are not as simple as collecting demographic data. Through home visits, we were able to uniquely connect and learn from our community. We found a significant relationship between acculturative stress ($\rho=.39$; $p<.001$), posttraumatic stress ($\rho=.39$; $p<.001$), maternal depression ($\rho=.53$; $p=.001$), non-supportive coparenting ($\rho=.35$; $p=.002$), supportive coparenting ($\rho=-.38$; $p=.002$), and maternal bonding impairment. Maternal depression was significantly correlated with non-supportive coparenting ($\rho=.32$; $p=.004$) and with supportive coparenting ($\rho=-.27$; $p=.016$). Finally, acculturative stress, posttraumatic stress, and maternal depression were significantly positively correlated.