

# Strategies for Educating Nursing Students to Address Social Justice and the Social Determinants of Health

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July 28<sup>th</sup> 2017



UT Health  
San Antonio

# Disclosure

The views and opinions expressed in these presentations are those of the authors and do not represent the official policy or position of UT Health San Antonio, School of Nursing, San Antonio, Texas, United States of America.

# Introduction

This symposium will share three innovative teaching strategies that address health promotion and prevention in a Population-Focused Health clinical for U.S. undergraduate senior nursing students.

Each strategy is framed around the message of social justice within the context of social determinants of health to promote the transformation of knowledge to practice.

# San Antonio, Texas, USA



- Population: 1,469,845
- 7<sup>th</sup> largest city in the United States
- 2<sup>nd</sup> largest city in Texas
- San Antonio Missions (UNESCO World Heritage site)
- The River Walk

# UT Health San Antonio, School of Nursing

- The School of Nursing was established in 1969 and offers four degree programs:
  1. Bachelor of Science in Nursing
  2. Master of Science in Nursing
  3. Doctor of Nursing Practice
  4. Doctor of Philosophy in Nursing
- Mission
  - We develop diverse nurse leaders to improve health and health care, through education, research, practice, and community engagement
- Vision
  - We make lives better by promoting health as an act of social justice
- The region has large underserved populations with different health care needs such as diabetes, cardiovascular disease, and teen pregnancy. We have been designated by the United States Department of Education as a Hispanic Serving Institution.



# Overview of Population-Focused Health Clinical

- Students are introduced to social determinants of health and social justice at the community level through theory and clinical.
- Social determinants of health (SDH) are “... *the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.* ” (World Health Organization [WHO], 2017a, para. 1)
- Social justice refers to the fair & equitable distribution of wealth economic opportunities, & access to privileges in society, and is tied to human rights. (Rector, 2018)

# Overview of Population-Focused Health Clinical (cont.)

- 100-120 students divided into groups of 10 for clinical experiences (90 clock hours each semester).
- Each clinical group is required to complete a community assessment of specific census tracts:
  - Windshield Survey
  - Data Collection
  - Key Informant Interviews
- Other activities all students complete:
  - Poverty Simulation
  - Medical Shelter Training
  - Public Transportation Simulation
- Each faculty also works with vulnerable populations:
  - Low income seniors
  - Refugees
  - Low income youth and adults



## EQUALITY VERSUS EQUITY



In the first image, it is assumed that everyone will benefit from the same supports. They are being treated equally.



In the second image, individuals are given different supports to make it possible for them to have equal access to the game. They are being treated equitably.



In the third image, all three can see the game without any supports or accommodations because the cause of the inequity was addressed. The systemic barrier has been removed.

Interaction Institute for Social Change | Artist: Angus Maguire.” [interactioninstitute.org](http://interactioninstitute.org) and [madewithangus.com](http://madewithangus.com)



# Presentations

Culturally Sensitive Teaching Strategies to Improve Health Literacy  
for Refugees in San Antonio

Rebekah J. Salt, PhD, RN

Impacting Practice: Using a Poverty Simulation to Develop  
Leadership Skills in Baccalaureate Nursing Students

Adelita G. Cantu, PhD, RN

Upstream Health Care: Values Training for Low-Income Children  
using Baccalaureate Nursing Students and Community Youth

Martha L. Martinez, MSN, RNC

Socorro Escandon, PhD, RN

# Culturally Sensitive Teaching Strategies to Improve Health Literacy for Refugees in San Antonio

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San Antonio, Texas, USA  
July 28, 2017

# Learning Objectives

- 1) The learner will be able to identify internal and structural barriers for refugees during the resettlement process and how these affect access to healthcare.
- 2) The learner will be able to discuss the strategies used in an undergraduate Population-Focused Health clinical to teach culturally sensitive health promotion in a refugee community.

# Background

- In 2015, the United States admitted almost 70,000 refugees through the U. S. Refugee Admission Program. Arrivals originated from 58 countries.
- In 2014, Bexar County, in San Antonio, saw a 5% increase in arrivals from over 20 countries, with the largest percentages coming from Iraq (37%), Burma (14%), Cuba (14%), and Afghanistan (11%).
- Ninety percent of arrivals who received a health assessment required an interpreter.
- The Center for Refugee Services (CRS) is as an independent 501(c)3 nonprofit agency whose mission is to promote self-sufficiency and successful resettlement for refugees:
  - Volunteers provide services for basic needs and transition such as English as a Second Language instruction, counseling, citizenship classes, housing assistance, and referrals.
  - The CRS also collaborates with the San Antonio Refugee Health Clinic (a volunteer nursing, medical, and dental student run clinic).

# Background (cont.)

- Refugees in the United States are a vulnerable population and are at risk for poor health and social outcomes due to past and present circumstances.
- Shortly after reaching the United States, a refugee is faced with difficult tasks such as learning to speak English, getting a job, using an ATM/debit card, taking a bus, orienting to emergency services, and whom to ask for help.
- Four reoccurring barriers that can affect refugees' access to health care:
  - Culture, as health beliefs and social norms vary from country to country
  - Language issues around verbalizing their health care needs
  - Discrimination and stigmatization specifically related to mental health, religious or regional stigma
  - Logistical concerns such as transportation, location of services, and navigating the health care system
- These internal and structural issues can create barriers to care and contribute to health disparities in this population.

# Population-Focused Health Teaching Strategies

## Community Assessment

- Windshield Survey (Census tracts with high occupancy refugee communities)
- Data Collection (Refugee demographics and literature)
- Key Informant Interviews (Refugee focused community partners)
- Community Need (A cultural approach)

## Interprofessional collaboration

- San Antonio Refugee Health Clinic
- Cultural awareness tutorials
  - Working with interpreters/translators
  - Culturally and linguistically competent care and education
  - Exploring refugee literature

## Framing the message

- Cultural sensitivity and safety
- Community assets
- Barriers to care

## Primary and secondary prevention

- Educational
- Health Screenings

# Community-Based Projects

## Safety brochure

- Safety is relative
- How to access emergency assistance, legal rights, and personal safety

## Health fair

- Exercise. Participants were asked to bring their favorite music
- Visual presentations (Sugar content in energy drinks, baby positioning)
- Blood pressure/blood sugar screenings

## Public service announcements

- Zika virus
- Influenza

## Women's health classes

- Menopause
- Birth control

## Ergonomic and stress management classes

- Working with sewing machines
- Taking breaks
- Stress relief





# Community-Based Projects (cont.)

## Important Resources

### EMERGENCY

Call 9-1-1  
Call for immediate help

### Center For Refugee Services

(210) 949-0062  
8703 Wurzbach Rd.  
San Antonio, TX 78240  
Monday-Saturday 8 AM-9 PM

### San Antonio Refugee Health Clinic

St. Francis Episcopal Church  
4242 Bluemel Road  
San Antonio, TX 78240  
Wednesdays 5-7 PM

### Haven For Hope

(210) 220-2100  
1 Haven For Hope Way  
San Antonio, TX 78207  
Monday-Friday 8 AM-5 PM  
Help for the homeless

### San Antonio Food Bank

(210) 337-3663  
5200 Enrique M. Barrera Pkwy  
San Antonio, TX 78227  
Monday-Friday 8 AM-5 PM  
Free food and grocery products

## Additional Resources

### Corazon Ministries Student Run Clinic

Clothing, health care, counseling  
230 E. Travis  
San Antonio, TX 78205  
(210) 226-8341

### Planned Parenthood

Free pregnancy and STD testing  
2140 Babcock Rd. #100  
San Antonio, TX 78229  
(210) 736-2262

### CareLink

Health care coverage services  
903 W. Martin St.  
San Antonio, TX 78207  
(210) 358-3350

### Non-Emergency

(210) 207-7273  
San Antonio Police Department

### Health and Human Services

Call 2-1-1  
Health insurance and food stamps

### City Services

Call 3-1-1  
Potholes, stray animals, trash collection

### General Information

Call 4-1-1  
Directory

## Health & Safety Resources



Prepared by  
The UT Health  
School of Nursing  
Senior Nursing Students  
Spring 2017

## Walking Safety Tips

1. Always walk with a friend, especially at night
2. Choose a familiar walking route that has many people
3. Walk facing traffic
4. Use crosswalks
5. Look both ways before crossing the street
6. Be visible: wear bright colors, reflective clothing, and avoid wearing dark clothing at night
7. During the summer wear lighter clothing, carry water, and walk in the shade.



## Know Your Rights

### RAICES (Refugee and Immigrant Legal Services)

1305 N. Flores  
San Antonio, TX 78212  
(210) 226-7722

- Free legal services
- Defense against deportation
- United States citizenship and immigration services
- Immigration case and visa applications

### Get Emergency Care

The Emergency Medical Treatment and Labor Act is a law that requires anyone coming to an emergency department to be given care regardless of their insurance status or ability to pay.

### Fair Housing Rights

Prohibits discrimination in most housing because of a person's race, color, national origin, religion, sex, familial status, and disability.

## Domestic Violence

### National Domestic Violence Hotline

1-(800)-799-7233

Ask yourself:

- How are things going at home?
- How does your partner treat you?
- Do you feel safe in your relationship?
- Has anyone close to you hurt you?

### Battered Women and Children's Shelter

7911 Broadway St.  
San Antonio, TX 78209  
(210) 733-8810

### Basic Physical Defense Program For Women

(210) 567-2800, select option 3  
(210) 567-2791

RAD@uthscsa.edu

- Free basic defense class for women in the community
- Ages 15 and older

[illegible]

UTHSCSA School of Nursing

Mini Health Fair-2016

CERTIFICATE OF PARTICIPATION IS AWARDED TO

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For participating in the following health promotion events:

- Nutrition Education
- Exercise and Stress Relief
- Mother & Baby Wellness

Signature \_\_\_\_\_ Date \_\_\_\_\_



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رئیس هیئت مدیره

**برای کمک اطلاعات بیشتر با ما تماس بگیرید**  
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**در تمام ساعات اداری (9-5)**  
**(800) 388-9000**  
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**به زبان فارسی با قیمت های بسیار پایین**  
**شما را می توانیم به خدمت خود**  
**میزانیم**

مرکز کتاب و پژوهشی برنسون  
(The Center for Disease Control and Prevention)  
[www.cdc.gov](http://www.cdc.gov)

فرزین و آفرین برنسون پان شماره یک در آمریکا  
[www.plannedparenthood.org](http://www.plannedparenthood.org)

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و بهداشت و خدمات اجتماعی سلامت جامعه  
(فراتر)  
(The Center for Disease Control and Prevention, CDC)  
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**U.S. COMMITTEE FOR REFUGEES AND IMMIGRANTS**

**www.usrefugees.org**  
1-800-368-7828  
www.usrefugees.org

**ایستادگی در برابر**  
**آرامش، مسرتوانی و جرم و مجرمخوانی**  
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[www.cdc.gov](http://www.cdc.gov)

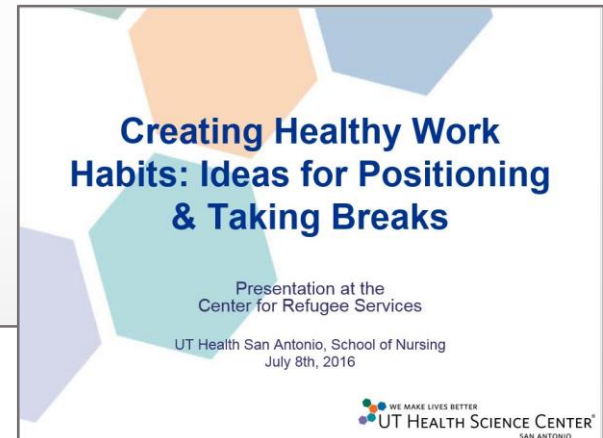
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(The Center for Disease Control and Prevention, CDC)  
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# Creating Healthy Work Habits: Ideas for Positioning & Taking Breaks

Presentation at the  
Center for Refugee Services

UT Health San Antonio, School of Nursing  
July 8th, 2016

 WE MAKE LIVES BETTER  
UT HEALTH SCIENCE CENTER<sup>®</sup>  
SAN ANTONIO

## Correct Positioning



The diagram illustrates the correct posture for machine sewing. A person is seated in an office chair, facing a sewing machine. The following points are labeled with arrows and text:

- Shoulders relaxed
- 90° elbows
- 90° waist
- Machine bed flush with table surface
- 9" (for average torso length)
- 90° knees
- Feet flat

- Key Concepts:
  - Keep body in neutral position relaxed
  - Weight centered, limbs relaxed
  - Keep arms and shoulders relaxed
  - Elbows should form 90 degree angle while palms are resting on table

Ergonomics of machine sewing

# Student Feedback

*“My most meaningful experience this semester came from working with the refugee population seeking care at the clinic. Before this semester I was completely unaware of the refugee’s presence in San Antonio.”*

*“Being exposed to the different cultural groups and resources has opened my eyes to situations that I had never experienced myself. I will be more culturally aware when practicing. It has also made [me] understand it is important to be aware of the resources provided in your community in order to provide a more holistic approach to patient care.”*

*“I think also, it is important for all healthcare professionals to find a way to provide care to those who may not have much, such as the refugees in our community. I saw unity, empathy, support, collaboration, and hard work at the San Antonio Refugee [Health] Clinic. I want to continue work like this in my nursing career.”*

# Impacting Practice: Using a Poverty Simulation to Develop Leadership Skills in Baccalaureate Nursing Students

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San Antonio, Texas, USA  
July 28, 2017

# Learning Objectives

- 1) The learner will be able to describe how components of a poverty simulation focusing on the social determinants of health can be used to develop leadership attributes in baccalaureate nursing students.
- 2) The learner will be able to describe how Population Health clinical strategies can be used to build upon the lessons learned in the poverty simulation and how they can impact nursing practice.

# Poverty Simulation

- Missouri Community Action Network
  - Given to students first day of clinical
  - Simulates living 1 month in poverty
  - Each week is 15 minutes
  - Each student is given a family role
  - Each student has to fulfill certain tasks in time frame
  - Debriefing
- Each subsequent clinical experience students have, they are asked to reflect on:
  - Please describe your most meaningful experience(s) that were gained from this week's poverty simulation.
  - Describe any nursing strategies (communication, health education, etc.) that you used during the past week that were influenced by the awareness and knowledge gained from the poverty simulation.





The thief and others getting jail time



Pleading her case to the bank



Racing to beat the clock!



Getting evicted



# Reflections

Students reflections on how this simulation will impact their practice:

- Importance of communication and active listening
- Influence of SDH on prioritizing health behaviors
- Importance of nurses being aware of community resources and how they can be accessed

# Importance of Communication and Active Listening

*“Being present for them. Being available for them. Being attentive to their needs. As nurses, the manner and spirit in which we deliver our care is just as, if not more, important than the care itself. For the past 2 years, I have obsessed over the preciseness of care and did not pay nearly enough attention to how the care was being received. It took a population of patients who maintained very simple expectations of health care to open my eyes to its true usefulness.”*

*“The most meaningful experience for me was being able to become very autonomous in the community health setting. It allowed me to realize my potential, and put things into practice that are talked about in theory. It also allowed me to be more aware of my time and how to prioritize.”*

# Importance of Communication and Active Listening (cont.)

*“I was able to communicate with a nurse manager at a dialysis clinic and ask about specific characteristics that were pertinent to our windshield survey. These questions were influenced by the windshield survey. For example, do you see patients come to the clinic in cars or by walking. Do patient’s usually have private insurance or Medicaid?”*

*“...used communication and asked some of the seniors about where they live and how close it was to the senior center....From the poverty simulation, I experienced how difficult it was to have transportation, so I was most curious about how they were able to get around.”*

*“While speaking to the seniors about immunizations I was told by many of them they were having trouble getting the shingles and pneumococcal vaccines because their insurance wouldn’t cover them. Knowing the challenges this population is faced with I am brainstorming on how we might be able to help them get the healthcare they need.”*

*“The poverty simulation definitively did affect my communication as a nursing student and I will make it a point to attempt to ask every patient I come across about hardships that they might be going through.”*

# Influence of SDH on Prioritizing Health Behaviors

*“I was able to speak a little bit with a woman that said her high blood pressure was high because she ran out of medication. So we talked about obstacles to getting that medication and things to do in the mean time to keep her blood pressure from getting too high. None of this conversation would have happened without the poverty simulation because I wouldn’t have had any mercy for her not having refilled her medication. I would have assumed that she was just neglecting to go get her medication instead of waiting to be able to afford it.”*

*“I will make my practice/programs/research community-based, asset-focused, environmentally aware and patient-centered in order to help shift healthcare toward addressing the determinants of health that most affect health outcomes among people and communities.”*

# Influence of SDH on Prioritizing Health Behaviors (cont.)

*“Working with the community helps instill an extra level of compassion just by being able to experience their day to day living situations more.*

*“Learning this helped me understand how preventative health is implemented within communities. The more time we take to educate communities and provide health promotion, the more likely individuals are to break the cycle of their social determinants. I will carry this knowledge into my nursing practice by performing holistic assessments, providing health promotion education, and being culturally sensitive to my patients.”*

*“It also helped me become more open minded about what people spend their money on, like the cellphone example, and helped me gain perspective.”*

# Influence of SDH on Prioritizing Health Behaviors (cont.)

*“Sometimes we as nurses can become so judgmental about how often patients come into the hospital or how bad they’ve let their disease or sickness get when in reality there is so much more behind it. There are so many other reasons that have led up to a disease process. This clinical has showed me that educating your patients is definitely a key factor. Many patients don’t understand their disease processes or why they are taking certain medications or why they are asked to make certain lifestyle modifications.”*

# Aware of Community Resources

*“After this clinical, I have learned more resources that our community provides. I have changed my idea of poverty. Back then; poverty was something that I observed. Now, poverty is something that I am aware of. I now see nursing as a more holistic practice.”*

*“Donating time seem like such a neglected feature in society, but in can make a great impact. Along with donating time the SA Food Bank really emphasized the importance of disseminating information, also known as public outreach. Disseminating information creates the opportunity to provide more for individuals in the community.”*

*“I learned invaluable information about the San Antonio community. I will take all these lessons and use them towards my practice... I am excited about being better equipped to provide care for patients that may need these community partners.”*



# Aware of Community Resources (cont.)

*“...it impacted me to become an active participant in my community by becoming more involved in volunteering work and be enrolled as a political activist nurse in my community.”*

*“...some aspects of this clinical such as people in poverty or people who need help finding resources could definitely appear in the hospital setting as well and I will have better knowledge and experience in not only assisting these individuals, but understanding their hardships and lifestyles.”*

# Upstream Health Care: Values Training for Low-Income Children using Baccalaureate Nursing Students and Community Youth

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July 28, 2017

# Learning Objectives

- 1) The learner will be able to discuss the importance of an upstream health care approach when working with vulnerable community youth/children.
- 2) The learner will be able to identify teaching strategies used in community settings and their effectiveness in values training with vulnerable youth/children.

# Upstream Health Care

<https://www.youtube.com/watch?v=qarQXqKbmLg&feature=youtu.be>

# Community Relations

Community Relations require:

- Time
- Trust
- Care
- Concern

Community Relations driven by:

- Community
- Needs
- Community-Based Participatory Research (CBPR)

# Jireh House

- Jireh House provides short-term food, clothing assistance, and a variety of services and opportunities to help public housing residents obtain employment and greater self-sufficiency.
- Mission: To serve the spiritual, physical, and societal needs of residents of a public housing project and to develop their life skills by providing a daily presence of support and ministry.



# Moral Character Training

## Key principles of Moral Character Training:

- All adults are responsible for educating children on character development
- Significance of training from a young age
- Identifying the needs of vulnerable children
- Using puppets as a teaching strategy





# Collaboration

## Students Mentoring Youth

- Puppet training
- Values in Action (VIA)



## Developing and presenting puppet shows

- Work in teams
- Design puppets
- Plan the production
- Marketing to the community



# Values in Action Inventory

*“Character Strengths are the positive parts of your personality that impact how you think, feel and behave and are the keys to you being your best self. When applied effectively, they are beneficial both to you and society as a whole. They are different than your other strengths, such as your unique skills, talents, interests and resources, because character strengths reflect the ‘real’ you — who you are at your core.”*

- **Wisdom-** Creativity, curiosity, judgement, love-of-learning, perspective
- **Courage-** Bravery, honesty, perseverance, zest
- **Humanity-** Kindness, love, social intelligence
- **Justice-** Fairness, leadership, teamwork
- **Temperance-** Forgiveness, humility, prudence, self-regulation
- **Transcendence-** Appreciation of beauty, gratitude, hope, humor, spirituality

# Significance

For Jireh House youth, the aims for the puppet show were to:

1. Identify and enhance character strengths with a focus on honesty, self-control, and integrity
2. Foster a spirit of optimism and hope.
3. Practice these strengths across different situations

For nursing students, the experience provided a chance to:

1. Put Community-Based Participatory Research into practice in a mutually beneficial and collaborative program.
2. Apply nursing knowledge related to population health with the goal of fostering citizenship and leadership in both students and Jireh House youth.

# Summary

These different educational strategies provided the opportunity to introduce students to:

- Population-Focused Health
- The community assessment process
- The importance of building relationships with community partners using:
  - Cultural awareness
  - Simulation
  - Innovative teaching and mentoring approaches

# Conclusion

The most important lesson for the students to learn is to understand that the role of the nurse in the community, just as at the bedside, is to promote and improve the health of vulnerable populations.



# References (Salt)

- Center for Refugee Services. (2014). *About us*. Retrieved from <http://www.sarefugees.org/index.php>
- Lutheran Community Services Northwest. (2015). *Walking together: A mental health therapist's guide to working with refugees*. Retrieved from [https://www.academia.edu/14444974/Walking\\_Together\\_A\\_Mental\\_Health\\_Therapists\\_Guide\\_to\\_Working\\_with\\_Refugees](https://www.academia.edu/14444974/Walking_Together_A_Mental_Health_Therapists_Guide_to_Working_with_Refugees)
- Szjana, A., & Ward, J. (2014). Access to health care by refugees: A dimensional analysis. *Nursing Forum* doi: 10.1111/nuf.12051
- Texas Department of State Health Services. (2014). *Refugee program arrivals to state and counties*. Retrieved from [https://www.dshs.state.tx.us/idcu/health/refugee\\_health/statistics](https://www.dshs.state.tx.us/idcu/health/refugee_health/statistics)
- Thornton, R. L. J., Glover, C. M. Cené, C. W., Glick, D. C., Henderson, J. A. & Williams, D. R. (2016). Evaluating strategies for reducing health disparities by addressing the social determinants of health. *Health Affairs*, 35(8), 1416-1423.
- United Nations High Commissioner for Refugees (UNHCR). (1951). *Convention and protocol: Relating to the status of refugees*. Retrieved from <http://www.unhcr.org/3b66c2aa10.html>
- U.S. Department of State (2016). FY15 *Refugee admissions statistics*. Retrieved September 30, 2016 from <http://www.state.gov/j/prm/releases/statistics/251285.htm>

# References (Martinez & Escandon)

- Bernier, M. & O'Hare, J. ( 2005). *Puppetry in education and therapy, unlocking doors to the mind and heart*. Author House: Bloomington, Indiana.
- McMahon Giles, R. & Wellhousen Tunks, K. (2008). *Puppet play: Dramatic benefits for young performers*. Early Childhood News. Retrieved from [http://www.earlychildhoodnews.com/earlychildhood/article\\_view.aspx?ArticleID=745](http://www.earlychildhoodnews.com/earlychildhood/article_view.aspx?ArticleID=745)
- Minkler, M. & Wallerstein, N. (2008). Introduction to community-based participatory research. In M. Minkler & N. Wallerstein (Eds) *Community-based participatory research for health from process to outcomes* (2<sup>nd</sup> ed). San Francisco: Jossey-Bass.
- Values in Action. (2017). *Learn your character strengths*. Retrieved from <http://www.viacharacter.org/www/The-Survey#nav>