

ACCEPTABILITY OF SEXUAL REPRODUCTIVE HEALTH SERVICES AMONGST REFUGEE WOMEN IN TYROL, AUSTRIA

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Research Question:

What are the enabling or restricting factors for the acceptance of available Sexual Reproductive Health Services for Female Refugees in Innsbruck – Tyrol?

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INTRODUCTION

Research done in two high-income countries reveals that despite access to SRH services, low uptake of such services was recorded because of the *hush* culture associated with the topic amongst other factors. This created the need to evaluate the acceptability of SRH services by women refugees in a high-income country like Austria.

The UNFPA defines Sexual Reproductive Health (SRH) as the state of complete physical, social and mental well-being in all aspects of the reproductive system including having a safe and satisfying sex life, the capacity to reproduce and the liberty to decide when and how often to do so.

In this study, refugee women refer to “biological women” who have fled their homes and have crossed an international border to find safety in another country.

OBJECTIVE

To examine and evaluate how receptive Refugee Women in Igls camp are to SRH Services in Austria.

METHODOLOGY

11 (9 refugee women and 2 workers) qualitative interviews

Sampling: Gatekeeper and Snowballing

Inclusion Criteria

Willingness
Reproductive age (18 - 45 years)
Ability to communicate confidently in English.
Refugee background.

RESULTS

Enabling Factors

- Positive perception about being in the camp
- Good relationship with the Social Worker/ Camp Coordinator
- Quality support (including language support) from CC/SW with accessing SRH services
- Being assigned to a HCP

Restricting Factors

- Language and cultural differences
- Traumatic migration history
- Unpleasant experience with SRH Services in Country of origin
- Gender preference for HCP/ Translators

Ambivalent Factors

- Trust for SW / CC
- Waiting times are subject to communication skills
- Duration of work with the women.

ANALYSIS

Thematic analysis was employed because of its flexibility, easy-to-use approach and suitability for student projects like a Master's thesis.

Recorded interviews were transcribed using MAXQDA and codes were generated from transcripts.

Coding Sample

Interviewer: How do you feel about being here?

Participant's Response: I had issues with my partner but when I got here, *I felt safe, peaceful and comfortable*. It's a nice place.

Interviewer: How is your relationship with your SW here?

Participant's Response: Everything is fine, *she is nice*, and I am good with her. *She is friendly*.

THEMES IDENTIFIED

Positive Perception about being in the refugee camp

Good relationship with SW/ CC

CONCLUSION

This research identified factors influencing the acceptance of SRH services in Tyrol, Austria. My key findings are gender preference for HCPs/ translators and cultural sensitivity in healthcare delivery.

My participants preferred female gynaecologists and translators instead of males. However, once cultural sensitivity was demonstrated in the delivery of SRH, gender did not matter anymore.

References

Kindly scan the bar code below for the references.



Key:

HCP- Health Care Practitioner
SW - Social Worker
CC- Camp Coordinator

