Arkansas Works With Partners and Outreach Workers to Address Hansen’s Disease Among Its Marshallese Population

Arkansas has developed a culturally competent way of providing services and support to this unique population.

The Marshallese population in Northwest Arkansas was estimated between 6,000 and 10,000 persons in 2007, and Springdale, Arkansas, is home to the largest number of Republic of the Marshall Islands (RMI) migrants in the continental United States. RMI has the highest reported prevalence of Hansen’s disease (leprosy) in the world. Many Marshallese have moved to the United States due to a special compact with the U.S. government that allows RMI citizens to freely migrate to the United States. Although they are able to live and work in the United States, they are ineligible for federally funded public assistance programs, including Medicaid and Social Security. With Hansen’s disease proving to be a unique medical issue within the Marshallese community, the Arkansas Department of Health mobilized with partners to address the needs of this specific population.

Steps Taken:

- The Jones Center for Families, a partner social services organization offering free services in Springdale, Arkansas, hosted a health survey in 2009 for 600 Marshallese to focus on improving public health programs and services. The Jones Center has also established a Marshallese outreach coordinator to work with this population.
- Because some members of Arkansas’s Marshallese population are skeptical of Western-style medicine, the Arkansas Department of Health hired Marshallese outreach workers who were well-respected in the community for follow-up visits with patients in their homes.
- The Arkansas Department of Health partnered with the National Hansen’s Disease Clinical Center to provide information and support to physicians unfamiliar with Hansen’s disease.

Results:

- Due to cultural beliefs in cures for illness through religion and faith, as well as illness as an outcome from sin, it had previously been hard to treat Marshallese patients with Hansen’s disease successfully over a period of time. The department now uses the Marshallese outreach workers to assist the public health nurse case manager with directly observed therapy, home visits, and follow up.
- Cultural and language barriers are much easier to manage thanks to the Marshallese outreach workers. Their knowledge has proved invaluable in presenting difficult-to-translate health concepts to Marshallese patients.

Lessons Learned:

- The Arkansas Department of Health was successful working with partners, such as HRSA’s National Hansen’s Disease Clinical Center, to provide information to physicians who are not familiar with Hansen’s disease.
- To avoid stigmatizing the Marshallese, the state health department has also successfully communicated with the general public about tuberculosis and Hansen’s disease outbreaks while emphasizing that the public is not at risk.
Challenges Reaching the Marshallese in Arkansas

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