

Patients Among Us: Caring for Refugees and Asylum Seekers

2021-22

Basic Facts and Figures

Who is a Refugee?

Refugees are those who are forcibly displaced and must leave their home as a result of persecution, conflict, violence or human rights violations. They typically apply for refugee status prior to arriving in their host country.

Who is an Asylum Seeker?

An asylum seeker, similarly, is someone who is unable or unwilling to return to their country of origin owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion. They typically apply for their asylum status while in their host country.



United Nations High Commissioner for Refugees: 82.4 Million People Displaced People Worldwide

California Refugee Arrival Statistics



Although in recent years the number of refugees admitted into the U.S. has been reduced significantly, California remains as one of the state's receiving the largest number of refugees.

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Social Determinant of Health

Refugees

Refugees are a vulnerable population whose social determinants of health greatly affect their wellness. Many struggle with employment, transportation, housing, education, language barriers, feelings of social isolation, insurance status, etc.

Many refugees face PTSD from their experience's pre-migration which is further exacerbated by post-migration factors

➤ It is **imperative** to screen for PTSD.

Unfamiliarity with the healthcare system and language barriers make navigating the healthcare system extra challenging for refugees especially since providers underutilize interpreter services.

➤ It is **imperative** for providers to spend time including interpreters in encounters with this population, and expect more time during appointments when interpreter services are used.

Refugees and asylees qualify for medical healthcare coverage.

➤ It is **imperative** to make sure patients with "refugee" status are in contact with their local resettlement agency and that patients with "asylee" status are referred to the monthly New Asylee Orientation done through SF CAIRS

Many people have the life experience of a refugee/asylee but do not have that status granted to them by the US government.

➤ It is **imperative** to assess the formal legal status of your patients before offering services or benefits since their formal status will affect what they can qualify for. For patients that have the experience of an asylee but they need to apply, consider referring to legal services and, in SF, to the Human Rights Collaborative for a pro-bono forensic exam.

Providers

Utilization of healthcare and social services does not affect someone's chances of being granted a certain immigration status; however, many refugees are afraid to access services because of fear that using healthcare and social services might affect their immigration status.

Many refugees report difficulties in accessing specialist services, understanding explanations of treatments, and participation in health promotion and disease prevention programs.

Oftentimes vaccination statuses of children and past medical history are difficult to obtain because of the migration process.

➤ It is **imperative** that providers draw titers to identify which vaccines need to be given if records are not available.

Refugee Medical Assistance

Many social resources exist for refugees that have different requirements.

Income eligible refugees and asylees must apply for Medicaid/Medi-Cal and show their proof of status. Resettlement agency's and, in SF, the **Newcomers Health Program staff** at the **Zuckerberg SF General Hospital** can help with this.



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COVID-19 and its Impacts

According to surveys completed at the beginning of the coronavirus pandemic 70% of the general public reported lost income and 58% indicated concern about paying bills.

Refugees and the displaced already struggle with the trauma of fleeing persecution and discrimination and the stress and fear of contracting COVID-19 as well as the isolation experienced during lockdowns have exacerbated mental health issues.

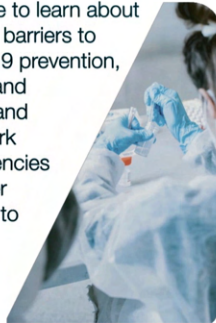
60% of refugees live in cities or densely populated camps with inadequate health infrastructure making physical distancing very difficult.



Everyone living in California over the age of five is eligible for a free vaccine regardless of immigration status and patients will not have to talk about their immigration status to receive the vaccine.



Take time to learn about patients' barriers to COVID-19 prevention, testing, and control, and then work with agencies and other partners to reduce them.



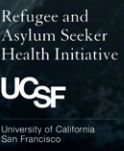
How Can Hospital Staff Provide Equitable Care?

Right to medical care

- Based on the medical care provided to citizens of the host country
- Refugees with minor children:
 - Are eligible for Medicaid and Temporary Assistance for Needy Families
- Refugees in General:
 - Are eligible for Refugee Cash Assistance and Refugee Medical Assistance for their first 8 months
- Refugees and asylees are eligible for certain city, state, and federal benefits
- All newly granted refugees and asylees, are eligible for a comprehensive refugees health assessment, in SF they may visit the **Newcomers Health Program** at the Family Health Center whose staff are multi-cultural/lingual
- In the Bay Area, the International Rescue Committee and Jewish Family and Community Services specialize in refugee/asylee support.
- Healthcare providers can help support refugees and asylum seekers through the following: avoiding refoulement, advocating for the right to family life, and help accessing legal representation by connecting refugees and asylees to social services and medico-legal partners
- Provide your patients with a **"Red Card"** which help people assert their rights and defend themselves in many situations, such as when ICE agents go to a home
- Learn about the **rights** of your immigrant patients



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Resources

Citations

- ▶ Convention and Protocol Relating to the Status of Refugees. UNHCR website The UN Refugee Agency. <https://www.unhcr.org/3b66c2aa10.html>. Published December 16, 1967.
- ▶ <https://immigrantsrising.org/resource/defining-undocumented/>
- ▶ <https://immigrantdataca.org/indicators/refugee-arrivals#/?breakdown=1>
- ▶ <https://www.unrefugees.org/refugee-facts/statistics/>
- ▶ <https://www.kff.org/racial-equity-and-health-policy/fact-sheet/health-coverage-of-immigrants/>
- ▶ Feinberg, I., O'Connor, M. H., Owen-Smith, A., & Dube, S. R. (2021). Public health crisis in the refugee community: Little change in social determinants of health preserve health disparities. *Health Education Research*, 36(2), 170–177. <https://doi.org/10.1093/her/cyab004>
- ▶ <https://www.unhcr.org/en-us/events/campaigns/5fc1262e4/refugees-and-the-impact-of-covid-19.html>
- ▶ <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/refugee-populations.html>
- ▶ <https://covid19.ca.gov/vaccines/#Who-can-get-vaccinated>
- ▶ <https://trac.syr.edu/phptools/immigration/asylum/>

Learn More

- ▶ <https://www.doctorswithoutborders.org/refugees>
- ▶ <https://www.unhcr.org/en-us/teaching-about-refugees.html>
- ▶ <https://www.amnesty.org/en/latest/education/2015/10/8-educational-resources-to-better-understand-the-refugee-crisis/>
- ▶ <https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-019-4353-1>
- ▶ <https://www.unhcr.org/en-us/figures-at-a-glance.html>
- ▶ <https://www.cdss.ca.gov/inforesources/refugees>

Learn about RAHI

Our Mission

To improve Refugee and Asylum Seeker Healthcare.
By focusing on our core foundations...

- ▶ Expand the knowledge base and literature on refugee health to foster evidence-based medical practice within the field, and thus provide refugees with an equitable, high-quality, culturally sensitive patient experience.
- ▶ Foster international research collaborations on refugee health, which will ultimately lead to improved quality of refugee medical care via evidence-based clinical practices, involvement of affected communities, and heightened social awareness.
- ▶ Create a sustainable workflow in locations with resettled refugees, such as in the Middle East and Europe, to reduce the observed waste and redundancy in the field of humanitarian medical relief work.

Additionally, we strive to empower and engage students, residents, and faculty who originated from affected communities and wish to 'give back' through research, clinical care, education and community engagement.

Get Involved

By simply contacting us as a volunteer or donating, you will help launch the initiative and enable RAHI to reach its full potential. We are immensely proud of all that RAHI has accomplished, but it is important to note that everything RAHI has done thus far has been on a volunteer basis, without any funding or budget whatsoever. All RAHI members are volunteering their own personal time and resources to realize RAHI's potential, because we believe in its purpose and importance for the community locally and internationally. This labor of love helped us realize how much more we could accomplish if we had funding to achieve even bigger goals.

This includes organizing new teams to help in the emerging refugee crises of the Rohingya and Yemeni populations; launching new research projects and clinical interventions in the Syrian refugee crisis that have been unable to start due to lack of funding; developing our online presence; and supporting RAHI's local and international research and awareness events. Every little bit helps— thank you for your support!

Contact Us



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