

Serving Afghan Refugees: How the Yale Refugee Clinic Addressed Surging Needs in New Haven

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Introduction

From Sept to Dec 2021, **254 Afghan refugees** arrived in New Haven through Integrated Refugee & Immigrant Services (IRIS).

This surge **overwhelmed existing medical services** for refugees, leading to a backlog and delay in patient care.

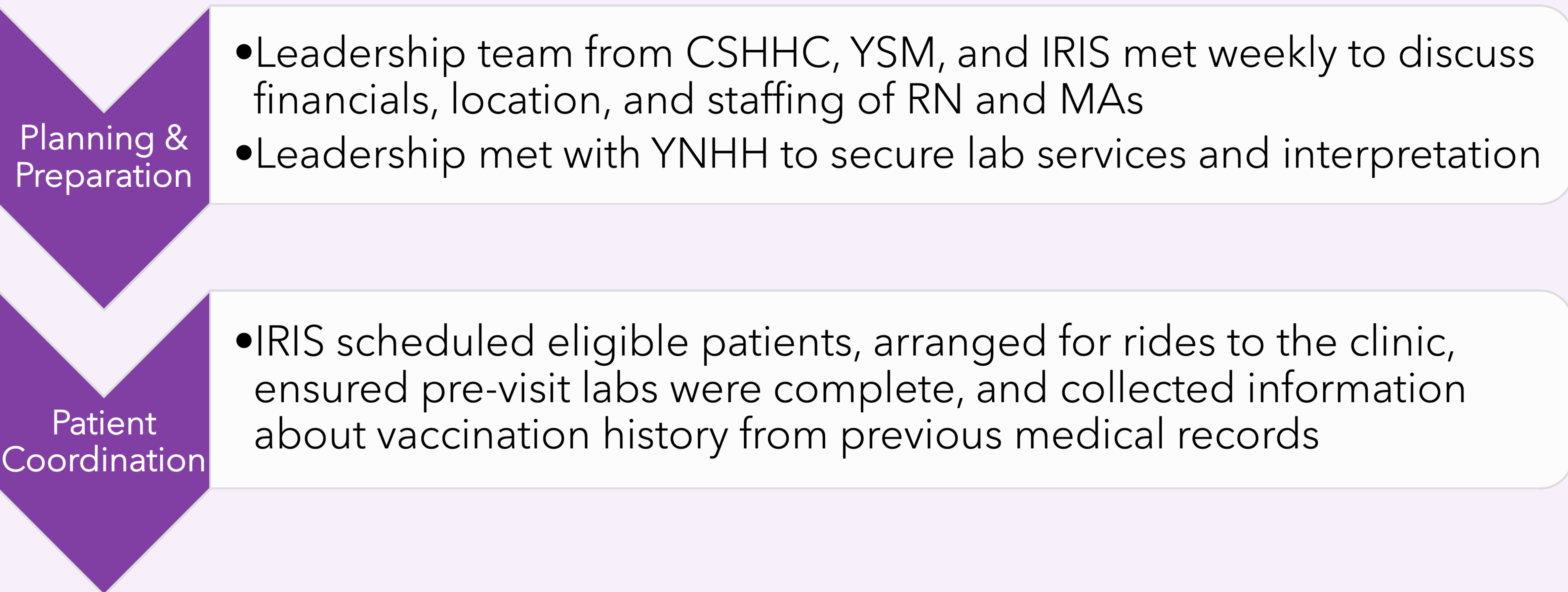
The Yale refugee clinic at Cornell Scott-Hill Health Center (CSHHC) organized a **weekend mass clinic** with 43 volunteers to provide initial visits to these patients.

Impact

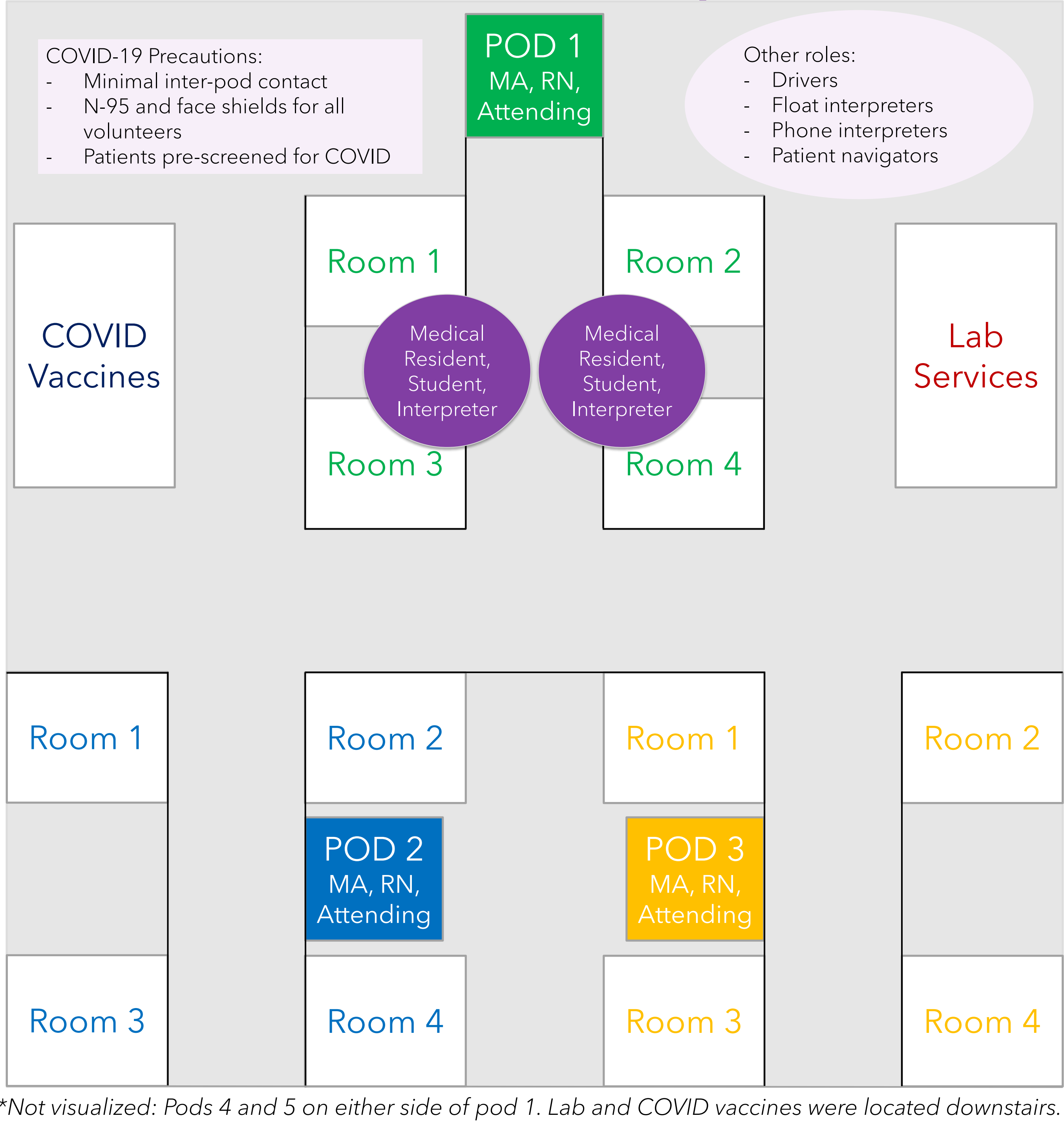
- Patient care
 - Waitlist was reduced by 72%
 - 30 patients received timely care and established primary care
- Raised broader awareness of refugee healthcare
- Strengthened partnerships between organizations involved in this effort
- Provided medical education opportunities for healthcare students

Referrals placed (n=49)	Dental (20), pulmonology (8), behavioral health (8)
Vaccines provided (n=52)	Influenza (19), COVID (16), TDaP (8)
Diagnoses given (n=28)	Latent TB (8), mental health (5), metabolic conditions (5)

Capacity-Building Process



Cornell Scott-Hill Health Clinic Layout



Clinic Workflow

- IRIS provided rides via taxi for patients arriving to clinic
- Front desk staff checked in patients and provided **pre-filled name cards** with relevant patient information ie. address, preferred pharmacy
- **Eight medical teams** divided into **five pods** conducted initial medical intake visits with **30 adult refugee patients**
- **Patient navigators** escorted patients to necessary stations such as lab
- **Volunteer student drivers** provided transportation to patient homes, providing comprehensive services
- **Float and on-call interpreters** assisted in ancillary services such as coordinating rides, explaining AVS
- IRIS collected sign-out notes after the visit for **care coordination**

Challenges and Lessons Learned

- Stand-by medical teams** helped mitigate unplanned delays in visits
- In-person interpreters** enhanced speed of visit and quality of interaction while bypassing technical issues
- Radiology services** would improve comprehensiveness of care for the many patients with latent TB

Future Directions

- **Replicate successful elements** of intervention to routine refugee care
- Investigate follow-ups and create mechanisms to maintain **continuity of care**
- Improve **refugee patient education** on US health system navigation
- Provide training for providers and volunteers and **culturally appropriate and trauma-informed care**

Acknowledgments

CSHHC, IRIS, YNHH, Office of Global Health, Laura Crawford

References

<https://www.cdc.gov/immigrantrefugeehealth/guidelines/refugee-guidelines.html>