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# Providing for the Medical and Social Needs of Newly Resettled Refugees in Philadelphia

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According to Office of Refugee Resettlement (ORR) data, Pennsylvania received 2,155 refugees during the 2009 fiscal year.<sup>1</sup> The primary countries of origin of these refugees were Burma, Bhutan, and Iraq. The number of refugees who resettled to Philadelphia County in 2009 totaled 597 persons. The nationalities of the refugees who resettled to Philadelphia County are representative of state statistics.<sup>2</sup>

Jefferson Family Medicine Associates (JFMA), upon initiating a partnership with the Nationalities Service Center (NSC), began providing refugee health assessments in September 2007. JFMA providers has access to routine vaccinations, medical examinations, urgent care, and management of chronic conditions. Since 2007, JFMA has provided medical care to 625 refugees with approximately 250 new patients seen and approximately 1,200 total visits annually. The refugees who receive medical care at JFMA often have complicated health problems that require extensive management, patient and family teaching, and continued follow-up care. The medical diagnoses most commonly addressed include latent tuberculosis, hepatitis B, hypertension, diabetes, hyperlipidemia, asthma, mental health conditions including Post Traumatic Stress Disorder, periodontal disease, and a wide array of ophthalmic problems. Examples of less common diagnoses requiring continued services at JFMA or referral to specialists include malaria, HIV, hepatitis C, parathyroid adenoma, rheumatic heart disease, and ventricular septal defects.

Due to the numerous medical, cultural, and linguistic complexities of the JFMA refugee patient population, the need for other services is extensive. For example, physicians at JFMA identified that their refugee patients need additional assistance in accessing primary care, navigating through the American healthcare system, and adjusting to American cultural and societal norms. Specifically, needs include, but are not limited to, assistance with scheduling medical appointments, education on the proper utilization of prescriptions, accompaniment to diagnostic testing procedures, diet and nutrition teaching, home safety evaluations, and assisting refugees to understand their medical diagnoses within the framework of their cultures.

In the fall of 2010, JeffREP (Refugee Education Partners) was started as an extension of the student interest group, Refugee Health Partners. The goal of JeffREP is to identify refugee families who have difficulty adjusting to life in the U.S., with the hope of assisting in their transition for self-sufficiency and independence. Many of the original families identified also had complicated medical conditions that made their transition to the U.S. more challenging. Some of the activities of

JeffREP include assisting with school enrollment, arranging transportation to healthcare visits, and acting as their individualized healthcare navigator. This unique group has not only provided the refugees with the necessary assistance that they need on a daily basis, but it has given the students the first-hand experience of learning how to navigate “life” through the eyes of a foreign-born patient.

The medical and social needs of the refugee population are complex and could benefit from input from numerous professions. Thomas Jefferson University implements interprofessional educational programs in various formats on campus. The authors are collaborating to further develop an interprofessional approach to refugee health within the university to prepare students for their future practices that may include refugee populations or those with varied cultural backgrounds. Strategies to include students from the Jefferson Medical College and Schools of Nursing, Pharmacy, Health Professions, and Population Health would provide an opportunity for students to gain an appreciation of a notoriously vulnerable population while working together within an interprofessional framework.

## References

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