



ASYLEE NAVIGATION & REFUGEE HEALTH PROGRAM FOR SAN MATEO COUNTY



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POPULATION HEALTH DIVISION
SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Monthly New Asylee Orientations

2nd Tues of month. 10am via Zoom



New Asylee Orientation

Overview of Benefits,
Services, and U.S. Systems



- Part 1 >> Important Documents
- Part 2 >> Refugee/Asylee Programs and Benefits
- Part 3 >> Health Care
- Part 4 >> Employment
- Part 5 >> Education
- Part 6 >> Other Immigration Topics
- Part 7 >> New Responsibilities & Helpful Resources

More info: <http://sf-cairs.org/asylum-orientation/>

In-person New Asylee Resource Events

- Planning for July – Nov 2022
- One Friday afternoon per month at the SF Asylum Office
- Opportunity for outreach and linkages for newly granted asylees

- If interested to participate or learn more:

[In-person New Asylee Resource events](#)



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NEWCOMERS HEALTH PROGRAM

- Based at Zuckerberg SF General's Family Health Center
- Partner with the Refugee Medical Clinic to provide medical screenings to newly arrived/granted refugees
- Refugee Health Assessment Program for SF, San Mateo, and Marin counties, funded by CDPH's Office of Refugee Health
 - 1 of 11 in California (Alameda, Contra Costa, Kern, LA, Orange, Sacramento, San Bernardino, San Diego, Santa Clara, and Stanislaus)



GOALS OF THE HEALTH SCREENING

- General health assessment, including vision, hearing and dental screening
- Identification and treatment of immediate health needs
- Immunization
- Orientation to the health system in the United States
- Establish medical record in the U.S. Some have records from home country
- Prepare for the I-693 Medical Exam needed for adjustment of status
- Transition to a primary care provider
 - If SF resident, can stay at FHC for primary care
 - If San Mateo & Marin resident, will be assigned a PCP there



NHP's PATIENT POPULATION

newly granted status by U.S. federal government

REFUGEE (<10%)

A refugee is **someone who has been forced to flee his or her country because of persecution, war or violence**. A refugee has a well-founded fear of persecution for reasons of race, religion, nationality, political opinion or membership in a particular social group.

ASYLEE (80-90%)

Individuals already in U.S. and cannot return to their country for fear of persecution, as defined in the refugee category above.

VICTIM OF TRAFFICKING (VOT) (<5%)

Survivors of modern-day slavery, which include children, men, and women who were subjected to force, fraud, or coercion for the purpose of sexual exploitation or forced labor.

SPECIAL IMMIGRATION VISA (SIV) (<5%)

Targeted because of their work as interpreters for the U.S. military in Iraq and Afghanistan.

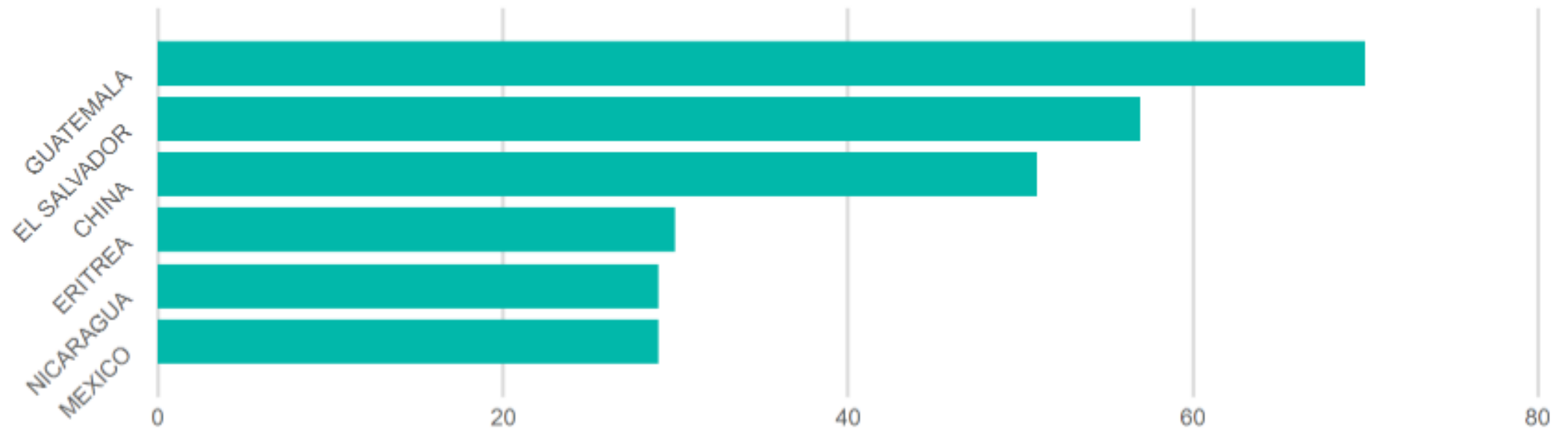


Country of Origin

October 2018 – Sept 2021

Country of Birth

Top 5 Countries



How to refer

Options:

- Online Referral form: <https://tinyurl.com/SF-Ref-Health>
- Call 628-206-8608
- Email newcomers.health@sfdph.org



For those ineligible for services...

Recommended Screening Guidelines

CLINICIAN GUIDANCE

<https://www.cdph.ca.gov/Programs/CID/ORH/Pages/Clinician-Guidance.aspx>



Recommended Health Screening Guidelines for Physicians who Serve Newly Arrived Refugee, Asylum Seeker, and Asylee Populations in California

Summary

The California Department of Public Health's Office of Refugee Health provides comprehensive health screening for newly arrived refugees to California through eleven county programs. This tool provides recommended health screening guidelines which are in accordance with the Centers for Disease Control and Prevention (CDC) recommendations for the U.S. Domestic Medical Examination for Newly Arriving Refugees. These same standards are also applicable to asylees, asylum seekers, as well as migrant populations in general.

Asylee Health Screening Guidelines

Patient/Family Medical History

Refugees have exposures that affect physical and mental health in the premigration, migration, and postmigration stages of their journey. It is important to consider the migration journey may include several countries and environmental exposures other than the country of origin (e.g., Chagas' disease for African people migrating through South and Central America).

Medical History and Physical Exam

Physicians should inquire about prior medical records; current or recent medications or use of curative remedies such as herbs, balms, or pills; history of trauma, abuse, torture, human trafficking; past surgeries; blood transfusions; tattoos, other traditional cutting or scarification; female genital cutting; past and current substance use; sexual history (consensual/non-consensual); family structure noting current caregiver for children; social support; educational assessment; dental, vision and hearing screening.

Mental Health Assessment for Adults and Children

The [CDC Guidance for Mental Health Screening during the Domestic Medical Examination for Newly Arrived Refugees webpage](#) contains tools used for refugee populations of differing ages.

Laboratory Tests Recommended for Adult Patients	Recommended for Children Under 18
Complete Blood Count with differential to look for eosinophilia	Yes
Urinalysis	No
Serologic testing for hepatitis A, B, and C	Yes
Lipid Panel *	No
HIV testing, unless asylee has known HIV+ status from overseas	Yes
Blood Lead Levels (pregnant women only)	Children = < 16
Soil Transmitted Helminth Infections (stool examination for ova and parasites) *	Yes
Malaria (thick and thin blood smears) *	Yes
Serum Strongyloides IgG *	Yes
Serum Schistosoma IgG	Yes





THANK YOU!

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