

Health Care and Access to Benefits: Identified Issues and Recommendations

Issue 1

Communication between refugees and doctors, pharmacists, and hospitals complicate health care access for refugees and could be a danger to them. Doctors may also not understand cultural needs of refugees.

Recommendations:

- Focus on doctors, as the IRC does, who are familiar with refugees and have a relationship with the community
- Create a service, like there is in Washington, that provides translation and interpretation for individuals free of charge
 - This service is coordinated by the Red Cross
 - Translators may be familiar with Medicaid

Issue 2

Refugee clients are being switched from their insurance providers and randomly assigned to doctors without their knowledge, delaying the care available to refugees.

Recommendations:

- Agencies working with refugee clients need to track these occurrences
 - More action will be made if there is cohesive and comprehensive proof that this is occurring
- Mark Greenberg at the IRC is already in contact with the Office of Managed Care to work on the problems on individual bases

Issue 3

Those who require waivers from the English and/or civic test for citizenship have difficulty getting them filled out.

Recommendation:

- USCIS has decided to make standardized forms and offer training on how to fill them out
 - Encourage them to continue this process and make it a priority

Issue 4

Refugees may be unsure of what they need to do to apply for a Green Card or citizenship. They are told about the requirements when they first arrive, but they may need a reminder.

Recommendation:

- Man from the audience offered to play the requirements over the radio, if he was given the information
- Remind them of the benefits of citizenship

Issue 5

Refugees and others may attempt to fill out extension and application forms on their own, potentially setting back the process.

Recommendations:

- Encourage refugees to use services, like those provided at RRISA or from a lawyer
 - The fee is a good investment for getting the forms filled in correctly

Issues without specific recommendations

- Barriers to health care exist for all Georgians, not just refugees.
 - Georgia is considered one of the most conservative states in regard to health care issues.
 - Is privatization the cause of this?
- Some doctors turn away refugee clients though this is not legal under Title VI
 - There is currently no funding to monitor this
- Women 21-26 are now required to receive the HPV vaccination before being able to change their statuses.
 - This may be considered unreasonable, especially as the vaccination is only required for females, not males
 - Some women are resistant to the vaccination