Refugee 101
An Overview of Refugee Resettlement

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Content Summary

Definitions

The Global Perspective

Refugee Resettlement

Refugee Domestic Medical Examination (Medical Screening)

Refugees in Colorado - Demographics

Refugee Health - Data

Cultural Humility/Health Literacy

Resources
Definitions
What is a Refugee?

A refugee is an individual forced to leave his/her country of origin based upon persecution or fear of persecution due to:

– race;
– religion;
– nationality;
– or membership in a particular group or political party.

• An official entity such as a government of United Nations Refugee Agency determines whether a person seeking international protection meets the definition of refugee (outside of US)

• Refugees are granted legal status of “refugee” by U.S Citizenship and Immigration Services (USCIS).
Refugee-eligible populations

✔ Refugee
✔ Asylee
  • meet refugee persecution requirements; present in the US or seek admission at a port of entry; granted asylee status by a US immigration court
✔ Unaccompanied Refugee Minor (URM)
  • children identified overseas who are eligible for resettlement, but do not have a parent or a relative available to provide for their long-term care
✔ Cuban/Haitian Parolee
  • a discretionary authority that allows for the temporary entry into the US for urgent humanitarian reasons or for significant public benefit (medical; family reunification; civil/criminal court proceedings; other emergent requests)
✔ Special Immigrant Visa Holder (SIV)
  • certain Iraqis and Afghans who have worked as translators or interpreters, or who were employed by, or on behalf of, the US government
✔ Victims of Human Trafficking (VOT)
  • victims of certain crimes who have suffered mental or physical abuse and are helpful to law enforcement or government officials in the investigation or prosecution of criminal activity
✔ Special Immigrant Juvenile (SIJ)
  • under the age of 21; abused, neglected, or abandoned by one or both parents
✔ Secondary Migrant
  • migrated to a second state after initial resettlement
Global Perspective

79.5 MILLION forcibly displaced people worldwide at the end of 2019

- **26M** Refugees
  - 20.4M Refugees under UNHCR’s mandate
  - 5.6M Palestine refugees under UNRWA’s mandate
- **45.7M** Internally displaced people
- **4.2M** Asylum-seekers
- **3.6M** Venezuelans displaced abroad

Source: UNHCR / 18 June 2020

source: https://www.unhcr.org/ph/figures-at-a-glance
New displacements by conflict and disasters in 2016
This map displays all displacement events recorded by IDMC that have occurred in the past six months.

- **Conflict**
- **Disaster**
- **Development**

Show data from last 180 days

Developed by students at ReDI School

https://www.internal-displacement.org/
Global Perspective

80 Million
Forcibly Displaced

30 Million Refugees
People forced to flee their home country due to persecution or conflict and for durable situation has not been identified.

50 Million IDPs
Internally displaced people forced to flee their homes for the same reason as refugees, but remain within their home country.

Return Home  Locally Integrate  Resettlement

Aid and Protection at Home  Resettlement

Source: Kimahli Powell, LL.D (HONS), Executive Director, Rainbow Railroad (Understanding the Landscape and Resettlement Needs of LGBTQI Refugees presentation)
United Nations High Commissioner for Refugees – Seeks Durable Solution…

- **Voluntary Repatriation** - returning to one’s home country
  If returning home is not feasible because of ongoing instability or conflict, then...

- **Integration** in the second country of asylum - establishing roots in the host or asylum country
  If the refugee is not sufficiently protected in the original host country or is considered to be particularly vulnerable for various reasons (e.g., disabled/injured, women-at-risk, etc.), then...

- **Resettlement** to a third country - establishing a new life in a new country
Path to Refugee Resettlement

1 Register with U.N. 2 Interview with U.N. 3 Get refugee status from U.N. 4 Get referral to the United States
5 Interview with State Dept. 6 First background check
7 Possible higher-level background check 8 Another background check 9 Fingerprint screenings #1 10 #2
11 and #3 12 Review by U.S. immigration 13 Possible new review 14 Homeland Security in-person review and
15 approval 16 Contagious disease screening 17 Cultural orientation 18 Resettlement agency match 19 Multi-agency
security check 20 Final security check at airport

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<td>Africa</td>
<td>22,472</td>
<td>25,000</td>
<td>31,624</td>
<td>35,000</td>
<td>16,000</td>
<td>20,232</td>
<td>19,000</td>
<td>10,459</td>
<td>11,000</td>
<td>16,366</td>
<td>Religious Persecution; Lautenberg/Specter Amendments = 5,000</td>
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<td>18,456</td>
<td>13,000</td>
<td>12,518</td>
<td>12,000</td>
<td>5,000</td>
<td>5,173</td>
<td>5,000</td>
<td>3668</td>
<td>4,000</td>
<td>5,030</td>
<td>Refugee Crisis in Iraq = 4,000</td>
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<td>Europe and Central Asia</td>
<td>2,363</td>
<td>4,000</td>
<td>3,957</td>
<td>4,000</td>
<td>1,500</td>
<td>5,205</td>
<td>2,000</td>
<td>3612</td>
<td>3,000</td>
<td>4,994</td>
<td>El Salv, Guate, Hond = 1,500</td>
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<td>Latin America/Caribbean</td>
<td>2,050</td>
<td>3,000</td>
<td>1,340</td>
<td>5,000</td>
<td>1,500</td>
<td>1,688</td>
<td>1,500</td>
<td>955</td>
<td>3,000</td>
<td>809</td>
<td>*Other refugees = 7,500</td>
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<tr>
<td>Near East/South Asia</td>
<td>24,579</td>
<td>34,000</td>
<td>35,555</td>
<td>40,000</td>
<td>3,500</td>
<td>21,418</td>
<td>17,000</td>
<td>3797</td>
<td>9,000</td>
<td>2,801</td>
<td>*Referred to USRAP; follow to join; Australia/Nauru/PNG; ready to depart</td>
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<tr>
<td>Total</td>
<td>69,920</td>
<td>85,000</td>
<td>84,994</td>
<td>110,000</td>
<td>50,000</td>
<td>53,716</td>
<td>45,000</td>
<td>22,491</td>
<td>30,000</td>
<td>30,000</td>
<td>18,000</td>
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Report to Congress:
https://www.politico.com/f/?id=0000016d-bb51-d0d8-af6d-ff792810002
Data Source: http://www.wrapsnet.org/archives/
National Trends
The US Domestic Response

1980: 207,116 (SE Asians)
1989: 107,070 (Eastern European/Soviet Jews)
1999: 85,285 (Bosnians)
2002: 28,286 (effect of 9/11)
2008: 60,107 (first Bhutanese)
2015: 69,920 (Iraqi, Burmese, Somali)
2016: 84,994 (Congo, Syria, Burma, Iraq, Somalia)
2017: 53,716 (Congo, Iraq, Syria, Somalia, Burma) (travel restrictions {Libya, Syria, Somalia, Yemen, North Korea, Venezuela} and visa suspension {Eritrea, Kyrgyzstan, Burma, Nigeria})
2018: 22,491 (Congo, Burma, Ukraine, Bhutan, Afghanistan)
2019: 30,000 (Congo, Burma, Ukraine, Eritrea, Afghanistan)
2020: 7,905 to date (Congo, Ukraine, Afghanistan, Burma, Moldova) (muslim ban; COVID-19)

Data Source: http://www.wrapsnet.org/archives
Muslim Ban Source: https://muslimadvocates.org/muslim-ban/need-to-know//
Refugees in US
FFY2020 - 3,545 cases; 7,905

October 1, 2019-July 31, 2020
Source:
http://www.wrapsnet.org/admissions-and-arrivals/
Reception & Placement Program
Voluntary Agencies

Church World Service
Episcopal Migration Ministries
Ethiopian Community Development Council
Hebrew Immigrant Aid Society
International Rescue Committee
Lutheran Immigration and Refugee Service
United States Conference of Catholic Bishops
United States Committee for Refugees and Immigrants
World Relief

~267 local affiliates in ~130 communities across the nation
Colorado has 3 affiliates in 3 primary communities (2018)

Local Affiliates Source:
Resettlement Services in Colorado

- Case management
- Employment services, including job development, career counseling, and job club (average wage: $14.36*; 90 day retention: 93%*; arrival to first job: 51* days average)
- Cultural Orientation
- Referral/coordination to health and mental health screening
- ESL
- Job training for health professionals and for new skill areas such as tailoring
- Supports for school aged children and their parents
- Supports for elderly and their caregivers
- Legal services

*as of December 2019
Resettlement Services in Colorado:

- CAREERS Program Videos - Watch an overview of the CAREERS program and CAREERS participants share their personal journeys and academic and employment success in their native language (with English subtitles) and learn about the different ways the CAREERS program supports refugees and immigrants. Feel free to share!
- Refugee and Immigrant Services webpages on EmilyGriffith.edu - features information relevant to refugees, immigrants, and English language learners (not only Emily Griffith students). Information includes:
  - English - Emily Griffith program and classes
  - Education - GED/HSE, Career and Technical Education (CTE), short-term workforce training, apprenticeship, community college, university, admissions, financial aid, and evaluation of foreign education
  - Careers - CAREERS Program, work documents, job search process and tips, networking, getting licensed, and employment laws and rights
  - Resources & Community Partners - links to resources and our partners.
- Email Address (immigrant.services@emilygriffith.edu) - Use for CAREERS referrals and general inquiries about services, support, and Emily Griffith programs for refugees and immigrants.
  - For information specific to English programs use 720-423-4750 or email LearnEnglish@Emily Griffith.edu
Resettlement Services in Colorado

**ENRICHMENT PATHWAY**

CAREERS can help you

- Earn Extra Cash
- Develop a Career Path
- Access Community Resources
- Take English, GED, or Other Training Courses
- Find Pride in Your Work

**OUR MISSION:** To facilitate career pathways for refugees through recognition, training, and education so that refugees find not only self-sufficiency but success in Colorado.

**Explore a Career in Colorado**

A Colorado That Works For All

**ADVANCED PATHWAY**

TO SUCCESS

- Meet Careers Team
- Learn and Assess Job Needs
- Sign Up and Enroll
- Advance Your Career
- Complete Your Plan
- Develop Impact
- Customize Your Journey

**OUR MISSION:** To facilitate career pathways for refugees through recognition, training, and education so that refugees find not only self-sufficiency but success in Colorado.
Refugee Medical Screening
Refugee Medical Screening

- Overseas medical examination
  - Required for all refugees accepted to resettle in the US
  - Conducted by panel physicians appointment by US consul or International Organization of Migration
  - Screening for inadmissible health conditions, and to identify physical and mental health conditions, diseases, and disabilities that require follow-up after US arrival
  - Centers for Disease Control and Prevention - technical instructions

- Domestic medical examination
  - Newly arrived refugees receive a medical screening to:
    - Ensure follow-up of health conditions identified overseas
    - Identify persons with diseases of potential public health importance
    - Identify health conditions that may adversely impact effective resettlement (e.g. job placement, language training, or school attendance)
  - Conducted primarily by FQHCs in Colorado
  - Centers for Disease Control and Prevention - guidelines
Overseas Refugee Medical Screening

Medical Assessment of US-Bound Refugees**

Visa Medical Examination
- 6 months before departure
- All refugees
- Screening for inadmissible health-related conditions

Pre-Departure Medical Screening
- 3 weeks before departure
- Refugees with Class B1 TB*

Fit to Fly Pre-Embarkation Checks
- 24 to 48 hours before departure
- All refugees
- Screening for lice
- Presumptive treatment of intestinal parasites

* Class B1 TB refers to TB fully treated by directly observed therapy, or abnormal chest x-ray with negative sputum smears and cultures, or extrapulmonary TB

**US-bound Bhutanese refugees (slight variation by country)

Overseas Refugee Medical Screening
COVID-19

- Centers for Disease Control and Prevention (CDC) provided the International Organization for Migration (IOM) with specific interim predeparture guidance for identification of US-bound refugees with signs or symptoms of COVID-19
  - Refugees with signs and symptoms of COVID-19 or who test positive for COVID-19 will be held for the CDC-recommended isolation period and referred for medical evaluation before they are cleared to travel
  - Close contacts of confirmed or probable cases (test positive for COVID-19 or who meet CSTE probable case definition) will be quarantined for the CDC-recommended period and observed for signs and symptoms of COVID-19 before they are cleared to travel
  - Predeparture SARS-CoV-2 testing is not routinely available at this time; in a few cases, symptomatic refugees and their close contacts may have access to testing.
- All IOM US points of entry distribute COVID-19 self-monitoring kits (as of 8/10/2020). Kit provided to each arriving case (one per family) and informational leaflet, a digital thermometer, and several alcohol pads.

Overseas Refugee Medical Screening
COVID-19

After Travel for Refugees
• Stay home as much as possible for the first 14 days after arrival.
  o For advice on how to safely meet basic household needs within your local community, see
    CDC’s webpage about running essential errands. {refer to above CDPHE link, too}
• When around others, stay at least 6 feet or 2 meters from other people who are not from
  your household. It is important to do this everywhere, both indoors and outdoors.
• Wear a mask to keep your nose and mouth covered when you are outside of your home.
• Wash your hands often or use hand sanitizer that contains at least 60% alcohol.
• Watch your health: Look for symptoms of COVID-19, and take your temperature if you feel
  sick.
• Avoid being around people at increased risk for severe illness from COVID-19

What To Do If You Get Sick If you get sick with fever, cough, or other symptoms of COVID-19:
• Stay home and take other precautions. Avoid contact with others until it’s safe for you to end
  home isolation.
• You might have COVID-19; most people are able to recover at home without medical care.
• If you have questions, such as the need for an interpreter to talk to a doctor, call your
  resettlement agency case worker. [INSERT HOW TO CONTACT RA]
• Stay in touch with your doctor. If you are worried about your symptoms, call or text a health
  care provider before you go to a doctor’s office or emergency room. [INSERT HOW TO
  CONTACT SCREENING CLINIC] and tell them about your recent travel and your symptoms.
• If you have an emergency warning sign (including trouble breathing), call 911 to get
  emergency medical care immediately.
• If you live in close quarters with others, take additional precautions to protect them.
Domestic Refugee Medical Screening

Domestic medical screening within 90 days of arrival:

- Follow-up of Class A & B health conditions identified overseas (i.e. Latent TB)
- Identify and facilitate timely treatment and control of potential communicable disease of public health importance (i.e. Hep B)
- Identify and provide services to address health conditions that adversely impact effective resettlement (i.e. mental health)

Screening within 30 days = Colorado’s Goal
Domestic Refugee Medical Screening

Domestic Refugee Health Guidelines

- General
- History and Physical
- Hepatitis
- HIV
- Immunizations
- Intestinal Parasites
- Lead Screening
- Mental Health
- Malaria
- Nutrition and Growth
- Sexually Transmitted Infections
- TB

Checklist and Disease-Specific Guidelines for Medical Screening

Full Text of All Domestic Guidelines
Currently 12 guidelines are available.

- General Guidelines
- Guidelines for the History and Physical
- Hepatitis Screening Guidelines
- HIV Infection Screening Guidelines
- Immunizations Guidelines
- Intestinal Parasite Guidelines
- Lead Screening Guidelines
- Malaria Guidelines
- Mental Health Screening Guidelines
- Malaria Guidelines
- Nutrition and Growth Guidelines
- Sexually Transmitted Diseases Guidelines
- Tuberculosis Guidelines

Types of Screening Conducted

- Other
- Hep B
- TB
- Dental Health
- HIV
- Mental Health
- Nutritional
- Syphilis
- Gonorrhea
- Parasites
- Hep C
- Lead
- Chlamydia
- Vision
- Pregnancy
- Reproductive

Total Number Screened (FY 2010 - 2014)
8,970
September 30, 2020

Introduction to Refugee Health and Cultural Competency: The Essentials

Refugees in Colorado - Demographics

Refugee Health - Data

Tips to Improve Cultural Humility / Health Literacy

Resources
Refugees in Colorado

Demographics
Refugees in Colorado - June 1, 2014-May 30, 2019

Arrivals by Immigration Status

- Refugee (7,049) - 72.7%
- Cuban/Haitian (715) - 7.1%
- Asylee (592) - 6.1%
- Other (66) - 0.1%

SIV (1,402) - 14.1%
Refugees in Colorado - June 1, 2014-May 30, 2019
Country of Birth

- over 1000 arrivals (Afghanistan, Burma, Democratic Republic of the Congo, Iraq, Somalia)
- 100 – 999 arrivals (Bhutan, Cuba, Eritrea, Ethiopia, Syria, Ukraine)
- 30 – 99 arrivals (Belarus, El Salvador, Iran, Pakistan, Russia, Sudan, Venezuela)

Plus additional arrivals from 53 other countries
Refugees in Colorado - June 1, 2014-May 30, 2019

Top 10 Refugee Languages
Refugees in Colorado - June 1, 2014-May 30, 2019

Gender

- Male: 52.8%
- Female: 47.2%
Refugees in Colorado - June 1, 2014-May 30, 2019

Age Group at Arrival

- <5 years: 8.70%
- 5-14 years: 13.40%
- 15-18 years: 7.06%
- 19-24 years: 13.90%
- 25-44 years: 18.60%
- 45-64 years: 36.55%
- 65+ years: 13.90%
Refugees in Colorado - June 1, 2014-May 30, 2019
County of Initial Residence
Cultural Humility
Health Literacy
**Tips to Increase Cultural Humility and Responsiveness**

- **Be self-aware**
  - Engage in self-reflection about your values, culture, biases, privilege.
  - Reflect on how your different social identities (e.g. religion, sexuality, generation, acculturation, socioeconomic status, education, ethnicity) influence your worldview.
  - Read, discuss, learn.
    - Engage in reading, dialogues, workshops etc. that help you have a better understanding of your privileges, biases and values.
    - Explore information about other cultures.

- **Be curious!**
  - Show you are willing to learn from others around you.
    - Ask about and respect your patients’ and their families’ preferences, values, cultural traditions, language, and socioeconomic conditions.
    - Don’t assume...

- **Grow**
  - Practicing cultural humility is a process.
  - Continuum of learning throughout life/career.
  - Challenge yourself to work through discomfort and anxiety related to culture.

Reference: [https://focus.psychiatryonline.org/doi/10.1176/appi.focus.20190041](https://focus.psychiatryonline.org/doi/10.1176/appi.focus.20190041)
Tips to Increase Cultural Humility and Responsiveness

- Use an interpreter
- If multiple family members are taking prescription medications, color code the caps
- If medication is taken in morning ask patient where they are at that time and decide a good place to store medication for easier remembering
- Clarify
  - Drawing the times that the medication should be taken (e.g., a sun for morning and a moon for evening)
  - Setting a timer on the patient's phone
  - What does “take as needed” mean?
  - Can you read the prescription label

Source: Brandy Kramer, The Spring Institute, Project Shine; Ana Pavlovic, STRIDE
Tips to Increase Cultural Humility and Responsiveness

● Teach back methodology
  ○ Ask: Tell me how you will take this medicine?
  ○ Ask: In your words, what is this condition/diagnosis?
  ○ Ask: Describe how you will carryout this treatment?
  ○ Ask: Are there any beliefs about this condition/diagnosis/medication people from your community hold?

● Use visuals and demonstrations
  ○ Pictures, videos
  ○ Incorporate culturally-specific items into learning opportunities for patients/clients

● Show up
  ○ Shop at the ethnic markets
  ○ Try local restaurants
  ○ Attend community events

Source: Brandy Kramer, The Spring Institute, Project Shine
Resources
Refugee Health
Multilingual COVID-19 Materials

CDPHE public health guidance and resources - [https://covid19.colorado.gov/guidance-resources](https://covid19.colorado.gov/guidance-resources)

Colorado Center of Excellence in Refugee Health multilingual resources - [https://sites.google.com/state.co.us/refugeecoe/resources/covid-19?authuser=0](https://sites.google.com/state.co.us/refugeecoe/resources/covid-19?authuser=0)

Centers for Disease Control and Prevention - [multi-lingual CDC print resources](https://www.cdc.gov/coronavirus/2019-ncov/index.html)


Resources for deaf and hard of hearing populations - [University of Rochester Medical Center](https://www.urmc.rochester.edu/_nbrp/)

Compiled list of resources - [Switchboard](https://switchboard.columbia.edu)

Videos - [Immigrant and Refugee Center of Northern Colorado](https://www.immigrantcenter.org) and [New American Neighbors](https://www.newamericanneighbors.org)
Multilingual Resources

● STRIDE health orientation documents - health_orientation_documents
● HealthReach - https://healthreach.nlm.nih.gov/ and
● MedLine - https://medlineplus.gov/languages/languages.html and
  https://medlineplus.gov/languages/all_healthtopics.html
Other Resources

- CDC Health Profiles -
  https://www.cdc.gov/immigrantrefugeehealth/profiles/index.html
  - Priority Health Conditions, Background, Population Movements, Healthcare and Conditions Before Arrival, Medical Screening of U.S.-bound Refugees, Post-arrival Medical Screening, Health Information
  - Bhutanese, Burmese, Central American Refugees, Congolese, Iraqi, Somali, Syrian

- Colorado Refugee Services Program website -
  https://www.colorado.gov/pacific/cdhs/about-refugees#Data%20Link

- CDC Domestic Refugee Medical Screening guidelines -

- CDC health literacy -
  https://www.cdc.gov/healthliteracy/developmaterials/visual-communication.html

- Best practices for working with an interpreter -
  https://refugeehealthta.org/access-to-care/language-access/best-practices-communicating-through-an-interpreter/
Refugee Health and Resettlement Resources

Association of Refugee Health Coordinators - refugee health publications and resources - [https://refugeehealthcoordinators.wordpress.com/resources/](https://refugeehealthcoordinators.wordpress.com/resources/)

CARES Listserv - 900+ users post resources, questions, notifications, job postings, publications/articles - [groups.google.com](https://groups.google.com) (search “CARESNetwork” then request to join)

Centers for Disease Control and Prevention - Immigrant and Refugee Health - [https://www.cdc.gov/immigrantrefugeehealth/index.html](https://www.cdc.gov/immigrantrefugeehealth/index.html)

Colorado Centers of Excellence in Refugee Health - [https://www.cdc.gov/immigrantrefugeehealth/centers-of-excellence.html](https://www.cdc.gov/immigrantrefugeehealth/centers-of-excellence.html); [https://sites.google.com/state.co.us/refugeecoe/](https://sites.google.com/state.co.us/refugeecoe/)

Colorado Refugee Connect - learn more about Colorado’s refugee serving network and volunteer opportunities - [https://www.corefugeeconnect.org/](https://www.corefugeeconnect.org/)


Colorado Refugee Services Program website - additional statistics and information pertinent to Colorado resettlement - [https://www.colorado.gov/pacific/cdhs/about-refugees#Reports](https://www.colorado.gov/pacific/cdhs/about-refugees#Reports)

Economic and Fiscal Impact of Refugees in Colorado - impacts of refugee resettlement - [https://drive.google.com/file/d/1F2Wt0NvSei2nIwH-PC7nTr6MPRbqcxm9/view](https://drive.google.com/file/d/1F2Wt0NvSei2nIwH-PC7nTr6MPRbqcxm9/view)


Refugee Health Technical Assistance Center - access to care tools and resources - [https://refugeehealthta.org/access-to-care/](https://refugeehealthta.org/access-to-care/)

Refugee Integration Survey and Evaluation - five year longitudinal survey (refugee integration) - [https://drive.google.com/file/d/1o59Xp9Hw2PGOT-3C3is6pnPPrwtyx0lf/view](https://drive.google.com/file/d/1o59Xp9Hw2PGOT-3C3is6pnPPrwtyx0lf/view)

Refugee Processing Center - Department of State Bureau of Population, Refugees, and Migration reports and statistics - [https://www.wrapsnet.org/](https://www.wrapsnet.org/)

Switchboard - resource hub for refugee employment, education, health and monitoring and evaluation - [https://switchboardta.org/about/](https://switchboardta.org/about/)


U.S. Committee for Refugees and Immigrants - refugee health resources - [https://refugees.org/healthresources](https://refugees.org/healthresources)
CareRef

https://careref.web.health.state.mn.us/

CareRef Clinical Assessment for Refugees

Introduction & Background

CareRef is a tool that guides clinicians through conducting a routine post-arrival medical screening of a newly arrived refugee to the U.S. The output of this tool is based on the current CDC Domestic Refugee Screening Guidelines. CareRef recommends screening tests and other preventive care based on the demographic and geographic factors that contribute to risk. The data used to create this tool are specific to refugee populations coming to the U.S. If the tool is used for other populations, the clinician should be aware that the guidelines may not accurately reflect the needs of non-refugee populations.

Please consult the CDC Domestic Refugee Screening Guidelines for further detailed guidance and information.

Some states have additional state-specific screening recommendations for newly arrived refugees. If you do not know your state's refugee screening guidelines, please contact the Refugee Health Coordinator in your state.

Subscribe to receive CareRef and screening guideline updates.

Start CareRef Tool

This tool is provided by the Minnesota Department of Health and supported by funding from grant NU50CH000459 of the J.S. Centers for Disease Control and Prevention (CDC).

Contact us at careref@state.mn.us or 651-201-5414 if you have any questions or comments.

Minnesota Department of Health
Thank you!

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