HOW THE GUIDELINES WERE DEVELOPED

These guidelines were developed by Board members of the Society of Refugee Healthcare Providers and Research Committee member Dr. Jacob Atem, who represent a range of clinical and academic expertise. The idea for the guidelines evolved from a Society perspective piece written about barriers and considerations for resettled refugees and COVID-19 (manuscript currently under review).

The assessment questions have been field tested with a Society Board member and clinician in Atlanta, Georgia. They are suitable for any providers working with refugees such as clinicians, social workers, and resettlement case managers.

We welcome feedback about the guide and suggestions for additions or edits. Please email sarah@refugeesociety.org.

PATIENT COMMUNICATION

1. Prior to the COVID-19 pandemic, how did you normally communicate with your healthcare provider?

2. Did you use an interpreter to communicate with your healthcare provider?

3. What is your preferred method of communication with healthcare providers? (e.g., email, telephone, text messaging, mailed letter, direct provider interaction)
   a. If text message, mail, email or telephone: Do you have anyone who can interpret (verbal) or translate (non-verbal, i.e., documents) for you if needed? If so, is it a professional interpreter, community member, friend or family member?
   b. If the interpreter was a community member, friend, or family: Have you felt fear or embarrassment when someone other than a professional interpreter was used to discuss health conditions?

4. How do you access information about COVID-19? (e.g., internet, television, newspaper, friends, social group, faith-based group, social media such as WhatsApp, TikTok)
PATIENT UNDERSTANDING OF COVID-19

1. Can you tell me about the symptoms of COVID-19?
2. Can you tell me about some health complications of COVID-19?
3. How do you protect yourself from getting sick with COVID-19?
4. How do you prevent family members and others from getting sick with COVID-19?
5. How would you normally treat [list symptoms that are currently associated with COVID-19]:
   a. Fever?
   b. Dry cough?
   c. Fatigue?
   d. Headache?
   e. Aches & pains?
   f. Sore throat?
   g. Chest pain?
   h. Difficulty breathing or shortness of breath?

FEAR OF STIGMA OR DISCRIMINATION

1. Do you know anyone in your community who has either become sick with COVID-19 or tested positive for COVID-19?
2. How have others in your community acted towards those who have become sick?
3. Would you communicate with someone who was diagnosed with COVID-19? If so, how? When would you resume meeting the person face-to-face?
BARRIERS TO FOLLOWING COVID-19 PREVENTION RECOMMENDATIONS

1. Is there any person in your home who can help with household responsibilities if you were to become sick? [this is primarily asked to persons living with others, such as adults and children].

2. If someone in your house was to get sick with COVID-19, do you have a way to keep a six feet distance from other household members within your house?

3. Are you or anyone else in your household currently working?
   a. If yes:
      i. where are you/they working?
      ii. what information has your/their employer provided?
      iii. what steps has your/their employer taken to keep you and your family safe?
      iv. if you or someone in your household were to become sick with COVID-19, do you think you would be able to miss work until you or your family member feel better and a medical professional said it was safe for you to go back to work?
   b. If no one in the household is currently working, what support are you receiving financially?

4. Do you have access to:
   a. Face masks and gloves?
   b. Soap and/or hand sanitizer?
   c. Household cleaners and disinfectants?
   d. Enough dishware, eating utensils, clothes, towels and bedding for sick and healthy family members?
   e. Essential needs such as a food, medications and basic amenities (e.g., electricity)?
BARRIERS TO HEALTHCARE ACCESS

1. Do you know where to go to receive testing for COVID-19? If yes, how did you find out about the testing site?
2. Do you know where to go to receive healthcare for COVID-19?
3. How would you get to a healthcare facility if you were sick and needed to see a healthcare provider?
4. Can you describe when you would feel you need to call 911? Are you comfortable calling 911?
5. Do you have health insurance that can help support your healthcare needs if you get sick?
6. Is there any reason that would prevent you from seeking care if you become sick?

AVAILABLE SOCIAL SUPPORT

1. Is there someone you can call to support you (and/or your family) if you become sick? If you need to go to the emergency room?
2. Do you think this person can continue to assist you if you were diagnosed with COVID-19?
3. Is there someone you can call if you need assistance with groceries, medications, laundry and/or other essential needs while you are sick?
4. Do you think this person can continue to assist you if you were diagnosed with COVID-19?