

Assessing Afghan Newcomer's Health Needs: A Home Visit Guide

People arriving to the U.S. from Afghanistan may have significant, complex, or chronic medical needs due to war and conflict, forced displacement, poor water and sanitation infrastructure, and lack of access to healthcare and medication. Service providers are vital in helping newly arrived Afghan clients connect to healthcare and navigate the U.S. healthcare system. A structured, individualized health needs assessment can help service providers do this effectively.

This guidance document aims to assist Health Navigators, Community Health Workers, or other service providers in conducting an individualized health needs assessment with Afghan newcomers during a Home Visit to gauge Afghan clients' immediate healthcare needs and their understanding of how to navigate the U.S. healthcare system. The NRC-RIM Individualized Health Needs Assessment template will also prompt service providers to provide immediate health navigation support and/or health navigation training.

Home Visits Decrease Barriers and Build Trust

A Home Visit can be an incredibly effective way to assess health needs and provide vital information.

HOME VISITS ARE HELPFUL IN:

- Reaching people who are unfamiliar with navigating the local transportation system.
- Reaching people who may not otherwise receive services due to age, health, mobility issues, childcare barriers, or lack of transportation.
- Reaching large families, families with young children, or single mothers.
- Delivering services in a comfortable and familiar setting.
- Gaining important insight into the client's circumstance (i.e., living conditions, community hazards, social determinants of health, etc.) that may impact their health.
- Decreasing power differentials, thereby empowering clients to ask questions and advocate for themselves.
- Giving clients a greater sense of control and safety, which is a critical part of trauma-informed service provision.

However, sometimes a Home Visit may not be the best location to conduct a health needs assessment. Before conducting a Home Visit, providers may want to ask themselves:

\lnot Are there any safety risks? If a safety risk is identified (i.e. mental health crises, known violence in the home, etc.
discuss it with your supervisor before proceeding with a Home Visit.

eg What does the client prefer? Ask the client if they feel	comfortable meeting with	n you in their home oi	r prefer to meet
elsewhere.			



- □ What questions will I be asking? Be mindful of who else is in the home if you plan on discussing sensitive health topics including sexual and reproductive healthcare needs. Generally, it is best to privately ask women about contraceptive needs. Conversations about traumatic experiences or the impacts of trauma are best done privately and away from children.
- □ **Are there gender considerations?** For cultural reasons as well as safety considerations, male staff should not meet privately in a home with a single Afghan female or vice versa.

Prepare for the Visit

LOGISTICS

- Arrange the appointment via phone.
 - Try to schedule appointments with women who have school-age children during school hours.
 - Avoid prayer times and lunch hours, especially on Fridays.
 - Ask who will be at home during the visit.
 - Ask if the client needs an interpreter and in what language. Ask if they prefer a male or female interpreter.
 - Ask if the client prefers a male or female staff or has specific gender-matching needs.
 - Confirm the client's address.
 - Schedule transportation such as the agency vehicle or ensure your vehicle has gas in the tank if driving.
 - Make sure you have check-in and check-out procedures so people in the office know where you are such as calling your supervisor before you enter the client's home and after you are off-site.
 - Make sure you have a cell phone that you can take with you in case of emergencies and make sure it is charged.

INTERPRETATION

Arrange for an interpreter if necessary, taking into consideration the client's preferred gender for an interpreter.

REVIEW THE CASE FILE

Review any biodata information or case notes that can assist and guide you during the assessment.

PREPARE PAPERWORK AND FORMS

Prepare all needed paperwork and forms. Complete forms partially before the appointment to avoid redundant questions. If using a tablet, ensure that the documents are easily accessible.

GATHER HEALTH EDUCATION AND EMPOWERMENT RESOURCES

Where possible, provide clients with linguistically accessible and culturally appropriate information in their preferred language, including handouts, videos, audio information, and links to websites. The <u>National Resource Center for Refugees, Immigrants</u>, and <u>Migrants</u> has many client-facing resources in Dari and Pashto that may be helpful to providers.



HEALTH PRECAUTIONS

Ensure staff are fully vaccinated for TB, COVID-19, and other infectious diseases. As appropriate, prepare standard personal protective equipment (PPE) supplies, such as hand sanitizer, face masks, etc.

DISCUSS CONCERNS

Seek input from supervisors or peers before conducting the assessment if you have questions or concerns.

During the Visit

- **Greet the client(s) warmly.** Introduce yourself and the interpreter (if in-person interpretation was secured), and display your ID.
- Ensure the interpreter and the client understand each other. Ask the client if they understand the interpreter or ask the interpreter if they are speaking the same language or dialect.
- Allow time for introductions. Make sure you know the names of all the people in the room and their relation to each other.
- Explain the purpose of the visit and ensure the client understands their rights, including the option to decline to answer any question if they feel uncomfortable.
- Explain confidentiality of the client's responses and if you are a mandated reporter.
- Pay attention to non-verbal communication including signs that someone is uncomfortable, fearful, or is becoming angry or upset. If needed, use de-escalation techniques to help people return to calm. If clients remain escalated or safety risks are observed, leave the home and reschedule the visit for an office location.
- Ask clients to provide you with medical documents or information if the client is unsure of health services they
 have received in the U.S., have health insurance, or have other pending appointments. Clients may hand you a
 collection of their medical documents including insurance cards, medical appointment reminders, service provider
 business cards, printed medical histories, and paperwork. Help your client sort through these documents and
 identify what they are and what is their purpose. If possible, take a folder (waterproof/resealable) for your client
 to place important medical documents in one place one folder per family member.
- Consider the colloquial use of the word "doctor." You may notice the word "doctor" being used interchangeably in reference to any medical staff or health provider that the client has interacted with, including Primary Care Providers (PCP), Nurse Practitioners (NP), Family Doctors, Primary Health Clinic staff, etc.
- Ensure immediate health needs are met. Based on the client's responses, provide any necessary assistance to ensure immediate health needs are addressed including scheduling appointments and providing referrals.
- **Provide healthcare navigation training.** Based on the client's responses, provide instruction and training on how to access healthcare services and/or provide in-language resources for health navigation support.
- Document the client's responses and actions taken during the visit.



Before the Visit Ends

- · Ask the client if they have any questions.
- Provide resources and referrals if appropriate.
- Provide linguistically accessible health education and empowerment information if available and appropriate.
- Share relevant phone numbers, such as emergency contact information or after-hours crisis lines if available.
- Schedule the next session if more time is needed to resolve the client's health concerns and/or health navigation training needs.
- · Make sure the client understands any next steps.
- Thank the client for their time and for inviting you into their home.

After the Visit

- · Document the home visit, while ensuring privacy and confidentiality.
- Ensure all information remains confidential. For paper files, store them in a lockable cabinet. If using electronic
 forms on a tablet, ensure files are password-protected or treated as confidential. Take precautions to protect data
 privacy and security.
- Debrief with a supervisor to prioritize and identify action points for follow-up.
- Identify the need for any further referrals or resources needed.
- Conduct follow-up if appropriate, including sharing and connecting the client with additional resources and providers based on identified health and health navigation needs.

CULTURAL CONSIDERATIONS DURING A HOME VISIT

- Take off your shoes before entering a home.
- Give plenty of time for people to answer the door, as women may need time to wear their hijab and prepare for your arrival.
- Request permission before being seated.
- Allow 10 to 15 minutes for introductions and general pleasantries before shifting to business.



CULTURAL CONSIDERATIONS DURING A HOME VISIT

- If your organization does not allow you to accept food or drink, it's essential to develop polite ways to decline offerings to avoid offending someone. For instance, you can say, "No thank you, I've already had tea/coffee," or "I have my own water bottle," or "I will be having lunch or have already eaten before this meeting." Alternatively, you can reference the organization's policy to clarify that it is not a personal choice but a requirement that staff members must adhere to.
- If you are visiting a family, it is common for male family members to primarily engage with caseworkers or
 outsiders. This is not necessarily indicative of domestic violence but rather a cultural norm. However, finding
 a separate or private space to speak with women confidentially can be advantageous for her to be able to
 disclose her healthcare needs and/or feel comfortable disclosing safety concerns. If needed, consider
 rescheduling the appointment when male family members are not present in the home or schedule an office
 visit with the female client at a convenient time for them and secure transportation.