

Questions and Answers

Syrian Refugee Resettlement

December 2015

1. How many refugees are coming to Saskatchewan? How many are children? Seniors?

Beyond those who have already arrived through private sponsorship arrangements, we anticipate receiving approximately 800 more government-assisted and privately sponsored refugees province-wide in early 2016. Demographic information about those who are coming is limited at this time.

2. Where will they live?

Refugee Settlement Centres are located in Regina, Saskatoon, Moose Jaw and Prince Albert, so the majority of refugees will be in those communities. Some may eventually resettle in smaller communities, and privately-sponsored refugees may be destined for other centres as well.

3. What kinds of services will be provided at Refugee Settlement Centres?

The priorities to be addressed include shelter, basic household needs and assistance in receiving health care. More information is available through local community agencies (Regina/Saskatoon Open Door Societies, Global Gathering and Multicultural Councils) or <http://saskcares.com/> (Saskatchewan Association of Immigrant Settlement and Integration Agencies).

*Information on refugee resettlement in Saskatchewan will be posted at www.Saskatchewan.ca shortly.

4. Will refugees have health insurance coverage after arriving in Canada?

Yes. Refugees will be considered permanent residents of Canada when they arrive. Those coming to Saskatchewan will be eligible for health coverage immediately. They will apply for a Saskatchewan health card, which will cover basic services such as physician visits, hospital care and emergency services.

The Government of Canada's Interim Federal Health Program (IFHP) will cover supplementary services for a period of one year for both government assisted and privately sponsored refugees. These services include prescription drugs (medications listed on the Saskatchewan Formulary), dental care, vision care, psychologist services, assistive devices, and medical supplies and equipment.

More information on the IFHP is at: <http://www.cic.gc.ca/english/refugees/outside/arriving-healthcare.asp>.

5. How long will Syrian refugees be covered under the Interim Federal Health Program?

Supplementary Health and Prescription Drug Coverage through the IFHP will be provided up to one year, starting immediately upon arrival at point of entry.

6. What are the most common health concerns for refugees coming from that part of the world?

Prior to the conflict in Syria, its citizens were relatively healthy overall, with good sanitation, clean water, and an estimated 90 per cent vaccination coverage. Since 2011 Syria's health system has become overstretched, leaving many residents displaced, living in difficult conditions and vulnerable to infectious disease outbreak.

The refugees coming to Canada may have been living in less than ideal conditions; common illnesses can be expected (eg. acute respiratory infections, diarrhea, head lice and skin infestations). However, these refugees will not pose a health risk to Canadians. Countries that have accepted large populations of refugees report very few cases of infectious diseases of concern (such as Tuberculosis).

7. Will refugees be given preferential treatment for health care?

Refugees will be considered permanent residents upon arrival to Canada, so they will receive health services and treatment in the same way as any other Saskatchewan resident.

Our health regions and health providers are committed to providing timely, high quality health care to all residents of the province.

8. What kind of medical evaluation is done before a refugee comes to Canada?

The immigration and medical examination includes:

- History and complete physical exam for all applicants;
- Urinalyses for those five years and older;
- Chest X-Ray for those 11 years and older;
- Syphilis testing (VDRL) for those 15 years and older;
- HIV test for those 15 years and older, or if previously indicated.

Additional tests or reports may also be required, depending on an individual's health status. The refugee medical exam is valid for one year from the date of assessment.

9. Do refugees receive immunizations upon their arrival to Canada?

Yes. When they arrive in Saskatchewan, they will receive immunizations and vaccinations by Regional Public Health Nurses according to the Saskatchewan Immunization Schedule.

10. What happens if a refugee is found to have a communicable disease?

To ensure the health and safety of Canadians and the refugees themselves, appropriate treatment will be completed before coming to Canada. Refugees who arrive with a health condition that requires medical surveillance due to a communicable disease will be followed up by regional public health staff in partnership with care providers.

11. How will you support the mental health of refugees?

Refugees will have access to the same mental health services as all Saskatchewan residents. We will monitor the need for mental health supports for individual refugees over time, as they settle in and get accustomed to their surroundings.

HealthLine 811 provides mental health crisis support, information and connection to services. It also offers translation services in more than 100 languages, including Arabic.

12. Will the federal government cover health care costs, or does the responsibility lie with the province?

The province will provide basic health care coverage; the Interim Federal Health Program will provide supplementary coverage for a period of one year. (See question 4)

Detailed information on the IFHP is at: <http://www.cic.gc.ca/english/refugees/outside/arriving-healthcare.asp>IFHP . Provincial information is available at: <http://www.saskatchewan.ca/residents/health/prescription-drug-plans-and-health-coverage>

13. What is covered specifically by the provincial and federal governments?

Basic provincial coverage includes physician visits, hospital care and emergency services.

Federal (IFHP) coverage includes prescription drugs (medications listed on the Saskatchewan Formulary), dental care, vision care, home care, long term care, psychologist services, assistive devices, and medical supplies and equipment. For more information, visit: <http://www.cic.gc.ca/english/refugees/outside/arriving-healthcare.asp>.

14. Can health providers do anything to prepare for the influx of new residents/patients?

We encourage health providers to register ahead of time with the Interim Federal Health Program, so that they are prepared to provide services to refugees who need supplementary health services covered under the program. This can be done online at: <http://www.cic.gc.ca/english/refugees/outside/arriving-healthcare/practitioners.asp>. More information is at <https://provider.medavie.bluecross.ca/>.

There are short term and longer term opportunities for health providers to get involved in supporting incoming refugees; those who have a Middle Eastern background and speak Arabic are encouraged to contact their local community organizations to get involved.

15. Are health regions involved with Refugee Settlement Centres?

Health region representatives have been involved in local planning discussions in each of the four Saskatchewan cities where Refugee Settlement Centres are located. This is helping to ensure that information is reaching the right people, and that assistance to refugees will be coordinated and timely.

16. Will healthcare professionals be re-located to work at Refugee Settlement Centres?

It is unlikely. However, there are F/P/T agreements that provide a mechanism to move health care providers to address surge capacity issues.

17. Will health regions other than the four that have Refugee Settlement Centres (Regina, Saskatoon, PA and Five Hills) be involved in assisting refugees?

While most Syrian refugees will stay in those four cities, some privately-sponsored refugees may be destined for smaller communities in other health regions. We are keeping all health regions informed of plans and preparations, sharing resources and offering assistance as necessary.

18. How will healthcare professionals be able to communicate with refugee patients?

When health care providers do not have a language in common with refugees, they will be able to access translation services through community organizations (eg. Open Door Society). Health regions do have translation services in place for people who go to emergency rooms and are not comfortable speaking English.

I would also note that HealthLine 811 – our 24-hour health advice line – has access to translation service in more than 100 languages, including Arabic.

19. Will there be enough male and female healthcare providers to meet the needs of refugees, given cultural sensitivities in the refugee population?

Health regions are working with community based organizations to identify both male and female physicians and health care providers who are comfortable dealing with refugee populations and who have a Middle Eastern background and speak Arabic. We encourage those types of providers in particular to step forward and get involved in supporting these refugees through their local community organizations.

20. How will refugees with disabilities be supported?

All refugees will have an assessment of their resettlement needs. The assessment information allows Immigration, Refugees and Citizenship Canada (IRCC) and Service Provider Organization to better prepare and facilitate the settlement of refugees once they are in Canada, and to ensure that appropriate supports are in place.

The assessment focuses on five areas:

- Functional assessment (hearing, vision, speech, cognition, mobility, etc.)
- Special travel requirements (wheelchair, medical escort, etc.)
- Post-arrival service requirements (consultation with a healthcare professional upon arrival, or within a number of weeks, long-term services, etc.)
- Housing and daily activities or assistance requirements (wheelchair access, periodic/permanent home care, etc.)
- Other resettlement needs.

In cases where additional support is required, refugees can receive support from the federal government and a private sponsor for up to 24 months under the federal Joint Assistance Program, depending on the situation. In a few cases, the private sponsors may provide support for up to 36 months. Privacy of the refugee's medical history is protected and not shared without their consent. The assessment form does include diagnostic information.

21. Who can I contact for more information?

If you still have questions not answered by the information available at the links provided, contact the Ministry of Health through your usual channels. Options are below:

Drug Plan & Extended Benefits Branch:

Prescription Drugs – 1-800-667-7581 or local 306-787-3317

Extended Benefits – 1-800-266-0695 or local 306-787-3124

Medical Services Branch – 1-800-667-7523

Health Registries (eHealth Saskatchewan) – 1-800-667-7551

Ministry of Health General Inquiry Line – 1-800-667-7766

Partnerships and Workforce Planning Branch - 306-519-8570