Health Equity for Afghan Refugees (HEAR) Project
Building Sustainable Partnerships in Resettlement Efforts to Advance Health and Well-Being for Refugee Communities

In 2021 an estimated 75,000 Afghan citizens were evacuated to resettle in the United States.¹ Approaching nearly 2 years into resettlement, multiple organizations—including federal, state, and county government agencies; resettlement agencies; and community organizations—continue working to address enduring social and health needs for Afghan refugees. Although they share a common goal of integrating refugees into U.S. communities, organizations face challenges, including lack of time, funding, and capacity to align their efforts effectively. Understanding health equity for Afghan refugees can support integration for future refugee groups and bridge the connection between resettlement and community health.

To better understand the challenges of refugee resettlement and support organizations as they work toward building sustainable partnerships, AIR’s Health Equity for Afghan Refugees (HEAR) project is working with partners at Church World Service and the Muslim Community Center Medical Clinic to help organizations align their resettlement efforts with each other and with the priorities of the Afghan refugee community. The project team uses innovative qualitative research and capacity-building in its development of the HEAR Learning Network—a learning community of 11 resettlement agencies, community organizations, and health care providers that support Afghan refugees as they resettle and integrate in Maryland and Virginia.

The HEAR project team convened the HEAR Learning Network to build capacity among organizations that seek to align their resettlement efforts with those of other organizations working in this space. The HEAR project team applies its research findings to inform the capacity-building efforts of the HEAR Learning Network.

¹ [https://www.brookings.edu/blog/fixgov/2021/09/10/the-evacuation-of-afghan-refugees-is-over-now-what/](https://www.brookings.edu/blog/fixgov/2021/09/10/the-evacuation-of-afghan-refugees-is-over-now-what/)
Using a modified ethnographic approach, the project team is conducting six interviews over 18 months with eight Afghan refugees to learn about their resettlement experience. The team also completed an environmental scan, key informant interviews, and focus groups to better understand the challenges and opportunities facing organizations supporting resettlement as they work to align their efforts and build sustainable partnerships with other organizations working to support refugee resettlement. Coupled with the practical experiences and expertise of HEAR Learning Network participants, this research covering the continuum of refugee needs as they resettle will inform the project’s strategic recommendations for policy makers and practitioners.

This brief describes key insights that inform the project’s HEAR Learning Network design and opportunities to foster sustainable collaboration among organizations supporting resettlement.

**HEAR Project Insights**

To better understand the refugee resettlement landscape, the HEAR project team conducted an environmental scan examining organizations involved in resettlement and policies and programs that affect Afghan refugees. The team also conducted eight key informant interviews with representatives from resettlement agencies, government agencies, and community-based organizations, and two virtual focus groups with 18 representatives from organizations supporting Afghan refugee resettlement to learn more about the challenges and opportunities for sustainable collaboration.

**Resettlement and Health Equity**

Health equity is about striving toward the goal that everyone has a fair and just opportunity to be healthy. For Afghans, resettling into a new country includes many stressors that affect their mental health, such as separation from loved ones left behind in Afghanistan and feeling lonely while learning about a new country and its culture. Further, refugees may face access and language barriers while trying to navigate the complex U.S. health care system, which could mean that many refugees leave chronic health conditions untreated or seek high-cost, emergency care for nonurgent health needs.

Resettlement includes timely access to housing, food, employment, education, and health care services. Access to each of these elements of resettlement also supports positive health outcomes. If health equity is an integral part of resettlement efforts, the refugee resettlement experience may look like:

- A transition that uses a trauma-informed approach to address the social and economic drivers of health and well-being, such as access to stable housing, employment training, and education opportunities
- Having a health care experience that addresses refugees’ concerns (e.g., culturally competent care, trauma-informed care, interpreters who can bridge language barriers, connecting their physical and mental health needs)
- Learning how to navigate the U.S. health care system and avoiding health care with a high-cost burden when appropriate (e.g., going to emergency room versus a primary care doctor)
Unique Resettlement Experience for Afghan Refugees

Resettlement for Afghan refugees is different from the resettlement process for other refugee groups. Under Operation Allies Welcome (OAW),² thousands of Afghan citizens have been evacuated to the United States in response to violence and political unrest in Afghanistan as the U.S. withdrew military troops from the region. One of the largest humanitarian evacuations in recent history, OAW is a coordinated effort across the federal government led by the Department of Homeland Security. Afghan refugees completed processing and paperwork overseas and in the U.S. and were offered temporary housing, medical, and other essential services upon entry into the U.S. onto military bases. Following their arrival, Afghan refugees received relocation support and were connected with a resettlement agency. Cultural orientation for refugees typically happens before arrival in the U.S. and again after arrival. Because it was an emergency humanitarian evacuation, Afghans had minimal preparation before arrival, and in many cases, they received no cultural orientation. An essential piece of the conventional resettlement process, cultural orientation typically covers information about employment, gender roles, transportation, finances, and general information about how to navigate the U.S. communities where refugees are placed. Without this advance preparation, many Afghans were connected with various organizations and community members to learn relevant information when needed, and resettlement agencies were responsible for completing all cultural orientation after arrival.

With support and funding from a temporary federal program—the Afghan Placement and Assistance (APA) program³—nine national refugee resettlement agencies managed the resettlement process for an assigned group of refugees, including coordinating services across the continuum of socioeconomic and health needs such as housing, health care, food, and employment. The number of Afghan arrivals was significantly greater compared with typical resettlement efforts, and their health and social needs vary widely. Afghan refugees granted humanitarian parole have access to Medicaid health insurance and the Supplemental Nutrition Assistance Program under the APA program; however, access to benefits is temporary.

In addition to federal and state government agencies and resettlement agencies, nonprofit and community organizations support Afghan refugees during the resettlement process. Many community organizations, including faith-based organizations, provide critical support for new arrivals. Community organizations lead food and clothing drives, provide cultural orientation and English classes, coordinate transportation, and offer social support and a welcoming community for new arrivals.

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² [https://www.dhs.gov/allieswelcome](https://www.dhs.gov/allieswelcome)
Given the scale of resettlement for Afghan arrivals, their range of social and health needs, and the numerous organizations facilitating and supporting resettlement, successful integration requires strong organizational collaboration and aligned efforts. Sustainable collaboration may help Afghan refugees avoid receiving fragmented health care, gaps in access to social services, and other unmet needs. Ultimately, the long-term health and well-being of Afghan refugees may depend on how effectively organizations can work together to center resettlement efforts on the refugees’ specific needs and priorities.

Challenges and Opportunities for Sustainable Partnership in Afghan Refugee Resettlement

Although partnership among organizations supporting refugee resettlement is not new, sustainable partnerships can be difficult to maintain, especially in emergency situations, with inconsistent funding, and with limited staff capacity for collaboration at each organization. Based on insights from the environmental scan, interviews, and focus groups, we identified challenges and opportunities for long-term partnership in resettlement.

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<th>Challenges: Funding Policies and Staff Burnout</th>
<th>Opportunities: A Shared Understanding of Organizational Goals and Capacities and Aligning Efforts to Address Gaps</th>
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<td>Government funding is tied to the number of refugees resettlement agencies will support in a given year. Because that number fluctuates from year to year, resettlement agencies have inconsistent funds to implement longer term staffing and programming plans. In addition, staff at resettlement agencies, community organizations, and government organizations are stretched thin in many areas as they focus on service provision for their clients (e.g., identifying points of contact at different service providers, making referrals to services and working to follow up, finding culturally and linguistically competent services). Service delivery is the priority, and creating space for building sustainable, long-term partnerships among organizations presents challenges.</td>
<td>A shared understanding of organizations’ contributions and constraints may facilitate long-term partnerships. Organizations can help each other by addressing a need that another cannot. For example, community organizations that are Afghan-led or faith-based can bridge the cultural divide between service providers and the specific communities with which they work. Another opportunity for partnership exists between resettlement agencies, government agencies, and community organizations. Facilitating trusting relationships between these groups can support the exchange of key information related to the resettlement process and provide mutual learning opportunities when considering solutions to address challenges that arise “on the ground.”</td>
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“I have a chronic heart disease and can’t work...since I can’t work, there is no one to help me with housing/rent support. I’m not sure how to apply or where to go. And is there someone that can help me bring my grandchildren’s parents to the U.S.? My grandchildren are in distress without their parents.”

—51-year-old Afghan refugee
Health Equity for Afghan Refugees (HEAR) Learning Network: Partnerships in Practice

The HEAR Learning Network includes 20 participants representing organizational leaders and program staff at 11 organizations supporting resettlement in Maryland and Virginia. HEAR Learning Network participants work together to establish and sustain long-lasting connections and align their efforts to improve the health and well-being of Afghan refugees. Through these partnerships, HEAR Learning Network members hope to address some of the challenges to collaboration while creating sustainable partnerships that can support new arrivals from different countries in the future.

“I think that the commonality…is the passion of the organizations. All of us have the same goal… And I think that if we understand that—despite the funding restrictions—through these organizations and localities and government entities, we can all collaborate and work together. We can focus on what each organization does best, and that is probably most beneficial for the ultimate goal…bringing people together so that you do build a stronger case where you have the appropriate cultural background, language skills, the community partnerships and all those other things that come along with it. So that we are now working together as different organizations.”

—Medical professional at a community organization

Through the HEAR Learning Network, members plan to

- Create and sustain connections across organizations working to support refugee resettlement and integration;
- Learn how to advance health equity for Afghan refugees by including the Afghan community’s voice in efforts to support resettlement and integration while fostering mutual trust and accountability; and
- Generate recommendations for effective, long-term collaboration among organizations supporting resettlement.

### HEAR Learning Network Participants

- American Diversity Group
- Afghan Medical Professionals Association of America (AMPAA)
- Church World Service
- Fresh Start Refugee Center
- HIAS
- Luminus Center for New Americans
- Montgomery County Health and Human Services
- Muslim Association of Virginia
- Muslim Community Center—Medical Clinic
- U.S. Committee for Refugees and Immigrants (USCRI)
- Virginia Refugee Healing
The HEAR Learning Network offers an opportunity to foster sustainable collaboration among organizations supporting resettlement in Maryland and Virginia. Insights from the HEAR project’s qualitative research provides valuable information about refugees’ lived experiences to help network members align their services with Afghan refugees’ needs. With continued engagement and partnership among a diverse group of network members, organizations can support long-term integration and advance health equity for Afghan refugees while aligning to support future refugee groups as they settle in the United States.

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