

## BACKGROUND

Refugees bring with them varied medical conditions including chronic and acute medical issues that require not only expertise in primary care but also various subspecialties.

The KARMA project describes the development of a multidisciplinary team approach to address the complex health issues faced by newly arriving refugees.

## INTRODUCTION

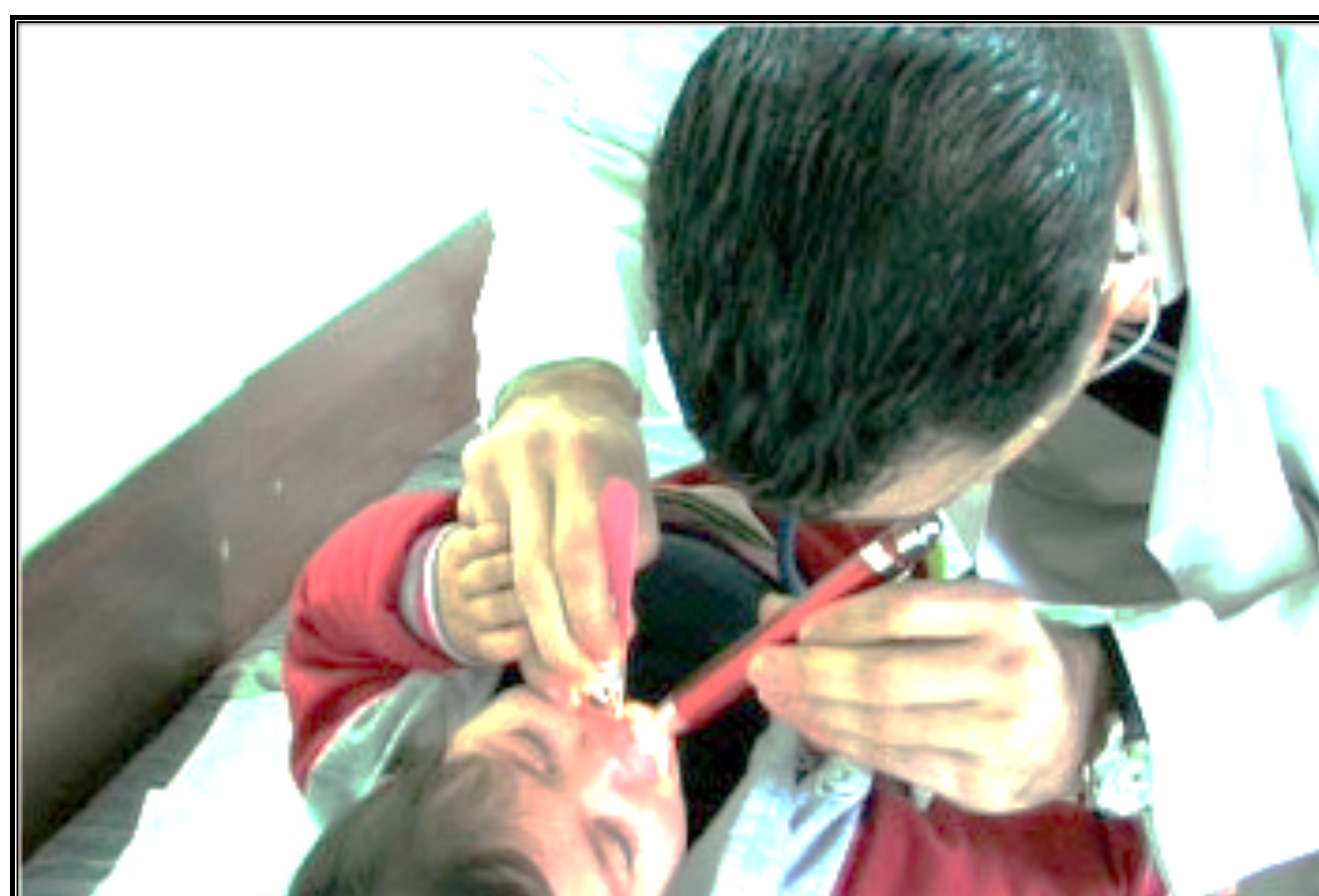
The Kentucky Area Refugee Medical Awareness (KARMA) project began in 2012 in response to the many subspecialty care needs that refugees experience during the resettlement process. Often these specialty needs were identified during initial domestic health screen visits and during subsequent primary care visits. However, on occasion the newly arriving refugee would need subspecialty consultation and care at the time of arriving to Kentucky. As a means of addressing specialty care needs across the entire resettlement continuum, a group of specialists came together to begin to develop a process for the provision of care beyond primary preventive care. These specialists have continued to work with the refugee community in both provision of care but also through early recognition and preventive intervention. The following represents a list of specialties participating in KARMA:

- Endocrinology
- Cardiology
- Pediatrics
- Infectious Diseases
- Gastroenterology
- Pulmonology
- Neurology
- Emergency Psychiatry
- Nephrology



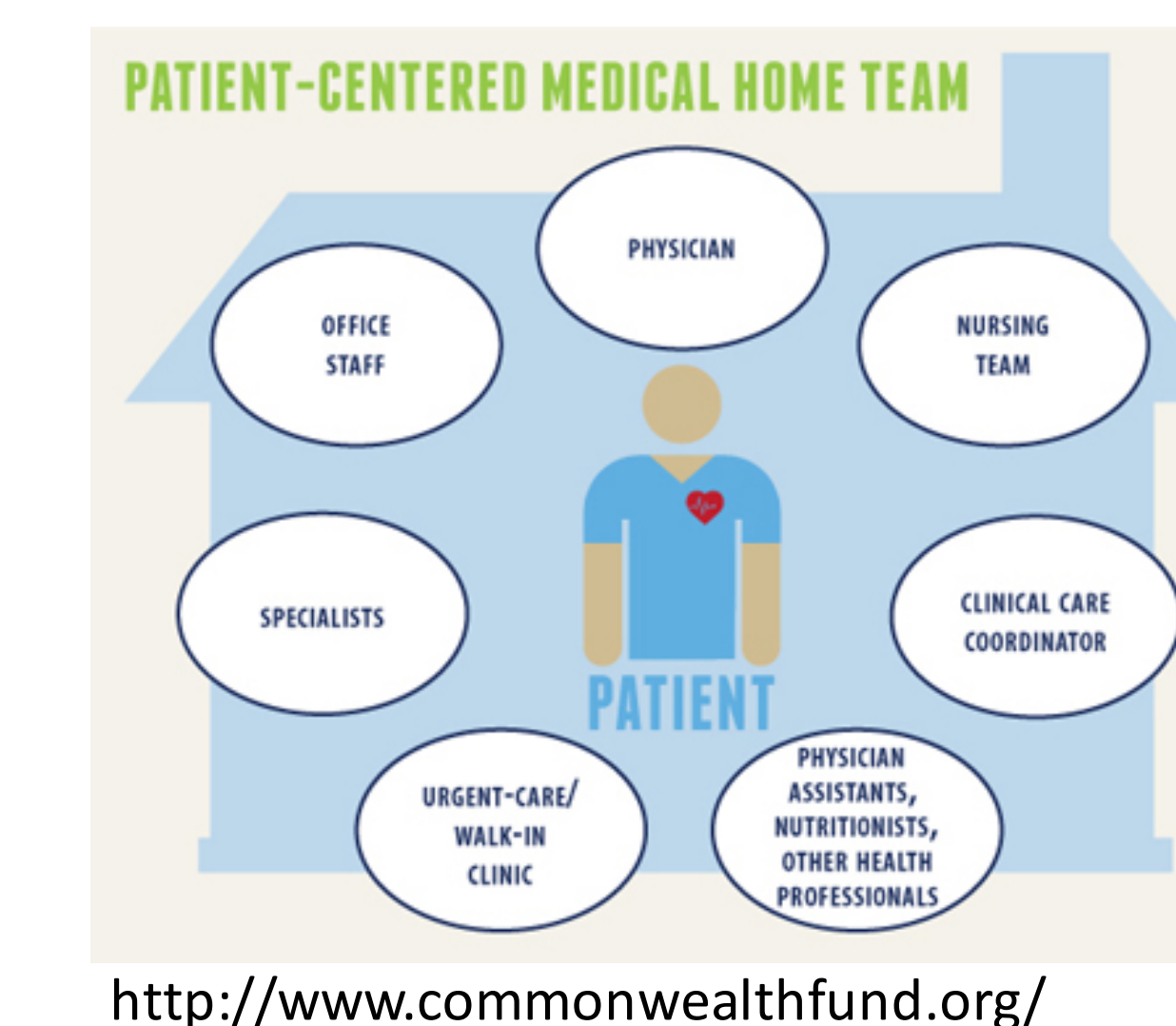
## METHODS

Upon review of the first State of Refugee Health Report in 2013 we gathered together a multidisciplinary group of interested subspecialists from among the University of Louisville faculty. The goal of this group was to identify, then work together to confront, the complex biopsychosocial needs of refugees.



## RESULTS

The collaboration resulted in the development of the Kentucky Area Refugee Medical Awareness (KARMA) consortium. This consortium is composed of specialists who are board-certified in internal medicine, cardiology, nephrology, endocrinology, pediatrics, pulmonary medicine, and infectious diseases. Each of the KARMA members is committed to patient care, education and research in a particular medical condition affecting the local refugee population.



## CONCLUSIONS

KARMA greatly facilitates consultation with University of Louisville health specialists. The capacity of the consortium allows for a seamless collaboration with various subspecialties and enables the refugees to have their medical needs addressed - not only in a holistic manner but also without having to navigate through multiple referral sites.



## REFERENCES

1. Karma Project. <http://globalhealth.center/rhp/karma.php>