

# Community Legal Aid of Worcester: Providing Legal Counsel to Underserved Populations In Western and Central Massachusetts



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## CLA’s Mission

To protect and advance the legal rights of low-income, elderly, and other disenfranchised people in order to secure access to basic needs and to challenge institutional barriers to social and economic justice.

## Medical-Legal Partnerships

These partnerships are designed to bridge the gap between law and medicine as healthcare providers and lawyers work together to identify and rectify social determinants that may negatively impact a patient’s health. A primary goal of this model is to catch both medical and legal issues early in their phases before they escalate and harm patients/clients even more; in other words, medical-legal partnerships hone in on the significance of practicing preventive law and preventive medicine.

## FACM

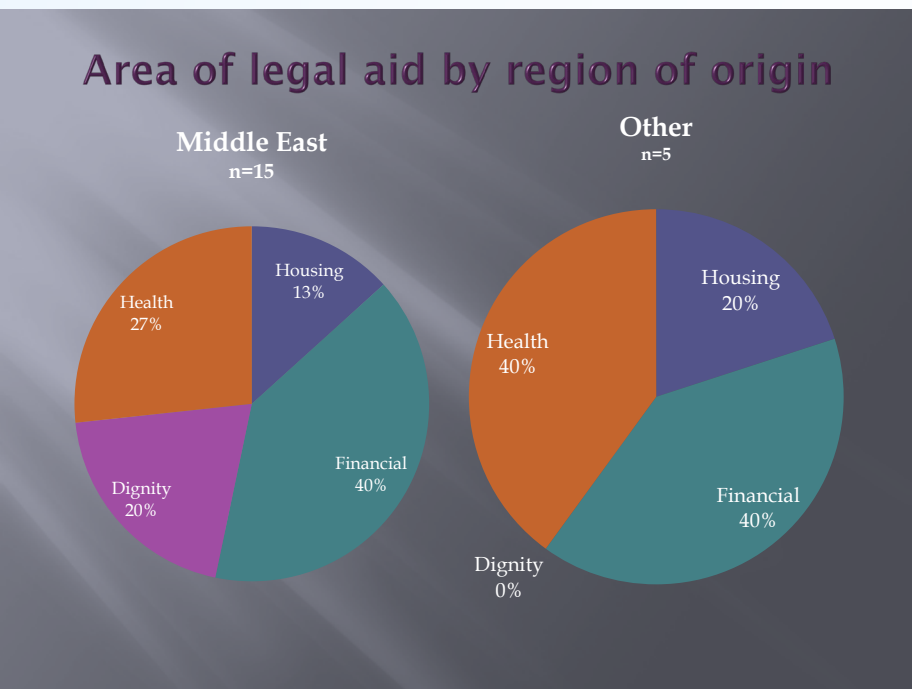
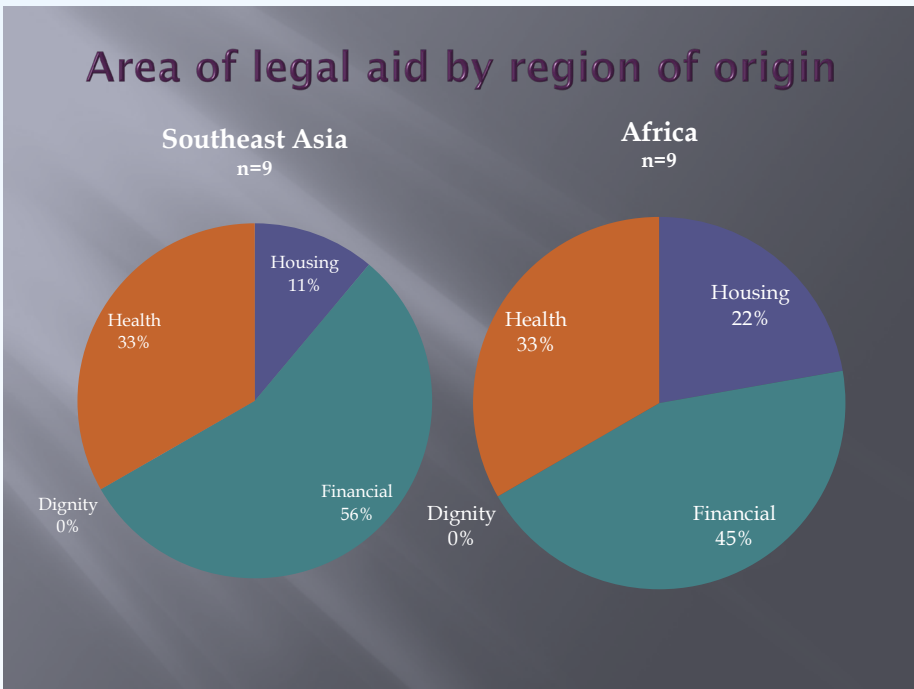
The Family Advocates of Central Massachusetts (FACM) is a medical-legal partnership between Community Legal Aid (CLA) and UMass Medical School, The UMass Memorial Children’s Medical Center, The Edward M. Kennedy Community Health Center, and The Family Health Center.

Legal advocates at CLA train health care providers at these facilities to screen their patients for potential legal issues that could be responsible (at least in part) for their health issues. Patients are then referred to CLA to receive legal advocacy on these matters.



## Refugees in Worcester

- Worcester is the new home to some of the largest populations of refugees resettling in Massachusetts, primarily arriving from Burma, Bhutan, Iraq, various African countries, and other places
- Graphs: Areas of legal aid provided for refugees by CLA based on region of origin**



- Refugees face unique barriers that keep them from accessing healthcare, public benefits, housing, and other basic needs
- Barriers include language, unfamiliarity with healthcare and legal system, fear of asking for help, misled expectations, and access to available resources

## The Provider-Refugee Relationship

- Refugees interact with several professional providers through out their adjustment to Worcester, including refugee case workers, social workers, health professionals, and legal advocates
- Providers also face barriers that prevent them from providing optimal care
- Barriers include language, cultural competence, fear of not knowing how to help, lack of interdisciplinary collaboration, and loss to follow up of care

## Clerkship Goals

- To gain a better understanding of these barriers from both the perspective of providers and refugees
- Through outreach and advocacy to the community and other professional agencies, we hoped to educate refugees and providers alike about the services CLA provides, and also build connections between disciplines in order to provide more comprehensive care to these vulnerable populations.

## Clerkship Experiences

- Presented to other clerkship teams about CLA legal services and the value of medical-legal partnerships
- Met with Fatima Mohamed, the leader of the East African Community Outreach group (EACO) to learn about African refugee struggles, educate about CLA services, and connect Fatima with MCPHS service coordinator to provide more student volunteer services at EACO
- Provided CLA advocacy at Worcester’s annual Food Day



- Met with staff at Lutheran Social Services to learn about refugee resettlement process, as well as challenges the agency faces in caring for refugees
- Attended meeting with community health workers at the Edward M. Kennedy Community Health Center to gain insight on their role in the health center model of care.
- Co-led CLA sponsored training session for Karenni refugees at WRAP, educating about basic benefits including MassHealth insurance, TAFDC, and SNAP benefits

## Discussion

The major aim of this clerkship was to add to the efforts of CLA in evaluating the barriers that refugees living in the Worcester area face, and the effectiveness of the aid that CLA currently offers these populations. Using our field experiences, we’ve learned the value educational training sessions and will continue to develop more. More importantly, we’ve come to appreciate the different qualities and needs of each refugee population, and can cater our outreach and support services accordingly.

Important conversations remain to be explored, especially with resettlement agency case workers regarding the issues they’ve encountered when caring for different refugees. Only by improving our understanding of all the realms of refugee health and social services can CLA modify its current services, trainings, and interdisciplinary partnerships.

## Acknowledgements

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## References

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