New York Clinics Address New York Immigrants' Health Needs

By Julia Ross

For the thousands of Russians and Ukrainians who immigrate to New York City each year, the community of Coney Island offers the comforts of home along with freedom and opportunity. Indeed, Brighton Beach Avenue—a vibrant neighborhood thoroughfare where Cyrillic signs beckon customers to Russian delicatessens and babushki haggle at corner vegetable stands—may well be mistaken for any street in Odessa or Moscow.

Providing primary care to immigrants trying to make their way in a new land can be a challenge, but the physicians and nurses at Allhealth Diagnostic and Treatment Centers—a group of three community-based clinics in Brooklyn and Queens, New York—are committed to making the transition to the American health system as smooth as possible.

Founded three years ago by Pinkas Lebovits, MD, a US-trained dermatologist who immigrated from a town in what is now Slovakia, Allhealth primarily serves low-income immigrants from throughout the NIS and Eastern Europe. According to Gregory Maizous, the clinics’ director of public information, there are about 300,000 immigrants from the former Soviet Union residing in New York, the majority of whom live in the borough of Brooklyn. About 5-6,000 new immigrants from the NIS arrived in the city last year.

With the NIS and Eastern European immigrant community growing at such a rapid pace, Lebovits decided there was a real need for a “culturally-sensitive, fully integrated” model of care, where language would not be a barrier, patients would not feel "lost" and the particular health needs of Russians, Georgians or Kazaks could be addressed by members of the same community. Everyone on staff at Allhealth, from front desk personnel to physicians, is at least bilingual, and many are multilingual. In addition, all patient documentation and literature is available in both Russian and English.

“All of our primary care physicians were trained in the former Soviet Union, so they know how to read the charts patients bring with them, they know how tests were performed, they know about certain drugs,” explained Lebovits, who continues to serve as chief executive officer of Allhealth. “And, perhaps more importantly, they understand what was not done, such as immunizations.”

Allhealth provides a full array of primary care services—from pap smears to prostate screenings to well-baby care—as well as a range of specialized services such as dental care, physical therapy, urology and dermatology. Most patients pay with the help of US government subsidies, through the Medicare or Medicaid programs.

Alex Margulis, MPH, program director for Allhealth, said multiple diagnoses (especially among the geriatric population), lack of cooperation with physicians, lack of compliance with suggested preventive care guidelines and psychosomatic disorders are among the unique problems presented by NIS immigrants. Clinic physicians and nurses must learn to overcome patients’ beliefs, for example, that Russian drugs are preferable because American drugs are “too powerful,” or gently coax an elderly patient who says she is ”too sick to see a doctor.”

Certain diagnoses among new Americans can be traced to particular regions of the former Soviet Union: gastrointestinal and gynecological problems appear more frequently in patients from Central Asia, while Russian immigrants are more likely to have hypertension or heart disease. Alzheimer’s disease is rare in the population, due to the relatively low life expectancy in Russia and other NIS nations, and patients with cancer usually present in the later stages of the disease because they have not sought adequate preventive care in their home country.
A recent study conducted by Allhealth of adult immigrant patients from the former Soviet Union upon their first visit to an Allhealth clinic found that compliance with recommended US preventive guidelines was minimal. Of the males studied, 96 percent had not had a physical exam in the last year, 94 percent had not received their most recent annual tuberculosis test, and no patients born after 1956 had received a measles-mumps-rubella vaccination. Of the females, none had a physical or breast exam in the last year, 61 percent had not had a pap smear in the last year, and 84 percent had not received their most recent annual tuberculosis test.

Margulis estimates that it takes at least two to three years to bring immigrant patients up-to-date with US clinical guidelines.

“Our patients often don’t understand the significance of prevention,” added Lebovits. “They have been neglected their entire life on the medical side. We tell them they need a pap smear, but they are ashamed because this carried a stigma in their community.”

Allhealth clinics are open seven days a week for 12 hours a day, and physicians are available by phone 24 hours a day to consult with patients. In addition, on-site social workers are available to patients free of charge to assist with Medicare or Medicaid paperwork, or to offer advice on the US naturalization process.

“We feel we are a model for any type of clinic or hospital for how to properly serve a big group of people from a different country, no matter if it is Chinese, Russian or Indian,” said Lebovits. “Managed care cannot afford to treat the really sick people, which is what we have here. By providing understanding and the opportunity for people to communicate in their own language, we are able to provide the right system that saves money. People come here instead of the emergency room and fewer [hospital] admissions result.”

On a recent Friday afternoon, a father and son newly arrived from Odessa, Ukraine sat with an Allhealth physician and discussed their ailments in Russian. The son, an engineer, was experiencing lower back pain and the father, a pensioner, needed to control his hypertension. From all indications, the immigrant community in New York has embraced Allhealth; about 2,000 patients visit each of the three clinics every month. Referring to the class of Soviet medical services formerly reserved for high Communist party officials, Maizous said Russian patients have been heard to remark upon their first clinic visit, “This is just like the Fourth Department of Medicine, but even better because it is American.”