

Caring for Children in Immigrant Families

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Disclosure

- I have no relevant financial relationships with the manufacturers(s) of any commercial products(s) and/or provider of commercial services discussed in this CME activity
- I do not intend to discuss an unapproved/investigative use of a commercial product/device in my presentation.

Objectives

- ▶ Describe definitions of common terms to enable clear communication among all immigrant and refugee service providers
- ▶ Identify and understand how to use national and state specific resources for immigrant child health
- ▶ Demonstrate opportunities for advocacy as it relates to children in immigrant families

Garrison Keillor July 4, 1998 Newsweek

“Heroes, all of them – at least they’re my heroes, especially the immigrants, especially the refugees. Everyone makes fun of New York cabdrivers who can’t speak English: they’re heroes. To give up your country is the hardest thing a person can do: to leave the old familiar places and ship out over the edge of the world to America and learn everything over again different than you learned as a child, learn the language that you will never be so smart or funny in as your true language.

It takes years to start to feel semi-normal. And yet people still come – Russia, Vietnam and Cambodia and Laos, Ethiopia, Iran, Haiti, Korea, Cuba, Chile, and they come on behalf of their children, and they come for freedom. Not for our land (Russia is as beautiful), not for our culture (they have their own, thank you), not for our system of government (they don't even know about it, may not even agree with it), but for freedom. They are heroes who make an adventure on our behalf, showing by their struggle how precious beyond words freedom is, and if we knew their stories, we could not keep back the tears.”

Definitions

Immigrant

- A person who comes to live permanently in a foreign country
- An alien admitted to the United States as a lawful permanent resident

(Department of Homeland Security, 2017)

Definitions

Alien

- Any person not a citizen or national of the United States

Lawful Permanent Resident

- Non-citizens who are lawfully authorized to live permanently within the United States, aka “green card holders”

(Department of Homeland Security, 2017)

Definitions

Lawful Permanent Residents are able to:

- accept an offer of employment without special restrictions
- own property
- receive financial assistance at public colleges and universities
- join the Armed Forces.

(Department of Homeland Security, 2017)

Definitions

Refugee

- Someone who is unwilling or unable to return to their country due to a “well-founded fear of persecution for reasons of race, religion, nationality, membership of a particular social group or political opinion”

(United Nations High Commission on Refugees 1951)

Definitions

Asylee

- Alien found at foreign port who is unwilling or unable to return to their home country for fear of persecution based on the alien's race, religion, nationality, membership in a particular social group, or political opinion

Definitions

Secondary Migrant

- Refugee that relocates during their first eight months in the country

Internally Displaced Person

- Persons who have fled their home but have not crossed an international border

Definitions

- ▶ Victim of Human Trafficking
- ▶ <https://www.dhs.gov/blue-campaign/what-human-trafficking>
- ▶ To report suspected Human Trafficking: 1 – 866–347–2423

Definitions

- Resettlement Agency
 - Voluntary agencies that work with Office of Refugee Resettlement (ORR)
 - Assist with refugee job placement and integration into the U.S.
- Refugees are eligible to receive ORR benefits and services from the first day they arrive in the U.S.

Refugee Benefits

- Finding and furnishing apartment
- Mastering public transportation
- Enrolling children in school
- Finding a job and a doctor
- Refugees are expected to be self sufficient within a year

Immigration Status and Public Benefits

(Immigrant Health Toolkit 2017)

Immigration Status and Public Benefits

Immigrant Status	Medicaid ¹	CHIP ²	ACA Subsidies
Pregnant Women	In some states, may be eligible for prenatal care regardless of immigration status ³	In some states, may be eligible for prenatal care regardless of immigration status ⁴	Not applicable
U.S. Citizen Children with undocumented parent(s)	Eligible	Eligible	Eligible
Lawful Permanent Resident (under age 18)	Eligible after 5 years of legal residency in the U.S.; states have the option to waive the 5 year ban	Eligible after 5 years of legal residency in the U.S.; states have the option to waive the 5 year ban	Eligible
Lawful Permanent Resident (age 18 and over)	Eligible after 5 years of legal residency in the U.S.; states have the option to waive the 5 year ban	Eligible after 5 years of legal residency in the U.S.; states have the option to waive the 5 year ban	Eligible
Refugees, Asylees, Victims of Trafficking and other humanitarian grounds	Eligible	Eligible	Eligible
Members of the military and veterans (and their spouses and children)	Eligible	Eligible	Eligible
Unauthorized Immigrants (including children and pregnant women)	Eligible for Emergency Medicaid Only	Not Eligible	Not Eligible (barred from purchasing coverage on their own in the Health Insurance Exchange)
Temporary Protected Status (TPS)	Not Eligible	Not Eligible	Not Eligible

Immigration Status and Public Benefits

Overview of public benefits options for immigrant children and families.⁷

Immigrant Status	SNAP ⁸	TANF	Non-cash benefits under TANF such as subsidized child care or transit subsidies ⁹	Public Housing ¹⁰
Lawful Permanent Resident (under age 18)	Eligible with no waiting period	Eligible after 5 years of legal residency in the U.S.; states have the option to waive the 5 year ban	Eligible after 5 years of legal residency in the U.S.; states have the option to waive the 5 year ban	Eligible
Lawful Permanent Resident (age 18 and over)	Eligible after 5 years of legal residency in the U.S.; states have the option to waive the 5 year ban	Eligible after 5 years of legal residency in the U.S.; states have the option to waive the 5 year ban	Eligible after 5 years of legal residency in the U.S.; states have the option to waive the 5 year ban	Eligible
Refugees, Asylees, Victims of Trafficking, other humanitarian grounds	Eligible with no waiting period	Eligible with no waiting period	Eligible with no waiting period	Eligible
Members of the military and veterans (and their spouses and children)	Eligible with no waiting period	Eligible with no waiting period	Eligible with no waiting period	Eligible with no waiting period
Unauthorized immigrants (including children and pregnant women)	Not Eligible	Not Eligible	Not Eligible	May live in residence with eligible family member
Temporary Protected Status (TPS)	Not Eligible	Not Eligible	Not Eligible	Not Eligible

⁷ Fortuny & Chaudry, supra note 10.

⁸ Benefits not subject to "public charge" consideration

⁹ Id.

¹⁰ Id.

Outside of Kansas

- Office of Refugee Resettlement
- <http://www.acf.hhs.gov/programs/orr/state-programs-annual-overview>
- Every state has a refugee health coordinator
- System for maintaining records of screening

Statistics

- Nearly 1 / 4 of refugees worldwide are children
- 17.9 million U.S. children under the age of 18 have foreign-born parents
- 1 in 4 children younger than age 17 have immigrant parents

Statistics

- 60% of young children of immigrants have at least one English Language Learner (ELL) parent
- 81% of children of Mexican origin
- 77% of children of Burmese origin

(First Focus Foundation for Child Development 2011)

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Poverty

- 54% of children of immigrants live in low-income families
- 71% of children of Mexican origin
- 86% of children of Somalian origin
- 52% of children of Burmese origin

(National Center for Children in Poverty 2014)

Case One

8 year old and 13 year old siblings from Honduras present to your office after being referred by the local health department for a school physical. They are uninsured, only speak Spanish, and don't have any medical records. What is your first step?

Comprehensive history and physical examination

- Immigration information (e.g. country of origin, country of transit, refugee camp history, time residing in the United States)
- Birth history (e.g. home birth, prenatal lab records)
- History of overseas blood transfusions, surgeries, female genital cutting, other traditional cutting, tattoos*
- Nutritional history--Foods available overseas/while in-transit, risks for micronutrient deficiencies
- Environmental exposure risks (e.g. lead, second-hand smoke)
- Treatment prior to arrival (e.g. pre-departure therapy for parasitic infections for refugees, overseas medications/home remedies, treatment while in ORR** custody for unaccompanied minors)
- Prior medical records including labs and immunizations

(Immigrant Health Toolkit AAP 2015 adapted with permission)

Comprehensive history and physical examination

- Menarche/LMP for females; pubertal onset for males and females
- Family medical history (e.g. maternal/paternal HIV, Hep B, C, TB)
- Social history (e.g. family structure, status of parents if not in the home, legal guardian/primary care taker, other individuals living in the household, social support)
- Educational assessment (e.g. last year of school completed, literacy level of patient/parents as applicable, potential learning difficulty and/or need for special education)
- Substance use—prior and current***
- Sexual history—consensual/non-consensual
- History of trauma or abuse

(Immigrant Health Toolkit AAP 2015 adapted with permission)

Comprehensive history and physical examination

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 - Substance use—prior and current***
 - Sexual history—consensual/non-consensual
 - History of trauma or abuse
- Developmental Assessment
- Developmental screening tools+ with multiple available languages, such as the ASQ3, M-CHAT R16, PEDS19, and/or SWYC25

(Immigrant Health Toolkit AAP 2015 adapted with permission)

Comprehensive history and physical examination

- Psychosocial Assessment
- Signs/symptoms of PTSD, depression, anxiety
 - Psychosocial screening tools+ such as the PHQ-920, PSC21, or RHS-1523 (> 14 years)
- Complete Physical Examination/
Measurements
- Growth evaluation#
 - Screening for female genital cutting (FGC) in at-risk populations: routine external genital examination for all females##
 - Complete skin evaluation (e.g. scarification, tattoos)
 - Pubertal development for males/females
 - Dental evaluation
 - Blood pressure evaluation (≥ 3 years or risk factors)
 - Vision screen (≥ 3 years)
 - Hearing screen (Newborn, ≥ 4 years)

*Possible risk factors for Hepatitis C11

**QRR—Office of Refugee Resettlement (<http://www.acf.hhs.gov/programs/orr/programs/ucs>)17

***Tobacco, marijuana, alcohol, opium/heroin, betel nut24, khat28, other

+Validation of these tools for use in languages other than the English language varies by tool. Be sure that translated materials have been translated using internationally accepted translation methodology.

#Use WHO growth charts for infants 0-2 years.

##Children and adolescents who have not had a genital exam may find this experience less upsetting if deferred until a future encounter if follow-up is ensured.

(Immigrant Health Toolkit AAP 2015 adapted with permission)

Tiered^a laboratory screening/parasite treatment options for most immigrant children originating from resource-limited settings or from low socioeconomic circumstances

- 1. Tuberculosis testing-- IGRA (TST if <5 years old)^b
 - 2. Cbc/Diff^c
 - 3. Lead^d—Children 6mo-16 years
 - 4. Hep B sAg^e
 - 5. Intestinal Parasite Evaluation (NB: for refugees, may omit if received pre-departure treatment per CDC guidelines)
 - Stool O & P >24 hours apart x 3^f --OR-- presumptive treatment with Albendazole AND
 - Strongyloides IgGg --OR-- Presumptive treatment with Ivermectin^g
 - 6. HIV^h
 - 7. Syphilis EIA, reflex RPR if positiveⁱ
- a. Consider laboratory tiering in this order when patients or health care facilities have no access to discounted financial coverage programs
- b. Interferon gamma release assay (IGRA), tuberculin skin test (TST). Screen regardless of history of BCG vaccine. If IGRA unavailable, may use TST at any age. Repeat TB screening in 6 months. NB: Repeat if chronic disease, malnutrition once medical issues managed, given that anergy may give a false negative result.
- c. Screen for anemia, eosinophilia (NB: absolute eosinophilia >400 warrants further work-up).
- d. Repeat in 3-6 months in children 6 mo-6 years.
- e. If never screened for infection, screen even if documentation of complete hepatitis B vaccine series. Vertical and horizontal transmission possible^(6,11). Greater number increases sensitivity of test—most experts recommend 2 or 3 samples.
- f. Consider presumptive treatment with ivermectin without serology if >15 kg, unless from [Loa loa endemic countries](#).
- g. If > 1 year old and no history of seizures or other signs/symptoms of neurocysticercosis⁸.
- h. If prenatal lab results or recent maternal results available with negative screens and no risk for horizontal transmission, may omit.
- i. If prenatal lab results or recent maternal results available with negative screens and no risk for horizontal transmission, may omit.

Case Two

Three year old girl from Africa presents for well child check. Family moved from Florida last month, and records are unavailable. The child speaks no words. What is your first step?

Case Two

Which of the following is true?

- A. It is normal for a child in a bilingual home to have delayed speech.
- B. You should avoid screening with MCHAT-R, since it has not been validated in the patient's language.
- C. This child needs referral for hearing screen.
- D. Wait to make referrals and have the child follow up in 6 months, since the family has so much to manage as new refugees.

Case Three

Maria is a 17 year old girl originally from Mexico who has been your patient for the past eight years presents for a sports physical. During HEADSS screening she is noted to have developed difficulty sleeping and dropping grades.

Case Three

- Maria lives in a mixed status family. Maria and her parents are undocumented. Her younger siblings are US citizens.
- With her mother out of the room, Maria admits she doesn't want to go to school for fear her parents will be deported while she is at school.

Case Three

What is the most appropriate advice to give to Maria?

- A. ICE can't deport her parents, because it is against the law to separate parents from their US citizen children.
- B. Maria's parents should assign power of attorney to a caregiver for her younger siblings.
- C. Advise her family to seek the advice of an attorney.
- D. Maria doesn't need to worry about being deported, since she was brought to the US as a child.

Case Three

When Maria's mom returns to the room, she asks you to write a letter in support of her remaining in the country. What should you do?

Legal Resources

- ▶ [AAP Immigrant Health Toolkit/Legal Resources](#)

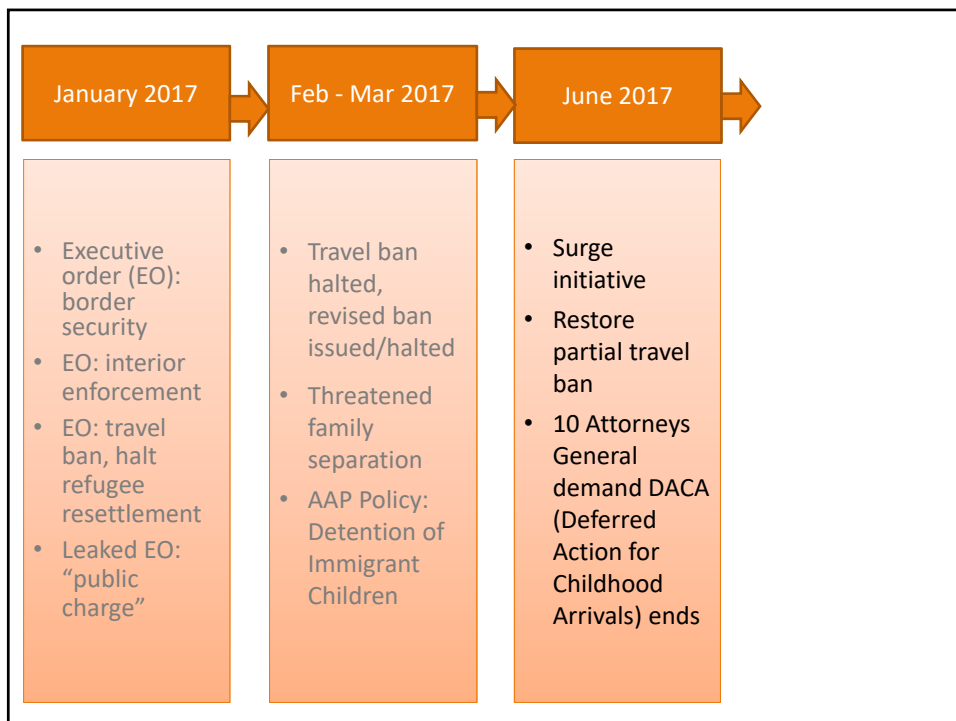
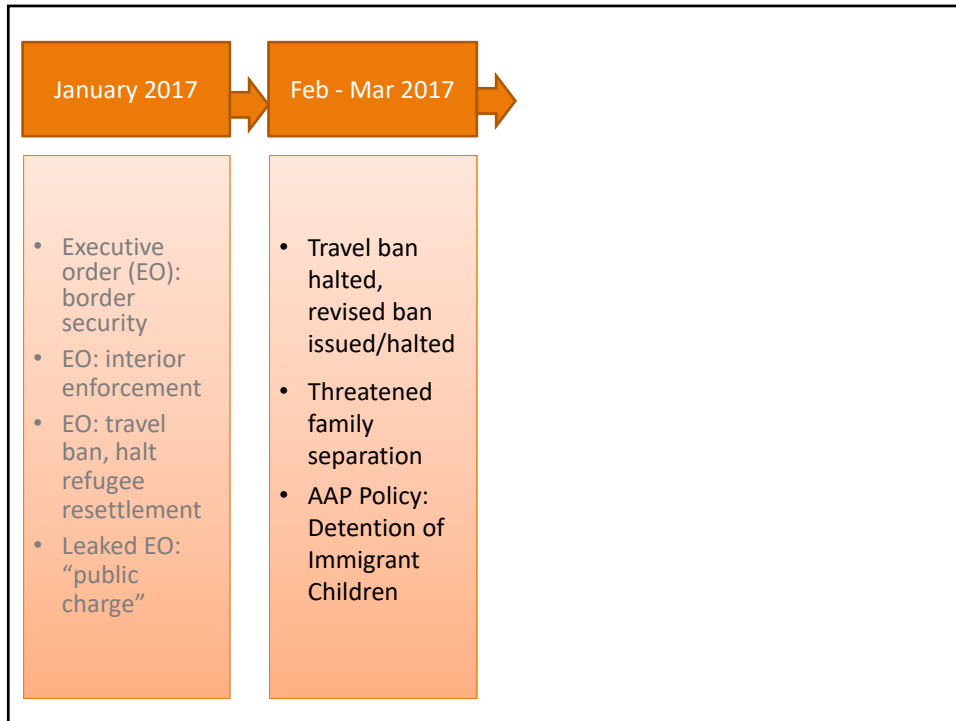
Intersection of Politics and Healthcare

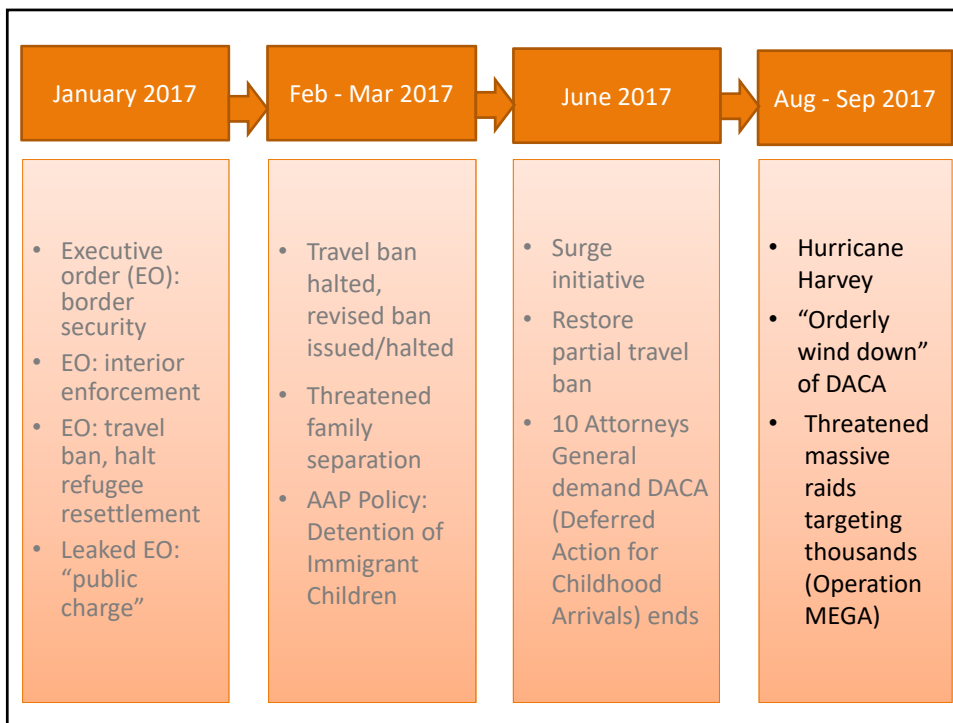
- Executive orders on immigration
- Update on DACA
- Refugee orders
- AAP statements on immigrant and refugee health
- (Slides 38 to 42 courtesy of Julie Linton)

January 2017



- Executive order (EO): border security
- EO: interior enforcement
- EO: travel ban, halt refugee resettlement
- Leaked EO: "public charge"





American Academy of Pediatrics Response

Protecting Immigrant Children (January 2017)

Revised Immigrant and Refugee Travel Ban (March 2017)

Opposing Separation of Mothers and Children at the Border (March 2017)

Opposing President Trump's Decision to End DACA (September 2017)

Slide Credit: Tamar Magarik Haro, Madeline Curtis

Advocacy

- “the act or process of supporting a cause or proposal” (Merriam Webster)
- Stay informed
 - AAP Department of Federal Affairs
<https://federaladvocacy.aap.org/home?6>
- Call your senators and representatives

Advocacy

- Join Council on Community Pediatrics Section on Immigrant Health
- Speak to your friends and neighbors
- Give your time and/or money to an organization that supports immigrants and refugees
- Apply for a CATCH grant

Advocacy

Become a #tweetiatrician

- Sample tweets provided by AAP Council on Communications and Media
- Handles for all U.S. Senators:
<https://twitter.com/cspan/lists/senators/members>
- Handles for all U.S. Representatives:
<https://twitter.com/cspan/lists/u-s-representatives>



References

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