Immigrant and Refugee Health

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Give me your tired, your poor,
Your huddled masses yearning to breathe free,
The wretched refuse of your teeming shore.
Send these, the homeless, tempest-tost to me,
I lift my lamp beside the golden door!

― Emma Lazarus

Learning Objectives:
1. Analyze the current scope and trends in child immigration.
2. Perform essential components of a history and physical for children with immigrant or refugee status (including utilization of trauma-informed care).
3. Identify unique considerations for providing a medical home for immigrants and refugees.
4. Describe the interplay between culture and health, including reasons for the use of alternative or traditional medicine, atypical therapies, and delays in seeking care.

Primary Reference:

Editor’s Note: More extensive discussion on topics pertinent to immigrant and refugee health (such as tuberculosis screening, language support services, lead poisoning, and toxic stress) is provided in dedicated chapters elsewhere in the curriculum.

CASE ONE:

Eduardo is a 7-year-old child presenting to your office for an Emergency Department (ED) follow-up and initial visit. Through an interpreter, you learn that he was born in Guatemala; he and his family recently moved to the United States. His mother took him to the ED two days ago for an asthma attack, at which point they were referred to your office to establish care.


2. List components of a comprehensive history and physical examination of a newly-arrived immigrant child.
3. What medical work-up is necessary? Where can you find resources to support this work up?

CASE continued:

His asthma is better, but Eduardo’s mother mentions that he has suffered from empacho (constipation and abdominal pain) for a few years. In Guatemala she gave him an herbal treatment and she found this at a local grocery store a few days ago. Her family also tried a traditional remedy which involves vigorously rubbing and pinching the skin on his back. She asks you for your medical opinion on these treatment options.

4. How do you respond to the family’s questions regarding cultural practices? What anticipatory guidance can you provide to help them transition to life in the United States?

CASE TWO:

Your next patient is Elodie, a 14-year-old adolescent whose family was recently relocated into your community through a refugee resettlement program. Her family fled the violence and conflict in the Democratic Republic of Congo. Elodie’s family spent 15 years in a refugee camp in Uganda prior to arriving and she is now here to establish care prior to starting school.

6. How might your evaluation and work-up differ from your previous patient who was a non-refugee immigrant?

CASE continued:

During confidential time with Elodie, she mentions that she was very sad to leave her friends behind and is quite anxious to start school in this new country having not attended school regularly in the camp in Uganda. She worries that her father will not be able to find work in the US as he does not speak English.

7. What elements of mental health care may arise in your initial and ongoing care for Elodie? What anticipatory guidance can you provide to help them transition to life in the United States?

CASE continued:

As you are wrapping up your session, you reach out to the social worker to discuss legal and insurance issues that arose during your visits with the families of Eduardo and Elodie.

8. What barriers to access are pertinent to the health-seeking behaviors of immigrant and refugee children?
Additional References:

Resources:
4. Guidance from CDC on revaccination and serologic testing. www.cdc.gov/mmwr/preview/mmwrhtml/rr5515a1.htm#tab12
8. University of Washington Medical Center “Culture Clues”, tips sheets for clinicians to increase awareness about concepts and preferences of patients from diverse cultures. http://depts.washington.edu/pfes/CultureClues.htm
10. CDC Refugee Health Profiles, health and cultural information about specific refugee groups resettling in the U.S. [https://www.cdc.gov/immigrantrefugeehealth/profiles](https://www.cdc.gov/immigrantrefugeehealth/profiles)
11. Cultural Orientation Resource Center, video and print resources regarding new refugee groups. [http://www.culturalorientation.net](http://www.culturalorientation.net)
12. CDC information on Lead containing products. [https://www.cdc.gov/nceh/lead/tips/sources.htm](https://www.cdc.gov/nceh/lead/tips/sources.htm)
13. NYC DPH Lead Containing products list. [https://www1.nyc.gov/site/doh/health/health-topics/lead-poisoning-lead-remedies.page](https://www1.nyc.gov/site/doh/health/health-topics/lead-poisoning-lead-remedies.page)
14. “CareRef” clinical assessment tool for refugees. [https://careref.web.health.state.mn.us/](https://careref.web.health.state.mn.us/)
15. The National Immigrant Law Center, dedicated to defending and advancing the rights of immigrants with low income. [www.nilc.org](http://www.nilc.org)