



# Primary care of the newly immigrated child

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**Immigrant children should be evaluated by a health care provider as soon as they arrive in the United States.** Besides the normal and expected health care necessities of all children, there are special considerations for children entering our country, particularly those coming from developing or war-torn countries. The following provides some initial guidance, references and resources for health care providers.

## NUTRITION AND GROWTH

**Nutrition and growth in immigrant children are affected by many things including:**

- Country of origin
- Access to food and health care
- Food insecurities
- Language and cultural barriers
- Presence of infectious diseases
- Vitamin/nutritional deficiencies

**Nutritional assessment as recommended by the CDC includes:**

- History and physical
  - Dietary history
  - Physical exam including weight, height/length, head circumference, BMI
  - Assessment of malnutrition and overnutrition
- Laboratory testing
  - CBC
  - Population-specific labs (i.e. vit B12 deficiency in those lacking access to meats)

- Age determination
  - May be difficult due to family and/or child not knowing age or DOB
  - Bone age evaluation typically used to determine age, but may not be accurate in states of malnutrition

**Common vitamin/nutritional deficiencies in immigrant children:**

- Iron
- Vitamin A
- Vitamin D
- Zinc
- B12
- Iodine

**Growth charts:**

- The CDC recommends using the WHO growth charts, which can be found at <http://www.who.int/childgrowth/en/>
- Catch-up growth can be delayed due to several barriers as mentioned above

## MENTAL HEALTH AND DEVELOPMENTAL NEEDS

**Mental health issues in pediatric immigrants are very individualized and depend upon:**

- Countries of origin
- Highest risk areas
  - disrupted health care systems
  - conflict zones
  - under-resourced
- Status entering country and reasons for seeking entrance
  - Immigrant: individuals or families who voluntarily leave their countries to enter U.S.
  - Refugee: individuals and families in danger or displaced from home countries because of civil, political or social unrest
  - Asylum-seeker: individuals or families already in the U.S. and seeking status as asylum-seeker through government embassies
- Accompanied/unaccompanied

- Support upon arrival
  - Family members already here
  - Defined place to go to
  - Resources (financial, education, health, etc.)

**Specific mental health issues:**

- Isolation
  - Family/community/country/culture
  - Language
- Depression/anxiety
  - Stress/poverty
  - Resettlement
  - Food security
  - Living situation
  - Resources/employment
- Exposure to violence/PTSD
  - Home country/during journey
  - Domestic violence and neighborhood in U.S.
  - Exploitation/abuse

## MENTAL HEALTH AND DEVELOPMENTAL NEEDS – continued

### Available tools for behavioral and mental health concerns

- Pediatric Symptom Checklist – long and short versions, bilingual, excellent for general screening (Bright Futures)
- Center for Epidemiological Studies (CES-D) and Center for Epidemiological Studies (CES-DC) for depression (Bright Futures)
- CRAFFT – specific for substance abuse (Bright Futures)
- SCARED - specific for anxiety (not available from Bright Futures)

### Developmental assessment

- Done routinely as recommended by AAP 2006 guidelines - language development is expected

to be the same for children in monolingual families as well as bilingual families

- Multilingual tools available
- Refer as soon as developmental concerns arise

### Resources

- COUNCIL ON COMMUNITY PEDIATRICS. (2013). Providing care for immigrant, migrant and border children. Pediatrics, doi:10.1542/peds.2013-1099
- <http://www.aap.org/en-us/advocacy-and-policy/federal-advocacy/Pages/ImmigrationReform.aspx>
- <http://www.nctsn.org/content/working-unaccompanied-and-immigrant-minors>

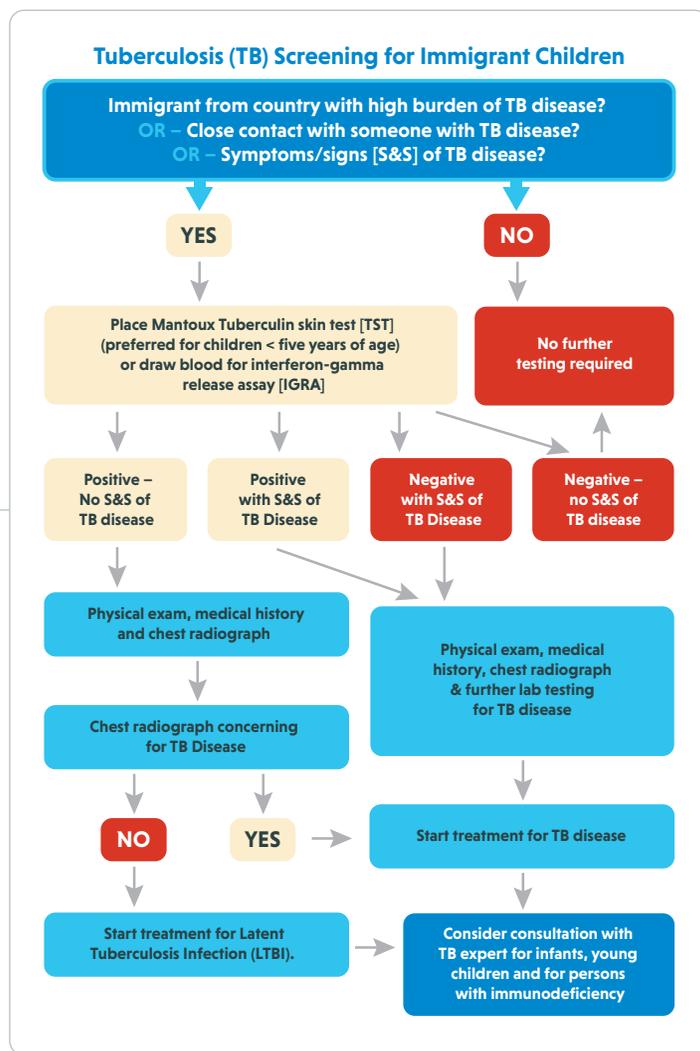
## IMMUNIZATION EVALUATION

- At the first medical exam performed in the U.S., if the child cannot produce documentation of previous vaccination, vaccines should be provided
- Considerations include country of origin, record of vaccination documentation and age of child
- Vaccination records:
  - Vaccines administered outside the U.S. can be accepted if their schedule is similar to that recommended in the U.S.
  - Only written records should be accepted as evidence of vaccination
- Two accepted approaches:
  - Assume the patient is unvaccinated and immunize regardless of immunization record
  - If greater than six months of age, test antibody titers to vaccines reported. This can be considered for: measles, mumps, rubella, hepatitis A and B, and polio.

- Additional considerations:
  - MMR is not routinely administered in most developing countries
  - Zoster and Human Papillomavirus (HPV) are not required for immigrant children

## TUBERCULOSIS (TB) SCREENING

- Children immigrating from countries with a high burden of TB disease (> 40 cases per 100,000), close contact with someone with TB disease or symptoms of TB disease should have a Mantoux tuberculin skin test (TST) or interferon-gamma release assay (IGRA) for Mycobacterium tuberculosis.
- Previous Bacillus Calmette–Guérin (BCG) vaccine may influence the results of the TST, however **a history of vaccination with BCG should not influence interpretation of the TST.**
- Repeat screening of immigrant children who are asymptomatic for TB and have had an approved pre-arrival screening is unnecessary.



### Nutrition and Growth References:

<http://www.cdc.gov/immigrantrefugeehealth/guidelines/domestic/nutrition-growth.html>

Chilton, PhD, MPH, M., Black, PhD, M., Berkowitz, MD, C., Casey, MD, P., Cook, PhD, J., Cutts, MD, D., ... Frank, MD, D. (2009, January 1). Food Insecurity and Risk of Poor Health Among US-Born Children of Immigrants. Retrieved August 17, 2020, from [http://www.medscape.com/viewarticle/704138\\_4](http://www.medscape.com/viewarticle/704138_4)

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### Mental Health and Developmental Needs References:

Gonzales, R. G., Suárez-Orozco, C., & Dedios-Sanguinetti, M. C. (2013). No place to belong: Contextualizing concepts of mental health among undocumented immigrant youth in the United States. *American Behavioral Scientist*, 57, 1174-1199. Retrieved from SCOPUS database.

### Immunization Evaluation References:

Advisory Committee on Immunization Practices (ACIP) Recommendations. Retrieved on 8/26/2020. <https://www.cdc.gov/vaccines/acip/recommendations.html>

### Tuberculosis (TB) Screening References:

Centers for Disease Control and Prevention (CDC) (2019, Feb). Domestic Tuberculosis Guidelines: Screening for Tuberculosis Infection and Disease during the Domestic Medical Examination for Newly Arrived Refugees Retrieved from: <https://www.cdc.gov/immigrantrefugeehealth/guidelines/domestic/tuberculosis-guidelines.html>

Guidelines for Evaluation of the Nutritional Status and Growth in Refugee Children During the Domestic Medical Screening Examination. (2012, April 16). Retrieved August 17, 2020, from <http://www.cdc.gov/immigrantrefugeehealth/guidelines/domestic/nutrition-growth.html>

American Academy of Pediatrics Council on Community Pediatrics, Immigrant Child Health Toolkit <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Immigrant-Child-Health-Toolkit/Pages/Immigrant-Child-Health-Toolkit.aspx>

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Griffin, M., Son, M., & Shapleigh, E. (2014). Children's lives on the border. *Pediatrics*, 133, e1118-e1120. Retrieved from SCOPUS database.

Kennedy, E. G. (2013). Unnecessary suffering: Potential unmet mental health needs of unaccompanied alien children. *JAMA Pediatrics*, 167, 319-320. Retrieved from SCOPUS database.

Birth to 18 and 'Catch up' Immunization schedule: Retrieved 8/26/2020 from <https://www.cdc.gov/vaccines/schedules/hcp/imz/catchup.html>  
Immigrant & Refugee Health. Retrieved 8/26/2020. <https://www.cdc.gov/immigrantrefugeehealth/guidelines/overseas/interventions/immunizations-schedules.html>

Centers for Disease Control and Prevention (CDC) (2016, Mar). TB Factsheet: Interferon-Gamma Release Assays (IG-RAs) – Blood Tests for TB Infection Retrieved from <https://www.cdc.gov/tb/publications/factsheets/testing/igra.htm>