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Every step of the way

Special Healthcare of Immigrant Children in School-Based Health Centers

SBHA 2025 Back to School Fall Learning Series

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I have no relevant financial disclosures

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Learning Objectives

- Review the role of School-Based Health Centers (SBHCs) in the U.S.
- Describe the unique role of SBHCs in the care of immigrant children
- Review special healthcare needs of immigrant children
- Evaluate foreign vaccine records

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National Landscape & Growth of SBHCs

- ≈ 3,900 SBHCs operating in 2021–2022 (up from ≈ 2,584 in 2016–2017)
- Serve more than 6 million children/adolescents across 49 states, DC, and Puerto Rico
- Often located in underserved communities: urban, rural, and suburban settings
- Over 60% sponsored by Federally Qualified Health Centers (FQHCs)

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Love H, Soleimanpour S, Panchal N, Schlitt J, Behr C, Even M. 2016-2017 National School-Based Health Care Census report. School-Based Health Alliance. https://www.sbh4all.org

Student Populations & Demographics Served

- Students disproportionately from low-SES and minoritized backgrounds
- Example: In New York, ~250,000 students in SBHC; ~63% enroll in SBHC services
- Racial/ethnic distribution (national averages): Hispanic/Latino ~37%, Black ~26%, Asian/Pacific Islander ~4%, Native American ~2%
- High proportion enrolled in Medicaid/CHIP; SBHCs reduce barriers for uninsured/underinsured

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Love H, Soleimanpour S, Panchal N, Schlitt J, Behr C, Even M. 2016-2017 National School-Based Health Care Census report. School-Based Health Alliance. https://www.sbh4all.org

Definition of immigrant children

- Per AAP Definition –
- Children in immigrant families (CIF) - children who are either foreign-born or have at least 1 parent who is foreign-born
  - Immigrant children are those born outside the United States to non-US citizen parents

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www.pediatrics.org/cgi/doi/10.1542/peds.2013-1099

From: **Providing Care for Immigrant, Migrant, and Border Children**

Pediatrics. 2013;131(6):e2028-e2034. doi:10.1542/peds.2013-1099

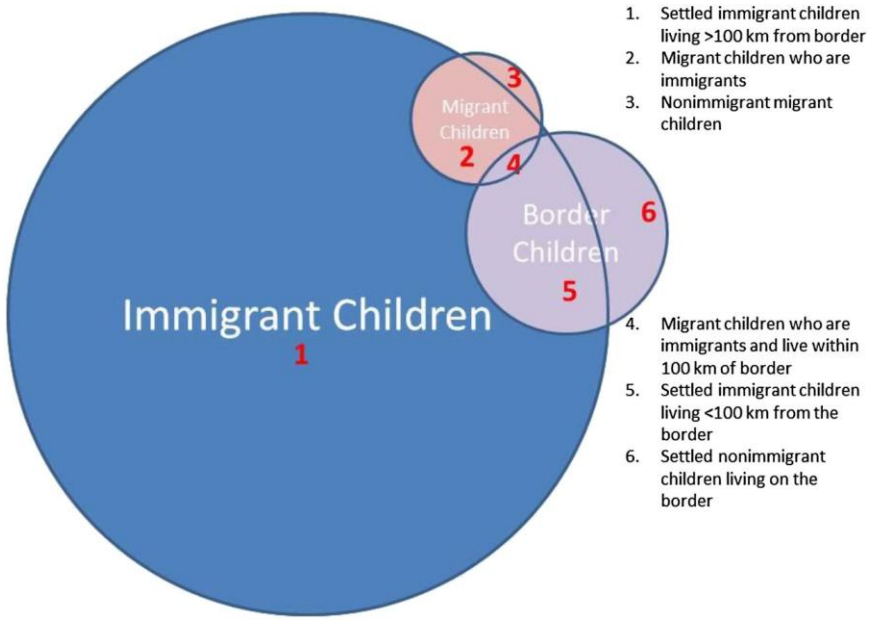

Figure Legend:

Representation of the populations of immigrant, border, and migrant children: separate and overlapping groups.

Who are our immigrant patients?

- 1 in 4 children in the United States are Children of Immigrant Families
- Common countries of origin
- Language diversity
- Socioeconomic and insurance status

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20 US Metro areas with largest immigrant populations

20 U.S. metropolitan areas with largest number of immigrants in 2023

Note: Each metropolitan area has more than 500,000 immigrants. Circles are scaled to size of population.
Source: Pew Research Center estimates based on augmented U.S. Census Bureau data (IPUMS).

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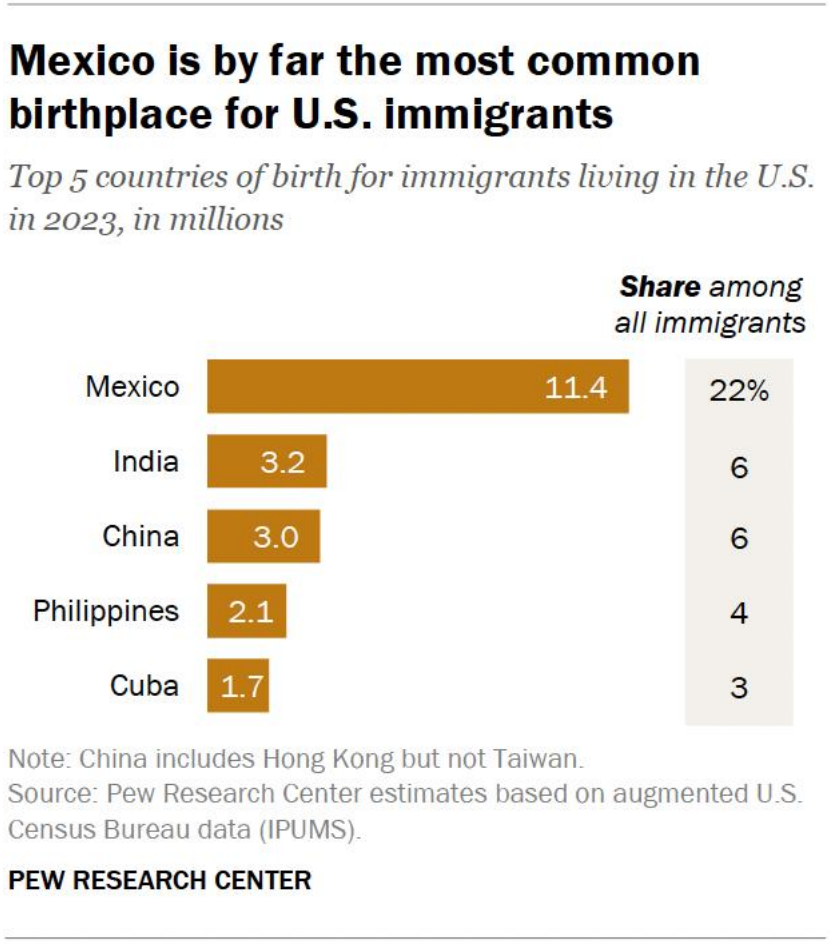
Top 5 countries for birth



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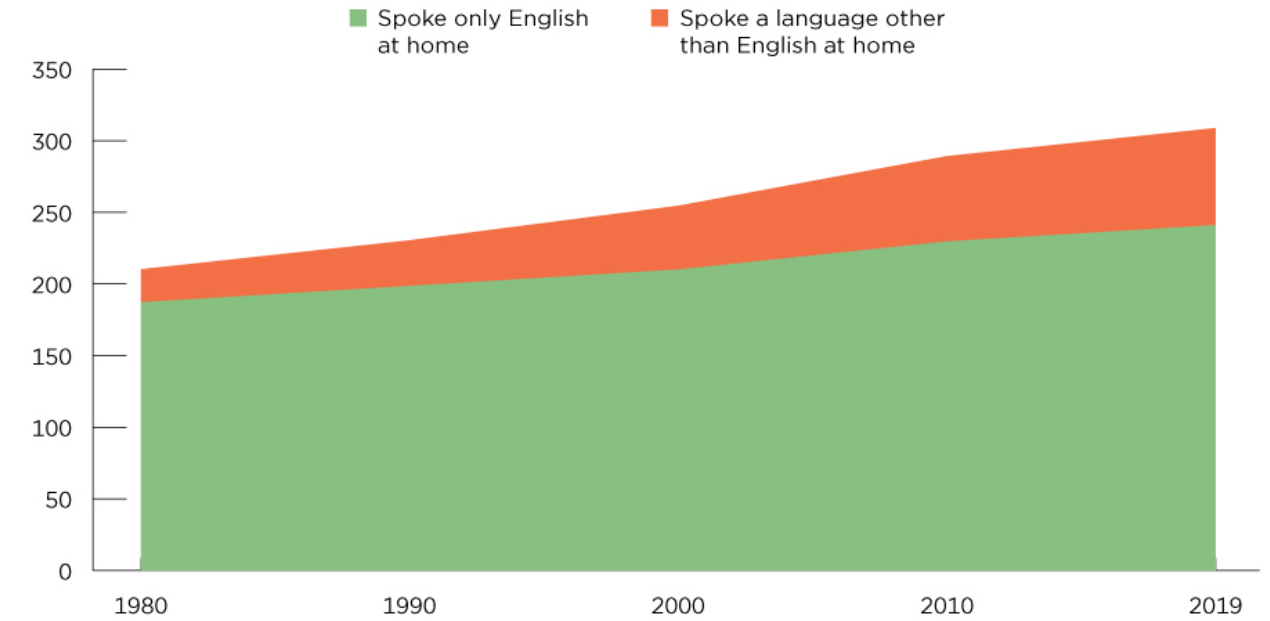
Languages spoken at home

Figure 1.

Languages Spoken at Home for the Population 5 Years and Older: 1980–2019

(In millions)



Source: U.S. Census Bureau, 1980, 1990, and 2000 Censuses; 2010 and 2019 American Community Survey, 1-year estimates.

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Languages other than English

Table 1.
Five Most Frequently Spoken Languages Other Than English (LOTE) in U.S. Homes: 2019

Language	Estimate	Percent of LOTE population
Spanish or Spanish Creole	41,757,391	61.6
Chinese	3,494,544	5.2
Tagalog	1,763,585	2.6
Vietnamese	1,570,526	2.3
Arabic	1,260,437	1.9

Source: U.S. Census Bureau, 2019 American Community Survey, 1-year estimates.

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What are some barriers to care in immigrant families?

- Language & cultural barriers
- Immigration status concerns
- Insurance status
- Trauma, migration stress, and acculturation challenges
- Mistrust of healthcare system

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Areas of Medical Care for Immigrant Children

- Preventive & primary care gaps (immunizations, well-child visits)
- Dental health disparities
- Nutrition & obesity
- Chronic conditions (asthma, diabetes)
- Mental health (depression, anxiety, PTSD)
- Developmental & learning challenges

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AAP Key Tenets of caring for Immigrant Children

- Ensure access to healthcare regardless of immigration status
- Use a trauma-informed lens to all care
- Prioritize confidentiality and safe spaces in care delivery
- Use professional interpreters and culturally competent practices
- Screen for trauma, mental health, and infectious diseases
- Provide catch-up immunizations and preventive care
- Integrate behavioral health
- Advocate for policies protecting immigrant children's health

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Screening & Preventive Health

- Review and validate foreign vaccine records; use catch-up schedules
- Screen for tuberculosis, hepatitis B, HIV, lead, anemia, parasites as appropriate
- Assess growth/nutrition, including risk of obesity and micronutrient deficiencies
- Monitor developmental milestones and school readiness

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Laboratory Testing: Core Universal Screening

- CBC with differential – anemia, hemoglobinopathies
- Lead level – all children <6 yrs or with exposure risk
- TB screening – IGRA (preferred ≥2 yrs) or TST (<2 yrs)
- Hepatitis B panel – HBsAg, anti-HBs, anti-HBc
- HIV – universal testing recommended
- Stool O&P ×2–3 – parasites (Giardia, Ascaris, Trichuris, hookworm)

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Laboratory Testing: Targeted & Risk-Based

- Hemoglobin electrophoresis – sickle cell, thalassemia (Africa, Middle East, Asia)
- Hepatitis C – children from high-prevalence regions
- Syphilis testing (RPR/treponemal) if maternal risk factors or endemic origin
- Strongyloides serology – children from tropical/subtropical areas
- Schistosomiasis serology – sub-Saharan Africa
- Malaria testing (smear, RDT) if febrile, anemic, or from endemic region
- Vitamin D, micronutrients – if malnutrition/rickets suspected
- Adolescents: STI panel (chlamydia, gonorrhea, syphilis, HIV, trichomonas), pregnancy test as indicated

Sexual and Reproductive Healthcare needs of immigrant adolescents

- Trauma informed Care
- Explanation of confidentiality laws (varies by state)
- Pregnancy testing
- Comprehensive STI screening
- Contraception counseling
- Trauma informed care and consideration of sexual violence

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Contraceptive implants

Table 1. Characteristics of different contraceptive implants[4-5]

Name	Progestin	Number of Units	Lifespan According to Current Evidence	Countries Registered In
Nexplanon/ Implanon NXT	Etonogestrel	Single Rod	5 years	80
Jadelle	Levonorgestrel	Two rods	5 years	47
Sino-Implant (II)	Levonorgestrel	Two rods	4 years	19
Norplant	Levonorgestrel	Six Rods	5 years	Off-Market

https://www.reproductiveaccess.org/resource/contraceptive-implant-types-and-removal-a-global-perspective/

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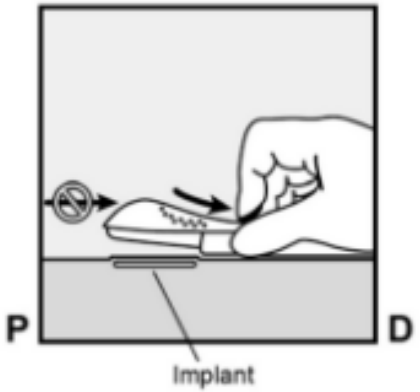
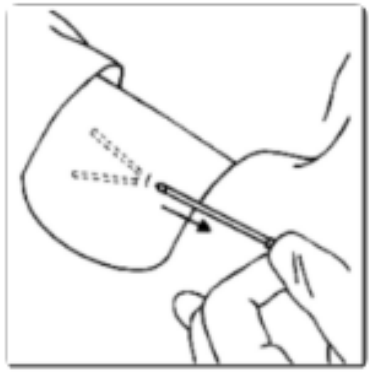
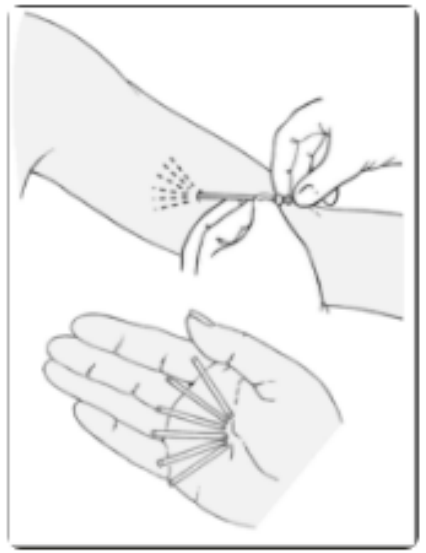
Contraceptive Implants

Table 2. Examples of Different Contraceptive Implants

Single Rod System (ex. Nexplanon[6])	Two Rod System (ex. Jadelle[7])	Six Rod System (ex. Norplant[8])
		

https://www.reproductiveaccess.org/resource/contraceptive-implant-types-and-removal-a-global-perspective/

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Evaluating Foreign Vaccine Records (Principles)

- Accept written, dated records if official and complete
- Verify name and DOB
- Do not accept verbal reports of vaccination
- Compare foreign vaccine names with U.S. equivalents
- Check minimum ages and intervals between doses
- Ensure doses given at appropriate ages (e.g., MMR ≥12 months)
- Watch for mixed vaccine schedules or unfamiliar formulations

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Foreign Vaccine Records: Issues & Next Steps

- Common issues: BCG, OPV before 2016, single-antigen measles, combination vaccines
- Catch-up immunization if records incomplete — do not restart series
- Revaccination is safe when uncertain
- Consider serology for immunity (e.g., hepatitis B, varicella, MMR)
- Some vaccines abroad not part of U.S. schedule (e.g., typhoid)
- Use CDC catch-up schedule, AAP Red Book, and Immunization Action Coalition resources

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Vaccine record 1 – Ukrainian

[redacted]

12.16р в/віспа

МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ

ФОРМА 063-о

Найменування організації

КОМУНАЛЬНЕ НЕКОМЕРЦІЙНЕ ПІДПРИЄМСТВО Шевченківського району міста Києва «ЦЕНТР ПЕРВИННОЇ МЕДИКО-САНІТАРНОЇ ДОПОМОГИ ...»

Взято на облік [redacted]

Найменування дитячої установи (для орг. дітей) [redacted]

1. Прізвище, ім'я, по батькові [redacted]
2. Дата народження [redacted]
3. Домашня адреса: населений пункт м. Київ вул. Мельникова буд. 36/1 кв. 912 р-н

Відмітки про переміну адреси

TUBERCULOSIS

Щеплення проти туберкульозу

Вид щеплення	Вік	Дата	Доза	Серія	Реакція на щеплення (місцева)	Мед. протипоказання (дата, при...
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Ревакцинація						

POLIO

Щеплення проти поліомієліту

Вакцинація			Ревакцинація					
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DTaP

Щеплення проти дифтерії, кашлюку, правця

Вид щеплення	Вік	Дата	Доза	Серія	Реакція на щеплення загальна	Реакція на щеплення місцева	Медичні протипоказання (дата, причина)
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		11.04.13	0,5	AC 20 B 190 CA			
Ревакцинація		19.09.14	0,5	AC 14 B 197 BA			

Україна. Спеціалізована школа I-III ступенів № 57 з поглибленим вивченням інформаційних технологій Шевченківського району м. Києва. Ідентифікаційний код 22881805. Шевченківська районна в місті Києві державна адміністрація

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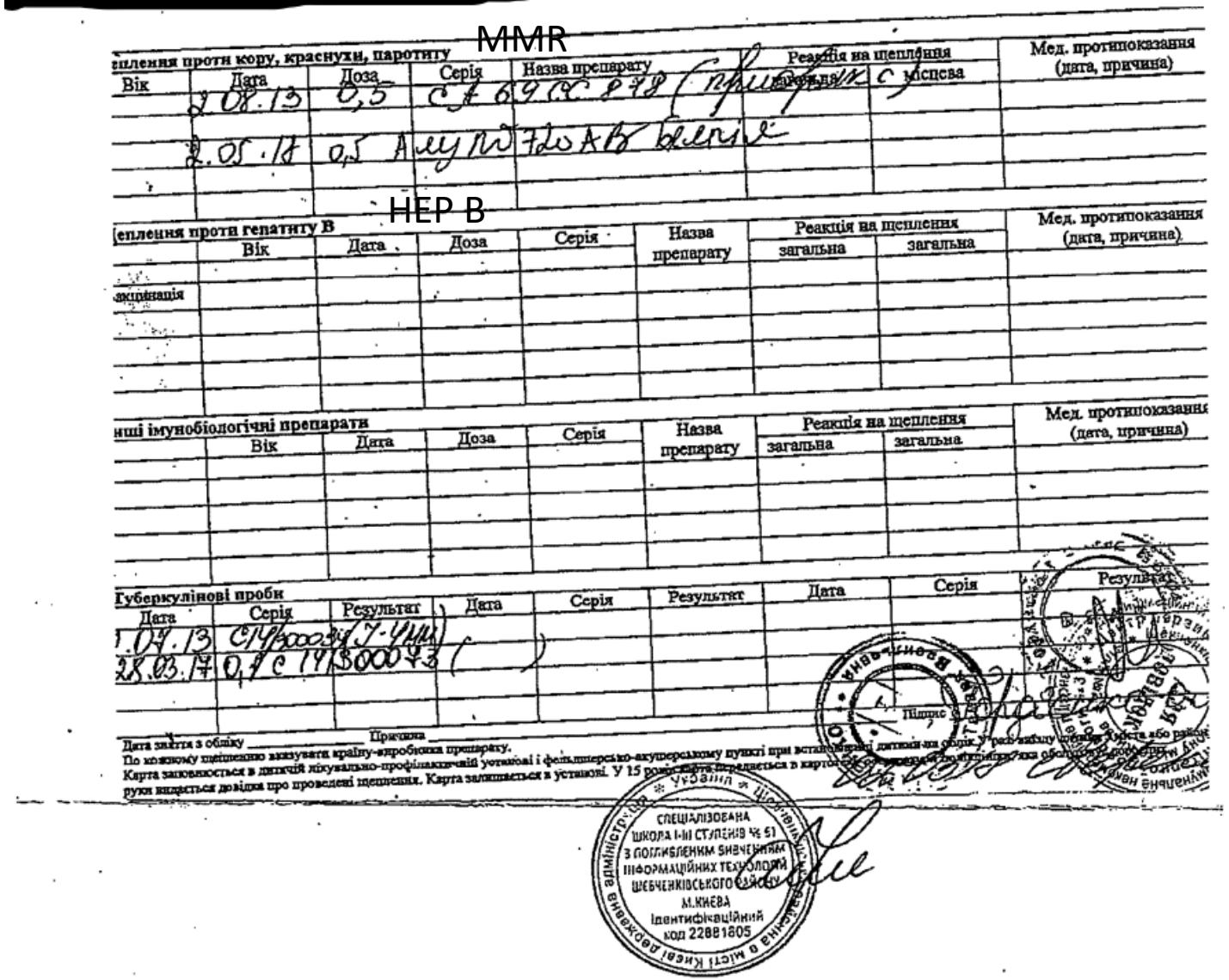
[redacted]

MMR

HEP B



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What would you do?

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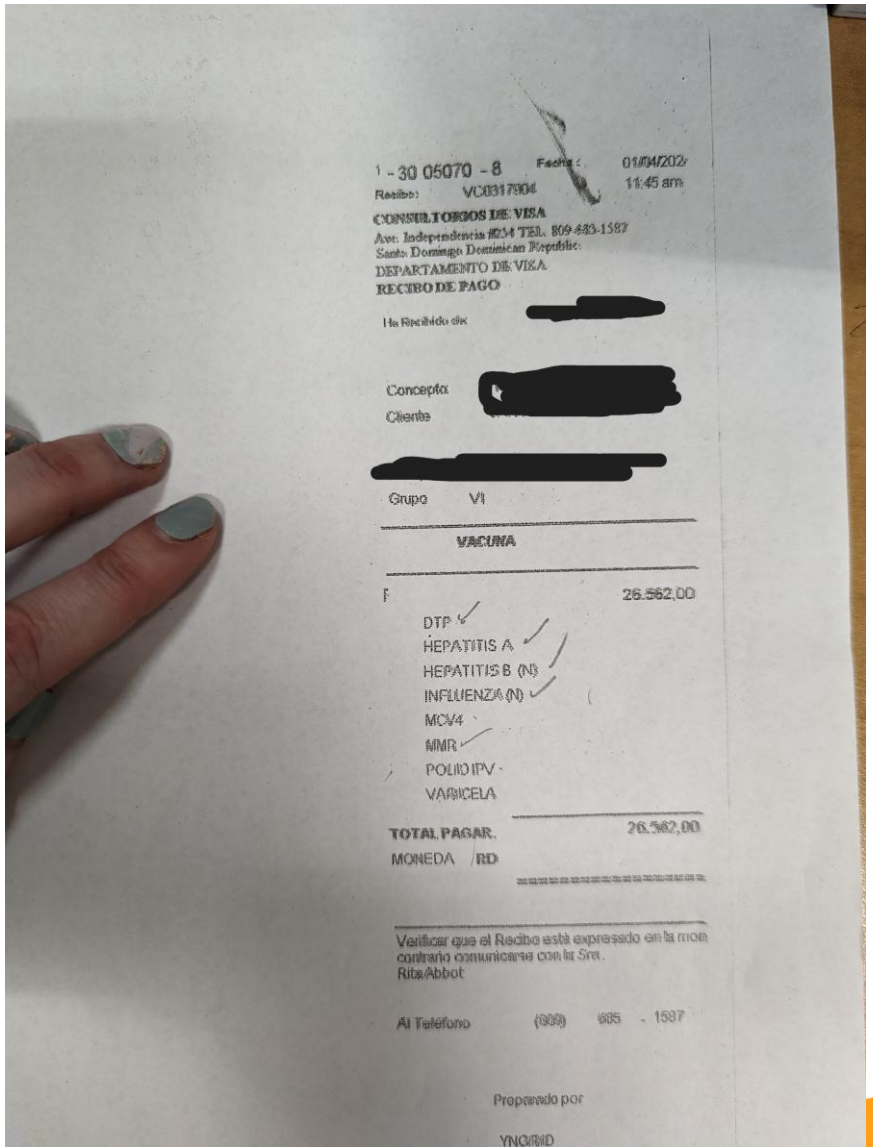
Vaccine record 2 - DR



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CONSULTORIOS DE VISA
Ave. Independencia #234 TEL. 809-683-1587
Santo Domingo Dominican Republic
DEPARTAMENTO DE VISA
RECIBO DE PAGO

He Recibido de [redacted]

Concepto [redacted]
Cliente

[redacted]

Grupo VI

VACUNA

RD$ 26,562.00

DTP ✓
HEPATITIS A ✓
HEPATITIS B (N) ✓
INFLUENZA (N) ✓
MCV4
MMR ✓
POLIO IPV
VARICELA

TOTAL PAGAR. 26,562.00
MONEDA RD

Verificar que el Recibo esta expresado en la mon
contrario comunicarse con la Sra.
Rita Abbot

Al Teléfono (809) 685 - 1587

Preparado por

YNGRID

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What would you do?

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Pediatrics. 2024;153(3). doi:10.1542/peds.2023-065483

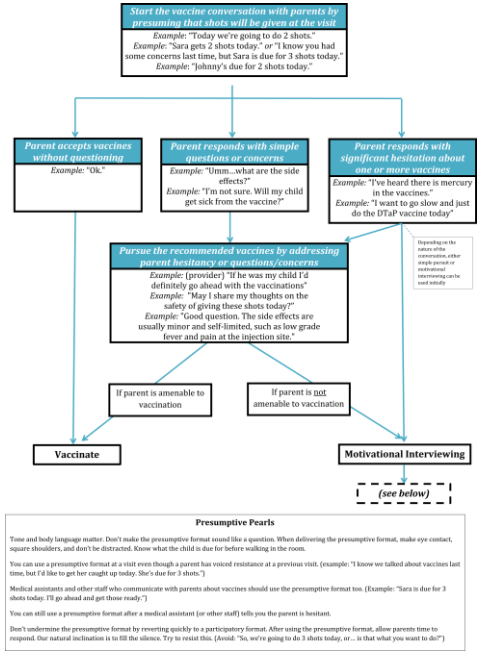

Figure Legend:

Recommended approach to vaccine conversations based on existing evidence. Reprinted from: Vaccine, 41(10), O'Leary ST, Spina CI, Spielvogle H, et al. Development of PIVOT with MI: a motivational interviewing-based vaccine communication training for pediatric clinicians. Pages 1763–1764, © 2023, with permission from Elsevier.

Mental & Behavioral Health

- Screen for depression, anxiety, PTSD, toxic stress
- Use culturally adapted tools when possible
- Address stigma around mental health in immigrant communities
- Provide access to counseling, school-based support, and community referrals

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Social Determinants & Family Support

- Assess food security, housing stability, and access to insurance
- Provide resources for legal assistance, public benefits, and social services
- Recognize risk of discrimination, bullying, and acculturation stress
- Engage families as partners; respect cultural health beliefs

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High Risk Circumstance (AAP)

- Mixed Status Households
- Immigrant Children in Foster Care
- Unaccompanied minors and Asylum Seekers
- LGBTQ+ Immigrant Youth
- Youth Victims of Sexual Violence

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Social Determinants of health in SBHCs

Social Determinants of Health

In addition to addressing health care access and quality directly, more than 4 of 5 SBHCs responding support health insurance enrollment (83%, n=1,136; Figure 7).

SBHCs support economic stability for their clients and families by addressing food security (59%, n=810), housing (40%, n=554), financials for basic needs (31%, n=422), legal concerns (21%, n=286), and employment (18%, n=245). SBHCs also address the social and community context by facilitating access to interpersonal relationship and safety services (52%, n=719), immigration or acculturation support (26%, n=363), and childcare support (17%, n=238). Forty-five percent of responding SBHCs (n=621) support their clients and families with transportation-related neighborhood and built environment challenges, and 41% (n=565) support students accessing academic support services.

Figure 7. Supports Provided to Clients and/or Their Families to Obtain Social Needs Services

Soleimanpour S, Cushing K, Christensen J, Ng S, Yang J, Saphir M, Geierstanger S, Even M, Brey L. (2023). Findings from the 2022 National Census of School-Based Health Centers. Washington, DC: School-Based Health Alliance.

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Policy & Advocacy Role

- Support policies ensuring health coverage and safe access to care for immigrant children
- Advocate against policies that instill fear or limit healthcare access
- Collaborate with schools, community orgs, and legal partners
- Educate staff on rights of immigrant families

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Best Practices in SBHCs

- Multidisciplinary approach (nurses, social workers, counselors, interpreters)
- Cultural competence and humility
- Family, school and community engagement
- Confidentiality and safe spaces
- Telehealth & digital tools

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PS 5

A case study in community

Ellen Lurie Campus School-Based Health Center

3703 Tenth Avenue, New York, NY 10032

WASHINGTON HEIGHTS

Site Profile

Years of Operation:
Thirty-two (Since 1993)

Hours of Operation:
Monday-Friday 8:30 am – 4:30 pm

Services Offered:
Medical, Dental, Vision Screenings
Dental Screenings

Staffing:
Physician's Assistant
Nurse Practitioner
Dentist
Dental Assistant
Dental Hygienist
Social Workers (2)
Mental Health Social Worker
Health Escort
Medical Office Assistant

Cross-Divisional Collaborations

Early Childhood Division:
HeadStart and Early HeadStart

Youth Division:
Community School

Other Health and Wellness Services:

- Helen Keller International (Vision Screenings)
- Health Plex No-Touch Dental Screenings
- Go!Healthy Meals

School Profile

School Name: Ellen Lurie Campus (P.S. 5)

Principal:
Christopher Anest

Grades Served:
Grades Pre-K - 5

District: 6
Poverty Rate: 95%
English Language Learners: 39%
Title I School: Yes

93.5 % of SBHC users had documented Body Mass Index (BMI)
36.7% were overweight.

X% of 4th and 5th graders (#) received free vision screenings
.X% received free eyeglasses.

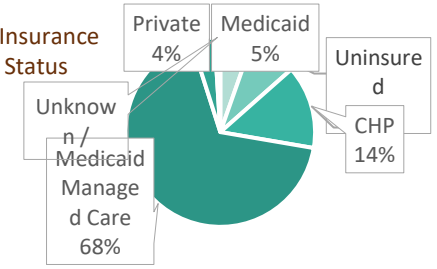
9% of SBHC users had an asthma diagnosis

FY 2024	Primary Care # (%)	Dental # (%)	First Aid # (%)	Total
Patients *				
Visits				

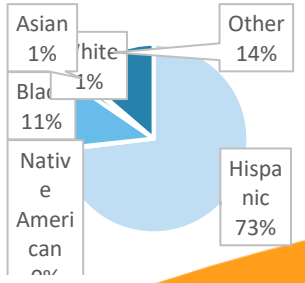
*One patient can access multiple services; total patients reflect unique patients by column

	Enrollment	Users # (%)
School	427	91%
SBHC	392	92%

Insurance Status



Racial / Ethnic Identification



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Strategies for Improvement

- Building trust with families
- Outreach and education
- Partnerships with community organizations
- Advocacy for policy change

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References and Resources

- AAP Immigrant Child Health Toolkit
- CDC.Gov – Pink Book. https://www.cdc.gov/pinkbook/hcp/table-of-contents/index.html
- COUNCIL ON COMMUNITY PEDIATRICS, Lance A. Chilton, Gilbert A. Handal, Gonzalo J. Paz-Soldan, Deise C. Granado-Villar, Benjamin A. Gitterman, Jeffrey M. Brown, Lance A. Chilton, William H. Cotton, Thresia B. Gambon, Peter A. Gorski, Colleen A. Kraft, Alice A. Kuo, Gonzalo J. Paz-Soldan, Barbara Zind; Providing Care for Immigrant, Migrant, and Border Children. *Pediatrics* June 2013; 131 (6): e2028–e2034. 10.1542/peds.2013-1099
- Dunfee MN. School-Based Health Centers in the United States: Roots, Reality, and Potential. J Sch Health. 2020 Aug;90(8):665-670. doi: 10.1111/josh.12914. Epub 2020 Jun 21. PMID: 32567122.
- https://immunisationhandbook.health.gov.au/sites/default/files/2021-09/cdc-foreign-products-tables-may-2019_0.pdf?utm_source=chatgpt.com
- Kapadia F. School-based healthcenters are a critical component of health carefor children: a public health of consequence,August 2024. Am J Public Health. 2024;114(8):769–771
- https://www.migrationpolicy.org/programs/data-hub/charts/us-immigrant-population-state-and-county
- https://www.reproductiveaccess.org/resource/contraceptive-implant-types-and-removal-a-global-perspective/
- School-Based Health Centers Fact Sheet (SBHC). NYS DOH Website. Health.NY.Gov
- Sean T. O'Leary, Douglas J. Opel, Jessica R. Cataldi, Jesse M. Hackell, COMMITTEE ON INFECTIOUS DISEASES, COMMITTEE ON PRACTICE AND AMBULATORY MEDICINE, COMMITTEE ON BIOETHICS; Strategies for Improving Vaccine Communication and Uptake. *Pediatrics* March 2024; 153 (3): e2023065483. 10.1542/peds.2023-065483
- Soleimanpour S, Cushing K, Christensen J, Ng S, Yang J, Saphir M, Geierstanger S, Even M, Brey L. (2023). Findings from the 2022 National Census of School-Based Health Centers. Washington, DC: School-Based Health Alliance.

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