



I-PACK Education Modules: Advocacy in Action

ANGELA CHUN, MD¹, CALLA BROWN, MD², ANISHA RIMAL, MD²,
KRISTIN VAN GENDEREN, MD¹

¹PEDIATRICS, NORTHWESTERN UNIVERSITY FEINBERG SCHOOL OF MEDICINE; LURIE CHILDREN'S HOSPITAL ,
²PEDIATRICS, UNIVERSITY OF MINNESOTA

Angela Chun, MD¹, Calla Brown, MD², Anisha Rimal, MD², Kristin Van Genderen, MD¹
¹Pediatrics, Northwestern University Feinberg School of Medicine; Lurie Children's Hospital, ²Pediatrics, University of Minnesota

I-PACK Initiative

- In the US, one in four children (approximately 18.4 million) live in an immigrant family
- Increasing interest in immigrant and refugee health among pediatric educators and trainees
- However, clinicians unsure how to navigate the different levels of advocacy
- I-PACK initiative to develop and implement curricula to equip trainees to positively interact with this vulnerable community



Learning Objectives

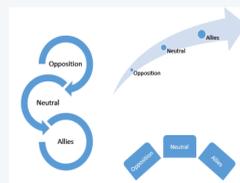
- Identify opportunities for advocacy for immigrant and refugee families at multiple levels including individual, community, and state and federal advocacy
- Learn how to implement interpreter best practices
- Create a stakeholder map
- Develop advocacy writing skills including social media, news media, and letter writing to elected officials

Advocacy at Individual Level

- Case follows a 7 year old patient Miguel and his family who present to clinic for the first time. You recognize that they are speaking to each other in Spanish
- Limited English Proficiency (LEP)
 - 57 million people (20% of the US population) speak a language other than English at home^{1, 2}, and within that cohort 25 million people (8.6% of the US population) have LEP³
 - LEP patients have greater healthcare risks and lower overall quality of care in comparison to English speaking patients^{1, 3, 4, 5}
 - Longer hospital stays
 - Greater risk of line infections, falls, pressure ulcers, surgical delays, readmissions³
 - Lack of empathy⁶
 - Greater use of resources⁷
- Interpreter Best Practices

Advocacy at Community Level

- What if interpreter practices aren't available in your practice? Can you identify a systematic barrier?
- Creating a stakeholder map
 - Defining the Issue
 - Generating Solutions
 - Developing your ask



- You learn that Miguel was born in Venezuela, but recently fled to the United States with his parents due to political turmoil.
- As refugees, what public benefits are Miguel and his family eligible to receive?

Overview of public benefits options for immigrant children and families ⁸				
Immigrant Status	SNAP ⁹	TANF	Non-cash benefits under TANF such as subsidized child care or transit subsidies ¹¹	Public Housing ¹²
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

American Academy of Pediatrics Immigrant Health Toolkit: Access to Health Care and Public Benefits

- As refugees, what health care benefit options are they eligible to receive?

Overview of health care benefits options for immigrant children and families			
Immigrant Status	Medicaid ¹	CHIP ²	ACA Subsidies
Pregnant Women	In some states, may be eligible for prenatal care regardless of immigration status ⁴	In some states, may be eligible for prenatal care regardless of immigration status ⁵	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. Some states may cover children	Not Eligible	Not Eligible (barred from purchasing coverage on their own in the Health Insurance Exchange)
Temporary Protected Status (TPS)	Not Eligible	Not Eligible	Eligible

American Academy of Pediatrics Immigrant Health Toolkit: Access to Health Care and Public Benefits

Advocacy at State and Federal Level

- Social Media Advocacy- Twitter activity
- New Media Advocacy- Op-Ed Writing activity
- Reaching out to your Representative
 - To explain to an official how a particular issue affects you, your patients, or your colleagues
 - To express support for a proposed law, policy, or course of action
 - To oppose a proposed law, policy, or course of action

Future Directions

- Accepted as APPD and AAP conference presentations
- Goal for trainees to take back to home institutions and implement into practice

References

- Betancourt JR, Tan-McGrory A. Creating a safe, high-quality healthcare system for all:meeting the needs of limited English proficient populations; Comment on "Patient safety and healthcare quality: the case for language access." *Int J Heal Policy Manag.* 2014. doi:10.15171/ijhpm.2014.21
- <https://www.migrationpolicy.org/article/limited-english-proficient-population-united-states-0>.
- https://www.jointcommission.org/assets/1/23/Quick_Safety_Issue_13_May_2015_EMBARGOED_5_27_15.pdf.
- <https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=2&ved=0ahUKEwjE7viZh5vbAhVnqVQKHfTCC8QFgg1MAE&url=https%3A%2F%2Fwww.migrationpolicy.org%2Fsite%2Fdefault%2Ffiles%2Fpublications%2FESSA-FactSheet-MN-FINAL.pdf&usg=AOvVaw1GUi9iCviPeh6JW5I5hbEp>
- <https://mn.gov/admin/demography/data-by-topic/immigration-language/>.
- Juckett G, Unger K. Appropriate use of medical interpreters. *Am Fam Physician.* 2014.

I-PACK initiative

- In the US, one in four children (approximately 18.4 million) live in an immigrant family
- Increasing interest in immigrant and refugee health among pediatric educators and trainees
- However, clinicians unsure how to navigate the different levels of advocacy
- I-PACK initiative to develop and implement curricula to equip trainees to positively interact with this vulnerable community



Overview of Arrival Process

Demographics, Epidemiology
Health Screening/Arrival Process
Health Risks of Crossing Borders



Practical Medical Concerns

Highlights of differential diagnosis / clinical conditions in immigrant/refugee youth
Developmental considerations for transnational children and youth



Social Emotional Aspects to Care

ACEs and Immigration
Trauma-informed Care



Medicolegal Concerns

Legal concerns regarding immigration status
Health implications of being undocumented
Recommendations for pediatrician best practices



Community-Based Initiatives

How to start initiatives
Gaining familiarity with community
Focus groups and introduction to needs assessments



Partnership Building

Asset-based community development
Best Practices for Partnerships
Common Pitfalls



Advocacy

Definitions
Avenues for Involvement
Resolutions

Advocacy in Action Learning Objectives

- Identify opportunities for advocacy for immigrant and refugee families at multiple levels including individual, community, and state and federal advocacy
- Learn how to implement interpreter best practices
- Create a stakeholder policy map
- Develop advocacy writing skills including social media, news media, and letter writing to elected officials

Advocacy at Individual Level

- Miguel is a 7 year old new patient to your clinic presenting for a well child check
- He is triaged into a room with his parents after having his vitals taken by the nurse
- You introduce yourself to the family, but the parents smile and shake their heads to indicate that they do not understand
- You recognize that they are speaking to each other and Miguel in Spanish
- 57 million people (20% of the US population) speak a language other than English at home^{1, 2}, and within that cohort 25 million people (8.6% of the US population) have LEP³
- LEP patients have greater healthcare risks and lower overall quality of care in comparison to English speaking patients^{1, 3, 4, 5}
 - Longer hospital stays
 - Greater risk of line infections, falls, pressure ulcers, surgical delays, readmissions³
 - Lack of empathy⁶
 - Greater use of resources⁷

Interpreter Activity

- For this activity, will need two facilitators (ideally one physician and 1-2 interpreters) and a volunteer from the audience to play the physician

Options for activity:

Option 1: Facilitator will recruit 2 interpreters; one to role play as the patient, and the other to role play as the interpreter (ie 2 Spanish interpreters. The facilitator could role-play as the physician or could ask for a volunteer (resident/student) to role-play as the physician.

Option 2: Facilitator will recruit an individual (faculty, resident, community volunteer) who speaks a second language and then recruit an interpreter who also speaks that language.

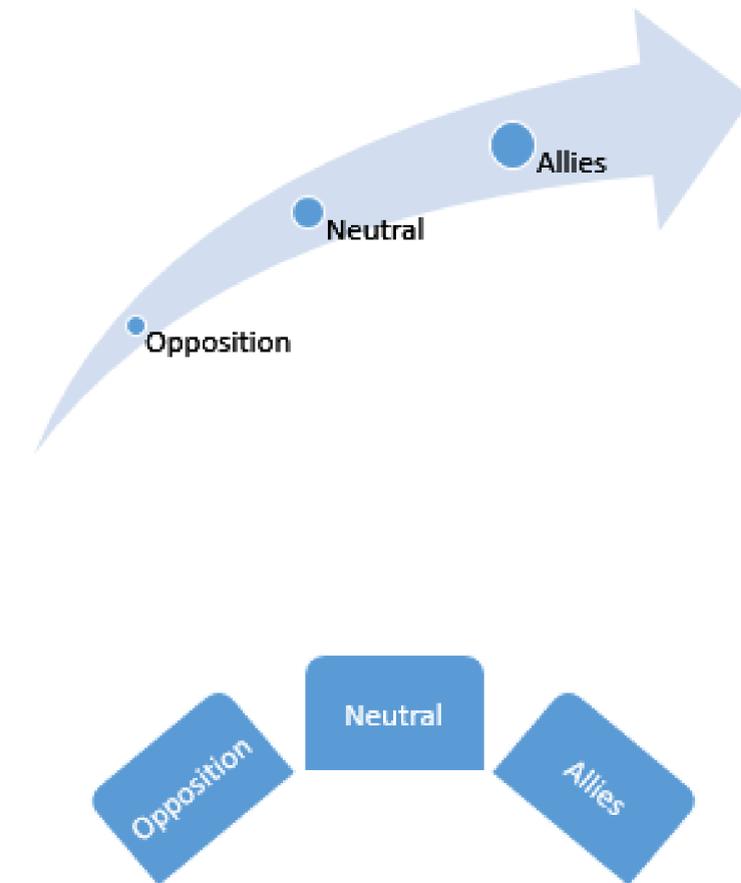
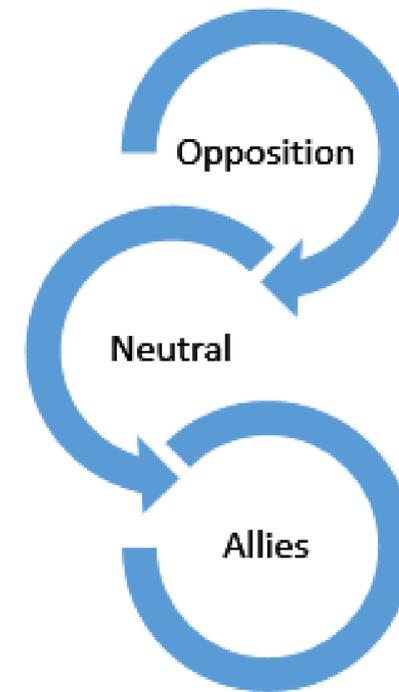
- Pass out physician, interpreter, and parent scripts
- Scenario 1: the provider is speaking quickly in English, and using complex jargon. He/she is not pausing between sentences. Not leaving time for “teach back” or questions from family. Interpreter is also having conversations with the family which is not being translated for the provider.

Advocacy at Community Level

- Advocating for best practices when working with interpreters within your hospital system or clinic is an example of **individual advocacy**
- What if interpreter services are not available in your practice setting? What if access is limited?
- How can you advocate for other patients in your **community**?

Creating a Stakeholder Map

- Defining the Issue
- Generating the Solutions
- Developing your asks



Case continued

- You learn that Miguel was born in Venezuela, but recently fled to the United States with his parents due to political turmoil.
- As refugees, what public benefits are Miguel and his family eligible to receive?
- As refugees, what health care benefit options are they eligible to receive?

Overview of public benefits options for immigrant children and families⁹

Immigrant Status	SNAP ¹⁰	TANF	Non-cash benefits under TANF such as subsidized child care or transit subsidies ¹¹	Public Housing ¹²
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

Overview of health care benefits options for immigrant children and families

Immigrant Status	Medicaid ¹	CHIP ²	ACA Subsidies
Pregnant Women	In some states, may be eligible for prenatal care regardless of immigration status ⁴	In some states, may be eligible for prenatal care regardless of immigration status ⁵	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. Some states may cover children	Not Eligible	Not Eligible (barred from purchasing coverage on their own in the Health Insurance Exchange)
Temporary Protected Status (TPS)	Not Eligible	Not Eligible	Eligible

American Academy of Pediatrics Immigrant Health Toolkit: Access to Health Care and Public Benefits

Advocacy at State and Federal Level

- Social Media Advocacy—Twitter
- News Media Advocacy—Op-Ed Writing
- Reaching Out to your Representative—Letter writing
 - To explain to an official how a particular issue affects you, your patients, or your colleagues
 - To express support for a proposed law, policy, or course of action
 - To oppose a proposed law, policy, or course of action

Future Directions

- Accepted as APPD and AAP conference presentations
- Goal for trainees to take back to home institutions and implement into practice
- Future Publication

References

1. Betancourt JR, Tan-McGrory A. Creating a safe, high-quality healthcare system for all: meeting the needs of limited English proficient populations; Comment on “Patient safety and healthcare quality: the case for language access.” *Int J Heal Policy Manag*. 2014. doi:10.15171/ijhpm.2014.21
2. <https://www.migrationpolicy.org/article/limited-english-proficient-population-united-states-0>.
3. https://www.jointcommission.org/assets/1/23/Quick_Safety_Issue_13_May_2015_EMBARGOED_5_27_15.pdf.
4. <https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=2&ved=0ahUKEwjE7viZh5vbAhVnqVQKHfTCCh8QFgg1MAE&url=https%3A%2F%2Fwww.migrationpolicy.org%2Fsites%2Fdefault%2Ffiles%2Fpublications%2FESSA-FactSheet-MN-FINAL.pdf&usg=AOvVaw1GUI9iCviPeh6JW5I5hbEp>
5. <https://mn.gov/admin/demography/data-by-topic/immigration-language/>.
6. Juckett G, Unger K. Appropriate use of medical interpreters. *Am Fam Physician*. 2014.

Acknowledgements



Special thanks to my mentor, Kristin Van Genderen!