

# A new home - but with no medical home? Study of immigrants' kids with special health needs

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Kids with special health needs need a **medical home** to coordinate their care.

## Who actually has one?

**28%** of immigrant kids

**37%** of U.S.-born kids with immigrant parents

**49%** of kids born in the U.S. to U.S.-born parents

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Data are for children with 1 or more medical/behavioral condition

Key findings from a study of immigrant and non-immigrant children with special health needs. Credit: University of Michigan

They may have made America their new home, but immigrants whose children have special medical needs appear to be having trouble finding a true "medical home" for their child, a new study finds.

In a paper in the journal *Pediatrics*, a team from the University of

Michigan Medical School reports disparities in access to high-quality care between immigrant [children](#), children born to immigrant parents, and children born in the country to American-born parents—whether or not they had special health needs.

But the worst differences were seen in children who had a medical or behavioral condition that needed special attention—the very children most likely to be using medical care most often.

Only about one in four of such children who had emigrated to the U.S. had "medical home"-style care, which includes a usual source of non-emergency department care for both well and sick visits, access to care from a specific nurse or doctor, family-centered care, referrals to other care when needed, and access to care coordination. This level of care is growing in popularity because of its ability to help patients use care wisely and avoid wasteful medical spending.

Even when a child with special health needs was American-born, but his or her parents were foreign-born, the odds of having medical-home style care were still lower. In all, 37 percent of these children with health needs had a medical home, compared with 49 percent of children who had the same kinds of needs but were born in the U.S. to American-born parents.

"Addressing this disparity in [primary care](#) for immigrant children—both with and without [special health care](#) needs—means that pediatricians and family physicians should focus on care that is family-centered and improving the care coordination between multiple services for children," says Kristin Kan, M.D., MPH, the study's lead author.

"The medical home is a model or description of what good primary care should be for patients; and for children, the medical home represents primary care that focuses on the family, builds on a continuous

relationship between the family and the medical team, and ensures that children's health needs are addressed," Kan continues.

"This model of primary care is particularly important for vulnerable children, such as those with special health care needs, because they often have chronic conditions requiring more care."

In addition to the disparities among children with special health needs based on immigrant status of themselves or their parents, Kan and her colleagues also found that the aspects of the medical home that immigrant children were least likely to have were family-centered care and having effective care coordination.

The study used data collected from a national telephone survey of parents across the U.S., called the National Survey of Children's Health. Among other things, it asks about children's health and wellness, and the type of care they receive. The researchers analyzed data from 87,762 children who were less than 18 years old - of whom 2 percent were born overseas, and 15 percent were born to immigrant parents.

Other researchers have shown in the past that immigrant children, and children born to foreign-born parents, have poor access to care. But this is the first study to look specifically at access to the [medical-home](#) style of care for [immigrant children](#) born overseas and children born in the US with immigrant parents.

**More information:** K. Kan et al. Immigrant Families, Children With Special Health Care Needs, and the Medical Home, *PEDIATRICS* (2015). [DOI: 10.1542/peds.2015-3221](https://doi.org/10.1542/peds.2015-3221)

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