

2021 Gatlinburg Conference Poster Submission

Title: Barriers to Services for Immigrant Families of Children with Developmental Disabilities: A Scoping Review

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Introduction: There is a steady growth of immigrant children in the US, and one in four children has at least one immigrant parents (Urban Institute, 2019). Meanwhile the prevalence of developmental disabilities (DD) increased significantly among children and adolescents during the last decades (Zablotsky et al., 2019). With the growth of immigrant children with DD, it is urgent to identify the disparities immigrant families of children with DD face and then develop relevant programs to address them. This scoping review explores barriers faced by immigrant families of children with Developmental Disabilities (DD) when accessing healthcare-related services in the US; where research stands based on Kilbourne et al.'s (2006) health disparity research framework; and implications for future health disparities research with this population.

Method: The protocol of this scoping review was guided by Arksey and O'Malley's (2005) five stages methodological framework and PRISMA-P 2015 checklist (Moher et al., 2009) for extracting data and reporting results. Our search results yielded 920 records. After removing duplicates, the first three authors independently reviewed the titles and abstracts of 665 records based on our inclusion criteria. As a result, we screened out 623 records from databases. Three reviewers yielded a 91.5% agreement rate. We identified additional records going through reference lists of eligible studies and key researchers. The final full-text reviews yielded 26 studies that met all the inclusion criteria.

Results: There are multiple-level barriers in accessing diagnosis and services in clinical and outpatient settings for children with DD from immigrant families. The prominent barriers were identified as language barrier, poor service coordination, and the lack of culturally competent providers who spend time supporting these families. The included studies' sample sizes vary, ranging from 10 to 413 for quantitative studies and 1 to 32 for qualitative studies. The total sample size of the included studies is 1,193. Five studies reported results related to detecting disparities. Seventeen studies focused on understanding determinants of disparities faced by immigrant families of children with DD. Four studies examined the effectiveness of interventions in addressing disparities faced by immigrant families of children with DD. The included studies provided initial evidence on how disparities could be addressed at the individual level. However, there was no study focusing on addressing disparities at provider or health care system levels.

Discussion: Given that barriers to service have been documented consistently in existing literature, a few critical steps for future research are needed. Specifically, there are pressing needs for future studies to 1) continue understanding the mechanisms of different levels of disparities using more representative samples to inform interventions and policy; 2) expand the knowledge based on the framework of Kilbourne et al. (2006)'s health disparity research; 3) design and evaluate interventions targeting provider and healthcare system-level barriers.

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