

HEALTH DISPARITIES

BARRIERS TO HEALTHCARE AS A RESULT OF IMMIGRATION STATUS

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SO WHAT'S THIS ALL ABOUT?

- The health of individual populations has an effect on the efficiency of the economy and society as a whole.
- Lack of health insurance is linked to poorer quality of health care, lower rates of preventative care, and increased probability of death. [8]
- Low-income people, and especially low-income immigrants, lack health insurance and face greater barriers to accessing medical care. [5]
- Undocumented immigrants are more likely than their native-born counterparts to face poorer overall health due to lack of insurance.
- These groups face many barriers to accessing care and have limited access to coverage options.
- Barriers are a result of discrimination based on immigrant status, and further culminate in degradation of social health determinants like environment, education, and employment. [9]

MYTHS and MISCONCEPTIONS

MYTH: Immigrants reap benefits without contributing back to society of the economy!

FACT: A report by the Center of American Progress found that a policy of mass deportation of the approximately **11.3 million unauthorized immigrants** would, “immediately reduce the nation’s GDP by **1.4%**, and ultimately by **2.6%**, and reduce cumulative GDP over 10 years by **\$4.7 trillion.**” [6]

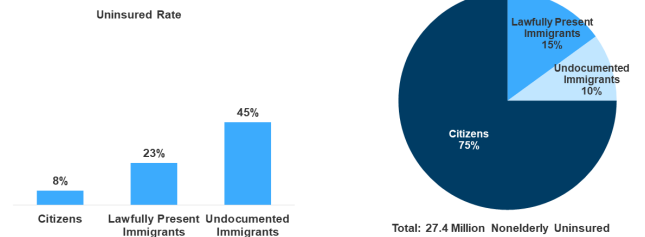
MYTH: Location and environment don’t contribute to health!

FACT: Challenging home and low-income community environments contribute to **detrimental behavior** risk factors such as smoking, obesity, substance abuse, and lower levels of physical activity. These communities also experience a higher level of **violence, discrimination, and material deprivation.** [8]

THE NUMBERS

How uninsured are they? | Why?

Uninsured Rates and Distribution of the Uninsured among the Nonelderly Population by Immigration Status, 2017

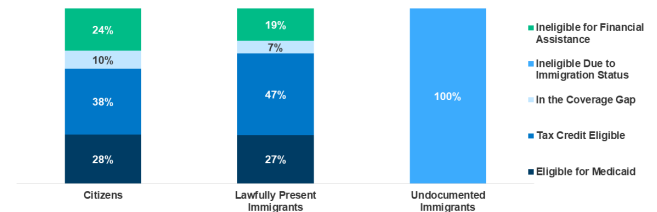


Note: Lawfully Present Immigrants and Undocumented Immigrants uninsured rates both statistically significantly different from Citizen uninsured rate at the p<0.05 level. Includes nonelderly ages 0-64. Source: Kaiser Family Foundation analysis of 2017 American Community Survey (ACS), 1-Year Estimates.



FIGURE 1

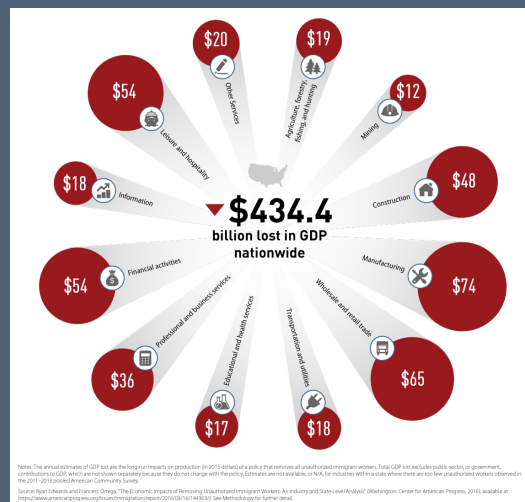
Eligibility for ACA Coverage among Nonelderly Uninsured by Immigration Status, 2018



Note: Totals may not sum to 100% due to rounding. Ineligible for Financial Assistance Share includes those ineligible due to offer of ESI or income. Tax Credit Eligible share includes adults in MN and NY who are eligible for coverage through the Basic Health Plan. Less than 1% of undocumented immigrants are eligible for fully state-funded coverage in some states that provide coverage regardless of immigration status. Includes nonelderly individuals ages 0-64. Source: KFF analysis based on 2019 Medicaid eligibility levels and 2018 American Community Survey.



FIGURE 2



Note: The annual losses of GDP are the long-run impacts on production in 2018 (total) of a policy that removes all unauthorized immigrant workers. Total GDP excludes credit sectors or government contributions to GDP which are not shown separately because they do not change with the policy. Estimates are not available for NA, for industries within a state where there are too few unauthorized workers to count in the 2011-2016 based American Community Survey. Source: Ryan Edwards and Francis Ortega, “The Economic Impacts of Removing Unauthorized Immigrant Workers: An Industry and State-Level Analysis” (Washington Center for American Progress, 2018), available at <https://www.americanprogressaction.org/issues/immigration/reports/2018/08/16/14493311/Imm-Multistudy.pdf> (see Methodology for further detail).

FIGURE 3 : AVERAGE ANNUAL GDP LOSSES FROM REMOVING UNAUTHORIZED IMMIGRANT WORKERS, BY INDUSTRY [DOLLAR AMOUNT BY BILLIONS].

POTENTIAL SOLUTIONS

WHAT SHOULD GOVERNMENT DO?

Proposed government action should offer an **expansion of health coverage**; create **better working environments**; increase availability of **safe, stress free, and easily accessible health care facilities** (especially in low-income areas with higher immigration populations).

ALTERNATIVES

1. EXPANSION OF IMMIGRANT WORK ELIGIBILITY AND REDUCTION OF WORKPLACE ABUSE/DISCRIMINATION

- This solution would tackle what seems to be the main underlying problem in health opportunity inequity: income and security.
- Lack of physical, mental, or financial security that comes with low-income is an additional aggravator to poor health outcomes.
- To combat this, we would implement reform to immigrant work policies: strictly enforcing training and safety procedures; offering proper equipment and work conditions; employers covering basic health care; streamlining the process of attaining and renewing of work permits, or having migrant status inconsequential to work eligibility.

2. EDUCATIONAL PROGRAMS

- This solution emphasizes educational programs as a means to promote early and frequent check-ups as preventative measures.
- Can be done through the implementation and expansion of evidence-based health education programs in low-income communities.
- As these interventions occur in places that the people live their lives, and within their own communities, better support and personal care is provided as a result of this proximity.
- Programs would also highlight that the treatment and addressing of mental ailments are just as important as physical ones.

FEASIBILITY/EFFECTIVENESS

- These potential solutions are not only feasible, but cost-effective and ultimately beneficial.
- Constant threats to safety, security, and wages are the greatest factors exacerbating health disparities in low-income communities.
- The implementation of more flexible labor laws and basic universal rights to workers could dramatically boost quality and timeframe of immigrant productivity.
- We understand the fiscal and economic harm as a result of a reduced, or completely absent undocumented immigrant workforce; therefore, it's safe to say that increased productivity would bring about a proportional fiscal and economic benefit. [7]

REFERENCES: FIGURES AND TABLES

Figure 1: Uninsured Rates and Distribution of the Uninsured among the Nonelderly Population by Immigration Status. Adapted from 'President Trump's Proclamation Suspending Entry for Immigrants without Health Coverage,' 2017, Kaiser Family Foundation

Figure 2: Eligibility for ACA Coverage among Nonelderly Uninsured by Immigration Status. Adapted from 'Health Coverage of Immigrants,' 2018, Kaiser Family Foundation

Figure 3: The national economy will suffer losses if unauthorized immigrant workers are removed. Adapted from 'The Economic Impacts of Removing Unauthorized Immigrant Workers,' 2016, Center For American Progress

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