

Access to Health Care for Undocumented Latinos in the United States



Background/Significance:

According to the American Journal of Law and Medicine, there are approximately 30 million non-citizens who live in the United States. Of those 30 million, 11.1 of them are undocumented and 81% of those undocumented are Latinos. Constituting a large sector of the undocumented population, it is important to analyze the accessibility to health care for the undocumented Latino community in the United States. While some health policies do allow gateway access to health care for undocumented Latinos, they simply shadow this population under these health policies, such as the Emergency Medical Treatment and Active Labor Act, as a way to ignore the controversial topic. The Emergency Medical and Active Labor Act mandates all hospitals and states to treat any patient in an emergency. However, this excludes the undocumented from receiving non-emergency care, such as primary care assistance. This creates a struggle for hospitals and states to establish the boundary between emergency and non-emergency as they do not get reimbursed for treating undocumented patients in a non-emergency setting.

Methods

Methods for my research included analysis on Literature Reviews:

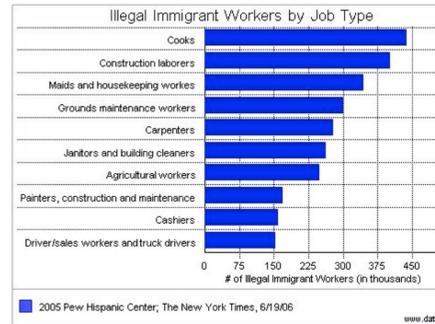
- American Sociological Association
 - Health Care For All: Immigrants in the Shadow of the Promise of Universal Health Care
 - American Journal of Law and Medicine
- As well as policies that affect the U.S. Health Care:
- Medical Emergency Treatment and Active Labor Act
 - Human Rights Model
 - Proposition 187
 - State Child and Health Insurance Program

Purpose/Research Objective

Accessibility to health care for the undocumented Latino community in the United States has been a controversial topic that seems to be disregarded by the new policies that are affecting the health care system in the U.S. today. These restrictions create marginalization and limited access to health care, reflecting in the confounding variables of socioeconomic status, cultural representation, and misconceptions of this community. Thus, this results in the efforts of blaming culture instead of access as to why the Latino population becomes so restricted to health care in the United States. This study will examine the correlation between cultural assumptions about the Latino community and the reality of the accessibility to health care they receive.

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Results



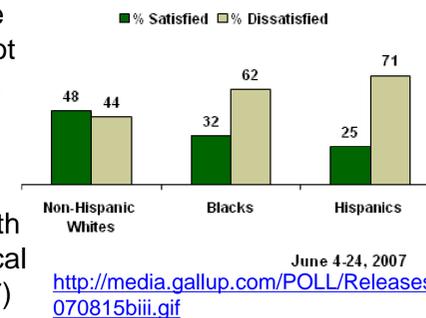
-Employment opportunities for the undocumented Latino populations are limited to low-wage, small firms, and labor-intensive jobs that do not provide access to proper health care. They have no access to employer-sponsored insurance, yet contribute to 15% of the U.S. economy (Adrienne Ortega, 2003).

http://www.data360.org/dsg.aspx?Data_Set_Group_Id=1492

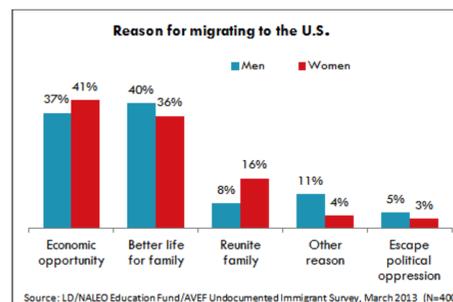
-It is important to take into account the preconceived ethnic and cultural patterns that are seen in Latino patients. Assume Latinos prefer the method of magical remedies such as rituals, teas and secret remedies versus logical medicine. However, in reality, 39% of Latinos report fear of their legal status as the cause of not receiving primary care (May L. Berk,

-Limited proficiency in the English language inhibits the quality of care they receive. Assume Latinos do not want to learn the English language, however Latino adults who migrate have a harder time learning a new language. Undocumented Latinos report lower rates of satisfaction with care and understanding their medical conditions. (Kathyn P. Derosé, 2007)

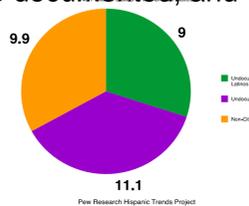
Satisfaction With Treatment of Immigrants
By race and ethnicity



-Assume low rate attendance in Latino children for doctor visits is caused by parents' unwanted desire to take them to receive care. In reality, many parents lack English proficiency, fear of deportation if they are undocumented and their children are documented, and limited knowledge of the U.S. Health policies.



<http://www.latinodecisions.com/blog/2013/04/15/poll-of-undocumented-immigrants-reveals-strong-family-and-social-connections-in-america/>



-Government assumes Latinos migrate to the United States for social services, hence the exclusion of health care expenditures. In reality, Latinos report the top reason for migrating is to find better job employments to support their families. (Adrienne Ortega, 2003)



Policy Recommendations

In analyzing these factors, solutions can be established to better aid the undocumented Latino population, such as implementing a bipartisan legislation policy for states/hospitals to get reimbursed from the government when treating undocumented patients with non-emergency care. This is important because hospitals spend millions of dollars treating undocumented patients after stabilization in the ER, burdening states with social costs. (Adrienne, 2003)

Conclusion

Based on the Human Rights Model, if the U.S. is accepting immigrants as human beings, then they accept that providing "basic preventive medicine and health care is not a right based on citizenship status, but a right as a human being." (Adrienne Ortega, Pg.189) It is important to focus on getting undocumented Latinos access to health care because Latinos are a rapid growing population with high levels of communal diseases. If these diseases are not being prevented and treated, they can spread at a rapid pace, endangering not only the Latino population, but other groups in the United States as well. Also, the longer the patient waits to receive care, the worse the health condition can potentially prolong. Once the problem becomes critical, they receive tertiary care in the Emergency Room, where by law they must be treated. This then correlates to more expensive cost for the government. These issues can be prevented if the federal government stops denying less expensive, primary care to undocumented Latinos.

Literature Cited

- Adrianna Ortega (2009). ...And Health Care For All: Immigrants in the Shadow of the Promise of Universal Health Care Retrieved by http://heinonline.org/HOL/Page?handle=hein.journalsam1med35&div=9&g_sent=1&collection=journals#
- Kathyn Pitkin Derosé, Jose J. Escarce, and Nicole Lurie (2007, September). Immigrants and Health Care: Sources of Vulnerability Retrieved by <http://content.healthaffairs.org/content/26/5/1258.short>
- Kathyn Pitkin Derosé and Benjamin W. Bahney (2009, January 29). Medical Care Research and Review Retrieved by <http://mcr.sagepub.com/content/66/4/355.short>
- Mary L. Berk and Claudia L. Schur (2001, July). The Effect of Fear on Access to Care Among Undocumented Latino Immigrants Retrieved by <http://link.springer.com/article/10.1023/A:1011389105821>