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# Immigrants and Health Care

## A Complex Picture

Immigrants to the United States are often identified as a vulnerable population—that is, at elevated risk of poor health and inadequate medical care. Studies have shown that, compared to the U.S.-born population, immigrants and their U.S.-born children typically have lower rates of health insurance, use less health care, and receive lower quality of care.

However, a recent article published by a team of RAND Health researchers shows that the picture is more complex. There are important differences among subgroups. Immigrants vary in ways that affect their access to care and quality of care, including differences in

- socioeconomic background
- immigration status
- limited English proficiency
- residential location
- stigma and marginalization.

Further, although limited English proficiency is related to poorer access to and lower quality of health care, an immigrant's first language may be an intervening factor. For example, the researchers cite a previous study that found that, among those with limited English proficiency, Spanish-speaking women in California were more likely to receive a Pap test over a three-year period than were women who spoke Vietnamese, Cantonese, Mandarin, or Korean.

Although most immigrants are relatively healthy and often experience better outcomes, including lower mortality, than their U.S.-born counterparts, their health often deteriorates over time in the United States. Limited access and poor quality of care likely play a role. That immigrants are a large and growing segment of the population—12 percent in 2007—has serious implications for the health of the nation.

The factors that make immigrants vulnerable to poor health and inferior medical care can be remedied, in part, through policies that apply to disadvantaged populations more generally, including those for living wages, access to education, decent housing, and safe jobs. However, health policies targeted specifically to immigrants will also likely be needed to expand access to care and improve quality. They include

- expanded health-insurance coverage through public- and private-sector initiatives
- broader implementation of cultural and linguistic standards for health care providers
- support of the medical safety net in communities that experience high influxes of immigrants.

This fact sheet is part of the RAND Corporation research brief series. RAND fact sheets summarize published, peer-reviewed documents.

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