Rule change chilled immigrants’ use of safety-net programs

Researchers from the UCLA Center for Health Policy Research analyze immigrants’ avoidance of public programs and how it impacted their access to health care in 2019. Data are for immigrant adults in California with incomes below 200% of the federal poverty level (FPL).

Being identified as a “public charge” — someone who is likely to be dependent on government aid as their primary means of support — affects whether or not an immigrant can live permanently in the United States.

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Of immigrants, by age

- 18–34: 34%
- 35–49: 28%
- 50–64: 17%

Race/Ethnicity

- Latinx immigrants: 30%
- Black immigrants: 45%
- White Immigrants: 14%

English Proficiency

- Immigrants who speak English only: 6%
- Immigrants who speak English very well or well: 25%
- Immigrants who do not speak English well or at all: 29%

Food insecurity rate

- Immigrants who avoided public programs: 54%
- Immigrants who used public programs: 36%

Uninsurance rate

- Immigrants who avoided public programs: 37%
- Immigrants who used public programs: 16%

Delayed needed medical care

- Immigrants who avoided public programs: 30%
- Immigrants who used public programs: 12%

*Estimate is not statistically reliable

Source: 2019 California Health Interview Survey

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