Introduction

People, Barack Obama



Introduction The overall health and quality of life has improved for most Americans over the past few decades. However, good health is usually associated with an individual's economic status, demographics, and ethnicity. It should be no surprise that minorities in the United States receive unequal treatment from the healthcare system. On the contrary, it is well known that many illegal immigrants are able to obtain free medical services as soon as they enter this country. This essay will analyze the many disparities in the healthcare system and strategies for making improvements. Illegal Immigrants and Free Healthcare Many illegal aliens cross the border in hopes of receiving free healthcare. The reason why illegal immigrants receive free healthcare is because of the Emergency Medical Treatment and Active Labor Act that was approved in 1986. This act requires hospitals to treat patients regardless of their citizenship status. Although this seems very unfair to the American taxpayer, this country would look barbaric if it allowed humans to die only because they were not citizens. Many Americans would agree that there is no other option but to provide healthcare to anyone that is suffering from a medical emergency. The fact that illegal immigration causes health risks to U. S. citizens is often ignored. Many people that enter the United States illegally come from countries that have contagious diseases that are rarely seen in this country. There have been many reported cases of dysentery, leprosy, and tuberculosis near the U. S. and Mexico border. An "article in the New England Journal of Medicine noted that a majority (57. 8%) of all new cases of tuberculosis in the United States in 2007 were diagnosed in foreign born persons" (Federation, par. 4). This illegal minority group is a potential danger to the healthcare of America

citizens. The cost of paying for healthcare of illegal immigrants puts a huge strain on the economy. These medical costs can put hospitals out of business, and the bills are transferred over to the American taxpayers. "The estimated cost of unreimbursed medical care in California was about \$1.4 billion a year. In Texas, the estimated cost was about \$. 85 billion, and in Arizona the comparable estimate was \$. 4 billion per year" (Federation, par. 9). This debt increases the cost of healthcare for all U. S. citizens. The issue of free healthcare for illegal aliens is an ongoing political debate. Mitt Romney, a current Republican presidential candidate, is under fire for signing in a program that helped illegal immigrants obtain free healthcare. This program is called the Health Safety Net, and was signed in when Romney was governor of Massachusetts in 2006. This program was popular because it also helped low-income families and minorities in the state of Massachusetts. "But now it could prove problematic for the Republican presidential hopeful, who has been attacking Texas Governor Rick Perry for sponsoring undocumented immigrants in Texas" (Reske, par. 3). The national debate is whether or not illegal immigrants should be allowed to have any government aid at all. In addition, the Obama healthcare plan is designed to not give undocumented immigrants free healthcare. The plan stresses that immigration reform is needed to help reduce the debt caused buy medical services. " He also staked out a position that anyone in the country legally should be covered — a major break with the 1996 welfare reform bill, which limited most federal public assistance programs only to citizens and longtime immigrants" (Dinan, par. 2). In general, the future of healthcare for illegal immigrants is unknown. With the developing immigration and healthcare

reforms, many changes will be seen with the benefits undocumented immigrants can receive. In particular, Latin Americans have been accused of exploiting their children by crossing the border and giving birth here. Since the babies are born here, they automatically become U. S. citizens. Nearly eight percent of all babies born in the United States in 2008 had at least one undocumented parent. "Lawmakers in Washington have been debating whether to change the 14th amendment, which grants citizenship to anyone born in the U. S. " (Dinan, par. 5). Some politicians suggest that citizenship should be revoked from people born to illegal immigrants. Doing this may inhibit illegal aliens from crossing the borders to get free healthcare for their children. Health Status Disparities of Minorities This country spends more on healthcare then any other nation in the world. Even with all of this spending, minorities are more likely to suffer from poor health. Proper medical care is especially more difficult to attain because of the current poor economy and high unemployment rates. Minorities have less access to healthcare because they cannot afford insurance. "The problem is particularly acute among the working poor and individuals who have no employment based insurance, and among whom minorities particularly Hispanic Americans, are over represented" (Institute of Medicine, 83). Since economic status is not equal in this country, the quality of healthcare is also unequal. During tough economic times, the overall health of racial and ethnic minorities depletes. Most minorities receive medical treatment at emergency rooms because they cannot be refused for lack of insurance. Racial discrimination also plays a role in the inequality of medical care. " Deliberate discrimination by many institutions in American society in the past had left a legacy of [social and]

economic inequality between whites and minorities that exists today...but legal evidence of discrimination in specific cases is not the same as statistical measures of the overall level at which discrimination exists" (Institute of Medicine, 73). Fortunately, race relations in the United States have improved greatly since the 1960's. Our society and culture today does not support any type of racial discrimination. However, negative stereotypes of minorities do make an impact on the quality of healthcare. " Even when income and education are controlled, minorities are more likely to receive care in the lowest quality facilities with the least likelihood of appropriate follow-up" (Institute of Medicine, 109). Some healthcare providers may perceive that a minority patient is unable to pay, thus resulting in lower quality services. The language barrier is also another barrier that prevents minorities from receiving equal treatment. It is essential for a doctor and patient to have good communication, and having poor English speaking skills creates a big challenge. Low quality health care is related to miscommunications between physicians and minorities. " More than 1 in 4 (25. 3%) Hispanic individuals in the United States live in a linguistically isolated household. Over half of Laotian, Cambodian, and Hmong families are linguistically isolated, white between 26%-42% of Thai, Chinese, Korean, and Vietnamese families live in similar conditions" (Institute of Medicine, 88-89). Most hospitals understand this issue and usually provide interpreters to ensure correct correspondence. Statistically, minorities have higher rates of diseases like diabetes, cancer, obesity, and HIV/AIDS. More specifically, African Americans are more likely to die from heart disease and cancer then whites. Research shows that African Americans are less likely to get bypass

surgery and angioplasty to treat complications of heart disease. "In 2000, death rates from coronary heart disease for blacks were thirty percent higher than for whites" (Patel and Rushefsky, 32). Some other studies show that African Americans have a higher death rate from heart attacks even when they are hospitalized. One of the top causes of death among African Americans between the ages of twenty-five and forty-five is HIV/AIDS. " African Americans accounted for forty percent of all AIDS cases since the beginning of the epidemic and forty-nine percent of cases diagnosed in 2004 alone" (Patel and Rushefsky, 35). The African American community is now recognizing that AIDS is a major health problem that can easily be eradicated with prevention. Another big health disparity that exists is how blacks are much more likely to die from homicide or accidental deaths. Violence is known to be a lot higher in African American neighborhoods. " The homicide rate for African Americans in 2000 was about six times higher then it was for whites" (Patel and Rushefsky, 32). This fact may show that differences in socioeconomic status and education can affect death rates. However, researchers have concluded that "even if socioeconomic effects were set aside, disparities experienced by African Americans will still remain because the differences in survival and health between African Americans and whites are not solely explained by poverty but also by rather unique experiences and cultural orientations of African Americans" (Patel and Rushefsky, 30). The culture and beliefs of the African American community as a whole contributes to poor health practices. " It has been argued that African Americans' cultural beliefs and health practices have major influence on their well-being regardless of their income and education levels because

they influence African Americans' lifestyle practices on health promotion, disease prevention, and healthcare maintenance" (Patel and Rushefsky, 52-53). Many African Americans have a very strong religious faith. They believe that prayer and faith in God is enough to provide them good health. This causes them to ignore medical symptoms because they feel that pain is a test of their faith. Also, having a strong spiritual commitment to a higher being means that they have no control over what happens to them during their life. African Americans often do not seek medical treatments because they believe that it is their destiny or an act of God. Also, they usually seek support of family and friends before going to the doctor. African Americans have extremely high rates of obesity, and this condition is known to cause debilitating diseases like cancer and diabetes. " Seven out of ten African Americans ages 18-64 are obese or overweight, and African Americans are 15% more likely to suffer from obesity than whites" (Health Disparities, par. 3). High obesity rates in Blacks can be blamed on the culture's high calorie diet and the unpopularity of exercise. They often have poor diets and lack the nutrition to maintain good health. One scholar suggests that "traditional African American dietary habits grew out of slave culture that relied on limited availability of different food sources and that slavery introduced new substances into African American consumption and new modes of thinking that have been detrimental to African American life" (Patel and Rushefsky, 55). The typical African American diet consists mostly of high saturated fats and carbohydrates, and lacks in vegetables and fruits. This kind of diet is a leading cause of high blood pressure and hypertension. The culture of an ethnic group is a major influence in the their quality of health. Hispanics are

the largest minority group in the United States, and experience the same poor quality of healthcare as African Americans. "Hispanics are at an increased risk for certain medical conditions such as diabetes, hypertension, violent deaths, alcoholism, tuberculosis, and human immunodeficiency virus (HIV) infections" (Patel and Rushefsky, 75). Similar to African Americans, Hispanics are typically overweight, less physically active, and usually do not seek medical help when symptoms arise. The diabetes rate for Hispanics is double that of whites. Latinos suffer more from diabetes complications such as amputations and blindness. "For example, Hispanic women born in 2000 have a 52. 5 percent risk and Hispanic men have a 45. 4 percent risk of developing diabetes in their lifetime, compared to 31. 2 percent risk for non-Hispanic white females and 26. 7 percent risk for non-Hispanic white males" (Patel and Rushefsky, 83). On the contrary, Hispanics have lower rates of breast, lung, colon, and prostate cancer then African Americans and whites. Genetic factors may be the reason why Hispanics statistically have less cancer cases. Another medical concern for Hispanics is depression and mental health. It has been reported that Hispanic women have a higher risk for postpartum depression when compared to white women. Also, young Hispanics are more susceptible to thoughts of suicide. In a study done in 2005, "more than 11 percent of all Latino students and 15 percent of Latino girls stated that they had attempted suicide compared to 7 percent of blacks and 7. 3 percent of whites. There are no theories as to why Hispanics have higher amounts of mental diseases. Some studies suggest that the language barriers in the United States and limited access to health services contribute to these issues. Most of the disparities in the health of minorities are

preventable. Heart disease and many case of diabetes can be alleviated with better eating and exercise habits. The culture and attitudes of minorities sometimes promote unhealthy ways of living. Some diseases, like cancer, can be caused by the genetic make up of ethnic minorities. Overall, the health of minorities is significantly different from the health of whites. Strategies for Improving Healthcare The United States struggles to provide equal healthcare to this country's ethnically diverse population. " Most of the variability in health status we find in the United States and other developed countries has little to do with healthcare and everything to do with one's position in the social hierarchy" (Barr, 1). The only way to improve the quality of medical care for minorities is to reform the healthcare system. The biggest problem for minorities is that they have limited access to healthcare because of the lack of insurance coverage. They do not have the resources to maintain routine medical care. Minorities are less likely to make regular doctor visits. " African Americans are almost twice as likely as non-Hispanic whites to be uninsured. High rates of uninsurance among this population occur despite the fact that over 8 in 10 African Americans are in working families" (Institute of Medicine, 85). Statistically, minorities have lower income rates and are unable to afford the high cost of health insurance. The majority of whites attain health insurance from their employers. Most minorities do have jobs that provide adequate healthcare coverage. "The probability of being uninsured among Hispanic Americans is 35%, compared with 17.5% for the general population" (Institute of Medicine, 87). In addition, Asian Americans have less insurance coverage when compared to whites. The rates vary among the different Asian groups, but Koreans are

less likely to have insurance. The high cost of health insurance is the main reason that prevents minorities from receiving quality healthcare. The new Affordable Care Act should help provide medical insurance for struggling minorities. "The Affordable Care Act not only includes provisions related to disparities reduction, data collection, and reporting, quality improvement, and prevention" (HHS, 7). Other programs include plans to help reduce the transmission of HIV/AIDS, prevent addiction to nicotine and cigarettes, and increase vaccinations for the flu. In addition, Michelle Obama has created a program called Let's Move. The goal of this program is to educate children about healthier eating and exercising. It is meant to reduce obesity rates in children and help them become healthier adults. The HHS Action Plan suggests that the best way to improve minority health is to provide insurance to the uninsured. "Removing barriers to coverage based on health status through the Affordable Care Act will offer an unprecedented opportunity for access to care for racial and ethnic minorities who have disproportionably higher rates of chronic disease" (HHS, 15). The ability to have health insurance promises higher quality health care. Another part of the plan is to increase the abilities of healthcare workers to communicate better with non-English speaking patients. Translation services will be improved upon and made more widely available. They hope to increase the ethnic diversity of the healthcare workforce. The next goal of the plan is to educate minorities about better health habits. It will develop programs that promote better health habits. Rural areas have higher risks of health disparities because it is more difficult to access doctors. The program will help to raise awareness of better health practices for minorities. "Funded

communities will work across multiple sectors to reduce heart attacks, cancer, and stroke by addressing a broad range of risk factors and conditions including poor nutrition and physical inactivity, tobacco use, and others" (HHS, 25). The strategies of the Affordable Care Act and the HHS Action Plan were developed to make healthcare for minorities more equal. It is still too early to tell if these plans have been effective. There have not been drastic improvements of the health and quality of medical services for ethnic minorities. These programs have also made improvements in how statistical data is collected. Gathering more information about the disparities in healthcare for minorities will aid in developing better services. The health disparities of minorities in this country is a troubling crisis in our healthcare system. Minorities in the United States have higher cases of preventable diseases. When compared to whites, minorities are more prone to diabetes, HIV/AIDS, and cancer. Obesity and lack of physical activity is a major contribution to the poor health of African Americans and Hispanics. Also, many minorities do not have adequate healthcare coverage. The lack of health insurance and high costs of medical care makes it nearly impossible for many minorities to make regular doctor visits. Certainly, racism from healthcare workers can make it difficult for minorities to get quality services. It is well documented that minority patients do not receive equal healthcare when compared to whites. The government has started to create programs to help alleviate these differences. The Department of Health and Human Services has promised to make improvements in the health disparities of minorities. The new health reforms will hopefully make health insurance more attainable for minorities. However, noticeable improvements of the

health of minorities in this country will not be seen for a few more years. Bibliography American College of Physicians. Racial and Ethnic Disparities in Healthcare. Philadelphia: American College of Physicians, 2010. Print. Balsa, Ana, Cao, Zhun, and McGuire, Thomas. "Does Managed Healthcare Reduce Healthcare Disparities Between Minorities and Whites? "The Journal Of Health Economics, pp. 101-121, 2007. Print Barr, Donald. Health Disparities in the United States. Baltimore: John Hopkins University Press, 2008. Print. Dinan, Stephan. Obama: Legalize Aliens to Get Them Health Care. The Washington Times. September 18, 2009. Print. Federation for American Immigration Reform. http://www.fairus.org/site/News2?page= NewsArticle&id= 16742&security= 1601≠ws iv ctrl= 1007. Website. "HHS Action Plan to Reduce Racial and Ethnic Health Disparities. " Department of Health and Human Services. 2008. Print. Institute of Medicine. Unequal Treatment: Confronting Racial and Ethnic Disparities in Healthcare. Washington D. C.: The National Academies Press, 2002. Print Patel, Kant and Rushefsky, Mark. Health Care in America: Separate and Unequal. Armonk: M. E. Sharpe, 2008. Print. Reske, Paul. Romney Underfire for Free Healthcare to Illegals. Newsmax. com October 24, 2011. Website.