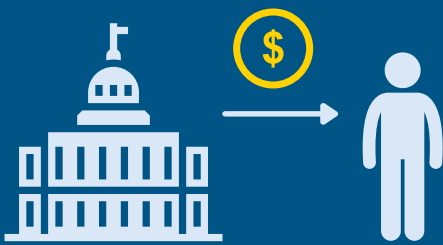


Rule change chilled immigrants' use of safety-net programs

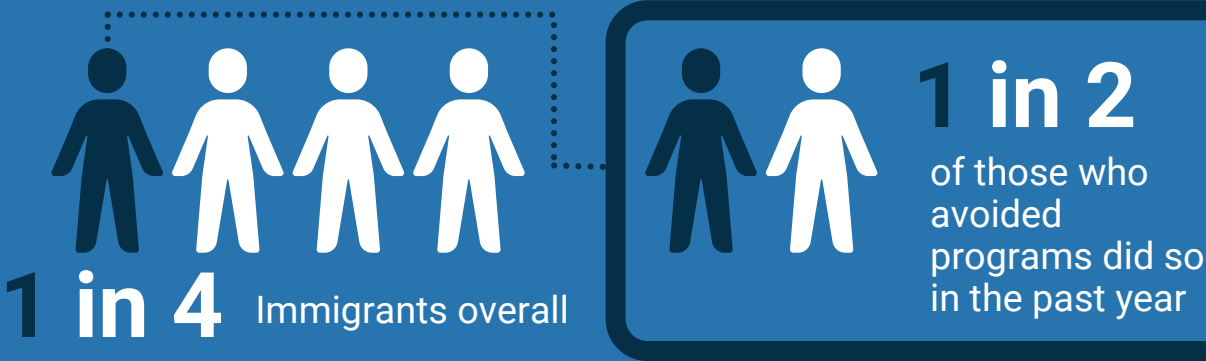
Researchers from the UCLA Center for Health Policy Research analyze immigrants' avoidance of public programs and how it impacted their access to health care in 2019. Data are for immigrant adults in California with incomes below 200% of the federal poverty level (FPL).

Background

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.



Immigrants who avoided public programs out of fear it would negatively impact immigration status, by category



Citizenship Status



16%
of naturalized residents



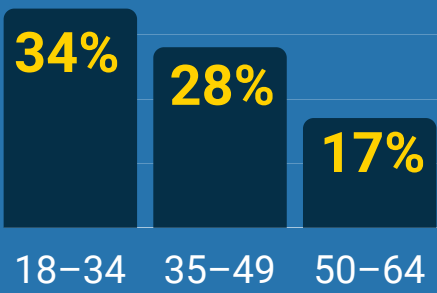
27%
of lawful permanent residents



42%
of noncitizen (not permanent) residents

Age

Of immigrants, by age



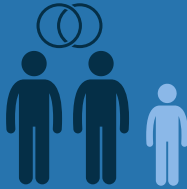
Race/Ethnicity

Race/Ethnicity	Percentage
of Latinx immigrants	30%
of Asian immigrants	14%
of Black immigrants	45%*
of White Immigrants	6%*

Family



17%
of immigrants with no children



36%
of married immigrants with children



32%
of single immigrants with children

English Proficiency

6%* of immigrants who speak English only

25% of immigrants who speak English very well or well

29% of immigrants who do not speak English well or at all

Disparity in food insecurity and health care access among immigrants who did/did not avoid public programs in the past year

	Immigrants who avoided public programs	Immigrants who used public programs
 Food insecurity rate	54%	36%
Uninsurance rate	37%	16%
Delayed needed medical care	30%	12%