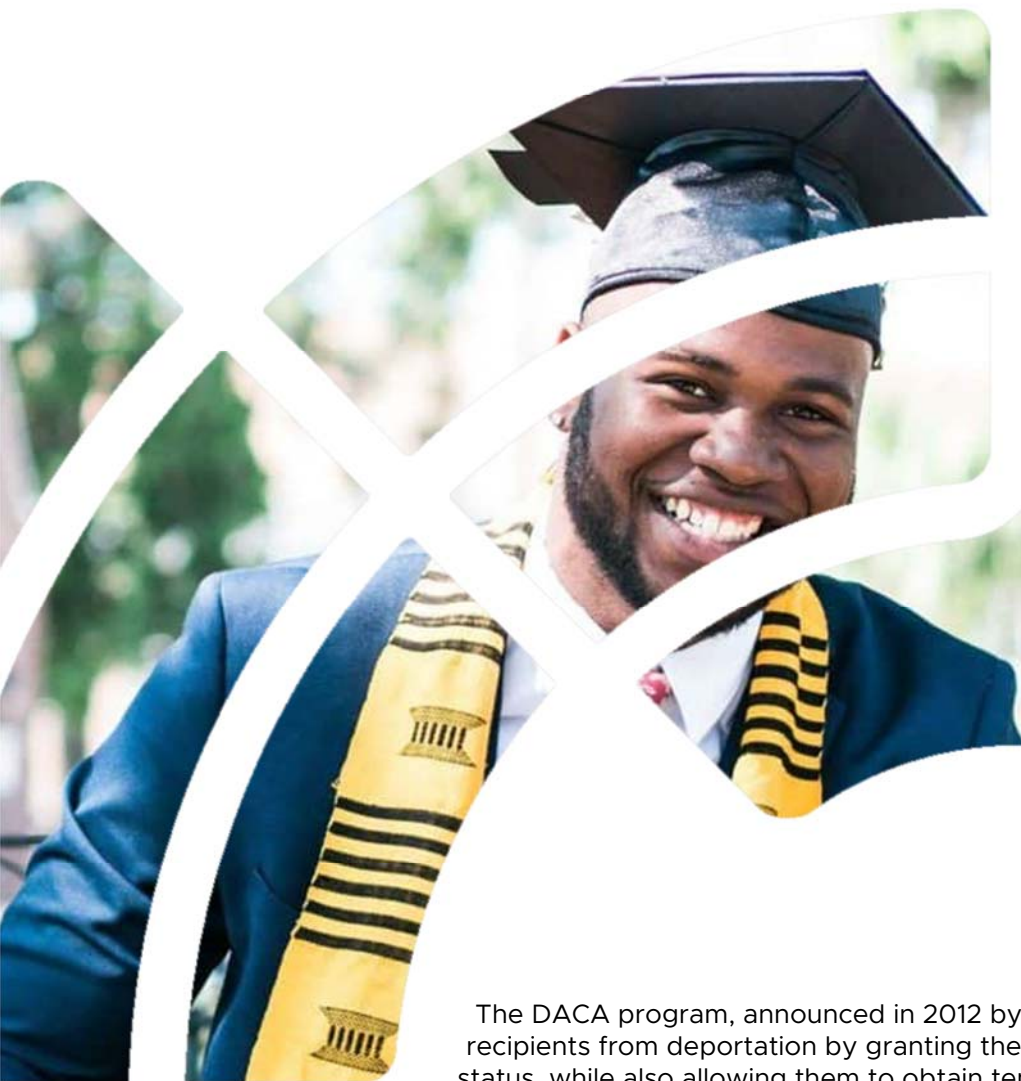


# DEFERRED ACTION FOR CHILDHOOD ARRIVALS (DACA): A PRO-HEALTH POLICY

MARCH 2018



## INTRODUCTION

The DACA program, announced in 2012 by President Obama, protects recipients from deportation by granting them two years of deferred action status, while also allowing them to obtain temporary work authorization. In the fall of 2017, the Department of Homeland Security (DHS) initiated the “orderly phase out” of the program.

In the almost six years of its existence, DACA has had a significant positive impact on the health of both our immigrant communities and overall public health. Both rigorous scientific studies and extensive anecdotal evidence illustrate the connection between DACA policy and immigrant health and safety, access to health coverage and care, and our health care workforce.

The way to build healthier communities is by building healthier families. Families where parents can work and care for their children, and everyone has what they need—health care, nutritious food, a safe home, and other necessities—to reach their full potential. As

Dreamers' fate is debated in Congress with increasing delays on a final decision, it is important to support their good health and continue the benefits we have seen by continuing protection of the 690,000 current Dreamers nationwide (as of September 2017)<sup>1</sup>, including the 17,000 in Colorado, as well as the 3.6 million more who could qualify for this status should the program continue.<sup>2</sup>

## EFFECTS ON DACA RECIPIENTS' HEALTH

### MENTAL HEALTH

**The two-year period free from detention and deportation afforded to DACA recipients has had many important psychological benefits.**

The transition from being without documentation to having lawful presence corresponds with reports of improved well-being. One study showed that as a result of DACA, mental health improved substantially for Asian Pacific Islander young adults enrolled in the program.<sup>3</sup> In particular, they showed an improved overall sense of well-being, including reduced stress and fear of deportation, and less reluctance to seek health care. Prolonged stress over a period of time has a long-term effect on the body, which is also known as toxic stress – and this study indicated a decrease in toxic stress.



#### DACA RECIPIENTS SPEAK OUT<sup>3</sup>

“[DACA] helped me not be concerned about being a burden for my family, because I felt like I was just a financial sink for the longest time.”

“Now that I have DACA and I have paperwork I'm not afraid of getting deported like in the hospital.”

Additionally, a 2017 Stanford study found that **children whose mothers were protected from deportation by DACA had 50% fewer diagnoses of adjustment and anxiety disorder** than children with mothers who did not qualify for the program and did not receive the same protections.<sup>4</sup> Protecting immigrant parents from deportation led to immediate and sizable improvements in the mental health of their U.S. citizen children.



1. López, G and Manuel Krogstad, J. (2017, September 25). Key facts about unauthorized immigrants enrolled in DACA. Retrieved March 21 from <http://www.pewresearch.org/fact-tank/2017/09/25/key-facts-about-unauthorized-immigrants-enrolled-in-daca>.
2. Gomez, A. (2018, January 18). There are 3.6M 'DREAMers' — a number far greater than commonly known. Retrieved March 21, 2018, from <https://www.usatoday.com/story/news/nation/2018/01/18/there-3-5-m-dreamers-and-most-may-face-nightmare/1042134001>.
3. Sudhinaraset, M., et al. (2017, January). The Influence of Deferred Action for Childhood Arrivals on Undocumented Asian and Pacific Islander Young Adults: Through a Social Determinants of Health Lens. Retrieved March 21, 2018, from [http://www.jahonline.org/article/S1054-139X\(17\)30051-4/fulltext](http://www.jahonline.org/article/S1054-139X(17)30051-4/fulltext).
4. Hainmueller, J., et al. (2017, August 31). Protecting unauthorized immigrant mothers improves their children's mental health. Retrieved March 21, 2018, from <http://science.sciencemag.org/content/early/2017/08/30/science.aan5893>.
5. Wong, T., et al. (2017, September). National DACA Study. Retrieved March 21, 2018, from [https://cdn.americanprogress.org/content/uploads/2017/11/02125251/2017\\_DACA\\_study\\_economic\\_report\\_updated.pdf](https://cdn.americanprogress.org/content/uploads/2017/11/02125251/2017_DACA_study_economic_report_updated.pdf).
6. Colorado Center for Nursing Excellence. (2015, February). Colorado's Future Healthcare Workforce and the Role of Advanced Practice Registered Nurses. Retrieved March 21, 2018, from <https://campaignforaction.org/wp-content/uploads/2016/04/APRN-Report-CO.pdf>.

## COVERAGE & ACCESS

**Fifty-seven percent of DACA recipients nationally were able to access employer-sponsored coverage due to their protected status and work authorization.<sup>5</sup>**

Health care coverage not only offers financial security and peace of mind, but it is also vital to living a healthy life. Insurance is also linked to consistent access to care and preventive services. By accessing preventive services and regular check-ups, DACA recipients avoid the accumulation of preventable health conditions. Additionally, with regular access to more economical primary care, there are fewer avoidable costs of treatment in emergency rooms, which then reduces the need for hospitals and payers to pass uncompensated care costs along to other patients in the form of higher prices or premiums.

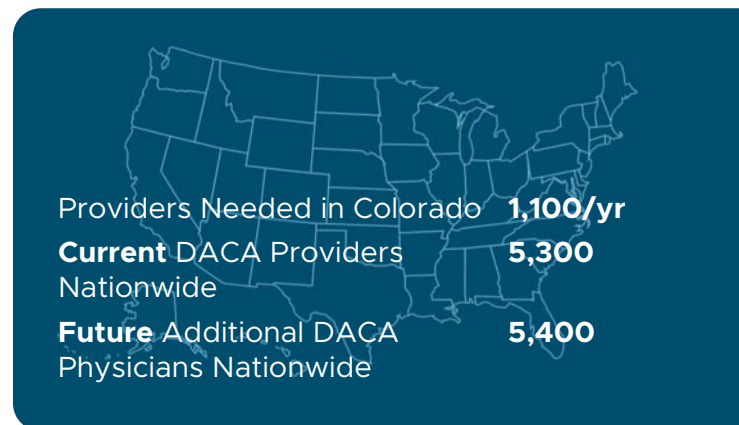
## EFFECTS ON PUBLIC HEALTH

### HEALTH CARE WORKFORCE

**Dreamers are nurses, physician assistants, medical technicians, respiratory therapists, and doctors.**

Rescission of the DACA program especially threatens the Dreamers working in health care fields, which challenges our health care provider shortage in Colorado. With our population both growing and getting older, Colorado will need 1,100 new physicians, advanced practice registered nurses, and physician assistants each year for the coming decade.<sup>6</sup> Currently, about 5,300 DACA recipients work as health care practitioners, and an additional 8,600 work in health care support roles.<sup>7</sup> Plus, if DACA continues, the program will add roughly 5,400 physicians nationwide who would otherwise be ineligible to work in the United States over the next few decades.<sup>8</sup>

With the participation of Dreamers in our workforce, we are able to diversify our workforce, which helps with patients from diverse cultural backgrounds who need providers who are culturally responsive. This increases trust in health care and health outcomes. Currently, more than 25 percent of providers are immigrants, with in-demand job categories like home health aide and nursing assistant becoming increasingly filled by immigrants.<sup>9</sup> An acute shortage of home health workers would be problematic in meeting our aging populations' needs and desires for long-term care. The DACA program has given educational and work opportunities to people who otherwise would not have them, and without a decision on the DACA program, we not only put their futures at risk, we also are risking our own.



7. Zong, J., et al. (2017, November). A Profile of Current DACA Recipients by Education, Industry, and Occupation. Retrieved March 21, 2018, from <https://www.migrationpolicy.org/sites/default/files/publications/DACA-Recipients-Work-Education-Nov2017-FS-FINAL.pdf>.
8. Madara, J.L. (2017, September 5). AMA Urges Congress to Take Action to Retain DACA Program Protections. Retrieved March 21, 2018, from <https://www.ama-assn.org/ama-urges-congress-take-action-retain-daca-program-protections>.
9. Scheiber, N. and Abrams, R. (2017, September 6). What Older Americans Stand to Lose if 'Dreamers' Are Deported. Retrieved March 21, 2018, from <https://www.nytimes.com/2017/09/06/business/economy/daca-dreamers-home-health-care.html?mcubz=1>.
10. Dr. Gonzales, R. and Bautista-Chavez, A.M. (2014, June 16). Two Years and Counting: Assessing the Growing Power of DACA. Retrieved March 21, 2018, from <https://www.americanimmigrationcouncil.org/research/two-years-and-counting-assessing-growing-power-daca>.

Additional credit to Community Catalyst for overall framing and messaging guidance.

## PUBLIC SAFETY

**Under DACA, recipients are able to move through their daily lives without having to constantly look over their shoulders, resulting in better peace of mind and better relationships with local law enforcement.**

This has positive effects on public safety as it increases the likelihood of victims and witnesses reporting crimes, such as robbery, domestic abuse, or assault, and relieves individuals of fear of endangering themselves and their families by contacting the authorities.<sup>10</sup> This makes neighborhoods and communities across the United States safer for everyone.

## CONCLUSION

Dreamers are a vital part of our communities—they are our friends, neighbors, and coworkers. They came to this country as children with their parents, and they know no other home. Immigrant families pay billions in taxes to help support all government programs, and immigrant workers and families are crucial to the success of important community services such as health care and education. DACA has freed immigrants from the mental and emotional burden of living in the shadows, in constant fear of deportation. It has been shown to be an asset, rather than a liability, when it comes to Colorado's health care workforce, and serves to augment the efforts of patient-centered quality care. The program has increased public safety and mental health, which is a win for all US communities. Once Dreamers have a pathway to citizenship and their families have the stability they need, we can get on to building a healthy future where all children can learn, parents can work, families grow strong, and we all have what we need to contribute to our full potential.

## ABOUT THE AUTHOR

At Center for Health Progress, we believe our health care system should work for all Coloradans. So, we bring people together to ensure factors like race, income, and ZIP code don't determine a person's access to care and opportunity to live a healthy life. When we uncover commonsense solutions to these complex challenges, we get closer to ensuring our health care system works for everyone. **Because when our neighbors are healthy, our communities prosper, and Colorado is stronger.**

*For more information or other resources on immigrant health in Colorado, contact Aubrey Hill, Director of Health Systems Change, at [aubrey.hill@centerforhealthprogress.org](mailto:aubrey.hill@centerforhealthprogress.org).*

