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Maternal Healthcare for Latinx Women in America

It has been a long standing issue whether or not undocumented immigrants should receive the same health benefits as American citizens. However, their status leaves many immigrants without accessible healthcare and other disparities that are large obstacles. As access to healthcare services can be difficult for all undocumented immigrants, it is especially hard for women with children. Latinx women typically will sacrifice their own health care in order to take care of their children, many who are born in the United States, and therefore can receive the benefits. First hand accounts of women say they face racial discrimination during health visits, affordability and accessibility issues, and most of all fear. All of these hinder Latinx women from accessing safe and equal services. Assessing community perceptions and utilization of health care resources in order to improve health equity among the Latinx community at both the county and state level is crucial.

In the book *Fear, Boldness, and Familiarity: The Therapeutic Landscapes of Undocumented Latina Immigration*, author Rebecca Lane draws details about how undocumented Latinx women face the fear of transportation to the doctor's office and deal with low quality health care due to their status. This source is useful because the author interviews women in Atlanta, Georgia to get first hand experience about their reproductive health and child care.

There are recurring themes that all the women discuss are barriers to their health care. The first is immigration status fear. The chapter begins with a shocking statistic. As of today, there are less than a dozen low-cost reproductive services in Atlanta.¹ Since there is limited access to health care services, the available medical center can be difficult to reach. Especially since the HB 87 passing, which allows police officers to ask anyone for their documentation papers, women are more afraid to drive in fear of getting pulled over.² Paz, a Mexican immigrant says, “The police, they are making a lot of the stops and taking people. They are not doing that for criminals – they’re really looking for immigrants, Hispanics.”³ Most of the women end up taking public transportation or walking for hours just to get a mammogram.

Another fear across all pregnant women is documentation required at the doctor’s office. Many of the women don’t understand that health care providers do not require documentation proof of their patients. However, the women’s decision on going to the doctor for maternal care is weighed on whether they may be deported or not. Clara, a young Mexican immigrant with 4 children says, “A lot of people are scared that if you go to the hospital they won’t help you, because you’re not legally here...Many people that I know, they don’t go at all during the 9 months, until they give birth.”⁴

The second largest barrier for women’s healthcare aside from immigration status is the lack of kindness and respect. To many of the women, the language difference leads to not-so-good quality care. A recent study suggests that there is a significant correlation with poor educational backgrounds and low patient-quality care. When the patient cannot understand some

¹ Lane, Rebecca. “Fear, Boldness, and Familiarity: The Therapeutic Landscapes of Undocumented Latina Immigrants in Atlanta, Georgia.” *International Journal of Health Services* 49, no. 3 (July 2019): 522.

² Ibid, 525.

³ Ibid, 526.

⁴ Ibid, 527.

of medical terminology, it can create confusion and a social distance between the doctor.⁵ The women feel that since patients cannot form a connection with the doctor, it can be very difficult to have patience, and therefore doctors can be less sympathetic and crude. However, some of the women attribute the doctor's insensitive attitudes to them not being able to adapt to different cultural requirements and the overcrowding American healthcare system.⁶

In this chapter, the fact that women are afraid to go to the doctors in fear of deportation may not be surprising. What is surprising is the fact that they did not always blame the bad quality of the healthcare entirely on the doctor's xenophobic beliefs, but rather on the American healthcare system as a whole. It gives some good insight about how to help these undocumented immigrants have better access to care. If the healthcare system became less crowded, the doctors could be able to spend more time and get to know their patients on a cultural level, which could remove the fear label of going to the doctor.

In the Targeted News Service newspaper article "Latina Institute for Reproductive Health Opposes Defunding Planned Parenthood", it brings a new perspective into what maternal health programs are already available for Latinx women. Instead of looking into what the Latinx community is lacking in terms of healthcare, it looks at what resource it does have: Planned Parenthood. Planned Parenthood is one of the only healthcare programs that provides essential reproductive care, regardless of documentation status. However, there have been issues on the

⁵ Floyd, Megan Leslie. "Are Community Health Centers Spaces for Patient-Centered Care? Using Intersectionality to Uncover The Quality of Physician Care for Hispanic/Latinx Subgroups." University of Hawai'i at Manoa, 2019. ProQuest Dissertations Publishing (13814802).

⁶ Lane, "Fear, Boldness, and Familiarity: The Therapeutic Landscapes of Undocumented Latina Immigrants in Atlanta, Georgia," 528.

replacement of the Affordable Care Act and the defunding of Planned Parenthood and how the National Latina Institute for Reproductive Health is reacting to this.

In 2017, the Affordable Care Act was planned to be deactivated by the Republican-led House Committee because of the loss of jobs, controversy over free birth control, etc. This bill would remove funding for Medicaid and Planned Parenthood, both of which are essential programs used by the Latinx and other minority communities. As Executive Director of National Latina Institute for Reproductive Health, Jessica Gonzalez-Rojas says, “Planned Parenthood health centers are the only healthcare providers they will see: it is where they go to get essential reproductive care such as routine reproductive health exams, obtaining contraceptives, cervical cancer screenings, breast cancer screenings, pregnancy tests and STD and STI screenings.”⁷ It is a serious issue that these services for low-income women of color are removed because these are essential healthcare necessities.

Essentially, the removal of the ACA specifically targets the Latinx community because most of these women are impoverished and rely on Medicaid to cover their healthcare. This does not make sense, because removing Planned Parenthood and Medicaid would be leaving millions of people who need it the most without any coverage.⁸ The Latinx community does not accept that their right to quality healthcare should be removed.

If the government were to remove funding of the ACA, immigrants argue that there are no other programs that bann discrimination in healthcare based on gender identity and pregnancy. The decision to weaken the protection of ACA would continuously build up barriers

⁷ “Latina Institute for Reproductive Health Opposes Defunding Planned Parenthood,” *Targeted News Service*, March 9, 2017. (accessed April 18, 2020).

⁸ “Latina Institute for Reproductive Health Opposes Defunding Planned Parenthood,” March 9, 2017.

to equal, quality healthcare, which is already a large issue for the Latinx community. The National Latina Institute for Reproductive Health is the only national reproductive justice organization taking action by communicating, leading, and advocating for policy change for the Latinx communities.⁹

The last chapter read was *The politics of resilience and resistance: Health care access and undocumented Mexican motherhood in the United States*, written by Elizabeth Farfán-Santos. She explores the life of undocumented Mexican mothers specifically living in Houston, Texas, and argues that over the generation of alienation and exclusion, undocumented Mexican immigrants have regularly confronted a prohibiting health-care system despite marginalization and the fear of deportation. This read also helps address other questions such as: How does healthcare affect children who are undocumented?

Santos interviews some women on their first hand experience with the healthcare system and does some research on the question: What are your concerns about the healthcare system as a mother?

Santos begins by interviewing Claudia Garcia, a mother with a child who has a hearing disability. She goes on to answer her research question about healthcare by talking to mother's of undocumented children. As mentioned earlier in the paper, documented children could have access to health benefits by being an American citizen. What about undocumented children? According to the Hearing Loss Association of American, children under the age of 21 should have their hearing aids/devices paid for.¹⁰ However, in Garcia's case, her child is not an

⁹ "National Latina Institute for Reproductive Health Issues Statement on Affordable Care Act," *Targeted News Service*, May 25, 2019. (accessed April 22, 2020).

¹⁰Farfán-Santos, Elizabeth. "The Politics of Resilience and Resistance: Health Care Access and Undocumented Mexican Motherhood in the United States." *Latino Studies* 17, no. 1 (03, 2019): 69.

American citizen, so she did not have the constant funding she needed to pay for new hearing aids.

Santo's second target is answering the research question: What do women in Houston have concerns about the most? For some background information, except for Emergency Medicaid, no federal money goes towards healthcare for undocumented immigrants. With no baseline support, it can be very difficult for women to find time and energy for healthcare. One of the main concerns mothers worried about was the 2016 presidential election. Because President Trump was so adamant about deporting illegal immigrants, women began feeling scared of transportation itself, not necessarily the medical service.¹¹ The second piece of information Santos collects is that if women did have American children, all of them would give up their own healthcare to take care of them. Many women say that going to the doctor takes up financial resources, emotional energy, time, and days of work that they just can not afford to lose. Women report having to wait for hours to receive care, just for it to be low-quality.¹² It can be very challenging for undocumented mothers to find time for themselves while prioritizing their children. However, a recent study suggests that in households where Spanish is primarily spoken, mothers are less likely to report their children's developmental or behavioral disorders.¹³

Latinx women all over America face the issue of accessing healthcare mainly due to their documentation status, racial judgement, and quality of treatments. Everyday Latinx women go in fear that going to the doctor's office will lead to the deportation of themselves and possibly their children. It would be beneficial for the healthcare system to instow trust within their Latinx

¹¹ Ibid, 77.

¹² Ibid, 81.

¹³ de Cuba, Stephanie Ettinger, et al. "Maternal Place of Birth, Socioeconomic Characteristics, and Child Health in US-Born Latinx Children in Boston," *Academic Pediatrics*. 20. 10.1016/j.acap.2019.09.005: 18.

patients and connect with them on a cultural level. That way, these women can have a safe place to discuss their health. However, on a grander scale, it would be helpful to reinstate driver's licences for undocumented immigrants. It could allow the undocumented to have access to the necessities of life without fear. Lastly, some questions to part with: Could more education about undocumented immigrants circumstances help alleviate some of the obstacles within the healthcare system?

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