

# Research examines gender gaps in immigrant health

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A key focus of the health care debate has involved immigrants and their impact on the U.S. health care system.

A new study shows that Mexican Americans most integrated into the culture -- including those born in the United States -- are more likely to require resources to manage their [health conditions](#) than more recent immigrants to the U.S., according to researchers at Duke University, Rice University and the University of Colorado Denver.

"The implications of these findings run counter to the popular belief that recent immigrant arrivals are taxing the U.S. [health care system](#)," says Jen'nan Read, associate professor of sociology and global health at Duke and co-author of the study.

In particular, their research reveals that this pattern of declining health among immigrants who are in the U.S. the longest holds more strongly for men than women. Conversely, the research indicates that, among new arrivals, women report poorer health than men.

The study, published online this week in the peer-reviewed [Journal of Health and Social Behavior](#), examines [gender differences](#) in Mexican immigrant health using data from the 1998-2007 National Health Interview Survey.

"From a public policy perspective, we examine medical conditions that are life-threatening and costly to treat," says Read. "This allows us to

illuminate the differential impact that Mexican immigrant men and women may have on the U.S. health care system, given that men and women typically suffer from different health conditions."

Read, lead author Bridget Gorman of Rice University and co-author Patrick Krueger of the University of Colorado Denver found that the major mechanism driving these patterns is access to and utilization of health care. Women are more likely to interact with the health care system because of their roles as family caretakers, in which they are more likely to be in contact with doctors and, therefore, more aware of their ailments, says Read.

In contrast, male immigrants, especially newer arrivals, are much less likely to interact with the health care system, and therefore may not know they are sick. Over time, male immigrants become increasingly likely to interact with the health care system, and thus the gap between men and women begins to close.

"The implication for public policy is that we should aim to increase immigrants' interactions with the health care system at a much earlier stage of arrival, when the onset of disease is at a much more manageable and less costly stage of treatment," Read says.

**More information:** The study is viewable at <http://hsb.sagepub.com/content/51/4/440.full>

Provided by Duke University

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