

The health status of migrants and access to health care in the UK

Synopsis

This project explores the relationship between migrant status, material circumstances, health, and access to health care by analysing quantitative evidence on migrants' health status and access to health care in the UK, using data drawn from national datasets. While concern is growing about the health of some categories of migrant and barriers that they face in accessing health care, much of the evidence available in national data sets such as the Health Survey for England and the Millennium Cohort Study has not yet been analysed specifically for foreign born sections of the population, and particularly recent migrants with residence of 10 years or less in the UK. The intention of the project is to use existing statistics to provide a descriptive account of the health of migrants and their access to and uptake of health care in the UK, including the extent to which length of stay in the UK affects health status and access to care. The findings will provide an evidence base and new insights for future policy making and service delivery as well as identify gaps in the evidence base for the future research agenda.

Background

There have been significant changes in the size of migration to the UK in recent years, together with a shift in the pattern of in-migration to one that is vastly diverse in countries and regions of origin, ethnicity, faith, legal status, age, reasons for and means of migration. Former work permit holders and those entering on the new points-based scheme, international students, migrants coming to form or rejoin families, asylum seekers and, recently, migrants from Eastern and Central Europe, may have differing health needs and do have differing entitlements to primary and hospital care depending on their immigration status and their country of origin. The health status of migrants and their access to health care are seen as key indicators of 'integration' within receiving societies, alongside housing, employment and education. However, there is growing evidence that migrant status and minority ethnic grouping, often in interaction with poverty and deprivation, are significant risk factors for poor health outcomes in the UK such as mortality, self-perceived ill-health, and morbidity. Inequalities also exist in access to, uptake of and satisfaction with health care services experienced by minority ethnic groups, which in turn have impact on poor health outcomes.

The ESRC Centre on Migration, Policy and Society (COMPAS) at the University of Oxford conducts high quality research in order to develop theory and knowledge, inform public opinion and contribute to policy debates on migration.

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Health inequalities experienced by ethnic minorities have been of concern for some time but those of migrants in particular has risen following studies on categories of migrant such as asylum seekers, reports on the prevalence of particular diseases such as TB, and concern about the impact on health services of the recent arrival of large numbers of migrants from the enlarged EU area. A preliminary examination of key national surveys, such as the Health Survey for England and the Millennium Cohort Study, however, reveals that there is a range of data on aspects of migrant health that has as yet not been drawn out and brought together.

Aims

The aim of the research is to examine the relationship between migrant status, material circumstances, health, and access to health care by drawing upon quantitative evidence on migrants' health status and access to health care in the UK in national data sets. In the light of broader evidence that overall minority ethnic groups have poorer health outcomes and rates of access to and uptake of health care than the majority population in the UK, the main research question in this project is: is there a *migrant* penalty in health status and access to health care, taking into account differences in migration history, length of residence in the UK, language, religion, gender and age, within and between migrant groups? Focus is particularly upon recent migrants, that is, those who have arrived in the UK within the last 10 years, and on whether their experiences differ from those of more established migrants as well as the UK-born population.

Methods

Methods of research involve secondary analyses of existing large scale national datasets including the ethnic minority boost data in the Health Survey for England 2004 and the Millennium Cohort Study Sweeps 1 and 2. The former survey will provide information about migrants of all age groups while the latter survey has specific focus on migrants who are at an early stage of parenthood, and therefore will enable exploration of health experiences around pregnancy and birth.

Current work in progress

Datasets have been identified and initial analyses are underway. The results of this research will form the basis of a grant proposal to undertake further, primary research with migrants, health-related migrant organisations and primary care trusts in one local area to fill identified gaps in evidence on the health experiences and needs of migrants living in the locality.

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