CRITICAL CARE:
The Role of Immigrant Workers in U.S. Health Care

As the public debate over health care reform continues to rage, mention is seldom made of the vital role that immigrants play in the health care workforce of the United States. If immigrants are mentioned at all, it is usually in the context of heated discussions about whether or not unauthorized immigrants will, or should, be included in any of the health care bills now circulating in Congress. Lost in this debate is the simple demographic fact that immigrants are a critical component of the health care workforce at both the high-skilled and less-skilled ends of the occupational spectrum. Most notably, immigrants comprise more than one-quarter of all Physicians and Surgeons in the United States, and roughly one-fifth of all Nursing, Psychiatric, and Home Health Aides.

Immigrant health care workers are employed in occupations that are not only expected to experience relatively high labor demand over the coming decade, but in which there are already pronounced worker shortages in many parts of the country. Even if more native-born workers are drawn into health care professions in the future, the role that immigrants play in providing health care services is likely to increase as the U.S. population continues to age\textsuperscript{1} and the growing population of senior citizens requires more medical care.\textsuperscript{2} In the case of doctors and nurses, recent projections indicate that even if medical-school and nursing-school graduation rates rise among the native-born, this will not be sufficient to prevent shortages, at least in the near term.

Immigrants are a critical component of the workforce at all skill levels in the nation’s largest health care occupations {Figure 1}.\textsuperscript{3}

- Immigrants accounted for more than one-in-four (27.3 percent) of all Physicians and Surgeons in 2006.
- Immigrants accounted for one-in-five (20.1 percent) of all Nursing, Psychiatric, and Home Health Aides in 2006.
- Immigrants accounted in 2006 for more than one-in-six of all Dentists, Pharmacists, and Clinical Laboratory Technicians.
The largest numbers of immigrant health care workers are found among {Figure 2}:
- Nursing, Psychiatric, and Home Health Aides (409,000 foreign-born).
- Registered Nurses (334,000 foreign-born).
- Physicians and Surgeons (219,000 foreign-born).

Even though immigrants are critical to the health care workforce, the vast majority of health care workers are still native-born {Figure 3}. 

The majority of immigrants in health care occupations are naturalized U.S. citizens. ¹

- Naturalized citizens accounted in 2006 for:
  - Five-in-seven foreign-born Physicians and Surgeons.
  - Two-in-three foreign-born Registered Nurses.
  - Three-in-five foreign-born Licensed Practical and Vocational Nurses.
  - Five-in-nine foreign-born Medical Assistants and Other Health Care Support workers.
  - Just over half of foreign-born Nursing, Psychiatric and Home Health Aides.
The Bureau of Labor Statistics (BLS) predicts significant numbers of job openings in the health care occupations where most foreign-born health care workers are employed {Figure 5}.5

- BLS predicts that, during the 2006-2016 period, job openings will total:
  - 648,000 for Nursing, Psychiatric, and Home Health Aides.
  - 587,000 for Registered Nurses.
  - 287,000 for Medical Assistants and Other Health Care Support Occupations.

![Figure 5: Projected Job Openings in 15 Largest Health Care Occupations, 2006-2016](chart)

Shortages of health care workers are expected to increase in the years to come—and immigrants will help fill the gap.

- The Department of Health and Human Services (DHHS) estimates that, as of November 15, 2009, there were 6,216 Primary Medical Health Professional Shortage Areas (HPSAs) in the United States, and that it would take an additional 16,680 physicians to adequately meet the primary-care medical needs of the population in these areas.6

- A November 2008 study by the Association of American Medical Colleges (AAMC) finds that “though the supply of physicians is projected to increase modestly between now and 2025, the demand for physicians is projected to increase even more sharply,” due in large part to the growth and aging of the U.S. population, resulting in a shortage of between 124,000 and 159,000 physicians in the United States by 2025.7

  - The report concludes that “simply educating and training more physicians will not be enough to address these shortages.”8

  - Even if the AAMC succeeds in its stated goal of “a 30% increase in U.S. medical school enrollment and an expansion of Graduate Medical Education (GME) positions,” the report concludes that “will not eliminate the projected shortage, only moderate it.”9
Despite a recent increase in the number of Registered Nurses (RNs) in the workforce, “projections indicate a shortfall of RNs developing around 2018 and growing to about 260,000 by 2025,” according to a study in the July/August 2009 issue of *Health Affairs*.¹⁰

- The study finds that the projected shortfall of nurses stems in large part from the impending retirement of large numbers of Baby Boomer nurses, and the inadequate number of younger nurses available to take their place.¹¹

- As a result of these projections, the study concludes “it is likely that the demand for RNs educated in other countries will increase.”¹²

As the native-born population grows older and requires more health care services of all kinds, and as increasing numbers of native-born health care workers reach retirement age, the United States will experience serious shortages of health care professionals. Immigrants will play a crucial role in filling these gaps. Even if more natives receive the education and training needed to move into these jobs, it is highly unlikely that they will do so fast enough to fully meet the rising demand for doctors, nurses, laboratory technicians, and health aides. The United States needs flexible immigration policies which help to ameliorate the health care crisis the nation faces—not arbitrarily restrictive immigration policies that deprive Americans of the health care professionals they need.

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Endnotes

3 Average of data from the 2005, 2006, and 2007 American Community Surveys; prepared by Rob Paral & Associates for the IPC.
4 Ibid.
8 Ibid, p. 5.
11 Ibid., p. w664.
12 Ibid., p. w665.