Foreign-Born Population More Likely to Live in Poverty Nationwide

According to the U.S. Census Bureau, foreign-born households fall short of the median income of native-born households and also have a higher likelihood of living in poverty. Foreign-born households earned $4,317 less on average than native-born households in 2010: median incomes for foreign-born households were $46,224 compared to $50,541 for native-born households. Approximately 19% of foreign-born households live in poverty compared to 15% of native-born ones. However, wide variations in individual income exist within the foreign-born population based on country of origin, as documented in the chart of median personal incomes for full-time workers from the American Community Survey.

<table>
<thead>
<tr>
<th>Country of Origin</th>
<th>Median Personal Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>India</td>
<td>$70,577</td>
</tr>
<tr>
<td>China</td>
<td>$50,018</td>
</tr>
<tr>
<td>Philippines</td>
<td>$44,158</td>
</tr>
<tr>
<td>Vietnam</td>
<td>$35,131</td>
</tr>
<tr>
<td>Mexico</td>
<td>$23,810</td>
</tr>
<tr>
<td>Foreign-Born (All)</td>
<td>$33,130</td>
</tr>
<tr>
<td>Native-Born</td>
<td>$42,328</td>
</tr>
<tr>
<td>Total Population</td>
<td>$41,430</td>
</tr>
</tbody>
</table>

Length Of Stay in New Country Affects Immigrant Volunteering Rates Nationally

The New American Economy (NAE) looked at immigrants’ volunteering rates compared to the general population and found they had lower rates overall (15% of immigrants volunteered in 2013 compared with 28% of the native-born population).

Yet NAE also looked at the influence of friends, relatives, neighbors, and co-workers in integrating immigrants into volunteering activities. NAE found that once initiated into a culture of volunteering by others, immigrants engaged in volunteering activities a larger number of weeks of the year than the native-born population.

What Our Research Shows: From the 2016 NYC Equality Indicators Report

In New York City (NYC), poverty among non-citizen immigrants is considerable; the most recent estimates from the Center for Economic Opportunity (CEO) showed that the CEO poverty rate for non-citizens (29.7%) was more than 1.5 times higher than the poverty rate for either naturalized citizens (19.1%) or citizens by birth (18.7%). CEO poverty rates for citizens by birth (19.3%), naturalized citizens (19.0%), and non-citizens (30.1%) were largely the same during the previous year. (CEO figures differ from the federal poverty rates; they are adjusted for NYC’s high living costs.)

A key buffer against poverty is income. For this reason, we also looked at immigration status and income. Based on NYC-wide data from the 2016 Current Population Survey, the median personal income of full-time workers born in the United States ($55,000) was considerably higher than that of foreign-born, full-time workers ($39,000). Here again, non-citizens were particularly disadvantaged: the median income for foreign-born citizens was considerably higher ($43,680) than that of non-citizens ($30,100).

Initiatives to assist immigrants living in poverty are being undertaken by the City through OneNYC, its plan for ensuring NYC’s future as a strong and inclusive city. OneNYC looks at problems immigrants and other disadvantaged NYC populations face through the lens of equity, growth, sustainability, and resilience, and outlines specific ways to tackle them. Examples include providing help with enrolling in the Supplemental Nutrition Assistance Program (SNAP) for families struggling with food insecurity or workforce development for individuals looking to secure better employment.

What Our Research Shows: From the 2016 NYC Equality Indicators Report

Volunteering has many benefits for individuals and communities. It is associated with higher levels of community engagement and social bonds.

Based on data from the 2015 Current Population Survey, we found that native-born New Yorkers (19.3%) volunteered at three times the rate of foreign-born New Yorkers (6.5%). The previous year, native-born New Yorkers volunteered at twice the rate (15.2% vs. 7.6%).

Race and ethnicity also factor into volunteering rates: we found that Hispanics (6.8%) and Asians (8.3%), were less likely to volunteer than blacks (12.8%) and whites (21.8%).

In this issue of *Narrowing The Gap*, we focus on one of the groups adversely affected by inequality: Immigrants. Other issues will describe inequalities faced by children, individuals currently in jail or on probation, individuals living in poverty, individuals with less than a high school diploma, individuals with a physical or intellectual disability, lesbian/gay/bisexual/transgender/queer, racial and ethnic minorities, religious minorities, seniors, single parents, and women.
Access to Quality Housing Influenced by Nativity Status Nationally

According to a 2010 study, immigrants have a higher likelihood of living in overcrowded conditions than the native-born population. Researchers have established links between poor health outcomes and poor housing conditions such as overcrowding. Overcrowding specifically puts occupants at risk for greater levels of disease transmission and infection outbreaks. As a result, immigrants’ greater likelihood of living in overcrowded conditions may also put them at greater risk for these adverse health outcomes.

The legal status of immigrants can also affect their access to quality housing. A recent study found that undocumented Mexican and Central American immigrants report living in more crowded homes, living in poorer quality housing, and having more concerns about neighborhood quality and access to services than the native-born population. They conclude that the legal status of these immigrants may prevent them from obtaining safe and adequate housing which in turn may pose obstacles to their full integration into society.

Nationwide Immigrants Less Likely to Have Health Insurance

According to the Migration Policy Institute (MPI), immigrants are three times more likely to be uninsured than the native-born population based on their 2016 analysis of 2014 American Community Survey (ACS) data. These rates are consistent with what the MPI reported in 2015 based on analysis of 2013 ACS data: 32% of the foreign-born population and 12% of the native-born population lacked insurance.

Rates of private health insurance for immigrants in 2014 were 53% compared with 68% of the native-born population. Public health insurance covered 27% of the foreign-born population compared to 34% of the native-born population. In total, more than one in four (27%) in the foreign-born population reported going without health insurance compared with fewer than one in 10 (9%) in the native-born population. (Note: Because individuals may simultaneously hold private and public health insurance, the MPI-estimated sum may exceed 100.)

“Everywhere immigrants have enriched and strengthened the fabric of American life.”
- 35th U.S. President, John F. Kennedy

What Our Research Shows:
From the 2016 NYC Equality Indicators Report

In NYC we used data from the American Community Survey 5-year PUMS to look at household access to a stove or range for those who were born outside the United States compared to those born in the United States. There is some difference between household types. The 2010-2014 data showed that 0.749% of immigrant households in NYC did not have a stove or range compared with 0.573% of native-born households. This is similar to the percentages from the previous year: 0.823% for foreign-born and 0.631% for native-born New Yorkers.

This indicator speaks to quality of life and housing since cooking at home allows for higher levels of control over diet as well as potentially more time spent dining at home with family. For cooking at home to occur, however, home appliances must not only exist but be in working condition. Landlords are responsible for repairing home appliances that are broken, but many New Yorkers are unclear about their rights as tenants. The Metropolitan Council on Housing is one resource for renters, including on issues such as home appliance repair.

What Our Research Shows:
From the 2016 NYC Equality Indicators Report

Visits to a regular doctor are considered a factor in better health outcomes for the preventative health benefits they provide. In NYC, we found that both immigration status and gender affect the likelihood of having a regular doctor. According to the 2015 NYC Department of Mental Health and Hygiene’s Community Health Survey, 28.4% of foreign-born men and 15.9% of foreign-born women said they did not have a regular doctor, compared to 14.6% of native-born men and 8.4% of native-born women.

These data are little changed from the previous year; in 2015, 33.3% of foreign-born men reported not having a regular doctor compared to 9.1% of native-born women.

There were also sizable differences between racial and ethnic groups, with Hispanics (25.5%) more than two times as likely as whites (10.5%) not to have a regular doctor. Blacks and Asians fell in the middle of these two groups: 14.3% of blacks and 18.0% of Asians reported not having a regular doctor.

New initiatives undertaken by the Mayor’s Office of Immigrant Affairs, such as public outreach to alert immigrant New Yorkers of their eligibility for healthcare under the Deferred Action for Childhood Arrivals program, may improve health insurance access for the foreign-born population. Additionally, the City offers access to low-cost healthcare through its ActionHealthNYC program. A centerpiece of this program is access to a primary care physician and regular check-ups.