

# The Struggles of One Undocumented Individual and Visions of Health Care Delivery Systems

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## Background / Introduction

Javier Sanchez (not his real name) came to the United States in 1999. He is originally from Veracruz, Mexico. He crossed (travelled) over from Mexico with his destination to be Dallas, Texas. Javier has been married to his wife for 21 years. They have 4 children (all daughters) ages 15 to 21. His family all reside in Veracruz. The reason Javier departed Veracruz was that there were no descent paying jobs as he lacked education. What Javier did have was excellent construction and building skills – manual labor skills. He had heard there was a great need for construction workers in the Dallas, Texas metroplex so a family decision was made that he would go to Dallas, Texas and get work and would wire money back to his family in Veracruz. Javier never obtained official paperwork as he had no intentions to remain in the United States. His plans are that once he and his family have saved enough money that he will return to Veracruz for retirement. From 1999-2007 Javier would commute back and forth several times a year to visit his family, after all the borders were totally open for both countries. But he noted in the year 2007, that it was becoming increasingly more difficult to commute across the border so again another Family Decision was made. Javier would not attempt to come back to Veracruz until he was ready to retire. He continues to wire money back to his wife and family in Veracruz while at the same time, he lives a very frugal life-style here in the United States.



## Hurricane Ike September 13, 2008

Hurricane Ike made land fall in Galveston, making the city uninhabitable. Many undocumented construction workers came to Galveston as a result of the utter destruction and these individuals are still here rebuilding Galveston. They are in the “shadows.” Javier is one who came to Galveston and remains here today rebuilding Galveston.

### Statement of the Problem

There are few options available for the Undocumented individuals here in Galveston in terms of health care. Some community-faith-run clinics that are Nurse-run such as St. Vincent’s House is one such place that will provide some health care delivery on an out-patient basis. St. Vincent’s House offers a variety of primary and specialty care to those who might otherwise go without medical/mental health/dental/vision or other treatments. St. Vincent’s Clinic is a cooperative effort between UTMB and St. Vincent’s House - committed to providing quality healthcare to the underserved population of Galveston. Currently, there is great concern for undocumented individuals in terms of inpatient services.

### Recommendations / Possible Solutions

Creating partnerships with local community out-patient clinics that serve the under privileged by means of building a small inpatient hospital dedicated for those in need who fall into the category of being classified as Undocumented. The inpatient hospital would be run just like the outpatient clinics through the services of partnerships with Health Care Educational Institutions. The Patients benefit and the Students who are learning their profession benefit.

## Conclusion

### Post Hospital Discharge

Interprofessional Educational Health Programs (IPEP) Teams would continue to follow the patient by making home visits to ensure continuity of health is maintained thus avoiding hospital readmissions. The concept of IPEP Teams making home visits post hospital discharge would be a means of ensuring the cycle of the health care chain is unbroken.

This concept could easily be replicated across Texas as well as across the nation being a Model for Hospitals that would provide health-care follow up to high risk individuals in their homes which could potentially thwart hospital readmission costs.



## References

- <http://www.migrationpolicy.org/research/profile-immigrants-houston-patients-most-diverse-metropolitan-area>
- <http://www.migrationpolicy.org/programs/immigration-policy-program-data-hub/unauthorized-immigrant-children>
- <http://www.migrationpolicy.org/programs/data-hub/chart/unauthorized-immigrant-populations-country-and-region-for-state-and-county>
- <http://www.migrationpolicy.org/programs/health-policy-and-access-to-care/>
- <http://www.reuters.com/article/immigration/decline-of-unauthorized-immigrants-stalls-may-have-returned>
- <http://www.usatoday.com/story/news/immigration/2013/09/23/immigration-traffic-stop-ends-updated/282811>
- <http://www.usatoday.com/story/news/immigration/2013/09/23/immigration-traffic-stop-ends-updated/282811>
- <http://www.migrationpolicy.org/article/frequently-requested-statistics-immigrants-and-immigration-united-states>
- <http://utmb.edu/>
- Moore L. 2016. Partnering with faith-based organizations to enhance positive outcomes for home-bound seniors. J Comm Pub Health Nursing 2: 110. doi:10.4172/jcpnh.1000110
- Poghosyan J & Carlson M. 2017. The untapped potential of the nurse practitioner workforce in reducing health disparities. Policy, Politics & Nursing Practice 0(0) 1-11. DOI:10.1177/1527154417721189
- Journals.sagepub.com/home/jpn
- Smith J. 2010. Screen, stabilize, and ship: EMTALA, U.S. hospitals, and undocumented immigrants (international patient dumping). Houston Journal of Health Law & Policy. 309-358

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