An Overview of Migration, Sexual Health, and Sexual Risk among Immigrants to the United States

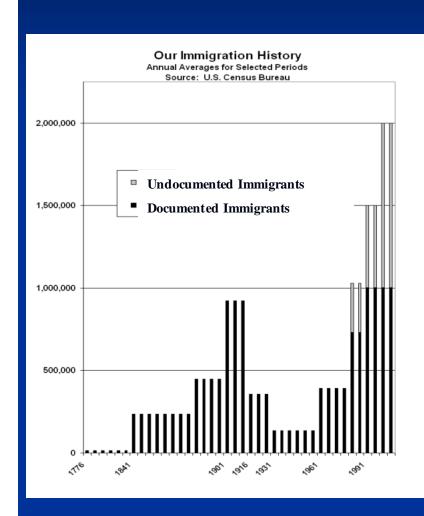
Tiphani Burrell-Piggott, MA, MPH, DrPHc Susie Hoffman, DrPH

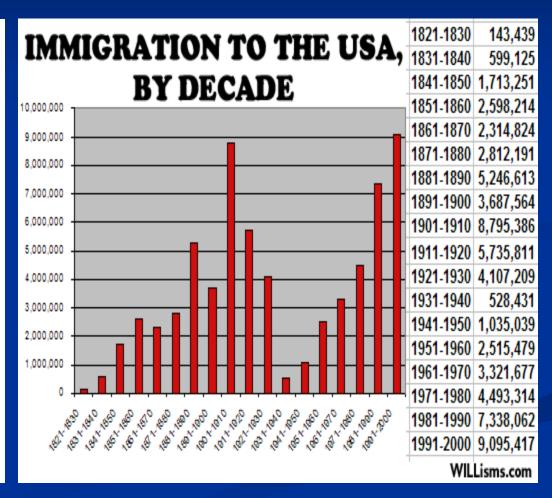
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Presentation Overview

- Migration Patterns to the US
- Immigrant Groups
- Types of Migrants
- Investigating Immigrant Sexual Health
- Migration Processes and Sexual Health

Temporal Immigration Trends





www.immigrationreform.org

Top Ten Host States

	State	1995	2000	2005
1	California	7,995,000	9,053,000	9,994,000
2	New York	3,158,000	3,843,000	3,900,000
3	Texas	2,200,000	2,591,000	3,379,000
4	Florida	2,178,000	2,960,000	3,203,000
5	New Jersey	1,129,000	1,281,000	1,620,000
6	Illinois	1,059,000	1,243,000	1,417,000
7	Massachusetts	639,000	816,000	880,000
8	Arizona	537,000	692,000	851,000
9	Georgia	268,000	379,000	762,000
10	Maryland	343,000	479,000	725,000

Source: The Center for Immigration Studies, 2005

Top Fifteen Countries of Origin

			Year of Entry				
	Region	Total	Pre-1980	1980-1989	1990-1999	2000-2005	
1	Mexico	10,805,000	1,839,000	2,262,000	3,852,000	2,852,000	
2	China/ HK/ Taiwan	1,833,000	359,000	473,000	646,000	355,000	
3	Philippines	1,530,000	449,000	386,000	431,000	264,000	
4	India	1,411,000	170,000	209,000	573,000	459,000	
5	El Salvador	1,120,000	123,000	380,000	411,000	206,000	
6	Vietnam	996,000	193,000	277,000	362,000	164,000	
7	Cuba	948,000	435,000	171,000	214,000	128,000	
8	Dominican Republic	695,000	145,000	206,000	223,000	121,000	
9	Canada	674,000	344,000	49,000	165,000	116,000	
10	Korea	672,000	167,000	225,000	153,000	127,000	
11	Russia	621,000	46,000	79,000	397,000	99,000	
12	Jamaica	607,000	148,000	202,000	195,000	62,000	
13	Great Britain	589,000	272,000	89,000	121,000	107,000	
14	Haiti	570,000	123,000	163,000	193,000	91,000	
15	Guatemala	546,000	72,000	126,000	193,000	155,000	

Source: The Center for Immigration Studies, 2005

Brief Information about Immigrant Groups Nearly 70 percent arrived for Neprly 20 "family percent were reunification." atready in PAKISTAN the U.S. as temporary workers. CHINA 42 169 New York absorbed. 3,900; Call-Second only formia, 1,711; to Medico for Roughly half Montana, zero. imm igrants to U.S. Agure word refugees or asylum Includes 5,275 from Hong Kong. When the More than Cold War one-third ended, the were adopted Polish exochildren. dus sped up. CAPAGINA UNITED Ome in three were sponin the same PHILIPPINES 34,486 year 4,140 scred by U.S. Once a major source of employers. people from Accounted imm ignants, for 57 per-cent of imm im owed to the U.K. now Camada. sends only gramts to 1.3 percent Hawsall. of the total. 7,746 UNITED STATES Largest number of African imm igrants came from here. Most were refugees per-mitted to Egypt ranked second with Hispania 4,831. JAMAICA, HAITI, DOMINICAN White 69,2% Asian/Pacific REPUBLIC 48,882 -Islander 3.7% -Multiragial 1.6% Sent one in five Native American 0.7% 131.675 of New York State's new Bloquet immigrants. number. Does Illegal allens. Source: National Geographic Society, 2001

What's Being Served at Your Thanksgiving Dinner this year?





Types of Migrants

- Immigrants and Emigrants
- Why do People Migrate?
 - Push Factors
 - Pull Factors
- Voluntary Migrants
- Forced/ Involuntary Migrants
- Economic/ Labor Migrants
- Sexual Migrants/ Migrant Sex Workers

Investigating Immigrant Sexual Health

- Why study sexual health and risk of immigrants to the US?
 - To understand risk and protective factors in diverse US populations
 - To be able to develop effective interventions
- Why study migration (as a process) and sexual health and risk?
 - To understand how, why, and under what conditions people move and the influences on sexual health
 - Migration as a "structural" (vs. individual behavioral) influence on health

Migration Processes and Sexual Health

- What theories have emerged from studies of migration and other health conditions?
 - Healthy migrant effect
 - Salmon bias
 - Second generation effects

Migration Processes and Sexual Health: Some Possible Pathways

- Population movements and bi-directional travel promote sexual mixing
- Immigrants face challenges that may expose them to risky environments or predispose them to risky behaviors
 - Unequal sex ratios
 - Long-term separation from partners
 - Social isolation
 - Discrimination
 - Poverty
 - Limited access to health services
 - Undocumented immigration status

Migration Processes and Sexual Health: Some Possible Pathways

Gender relations

- Gender-based power
- Gender roles
- Acculturation
- Who migrates and how? in family groupings, couples, singles

Heterogeneity of immigrant groups

- Country of origin
- Reasons for migration
- Migration experiences
- Conditions in host country

Thank you

- Feel free to contact me at: ttb2103@columbia.edu
- Each of our panel speakers will elaborate on the topics introduced here
- Stay tuned...