

AMA to Supreme Court: Rescinding DACA would harm health care

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Patrice A. Harris, MD, MA

Immediate Past President

A decision by the U.S. Supreme Court to rescind the Deferred Action for Childhood Arrivals (DACA) program would deliver a severe blow to the nation's health care workforce and pose a threat to patients and public health.

DACA is the federal policy implemented in 2013 that temporarily barred the deportation of undocumented residents brought to the U.S. as children. An estimated 27,000 of these individuals, also known as "dreamers," currently work in the health care field. Of these, nearly 200 are medical students, residents or physicians who rely on DACA to retain their eligibility to study and practice medicine.

The AMA has opposed the administration's decision to end the DACA program since it was announced in 2017. We have since joined 32 other leading health organizations, led by the Association of American Medical Colleges (AAMC), in filing an amicus brief in support of a lawsuit brought by Regents of the University of California that seeks to protect the DACA program.

As our nation's highest court hears oral arguments on Tuesday, the AMA knows that the outcome is sure to have a broad impact across our health system. And that is why we are speaking out.

Our health care workforce, including physicians, nurses, physician assistants and home health aides, is bolstered by providers with DACA status. The nearly 200 active physicians, medical students and residents in the U.S.—educated and trained in U.S. medical schools—depend on DACA for their eligibility to study and practice medicine and fill crucial gaps in patient care. During their careers, these providers will care for and improve the lives of millions of Americans.

Additionally, these skilled providers help offset a growing physician shortage in the U.S. and globally. According to the U.S. Health Resources and Services Administration, the U.S. is currently dealing with a shortage of more than 8,000 primary care physicians. A separate study by the AAMC projects

the overall physician deficit to be somewhere between 60,000 and 95,000 physicians by 2025. Removing hundreds, and potentially thousands, of physicians with DACA status will aggravate that problem, particularly in medically underserved areas—which is exactly where DACA physicians are more likely to work.

At the same time, DACA health care providers draw upon greater cultural diversity and experience, and more thoroughly understand the circumstances and challenges present in diverse communities and populations. Extensive research has shown us that all patients—but particularly those in underserved communities—benefit from physician workforce diversity through improved outcomes.

Eliminating the DACA program would strike at the heart of our nation’s ideals, upend our immigration system, and harm children brought here by their families or who arrived as unaccompanied minors. It also would reverse progress toward greater health equity and diversity within the physician workforce, which makes us all healthier. Prior to the program’s implementation in 2013, undocumented immigrants brought to the U.S. as children could not gain admission to most medical schools because they could not overcome the legal hurdles to become licensed physicians.

Under DACA, they could—and they did. And our country is stronger because of it.

These are physicians our nation needs, and whose stories are emblematic of the American dream. We need these “dreamers” and many more like them if we are to fulfill our goal of a diverse health care workforce that reflects the demographics of the patients they serve. The Supreme Court must maintain DACA for the good of our health system and our country.