

# Removing Barriers to Mental Health Care is Essential for Children in South Carolina to Thrive

**We cannot fully address the nation's youth mental health crisis if DACA recipients and children in immigrant families are left out of the solutions.** Under current law, immigrants with legal permanent resident (LPR) status must wait five years before being able to access mental health care through critical supports like Medicaid and the Children's Health Insurance Program (CHIP). Individuals with Deferred Action for Childhood Arrivals (DACA) status are almost entirely barred from access to mental health coverage through Medicaid, CHIP, and Affordable Care Act (ACA) Marketplace coverage.

## Over 18k children in immigrant families in South Carolina are impacted by barriers to mental health care.<sup>1</sup>

Fortunately, South Carolina provides access to Medicaid and CHIP for children with LPR status during the five-year waiting period. However, it's important that the waiting period is removed entirely—particularly since when caregivers are able to fully access supports, they can better care for themselves and their children. Additionally, parents and youth with DACA status and other authorized immigrants remain barred from Medicaid, CHIP, and the ACA.

### What would removing these barriers to care mean for children in immigrant families?

Mental health care would be more accessible to all eligible children, including the one in four children nationally who have an immigrant parent. Removing these barriers would provide children in mixed-status families with the support they need for a healthy and happy childhood and improve their long-term development.<sup>2</sup>

### Increased Access to Mental Health Care for Children & Families

Children with immigrant parents are twice as likely to be uninsured than children with U.S. citizen parents.<sup>3</sup> Child health is closely linked to that of their parents—even when children are U.S. citizens, they are less likely to be enrolled in benefits if their caregivers are ineligible for those same benefits.<sup>4</sup> When access to coverage increases for parents, it also increases for children.

### Improved Mental Health Outcomes for Children

Nationally, over 1.6 million children, the vast majority of whom are U.S. citizens, have a parent with DACA status or have a parent with LPR status who is impacted by the five-year bar. Research shows that increasing Medicaid coverage improves mental health outcomes for both parents and their children and also improves performance at school.<sup>5</sup>

### Addressing the Unique Mental Health Challenges Endured by Children in Immigrant Families

U.S. citizen children in mixed-status families face higher rates of depression, anxiety, and post-traumatic stress disorder but are less likely to receive mental health care than children with U.S. citizen parents.<sup>6</sup> DACA and DACA-eligible youth also endure additional stressors associated with their precarious status. Prolonged and continuous stress, referred to as "toxic stress," can have serious impacts on children and their development, including lifelong negative mental and physical health effects.<sup>7</sup> Additionally, youth in immigrant households were at greater risk for mental health challenges during the pandemic due to existing structural barriers.<sup>8</sup>

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<sup>1</sup> National Center for Children in Poverty, State Immigration Policy and Children's Well-Being, <https://www.nccp.org/immigration-profiles/>; The Demographic and Economic Impacts of DACA Recipients: Fall 2021 Edition, <https://www.americanprogress.org/article/the-demographic-and-economic-impacts-of-daca-recipients-fall-2021-edition/>.

<sup>2</sup> Aileen Wang, Madalyn News, First Focus Campaign for Children, Fact Sheet: LIFT the Bar Act, 2021, [https://firstfocus.org/wp-content/uploads/2021/09/FACT-SHEET\\_LIFT-the-BAR.pdf](https://firstfocus.org/wp-content/uploads/2021/09/FACT-SHEET_LIFT-the-BAR.pdf).

<sup>3</sup> Kaiser Family Foundation, Health Coverage of Immigrants, <https://www.kff.org/racial-equity-and-health-policy/fact-sheet/health-coverage-of-immigrants/>.

<sup>4</sup> Georgetown University Center for Children and Families, Health Coverage for Parents and Caregivers Helps Children, 2017, <https://ccf.georgetown.edu/wp-content/uploads/2017/03/Covering-Parents-v2.pdf>.

<sup>5</sup> Jessica Schubel, Expanding Medicaid for Parents Improves Coverage and Health for Both Parents and Children, CBPP, 2021,

<https://www.cbpp.org/research/health/expanding-medicaid-for-parents-improves-coverage-and-health-for-both-parents-and-children>.

<sup>6</sup> Kim, J., Nicodimos, S., Kushner, S.E., Rhew, I.C., McCauley, E. and Vander Stoep, A., Comparing Mental Health of US Children of Immigrants and Non-Immigrants in 4 Racial/Ethnic Groups. *J School Health*, 88: 167-175, 2018, <https://doi.org/10.1111/josh.12586>.

<sup>7</sup> Samantha Artiga, Petry Ubri, Living in an Immigrant Family in America: How Fear and Toxic Stress are Affecting Daily Life, Well-Being, & Health, Kaiser Family Foundation, December 2017, <https://files.kff.org/attachment/Issue-Brief-Living-in-an-Immigrant-Family-in-America>.

<sup>8</sup> The U.S. Surgeon General's Advisory, Protecting Youth Mental Health, 2021, <https://www.hhs.gov/sites/default/files/surgeon-general-youth-mental-health-advisory.pdf>.