

Acces to healthcare among international immigrants in Chile: Repeated Cross-Sectional analysis of CASEN survey 2006-2009-2011

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Objectives: This population-based study explores healthcare provision entitlement by immigrants in Chile and compare them to the Chilean-born in 2006-2009-2011.

Methods: We used the nationally representative CASEN surveys 2006,2009 and 2011 (sample sizes between 70,000-90,000 households). We estimated weighted multinomial regressions to explore the association between healthcare entitlement (multinomial= public/private/other/none) and migration status (binary= Chilean-born/immigrants), crude and adjusted by demographics (age, sex, urban/rural, marital status, ethnicity) and socioeconomic status (education, household income, type of occupation).

Results: There is a modest increase in immigrants in Chile between 2006 and 2011, from around 1% to around 2% of total population. Compared to “public” provision entitlement (Fonasa, reference), immigrants are more likely to report “private” (Isapre; adjusted OR=1.97, $p<0.01$), “other” (adjusted OR=1.52, $p<0.01$) and “none” (adjusted OR=5.30, $p<0.01$), even after controlling for demographics. However, there

are changes based on the year of the survey, immigrant respondents from 2009 and 2011 are less likely to report “other” and “none” compared to 2006. There are also significant differences by country of origin (“private” healthcare more often reported by Argentinians and Spanish; “other” more reported by Bolivian and other non-Latin Americans; “none” more reported by Colombians and other Latin Americans), even after adjusting by socio-demographics and year of the survey.

Conclusions: There are great variations in healthcare provision entitlement among immigrants in Chile, which are largely based on the country of origin, even after controlling for several socio-demographics. These differences need better understanding in Chile for effective improvement of population access and use of healthcare.

