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Foreword

In the last decade and a half Brazilian immigration to the United States has been a growing focus of scholarly research. Monographs describing Brazilian communities in Boston, New York and Los Angeles have been published as well as edited books on Brazilian immigrants in the U.S. and numerous articles dealing with everything from ethnic identity, religious affiliation, and transnational behavior to second generation Brazilians (or “Brazilian-Americans”).

Yet despite this interest a serious lacunae exists in terms of reliable statistical measures of Brazilian populations in the United States. It is widely recognized that Brazilians in the U.S. are undercounted in official statistics, be it in the United States Census, the American Community Survey or state and local estimates of various kinds. The reasons for the undercount are varied. One is that a significant but unknown number of Brazilian immigrants are undocumented — possibly up to 70 percent in some areas of the U.S. — making them less likely to participate in census counts and surveys of various kinds. Then, too, confusion surrounding declarations of Brazilian ethnicity in terms of North American “racial” categories undoubtedly contributes to the invisibility of Brazilians and hence, also to their undercount.

This report provides us with the first ever statistically-based survey of Brazilians in the United States. The survey of the Brazilian community in the Boston-Cambridge-Quincy Metropolitan Statistical Area, done by a team of researchers, was conducted to provide immigrants, community leaders, policymakers and scholars with a means of assessing both the socioeconomic status and the health status of Brazilians within the targeted area. It is the first such analysis using statistically valid techniques. Moreover, the community on which this report focuses is a significant one. Today Brazilian immigrants in Massachusetts are the second or third largest foreign-born population in the state, trailing only Chinese and possibly Dominican migrants.

The researchers gathered personal data from a representative sample of approximately three hundred adult Brazilian immigrants — despite the fact that many were undocumented — as well as 120 of their children, both Brazilian- and U.S.-born. Among other things, *(In)Visible (Im)Migrants* provides extensive information on the employment of Brazilians in the Boston metropolitan area and suggests that most work at jobs that native-born residents generally prefer not to do. In the words of the report, “Brazilian migrant workers are more likely to be complements rather than substitutes in the regional economy.”

The report goes on to include not only such basic information as place of origin in Brazil, reasons for migration, religious affiliation, level of education, ability to speak English, civic group participation and average earnings by sex and legal status, but also a plethora of information about migrant health: self-reported health and health behaviors, annual sick days and so on. One key finding in the report is that Brazilian immigrants seem to be healthier than U.S.-born residents across a wide array of measures except for one — psychological distress — an outcome which is at least partially linked to the uneasiness created by the undocumented status of so many.

Maxine L. Margolis
Professor Emerita of Anthropology
University of Florida
Executive Summary

How many foreign-born Brazilians reside in metropolitan Boston? What proportion is unauthorized to reside in the United States? Will Brazilian migrants integrate socially and economically as most previous waves of migrants in the United States have? Or will they fail to do so either because many are not residing in the United States legally or due to a flaccid economy (the so-called “Great Recession”)? How healthy are Brazilian migrants? Satisfying answers to such basic questions have eluded past studies for one simple reason. To date no data that represent all Brazilians – both the foreign-born and their children – in any region of the United States have been available. (In)Visible (Im)Migrants: The Health & Socioeconomic Integration of Brazilians in Metropolitan Boston changes this by providing the first statistically credible estimates of legal and unauthorized Brazilians residing in the seven-county Boston-Cambridge-Quincy Metropolitan Statistical Area (BCQ-MSA) – an area which includes Essex, Middlesex, Norfolk, Plymouth and Suffolk Counties in Massachusetts and Rockingham and Strafford Counties in New Hampshire. Specifically, we employ newly available 2007 Boston Metropolitan Immigrant Health & Legal Status Survey (BM-IHLSS) data that were collected by a collaborative team of researchers from Harvard University and the University of Massachusetts Boston working with the Brazilian Immigrant Center and dozens of foreign-born Brazilian migrant interviewers between June and September 2007. Half a decade in the making, (In)Visible (Im)Migrants offers a descriptive account of (1) legal and unauthorized Brazilian migration to metropolitan Boston; (2) Brazilian migrant household environment, work, and economic well-being; and (3) Brazilian migrant health and socio-political integration.

Legal And Unauthorized Brazilian Migration To The BCQ-MSA (Metropolitan Boston)

Brazilian migration to metropolitan Boston began to rise noticeably in the mid-1990s, the number of foreign-born Brazilians in the BCQ-MSA is larger than all other immigrant groups in the BCQ-MSA except for foreign-born Chinese and possibly Dominicans, and more Brazilian migrants resided in metropolitan Boston than in any other U.S. metropolitan area according to 2005-2007 American Community Survey (ACS) data. It remains uncertain; however, how many Brazilian migrants will continue to arrive given increased post-September 11th, 2001 Department of Homeland Security enforcement in the workplace and a sagging economy.

(In)Visible (Im)Migrants reports that the 2007 U.S. Census ACS estimate of 46,000 foreign-born Brazilian residents in the BCQ-MSA is 29 percent lower than our 2007 Boston Metropolitan Immigrant Health & Legal Status Survey (BM-IHLSS) estimate of 64,000 (approximately 61,000 adults and 3,000 children). We also find that approximately 9,000 children of foreign-born Brazilians were born in the United States and residing in the BCQ-MSA. Thus, overall, the region was home to about 73,000 first, 1.5 and second generation Brazilian-origin residents.

Higher proportions of Brazilian migrants residing in the BCQ-MSA were born in the southern region of Brazil (e.g., Minas Gerais, São Paulo, Santa Catarina) – a pattern that appears to have intensified since 2000 – and fully 71 percent of Brazilian adults and 16 percent of their children are estimated to have been unauthorized to reside in the United States in 2007. While most of these migrants claim to have migrated to the United States to increase their earnings, they also report having selected the BCQ-MSA because of the relatively high concentration of other Brazilian migrants. Lastly, one-third of all Brazilian adults claimed that they intend to move back to Brazil within five years, one-half reported that they will do so within a decade, and more than two-thirds stated that they would return to Brazil only after retiring.

Brazilian Migrant Family, Work, And Economic Well-Being

A higher proportion of Brazilian migrants in metropolitan Boston were married compared to all U.S. residents in 2007 (55 and 49 percent respectively), and foreign-born Brazilians had higher mortgage and rental payments than others in the BCQ-MSA and the United States on average. This ability to pay more for housing is consistent with the finding that Brazilian migrants earned slightly higher incomes on average ($29,150) in 2007 than others at the national level ($28,200), but not with the finding that they earned considerably less than others in the BCQ-MSA ($36,900). In any event, although more than one in three Brazilians did not have a landline telephone in their home, most had access to a mobile telephone (97 percent), the internet (88 percent), or a motor vehicle (88 percent). Most (70 percent) also sent money home to family members in Brazil the year prior to the BM-IHLSS, only half of all Brazilian migrants filed for or paid income taxes, and almost none relied on public assistance. Furthermore, although unauthorized Brazilian men and women held lower status jobs compared to their legal compatriots and other U.S. workers, overall, Brazilian workers appear to have been employed in occupations that complement the BCQ-MSA regional workforce.

Brazilian Migrant Health And Socio-political Integration

Given the fact that a high proportion of Brazilian migrant adults are unauthorized in metropolitan Boston, and that many are employed in jobs that are generally neither esteemed nor upwardly mobile, one would predict – consistent with the so-called “Latino health paradox” but contrary to an expected positive socioeconomic status (SES)-health gradient – that they would be healthier than others. Although our evidence is mixed, this appears to be the case. For instance, although Brazilian migrants may have somewhat lower socioeconomic status compared to U.S.-born residents, relatively small proportions of them are estimated to have had health insurance (25 percent of men and 45 percent of women), and a lower proportion of Brazilian men reported having been very happy compared to all U.S. adult males (30 versus 32 percent) – an equal proportion of Brazilian migrants and all U.S. adult residents (64 percent) reported having had very good or excellent overall health. The SES-self-reported health gradient, however, applies better to Brazilian men than women.
We also find that lower proportions of Brazilian migrants have been diagnosed with a chronic disease that is also a leading cause of death in the USA (e.g., heart disease, cancer, diabetes, high blood pressure) or have had a functional limitation, and a higher proportion revealed characteristics of healthy behaviors such as eating and sleeping well, not being obese, and using condoms during sex. However, Brazilians were also more likely to smoke cigarettes, less likely to exercise, less likely to have been screened for various types of cancer, and more likely to be psychologically distressed.

One might also suppose that Brazilian migrants are less likely to be socially integrated given their precarious legal and occupational statuses – to lack a sense of community. Empirical evidence from the BM-IHLSS intimates that this is not the case. More than half (56 percent) of all foreign-born Brazilian adults residing in metropolitan Boston claimed to have been involved in at least one type of civic, religious or internet-based group in the year prior to the BM-IHLSS. Most of those who were involved in a group (36 percent) attended religious events or meetings, some (21 percent) engaged in web-based groups, and others (14 percent) were involved in youth, sports, parent-teacher, neighborhood or other types of organizations. Also contrary to conventional wisdom, a larger proportion of Brazilian adults reported being Protestant (37 percent) compared to those in Brazil (17 percent), and a lower proportion reported being Catholic (48 versus 74 percent in Brazil).

Consistent with their relative inexperience with Massachusetts’ criminal justice system (on average, only 4.7 percent had been arrested for any reason), we also find that a higher proportion of metropolitan Boston’s Brazilian migrants trust the U.S. government (51 percent) than trust the Brazilian government (22 percent) “to do what is best for . . . people most of the time.” Furthermore, only 13 percent of Brazilian migrant adults voted in the last (2006) Brazilian presidential election. While these findings bode well for Governor Deval Patrick’s “New Americans” and Mayor Thomas Menino’s “New Bostonians” initiatives, which seek to facilitate the integration of newer migrants in Massachusetts, it is important to highlight that a mere five percent of Brazilian adults were familiar with at least one of several community-based organizations that serve Brazilian and other Portuguese-speaking populations in the BCQ-MSA.

The results of (In)Visible (Im)Migrants reported below are representative of all foreign-born Brazilian migrants and their children who were residing in the Boston metropolitan area in late 2007. It is important to keep in mind; however, that these are based on cross-sectional survey evidence, and future community-based statistical surveys will be needed to assess the long-term health and socioeconomic integration of the Brazilians residing in the BCQ-MSA.
Sumário Executivo

Quantos emigrantes brasileiros vivem na região metropolitana de Boston? Qual é a porcentagem de indocumentados que vivem nos Estados Unidos? Conseguirão os emigrantes brasileiros se integrar socialmente e economicamente como muitos outros emigrantes anteriores? Ou falharão por consequência de que muitos não estão vivendo legalmente no país ou por causa da crise econômica (a chamada “Grande Recessão”)? Qual é o estado de saúde dos emigrantes brasileiros? Repostas satisfatórias para perguntas tão básicas escaparam estudos passados por uma simples razão. Até hoje nenhum estudo que represente os brasileiros morando nos Estados Unidos, ambos emigrantes e seus filhos, estiveram disponíveis. *Imigrantes Invisíveis, Emigrantes Visíveis: A Saúde e Integração Sócio-Econômica dos Brasileiros na Região Metropolitana de Boston* fornece a primeira estimativa estatisticamente plausível dos emigrantes brasileiros documentados e indocumentados vivendo na Boston–Cambridge–Quincy Metropolitan Statistical Area (BCQ–MSA), uma área que inclui os counties de Essex, Middlesex, Norfolk, Plymouth e Suffolk em Massachusetts e Rockingham e Strafford no estado de New Hampshire. Especificamente, utilizamos dados recentemente disponíveis do do estudo *Boston Metropolitan Immigrant Health & Legal Status Survey* (BM–IHLSS) que foram coletados por um grupo de pesquisadores da Universidade de Harvard e da Universidade de Massachusetts em Boston, trabalhando com o Centro do Imigrante Brasileiro e muitos entrevistadores brasileiros, entre os meses de junho e setembro de 2007. Com 5 anos de processo de pesquisa, *Imigrantes Invisíveis, Emigrantes Visíveis* oferece um relato descritivo da (1) emigração brasileira legal e não-autorizada para a região metropolitana de Boston; (2) ambiente familiar, trabalho, e o bem-estar econômico dos brasileiros emigrantes; e (3) saúde e integração sócio-política do emigrante.

**Emigração De Brasileiros Legais E Não-Autorizados Para A BCQ-MSA (Região Metropolitana De Boston)**


*Imigrantes Invisíveis, Emigrantes Visíveis* relata que no U.S. Census Bureau's American Community Survey (ACS) de 2007, a estimativa de 46 mil emigrantes brasileiros residentes na região de BCQ–MSA é 29 por cento mais baixa do que calculada no estudo 2007 *Boston Metropolitan Immigrant Health & Legal Status Survey* (BM–IHLSS), o qual estima em 64 mil (aproximadamente 61 mil adultos e 3 mil crianças). Também descobrimos que aproximadamente 9 mil filhos de emigrantes brasileiros nascem nos Estados Unidos e vêm na região da BCQ–MSA. Sendo assim, essa região foi lar para 73 mil primeiro, 1,5 e segunda geração de residentes de origem brasileira.

Grandes proporções de emigrantes brasileiros que residem na região da BCQ–MSA nascem nas regiões sudeste e sul do Brasil (Minas Gerais, São Paulo, Santa Catarina), um padrão que parece ter intensificado a partir do ano 2000 – e 71 por cento dos brasileiros adultos e 16 por cento de seus filhos são estimados em não ter sido autorizados para residir nos Estados Unidos em 2007. Enquanto a maioria dos emigrantes relataram ter trabalhado para os Estados Unidos para ganhar mais dinheiro, eles também alegam ter escolhido a região da BCQ–MSA por causa da alta concentração de outros emigrantes brasileiros nessa área. Finalmente, um terço dos adultos brasileiros relata que pretendem voltar para o Brasil dentro de cinco anos, a metade relata que farão isto dentro uma década, e mais de dois terços dizem que voltaram para Brasil somente depois de estar aposentado.

**A Família, O Trabalho, E O Bem-Estar Econômico Dos Emigrantes Brasileiros**

Uma proporção maior de emigrantes brasileiros na região metropolitana de Boston estavam casados em comparação a todos os residentes dos EUA em 2007 (55 e 49 por cento respectivamente), e emigrantes brasileiros tiveram a mensalidade de financiamento de casa e aluguel superiores em comparação com outros na região da BCQ–MSA e dos Estados Unidos em média. Essa capacidade de pagar mais por moradia é consistente com a descoberta de que os emigrantes brasileiros tiveram em média um renda um pouco maior (US$ 29.150,00) em 2007 do que outros em nível nacional (US$ 28.000,00), mas não com a descoberta de que eles tiveram uma renda consideravelmente menor do que outros na região da BCQ–MSA (US$ 36.000,00). De qualquer modo, embora mais de um entre três brasileiros não terem telefone fixo em suas casas, a maioria teve acesso a telefone celular (97 por cento), internet (88 por cento), ou um automóvel (88 por cento). A maioria (70 por cento) também enviou dinheiro para os seus familiares no Brasil no ano anterior da pesquisa BM–IHLSS. Somente a metade de todos os emigrantes brasileiros declararam ou pagaram impostos de renda, e quase nenhum usou serviços de assistência pública. Apesar de brasileiros e brasileiras indocumentados manterem empregos de baixo nível social quando comparados com seus compatriotas documentados e outros trabalhadores dos EUA, em geral, trabalhadores brasileiros parecem ter sido empregados em ocupações que complementam a força de trabalho da região da BCQ–MSA.

**Saúde E Integração Sócio–Política Dos Emigrantes Brasileiros**

Considerando o fato de que uma grande porcentagem dos emigrantes brasileiros na região metropolitana de Boston são indocumentados, e que muitos são empregados em trabalhos que geralmente não são respeitados e não oferecem a possibilidade de melhorar o status social, pode se dizer que, consistentemente com o “paradoxo da saúde Latina”, e contrário a um esperado positivo status sócio-econômico (SES) e saúde, eles seriam mais saudáveis do que outros. Apesar de nossas evidências serem variadas, este caso se confirma. Por exemplo, apesar
dos emigrantes brasileiros terem um status sócio-econômico mais baixo em comparação com os residentes nativos dos EUA, proporções relativamente pequenas deles foram estimadas em possuir um plano de saúde (25 por cento dos homens e 45 por cento das mulheres), e uma proporção menor de homens brasileiros informaram estar muito felizes em comparação com todos os homens adultos dos EUA (30 contra 32 por cento) – uma proporção igual dos emigrantes brasileiros e todos os adultos residentes dos EUA (64 por cento) informaram ter uma saúde boa ou excelente. O auto-relatório de status sócio-econômico (SES) e saúde, no entanto, se aplica melhor para os homens brasileiros do que as mulheres.

Também descobrimos que uma proporção menor de emigrantes brasileiros foi diagnosticada com uma doença crônica, que também é uma das principais causas de morte nos Estados Unidos (por ex., doença cardíaca, câncer, diabetes, pressão alta) ou teve uma limitação funcional, e uma proporção maior revelou características de comportamento saudável como se alimentando e dormindo bem, não sendo obesos, e usando preservativos durante o sexo. Entretanto, brasileiros foram caracterizados como mais prováveis para fumar cigarros, menos prováveis para fazer exercício e ter sido examinados por vários tipos de câncer, e mais prováveis de ser psicologicamente perturbados.

Pode-se supor que os emigrantes brasileiros são menos prováveis de ser socialmente bem integrados levando em consideração suas situações legal e profissional. Evidência empírica da pesquisa BM-IHLSS prevê que esse não é o caso. Mais do que a metade (56 por cento) de todos os adultos emigrantes brasileiros vivendo na região metropolitana de Boston alega ter se envolvido em pelo menos um tipo de grupo cívico, religioso, ou de internet no ano anterior a pesquisa BM-IHLSS. A maioria (36 por cento) foram a eventos ou reuniões religiosas, alguns (21 por cento) participaram em redes sociais na internet, e outros (14 por cento) participaram em grupos de jovens, esportes, escolas, bairro ou de outras organizações. Também ao contrário da sabedoria convencional, uma grande proporção de adultos brasileiros informaram ser cristãos protestantes (37 por cento) em comparação as pessoas no Brasil (17 por cento), e uma pequena proporção informaram ser católicos (48 contra 74 por cento no Brasil).

Consistente com suas inexperiências com o sistema de justiça criminal de Massachusetts (em média, somente 4,7 por cento foram presos por qualquer motivo), também descobrimos que uma porcentagem maior dos emigrantes brasileiros na região metropolitana do Boston confiam no governo dos EUA (51 por cento) do que no governo brasileiro (22 por cento) “para fazer o que é melhor para . . . as pessoas na maior parte do tempo.” Somente 13 por cento dos adultos emigrantes votaram na última (2006) eleição presidencial do Brasil. Enquanto essas descobertas se encaixam bem com as iniciativas de “New Americans” do governador Deval Patrick e a “New Bostonians” do prefeito Thomas Menino, que querem facilitar a integração dos novos emigrantes em Massachusetts, é importante enfatizar que um mero cinco por cento dos adultos brasileiros conheceram pelo menos uma entre diversas organizações comunitárias que servem os brasileiros e outras populações da língua portuguesa na região da BCQ-MSA.

Os resultados do *Imigrantes Invisíveis, Emigrantes Visíveis* relatados abaixo são representativos de todos os emigrantes brasileiros e seus filhos que estavam residindo na região metropolitana de Boston no final de 2007. É importante lembrar, porém, que estes são baseados em evidência de estudo transversal, e no futuro serão necessários pesquisas estatísticas baseadas na comunidade para avaliar ao longo período a saúde e integração sócio-econômica dos brasileiros que vivem na região de BCQ-MSA.
I. Introduction

“Societies never really become effectively concerned with social problems until they learn to measure them”
– David Heer (1968: iii)

Academics and pundits alike warn that unlike earlier waves of U.S. immigrants, relatively recent migrant groups are at risk of downward socioeconomic integration (incorporation, “Americanization,” or “assimilation”) the longer they live in the United States.1-3 This is especially true, so the story goes, among those suspected of having large proportions of unauthorized (illegal, irregular or undocumented) workers with low levels of formal education. However, although stalled socioeconomic integration among relatively recent international migrants, or at least the suspicion of it, has risen during the post-September 11th (2001) economic downturn, it is uncertain how newer U.S. migrants are integrating in the Boston metropolitan area. Ira, for instance, is a first-generation Brazilian migrant entrepreneur who has been in the United States for 16 years and earns more than $40,000 annually cleaning houses. She migrated to the United States after the age of 12 (hence, a “first generation” migrant) and has no intention of returning to Brazil any time soon.

Likewise, Marcelo migrated to the United States from Brazil when he was only six years old (a so-called 1.5 generation migrant because he migrated before the age of 13) and after two decades he earns $25 per hour. If these two examples reflect the average Brazilian migrant experience in the Boston metropolitan area, and if their children continue on this path, it would appear that this migrant group is following the historic trajectory of upward first-to-second generation socioeconomic integration exemplified by earlier U.S. migrant groups.4-7

And yet, despite the fact that scholars from various disciplines have been providing credible estimates of the number, geographic distribution, socioeconomic effects, and integration of legal and unauthorized migrants in the United States since the late 1970s8-23 – no study to date has offered representative estimates of Brazilian migrants (or any other foreign-born nationality group in Massachusetts or metropolitan Boston) by legal status.24 Becoming Brazuca: Brazilian Immigration to the United States – the most recent scholarly treatment of the subject – illustrates this,25 and (In)Visible (Im)Migrants is a first step toward filling this information gap.

The primary purpose of this statistical community-based participatory research (CBPR) report26-31 is to provide migrants, community-based organizations, policymakers, foundations and researchers with a baseline assessment of, and analytical framework for understanding, the health and socioeconomic well-being of Brazilian migrants residing in the seven county Boston-Cambridge-Quincy Metropolitan Statistical Area (BCQ-MSA). We employ the 2007 Boston Metropolitan Immigrant Health & Legal Status Survey (BM-IHLSS) data that were collected from the BCQ-MSA (Figure 3) and U.S. Census data to do this.
Why Study Brazilian Migrants in the Boston Metropolitan Area?

There are at least two reasons why we should not be surprised when community leaders, policymakers or migrants themselves doubt the potential benefits of studying legal and unauthorized migration statistically. First, extended post-September 11th, 2001 Department of Homeland Security immigration interior enforcement efforts that were touted as primarily pursuing “dangerous immigrant . . . criminals and terrorist suspects” increasingly sought and arrested migrants with no criminal record or deportation order beginning in 200632 – one year before the BM-IHLSS was implemented. Second, even some serious migration scholars seem unaware that credible demographic methods for studying migrants by legal status – either indirectly at the national level19,33 or directly at the individual or household level within particular metropolitan areas20,21,34 – have existed for almost three decades.35

Despite such misgivings or ignorance; however, we should remember a point made by economist John Kenneth Galbraith in the 1950s and paraphrased a decade later in the first systematic report of U.S. census undercounting of racial minorities: “societies never really become effectively concerned with social problems until they learn to measure them.”36 As we show below, it is possible to collect representative information – some of it quite personal and sensitive – from both legal and unauthorized Brazilian migrants. Indeed,
The purpose of the Boston Metropolitan Immigrant Health & Legal Status Survey (BM-IHLSS) project – funded by the National Institutes of Health (NIH), the University of Massachusetts Boston (UMASS Boston), and the Blue Cross Blue Shield of Massachusetts Foundation (BCBSMF) – was to collect the first representative individual-level data from legal and unauthorized Brazilian and Dominican migrant families residing in the seven-county region to study how household environment, neighborhood/geographic context and broader social networks influence economic well-being and health behaviorally (e.g., diet, exercise, sleep, access to care), psychologically (e.g., distress) and physiologically (e.g., stress). The BM-IHLSS was implemented from June-September 2007 and is a statistical community-based participatory research (CBPR) project led by professor Enrico Marcelli in collaboration with two community-based organizations serving migrants in the region (the Brazilian Immigrant Center and the Dominican Development Center) and several colleagues from Harvard University’s Medical School and School of Public Health, and from UMASS Boston’s Center for Survey Research. We collected self-reported (1) migration, (2) socioeconomic status, (3) social capital, (4) health, and (5) sociopolitical identity data – as well as various bioindicators of health (e.g., blood levels of glycosylated hemoglobin HbA1c, C-reactive protein, Epstein-Barr virus; saliva-levels of cotinine; and measured blood pressure, height, and weight) from 307 Brazilian and 299 Dominican migrant households. The data also include information about 120 randomly selected children of our adult Brazilian (Dominican) respondents. Furthermore, these data have been linked to U.S. Census Summary File 1 (SF1), National Center for Charitable Statistics (NCCS), and Massachusetts Geographic Information System (MassGIS) data at the census block level to enable researchers to study how neighborhood context and proximity to non-profit organizations (e.g., clinics, hospitals) may influence migrant health and economic well-being.

The BM-IHLSS builds on the first two probability household sample surveys of migrants by legal status in the United States – the 1994 and 2001 Los Angeles County Mexican Immigrant Legal Status Surveys (LAC-MILSS) – in at least four ways. First, it extends our community-based migrant health and legal status survey methodology26,27,45 to two U.S. migrant groups for whom representative health and legal status data, as far as we are aware, have never been collected. Second, it extends our methodology to another U.S. metropolitan area in which it has never been employed. Third, our decisions regarding the type and number of health questions to be included in the BM-IHLSS survey instrument were greatly influenced by national level surveys (e.g., Behavioral Risk Factor Surveillance System, National Health and Nutrition Examination Survey, National Health Interview Survey, General Social Survey) as well as recent developments in social epidemiology,46-48 and are thus much improved compared to those in our 1994 and 2001 LAC-MILSS. And fourth, the BM-IHLSS is the first statistical migrant survey project in which both subjective and biological (e.g., blood droplets, saliva, blood pressure, height,
weight) data were collected along with legal status data. This addition to our earlier work in Los Angeles County is made possible by recent advancements in the field of “biodemography” – that is, in the ability of non-medically trained interviewers to collect biological data as part of a random household survey.49,51

**Costs and Benefits of Statistical Community-based Participatory Research**

There are numerous factors and potentially conflicting interests that have to be considered if a statistical CBPR project like the 2007 BM-IHLSS is to succeed.26,52 It is important to define what is meant by each of these terms, however, before discussing any potential costs and benefits. The most difficult term to define is that which some groups and scholars reify in principle but rarely discuss openly or attempt to measure – community. Although there is no agreed-upon definition, we adopt what many think the term implies – “that there are relationships between a group of people, usually in a certain locale, that go beyond casual acknowledgement . . . [and that] the group shares some common goals, values, and, perhaps a way of life that reinforce each other, creates positive feelings, and results in a degree of mutual commitment and responsibility.”53: 11 Such a definition is not conceptually distant from, but more specific than, that of culture – “the nongenetic spreading of habits and information.”54: 30 As we discuss below, Brazilian migrants are not generally viewed as having a strong sense of community compared to various other ethno-racial-nativity groups. However, as noted several times already, whether this is true requires an analysis of representative data. Community-based thus intimates that a research project is focused on a particular group of people residing in a particular place and that group members will have a direct influence on the kinds of questions being asked, who will ask them, how they will be asked, and in what ways the information gathered will be presented. A statistical CBPR project is participatory in that it is institutionally inclusive – inviting and incorporating the interests and expertise of both academics and community members. Typically, group members are both directly involved and represented by various leaders of community-based organizations (CBOs) such as the Brazilian Immigrant Center and the Dominican Development Center (our community partners in this project). The BM-IHLSS, then, is a statistical CBPR project in that it intentionally embraced a “collaborative approach to research that equitably involves . . . community members, organizational representatives, and researchers in all aspects of the research project.”27,55

There were several costs associated with adopting a statistical CBPR approach – that is, based on the principle that every Brazilian migrant in our BM-IHLSS sample had a known (but not necessarily equal) probability of being selected. First, it took approximately five years and many meetings for the principal investigator of the project and the directors of our two CBOs to develop a working partnership that became a successful collaboration, and to obtain funding for the project. While some community leaders working with immigrants understand the importance of having credible statistics for estimating the U.S. Census underecognize of migrants, for estimating their labor market outcomes, etc., few know that it is possible to collect legal status and other sensitive data ethically and without harming respondents. In short, it takes a considerable amount of time and patience to carry out an authentically statistical CBPR project. Second, although we began this project hoping to include two other CBOs working with migrants from El Salvador (Concilio Hispano) and Haiti (the Haitian Multi-Service Center), in the end we had to make the difficult decision to focus only on the two Latin American migrant groups with the largest numbers in the BCQ-MSA. Unfortunately, the cost of statistical research is inversely related to the size and geographic concentration of the group being studied, and we could not obtain sufficient funding to study all the groups we had hoped. In other words, not only did we as researchers need to select two CBOs that we felt were respected by the communities they served and had the capacity to participate in a statistical survey, but we also had to exclude several CBOs with which we had worked and which we had hoped could be a part of this project. Third, CBOs working with migrants are often operating on shoestring budgets to meet basic needs, and taking the time to meet with researchers who may be planning to collect and use data for strictly academic purposes sometime in the future may be perceived as wasteful. That time could perhaps be used more effectively doing the pressing work required of CBOs in an era of government fiscal devolution and increased Department of Homeland Security domestic immigration enforcement. But the same is often true for academics. Professors and students are typically rewarded for writing and publishing peer-reviewed academic articles or term papers, getting good grades, etc. within one academic semester or year. Working with a community group with varying levels of intensity for half a decade to collect data that will produce reports and articles years later is not usually encouraged or highly regarded – especially for graduate students and junior faculty. Fortunately, some funders and senior scholars understand the value of and support such work.

What then are the benefits of our statistical CBPR project? The first is the potential to provide a demographic and economic profile of Brazilian migrants that is representative of all Brazilians residing in the BCQ-MSA. A statistical approach also allows researchers to be explicit about sampling and interviewer errors that are unfortunately a part of any qualitative or quantitative study. In other words, we are able to report how statistically credible our results are, and ask readers to decide for themselves whether they agree with our reported findings. Although we agree that “Brazilian immigrants in the United States, and in particular in Boston, have been well studied”56: 179 using qualitative research methods, it is not the case that they have been studied in a way that permits one to make generalizations about all Brazilians living in any city, metropolitan area, state or region. Brazilian migrants, in this sense, have not been studied at all. Second, a project that relies heavily on statistical survey, but we also had to exclude several CBOs with which we had worked and which we had hoped could be a part of this project. Third, CBOs working with migrants are often operating on shoestring budgets to meet basic needs, and taking the time to meet with researchers who may be planning to collect and use data for strictly academic purposes sometime in the future may be perceived as wasteful. That time could perhaps be used more effectively doing the pressing work required of CBOs in an era of government fiscal devolution and increased Department of Homeland Security domestic immigration enforcement. But the same is often true for academics. Professors and students are typically rewarded for writing and publishing peer-reviewed academic articles or term papers, getting good grades, etc. within one academic semester or year. Working with a community group with varying levels of intensity for half a decade to collect data that will produce reports and articles years later is not usually encouraged or highly regarded – especially for graduate students and junior faculty. Fortunately, some funders and senior scholars understand the value of and support such work.

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In sum, although a statistical CBPR project requires years of collaborative preparation, the exclusion of some migrant groups that desire statistical information about their members, and in which participants invest time that could be spent engaged in activities with more immediate payoffs – it also provides a representative portrait of the group being studied, participants (both individuals and institutions) gain valuable experience and broaden their social networks, and findings can inform CBOs and policymakers about where it might be possible to intervene to improve the lives of migrants and their prospects for future socioeconomic integration.

**Report Outline**

This report is separated into three core sections. The first is entitled *Legal and Unauthorized Brazilian Migration to the Boston Metropolitan Area* and discusses how many foreign-born Brazilians reside in the BCQ-MSA, and the nativity of their children. Perhaps our most striking (and statistically significant) finding is that the estimated number of foreign-born Brazilians residing in metropolitan Boston according to 2007 U.S. Census American Community Survey (ACS) data is about 29 percent smaller than our BM-IHLSS estimate (64,000 versus 46,000). We also discuss the Brazilian states in which migrants were born, why they migrate, the number of legal and unauthorized Brazilian migrants, and how long they are likely to stay in the United States.

The second section, *Brazilian Migrant Family, Work, and Economic Well-Being*, goes beyond how many Brazilian migrants reside in the BCQ-MSA by considering their age composition, the proportion that is female, marital status, and whether they own the homes in which they live. We also estimate their educational attainment and English-speaking ability, and investigate how these may influence the occupations and industries they fill, and how much they earn. Lastly, we report findings regarding various other financial behaviors such as paying income taxes, using public assistance, banking, sending money home to relatives; and we discuss how much access Brazilian migrants have to information and transportation technologies from home. The most important finding in this section is that the majority (80 percent) of Brazilian migrant men and women are in the prime of their working years (age 20-54 years) and most do work that other Boston residents would prefer not to do. In the language of labor economics, Brazilian migrant workers are more likely to be complements rather than substitutes in the regional economy. In the language of sociology, there is considerable occupational segregation. Such geographically concentrated occupational and skills complementarity is an important ingredient for a healthy future regional economy. And an equally important finding is this labor market complementarity appears to be underestimated using 2005-2007 American Community Survey (ACS) census data.

The last section of the report, *Brazilian Migrant Health and Socio-political Integration*, asks whether Brazilians have access to health insurance and medical care, how healthy they are, and whether they participate in social, religious and political activities. There are three noteworthy findings from this section to mention by way of introduction. First, consistent with past research on Mexican and other Latino migrant groups, higher proportions of unauthorized and male Brazilian migrants are estimated to lack health insurance compared to their legal and female compatriots. Second, also consistent with most past estimates of the health of Mexican migrants in the United States, Brazilian migrants appear to be healthier than U.S.-born residents across a wide array of measures except for one – psychological distress. This healthy migrant profile is a common finding in the immigrant health literature and the most sophisticated research suggests it is due more to migrants being healthier on average than others who do not migrate to the United States as well as those born in the United States than to cultural or integration factors. However, because recent migrants are younger than the U.S. adult population on average, some have argued we need to focus attention on the former’s health behaviors and bioindicators of health. Studying bioindicators of health is beyond the scope of this report, but we should note that on at least some health behaviors Brazilian adults are faring worse (e.g., access to insurance and care, smoking, exercise). Third, contrary to the notion that Brazilian migrants are less communal than other migrant groups, we estimate that about six in ten (56 percent) participated in some civic group in the year prior to our survey. This participation; however, was segmented. A plurality of Brazilian migrants (36 percent) reported having been involved with some kind of religious organization and 21 percent reported having been involved in some form of internet-based group. Beyond religious and internet-based groups; however, relatively few Brazilians interacted with others outside of family, work and school.
II. Legal and Unauthorized Brazilian Migration to the Boston Metropolitan Area

Brazilians in the Boston-Cambridge-Quincy MSA according to U.S. Census Data

Brazilians are a relatively recent U.S. migrant group and their rise from the fifth to the second or third largest foreign-born population in the seven-county Boston-Cambridge-Quincy, MA-NH Metropolitan Statistical Area (BCQ-MSA) during the 2000s (Figure 4) — depending on whether one compares 2000 U.S. Census Summary File 3 (SF3) estimates to the 2007 or 2005-2007 American Community Survey (ACS) data — occurred as the entire BCQ-MSA foreign-born population declined from approximately 721,000 to 714,000.

This simultaneous rise in Brazilian migration and fall in total migration (as well as total population without counting in-migration) during the 2000s has stimulated considerable discussion concerning the effects and integration of immigrants in New England. Indeed, the BCQ-MSA is officially estimated by the U.S. Census Bureau to have been home to 45,876 Brazilian migrants in 2007 — a figure that is lower than the 2006 Census “point” estimate of 56,247 yet higher than all other metropolitan areas in the United States except for the New York-Northern New Jersey-Long Island, NY-NJ-PA metropolitan statistical area based on our analysis of the 2007 ACS data. At the state level, Massachusetts’ foreign-born Brazilian population rose from an estimated 37,000 in 2000 to 68,500 in 2007 (representing almost one of every five Brazilian migrants in the United States). Only Florida (with almost 80,000 foreign-born Brazilians or 22 percent of all those residing in the United States) was home to more Brazilians in 2007. New Jersey (11 percent), California (nine percent), and New York (seven percent) had relatively high but slightly smaller numbers. However, if one compares the U.S. Census 2005-2007 ACS “period” estimates rather than the 2007 “point” estimates as we just have above, the BCQ-MSA had more foreign-born Brazilians than any other metropolitan area, and Massachusetts had more than any other state.

Regardless of the current metropolitan or state distribution of Brazilian migrants residing in the United States, “this invisible group scarcely [had] been noticed by policymakers, demographers or the popular press” until the mid-1990s. Those who have noticed have tended to think that Brazilians departed en masse to the United States beginning in the mid-1980s in response to Brazil’s economic decline that disproportionately affected “the middle class.” Others; however, offer a more nuanced view, suggesting that some Brazilians were
also drawn to the BCQ-MSA because of a large social network established by and for Portuguese migrants.74 Unfortunately, there has been scant quantitative research that has systematically investigated the relative influence of the eight major competing theories of international migration due to a lack of representative individual-level data on Brazilian migrants residing in the United States. Factors that may drive or sustain migration include: (1) a desire to raise individual wages, (2) an effort to strengthen household economic security, (3) a response to chronic U.S. demand for labor, (4) a response to global political-economic dislocations and opportunities, (5) an attempt to tap into interpersonal networks, (6) an attempt to benefit from private and public institutional assistance, (7) a response to changing incentives due to “cumulative causation,” and (8) a response to existing migration system incentives.42,75-77 By “cumulative causation” scholars mean those circumstances and conditions that have changed partly as a result of previous migration and which continue to influence current decisions to migrate. For example, Dona Dahlia migrated to New York City in the late 1970s and opened a pensão (boarding home) that helped many subsequent Brazilian migrants get settled in the United States by providing them a relatively inexpensive and culturally comfortable place to live as they began a new life in a different country.65-67 Some of these migrants then told their relatives and friends back in Brazil that adjusting to life in the United States was easier if a migrant lived with other Brazilians at first in such an arrangement, and this motivated many otherwise hesitant migrants to make the journey. This is cumulative causation as applied in the field of migration studies – more migration occurs when the decisions of others alter the environment in which migration decisions are made.77

Whatever the primary reasons for contemporary Brazilian migration to the United States, we should point out that the estimates just presented above, although obtained from official U.S. Census data, exclude unknown numbers of authorized immigrants and unauthorized (what others sometimes term illegal, undocumented or irregular) migrants.34 Consequently, any findings from studies investigating factors influencing migration made from U.S. Census data should be embraced cautiously.

Demographic studies of the number of legal and unauthorized migrants residing in the United States since the late 1970s have been of two types. First, some offer nation-specific aggregate estimates by U.S. state of residence that typically preclude the possibility of examining factors influencing individual migration decisions or well-being.19,78,79 Second, other studies provide individual-level estimates of one or more Latin American migrant groups in one or relatively few geographic areas that permit researchers to investigate various factors that may influence a myriad of migrant economic and health outcomes.22,44,80-82 The Boston Metropolitan Immigrant Health & Legal Status Survey (BM-IHLSS) falls into the latter group of studies and offers the first representative economic and health data for individual Brazilians residing anywhere in the United States that permit such an analysis.

**Diverging Estimates of Brazilian Migrants in a “Continuous Immigrant Gateway”**

Below we consider (albeit only descriptively) how important the eight theories of international migration mentioned above have been for recent Brazilian migrants residing in the BCQ-MSA, the main metropolitan area in New England that is considered to be one of nine “continuous” (rather than former, post-World War II, emerging, re-emerging, or pre-emerging) immigrant gateways in the United States.83 Other such gateways are located in New York, San Francisco and Chicago; and Figure 5 suggests that the flow of Brazilian migrants into the BCQ-MSA gateway, although a mere trickle until the mid-1980s, began to rise noticeably in the mid-1990s. Consequently, it may be that the conventional economic reasons given for large-scale Brazilian entry into New York, New Jersey and Florida during the mid-1980s – e.g., inflation, unemployment, and a general lack of opportunity for socioeconomic mobility in Brazil38,65,68,84 – may be of secondary importance for understanding Brazilian migration to Massachusetts compared to social networks or other factors. Large-scale Brazilian migration into the BCQ-MSA did not begin until after the Brazilian economic crises had subsided.

The so-called “profit” motive, of course, has a long history of enticing mass migrations to various regions of what now constitutes the United States. One of the earliest recorded (and often erroneously attributed to the singular pursuit of religious freedom) included some 20,000 Puritans who landed in Massachusetts within one decade – between 1630 and 1640.85-88 The colonist and Brazilian examples, taken together, intimate that economic push and pull factors have influenced past and recent migration decisions. But as we shall see below, like Mexican and various other relatively recent U.S. migrants,75,76 Brazilian migrants are also likely to be drawn to the BCQ-MSA for interpersonal reasons.
Some speculation has also surrounded the precipitous post-2005 drop in Brazilian migration to the BCQ-MSA shown in Figure 5 (using the BM-IHLSS data) and detected in the 2007 census data reported in Figure 4. This decline may be partly explained by the fact that our BM-IHLSS data were collected in mid-2007, before or while some Brazilians who entered in 2007 may still have been en route to the BCQ-MSA. But the decline appears to be validated by the 2005-2007 Census “period” and 2007 “point” estimates, and thus is likely to be more than an artifact of our sampling timeframe. It is also consistent with intended or supposed effects of increased U.S. Department of Homeland Security (DHS) interior enforcement efforts. For instance, in addition to post-September 11th, 2001 restrictionist immigration sentiment expressed by various federal agencies under the Bush administration; state and local anti-solicitation ordinances, enforcement of federal immigration laws, and employment verification requirements have risen dramatically since 2005. Importantly, beginning in 2006, DHS interior enforcement efforts targeted many migrants who did not have a criminal record, and in some cases did not even have deportation orders, despite the fact that the stated purpose of increased enforcement funding was to search for foreign-born criminals and terrorist suspects.

What drives the emigration of the foreign-born from the United States is a very difficult topic to study empirically because the U.S. government stopped collecting data on this in the late 1980s. In future work; however, we hope to investigate this for relatives of Brazilian and Dominican migrants residing in the BCQ-MSA who are included in our 2007 BM-IHLSS data. Thus, although we do not study the level or sources of Brazilian emigration from the United States here, below we will consider what BM-IHLSS respondents claimed were the reasons for their migration to the BCQ-MSA, and their stated intentions about long-term U.S. residence.

How Brazilians enter the United States differs somewhat from other migrants, and this is determined in large measure by source-country circumstances and existing host-country immigration policies. For instance, although Chinese migration to the United States became illegal in 1875, this restriction was only gradually and indirectly applied to Mexican and other migrants with the termination of the Mexico-U.S. labor program in 1964 and the establishment of a 20,000 person annual cap (in 1972) on the number of migrants who could enter legally from any one nation. Simply put, the annual cap generates pressure for illegal immigration from certain nations by ignoring source-country demographic and economic circumstances and source-country geographic proximity to the United States. One particular “host-country” policy change that influenced Brazilian migrant mode of entry into the United States was the reinstatement of a visa requirement for Brazilians wishing to enter Mexico by the Mexican government on October 23rd, 2005. The DHS had estimated a nine-fold increase in the number of Brazilian migrants entering the United States illegally through the Mexico-U.S. border prior to this policy change, and the anticipated result of the reinstatement of the Mexican visa requirement was to slow Brazilian illegal migration into the USA.

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**Figure 5: Brazilian Migration to the BCQ-MSA, Adults, 1959-2007**

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we can see from Figure 6, although there does appear to have been a substantial rise in the proportion of legal and unauthorized Brazilians headed for metropolitan Boston who crossed the Mexico-U.S. border by foot or vehicle after Mexico dropped the visa requirement in 2000, its reinstatement in 2005 may not have reduced the proportion among the intended target population – unauthorized Brazilian migrants. This finding should be taken with a grain of salt; however, because the BM-IHLSS focuses on the BCQ-MSA only, and there were relatively few observations in our data for Brazilians arriving after October 23rd, 2005.

Nonetheless, it seems likely that airports remained the main point of entry for legal Brazilian migrants who settled in metropolitan Boston, and the Mexico-U.S. border remained the primary point of entry for unauthorized Brazilians.

Figure 6: Brazilian Migration to the BCQ-MSA by Mode and Period of Entry, 1959-2007

Before turning to a consideration of Brazilian state of origin, the reasons Brazilian migrants report for why they came to the United States or the BCQ-MSA, and how long they intend to reside in the USA, a word concerning how many Brazilian migrants may be missed in U.S. census statistics such as those produced from the ACS data is warranted. Demographers who study census “coverage error” agree that larger proportions of unauthorized migrants are missed in U.S. Census statistics compared to their legal compatriots – but contrary to popular perception, perhaps not much larger. In fact, the only survey-based estimates currently available suggest that less than eight percent of authorized immigrants were missed in the 2000 U.S. Census and less than 12 percent of unauthorized residents were missed. These figures, however, are for foreign-born Mexicans who were residing in Los Angeles County in 2001 only, and almost nothing is known about how many legal and unauthorized migrants from other nations are missed. Still, relatively recent studies by leading demographers who study census coverage error in the United States assume similar or lower undercount rates by legal status for national level estimates regardless of national origin. And even the Home Office of the United Kingdom, we recently learned, employed a 10 percent undercount estimate – which we found for Mexican migrants in Los Angeles County – to all foreign-born migrants in the UK.

Our 2007 BM-IHLSS data permit the first survey-based statistical estimates of the number of legal and unauthorized Brazilian migrants residing in the BCQ-MSA, and as noted earlier, anywhere in the United States. Although some migration scholars doubt the feasibility of collecting credible individual-level legal status information from migrants directly – the community-based survey methodology designed and implemented by demographers David Heer and Enrico Marcelli in collaboration with other colleagues from the University of Southern California and El Colegio de la Frontera Norte (COLEF) in 1994 has become the standard methodology for doing so in the United States. Indeed, a number of other research teams have adopted this or a similar methodology to investigate how legal status influences economic and health outcomes.

The other leading (“residual” or “composite”) legal status estimation
methodology was also introduced by David Heer and provides valuable national- and state-level estimates of unauthorized migrants, but does not provide data that can answer many questions important to policymakers, researchers and community groups. What is the effect of legal status on labor market outcomes, access to medical care, and public assistance use? Such questions require individual-level legal status information that only carefully designed and implemented community-based surveys can provide. Still, non-response rates for household surveys (not to mention those which include unauthorized and other minority members) have historically been higher than demographers would like. Non-response rates for the annual 2003–2009 American Community Survey, for instance, which collects data by mail, telephone and face-to-face personal interview in the home (that is, using multiple modes), varies between 30 and 60 percent depending on survey area.106

Although non-response rates for our 1994 and 2001 household surveys of legal and unauthorized Mexican migrants residing in Los Angeles County44 were considerably lower (roughly 33 percent) than the 56 (58) percent rate we’ve computed for the Brazilian (Dominican) migrant component of the 2007 BM-IHLSS and within the ACS range of error reported above, there are at least two plausible explanations for this. First, our BM-IHLSS data indicate that almost 20 percent more Brazilian migrants were unauthorized in the BCQ-MSA in late 2007 compared to Mexican migrants residing in Los Angeles County during the summer of 2001. If unauthorized status is one factor dissuading one to participate in a household survey, then we would expect a somewhat higher non-response rate compared to our Mexican migrant research. Second, during the second week of interviewing the Department of Homeland Security’s Immigration and Customs Enforcement (ICE) opened an office in Marlborough, Massachusetts – one of the four municipalities in which we were surveying. While one might not expect this event alone to influence Brazilian migrant willingness to participate, ICE raids on various employers in the region in the months preceding this were widely publicized by the media and discussed within the Brazilian migrant community.72 More generally, unauthorized migrants may have become more isolated socially in the post-September 11th, 2001 period.

Collecting data from a migrant population with a sizable proportion of unauthorized residents is always difficult, but we were pleased to learn that we had successfully screened almost 90 percent of the households that we determined had at least one resident (3,631/4,090). This is a very high rate. We were somewhat disappointed; however, that of the 620 households that had at least one foreign-born Brazilian adult resident, we were only able to collect data from slightly less than 50 percent (307) due to limited resources. Multiplying these two rates produces a response rate of 44 percent. Although our 56 percent non-response rate is higher than we would have liked, it is not without credible explanation nor is it unusual for surveys containing a relatively large proportion of unauthorized residents. The first probabilistic sample of legal and unauthorized migrants in the United States of which we are aware, for instance, was implemented in 1980–1981 in Los Angeles County (the “Los Angeles County Parents Survey”) and had an overall non-response rate of 50 percent.20 96 This project was implemented during a time of increasing concern about unauthorized migration, but not after a foreign attack on U.S. soil nor during heightened homeland security enforcement.

With this in mind, analysis of the weighted 2007 BM-IHLSS and U.S. Census data suggests that there were approximately 64,000 foreign-born Brazilians (61,000 adults and 3,000 children) residing in the BCQ-MSA – 41 percent higher than the official 2007 ACS estimate of 46,000 that was released on September 28, 2008 as this report was being written. Importantly, our 90 percent lower-bound BM-IHLSS confidence interval estimate that corrects for sample clustering at the census block level (64,502 – 5,927, or 54,627) is slightly higher than the 90 percent upper-bound 2007 ACS estimate (45,876 + 7,441, or 53,327). Including U.S.-born children of foreign-born Brazilians (approximately 9,000), we estimate that there were a total of 73,000 first-, 1.5- and second-generation Brazilians residing in the BCQ-MSA. How did we obtain an estimated foreign-born Brazilian population that is statistically higher than that offered by the 2007 U.S. Census (ACS) data?

There were three main steps. First, we computed individual sample weights for all 307 BM-IHLSS Brazilian adult respondents and their 120 randomly selected children to produce the estimates reported directly above. Each of these 427 subjects resided in a randomly selected household that was located in one of our 100 randomly selected census blocks. These 100 blocks were randomly selected from 12 census tracts in the BCQ-MSA that had at least seven percent of their residents who were born in Brazil. Using non-response rate information to compute individual sample weights, we estimate that there were 25,288 foreign-born Brazilians residing in our 12-tract Middlesex County area in 2007.

Second, we wished to compare our weighted sample estimate for the 12 randomly selected Middlesex County census tracts to U.S. Census data. Unfortunately, although 2000 U.S. Census data offer an estimated foreign-born Brazilian population estimate for these 12 tracts (8,129), there is no such estimate for 2007, and thus no official U.S. Census estimate by which to compare our survey-based estimate of 25,288. One way around this is to compute 2000–2007 foreign-born Brazilian population growth rates for geographies that are closest to the county in which these tracts are located (Middlesex), for the other BCQ-MSA county for which a 2007 ACS estimate is available (Suffolk), for the seven-county BCQ-MSA, and for the state of Massachusetts. These ranged from 37 to 87 percent. We then multiplied the 2000 U.S. Census estimate of foreign-born Brazilians for the 12 tracts from which our household sample was drawn (8,129) by three (high, mean, and low) growth rates to obtain population projections to which we could compare our sample-generated estimate. These ranged from approximately 10,000 to 15,000 (or 40 to 58 percent below our BM-IHLSS sample estimate of 25,288). On December 23rd, 2008 the U.S. Census Bureau released its 2005–2007 ACS “period” estimates, which permit an analysis of foreign-born Brazilian population growth from 2000 to 2007 at smaller geographic areas that are closer to our 12 sample census tracts. These estimates; however, are biased upward toward earlier years (2005 and 2006) and thus may be less accurate for 2007 than the 2007 ACS point estimate. In any event, analyses of three of the four Public Use Microdata Areas (PUMAs) in which our 12 tracts are located and for which ACS data were available provided further evidence that the growth rates we assume in our foreign-born Brazilian population projections are credible. Yet another approach is to use a census geographic area that is slightly larger than a PUMA, which has a larger number of foreign-born Brazilian obser-
ations, and a smaller margin of error. We would like to thank Joe Salvo and Vicky Virgin of New York City’s Department of City Planning for suggesting these alternative approaches using more local point, period and margin of error estimates from the 2005-2007 and 2007 ACS data. In the end, we settled for a geography that falls in between the census tract and metropolitan statistical area, and in which our 12 tracts are located – Middlesex County. We also decided to use the 2007 ACS data because this is the same year in which our BM-IHLSS data were collected.

Applying the 17-68 percent growth rates we computed from the 2007 ACS point and margin of error estimates for Middlesex County to the 2000 Census estimate of 8,129, there were 11,636 to 15,812 foreign-born Brazilians residing in our 12-tract sample area in 2007. These estimates are 46 to 63 percent below our 2007 BM-IHLSS estimate, and it is important to note that in 2000 foreign-born Brazilians residing in our 12-tract sample area represented fully 28 percent of those residing in the BCQ-MSA and 43 percent of those residing in Middlesex County. Those residing in Middlesex County, furthermore, represented about two-thirds (65 percent) of all Brazilian migrants who were residing in the metropolitan area.

Armed with the 2000 census estimate of the number of foreign-born Brazilians who were residing in the BCQ-MSA (29,318), a range of 2000-2007 Brazilian migrant population growth rates from the 2000 Census and 2007 ACS data for Middlesex County, and a set of differential estimates for our 12 sample census tracts in 2007, in a third stage we multiplied the 2000 BCQ-MSA estimate by high, medium, and low population growth rates and high, medium, and low differential rate estimates. While our estimates for the entire BCQ-MSA region vary from 50,000 to 80,000, our best estimate (using medium growth and differential assumptions) is that there were approximately 64,000 foreign-born Brazilians residing in the BCQ-MSA in 2007. Again, this estimate is 41 percent higher than the 2007 ACS estimate – or alternatively, the ACS estimate is 29 percent lower than our BM-IHLSS estimate. Were we to employ our lower-bound (upper-bound) estimate, the census-based estimate would be eight (63) percent lower than our BM-IHLSS estimate. In the only other demographic study we could locate that reported on the Brazilian migrant “undercount,” Goza suggests that 56 percent of Brazilian migrants may have been missed in the 1990 U.S. Census. Consequently, our 2007 ACS BM-IHLSS differential estimate seems reasonable, and suggests that census estimates of foreign-born Brazilians may have improved during the past two decades. It is not possible to know whether this is the case nationally with existing data, however – for Brazilians, any other particular migrant group, or all migrants residing in the United States. A more thorough description of the BM-IHLSS methodology and how we obtained our estimates are available upon request from the lead author.

This brings us to an important but neglected matter. Although the U.S. Department of Labor has been successfully collecting legal status data directly from individual migrants in the National Agricultural Workers Survey (NAWS) for more than two decades (since 1988) using face-to-face interviews – as we have in our community-based migrant household surveys since 1994 – the U.S. Census Bureau currently does not attempt to collect such data for the general foreign-born population, and many migration scholars and immigrant community leaders seem to be unaware that it is ethically and technically possible. This would not be an extremely important issue were it not the case that the U.S. government is constitutionally mandated to count every resident of the United States each decade – including illegal aliens. Acknowledging this (and proposing to do so annually!) in the early 2000s, the U.S. Census Bureau initiated and then subsequently shelved a little-known program that was being planned to estimate the number of unauthorized migrants using ACS data in response to a request from the U.S. House of Representatives’ Committee on the Judiciary in a letter dated July 14th, 2003. Specifically, the committee asked for information that would allow estimates of how much it costs to educate unauthorized children in public schools. In a response letter dated August 20th, 2003 to the committee’s chairman (F. James Sensenbrenner), the former U.S. Census Bureau Director (Charles Lewis Kincannon) wrote “The U.S. Census Bureau is responsible for enumerating all residents of the United States, including undocumented aliens (also known as ‘unauthorized migrants’) . . . our Immigration Statistics Staff plans to produce annual estimates of the unauthorized migrant population by age and state of residence.” As this correspondence suggests, elected officials and their constituents would like to know more than how many unauthorized migrants reside in their states. Some are also interested in how unauthorized migrants influence public schools, medical care, U.S. labor force statistics, other lower-skilled workers, and housing prices. And others would like to know whether some of the most vulnerable in our society are integrating successfully, and if not, what might be done to assist them.

If (1) the federal government has been able to collect legal status data from foreign-born farm workers since the late 1980s, (2) we have been able to do so from foreign-born adults in the Los Angeles and Boston metropolitan areas since the mid-1990s, (3) the Census Bureau was developing a methodology to provide annual legal status estimates by state earlier this decade in response to a congressional request, and (4) the Census Bureau is required by law to enumerate every resident of the United States, then why has the Census Bureau decided not to make a concerted effort to count all unauthorized migrants? Why was the program referred to by former Census director C. Lewis Kincannon shelved? A recent National Research Council publication begs the question as well – “are there any new methods that might be more effective for estimating the size of this [the unauthorized] population?” And it suggests that alternative methods that give greater attention to sampling from housing units that include populations that are harder to enumerate would be a useful consideration. The General Accountability Office (GAO) has been arguing this for years, and based on our own successful interviewing of unauthorized migrants using a probabilistic household survey design for 15 years, we think the 2010 census could collect credible legal status data.

To sum up, we estimate that about 61,000 of all foreign-born Brazilians residing in the BCQ-MSA were adults and about 3,000 were children. There were also approximately 9,000 U.S.-born children in the region with at least one foreign-born Brazilian parent. All in all, in 2007 about 73,000 Brazilians and their children were residing in the BCQ-MSA region.
From what states have Brazilian immigrants residing in metropolitan Boston come? Why did they come? What proportion is unauthorized to reside or work in the United States? And how long do they intend to stay? There are at least two ways of answering the first question. One may consider the states in which migrants were born, or the states from which they migrated. Because the answer one gets is usually quite similar when using either of these approaches, we employ the former here. Figures 7a and 7b suggest what is already well-known. Most Brazilians residing in the BCQ-MSA were born in Minas Gerais, but there are many others who were born in São Paulo, Goiás, Espírito Santo, Paraná, Santa Catarina and Rio de Janeiro.

**State of Origin**

*Foreign-born Brazilian Adults who migrated to the Boston Metropolitan Area before 2000 (Percent)*

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**Figure 7a: Birth State of Brazilians Who Migrated to the USA between 1959 and 1999, BCQ-MSA, 2007**
Figures 7a and 7b also suggest that the Mexican relaxation of the visa requirement in 2000 may have reinforced migration patterns between some states (e.g., Minas Gerais, São Paulo, Espírito Santo, Goiás, Paraná, Santa Catarina, Rio de Janeiro) and the BCQ-MSA, and weakened it among others (e.g., Pará, Amapá, Maranhão, Ceará, Rio Grande do Sul). The reinstatement of the Mexican visa requirement, on the other hand, appears to be only loosely related to the birth-state distribution. Although we do not report state-of-origin results for post-visa-reinstatement here, it appears to have had little or no effect on the proportion coming from some states (e.g., São Paulo, Goiás) but a profound effect on others (e.g., Rio de Janeiro, Rondônia).

There is broad agreement in the immigration literature that people migrate internationally for a variety of reasons, which may change over time and differ from place to place. Once again, it is possible to approach this question in different ways. One way is to ask why someone migrated to the United States. But another is to ask why someone decided to settle in a particular place (e.g., metropolitan area). Figure 8a shows how Brazilian migrants in the BM-IHLSS answered the first question, and Figure 8b how they responded to the second.
Figure 8a: Brazilian Migrants’ Main Reason for Migrating to the USA, BCQ-MSA, 2007

Clearly employment and earnings opportunities are the driving motivations Brazilian migrants report for having migrated to the United States. This is no surprise and is consistent with previous research on Brazilian migrants in the BCQ-MSA and other metropolitan areas such as New York, Los Angeles, and two urban areas along the U.S.-Canadian border,\textsuperscript{38,62,65,136} fully two-thirds of all Brazilian adults in the BCQ-MSA stated that they came to the United States to work. To be with family and friends represents the second most important motivation, with almost 20 percent of BM-IHLSS respondents offering this reason.

Figure 8b offers a slightly different picture, indicating that how one asks about reasons for coming to the United States (or which U.S. region) may generate seemingly conflicting answers. Although work, family, and friends once again top the list of reasons Brazilians report having migrated – this time to the BCQ-MSA – the geographic concentration of other Brazilian migrants swamps these other reasons as an explanation for having moved to this particular metropolitan area. Work, family, and friends still matter; but it is the larger social network proffered by a large number of one’s compatriots residing in one area rather than work per se that is most important. Thus, we find both economic and social reasons help explain Brazilian migration to the BCQ-MSA.
Entering the United States illegally (or legally and then overstaying one's visa) is a risky endeavor, and yet millions undertake one of these two routes into the United States every year. As one well-known Brazilian migration scholars writes, “I discovered that a significant proportion of Brazilian immigrants in New York City were undocumented aliens . . . [but] because many Brazilians are undocumented, there are no reliable data on the total number of Brazilians in New York City or on their residential distribution in the metropolitan area. As a result there is no sampling frame for selecting individuals from this population, making a random sample of Brazilian immigrants in New York virtually impossible to obtain.” To our knowledge this assumption has gone unchallenged despite the fact that variants of our probability sampling methodology have generated credible estimates of the number and characteristics of legal and unauthorized Mexican migrants in Los Angeles County between 1981 and 2001, and have been employed by others at the Urban Institute, UCLA/RAND, and the Project HOPE Center for Health Affairs. In short, although it does not appear to be widely acknowledged, a handful of demographers have been successfully working with community-based organizations to collect statistical data from unauthorized migrants that produce estimates similar to those generated using aggregate U.S. Census and Immigration and Naturalization Service (now Department of Homeland Security) data. 

Figure 9 provides legal status distribution estimates for migrant adults and (foreign- and U.S.-born) children residing in the BCQ-MSA. Adult legal status was determined by asking a series of questions concerning whether a respondent was a naturalized citizen, a legal permanent resident, or a temporary visitor. If a migrant was none of these, he or she was assigned a legal status of unauthorized. This status is indirectly derived. Approximately 71 percent of foreign-born Brazilian adults in the BCQ-MSA are estimated to have been unauthorized in 2007. Among legal residents, about four percent were U.S. citizens, 13 percent were legal permanent residents, and 12 percent were temporary visitors. Interestingly, as has been the case with our earlier estimates of the unauthorized Mexican and other Latino migrant populations in California, our new estimated proportion of unauthorized Brazilian migrants in the BCQ-MSA is consistent with anecdotal and other evidence from various regions. Specifically, using consulate and other data, Costa believes that “perhaps 70 percent of Brazilians in the New York Consular district” are unauthorized as reported in: Likewise, a co-pastor of a church that is half American and half Brazilian was horrified when he (an American) learned that 70 percent of the Brazilians in his congregation were “illegal.”

Child legal status was determined in two ways. First, any child born in the United States was assigned a legal status of U.S. citizen. Second, each foreign-born child of a Brazilian migrant was assigned the adult subject’s legal status. Although about 16 percent of the 13,000 Brazilian migrant children who were residing in the BCQ-MSA in 2007 are estimated to have been unauthorized, almost 78 percent are...
estimated to have been U.S. citizens, four percent to have been legal permanent residents, and a mere two percent were temporary visitors.

In sum, most adult Brazilians were unauthorized to be living or working in the USA, and most Brazilian children were legal residents—a circumstance that creates a U-shaped legal status distribution. The very large proportion of adult Brazilian migrants who are unauthorized in the BCQ-MSA is consistent with self-reports of having migrated to the United States to work in lower status jobs that nonetheless pay relatively well compared to earnings opportunities in Brazil. We would expect few other motivations to be strong enough to pull people away from their families and friends, and to accept the socio-legal risks and stressors associated with residing in the United States illegally.

Figure 9: Migrant Legal Status of Adults and Children Born in Brazil, BCQ-MSA, 2007

Thus far we have seen evidence from self-reported reasons for migrating and from legal status data suggesting that Brazilian migrants mainly come to the United States to work, and rely on family and friendship networks upon arrival. This notion is also supported by how long they claim they will remain in the United States. Although the BM-IHLSS data show that 60 percent of Brazilian adults reported an intention to be residing in the BCQ-MSA in 2012, fully one-third reported that they think they will have moved back to Brazil by then. Indeed, only three months following completion of our fieldwork consular and media reports of migrants (some with their U.S.-born children) returning to Brazil as a result of “a rising fear of deportation and a slumping American economy” became more frequent. After 10 years of residing in the United States (by 2017), a similar proportion of Brazilian migrants express an intention to move back to Brazil as plan to stay in the United States, and two of every three Brazilians currently residing in the BCQ-MSA reported that they intend to retire in Brazil.
These estimates intimate that how long a Brazilian migrant intends to reside in the United States is negatively associated with expected earnings. It seems safe to speculate, at least, that a large proportion of metropolitan Boston’s Brazilian migrants are likely to return to their home country when demographic and economic circumstances permit.
III. Brazilian Migrant Family, Work, and Economic Well-being

As we have just seen, Brazilian migrants differ considerably from other newer migrants residing in the United States (e.g., Mexicans, Dominicans) in terms of when relatively large numbers began coming to the United States, mode of entry, and the proportion who are unauthorized to reside in this country. They are similar both historically and in comparison with other recent migrant groups; however, in their motivation for migrating and with respect to trends in settlement intentions. Put simply, although Brazilians are a very recent migrant group with a high proportion who are unauthorized, they come for many of the same reasons other migrants do and a large proportion may return to their country of origin after their economic aspirations are met.

In this section we examine Brazilian migrant household and family structure, labor market skills (e.g., human capital) and employment outcomes, various extra-labor market economic activities (e.g., paying income taxes, using “welfare,” having a bank account, remitting), and access to various technologies within the household. In short, we investigate demographic and economic factors that may have been influenced by past, and may alter future, migrant integration.

Demographic Characteristics

One would expect a group of migrants claiming to migrate mainly to work to have an age structure reflecting a working-age population. A population pyramid (Figure 11), a conventional analytical tool employed by demographers, is a good way to conceptualize the age distribution of Brazilian migrants by sex; and here we see that fully 81 percent of Brazilian men and 80 percent of Brazilian women were in the prime of their working years (ages 20-54) in 2007. Conversely, only 17 percent of foreign-born Brazilian females and 19 percent of foreign-born Brazilian males were less than 20 years old, and a mere two percent of Brazilian men and women were at least 55 years old.

Figure 11: Brazilian Migrant Population Pyramid by 5-Year Age Category & Sex, BCQ-MSA, 2007

This Brazilian migrant age-sex pyramid suggests that because of their relative youth this population will be less likely, on average, to be married and to own the homes in which they reside. Although Brazilian migrant adults were less likely than the average foreign-born migrant residing in the United States who was at least 15 years old to have been married in 2007 (55 versus 60 percent), they were more likely than U.S.-born persons who were at least 15 years old (49 percent). These comparisons are not perfect, but if we were to add Brazilian migrants who were 15-17 years old in 2007, the difference with other international migrants residing in the USA would be even greater and
that with the U.S.-born population would be smaller. In other words, it appears that Brazilian migrants are more similar to the native U.S. population than to other migrants in terms of marital status.

Approximately 67 percent of all households in the United States, and 65 percent of those in the BCQ-MSA, owned the homes in which they resided according to 2005-2007 American Community Survey data. Our BM-IHLSS survey data suggest that only 24 percent of Brazilian migrant adults owned their homes in 2007 (not shown here). Approximately 28 percent of married Brazilians owned the homes in which they resided, and 19 percent of unmarried Brazilians did.

Figure 12: Brazilian Migrant Monthly Mortgage/Rent per Household Member, BCQ-MSA, 2007

These very low Brazilian homeownership rates make some sense given that this population has resided in the United States for a short period of time and that a relatively high proportion are unauthorized. Thus, our descriptive statistical results support ethnographic evidence – from Valadarian migrants (those having migrated from Governador Valadares) residing in Framingham – suggesting that unauthorized status may be a barrier to homeownership. Some of our earlier work in Los Angeles County, for instance, found that only 44 percent of all Mexican migrants owned their homes in 2001 – a finding that conceals differences in homeownership rates by legal status (e.g., 69 percent for naturalized Mexicans, 49 percent for legal permanent residents, 30 percent for temporary visitors and unauthorized Mexicans). Whether legal status influences buying a home among Brazilian migrants in the United States is another topic we hope researchers will use the BM-IHLSS data to study.

Figure 12 reports the estimated per-capita household monthly mortgage and rental payments made by Brazilian migrants by marital status. There is little difference by marital status, but those residing in homes they owned were paying almost twice the amount per household member in 2007 as those who were renting ($578 rather than $330). Although not shown here, the mean monthly mortgage payment was approximately $2,195, the mean monthly rental payment was almost $1,254, and the mean number of household members was 3.8 persons. Both of these amounts are considerably higher than the mean monthly mortgage ($1,958) and rental ($828) payment in the BCQ-MSA according to 2005-2007 American Community Survey data. Nationally, the average monthly mortgage payment was $1,427 and the mean monthly rental payment was $627.
**Human Capital**

One factor often studied in the context of homeownership is labor market success;\textsuperscript{117} and education, work experience, and language (human capital characteristics) are deemed by mainstream economists to be the most important factors influencing labor market outcomes.\textsuperscript{22,91,125} Figure 13 offers a mixed message concerning the relative level of U.S.-relevant human capital by gender among foreign-born Brazilian adults in the BCQ-MSA.

![Figure 13: Brazilian Migrant English Ability & Educational Attainment by Sex, BCQ-MSA, 2007](image)

Brazilian migrant men had a higher proportion who claimed to speak English very well compared to Brazilian women (26 versus 23 percent), but those age 25 years and older had a lower proportion who had completed college (nine versus 17 percent) in 2007. Which type of human capital is more important for labor market success among foreign-born Brazilians in the BCQ-MSA remains to be explored, but its effect is likely to interact with other factors such as gender and legal status.

**Labor Market Integration**

Several measures of migrant labor market integration are employment, industry, occupation, and earnings. Figure 14a shows that a higher proportion of Brazilian migrant men than women were employed in 2007. Approximately 95 percent of all foreign-born Brazilian men and 80 percent of Brazilian women, regardless of legal status, were employed in 2007. 2005-2007 ACS data suggest a different employment pattern by gender. Fully 93 percent of the civilian labor force was employed nationally, regardless of gender, and 94 percent of males and 95 percent of females were employed in the BCQ-MSA in 2007. The relatively low employment rate of Brazilian migrant women compared to Brazilian migrant men in the BCQ-MSA, then, is surprising and a finding needing further study.
A smaller proportion of Brazilian migrant women and a larger proportion of Brazilian migrant men were likely to be employed in 2007 on average, but in what industries and occupations were those who were employed working? Past and recent research shows that Brazilians in the BCQ-MSA, like many other recent migrant workers throughout the United States, tend to fill lower socioeconomic status jobs such as construction, housecleaning, babysitting, cooks, delivery and other services. Figure 14b partly confirms this. While Brazilian migrant men and women filled a noticeable proportion of jobs in business and professional services industries in the BCQ-MSA in 2007, men were much more likely to be engaged in construction and women were much more likely to be employed in personal and other services industries. There are no surprises here, but it is interesting to point out that unauthorized Brazilians were more highly represented in construction and personal/other services industries. Clearly both gender and legal status segregation exist by industrial classification, but those who study the effect of work on earnings often look more to occupation given the wide variety of jobs that may exist within industries and the closer connection between the actual type of work one does and the pay one receives.
Figure 14b: Brazilian Migrant Employment by Industry, Legal Status & Sex, BCQ-MSA, 2007

Figure 14c provides additional evidence of labor market segregation by gender and legal status among Brazilian workers in the BCQ-MSA using information about occupation. Once again we see that men were more likely to be engaged in construction and other production jobs, and a higher proportion of women were engaged in service occupations. Thus, in the case of Brazilian migrants, industrial and occupational distributions appear to complement each other. Brazilians were employed in relatively lower status jobs, a circumstance that in and of itself may be difficult in terms of health and making ends meet, but also – especially for Brazilian migrants – in terms of potential downward social mobility compared to life in Brazil. Future work, perhaps using the BM-IHLSS data, should attempt to disentangle the relative contribution that gender, unauthorized status, and industry or occupation make to earnings.
Figure 14c: Brazilian Migrant Employment by Occupation, Legal Status & Sex, BCQ-MSA, 2007

Before considering earnings by legal status and sex, it is instructive to ask whether occupational distributions provided by the 2005-2007 ACS data are similar to those generated from our BM-IHLSS data. Simply put, they tell a slightly different story. Brazilian men appear to have been more likely to work in construction and production jobs, and less likely to have been working in sales, service and managerial jobs, than suggested by census data (Figure 14d).
Brazilian women, shown in Figure 14e, alternatively, appear to have been under-represented in service sector jobs and over-represented in most other occupations than suggested by the ACS data. These divergent estimates suggest that caution is warranted when considering the labor market position of Brazilian migrants in the BCQ-MSA.
Figure 14e: Brazilian Migrant Female Occupational Distribution, BCQ-MSA, 2007

Figure 15 offers a portrait of Brazilian migrant earnings by gender and legal status. The last group of bars suggests that although unauthorized legal status may exact an earnings penalty among all Brazilian women regardless of occupation, this is not likely to be the case among Brazilian men. Whereas legal and unauthorized Brazilian men had similar annual earnings on average in 2007 (about $33,000), unauthorized women ($23,000) earned several thousand dollars less each year than their legal female compatriots ($27,000). For unauthorized women this may be especially taxing given that Brazilian women earn considerably less than Brazilian men on average. There are many factors that may help explain this, however. For instance, hours worked per week and how often one changes jobs are known predictors of earnings as well. But what else might Figure 15 suggest?
Earnings in higher status jobs such as Managerial, Professional and Related occupations appear to be much higher for legal Brazilian migrant men compared to others. But in other jobs, such as Services, Construction, and Production, unauthorized men seem to fare better. There is no such complexity among Brazilian women. Unauthorized women consistently earn less than others regardless of occupation. Thus, we would predict that legal status matters more for Brazilian women’s earnings than for Brazilian men.

How do Brazilian migrant earnings compare to those earned by other workers in the BCQ-MSA and in the entire country? We noted above how annual earnings differ by gender and legal status, but all Brazilian migrants in the BCQ-MSA earned approximately $29,150 on average in 2007. This amount is higher than the national mean ($28,200) but significantly lower than the mean for the BCQ-MSA ($36,900) in 2007 according to our analysis of the 2007 American Community Survey (ACS) data. This $6,700 difference is driven mainly by the fact that Brazilian men earned $21,800 less than other men in the BCQ-MSA (who earned $48,000 on average). Women in the BCQ-MSA, taken together, earned $26,000 – only $3,000 more than the average Brazilian women.

Another comparison is important to consider for those interested in how the presence of Brazilian migrant workers may affect the labor market outcomes of other BCQ-MSA workers. Specifically, how do the occupational labor market segments filled by Brazilian migrants compare with those of other workers in the region? An occupational distribution similar to that of other workers points to the possibility of competition and thus the conclusion that Brazilians take jobs from others and drive down wages. But it does not necessarily mean this. It could be that there simply are not enough other workers to fill all the jobs in a particular segment. Similarly, if other workers fill different segments of the labor market than Brazilian migrants, this could mean that Brazilians are filling jobs other workers do not want or that Brazilians have displaced others who previously held these jobs. Such are the caveats one should consider before drawing firm conclusions from descriptive data. Subsequent research will be most certainly be needed to provide a more definitive answer to this question.

The 2005-2007 ACS data indicate that U.S.-born and other non-Brazilian BCQ-MSA adults worked in very different kinds of jobs compared to Brazilian migrants. For example, whereas approximately 40 percent of all men in the BCQ-MSA worked in Management, Professional, and Related occupations in 2007, well less than 10 percent of Brazilian migrant men did (Figure 14c). Alternatively, Brazilian men filled much higher proportions of Construction, Production and Service jobs compared to other male workers in the BCQ-MSA. This occupational segregation is even more pronounced among women. Less than 15 percent of all women worked in Service occupations, but nine of every ten unauthorized Brazilian migrant women did. These comparisons suggest that Brazilian migrant workers are filling jobs that other Boston metropolitan workers are not. If it is the case that Brazilians replaced rather than displaced other workers as they entered these jobs, then they are complementing the skills and occupational ambitions of others. Given that most of the work Brazilians are doing in the
BCQ-MSA is lower on the occupational status hierarchy, we are willing to suggest that they are augmenting the regional economy significantly rather than taking jobs others would like.

One last issue to explore briefly with respect to occupation is self-employment. Migrants to the United States have long had a tradition of starting their own businesses, and this tendency has been tied in many cases to economic advancement and integration.127-131 However, starting a business can also mean working many hours for low profit and few benefits for the owner and employees - an issue that has implications for medical coverage and overall health as will be discussed below. According to the 2005-2007 ACS data, approximately 10 percent of all workers in the BCQ-MSA and 10.5 percent of workers in the United States were self-employed. In contrast, the BM-IHLSS data show that 23 percent of legal Brazilian workers and 28 percent of unauthorized Brazilian workers in the BCQ-MSA were self-employed in 2007.

Financial Behavior

Turning to other financial behaviors (in Figure 16), we see that about six of every 10 legal Brazilian migrants had taxes taken from their earnings, filed taxes in 2006, had a bank account, and sent money (remittances) to Brazil. Slightly less than 40 percent of unauthorized Brazilian migrants, alternatively, paid taxes on their earnings, only slightly more than three in 10 filed a tax return, and about 45 percent had a bank account. Seven of every 10 unauthorized Brazilian migrants remitted money to Brazil. These differences by legal status, at least tax payments and having a bank account, may be partly attributable to unauthorized migrants not earning enough money. Welfare use, however, was similar among Brazilian migrants by legal status. Less than one percent of Brazilian migrants used some form of public assistance.

![Figure 16: Brazilian Migrant Financial Behavior by Legal Status, BCQ-MSA, 2007](image)

Brazilian Migrant Household Access to Technology and Transportation

Access to various types of technology, in addition to work and financial resources, may also influence the ability of families and friends to communicate, and thus overall migrant well-being. Although almost every Brazilian migrant adult had a mobile telephone, and approximately 90 percent had internet access in their homes and a motor vehicle available for their use, only about 60 percent had a landline telephone in their home. It was also the case that unauthorized Brazilians had only slightly lower rates of access to a landline telephone, the internet, or a motor vehicle. Thus, it is unlikely that they were at a disadvantage when and if such technologies were important for find-
ing or maintaining work, and when trying to build or sustain social networks here or abroad. The relatively low use of landline telephones, regardless of legal status, has important implications for collecting data from Brazilian migrants. Specifically, it would be more challenging to collect representative information about this population using any data collection mode other than a household survey.

Figure 17: Brazilian Migrant Household Access to Technology & Transportation, BCQ-MSA, 2007
IV. Brazilian Migrant Health and Socio-Political Integration

The conventional view of disparities in health suggests that lower socioeconomic status (SES) – usually measured by lower educational attainment, a lower-status occupation, lower income, a poorer neighborhood, and (for Brazilians) poor English skills and being unauthorized – leads to unhealthy behaviors and worse health outcomes. Certain foreign-born groups; however, do not fit neatly into this model. Most Mexicans and other Latinos who migrate to the United States, for instance, are healthier on several important metrics (e.g., birth outcomes, cardiovascular disease) than U.S.-born residents despite their relatively lower SES, at least until they have resided in the United States for decades. This apparent anomaly is known as the “Latino health paradox.”

Researchers often distinguish several outcome categories when studying the determinants of health, including (1) mortality, (2) morbidities, (3) functional limitations, and (4) mental health. But another important distinction to make is between health and access to health insurance and medical care. Insurance and care are factors that sometimes influence health, but despite the political attention currently being given to the need for “universal health care,” health insurance and the medical attention it supports is not the same as health. Other factors, such as one’s household or neighborhood environment, where one works and the kinds of work one does, the quality of one’s interpersonal relationships, and various health behaviors that may be influenced by these – such as diet, exercise, sleep, sex, smoking and alcohol consumption – may be more important determinants of health than access to care. Such a broader demographic, population, “behavioral-ecological” or “social epidemiological” view of health (which does not exclude medical care) is necessary if one hopes to uncover the actual or fundamental causes of health and illness among a population. Assessing the relative importance of these various determinants of health unfortunately requires more effort and space than we can afford in this report. But before considering physical well-being, functional limitations, and various subjective health indicators among adult Brazilian migrants residing in the BCQ-MSA, we first present evidence concerning the most privileged determinant of health in the United States – access to health insurance and medical care.

Access to Health Insurance and Medical Care

Migrant access to certain resources, services and technologies outside the home – in contrast to those briefly considered in the previous sections of this report – are also important, and one area that has received considerable attention during the past decade is health insurance and medical care. In general, a lower proportion of legal U.S. immigrants have health insurance compared to U.S. citizens, and even lower proportions of unauthorized migrants are insured. For instance, approximately 60 percent of unauthorized Latino migrants in California were uninsured between 1994 and 2001, compared to about 40 percent of legal Latino migrants and 10-30 percent of all other ethno-racial-nativity groups. Such high proportions of uninsured among legal and unauthorized migrants should not come as a surprise given that almost 50 million U.S. residents, mostly non-Latino and U.S.-born whites, currently do not have health insurance. Nonetheless, nationally, some of the most recent estimates suggest that 26 percent of all foreign-born adults, 37 percent of foreign-born Latino adults, and 11 percent of U.S.-born adults were uninsured.
Figure 18: Brazilian Migrant Access to Health Insurance and Needed Care, BCQ-MSA, 2007

Figure 18 offers information that is consistent with previous research. Between 55 and 75 percent of unauthorized Brazilian migrants (men and women) were uninsured in 2007. Approximately 40 percent of their legal compatriots were as well. Legal status appears to have had a relatively small effect on whether adult Brazilian migrants obtained medical care they said they needed. Less than five percent of legal Brazilian migrants failed to receive medical care when they thought they needed it, and somewhat higher proportions of unauthorized migrants – 10 percent of women and 18 percent of men – did. Brazilian migrants are relatively young and healthy (as we shall see below), but when they perceive a need for medical care the BM-IHLSS data suggest most of them (82-95 percent) are able to obtain it. We hope to investigate what kinds of care Brazilian access, and who pays for this, in the near future.

Access to medical care, of course, does not guarantee a high quality of medical services for those who receive them. Brazilian migrants’ conflicting expectations and concept of how time should be used in clinical settings vis-à-vis those of U.S. doctors, for instance, has recently been shown to constrain Brazilian women’s clinical encounters such that they do not always report aspects of their health that may be important for diagnosis, prescription and recovery. It has also been suggested that “personal warmth” among physicians, continuity of care, and affectionate verbal and nonverbal cues matter – to both Brazilian men and women. Such disparities between clinical and patient views of adequate care are not new, however. The point is that much more research is needed to understand what kinds of medical services Brazilian migrants receive, and whether these are meeting their needs. We also need to learn more about the relative contribution of medical care to Brazilian migrant health and well-being.

Surprisingly, and although not shown in Figure 18, for unauthorized Brazilian migrants, being self-employed increased the likelihood that they would have health insurance, while for legal Brazilians it decreased the likelihood, but only slightly – 55 percent of legal self-employed Brazilian migrants had health insurance while 41 percent of unauthorized self-employed Brazilian migrants were insured. Furthermore, we saw above in Section II of this report that many Brazilian migrants have entered the United States within the past five years. This is of particular interest in the context of Massachusetts deciding to withdraw public insurance for foreign-born authorized migrants (discussed further in Section V below). Specifically, we estimate that approximately 4,300 (or 24 percent) of all legal Brazilian migrant adults residing in the BCQ-MSA migrated to the United States less than five years prior to the BM-IHLSS.
Happiness and Domain-specific Life Satisfaction

Perhaps the most comprehensive measure of human well-being is overall happiness, or measures of satisfaction in various constituent life domains view jointly. Despite a considerable rise in the number of studies investigating happiness recently, very little research on the happiness of migrants exists. Although some work has attempted to address the well-being of certain migrant groups by assuming that socioeconomic status is a proxy for subjective well-being, no study, as far as we know, has investigated life satisfaction or happiness among Brazilian migrants in the United States. In fact, the only study we were able to locate in the top academic journal on international migration (International Migration Review) finds that life satisfaction among refugees in Australia was relatively high despite significant labor market discrimination. Such resilience is typical of many U.S. migrants, and consistent with the notion that they are selected on health – that is, the so-called “healthy migrant effect.”

![Figure 19: Percent Brazilian Migrants Very Happy or Reporting a Great Deal of Domain-Specific Life Satisfaction, BCQ-MSA, 2007](image)

In Figure 19 we see two results regarding Brazilian migrant well-being worth noting. First, 30 percent of all Brazilian men report having been very happy, on average, and the same proportion of Brazilian women did. However, whereas a lower proportion of Brazilian men appear to be very happy compared to all men residing in the United States (32 percent in 2002), a higher proportion of Brazilian women appear to be very happy compared to all U.S. adult women (28 percent of whom reported having been very happy in 2002). Second, smaller proportions of unauthorized Brazilian men were very happy compared to their legal compatriots, and the same legal status gap existed among Brazilian women.

A quick scan of the proportions of Brazilian migrants who reported getting a great deal of satisfaction from various life domains reveals some important differences. Among Brazilian men, for example, we see that unauthorized migrants gained more satisfaction in every domain compared to their legal counterparts. The same is true for unauthorized Brazilian women compared to legal Brazilian women. These are intriguing results, especially in light of the finding that legal Brazilian men and women report being happier than unauthorized Brazilians.

Past research suggests that family, finances, and health are the most important predictors of overall happiness among men and women in the United States. When limiting the sample to the working-age U.S. population, work is also an important domain. It is unclear from the above descriptive results, however, that the same domains of life that explain happiness among all adults in the United States will do so...
for Brazilian migrants in the BCQ-MSA. But this represents yet another opportunity to use the BM-IHLSS data to study the well-being of Brazilian migrants more systematically than has been done to date. What explains the finding that legal and male Brazilian migrant adults are happier than their unauthorized and female compatriots? And will the advantage Brazilian women seem to have over their male counterparts disappear as these populations age?

**Self-rated Health and Health Behaviors**

We now turn to a consideration of self-rated health and various health behaviors by gender and educational attainment (rather than legal status) in an effort to determine whether socioeconomic status (typically measured by education, occupation and earnings) influences health behaviors and outcomes among Brazilian migrants in the BCQ-MSA as suggested by the SES-health disparities framework. Or do Brazilians conform to the so-called “Latino health paradox”? Put simply, the higher one’s educational attainment the better one’s health should be – if all other things in life were the same for those we are comparing. Because we are only focusing on educational attainment and are not accounting for “all other things,” however, this may not be the case. Or, it may not be the case even if we could control for everything else.

Figure 20 provides only a rough estimate of how socioeconomic status may influence health among Brazilian migrants through various health behaviors. Nonetheless, a higher proportion of Brazilian men than women report having had very good or excellent “general” health. We also see that Brazilian men who graduated from high school report being healthier than those who did not. Conversely, having finished high school does not appear to have influenced Brazilian migrant women’s health, or perhaps in the opposite direction than expected.

![Figure 20: Brazilian Migrant Self-Rated Health and Health Behaviors, BCQ-MSA, 2007](image)

Men thus report being healthier, if not happier, than their female compatriots on average, but it is unclear how well socioeconomic status, at least as measured by educational attainment, helps explain this. When compared to other U.S. immigrants (61 percent) a higher proportion of all Brazilian migrant adults in the BCQ-MSA (64 percent) rate their health as excellent or very good, and an equal proportion do compared to U.S.-born adults.139

Ironically perhaps, given their self-reported health status, higher proportions of men appear to have been engaging in those behaviors (or have experienced certain health conditions) shown in Figure 20 that are likely to harm health. Slightly higher proportions of men, that is, were obese (13 versus nine percent of women), smoked cigarettes (34 versus 20 percent of women), and drank alcohol regularly (14 versus seven percent of women). Taken together, 11 percent of Brazilian migrant adults were obese, 27 percent smoked, and 11 percent drank...
regularly. A substantially smaller proportion of Brazilian migrants, thus, were likely to have been obese compared to either U.S.-born adults (23 percent) or all foreign-born migrants (16 percent) residing in the United States. It also appears that a very small proportion of all Brazilian migrants were likely to be drinking unhealthy amounts of alcohol (more than three drinks per day on average). However, a larger proportion of BCQ-MSA Brazilian migrants were current smokers (27 percent) compared to all U.S. immigrants (eight percent) and even U.S.-born non-Latino blacks (24 percent) according to the nation’s most respected data source.

The picture we get when observing various beneficial health behaviors is more complex. Whereas a higher proportion of unmarried Brazilian men (84 percent) report having used a condom when they last had sex compared to all unmarried men in the USA (65 percent), a lower proportion of Brazilian migrants – 19 percent of both men and women – exercised each week compared to all U.S. adults (31 percent). Taken separately, only Brazilian migrant men with at least a high school diploma (35 percent) achieve a similar level of exercise as the rest of the adult population. In terms of sleep, Brazilian migrants are very similar to other adults in the United States, each group reporting slightly less than 70 percent who sleep between seven and nine hours of sleep on average during the week.

Higher proportions of Brazilian men thus appear to engage in both relatively risky and relatively healthy behaviors (with the exception of sleep). The story that emerges from these comparisons concerning the relationship between socioeconomic status and health behaviors is equally cloudy. Sometimes those who have earned a high school degree engage in healthier behaviors (e.g., diet, exercise among men, smoking, alcohol, condom use among women), and sometimes they do not (e.g., sleep, exercise among women, condom use among men). Lastly, educational attainment appears to have the expected relationship with body weight – lower proportions of both Brazilian men and women who had at least a high school education were overweight or obese. Obviously, future research is needed to understand how socioeconomic and health behaviors are influencing health outcomes among Brazilian migrants.

### Annual Days in Bed & Functional Limitations

Because recent migrants to the United States are younger than the entire U.S. population and are therefore less likely to have lived long enough to have encountered one of the (chronic) leading causes of death in the United States such as cancer, cardiovascular disease, or diabetes; at least one prominent health scholar (David Hayes-Bautista) has called for the need to study intermediate-level health outcomes such as health behaviors (as we just observed), injuries and less severe illnesses that are more common among younger adults. The number of days someone stays home (or in the hospital) from work or other activities to be in bed at least half the day due to illness or injury – and limitations in the ability to eat, bathe, dress or get around inside one’s home (“Activities of Daily Living”) or in the ability to do household chores, necessary business and get around for other purposes (“Instrumental Activities of Daily Living”) – are conventional intermediate-level health outcomes by which we might better compare a recent migrant group with U.S.-born residents of the United States.

Regarding the first measure, recent estimates suggest that U.S.-born adults spend about 1.5 more days in bed due to illness or injury than foreign-born adults (4.9 versus 3.4 days). Among our Brazilian migrant respondents, those who did not complete high school spent less than one day in bed during the year prior to our survey (0.6 days), those who completed high school spent an average of 2.7 days in bed, and taken together they spent 1.7 days in bed on average (Figure 21). Thus, Brazilian migrants may have experienced fewer illnesses and injuries that kept them from their usual daily activities and in bed the year prior to the BM-IHLSS compared to other Americans residing in the United States. As we have seen, however, Brazilian migrants tend to be self-employed or work in occupations that pay hourly wages, and likely have low flexibility with respect to work absence, so it is also possible that these figures reflect reluctance on the part of Brazilian migrants to stay home from work. Figure 21 also shows that Brazilian migrant women remained in bed about one day more than their male compatriots (2.3 versus 1.2 days), and educational attainment was positively related to this health metric.

Nationally, a slightly lower proportion of all foreign-born adults (4.7 percent) compared to U.S.-born adults (5.5 percent) were limited in their ADL or IADL. An even lower proportion of Brazilian migrants in the BCQ-MSA were disabled by this health metric (4.4 percent), although a higher proportion of women (7.1) than men (2.1) were. According to these intermediate-level health outcomes and contrary to the Hayes-Bautista hypothesis that immigrants may not be as healthy compared to U.S.-born residents as chronic disease estimates suggest, then, it appears as if foreign-born residents of the United States in general, and Brazilian migrants residing in the BCQ-MSA especially, were less likely to spend time in bed recovering from illnesses or injuries or to have been functionally limited.
Whether we compare Brazilian migrant health by more subjective intermediate-level health measures such as self-rated happiness and overall health, or by more objective intermediate-level health measures such as health behaviors and functional limitations, the picture remains fairly similar. Brazilian migrant adults are healthier than other BCQ-MSA adults, with the exception of access to health insurance and medical care, smoking and exercise.

We have purposely ignored, until now, two potentially important health outcomes. First, we have assumed that the prevalence rates of various chronic diseases that constitute the leading causes of death in the United States are lower for Brazilian migrants than for other U.S. resident adults because Brazilians have a relatively young age profile. Below we investigate whether this assumption is valid. Second, a number of authors have proposed, and the main purpose of our BM-IHLSS project is to investigate the claim, that recent migrants are more likely than other U.S. residents to experience psychological distress (and physiological stress) due their relatively precarious socioeconomic position, perhaps related to unauthorized status.

Although not shown here graphically, several comparisons regarding outcomes thought to be closely linked to health screening are worth making. First, only 3.4 percent of Brazilian migrants were diabetic (compared to 6.1 percent of U.S.-born and 6.0 percent of foreign-born adults). Second, 0.4 percent had had cancer at some point in their lives – a statistic that requires further consideration in light of the fact that minority and underserved populations are more likely to never have been screened or to be diagnosed with and die from late-stage preventable cancers. The BM-IHLSS data, for example, suggests a mere 39 percent of Brazilian adults who were at least 50 years old had ever been screened for colon or rectal cancer – the national figure is 60 percent. Third, 0.7 percent of Brazilians had heart disease (compared to 7.6 percent of U.S.-born and 5.7 percent of foreign-born adults). Fourth, 2.4 percent of Brazilians had hypertension (compared to 24.3 percent of U.S.-born and 24.5 percent of foreign-born adults). It seems then that Brazilian migrants are indeed healthier when we consider various chronic diseases that are also leading causes of death in the United States, but that many may be foregoing cancer screening exams that could postpone or prevent pre-mature mortality.

Of all the health behaviors and outcomes we were able to study using our BM-IHLSS data, Brazilian migrant adults were worse off on several – smoking, exercise, access to preventive health insurance and medical care, cancer screening, and psychological distress. Regarding our emotional measure of stress (distress), using a conventional mental health index known as the Kessler scale (which uses responses to questions about having been sad, nervous, restless or fidgety, hopeless, worthless, and feeling that everything was an effort), we estimate that 7.3 percent of Brazilian migrant adults were experiencing serious psychological distress. Throughout the United States, by comparison, a significantly lower proportion (2.9 percent) of U.S.- and foreign-born residents were, and 3.6 percent of foreign-born Latinos were. This
finding is consistent with another recent estimate of psychological distress among unauthorized Mexican migrants in the United States. In sum, although unauthorized Brazilian migrants appear to be healthier on average on a host of self-reported and more objective health outcomes, they are estimated to be experiencing more psychological distress than other U.S. residents. It remains unclear how lower levels of participation in exercise and smoking, and lower access to insurance and care (especially cancer screening), influences or is associated with their higher level of distress. While this may not seem problematic, evidence is mounting that prolonged distress eventually leads to a number of chronic diseases that currently rank high in terms of causes of death. Indeed, as Berkman and Kawachi claim, distress is the biological link between sociogeographic factors and long-term health.

We turn now to consider one potential source of Brazilian migrant economic well-being and health – civic, religious, and sociopolitical experiences – or what some researchers term social capital. We do not assume, however, that social networks and civic group participation are always protective. They may sometimes be a source of unhealthy behaviors and poor health.

**Socio-religious and Political Behavior**

Brazilian migrants are generally perceived to lack “community” among themselves compared with other migrants, or at least to participate less often in community- and labor-based institutional activities. Many Brazilian migrants willingly acknowledge this, and one scholar argues that differences in U.S. citizenship status and in time residing in the United States among Brazilian entrants may explain it. Another scholar provides a slightly more nuanced account for the Boston metropolitan area. Although the Brazilian migrant community was not very organized in the early 1990s, by the mid-1990s this began to change. Either way, these statements suggest that perhaps like many other migrant groups, Brazilian migrants may lack “social capital.” Social capital has been shown to be important for understanding labor market and health outcomes, and in our view is best defined as interpersonal networks of reciprocity – a definition that does not assume that the groups in which one participates or those with whom one associates are automatically beneficial or harmful to one’s economic opportunities or health. Relationships, that is, may reduce or be a source of harmful chronic stress. Whether the relationships Brazilian migrants have with others are helpful or harmful is an empirical question that requires representative data such as the BM-IHLSS. The same is true regarding whether participating in some group is healthy or unhealthy.

![Figure 22: Brazilian Migrant Civic Group Participation, BCQ-MSA, 2007](image-url)

Figure 22 presents findings regarding Brazilian migrant adult involvement in several civic, religious, virtual and other groups. In gen-
eral, these conflict with the conventional view that Brazilian migrants do not participate in various community groups. In fact, a majority of them (56 percent) were involved in some type of group in the year prior to our survey. Women (57 percent) were more likely than men (54 percent) to participate, however, and legal (64 percent) more likely than unauthorized (52 percent) Brazilians. Two (of 15 possible) types of organizations stand out as having been important to Brazilian migrants during the year prior to our survey. First, fully 44 percent of Brazilian migrant women and 29 percent of Brazilian migrant men (or an average of 36 percent) reported being involved in a religious organization. It is important to note here that “involvement” implies a deeper attachment than simply attending a church or other kind of religious service. Second, one in five (21 percent) Brazilian men and women were involved in an internet-based group (e.g., Orkut, Hi5). Approximately 14 percent of Brazilian men and women were involved in a youth organization, sports club, parent-teacher association, neighborhood group, senior citizen group, charity organization, labor union, business organization, ethnic or civil rights group, art or literary group, support group, or other kind of organization.

Figure 23 focuses on churches – “the first, and for a time almost the only, institution in which Brazilian immigrants participated in Greater Boston.” There is little doubt that religious institutions have historically played a prominent role in helping international migrants integrate culturally and socioeconomically in the United States, and that migrants help transform religious institutions. Although we do not investigate how Brazilian migrants and religious institutions influenced each other in the BCQ-MSA systematically in this report, the BM-IHLS data permit us to estimate how often migrants attended religious meetings by gender, legal status and time residing in the United States. Brazilian migrant women (49 percent) and legal Brazilian migrants (54 percent) reported having attended more religious meetings than their male (38 percent) and unauthorized (39 percent) compatriots on average during the year prior to the BM-IHLS. Furthermore, it appears that the trend in this measure of religious participation has been different for legal and unauthorized Brazilians regardless of gender. Legal Brazilian migrant men and women attend more meetings the longer they reside in the United States, and unauthorized migrant men and women attend fewer over time. This difference in religious participation by legal status suggests that the church may offer Brazilian migrants different benefits depending on legal status, and points to an area of inquiry worth investigating in the future.
Figure 24: Brazilian Migrant Religious/Spiritual Preference, BCQ-MSA, 2007

Academic wisdom maintains that a minority of Brazilian migrants residing in the United States and in Brazil are Protestant, and that the proportion in both nations is very similar (16 or 17 percent). The majority of Brazilians residing in Brazil in 2000 and presumably in the United States in 2007, alternatively, were Catholic. The computation of the proportion of Brazilian migrants who were Protestant; however, is based on a comparison of Brazilian migrant church attendance (“effective participation”) adjusted for a conservative assumption regarding those who consider themselves Protestant but do not regularly attend church (50 percent), and of the total foreign-born Brazilian population residing in the United States. Apparently no representative data on religious affiliation among Brazilian migrants in any region of the United States are available,122 and thus Figure 24 offers the first systematic evidence concerning their religious affiliation as far as we are aware. The question asked in the BM-IHLSS is straightforward, “What is [the subject’s] religious preference?” Available responses were (1) Protestant, (2) Catholic, (3) Jewish, (4) Muslim, (5) Buddhist, (6) Some other religion, (7) No religious preference, but have spiritual beliefs, and (8) No religious preference, and no spiritual beliefs. Even acknowledging that Freston’s122 estimate of the proportion of Brazilian migrants residing in the United States who were Protestant is for the entire United States in 2000 rather than for the BCQ-MSA in 2007, and that the author embraces a conservative assumption regarding the proportion of migrants who attended church regularly, the BM-IHLSS data intimate that more than one in three (37 percent of) BCQ-MSA Brazilians were Protestant in 2007. Almost one in two (48 percent) were Catholic, of the remaining 15 percent, 13 percent claimed having no religious preference, and there do not appear to be any major differences by gender.

Our estimate of Protestant affiliation is a significantly higher proportion that challenges conventional thought, and is consistent with others’ views that the proportion of Brazilian migrants in the United States who are Protestant is higher than in Brazil.65,84 We should also note that Freston’s122 assumption regarding Brazilian migrant religious attendance is quite conservative, at least for those residing in the BCQ-MSA. Although only 45 percent of all Brazilian migrant adults reported being a member of a local church or religious community, on average they claimed to attend a religious or spiritual service (other than weddings, funerals and other special events) 45 times per year, and fully 81 percent claim to have gone to church at least once in the year prior to our survey. Among Protestant Brazilian migrant adults, the average reported number of services attended per year was 66, and approximately 91 percent claim to have attended church on occasions not included in the list above. However, even if we doubled Freston’s122 conservative attendance assumption, his estimate of the proportion who are Protestant would be 24 rather than 16 percent – still far below our estimated 37 percent among those who reported a religious or spiritual preference (or 31 percent among all Brazilian migrant adults).

What might explain our higher estimated proportion of Brazilian migrant Protestants? The proportion of Brazilian migrants in the
United States is likely to be higher than in Brazil for three reasons: (1) Protestant churches in the United States are relatively well-known for assisting with the difficulties of migrant life; (2) Protestant evangelicalism generally tends to value the freedom to migrate more than other religious groups, and (3) there is a dearth of other Brazilian institutions that serve migrants. For instance, there are only four that serve Brazilian migrants and their children (approximately 73,000 people by our count) in the BCQ-MSA.

Alternatively, the proportion of migrants who are Catholic (or another non-Protestant religion) is likely to be higher than in Brazil because (1) geographically – Minas Gerais (the most important sending state to the BCQ-MSA as we saw in Section II above) has a lower proportion of Protestants compared to the rest of Brazil; and (2) demographically – many Brazilian migrants are young males, who are relatively under-represented in Protestant churches. Clearly more research regarding Brazilian migrants’ religious behavior and its ensuing consequences is needed, especially as it relates to their relatively low position in the BCQ-MSA occupational hierarchy as illustrated in this report, to their social capital accumulation, and to their prospects for future integration in the United States.

Figure 25: Brazilian Migrant Trust in Government and Voting Behavior, BCQ-MSA, 2007

While religious and other types of group participation are commonly used to indicate the level or quality of social interaction population groups have and serve as a proxy for how trustful people are, it may also be useful to gauge how much migrants trust government and whether they are politically active when we are interested in understanding integration in a host nation. These metrics may have particular relevance for Massachusetts and the BCQ-MSA because both the Governor’s Office and the Boston Mayor’s Office have established wide-ranging initiatives designed to facilitate the integration of new migrants in the state and address the potential challenges that accompany demographic change. Figure 25 shows that much higher proportions of Brazilian migrants agreed or strongly agreed that the government in the United States (compared to in Brazil) “can be trusted to do what is best for the American people most of the time.” Specifically, although only 22 percent of Brazilian migrants trusted the government in Brazil using this criterion, about half (51 percent) trusted the United States government, which is notably higher than the proportion of all men (37 percent) and women (38 percent) in the United States who expressed trust in the government to do what is right. We can also see that Brazilian migrant men (28 percent) and those who were unauthorized (25 percent) expressed more trust in the Brazilian government than either migrant women (16 percent) or authorized migrants (16 percent). We observe the same pattern regarding trust in the U.S. government, but at an overall higher level of trust. Brazilian migrant men (54 percent) and those who were unauthorized (55 percent) expressed more trust in their host government than migrant women (46 percent) or authorized migrants (42 percent). These results may bode well for Massachusetts’ and the City of Boston’s efforts on behalf of newcomers, at least with respect to unauthorized migrants; but it would also be interesting in future work to investigate the
reasons for lower levels of trust in government among authorized migrants and whether this is a function of time spent in the United States or other factors.

Although there a number of competing factors influencing whether a migrant continues to vote in home country elections when residing abroad, in general doing so has been interpreted as maintaining ties to one's home country and being less integrated in the United States. Only 13 percent of Brazilian migrants voted in the last general election (of 2006). However, higher proportions of men (14 percent) and legal Brazilian migrants (22 percent) did. This legal status difference in voting behavior makes sense, of course, in the post-September 11th, 2001 context, when cross-border movement of unauthorized migrants has been officially targeted by the U.S. Department of Homeland Security.

Although not obvious from Figure 26, approximately five (4.7) percent of all Brazilian migrant adults had been arrested for a driving (3.5 percent) or a non-driving (2.3 percent) violation during the year preceding the BM-IHLSS. Brazilian migrant men (6.5 percent) were more likely than women (2.6 percent) to have been arrested for either type of violation. And twice the proportion (7.6 percent) of authorized migrants had been arrested compared to unauthorized migrants (3.5 percent). Legal Brazilian migrant men, in sum, were more likely than other Brazilians to have been arrested. What more do the BM-IHLSS data show us? First, a higher proportion of authorized migrant men were arrested for either driving (11 percent) or non-driving (7.2 percent) violations compared to any other sub-group. Second, with one exception (women arrested for a driving violation), higher proportions of authorized migrant men and women were more likely to have been arrested than their unauthorized compatriots.

It is important to underscore the strong evidence indicating that first generation migrants – both legal and unauthorized – are less likely to engage in criminal activity and to be incarcerated than their U.S.-born counterparts. This has led some sociologists to suggest a "Latino paradox" that extends beyond health to crime and other social indicators.
We have seen that smaller proportions of unauthorized Brazilian migrants residing in the BCQ-MSA appear to have participated in various civic group organizations or to have been arrested for various violations. But might this be related to legal status differences in the proportions having had some familiarity or affiliation with various secular community-based organizations serving migrants? Overall, approximately 85 percent of all Brazilian migrant adults were familiar with at least one organization that assists immigrants in their effort to navigate the BCQ-MSA institutional context and integrate in their new environment. Although there is no difference by gender, only 82 percent of unauthorized Brazilians reported being familiar with one of these organizations compared to 92 percent of authorized migrants. This legal status familiarity gap exists across all six organizational categories. Regarding familiarity with the most well-know organization (Brazilian Immigrant Center), for instance, 92 percent of legal Brazilian migrants knew of it and only 77 percent of unauthorized migrants did. The same pattern is seen with the least well-known organization (the Massachusetts Immigrant and Refugee Advocacy Coalition or “MIRA”), where 21 percent of legal and a mere 10 percent of unauthorized Brazilian migrants claim to have known about them.

One might think, given the struggles unauthorized migrants encounter as they seek to adjust to the BCQ-MSA, that many would take advantage of the services provided by these secular organizations. This does not appear to be the case, however. Approximately seven percent of unauthorized migrants were affiliated with one or more of these of these organizations, and only one percent of legal Brazilian migrants were. About five percent of all Brazilian migrants were affiliated with at least one of these organizations. Although not shown here, a larger proportion of males (nine percent) were affiliated with one of these organizations compared to female Brazilian migrants (one percent). Figure 27 suggests that unauthorized Brazilians rely most heavily on the Brazilian Immigrant Center (seven percent) and the Brazilian Workers’ Center (three percent). Figure 28 (below) features some of the Brazilian migrant students and community members who participated in the BM-IHLSS as interviewers being trained on how to collect biological data from survey respondents – and thus were or had become familiar with the Brazilian Immigrant Center.
We have seen in this third and last section of *In*Visible *Im*Migrants that although many Brazilian migrants lack health insurance, most get the medical care they think they need and are healthier than other U.S. residents on almost every health outcome. A higher proportion of Brazilian migrants, that is, are estimated to have been worse off compared to other Americans only when the focus is on psychological distress. Surprisingly, the majority of Brazilians do participate in some type of civic, religious or web-based group . . . and Brazilians tend to trust the U.S. government more than their own when it comes to doing what is best for people. We also saw that most of this community participation is religious, and that a higher proportion of Brazilians in the BCQ-MSA are Protestant than previously thought. Although such activities and trust in government suggest that state and city efforts to encourage migrant integration in the region are likely to succeed, the fact that only a fraction of Brazilian migrants – legal or unauthorized – tap into services provided by community-based organizations such as the Brazilian Immigrant Center means there is more that can and should be done to reach out to Brazilian migrants and their families.
VI. Discussion

This report provides a general portrait of an estimated 73,000 first-, 1.5- and second-generation Brazilian migrants who were residing in the Boston-Cambridge-Quincy Metropolitan Statistical Area (BCQ-MSA) in 2007. 61,000 were legal and unauthorized adult Brazilian migrants, 3,000 were their (non-adult) children who were born in Brazil, and 9,000 were their non-adult U.S.-born children. The most recent U.S. Census (2007 American Community Survey) estimate of the number of foreign-born Brazilians residing in metropolitan Boston, furthermore, is 29 percent lower than that offered by our estimated 64,000. The claim that foreign-born Brazilians are an “invisible minority” is no longer valid, and this, plus the fact that the majority (70 percent) of Brazilian migrants are estimated to be unauthorized to reside legally in the United States, motivates the title of our study – (In)Visible (Im)Migrants. Brazilians are no longer invisible and most are not authorized immigrants.

Our study began (in section I) by highlighting a concern often associated with the suspicion that a high proportion of Brazilians are unauthorized. That is, some observers note that Brazilians are known to fill many lower-socioeconomic status jobs in the BCQ-MSA, and not well-known for being a tight-knit community. In other words, although our empirical results suggest that Brazilian migrants are filling a labor market niche that is likely to be complementary (rather than competitive) in the BCQ-MSA regional economy and challenge the belief that Brazilians lack a commitment to their “community,” some contend that prospects for future Brazilian migrant socioeconomic integration may not be promising.

Several prominent migration scholars make this argument more broadly by including all recent migrant groups, not just Brazilians, and point out that earlier waves of migrants – such as Italians and European Jews – entered an America that offered many more opportunities for socioeconomic advancement. Specifically, these scholars claim that recently arrived foreign-born adults and their foreign-born children who were brought to the United States before the age of 13 (“children of immigrants” or the “1.5 generation”), as well as their U.S.-born children (the “new second generation” or “immigrant children”) will become part of a multi-ethnic underclass rather than the mainstream middle class. Such downward integration, or “assimilation,” is attributed to a more neoliberal deindustrialized U.S. economic structure today that offers mostly service sector jobs with little opportunity for upward mobility, few opportunities to accumulate social capital as migrants settle in neighborhoods of concentrated poverty, and ongoing ethno-racism in the United States despite the election of the nation’s first black president in November 2008.

Some of these issues, especially those regarding between home-host and within host nation downward socioeconomic mobility, have received much attention in the research focused on Brazilian migrants to date. One recent ethnographic study of first-generation migrants, for instance, finds that despite innovative efforts by labor unions to recruit and improve the labor market outcomes of Brazilian migrant workers in the BCQ-MSA, innovative approaches such as linking with community-based organizations (CBOs) such as the Brazilian Immigrant Center and visiting migrants in their homes have produced little success. Indeed, although our report does not address this issue, the BM-IHLSS data suggest that a mere three percent of all Brazilian migrant workers were members of a labor union or covered by a union contract in 2007. Another recent ethnographic study also lends credence to the downward integration view by arguing that 1.5 generation Brazilian “children of immigrants” are likely to become members of the underclass in large part because their parents expect them to work while in school or to leave school altogether as soon as possible to increase short-term earnings. Yet a third relatively recent (1995-1996) ethnographic study in Somerville, Massachusetts finds that second generation Brazilian “immigrant children” are benefitting socially by being bilingual. What pattern of integration (under- or middle-class) will obtain remains to be seen.

Challenging this somewhat pessimistic perspective are the arguments of another set of equally prominent scholars. They emphasize that migrant integration is a long-term process (involving cross-generational changes in language, education, inter-group marriage, and labor market mobility) and that earlier waves of migrants also struggled before becoming fully integrated during the third generation. The second generation of Brazilians in the United States is just beginning to emerge, and it will be another two or three decades before we can assess how well they are integrating. But many Brazilian migrants are already succeeding economically (relative to other migrant groups) despite having a high proportion of unauthorized residents. For instance, although Brazilians earned considerably less than other workers in the BCQ-MSA ($29,000 versus $37,000) in 2007, they earned more than workers across the nation ($28,000) on average, and a mere one percent received any form of public assistance. Ira and Marcelo pictured and discussed in the introduction are only two examples.

There are several other indicators that suggest the possibility of successful future Brazilian integration. First, although 40-75 percent of adult Brazilian migrants lacked health insurance in 2007, lower proportions are screened for cancer or exercise daily compared to other American adults, and higher proportions were psychologically distressed or smoked cigarettes – Brazilian migrants had better overall health on every other health metric.

Second, contrary to the belief that Brazilians are less communal (or caring) than other migrant groups, our data show that more than half (56 percent) were involved in at least one civic, religious or internet-based group in the year prior to the BM-IHLSS. Most (36 percent) of this activity was religious, but many others participated in a wide variety of social events and organizations. Consistent with this evidence, fully 85 percent of all adult Brazilian migrants were familiar with at least one community-based organization working with Brazilian migrants in the BCQ-MSA. Yet, only a fraction tapped into the services provided by these organizations. Instead, Brazilians appear to place much more faith in U.S. government institutions to do what is best for people, which leads us to our third and final point regarding the likelihood of future Brazilian socioeconomic integration.

Two relatively recent government-sponsored initiatives focus on the integration of migrants in Massachusetts. First, as a continuous immigrant gateway, the City of Boston has long experienced influxes of migrants from all over the world. As our report demonstrates, Brazilian migrants face several challenges to and opportunities for future socioeconomic integration. Recognizing this, Mayor Thomas Menino, currently serving his fourth term in office, created the Office of New Bostonians (ONB) in 1998. ONB’s mission is to enhance opportunities for migrant integration and highlight the contributions of migrant communities to the Greater Boston area (BCQ-MSA). Second, a
decade later (July 2008) Governor Deval Patrick signed an Executive Order establishing the Massachusetts New Americans Initiative (MassNAI), to be administered by the Office of Refugees and Immigrants. This initiative is designed to draw on the expertise of community and business leaders across the state to facilitate the integration process for new immigrants and design policy measures that will further the goals of integration. Specifically, MassNAI aims to enhance the human capital characteristics of recent migrants, ensure access to a variety of public services, emphasize meeting the needs of the children of migrants, encourage institutions of higher education to recruit and retain migrants, and assess the needs of communities across the state in which these “newcomers” live.

While these initiatives have the potential to generate socioeconomic and civic opportunities for Brazilian and other migrants in Massachusetts, there are also some significant obstacles to long-term integration. Of particular concern for migrants are recent cuts to medical services and health care coverage. Economic woes in the state and across the country have prompted the Massachusetts legislature to eliminate health care coverage for 30,000 migrants living in the state legally. Federal immigration reform laws passed in 1996 prevent migrants who have been in the United States for less than five years and are not yet citizens from enrolling in Medicaid or obtaining other federal benefits, regardless of legal status. Until this year Massachusetts was one of four states (California, New York and Pennsylvania) that offered health care benefits to this population to fill the coverage gap.

For those migrants and other members of the population who do not have any form of health insurance, such as 59 percent of uninsured Brazilian migrants in the BM-IHLSS, emergency care is available, but it costs hospitals a great deal of money to treat uninsured or underinsured patients. Under Massachusetts’ recent health reform, designated “safety net” hospitals – those that see disproportionate numbers of uninsured patients – were supposed to gain higher rates of Medicaid reimbursement to partially balance these costs. Instead reimbursement rates have dropped while Medicaid enrollment has increased in the state, a situation that threatens the quality of medical care to the extent that Boston Medical Center, which serves the greatest number of uninsured and Medicaid patients, has filed a lawsuit against the Commonwealth. As a recent migrant group with lower rates of coverage and lower socioeconomic status, Brazilians may be disproportionately affected by the ensuing struggle over health care in Massachusetts. As we have seen in this report, Brazilian migrants, in the BCQ-MSA at least, are no longer invisible, nor are they necessarily resistant to community involvement as some earlier research suggests. Nevertheless, Brazilians, just like other migrants to the U.S., still face barriers to integration, often exacerbated by unauthorized legal status. Identifying the work that community organizations serving Brazilian migrants need to do to raise their profiles in the Brazilian community, recognizing that Brazilian migrants are a complement to the regional labor market, providing means by which they can maintain their good health, and building on the higher than average levels of trust in U.S. government among unauthorized Brazilians in particular, initiatives like those outlined above may prove very promising in advancing Brazilian migrant integration in the BCQ-MSA.
Appendix A: About the Brazilian Immigrant Center

The Brazilian Immigrant Center (BIC) is a community-based grassroots organization that supports and empowers Brazilian immigrants in the Greater Boston area. Its mission is to unite Brazilian immigrants to organize against economic, social and political marginalization, and to help create a more just society. The BIC was founded in 1995 by a group of Brazilian migrants, and was officially registered as a 501 (c) (3) non-profit organization in 1996. For the last 14 years, the BIC has provided its constituents with the information, knowledge and skills necessary to become self-sufficient and engaged members of American society. Based in Allston, the BIC is the only group in the region focused on the needs of Massachusetts’ Brazilian workers, providing all of its programming in Portuguese.

The BIC educates and organizes Brazilian workers in the areas of Workers’ Rights, Civic Engagement, Immigration, Safety and Health in Workplace and English as a Second Language, with the ultimate goal of increasing and diversifying public participation in the political system, and building the political power of this rapidly growing immigrant group in the eastern Massachusetts area. More specifically, the BIC seeks through education and empowerment to reduce exploitation of immigrant workers. The BIC’s projects are highly collaborative, working in conjunction with many other immigrant rights groups, unions, and churches. The BIC continues to train its members to teach others about their rights, and encourages members to take leadership positions, helping to organize, and assisting individuals who have been denied fair pay or safe working conditions.
Appendix B: References

2. Huntington SP. The Hispanic Challenge. Foreign Policy 2004;March/April:30-45.


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