

## Commentary: The Health of Rural to Urban Migrants in China

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**M**uch more attention is being paid to the health status of rural-to-urban migrants and their access to basic health services in China, where the number of rural-to-urban migrants accounted for approximately one-quarter of urban residents. The authors of the following two papers have provided evidence for the need to improve the living and employment conditions and increasing the healthcare services available to rural-to-urban migrants. The authors' evidence is based on the questionnaire survey of 4,208 young rural-to-urban migrants and qualitative data from in-depth interviews with 90 rural-to-urban migrants in two major metropolitan centres in China. The studies show that young rural-to-urban migrants generally tend to exist in unstable living arrangements and substandard employment conditions, characterized by suboptimal health status, inferior health-seeking behaviours, elevated levels of substance use, depressive symptoms and expressions of dissatisfaction with life and work, with which the increases in mobility were associated. Lack of insurance coverage, high cost of healthcare and exacting work schedules have resulted in migrants' use of unsupervised self-treatment or substandard care.

Until now, migrants could not be brought into the urban social security system in China, except in some cities, such as Shenzhen, Zhuhai, Shanghai, Chengdu, Beijing and Zhenjiang, where rural-to-urban migrants have been covered by some social insurance schemes. Most risks and uncertainties resulting from migration are borne by migrants and their families. On the other hand, a new rural cooperative medical scheme has been promoted by the Chinese government to provide basic health security in rural areas. However, the rural-to-urban migrants, especially the young, are unwilling to enroll in the scheme because, with their relatively higher incomes and expectations as compared to rural non-migrants, they want to access better healthcare services than are delivered by rural health institutions. For migrants working in big cities, it is relatively inconvenient to utilize the covered health services that are delivered by village post, township and county hospitals. The rural-to-urban migrations put forward an important and difficult task to guarantee basic coverage for migrants' healthcare.

These two papers give us a profile of rural-to-urban migrants and an understanding of the association between health status and geographic mobility. This issue is accelerated by increased modernization and industrialization, which increases the need of rural-to-urban migrants to access healthcare in China.

### About the Author

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