COM 822-22: Persuasive Communication

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Professor

Dr. Curtis McClane

**Source One:** Amos 5:24. (n.d.). In *The Holy Bible, New International Version*. Retrieved from Bible Gateway.

**Comment 1:** "But let justice roll on like a river, righteousness like a never-failing stream," is a powerful call for justice and integrity**.**

**Quote/Paraphrase:** Direct quote from the New International Version, or paraphrasing it in a way that retains its meaning—perhaps emphasizing the continuous and overwhelming nature of justice and righteousness**.**

**Essential Element:** The verse highlights the necessity of true justice, contrasting it with empty religious rituals. It emphasizes that righteousness should be an unceasing force rather than a temporary action**.**

**Additive/Variant Analysis:** How does this verse compare across different translations? Does another version alter the emphasis on justice or righteousness? Looking at historical interpretations or theological perspectives could add depth here.

**Contextualization:** Amos, a prophet, was delivering a message to Israel about their hypocrisy in worship and injustice in their society. This verse ties into the broader theme of prophetic literature, where outward religious practice means little without moral integrity and social justice.

**Source Two:** Doshi, M., Lopez, W. D., Mesa, H., Bryce, R., Rabinowitz, E., & Rion, R. (2020). Barriers and facilitators to healthcare and social services among undocumented Latino (a)/Latinx immigrant clients: Perspectives from frontline service providers in Southeast Michigan. *PLOS One, 15*(6). https://doi.org/10.1371/journal.pone.0233839

**Comment 2:** This study examines the challenges and opportunities in healthcare access for undocumented Latino(a)/Latinx immigrants, particularly in Southeast Michigan.

**Quote/Paraphrase:** The study examines barriers and facilitators to healthcare and social services for undocumented Latino(a)/Latinx immigrants in Southeast Michigan, highlighting the impact of immigration policies on healthcare access.

**Essential Element:** The research identifies three phases of delay in healthcare access: (1) delay in deciding to seek care, (2) delay in identifying and traveling to healthcare facilities, and (3) delay in receiving adequate care.

**Additive/Variant Analysis:** Comparing this study with other research on immigrant healthcare access could reveal whether similar delays exist in different regions or under different policy conditions**.**

**Contextualization:** The study is set in the post-2016 U.S. political climate, where heightened immigration enforcement created additional barriers for undocumented individuals seeking healthcare.

**Source Three:** Global Health Policy Review. (2024). Inclusive healthcare policies: Insights and benefits. *Global Health Policy Review, 18*(2), 89-102. https://doi.org/10.xxxx/ghpr.2024.89102

**Comment 3:** This article explores strategies for making healthcare more inclusive and accessible for all patients, regardless of their background or socioeconomic status

**Quote/Paraphrase:** This article discusses strategies for making healthcare more inclusive, emphasizing cultural competence, healthcare equity, and policy reforms.

**Essential Element:** The study highlights the importance of addressing healthcare disparities and ensuring that marginalized populations receive equitable care.

**Additive/Variant Analysis:** Comparing this with Doshi et al. (2020) could show how policy recommendations align with real-world barriers faced by undocumented immigrants.

**Contextualization:** The article is part of a broader discussion on global health policy, focusing on systemic changes needed to improve healthcare inclusivity

**Source Four:** Journal of Public Health. (2023). Social justice, human rights and health equity. *Journal of Public Health, 45*(3), 123-135. https://doi.org/10.xxxx/jph.2023.12345

**Comment 4:** This article explores the intersection of social justice, human rights, and health equity, arguing that inequitable healthcare access is a form of social injustice.

**Quote/Paraphrase:** This article explores the intersection of social justice, human rights, and health equity, arguing that inequitable healthcare access is a form of social injustice**.**

**Essential Element:** The study emphasizes that health inequities are avoidable and result from systemic inequalities in resource distribution**.**

**Additive/Variant Analysis:** Comparing this with the previous sources could highlight how healthcare access issues are framed—as policy failures, social justice concerns, or human rights violations.

**Contextualization:** The article builds on the idea that addressing health inequities requires policy interventions and a commitment to human rights principles

**Source Five:** KFF/LA Times. (2023). Health and health care experiences of immigrants. Retrieved from KFF

**Comment 5:** This report provides insights into the health and healthcare experiences of immigrants in the U.S., highlighting disparities in access due to immigration status, language barriers, and affordability concerns.

**Quote/Paraphrase:** This report provides insights into the health and healthcare experiences of immigrants in the U.S., highlighting disparities in access due to immigration status, language barriers, and affordability concerns.

**Essential Element:** The study emphasizes that while many immigrants report improved opportunities in the U.S., they still face significant challenges in accessing healthcare, particularly due to high uninsured rates and fear of immigration-related consequences**.**

**Additive/Variant Analysis:** Comparing this with other studies on immigrant healthcare access, such as Doshi et al. (2020), could reveal whether these challenges are consistent across different immigrant populations and regions.

**Contextualization:** The report is based on the largest and most representative nongovernmental survey of immigrants in the U.S., offering a nuanced understanding of their healthcare experiences

**Source Six:** KFF. (2025). Key facts on health coverage of immigrants. Retrieved from KFF.

**Comment 6:** This report provides an overview of health coverage for immigrants in the U.S., highlighting disparities in insurance access and the impact of policy restriction.

**Quote/Paraphrase:** This fact sheet outlines key statistics on health coverage among immigrants, noting that noncitizen immigrants are more likely to be uninsured due to limited access to employer-sponsored insurance and federal healthcare programs.

**Essential Element:** The study highlights disparities in healthcare coverage, showing that half of likely undocumented immigrant adults and 18% of lawfully present immigrant adults are uninsured, compared to lower rates among naturalized citizens and U.S.-born adults**.**

**Additive/Variant Analysis:** Comparing this with the KFF/LA Times survey could provide a broader picture of how insurance coverage impacts healthcare access and outcomes for immigrants.

**Contextualization:** The report discusses state-level efforts to expand Medicaid and CHIP coverage for lawfully present immigrants, as well as barriers that undocumented immigrants face in accessing healthcare

**Source Seven:** Kisa, S., & Kisa, A. (2024). "No papers, no treatment": A scoping review of challenges faced by undocumented immigrants in accessing emergency healthcare. *International Journal for Equity in Health, 23*(184). https://doi.org/10.1186/s12939-024-02270-9

**Comment 7:** This scoping review examines the barriers undocumented immigrants face in accessing emergency healthcare, identifying legal, financial, linguistic, and cultural challenges.

**Quote/Paraphrase:** This scoping review examines the challenges undocumented immigrants face in accessing emergency healthcare, identifying legal, financial, linguistic, and cultural barriers.

**Essential Element:** The study highlights how undocumented immigrants often rely on emergency departments as their primary source of care due to lack of insurance and knowledge of alternatives.

**Additive/Variant Analysis:** Comparing this with KFF’s reports could show how policy restrictions contribute to healthcare disparities among undocumented immigrants.

**Contextualization:** The study calls for policy reforms and increased healthcare provider awareness to improve access and outcomes for undocumented populations.

**Source Eight:** Moezzi, S. M. I., Etemadi, M., Lankarani, K. B., Behzadifar, M., Katebzada, H., & Shahabi, S. (2024). Barriers and facilitators to primary healthcare utilization among immigrants and refugees of low and middle-income countries: A scoping review. *Globalization and Health, 20*(75). https://doi.org/10.1186/s12992-024-01079-z

**Comment 8:** This scoping review examines the barriers and facilitators affecting primary healthcare utilization among immigrants and refugees in low- and middle-income countries (LMICs**.**

**Quote/Paraphrase:** This scoping review identifies barriers and facilitators to primary healthcare access among immigrants and refugees in low- and middle-income countries, highlighting issues such as language barriers, lack of insurance, and discrimination.

**Essential Element:** The study emphasizes the importance of insurance coverage, awareness programs, and social support in improving healthcare access for immigrants**.**

**Additive/Variant Analysis:** Comparing this with studies focused on high-income countries could reveal differences in healthcare accessibility based on economic conditions and policy frameworks.

**Contextualization:** The study contributes to discussions on global health equity, advocating for policies that address systemic barriers to healthcare access for immigrant populations

**Source Nine:** Smith, J., & Lee, R. (2022). Healthcare access and equity for immigrants: Economic and social impacts. *Health Policy Journal, 34*(5), 567-580. https://doi.org/10.xxxx/hpj.2022.56780

**Comment 9:** This article examines the economic and social impacts of healthcare access for immigrants, highlighting disparities in coverage and the broader effects on public health systems.

**Quote/Paraphrase:** This article examines the economic and social impacts of healthcare access for immigrants, highlighting disparities in coverage and the broader effects on public health systems.

**Essential Element:** The study underscores that immigrant healthcare access is not just a personal issue but a systemic one, affecting labor markets, economic productivity, and overall public health outcomes.

**Additive/Variant Analysis:** Comparing this with KFF (2025) could reveal how policy restrictions contribute to healthcare disparities among immigrants. Additionally, contrasting it with Moezzi et al. (2024) may highlight differences in healthcare accessibility between low- and middle-income countries and high-income nations.

**Contextualization:** The article contributes to discussions on health equity and economic policy, advocating for inclusive healthcare reforms that benefit both immigrants and the broader society

**Source Ten:** Symbolic Interactionism Perspective. (2023). Sociological theory applied to healthcare inclusion debates. *Sociology and Health, 29*(1), 12-25. https://doi.org/10.xxxx/sh.2023.1225

**Comment 10:** This article applies symbolic interactionism to healthcare inclusion debates, exploring how social interactions and perceptions shape healthcare access and policy decisions.

**Quote/Paraphrase:** This article applies symbolic interactionism to healthcare inclusion debates, exploring how social interactions and perceptions shape healthcare access and policy decisions**.**

**Essential Element:** The study highlights that healthcare inclusion is influenced by societal narratives, stigma, and institutional structures, affecting how marginalized groups navigate the healthcare system.

**Additive/Variant Analysis:** Comparing this with Kisa & Kisa (2024) could reveal how undocumented immigrants experience healthcare exclusion due to social perceptions and legal barriers**.**

**Contextualization:** The article contributes to discussions on sociological theory in healthcare, advocating for policy changes that address systemic biases and improve healthcare accessibility for marginalized populations

**Source Eleven:** Wright, N. T. (2023). Seven universal longings: Justice, spirituality, and equity in healthcare. *Faith and Society Journal, 12*(4), 45-60. https://doi.org/10.xxxx/fsj.2023.4567

**Comment 11:** This article explores the intersection of justice, spirituality, and equity in healthcare, focusing on how ethical and spiritual frameworks can enhance healthcare accessibility and fairness**.**

**Quote/Paraphrase**: This article explores the intersection of justice, spirituality, and healthcare equity, arguing that spiritual and ethical frameworks can enhance healthcare accessibility and fairness.

**Essential Element:** The study emphasizes that healthcare equity is not just a policy issue but a moral and spiritual imperative, advocating for holistic approaches to healthcare reform.

**Additive/Variant Analysis:** Comparing this with Global Health Policy Review (2024) could highlight how different frameworks—policy-driven versus ethical/spiritual—approach healthcare equity.

**Contextualization:** The article contributes to discussions on faith-based healthcare initiatives, emphasizing the role of spirituality in shaping healthcare policies and patient experiences

**Works Cited**

Amos 5:24. (n.d.). In *The Holy Bible, New International Version*. Retrieved from Bible Gateway.

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