



# Public Health Actions for Immigrant Rights

A Short Guide to Protecting Undocumented Residents and Their  
Families for the Benefit of Public Health and All Society

*Public Health Awakened is an initiative convened and staffed by Human Impact Partners*



## Concern: Accelerating Deportations

### Number and pace of deportations expected to increase

| PRESIDENT | TIME PERIOD | MILLIONS DEPORTED |
|-----------|-------------|-------------------|
| Obama     | 2008-2016   | 2.5 million       |
| Trump     | ?           | 2 million         |

### A widening net

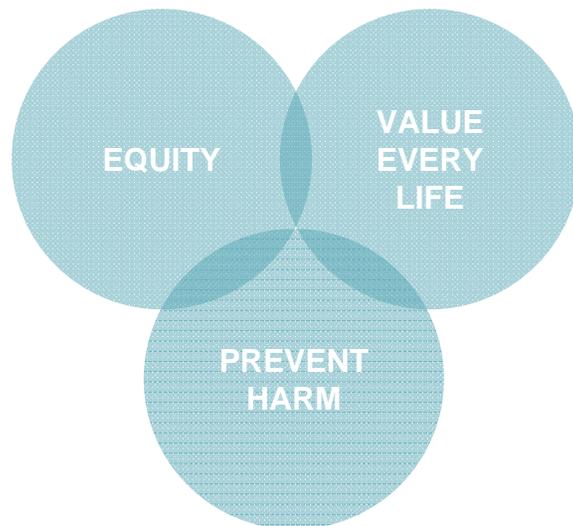
- Many undocumented persons with criminal records already deported under Obama administration
- The Trump administration will need to cast a wider net
  - Expanded definition of 'criminal'
  - Those without criminal records entangled in efforts





## A Contradiction to Public Health Principles

*Accelerated deportations contradict our values and ethics.*



People come to the US to **improve their lives**, often in response to physical and sexual violence, oppression, and poverty.

We remember that it is part of the **US origin story** to welcome people to this country, with or without documentation.





## Local Government Has Been Complicit In Past Mass Deportations



### Great Depression

County social workers supported and participated in deportation of 2 million Mexican-American people, *including 1 million US citizens*



### 1954 "Operation Wetback"

Eisenhower deported 3.8 million Mexican Americans



UNDOCUMENTED PARENTS OF US-BORN CHILDREN ROUTINALLY DEPORTED WHILE THEIR CHILDREN REMAIN IN U.S.



**11,000,000**

undocumented immigrants live in the US currently

**4,500,000**

US-citizen children live in families in which at least one person is undocumented

**150,000+**

US-citizen kids a year had a parent deported



*Deportation and threat of deportation affect not only undocumented people, but also their children and family members who are often legal residents, anyone perceived to be an immigrant based on skin color or other factors, other people with whom they share communities or schools, and our broader society.*



THIS IS A  
**COMMUNITY HEALTH & SAFETY**  
ISSUE



## Fear of Deportation Makes Communities Less Healthy

*Deportation policy creates a climate of fear and paralysis in communities.*



People are afraid to drive,



afraid to use parks and exercise outdoors,



afraid to use public services like clinics



and afraid to get involved in their communities.





## Children Are Especially Vulnerable

**Deportations and threat of deportations lead to:**



**POORER CHILD HEALTH**



**POORER CHILD EDUCATIONAL OUTCOMES**



**POORER CHILD BEHAVIORAL OUTCOMES**



**POORER ADULT HEALTH AND SHORTER LIFESPAN**





## Fear of Deportation Leads to Stress and Trauma

### Deportation and the Threat of Deportation:

- ◉ **LEAD TO MENTAL HEALTH ISSUES AMONG KIDS** - Nearly 30% of undocumented parents in the report said their **US-citizen children are afraid either all or most of the time**. Nearly half said that their child had been anxious, and three-quarters said that a child has shown **symptoms of post-traumatic stress disorder**.
- ◉ **LEAD TO POOR BIRTH OUTCOMES** - A recent study found a **24% increase in risk of low birth weight among infants born to Latina mothers after a major immigration raid**, when compared to birth weights before the raid (see [Novak et al, 2017](#)).





## Fear of Deportation Makes Communities Less Safe

### Deportation and the Threat of Deportation:

- ◉ **MAKE LAW ENFORCEMENT MORE DIFFICULT** - People who witness/are victims of a crime are less likely to report the crime or cooperate as witnesses if they fear deportation or questions about immigration status for themselves or someone they know.
- ◉ **MAKE VICTIMS OF VIOLENCE LESS LIKELY TO GO TO POLICE** - Domestic violence victims often remain with their abuser rather than risk being detained and/or deported when seeking protection from abuse
- ◉ **EXACERBATE MENTAL ILLNESS & INSTABILITY** - Documented and undocumented immigrants experience **exacerbated health conditions like stress, anxiety, and hopelessness** due to fears of deportation for themselves or members of their community.



# **ACTIONS** YOU CAN TAKE



1

Continue to promote health agency policies to provide services to all people, and to ensure all people understand that they are welcome at the agency.





BACKGROUND:

## Health Agencies Serve All People

- Primary resource to support health of immigrants regardless of status
- Directly provide key health services / direct clients to relevant providers
- Political uncertainty may exacerbate barriers to access





## What Health Agencies Can Do

- Research your agency's resolutions and protections for legal accuracy
- Publicly state agency commitment
- Post signs in multiple languages, that are linguistically sensitive, and avoid alienating vocabulary
- Distribute "know your rights" pamphlets
- Avoid collecting patient data that can be used to identify or deport undocumented people





## What Health Agencies Can Do

- Track/study # of un-enrollments to encourage undocumented people to continue seeking health agency support
- Train staff in proper response to U.S. Immigration and Customs Enforcement (ICE) action
- Work with other health agencies to promote regional efforts and efficiently utilize resources
- Ensure availability of trained interpreters
- Ensure affordability of healthcare services & advocate for continued funding
- Communicate with & share these strategies broadly with other service agencies and decision makers



2

Support cities, counties, and states that pledge to provide sanctuary in different forms to undocumented residents and to reject 287(g) agreements.





BACKGROUND:

## Primer on “Sanctuary” Cities, Counties, or States and 287(g)

- There is no legal obligation—for a city, county, or state—to assist with federal civil immigration enforcement, including through 287(g) agreements
- There is no single definition of a sanctuary city, county, or state
- It is important to understand the details of policies in your jurisdiction before communicating these details publicly
- When drafting a “sanctuary” policy, the most defensible approach is to state that jurisdictional “time/resources will not be used to target residents on the basis of immigration status”
- 287(g) recruits local police officers and sheriff’s deputies to help with deportation, effectively making them immigration agents





WHAT HEALTH AGENCIES CAN DO:

## Advocate for Model Language and Policies

### WHERE SANCTUARY POLICIES **ALREADY EXIST**

- ◉ Help implement & continue to support policies.
- ◉ Argue for inclusive policies

### WHERE SANCTUARY POLICIES **DO NOT EXIST, OR 287(g) AGREEMENTS DO EXIST**

- ◉ Advocate for adoption of policies/actions that support health and equity





WHAT HEALTH AGENCIES CAN DO:

## Advocate for Model Language and Policies

### Model language tips and examples:

- Incorporate health rationale/citation at beginning of policy document to highlight connections between health & deportations
- Ensure that language does not have loopholes or carve-outs for specific categories of immigrants (i.e., based on criminal record, immigration status, etc.)

[Oak Park, IL](#)  
["Welcoming Village Ordinance"](#)

[County of Santa Clara, CA](#)  
["2011 Ordinance"](#)





WHAT HEALTH AGENCIES CAN DO:

## Advocate for Model Language and Policies

**When determining if policies HELP or HARM, look for:**

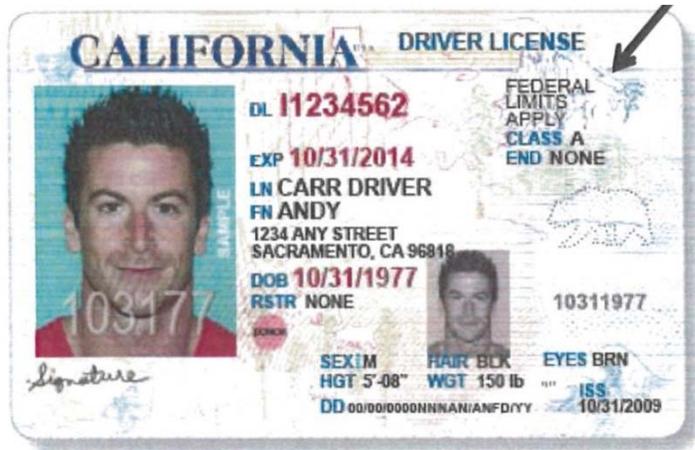
- Local law enforcement should:
  - NOT HOLD, DETAIN OR INFORM ON undocumented people for ICE
  - REQUIRE ICE to have warrant / ENACT PROTECTIONS for undocumented persons to refuse ICE interrogation
  - Be PROHIBITED FROM ASKING a person's birthplace or immigration status
- Local jurisdictions should PROHIBIT USE of local resources in complying with ICE requests



WHAT HEALTH AGENCIES CAN DO:



## Advocate for Model Language and Policies



### Additionally advocate for:

- Local ID cards to allow undocumented people to access government or other services
- The City of Seattle's 7 points of protection
- Laws that prohibit criminalizing daily activities (e.g. driver's license)
- Create offices that work to protect ALL immigrant residents of a county (e.g. Los Angeles County's Office of Immigrant Affairs)

3

Advocate that local and state government create a legal defense fund for undocumented residents.





## Background

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- Undocumented immigrants, including young children, are not guaranteed court representation for immigrant-related cases
  - 7-fold better success rate in court with representation
- Cities and counties pledging money for legal services (funds) to people facing deportation.
  - Los Angeles: \$10M (city/county) + \$3M (county) + private foundation
  - Chicago: \$1.3M
  - California AB3 & SB6: Create state program to fund representation + state-funded regional centers to train defenders





## What Health Agencies Can Do

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- Encourage local & state elected officials to fund legal services for undocumented residents, emphasizing health & equity
- Identify agencies (public defenders, nonprofit legal clinics) already working on legal defense funds

Seek knowledge and partnership opportunities

Capacity building of political landscape



4

Connect undocumented clients and their families with legal rights and community organizing groups.





## Background

Many **community organizing and legal services** groups already support undocumented residents/families by:



- **BUILDING THEIR CAPACITY:** Develop leadership skills, reduce isolation/fear, avoid unnecessary contact with police
- **HELPING THEM TAKE ACTION:** By resisting deportations, “underground railroad” sanctuary churches, sanctuary restaurants, organizing for community-based healthcare





## What Health Agencies Can Do

### **HAs can support & partner with community organizing and legal service groups:**

- ◉ One-on-one meetings to establish new relationships
- ◉ Focus on building strategic, long-term, trusting relationships
- ◉ Utilize HA expertise as voice for undocumented people/families in ALL stages of policy/program development & decision-making
- ◉ Activity refer undocumented clients/families to these community organizing and legal service groups



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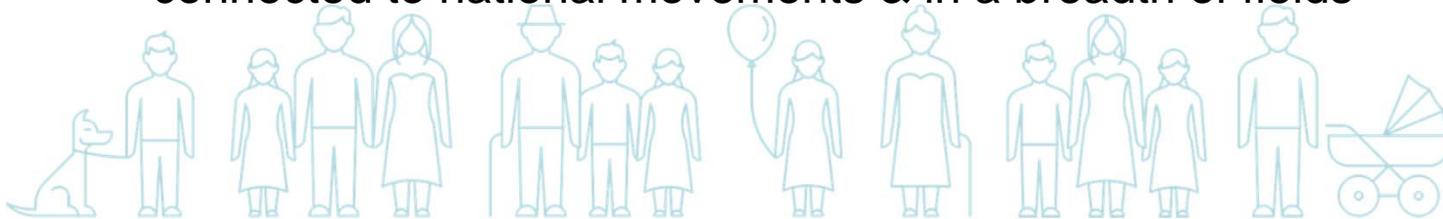
Join/build alliances that cross issue areas and include immigration.





## Background

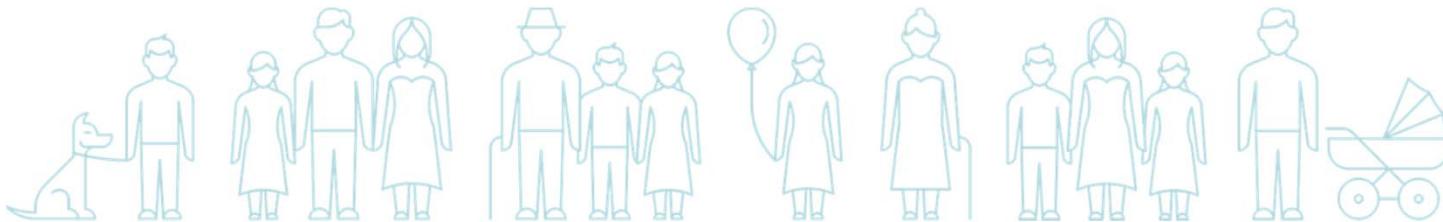
- Other groups beyond undocumented persons are also under attack or feeling threatened
- Focus on building power: integrate, coordinate, and setup strategic infrastructure and networks
- Identify trusted allies and reach out to less well-known groups
- Work with to local community organizing groups/advocates connected to national movements & in a breadth of fields





## What Health Agencies Can Do

- Identify relevant meetings & conversations where public health is not actively involved, but could contribute
- Join alliances to bring the voice of public health to these groups and advocate for undocumented populations
- If alliances non-existent, have your HA act as a convener for these groups



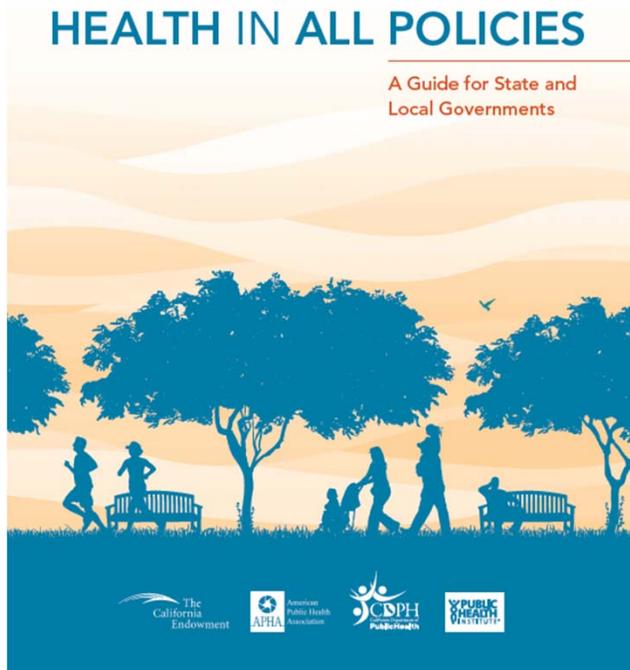
6

Encourage and support the efforts of sister agencies, including in criminal justice, to protect undocumented people and their families.





## Background



### Health in All Policies:

- Decisions affecting undocumented persons/families made outside public health
- HAs have or can build relationships with these decision-makers
- Use these relationships as opportunity to improve health & advance health equity





## What Health Agencies Can Do

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- Determine what sister agencies (sheriff, police, education, etc.) are currently doing for undocumented residents
- Reach out to sister agencies already offering supporting to share evidence that policies improve health & equity
- Meet with leadership at sister agencies that have not yet established supportive policy/procedures - BE STRATEGIC!
- Encourage cities, counties, and states to pledge to provide sanctuary in different forms



7

Encourage labor enforcement to adopt and implement policies that protect worker rights, regardless of immigration status.

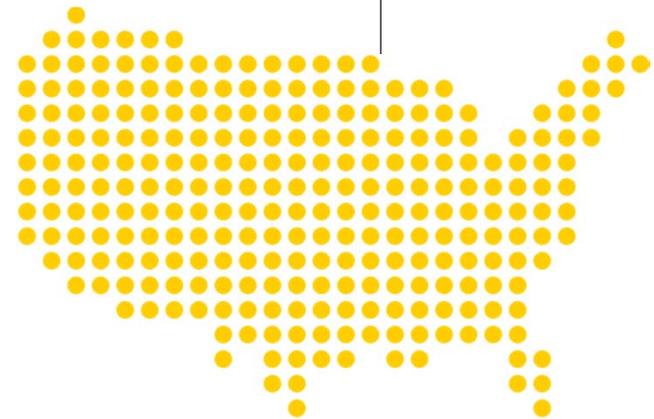




## Background

- ◉ US has a long history of exploiting workers perceived vulnerable due to immigration status
- ◉ Living wage & secure employment in safe conditions foundational determinants of health
- ◉ Public health is obligated to advocate pro-worker stance & protect **all** workers' rights.

**8,000,000**  
Million undocumented workers





## What Health Agencies Can Do

- ◉ Help undocumented workers understand their employment rights
- ◉ Educate policymakers on public health impacts of wage theft and the disproportionate vulnerability to it for undocumented immigrants
- ◉ Support a strengthened firewall against law enforcement agencies
- ◉ Leverage HA's regulatory authority to support compliance with labor laws

Visit the [National Employment Law Project Report](#) for more ideas on public health action.



8

Review other health agency policies and services, considering how undocumented populations may be impacted.





## Background

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There are a variety of other policies and practices that affect undocumented populations differently or through which they can be deported. For example, policies related to:

- Evacuation in the case of natural disaster
- Cooperation with emergency response/ responders





## What Health Agencies Can Do

- Review HA policies/practices, considering how they could impact undocumented populations
- Revise policies/practices to mitigate any potential negative impacts on undocumented populations & reduce opportunities for deportation



9

Work to change a narrative that portrays undocumented people negatively.





## Background

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- ◉ Elected officials/media influence public view on all immigrants
- ◉ Dominant narrative incredibly harmful

Calling undocumented people “illegal”

Incorrect claims that undocumented immigrants take jobs from US citizens & are a drain on the economy

“Good vs bad” immigrants; deporting “criminals” creates safer communities

***Narratives and framing are critical to policy change.***





## What Health Agencies Can Do

- Train HA staff/partners to use language/narrative that supports undocumented populations and their families
- Reach out to immigrant-rights groups (especially led by immigrants and/or COGs that work with immigrants) to develop communication strategies & messaging

Local & contextual experience, ideas that can add to resources from other communications research

Align communications messaging and framing

*No human being is illegal. That is a contradiction in terms.*

◉ *Elie Wiesel*

“



# Act now!

## *Any **questions** ?*

- You can contact us at [ImmigrationGuide@HumanImpact.org](mailto:ImmigrationGuide@HumanImpact.org)
- To access the full guide, go to [bit.ly/PHAIRguide](http://bit.ly/PHAIRguide)