Public Health Woke
Agenda

Welcome
Lorraine M. Conroy, ScD, CIH, Acting Dean UIC School of Public Health

Immigrants Rights a Fight for Social Justice
Jesús "Chuy" García Cook County Commissioner, 7th District

Review of “Public Health Actions for Immigrant Rights”
James Floyd, MPH Cook County Health Department

Special Thanks To The Following Organizations
Collaborative for Health Equity, Cook County; 7th District Cook County Health Task Force; Health & Medicine Policy Research Group; Radical Public Health; UIC School of Public Health, Coordinating Center for Public Health Practice
Chicago “…has such a history of struggle. It’s the city of the Haymarket Martyrs, the city of radical labor unions, the city of resistance to the police assassinations of Fred Hampton and Mark Clark. It’s the city of Puerto Rican activism against colonialism. It’s the city of immigrant rights activists. And of course, it is the city of the Chicago Teachers Union.”

Angela Y. Davis, May 4, 2014 (Freedom is a Constant Struggle p.92)
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

#PublicHealthAwakened

Public Health Awakened: “We are a group of public health professionals self-organizing to develop a health equity-based response to the 2016 presidential election and the Trump administration.”

public-health-awakened@googlegroups.com
Concern: Accelerating Deportations

Number and pace of deportations expected to increase

<table>
<thead>
<tr>
<th>PRESIDENT</th>
<th>TIME PERIOD</th>
<th>MILLIONS DEPORTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obama</td>
<td>2008-2016</td>
<td>2.5 million</td>
</tr>
<tr>
<td>Trump</td>
<td>?</td>
<td>2 million</td>
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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

Current Administration has promised to deport 2 million undocumented residents.
- Obama Administration: 2.5 million undocumented residents over 7 YEARS
- Trump wants to deport 2 million in an unknown time period
- Massive increase in scale and speed of deportations will tax our enforcement resources, and ensnare innocent people

A Widening Net:
Trump says he will focus on deporting undocumented people with criminal records. With fewer undocumented people with criminal records in the US now as a result of Obama’s policies, Trump has already expanded the definition of who is a ‘criminal’ to include people who are merely charged or suspected of committing crimes. Being in the US without documents may become a ‘criminal’ act.
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.

Captial and goods can move freely across borders, but not people. That is the core of the problem - we can change these laws.
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

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Image Source: “Mexicans Keep Going” (https://)
Image Source: “Eisenhower” (https://)
In Arizona on Wednesday, a woman May have been the first deported by the new administration rules (see NY Times article)


Image Source: Other Words (https://otherwords.org/diplomas_vs_deportation/)

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
A recent study found a 24% increase in risk of low birth weight among infants born to Latina mothers REGARDLESS OF DOCUMENTATION STATUS after a major immigration raid, when compared to birth weights before the raid (see Novak et al., 2017).
THIS IS A
COMMUNITY HEALTH & SAFETY
ISSUE
Immigrants change health-seeking behaviors for themselves and their family members if they fear being stopped by police and potential deportation. As described in a Massachusetts study, Arizona study, a survey of primary care providers, a survey of patients, a Los Angeles study and HIPs Family Unity, Family Health report:

- **Immigrants miss medical appointments or less often use public services like health clinics**—regular doctor visits, diabetes education, vaccines, prenatal care, HIV education, getting medications, care for communicable diseases like tuberculosis, etc.
- **They eat less healthy food if afraid to drive.** Access to grocery stores with produce and healthy food options often requires travel, which may be a deterrent and adversely impact health.
- **People are afraid to use parks, exercise outdoors, and participate in their communities.**

**Image Source:** Designs by mohit arora, Marie Ringeard, Delwar Hossain, Luis Prado, corpus delicti, ProSymbols, Anton Gajdosik, H Alberto Gongora for The Noun Project (https://thenounproject.com)
POORER CHILD HEALTH
Children of undocumented immigrants will continue to suffer from mental health issues, symptoms of post-traumatic stress disorder, lower use of health care than children of documented immigrants and reduced household income. An estimated 43,000 U.S. citizen children will experience a decline in their health status after the change in household income associated with the absence of a primary earner.

POORER CHILD EDUCATIONAL OUTCOMES
U.S. citizen children who live in families under threat of detention or deportation will finish fewer years of school and face challenges focusing on their studies.

POORER CHILD BEHAVIORAL OUTCOMES
Children of undocumented immigrants will suffer behavioral problems, such as aggression, anxiety and withdrawal, which can lead to poor school performance and poor development. Approximately 100,000 U.S. citizen children will show signs of withdrawal after a parent’s arrest.

POORER ADULT HEALTH AND SHORTER LIFESPAN
Almost 17,000 more undocumented parents of U.S. citizen children will consider themselves in poor health.

Children experience direct impacts, including poorer child health, poorer behavioral
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).

- Children experience direct impacts, including poorer child health, poorer behavioral outcomes, and poorer educational outcomes.
  - 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 (see HIP’s Family Unity, Family Health report).
  - 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.

- It also makes law enforcement more difficult (see [Major Cities Chiefs Police Association’s 2013 position statement](#) and a [Police Foundation 2009 report](#)). People who witness or 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 when going to police.
  - One survey found this lower likelihood to contact police among both undocumented (70%) and US-born Latinos (28%) (see [Theodore et al’s 2013 report](#)).

- Threat of deportation makes victims of domestic violence and gender-based violence less safe. Domestic violence victims often remain with their abuser rather than risk being detained and/or deported when seeking protection from abuse (see [Applied Research Center’s 2011 report](#) and [American Public Health Association’s 2012 policy statement](#)).

- 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 (see [Hacker, et al 2011](#)).
ACTIONS YOU CAN TAKE
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

San Francisco sign. Pictured is the Chicago Dept of Public Health sign.
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
Support cities, counties, and states that pledge to provide sanctuary in different forms to undocumented residents.
BACKGROUND:

Primer on “Sanctuary” Cities, Counties, or States

- There is no legal obligation—for a city, county, or state—to assist with federal civil immigration enforcement
- There is no single definition of a sanctuary city, county, or state
- It is important to understand the details of the policies your jurisdiction has in place 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”
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

- Advocate for adoption of policies/ actions that support health and equity
NOTE: When in presentation mode, click on boxes to take you to sample language.

ORD 17-180 Overview:
An Ordinance Amending Chapter 13 (“Human Rights”) of the Oak Park Village Code by Adding a new Article 7 (“Welcoming Village”)
The Village Board is being asked to discuss the addition of a new section in the Village’s Human Rights Ordinance which would establish by Village Code, how each Village department, division, commission, committee, board, and body established by authority of an ordinance, or Village Board resolution should treat immigrant community members with respect and dignity. Per the Village Board direction, the Village Attorney has drafted the attached draft ordinance which is supported by local community groups who are in support of this action.
STAND UP AGAINST ANTI-IMMIGRANT HATE,
MAKE OAK PARK A WELCOMING VILLAGE!
State Representative (IL) Chris Welch Lower left at Oak Park Rally, Scoville Park. PASO/West Suburban Action Project: Exec Dir: Mony Ruiz-Velasco Proyecto de Accion de los Suburbios del Oeste/ West Suburban Action Project; Lissette Castillo-Vizcarra, Organizer. Collaborative for Health Equity Banner at February 4th Rally, in Scoville Park, Oak Park, IL www.checookcounty.org twitter @CHECookCounty info@checookcounty.org

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
The City of Seattle's 7 points of protection

1. City employees will not ask residents seeking City services about immigration status, unless police officers have a reasonable suspicion that a person is committing or has committed a felony criminal-law violation.

2. City employees will serve all residents and services will remain accessible to all residents, regardless of immigration status, ancestry, race, ethnicity, national origin, color, age, sex, sexual orientation, gender variance, marital status, physical or mental disability, or religion.

3. Seattle Police officers will continue to defer detainer requests from the U.S. Department of Homeland Security's Immigration and Customs Enforcement to King County, as jails are in King County’s jurisdiction.

4. City departments will issue a letter to all contractors receiving General Fund dollars to clarify and inform about these policies.

5. An Inclusive and Equitable City Cabinet will be created, made up of representatives from:
   a. Seattle Police Department,
   b. Office of Civil Rights,
   c. Office of Immigrant and Refugee Affairs,
   d. Office of Labor Standards,
   e. Department of Neighborhoods,
   f. Office of Economic Development,
   g. Office of Policy and Innovation,
   h. City Budget Office,
   i. Office of Intergovernmental Relations,
   j. Department of Education and Early Learning, and

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

- 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

- 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
Dialogue & Discussion

- What stands out to you as important actions to take in Areas 1, 2, & 3?
- Sanctuary has a range of meanings. What are key challenges to getting the strongest local and state policies?
- What do we need to do to overcome these challenges?

[Jim Bloyd added this slide.]
Connect undocumented clients and their families with legal rights and community organizing groups.
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
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
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

- 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
Dialogue & Discussion

- What strikes you as important actions to take in Areas 4, 5, & 6?
- How can health agencies perform better in being allies, and building trust with community organizations?
- How can health agencies build power with immigrants and groups under attack? What does building power look like to you?

[Jim Bloyd added this slide.]
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.

Image Source: Design by anbieru adaleru for The Noun Project (https://thenounproject.com)
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

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
Work to change a narrative that portrays undocumented people negatively.
Background

- 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
What strikes you as important actions to take in Areas 7, 8, & 9?

What are examples of health agencies allied with workers’ organizations tackling workers’ rights? Where are health agencies missing from this fight?

In your opinion, what are narratives and messaging that health agencies should be using?

[Jim Bloyd added this slide.]

ROC Chicago
Centro de Trabajadores Unidos-Immigrant Workers Project in Calumet City, Candidates Forum Wednesday, February 15 6:00 pm Calumet City. Mary Claire Schmit call for support at Wed Candidates’ forum. Ending tipped minimum wage, fight for 15 and Sanctuary ordinance topics at Forum.
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
- To access the full guide, go to bit.ly/PHAIRguide

NOTE: Links are clickable.