Immigration Reform: Basic Justice, Public Health Consequences

The legal director of the Center for HIV Law and Policy on why HIV advocates should support immigration reform.

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As immigration reform comes to the forefront in Congress, public health advocates should realize they have a dog in this fight. Basic legal protections for immigrants would allow those who would benefit from HIV diagnosis, treatment, and other health care to safely come out of the shadows. Getting HIV and sexually transmitted infections diagnosed and treated has positive economic and public health consequences not just for individual immigrants but for their families and the communities where they live and work.

Across the country, with no path to legalization and citizenship, undocumented immigrants are living under the threat of deportation, forced underground by the specter of immigration enforcement. Undocumented people avoid interacting with government officials at all levels, whether to report crimes or to help with criminal investigations, and they avoid seeking health care at public hospitals and other settings where their status may be questioned or discovered. The fear of detection is only greater when HIV is involved: HIV is subject to name-based reporting, and an HIV diagnosis can transform survival sex work into a deportation-triggering felony.

In states with anti-immigrant laws, such as Arizona and Alabama, undocumented immigrants are probably more likely to avoid health care because of widespread hostility to immigrants that heightens perceived risks of deportation. After Alabama's anti-immigrant law took effect, health officials reported seeing fewer Latinos in county clinics. In fact, the Alabama Department of Public Health expressed serious concerns that "waiting rooms that were full in some counties now have empty seats." Local and state anti-immigrant laws create obstacles for public health campaigns because they make people afraid of accessing medical care.

If seeking diagnostic and treatment services can heighten perceived vulnerability to deportation, it makes sense that immigrants will avoid hospitals, clinics, and other health care settings in all but the most desperate situations. To meet their medical and health care needs, immigrants may also resort to dangerous, "illegal healthcare settings." People may be afraid to explore sexual and reproductive health care options, leaving vulnerable populations at a higher risk of potential health

problems, unwanted pregnancies, and untreated HIV and other sexually transmitted infections. Parents may also forgo vaccinating their children, reducing community immunity to preventable diseases. Untreated diseases, with the attendant increased disease viral loads in marginalized immigrant communities, all have a cascading impact on individual health risks and the public's health.

As Congress debates immigration reform, it is important to remember its relevance to the reduction and prevention of chronic and communicable health conditions in communities across the country, particularly among those traditionally underserved by current health systems. At a minimum, we should support plans that create a path to legalization and citizenship, and ensure that immigrants can qualify for health care under the Affordable Care Act. Immigration reform should also ensure that states respect and defer to federal immigration classifications: States should not be allowed to create their own immigration policies to hunt down, persecute, and exclude immigrants from state programs, services, and protections. Advocates for public health and HIV equality should support immigration reform to protect the well-being of all American families and communities.

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