



## WHATCOM COUNTY COUNCIL

### SPECIAL COUNCIL MEETING AS THE HEALTH BOARD

10:00 a.m. Tuesday, October 1, 2019  
Council Chambers, 311 Grand Avenue

## A G E N D A

<b><u>Meeting Topics</u></b>	<b><u>Pages</u></b>	<b><u>Time</u></b>
1. Director/Health Officer Report	no ppr	10:00-10:20
2. Public Health Advisory Board (PHAB) Update	no ppr	10:20-10:30
3. Health Protection for Immigrant Families Presentation	1 - 58	10:30-11:00
4. Public Session	no ppr	11:00-11:20
5. Health Board Discussion and Action	no ppr	11:20-noon



Whatcom County  
**HEALTH**  
Department



## HEALTH BOARD Discussion Form

October 1, 2019

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**AGENDA ITEM #3:** *Health Protection for Immigrant Families Task Force Report*

**PRESENTER:** *Sterling Chick and Lindsey Karas, PHAB Members*

**BOARD ACTION:**                      ☒ Action Item                      Discussion                      FYI - Only

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### **SIGNIFICANT POINTS OR EXECUTIVE SUMMARY**

In December 2018, recognizing the growing health risks to immigrant families, the Health Board passed Resolution 2018-050 (Attachment 1) to ensure that the health and social service needs of citizens and immigrants of all statuses are met. The resolution empowered the Public Health Advisory Board (PHAB) to convene a Task Force in 2019. A total of 46 people participated in information gathering sessions and Task Force meetings. Participation included representatives from schools, churches, social and health services, government agencies, and people who had been directly impacted by Immigration and Customs Enforcement (ICE) actions.

The results of the Task Force evaluation are included in the attached Health Protection for Immigrant Families Task Force Evaluation Report (Attachment 2). The report describes the problem and provides an evaluation of the current system. It also summarizes key findings and recommends potential action to address the findings. Based on the Task Force Evaluation Report, the PHAB created a list of policy recommendations for consideration by the Health Board that are impactful, reasonable and at the policy level (Attachment 3). The recommendations are intended to reduce the fear and trauma experienced by immigrant populations and to improve coordination and community information related to immigration laws, health care and social service needs.

### **BOARD ROLE / ACTION REQUESTED**

Provide feedback to the PHAB about the recommended policy actions.  
Determine which policy actions the Health Board would like to move forward.

### **ATTACHMENT(S)**

Attachment 1: Resolution 2018-050 – Health Protection for Immigrant Families  
Attachment 2: Health Protection for Immigrant Families Task Force Evaluation Report  
Attachment 3: Recommended Policy Actions – Health Protection for Immigrant Families



PROPOSED BY: PUBLIC HEALTH ADVISORY BOARD  
SPONSORED BY: HEALTH DEPARTMENT

**RESOLUTION NO.** 2018-050

**HEALTH PROTECTION FOR IMMIGRANT FAMILIES**

**Whereas:** In accordance with RCW 70.05.060 it is the responsibility of the Whatcom County Health Board to supervise all matters pertaining to the preservation of the life and health of the people within its jurisdiction and;

**Whereas:** the Whatcom County Board of Health shall supervise the maintenance of all health and sanitary measures for the protection of the public health within its jurisdiction and;

**Whereas:** on October 29, 2013, the Whatcom County Health Board unanimously passed Resolution 2013-038 Call for Compassionate Community Approach to Public Health Related Services and;

**Whereas:** the Whatcom County Health Board has identified the health of children and families as a policy focus area for 2018 and;

**Whereas:** Whatcom County, just like many counties in Washington State, is the home and workplace of large immigrant communities with citizens and immigrants of all statuses; and

**Whereas:** Recent Immigration and Customs Enforcement raids and detentions in Whatcom County have caused immigrant families significant trauma resulting in mental health concerns in adults and adverse childhood experiences (ACE's) for young children and;

**Whereas:** Fear of detention and deportation has caused families to avoid seeking needed medical and social services and;

**Whereas:** Changes to federal laws are being proposed that would cut off government health benefits and housing for immigrants and their families and;

**Whereas:** Whatcom County may face increased demands for assistance from immigrants and their families resulting from changes to the "public charge" definition because fewer individuals will be able to access federal benefits such as Supplemental Nutrition Assistance Program, Section 8 housing vouchers and healthcare services and;

**Whereas:** Whatcom County administers federal programs, and changes to federal laws could impose burdensome new tracking and reporting requirements for local offices that administer these programs and;

**Whereas:** Changes to federal law may discourage immigrants and their families from seeking federal health benefits, such as Medicaid or the Children's Health Insurance Program (CHIP) resulting in health impacts to those families, decreased health status of our community and increased costs to county budgets and;

**Whereas:** The Health Board has resolved to seek opportunities to increase awareness and promote the concept of a "compassionate" or "trauma sensitive" approach and to integrate this paradigm into the broadest possible range of all public health, education, and human services in our county and;

**Whereas:** The Whatcom County Health Board seeks to stand in support of our immigrant families by upholding the principles of health equity and ensuring that the health and social service needs of citizens and immigrants of all statuses are met.

**NOW, THEREFORE, BE IT RESOLVED** by the Whatcom County Health Board that:

The Health Board will contact our U.S. Senators and Representatives opposing changes to federal legislation that would reduce health, housing and other social service benefits for immigrant families and;

The Health Board will further ensure that "compassionate approaches" are built into all public health related services and contracts including human services programs and;


The Public Health Advisory Board shall convene a task force as provided for in WCC 24.01.051.A.4 to evaluate existing systems and support services for families impacted by the threat of deportation including access to health care, mental health, housing and other social services considering cultural, safety and language barriers preventing access.

APPROVED this 4th day of December, 2018.

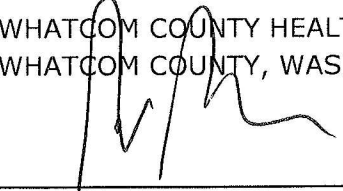
ATTEST:

  
Dana Brown-Davis, Clerk of the Council

APPROVED AS TO FORM:

  
(Name), Civil Deputy Prosecutor

WHATCOM COUNTY HEALTH BOARD  
WHATCOM COUNTY, WASHINGTON

  
Rud Browne, Health Board Chair



# Health Protection for Immigrant Families In Whatcom County

**Whatcom County Public Health Advisory Board (PHAB)  
Task Force Evaluation Report**

**Prepared by Crossroads Consulting**



**CROSSROADS  
CONSULTING**

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## Executive Summary

In accordance with RCW 70.05.060, it is the responsibility of the Whatcom County Health Board to supervise all matters pertaining to **the preservation of the life and health of the people within its jurisdiction**. In Whatcom County, this includes a large immigrant community.

In the United States, **it is estimated that 1 in 4 children are members of immigrant families**. 5.6 million of those are young children under age 6, who have one or more parents who were born outside of the U.S., and 94% of those children are U.S. citizens (Center for Law and Social Policy).

In December 2018, recognizing the growing health risks to immigrant families under the current federal administration, the Health Board approved **Resolution 2018-050 to ensure that the health and social service needs of citizens and immigrants of all statuses are met**.

The resolution empowered the Public Health Advisory Board (PHAB) to convene a task force in 2019. A total of 46 people participated, including representatives from schools, churches, social and health services, government agencies, and people who had been directly impacted by Immigration and Customs Enforcement (ICE) raids. **This report reflects the findings of the task force's evaluation and offers recommendations for action.**

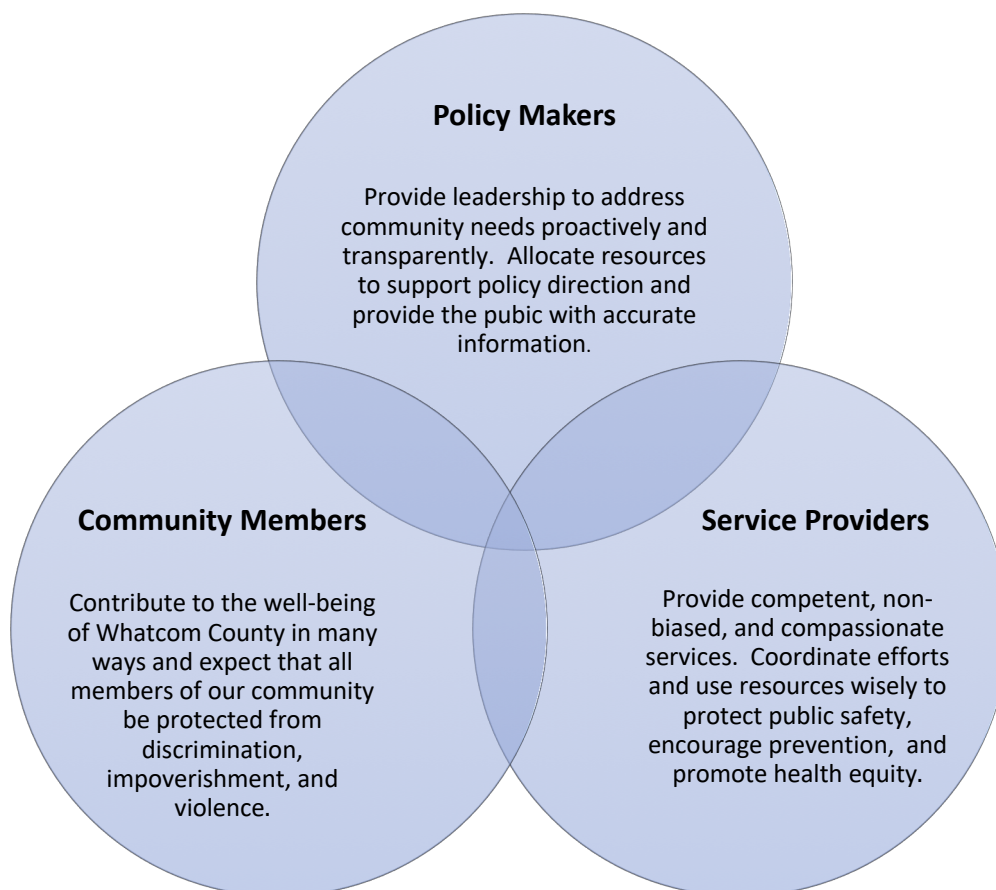
Two recent changes in state and federal policies are important to consider. On May 21, 2019, **Governor Jay Inslee signed into law the "Keep Washington Working" act** which prohibits local police, Washington state patrol, sheriffs, jails, and school resource officers from sharing information with ICE and Customs Border Patrol (CPB). A summary of this legislation is included in Appendix B.

Another significant policy change occurred on August 14, 2019, when the Trump administration issued **the new "Public Charge" rule**. This rule establishes criteria for denying a green card application (the pathway to legalization) if the individual is using public benefits such as SNAP and Medicaid. National studies have already shown that the rule change is **causing families to disenroll from programs** or forgo benefits for which they are eligible, **even if those services are not part of the new rule change**.

In evaluating the systems and services of Whatcom County, the task force agreed that there is a **critical need for public communications** to ensure that immigrant families, health and safety providers, and the community at large are able to understand the growing crisis and respond effectively.

Of greatest concern, **there is increasing fear and isolation spreading throughout immigrant communities**, affecting both documented and undocumented families. Children are experiencing high levels of trauma from fear of abandonment, or actual abandonment. The trauma of immigrant families also ripples out, causing secondary trauma for teachers, health care providers, social service workers, and employers.

**The Task Force Report is a call to action**, founded on a belief that we carry **shared responsibility for community health and safety**, with policymakers, service providers, and community members each playing a role:



**The task force findings and recommendations** indicate that immediate action is needed to provide relief for immigrant families. With the leadership of Whatcom County government, our community will work together and be stronger. Ultimately, we all hope for common-sense immigration reform at the federal level. In the meantime, local jurisdictions are able to take meaningful action to address the growing threats to community health and safety.

## Section I Findings and Recommendations

As schools, health and human service providers, churches, local charities, and businesses work to strengthen the network of information and support, **policies and funding are needed to strengthen the infrastructure and ensure that the efforts on the ground are supported.**

The following set of Findings and Recommendations was offered to the Public Health Advisory Board in September of 2019. The Findings and Recommendations are grouped into three areas.

FINDINGS	RECOMMENDATIONS
Funding/Infrastructure	
<ul style="list-style-type: none"> <li>◆ Immigrant families (both documented and undocumented) are not accessing needed services and supports due to fear, isolation and language barriers and because of lack of transportation for those in rural areas.</li> <li>◆ Detention and deportation have a major impact on the stability and mental health of all members of a family and the surrounding community.</li> <li>◆ Resources for mental health services and housing for immigrant families are inadequate, both during a crisis and for extended periods when the family has no income or support services (Medicaid, SNAP) that would be available to other low-income families.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Provide the infrastructure for health and human services providers to coordinate their services and create bridges for immigrant families to access care before, during, and after a crisis.</li> <li>➤ Reduce health impacts on children. Support school districts with funding and technical support to ensure services and referrals for immigrant families are provided year-round.</li> <li>➤ Prioritize funding for housing and behavioral health for vulnerable immigrant families. Ensure that Whatcom County has a strategy to address the growing gap in basic health care needs.</li> </ul>
Direction/Communication	
<ul style="list-style-type: none"> <li>◆ Providers lack the accurate information and tools they need to help immigrant families access essential information and services.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Ensure that accurate, up-to-date information is provided to the community, through a local, centralized, authoritative, and trusted source.</li> </ul>

<ul style="list-style-type: none"> <li>◆ Employers may not know the laws regarding checking employees' citizenship status, dealing with ICE surveillance and raids, and protecting immigrants' rights and dignity.</li> <li>◆ Immigrant families view local law enforcement with fear and are unwilling to call 911. This leads to under-reporting of crime and emergencies, which risk the lives of both immigrants and the community at large.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Help businesses and organizations establish "safe space policies" so that staff know what to do in case of ICE raids.</li> <li>➤ Ensure that law enforcement and emergency service providers can demonstrate transparently and effectively that they do not collaborate with ICE and that they can be relied upon for compassionate care.</li> </ul>
Policy Development/ Enforcement	
<ul style="list-style-type: none"> <li>◆ Discrimination, insufficient translation services, and inadequate training in trauma-informed care for immigrant populations still exist, which reduce the effectiveness and reliability of services.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Ensure that there is adequate training in anti-discrimination and trauma-informed care for all county departments and organizations receiving county funding that may interact with immigrant families.</li> </ul>

## Section II

### Context and Methodology

#### Introduction

In December of 2018, the Whatcom County Health Board passed resolution 2018-050 to stand in support of our community's immigrant families. The resolution empowered the Public Health Advisory Board to convene a task force to "evaluate existing systems and support services for families impacted by the threat of deportation considering cultural, safety and language barriers preventing access."

This report reflects the findings of that evaluation and offers a set of recommendations for action.

#### Background

In Washington State, approximately one in seven residents is an immigrant, and one in eight is a native-born US citizen with at least one immigrant parent ([American Immigration Council, 10/17](#)). As of 2016, approximately 23% of Washington's immigrant population was undocumented (~240,000 people). During the same period, approximately 9% of K-12 students in the state were living with at least one undocumented family member ([Pew Research Center](#)).

A 2015 study (using 2012 data) indicated that the top occupations for undocumented workers in Washington state were service jobs (28%), farming (19%), and construction (11%). This study also found that 44% of the farmworkers in Washington state were undocumented ([Pew Research Center](#)). Other studies put this number considerably higher since undocumented immigrants try to keep a low profile. The numbers also have fluctuated greatly over recent years with changes in immigration policy, border security, and the H-2A agricultural-workers visa program to bring temporary farmworkers into the country.

Changes in federal immigration policies have had a significant impact on the health and safety of immigrant families. In 2017, immigration-related arrests conducted by Immigration and Customs Enforcement (ICE) increased by 30% compared to 2016 ([American Bar Association](#)). In May of 2017, the Department of Homeland Security (DHS) rescinded the Deferred Action for Parents of Americans and Lawful Permanent Residents (DAPA) policy, which had extended stays for undocumented parents of lawful citizens.

With the induction of a "zero-tolerance" federal immigration policy in May 2018, all illegal entry referrals from the Department of Homeland Security can result in prosecution, including of immigrants with children born in the United States (DHS, 2018). The zero-tolerance policy has resulted in over 2,500 children, including infants, being separated from their families (ACLU, 2019). Whatcom County, which has over a hundred thousand acres of agricultural land and a long tradition of Latinx farmworkers and food workers in the labor force, has seen the effects of these federal policies.

### **Health Impacts on Families**

For many years, anti-immigration laws and policies have been impacting access to health services and overall health outcomes of undocumented immigrants in the United States (Martinez et al., 2015). Studies reveal that immigrant families face significant barriers to accessing the health system, including discrimination, lack of translation services, and lack of cultural competency among providers.

Undocumented immigrants often wait until their health issues have reached a critical point prior to accessing health care because they are afraid of being reported to authorities (Hacker et al., 2015). Immigrant survivors of domestic violence and sexual assault, even if they are legal residents, are increasingly unwilling to report crimes, cooperate with law enforcement, or pursue protection orders and parenting plans. (BWCCADV Annual Data Report, 2019)

The stress on children and the impact on children's health are especially of concern. A recent study of cohort data involving US-born adolescents, with at least one immigrant parent, showed that the current US immigration policy is correlated with higher anxiety levels, sleep problems, and blood pressure changes (Eskenazi et al., 2019). The very real trauma of having a family member (often the father and breadwinner of the family) detained or deported manifests in mental and physical health problems and financial strain experienced by the entire family. Migrant children are less likely to have a primary care physician or clinic, use preventative services, and use primary care, dental care, and specialist services but have a higher usage of emergency and hospital services (Markkula et al., 2018). In a recent report from the Center for Law and Social Policy ([CLASP](#)), providers report that immigrant parents are:

- Increasingly reluctant to enroll or maintain enrollment in WIC, SNAP, and Medicaid
- Refusing prenatal care
- Keeping children home from school and childcare.

This fear of utilizing health and social services will likely be exacerbated if the new [public charge](#) rule published on August 14, 2019 should go into effect in October 2019.



## Impacts on the Whole Community

On August 29, 2018, the ICE targeted Granite Precast in Bellingham, arresting 16 immigrants while they were on their way to work. This was not the first raid in Whatcom County; previous ICE raids had occurred in 2007 and 2009, affecting a combined total of approximately 28 families with about 65 children. The community responded more swiftly and effectively to the 2018 Granite Precast raid, perhaps because of increased public awareness and objection to the federal changes to immigration policies. After the Granite Precast raid, the Whatcom Community Foundation was invited to meet with family members to try to help them connect with funding and resources. The stories [shared by these families](#) helped our community understand the gravity of the situation, and **imagine:**

- *You walk out your front door after your husband has left for work only to find the car running, door open, and he has vanished.*
- *Your dad leaves for work the day before you start 1st grade and he never returns home.*
- *You have a four-week-old baby, your husband is detained, and you don't know when or if he will come home.*
- *Your dad fled violence in your home country and was detained in another state for almost three months before being released on bond (exhausting the family's savings). He makes it to Bellingham and hugs you for the first time in 5 years. You are detained the following day.*

We are all affected by what happens to our coworkers, employees, schoolmates, neighbors, and friends. The stresses on immigrant families in Whatcom County are having a ripple effect, impacting the whole community. For example:

- The sudden disappearance of a community member is traumatic for all who know them, especially for their close family and friends. Children who experience trauma carry the adverse consequences with them through life. They frequently experience behavioral and mental health problems, trouble functioning in school or work, and difficulty in interpersonal relationships.
- Whatcom County businesses in agriculture, food services, and the construction industry are major employers of immigrant families. The loss of these employees has direct economic impacts on the businesses where they work.
- Immigrant families who lose their primary breadwinner are in dire financial straits. They often need some social supports to meet their basic needs; however, it is becoming increasingly likely that immigrants who access social and health services may compromise their applications to stay in the country. The decision to not access essential health services can have a lasting effect on children, who are usually US citizens.
- Immigrants who are afraid to see a health care provider for physical or mental health problems often delay care until a situation becomes a health crisis; such crises often require expensive treatment, which puts a burden on the health care system.
- Children who have a relative or family friend who has been taken away by authorities become distrustful of law enforcement and emergency responders. It is difficult to explain to a young child the difference between being in jail for a crime and being in a detention

facility. When a child sees a person in a uniform and fears someone will be taken away, normal family activities like attending the County Fair become traumatic events.

### **Response from Whatcom County Leaders**

The members of the Public Health Advisory Board (PHAB) were asked to consider the increasing risks to health and safety of Whatcom County immigrant families and the impacts on their children. PHAB responded by developing and proposing Resolution 2018-050 to the Whatcom County Health Board, which the Health Board approved in December 2018. The principles articulated in the Resolution are as follows:

**RESOLUTION NO. 2019-050**

**HEALTH PROTECTION FOR IMMIGRANT FAMILIES**

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**Whereas:** The Health Board has resolved to seek opportunities to increase awareness and promote the concept of a" compassionate" or " trauma sensitive" approach and to integrate this paradigm into the broadest possible range of all public health, education, and human services in our county and;

**Whereas:** The Whatcom County Health Board seeks to stand in support of our immigrant families by upholding the principles of health equity and ensuring that the health and social service needs of citizens and immigrants of all statuses are met.

## Task Force Convened by the Public Health Advisory Board

Whatcom County Health Board Resolution 2019-050 established direction and also empowered the Public Health Advisory Board to convene a task force to “evaluate existing systems and support services for families impacted by the threat of deportation, considering cultural, safety and language barriers preventing access.”

With the support of Health Department staff, a subcommittee of the PHAB began the evaluation process in March 2019 by identifying organizations that were believed to provide services to immigrant families. Representatives of these organizations were invited to information gathering sessions. These were hosted at Villa Santa Fe, a Catholic Housing Services apartment complex for low-income farmworkers in Bellingham. Twenty-seven people attended the first session in May, and sixteen people attended the second session in June. A translator was available at both sessions. Participants included representatives from schools, social services, churches, health services and government agencies as well as people whose families had been directly impacted by ICE raids. The focus of these sessions was to learn how families are impacted by the threat of deportation and to identify systems and service gaps.

The task force was formally convened in July, and those who had participated in the information gathering sessions were invited to attend along with others who had heard about the process and expressed interest. A total of three task force meetings were held at Villa Santa Fe with professional facilitation and notetaking. Task force members worked together to clarify the issues, articulate desired outcomes, and identify potential solutions.

The draft report was reviewed by task force members and other key stakeholders in August and presented to PHAB in September. A diagram of the process and a list of participating organizations can be found in Appendix A. Throughout the process, participants shared information about best practices and training materials, which are referenced in Appendix B.

## Responding to Rapid Change

In just the few months that the task force process was underway, several significant policy changes occurred, and there was a threat of another national ICE surge. As mentioned above, the new [public charge](#) rule published on August 14 is due to be enacted in October unless successfully challenged in court. As the media spread the news, these quotes from Whatcom residents reflect the growing confusion and anxiety:

*“We try to tell families that they can still get these services [SNAP; Medicaid] but they may be taking a risk. And we don’t know how retroactively the DHS will apply the rule” –Public service agent*

*“I go into families’ homes and provide speech therapy for school-aged kids. Some of the funding for my services is coming from the federal government, and I am wondering if that is a problem. Everyone is confused - but I don’t want to stop helping kids that need our help.”  
–Health care provider*

*“Everyone at work is freaking out because my boss is saying that now we all have to give them our social security cards and our passports, or they are going to have to pay giant fines.”*  
 –Waitress (age 24, Caucasian)

With so much confusion about the laws, and given the rate of change, it is essential that there is clear, authoritative guidance for employers, service providers, agency staff, and the community about what the facts are and how to navigate the risks. Guidance such as this publication, offered by *Protecting Immigrant Families* could be helpful if there was an effective mechanism for communication through trusted sources.



## PUBLIC CHARGE: GETTING THE HELP YOU NEED

UPDATED SEPTEMBER 2019

### WHAT IS PUBLIC CHARGE?

“Public charge” or the “public charge test” is used by immigration officials to decide whether a person can enter the U.S. or get a green card (lawful permanent resident or “LPR” status). In this test, officials look at all of a person’s circumstances, including income, employment, health, education or skills, family situation and whether a sponsor signed a contract (“affidavit of support”) promising to support the person. Officials can also look at whether a person has used certain benefit programs (in the past, only cash assistance and long-term care were counted).

### CHANGES TO PUBLIC CHARGE

The government is changing how it makes public charge decisions. Immigration officials will look more closely at factors like health, age, income, skills (including English language skills), and use of more public programs, including:

- Supplemental Nutrition Assistance Program (SNAP, “EBT” or “Food Stamps”)
- Federal Public Housing and Section 8 assistance
- Medicaid (except for emergency services, children under 21 years, pregnant women, and new mothers)
- Cash assistance programs (like SSI, TANF, General Assistance)

\*\*\*Services that are not listed above will not be counted in the new public charge test. This includes WIC, CHIP, school lunches, food banks, shelters, and many more - these programs are safe to get if you are eligible.

Another significant policy change occurred on May 21, 2019, when Governor Jay Inslee signed the Engrossed Second Substitute Senate Bill 5497 into Washington state law. Also known as the “Keep Washington Working Law” or the “Sanctuary State Law,” it declares that **local police, Washington state patrol, sheriffs, jails, and school resource officers are prohibited from:**

- Asking you about or collecting your place of birth, immigration status, or nationality, unless it is for an ongoing criminal investigation.
- Stopping or detaining you to determine immigration status.
- Giving ICE/CBP your personal information (for example, a home address).
- Holding you on ICE/CBP detainers or ICE administrative warrants.
- Allowing ICE/CBP access to interview you in jail. If ICE/CBP is in the jail investigating a criminal offense, you have the right to remain silent and refuse to speak with ICE. The jail must get written consent from you before ICE/ CBP can interview you.
- Denying you services or benefits if they have an ICE detainer, notification request, or immigration warrant.
- Notifying ICE/CBP when you will be released from custody.
- Contracting with ICE and CBP to do immigration enforcement.

Again, there is little awareness and understanding of the new **Keep Washington Working Law**, but it provides the opportunity for county and city governments to more clearly direct local law enforcement in the interest of public health, to build trust in our local public safety systems.

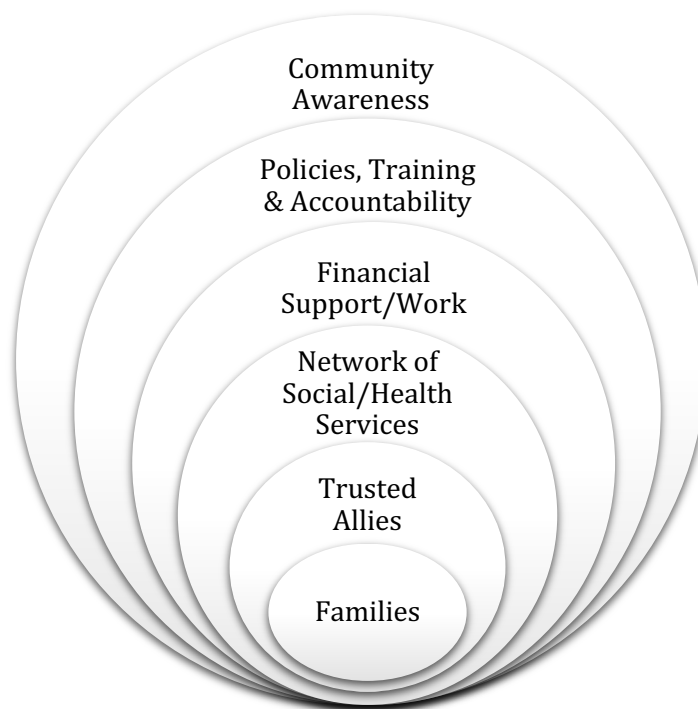
## Section III Evaluation of the System

The purpose of the task force was to evaluate existing systems and support services for families impacted by the threat of deportation, including access to health care, mental health, housing and other social services, considering cultural, safety, and language barriers preventing access.

During the preliminary information-gathering sessions, participants were provided with a list of social and health services available for immigrant families in Whatcom County, and asked to consider four questions:

- What would support services ideally look like for families?
- What do we have now?
- What do we need?
- Who might be able to help?

From these conversations, a conceptual model emerged of the **critical barriers and gaps** in systems and services (diagram below). During the subsequent task force meetings, the analysis focused on solutions relative to each of these six areas.



In the course of this analysis, there was clear agreement that our community needs both immediate actions as well as system change. Ultimately, the surge of ICE detentions must stop if we want immigrant families to be healthy and safe in our community. In the meantime, there are many things that we can do now to help our community work together and be stronger, with policymakers, service providers, and the community members each playing a role.

The following task force analysis represents the **issues, potential solutions, and desired results** relative to six system areas:

- Families
- Trusted Allies
- Network of Social/Health Services
- Financial Support/Work
- Policies, Training, and Accountability
- Community Awareness

## Families

### **Issues Identified**

- ICE raids create a culture of fear that impacts both undocumented and documented adults, their families, and their communities.
- People are regularly under ICE surveillance at their workplaces, which is highly stressful.
- Detention and deportation affect the mental health of all members of a family. Children experience severe trauma.
- Families are not accessing needed services and supports due to fear, isolation, language barriers, and lack of transportation for those in rural areas.

### **Potential Solutions**

- Provide training to service providers to ensure families receive trauma-informed care and also understand how to deal with their own secondary trauma.
- Help families create safety plans to prepare for ICE raids and know what to do if they occur.
- Help employers understand what the laws are, how to stop surveillance, and how to respond to raids.
- Expand capacity for schools to serve as a central, safe place for the whole family to access information, education, and linking to resources.

### **Desired Results**

- Families feel safe and are able to stay together.
- People do not have the continual stress of ICE agents and other authorities surveilling them at their workplaces.
- Resources are already in place to minimize the stress for families if a crisis occurs. People understand their legal rights.
- People can safely access social and health services, without re-traumatization, and their needs will be met.



## Trusted Allies

When there is a raid, trusted allies are service providers or allies who are first in contact with the immigrant family and are trying to help. These people play an essential, but sometimes invisible, role in the system. Trusted allies are often affiliated with “sensitive locations” — schools, churches, daycares, medical facilities—or other non-profit agencies or businesses that serve immigrant families. Trusted allies are those who are trying to help people locate family members, cope with trauma, understand their rights, navigate the legal system, and access the network of support.

### Issues Identified

- There are not enough trained trusted allies.
- Trusted allies are often overwhelmed, frustrated by lack of resources, and experience burnout.
- Since the established 911 emergency response system is not trusted by immigrant families, trusted allies are also trying to fill that gap.
- No system exists for helping trusted allies connect with each other, support each other, or ensure that they have the same reliable information.

### Potential Solutions

- Establish a centralized phone number for families in crisis, accessible 24/7, with people who speak Spanish (possibly reconstitute the old Whatcom County crisis services line with volunteer support).
- Secure funding from county government that ensures the sustainability of resources for trusted allies.
- Build support for Raid Relief to Reunite Families, a new organization that has been formed by Latinx families who have direct experience with ICE raids; they have no paid staff to sustain the work.
- Establish a system for trusted allies to be trained in how to use the ICE website, connect to the network of support, and have shared sources of up-to-date information.

### Desired Results

- All people are able to use the 911 system without fear.
- Our community’s emergency response system (police, fire, Red Cross, EMTs, paramedics, etc.) have adequate training in trauma-informed care and are able to quickly connect with the system of support for immigrant families.
- Organizations and businesses have “safe spaces policies” in place and trained staff, ready with planned responses to ICE and other authorities.



**Network of Social/Health Services****Issues Identified**

- Stronger community partnerships in social and health services for immigrant families are needed.
- Providers need to be able to give families a “warm handoff” to real people within the system who can ensure good follow-through.
- Services need to be offered in the language families understand; immigrant families speak a variety of dialects.
- Wide-scale training in trauma-informed care and policies around discrimination within service agencies are needed.

**Potential Solutions**

- Build upon the best practices identified by [Sea Mar’s Migrant & Seasonal Agricultural Workers Promotores Program](#) including: mobile medical and dental outreach clinics to serve isolated rural communities, multi-lingual service providers, and educational programs on critical health topics presented at farms, housing sites, and other gathering places.
- Secure funding for building the network of support and filling the gap of mental health services.
- Establish year-round mental health support services for children and their families through the schools.
- Train school staff in how to support children who are experiencing trauma related to raids.
- Pursue an initiative with organizations like the North Sound Accountable Community of Health (ACH) to bring together partners to build this system and ensure providers are trained in trauma-informed care and policies.
- Engage faith-based organizations in the network; they are important allies.

**Desired Results**

- A strong network of coordinated community partners, including county government, is established, in which everyone would be in the loop regarding the services each respective community partner is providing, eliminating unnecessary overlaps.
- Providers are informed of the new state law and related mandates.
- A standardized system for referrals is used for helping immigrant families in crisis: what to do, where to go, how to get needed resources.
- Trauma-informed care is widely integrated and incorporates best practices for supporting immigrant families.
- The system has plenty of trusted allies and warm handoffs between community partners.
- Mental health support is available for children and their families through the schools year-round.
- A solidarity network of immigrant families and allies is empowered and supported.
- Providers have effective strategies for addressing transportation and language barriers.

## Financial Support/Work

### Issues Identified

- Financial hardship is a major issue because the family providers who are detained can't work for months or years while the legal process unfolds.
- Changes in immigration policy are threatening access to necessary public services for families with undocumented members in the household (e.g., Medicaid, SNAP).
- Legal fees and bonds are very expensive, and there are long delays to get court hearings for the asylum process.
- Loss of employment creates poverty and impacts mental health.
- There are not enough attorneys who speak Spanish and the indigenous languages of local immigrants to help with their cases.

### Potential Solutions

- Grow the Whatcom Community Foundation [immigrant relief fund](#) to one million dollars to pay for legal expenses (typically around \$25,000), and living expenses while the breadwinner is unable to work.
- Include advice on safety planning with families about the steps needed to ensure that when a person is detained, the family can receive their last paycheck (e.g., have a power of attorney document signed in advance, have both spouses on the same bank account so either can cash a check).
- Establish free childcare for immigrant parents of young children whose partners have been detained so that they are able to work and navigate the legal system.
- Explore alternative models for breadwinners to contribute productively and be supported during the years of waiting for the legalization process.
- Create policies and secure more funding for housing support to ensure that families do not become homeless while the breadwinner is not able to work.

### Desired Results

- Families are not evicted from their homes when breadwinners are detained, deported, or unable to provide income for their family. If they are evicted, temporary supportive housing is available.
- A low-barrier support system would exist in the community for both legal and living costs.
- Alternative support systems will exist through community allies, churches, etc., to ensure families' basic needs are met.

## Policies, Training, and Accountability

### Issues Identified

- The new Keep Washington Working law passed in May 2019 protects the privacy and civil rights of Washington residents, and employers, agencies, organizations, and individuals need to know about the protections it provides.

- Agencies, employers, and immigrants may not understand the laws about what kind of citizenship checks are required when hiring or providing services (e.g., E-Verify, and paper I-9 forms).
- Policies are needed for ensuring that agencies and organizations provide services to people regardless of their citizenship status.
- There is a lack of consistent policies, practices, and accountability systems within agencies and organizations to ensure that services are provided safely and fairly to all.
- Extra training is needed for service providers and employers about best practices for providing trauma-informed care for immigrant families.

### **Potential Solutions**

- Ensure that the Keep Washington Working law is fully implemented and provide wide-scale public communication that Whatcom County is in alignment.
- Create systems for accountability and oversight to ensure that law enforcement and emergency services within Whatcom County are following the law.
- Require training in best practices regarding trauma-informed care for community service providers.
- Ensure that any service agencies receiving county funding are fully aware of what ICE is legally allowed to do and establish agency policies and training to ensure that staff do not provide any assistance or information to ICE above that requirement.
- Create a mandatory requirement that when the County Sheriff is informed of impending ICE activities, they promptly inform the public.

### **Desired Results**

- County government, businesses, and organizations understand the new state law and make any changes needed to comply with it as quickly as possible.
- Resources exist to address misinformation among employers about what kind of citizenship checks are required.
- Businesses, agencies, and organizations have policies and practices in place regarding protecting and serving all people, and accountability systems for ensuring that these policies and practices are implemented consistently.
- Employers and service providers have the training they need to provide trauma-informed care to immigrant families.

## **Community Awareness**

### **Issues identified**

- With rapidly changing immigration laws and policies, the threats to immigrants' health and safety are exacerbated.
- There are commonly held misconceptions about immigrants (e.g., their reasons for immigrating, their roles in the workforce, their paths to citizenship, etc.).
- There is a need for broad-scale community education about the issues, the laws, and how immigrant families need and deserve safety and support.

### **Potential Solutions**

- Help our community understand the laws already in place that serve as protections for immigrants.
- Create and distribute easily accessible and up-to-date resources for immigrant families.
- Conduct a public awareness campaign to shift the perceptions of those who may not realize that there is a problem. Focus the message on how everyone needs and deserves health and safety.
- Build the network of community allies who are willing to engage in one-on-one conversations about how the attack on immigrant families is harming our whole community.

### **Desired Results**

- People understand the laws related to protecting and serving immigrants.
- Service providers, employers, concerned citizens, and immigrants have knowledge and resources about how to access needed services.
- Organizations and individuals can effectively advocate for a system of care for our community so that everyone has the services and supports that they need.

This System Evaluation, which was conducted as part of this process, additionally serves as a road map for service providers and community members to take action. Through the information sharing and consensus-building during the Task Force process, some implementation has already begun, but **sustained and effective system change will require the Whatcom County Health Board and County Council to play their part as policymakers.**

## Section IV Appendices

### APPENDIX A: Participants and Process

Health Protection for Immigrant Families – Meeting Participants	
Organization	Participated in at Least One Meeting
<b>Agape Service Project/WWU Catholic Newman Center</b>	Melina Sergent Kelsey Harrington
<b>Bellingham Pubic Schools</b>	Kathe Koruga
<b>Bellingham Unitarian Fellowship</b>	Mike Betz
<b>Catholic Community Services</b>	Steve Powers Sterling Chick (also PHAB)
<b>Catholic Housing Services</b>	Kati Ortiz
<b>Chuckanut Health Foundation</b>	Heather Flaherty
<b>Church of the Assumption</b>	Nick Mele Mary Mele
<b>C2C (Community to Community Development)</b>	Lucy Lopez Liz Darrow Rosalinda Guillen Australia Cosby
<b>Cooperativa Tierra y Libertad</b>	Modesto Hernandez Leal
<b>DSHS</b>	Mike Riber Tonja Derr Abdul Rahman
<b>Food Bank(s)</b>	Suzanne Nevan – Ferndale Food Bank
<b>Goodwill</b>	Norma Suarez
<b>Mercy Housing</b>	Lindsey Karas (also PHAB)
<b>Moonbelly Midwifery</b>	Mary Burgess
<b>North Sound Accountable Communities of Health</b>	Megan Argetsinger

<b>Organization</b>	<b>Participated in at Least One Meeting</b>
<b>OIC of Washington</b>	Vidal Gonzales
<b>PeaceHealth</b>	Rachel Lucy (also PHAB) Jerry Rajcich
<b>Public Health Advisory Board</b>	Chi-Na Stoane Barry Buchanan (also Health Board)
<b>Raid Relief to Reunite Families</b>	Ruby Castaneda Marisol Chapina
<b>Redeemer Church</b>	Dane Burgess
<b>Sea Mar Community Health Centers</b>	Marcela Suarez -Diaz Aaron C. Ignac Jimena Garcia
<b>United Way</b>	Peter Theisen
<b>Unity Care Northwest</b>	Megan Stephenson Laura Reardon
<b>WA State Dept. of Labor &amp; Industries</b>	Danny Aguilera
<b>Western Washington University</b>	Ceci Lopez
<b>Whatcom County Health Dept.</b>	Astrid Newell Kelly Molaski Brittany Fuentes Taylor Lewis
<b>Whatcom Human Rights Task Force</b>	Shirley Osterhaus
<b>Community Members</b>	Sue Webber (also Whatcom Community Foundation) Von E. Ochoa (also staff at Shuksan Middle School)

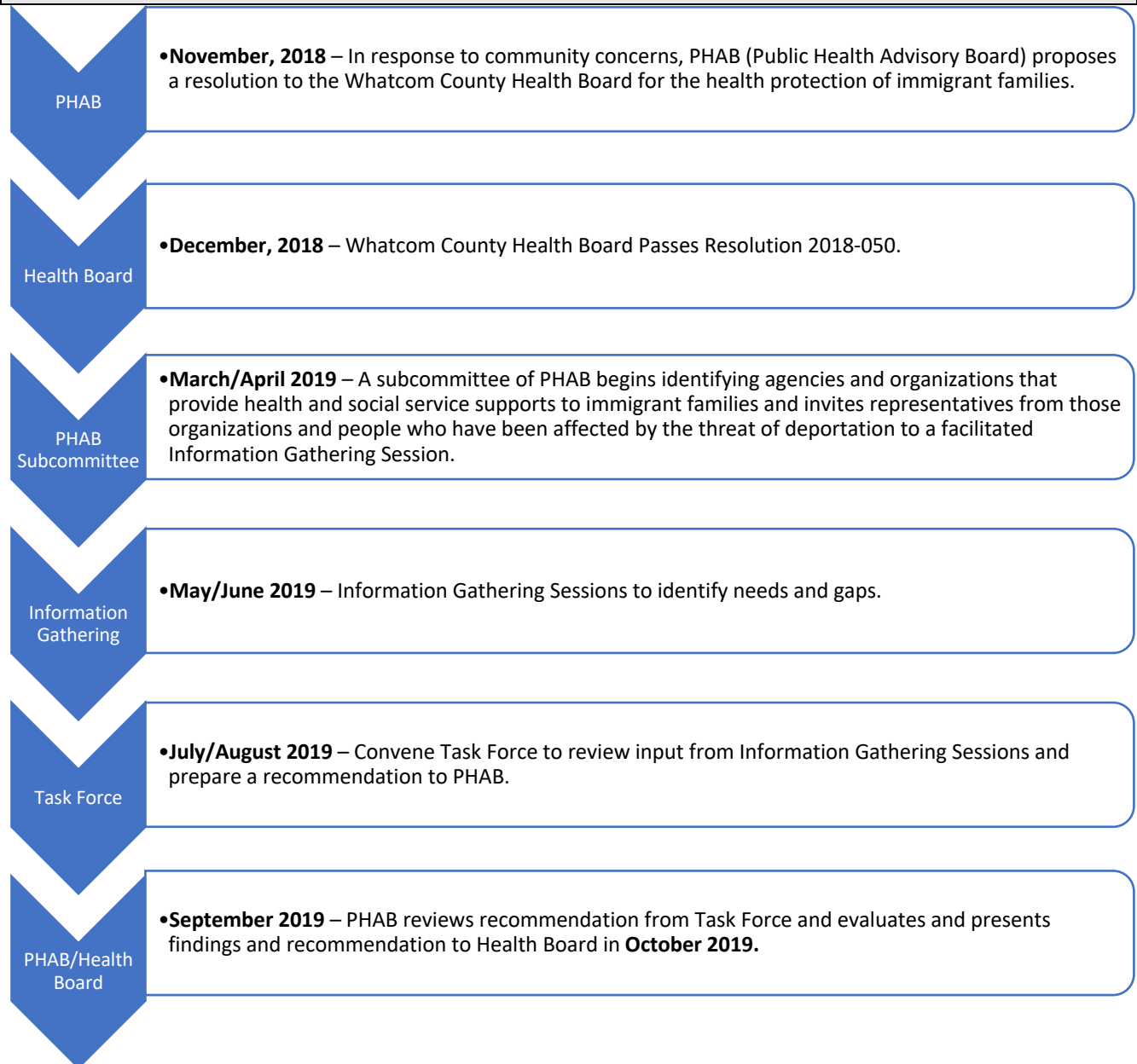
**Leadership:** Regina Delahunt, Director, Whatcom County Health Department

**Project Facilitation and Report:** Holly O'Neil and Mardi Solomon, Crossroads Consulting  
(holly@crossroads.pro)

## Whatcom County Health Board Resolution 2018-050 Health Protection for Immigrant Families

### SUMMARY OF OBJECTIVES:

- Ensure that the health and social service needs of citizens and immigrants of all statuses are met.
- Increase awareness and promote the integration of a "compassionate" or "trauma sensitive" approach to services.
- Evaluate existing systems and support services for families impacted by the threat of deportation, and identify cultural, safety and language barriers preventing access.



## **APPENDIX B: Tools and Resources**

### **Hotlines**

1-888-201-1014 CLEAR – Northwest Justice Project in Bellingham – Legal Aid

1-844-724-3737 HOTLINE – Washington Immigrant Solidarity Network

### **Links to essential tools and systems**

- **Immigrant Safety Plan for Youth and Children**
  - From the Legal Counsel for Youth and Children (LCYC). This tool helps parents plan for the care of their child(ren) in the event that a parent is detained or deported.
- **Guide to Creating Safe Space Policies**
  - From CLASP, this tool provides samples and guidance for implementing “safe space” policies, which help staff know what to do if ICE comes to the door. The tool was created for childcare providers but is easily adapted for other organizations.
- **What to Do If Immigration Comes to Your Workplace**
  - From the National Employment Law Project, this guide helps employers understand their rights and responsibilities, and explains what to do in case of an ICE action.
- **Calendar of Community Immigration Events**
  - From the Northwest Immigrant Rights Project, this on-line calendar enables organizations to post public events (trainings, etc.)
- **Immigration Law Updates**
  - From the Northwest Immigrant Rights Project, this on-line blog provides up-to-date information on changes to legislation that affect immigrant families.

### **Important infographics (attached below)**

- Know Your Rights – Cards
- Sensitive Locations Infographic
- Know Your Rights – Keep Washington Working Act

### **Articles (attached below)**

- Building Bridges, Reaching Beyond Walls: Increasing Access to Health Care for Migrant and Seasonal Agricultural Workers (MSAW)
- Immigrant Health: Anchoring Public Health Practice in a Justice Framework





The Network is a coalition of Labor, Faith, Immigrant and Refugee Rights organizations and individuals that strive to protect, serve and strengthen communities across the state by providing support, capacity and resources to build power and a united voice in Washington.

## KNOW YOUR RIGHTS

when speaking to law enforcement & immigration agents

- You do not have to open your door to immigration agents without a warrant signed by a judge.
- You do not have to speak to ICE, hand over documents or consent to a search.
- You can ask for an attorney before signing any paperwork.

## HOTLINE TO REPORT IMMIGRATION ACTIVITY

**1-844-RAID-REP**  
(1-844-724-3737)

This is a line to report active raids and  
ICE activity

**TEXT ALERT**  
**253-201-2833**

Subscribe for text alerts as to ICE and  
immigration activity across Washington.  
Text JOIN to confirm!

## Early Care and Education Programs are Sensitive Locations

The Department of Homeland Security (DHS) has longstanding policies that restrict immigration enforcement actions in “sensitive locations.” This means that, except in limited circumstances, immigration agents should not conduct arrests, apprehensions, or other enforcement actions in the following locations:



**Schools**, including known and licensed child care programs, preschools, pre-kindergarten programs, Head Start programs, and other early care and education programs.

K-12 schools, colleges and universities, after-care programs, vocational or trade schools, and other education-related activities and events are also included in the policy.



**School bus stops** that are marked and/or known to the officer (during periods when children are present at the stop).



**Medical treatment and health care facilities**, such as hospitals, doctors' offices, accredited health clinics, and emergent or urgent care facilities.



**Places of worship**, such as churches, synagogues, mosques, and temples.



**Religious or civil ceremonies or observances**, such as funerals and weddings.



**During public demonstrations**, such as marches, rallies, or parades.

### What this means for early care and education providers:

- Providers should notify staff and parents that the program is considered a sensitive location.
- Providers do not have to allow immigration officials into your program without a warrant.
- Providers should develop internal procedures in case of potential enforcement actions and share them with staff and parents.
- Providers should track enforcement actions at or near their property. These can be reported to a local immigration or legal services organization.

For more information about the sensitive locations policy, please see CLASP and NILC's factsheet, The Department of Homeland Security's "Sensitive Locations" Policies, available at [clasp.org/sensitivelocations](http://clasp.org/sensitivelocations).

For questions about the sensitive locations policy or if you believe the policy has been violated, contact **Rebecca Ullrich** ([rullrich@clasp.org](mailto:rullrich@clasp.org)) at the Center for Law and Social Policy (CLASP). To learn more about CLASP, visit [www.clasp.org](http://www.clasp.org).

Updated July 2018

**CLASP**  
Center for Law and Social Policy

**New Community Rights with Police and  
Federal Immigration Authorities in WA**

**Effective May 21st 2019**

## KNOW YOUR RIGHTS

**Keep Washington Working is now state law!**

Washington State Legislature passed the Keep Washington Working Act to protect the rights of immigrant communities from unnecessary contact with ICE (Immigration and Customs Enforcement) and CBP (Customs and Border Patrol). The new law requires that police and jails change their practices and policies to ensure the privacy of all Washingtonians by doing the following:

**Local police, WA State Patrol, Sheriffs, jails, Department of Corrections (DOC) and school resource officers are PROHIBITED FROM:**

Asking you about or collecting your place of birth, immigration status, or nationality, unless it is for an ongoing criminal investigation.\*

Stopping or detaining you to determine immigration status.

Giving ICE/CBP your personal information (for example, a home address).\*

Holding you on ICE/CBP detainers or ICE administrative warrants (which are signed by ICE agents and not a judge).

Allowing ICE/CBP access to interview you in jail. If ICE/CBP is in the jail investigating a criminal offense, you have the right to remain silent and refuse to speak with ICE. The jail must get written consent from you before ICE/CBP can interview you.

Denying you services or benefits if they have an ICE detainer, notification request, or immigration warrant.

Notifying ICE/CBP when you will be released from custody.\*

Contracting with ICE and CBP to do immigration enforcement.

Detaining immigrants for ICE/CBP in local jails through contracts between jails and Dept. of Homeland Security (DHS).

Using ICE and CBP as interpreters, translators, or for language classes.

**\*DOC is exempted from this specifically**

**WA State Agencies (such as Department of Licensing):**

Cannot share your personal information with ICE or CBP unless required by federal law.

Agencies **MUST** provide services regardless of immigration status, unless otherwise required by law.

**If you believe your rights listed above have been violated, please call Washington Immigrant Solidarity Network (WAISN):**

**Rapid Response hotline at:  
1-844-RAID-REP (1-844-724-3737).**



## **Building Bridges, Reaching Beyond Walls: Increasing Access to Health Care for Migrant and Seasonal Agricultural Workers (MSAW)**

Colleen Pacheco, MIM, MPH

December 2018

As one of the nation's 166 Migrant Health Centers, Sea Mar Community Health Centers provides comprehensive primary and preventive health care to Migrant and Seasonal Agricultural Workers (MSAW) and their families. Expanding access to care and improving health equity for Migrant and Seasonal Agricultural Workers (MSAW) requires a multi-faceted approach to overcome significant barriers and health disparities worsened by laws, which push them further into the shadows and discourage them from seeking services and resources. By tailoring localized programs and interventions and addressing administrative



processes and training agency-wide, the Sea Mar Community Health Centers MSAW Promotores Program increased the number of MSAW we served by 96% in four years. For its efforts, Sea Mar won the 2018 Increasing Access to Care Promising Practice Award from the National Center for Farmworkers Health.

MSAW experience more barriers to care, and greater health inequities, than year-round agricultural workers. Agriculture is one of the most dangerous industries and MSAW face significant occupational and environmental hazards, such as pesticide exposure, musculoskeletal injuries, skin disorders, and respiratory problems. They work long hours at a fast pace, performing physically hard work in all kinds of weather, jeopardizing their health and making them prone to missing medical appointments and encounter difficulties managing chronic health conditions. In order to survive, they tend to ignore personal discomfort and usually have no time, or knowledge, of preventive health practices. Frequent mobility, low literacy, limited language abilities, transportation options, lack of knowledge regarding services, as well as differing cultural beliefs and health practices, create significant hurdles to accessing resources and care. Over 54,000 MSAW and family members reside either year-round or temporarily in the nine counties in Western Washington where Sea Mar offers clinical operations.

Agency-wide processes and systems were initiated, including training to help staff better identify and capture a client's special agricultural status. In Skagit and Whatcom Counties, where two-thirds of the MSAW and families reside, efforts were focused on increased community engagement, building relationships with both growers and the agricultural workforce, and



initiating innovative outreach service delivery models to overcome structural barriers to care such as lack of childcare, transportation and long work hours.

In these two counties, the MSAW Promotores Program has been operating since 2010, facilitating access to services and improving quality of service delivery. Community Health Workers, or “Promotores,” are the core of this program and are recruited from the local agricultural community to serve on the front lines of public health, effectively forming a bridge between the agricultural community and health services. They are especially effective at this role as they possess deep knowledge of social networks and special health needs and are trusted by the community. Promotores have strengthened existing relationships with growers and agricultural communities and helped create new access points, allowing us to reach deeper into these increasingly hidden agricultural communities. During the high harvest season of berries over the summer months, Promotores visit farms, migrant camps, housing sites and common gathering places with mobile medical and dental clinics. During the non-peak season, they lead health workshops and presentations for farmworkers who reside in the area year-round or who remain in the camps over winter. Although innovative and special initiatives are undertaken routinely, our multi-faceted approach focuses on:

1. Relationship building to establish trust with highly ethnically diverse communities and address social determinants of health
2. Expanding service delivery to outreach sites
3. Increasing health literacy and preventive health knowledge
4. Fostering relations with new farms to expand reach and gain access to difficult-to-reach communities

Key to building connections and relationships with MSAW was the initiation of the **MSAW Mapping Project**. We knew the agricultural workforce had transitioned from primarily Spanish speaking Latinos but were unsure of the extent of the transition. Through this ongoing project, we discovered a highly ethnically diverse workforce with unique linguistic and cultural barriers. We identified more than 16 Mexican and Guatemalan indigenous linguistic communities, with high monolingualism and varying degrees of literacy and Spanish speaking ability across age, gender and community. We began forging connections with these communities as well as a large Punjabi community in Whatcom, with similar English language limitations. The Mapping Project provided significant insight into the diversity, linguistic complexities, cultural barriers, health care beliefs and practices, such as lack of understanding of health processes and preventive health practices. The findings justified the hiring of staff who speak these indigenous languages and the increased community engagement resulted in leaders reaching out for services and assistance. The findings provide ongoing insights on health messaging and on clinical tools to enhance patient-provider communication. As these isolated and shy communities felt more welcome and understood, they began reaching out asking for assistance or workshops and information.

To address lack of transportation, childcare, and time, **clinical services were expanded beyond the clinic walls** through mobile medical and dental clinics at farms, migrant camps and other gathering sites. Over the last four years, more than 2,100 MSAW have received medical, dental and health screen services through 96 mobile clinics facilitated during the summer months.

Many of these patients are newly diagnosed or with chronic conditions such as diabetes or hypertension who do not regularly visit clinics. The remainder have usually never seen a medical doctor for a wellness check-up (especially males). All were able to get relevant health information and follow-up care often not available due to lack of time, money or a tendency to ignore pain or illness until it becomes acute. In 2017, we began holding mobile flu clinic events for seasonal workers during the shoulder season and year-round TB screening workshops due to the high prevalence of tuberculosis within the agricultural community. In addition to workers obtaining needed vaccines or information, we take advantage of these access events to compel them to visit the clinics for additional follow-up appointments, for annual exams and preventive screens. Most of them do end up asking for follow-up appointments.

**Increasing health literacy and preventive health knowledge** through outreach clinics and specific health topic workshops helped expand the culturally appropriate health promotional workshops and events, which the program has always done through door to door canvassing, workshops at gathering sites, and public service announcements. However, five years ago, farms began creating space for the mobile clinics. Each year, more farms open their facilities during the paid workday so their workers can attend our workshops. Additional projects in the community and clinics are focused on **improving patient experience and health outcomes**, including an Indigenous Prenatal Research Grant to research barriers to care and to create effective health messaging for early prenatal care.



As communities recede deeper into the shadows, **opening new access points** for farmworkers is an unending initiative. Building better connections with the ethnically diverse agricultural workforce communities and their employers has been critical in our success in expanding access for MSAW. Over four years, we've partnered with eight new farms, 16 in total, annually

expanding grower collaborations and strengthening existing farm collaborations. These relationships have allowed us to work with farm management to help workers with urgent or chronic conditions schedule clinic appointments by coordinating approval to leave work and find transport to the clinic. Every team member (from manager to promotores) are involved in cultivating these relations, which can take years, and may require leveraging connections we have through existing farms or community partners.

This multi-dimensional approach, supplemented by ongoing research and periodic trainings and audits has allowed the program to build deeper connections and trust with agricultural workers and employers while finding new ways to improve access and patient health.

For more information, please contact Jimena Garcia at [JimenaGarcia@seamarchc.org](mailto:JimenaGarcia@seamarchc.org) or Marcela Suarez at [marcelasuarez@seamarchc.org](mailto:marcelasuarez@seamarchc.org)

# Immigrant Health: Anchoring Public Health Practice in a Justice Framework



See also Young and Wallace, p. 1171; Allen, p. 1177; Rothstein and Coughlin, p. 1179; and Sundwall, p. 1184.

The nexus between policy actions and immigrant health is central in this issue of *AJPH* in two articles by Young and Wallace (p. 1171) and Rothstein and Coughlin (p. 1179), serving as a reminder of the need for public health practitioners to adopt a framework that explicitly connects the dimensions of social determinants of health with population health outcomes. Such a framework incorporates a root cause analysis to elucidate the factors contributing to observed health results, including the centrality of economic, social, and environmental conditions.

## EFFECTIVE PRACTICES

Young and Wallace show how policies that marginalize and criminalize immigrants can minimize the effect of actions taken to ensure access to health-affirming resources. Their essay provides a critical discussion of the public health implications of states' complex, contradictory contexts in which immigrants may, for example, simultaneously benefit from public programs while living under the specter of immigration enforcement. Their research points to the need to account for

interactions across the broad dimensions that affect both individual and community well-being.

Rothstein and Coughlin note that for a quarantine to succeed, there must be a set of protections in place that minimize the legal, economic, and social effects on vulnerable individuals who need to be quarantined. One strategy for dealing with the unintended consequences of public health actions is to enact as few regulations or practices as possible that restrict individual liberty. Rothstein and Coughlin offer an alternative to this approach in their notion of "safe harbor provisions," which can complement actions and regulations enacted to protect population health; such provisions make it both more likely that individuals will comply with public health directives and more likely that compliance will not cause additional harms. The concept of safe harbor provisions can be broadened, creating the strategic imperative to ensure that community members have access to the resources and opportunities that prevent transmission of an infectious disease; this allows policies related to quarantine to align with

a much deeper set of actions that ensure economic well-being, protect from discrimination, and attend to social connections. In Los Angeles County, California, this includes creating safe and welcoming places for immigrants (regardless of citizenship status) to access a full range of free health services (including vaccinations), establishing a legal assistance fund for immigrants, and decriminalizing economic activities such as street vending.

## MULTIPLE FORMS OF OPPRESSION

Health-affirming policies are always limited in their effectiveness by practices and systems that perpetuate discrimination, maintain exposure to hazards, and continue grave injustices. For immigrants, the intersectionality of race, language, citizenship status, and economic position create, for many, exposures to multiple forms of oppression and marginalization

that can negate the many benefits of inclusionary policies. Public health success depends on acknowledging this complexity and addressing the fundamental need for social, economic, and racial justice to ensure optimal health and well-being. Offering sanctuary policies at Los Angeles County health clinics is not sufficient if the possible change in the public charge rule can penalize immigrants who receive government services.

Health departments and public health practitioners will need to ensure that local, state, and federal officials enact laws and regulations that improve the conditions that shape immigrant health. The foundation of excellent public health practice recognizes our interconnectedness with one another and our environment. Effective disease control, prevention of chronic diseases, and promotion of health-affirming actions demand approaches that are comprehensive and rooted in an understanding of the social determinants of health. Nowhere is this clearer than in our obligation to ensure that public health policies and practices do not unfairly advantage or disadvantage some community members based on social hierarchies including race/ethnicity,

## ABOUT THE AUTHOR

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# PHAB Recommendations for Health Board Action

## Health Protection for Immigrant Families

October 1, 2019

### **Recommendation # 1**

#### **Build trust between immigrant families and local law enforcement.**

**Why this is Important:** The community has a heightened level of fear and mistrust due to current federal immigration policy, recent Immigration and Customs Enforcement (ICE) raids and conflicting information about local law enforcement cooperation with ICE and federal detention policies. This fear prevents families from seeking needed health services and supports. The resulting stress impacts physical and mental health for both adults and their children

#### **Recommended Board Actions:**

- a. Establish a Whatcom County Trust Ordinance or Resolution that clarifies the role of local law enforcement in federal immigration enforcement, arrests and detentions. (See attached Lawrence Trust Ordinance example)
- b. Authorize funding for the Sheriff to support outreach and relationship-building with immigrant and non-English speaking communities

### **Recommendation #2**

#### **Strengthen the capacity of local employers, businesses, and service agencies to respond to immigration related issues.**

**Why this is Important:** Misinformation or lack of information about laws and best practices regarding checking employee citizenship status, dealing with ICE surveillance, and protecting immigrant rights and dignity can add to immigrant unemployment and fear/stress in the workplace.

#### **Recommended Board Actions:**

- a. Expedite local implementation and awareness of new "Keep Washington Working" state law.
- b. Widely distribute information about county policy, laws and resources associated with federal and state immigration laws to businesses, employers, and community-at-large.

### **Recommendation #3**

#### **Improve service systems to better meet the needs of families, including immigrant families.**

**Why this is Important:** Support agencies are overwhelmed when trying to find health care and services for immigrant families, including mental health supports. Immigrant families who do seek services often experience discrimination, insufficient language supports, lack of cultural understanding, and services that are not trauma-informed.

#### **Recommended Board Actions:**

- a. Require mandatory training for county staff and contractors (particularly criminal justice, health and human services) related to: Anti-discrimination/anti-bias approaches, culturally and linguistically appropriate services (CLAS), and trauma-informed services.
- b. Fund a culturally and linguistically responsive health navigation system for all Whatcom County families, including centralized point for information, referral, and service coordination among providers.



Be it ordained by the City Council of the City of Lawrence that the Revised Ordinances of the City of Lawrence are hereby further amended by adding the following new Chapter 9.20 (Lawrence TRUST Ordinance), to be inserted in the proper numerical order:

### LAWRENCE TRUST ORDINANCE

#### **Section 9.20.010 Purpose**

The purpose of this LAWRENCE TRUST Policy and Order is to increase public confidence in Lawrence Law Enforcement by providing guidelines associated with federal immigration enforcement, arrests, and detentions.

#### **Section 9.20.020 TRUST Policy.**

1. It is not within the purview nor mandate of the City to enforce federal immigration law or seek the detention, transfer or deportation of Lawrence residents for civil immigration purposes, nor should City resources be expended toward that end. Under no circumstances shall a person be contacted, detained, or arrested by City of Lawrence law enforcement personnel based on immigration status, whether known or unknown.
2. The City of Lawrence will equally enforce the law and serve the public without consideration of immigration status. Citizenship, immigration status, lack of immigration documentation, national origin, race, and ethnicity shall have no bearing on an individual's treatment by Lawrence law enforcement personnel (including but not limited to classification status, eligibility for work programs, eligibility for alternative to incarceration programs, right to release on bail), or on decisions to initiate stops, make arrests, or extend the length of custody.

#### **Section 9.20.030 Definitions**

"Immigration & Customs Enforcement" (or "ICE") is the agency within the US Department of Homeland Security with primary responsibility to investigate and enforce immigration law.

"Immigration Holds" are requests, often called "ICE holds" or "immigration detainers", by federal immigration officials, including but not limited to those using federal form I-247 (authorized under Section 287.7 of Title 8 of the Code of Federal Regulations) to local Law Enforcement to voluntarily maintain custody of an individual once that individual is released from local custody.

"Administrative warrant" means a warrant, notice to appear, removal order, warrant of deportation, or other ICE custody document (I-200, I-203, I-205 or another listed in the National Crime Information Database (NCIC)) issued by a federal immigration official, not a judicial officer, and not based on a finding of probable cause for an alleged criminal law violation.

"Released from local custody" means an individual may be released from the custody of a law enforcement agency because any of the following conditions has occurred:

- (a) All criminal charges against the individual have been dropped or dismissed;
- (b) The individual has been acquitted of all criminal charges filed against him or her;

- (c) The individual has served the time required for his or her sentence;
- (d) The individual has posted a bail or bond, or has been released on his or her own recognizance;
- (e) The individual has been referred to pre-trial diversion services;
- (f) The individual has been sentenced to an alternative to incarceration, including a rehabilitation facility;
- (g) The individual is otherwise eligible for release under state or local law.

### **Section 9.20.040 Regulations**

**a.) ICE holds or administrative warrants.** Unless ICE demonstrates a criminal warrant signed by a judge and based on probable cause, no officer or employee of a City of Lawrence law enforcement agency shall arrest or detain an individual solely on the basis of an immigration hold or administrative warrant. This includes extending length of custody by any amount of time once an individual is released from local custody.

**b.) ICE notification requests.** No officer or employee of a City of Lawrence law enforcement agency shall respond to any ICE notification request seeking information about an individual's incarceration status, length of detention, home address, work address, personal information, hearing information, or pending release.

**c.) ICE access to records or facilities.** Unless ICE demonstrates a criminal warrant signed by a judge and based on probable cause, no officer or employee of a City of Lawrence law enforcement agency shall allow ICE agents access to or use of facilities, records/databases, booking lists, or individuals in custody either in person or via telephone or videoconference.

**d.) Individuals subject to ICE interventions.** Any individual subject to an immigration hold, administrative warrant, notification request, or contact with ICE, where Lawrence law enforcement acquiesces to the ICE request, shall be provided with a copy of the ICE request and any other documentation pertaining to their case that is presented to the law enforcement agency.

**e.) U Visa Certification.** In furtherance of the US Victims of Trafficking and Violence Prevention Act, City of Lawrence law enforcement personnel shall consider and sign a U Visa certification request if an individual is (i.) the victim of a qualifying crime, and (ii.) has been, is being, or will likely be helpful in the investigation/prosecution of that crime.

### **Section 9.20.050 Complaints**

Allegations of violations of the present TRUST policy and order shall be filed with the Mayor of the City of Lawrence.

### **Section 9.20.060 Reporting**

Beginning on September 1, 2015 and on every other month thereafter, the Lawrence Police Chief shall submit a report, with the information detailed below, to the Clerk of the City of Lawrence, with a copy sent to the Mayor of the City of Lawrence. The City Clerk shall docket said report, and include the docket on the agenda of the next-occurring meeting of the Lawrence City Council.

- (a) The total number ICE hold, administrative warrant, and notification requests lodged with City Law Enforcement officials, organized by the reason(s) given for the request;
- (b) The total number of individuals detained pursuant to Section 9.20.040 (d), if any;
- (c) The total number of individuals transferred to ICE custody, if any; and
- (d) The total reimbursements received from the federal government pursuant to any granted hold, administrative warrant, or notification request, organized by case.

To the extent that there exist any ordinances to the contrary, they are hereby repealed in that respect only.

Office of the City Attorney

June 8, 2015

# Health Protection for Immigrant Families

**Sterling Chick** – Public Health Advisory Board & Clinical Director,  
Catholic Community Services

**Lindsey Karas** – Public Health Advisory Board & Resident Services  
Coordinator, Mercy Housing Northwest

October 1, 2019

Whatcom County Health Board



Whatcom County  
**HEALTH**  
Department



# DEFINITIONS

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(leaving out provocative labels)

- **Immigrants**
- **Non-citizens**
- **Undocumented**
- **Aliens**

families



# **RECOMMENDATIONS**

**IMPACTFUL**

**REASONABLE**

**AT THE POLICY LEVEL**





2019 Joint meeting of the Whatcom County Health Board & the Public Health Advisory Board

**Health Board:** Preservation of the life and health of the people within its jurisdiction

**PHAB's Mandate:** focus on the responsibilities of the health department

# **THREE THINGS HAPPENED**

**ICE RAIDS**

**KEEP WASHINGTON WORKING**

**PUBLIC CHARGE**

## **RESOLUTION NO. 2019-050**

### **HEALTH PROTECTION FOR IMMIGRANT FAMILIES**

**Whereas:** In accordance with RCW 70.05.060 it is the responsibility of the Whatcom County Health Board to supervise all matters pertaining to the preservation of the life and health of the people within its jurisdiction and;

**Whereas:** the Whatcom County Board of Health shall supervise the maintenance of all health and sanitary measures for the protection of the public health within its jurisdiction and;

**Whereas:** on October 29, 2013, the Whatcom County Health Board unanimously passed Resolution 2013-038 Call for Compassionate Community Approach to Public Health Related Services and;

**Whereas:** the Whatcom County Health Board has identified the health of children and families as a policy focus area for 2018 and;

**Whereas:** Whatcom County, just like many counties in Washington State, is the home and workplace of large immigrant communities with citizens and immigrants of all statuses; and

**Whereas:** Recent Immigration and Customs Enforcement raids and detentions in Whatcom County have caused immigrant families significant trauma resulting in mental health concerns in adults and adverse childhood experiences (ACE' S) for young children and;

**Whereas:** Fear of detention and deportation has caused families to avoid seeking needed medical and social services and;

**Whereas:** Changes to federal laws are being proposed that would cut off government health benefits and housing for immigrants and their families and;

**Whereas:** Whatcom County may face increased demands for assistance from immigrants and their families resulting from changes to the " public charge" definition because fewer individuals will be able to access federal benefits such as Supplemental Nutrition Assistance Program, Section 8 housing vouchers and healthcare services and;

**Whereas:** Whatcom County administers federal programs, and changes to federal laws could impose burdensome new tracking and reporting requirements for local offices that administer these programs and;

**Whereas:** Changes to federal law may discourage immigrants and their families from seeking federal health benefits, such as Medicaid or the Children' s Health Insurance Program (CHIP) resulting in health impacts to those families, decreased health status of our community and increased costs to county budgets and;

**Whereas:** The Health Board has resolved to seek opportunities to increase awareness and promote the concept of a" compassionate" or " trauma sensitive" approach and to integrate this paradigm into the broadest possible range of all public health, education, and human services in our county and;

**Whereas:** The Whatcom County Health Board seeks to stand in support of our immigrant families by upholding the principles of health equity and ensuring that the health and social service needs of citizens and immigrants of all statuses are met

# TASK FORCE

**GATHERED INFORMATION**  
(MAY & JUNE 2019)

**FORMED A TASK FORCE**  
(JULY 2019)

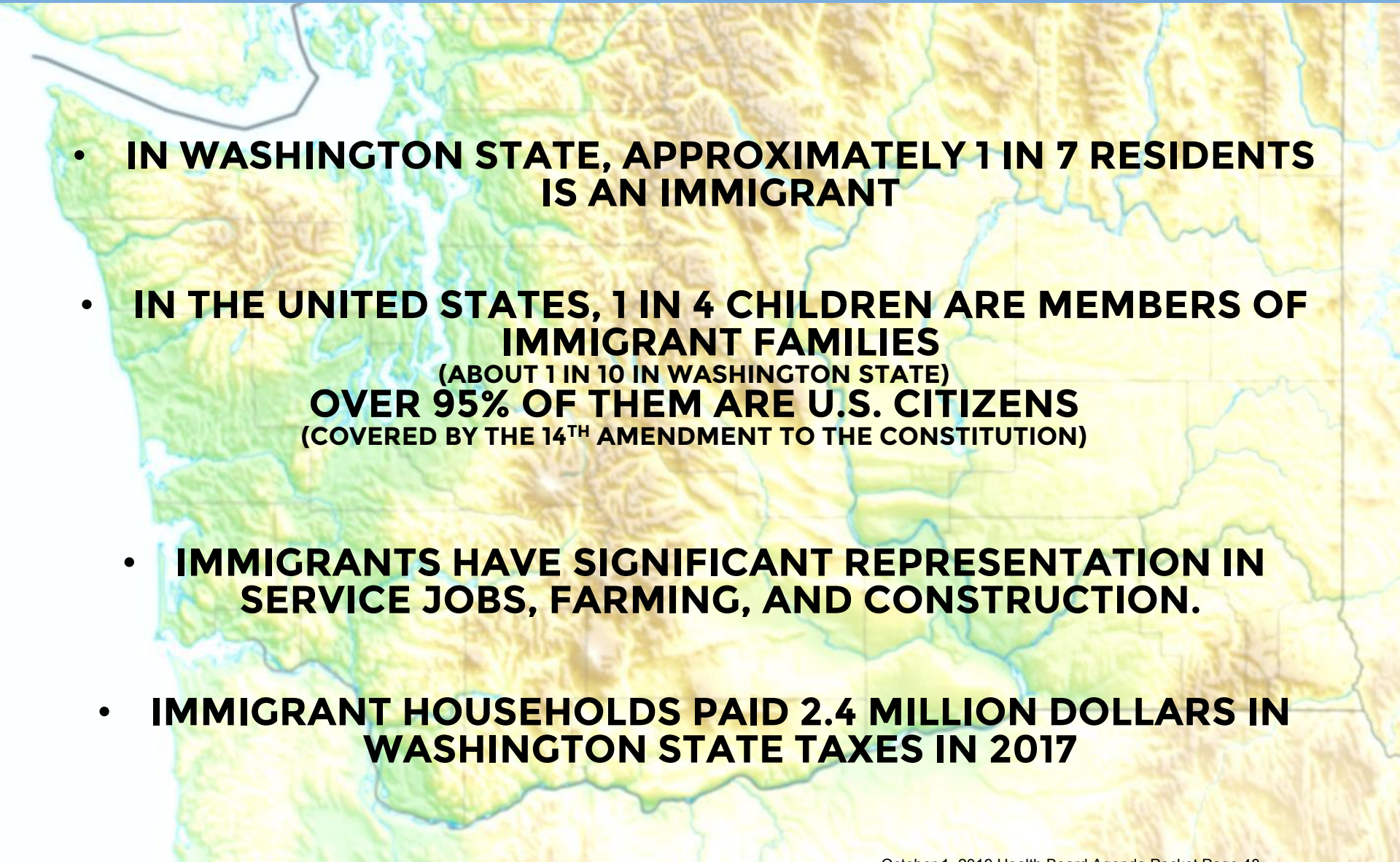
Met three times over  
the summer

46 people attended

Schools, social service  
agencies, health  
services, government  
agencies, churches,  
people directly  
affected by ice RAIDS



# BACKGROUND

- 
- A topographic map of Washington state, showing the state's outline and internal county boundaries. The map uses a color gradient from green in the lowlands to yellow and brown in the mountainous regions. The text of the list is overlaid on the map.
- **IN WASHINGTON STATE, APPROXIMATELY 1 IN 7 RESIDENTS IS AN IMMIGRANT**
  - **IN THE UNITED STATES, 1 IN 4 CHILDREN ARE MEMBERS OF IMMIGRANT FAMILIES**  
(ABOUT 1 IN 10 IN WASHINGTON STATE)  
**OVER 95% OF THEM ARE U.S. CITIZENS**  
(COVERED BY THE 14<sup>TH</sup> AMENDMENT TO THE CONSTITUTION)
  - **IMMIGRANTS HAVE SIGNIFICANT REPRESENTATION IN SERVICE JOBS, FARMING, AND CONSTRUCTION.**
  - **IMMIGRANT HOUSEHOLDS PAID 2.4 MILLION DOLLARS IN WASHINGTON STATE TAXES IN 2017**

# HEALTH IMPACT ON FAMILIES

## STRESS

- Trauma
- ACEs
- Toxic Stress

## RESULTS

- Brain development
- Readiness for school





**School**

# IMPACT ON THE COMMUNITY

- EMPLOYERS
- SCHOOLS
- SOCIAL & HEALTH SERVICES

# Health Protection for Immigrant Families: *Recommendations for Health Board Action*



Whatcom County  
**HEALTH**  
Department





# Key Findings

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- **Immigrant families** in Whatcom County are experiencing high levels of fear and stress
- **Fear** prevents families from seeking needed health services and supports
- **Stress** impacts physical and mental health for both adults and their children
- **Current services and systems** are not meeting the needs of immigrant families

# Recommendation #1

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## **Build trust between immigrant families and local law enforcement**

- Community has heightened level of fear and mistrust due to current federal immigration policy and rhetoric, recent ICE raids leading to detention and deportation, and personal experience with local law enforcement.
- There is conflicting information about local law enforcement cooperation with ICE and federal detention policies.

# Proposed Policy Actions

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- Establish a Whatcom County Trust Ordinance or Resolution
- Authorize funding for the Sheriff to support outreach and relationship-building with immigrant and non-English speaking communities

# Recommendation #2

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## **Strengthen capacity of local employers, businesses, and service agencies to respond to immigration related issues**

- Current challenges include misinformation or lack of information about laws and best practices regarding checking employee citizenship status, dealing with ICE surveillance, and protecting immigrant rights and dignity

# Proposed Policy Actions

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- Expedite local implementation and awareness of new “Keep Washington Working” state law
- Widely distribute information about county policy, laws and resources associated with federal and state immigration laws to businesses, employers, and community-at-large

# Recommendation #3

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## Improve service systems to better meet the needs of families, including immigrant families

- Immigrant families who do seek services often experience discrimination, insufficient translation or other language supports, lack of cultural understanding, and services that are not trauma-informed.
- Support agencies are overwhelmed when trying to find health care and services for immigrant families, including mental health supports.

# Proposed Policy Actions

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- Require mandatory training for county staff and contractors (particularly criminal justice, health and human services) related to:
  - Anti-discrimination/anti-bias approaches
  - Culturally and linguistically appropriate services (CLAS)
  - Trauma-informed services
- Fund a culturally and linguistically responsive health navigation system for all Whatcom County families, including centralized point for information, referral, and service coordination among providers.