

Raids on Immigrant Communities During the Pandemic Threaten the Country's Public Health



See also Morabia, p. 923, Tarantola et al., p. 925, and the *AJPH* COVID-19 section, pp. 939–977.

Reports of a cluster of people with pneumonia of unknown etiology surfaced in Wuhan City, China, on December 31, 2019. In early January 2020, the novel coronavirus was isolated and identified as severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and the epidemic quickly spread beyond Wuhan City. In the United States, the first case was reported on January 22. By March 1, US cases had increased to 30. After one more month, US cases multiplied drastically to more than 163 000 with almost 3000 dead. On March 11, the World Health Organization declared the outbreak a global pandemic. The virus proved to be extraordinarily contagious, and the disease it produces, COVID-19, has caused higher mortality than that from previous related viruses; and the death rate is significantly higher among older populations, those with preexisting conditions, and minoritized and marginalized communities. Because the current health crisis is caused by the intersection of a virus, preexisting medical conditions, and the social conditions ripe for the virus's spread and development into severe disease, we recognize this pandemic also as a syndemic.¹

To slow the spread of the virus, public health experts and governments have recommended several measures, including widespread

testing, frequent handwashing, and physical distancing—including staying at least six feet away from others (except those with whom one lives) and avoiding groups. On March 16, Governor Newsom of California issued a statewide stay-at-home order in which all residents were directed to avoid leaving their homes except to engage in “essential” activities. Other states and the federal government followed suit as the severity of the pandemic became evident. It is especially clear at this historic moment that the actions of governments have far-reaching impacts on the health of populations, especially those most structurally vulnerable.²

VIOLATING PUBLIC HEALTH RECOMMENDATIONS

On the first day of California's stay-at-home order, US Immigration and Customs Enforcement (ICE) agents—each with N95 medical protective masks at the ready—raided immigrant communities in Los Angeles, California.³ That same day, an asylum seeker in a detention center in Colorado was alerted that ICE planned to deport him to Nicaragua shortly thereafter. As the pandemic spread quickly and the death toll rose, ICE raids

continued in multiple parts of the United States. On March 18 (the same day as three raids in New York City—the area with the highest COVID-19 prevalence), ICE issued a public statement indicating that “[the agency's] highest priorities are to promote life-saving and public safety activities.” Far from promoting public health and safety, these raids, detentions, and deportations contravene public health recommendations and threaten to worsen the pandemic in the United States and beyond on several important levels—leading to avoidable exposures, infections, and deaths.

SOWING DISTRUST IN PUBLIC HEALTH INSTITUTIONS

ICE raids produce skepticism of public health recommendations and institutions. Trust is broken when local, state, and federal

governments order everyone to stay home and avoid all activities unless essential to survival while simultaneously continuing to raid immigrant and minoritized communities, separate families, and detain and deport individuals. Experiences of raids at any time produce increased stress at the community level, thereby worsening health outcomes,⁴ as well as distrust of public health institutions, leading to decreased utilization of important health services for prevention and treatment.^{5,6} These raids are targeted at racialized and minoritized communities, putting them at systematically higher risk.² During this pandemic, it is likely that these raids will lead community members to avoid necessary treatment if experiencing symptoms of COVID-19.⁶ This reasonable response to unreasonable, contradictory orders and actions on the part of the federal government puts these individuals, their communities, and all of society at unnecessary risk at a critical, uncertain time.

DISOBEYING DISTANCING AND SHELTER IN PLACE

These raids disobey public health recommendations and

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Source. Photo taken by Brad Sigal, member of Minnesota Immigrant Rights Action Committee. Printed with permission.

FIGURE 1—Car Caravan Protest While Physically Distancing, March 22, 2020, Outside Minnesota Governor's Mansion Calling for Release of All Immigrant Detainees From Minnesota Jails: St. Paul, MN

orders to shelter in place and practice physical distancing. Although shelter-in-place orders allow individuals to conduct tasks essential for survival (e.g., buying food, seeking medical care, obtaining medicines), all other movement is prohibited to avoid the spread of the virus. Raids, however, involve groups of ICE agents entering communities, taking people under force into detention facilities repeatedly shown to be overcrowded, and subsequently deporting some individuals to other locations. The movement of ICE agents, private subcontractors, and immigrants has already been documented to spread the virus, including transnationally. Citing the fact that overcrowded detention conditions are ideal for the spread of COVID-19, a federal judge ordered the release of migrant children (some who had already tested positive for COVID-19) from detention centers around the country. And a group of detained immigrants filed a federal lawsuit owing to the conditions putting them and others at risk for infection. Far from essential for survival, these forced displacements, detentions, and

deportations of children and others must be stopped for the health of these individuals, our society, and the interconnected world.

AGGRAVATING CRITICAL EQUIPMENT SHORTAGES

The use of N95 masks by ICE officers increases the severe shortage of health equipment already putting frontline public health practitioners and our entire health system at risk. Hospitals and clinics across the country are suffering a dire lack of personal protective equipment, prompting the US surgeon general to issue a statement requesting that all N95 masks be saved for frontline health workers. Many frontline health professionals are now on home quarantine, unable to care for patients because of avoidable exposures to the virus. Some are intubated on ventilators in intensive care units as patients themselves, and some have already died—along with numerous other people. The hashtag #GetMePPE trends on social

media and concerned individuals donate N95 masks to avoid the collapse of the health care system that would stem from sick frontline workers. Yet, on March 20, ICE bid on 45 000 more N95 masks to be delivered to all 26 enforcement and removal operations field offices. The federal government must prioritize protection for our public health system over raids that separate families in a time of shared crisis.

DETERIORATING SOCIAL DETERMINANTS

Furthermore, raids, detention, and deportation assault the social determinants of health of immigrants and their communities, making them more structurally vulnerable to sickness and disease.^{4,7} The living conditions of those experiencing or witnessing these actions are damaged directly.⁵ Simultaneously, the social determinants of health of all of society are threatened indirectly.⁷ Immigrants have many vital roles in society, from teaching and researching to planting and harvesting food, from providing health and medical care to designing and building infrastructure and far beyond. When immigrant communities are disrupted, whether in a pandemic or any other time, the social determinants on which our society's health depends are crucially harmed.

CONCLUSIONS

The raids, detentions, and deportations conducted by the federal government are putting us all at risk, creating distrust, leading to overcrowding and forced detrimental movement, worsening a shortage of basic health equipment, and adversely

affecting the social determinants of health of all. These actions threaten to overwhelm our public health system and fan the flames of the pandemic. As a country, we have a historic opportunity to set our priorities straight. Literally to survive, we must provide necessary equipment to frontline health workers, follow public health recommendations, and stop ICE raids, detentions, and deportations. Our lives and our society depend on it. **AJPH**

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CONFLICTS OF INTEREST

The authors have no conflicts of interest to declare.

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