Mending Minds and Bodies: Analyzing Immigration Policies & Interviewing Community Members

Elizabeth Silverio

Abstract

In this paper, I explore the effects of various United States immigration policies on physical, mental, emotional health and perceptions of safety and support among undocumented New Yorkers. Through both a root cause analysis of these policies and interviews with undocumented people who seek support from community-based organizations, I demonstrate how these systemic barriers negatively affect their well-being by reinforcing a cycle of fear, vulnerability, and resilience through seeking community. Ultimately, these policies not only impact undocumented immigrants and advocates working to address the broader systemic barriers that create inequalities and exclusion.

If access to health care is considered a human right, who is considered human enough to have that right is a statement from Paul Farmer who is a medical anthropologist and physician. In an individualist country like the United States this quote brings up discussion on who can access the various systems that have been established (ex. Educational, health/wellness, legal, etc.).

Undocumented people must be brought into the discussion as they do not have equitable access to everything our system has to offer, especially in health care/wellness compared to what a documented person would typically have access to. Undocumented people do not get their needs met when they are needed and that is why it's important to understand how this came to be and the impact that this has on the lives of people. As we unravel the history of immigration in the United States, we must ask ourselves what the connection between policies is that have been established, societal beliefs, and the health and wellness of undocumented people. How does the socio-political environment of an undocumented person affect their access to healthy living? Rather than questioning the humanity of others, we must ask ourselves what we can do to educate ourselves on the connection between immigration and healthy living. Strengthening our understanding of this country's history broadens our perspective on the ethics of policies. Knowledge can unite people to advocate for policy reforms such as increased access to healthcare and mental health through community based support. Doing so empowers people in their neighborhoods to use their assets whether creative or organizational to advocate for undocumented immigrants' rights and to reconstruct the systems that have harmed this community.

Historical Background

Creation of state borders

The United States has an extensive history with immigration and there are various historical events that people must analyze to understand the relationship between immigration policies and the treatment that people received because of this. The first historical event that will be discussed is the relationship between Mexico and the United States as this bleeds into the history of how state borders came to be and the creation of policies. Policies seemingly making their way back in today's current time like SB1070 passed in 2010 in AZ involving profiling people, questioning immigration status, and deportation (Barjaras, 2018). In 2024 we see similar bills attempting to be passed like SB4 that profiles people who seem like they came to the US illegally and deport them back to Mexico despite their country of origin (Sullivan, 2024). As we further discuss policies in the past and present, they can be analyzed to see the swings in occurrence. In the article titled Mexican Americans and historical trauma theory: A theoretical perspective by Antonio Estrada the author provides us with historical background on the immigration relationship between Mexico and the United States. The United States is a country that has placed its values and emphasis on expanding occupied territory, slaughtering those in the way, and capitalizing off the resources (agriculture, minerals, etc.) in said territory by exploiting people's labor. Impacting undocumented people as they are the ones who work in these fields like agriculture, meaning that policies later passed would affect these workers differently than their documented employers. The justification for this was the notion of a divine being telling settlers to expand and conquer, also known as Manifest Destiny. This ideology led to the displacement of indigenous people and the creation of policies targeting marginalized groups to maintain "order". The idea of "Whiteness" being the standard through the force of assimilation of indigenous people and other groups of people through family separation. The beliefs behind Manifest Destiny continue to shape present day immigration enforcement through dehumanizing policies. Consumed by greed, in 1846 the U.S declared a war on Mexico that lasted two years. This war resulted in Mexico signing the treaty of Guadalupe Hidalgo in 1848 which led to the surrendering of the following Mexican territory: California, New Mexico, Nevada, Arizona, Colorado, Oklahoma, and parts of Utah. Residents living in these areas were displaced from their homes

while others decided to stay in what was now part of the United States. Those who remained in these states were granted U.S citizenship after a year, the first generation of Mexican Americans rose (Estrada 2009). The U.S government intended to use guaranteed citizenship as compensation for taking Mexico's land. The weight of the U.S's action resulted in negative consequences for Mexican Americans/ Mexicans that lived in the country as they were discriminated against, exploited, segregated in the communities they lived in and the schools that they had access to, overall, there were different rights granted compared to the dominant majority who held power and control. Article IX of the Treaty of Guadalupe Hidalgo states "The Mexicans who, in the territories aforesaid, shall not preserve the character of citizens of the Mexican Republic... shall be incorporated into the Union of the United States. and be admitted at the proper time... to the enjoyment of all the rights of citizens of the United States, according to the principles of the Constitution; and in the meantime, shall be maintained and protected in the free enjoyment of their liberty and property, and secured in the free exercise of their religion without restriction." (Treaty of Guadalupe Hidalgo 1848) Despite this section clearly stating that Mexican Americans should have the same rights and protections as U.S citizens. The reality was different, as Mexican Americans faced barriers in accessing education, economic opportunities, political involvement, and were subjected to policies that specifically targeted them.

Demonstrating that despite a signed treaty under the law, Mexican Americans were denied the American belief of life, liberty, and the pursuit of happiness. As the country grew diverse with people from different countries, exclusionary immigration policies developed. This process began with the authorities stopping people who didn't fit the look of a stereotypical "citizen" and asking them to provide proof of their citizenship. People who could not provide documentation were deported. As social and economic problems arose Mexican Americans were blamed and were the catalyst for the creation of the border patrol in 1924 to solve problems the country was having through mass deportation. This mass deportation was known as "operation wetback" that started in 1930 lasting through 1950s which consisted of deporting Mexicans despite their citizenship status (2009). The immigration system was and continues to be oppressive to Mexicans because they were removed from their land, discriminated against, negatively portrayed which led to harmful policies being formed, and dehumanized. Through time this system has expanded to be oppressive towards undocumented immigrants.

Changing Policies

Immigration policies impact everyone differently depending on their identity like gender, race, abilities etc. Historically, policies have benefitted the dominant majority as they were the ones in charge of establishing these policies. The people that make up this population are men that have been racialized as white that have given themselves the power of creating systems that will benefit a select few while excluding everyone else. In the context of policies relating to the relationship between the US and Mexico, is the Bracero Program of 1942 that allowed Mexican workers to work in the agriculture field while World War 2 was happening. Often the people working on these fields were being capitalized on. In 1952 the Immigration and Nationality Act was passed which involved measuring the number of immigrants coming from Asia to put the immigration wave to a halt. In this act there was a portion that stated that providing shelter/housing to undocumented people was illegal. This was hypocritical because those who employed undocumented people were often of the dominant majority and were not penalized for using labor of undocumented people (Emmanuel 2020). Demonstrating how policies impact people differently, in this case undocumented people are the ones at risk of being deported and harmed if they seek shelter. Whereas employers can get away with using people to get their labor done and have low stakes for loss. This act was glanced over and helped continue the exploitation and power dynamic between undocumented people and their employers by paying them low wages, working long hours, and expecting people to stay put knowing they can be deported if they would not comply. Those in power view people as disposable who can be used for profit and the minute that they're no longer useful or needed, policies are made to get rid of people who made their contributions. The relationship between Mexico and the United States played a big role in the creation of the immigration set up that impacts people till this day. The system harms and oppresses undocumented people while White documented people experience a privileged version of this structure, as the set up was made for them.

Ellis Island: Waves of immigration in NY

Another historic example I would like to mention is the opening of Ellis Island as this highlights the treatment/portrayal of the different waves of immigrants that arrived in the United States. In 1892 the first wave of

immigrants arrived, a majority came from European countries, some spoke English, and were literate. These were some advantages that helped people transition to living in the country to which they were welcomed with open arms. This is important to acknowledge because the first wave of immigrants had a direct pathway to citizenship through the Naturalization Act of 1790, where the only requirement to becoming a US citizen was being white and having "good" values and morals (U.S Capitol). Demonstrating how the first wave of immigrants was portrayed positively with "American" values as they were given a direct pathway to citizenship. Eventually the European immigrants that came to the U.S were all considered white, and they'd gain new benefits/rights such as being able to own property, having a bank account, etc. During the late 19th century to the early 20th century the second wave of immigrants arrived and were considered diverse due to their physical characteristics. Some people struggled economically, didn't have access to equitable education, therefore they faced challenges with literacy, and as a result they received less support from the country. The lack of acceptance towards this wave could be viewed as xenophobia because the second wave did not look like the "stereotypical" American with light skin, blonde hair, and blue eyes. Differences in treatment between people who were categorized as white, and nonwhite was evident with the Chinese Exclusion Act of 1882 that prohibited immigration from Asia for 10 vears (Cabaniss & Cameron 2017). This act represented hostility towards Asian immigrants because they were working in the railroad industry for lower wages which others saw as a threat to the job market. Immigrants who were considered non white were negatively portrayed in the media through harmful labels, having discussions about excluding immigrants, and generalizing the experiences and values of every immigrant. The Chinese Exclusion Act signaled a group of people and was based on xenophobia where Chinese immigrants found themselves segregated into communities with other fellow Chinese immigrants. Demonstrating how in times of adversity communities unite to support each other. In addition to passing policies that excluded immigrants the portrayal of people was also negative. In an article titled "unassimilable and undesirable: New elite's discursive construction of the American immigrant during the Ellis Island years" by Emily Cabaniss and Abigail Cameron the authors speak about how immigrants were talked about and portrayed. The text states "over two thirds of all articles (67.9%, 106) enumerated immigrants in some way. While some articles reported actual counts or percentages, others,

like this, used more abstract terms estimating population sizes as 'hordes', 'scores', 'crowds', and 'masses."

Demonstrating that journalists and news reporters used vocabulary to intensify the number of immigrants that were arriving in the U.S. In addition to doing this news reporters would also tweak statements that immigrants have made to generalize the immigrant experience and to create a narrative that they wanted to sell. Some of these narratives were of the helpless or hard-working immigrant who is in search of the 'American Dream'. There is a range of portrayals that people in the media can allude to, and while on the surface some may seem good like the hard-working immigrant. The reality is that these narratives can be harmful to people, because it creates an illusion of people who are "deserving" and "undeserving" of receiving support and empathy from the country and others living here. This can negatively impact individuals to believe that their value as a person is determined by their number of accomplishments and gratitude for being in the United States. Creating pressure for young people to have many accomplishments to be seen, where there lies hope in being acknowledged and presented with citizenship. Ultimately, being complacent with the treatment one receives in the states. Internalizing the concept of the 'grateful hard-working immigrant' can divide communities where people avoid being seen as 'one of the bad ones' who seek help during times of hardship using public support or holding the government accountable for the systemic racism that impacts undocumented immigrants in climbing the mobility ladder and accessing various areas of life within the U.S. It's interesting seeing how these beliefs are persistent during the current representation of immigrants that arrive in the country. There were also discussions about excluding immigrants in the newspaper, the article claims "Articles discussed outright exclusion most often (27.6%, 43), including banning immigration from regions or denying entry to certain groups. Other articles (21.8%, 34) discussed detaining or quarantining immigrants. Fewer articles (14.7%, 23) mentioned deporting immigrants already in the United States" (2017). These ideas were seen as taking preventative measures for sickness (immigrants were portrayed as being sickly because of the living conditions they were living in), burdens, and a threat to the US system that benefits the dominant majority. Rather than trying to understand why some immigrants were living in unwell conditions and seeing the cause of this, the majority blamed people for living in their conditions. This period helps us understand how the media influences public beliefs, beliefs on the topic leading to the creation of policies, and the impact of the policies on the lives of people. It was seen that immigrants that entered the country were not all welcomed the same and eventually had different paths and access to citizenship and other rights. When we look at the opening of Ellis Island and compare it to today's current events we see the parallels in publications, vocabulary, and beliefs back then to today when talking about immigrants.

Literature Review

The literature on immigration has demonstrated that the United States has a long history with immigrants and through these years there have been various changes in beliefs about what rights undocumented immigrants have. One of the main topics of discussion is understanding how immigrants experience the system differently compared to people who are documented and considered part of the dominant majority. Researchers have conducted studies to determine the health of undocumented people in NY by measuring the percentage of people enrolled in health insurance to see how often this population seeks medical attention (Khullar. D & Chokshi, D. A. 2019). Immigration impacts a person's mental health because the act of leaving your country to go to a new one can be challenging due to the circumstances of why you're leaving. In addition to the emotion of leaving behind what you once knew and considered home. Arriving in a new country can also have its obstacles as you're navigating a new system that wasn't designed with inclusivity in mind making it difficult to access resources. One study involved interviewing community members to determine how they perceive their health based on the environment around them and how it's been like for them to navigate local resources (Lee, J., & Zhou, Y., 2020). It can be difficult to navigate around, using transit systems, etc. People will often treat undocumented people differently and they may face disparities in accessing things like healthcare which is essential to living a healthy life. A study conducted on the feelings of trust and subjective health among Mexican immigrants demonstrate that Approximately 56.4% of Hispanics in NY don't seek medical care when they need to and 51% of people report having fair/bad health the reasons for this could very well be the difficulties in accessing care (Gaitán-Rossi, Vilar-Compte, Ferré-Eguiluz, et al 2023). The literature review supports the statement that undocumented immigrants encounter a different version of the U.S system and this along with their environment can hold an impact on their physical/mental health and not having the access to healthcare can intensify these conditions.

The United States prioritizes expanding, conquering, and capitalizing on resources using people. A historical event that highlights these values is the interaction between the U.S and Mexico (Estrada, A. L., 2009). From declaring a war on Mexico, causing them to surrender a chunk of their territory through the Guadalupe Hidalgo act, and creating the first wave of Mexican Americans. The U.S's priority was gaining new territory without a care if people were already living in these areas. People were displaced from their homes while others saw themselves staying trying to make the best out of this situation. Those who stayed were granted US citizenship at the cost of experiencing the system differently than those who created it. The differences in experiences are clear when looking at the policies that were passed, one of which involved racially profiling people to ask for proof of citizenship and if the person could not provide it on the spot they would be deported. Policy and public opinion go hand in hand during economic downfalls there was a rise in anti-Mexican beliefs which fueled Border Patrol to start an operation from 1930-1950s called "operation wetback" (2009). While the number of people who were deported is unclear, this mass deportation targeted people of Mexican descent, including U.S citizens. Setting a precedent for future immigration policies by criminalizing Mexicans using vocabulary that dehumanizes and is unwelcoming. Normalizing the stereotypes of Mexicans through use of media and policies that shape the public's perception because by influencing the public's views it makes it socially acceptable to create and support policies that create barriers for this population to access health and wellness. The relationship between the public's perception and policy are connected because if people believe that a population like immigrants are dangerous, they're likely to support punitive policies and hold prejudiced beliefs about Mexican immigrants and Mexican Americans.

Another historical piece that's important to acknowledge is the opening of Ellis Island because this allows readers to view the different experiences that first and second wave of immigrants had while entering the United States (Cabaniss & Cameron, A.E. 2017). The first wave of immigrants who looked like a "stereotypical" American, spoke English, and were literate adapted quickly and were welcomed to the country faster compared to other immigrants that did not fulfill all these qualities. These factors affected the welcoming of people, and laws were created that helped the people who assimilated compared to other immigrant groups. The Nationality Act of 1790 made whiteness a

requirement for obtaining citizenship. This requirement was rooted in the belief that Europeans were superior due to their fast assimilation to American culture. Creating the "White" race formalized this belief and created structure as White people became the majority to maintain power and gatekeeping through exclusionary acts like the Nationality Act of 1790. People of color like Chinese immigrants faced the Chinese Exclusion Act of 1882-1902. Prohibiting Chinese immigration because of the racial tension when White people sensed a threat to the job market which turned into a hostile environment towards Chinese immigrants. This exclusion act would shape up immigration policies like the Travel Bans in 2017 that made it difficult for immigrants and visitors to come to the United States where people from different countries had their backs turned on them by the federal government. In addition, historical policies create the standard on the process for people to live the "American dream" through what's required to obtain citizenship/naturalization. This time period demonstrates the process of integration into the United States varies for each immigrant who's entered the country.

These historical events are important to look at because they set the blueprint on how immigrants are to be treated, their accessibility to rights, and the way policies will be created in response to immigration. The U.S Department of Homeland and Security has created Immigration and Customs Enforcement (ICE); this system is known to cause harm on undocumented people. In recent years undocumented people that have been detained by ICE have spoken about the conditions of living and concerns that people had (Diaz, Ortiz, Sanchez, et al 2023). Ranging from mental health to physical health there is a common experience and feelings that are reported about feeling ignored. Interviews were being conducted in English and Spanish, where people were being detained for 30 days during the rise of Covid-19. The results demonstrated that people were prone to getting sick with Covid due to the unsanitary conditions, people who had not previously struggled with their mental health were now experiencing symptoms of anxiety and depression due to the uncertainty on how their family was doing. These experiences add up and impact the well-being of undocumented immigrants that are later released, expected to live a normal life after all the traumas.

The healthcare system is one that has been harmful to historically excluded groups. It's not difficult to imagine how accessibility varies when gender, ethnicity, race, and legal status are taken into consideration. Statistics from Khulla & Chokshi (2019), demonstrate that among adults aged 18-64, 45%

of undocumented adults are uninsured, 23% of documented immigrants are uninsured, whereas 8% of US born citizens are uninsured. Looking at these numbers we see that undocumented immigrants make up most of the people and there are many reasons for this, the main one being the lack of insurance/care catered to this group. For example, on a federal level undocumented immigrants are restricted from receiving insurance because of their status and are limited to care that doesn't cover everything, such as Medicaid. It is up to the state in which people reside to determine whether they create programs where undocumented immigrants can have access to healthcare (ex. NY with NYC Care). The disadvantages to not seeing a primary care physician are that someone's well-being could be at risk because they go under notice. On top of this, immigrants may face other challenges in their day to day lives that's impacted by their legal status that influences their socioeconomic status. Another deciding factor is the policies that impact people from accessing healthcare such as 212 (a4) of the Immigration and Nationality Act under the Department of Homeland Security that categorized people as "public charge" meaning that the person relies on public assistance and if considered this they will be denied permanent residency. These policies often cause people to reconsider whether they should go and seek medical attention when they need it so that they are not considered a public charge.

Another factor that influences the health and wellbeing of undocumented immigrants is the way the communities undocumented people live in are perceived. The structure of our communities can make people think that their neighborhoods are full of resources or that their neighborhood has been neglected (Lee & Zhou 2020). The sociopolitical environment in which people reside is important and it was seen that residents and service providers in Corona, New York felt that there was not enough support from the state/gov and how they felt that this was due to the population of undocumented immigrants living here. The lack of support and structure of these systems can lead undocumented people to engage in self-risk behaviors as a method for survival and coping with mental health. Some of these behaviors include self-medicating to cope with mental health. Working in dangerous jobs (ex. construction, agriculture, and sex work) where these jobs pay undocumented people low wages, higher risk for injuries, and a lack of legal protection. Undocumented people may find themselves working in these types of jobs as they reduce barriers for people who don't have documentation like citizenship papers and degrees. When people experience injuries or sickness from their jobs they may

not regularly see a doctor due to the lack of accessibility in healthcare for undocumented immigrants. All these factors and barriers add up and contribute to the wellbeing of undocumented people. My study adds to the literature review because I'm going to do a root cause policy analysis, and I'm going to present the results of interviews.

Data and Methods

Understanding the historical foundations of immigration restrictions helps explain why such policies are enacted and their ongoing severity. I conducted a thorough literature review, a policy root cause analysis, and interviews. I used an array of academic databases to find scholarly peer reviewed articles about historical events on immigration, systems that have significantly impacted people's health, policies that were created to prevent and shame people from seeking medical attention, and how current Hispanic/Latinx immigrants view the socio-political environment in the state of New York. I will analyze and interpret the readings and interviews by using root cause analysis. Root cause analysis means looking at the cause of a problem and seeing how we could work in remedying the issue while taking into consideration everything that has led to this moment. This is important because often, people will try to address the problems without fully understanding what led to these disparities in the first place. If you approach a problem without diving in the root cause, then the solution you envision will only touch the surface of the problem. In addition to reading articles, I also decided to interview community members to listen to the experiences of individuals who are navigating health and wellness in New York. It is important to acknowledge that the interviews conducted are not enough to provide a solid conclusion about the experiences that undocumented immigrants face in accessing health care. Obtaining insight from community members and their experience in navigating health and wellness in NY is important for various reasons. When implementing policies, it's common to see how actions/bills are proposed involving a community without having consulted it with the community members that are going to be impacted. Listening to people is helpful in making solutions revolving around this issue, while also getting the opportunity to connect with community members. Future research should include interviews with direct service providers to gain even more insight about the topic of discussion. The readings support the statement that immigration policies were created as a form to oppress individuals from accessing various opportunities. Those behind these policies are the dominant majority who have created power dynamics between the immigration and health structures that keep undocumented immigrants stuck in a position where health access is difficult. As a community we must analyze the structure of these systems by educating ourselves on the topic and updating our beliefs as necessary to create a society in which people are not treated as disposable and foreign.

Presentation of Findings

Root Cause Analysis

The Department of Homeland and Security (DHS) was created after 9/11 which was an event that significantly impacted people in the U.S because it caused fear and made people in government reevaluate the security in the country. The DHS was made to prevent an event like this from occurring again and a branch that was added to carry out this goal is Immigration and Customs Enforcement (ICE). ICE's role in "protecting" the people living in the US is through enforcing laws surrounding products that are exported in the country, border patrol, and immigration. Despite the DHS and ICE having a mission of protecting people living in the country through enforcing laws, the actions taken to execute this are at the expense of violating the rights of people who have crossed the border. The discussion of ICE detention during the height of the pandemic provides insight on how the people who were detained felt and how the practices enforced reflect the trends in immigration laws and public health policy. In the article titled Harmful by Design- a Qualitative study of the Health Impacts of Immigration Detention people's experiences is being highlighted about what it is like to be detained and seeing the implication for the health of immigrants. Some themes that overlap in these stories are unhygienic feeling mistreated, facing barriers when asking for care conditions. (physical/mental), and facing a decline in health after detention. The unhygienic conditions involved overcrowding, insufficient toiletries, unhealthy food, unstable temperatures. These were not livable conditions and on top of it a global pandemic was occurring which made it an environment where Covid could thrive because there were no preventative actions or healthcare measures if people contracted Covid. The unsanitary conditions reflect public health policy as ICE failed and denied to provide health and wellness services for

people. Setting people up to experience long term health effects where treatment is challenging upon release due to systemic barriers undocumented immigrants experience in seeking healthcare (ex. lack of insurance, payment, and fear). The correction officers' actions described by former detainees show how the criminalization of immigrants influenced the dehumanizing behavior that correction officers engaged in from denying health and wellness services, isolating people, and using their power to break people down physically and emotionally. One interviewee stated "He had the COVID full blown, you could say that it was so bad he couldn't walk. Instead of them sending him to a facility where they could provide better care for him, they kept them in the box, which is solitary confinement, and just fed him aspirins." (p2034). Demonstrating that people's health was not taken into consideration to prevent getting ill and how when people were ill, they were treated inhumanely by not allowing them to seek medical care. This gives us a glimpse on how correction officers working in this institution have assigned themselves the roles of gatekeepers by simply giving the person aspirins and not referring them to a doctor. Interviewees mentioned that another method of gatekeeping was when people asked for medical/mental health consultations they would be met with barriers firstly in language as there were no interpreters, and documents needed to request services were in English and secondly having 2-3-week delays in their request for services. Being detained by ICE impacts someone's physical and mental health because it'll be an experience that people will carry with them for the rest of their lives. A person testified by saying "Those kind of traumas don't go away overnight... I am walking down the street and I am afraid that immigration could come at any moment to get me... I've just leveled off a little bit mentally, and I've stopped having those dreams of imprisonment, those nightmares. But you keep thinking that immigration may come anytime. You don't feel free." (p.2034). This testimony demonstrates that inhumane treatment and experiences during their detainment at ICE makes people fearful and anxious to be detained once again. The trauma can develop into Post Traumatic Stress Disorder (PTSD) and can impact their everyday lives in establishing trusting relationships with people and other systems due to the fear of being harmed for their immigration status. Leading to the person to navigate feelings on their own and not seeking outside help that takes its form through self-isolation, taking a toll on mental health and the development of depression or other mental health conditions. Additionally, when people are detained there's no preparation or transitional support programs that assists undocumented immigrants transition into civilian life. A participant in this interview mentioned they sought out to community organizations to seek support in scheduling a doctor's appointment. After reading the interviews it's seen that ICE agents and correction officers use their power/status to fuel the unsafe environment by putting people through unlivable conditions. Individuals who engage in this power trip are guilty, but the US government is ultimately responsible for this as they've historically set the standards on how undocumented immigrants should be treated.

The healthcare system has the power to exacerbate the oppressive nature in restricting access to care for undocumented immigrants. This is especially difficult when we consider how the healthcare industry can be harmful to minoritized groups. Accessibility varies when discussing the quality of treatment and equity in obtaining health care especially when considering a person's race, ethnicity, gender, citizenship, and legal status are taken into consideration. There is a difference in insurance rates between people who are undocumented and documented. Adults between the ages of 18 to 64 23% of documented immigrants, 45% of undocumented immigrants, and 8% of US born and naturalized citizens are uninsured. (Khullar. D & Chokshi. D. A. 2019). Looking at these numbers show us how undocumented immigrants make up most people who are not enrolled for insurance and one of the reasons for this is because of the policies that are made that discourage people from seeking medical assistance. One policy is the Department of Homeland Security Notice of Proposed. Rulemaking under section 212(a)(4) of the Immigration and Nationality Act which was passed in 2018 under the Trump administration that says that people who are considered a "public charge" will be denied residency. This makes people reconsider using services like Medicaid so that they're not considered a public charge. This can be an explanation as to why there's a high percentage of undocumented immigrants being uninsured because they may believe that receiving care such as Medicaid can be used against them if they apply for residency/citizenship. This type of policy can promote individualistic beliefs, that a person must be able to handle themselves and find solutions to their problem without seeking help. People in the community then internalize these beliefs which contributes to the stigma of asking for help. Another policy that is more direct in its action is when Donald Trump was in office, he expanded ICE's involvement in arresting undocumented immigrants. The text states "Since 2017, reports have emerged of ICE officials entering hospitals and arresting and forcibly removing patients and their visitors... The understandable hesitation many immigrants now feel in seeking medical care has led some to

call for the establishment of sanctuary hospitals. The atmosphere of anxiety has implications not just for immigrant patients, but for all patients, as immigrants constitute 2,446,230 of the 15,490,310 (16%) employed in the health-care workforce, especially as registered nurses, psychiatric aides, and physicians." (p 2170) This causes anxiety and panic within the community as there's a threat to people's safety which makes people avoid going to the doctors even if they put their health at risk. The policies and actions above are punitive with the objective appearing to be to derail people from seeking health care. There are not enough federal programs that address healthcare in the undocumented community which explains why a high percentage of people are uninsured. Every state has their own numbers and percentages of people with insurance and in New York there are approximately 8.4 million who are uninsured (Kiefer 2021). Medicaid attempted to address healthcare as it gave free care to people below the poverty line, but the eligibility involved being a US citizen or documented immigrant who fulfills status requirements. At this point it's up to the state in which people reside to determine if there should be programs made to address healthcare in the undocumented community. In 2019 New York created a program called NYC Care which provides service at low/no cost to people who don't qualify for health insurance or for people who cannot afford insurance. The program provides people with selecting their provider, receive preventative care, and get mental health/substance use services in NYC health and hospital's. As of February 2024, this program has surpassed 125,000 members (NYC Care, 2024) which demonstrates that there are some actions taken to currently address health insurance in the documented community. However, not every state has a program like this and even within NY there are community members that are not aware about this and are still not having their health needs met.

The neighborhood where people live is important to analyze as it contributes to someone's well-being. Safety and support that people feel in their communities is influenced by the sociopolitical environment of the state and country. If there is an anti-immigrant sentiment in the country it can influence the public's perception on what rights undocumented people are "deserving" of and can then influence laws that are established that will ultimately impact people. In the article titled How do Latino Immigrants Perceive the Current Socio-Political Context? Identifying Opportunities to Improve Immigrant Health in the United States. The perspective of residents living in Corona, Queens are highlighted when asked about their perspectives on the migrant experience, sociopolitical context, health access, and mental/physical health affects these experiences may impact them. Questions were asked to service providers about observations they've made regarding the community they're working in. Service providers and immigrants came to similar conclusions about the sociocultural context in NYC, specifically Queens. They mentioned discrimination towards immigrants, an unpredictable future because of people who are in government passing/denying bills, confusing or incorrect information passed around that sends people into panic. A religious leader had claimed the following "[there is] a lack of services, lack of funding, poverty... this is my perception, okaynothing scientific about it, but I'm really convinced that it is because Queens is heavily immigrant (religious sector)". The religious leader's perception on the lack of services and funding in neighborhoods where it's heavily immigrant populated can demonstrate that immigration policies influence accessibility to resources. If the president creates anti-immigrant policies and sentiments across the country, states and cities that have a high immigrant population can get funding reduced or not receive acknowledgement to support this population. Based on the United States' history it aligns with the historical policies in which hostile and anti-immigrant values lead to policies that target and harm the community. The uncertainty in the future can be seen when taking into consideration policies surrounding immigration. In previous section, we have seen how policies often change and impact people like when we saw the creation of the Bracero program as an opportunity for Mexican immigrants to work in agriculture only for 10 years later to have another policy punish undocumented people who were being sheltered but not punishing those who employed them which led to exploitation. The frequency in which policies affecting undocumented immigrants are altered can make people confused on what's going on in the sociopolitical environment of the state/country. As this builds up, we can make connections on how bills passed on a federal and state level can impact people's wellbeing and connection to support in their community. There's impact on people's physical health like making programs that exclude a portion of people and there are other states like NY that try to address this by creating programs to be inclusive. There's also impacts on mental health which can be difficult to see but upon reading interviews from people living in Corona and others living in NY the overall environment contributes to the feelings of sadness, fear, and hopelessness. A member claims "Honestly, it's sad when I think that we are human beings, and it's sad that they divide us into categories -You are this or you are that... (male, Peru, age 35)". This quote stood out to me because it shows how the US system is one that's made to categorize people using concepts like race, gender, and citizenship. While these concepts may be man-made, the impact that they have on the lives of people is real.

Throughout each section we've seen how undocumented people have been targeted because of their citizenship status and due to this they are denied access to health care and other opportunities to live a healthy life.

Interviews conducted on Community Members

During my internship at a community-based organization in Sunset Park, Brooklyn, which serves the Latinx immigrant population in areas of Education, Health, Immigrant Rights, and Mental health. I conducted interviews with community members who sought mental health services. The goal was to understand how people felt about the support they received before and after engaging with these services, to understand the impacts on wellbeing. These interviews aim to improve wellness services for the community.

Soledad Compañera: The Loneliness of Undocumented Immigrants

The first question was intended to give us an in depth understanding of how interviewees identify themselves and how these identities impact their mental health. Maria S, a mother, grandmother, and widow expressed that these roles shaped her experiences. Coming to this country and being a single mother of three daughters was difficult, but she found support in her husband, who she met later and helped in raising a family together. Maria spoke about the feelings of solitude and isolation that's experienced from immigrating to a new country. She states "Realmente no ha sido fácil porque eso de emigrar a otro paísactualmente no se si gané o perdí porque pierdes amistades, pierdes prácticamente a tu familia, pierdes todas tus raíces, pierdes un montón de cosas""It really hasn't been easy to emigrate to another country- actually I don't know if I won or lost because you lose friendships, you practically lose your family, you lose all your roots, you lose a ton of stuff". This statement gives us an understanding of how lonely it is to leave your home country as you become separated from friends and families while also feeling like you've lost a piece of yourself through your roots. When these feelings of isolation are combined with the barriers in accessing resources to healthy living in a new country, it creates physical and emotional challenges that are bound to impact someone's wellness.

Another interviewee, also named Maria, shared how her identity as an undocumented person has contributed to her fears and frustrations about the future. She expressed uncertainty with the upcoming change in presidency, which she felt would bring confusion and instability for other undocumented people like herself. Maria explains it was difficult to navigate her mental health with these feelings of fear and frustration as she had worries about insurance not covering mental health services and not knowing where to go for support. The lack of knowledge about resources available, fear of being denied care due to her immigration status demonstrates the barriers existing within the healthcare system for undocumented people to access healthy living as there's not enough resources where people can go to seek mental health support. These barriers and the loneliness felt can contribute to people hesitating in seeking help which can further complicate someone's wellness.

Mental Health Before Seeking Support at Community Based Organization (CBO)

Before people sought support from community-based organizations, people relied on their own methods to navigate mental health and wellness as best they could. Maria explained that she struggled to look after her mental health because she wasn't aware of organizations that could help and worried about financing these services when insurance doesn't cover mental health services. A particular stressor in her life involved helping her husband update his information and fix legal documents that had to be done in Mexico. After six years navigating this situation, they were able to clear the stressor that impacted them and their children's legal documents. Circumstances like this can be time consuming and stressful knowing that if unresolved could affect other areas of life. These challenges don't leave a lot of time for people to look after their mental health as people are often occupied with work, family responsibilities, and fixing unresolved issues.

Maria S expressed that she had once received emotional support from her husband, but his passing significantly impacted her mental health, leading her to slowly isolate herself and becoming an huraña. This term is used to describe someone who's introverted and often unsociable. She further described herself as not having many friends or going out a lot which impacted her wellbeing as she saw herself falling into depression and developing anxiety. These feelings led to a realization that she wanted to gain purpose and do more with her life. Maria S spoke with her daughter to find places where she could seek support for her mental health as well as learning skills that could complement her daily life.

Both Maria and Maria S shared the challenges they encountered that impacted their mental health and wellness. Despite these challenges both women found the way to navigate their situation. Maria experienced stress and tension that came from her immigration status as well as familial challenges she countered along the way, feeling overwhelmed and fearful that she couldn't seek supportive services due to finances and a lack of resources. On the other hand, Maria S experienced a lifestyle change after the loss of her husband that led feelings of depression and anxiety to arise. Impacting her social life, she decided to seek guidance from her daughter in search of an organization where she could be supported. Both women went through different life experiences that demonstrate how intersectionality is important to consider when looking at mental health. The themes of loneliness in a new country, unique challenges impacting daily living and well-being, and the barriers in accessing mental health support, due to financing these needs. Demonstrating the need for creating accessible mental health services for all.

Support from a Community Based Organization: Programa de Emociones y De Raíz

After navigating these challenges Maria and Maria S found a community-based organization in Brooklyn, New York, where they sought help and spoke about the mental health programs they participated in. Including individual counseling, Grupo de Emociones, and De Raíces.

Maria shared she first heard of the community-based organization from a friend and decided to attend their Mercadito Solitario program, which provided groceries to community members. As she continued attending, she learned about other programs and courses in areas of education, health, mental health, and immigrant rights. One program that caught her attention was De Raices, which brought curanderas (holistic healers) to teach people about using herbs as natural remedies and promote wellness. Maria mentions "Nos dio una bolsita que tiene el salvia, el palito santo, el sahumerio, el carbón... Incluso nos hizo a cada uno que participamos- que éramos como 20 una paliacate (un pañuelo rojo) ... y con nuestras propias manos y palabras lo curamos y cada vez que hagamos algo así tenemos que ponernos eso." *"she gave us a bag that had sage, the sacred wood* (Bursera graveolens), incense, charcoal.. She even made each one of us who participated- it was about 20 of us a red headband.. With our own hands and words we cleanse it and every time we do something like this [cleansing ourselves] we put it on."

Demonstrating that the curandera provided participants with the necessary tools like incense and headbands for them to use when they feel overwhelmed to relieve themselves from any stress they may carry. They could light up the incense to cleanse themselves and do breathing exercises. When asked if she was familiar with this practice, Maria mentioned that growing up she had seen her grandmothers participating in these types of practices. However, her dad discouraged it by calling it bad. When she participated in this workshop, she came with an open mind to learn more about the practice to see if it was helpful. She mentioned that this experience taught her how to relax through using natural remedies and still practices these techniques today. De Raices takes a holistic approach to mental health, which is important to acknowledge, as many Latinx people may not feel comfortable or familiar with typical western practices for wellness. Demonstrating a need for mental health providers to explore alternative practices that relate to people from different cultural backgrounds without judgement. In many Latin American countries seeking curanderas is a common practice that can be meaningful tracing back to familial practices in families. People may hesitate to share these experiences due to fear of being misunderstood and negatively perceived. Mental health providers must be culturally competent and create safe spaces where these healing practices are respected and accepted as a form of wellness in the process of working with a community member in seeking mental health care.

Maria S shared that she first heard of this community-based organization when her daughter found their Facebook page. Leading to her participating in a yoga program they hosted many years ago. Over time she became involved in the various programs and courses offered by the organization, including one called Grupo de Emociones. This program aimed to understand your emotions, controlling anger, and finding positive ways to navigate these emotions. When asked about something she learned that stood out to her she said "Todos venimos cargando culpas que no son de nosotros... Aprendí que cada quien toma sus propias decisiones, que yo no soy responsable de las decisiones que toman los demás por lo tanto yo no soy culpable. Y son cosas que vienes cargando desde que eres niña... Es como un quesito que hay que poco a poco irlo deshebrado." "*We all carry guilt that is not ours… I learned*

that everyone makes their own decisions, that I am not responsible for the decisions that others make, therefore I am not guilty. And these are things that you carry ever since you're a little girl... It is like a piece of cheese that you have to unravel little by little." Maria S speaks about how we all carry guilt that isn't ours and that throughout her participation in the group she learned that everyone makes their own decisions and that she is not responsible for the decisions others make, that she is not to blame. That these guilts are often carried from when you're a child and that it's like string cheese, something you must slowly untangle. Maria S mentioned her participation in the group changed her perspective on guilt she was previously carrying which helped her in continuing the healing process. Before coming to the CBO Maria S received mental health support from a psychologist who would meet with her via WhatsApp in the afternoon, instead of Zoom, as the psychologist wasn't comfortable with it. Maria felt that there wasn't enough time to discuss topics she wanted to address, she often felt unheard and unsupported which led to her seeking wellness services elsewhere. Coming to the CBO she describes it as "al cielo a la tierra" "from the sky to the earth" demonstrating how she feels supported by the mental health providers who have empowered her in her healing journey.

Both Maria and Maria S expressed feelings supported by the community-based organization in Brooklyn, NY. The organization provides a safe space for the Latinx immigrant population. Both women came to seek mental health services by participating in various programs like individual counseling, Grupo de Emociones, and De Raiz. These programs offered personalized care through communicating with people in ways they were able to understand their emotions. Maria explored holistic healing and learned about the cultural practice of curanderas while Maria S explored Grupo de Emocion to process guilt that she has been carrying for years. Both women described the organization as a space where they can come to socialize with people through these services/groups and a place to seek support where they're treated with kindness and understanding.

Cultural and Upbringings Influencing Women's Health

The last question I asked Maria and Maria S. was what recommendations they would give to human service professionals when working with undocumented people, specifically women in providing mental health care. The stories of both matriarchs highlight themes of upbringing and culture that influence how women navigate mental health and wellness. Maria mentioned there should be a focus on addressing Domestic Violence (DV) as many women experience this. During childhood, individuals are introduced to gender roles that set an expectation of the traits they should incorporate. Many of these expectations are rooted in machismo culture that pressures men and women. This culture makes DV more likely to happen because expectations that aren't followed can lead to ridicule and violence. For example, in a household that upholds these traditions, a woman who doesn't conform to the norms may face emotional or physical abuse. This especially affects women, as they are encouraged to stay in these environments to avoid being shamed for not upholding traditions. Economic dependence on their partners makes it difficult to leave as they may not have finances to rely on.

Maria's insight calls attention to the need for human service professionals to be aware of the role DV has in mental health. These topics must be viewed with an intersectionality lens to understand how our family upbringings and societal pressures can impact women's lived experience. Understanding this allows for inclusive and empowering environments where women are supported in taking control of their lives. Maria S shared similar sentiments when she spoke about her upbringing in Mexico at a religious school where she was taught how to do home maintenance tasks. She mentioned not being taught how to defend herself and how this type of upbringing can impact young women growing up. As mentioned earlier, our identities play a significant role in the experiences we encounter through adulthood and how human service professionals must understand the relationship between intersectionality and wellness to provide effective care.

Another concern both women expressed was immigration as Maria sees that there are constant changes in immigration policies that create an uncertain environment for undocumented people. With the change in presidency, there's confusion as to what people could expect in terms of federal and local politics. Human service providers that work with this population must remain informed about the policies in the states in which they reside and view immigration through a root cause lens to understand how historical events and socialization led to the sociopolitical environment on how immigrants are perceived and the challenges that undocumented people continue to experience.

Discussion

The United States has an extensive relationship with immigration and immigrants. Upon arrival people may encounter barriers with different structures, one of the most prominent ones being the healthcare system as your citizenship status determines your eligibility for insurance. The barriers in accessibility are a result of policies that have been passed to purposely exclude individuals from receiving access to necessary care. Policies are often shaped by the way society views a group of people, if they are viewed negatively then laws that target and persecute people will be put into place. To understand how the U.S views immigrants we must look at historical events that provide us with insight on how these exclusionary behaviors started. The first historical event is the relationship between Mexico and the U.S as this highlights the creation of state borders and policies that determine who maintains power and who is excluded. The second historical event is the opening of Ellis Island as this shows how immigrants were treated differently based on physical appearance and the racialization of European immigrants as being white which gave them power. Meanwhile non white immigrants were excluded from holding power and were portrayed negatively by the media and backed up by policies. The historical and political aspects of immigration are important to consider when looking at the lack of accessibility in health care on a federal level. Demonstrating how it's up to each state to determine what they should do to provide or deny healthcare to undocumented immigrants. In this paper I analyzed the different systems that are put into place in the United States and used root cause analysis to determine the basis for the policies that are passed and research how they impact undocumented immigrants all over the country and in New York. Based on the research collected there have been various laws/bills passed that impacted the undocumented community starting from the 1942 Bracero Program that gave Mexicans the opportunity to work in the agricultural field, 1930-1950s with Operation Wetback involving deporting people who were perceived to be undocumented back to Mexico but not persecuting those who employed undocumented people, and recently 212 (a4) of the Immigration and Nationality Act that created a new category of "public charge" and denied undocumented people permanent residency if they were labeled this. The policies discussed demonstrate the shift in acceptance and tolerance for undocumented people contributing to a hostile and unsafe environment. This environment is a reason that undocumented fear seeking help from government institutions and feel

unsafe when hostility is being transmitted. The socio-political environment where undocumented immigrants reside impacts their access to support, causes distrust in the system in place, and can influence the health & wellbeing of a person. This information is significant because as people part of a society we must observe the structure of things to see who benefits and who doesn't. Our current immigration policies are exclusionary and harmful by creating barriers for undocumented immigrants to access healthy living. As we better understand these issues, we must push for reforms that dismantle exclusionary policies and create a more inclusive healthcare system for all individuals, regardless of immigration status. This includes strengthening community-based organizations as they contribute to the safety and solidarity that undocumented immigrants experience. CBOs usually tailor their programs based on the population they serve, if they service the Latinx undocumented immigrant community then they'd have mental health services that can use traditional individual and group meetings while tapping into the cultural aspect of using holistic healing. On top of this the services provided would be in Spanish or other indigenous languages which can make community members feel comfortable in attending CBOs. These organizations are helpful whenever our federal/state government doesn't address the needs of everyone which is why advocacy work is important. Advocating for policies that criminalize undocumented immigrants needs to be dismantled so that everyone in our society is viewed as human and makes the passing of discriminatory and harmful policies/structures unacceptable. Promoting policies that improve accessibility and equity to healthcare, wellness, and community support, we can begin to have a healthier society where people can live fulfilling lives no matter their immigration status. By working together to advocate for policy changes, community support, promoting accessibility and equity, we can rearrange the established system that has created barriers for undocumented immigrants to lead healthy lives. Our collective effort will demonstrate the importance of accessing health and wellness services for all to foster a supportive society where everyone regardless of their immigration status can feel in solidarity through accessing physical and mental health services.

References

- Barajas-Gonzalez, R. G., Ayón, C., & Torres, F. (2018). Applying a community violence framework to understand the impact of immigration enforcement threat on Latino children. Social Policy Report, 31(3), 1-24. Retrieved from <u>https://srcd.onlinelibrary.wiley.com/doi/pdf/10.1002/sop2.1</u>
- Cabaniss & Cameron, A. E. (2017). Unassimilable and undesirable: News elites' discursive construction of the American immigrant during the Ellis Island years. Discourse & Society, 28(6), 614–634. https://doi.org/10.1177/0957926517710990
- Diaz, Ortiz, V., Sanchez, L., Fernandez, J., Andrade, E. A., Akiyama, M. J., & Ross, J. (2023). Harmful by Design—a Qualitative Study of the Health Impacts of Immigration Detention. Journal of General Internal Medicine: JGIM, 38(9), 2030–2037. <u>https://doi.org/10.1007/s11606-022-07914-6</u>
- Gaitán-Rossi, P., Vilar-Compte, M., Ferré-Eguiluz, I., Ortiz, L., & Garcia, E. (2023). Association between Feelings of Trust and Security with Subjective Health among Mexican Migrants in the New York City Area. International Journal of Environmental Research and Public Health, 20(4), 2981-. <u>https://doi.org/10.3390/ijerph20042981</u>
- Estrada, A. L. (2009). Mexican Americans and historical trauma theory: A theoretical perspective. Journal of Ethnicity in Substance Abuse, 8(3), 330-340.
- Emanuel, N. R. (2020). Do you even "like" me?: How the popularity of pro/anti-immigration tweets impacts attitudes towards immigration. Retrieved from <u>http://purl.flvc.org/fsu/fd/FSU_libsubv1_scholarship_submission_1586</u> 794948_a532f860
- Kiefer, K. (2021, June 17). The health insurance gap in New York City: Promoting Citizenship for a Healthier Tomorrow. Center for Migration Studies

- Khullar, D., & Chokshi, D. A. (2019). Challenges for immigrant health in the USA—the road to crisis. The Lancet (British Edition), 393(10186), 2168–2174. <u>https://doi.org/10.1016/S0140-6736(19)30035-2</u>
- LEE, J., & ZHOU, Y. (2020). How do Latino Immigrants Perceive the Current Socio Political Context? Identifying Opportunities to Improve Immigrant Health in the United States. Journal of Social Policy, 49(1), 167-187. doi:10.1017/S0047279419000163
- Lee, J., Hong, J., Zhou, Y., & Robles, G. (2020). The Relationships Between Loneliness, Social Support, and Resilience Among Latinx Immigrants in the United States. Clinical Social Work Journal, 48(1), 99–109. <u>https://doi-org.ez.lib.jjay.cuny.edu/10.1007/s10615-019-00728-w</u>
- NYC Care (2024) NYC Health + Hospitals' NYC Care Reaches 125,000 Members <u>https://www.nychealthandhospitals.org/pressrelease/nyc-health-hospital</u> <u>s-nyc-care-reache s-125000-members/</u>
- Pai, M. (2022, October 24). Countering failures of imagination: Lessons we learnt from Paul Farmer. Forbes. <u>https://www.forbes.com/sites/madhukarpai/2022/10/21/countering-failu</u> <u>res-of-imaginatio</u> <u>n-lessons-we-learnt-from-paul-farmer/?sh=3fa5ead76619</u>
- Sullivan, B. (2024). What to know about SB 4, the Texas Immigration Law in the courts now. NPR. <u>https://www.npr.org/2024/03/20/1239651676/sb4-texas-immigration-la</u> <u>w</u>
- H. R. 40, naturalization bill, March 4, 1790: U.S. Capitol Visitor Center. U.S Capitol-Artifact Explorer. (2024). <u>https://www.visitthecapitol.gov/artifact/h-r-40-naturalization-bill-march</u> <u>-4-1790#:~:text=</u> <u>This%201790%20act%20set%20the,born%20abroad%20to%20U.S.%2</u> <u>Ocitizens</u>.
- *Treaty of Guadalupe Hidalgo (1848).* (2022, September 21). National Archives. <u>https://www.archives.gov/milestone-documents/treaty-of-guadalupe-hidalgo#:~:text=Cita</u> <u>tion%3A%20Treaty%20of%20Guadalupe%20Hidalgo,Archives%20Bu</u> <u>ilding%2C%20W ashington%2C%20DC</u>.