

Public Health Consequences of ICE Enforcement

Presented by Michael Lee-Chang, PHAB Youth Member, to
the Sacramento County Public Health Advisory Board

Overview

- Trump's 2025 executive orders (EOs) launched mass deportations & ICE operations
 - EO 14159 (expanded expedited removals, denied funding to sanctuary cities, penalized unregistered immigrants, boosted ICE/CBP hiring, restricted benefits), EO 14165 (southern border new walls and barriers, expanding detention and deportation, reinstating "Remain in Mexico," ending broad parole programs like U4U and CHNV, halting CBP One parole use, prioritizing immigration prosecutions, and deepening state–federal enforcement partnerships), EO 14218, EO 14160 (ending birthright citizenship), EO 14161 (Ordered maximum vetting of all visa applicants, immigrants, a country-by-country review that could trigger entry bans)
- "Protected areas" like schools, churches & hospitals no longer safe from ICE. (Department of Homeland Security)
- [Factsheet: Trump's Rescission of Protected Areas Policies Undermines Safety for All - NILC](#)
- [Schools brace for immigration arrests after Trump administration changes ICE policy | PBS News Weekend](#)

Fear in Communities

- “Across the region, once-busy parks, shops and businesses have emptied as undocumented residents and their families hole up at home in fear” (LA Times).
- “Health advocates and providers say that rather than protecting people, ICE is scaring people from seeking basic medical care” (CalMatters).
- Ending “sensitive location” protections makes clinics, schools, transit stops, and places of worship feel unsafe, cutting off immigrants and citizens from vital spaces that support health and equity (The Network for Public Health Law)
- Widespread fear of deportation exists not only among undocumented people but also lawful residents and U.S. citizens connected to them (Hacker, Chu, Arsenault, & Marlin, 2012).
- Attorney General Bonta notes rising fear and anxiety among students and families, prompting statewide guidance for schools.

Healthcare Avoidance

- “Prior to the raids, the system’s network of clinics logged about a 9% no-show rate... In recent weeks, more than 30% of patients have canceled or failed to show” (LA Times).
 - “When we call patients back who missed their appointment and didn’t call in, overwhelmingly, they’re telling us they’re not coming out because of ICE”
- “Hispanic respondents were less likely to report having had a regular provider or annual checkup following increased ICE activity in their state” (Friedman & Venkataramani, 2021).
- I saw a...couple from El Salvador whose son had been marked to be deported. The (woman) is a diabetic/cardiac patient; her blood sugar was out of control, her blood pressure was out of control (Hacker, Chu, Arsenault, & Marlin, 2012).
 - (My patient)...from Uganda with HIV/AIDS and end stage renal disease was unable to consistently keep appointments for dialysis because she needed to work to support her sister’s two children after (her) sister was arrested by immigration.
 - Some won’t apply for insurance or accept home nurses because of documentation fears
- 21% of lawfully present immigrants avoid daily activities—travel (18%), medical care (9%), church (9%), aid programs (7%), work (5%), and school events (2%)—to not draw attention to their status (Schumacher, Valdes, Hamel, Artiga, & Pillai, 2025).

Children's Health Costs

- After federal deportation sweeps in California's Central Valley, daily school absences jumped 22%, according to a Stanford study.
- After the massive 2008 Postville, Iowa raid, infants born to Latina mothers faced a 24% higher risk of low birth weight, according to a study in the International Journal of Epidemiology (Novak, Geronimus, & Martinez-Cardoso, 2017).
 - The spike affected both U.S.-born and immigrant Latina mothers.
- Children miss their Well Child appointments because their parents are afraid of immigration services (Hacker, Chu, Arsenault, & Marlin, 2012).
- Workplace raids, increasing deportation rates, and the fear of deportation have also been significantly associated with (a) increased poor general health, (b) poor cardiovascular health, (c) self-reported mental health problems, (d) food insecurity, (e) delays in receiving prenatal care, and (f) increases in low-birthweight babies among Hispanics/Latinos (Perreira & Pedroza, 2019).

Mental Health Impacts

- Immigration enforcement creates chronic trauma:
 - Children of detained parents show higher PTSD rates, depression, and developmental issues (Dadras & Hazratzai, 2025).
 - Adolescents with detained or deported family members are more likely to report suicidal thoughts and substance use (Dadras & Hazratzai, 2025).
- "Think about who has come here as an immigrant, many of them have faced real trauma in their home countries," [Dr. Céline] Gounder said. "So this, what feels like militarization of an emergency room, can be very re-traumatizing and cause some very relevant health impacts" (Moniuszko, 2025).

Fallout for Clinics & Public Health

- “The mere threat of immigration enforcement near any medical facility undermines public trust and jeopardizes community health” (LA Times).
- “At St. John’s, which has 28 sites across Los Angeles County and the Inland Empire, Mangia estimates that roughly a third of medical appointments and half of dental appointments were cancelled this week” (CalMatters).
- “Primary care providers may see fewer immigrants and emergency medicine providers may see higher acuity in their immigrant patients” (Hacker, Chu, Arsenault, & Marlin, 2012).

Broader Public Health Risks

- Data Weaponization: “The U.S. Department of Health and Human Services shared the personal data of Medicaid enrollees with the U.S. Department of Homeland Security, including their immigration status” (LA Times).
 - Higher ER visits and costs: A patient with hypertension who skips blood pressure monitoring appointments now may be more likely to be brought into an emergency room with a heart attack in the future, said Dr. Bukola Olusanya, a medical director at St. John’s.
- “From the patient’s perspective, risks from detention and deportation may outweigh the cost of forgone care” (Friedman & Venkataramani, 2021).
- “Fear caused by enforcement rhetoric from officials can sow distrust in institutions and discourage interactions and information-sharing with government agencies overall” (Lacarte, 2025).
- Reduced access to health and social services, such as vaccination and testing, increase risk of the spread of communicable disease and exacerbate health inequities (The Network for Public Health Law).
 - The fear created by these executive actions among immigrant communities reduces participation in public health programs, impacting the health of these individuals, potentially decreasing funding for these programs, and impeding the ability of these programs to provide services to anyone.
 - The increased focus on prosecution and detention, in contrast to supervised monitoring of individuals waiting to have their claims processed, subjects more individuals to the health-harming conditions of immigration detention facilities, such as lack of access to medical and mental health care, overcrowding, food insecurity, poor sanitation, and exposure to violence and other inhumane treatment.