

October 3, 2025

To the Sacramento County Board of Supervisors:

The Public Health Advisory Board wishes to bring to the attention of the Board of Supervisors the significant negative public health consequences of U.S. Immigration and Customs Enforcement (ICE) activities. We applaud the steps you have already taken to support the Sacramento County departments regarding this issue, and we encourage you to continue promoting measures that protect residents' privacy, health, and well-being.

Since taking office on January 20, 2025, President Trump has taken actions to restrict immigration and limit the rights of immigrants. On his second day in office, President Trump rescinded an immigration policy that restricted ICE and other immigration enforcement agencies from entering "sensitive locations" such as schools, hospitals, medical clinics, and places of worship. (Dept. of Homeland Security). Around the same time, President Trump issued many executive orders aimed at restricting the rights of immigrants, expediting deportations and redefining who is a citizen of the United States. These actions have instilled a deep sense of fear in immigrant communities.

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). The LA Times recently noted that in response to the federal immigration raids in Southern California, "[a]cross the region, once-busy parks, shops and businesses have emptied as undocumented residents and their families hole up at home in fear." Ending "sensitive location" protection 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).

The 2025 budget reconciliation bill signed into law on July 4, 2025, expanded the crackdown on immigration by increasing funding for immigration enforcement. It increases the budget for immigration and border-related activities for the Department of Homeland Security and its subagencies (Immigration and Customs Enforcement [ICE] and Customs and Border Protection [CBP]) by over 170 billion in federal funds. The spending categories for these funds included tripling federal spending for detention capacity expansion and \$29.9 billion for enforcement and removal, including hiring ICE agents, transportation costs and detaining families (American Immigration Council "What's in the Big Beautiful Bill?" article).

Immigrant patients may fear that their medical and personal data will not be kept confidential, as evidenced by the recent U.S. Department of Health and Human Services sharing of Medicaid enrollee personal data, including immigration status, with the U.S. Department of Homeland Security. In addition, fear caused by enforcement rhetoric from government officials can sow distrust in institutions and discourage interactions and information-sharing with government agencies overall (Lacarte, 2025). The increased federal focus on prosecution and detention, in

contrast to supervised monitoring of individuals waiting to have their claims processed, also 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.

It has also been documented that children miss their well child visits when their parents are afraid of immigration services (Hacker, Chu, Arsenault, & Marlin, 2012). This is particularly concerning, as the US is experiencing a measles epidemic now. It is estimated that a community kindergarten MMR vaccination rate of 95% is needed to control the spread of measles (www.aap.org>patient care>measles – vaccine). The California state-wide MMR vaccination rate for the most recent school year reported (2023-2024) was 96.2% and the Sacramento County rate was 96.4%. (cdph.ca.gov “Kindergarten Immunization Assessment 2023-2024”). We cannot afford for this rate to fall.

Most poignantly for this Public Health Advisory Board, healthcare avoidance has been documented when immigrants are afraid of seeking medical care due to fear of arrest and deportation. Healthcare avoidance was reported this summer during hostile ICE presence in Los Angeles, with clinic no-show rates climbing from about 9% to over 30% (LA Times). Studies have shown that the negative effects on seeking health care are not confined to the immediate times of the ICE presence: “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). Research links immigration raids and fear of deportation to poor physical and mental health, food insecurity, delays in prenatal care, and higher rates of low-birthweight infants (Pereira & Pedroza, 2019).

Health providers in Sacramento have noted an increase in no show rates to clinics, increases in request for telehealth appointments, and hesitancy surrounding in-home visits. The Sacramento County’s Primary Care Clinic has shown an increase in no-show rate since the ICE presence near the clinic in July.

Additionally, more patients have requested telehealth appointments, which, thanks to support from the Board of Supervisors, the Primary Care Clinic has been able to provide. Some individuals have declined public health nurse visits; even when individuals consent to these public health visits, they often answer the door only if notified beforehand that a nurse is coming and keep drapes drawn and children inside. More data collection regarding changes in home health visits would be helpful as well.

PHAB recommends that Sacramento County Board to Supervisors consider the given input and the advice and recommendations outlined below.

1. Continue to grow and support programs that expand telehealth access.
2. Continue to monitor impacts of federal immigration activity on healthcare access, and;
3. Continue to provide support to the County programs that provide services to vulnerable populations.
4. Notably, Senate Bill 81 was recently signed into law by Governor Gavin Newsom in September 2025, which in part requires California health facilities to establish procedures for handling immigration-related visitor requests, and mandates training for staff and volunteers on these new policies. The bill also expands privacy protections by including immigration status and birthplace in the definition of medical information, prohibiting health facilities from granting immigration enforcement access or sharing patient information without a valid judicial warrant or court order. PHAB recommends that Sacramento County Board of Supervisors ensure all departments in Sacramento County are aligned with SB 81 in their approach to federal immigration enforcement proceedings.

We thank you for your time and attention to this urgent County matter.

Sincerely,

Sacramento County Public Health Advisory Board