KEEPING PATIENTS WITH IMMIGRATION CONCERNS IN HIV CARE AND SERVICES

Thursday, October 12, 2017
9:30 am – 10:30 am
Presenters

- **Tom Donohoe, MBA**
  Professor of Family Medicine & Director, LA Region PAETC
  David Geffen School of Medicine at UCLA

- **Alonso Bautista, MA, MFTI**
  Supervisor/Mental Health
  AltaMed Health Services Corporation

- **Ayako Miyashita, JD**
  Director, Los Angeles HIV Law and Policy Project
  UCLA School of Law
Objectives

At the end of the session, participants will be able to:

- Discuss how to make a HIV clinic a safer space
- Ensure clients remain in HIV care
- Reduce anxieties of impacted client populations
- Review key laws (and misperceptions) about healthcare rights
- Utilize fact sheets and other referral resources to empower clients to know their rights, and stay in care
PATIENTS WITH IMMIGRATION CONCERNS & THE HIV CARE CONTINUUM

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I have worked in HIV for ____ years.

A. 0-1 15%
B. 1-3 12%
C. 3-5 8%
D. 5-10 12%
E. 10-15 15%
F. 15-20 15%
G. 20+ 23%
Learning and Teaching Domains

- Affective
- Cognitive
- Skills
### HRSA Continuum of Engagement

<table>
<thead>
<tr>
<th>Not in Care</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th>Fully engaged</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unaware of HIV status</td>
<td>Aware of HIV status</td>
<td>May be receiving other medical care but <strong>not</strong> HIV care</td>
<td>Entered HIV medical care but dropped out</td>
<td>In and out of HIV care or infrequent user</td>
<td>Fully engaged in HIV medical care</td>
</tr>
</tbody>
</table>

What about patients/clients worried about immigration status?

The U.S. HIV Care Continuum

Where do you think immigration concerns most impact the HIV Continuum?

1) Prevention 20%
2) Testing & diagnosis 29%
3) Linkage to care 18%
4) Retention in care 22%
5) Treatment 11%
Domestic violence reports down among Latinos

In the first six months of 2017, Latino residents have reported fewer instances of domestic violence to police compared with the same period in 2016.

- **Los Angeles:** -3.5% decrease for Latinos, -0.4% decrease for Non-Latinos.
- **San Diego:** -13.3% decrease for Latinos, -0.2% decrease for Non-Latinos.
- **San Francisco:** -18% decrease for Latinos, -0.1% decrease for Non-Latinos.

Sources: Los Angeles, San Francisco and San Diego police departments.

Chris Keller / @latimesgraphics
The divisive rhetoric regarding immigration being used by a presidential candidate (who shall remain nameless) may render very real consequences in the present, even if he is not elected in November. Truth be told, I consider myself neither qualified nor sufficiently informed to speak directly on the matter of immigration policy. However, I would like to draw your attention to a relatively small, but nonetheless important, facet that shouldn’t be overlooked when engaging in discourse on immigration: the impact that fears over immigration status can have on HIV/AIDS testing and linkage to care among at-risk immigrants living in the United States.

To be clear, the factors that influence an individual’s decision and ability to seek out HIV testing and (if HIV positive) linkage to care are numerous and complex. It would be naïve to suggest that fears over immigration status are the only or even the most significant factors at play. However, the impact of these fears cannot be underestimated. By excluding or marginalizing certain individuals based on their immigration status, we risk denying them the necessary care and support they need to lead healthy lives and prevent the spread of HIV. This not only affects the individuals directly but has broader implications for public health and the well-being of our communities.
Over the past 2 years, I have worked with ___ HIV positive patients who have shared with me immigration concerns.

- 33% A. Zero
- 13% B. 1-2
- 15% C. 3-5
- 38% D. More than 5
I believe our HIV clinic/program is perceived to be a “Safe Place” for patients with immigration concerns.

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Option</th>
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<tbody>
<tr>
<td>51%</td>
<td>Yes, 100% sure</td>
</tr>
<tr>
<td>22%</td>
<td>Yes, 50-99% sure</td>
</tr>
<tr>
<td>17%</td>
<td>I’m not sure</td>
</tr>
<tr>
<td>10%</td>
<td>No</td>
</tr>
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</table>
DON’T DELAY CARE!
KNOW YOUR HEALTH, KNOW YOUR RIGHTS

YOUR HEALTH CARE OPTIONS AND PROGRAMS:
(Regardless of immigration status)

PUBLIC, SAFETY-NET HOSPITALS, COMMUNITY HEALTH CENTERS, MIGRANT HEALTH CENTERS, AND FREE CLINICS.

PUBLIC HEALTH SERVICES:
Immunizations, mental health, screening and treatment for communicable diseases such as tuberculosis, HIV, sexually transmitted infections, services to treat drug and substance abuse.

PROGRAMS PROVIDING HEALTH SERVICES NECESSARY TO PROTECT LIFE OR SAFETY:
Food or shelter, mental health crisis, domestic violence, crime victim assistance, disaster relief.

EMERGENCY ROOM CARE:
In an emergency, you should get care regardless of whether you have insurance. Eligible for screenings and basic care for emergency medical conditions in the emergency room.

MEDI-CAL:
Treatment for an emergency medical condition or pregnancy-related services, Health4All Kids, etc.

FINANCIAL ASSISTANCE OR CHARITY CARE:
Help paying medical bills. Health care programs provided for free or at reduced prices to low income patients at community health centers and hospitals (sometimes called Charity Care).

Undocumented Children Now Qualify For Full-Scope Medi-Cal

Your Information Is Confidential, Including For Families With Mixed Immigration Status.

HEALTH PROGRAMS:
California residents who are undocumented may be eligible for Emergency/Restricted Medi-Cal or can purchase private insurance. Undocumented immigrants may also be eligible for the following health care services:
¡NO DEMORE EL CUIDADO!
CONOZCA SU SALUD, CONOZCA SUS DERECHOS
Guía

PROGRAMAS Y Opciones de Atención Médica:
(independientemente de su estatus migratorio)

HOSPITALES PÚBLICOS, CENTROS de
Salud de la comunidad, centros de salud para migrantes y
Clínicas gratuitas.

SERVICIOS DE SALUD PÚBLICA:
Inmunizaciones, salud mental, la detección y el
tratamiento, las enfermedades transmisibles como la tuberculosis, VIH, las infeccio-
nes de transmisión sexual, tratamiento del el
abuso de drogas y sustancias.

SALA DE EMERGENCIA:
En una emergencia, usted debe recibir
atención independientemente de si tiene
 seguro. Eligible para exámenes y atención
básica para condiciones médicas de
emergencia en la sala de emergencia.

MEDI-CAL:
Tratamiento para una emergencia médica,
condición o servicios relacionados con el
embarazo al igual que otros programas.

PROGRAMAS DE SERVICIOS DE
Salud Necesario para proteger
la vida o la seguridad:
Ailmentos o refugio, crisis de salud mental,
violencia, asistencia a víctimas de
criminals, soporte en casos de desastre.

ASISTENCIA FINANCIERA O DE
CARIDAD:
Ayuda para pagar las facturas médicas,
programas de atención médica de forma
gratuita o precios reducidos en centros de
salud comunitarios y hospitales (a veces
llamado Charity Care).

Los Niños Indocumentados Ahora Son Elegibles para
El Medi-Cal Completo

Su Información Es Confidencial, Incluyendo Para Familias Con Diferentes Estatus Migratorios.

PROGRAMAS DE SALUD:
Los residentes de California que son indocumentados pueden ser elegibles para Medi-Cal de
Emergencia / Restrictivo o pueden comprar un seguro privado. Los inmigrantes indocumentados
también pueden ser elegibles para los siguientes servicios de atención médica:

- Capacidad de Pago (ATP): 1-800-373-9919
- Programa de Salud Infantil Kaiser Permanente: 1-800-464-4000
KNOW YOUR HEALTH RIGHTS

Under federal law, hospitals with emergency rooms & Federally Qualified Health Centers must screen and offer services to people regardless of whether they have insurance, their ability to pay, or their immigration status.

COVERAGE PROGRAMS

✓ May Require Social Security Number And Immigration Status Information To Receive These Programs.

HOSPITALS AND HEALTH CENTERS

✓ Social Security Number And Immigration Status Information Not Needed To Receive Services.

REGARDLESS OF IMMIGRATION STATUS OR PROGRAM

✓ Everyone Has The Right To An Interpreter When Applying For Health Coverage Or Seeking Health Care, At No Cost.

✓ You Always Have The Right To Remain Silent.

✓ Your Information Is Confidential And Protected By Federal And State Laws. Information Is Used Only To Determine Eligibility For Programs.

✓ California Does Not Share Any Information About Household Members Who Are NOT Applying For Benefits.

✓ There Have Been No Changes Made To Any Of The Public Benefit Programs, Including Medi-Cal, CalFresh (Food Stamps), And Or CalWorks.

✓ California Applicant Information Is NOT Used For Immigration Action.

✓ Families Should Not Disenroll From Programs That Keep Us All Healthier. Choosing To Stop Your Benefits Could Mean Losing Critical Health Care And Less Resources For Your Family.

Common Questions About Health Coverage

Will using health care affect my immigration status by making me a “public charge”?

Healthcare Is A Human Right, Regardless Of Immigration Status
PROGRAMAS Y Opciones de ATENCIÓN MÉDICA:

(Independientemente de su estatus migratorio)

HOSPITALES PÚBLICOS, CENTROS DE SALUD DE LA COMUNIDAD, CENTROS DE SALUD PARA MIGRANTES Y CLÍNICAS GRATUITAS.

SERVICIOS DE SALUD PÚBLICA:
Inmunizaciones, salud mental, la detección y el tratamiento, las enfermedades transmitibles como la tuberculosis, VIH, las infecciones de transmisión sexual, tratamiento del abuso de drogas y sustancias.

SALA DE EMERGENCIA:
En una emergencia, usted debe recibir atención independientemente de si tiene seguro. Eligible para exámenes y atención básica para condiciones médicas de emergencia en la sala de emergencia.

LOS NIÑOS INDOCUMENTADOS AHORA SON ELEGIBLES PARA EL MEDI-CAL COMPLETO

PROGRAMAS DE SERVICIOS DE SALUD NECESARIO PARA PROTEGER LA VIDA O LA SEGURIDAD:
Alojamientos o refugio, crisis de salud mental, violencia, asistencia a víctimas de crímenes, socorro en casos de desastres.

MEDI-CAL:
Tratamiento para una emergencia médica, condición o servicios relacionados con el embarazo igual que otros programas.

ASISTENCIA FINANCIERA O DE CARIDAD:
Ayuda para pagar las facturas médicas, programas de atención médica de forma gratuita o precios reducidos en centros de salud comunitarios y hospitales (a veces llamados Charly Corps).

Su Información Es Confidencial, Incluyendo Para Familias Con Diferentes Estatus Migratorios.

PROGRAMAS DE SALUD:
Los residentes de California que son indocumentados pueden ser elegibles para Medi-Cal de Emergencia / Rerstricción o pueden comprar un seguro privado. Los inmigrantes indocumentados también pueden ser elegibles para los siguientes servicios de atención médica:

- Programa de Salud Infantil Kaiser Permanente 1-800-464-4000
- MEDI-CAL: SALUD PARA TODOS LOS NIÑOS
Medi-Cal para niños de bajos ingresos menores de 19 años, estadounidenses de origen extranjero, 4, 512-334-4777

Capacidad de Pago (ATP): 1-800-373-9081
Programa de Tratamiento del Cáncer de Seno y de la Cervix (BCCTP) Medi-Cal 1-800-329-0038

+ Programa de Salud Infantil Kaiser Permanente 1-800-464-4000
+ MEDI-CAL: SALUD PARA TODOS LOS NIÑOS
Medi-Cal para niños de bajos ingresos menores de 19 años, estadounidenses de origen extranjero, 4, 512-334-4777
PSYCHOSOCIAL STRESSORS AND BUILDING INTERNAL RESILIENCIES AMONG IMMIGRANT COMMUNITIES LIVING WITH AND IMPACTED BY HIV

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Psychosocial Stressors of Latinos Living with HIV

HIV Stigma

- Isolation
- Invisibility
- Hypervigilance
- Minority Stress
- Lowered self-efficacy

- Stigma of Mental Health Services
- Anti-immigrant climate
- Transphobia
- Socio-Economic Status
- Sexism
- Heteronormativity
- Racism
I have worked with patients/clients living with HIV whose mental health has recently been negatively impacted by immigration concerns.

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<thead>
<tr>
<th>Percentage</th>
<th>Option</th>
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<tbody>
<tr>
<td>66%</td>
<td>A. Yes</td>
</tr>
<tr>
<td>21%</td>
<td>B. No</td>
</tr>
<tr>
<td>13%</td>
<td>C. Don’t know</td>
</tr>
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</table>
Strength-based, Resiliency Model

Adaptive Coping Skills
- Meaning from Adversity
- Altruism
- Mental Health Treatment
- SUD Treatment

Mirroring
- Managing past life stressors
- Identity formation
- Abilities and skills

Resiliencies
- Crisis Competence
- Community/Family
- Faith, spiritual practices
- Social Support
Building Internal Resilience

- Build on the client’s belief that they can cope with stress (Self-worth)
- Assess client’s inner-dialogue and reflect back or provide alternative affirming messages
- Assess the client’s perceived sphere of influence regarding societal messages (Activism)
Creating an Environment of Safety

- Instillation of Hope
- Manage Current Stressor
- Build upon Mastery and Agency
- Support Groups
- Forums and Educational Materials
- Clinic Policies- Restricted Areas
Maintain a Stance of CULTURAL HUMILITY
IMMIGRATION ENFORCEMENT:
DEVELOPING A PROFESSIONAL RESPONSE

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Associate Director, California HIV/AIDS Policy Research Center
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Visit us at www.thelahlpp.org and www.chprc.org
Objectives

- Identify constitutional rights and understand how they can be deployed for protection during interactions with immigration enforcement bodies.
- Develop the foundational capacity necessary for sharing this information with clients/patients.
- Demonstrate the difference between immigration law and policy.
- Consider the role of providers (individual and/or organizational) in the context of current conditions.
Disclaimer

All materials have been prepared for general information purposes only to permit you to learn some basic information. The information presented is not legal advice, is not to be acted on as such, may not be current and is subject to change without notice.
<table>
<thead>
<tr>
<th>Percentage</th>
<th>Frequency</th>
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<tbody>
<tr>
<td>8%</td>
<td>Never</td>
</tr>
<tr>
<td>24%</td>
<td>Somewhat</td>
</tr>
<tr>
<td>42%</td>
<td>Frequently</td>
</tr>
<tr>
<td>26%</td>
<td>Always</td>
</tr>
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Does your agency serve undocumented individuals?

<table>
<thead>
<tr>
<th></th>
<th align="right">A. Yes</th>
<th align="right">B. No</th>
<th>C. I don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td align="right">89</td>
<td align="right">9</td>
<td>2</td>
</tr>
</tbody>
</table>
In the past several months, have HIV positive immigrant clients/patients expressed concerns with regard to their immigration status?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Never</td>
<td>20%</td>
</tr>
<tr>
<td>B. Somewhat</td>
<td>22%</td>
</tr>
<tr>
<td>C. Frequently</td>
<td>39%</td>
</tr>
<tr>
<td>D. Always</td>
<td>20%</td>
</tr>
</tbody>
</table>
In the past several months, has your agency specifically discussed current immigration policies and impacts on the HIV positive immigrant client/patient population?

A. Yes 53%
B. No 47%
If yes, has your agency taken to address this issue (ex. sharing information, establishing a policy)?

58%  A. Yes

42%  B. No
Do you and/or your agency need more resources to address these issues?

- A. Yes, client/patient education: 33%
- B. Yes, client/patient support groups: 13%
- C. Yes, legal assistance: 21%
- D. Yes, provider education: 25%
- E. No: 8%
At Risk of Removal

- "Visa abuser" – a visa holder who violates the terms/conditions of their visa
- Non-citizens with criminal convictions
  - Felonies
  - Misdemeanors
  - Other violations
- Undocumented immigrants
We the People of the United States, in Order to form a more perfect Union, establish Justice, ensure domestic Tranquility, provide for the common Defence, promote the general Welfare, and secure the Blessings of Liberty to ourselves and our Posterity, do ordain and establish this Constitution for the United States of America.
Reasonable Expectation of Privacy

- At home
- At work
- Grocery store
- School
- Parking lot
- Waiting room
- Patient examination room
ALWAYS carry these documents, if you have them:

- Valid temporary visa or LPR/Green Card
- Copy of your DACA Work Permit
- CA Driver’s License or ID Card
- Proof of physical presence in the US for at least the last 2 years:
  - Taxes
  - School records
  - Utility bills
  - Bank statements
Immigration Enforcement: In Public

NEVER carry these documents:

- Fake LPR/Green card
- Fake social security card
- Fake passport
- Birth certificate
- Home country ID cards
- Home country passport
Immigration Enforcement: Health Settings

- Immigration Law
- Constitutional Law
- Use of Discretion
- Law vs. Guidance
- Collateral Consequences
As of March 1, 2017, Guidance still intact

• Enforcement should not be occurring at healthcare facilities unless:
  - Agents are there with preapproval
  - Agents are led there via another enforcement action; or
  - Unless exigent circumstances exist
Sensitive Locations

AROUND THE NATION

Border Patrol Arrests Parents While Infant Awaits Serious Operation

September 20, 2017 - 7:06 PM ET
Heard on All Things Considered

JOHN BURNETT
Sensitive Locations

2011 DHS Sensitive Locations Memo

What are sensitive locations?
Immigration enforcement actions generally are not to occur at sensitive locations, such as:

- **Hospitals**
- **Schools** (all levels from preschool through college, also vocational and trade schools)
- **Places of Worship** (places of worship or buildings rented for religious services)
- **Funerals** (public religious ceremonies, such as funerals)
- **Weddings** (public religious ceremonies, such as weddings)
- **Demonstrations** (during a march, rally, parade or other public demonstration)
Problems for Healthcare Settings

- When Guidance is not law
- When there is no reasonable expectation of privacy
  - Subjectively believes they have an expectation
  - That expectation is reasonable
- When a warrant requirement can be waived
  - Eroding expectation of privacy
  - “Knowingly exposing to the public”
Developing Protocol and Procedures

- Require a designated staff member who is the only person authorized to review a warrant to “sign off”
  - Consider adding legal counsel to the review process
  - Maintain privacy consistently in the spaces you deem private
Rules of Engagement

- Do file a complaint with the appropriate enforcement organization
- Do give clients and patients information about their rights
- Do not do the following:
  - Hide a patient
  - Fail to cooperate or impede law enforcement efforts
  - Rely on Guidance
Questions?
Thank You!!!!