

Public Health Guide for Immigration Justice

10 Actions for Health Agencies to Advance Immigrant Justice and Community Safety

Who is this guide for?

- People working at health agencies -- including federal, state, tribal, territorial, and local governmental public health departments and their care and service centers -- who are looking to mitigate the health harms of immigration enforcement in our communities. The goal of this guide is to support collective safety and health by helping health agency workers resist systemic injustice in the immigration system.

How can you use it?

- Use the following examples and 10 recommendations to take action at your health agency to support immigration justice. Please feel free to share this guide with others and reach out if you would like support with implementation. See our [Public Health Talking Points for Immigration Justice](#) to help make your case!

Contact

- If you have questions, please email: immigration@healthinpartnership.org

In 2025, the threats facing immigrant communities – especially undocumented people – are intensifying. The Trump administration has revived and expanded a hardline anti-immigrant agenda: accelerating deportations, reinstating discriminatory policies, weakening protections in healthcare access and housing, and rapidly expanding immigration detention. These actions echo shameful chapters of US history, from mass removals under Eisenhower in the 1950s to the record-breaking deportations of recent decades. Today, the very real threat of detention, deportation, and surveillance continues to disrupt every facet of life for immigrant communities – undermining access to healthcare, housing, and social services, and creating a culture of fear and harm.

This guide builds on the work of a 2017 [Guide for Public Health Action for Immigrant Rights](#) developed by workgroup members of our national organizing network, Public Health Awakened. It is grounded in the understanding that our role as public health practitioners is to advance health and safety for all, by challenging harmful and reactionary policies and by working in partnership with immigrant communities and community power-building organizations to enact justice. The guide offers 10 actions that health departments and agencies can take to respond to the urgency of this moment, along with examples.

Whether your health agency is just beginning this work or already deep in it, we hope these actions will provide direction, inspiration, and support. Public health must not be neutral in the face of injustice. We can work to build stronger, safer communities where all people, regardless of immigration status, are valued and protected.

Action 1: Reject 287(g) agreements and support cities, counties, and states that pledge to provide sanctuary to immigrant residents

Action 2: Prevent ICE and law enforcement surveillance and enforcement in healthcare settings

Action 3: Work with advocates to interrupt and reduce the harms of immigration detention

Action 4: Continue to promote health agency policies to provide services to all people, and to ensure all people understand that they are welcome at the agency

Action 5: Advocate that local and state government create a legal defense and community defense fund for immigrant residents

Action 6: Connect with immigration justice community power-building organizations to learn how your health agency can support their work

Action 7: Promote transformative policy changes that address the priorities of immigrant communities and oppose policy changes that harm immigrant communities

Action 8: Encourage and support the efforts of sister agencies in housing to protect immigrants and their families

Action 9: Enact policies that keep immigration enforcement out of the workplace and protect worker rights

Action 10: Promote a narrative of inclusion surrounding immigrants and immigration justice

This guide will be updated periodically to reflect current recommendations and actions for health agencies. Last updated: June 2025

Action 1: Reject 287(g) agreements and support cities, counties, and states that pledge to provide sanctuary to immigrant residents

Sanctuary policies protect community health¹ by reducing fear, increasing access to services, and preventing the entanglement of health and safety institutions with federal immigration enforcement. Congress and the Trump administration are moving through various channels to attack sanctuary, including issuing an executive order² that attempts to ban federal funds to jurisdictions with “sanctuary” policies and urges legal action against them, as well as instructing³ Department of Justice prosecutors to investigate and prosecute⁴ noncompliance with immigration enforcement initiatives. The administration is also rapidly⁵ expanding 287(g) agreements,⁶ which deputize local law enforcement to function as immigration agents. Legal challenges are underway. Previous attempts during Trump’s first term to punish sanctuary cities were largely blocked by courts, but the new policies propose even harsher penalties.

What health agencies can do:

- Work with local government agencies to pass and defend resolutions affirming sanctuary policies and rejecting 287(g) agreements. See template language in [Seattle’s 2017 City Council Resolution](#).
- Provide public health data and testimonies to city councils, county boards, and state legislatures on [the negative health impacts](#) of immigration enforcement.
- Partner with immigrant rights organizations to mobilize support and counter misinformation about sanctuary policies.
- Educate patients and the public about the [constitutional rights](#) of all those born in the US, including birthright citizenship guaranteed by the Fourteenth Amendment, especially in light of executive orders aimed at taking away these rights.

Examples of health agencies and/or community organizations taking action:

- A broad swath of community organizations successfully pressured the Chicago City Council to [vote down a proposal](#) that would have weakened the city’s sanctuary ordinance and allowed police to coordinate with federal immigration officials.

- The Chicago Teachers Union created a [sanctuary toolkit](#), and has supported members to turn away federal agents from Chicago public schools.
- Campaigns for “[Expanded Sanctuary](#)” and “[Freedom Cities](#)” call for sanctuary for [all communities](#) experiencing aggressive criminalization, policing, and incarceration, including and especially Black communities, both immigrant and US born.
- San Diego County is one of many localities that has passed a [policy](#) that bars the Sheriff’s Office from voluntarily transferring undocumented individuals into ICE custody, and from notifying the agency of their release.

Action #2: Prevent ICE and law enforcement surveillance and enforcement in healthcare settings

The Trump administration has rolled back past guidance⁷ restricting immigration enforcement in “sensitive locations,” increasing the likelihood of ICE presence in healthcare settings. ICE agents may seek patient records, station themselves outside hospitals, and attempt to detain individuals receiving medical care, leading to widespread fear in immigrant communities. Enforcement actions in healthcare settings deter people from seeking necessary healthcare, contributing to untreated chronic conditions,⁸ lower vaccination rates,⁹ and increased risk of low birth weight among both immigrant¹⁰ and US-born¹¹ infants. Healthcare settings must take action¹² to ensure that patients are protected from immigration enforcement while seeking care.

What health agencies can do:

- Establish clear guidelines and train staff on legal requirements, institutional policies, and procedures on how to handle requests from ICE or other law enforcement agencies to help staff respond appropriately while safeguarding patient rights. See resources from the [National Immigration Law Center](#) and [Physicians for Human Rights](#) to learn more.
- Continue to follow HIPAA regulations, which ensure the privacy of patient information regardless of citizenship status.
- Ensure that electronic health records are secure and inaccessible to unauthorized parties, including potential access by ICE without proper legal authorization.

Examples of health agencies and/or community organizations taking action:

- The California Primary Care Association made a list of [immigration resources](#) for community healthcare centers, including templates and guides for ICE interactions, know your rights resources, and a toolkit for safe and inclusive care for immigrants and refugees.
- The New Mexico Department of Justice issued guidance on [Ensuring Safe and Secure Healthcare Access for All](#) to support healthcare facilities in protecting healthcare access for all residents by providing concrete, lawful steps healthcare facilities can take.
- The Rhode Island Department of Health created [Providing Care and Services for Undocumented Immigrants](#), an informative brief for healthcare workers and staff that outlines legal responsibilities, patient rights, and best practices.

Action #3: Work with advocates to interrupt and reduce the harms of immigration detention

The Trump administration and Congress aim to significantly escalate immigration detention via policy changes like the Laken Riley Act,¹³ contracts with private prison companies,¹⁴ and the reopening¹⁵ of previously closed detention facilities, including repurposing Guantanamo Bay.¹⁶ Health-harming conditions in immigration detention including overcrowding, insufficient medical care, and inadequate sanitation contribute to serious health concerns, and are sometimes deadly.¹⁷ Time spent in immigration detention centers is associated with an increased prevalence of poor self-rated health, mental illness, and posttraumatic stress disorder.¹⁸ Health agencies can interrupt this harm through inspections, data collection, and clear communication about the detrimental health impacts of these settings.

What health agencies can do:

- Monitor and publish findings on the physical and mental health effects of immigration detention on individuals and communities.
- Provide evidence-based testimonies or other advocacy communications on the public health implications of expanding detention centers.
- Communicate on how detention practices contribute to the spread of infectious diseases, exacerbate chronic conditions, and increase healthcare costs.

Examples of health agencies and/or community organizations taking action:

- [California passed a bill](#) that empowers county health officers to enter and inspect private detention facilities operating in the state.
- The Detention Watch Network is leading a [Communities Not Cages](#) campaign to amplify their long-standing local organizing while building a nationally coordinated strategy to stop the expansion of ICE detention, shut down facilities, and ultimately abolish the detention system.
- New York Lawyers for the Public Interest released a [report](#) documenting the serious, often life-threatening, deficiencies in the medical care provided to people detained in New York City-area immigration detention facilities.

Action #4: Continue to promote health agency policies to provide services to all people, and to ensure all people understand that they are welcome to access the agency's services

In February 2025, Trump signed an executive order¹⁹ directing federally funded agencies to identify and cut off any non-authorized federal benefits or services for undocumented immigrants. Federal law already makes exceptions²⁰ for public health and emergency services. As legal challenges to this order proceed, the chilling effect²¹ is already being felt. Many immigrants – including immigrants who make up almost 20%²² of the healthcare workforce in the US – may forgo necessary health services or feel forced to leave their workplaces for fear of enforcement or exposure.²³ Texas²⁴ and Florida²⁵ have additionally passed state laws requiring hospitals to inquire about patients' immigration status. Health agencies remain one of the most trusted sites of care in immigrant communities and must act urgently to affirm that all people are welcome and protected, regardless of immigration status.

What health agencies can do:

- Affirm publicly that all people are welcome, regardless of immigration status – including through multilingual signs in clinics and online. See the [Everyone Belongs Here toolkit](#) for examples.
- Distribute “[Know Your Rights](#)” materials and ensure frontline staff can provide them to patients and families.
- Maintain access by offering low-cost services, interpretation, and targeted outreach to immigrant communities.
- Ensure that substance use treatment and harm reduction services are linguistically and culturally accessible for immigrant communities who use drugs and may avoid accessing services due to language differences, discrimination, stigma, or immigration status.

Examples of health agencies and/or community organizations taking action:

- The San Antonio Metropolitan Health District [created a flyer](#) in English and Spanish with important things for patients to know about the Texas executive order and your rights when a provider asks about your citizenship status.
- The Illinois Alliance for Welcoming Health Care developed [The Model Policy](#) as a resource for health care settings to ensure that all people can access care in a welcoming environment, regardless of immigration status.
- Physicians for Human Rights and National Immigration Law Center [created a guide](#) that offers essential information for providers to navigate the evolving immigration enforcement landscape while upholding health care professional duties.

Action #5: Advocate that local and state government create a legal defense fund for immigrant residents

Legal defense funds are publicly and privately-funded programs that provide no-cost legal representation for those facing detention and deportation. With the Trump administration's promise to escalate immigration enforcement, these funds are a vital lifeline for immigrants. Despite the life-altering consequences of deportation, there is no guaranteed right to a public defender in immigration court and only 37% of all immigrants nationally²⁶ are able to access legal representation in their cases. When immigrants have legal counsel, they are 4 times more likely²⁶ to be released from detention and twice as likely²⁶ to receive relief from deportation, compared to those with no legal representation.

What health agencies can do:

- Educate policymakers on how deportation harms public health and family stability, and advocate for legal and community defense funds as a public health intervention.
- Partner with immigrant rights groups to elevate community priorities, provide data on local needs, and support coalition advocacy for these funds.
- Contribute non-monetary resources—such as meeting space, data, and community networks—to support outreach, legal clinics, or accompaniment efforts connected to defense funds.

Examples of health agencies and/or community organizations taking action:

- More than [two dozen cities and counties](#) across the U.S.—including Chicago, Denver, Oakland, Prince George’s County, and Austin—have established legal defense funds for immigrants. These programs recognize legal representation as essential to due process and have been shown to dramatically improve outcomes for people facing deportation.
- California created a [legal defense fund](#) that allocates \$25 million for the Department of Justice to fight unlawful and unconstitutional actions by the Trump administration and protect vulnerable Californians and immigrant workers.
- Fort Collins City Council approved a \$150,000 [immigration legal services fund](#) for legal representation and due process for the immigrant community.

Action #6: Connect with immigration justice community power-building organizations to learn how your health agency can support their work

Community power-building organizations (CPBOs) have long been at the forefront of defending immigrant rights, often serving as the most trusted and effective advocates within immigrant communities. These organizations are deeply rooted in the communities they serve and are led by individuals who share the lived experiences of those they support. CPBOs have helped immigrant community members file paperwork,²⁷ provide accompaniment or legal support in court,²⁸ bond immigrants out of detention,²⁹ and resist deportation.³⁰ By partnering with CPBOs, health agencies can align with trusted community leaders to provide culturally competent care, share critical resources, and advocate for policies that protect immigrant health and rights.

What health agencies can do:

- Create accountability mechanisms to share power with community organizers whose priority is immigration rights and justice, such as establishing a community advisory board, hiring community organizers, and including community members in grant oversight.
- Invest time and resources into joining and/or supporting local alliances between immigration justice organizations.
- Leverage relationships across government and the wider nonprofit and funder ecosystem to support the work of immigrant communities and CPBOs for immigration justice.
- Work with immigrant justice organizers to develop an [inside-outside strategy](#) that is customized to your agency and political landscape.

Examples of health agencies and/or community organizations taking action:

- [Monterey County](#) created a tri-county immigration services coalition, partnered with community-based organizations, attended legal observer workshops, held training for staff, and passed out Know Your Rights cards to community members.
- Kane County Health Department Behavioral Health Division partnered with Community Organizing and Family Issues, an immigration justice organization, to secure funding for a pilot of peer-to-peer mental health support groups, called the [Parent Power Center](#).
- The [San Francisco Immigrant Legal & Education Network](#) includes many CPBOs and provides free immigrant legal assistance and community education and is funded by the San Francisco Mayor's Office of Housing, Community Development Division.

Action #7: Promote protective and transformative policy changes that address the health needs of immigrant communities

The Trump administration's anti-immigration agenda has been sweeping, including directives to reinstate the anti-asylum "Remain in Mexico" program,³¹ revive harsh public charge regulations,³² drastically reduce refugee admissions,³³ eliminate protections like Temporary Protected Status (TPS)³⁴ and U-visas,³⁵ and as covered in Action #2, rescind enforcement discretion in "sensitive zones"³⁶ like hospitals and schools. In response, counties, cities, and states can enact measures that protect immigrant communities and promote health for all.

What health agencies can do:

- Oppose anti-immigration policies—such as a revived public charge rule—by submitting public comments, testifying at hearings, and working with legal partners to understand how to respond using your agency's legal authority.
- Ensure that immigrant voices shape policy responses and align your agency's policy agenda with the immigration justice priorities. This may include driver's license access, expanded healthcare coverage, tenant protections, and language justice policies.
- Work in coalition with local government allies and immigrant justice groups to support rapid response efforts to deportation and local ordinances that resist federal overreach and cooperation with ICE.

Examples of health agencies and/or community organizations taking action:

- California was the first state in the US to enact a [policy](#) that eliminated citizenship requirements to be eligible for Medi-Cal health insurance, allowing all eligible immigrants to be covered.
- During the first Trump administration, [public health agencies](#), [researchers](#), and associations of [WIC](#) and [health department officials](#) spoke out against the public charge rule and the associated “chilling effect” on immigrants seeking services that protect health.

Action #8: Encourage and support the efforts of sister agencies in housing to protect immigrants and their families

The Trump administration is expected to attempt to prevent immigrant families from living in federally-supported housing—by bringing back their public charge rule covering subsidized housing, and proposing a rule that would evict mixed-status families. Any such HUD rule would require notice-and-comment and almost certainly face legal challenges. The Trump administration has already restricted access³⁷ to federally-backed mortgages, gutted³⁸ the Biden-era Affirmatively Furthering Fair Housing rule, which guided jurisdictions in reducing discrimination, including of immigrants, and taken action to restrict³⁹ and target⁴⁰ undocumented immigrants in subsidized housing. Finally, stepped-up immigration enforcement and threats of enforcement have strengthened landlords’ ability to threaten tenants⁴¹ with calling ICE when they organize, ask for repairs, or otherwise seek to exercise their rights.

What health agencies can do:

- Engage with your jurisdiction’s legislative advocacy process and urge local elected officials to advocate at the federal level to stop or slow efforts that would reinstate public charge and evict or target mixed status families.
- Support state and local policies that protect immigrant family tenants from landlord discrimination or harassment based on immigration status.
- Support inclusive revenue measures for housing, and if possible, specifically support the needs of immigrant communities and others most impacted by housing insecurity, with [community-controlled and permanently affordable](#) housing.

Examples of health agencies and/or community organizations taking action:

- Public health groups including the American Public Health Association, Build Healthy Places Network, the National Collaborative for Health Equity, the National Network of Public Health Institutes, and HIP co-authored suggested changes to [strengthen federal fair housing](#) protections.
- The Bay Area Regional Health Inequities Initiative, a coalition of health departments, supported the passage and implementation of state anti-discrimination housing laws [to protect renters who are immigrants](#) and [promote fair housing](#).
- California banned landlord retaliation against tenants based on immigration status as part of the Immigrant Tenant Protection Act (AB 291), which [prohibits landlords from threatening to disclose](#) a tenant's immigration status to pressure them to move out or to retaliate for exercising their rights.

Action #9: Enact policies that protect workers rights and keep immigration enforcement out of the workplace

Under Trump's new directives, ICE has resumed large-scale worksite enforcement raids,⁴² which Biden had largely paused. And while deportation fears are mounting, the Trump administration is taking steps⁴³ to purge worker protection agencies and weaken worker power. Though most — but not all — labor laws⁴⁴ protect all working people regardless of immigration status, fear of deportation often discourages undocumented workers⁴⁵ from reporting violations.

Immigrant workers are overrepresented⁴⁶ among industries with low wages, high hazards, and frequent wage and hour violations. It's illegal for employers to retaliate and discriminate on the basis of immigration status, but ICE may follow up⁴⁴ on any reports employers make. The Laken Riley Act creates a dangerous tool⁴⁷ for bad employers: any undocumented worker merely charged with certain offenses (like minor theft) must be detained by ICE.

What health agencies can do:

- Help clients who are undocumented workers to know their basic employment rights.
- Encourage stronger statutory protections to keep immigration enforcement out of the workplace and protect workers from employer retaliation.
- Collaborate with community partners like immigrant work centers, unions, and other labor groups to research and document the health impacts of poor

working conditions on immigrant low-wage workers and to [investigate wage theft](#).

Examples of health agencies and/or community organizations taking action:

- Through their [Immigrant Worker Justice Program](#), the National Employment Law Project works to improve immigrants' workplace conditions, expand immigrant workers' rights, improve governments' ability to protect immigrant workers' rights, and keep immigration enforcement out of the workplace.
- The [San Francisco Department of Public Health](#) uses their health authority to suspend or revoke health permits of employers guilty of wage theft, which is an issue that [disproportionately impacts](#) immigrant workers.
- [Trabajadores Unidos Workers United](#), an immigrant worker center in the Bay Area, organizes to build worker power and end workplace exploitation.

Action #10: Promote a narrative of inclusion surrounding immigrants and immigration justice

False narratives that frame immigrants as threats to public safety and economic stability are being used to justify detention, deportation, criminalization, and exclusion from public services. Narratives that frame immigrants as being the culprits of the national crisis in drug overdose mortalities have become particularly prominent and have been used to advocate for emergency powers, as with Texas' Operation Lone Star,⁴⁸ and the termination of sanctuary city policies.⁴⁹ Counter-narratives must center dignity, inclusion, and justice for all, regardless of immigration status.

What health agencies can do:

- Partner with trusted community members and organizations to uplift immigration stories and their contributions to community health, culture, and wellness.
- Counter anti-immigration rhetoric and policies with the [public health consequences of detention, deportation, and family separation](#).
- Use your voice in op-eds, media interviews, presentations, and testimony to shift narratives to promote inclusion and immigrant justice.
- Use your data dashboards and department messages to frame immigration justice as a public health issue, highlight how policies like deportation harm

community health, and illustrate how inclusion, sanctuary, and rights-based approaches promote it.

Examples of health agencies and/or community organizations taking action:

- The Monterey County Board of Supervisors unanimously [passed a resolution](#) reaffirming their commitment to protecting immigrant rights and establishing Monterey as a “Welcoming County for Immigrants and Refugees.”
- Many immigrant justice organizations have put forth clear statements challenging the harmful narrative that there are “good immigrants” and “bad immigrants,” including [Asian Americans Advancing Justice, California Collaborative for Immigrant Justice](#), and [Interrupting Criminalization](#).
- The Interdisciplinary Association for Population Health Sciences published [an article](#) outlining the health impacts of such harmful narratives.

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