TESTIMONY IN SUPPORT OF H.2288/S.1510
AN ACT TO PROTECT THE CIVIL RIGHTS AND SAFETY OF ALL
MASSACHUSETTS RESIDENTS
BEFORE THE JOINT COMMITTEE ON PUBLIC SAFETY AND HOMELAND
SECURITY
January 22, 2024

The Massachusetts Medical Society (MMS) wishes to be recorded in support of H.2288/S.1510, An Act to protect the civil rights and safety of all Massachusetts residents, also known as the Safe Communities Act (SCA).

The MMS is a professional association of over 25,000 physicians, residents, and medical students across all clinical disciplines, organizations, and practice settings. The Medical Society is committed to advocating on behalf of patients, for a better health care system, and on behalf of physicians, to help them provide the best care possible. The MMS has long advocated for the best possible health care for every patient in the Commonwealth, which demands safe access to health care for immigrants and refugees in the Commonwealth, regardless of immigration status. Moreover, the MMS supports policies that protect the civil rights, safety, and well-being of all patients by drawing a clear line between immigration enforcement and health care. As such, the MMS supports the SCA, which is a critical step toward ensuring that immigrant patients can safely seek the health care services they need.

Cultivating trust in patients is foundational to facilitating unfettered access to medical care, which is critical not only to an individual’s health, but also advancing public health and health equity. Collaboration between local police departments with Immigration and Customs Enforcement (ICE) leads many immigrants to hesitate over calling 911 during medical emergencies, or otherwise seeking needed health care, fearing repercussions for the legal status of themselves or their loved ones. Multiple studies have demonstrated the detrimental effects of aggressive immigration enforcement and anti-immigrant policy environments on the health of immigrants and their US citizen family members. Concerns about deportation and anti-immigrant rhetoric correlate with worse self-reported physical and mental health, sleep difficulties, increased BMI,
blood pressure changes, and delays in seeking emergency medical care. Such concerns are also linked to worsened obstetric indicators, including delays in accessing prenatal care and increased risk for preterm birth and low birth weight. Some of these effects may be mediated by immigrants’ fears of accessing needed benefits like SNAP or food pantries in areas with anti-immigrant policies, leading to higher rates of food insecurity. Community advocates report that immigrant victims of domestic violence and other crimes have long hesitated to seek help from authorities, placing their physical and mental health at grave risk.

Immigrants are justified in fearing the consequences of entanglement with the authorities for their families. From 2013 to 2018, aggressive immigration enforcement led to the deportation of more than 231,000 parents of United States citizen children, a form of family separation. Deportations alone are estimated to have increased foster care placements among Latino children.

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7 Rodriguez RM, Torres JR, Sun J, et al. (2019) Declared impact of the US President’s statements and campaign statements on Latino populations’ perceptions of safety and emergency care access. PLoS ONE 14(10): e0222837. [https://doi.org/10.1371/journal.pone.0222837](https://doi.org/10.1371/journal.pone.0222837)
by 15 to 21% from 2001 to 2015. At a time when the health risks of racism and police brutality have come into sharp focus, distrust of police among marginalized communities poses a public health issue that demands swift action.

The SCA prohibits law enforcement and court personnel from asking residents about their immigration status unless required to do so by law, standardizing best practices already in effect in many police departments and the State Police. The bill also bars police, court officers, and jail officials from alerting ICE to the impending release of immigrants who have not been convicted of criminal offenses, preserving family integrity. The SCA ends all 287(g) agreements with ICE, which currently allow state and county personnel to act as federal immigration agents at state taxpayers’ expense. 287(g) agreements themselves pose a public health risk, as ICE detention facilities crowded and unsanitary conditions with limited access to medical care for detainees.

The health of our society depends upon the health of our most vulnerable and marginalized members. One in six residents of Massachusetts is foreign-born, and one in three children in the Commonwealth has at least one immigrant parent. Most are members of racial and ethnic minority groups. The SCA is a logical and necessary step toward enabling immigrant patients to safely seek needed health care services.

For these reasons, the MMS respectfully urges favorable action on the Safe Communities Act. Thank you for your consideration.

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