BUILDING A HEALTHCARE SANCTUARY WITHIN A SANCTUARY CITY

CHICAGO'S NEW ARRIVALS HEALTH RESPONSE

JENNIFERY SEO, MD, JD CDPH Disease Control Conference September 19, 2023



UN IOM/ Gema Cortes | Aerial shot of Darien Gap



None

AGENDA



Highsmith, Carol M. Library of Congress. https://www.loc.gov/item/2011632115/



Background



Healthcare Access: Steps and Challenges



A Human Rights Framework



Recommendations

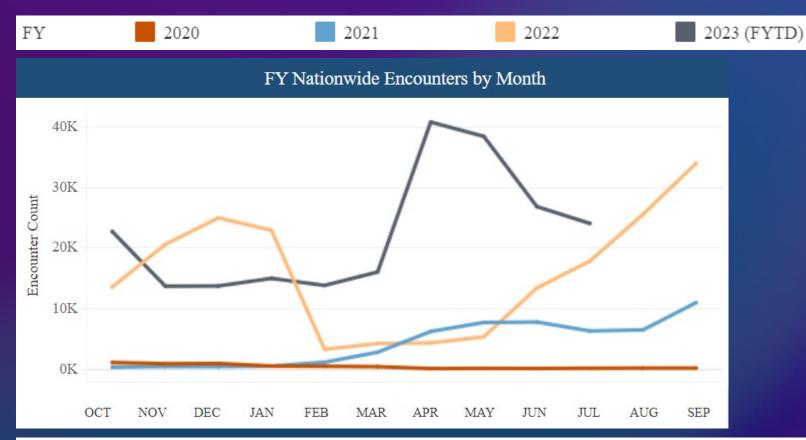
CHICAGO: A WELCOMING CITY

- Welcoming City Ordinance \rightarrow "Sanctuary City"
 - The City will *not*
 - Ask about your immigration status
 - Disclose that information to authorities, or
 - Deny you City services based on your immigration status.
- Providing basic needs to New Arrivals, including shelter, food, clothing, access to healthcare, social services



www.chicago.gov

VENEZUELANS ARRIVING AT THE US BORDERS



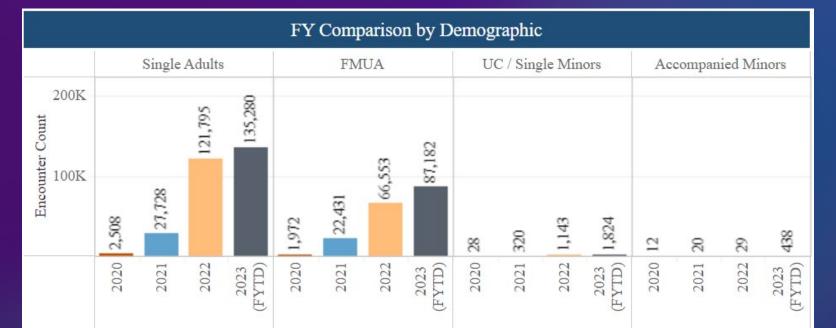
USA for UNHCR

Source: USBP and OFO official year end reporting for FY20-FY22; USBP and OFO month end reporting for FY23 to date. Data is current as of 8/3/2023.

https://www.cbp.gov/newsroom/stats/nationwide-encounters. Fiscal years (FY) run from October to September.

VENEZUELAN NEW ARRIVALS DEMOGRAPHICS



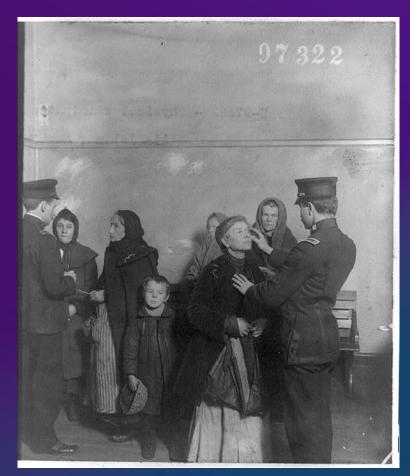


Source: USBP and OFO official year end reporting for FY20-FY22; USBP and OFO month end reporting for FY23 to date. Data is current as of 8/3/2023.

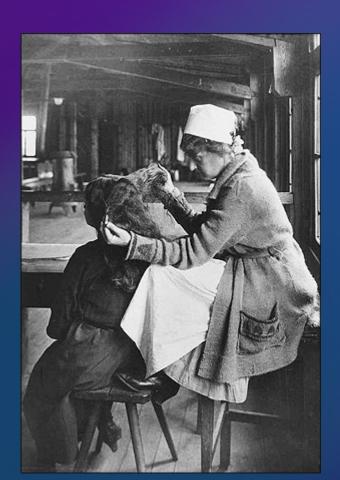
https://www.cbp.gov/newsroom/stats/nationwide-encounters. Fiscal years (FY) run from October to September. FMUA: Individuals in a family unit. UC: Unaccompanied child.

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IMMIGRANT HEALTH EXAMS: REMEMBERING ELLIS ISLAND



Library of Congress: https://www.loc.gov/item/95506353/





U.S. Public Health Service: https://niemanreports.org/articles/whats-old-is-new-again/

OPPORTUNITIES FOR ACCESSING HEALTHCARE

- US Customs and Border Protection
- Mobile Teams
- Shelter-Based Teams
- Clinics and Hospitals



STAGES OF NEW ARRIVALS HEALTHCARE



Public Health Screening Emergent/Urgent Care Medical Screening Medical Home Exam

CHALLENGES

- Funding / Income
- Transportation to and from medical appointments
- Access to medications
- Communication
- Mobility
- Timing of required examinations and vaccinations



Armando L. Sanchez/Chicago Tribune

RIGHT TO HEALTH

- International Covenant on Economic, Social and Cultural Rights, Article 12
- US has signed but not ratified.
- The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.
 - Subject to
 - Progressive realization
 - Resource availability



PRIORITIZATION IN A RESOURCE-LIMITED SETTING

- The steps to be taken by the States Parties to the present Covenant to achieve the full realization of this right shall include those necessary for:
 - (a) The provision for the reduction of the stillbirth-rate and of infant mortality and for the healthy development of the child;
 - (b) The improvement of all aspects of environmental and industrial hygiene;
 - (c) The prevention, treatment and control of epidemic, endemic, occupational and other diseases;
 - (d) The creation of conditions which would assure to all medical service and medical attention in the event of sickness.

- Pregnant people and children
- Congregate setting infection prevention
- Communicable disease control
- Access to sick care

A PUBLIC—PRIVATE PARTNERSHIP

- "A health system, as well as the right to the highest attainable standard of health, depends upon effective coordination across a range of public and private actors...."
- "At the heart of the right to the highest attainable standard of health lies an effective and integrated health system encompassing medical care and the underlying determinants of health, which is responsive to national and local priorities and accessible to all."
- "It is only through building and strengthening health systems that it will be possible to secure sustainable development, poverty reduction, economic prosperity, improved health for individuals and populations, as well as the right to the highest attainable standard of health."

Hunt P, Backman G. Health systems and the right to the highest attainable standard of health. Health Hum Rights. 2008;10(1):81-92.

PRACTICE SANCTUARY DOCTORING

- Emotional Support + Patient Empowerment
- Health care should be a safe environment that provides support and resources to help patients deal with chronic stress and its sources.
 - Establish a dialogue
 - Provide reassurance
 - Provide resources
 - Develop an accepted emergency plan



Armando L. Sanchez/Chicago Tribune

SCREEN FOR AND ENROLL IN PUBLIC MEDICAL BENEFITS AT EVERY OPPORTUNITY

- Children 18 or younger: All Kids
- Pregnant People: Moms & Babies
- Victims of Trafficking, Torture or Other Serious Crimes (VTTC)
- [Health Benefits for Immigrant Adults: Ages 42-64—Enrollment Paused]
- Health Benefit for Immigrant Seniors: Ages 65+

VACCINATE AT EVERY OPPORTUNITY



https://immunizationdata.who.int/pages/profiles/usa.html These data show the latest WHO/UNICEF Estimates of National Immunization Coverage (WUENIC) for United States of America. PAGE 016 They are based on data reported until 26 June 2023.

CDPH IS YOUR PARTNER

- Report suspect or confirmed cases of reportable diseases to CDPH
 - Keep in mind TB and varicella
- Public health guidance
 - chicagohan.org
 - After-hours or for urgent issues: Call 311

Infectious Disease Reporting

Under Illinois Law health care providers, hospitals and laboratories are mandated to report <u>select Diseases and</u> <u>Conditions to local Public Health Departments</u>.

If you have access to <u>INEDSS</u> or <u>CHIMS</u> please report via these electronic means. Others may report by contacting the CDPH Disease Reporting line Mon-Fri 8am-4pm at 312-743-9000 for conditions pertaining to Chicago residents.

To report urgent issues or afterhours: call 311, or 312–744–5000 from outside the city of Chicago and ask for the medical director on call.

TAKE AWAYS LET'S CREATE A HEALTHCARE SANCTUARY TOGETHER

- Use this as an opportunity to strengthen the health system for all Chicagoans.
- Optimize health within the current system and using existing resources while continuing to advocate for a better system.
- Keep in mind the challenges. Create feasible patient care plans that will aid the patient to achieve their highest attainable health.
- Empower patients. Give them the tools they need to succeed.
- Stay in touch with and partner with the City.

IMMIGRANT, REFUGEE, AND MIGRANT HEALTH RESOURCES

- CDC Guidance for the U.S. Domestic Medical Examination for Newly Arriving Refugees: <u>https://www.cdc.gov/immigrantrefugeehealth/guidelines/domestic-guidelines.html</u>
- CareRef Clinical Assessment for Refugees: <u>https://careref.web.health.state.mn.us/</u>
- Chicago Health Alert Network: <u>www.chicagohan.org</u>
- Community Health Centers: <u>https://findahealthcenter.hrsa.gov</u>
- Free Clinics: <u>https://nafcclinics.org/find-clinic/</u>

THANK YOU

