

## English translation



### *Episode 1:*

### Navigating Healthcare Challenges with Undocumented Immigrants in Florida

*Dr. Ricardo Correa and 2023 ACP intern Lorett Alarcon*

[Lorett] This is a podcast episode by ACP called “Facing Challenges for Undocumented Immigrants in Florida.” I want to give a welcome and a brief presentation of Dr. Correa, who is the guest of today’s podcast. I also want to start by explaining what the ACP is. ACP is the American College of Physicians and it’s a large organization of doctors who are called internists. And they are doctors who focus on all the health care that is not surgery and are in charge of the patients. ACP is in support of immigrants and undocumented immigrants in the United States. And we think that everyone deserves the same healthcare rights. Doctor Correa works as a diversity director in medical education- for post-grad. Doctor Correa has a wide experience in the field of medicine, especially in addressing the disparities in health and promoting cultural competence in the performance of medical attention. Throughout his career, Dr. Correa has been actively involved in efforts to improve medical education for populations who are underserved. He has been instrumental in raising awareness about the challenges faced by marginalized communities, including undocumented immigrants, and advocating for equitable healthcare policies. He has been fundamental in raising awareness about the challenges faced by marginalized communities, including undocumented immigrants, and advocating for equitable healthcare policies. And the experience, leadership, and the dedication of Doctor Correa in the promotion of equality in health has become a valuable voice in the discussions about the impact of restrictive laws on medical attention, especially within the Latin community. Societies, ideas and experiences provide valuable perspectives on the ethical importance of medical attention and the importance of inclusive attention focused on the patient. I want to mention the focus of the episode, which is to discuss the impact of restrictive law 1718 in Florida in medical practices and its implications for the Latin population. And to also introduce the law 1718 in Florida, it requires patients to discuss their immigrant status in hospitals when they are going to receive help. And that is of course a problem because many of the workers in landscape (industry), many of the workers who are painters, or in construction in Florida, are Mexicans and unfortunately, they are also undocumented because the laws are not inclusive for everyone to be a citizen. And now there is a danger that if something happens to you or you are sick and you go to a hospital, you are in danger of being discriminated against by your immigrant status and we want to make sure that everyone gets the help they need and that they are not able to

receive that help because being healthy and being alive is the most important thing. Welcome to Dr. Correa.

[Dr. Correa] Thank you very much for the invitation. It is a pleasure to be here with you.

[Lorett] Of course. And I also want to introduce myself. I forget to introduce myself, but I am Lori Alarcon. I am an intern; I am an intern here at the company ACP and I am very excited. I am working in the Department of Education. Okay, for our first discussion, I want to talk about the concerns of immigrants undocumented in medical attention. I want to talk about the issues undocumented immigrants face when they seek medical attention. And what are the consequences of seeking medical attention for their legalization process?

[Dr. Correa] Yes, well, starting with a little bit of what are the concerns that a listener that the immigrants undocumented experiment or have in their mind when they seek medical attention. The first is that they always think that there will be an effect on their migratory status (path to legalization). If they seek medical attention or use some of the resources of the state, for example, hospitals or clinics, that would be one of the main causes of not seeking medical attention because they think it will negatively affect their migratory status. The next one, one of the problems or the one that worries the most these people is the cost that medical attention has and that they cannot acquire that cost. So, it would be another very important problem. And the third big problem that is, there are many more but I think this is one of the most important, is the fear that if I seek medical attention and I am someone in that situation, someone will report me to the immigration system or someone will report me to the police and then my migratory status will affect me. So, in general I think that these are three concerns that one more listens to from this population. We're going to clear up some things in this podcast that are not true. There are many myths, not realities, which talk about alerting an immigration system. The other point in that there is a law that is called public rule that conditioned the migratory process would be attached to the use of federal resources. And there was a lot of concern, in 2020 before COVID but with COVID it was eliminated by the fact that it was a public health problem although many people still do not know it, that this was eliminated, this law is not in effect but it is a law or what is called public rule and then there should be no effect on the resources that one uses in the health system for the medical process. It is different from other resources such as economic aid, government help, and all these other things that most immigrants and undocumented do not qualify for anyways. But this applies to documented immigrants in the process of legalization or of signing their documents, but for the undocumented, the resources available to them are very limited, the government federal resources, those that could affect the process of immigration (legalization), that is, but when we talk about healthcare, it is not affected.

[Lorett] Yes, yes, I think many should know the truth, that they know that they should not be afraid of how the legalization process will affect them because they are not going to affect them right now and of course, that is only for the people who are in the legalization process, right?

[Dr. Correa] Correct, specifically the documented that are in this process of obtaining their permanent documents are the ones that are going to be affected. On the other hand, I do not know, it is not widely known, but if the federal system of help is abused, well in that case if there is abuse government help is most affected.

[Loretta] Yes yes, and do you maybe know some people or cases where people have suffered from lack of access to healthcare and where people have opted to stay at home instead of finding help?

[Dr. Correa] This is not just one case; it is quite frequent. There is a lot of fear from undocumented immigrants in reaching out for help. More so, patients who have chronic diseases, which are what we see as internists, let's say diabetes, obesity, problems in the cholesterol. In this case, with these types of problems, most of the patients stay at home because they are afraid of the cost, or that this will affect the migratory process and then they do not go to the doctor. And when they go to the doctor it is too late- that is when diabetes or sugar is uncontrolled and then you have to start perhaps insulin treatment. And when that high blood pressure caused brain damage and then patients are in a bad state and then there are other things like increased cholesterol in the cardiac system, and then this leads to heart attack. In this stage, when people are forced to seek help because they don't have another option, instead of in the beginning stages when these kinds of things are preventable, if they had sought out help early, you can see the fear that the undocumented immigrant has when seeking out healthcare. Very few people use the system and then what we see are all the complications of chronic diseases when people are left with no other choice. So, it's necessary for me to clarify that many of the health systems, for example many of health systems like charity clinics and low-income clinics are supported clinics and provide free health services to people in general. No matter if you have a document or not and there you will have a primary care doctor, often an internist or an internal medicine doctor who will be able to control chronic diseases and prevent them from arriving to a certain extent when the disease already damages other organs but will be able to treat from beginning. And these are throughout the whole nation where we will be able to find clinics like this. The experience I have is one in Phoenix. We have a clinic that is philanthropic, it is mainly aided by the social help of the community, and we mainly see undocumented immigrants and we try to provide them with healthcare without any cost. We try to find their medications, whether it is based on pharmaceutical houses that they sometimes give us certain medications. Or we try to find cheaper medicines in the market. And that same clinic also works as a place where, for example, transport is provided if people cannot get to the clinic, or they are given information about food banks, the places where the food is. They give all this to the patients. Even during Covid, when we had the federal government giving people spending sprees, undocumented people did not classify for this help, but we were able to get anonymous donors who provided certain funds and we were able to give some financial support to those undocumented immigrants. Of course, this clinic exists in Phoenix, but these clinics exist throughout the nation, and they are accomplishing great things, helping the communities, like in this case, who need help the most.

[Loretta] Of course, it's good that there are resources like this because if there's a necessity and people live in fear all the time, it is necessary for them to receive healthcare to prevent, like you said, to prevent chronic diseases like obesity and diabetes which cause more harm. You also mentioned to me the big impact authoritarian forces make, and not just ICE, right?

[Dr. Correa] Yes, definitely, we have to understand that the biggest immigration force is the ICE and that is the big one. Many times what is combined with the police, are forces of the state, of the county. And sometimes there is also fear that these forces may make reports, that shouldn't happen, to the immigration system. Definitely, there is a lack of trust in the community towards both the normal police and the migratory police because of past experiences. There should not be communication between both systems unless it is a certain case, but if there has been and people will continue to be fearful. For example, in this clinic that I was telling you in Phoenix- when we started to vaccinate when the Covid vaccine came out and we started vaccinating, police suddenly came out to the clinic. And the most likely thing was that they were trying to monitor the number of people to prevent something from happening, but people did not see it like that because of the fear that exists. So people were not able to be vaccinated due to fear. We then had to talk on certain occasions to important people in the state, such as congressmen to tell the police to not pass the clinic. Those policemen were there independently without orders to keep the order. The impression they give to undocumented immigrants is that they are there to take them away, to deport them, even if that is not the reason they're there. It's always important to be very careful when dealing with these kinds of clinics and you have to make sure the clinic leaders have the foresight to see that police presence, even if not related to immigration, and make sure these public order forces aren't in plain sight. Of course, public order forces are needed, but they need to be respectful of the situation and people and of immigration. Making sure people don't talk about their status, and their reason for being there isn't necessary, because this population is mainly undocumented.

[Loretta] Of course, I want to remind all the people who are listening especially the undocumented immigrants that if they have the right. They can say, "No, I do not want to share my immigration status if I do not want to." It is the law if you do not want to say if you are legal you do not have to, you are not forced to say it and that is your right to protection. I know that the law is changing and there is much more fear of what is going to happen, but I want everyone to know that so that the people who are working in healthcare should also know that to support their patients because sometimes it is very worrying when the police come into a clinic or go to the hospital, and if these order forces cause a lot of intimidation, they can also cause fear for immigrants and this is very dangerous. This is a perfect transition to my next point- how can we support undocumented immigrants in healthcare and in the legalization obstacles?

[Dr. Correa] Yes, definitely there are several things that can be done as part of the medical community. The first is to volunteer your time in clinics that offer these benefits for people who are in need, and not necessarily undocumented. Or clinics where patients are really, mainly undocumented. This is a way as a medical community where more doctors and people in healthcare, people who help in these clinics, are able to help and we can see more people receiving treatment. And of course, in those moments where we are offering these services in these clinics, we must understand our role in the system, that is, we must understand our purpose. And like I said, volunteering is important, but not everyone feels a passion for that. But, those who do, feel the passion to try to find where these clinics. If there are such clinics or community centers, they definitely help the volunteer community. I think that's one of the main things we can do as a medical community- return a little bit back to the community in the form of helping communities with lack of access, in this case, undocumented. The second important

step we can do is to educate. Educate, like you said before, educate the right every person has. Every human being within any country, in this case, the United States. The right to medical attention is a vital human right. And so then, to educate patients the importance of knowing and using this right, despite what your immigration status is. In this case, education as well as medical personnel. The way people who support these clinics, people who are very interested in supporting this population, is vital. We see there is greater education and greater access and greater education in these areas of need. And another way of supporting is collaborating with legal authorities, such as lawyers, so that they can clarify their legal situation. Many times patients go seek help with some sort of condition, but really much of the stress that causes this condition is related to their migratory status. So, as doctors we have limitations because we do not know the laws and we don't know each state's specific laws, but we can collaborate with social workers and lawyers that can guide us and who can also volunteer their time- their time dedicated to altruistic activities to help guide these patients. Then, it is not a single responsibility in this case the health of the patient, for the doctor but it is a collaboration with other professionals, not in medicine. In this case, these professionals are just as important as medical ones because as I mentioned, many conditions a patient suffers from can exacerbated or aggravated by stress problems that occur in the house, related to their immigration status. For example- diabetes. It may be that I can have great control of diabetes, but if I'm someone with immigration problems, then "I don't want to take medication because I am more worried about my immigration problem, so then my sugar rises and I then have more consequences." Health is one thing that we don't have to isolate into just one area. For example, the clinic medicine. But there are many factors that affect the health of the patient and one is immigration.

[Lorett] Of course and I loved how you explained it because I think it really explains the situation of undocumented families - it affects your physical health as well as your mental health because it is so stressful. I can talk a little about my experience. I have relatives who are undocumented and we live in Florida. Florida has had many restrictive laws, and has had a lot of violence against and aggression against the undocumented. That is very stressful because the undocumented are the ones who take care of Florida and they are painters, they are construction workers, they are gardeners. They are all the ones who clean, they are the ones who take care of all the places in Florida and maintain it. They make a big difference in Florida in the economy as well, because the thing is that undocumented immigrants, the majority of the time, they do pay their taxes. They pay taxes from their salary and they still don't have access to their social security benefits. They don't have access to any government benefits, but they do pay the government because they don't want to commit a crime, but they are forced to, in order offer a better life for their children and for their family. They are forced to live with so much stress and fear which takes an effect on the body, in the mind of a person, and on a family. Because you always have a fear of police and how aggressive they are and we have seen that. At least in my community in Florida, there have been more aggressive laws and people in charge of the law, like the police. Sometimes there is discrimination against Latinos and that has been a very painful part of living there. Also, for those experiences to stay with you, in your soul, it affects you a lot. I also know of workers who have accidents at their work- I know someone who had an accident at work, who was painting a house. And these are multi-millionaire dollar houses, not small ones, huge ones that require many people to work on. And many of those workers are undocumented. This person, the painter, fell onto a toilet basin, and his face split open, like his

cheek, and he wouldn't go to the doctor in fear of they were going to do. That kind of situation is so dangerous. You are in a situation of life or death and the first thing you have to think of is, are they going to deport me? Or, I'm not going to be able to go home today. Or "What is going to happen to me?" This kind of stress isn't great because receiving medical attention is a human right.

[Dr. Correa] Yes, totally agree, and like we talked about in the beginning, when we were talking about how many people with chronic diseases, and now you mention acute diseases- for example, if an accident happens, having fear of the health service because I'm thinking (as an undocumented person), "Are they going to take repercussions against me?" Living in this uncertainty is not so humanistic either. So, I think something important to understand is we all have the right to be treated. If, as an undocumented person, just like a documented person, you must be treated, and your process with your employer will be the same because the person who employed you knows what he is doing from the beginning by hiring you. He or she knows what they're getting involved with and then they have to follow the same rules for both documented and undocumented employees. Especially when it has to do with labor accidents, or when it comes to risky labor that affects health, so we are not going to be afraid of expressing ourselves or of receiving treatment. We should not be afraid of going to a majority of healthcare locations if we have a need for them, because they should not report, including in Florida, your status. Florida, where the law that we were talking about at the beginning says that health systems must report immigration statuses to the state system- has not yet been put into practice and that is on a lawsuit because it violates other rules that exist, which are of privacy. The privacy rule that has been approved many years ago is HIPAA which prohibits the release of information to any system unless it is something criminal. This is different, but in that case, the justice system could release that information. But this issue has nothing to do with crime or justice. This has to do with immigration. So, even if you live in Florida, right now, and you have heard so many things about the healthcare system, and by the way, discrimination is another problem that is totally independent and that exists everywhere. That is a human problem that we have to work with the entire population on. But related to healthcare, if you are in Florida, don't be afraid to go to a doctor or to a hospital- because that law is supposed to be contested because it's not in practice since it's being contested since it violates other privacy laws that have been approved before. It is better in this case go to receive treatment rather than wait for things to get complicated. Or if I'm in a situation where I have an accident and need treatment, don't be afraid to go to the hospital. It's important to make this message reach the people who listen to this podcast because really the cases that have been seen are more those who do not get to the hospital and who even die at home, than those who get to the hospital and get reported to immigration. So, in this case, if we see the tradeoff, it is better to go and prevent something fatal rather than not going and getting reported. It is really important to understand that. The other important thing is that we are going to see with time in the state of Florida, if this bill is enforced 100% (in its entirety), we are going to see how many immigrants leave Florida. The agriculture production and manual labor, which is the work immigrants do, will decrease drastically and there will be a desperate need in Florida- to find people for those jobs because people to fill in don't exist. And the state government is going to face a lot of pressure because we are talking about huge companies. I know there is an alert in Florida, but as of now, continue using health services. They are accessible and you shouldn't have any problems. Things may change

possibly, we can't say as of now maybe we will be able to say differently, but as of this moment healthcare services can be used and there is no reason to be afraid of the healthcare services taking repercussions against immigrants.

[Loretta] Of course, and hopefully everything will get better. We have seen, how we had talked before about this, that there are so many immigrants who have already started to move to other places because they feel that they are persecuted by the law and that they are not valued especially in Florida they do not feel valued. They still help domestic work, and the government doesn't value this as we have not seen a change in immigration laws in more than 20 years. We have not seen a change to help these immigrants here become documented and legal so that they do not have to live in fear. They help the economy and shouldn't have to do the things they are doing. That is very unfair and hopefully the situation will get better we do not know yet if the law as it was intended will be placed at its full capacity in Florida but let's see what will happen. I know that many people in Florida are asking what will happen in the future, will I have to go and there are no answers yet and that is very sad too because they have to live without knowing what will happen to them. Now on this same topic, I want to talk about the delicate line between politics and medical ethics when it comes to treating undocumented immigrants. How can we empower patients and how can we educate them about their rights, as doctors and healthcare workers?

[Dr. Correa] As doctors and as healthcare providers, there is definitely a line as you mentioned, a very delicate line between medicine and politics, but something very important is that when we practice medicine, or in the case of any health provider we swear to protect the patient above all. Any ethical provider should not mention- or treat a patient differently for not having or having documents. All patients are equal in the eyes of a doctor. You can have a million dollars or none, and you can have documents or none at all, but when you come to see a doctor, it should all be the same treatment. Of course, most doctors will follow these rules, but there are doctors who care more about politics and things like that, so they hurt doctors' image. I want to take away the fear- most patients fear doctors will retaliate against them, but most doctors are not going to do this. If by chance you do know of a place that has been reported in the past, don't go there. I always recommend that if there is a clinic that provides health services and has experience with undocumented patients, it is better to go there because people have additional training. They are more sensitive, and there is less discrimination (because of status) because most doctors are not going to retaliate against undocumented people. I cannot speak for 100% of healthcare workers, because some healthcare workers think differently. Having our beliefs and applying them to our clinic practice are two completely different things. We should not pass our beliefs to clinical practices, and we should not believe undocumented people are bad people. What happens is most providers just try to stay out of it, but there are certain health systems that due to some government incentive, put pressure on their doctors or health providers while they declare these new laws. Until now, we are still sure that doctors are protecting the rights of their patients, as their #1 priority, and are protecting patient privacy in this situation. I think education is the best way to stay aware of these situations many times, doctors do not know, because they have not lived the experience of being undocumented. Sometimes some have and they do know. So as patients, educate doctors about all the difficult things undocumented immigrants go through, and how we go through these situations so that through stories people on the other

side can understand better. Many times, on the medical side, we don't know that the reason why someone didn't want to go their appointment is because they were scared because they saw the police before they went in. These stories, if told to the medical community, are able to educate the medical community. On the medical side, these stories create again that trust with doctors. Through stories, the medical system has better helped the undocumented community. Stories in this community help again to build trust. We live in a time where misinformation or misinformation is the bread of each day. We know that "fake news" exists at every moment, so we have to return to the time when we trusted our doctor. The medical world is trying to return to that time when we can give patients the right information and where they can trust us. We must make the patients see that they can trust us to support them in every sense- to see a patient integrally, and not only as an organ but also using a psychosocial and biopsychosocial lens. On both sides, there is a need for education, and that is so important. It's also important to understand each side and maybe that is perhaps through a podcast or not. Stories are always the ones that draw more attention and I can tell you from the medical side that one hears these stories. I always listen to my patients' stories. Each time the reality is that things are worsening and that really humanizes the medical community.

[Loretta] You said that well. There are many stories out there and they're the most important. We want the situation to improve for undocumented immigrants because they are a large part of this nation who are just trying to find a better life for themselves and for their families. I also want to repeat the position that ACP holds on immigration and access to medical attention. ACP holds a strong position on immigration and access to healthcare. They advocate for equitable access to healthcare services, regardless of immigration status, and oppose discrimination based on immigration status. ACP emphasizes the importance of comprehensive primary care and related services for undocumented individuals, highlighting the public health risks associated with a lack of access to medical care. They support policies that prioritize family unity, protect undocumented medical students and physicians, and establish a path to legal immigration status. ACP's position promotes inclusive healthcare policies, eliminating discrimination, and ensuring that all individuals, regardless of their immigration status, receive the care they need and deserve. I wanted to say this again to affirm the amount of support there is for undocumented immigrants. I know that sometimes this process feels lonely and difficult. But I want to say that the most current information says that there is over 10 million undocumented people in the U.S., yes? That's a lot of people and everyone deserves medical help.

[Dr. Correa] The medical help, as you said, and large organizations in the U.S. like ACP are in support of equitable medical help. Money, immigration status, sexual preference or gender should not affect medical aid and everyone should be treated equally. Organizations like ACP fructify this and have providers learn about new concepts. Thank you for mentioning the position ACP holds on this because as the second most important medical organization in the country, being able to have these support statements support the health rights of anyone and talk about healthcare as a vital right we mentioned, makes people and doctors join together for the same cause.

[Loretta] Yes, I think that's all the time we have today. I want to thank you for coming and talking about these topics they are very important and it's very important that doctors talk about this too.



[Dr. Correa] Thank you very much for the invitation and as you mentioned, the most important thing if we have to summarize the podcast is 1) everyone has a right to health, it doesn't matter if we have a migratory status or not 2) that doctors have a vital role in the patient's education and both medical education and education in other areas that affect health such as social and psychological, and 3) we shouldn't be afraid to go to health centers and community centers or hospitals when we need to because prevention is better than final treatment. Despite politicians who want to mitigate these accesses there is still one that is still working and that really does this. If there are community centers that can provide health services to you, use them. Ask doctors you trust about this, and this builds on to the collaboration we have talked about with medical professionals and other professionals such as social workers and lawyers to try to solace the problems that as doctors we cannot do anything about, but we can recommend.

[Lorett] We send a lot of support to anyone listening and write if you have any questions.