WHEREAS unaccompanied migrant children facing forced displacement from their birth countries due to the threat of violence by organized and armed criminal actors, violence in the home, or exploitation by human traffickers have crossed into the United States in increasing numbers;¹² and

WHEREAS the United States has a long and regrettable history of falsely accusing immigrant populations of importing infectious diseases including allegations that Irish immigrants brought cholera into the country; Jews, tuberculosis; Italians, polio; and Chinese, bubonic plague;³ and

WHEREAS unaccompanied migrant children coming now to the United States do not carry unusual disease risks like Ebola⁴ and, in fact, have comparable or higher vaccination rates for common childhood diseases, such as diphtheria, tetanus, pertussis, measles, hepatitis B, meningococcus, and hemophilus influenza type B, than children in the United States;⁵ and

WHEREAS unaccompanied minor children entering the United States are already screened for TB and vaccinated for varicella as part of protocol through the Department of Health and Human Services’ Unaccompanied Alien Children Program;⁶ and

WHEREAS AMSA has long supported requirements that the medical profession’s response to disease challenges should be providing evidence-based appropriate treatment of all patients based on accurate data, regardless of legal status or where geographic borders lie;

THEREFORE BE IT RESOLVED that AMSA’s Principles regarding Immigrant Health (p 148) be AMENDED BY ADDITION to include:

8. STRONGLY SUPPORTS efforts to stand against scaremongering, profiling and other discriminatory practices, and/or messaging that denigrates and/or depicts immigrant populations in such a light that leads towards marginalization as it relates to human rights and healthcare such as inaccurate accusations that immigrants pose major threats to public health.

Fiscal Note: None.

References


