

The Hidden Trauma: How Immigration Policy in the United States has Inflicted Violence on Latinx Families in the Autism Community

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Abstract

Autism is a neurodevelopmental disorder that impacts 1 in 54 children in the US (Maenner, Shaw, Baio, Washington et al., 2020). While autism does not discriminate in terms of the population it impacts, there are severe healthcare disparities present in autism between Latinx children and White children (Casillas, Vigil, Wang, 2017; Angell, Frank, Solomon, 2016; Nevison and Zahorodny, 2019). Despite Latinx children being the population whose autism prevalence trend has had a sharp increase between 2007-2013 (Nevison and Zahorodny, 2019), Latinx children are consistently diagnosed with autism on average 2.5 years later than white children (Zuckerman, Mattox, Donelan, Batbayar et al., 2013) and the reasoning for this gap has consistently remained an enigma. Immigration policy in the United States extends beyond keeping the borders safe; it has a direct influence on the healthcare system (Fountain and Bearman, 2011) in terms of the treatment provided and the resources available. Immigration policy is a direct attack on Latinx families throughout America and have caused unnecessary harm and violence to be perpetuated on this population. This paper argues that immigration policy is the underlying reason for the existing harmful disparities blatantly present in the autism community for Latinx families and the disparities that exist are a form of structural violence.

Introduction

In the United States, the face of autism has always been that of a white male child as this was the population Leo Kanner, who officially identified the cluster of specific behavioral characteristics as autism rather than simple feeble-mindedness, first studied. Autism was viewed as an anomaly as it was mostly affecting white, upper class children, or so it seemed. As awareness about autism increased, it was found that autism does not impact only one demographic; it is a condition that is present in all demographics. Disparities exist in autism in terms of age of diagnosis, access to specialists, and access to treatment services, especially within the Latinx community. This thesis focuses on the underlying reason Latinx communities are persistently disadvantaged in the autism community despite awareness and research growing each year: immigration policy. Immigration policy- specifically policies implemented in the United States from 1994-2020 that have contributed to or reflected the American public opinion on immigration- is more than just dictating who can become a US citizen. It is pervasive and influences the way people perceive the populations it is targeting. Latinx populations have been targeted exclusively through immigration policies, such as the "Save Our State" initiative passed in California in 1994 that contributed to the sharp decline in public service usage from Latinx populations-including services related to autism. While this initiative was ultimately ruled unconstitutional, the fear that was created and generated during this time remains present in society, especially while there is a President in the White House whose entire campaign was based on ostracizing and othering Latinx Americans and immigrants. This rhetoric does not exist in a vacuum, it shapes people's perceptions of a population and influences phenomena such as physician bias as concerning behavior indicative of a condition like autism is brushed off as stereotypical behavior for Latinx people. The disparities that exist for Latinx families in the autistic community persist due to immigration policy and it has inflicted harm upon these families, which is why I argue that Latinx families have been subjected to unnecessary harm and are victims of structural violence.

Structural Violence

Structural violence was coined during the 1960's by Johan Galtung to describe the social structures (which includes political systems) that prevent individuals from thriving. Galtung described structural violence to be the **"avoidable impairment of fundamental human needs or the impairment of human life"** which in turns lowers their ability to reach their full potential and thrive (Farmer, Nizeye, Stulac, Keshavjee 1687, 2006). In autism, being diagnosed outside of the 18-72-month range means a child has lost an opportunity for early intervention that can change their trajectory in life. While it is important to acknowledge that a child with autism is already at a structural disadvantage in the United States, the intersectionality of disability and race are imperative to my argument as White autistic children are the focus of research for diagnostic and treatment options and other populations such as Latinx children are faced with more hurdles than their peers in terms of disability and their race and ethnicity. The following boxes are breaking down my argument about structural violence and highlight the main points.

Structural Violence of Autism Disparities:

- Latinx children are diagnosed 2.5 years later than White children which puts them behind the curve for early intervention.
- The current research on autism excludes people who do not speak English and the stigma of living in the United States and not speaking English stems from the attitudes about assimilation and anti-immigration which is evident in plans to establish English as our national language.
- Insurance often dictates what specialists people have access to and the waitlists can be over a year to see specialists in order to diagnose autism
- Cultural barriers are blamed for being unable to diagnose and recognize autism in Latinx children
- The parents are blamed for
- The use of welfare terms to describe accessing resources for autism for Latinx families
- The usage of autism services for Latinx families can be tied to implementation of immigration policies. People fear utilizing services due to severe mistrust of the government and their ties to healthcare

How Immigration Policy Inflicts Structural Violence

The way that violence is defined typically involves a physical force that inflicts harm upon a being. What is not addressed is how systems and structures are capable of inflicting harm on a person without physically touching them. When discussing immigration policy, the pressing matter is the brutality of these policies in regard to their physical separation and removal of people from this country. What is rarely addressed is the influence having such policies and discourse have on the target population and those who are grouped in simply because of their appearance. Immigration policy infiltrates and controls the healthcare system in the United States. Immigration policy prevents people from feeling safe in situations they should feel safe in (such as a doctor's office) due to previous initiatives that allowed for healthcare workers to report suspected undocumented people to the authorities. The public discourse about immigrant populations generated by immigration policy has contributed to harmful stereotypes that unfortunately find their way into clinical settings via physician bias. Immigration policy is purely about nativism and its goal to keep our country "safe" and to save our states from economic downturn that immigrants have been blamed for contributing to. Immigration policy controls the environment and utilizes fear as a technique to keep people who are undocumented from accessing services deemed for "citizen use only". Its entire purpose is to create an "us" and a "them" and in doing so, people's lives are put at risk and they are not enabled to thrive and fulfil their needs.

Timeline of Immigrant Policy & Anti- Immigration Rhetoric from 1994- 2020

NOV 1994- California
 In 1994, the "Save Our State" initiative was put on California's ballot to make it a requirement that schools, healthcare services, and any public assistance report anyone suspected of being an undocumented immigrant.

SEPT 2001- New York
 On September 11th, 2001 the United States faced the worst foreign attack on US-soil since Pearl Harbor. While this particular event is completely outside of my thesis, it is an event that perpetuated nativism, patriotism, and ultimately furthered anti-immigration rhetoric in the US.

2007-US SENATE
 The Comprehensive Immigration Reform Act of 2007 was in response to the failed attempts in 2005 and 2006 to grant amnesty to undocumented immigrants residing in the US, as well as increase legal immigration. This act, however, was not representative of the US public opinion and despite having bipartisan support in the Senate, the bill never passed

Trump Presidency- 2016-2020
 Trump based his presidential campaign off of the promise to "build a wall" between the US and Mexico. In 2017, the Trump Administration rolled out a plan to phase out DACA as a way to crack down on undocumented immigrants.

JULY 1999-California
 The ACLU announced on July 29, 1999 that the court ruled Proposition 187 to be unconstitutional and the federal government has exclusive authority in regards to immigration. This ruling did not eliminate the sentiment in CA that illegal immigration was the root of economic downturn.

MAR 2003- US
 In Nov 2002, the Homeland Security Act was passed in response to 9/11 and the call to protect our borders. On March 1st, 2003 U.S. Immigration and Customs Enforcement (ICE) opened its doors. While ICE may have represented a nation's response to protect its people, present day ICE represents family separation and unnecessary brutal force.

Obama Presidency: 2008-2016
 The Obama Administration was responsible for 5 million deportations. However, The Obama Administration was responsible for the implementation of DACA in 2012, which allowed for two - year grants that protected people who arrived here illegally as children from deportation

Global Health Implications and Future Directions

The disparities that exist in autism in the United States are detrimental. What is also detrimental is the fact that there is so much research happening for autism and the resources are being directed toward high-income countries with the focus still on white children. In the United States, there are multiple factors that contribute to disparities, I am only focusing on one influence. For people in lower-middle-income countries, their disparities persist due to a lack of research and a lack of resources. Directing all the research into HIC is structural violence. With autism rising as a global health concern, this disparity needs to be addressed on a global scale to support a population that faces stigma throughout all cultures.

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"Structural violence is one way of describing social arrangements that put individuals and populations in harm's way... The arrangements are structural because they are embedded in the political and economic organization of our social world; they are violent because they cause injury to people ... neither culture nor pure individual will is at fault; rather, historically given (and often economically driven) processes and forces conspire to constrain individual agency. Structural violence is visited upon all those whose social status denies them access to the fruits of scientific and social progress."
 - Paul Farmer, "Structural Violence and Clinical Medicine" p. 1687