The effects of the global health crisis on U. S. immigration policies: shifting political agenda-setting and the mobility crisis of immigrants

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Abstract
The continuing health crisis (COVID-19) reinforces a historical pattern in which partisan-elected officials engage as legislative policy entrepreneurs (LPE) and use the health crisis time as a policy window to advance specifically restricted agendas by (re)introducing immigration bills on the House and Senate. The current exploratory qualitative study utilizes the theoretical underpinning of Kingdon’s Multiple Streams Framework (MSF) to analyze the US House immigration bills from 2013 to 2021. The qualitative method of content relational analysis was applied in this research to capture the shifts and changes in (re)introduced immigration bills (n=904) in the US House of Representatives for the 113th, 114th, 115th, and 116th sessions. Capturing and examining the underlying tone, word choices, and proposed measures in these immigration bills during health and non-health crisis periods received special attention. The qualitative relational content analysis revealed three major themes: (1) During public health crises (Ebola, Zika, and the first two years of COVID-19), restrictive House immigration bills tend to rise sharply; (2) Elected representatives from the Southern States are more likely to introduce restrictive immigration bills during health crises; and (3) Restrictive immigration bills are more likely to receive partisan support (bill co-sponsors) during health crises. The findings emphasize the need for inclusive agenda-setting during health crises and provide light on adaptive measures for supporting underprivileged immigrant communities with increased access to healthcare and public support.

Keywords Immigration policy · Health crises · Agenda setting · Focusing events · Immigrant (im) mobility
Introduction

Immigration, incarceration, and deportation, as well as political rhetoric and perceived cultural stigma, can all prohibit immigrants from accessing healthcare during health crises. As of November 2021, the United States has 46.2 million immigrants (documented and undocumented), accounting for around 14.2 percent of the total population (Camarota and Zeigler 2021; Doshi et al. 2022; Lechuga et al. 2022). As the current administration of US President Joe Biden works toward an ‘equitable and compassionate’ immigration makeover, it is necessary to assess the influence of previous administrations and their introduced immigration policies/laws on the well-being of immigrants to inform equitable reformations. The rhetoric, framing, and consequences of global immigration policies have shifted dramatically during the last few decades. Refugees, asylum seekers, and documented and undocumented immigrants face increased restrictions and problems worldwide. Significant research papers uncover evidence that national immigration policies perpetuate disparity in migrant populations’ access to healthcare and public support services. Even though various research studies utilize different methods and approaches that establish that any crisis period particularly impacts the immigrant communities severely, there are insufficient studies that specifically focus on the language, underlying tones, the rhetoric of the immigration bills, and congressional policymaking tendencies during health crises in the US and how that historically impacted the well-being of the immigrants (Adida et al. 2020; Afzal 2021a, 2022; Alamillo et al. 2019; Doshi et al. 2022; Lechuga et al. 2022).

In addition, elected officials and politicians pursue more stringent and restricted immigration policies amid health issues that closely follow their political ideology, self-interest, and rising political career. Politicians and policymakers support these immigration policies with the goal of advancing their political careers and securing an influential position within their party (Gottlieb et al. 2020; Martinez et al. 2015; Massey and Pren 2012; Milner and Tingley 2011). The COVID-19 pandemic has reached the endemic stage by the middle of 2022: the virus is still pervasive, but much less deadly than it was in 2020, and causing relatively minor adjustments in sociocultural norms. It is anticipated that these endemic situations would go on during the course and fall, barring the emergence of brand-new, immunity-evading varieties (Biancolella et al. 2022; Dong et al. 2020; Leach et al. 2021; NY Times 2020; Paton 2022). Both documented¹ and undocumented immigrant communities worldwide experience an extra layer of scrutiny, lock-down, and restrictive access to healthcare resources due to their citizenship status (Hacker et al. 2015; Pertek and Pol 2021). During health crises, immigrant communities face additional barriers and hardships in accessing healthcare services more than their host communities due to their citizenship status. Some policymakers and politicians use this health crisis as a policy window² to

¹ Documented migrants refer to individuals with legal authorization to stay in a country (e.g., visa, I-20, green card, citizenship) and undocumented migrants do not have legal paperwork to stay in a country (Schaeffer and Kahsai 2011).

² Policy window refers to unpredictable and unexpected openings to push and advance certain policies and agendas during a crisis (e.g., Health Crises, Pandemics, War, etc.) (Rose et al. 2020).
advance more restrictive immigration policies and measures that adversely affect the mobility and access to immigrants’ resources. Therefore, the current study explores themes and rhetoric in the US House immigration bills from 2013 to 2021. The four completed Senate sessions, 113th, 114th, 115th, and 116th, were analyzed using a particular inductive qualitative research method of relational content analysis\(^3\) to capture the significant and recurring themes, rhetoric, and potential implications on the immigrant communities during health crises. The following section explores the theoretical framework for the current study.

**Theoretical framework**

The American political scientist John Kingdon introduced the term “Policy Entrepreneurs.”

The scholarship on policy entrepreneurs has significantly expanded since John Kingdon pioneered the notion in his book *Agendas, Alternatives, and Public Policies* (Kingdon 1984). Policy Entrepreneurs are influential community members who use unexpected situations as an opportunity to promote and advance policies that could be beneficial for personal and collective gains for a specific group. Policy Entrepreneurs function as change agents in the public policy arena. Elected representatives, think tanks, activists, NGOs, CEOs, and politicians are significant examples of how policy entrepreneurs could advance their agendas and policies by using unprecedented times as their policy window. Shearer (2015) emphasizes the importance of having political access and leadership quality among their peers to become influential policy entrepreneurs and accordingly states:

> Through opportunistic or incremental actions, policy entrepreneurs attempt to influence the policy process and its outcomes. Their success in the policymaking process has been associated with the convergence of behavioral traits, institutional factors, network position, and political capital. Policy entrepreneurs have received little study in low- and middle-income country policy research despite observations of individualized decision-making, informal institutions, and the unequal distribution and exercise of power in policymaking (46–47).

Prominent Public Policy scholar Mintrom expands the theoretical framework and functionalities of the policy entrepreneurs in both agenda-setting and policy change (Mintrom 1997; Mintrom and Vergari 1998). The policy entrepreneurs are political actors, and they advance their works in three stages. Figure 1 outlines the three steps of the policy entrepreneur’s working principle (Afzal 2021a, 2022).

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\(^3\) Exploratory relational content analysis is the process by which qualitative researchers investigate a specific field of social science and public policy by gathering and examining open-ended content analysis from a selection of documents. Following that, researchers concentrate on important repeating themes and discovering reciprocal links based on various geopolitical and/or socioeconomic aspects. The current study uses an inductive qualitative technique to analyze immigration bills, leaving as much flexibility and breadth as possible to incorporate any new themes and notions (Columbia Public Health 2020; Kleinhekssel et al. 2020; Mitchell 1967).
The current study analyzed the U.S. House Representatives and its immigration bills, specifically interested in bills proposed during the Ebola, Zika, and COVID-19 virus outbreaks. The elected U.S. House Representatives are termed legislative policy entrepreneurs (LPE) because of their unique ability to introduce a bill with co-sponsors in the House (Weissert 1991). Weissert (1991) captures the importance of the expertise, policy experience, and party positions of the legislative policy entrepreneurs and states:

It identifies policy entrepreneurs over several sessions of one state legislature to assess the changing nature of legislative entrepreneurship. Finally, it compares the standing of two groups of legislators associated with salient issues: those who have exhibited persistence and expertise-policy entrepreneurs—and those who have not—policy opportunists. The expectation is that policy entrepreneurs will be viewed as more effective than policy opportunists and that both will be viewed as more effective than other legislators (263).

Several research studies focus on legislative policy entrepreneurs’ roles and impacts on shaping socioeconomic policies and how they influence and advance policies during unprecedented and crisis periods (Afzal 2022; Bakir and Gunduz 2020; Camarota and Zeigler 2021; Roberts and King 1991; Rose et al. 2020; Weissert 1991). When elected officials (U.S. House Reps for this study) have more expertise and experience identifying the policy window to push and advance House bills, they tend to get more bill co-sponsors (Bratton and Rouse 2011). Additionally, legislative policy entrepreneurs have shown the necessary skills, knowledge, and capability to frame and advance bills that encourage their peers to co-sponsor the proposed immigration bills during crisis moments (policy window). The following section discusses the role of elected House representatives during health crises, agenda-setting, (re)introducing immigration bills, and how these activities affect the immigrant community.

**Fig. 1** The steps of the political entrepreneurship in agenda-setting and policy change
Immigration policies during health crises

Immigration policies are a collection of a state’s rules, regulations, and best practices that specifically address human beings’ transit through the border, living circumstances, and access to resources in the host nation (Feller 2006; Matlin et al. 2018; Perez 2015; Staeheli et al. 2012). These (re)introduced immigration policies on the House floor also address their right to remain in the state, work, reside, use government and local resources, and participate in politics. Immigration policies introduced by legislators and politicians range from restrictive to accommodating, and these policies are very situational and contextual. The introduced House immigration bills also directly depend on the current socioeconomic and sociopolitical climate (Martinez et al. 2015).

The current study focuses on immigration bills (re)introduced during the four sessions of the US congress starting from the 113 to 116th session, which took place as the Ebola, Zika, and the first two years of the ongoing COVID-19 health crisis spread in parts of the Global South. The current study conducted an in-depth relational content analysis of the 910 introduced immigration bills from 2013 to 2021. Analyzing the House immigration bills from the last four congress sessions facilitated the process of comparing how earlier and ongoing health crises impacted the narrative, rhetoric, and proposed measures in immigration bills. Finally, the inductive qualitative analysis method greatly facilitated and provided adequate breadth and space to include all the recurring themes and rhetoric in House immigration bills from the last four senate sessions without any restrictions. The current study mainly focused on the shifts in tones, rhetoric, language, themes, and potential implications through the relational content analysis of the introduced immigration bills. As research on the COVID-19 pandemic and immigration policies continues, there would be significant value in broadening research beyond the COVID-19-immigration policy relationships with the current health crisis and understanding health crisis-immigration policy relationships across various health crises such as Zika and Ebola. The following section, therefore, outlines the purpose of the current study.

Purpose of the current study

Interpersonal and contextual disparities exist in how different health crises affect immigration policy and community well-being. It is also possible that various potential actions and ramifications will be included in proposed immigration bills during the beginning, middle, and ending of the health crises. For example, in the early weeks/months, public health precautions are more stringent, and there is little known about the virus. In the past, harsher rhetoric and measures through immigration bills had a more significant negative impact on the immigrants’ well-being and movement. The current exploratory study sought to ascertain how House immigration legislation affected and structured immigration policies and the role of immigrants amid health crises. The shifting tones, themes, and rhetoric
of immigration bills were examined by the 113th (bills = 140), 114th (bills = 211), 115th (bills = 268), and 116th (bills = 285) Senate sessions, which were consistent with previous conceptualizations of the role of House immigration bills and immigrants’ well-being during health crises (Afzal 2021a, 2022; De Trinidad Young and Wallace 2021).

**Methods**

**Sample**

The current study selected and analyzed all the introduced and reintroduced immigration bills in the US House of Representatives from 113 to 116th. A House bill could be reintroduced in the same or later Congress sessions if the bill does not perform accordingly and could not pass the committee recommendation to advance to the senate and further progress (Barbanell 2021; Canady 2019; Goodhart and Hudson 2018; Lee 2020). A total number of 904 immigration bills were analyzed in the current study. These immigration bills were either introduced or reintroduced in the US House of Representatives between 2013 and 2021, covering four complete Senate sessions. Table 1 outlines all the immigration bills and their current official statuses from the House of Representatives (GovTrack 2021).

Table 1 explores the current official statuses of the (re)introduced immigration bills from 113 to 116th sessions of the Congress, including the House and Senate, as of February 24, 2022 (Congress 2022; GovTrack 2021). Although many immigration bills were introduced and/or reintroduced on the House floor, not every bill passes the House and advances to the Senate or becomes enacted as a law. For this reason, the current study mainly focused on introduced immigration bills rather than passed legislation for the qualitative data analysis. Another exciting fact to consider while analyzing House bills is that the total number of bills in any policy area could simultaneously have multiple statuses. For instance, an immigration bill that

| Status of the immigration bill | 113th | 114th | 115th | 116th |
|-------------------------------|-------|-------|-------|-------|
| Introduced                    | 128   | 196   | 242   | 257   |
| Orders reported               | 8     | 8     | 11    | 8     |
| Passed house (Senate next)    | 2     | 6     | 12    | 15    |
| Passed house (House next)     | 0     | 0     | 0     | 1     |
| Agreed to (Simple resolution) | 0     | 0     | 2     | 0     |
| Enacted (Signed by the president) | 2   | 0     | 1     | 4     |
| Enacted (Including by incorporation into other bills) | 4 | 3     | 5     | 9     |
| Failed cloture                | 0     | 1     | 0     | 0     |
| Vetoed and override failed in house | 0 | 0     | 0     | 0     |
| Vetoed and override failed in senate | 0 | 0     | 2     | 0     |
| Total bills (House)           | 140   | 211   | 268   | 285   |
successfully passed House and went to Senate then passed Senate and came back to House for a final check-up before sending it to the President for being enacted and/or being incorporated into related bills would still get a count on Table 1. Therefore, the total number of bills in specific areas would not match the current statuses in any congress session.

**Research design and data collection process**

The current study collected the full text of all the immigration bills from 2013 to 2021, which covered the four full US Congress sessions. The current research study is divided into five stages. Figure 2 explores and summarizes the five stages of the research work for the current study sequentially.

Both Congress and GovTrack websites were thoroughly screened to ensure data consistency and verify the number of immigration bills introduced or reintroduced on the House floor irrespective of their status (2013–2021). A judicious combination of screening methods was applied to ensure no duplicate entries of the same immigration bill were included in the selected bills for further relational content analysis utilizing project selection and avoiding scope creep (Afzal 2014). The total number of bills also included reintroduced bills with new identifiers. The House bills start with (H.R.), whereas the Senate bills start with (S). The following diagram outlines the first stage of the immigration bills selection, screening procedure, excluded bills (if any), and to ensure all the bills were included accordingly for the current study utilizing the 2020 Prisma flow diagram (Page et al. 2021).

Here, Fig. 3 outlines the step-by-step selection and screening process for all the immigration bills for the current study. When an introduced House bill is not enacted as a law in a senate session either directly signed by the President or incorporated

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**Fig. 2** The detailed research design for the current research study
with different associated bills, the (re)introduced bill is considered “dead.” That bill may be reintroduced in subsequent or later congress sessions with a new identifier number reframed focus and different bill co-sponsors. However, it is not necessary to reframe and revise the previously introduced bill to reintroduce it in a later Congress session. Analyzing both Congress and GovTrack websites and performing the screening process, a total of 904 immigration bills were selected for the current study for further relational content analysis.

Data analysis

All the selected House immigration bills \( (n = 904) \) for the current study are written in American English, accessible online, and include all the pertinent information accordingly (Congress 2022; GovTrack 2021). The current study investigated how health emergencies affected previously introduced House immigration measures. Furthermore, all immigration legislation was examined in numerous developing themes, emphasizing how the bill would affect immigrants and their well-being. The researcher used an open-ended strategy to monitor how the planned
policies and actions will affect immigrants during health emergencies, which for this present study include Ebola (2015–16), Zika (2016–17), and the first two years of COVID-19 (2020–21). The study explored how the proposed immigration reform would affect the health of immigrants in the United States amid these specific health crises.

For this study, a traditional qualitative relational content analytic technique was chosen. Content analysis in research has a long and rich history, extending back to the 18th century in Scandinavia. Content analysis was initially employed as an analytic approach in the United States around the twentieth century. Initially, researchers employed content analysis in their studies as either a qualitative or quantitative method. Eventually, content analysis was used primarily as a quantitative research tool, with text data classified into separate groups and statistically defined. In the late twentieth century, content analysis became a more mainstream qualitative systematic method for policy and healthcare academics to discover gaps and restrictions to fair access to resources for the disadvantaged community (Barcus 1961; Duncan 1989; Hsieh and Shannon 2005; Morgan 1993; Rosengren 1981).

By examining, interpreting, evaluating, and documenting direct information retrieved from published House immigration legislation, the current study adopts a qualitative analytic technique to identify emergent themes during health and non-health crises (2013–2021). The primary goal of the data analysis was to avoid imposing any unique predetermined ideas, thoughts, or understandings on the data analysis procedure and simultaneously strictly follow the structural technique of inductive qualitative relational content analysis (Hsieh and Shannon 2005; Morgan 1993).

Table 2 explores the fundamental concept of three emerging themes for the current study. The researcher earned appropriate qualitative research training through their advanced graduate work. Consistent with the traditional qualitative content analysis procedure, the researcher immersed themselves into the content of the House immigration bills ($n=904$) to identify emergent themes. The top three themes emerged from the selected immigration bills. The three categories are Restrictive Approach (RA), Open Approach (OA), and Internal Administrative Communications (IAC).

| Major themes                          | Evaluation criteria                                                                 |
|---------------------------------------|-------------------------------------------------------------------------------------|
| Restrictive approach (RA)             | Does the bill propose measures and actions restricting the movements and access to resources for the immigrant communities? |
| Internal administrative communications (IAC) | Does the bill only propose measures to communicate with related government agencies to advance internal communication that does not affect immigrants’ movements and well-being? |
| Open approach (OA)                    | Does the bill propose measures and actions that support and advance the immigrants’ well-being? |
Staying candid during qualitative content analysis might well be challenging for qualitative researchers. For example, suppose the researcher discovered themes without numbering them or noting their recurrent patterns. In that case, the researcher may fall into the trap of having predetermined preconceptions about how to capture emergent themes from the bills. To prevent such qualitative method flaws, the researcher kept meticulous records of the findings, bill numbers, simultaneous sessions, and the surrounding sociopolitical atmosphere. The researcher followed the prescribed procedure for keeping track of the frequency to promptly capture occurrences (Elo and Kyngä 2008; Forman and Damschroder 2007; Miles and Huberman 1994).

Figure 4 outlined significant themes from 2013 to 2021 and categorized the findings based on congress sessions. The deep color shade in Fig. 3 outlines the number of restrictive immigration bills that were (re)introduced in the House of Representatives between 2013 and 2021. The medium color shade outlines all the immigration bills (re)introduced in the House that mainly addressed internal communication with different agencies to enhance mutual communication and accountability. It speeds up the internal workflow between government agencies for budgeting and policymaking purposes. Finally, the light color represents the open approach toward immigrants and immigration policies during the 113th, 114th, 115th, and 116th Congress sessions on the House of Representatives. The following section will discuss the findings and results from the current qualitative relational content study.
Results and findings

The qualitative relational content analysis of all the House immigration bills from 2013 to 2021 shows that during the peak of Zika and Ebola (114th Session), the rate of restrictive immigration policies was exceedingly high (46%). The ongoing COVID-19 did not follow a similar trend and the rate of introduction of restrictive immigration policies during the 116th session was 22%. The rate of introducing restrictive immigration bills in the US house of representatives decreased by more than 50% between Zika and Ebola health crises versus the ongoing COVID-19.

The make-up of the congress and majority of the House and Senate also played a significant role here. Back in the 114th Congress session, when Ebola and Zika happened, House and Senate had a major political shift. Republican Party gained control of the Senate and House for the first time since the 109th Congress in the 2014 midterm elections. The 114th Congress began with the most substantial Republican majority since the 71st Congress of 1929–1931, with 248 House and 54 Senate seats. As of 2021, this is the most recent congressional session in which Republicans and Democrats held any seats in New Hampshire and Nebraska, respectively, and the most recent term in which Republicans had a Senate seat in Illinois (Hickey 2018; Karolyi 2017; Turner and Fox 2019). The following geospatial map outlines the states of the elected House Representatives who introduced House immigration bills during the 114th Congress session and their themes on being restrictive, internal official communication, or being more supportive and open to facilitating the immigrants.

The found themes and rhetoric of 114th House immigration bills were more divisive than the other three sessions covered in the current study. The immigration bills focused on stricter immigration policies and stringent border control or more inclusive access to recourses and facilitating immigrants’ well-being. Figure 4 explores the themes, and proposed measures through (re)introduced House bills in the 114th Congress sessions. The lighter blue color signifies the restrictive approaches and measures through the introduced bill. In contrast, the medium blue color signifies the internal official communication to enhance mutual access and accountability. The deep blue color signifies the most open immigration bills that facilitate accessing resources and health services during 114th Congress sessions. Analyzing the themes and rhetoric from the House immigration bills from the last four sessions brings up another meaningful notion: how do the elected House Representatives act in (re)introducing house immigration bills? The following section explores the notion of the bill introducing behavior from the original Previously-confederate States.

The previously-confederate states and immigration bills

The Previously-confederate States of America (CSA), usually known as the Previously-confederate States or simply the Confederacy, was a North American secessionist republic that existed from February 8, 1861, to May 9, 1865. The Confederacy was made up of US states that declared secession and fought against
the US during the subsequent American Civil War. Eleven states declared independence from the Union, giving the CSA a commanding lead, South Carolina, Mississippi, Florida, Alabama, Georgia, Louisiana, Texas, Virginia, Arkansas, Tennessee, and North Carolina. While the Union army occupied Kentucky and Missouri, both states proclaimed secession and had full representation in the Previously-confederate Congress (Astor 2017; Holyfield et al. 2009; McDaniel 2015; O’Connell 2020).

Furthermore, after analyzing the themes and rhetoric of immigration bills from 2013 to 2021, another emergent theme surfaced to the researcher: the elected House Representatives from the CSA might act differently from the House Representatives from other states. After comparing the emergent themes and rhetoric from all the House bills for the specified period for the current study \((n = 904)\), the emergent themes suggest that the elected House representatives from the thirteen previously-confederate states tend to introduce more restrictive approaches through their bills and proposed measures compared to the rest of the House representatives from other states. The following geospatial map (Fig. 5) captures the themes and rhetoric of the immigration bills and the states the bill introducer represents in that session.

Figure 6 captures the emergent themes from all the immigration bills analyzed using the current study’s qualitative relational content analysis method. Although, during the 114th Congress session, when the Republican party held the majority both in Senate and House, the elected House representatives from the thirteen Previously-confederate states were introducing harsher and more restrictive immigration bills compared to the overall duration of the current study. Moreover, the immigration bills introduced by the Texas and Alabama representatives are cumulatively less restrictive compared to only the 114th Congress session, when both the Zika and
Ebola diseases were at the peak of public attention and CDC coverage (Adida et al. 2020; Carter 2016; CDC 2020b, 2021; Vlachakis et al. 2018).

At the same time, most of the House immigration bills introduced by the representatives of the Previously-confederate state such as South Carolina, Mississippi, Florida, Georgia, Louisiana, Texas, Virginia, Arkansas, Tennessee, North Carolina, Kentucky, and Missouri stayed more restrictive and less facilitatory toward immigrants, immigration policies, and access to resources. The content relational analysis of house immigration bills \((n = 904)\) reveals that the elected representatives not from the Previously-confederate states introduced the open approaches toward immigration policies and access to resources for the immigrants at a much higher rate than their counterparts.

As the Fig. 7 outlines, the elected House representatives from the CSA and non-CSA are equally concerned and motivated to improve and enhance the internal communication between various government agencies to improve the current US immigration situation. Furthermore, the House representatives from non-CSA states have introduced (80%) of the immigration bills that proposed open approaches toward immigration policies and immigrants’ access to resources compared to CSA House representatives (20%). The generational narratives, interest group preferences, and political rhetoric have historically influenced the tendency to introduce immigration bills with restrictive implications from the elected representatives from the Previously-confederate states both in the house and Senate (Afzal 2021b, c; Astor 2017; Bin Afzal 2019; Bin Afzal and Daniel Cravens 2017; Holyfield et al. 2009; McDaniel 2015; Mudde 2012).

Subsequently, the non-CSA house representatives introduced (42%) of the House immigration bills that proposed restrictive approaches through more visa scrutiny, lengthier visa processing time, increased detention, and travel
restrictions. The CSA House representatives proposed (58%) of the restrictive immigration bills during the last four Congress sessions (2013–2021). Both CSA and non-CSA elected representatives were equally motivated. They introduced bills that would improve and enhance communication between the government agencies to ensure faster processing times and better overall infrastructure.

**Themes on health crises and immigration bills**

According to the current research and relational content analysis method, the period of health crises saw a sharp rise in introducing more restrictive immigration bills than in non-health crisis periods. Specifically, during Ebola and Zika health crises and the 114th Congress session, the House saw a sharp rise in introducing restrictive immigration policies (47%) compared to any other sessions analyzed in the current study. Table 3 explores the number of bills that explicitly

| Congress sessions/health crises | Ebola | Zika | COVID-19 | Ebola | Zika | COVID-19 |
|---|---|---|---|---|---|---|
| 113th | 11 | 0 | 0 | 4 | 0 | 0 |
| 114th | 8 | 20 | 0 | 0 | 0 | 0 |
| 115th | 7 | 11 | 0 | 1 | 0 | 0 |
| 116th | 20 | 5 | 800 | 0 | 0 | 10 |

Table 3 The detailed overview of house bills, house immigration bills, and explicit mention of Zika, Ebola, and/or COVID-19
mentioned Zika, Ebola, or COVID-19, how many of these bills are listed and categorized under the immigration section and discusses immigration policies.

Table 3 outlines the numbers of House bills that explicitly mentioned health crises (Zika/Ebola/COVID-19) in their texts and how many of these (re)introduced bills focused on immigration policies and were appropriately listed under the immigration section (Congress 2022; GovTrack 2021). A higher number of House bills explicitly mentioned Ebola, Zika, and/or COVID-19 during the current study period (2013–2021). But only a few house bills listed under the category of Immigration explicitly mentioned Zika, Ebola, and/or COVID-19 in their bill texts (Congress 2022; GovTrack 2021). Only five bills explicitly mentioned Ebola and were specifically introduced under the immigration section of the House.

H.R. 5692 (113th) was introduced by Republican Representative Ted Poe from Texas on November 12th, 2014. H.R. 5692 did not receive any co-sponsors but explicitly mentioned visa restrictions and other restrictive immigration approaches to combat the spread of Ebola. A first portion of the H.R. 5692 (GovTrack 2021) bill states,

Due to the imminent danger to the public health and according to section 1 of the Act entitled An Act to regulate the issue and validity of passports, and for other purposes, approved July 3, 1926 (22 U.S.C. 211a), commonly known as the Passport Act of 1926, the Secretary of State shall designate all passports as restricted for travel to or for use in Guinea, Liberia, and Sierra Leone (H.R. 5692, pg-1).

The emergent themes of restrictive immigration bills are more visible during health crisis periods when representatives utilize the health crisis as a policy window to advance restrictive immigration policies and measures. During any health crisis, the immigrant communities and migrant employees are more vulnerable, underserved, and lack access to resources due to their intersectional identities, perceived social stigma, fear of legal prosecution, deportation, and extended detention (Afzal 2021a, c, 2022). Some of the (re)introduced House immigration bills tend to exacerbate the degree of vulnerability for the immigrant communities by proposing more visa restrictions and extended detention and deportation during health crises instead of improving access to healthcare and associated resources to help and support the immigrants’ well-being.

The current study’s emerging themes reveal that health crises are associated with increased restrictive House immigration bills, political rhetoric, and policy
debates both on Media and House floor. The findings of this study might be utilized to present ideas such as the effect of context and background on immigration bill rhetoric and its implications for immigrants in immigration studies, diversity, equity, and inclusion research, public policy, and American Politics courses. Instructors should make it apparent to students that while researching immigrants and studying immigration policy amid public health crises, they should recognize and acknowledge the variety of the bill introducers’ intersectional identities, generational narrative, political ambition, and constituency preferences.

Reliability and validity of the current study

The researcher for the current study acknowledges that coding errors will never be eliminated; they can only be reduced. A reliable margin of 80 percent is considered adequate (Krippendorff 2004). The researcher follows three criteria to ensure the reliability of the current study: accuracy, stability, and reproducibility (Berelson 1952; Busha and Harter 1980; Elo and Kyngäs 2008; Hsieh and Shannon 2005; Pool 1959; Ullström et al. 2014). The text of the immigration bills has consistently followed how the proposed measures might impact the movement, access to resources, and well-being of the immigrants. Secondly, the data analysis process followed the same coding style and procedure to ensure that the data could be reproduced with the same coding scheme and finding themes.

To maintain the data analysis procedure’s validity, the researcher followed three steps: categorization, similarities between implications and findings, and generalizability. The researcher followed the same coding scheme to identify the emerging themes from the current study. The restrictive approach in House immigration bills mainly focuses on how the bills propose measures and how these measures affect the immigrants’ well-being and mobility. The second emergent theme of internal official communication focuses on the house immigration bills that address communication, accountability, and interoperability issues between government agencies. Finally, the open approach House immigration bills emphasize improving and bettering access to resources and immigrants’ well-being. The researcher followed a consistent coding scheme and data analysis procedure so that the study could be reproduced to check for validity and reliability.

Limitations of the current study

There are several advantages to qualitative relational content analysis; for example, the methodology allows for direct examination of communication utilizing the introduced Immigration legislation bills. Furthermore, the relational content analysis leaves plenty of room for qualitative and quantitative analysis in the latter stages of the research. The in-depth content relational analysis also gave rich
historical and cultural insights into the House Immigration legislation across time and ample room for the researcher to feel closer to the material through selection, inspection, analysis, and coding of the emergent themes.

However, the researcher noted that qualitative content relational analysis is time-intensive. There is a risk of human oversight, specifically while the relational analysis is used to attain a higher degree of understanding. The researcher employed the same coding process and interpretation criteria to find and code emergent themes from the selected immigration legislation. Furthermore, the researcher assessed noteworthy events throughout the bill introduction to provide more relevant and relatable background to the selected immigration legislation. Furthermore, because the text and context are distinct, the researcher used manual relational content analysis to avoid automated and computational mistakes.

**Concluding discussions and future research**

Regardless of the limitations, the present study’s in-depth inductive qualitative research discovered that the elected legislators’ generational sociopolitical narrative and geospatial affiliation profoundly impact their introduced House immigration bills. The rhetoric and underlying tones of these (re)introduced House immigration bills exacerbate during health crises. Martinez et al. (2015) investigated this ongoing deep sociopolitical issue and discovered a “direct relationship between anti-immigration policies and their effects on access to health services” (p. 1), and this study adds to emerging knowledge. Furthermore, most published research on immigration bills during health crises has concentrated primarily on a few immigration bills rather than capturing a large number of immigration bills over multiple Senate sessions to discover and capture the historical trend and probable underlying contributing elements and motivators (Hill et al. 2021; Martinez et al. 2015; Wilson and Stimpson 2020; Zhang et al. 2021).

Therefore, it is of foremost importance to continue with these research topics to ensure the safety and well-being of the immigrant communities, specifically during health crises. It is also important to acknowledge that “immigration status can impede access to health care across levels of the social ecology” (Hill et al. 2021, p. 2). The current study found that different people interpreted the effects of the restrictive House immigration measures differently, especially amid health crises. Furthermore, the linkages between (re)introduced House immigration bills and bill introducers are investigated using a qualitative inductive method with an open lens. The current study’s emerging themes reveal that health crises are associated with increased restrictive House immigration bills. During the height of a health crisis, House lawmakers from Previously-confederate states are more likely to support restrictive immigration bills. This study focused on House immigration bills during health crises vs. non-health crises. The current study’s results and understandings potentially give practical implications and future research initiatives that could benefit vulnerable immigrants in the preliminary stages of analogous health crises.
The findings of this study might be utilized to present ideas such as the effect of context and environment on immigration bill rhetoric and its implications for immigrants in immigration studies, diversity, equity, and inclusion research, public policy, and American Politics courses. Instructors should make it apparent to students that while researching immigrants and studying immigration policy amid public health crises, they should recognize and underline the variety of the bill introducers’ intersectional identities, political ambition, and constituency preferences. Again, this analysis examined House immigration bills in the United States from 2013 to 2021. The pandemic is ongoing—COVID-19 incidences are increasing, and immigrants and marginalized families continue to face inequities in accessing healthcare and public support services (Berkowitz et al. 2020; CDC 2020a; Hill et al. 2021; Lechuga et al. 2022).

The current research utilizes insightful inductive qualitative research discovered that the elected legislators’ generational sociopolitical narrative and geospatial affiliation profoundly impact their introduced House immigration bills. During the height of a health crisis, House lawmakers from Previously-confederate states are more likely to support restrictive immigration bills. This study focused on House immigration bills during health crises vs. non-health crises. Continued research on immigration policies and the well-being of immigrants is needed to reduce inequity and ensure collective socioeconomic development. Most enormously, undocumented immigrant workers face severe difficulties and adversities due to lack of legal papers and policy accommodations to support their health and well-being during health crises. The overall situation perpetually worsens due to repeated policy discussions in US Congress and media coverage. The ongoing pandemic continues to have a restrictive impact on immigrants and their families’ access to healthcare, jobs, government assistance, and social acceptability. Climate crises exacerbate the effects, and undocumented migrant workers become more vulnerable and underserved during health crises (Afzal 2020, 2021c). Emerging research indicates that immigrants are subjected to intensified stressors and constrained access to external resources for support (Afzal 2021a, 2022). The rhetoric and underlying tones of some immigration bills and subsequent open discourse intensify and worsen the overall situation for immigrants amid health crises.

Therefore, a more robust, flexible, and adaptive research direction might be to utilize a immigrants’ contribution and benefits approach in impending public health crisis research to identify how the immigrants continue to impact positively even during health crises to emphasize their needs for accessing equitable healthcare and public support services. The immigrants’ contribution and benefits approach aim to humanize the immigrants in their host communities, meaningfully highlight the socioeconomic benefits, and promote a shared value of caring for each other to reach betterment. The current study strongly recommends further research that would require disseminating fact-based knowledge in academic environments so the future generation would be more mindful and inclusive in functioning as elected officials and lawmakers. The proposed framework and strategies could be a way to profoundly support the underserved immigrants during health crises through targeted interventions and equitable approaches and more accommodating and supporting immigration bills to facilitate positive public discourse.
Supplementary information

The researcher accessed the full text of all the introduced House immigration bills through Congress and GovTrack websites. The inductive qualitative relational analysis, coding, themes, and dataset are available and requested from the Corresponding Researcher.

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Data availability The datasets generated during and analyzed during the current study are available from the corresponding researcher on reasonable request.

Declarations

Conflict of interest The researcher has no relevant financial or non-financial interests to disclose.

Ethical approval The current study utilizes publicly available information and is exempt from review concurrent with the Kent State University IRB guidelines.

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