

# COVID-19 and decreased asylum access: mother work, precarity and preocupación among Central American asylum-seekers in Los Angeles

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## ABSTRACT

In 2020, the public health response to the COVID-19 pandemic and the U.S. government's increased legal restrictions on asylum-seekers acted together to increase social, economic and legal precarity in the lives of Central American asylum-seeking mothers in Los Angeles. In this context, these asylum-seeking mothers discussed their intersectional precarities through the idiom of distress "preocupación", which signalled the concerns, worries, and fears they had in relation to the daily mother work of raising their children. Using ethnographic data collected during the COVID-19 pandemic, I examine how the intersectional precarities Central American asylum-seeking mothers faced necessitated protecting their children from their own preocupación. Through this, I argue that by using the analytic of preocupación it is possible to see exactly how racial and legal barriers to care increase precarity in the lives of asylum-seeking mothers in the U.S., and the detrimental impact that intersectional precarities have on asylum-seekers' mother work today.

**ARTICLE HISTORY** Received 6 July 2021; Accepted 10 May 2022

**KEYWORDS** COVID-19; asylum-seekers; intersectionality; precarity; mother work; preocupación

## Introduction

In June of 2020, I was messaging back and forth with a Salvadoran woman named Sara. She told me "*me siento preocupada*" (I feel worried), then elaborated: "We are always afraid because we are not legally here and something can happen any day. With what happened before with the protests ... It's pretty dangerous. It's scary to go outside ..." She was talking about early June, when COVID-19 was spreading rapidly through Los Angeles County. Simultaneously, word was spreading on social media that Immigration and

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This article has been corrected with minor changes. These changes do not impact the academic content of the article.

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Customs Enforcement (ICE) was infiltrating the local Black Lives Matter protests looking for undocumented migrants to deport. She later added:

I'm a little *preocupada* because of this disease [COVID-19] ... it's a lot of worry, and it affects me a lot ... I can't walk in the streets with the kids ... The truth is that if we go outside, we go with the fear that something will happen to us.

Although Sara and her family were in the legal process of seeking asylum, she worried that their lack of official documentation could cause their deportation if they had a run-in with any law enforcement. Likewise, her family did not have health insurance, which meant that an illness such as COVID-19 could ruin them financially – increasing her family's economic and health precarity and causing increased “preocupación”<sup>1</sup> in Sara's everyday life. In her effort to avoid all potential risks to their sociopolitical positionality, Sara appeared “preocupada” (worried) that her ability to care for her children was constrained since she was unable to safely take them outside their home for exercise or to receive their regular medical check-ups under the dual threats of COVID infection and deportation.

Like Sara, I found during my fieldwork in Los Angeles that Central American asylum-seeking mothers from Guatemala, Honduras and El Salvador tried to avoid anything that might jeopardize their asylum cases; while also managing daily precarities surrounding expenses, health, and the needs of their children. As Butler has noted, precarity is a “politically induced condition” wherein the state denies the value of life for certain populations who are deemed a threat to the wider society (Butler 2009, 25). In the United States (U.S.), the state and by extension U.S. immigration law create precarity for Latinx<sup>2</sup> asylum-seekers by limiting their access to resources and denying them legal, economic and social support. As Sara's vignette demonstrates, 2020 saw two intersecting crises that increased the precarity in Central American asylum-seeking women's lives in Los Angeles and impacted their ability to care for their children: the COVID-19 pandemic, and the U.S. government's effective dismantling of the asylum system (Jordan 2020; Miller 2020; Pierce, Bolter, and Selee 2018). Together these extended the time in which asylum-seekers remained undocumented, and therefore ineligible for most support services, while they waited for their asylum case to be settled in court.

In the U.S., the precarity that impacts Latinx asylum-seekers is significantly fuelled by structural racism – the processes through which society propagates racial discrimination through “mutually reinforcing systems of housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice”, which “reinforce discriminatory beliefs, values, and distribution of resources” against racialized groups (Bailey et al. 2017, 1453). This disproportionately keeps racialized asylum-seekers at risk of legal exclusion through legislative procedures that hinder access to visas

and the ability to regularize their legal status (Bacong and Menjívar 2021; Dick 2020). This structural racism is visible in the racialized U.S. immigration law that has constructed migrant “illegality” as a means to both limit pathways to documentation and to socially exclude, subjugate and oppress racialized migrant groups (De Genova 2002, 427).

Sara’s experience above demonstrates how the prevalence of structural racism has become more discernable under the intersection of COVID-19 and the hostile asylum system, which together limit Central American asylum-seeking mothers’ ability to secure regular income and live without fear of deportation, directly impacting the ways they mother their children and creating opportunities for *preocupación*. Here, I use intersectionality in line with Crenshaw (1991) to recognize how systems of oppression surrounding gender, race, and citizenship status are inextricably linked and work together to produce inequality for marginalized groups in the U.S. By using an intersectional framework, it is possible to view the multiple precarities that shape migrant women’s lives, which structure and maintain the various forms of inequality and discrimination they experience (Erel and Reynolds 2018).

These intersecting precarities highlight the legal violence in U.S. immigration law, which causes “harmful effects ... that can potentially obstruct and derail immigrants’ paths of incorporation” (Menjívar and Abrego 2012, 1383). This legal violence is visible through the state of liminal legality – the “gray area between [the] legal categories” of documented and undocumented – that asylum-seekers<sup>3</sup> inhabit while they await the outcome of their asylum applications (Menjívar 2006, 1000). Lacking any formal documentation, asylum-seekers are at risk of legal repercussions including imprisonment and deportation if they commit any crimes or have a negative run-in with law enforcement or federal immigration enforcement officers (Menjívar and Abrego 2012). The concepts of legal violence and liminal legality are useful for understanding the ways in which state-sanctioned precarity in asylum-seekers’ legal statuses permeates many aspects of their lives, limiting their job stability and housing options and impacting their family’s needs (Menjívar 2006; Menjívar and Abrego 2012). However, in this article I want to expand our understanding of the impact that liminal legality and legal violence have on asylum-seeking women’s lives in combination with the gendered, racialized discrimination that is inherent in U.S. legal, health and social service systems. To do this, I use the term “legal precarity” to highlight the intersectional states of precarity that asylum-seekers live in when they are excluded from state support and basic care services through denial of legal status.

Legal precarity is specifically experienced by Central American asylum-seekers as a group of racialized migrants who are both legally within the process of applying for asylum, but also “illegal” due to their lack of official documentation. While waiting to receive official asylee status they experience

legal violence because they are technically undocumented and they are not eligible for any federal benefits such as food assistance, housing assistance or healthcare beyond basic emergency care, yet they are still held accountable to U.S. criminal law (Abrego and Menjivar 2011; American Immigration Council 2020; Menjivar and Abrego 2012; Carney and Krause 2020). Legal precarity is especially salient for Central American asylum-seeking women, who experience heightened precarity compared to male asylum-seekers due to patriarchal gender dynamics, specifically those in Guatemala, El Salvador and Honduras that facilitate gender-based violence against women, attempt to confine women's activities to the home, and the heteronormative expectation that they will be their children's primary caregiver (Menjivar 1999; Pareda 2016; Schmidt and Buechler 2017). This, in combination with the structural racism inherent in U.S. social and health systems, deepens the impact of legal precarity on asylum-seeking women's everyday lives. Due to these, Central American asylum-seeking women in the U.S. have less capacity and freedom to navigate the bureaucratic and financial barriers which limit their access to perinatal healthcare, social services and economic support following the birth of their children (Vesely, Letiecq, and Goodman 2019).

In Los Angeles, I found that legal precarity and mother work coincided as mothers used the Spanish idiom of distress<sup>4</sup> "*preocupación*" to acknowledge and discuss the complex legal and socioeconomic barriers that they had experienced since arrival in the U.S., which had become more onerous during the COVID-19 pandemic. Like Sara, other asylum-seeking mothers in my research used the phrases "*me siento preocupada*" (I feel worried) or "*estoy preocupada*" (I am worried) to discuss their anxieties over their immigration status, health, and economic circumstances. Embedded in the word "*preocupación*" is the word "*ocupación*", which is defined as work or labour. Within *preocupación*, it is possible to see not only how women discuss and navigate the intersectional precarities in their everyday lives, but also the ways in which their mother work engenders (pre)ocupación, a worry about being able to do the work of mothering their children well. Here I forward Ruddick's (1989) definition of maternal work, or "mother work" to discuss the labour women perform when caring for their children in order to ensure survival by providing for their basic material and physical needs, while also nurturing their children and educating them on social norms. In this article I use *preocupación* as a theoretical analytic instead of an idiom of distress in order to make visible the ways in which legal and racial barriers engender precarity, which not only cause but perpetuate *preocupación* in Central American asylum-seeking mothers, directly impacting their ability to care for their children.

In the remainder of this article, I highlight how Central American asylum-seeking mothers in Los Angeles use *preocupación* to make visible the

injustices they face surrounding their race, gender, and migrant status, and how they hide that preocupación from their children. For asylum-seeking mothers in the U.S., the intersectional causes of preocupación are intimately tied to how they are able to carry out their mother work and to their socio-political positionality as asylum-seekers, preocupación that was further exacerbated by the intersecting risks of the COVID-19 pandemic and the unfriendly immigration environment visible through the asylum system. I conclude by arguing for new socioeconomic policies that acknowledge how state, local and federal systems in the U.S. cause and maintain legal precarity in asylum-seekers' lives; and call on public health and social service workers to dismantle the roots of legal precarity, creating openings for Central American asylum-seeking mothers to carry out their mother work free of the preocupación they currently face.

### **Methods and participants**

This article is part of an ethnographic study on Central American migrant motherhood, maternal healthcare systems and conceptions of future health in Los Angeles County, U.S. Ethical approval was received from the AISSR Ethical Advisory Board, University of Amsterdam. During fieldwork, I worked as an informal volunteer with a local non-profit refugee centre that offered legal support, community support and financial assistance to refugee children and their families in Los Angeles. Weekly, I attended and observed the women's support group for asylum-seeking mothers. I spent the majority of my time with nine asylum-seeking mothers from El Salvador, Guatemala and Honduras. All were awaiting the outcome of their asylum applications; and they had been in the U.S. between six months to five years. Six of my informants had migrated to the U.S. with their partners, and three were single mothers. All of the women spoke Spanish as their primary language, and all data collection was completed in Spanish and translated by the author. I have already introduced Sara. Later, we will meet three other asylum-seeking mothers: Karla, a single mother from Honduras with an infant son and 10-year-old daughter whose partner had been deported to Mexico. Beatriz is a married mother with one son from Guatemala who lives with her husband and son. Maria Jesus is a married mother of three from El Salvador who lives with her husband, teenage son and 5-year-old daughter, while her adult child remains in El Salvador.

Methodologically I completed "patchwork ethnography" (Günel, Varma, and Watanabe 2020) combining participant-observation, digital interviewing, text conversations, and media documentary research that was collected both in-person in the field and digitally from home between November 2019-September 2020. In-person informal conversations took place at the refugee

centre before, during, and after the weekly women's groups. This was possible before the COVID-19 pandemic began in March, and again from July-September 2020 once the refugee centre had been able to re-open under COVID-19 regulations. Between March and July 2020 conversations took place over the phone, on WhatsApp, by text, or when I delivered food boxes to the women's homes from the refugee centre. The primary source of data for this article is based on interviews and multiple informal phone or text conversations held from March to September 2020. When approached, women were given the option of an in-person, outdoor and physically distanced interview or a text interview through a secure texting application. All chose to have text interviews (two sent voice recording answers to my text-based questions) because this allowed them the ease and flexibility to respond to questions when they had time around their daily childcare obligations and duties in the home or at work.

Virtual methods of data collection allowed me to maintain contact with the women throughout the pandemic and helped to facilitate rapport between us. For example, the women were able to reach out to me at any time that they needed help or needed to speak with someone, which in some cases allowed us to interact more than if I would have only seen them 1–2 times a week at the refugee centre. Throughout my fieldwork the women appeared to maintain a perception of me as a PhD student/volunteer for the centre and not a friend, which in combination with the limitations to our in-person contact caused by the pandemic impacted the depth of data I was able to receive. However, I was told on many occasions that the women felt a sense of "confianza", or trust, with me. Even though I myself am not of Central American decent or a mother, the women felt comfortable coming to me with concerns and questions, and this appeared to help them feel comfortable answering my questions and discussing personal topics related to my research.

## **Background**

### ***U.S. history and asylum-seeker precarity***

The U.S. has a long history of xenophobia against various racialized migrant groups, which has led to policies and laws that create and maintain precarity in migrant lives. From past discrimination against southern European and Chinese migrants in the nineteenth century to Latin American and Middle Eastern migrants today, there has been a constant ideological war waged between the concept of the U.S. as a country welcoming to immigrants and nativist concerns for sustaining a pure (i.e. White and English speaking) American racial and cultural identity through the illegalization of racialized migrant groups (De Genova 2002; Ngai 2004; Sáenz and Douglas 2015;

Wasem 2020). This nativism has been hardened into a fear on the part of White America that Latinx migrants cannot and will not assimilate into mainstream U.S. society, making them a threat to the continuity of White U.S. culture (Sáenz and Douglas 2015).

Leo Chavez discusses this “Latino threat narrative” as the assumptions and implicit “truths” that are pervasive in American media, government and social services that view all Latinx people as illegal immigrants who are “... part of an invading force from south of the border that is bent on reconquering land that was formerly theirs ... and destroying the American way of life ...” (Chavez 2013, 3). This threat narrative is visible in the discrimination that Latinx people receive when seeking health care and employment; and in the way that Latinx bodies and movements are racialized and policed by law enforcement and ICE officers, who undertake concentrated targeting of Latinx communities as they enforce laws that criminalize migrants and those racialized as “Mexican” – i.e. non-White Latinx groups (Aysa-Lastra and Cachón 2015; Bacong and Menjívar 2021; De Genova 2002; Ngai 2004; Viruell-Fuentes, Miranda, and Abdulrahim 2012). More specifically, gender has played into the racialization and illegalization of Latinx women by stereotyping their sexuality, reproduction rates and fertility as “threats to the nation” (Chavez 2013, 73), while fears of Latinx state dependency and criminality are conferred onto Latinx reproducing bodies as tools to legitimize the use of punitive migration and legal policies on women (Escobar 2016).

The racialization and undervaluing of Latinx bodies began with the American imperialism into Latin America for access to resources in the nineteenth century, which resulted in the displacement and racialization of Indigenous communities as inferior across Central America and Mexico (Gómez 2021). U.S. intervention into Central American politics and economics has continued into the twenty-first century: government agencies and U.S.-based corporations have forced labour and displacement of indigenous peoples for U.S. economic gain, funded CIA-backed military coups, financially supported civil wars that displaced communities and destroyed economies, denied asylum for Central Americans fleeing war, and forced neoliberal economic policies onto Central American states, which have together caused and sustained the unstable and unequitable socio-political and economic frameworks in Central America that continue to push asylum-seekers to migrate to the U.S. today (Carranza 2007; Tirman 2015).

Alongside these destabilizing sociopolitical and economic actions has been the gender-based violence that women are likely to face throughout Central America. They have been targeted due to their gendered positionality in patriarchal societies that consider it a man’s right to commit violence against women in order to control them (Pardilla 2016). This was a reality experienced by multiple women I worked with, one of whom told me “I feel safer here ... You weren’t allowed to speak against your husband in my

country. Here they don't put up with domestic violence". However, migrant women's central role in the social reproduction of Latinx cultural norms and expectations of *familismo*, *respeto* and collectivism<sup>5</sup> have made them targets of legal violence as part of the Latino threat narrative, as these socio-cultural norms contradict U.S. neoliberal capitalism (Chavez 2013; Schmidt and Buechler 2017; Vesely, Letiecq, and Goodman 2019). Additionally, while Latinx migrant women seek out opportunities for their children to integrate into U.S. society in order to assure their children a better future, they must also worry about managing the stigmas and social expectations placed upon them as undocumented migrant-woman-minority by a social system that is hostile towards racialized migrants (Ayón et al. 2018; Carranza 2007; Vesely, Letiecq, and Goodman 2019). This situation deepens women's precarity and has particularly impacted the ways in which women care for and raise their children, both before and after migration (Carranza 2007; Vesely, Letiecq, and Goodman 2019).

Upon arrival to the United States, and contrary to the actions of the federal government, in California asylum-seekers are eligible for more benefits than the federal minimum. The state of California claims to have policies and procedures that are more inclusive of undocumented migrants and asylum-seekers who are between documentation statuses. These include California's status as a "sanctuary state" that refuses to collaborate with ICE to aid in deportations, and funding for more comprehensive social and medical services above the basic federal requirements (Haas Institute 2016; LACOIA 2021; North 2019). For example, in California the state has funded full Medi-Cal (California's public health system) coverage for any person under the age of 26 and all perinatal people up to 60 days post-partum, including undocumented migrants (DPSS 2021). This runs contrary to the federal government's very minimal emergency health coverage for undocumented migrants (Healthcare.gov 2021).

The largest concentration of both Guatemalan and Salvadoran communities in the U.S. are found in California's Los Angeles County – both recent migrants and those who arrived during the periods of political upheaval in their home countries in the 1980s and 1990s (Menjívar 2006). Many Central American asylum-seeking families in Los Angeles live in socio-ethnic enclaves throughout the County where other Central American migrants have settled and where new arrivals often end up living due to easier access to affordable shared housing that does not require documentation, proximity to local refugee centres and other social services, and a large Spanish-speaking population (Popkin 2005).

As a major spot of arrival and settlement for Central American migrants and refugees, Los Angeles County has adopted particularly migrant-friendly laws in addition to California state laws (LACOIA 2021), which appear to be attempts at minimizing the harmful effects of federal immigration law. Due to this, in Los Angeles it is possible to see the areas of tension that exist



between migrant-friendly policies and federal prohibitions for illegalized migrant groups. There is a complex system of allowances and limitations that asylum-seekers face as they attempt to navigate life in Los Angeles to access what is available to them and their children while avoiding any risky behaviour that could lead to deportation or negatively impact their asylum applications. Additionally, there are still many barriers to a healthy and safe life that undocumented migrants, particularly those racialized as non-White, experience daily.

For example, many migrant enclaves lack infrastructure and access to affordable single-family housing. In conversations and when observing my informants' attempts to secure services, I learned that major Internet providers would not supply service in the areas many asylum-seekers lived, saw how potential landlords required bank statements and proof of income to rent an apartment, and heard how public transportation was cumbersome – especially for mothers who were travelling with children. Likewise, while Medi-Cal has clinics and hospitals spread throughout Los Angeles County, since federal law only covers emergency health care for undocumented migrants (Healthcare.gov 2021), asylum-seeking adults often lack comprehensive health coverage. They are also ineligible from purchasing additional health insurance on the federal insurance marketplace due to further restrictions in U.S. federal law that prohibit undocumented migrants from accessing federally funded systems (Carney and Krause 2020; LACOIA 2021).

Although Los Angeles County and California do offer some reprieve from federal exclusions, structural racism across social and health-based services, federal anti-immigrant practices and the undocumented status of asylum-seekers still coincide to constrain their mobility, capacity to work, and ability to access most health and social support services (Gurrola and Ayón 2018). U.S. immigration policies have been purposefully created to target racialized groups (Sabo et al. 2014; Viruell-Fuentes, Miranda, and Abdulrahim 2012), and they continue to deepen migrants' intersectional precarities by suffusing local law enforcement, social services and public health agencies with implicit biases when engaging with low-income racialized communities. This has been found to create feelings of discrimination, distrust, and fear for those migrants who attempt to access the few services that are available to them (Luibhéid, Andrade, and Stevens 2018; Morey 2018; Philbin, Hatzenbuehler, and Hirsch 2018). This is especially burdensome for mothers who are responsible for navigating access to social and health services for their families (Abrego and Menjívar 2011; Ayón et al. 2018).

### ***Asylum-seeker precarity: Trump administration and the pandemic***

In the U.S., legal precarity for all racialized migrants – including asylum-seekers – was heightened under the Trump administration between 2017

and 2020, when the government took steps to severely curtail the influx of migrants by implementing regulations that purposefully underfunded and undermined the immigration and asylum system. This included limiting the daily number of migrants allowed to cross the border to request asylum from inside the U.S., significantly decreasing the annual number of refugee admissions for those who requested asylum from outside the U.S., limiting the number of judges who worked asylum court cases, enacting the Migrant Protection (“remain in Mexico”) Protocols, and the increase in raids on migrant communities by Immigration and Customs Enforcement (ICE) officers (American Immigration Council 2020; Center for Reproductive Rights 2020; Shear and Kanno-Youngs 2019). These policies increased socioeconomic exclusion for those who lawfully sought asylum from within the U.S. by prolonging the asylum process, denying access to work permits, and enacting nearly impossible rules against proving the need for asylum (American Immigration Council 2020; Pierce, Bolter, and Selee 2018; Wasem 2020).

When the COVID-19 pandemic began, the Trump administration used the pandemic as a justification to deny asylum-seekers’ and migrants’ constitutional rights in the name of minimizing the risk that COVID-19 posed to the nation. This furthered legal precarity and legal violence for migrant communities across the U.S. through executive actions that increased deportations and immigration raids on migrant communities and cut funding for the asylum system; meanwhile the president incited and passively supported xenophobic discrimination against racialized migrant groups (Garcini et al. 2020; Wasem 2020). Under these governmental changes, undocumented migrants who were already ineligible for most social support programmes experienced heightened economic precarity when they lost access to paid work as the economy ground to a halt. While COVID-19 relief benefits through the CARES Act were available for those who had completed tax returns in 2019 (Crandall-Hollick 2020), the asylum-seeking families I worked with, like many other undocumented migrants, did not have formal income or tax identification numbers, making them ineligible for receiving these benefits.

During this time Los Angeles County and the state of California offered local emergency relief programmes for a small number of undocumented residents (Newsom 2020). Unfortunately, the phone-based application system was hard to access and there had not been enough money put into this fund to cover the actual community need (Koran 2020). Due to their lack of eligibility for financial support, the asylum-seekers I worked with had to prioritize work outside the home whenever possible, regularly receiving less pay as the pandemic gave some employers an excuse to underpay their undocumented staff. However, the closure of schools meant that mothers often had to stay at home with their children, further constraining their ability to work and help supplement their family’s income.

In addition, health precarity increased due to the lack of access asylum-seekers had to comprehensive health care coverage. Most families could only afford to live in multi-family homes, increasing their risk of COVID-19 infection. Those with employment risked their own health working jobs that often lacked protections from viral exposure. These inequalities were visible in the COVID-19 mortality rate. As of July 2020, the Latinx mortality rate in Los Angeles was four times higher than the White mortality rate (LACDPH 2020). The higher mortality rate for the Latinx population demonstrated that this population, which overwhelmingly lived in close quarters, worked in essential services and lacked access to affordable medical care, would likely continue to be more negatively impacted by COVID-19 than other socio-demographic groups (Gómez 2021; LACDPH 2020).

During this time, the immigration courts also closed, citing concern for public safety. This further limited asylum-seekers' legal rights to services and protection (Farfán-Santos 2019; Orsini et al. 2022), and led to prolonged liminal legality for the asylum-seekers who were waiting for legal protection from deportation, work permits, access to the formal economy, federal benefits, health insurance and affordable housing that was often only available to those who could prove formal employment and legal status. This was particularly arduous for Central American asylum-seeking women, as evidenced in recent U.S.-based research which has shown that racialized, marginalized mothers have been particularly negatively impacted by COVID-related economic and healthcare policy changes. They have lost social and economic support and experienced intensifying health inequalities while taking on the additional burden of full-time childcare (McClosky et al. 2021; Mooi-Reci and Risman 2021). In the next section, I will discuss how the intersecting precarities Central American asylum-seeking mothers faced during the pandemic deepened their *preocupación* as they attempted to navigate the asylum, healthcare and social service sectors in Los Angeles.

### **Mother work with(in) *preocupación***

*"Estoy muy preocupada"* Karla said to me in a text message.

I just keep crying and crying. What will we do if he can't send us money? I can't pay the rent. I can't sleep ... I am already suffering so much with the [asylum] appeal and taking care of my two children ... it is not safe to have contact with strangers right now either with the coronavirus.

Later, Karla called me after her children had gone to sleep, explaining "I don't want what happens to me to affect them". Karla was expressing her *preocupación* with her current situation by discussing her sleeplessness and her concern that her partner, who had been deported to Mexico and was intermittently sending her money, could be killed or get sick, which would

further deepen her economic worries. She was also managing an appeal to her denied asylum case, worrying about her own potential deportation and concerned about how she would pay her rent after losing her job as a house cleaner due to the pandemic. She didn't like to talk about what was happening in front of her 10-year-old daughter Cristina because she was "very sensitive" to Karla's *preocupación*. Karla wanted her children to be happy, noting that "If I'm not well, it affects them". I asked her what she meant, and she explained that because she spent a lot of time with her children as their sole caretaker, "they absorb everything that happens to me" and she felt that it was her responsibility to make sure her children were okay by keeping her *preocupación* to herself.

Like Karla, Maria Jesus also tried to hide her *preocupación* from her children during the pandemic. She told me:

I've suffered a lot from anxiety and stress ... I've also been unable to sleep and I'm *preocupada* that I might have this disease or something ... I believe that it is key for me to protect [my children] from my *preocupación* ... because they also feel sad when they see me down, so I try to be strong in front of them so that they see that I feel good ... I sacrifice myself even though I feel bad about doing ... the [chores] in the house when I don't feel well.

In April, Maria Jesus had difficulty getting medication to manage her chronic hypertension as the public health system shifted towards COVID-19 management and delayed non-essential medical care from March through May. These delays and a COVID-19 scare she had while suffering spring allergies caused her to worry for her family's health too. She told me in June that she had really struggled during this time with her mental health as well as feeling physically unwell. Her status as an undocumented asylum-seeker meant that her very limited medical coverage did not give her access to mental health care that might have alleviated some of her *preocupación*. While she claimed to feel better mentally after regaining some of her physical health, she retained an ongoing fear about leaving her house, worried about transmission of the virus, and what would happen to her children if she died.

In line with the argument made by Suerbaum (Forthcoming), the intersectional precarities that Central American asylum-seeking mothers like Karla and Maria Jesus were navigating created situations in which their children became aware of their mothers' *preocupación*, which subsequently led to the children displaying fear, worry, and concern for their mothers. As noted by Ayón et al. (2018), the impact that restrictive U.S. policies and racialized discrimination have on migrant mothers directly impacts their children by "trickling down" through their hindered capacity to parent or be emotionally available to their children (2018, 880, 886), and putting the children's well-being at risk by introducing fear into their lives (Philbin and Ayon 2016). This has been shown to specifically impact refugee and asylee families by

creating a feedback loop of emotional responsibility between mothers and children, which causes further distress for mothers as they see their children struggle under the burden of legal precarity (Suerbaum [Forthcoming](#)).

In my research, protecting their children from their personal *preocupación* appeared to be a core aspect of Central American asylum-seekers' mother work, as mothers attempted to hide their *preocupación* from their children to mitigate the negative effects their intersecting precarities could have on the children. For Karla and Maria Jesus, *preocupación* stemmed from fear of a potential COVID-19 infection, but also from the pandemic's impact on their asylum cases, their capacity to work and the pressure to fulfil their roles as mothers as they struggled to appear cheerful and keep up with their daily mother work while battling *preocupación*. Their desire to hide their *preocupación* from their children appeared to be a means in which to limit the burdens they felt their children faced as asylum-seeking migrants, and a way to hide the unpredictable impact that their legal precarity had on aspects of their everyday lives: their health, income, and future capacity to become documented. While this type of asylum-seeker mother work has been discussed by Philbin and Ayon (2016) and Suerbaum ([Forthcoming](#)), I would argue that this effort to protect their children was even more emotionally difficult for Central American asylum-seeking mothers in Los Angeles during the pandemic because of the heightened intersectional precarities caused by COVID-19, structural racism and their legal precarity, which together made hiding their *preocupación* from their children almost impossible.

These heightened intersectional precarities were visible in another conversation I had with Karla, whose legal precarity limited her family's access to health services. This was evident in her encounters with the public health system:

For an undocumented person there are few resources ... I have not been able to go to the doctor, my [perinatal] medical coverage expired and with [the pandemic] going on it is more difficult.

When I asked her to further explain the difficulties she faced accessing health care she replied:

All three of us had a doctor, but Cristina and I had to give up [our medical coverage] and I couldn't renew it. And I haven't been able to take Emilio to the pediatrician because they changed the one I had and the clinic is not close by and it's difficult for me [to get there].

In July, this became problematic when her one-year-old son became ill. A few hours after leaving for the clinic she messaged me again, saying "They didn't take care of me. It's by appointment, and I have to return to the clinic to take a package of intake papers". Not only had Karla, who did not have access to a

car, taken an Uber which she couldn't afford to take her son to the new doctor that Medi-Cal had allocated her, but she had not been able to see anyone due to the new pandemic regulations which demanded appointments as an infection control measure. Additionally, Karla's daughter was eligible for full health insurance under California state law, however, Karla was unaware of this and assumed that when she lost her own postpartum Medi-Cal coverage, that Cristina had to give up her doctor as well. Lacking effective communication with the clinic or any aid organizations that could explain their rights as asylum-seekers, she was unaware of her daughter's legal right to care.

Legal precarity was also visible in Beatriz's experiences navigating access to nutrition and education for her son. One day in May, she messaged me to vent her frustration at the lack of support she was getting from the refugee centre, which was scrambling to re-allocate services during the pandemic. Beatriz wrote:

The situation is difficult for everyone ... My husband has had to work for less money to not lose his job, and so that we can eat ... You know how *preocupada* I was that I needed the Internet for my son's school and I couldn't get it for free ... everything is so horrible and the situation is so desperate ... Maybe the [refugee center] think that giving us food is enough, but it's not enough, most of what they give us is pure fruit, which of course is very good but I have a 6-year-old boy who needs other things, I can't support him with just fruit and rice ... and when we finally manage to pay the rent, and I see that I can't afford to buy more food or pay the other expenses it's sad.

Beatriz was *preocupada* because she could not provide her son with the nutrition nor the school support that he needed – two situations that she had little control over with her family's limited income caused by their lack of legal work permits and the racist exclusionary practices in Los Angeles zoning laws, which ensured that the free Internet offered through the school district was not available in the neighbourhood many Central American asylum-seekers lived in (Pastor and Segura 2020). She later shared with me that she was feeling some regret about her family's life in the U.S. because of all the barriers they faced that hindered their capacity to work and access local health and social services. However, she added that they could not consider returning to Guatemala because of problems with the gangs there, which increased her fear of the ICE presence in Los Angeles and the subsequent rise in deportation raids that started during the summer of 2020.

Overall, the COVID-19 pandemic highlighted the discrimination against racialized migrant groups within Los Angeles' social services and the health system, which – far from offering easily accessible support to asylum-seeking migrants – maintained and reinforced economic, linguistic and infrastructural barriers to accessing care. This caused further *preocupación* for mothers like Karla and Beatriz, whose mother work to ensure their children's

health and mental wellbeing was interrupted by the legal precarity which convoluted and/or barred their access to health and infrastructure systems.

Far from being unaware of the intersectional precarities in their lives, my informants signalled their worry, anxiety, and fear about the various concerns they had surrounding health, income, legal status, and their children through their use of the idiom of distress “preocupación”. Through the analytic of pre-ocupación, it was possible to see the ways in which the various precarities Central American asylum-seeking mothers faced regarding the COVID-19 pandemic and the U.S. asylum system created barriers between the expectations they held for how they would carry out their mother work and how they could realistically navigate maintaining health and securing their family’s survival while living with multiple intersecting precarities. By sharing the ways that their preocupación impacted their mother work with me as the researcher after they lost access to in-person community support when the refugee centre closed, not only did they have another outlet<sup>6</sup> that allowed them to minimize their preocupación in front of their children, but the ways in which various governmental, social and health services systems worked to deepen legal precarity for asylum-seekers also became clear.

Returning to Butler (2009), we see that the politically induced condition of legal precarity continues to deny the value of life for Central American asylum-seekers by hindering their access to documentation and basic infrastructure. As a form of legal violence, the denial of equal access to services that maintain life and documentation which would allow families to live free of the fear of deportation engenders preocupación in Central American asylum-seeking mothers. And I would also add that through preocupación the myriad ways in which legal precarity has been exacerbated by the COVID-19 pandemic become visible, highlighting the fact that while precarity in general may impact all marginalized populations (Butler 2009), when combined with an event such as a global pandemic, the constraints of legal precarity place an inordinately high burden on asylum-seeking mothers, whose racialized, gendered positionality mean that they are expected to navigate the social and health-based services available to their families regardless of their legally precarious situation.

Preocupación also reveals the ongoing tension in the U.S. between migrant inclusion and the conservative U.S. perception of Latinx migrants as undeserving of public support and benefits. This tension, based in the “Latino threat narrative” (Chavez 2013), allows for the reproduction and cementing of racial hierarchies in local and national sentiments; and has had a visible influence on policies and practices in California that negatively impact Latinx access to healthcare, high-paying jobs and education (Chavez 2013; Jones Gast, Okamoto, and Nguyen 2020).

As discussed by Abrego and Menjívar (2011), this reflects the legal violence against migrants in the U.S. that, due to federal immigration laws, limits migrant women from fulfilling their roles as mothers by placing them both within the law as they navigate the asylum system and outside the law as they navigate everyday life without documentation.

Although the state of California claimed to be offering more accessible services and aid to legally precarious groups in 2020 through small funds and by waiving fees for COVID-19 medical costs (Koran 2020; Newsom 2020), through *preocupación* a different reality becomes visible. The intersection of U.S. asylum law and subsequent legal limitations coupled with the disruptive outcomes of the pandemic further closed doors to asylum-seekers – both literally and figuratively. This reified the negative impact of structural racism on mother work for asylum-seeking mothers and directly heightened their overall precarity as they attempted to navigate care from their undocumented positionality. Additionally, these intersectional precarities increasingly limited the likelihood that mothers would access what services were available to them out of fear of deportation, frustration and lack of affordable transportation – unless it was absolutely necessary for their children.

## Conclusion

This paper adds an intersectional understanding to past research in both Los Angeles County and the U.S., which has found that a majority of migrants, regardless of documentation status, avoid using health and social service programmes due to past discrimination and fears that any use of social or medical services could risk their capture by ICE (Cornelius and Holmes 2020; Gemmill et al. 2019; Luibhéid, Andrade, and Stevens 2018; NPWF 2018). Through this article, I have shown that Central American asylum-seeking mothers' willingness to attempt and access healthcare and social services for their children even when this involved a risk of deportation and costly trips across town not only signalled their dedication to their mother work by putting their children's needs before their own, but also demonstrated that any lack of service utilization was not an avoidance of care. Instead, it demonstrates that even within more "migrant-friendly" spaces such as Los Angeles, the barriers to accessing care and resources steeped in structural racism increase asylum-seeking mothers' economic, health and legal precarity.

Through the analytic of *preocupación*, I have demonstrated the impact that these intersectional precarities have on everyday mother work for gendered, racialized migrant groups such as Central American asylum-seeking mothers. Through *preocupación* it is also possible to see the ways in which the structural racism and legal precarity that gendered, racialized asylum-seekers face have been exacerbated by the COVID-19 pandemic. Intersectional precarities increase *preocupación* by undermining asylum-seekers'



capacity to access the care and services that are available to them and their children within the complex web of legal regulations in Los Angeles. This directly hinders their mother work by denying asylum-seekers a healthy and safe environment in which to raise their children and creates situations in which their children begin to feel and react to their mothers' *preocupación*. This feedback loop of *preocupación* further hinders mother work, as asylum-seeking mothers are forced to expend energy in protecting their children from their own *preocupación*, instead of finding ways to manage their legal precarity.

Knowing this, future policy work should acknowledge the role of intersectional precarities and *preocupación* in everyday mothering practices for racialized groups. In line with Erel and Reynolds (2018), I call for those working towards social, health and reproductive justice to acknowledge the ways in which race, class, gender and citizenship intersect to both cause and obscure legal precarity within the U.S. in order to maintain patterns of racialized inequality. By utilizing *preocupación* as a theoretical analytic in combination with Crenshaw's intersectionality framework (1991), it becomes possible to see the ways that intersecting precarities construct Central American asylum-seeking mothers' legally precarious racialized realities in Los Angeles. Through this, lawmakers can work towards removing the legal, economic and health-based barriers asylum-seeking mothers face which continue to foster *preocupación* and impact vital mother work in the U.S. today.

## Notes

1. A feeling of anxiety: a concern, worry or fear.
2. A gender-neutral term used to refer to people of Latin American cultural or ethnic identity in the U.S.
3. While asylum-seekers have the potential to become documented, they are considered undocumented by federal measurement during the asylum-seeking process. Due to this, the terms "asylum-seeker" and "undocumented migrant" are used interchangeably in line with the way that the asylum-seekers I worked with spoke about themselves as undocumented, and therefore lacking rights, while awaiting their asylum decision.
4. (Nichter 2010, 405), idioms of distress are "socially and culturally resonant means of experiencing and expressing distress" that marginalized women use to express their discontent in relation to political, economic, and social contexts in their lives (Briggs 1992; Yarris 2014).
5. *Familismo*: belief that the family is of upmost importance in society; *respeto*: expected deference based on hierarchical differences, e.g. age, gender and social class; *collectivism*: the dependence on the social group (Vesely, Letiecq, and Goodman 2019).
6. In addition to sharing their *preocupación* with me, the mothers also discussed self-care practices such as painting their nails, drinking calming teas and taking naps; as well as doing home improvement projects and relying on their faith to help them manage their *preocupación* in front of their children.

## Acknowledgements

Thanks to my special issue colleagues for your feedback and support in the development of this article; and especially the special issue editors Magdalena Suerbaum and Laurie Lijnders. Thanks to Emily Yates-Doerr, Tina Harris, Bregje de Kok, Andie Thompson, Shivani Kaul and the University of Amsterdam Writing Care group for feedback, editing advice and support. Thank you to my informants in Los Angeles, who so graciously opened their lives up to me for my research. Lastly, thank you to the anonymous reviewers who gave such valuable feedback and suggestions on this article.

## Disclosure statement

No potential conflict of interest was reported by the author(s).

## Funding

This publication is part of the Future Health project funded by the European Research Council (ERC) under the European Union's Horizon 2020 research and innovation programme [grant agreement no. 759414].

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## References

- Abrego, Leisy J., and Cecilia Menjivar. 2011. "Immigrant Latina Mothers as Targets of Legal Violence." *International Journal of Sociology of the Family* 37 (1): 9–26.
- American Immigration Council. 2020. *An Overview of U.S. Refugee Law and Policy*. Washington, DC: American Immigration Council.
- Ayón, Cecilia, Jill T. Messing, Maria Gurrola, and Dellanira Valencia-García. 2018. "The Oppression of Latina Mothers: Experiences of Exploitation, Violence, Marginalization, Cultural Imperialism, and Powerlessness in Their Everyday Lives." *Violence Against Women* 24 (8): 879–900.
- Aysa-Lastra, Maria, and Lorenzo Cachón, eds. 2015. *Immigrant Vulnerability and Resilience Comparative Perspectives on Latin American Immigrants During the Great Recession*. Cham, Switzerland: Springer.
- Bacong, Adrian Matias, and Cecilia Menjivar. 2021. "Recasting the Immigrant Health Paradox Through Intersections of Legal Status and Race." *Journal of Immigrant Minority Health* 23: 1092–1104. doi:10.1007/s10903-021-01162-2.
- Bailey, Zinzi D., Nancy Krieger, Madina Agénor, Jasmine Graves, Natalia Linos, and Mary T Bassett. 2017. "Structural Racism and Health Inequities in the USA: Evidence and Interventions." *Lancet* 2017 (389): 1453–1463.
- Briggs, Charles L. 1992. "'Since I Am a Woman, I Will Chastise My Relatives': Gender, Reported Speech, and the (Re)Production of Social Relations in Warao Ritual Wailing." *American Ethnologist* 19 (2): 337–361.
- Butler, Judith. 2009. *Frames of war: When is Life Grievable?* London: Verso Books.

- Carney, Megan A., and Keegan C. Krause. 2020. "Immigration/Migration and Healthy Publics: The Threat of Food Insecurity." *Palgrave Communications* 6: 93.
- Carranza, Mirna. 2007. "Mothering Through Acculturation: Reflections of Salvadorian Mothers in Canada." *Journal of the Association for Research on Mothering* 9 (2): 86–96.
- Center for Reproductive Rights. 2020. *Pregnant Immigrants and Asylum Seekers During COVID-19: U.S. Government Abuses at the Border and Beyond*.
- Chavez, Leo R. 2013. *The Latino Threat Constructing Immigrants, Citizens, and the Nation, Second Edition*. Stanford: Stanford University Press.
- Cornelius, Wayne A., and Seth M. Holmes. 2020. "ICE Needs to Stand Down – For Everyone's Good." *The Globe Post*, July 4. <https://theglobepost.com/2020/04/07/ice-coronavirus/>.
- Crandall-Hollick, Margot. 2020. "COVID-19 and Direct Payments to Individuals: Summary of the 2020 Recovery Rebates/Economic Impact Payments in the CARES Act (P.L. 116-136)." *Congressional Research Service* Ver 11: 1–5. [www.crs.gov](http://www.crs.gov).
- Crenshaw, Kimberle. 1991. "Mapping the Margins: Intersectionality, Identity Politics, and Violence Against Women of Color." *Stanford Law Review* 43 (6): 1241–1299.
- De Genova, Nicholas. 2002. "Migrant 'Illegality' and Deportability in Everyday Life." *Annual Review of Anthropology* 31: 419–447.
- Dick, Hilary Parsons. 2020. "Racializing Discourses of Illegality: Mexican and Central American Migration in the Time of Trump." In *The Oxford Handbook of Language and Race*, edited by H. Samy Alim, Angela Reyes, and Paul V. Kroskrity, 447. New York: Oxford University Press.
- DPSS. 2021. "Children and Families." Los Angeles County Department of Social Services. Accessed November 15, 2021. <https://dpss.lacounty.gov/en/health/children.html>.
- Erel, Umut, and Tracey Reynolds. 2018. "Introduction: Migrant Mothers Challenging Racialized Citizenship." *Ethnic and Racial Studies* 41 (1): 1–16.
- Escobar, Martha D. 2016. *Captivity Beyond Borders: Criminalization Experiences of Latina (Im)Migrants*. Austin: University of Texas Press.
- Farfán-Santos, Elizabeth. 2019. "Undocumented Motherhood: Gender, Maternal Identity, and the Politics of Health Care." *Medical Anthropology* 38 (6): 523–536.
- Garcini, Luz M., Melanie M. Domenech Rodríguez, Alfonso Mercado and Manuel Paris. 2020. "A Tale of Two Crises: The Compounded Effect of COVID-19 and Anti-Immigration Policy in the United States." *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(S1): S230–S232.
- Gemmill, Alison, Ralph Catalano, Joan A. Casey, Deborah Karasek, Hector Alcalá, Holly Elser, and Jacqueline M. Torres. 2019. "Association of Preterm Births Among US Latina Women With the 2016 Presidential Election." *JAMA Network Open* 2 (7): e197084.
- Gómez, Laura E. 2021. "Latinos and Structural Racism." *The American Journal of Bioethics* 21 (3): 83–85.
- Günel, Gökçe, Saiba Varma, and Chika Watanabe. 2020. "A Manifesto for Patchwork Ethnography." *Society for Cultural Anthropology*, June 9. <https://culanth.org/fieldsights/a-manifesto-for-patchwork-ethnography>.
- Gurrola, Maria A., and Cecilia Ayón. 2018. "Immigration Policies and Social Determinants of Health: Is Immigrants' Health at Risk?" *Race and Social Problems* 10: 209–220.
- Haas Institute for a Fair and Inclusive Society. 2016. *We Too Belong: A Resource Guide of Inclusive Practices in Immigration & Incarceration Law and Policy*. Berkeley: University of California. [haasinstitute.berkeley.edu/wetoobelong](http://haasinstitute.berkeley.edu/wetoobelong).

- Healthcare.gov. 2021. "Coverage for Lawfully Present Immigrants." Accessed December 21, 2021. <https://www.healthcare.gov/immigrants/lawfully-present-immigrants/>.
- Jones Gast, Melanie, Dina G. Okamoto, and Emerald T. Nguyen. 2020. "Making Requests: Filipina/o and Latina/o Immigrant Claims-Making and Racialization." *Ethnic and Racial Studies* 44 (7): 1211–1230. doi:10.1080/01419870.2020.1778174.
- Jordan, Miriam. 2020. "After a Pandemic Pause, ICE Resumes Deportation Arrests." *New York Times*, September 12.
- Koran, Mario. 2020. "'Band-Aid on a Chest Wound': California's Undocumented Relief Fund Sees Chaotic Start." *The Guardian*, May 20.
- LACDPH (Los Angeles County Department of Public Health). 2020. "Data Shows L.A. County Makes Continued Progress against COVID-19 – 31 New Deaths and 1,148 New Positive Cases of Confirmed COVID-19 in Los Angeles County." News Release 16 September 2020. Accessed November 5, 2020. <https://publichealth.lacounty.gov/phcommon/public/media/mediapubhpdetail.cfm?prid=2671>.
- LACIOIA. 2021. "Los Angeles County Office of Immigrant Affairs." Accessed March 24, 2021. <https://oia.lacounty.gov>.
- Luibhéid, Eithne, Rosi Andrade, and Sally Stevens. 2018. "Intimate Attachments and Migrant Deportability: Lessons from Undocumented Mothers Seeking Benefits for Citizen Children." *Ethnic and Racial Studies* 41 (1): 17–35.
- McClosky, Lois, Ndiadamaka Amutah-Onukagha, Judith Bernstein, and Arden Handler. 2021. "Setting the Agenda for Reproductive and Maternal Health in the Era of COVID-19: Lessons from a Cruel and Radical Teacher." *Maternal and Child Health Journal* 25: 181–191.
- Menjívar, Cecilia. 1999. "The Intersection of Work and Gender: Central American Immigrant Women and Employment in California." *American Behavioral Scientist* 42 (4): 601–627.
- Menjívar, Cecilia. 2006. "Liminal Legality: Salvadoran and Guatemalan Immigrants' Lives in the United States." *American Journal of Sociology* 111 (4): 999–1037.
- Menjívar, Cecilia, and Leisy J. Abrego. 2012. "Legal Violence: Immigration Law and the Lives of Central American Immigrants." *American Journal of Sociology* 117 (5): 1380–1421.
- Miller, Leila. 2020. "California's Indigenous Mexicans and Guatemalans Miss Vital Pandemic Information Due to Language Barriers." *Los Angeles Times*, May 1.
- Mooi-Reci, Irma, and Barbara J. Risman. 2021. "The Gendered Impacts of COVID-19 Lessons and Reflections." *Gender & Society* 35 (2): 161–167.
- Morey, Brittany N. 2018. "Mechanisms by Which Anti-Immigrant Stigma Exacerbates Racial/Ethnic Health Disparities." *American Journal of Public Health* 108 (4): 460–463.
- Newsom, Gavin. 2020. "Governor Newsom Announces New Initiatives to Support California Workers Impacted by COVID-19." *California Office of the Governor*, April 15. <https://www.gov.ca.gov/2020/04/15/governor-newsom-announces-new-initiatives-to-support-california-workers-impacted-by-covid-19/>.
- Ngai, Mae M. 2004. *Impossible Subjects: Illegal Aliens and the Making of Modern America*. Princeton: Princeton University Press.
- Nichter Mark. 2010. "Idioms of Distress Revisited." *Culture, Medicine and Psychiatry* 2010 (34): 401–416.
- North, Anna. 2019. "Immigrants are Skipping Reproductive Health Care Because They're Afraid of Being Deported." *Vox News*, July 22.
- NPWF. 2018. *Listening to Latina Mothers in California*. Washington, DC: National Partnership for Women and Families Issue Brief.
- Orsini, Giacomo, Sarah Smit, Jean-Baptiste Farcy, and Laura Merla. 2022. "Institutional Racism Within the Securitization of Migration. The Case of Family Reunification in

- Belgium." *Ethnic and Racial Studies* 45 (1): 153–172. doi:10.1080/01419870.2021.1878249.
- Pardilla, Ambar. 2016. "Patriarchal Power and Gender-Based Violence in Guatemala and El Salvador." *Global Majority E-Journal* 7 (1): 38–51.
- Pastor, Manuel, and Gary Segura. 2020. *No Going Back: Policies for an Equitable and Inclusive Los Angeles*. Los Angeles: USC Dornsife Equity Research Institute, Committee for Greater LA, and UCLA Luskin School of Public Affairs.
- Philbin, Sandy P., and Cecilia Ayon. 2016. "Luchamos por Nuestros Hijos: Latino Immigrant Parents Strive to Protect Their Children from the Deleterious Effects of Anti-Immigration Policies." *Children and Youth Services Review* 63 (2016): 128–135.
- Philbin, Morgan Morgan Flake, Mark L. Hatzenbuehler, and Jennifer S. Hirsch. 2018. "State-level Immigration and Immigrant-Focused Policies as Drivers of Latino Health Disparities in the United States." *Social Science & Medicine* 199 (2018): 29–38.
- Pierce, Sarah, Jessica Bolter, and Andrew Selee. 2018. *U.S. Immigration Policy under Trump: Deep Changes and Lasting Impacts*. Washington, DC: Migration Policy Institute.
- Popkin, Eric. 2005. "The Emergence of Pan-Mayan Ethnicity in the Guatemalan Transnational Community Linking Santa Eulalia and Los Angeles." *Current Sociology* 53 (4): 675–706.
- Ruddick, Sara. 1989. *Maternal Thinking: Toward a Politics of Peace*. New York: Ballantine Books.
- Sabo, Samantha, Susan Shaw, Maia Ingram, Nicolette Teufel-Shone, Scott Carvajal, Jill Guernsey de Zapien, Cecilia Rosales, et al. 2014. "Everyday Violence, Structural Racism and Mistreatment at the US-Mexico Border." *Social Science & Medicine* 109 (2014): 66–74.
- Sáenz, Rogelio, and Karen Manges Douglas. 2015. "A Call for the Racialization of Immigration Studies: On the Transition of Ethnic Immigrants to Racialized Immigrants." *Sociology of Race and Ethnicity* 1 (1): 166–180.
- Schmidt, Leigh Anne, and Stephanie Buechler. 2017. "'I Risk Everything Because I Have Already Lost Everything': Central American Female Migrants Speak Out on the Migrant Trail in Oaxaca, Mexico." *Journal of Latin American Geography* 16 (1): 139–164.
- Shear, Michael D., and Zolan Kanno-Youngs. 2019. "Trump Slashes Refugee Cap to 18,000, Curtailing U.S. Role as Haven." *New York Times*, September 26. <https://www.nytimes.com/2019/09/26/us/politics/trump-refugees.html>.
- Suerbaum, Magdalena. Forthcoming. "In Search of Legal Stability: Predicaments of Asylum-Seeking Mothers in Berlin." *Ethnic and Racial Studies*. doi:10.1080/01419870.2022.2074281.
- Tirman, John. 2015. *Dream Chasers: Immigration and the American Backlash*. Cambridge, Massachusetts: MIT Press.
- Vesely, Colleen K., Bethany L. Letiecq, and Rachael D. Goodman. 2019. "Parenting Across Two Worlds: Low-Income Latina Immigrants' Adaptation to Motherhood in the United States." *Journal of Family Issues* 40 (6): 711–738.
- Viruell-Fuentes, Edna A., Patricia Y. Miranda, and Sawsan Abdulrahim. 2012. "More Than Culture: Structural Racism, Intersectionality Theory, and Immigrant Health." *Social Science & Medicine* 74 (12): 2099–2106.
- Wasem, Ruth Ellen. 2020. "More Than a Wall: The Rise and Fall of US Asylum and Refugee Policy." *Journal on Migration and Human Security* 8 (3): 246–265. doi:10.1177/2311502420948847.
- Yarris, Kristin E. 2014. "'Pensando Mucho' ('Thinking Too Much'): Embodied Distress Among Grandmothers in Nicaraguan Transnational Families." *Culture, Medicine and Psychiatry* 38: 473–498.