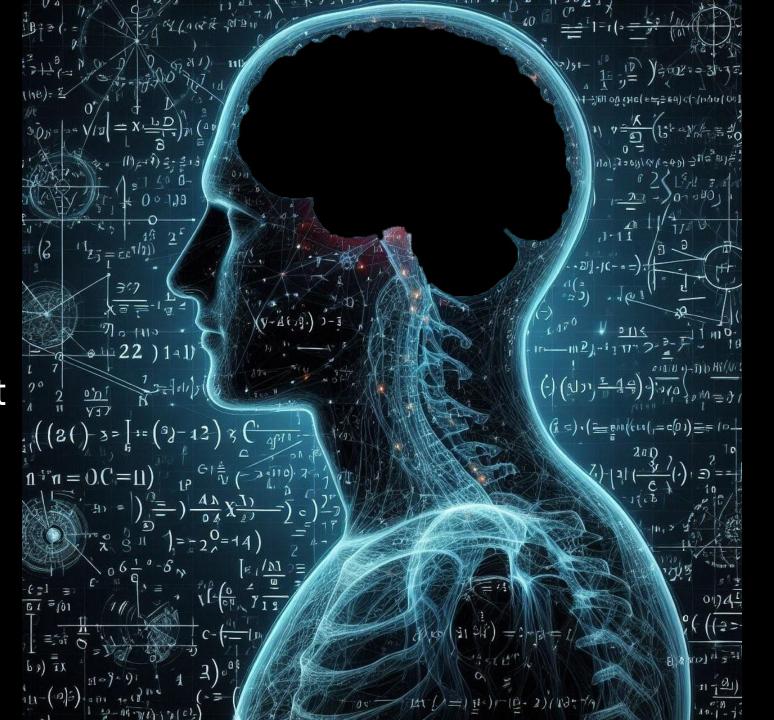
Illegal
Immigration
and
Refugee
Resettlement
:

THE GAME

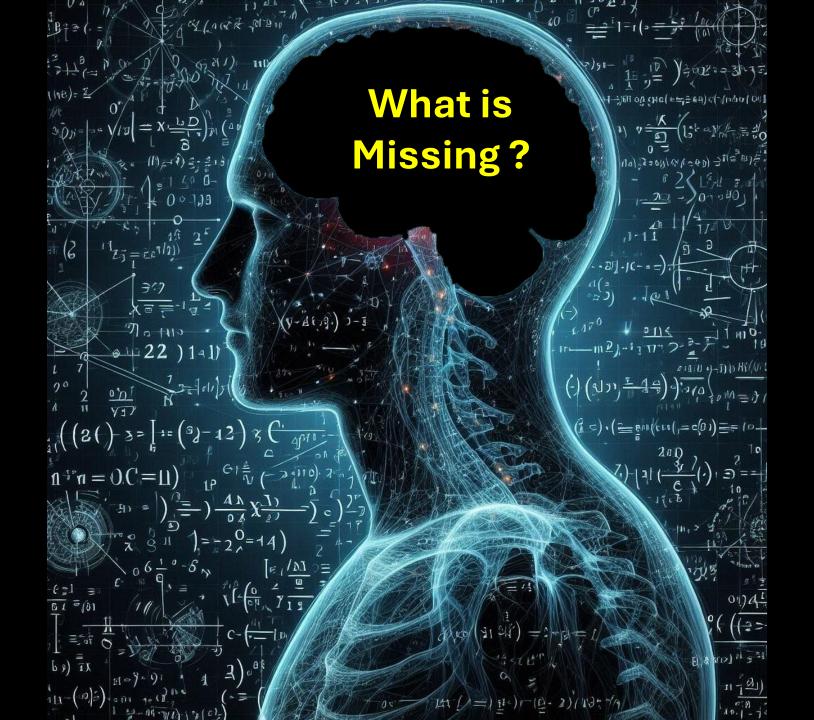


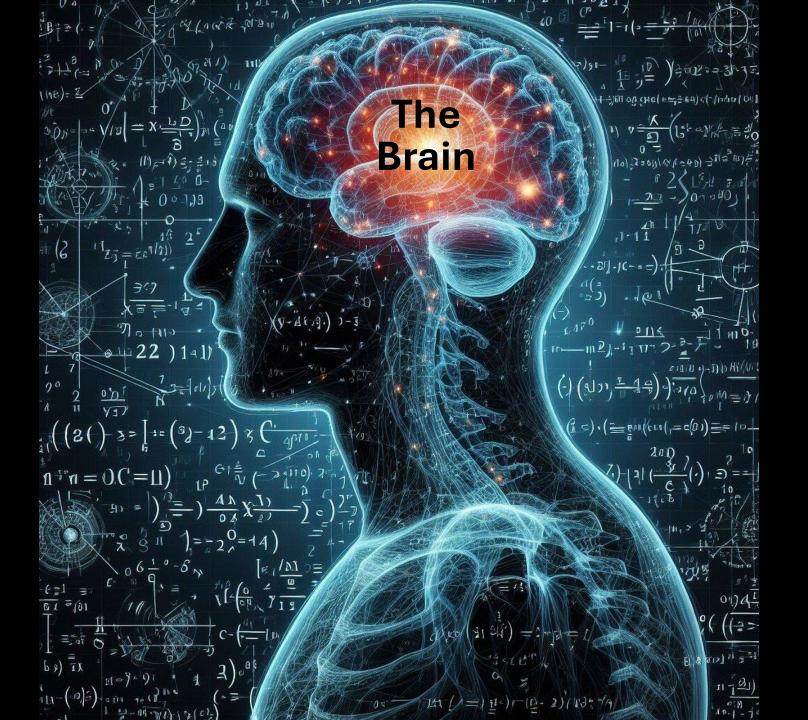
Presented by:

Scott Haugen,

Esq.

April 27, 2024





THE GAME Objectives

- 1. Examine the impact of illegal immigration and refugee resettlement on:
 - a. Violent crime rate
 - b. Local economy
 - c. Public health
- Critically analyze published studies and news articles to understand how data is manipulated to suit the writer's agenda. Ask yourself, "What is missing?".

Remember: "The truth is in the details."

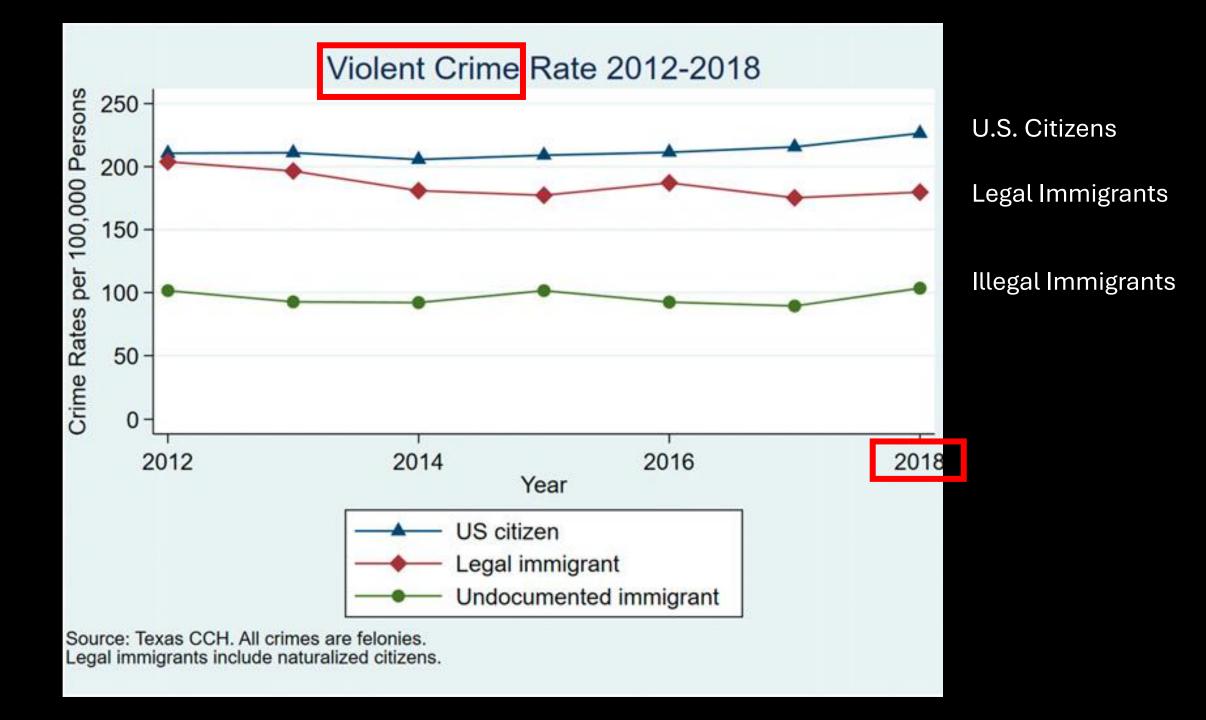
Case 1: Violent Crime Rate

Comparing crime rates between undocumented immigrants, legal immigrants, and native-born US citizens in Texas

Michael T. Light, Jingying He, and Jason P. Robey

*Department of Sociology, University of Wisconsin – Madison, Madison, WI 53705

Edited by Douglas S. Massey, Princeton University, Princeton, NJ and approved October 5, 2020 (received for review July 13, 2020)

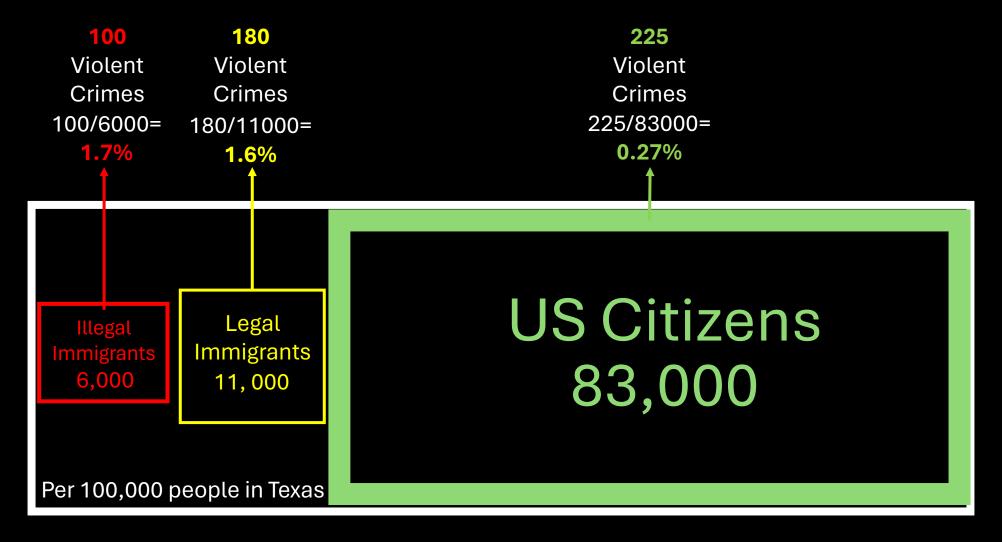


This study says that in 2018



US citizens commit 225/100 = 2.3 times more violent crimes than illegals!

The truth emerges when 2018 data from the American Immigration Council is added



Illegals commit 1.7/0.27 = 6.3 times more violent crimes than US citizens!

What is the violent crime rate

now that the southern border is wide open?

How much is a life worth?

Laken Riley's?

Your son's? Your daughter's?

Your mother's? Your father's?

Your grandchild's? Yours?

Case 2: Local Economy

The **fiscal impact** of refugees and asylees over 15 years: from 2005 to 2019

Robin Ghertner, Suzanne Macartney, and Meredith Dost

U.S. Department of Health and Human ServicesOffice of the Assistant Secretary for Planning and Evaluation*Office of Human Services Policy Brief

February 2024



OFFICE OF HUMAN SERVICES POLICY



The Fiscal Impact of Refugees and Asylees Over

15 Years: Over \$123 Billion in Net Benefit

from 2005 to 2019

What is missing?

Methods

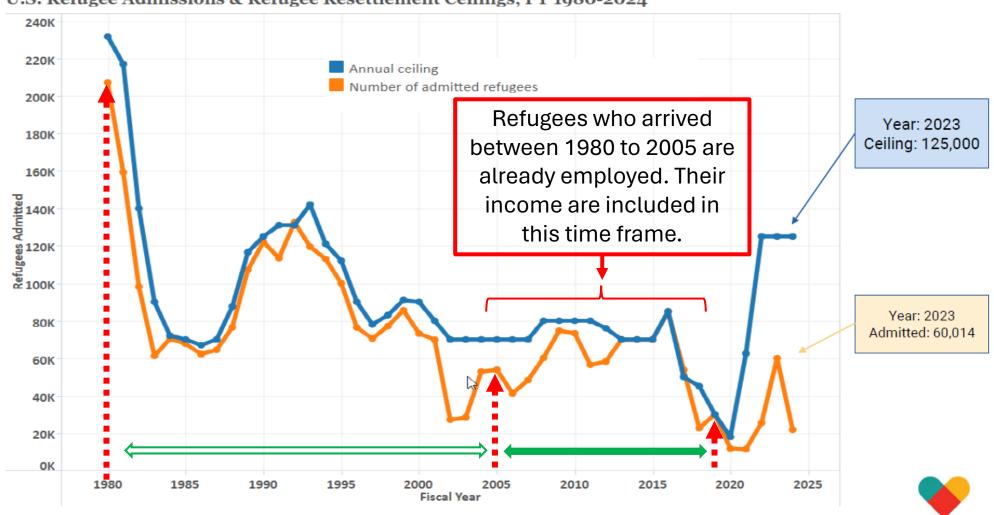
This study's approach is a first-order inquiry measuring actual fiscal costs expended compared with revenues collected over a specific historical period to estimate budgetary impacts to federal, state and local governments. Fiscal impact is defined simply as the revenues collected from refugees and asylees by government, minus the cost of government expenditures on refugees and asylees. The static historical approach looks at the impact over a specified period, rather than examining the impact of a cohort of individuals over time. Data limitations precluded analyses over a longer period. The analysis estimates net fiscal impacts from 2005 to 2019 and includes all refugees and asylees present in the United States over this period who had arrived since 1980.

RESULTS

Refugees and Asylees in the U.S. for at Least 10 Years Have Employment and Income Similar to the U.S. Population

1980-2024* Refugee Arrivals vs. Ceiling





* Refers to the first three months of FY 2024 (October 1, 2023 - December 31, 2023)

Source: Migration Policy Institute

Table 2. Expenditures, Revenues, and Net Impact for Refugees and Asylees, and their Immediate Families, 2005-2019

	Revenue	Expenditures	Net		
		Refugees and Asylees			
Total	\$581,009	\$457,229	\$123,781	\$123 billion	
Federal	363,040	331,539	31,501		
State/Local	217,969	125,689	92,280		
	Refuge	Otata anal			
Total	\$739,401	\$723,366	\$16,035	State and Local gov't	
Federal	467,450	429,995	37,455	<mark>lose</mark>	
State/Local	271,951	293,371	-21,420	\$21 billion!	

Values expressed in million 2019 dollars.

Source: Current Population Survey Annual Social and Economic Supplement and microsimulation model TRIM3, and additional ASPE analysis of administrative and federal budgetary data.

February 2024 ISSUE BRIEF 4

How much do you think your taxes will increase

to accommodate the "needs" of the incoming illegal immigrants and refugees,

for their housing, food, health care, schools for their children, cell phones, cash loaded debit cards, and IDs, like New York has done?

Case 3: Public Health

Question: What <u>health risks</u> do illegal immigrants and refugees pose?

Answer: Consider infectious diseases



Newly Arrived Immigrants, Refugees & Other Migrants

CDC Yellow Book 2024

Posttravel Evaluation

Author(s): Jennifer (Jenna) Beeler, Joanna Regan, Tarissa Mitchell, Elizabeth Barnett

Table 11-17 Health examination & intervention requirements for immigrants, refugees & other migrants

		OVERSEAS (PREDEPARTURE)				
	ENTRANT CATEGORY	HEALTH ASSESSMENT	VACCINATIONS	OTHER INTERVENTIONS	MEDICAL EXAMINATION	
→	IMMIGRANTS	Required ¹	Required ²	None ³	None ³	
→	REFUGEES	Required ⁴ Performed?	Recommended ⁵ Not required	Various (see text) ⁶	Recommended (usually done) ⁷ Not required	
•	OTHER MIGRANTS	None ³ Not required	None ³ Not required	None ³	None ³ Not required	



What is this?

Measles

- * Caused by a virus. Symptoms: fever, cough, runny nose, rash, and red eyes.
- * 90% infectious in close-contact settings.
- * About 1 in 5 unvaccinated people in the US who get the measles is hospitalized.
- * As many as 1 out of every 20 children with measles gets pneumonia, the most common cause of death from measles in young children.
- * About 1 child out of every 1,000 who get measles will develop encephalitis (swelling of the brain) that can lead to convulsions and can leave the child deaf or with intellectual disability.
- *Nearly 1 to 3 of every 1,000 children who become infected with measles will DIE from respiratory and neurologic complications.
- *Measles may cause **pregnant women** who have not had the MMR vaccine to give birth **premature**ly, or have a **low-birth-weight baby**.
- * Before the measles vaccination program began in the 1960s in the U.S., there were 3 million to 4 million cases of measles and 400 to 500 resulting deaths every year.

DAILY JOURNAL



BEST IN CLASS - 2022 & 2023 - ILLINOIS PRESS ASSOCIATION



Measles cases rise to 58 in Illinois

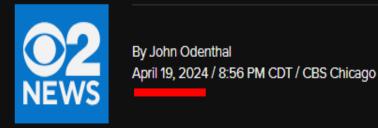


Published on April 8, 2024

Jeff Bonty | jbonty@daily-journal.com | 815-937-3366 Apr 8, 2024



City of Chicago warns of dozens of measles cases, and not all are linked to migrant shelters



Published 11 days later



The city's measles dashboard said a total of 63 measles cases have been confirmed in Chicago this year, with one new case this week.





Providing guidance, services, and strategies that make Chicago a healthier and safer city.



Measles Update

In March 2024, the Chicago Department of Public Health (CDPH) identified some cases of measles in Chicago. Illinois had five measles cases in 2023. Those cases were the first in the state since 2019, when the last measles case was identified in Chicago.

There were zero measles cases in the entire state of Illinois between 2019 and 2023!



What is this? Tuberculosis

- * Caused by Mycobacterium tuberculosis that is spread from person to person through the air.
- * Symptoms: chronic cough (3 weeks or longer), coughing up blood, weakness or fatigue, chest pain, weight loss, fever and night sweats, blood in sputum
- * Mainly affects the **lungs**, but can also affect the covering of the **brain** (meningitis), **lymph nodes** in the neck (scrofula), **kidneys**
- * Can be treated with medications, but there are multi-drug resistant strains of tuberculosis.
- * If effective treatment is not given, the **death rate** for active tuberculosis is up to **66%**.

CHICAGO NEWS

'Small number' of tuberculosis infections detected at Chicago migrant shelters

By Sun-Times/ NBC Chicago • Published April 4, 2024 • Updated on April 4, 2024 at 7:07 am



The health department could not share exactly how many cases were found or identify shelters. But the department said there haven't been any reports of TB in the city from an exposure to migrants positive for the infection.



CHICAGO DEPARTMENT OF PUBLIC HEALTH

Suggested Citation

Chicago Department of Public Health. Tuberculosis Surveillance Report, 2018. Chicago, IL: 2019.

Tuberculosis in Chicago

Reported incident cases of TB in Chicago have been on a steady decline since 1993. Between 1993 and 2018, Chicago has seen an 86% decrease in reported TB cases from 798 to 115 per year, respectively. In 2018, there was a historic low with 115 incident TB cases reported in Chicago producing a citywide rate of 4.2 cases per 100,000 population. In 1993, the rate of TB in Chicago was 28.7 cases per 100,000 population, nearly 3 times that of the United States rate, which was 9.7. The rate gap between the United States and Chicago has steadily decreased; however, Chicago's rate in 2018 (4.2 cases per 100,000 population) continues to be greater than that of the United States overall (2.8 cases per 100,000 population).

How do you think your health and your

access to local doctors, clinics, and hospitals

be affected

by the influx of illegal immigrants and refugees to your area?

They are already here.



Any Questions