

The Biopolitics of “America First”: Undocumented Immigrants, Latin America, and the COVID-19 Pandemic

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English Abstract

Throughout the COVID-19 pandemic, the Trump administration consistently put the lives of undocumented immigrants and people in other countries at greater risk. Whether by continuing to deport people during a pandemic, failing to provide relief to undocumented workers, or even suspending refugee and asylum programs, the lives of non-US citizens were systematically endangered and made more vulnerable as a result of the prior administration’s policies. This paper examines the biopolitical logic underlying the Trump administration’s COVID-19 response and its implications for non-US citizens, especially Latin Americans. In doing so, this paper contributes to the literature on the biopolitics of immigration by shedding conceptual light on how, during the pandemic, the political project of defending the state from ‘invading’ immigrants is transformed into a public health project of defending the state from the COVID-19 virus.

Resumen en español

Durante la pandemia de COVID-19, la administración de Trump constantemente puso en mayor riesgo las vidas de inmigrantes indocumentados y personas en otros países. Ya sea continuando con deportaciones durante una pandemia, no proporcionando ayuda a los trabajadores indocumentados, o suspendiendo programas de refugiados y asilo, las vidas de inmigrantes y extranjeros fueron puestas en peligro sistemáticamente y hechas más vulnerables como resultado de las políticas de la administración anterior. Este artículo examina la lógica biopolítica que subyace como la administración de Trump ha respondido a la pandemia y sus implicaciones para inmigrantes and extranjeros, especialmente Latinoamericanos. En el proceso, este artículo contribuye a la literatura sobre la biopolítica de la inmigración al arrojar luz conceptual sobre cómo, durante la pandemia, el proyecto político de defender al estado de inmigrantes ‘invasores’ se transforma a un proyecto de salud pública dirigido a defender el estado del virus de COVID-19.

Resumo em português

Durante a pandemia de COVID-19, o governo de Trump constantemente pôs em risco as vidas de imigrantes sem documentos e de pessoas em outros países. As vidas dos cidadãos imigrantes e estrangeiros nos Estados Unidos viu-se sistematicamente ameaçada e colocada em situações de maior vulnerabilidade como resultado das políticas adotadas por esse governo, fosse pelo fracasso em dar alívio a trabalhadores sem documentos, pela contínua deportação de pessoas durante a pandemia, ou

mesmo pela suspensão de programas de refúgio e asilo. Este artigo examina a lógica biopolítica subjacente às respostas do governo Trump à pandemia de COVID-19 e as suas implicações para cidadãos imigrantes e estrangeiros nos Estados Unidos, principalmente para os latino americanos. Nesse sentido, este artigo contribui à literatura sobre a biopolítica da imigração ao jogar luz conceitual sobre como o projeto político de defesa do estado contra os imigrantes “invasores” veio a se transformar, por ocasião da pandemia, em um projeto de saúde pública para a defesa do estado contra o vírus da COVID-19.

As cases of COVID-19 began emerging within the US, former President Trump issued Presidential Proclamation 9984 barring non-US citizens who were either from or had recently been in China from entering the country (White House 2020a). This is commonly referred to as the ‘China Ban.’ Over the next several months, as the pandemic worsened, the Trump administration extended similar travel restrictions for non-US citizens from several countries, including Iran, Italy, Canada, Mexico, and Brazil (Bier 2020). The administration also suspended the refugee resettlement and asylum processing programs. On March 21st, they even began denying entry to unaccompanied minors.[1] Within two weeks, nearly four hundred migrant children had been detained at the US-Mexico border; around one hundred twenty were deported to Guatemala, Honduras, or El Salvador (Hesson and Rosenberg 2020). Despite being the epicenter of the COVID-19 pandemic, the US did not suspend deportations under the Trump administration, thereby contributing to the virus’ global spread. As John Washington reported, “Hundreds of people deported to Guatemala and Haiti have tested positive for the virus. In Guatemala, some of the returned migrants are even facing discrimination, accused of bringing the virus with them” (Washington 2020). Within the US, the situation for undocumented immigrants is likewise dire. Even before the pandemic, immigration detention centers failed to provide adequate healthcare, reduce overcrowding, and improve cleanliness (Ellis and Hicken 2019). Many of those not under custody continue to work essential jobs as farmworkers, grocery store clerks, and delivery truck drivers (Scheyer 2020). In doing so, they risk exposing themselves and their loved ones to the virus; while, at the same, engaging in labor that benefits millions of US-Americans across the country. Nevertheless, undocumented workers were excluded from the CARES Act and constantly stigmatized by the Trump administration throughout the pandemic (Scheyer 2020).

In each of these instances, the Trump administration’s response to COVID-19 consistently put the lives of undocumented immigrants and people in other countries at greater risk. Whether by deporting people from the US during a pandemic, failing to provide relief to undocumented workers, or even suspending refugee and asylum programs, the lives of non-US citizens were endangered and made more vulnerable due to the prior administration’s policies. This, unfortunately, is not surprising. Since the

beginning, Trump championed the mantra of “America First,” a nativist discourse that privileges US citizens’ interests, safety, and well-being against all others. To be clear, “America First” does not represent a mere preference, but the hierarchization of different populations with the US representing the highest rank of civilization (Illing 2018). As such, it must be protected and defended against outsiders who threaten its supremacy. To explore this further, and to examine the dangerous consequences of this discourse during the COVID-19 pandemic, this paper turns to the literature on the biopolitics of immigration.[2] In particular, this paper examines the biopolitical logic underlying the Trump administration’s “America First” COVID-19 response and its impact on non-US citizens, especially Latin Americans. In doing so, this paper contributes to the literature on the biopolitics of immigration by shedding conceptual light on how, during the pandemic, the political project of defending the state from ‘invading’ immigrants is transformed into a public health project of defending the state from the COVID-19 virus. This paper will thus have implications for understanding how the US response has and continues to disregard the lives of those excluded within the doctrine of “America First,” whether domestically or internationally.[3]

The remainder of this paper is divided into four sections. The first section provides an overview of the biopolitics of immigration literature that situates the immigration policies and practices of the Trump administration within the broader history of US immigration enforcement. The second section examines the biopolitical logic underlying the Trump administration’s COVID-19 response and its effects on undocumented immigrants within the US. The third section extends this analysis by examining how biopolitical “America First” policies function as a series of colonial technologies across Latin America. Finally, the concluding section briefly considers how the biopolitics of “America First” may evolve during the Biden-Harris administration, as well as how it may be resisted. To this end, it draws on the literature on the ethics of immigration.

“America First” and the Biopolitics of Immigration

Throughout Trump’s brief political career, he has consistently vilified immigrants. In the very first speech of his campaign, he referred to Mexican immigrants as “rapists” and “murders” (Lee 2015). In 2018, as President, he referred to a caravan of predominately Central American refugees seeking asylum as an “invasion” and warned that “our Military is waiting for you!” He further alleged, without evidence, that “Many Gang Members and some very bad people are mixed into the Caravan” (Fabian 2018). In addition to threatening migrants, he also threatened to cut off aid to Guatemala, Honduras, and El Salvador for failing to stop them from leaving (Brice and Schrank 2018). In the name of protecting the nation and its citizens, the Trump administration enacted several cruel measures to halt ‘illegal’ immigration. Most notably, under the administration’s “zero tolerance” immigration policies, thousands of children were separated from their parents at the US-Mexico border (Al-Arshani 2021). While the xenophobia and cruelty displayed by the Trump administration are appalling, it is not an anomaly within the history of US immigration enforcement. Since the 1882 Chinese

Exclusion Act, the US has had a long track record of limiting and even banning immigration, especially from predominately non-white countries (Boswell 2003). As Laura Finley and Luigi Esposito further note, many of the justifications used by the Trump administration and his supporters rely on familiar xenophobic tropes, including that foreigners (especially non-whites) pose a threat to public safety and undermine the job security of US-Americans (Finley and Esposito 2019).[4] To explore this further, the rest of this section provides an overview of the literature on the biopolitics of immigration.

The Biopolitics of Immigration

Biopolitics refers to techniques and mechanisms used by modern Western states to ‘optimize’ and ‘maximize’ life at the level of the population (Foucault 2003; Apatinga 2017). This may take the form of state-sponsored hygiene campaigns, regulations on women’s reproductive rights, providing (or denying) access to healthcare and mental health services, and even social norms regarding cleanliness and personal wellbeing. Even social distancing and shelter-in-place guidelines fall within the scope of biopolitics. The purpose here is to ensure the survival and longevity of the nation by establishing broad regulations aimed at protecting life. Notably, ‘optimizing’ and ‘maximizing’ health is not simply a matter of improving life expectancies or lowering the average incidence or prevalence of a given disease. Instead, it is concerned with *which* lives should be protected. An important feature of biopolitics is the hierarchization of life between those who ‘empower’ and ‘strengthen’ the state and those whose very existence threatens its longevity. More precisely then, biopolitics is concerned with ‘optimizing’ and ‘maximizing’ the lives of those viewed as improving the state while also exposing all others to harm and even death. This exposure is facilitated by several factors ranging from legislative failures to curb gun violence in non-white communities, to law enforcement agencies tolerating racist and corrupted police officers, to a failure to provide public options for healthcare and mental health services for marginalized communities, among others. In each of these cases, a specific population is left more vulnerable to what Lauren Berlant refers to as a “slow death” (Berlant 2007, 754).

For Sokthan Yeng, such actions are embedded within the very neoliberal ideology that governs Western societies. As she writes, “Life and politics become joined through the idea that the self-governing individual can and will create the most interest for herself and society” (Yeng 2015, 27). Because the state’s survival and prosperity depend on the extent to which its citizens flourish, it must ensure their protection and promote neoliberal values and US-American traditions.[5] For these reasons, politicians, especially conservatives, have decried the “browning of America” – a nativist fear alleging that if immigration is left unchecked, eventually the US will become a majority nonwhite country and thereby lose the proverbial ‘soul of America’ (Liz 2020). To safeguard against this, some Republicans, such as Senator Lindsey Graham and Representative Louie Gohmert, have argued that the US must repeal the 14th Amendment’s provision on birthright citizenship. In their view, it encourages foreigners to break the law to enter the country, ‘cheapens’ the status of US

citizenship, and possibly endangers ‘good’ US citizens by permitting ‘anti-American’ immigrants to breed “terror babies,” who will grow up to destroy the US from within (Yeng 2015, 21). For Natalie Cisneros, fears about immigrants, especially undocumented immigrants, giving birth to “terror babies” or “anchor babies” render their reproductive capacities immediately perverse, deviant, and threatening. In response to this imagined threat, attempts are made to regulate and control “alien sexuality” as a means of protecting the nation and the sanctity of US citizenship (Cisneros 2013, 291). Furthermore, by calling into question the legitimacy of their first-generation US-American children, those fears serve to promote a process of “backwards uncitizenizing” that undermines the rights of those children (Ibid, 300). Similar worries are also operative in the birtherism movement targeted at President Barack Obama and now Vice President Kamala Harris – the first Black man and woman of color to hold their respective positions. As Matthew Hughey explains, birtherism revolves around the presumption that people of color do not ‘belong’ in the US (let alone in positions of authority). Their presumed ‘Otherness’ makes it difficult to assess their national allegiance and cultural values, and thus threatening to US citizens (Hughey 2012).

Under biopolitical analyses, discourses, such as “anchor babies,” “birtherism” or “the browning of America,” are highly productive. Discourses are ways of speaking and thinking that produce meaning and values. They shape how people understand the world, including what the truth is, as well as which populations are considered ‘good’ (or normal) and which are ‘dangerous’ (or abnormal) (Foucault 2003; Foucault 2010). Both factors are important. Not only is a population designated as ‘undesirable’ via discourse, but that same discourse can shape what qualifies as ‘good’ evidence or a ‘reasonable’ argument or objection. In doing so, it serves to insulate racist and xenophobic positions from further critique. To illustrate this, consider this infamous statement from then-candidate Donald Trump: “When Mexico sends it people, they’re not sending the best. They’re sending people that have lots of problems and they’re bringing those problems. They’re bringing drugs, they’re bringing crime. They’re rapists and some, I assume, are good people, but I speak to border guards and they’re telling us what we’re getting” (Lee 2015). Despite the ignorance of these claims, they found tremendous support. For millions of US-Americans, Trump was a candidate that saw the country as they did – that recognized the ‘true’ threat of ‘illegals’ from Mexico ‘invading’ the country. Trump was speaking their language. Within the discourse of the ‘dangerous illegal,’ Trump’s remarks were sensible, rational, and accurate. Undocumented immigrants ‘truly’ are murders, drug dealers, and rapists. They violate the laws of the US, and then attack and kill its citizens. Those who disagreed were simply uninformed or politically biased. As such, this discourse promotes discrimination against those presumed to be undocumented, while also justifying the nationalistic and racist policies of the “America First” agenda.[6] It does this even though immigrants, regardless of their legal status, have a lower crime rate and criminal incarceration rate than US citizens (Nowrasteh 2019; Light and Miller 2017). However, because these statistics are incompatible with the ‘dangerous illegal’ discourse, they are casted aside as liberal propaganda or fake news.

From these discourses arise a series of practices and mechanisms designed to safeguard the privileged population. Central among these are those that target the ‘undesirable’ populations via systems of exclusion or sanction. For instance, the entire strategy behind “attrition through enforcement” follows a biopolitical logic. It operates by creating hostile conditions that immigrants decide to either ‘self-deport’ or avoid migrating to the US altogether. The practices of “attrition through enforcement” may include: (i) employer and economic sanctions, such as those implemented by the 1986 Immigration Reform and Control Act (IRCA), (ii) restrictions to healthcare insurance and medical services, such as those proposed by California’s Proposition 187 in 1994, (iii) issuing severe punishments for being detained without proper documentation, such as those enforced by Arizona’s Support Our Law Enforcement and Safe Neighborhood Act (otherwise known as Arizona SB 1070), and (iv) the use of large-scale raids by Immigration and Customs Enforcement (ICE) under the Trump administration (Liz 2020; Mendieta 2011; Apatinga 2017; Brotherton 2018). Even the practice of deportation, as Cisneros argues, exemplifies a biopolitical approach towards managing populations. As she writes, “Like the detainment of immigrants, deportation functions as a central strategy of ‘massive elimination’; the deportation of migrants from the United States results in the systematic exposure of the immigrant ‘slum population’ or ‘bad race’ to injury and death” (Cisneros 2016, 250). As Cisneros notes, immigrants are oftentimes deported in the middle of the night and left hundreds of miles from where they were detained. They are left more vulnerable to kidnapping, extortion, sexual violence, and murder in the process. “Deportation often turn[s] into a death sentence” (Ibid). As Yeng further notes, the neoliberal emphasis on the individual allows the state to justify excluding immigrants from accessing necessary resources and even denying their basic human rights in the name of ensuring the social, medical, and financial wellbeing of the nation and its citizens (Yeng 2015).

Importantly, none of this is meant to suggest that a biopolitical framework is the only one capable of describing how US immigration policies function. Likewise, the point here is not to argue that biopolitics can provide a complete account of US immigration practices. For instance, according to the Southern Border Communities Coalition (SBCC), since January 2010, at least 118 people have died in an encounter with US border agents (SBCC 2020). The possibility of being directly killed by the state represents a real danger for undocumented immigrants. Such instances of direct killings are largely omitted within biopolitical analyses. In addition to murder, there are other instances of violence overlooked by biopolitical analyses. For instance, many unable to migrate are compelled to enter the business of narco-culture. As Carlos Sánchez argues, “One could say that it is the *only* real option for those who cannot enjoy or have been undermined by Mexico’s neoliberal experiments (e.g., NAFTA), for those for whom the other choice is between immigration and starvation, or for those who already exist on the margins of legality – namely, the poor and the uneducated” (Sánchez 2020, 34; author’s emphasis). For Sánchez, narco-culture is marked by a brutality that exceeds the conceptual and rational limits of violence. Here, contra Foucault, “power and violence give themselves (in their phenomenal givenness, that is) at once interconnected. [...] Brutality, as the threat, spectacle, manifestation, and unification of

power in narco-culture, acts upon subjects and regulates culture ‘absolutely’” (Sánchez 2020, 53). Immigration bans and restrictions, therefore, do more than perpetuate vulnerability; they force people to submit themselves to conditions of brutality and death.[7] Despite these limitations, I contend, and the rest of this paper endeavors to show, that a biopolitical framework can still offer us valuable insights into the underlying logic of Trump’s “America First” policies and how they function to undermine the lives of Latin Americans during the COVID-19 pandemic (and beyond).

Undocumented Immigrants and the Biopolitics of “America First”

In 2016, then-Presidential candidate Trump declared that “America First will be the major and overriding theme of my administration” (Gass 2016). Throughout his presidency, Trump maintained that nativist discourse. As he explained during his speech to the United Nations General Assembly in 2019, “When you undermine border security, you are undermining human rights and dignity” (Oprysko and Kumar 2019). He continued, “Each of you has the absolute right to protect your borders. And so, of course, does our country” (Ibid). These remarks constitute a simple acknowledgment that strong borders are necessary for maintaining a sovereign nation for Trump and his supporters. Nevertheless, throughout Trump’s presidency, this discourse has operated within a field of xenophobia, racism, and biopolitics. Undocumented immigrants are depicted as a threat to the ‘human rights’ and ‘dignity’ of US-Americans, a threat that must be suppressed and eliminated. While this discourse has justified several violent acts against undocumented immigrants, it has also amplified their vulnerability during the COVID-19 pandemic. For instance, at several points during the pandemic, Trump threatened to withhold federal assistance from sanctuary states and cities, alleging that they “make it very hard for law enforcement” while protecting “a lot of criminals” (White House 2020b). Trump’s hostility towards sanctuary cities is well-known and predictable. As Thilo Wiertz notes, sanctuary and solidarities cities subvert biopolitical and “statist conceptions of population by practicing alternative forms of urban belonging” (Wiertz 2020, 10). They thereby represent significant barriers against biopolitical forms of suppression and elimination. With his threats and constant criticism, the Trump administration sought to undo local and state protections for undocumented immigrants while sparking xenophobia and racism against them – all of this during a pandemic (Alvarez 2020). Essentially, it attempted to force liberal governors and mayors to obey the “America First” discourse.

This section examines the effects of the Trump administration’s “America First” discourse and biopolitical practices on non-US citizens, especially Latinxs. In particular, I focus on the lack of accessible healthcare for undocumented immigrants throughout the pandemic and the vulnerability of undocumented essential workers. Afterward, the third section examines the effects of this discourse and practices on Latin American countries.

Undocumented Immigrants, Detention and Healthcare

Undocumented immigrants face tremendous hurdles in acquiring healthcare, especially for those detained within immigration detention centers. Detention centers routinely offer substandard healthcare, including providing treatment from physicians with expired medical licenses, failure to follow up on serious symptoms and conditions, and under- and even overprescribing necessary medication (Ellis and Hicken 2019). For Rallie Murray, the ability to deprive healthcare is a biopolitical tool inscribed within the neoliberal emphasis on rights. As she argues, “a rights-based discourse of health has the propensity to not only construct a particular image of what a healthy body is and can be, but also to enable the biopolitical state to define particular bodies as no longer deserving of access to health and health care” (Murray 2013, 80). As such, those detained, or “rendered politically illegitimate or excluded from the body politic, are no longer considered qualified human subjects in the biopolitical state” (Ibid). Through the deprivation of healthcare services, this discourse enables, what Jasbir Puar refers to as, the state’s “right to maim,” or the ability of the state to willingly debilitate bodies while also deriving value from them (Puar 2017). The right to maim includes “the maiming of infrastructure in order to stunt or decay the able-bodied into debilitation through the control of calories, water, electricity, health care supplies, and fuel” (Ibid, 144). This maiming makes the disadvantaged population easier to manage while further exposing them to death. It is also frequently justified and normalized via a series of rights-based appeals, especially in the case of prisons and immigration detention centers. For example, the claim that those detained only have a ‘right’ to a minimal standard of living, those detained lack the ‘right’ to demand more, or even that better conditions would ‘incentivize’ criminal behavior.[8] These remarks serve to discursively transform those biopolitical practices into acts of reasonable and even humane hospitality towards a lawbreaking population.

Throughout the pandemic, these practices of maiming have served to magnify the vulnerability of undocumented immigrants to COVID-19. For example, in late May, approximately one of every five undocumented immigrants held at the Houston Contract Detention Facility tested positive for COVID-19. Another facility, the Joe Corley Detention Center, reported an infection rate of approximately 14.7 percent, or roughly one in every seven detainees (Tallet 2020). While these figures are alarming, as Zackary Berger explains, the actual impact may be far graver given the lack of transparency of Immigration and Customs Enforcement (ICE) and Customs and Border Protection (CBP). As he notes, “We have no idea who’s testing or if there’s testing. We don’t know how many cases have been diagnosed, and we won’t know the mortality rate” (Powder 2020). The lack of testing here is another instance of maiming – by limiting testing, it becomes impossible to know for certain whether detainees have become infected. This provides further justification for denying them adequate healthcare and against removing sick detainees from the general incarcerated population. This allows the virus to spread via biopolitically strategic negligence. Moreover, while many people experience COVID-19 as a mild illness, pre-existing conditions, including diabetes, can lead to more severe symptoms and require

hospitalization (CDC 2020). Given that the prevalence of diabetes among Latinxs is approximately twenty-two percent, undocumented immigrants may be at higher risk for more adverse effects (Cheng et al. 2019). In this way, the biological extra-vulnerability of the detained immigrant population is compounded with the structural vulnerabilities constitutive of detention centers. The lack of transparency from ICE throughout the pandemic further erodes the lives and deaths of those detained.

For many detainees, even the possibility of release was eliminated as immigration courts were temporarily closed. For instance, in Otay Mesa Detention Center, judges were evacuated at the beginning of April after the facility first confirmed cases of COVID-19 among its staff and detainees (Morrissey 2020). Unable to see a judge, detainees cannot receive a ruling on their immigration status. In the name of protecting citizens from COVID-19, immigrants could be justifiably denied due process. At the same time, those detained were rendered unable to schedule a bond hearing. Since the outbreak, many immigrant rights activists and organizations, such as New York Immigrant Freedom Fund and the National Bail Fund Network, have worked to help as many people as possible post bond (Squires 2020). The average bond is roughly \$14,500, so raising enough money to release a single person is incredibly difficult (Freedom for Immigrants 2018). However, unless one has a bond hearing, there is no possibility of temporary release. Not only does this further endanger the health of those held within these facilities, but the longer one remains confined in a detention center, the less willing federal agencies may be to release them.

In cities like Milwaukee and Chicago, ICE stopped accepting bond payments altogether. Instead, those seeking to post bond and sponsor someone would have to travel to a different city or state to make the payment. For example, if the detainee is held in a Chicago facility, one would have to travel to Indianapolis, Wichita, or Kansas City to pay their bond (Malagón and Presa 2020). In the best-case scenario, this means that the detainee will have to wait longer to be released while increasing their odds of getting infected; in the worst case, it means they will remain detained indefinitely. Moreover, if the sponsor must rely on mass transit to reach one of those cities, they must risk exposing themselves to the virus. Despite being citizens, because they have chosen to help those designated as a ‘threat,’ they too are rendered vulnerable to the effects of biopolitics.[9] Indeed, as Amy Reed-Sandoval contends, it is not the case that immigration practices harm *only* undocumented immigrants. Within the US, there is a category of people who are “socially undocumented,” or those presumed to be undocumented based on their appearance and thereby subjected to hostile and oppressive immigration enforcement (Reed-Sandoval 2020). The undue burdens imposed by immigration policing on marginalized groups, especially Latinxs, are why José Jorge Mendoza argues that any just immigration enforcement must adhere to an “equality of burdens” principle. Per this principle, the burdens of enforcing immigration policies should be distributed as equally as possible among all citizens (Mendoza 2016).

These factors function to reinforce the threat of detention, thereby minimizing the willingness of undocumented immigrants to seek out local, state, or federal assistance

during the pandemic. While Trump claimed that undocumented immigrants could get tested without fear of detainment or deportation, his anti-immigrant discourse likely deterred many from seeking testing or treatment (Samuels 2020). Despite the disingenuousness of the offer, it served as a ready defense for the administration and its supporters against accusations of xenophobia and racism. The lack of testing among undocumented immigrants is particularly troubling. Before the pandemic, an estimated 7.1 million undocumented immigrants lacked health insurance and relied entirely on emergency departments for medical treatment (Cheng et al. 2019). Emergency hospital visits, however, are precarious. Not only does one run the risk of incurring a hefty medical bill, but especially in the case of those needing urgent or chronic care, there is the risk of medical repatriation. This refers to the process whereby hospitals transport undocumented patients to their country of origin – it is essentially a form of medical deportation. As Martha Escobar documents, between 2006 and 2012, there have been more than 800 cases of medical repatriation among public and private hospitals. For Escobar, this practice is informed by an understanding of undocumented immigrants as “public charges,” or the idea that they will be unable to care for themselves and become dependent on the welfare state (Escobar 2016, 63). This, in turn, functions to “categorize them as undeserving [of healthcare]. This biopolitical logic contributes to their removals. Private and public hospitals make use of (im)migrants’ non-citizen status and illnesses to repatriate them in order to ameliorate the financial situations of the hospitals. Meaningfully, the precarious conditions of public services, including health care, are in part produced by the neoliberal retrenchment of the welfare state” (Ibid, 116). Even if undocumented immigrants decide to risk it and seek medical care, the recent shift by hospitals towards telemedicine will be challenging for undocumented immigrants who may have limited English proficiency and/or lack computers for video conferencing (Page et al. 2020).

Undocumented Immigrants and Essential Services

People of color, including undocumented immigrants, comprise the bulk of essential workers. The Department of Agriculture estimates that approximately fifty percent of all farmworkers and fifteen percent of construction workers are undocumented (Dudley 2019). According to the Center for American Progress, undocumented workers comprise twenty-four percent of maids and housekeeping cleaners and eighteen percent of cooks and restaurant workers (Svajlenka 2017). Notably, some of these percentages may be higher; for example, growers and labor contractors estimate that seventy-five percent of all crop hands are undocumented (Jordan 2020). The US is entirely dependent on the labor of undocumented immigrants – a fact that remains true during the COVID-19 pandemic. A study by FWD.us, an immigration reform advocacy group, found that approximately sixty-nine percent of undocumented immigrants have frontline jobs considered essential to the US fight against COVID-19 (FWD.us 2020). For instance, when the State Department announced it would pause all visa processing in Mexico, there was a massive outcry by farmers and those in the agricultural sector. As a result, on March 26th, the decision was reversed, and new temporary guest worker visas began being processed. During

this time, the interview requirement was also waived (Ferguson 2020). The significance of this reversal reveals a drastic juxtaposition. On the one hand, despite a nativist presidential administration, xenophobic calls to halt all immigration, and rising unemployment among US citizens, laborers from Mexico were allowed to enter the US because they were *too* essential. Without them, major corporations and agricultural groups warned that grocery stores shelves would go empty, and harvests would rot (Ibid). For the biopolitical state to fulfill its positive directive of ‘making live,’ it requires undocumented immigrants to do jobs that are too risky for its citizens.

Yet, on the other hand, the Trump administration continued to argue that protecting US jobs from foreign workers is crucial to addressing the economic harms caused by the pandemic. Their alleged contribution to these economic hardships served as a critical justification for denying them relief aid under the CARES Act and other federal programs (Scheyer 2020). Even the construction of the border wall – the physical embodiment of Trump’s “America First” policies – did not cease during the pandemic (Owen 2020). Under the “America First” discourse, eliminating ‘illegal’ immigration was itself a crucial step in fighting the pandemic and helping US-Americans. For this reason, attempts to aid undocumented immigrants were met with outcry. For instance, when California Governor Gavin Newsom authorized a \$500 check for each undocumented person (up to \$1000 per household), the proposal was met with protests from conservatives who called for Newsom’s resignation (Sanchez 2020). In May 2020, under the proposed HEROES Act, Democrats sought to include provisions granting temporary protections for undocumented workers in essential services. These provisions included eligibility for the next round of stimulus checks, releasing low-risk detainees from ICE detention centers, and shielding essential workers from deportation for up to ninety days after the public health emergency ends (Narea 2020a; Link 2020). Virginia Representative Denver Riggleman criticized the provision granting stimulus checks to undocumented immigrants as a “poison pill” (Narea 2020b). Then-Senate Majority Leader Mitch McConnell likewise ridiculed the provision saying, “Another round of checks for illegal immigrants. Can you believe it? We forgot to have the Treasury Department send money to people here illegally. My goodness, what an oversight. Thank goodness Democrats are on the case” (Ibid). The irony in these objections is that those provisions ultimately serve US economic, social, and political interests. The stimulus checks would help undocumented immigrants continue to pay for food and housing, thereby contributing to the local economy and enabling them to continue working in essential jobs. Moreover, insofar as undocumented immigrants pay taxes in the US, the stimulus check is essentially the government providing a public benefit to taxpayers – a task it ought to be performing. Likewise, shielding undocumented immigrants from deportation *during* the crisis helps maintain the undocumented labor force, especially when people may be less willing to migrate due to the pandemic or more willing to leave the US due to rising unemployment (Darmiento 2020).

Despite their contributions, under the “America First” discourse, undocumented immigrants are discursively characterized as a liability to the US economy. They are depicted as depressing wages, stealing jobs, and draining valuable resources. As Yeng

writes, “the theory is that the American economy does not really benefit from this influx of migrants. And to make matters worse, they drain resources by taking advantage of governmental services ranging from free schooling for their children to emergency room attention” (Yeng 2013, 37). This discourse obscures the contributions of immigrants while simultaneously allowing the state to biopolitically maim them while continuing to extract economic value from their bodies. Given that immigrants work in industries with higher average injury and fatality rates than US citizens, this maiming can be psychological, physical, and potentially fatal (Orrenius and Zavodny 2009). At the same time, that discourse renders an attempt at informing anti-immigrant critics about all the significant and undervalued contributions made by undocumented immigrants moot – in their view, ‘illegals’ are the ‘real’ threat that must be expelled. Yet, as Yeng further notes, immigration enforcement agencies do not function to stop undocumented immigrants from entering the country but rather regulate and control the immigrant labor force. Without such regulations, it would be impossible to know how much foreign labor will be needed to maintain and grow the US economy. As she writes, politicians and neoliberal ideology do not “mandate border patrol for the sake of protecting the national economy from immigrant workers. Borders must be controlled, instead, to track and regulate immigrants so as to increase the influx of low-wage workers. The development of such agencies is a signal, ironically, of the growing acceptance of immigrants into the workforce” (Yeng 2013, 68).

Under the doctrine of ‘America First,’ undocumented immigrants face a perverse dual reality as the constantly demonized backbone of the nation. Within the biopolitical state, they are permitted to stay and work to ‘optimize’ the health and wellbeing of US citizens. However, as biopolitical threats, they are simultaneously categorically, perpetually, and inherently ineligible for any state protections. They are allowed to live so long as they are valuable to people, many of whom vehemently disdain them. Importantly, this oppressive dilemma may be viewed as one of the effects of globalization. For Ronald L. Mize, globalization is a contradictory twofold process. On the one hand, its promotion of increasingly free-flowing capital and commodities makes nation-states increasingly irrelevant while widening inequalities between the global rich and poor. On the other hand, the influx of migrant labor enables more robust cross-border social movements, such as the Zapatistas, that directly challenge and oppose the very inequalities created by globalization and capitalism. For Mize, the tension between these two processes is most salient at the boundaries between the so-called ‘developed’ and ‘developing’ world. There, a resurgence of popular nativism and nationalism has led to increasingly fortified and militarized borders. As he writes, “The US-Mexico border region’s relationship to neoliberalism is compromised by disposable Mexican bodies subject to border militarization, transnational clandestine migration, and *maquiladora* production systems” (Mize 2008, 136). These conditions, in his view, can best be “summed up by a notion of a neoliberal nativism where the political economy of free trade ideology meets the state-sanctioned violence against immigrants and *maquiladora* workers” (Ibid). The net effect is that the US can continue profiting from Mexican bodies while simultaneously undermining the possibility and feasibility of transnational solidarity between US-American and Mexican workers (Mize 2008;

Robinson and Santos 2014). This, in turn, serves to make migrant laborers more vulnerable. At the same time, globalization allows for the biopolitical effects of the “America First” doctrine to extend beyond the US. The next section investigates these effects on Latin American countries during the pandemic.

Latin America, Colonialism and the Global Biopolitics of “America First”

From the perspective of neoliberalism, undocumented immigrants represent an essential imported good that must be controlled and tightly regulated to optimize its value. This economization is inherently tied to their disposability under the biopolitical state and the persistence of US colonial rule. For Escobar, “The US nation-building project was, and continues to be, made possible through the creation of technologies of control designed and targeted towards non-white bodies. Central to colonialism in the Americas was the development of physical, juridical, spiritual/religious, social, and economic forms of constraints that were directed at indigenous and African people for the gain of Europeans” (Escobar 2016, 31). Historically and contemporarily, biopolitics represents one such system of control. As Puar argues, the goal of colonialism is not necessarily the elimination of a native population. Instead, it can also function “as a process of value extraction from populations that would otherwise be disposed of” (Puar 144, 2017). This value, however, may be more than simply economic. While the US benefits tremendously from undocumented labor, it also benefits from maintaining the undocumented immigrant as a perpetual ‘boogeyman’ to justify increasing public spending on law enforcement and militarization. The discourse of the ‘illegal’ immigrant serves to hide US-American racism and xenophobia under the veneer of public safety and tropes of ‘law and order.’ Additionally, undocumented immigrants collectively pay billions of dollars in taxes per year while being simultaneously denied access to public goods provided to taxpayers (Gee, Gardner, Hill, and Wiehe 2017). Given these benefits, instead of genocide or assimilation, biopolitics, as a colonial technology, is concerned with *managing* the health and longevity of the (post)colonized population. This involves, among other things, maintaining a situation of vulnerability and crisis within colonized territories (Davitti 2018; Marchand 2021). Regarding the COVID-19 pandemic specifically, this section examines how US immigration practices, especially deportations, function alongside US-American colonialism to enact a global biopolitics in Latin American countries.

Despite having more cases of COVID-19 than any other country, under the Trump administration, the US never ceased deportations. In total, in 2020, ICE deported roughly 14,500 family members, removing more family units in a single year than they did during the first three years of his administration combined (Sacchetti 2020). Additionally, 185,884 unaccompanied individuals (including children) were deported, and another estimated 200,000 were removed via a process known as “expulsion,” an emergency power granted by the Trump administration to border officials to allow for rapid removals. Unlike deportations, these expulsions bypass typical immigration proceedings (Sacchetti 2020). For Agnieszka Radziwinowiczówna, deportations represent a powerful culminating event within the biopolitical immigration apparatuses.

Many deportees are disciplined into never wanting to return after being detained and exposed to inhuman conditions, including limited or restricted healthcare and isolation from friends and family. In this way, “The short-term surveillance of immigrant detainees contributes to their long-term surveillance, as it governs their future mobility by fear” (Radziwinowiczówna 2020, 14). And yet, despite the threat of detention and deportation, thousands from Latin American and other countries attempt to enter the US each year, including many who have already been previously deported. An important factor motivating this migration is the legacy and continuation of US-American colonialism and imperialism in the so-called ‘developing’ world. For centuries, the Western world has systematically stolen resources and wealth from Latin American countries while simultaneously destabilizing national governments and economies. Centuries of this have contributed significantly to Latin America’s high rates of poverty, corrupt governments, inadequate social services, poor sanitation, overcrowded housing, as well as less access to food, water, and healthcare (Livingstone 2009; Rabe 2015). These conditions that compel migrants to risk entering the US without documentation, and even to risk re-entry after deportation.

These same conditions also make accepting deportees from a country with the most confirmed cases and COVID-19 deaths a dangerous proposition. As Sergio Martín, the general coordinator of Doctors Without Borders/Médecins Sans Frontières (MSF) in Mexico, explained, “Most of the countries to which the deportees are sent have fragile health systems. [...] Honduras, El Salvador, Guatemala, and Haiti have very limited capacity for testing, surveillance, and treatment and a limited supply of medical equipment such as ventilators. A major outbreak of COVID-19 could be catastrophic” (MSF 2020). In Guatemala, for instance, the situation grew so dire that hospitals were forced to bury dozens of unidentified bodies by July. Some hospitals began photographing those bodies in the hopes that, after the pandemic, their loved ones would come looking for them (Pérez 2020a). As the Trump administration continued deportations, the Pan American Health Organization (PAHO) reported that Latin America was quickly becoming the new epicenter of the COVID-19 pandemic. By June 2020, there were more than 1.5 million cases and more than seventy thousand deaths across the region. For PAHO, these figures are alarming but very likely underestimate the outbreak’s impact in the region (Ponchner 2020). By the end of 2020, COVID-19 was the leading cause of death in five Latin American countries, including Brazil and Ecuador, and the second leading cause in five countries, including Mexico (Beaubien 2020). While it may be impossible to estimate the precise degree, deportations from the US contributed to spreading the virus in those regions. The most evident danger here is to the deportees themselves. Deportees are frequently stigmatized and discriminated against upon their return to their home country. For Mark Dow, this discrimination constitutes the second ‘invisible’ punishment of deportation (Dow 2007). Due to the pandemic, they are treated as deadly pariahs, with videos on social media showing them being attacked and chased by neighbors. This has even occurred in communities that once viewed deportees as “heroes” because of the money they sent back to their hometowns (Pérez 2020b).

Concerns about deportees spreading the virus from the US to their home country were not unfounded. The US performed minimal testing on those being deported. They relied predominately on pre-flight screenings to test for symptoms, such as coughing and high fever (Human Rights Watch 2020). However, because most cases are asymptomatic and the virus spreads faster within enclosed spaces, deportees were more likely to be infected. For instance, on April 13th, the Guatemalan government reported that of seventy-six deportees on board a flight from the US, ninety-two percent tested positive for COVID-19. This was the first time that all incoming deportees had been tested in Guatemala. Later that day, a second flight carrying one hundred and six deportees arrived. Of the one hundred six, twenty-five were tested, with eighty percent testing positive. Two days later, another US deportation flight carrying one hundred six deportees arrived. Ninety-five passengers were tested, with half testing positive (Gonzalez 2020). At the time, while cases were skyrocketing in the US, Guatemala was reporting very few. In response to the high rate of infection among deportees, the Guatemalan government temporarily stopped accepting new arrivals but resumed shortly after due to threats by the US (Gonzalez 2020). Then-Secretary of State Mike Pompeo warned Central American countries that the Department of Homeland Security would stop processing visas from those countries if they stopped accepting deportees (Conley 2020). Ken Cuccinelli, the then-Acting Deputy Secretary of the Department of Homeland Security, defended the administration’s decision during the pandemic by claiming it will “keep enforcing all the laws on the books, including deporting people who are here illegally” (Martin 2020). Unfazed by their role in spreading disease and death, the US continued forcing deportees to impoverished Latin American countries.

This is not the first time the Trump administration has made such threats to Latin American countries. In 2019, Trump threatened to withhold foreign aid from Guatemala, El Salvador, and Honduras if they did not curb immigration to the US (Larson 2019). Such threats ultimately achieve little in addressing the alleged problem of ‘illegal’ immigration. On the one hand, even if those countries attempt to halt immigration to the US, their citizens will still be driven to migrate, whether to escape poverty, violence, or political corruption. The fundamental reasons that drive immigration – all of which, to emphasize, are byproducts of ongoing US colonialism and imperialism – in the region would persist. On the other hand, if those countries fail, and the US goes through with their threats, it would only worsen the situation in those countries, increasing people’s desperation and willingness to migrate. For Manuel Vásquez, this is no mistake. In his view, Western states utilize the ‘immigrant’ to perpetuate a transnational biopolitical regime that “seeks to manage unruly flows that are part and parcel of the current phase of globalization. Just as in the 18th century, the consolidation of a liberalism based on the sovereign-yet-normalized nation and self was predicated on fear, so is the contemporary neo-liberal (trans)national order driven by a ‘liquid fear’” (Vásquez 2014, 86). Maintaining this flow of migrant bodies allows this global biopolitical regime to reproduce “colonialism’s intense interest in the bodies of colonial subjects, which are seen as unruly and potentially uncivilizable, and thus a threat [to the] nation’s imagined unity” (Ibid, 82).[11] Indeed, if the desired goal were truly to end ‘illegal’ immigration, then the US would work towards making Latin American countries more self-sufficient

by helping them address social, economic, and political problems in the region. Instead, the US and other Western countries utilize their political and economic power to maintain states of perpetual crises abroad. This maintains the need and want to migrate. Moreover, domestically, this generates an additional ‘migrant crisis’ or the crisis of ‘illegal immigration.’ For Daria Davitti, such crises are “presented and perceived as omnipresent and are internalized to become part of the sovereign’s technique of governing—of its biopolitics” (Davitti 2018, 1183). This, in turn, paves the way for the discourse of ‘law and order’ used to justify the US putting pressure on foreign nations to regulate immigration on their end.

As Couze Venn argues, colonialism makes contemporary forms of transnational biopolitics possible (Venn 2009). From the beginning, colonialism situates Latin Americans within a matrix of biopolitical mechanisms wherein they can either remain in their home country and suffer a ‘slow death,’ or migrate to the US only to find a ‘slow death’ abroad. This persists even in the face of a deadly pandemic that has killed over two million people worldwide (WHO 2021). As of December 2020, over 500,000 people have died from COVID-19 in Latin America and the Caribbean (Reuters 2020). By the logic of “America First,” whether or not the virus continues to spread is beside the point. Since the start of the pandemic, the Trump administration has taken action to undermine global recovery efforts. For instance, in March 2020, they attempted to bribe a German pharmaceutical company to produce their COVID-19 treatment exclusively for the US. In April, the US purchased approximately ninety percent of the available stock of Remdesivir, which at the time was regarded as a “breakthrough” drug for treating COVID-19 (Martin 2020). In September, the Trump administration announced it would not join COVAX, a global vaccine distribution initiative that provides vaccines to low-income nations (Aratani 2020). In these examples, the Trump administration worked to not only put the US at the front of the line, but to eliminate the line entirely. This is no accident. “America First” has always meant “America Only.” Under this discourse, Latin Americans are simply the wrong kind of American.

The Biden-Harris Administration and the Ethics of Immigration

On January 20th, 2021, President Joseph R. Biden was sworn into office as the 46th President of the United States. President Biden has pledged to undo much of the legacy of the Trump administration, including proposing an immigration bill that would provide a pathway to citizenship for approximately 11 million undocumented immigrants in the US (Mascaro and Barrow 2021). President Biden has also suspended deportations for one hundred days and paused the ‘remain in Mexico’ policy (Diaz 2021). Such acts appear to constitute a rejection of the “America First” policies championed by his predecessor – a turning point in the biopolitics of immigration that had been at work in the US for decades. However, such a response must be measured. After all, President Obama was responsible for enacting DACA and deporting more immigrants than any other sitting president, including Trump (Nowrasteh 2019). Moreover, while citizenship would provide immigrants with more protections for their rights, they will constantly be under threat as racial minorities within a White

supremacist state. The Biden-Harris administration will also have to contend with the series of “legal land mines” left by the Trump administration to derail their efforts to pass progressive immigration reform (Alvarez, Santana and Sands 2021). Moreover, there will be threats from other local, state, and federal officials. For instance, Nebraska Governor Pete Ricketts remarked that “illegal immigrants” would not receive vaccinations under the state’s distribution effort. The governor’s communications director later ‘clarified’ that “illegal immigrants” would be included, but priority would be given to citizens and legal residents (Armus 2021).

While “America First” may have been the official slogan of the Trump presidency, it has functioned as the operational norm in US immigration enforcement and policies for centuries.[12] A change of administration will thus not be sufficient to end the biopolitics of “America First.” While biopolitical analyses can help expose the vulnerabilities and subjectivities produced by US immigration practices, drawing upon resources from the ethics of immigration literature will be necessary to dismantle them.[13] This concluding section will briefly consider how these resources may be used to address a core component of the biopolitics of “America First”: the right of self-determination under liberalism that justifies restrictive “America First” immigration policies.

The Biopolitics of “America First” and the Ethics of Immigration

As Christopher Freiman and Javier Hidalgo note, political philosophers have frequently justified immigration restrictions by arguing that, under liberalism, sovereign nations have a presumptive right of self-determination or the right to shape their national character and destiny (Freiman and Hidalgo 2016). Several arguments have been developed within the literature in support of this right: some have appealed to a nation’s right to control and preserve its own national culture, while others contend that it is grounded upon each nation’s right to refuse to associate with nonmembers (Ibid). Here, two points are worth emphasizing. First, the designation of populations as either ‘insiders’ or ‘outsiders,’ and the corresponding division of rights and privileges associated with it under liberalism and the social contract theory lays the groundwork for biopolitics, colonialism, and slavery (Menzel 2013; Valdez 2016). Second, justifications of stricter immigration enforcement and restrictions by the Trump administration and conservatives appeal to a right to self-determination, whether explicitly or implicitly. For instance, Trump’s 2019 remarks at the UN General Assembly that each nation possesses the “absolute right” to protect its borders presupposes such a right (Oprysko and Kumar 2019). Even before Trump, the conservative outcry regarding the “browning of America” stemmed from the purported fear that growing numbers of immigrants in the US are changing the national character and undermining US-American values (Liz 2020). Likewise, the discursive framing of undocumented immigrants as ‘dangerous’ and ‘criminals’ justifies the refusal to associate with them. This compels the call to “Make America Great Again” via, in part, imposing restrictive immigration policies against those from so-called “shithole” [read: non-white] countries (Kendi 2019).

However, as many have argued, it is far from clear that liberal Western nations have a legitimate claim to a right to self-determination (Mendieta 2011; Freiman and Hidalgo 2016; Velásquez 2017). For instance, Freiman and Hidalgo argue that “if states have rights to restrict immigration in virtue of the fact that they have the right to self-determination, then it appears that states can permissibly restrict basic liberal freedoms, such as freedom of speech, reproductive freedom, and other important freedoms” (Freiman and Hidalgo 2016, 11). Each of these fundamental liberal rights can, like immigration, impact the national character and destiny. “Thus, one prominent argument for immigration restrictions – the self-determination argument – entails the rejection of liberalism” (Ibid). Given the centrality of Western norms and values to the “America First” discourse, demonstrating the tension between those values and the restrictive immigration practices its proponents endorse constitutes an important step towards combatting it. Likewise, Ernesto Rosen Velásquez argues that appeals to a right of self-determination and other common liberal defenses of immigration assume an idealized notion of states with legitimate claims to free association that ignores the histories of Western racism and colonialism. Nevertheless, it is precisely the recognition of discriminatory and violent practices that justifies denying a right to self-determination to oppressive regimes like Nazi Germany. As he writes, “historically, the American government’s acts of political self-determination, the way it exercises its freedom of association – of who it wants and does want to associate with – proceeds from the conviction that the American state was, and should remain, a White nation descended from Europe. These historical considerations should have a bearing on whether the US is [...] a legitimate state or a liberal democracy” (Velásquez 2017, 320). This puts analytical pressure on the presumed right of the US to dictate its own terms of self-determination and association.

Situating US immigration policies within this history of violence provides two additional benefits. First, it lends further argumentative strength to accounts that view the immigration debate as an issue of global and distributive justice. For instance, Juan Carlos Velasco argues that principles of cosmopolitan egalitarianism and distributive justice make open borders, from a normative perspective, the best means of responding to inequalities between countries (Velasco 2016). By contrast, Jorge Valadez argues that, while immigration reform is necessary, an open border approach undermines the potential of labor migration to address global inequalities (Valadez 2012). A full discussion of the open borders debate is beyond the scope of this paper. For now, the point is to indicate that adequately addressing the biopolitics and injustices of US immigration policies may entail a radical reconceptualization and restructuring of national sovereignties and borders. Second, acknowledging these colonial histories and the racism and xenophobia that motivates them is crucial for understanding why undocumented immigrants are denied their human rights even in instances where that denial is detrimental to the US itself. For instance, undocumented immigrants routinely face discrimination and inaccessibility to healthcare resources; and during the pandemic, they have had limited access to testing and vaccines, especially in conservative states. However, as Helena Legido-Quigley and her colleagues note, the historical argument for extending health care to migrants is based precisely on public

health considerations. Multiple studies have found that, while migrants rarely bring serious infections to other countries, denying them treatment can exacerbate the harms caused by outbreaks (Helena Legido-Quigley et al. 2019). As they further argue, migrant inclusive health systems are ultimately beneficial for host countries. They reduce long-term health expenditure, prevent shortages of workers, boost economic growth, and promote social integration (Ibid). The persistent denial of these and other rights does not originate from race-neutral neoliberal considerations but rather stems from an underlying commitment to maintaining the US as a White supremacist ethnostate.

These ethical and normative insights not only help address the problems posed by the biopolitics of “America First,” but serve to further de-normalize the legitimacy of US immigration policies and enforcement. As such, they provide a necessary complement to biopolitical analyses of immigration. While this concluding section offers only a brief overview of the ethics of immigration, it demonstrates the capacity of this growing literature to address the systematic vulnerabilities created and maintained by the biopolitics of “America First.” More work by academics and activists is required to hold the Biden-Harris administration accountable and provide the conceptual tools necessary for understanding the hardships experienced by undocumented immigrants and for achieving transnational justice on multiple fronts. Hopefully, this paper can contribute towards that end.

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Endnotes

[1] Before then, immigration officials were permitted to grant asylum to any unoccupied undocumented minor to protect them from human trafficking (Hesson and Rosenberg 2020).

[2] While this paper deploys biopolitics as its core conceptual tool, it does not contend that biopolitics offers us an exhaustive account of the complex and multifaceted relationship between xenophobia, racism, colonialism, and the management of life. Providing a complete picture will necessarily require appealing to decolonial and Latin American philosophies. The works of Enrique Dussel, Walter Mignolo, Gloria Anzaldúa and María Lugones, among many others, will be particularly important to this end (Dussel 2003; Mignolo 2011; Anzaldúa 2012; Lugones 2003). My contention is that biopolitics, as the diverse literature on the biopolitics of immigration has consistently demonstrated, can likewise provide some valuable insights.

[3] To be clear, the point of this paper is not to argue that “America First” immigration policies are racist. That much is taken for granted. Instead, the focus here is on understanding *how* they function as racist technologies: How do they justify their racism? How do they enact racism? How do they reinforce and interact alongside existing racist and oppressive power structures? How are marginalized communities maintained in situations of vulnerability and crisis as a result of these policies? Etc. That said, despite this presupposition, I nevertheless contend that there is value in developing accounts that critically articulate and explain the racism of “America First” policies. While many, especially on the Left, contend that such policies are ‘obviously’ racist, there are multiple competing definitions concerning what constitutes racism (Garcia 1997; Glasgow, Haslanger, Jeffers and Spencer 2019). This is not meant to put into question or undermine the accusation of racism. Instead, the point is that gaining conceptual clarity here will enable us to make more robust and pointed criticisms of US immigration policies. Given that millions of people within the US continue to support and promote “America First” policies, there is a real practical and philosophical need for such analyses.

[4] In addition to these justifications, Finley and Esposito argue that the anti-political correctness rhetoric deployed by Trump and his supporters is also meant to undermine racial minorities and immigrants. By labeling liberals as ‘weak on immigration’ and supportive of open borders, they can frame the political debate in a way that undermines the political capital of opposing positions. Under this framing, ‘true’ patriots are ‘pro-America’ and for strong borders, while those that oppose this represent a ‘dangerous’ and ‘un-American’ faction.

[5] While this paper will focus predominately on the tension between the ‘lawful’ citizen and the ‘illegal’ immigrant, it is worth emphasizing that the ‘citizen’ is not neutral with regards to factors such as race, sex/gender, sexuality, class, among others (Glenn 2000). Despite the centrality of notions of equality and justice within liberalism, the US can maintain unofficial tiers of citizenship. For instance, as Emma Winters from the Center for Migration Studies of New York explains, Trump’s immigration policies negatively impact approximately 5.2 million US citizens with at least one undocumented parent. These citizens live in constant fear of family separation. As Winter writes,

Trump’s policies “have torn the social fabric of our country, creating two-tiers of citizens. One tier is afforded the full benefits of membership, and the other tier, also US citizens, is not” (Winter 2020).

[6] There are significant racial and ethnic connotations embedded within the “America First” discourse. Historically, the motto was associated with anti-Semitism and outright racism; it was even endorsed by the Ku Klux Klan (Emery 2018). This, combined with the numerous racist comments made by Trump throughout (and before) his presidency, suggest that the archetypal citizen for Trump is White. Even San Francisco District Judge Edward Chen questioned whether “America First” was not simply code for “ending immigration status for those who are not-white” (Fearnow 2018).

[7] The work of Sánchez and others such as Frantz Fanon and Achilles Mbembe will be critical in understanding this aspect of the immigration-industrial complex (Sánchez 2020; Fanon 2005; Mbembe 2019).

[8] At various points in his presidency, Trump even disparaged the simplest acts of decency performed by law enforcement, whether explicitly or implicitly. For instance, in a 2017 speech to law enforcement officials, he ridiculed the practice of officers placing their hands over the heads of those arrested. He remarked, “When you see these thugs being thrown into the back of a paddy wagon, you just seen them thrown in, rough, I said, ‘Please don’t be too nice.’ Like when you guys put somebody in the car and you’re protecting the head, you know, the way you put their hand over. Like, don’t hit their head and they’ve just killed somebody. Don’t hit their head. I said, ‘You can take the hand away, okay?’” (Lind 2017). In another rally in 2019, he rhetorically asked, “How do you stop these people?” referring to undocumented immigrants entering the country (Farzan 2019). A member of the crowd shouted, “Shoot them!” (Ibid). This was met by cheers from the crowd, as well as laughing and joking from Trump. This, combined with similar remarks he has made in the past, raised concerns about him tacitly consenting to extrajudicial killings and violence against immigrants.

[9] Throughout the pandemic, Trump’s “America First” policies have functioned to undermine and endanger the livelihoods of undocumented immigrants and their families, irrespective of their citizenship status. For instance, under the CARES Act, approximately 1.2 million US citizens married to an undocumented immigrant were denied a stimulus check (Kolinovsky 2020). Biopolitically, their omissions are designed to punish those who fail to adhere to the dominant xenophobic discourse and thus coerce them into submission. Even if they fail to comply, the result is still harmful to undocumented immigrants.

[10] Importantly, as Marianne H. Marchand argues, the management of these biopolitical mobilities is coordinated and facilitated by state and non-state actors. In particular, in her analysis of migrant caravans traveling from Central America to the US, she identifies three non-governmental organizations that enact what she refers to as a “biopolitics from below” or a series of parallel biopolitics that frequently undermine and challenge the biopolitics enacted from the state (or ‘above’) (Marchand 2021, 152). These non-governmental organizations are non-religious organizations defending migrants’ rights, religious networks managing migrant shelters, and smugglers. Marchand writes, “each of these non-state actors is creating a productive population in

line with their objectives, and often in opposition to the biopolitics of either the Mexican or the US state” (Ibid, 154).

[11] The slogan “America First” appeared for the first time in 1884, and by 1894 was adopted by the Republican Party as their official campaign slogan. As Sarah Churchwell argues, since its inception, “America First” has been deeply entrenched with notions of White supremacy, economic nationalism, and authoritarianism (Churchwell 2018).

[12] This distinction should not be overstated. The point is not that the ethics of immigration cannot, say, similarly expose underlying mechanisms that generate vulnerabilities for undocumented immigrants. Instead, it reflects, in my view, a general difference: the ethics of immigration tends to focus on normative values and principles of justice, whereas the biopolitics of immigration tends to focus on analyzing systems of power and diagnostic critiques. Despite their methodological differences, however, the two can be used together productively.