

***La Gente de Mucho Más Allá: Performing LGBTQ+  
Immigration in a Devised Documentary Theatre  
Production.***

Performance Project: Gabriel Aponte

Submitted to the Board of Theatre & Performance  
Conservatory of Theatre Arts  
in partial fulfillment of the requirements  
for the Degree of Bachelor Arts

Purchase College  
State University of New York  
May 2021

Sponsor: Jordan Schilderout

Second Reader: Andrea Thome

# Table of Contents

Artistic Aims.....	3
Technical Essay.....	8
LGBTQ+ Immigrants: Disproportionately Detained and Disregarded.....	15
Artistic Production.....	27

## Artistic Aims

A saying that is often heard in the theatre and performing arts is “the show must go on.” As a performer, one can never predict the troubles or turbulence one might have to navigate in order to make sure the performance does indeed commence. While the process of figuring out exactly what show my senior project team would put up went through its trials and troubles, before getting to this point now of *La Gente De Mucho Más Allá*, I was still very unsure about my role as an actor and student in the Theatre and Performance program. “An actor” was my response to everyone who asked me what I wanted to be from the time I could remember. This dream grew when I was in high school and finally joined the drama club, which ended up feeling like a safety net rather than a bridge to my desired career path. When I first came to Purchase College in my freshman year, I quickly realized how different my relationship to theatre would be after studying it in depth and in a more microscopic way. Like most insecure teenagers, I became discouraged upon hearing the accolades and theatrical accomplishments my peers had garnered before their arrival at Purchase. For my first three years at college, I barely managed to get through my required theatre classes without auditioning for any performance opportunities on and around campus. In the end, not putting myself out there only made things worse for myself. Senior Project is an inevitable part of the SUNY Purchase student experience, even amidst a global pandemic, the continuous fight to end racial inequality, and the worst presidential election our nation has seen. At the height of the pandemic, live stage performances were once thought to no longer be a thing, but as the show must go on, we’ve adapted to the circumstances.

*La Gente de Mucho Más Allá* is an original piece by Janelle McNeil and Andres Vasquez (also the director) about the troubling process of immigrating into the United States from Latin America. Set as an interactive museum in which the audience is welcomed at the secretary's desk

and given different routes to take throughout, *La Gente* sheds light on the different aspects of immigration and what these people go through in hopes of a better life for themselves and/or their family. Being of Latinx ethnicity as well as having members of my family and people close to my heart that are immigrants, this topic is one I have kept tabs on. I have seen, firsthand, the worry and pain inflicted by the United States government onto those in search of a better life. I've fought for the rights of immigrants whether they are documented or undocumented. During my time at Purchase, I have obviously taken many classes within the Theatre program and am fortunate to have had three of those classes be specifically about POC/Black theatre. These have been my first real exposure to theatre which involves things I have an in-depth cultural and familial connection with. Being onboard this project and having an understanding of these stories that deserve to be heard has made sense from the beginning. As someone who fights for what is right and believes in the power of change and equality, I feel it is important to be in a production that emphasizes those values. I understand how important these stories are and wish to help spread the information and make people aware through this performance.

My monologue tells the story of a gay dancer who emigrates from México and follows his dreams of becoming a dancer, describing what it takes for him to get to America and where he is now. Yes, there are certain aspects about this character that I can relate to but there are of course others that I have not and will not experience. I am a gay man who likes to dance, but I do not and will not ever know what it is like to experience the process of immigration to the United States. Getting myself familiar and into the space of this character has me doing thorough research on the process of immigrating, the severity and complications attached, as well as the techniques and day to day life of a dancer. Understanding how dancers walk and what aspirations they have, leaving family (a core value in Mexican households) behind. I talked to my family,

friends, and friends of friends to get a better understanding of what exactly being an immigrant is like. Everyone's story is different, and while they hold similarities, their experiences are singular. As an actor, telling a story is expressed through my entire body. From the expressions on my face, to the way I use my voice, my body's movement, all the way down to the placement of my feet, I must be understood by my audience. These all make up my instrument for the craft of acting and allow a clear performance.

When the rehearsal process started, Andres, having worked with me before, knew my stronger and weaker points. The familiarity eased the anxiety going into my senior project, which ultimately rounds my years as a college student and brings my time at Purchase full circle. My main insecurity when it comes to performing is my voice. I speak way too low, causing mumbling, but also way too fast which does not allow me to be understood sometimes. Voice and speech are a grand part of acting, and if I cannot get the audience to understand what I am saying, what is the point? I hope to accomplish, through this project, improvement of my speech. Slowing down my delivery, projecting my voice to be heard, and ultimately being understood. These are parts of my goals, not only in theatre but also to be applied in my everyday life.

Art tells stories and evokes emotions, it makes you question things. Andres, Spencer and I want this project to bring awareness and shed light on the situation going on at the US-Mexican border. Yes, there are stories being covered but what is being done? What can be done? After leaving our performance, we hope viewers ask themselves these questions. Throughout the process of my senior project I have been questioning a lot. Where do we go from here? What more is there to be done? While the fight against injustice continues, pressure must be applied. Art that provokes and inspires change for the better is fuel and my hope is for this project to be a gas tank. The person leaving the theatre after the information we provide through movement,

dialogue and news should be a more open-minded and aware individual than the one that walked in. In the midst of a global pandemic that is disproportionately affecting Black people and POC, the BlackLivesMatter movement, and an election year, *La Gente de Mucho Más Allá* came at a rather relevant time. Throughout the last four years, under a presidency that has inspired hate and injustice, the immigrations laws and those undocumented have faced more fear and uncertainty than ever. Unfortunately, none of this is new. The injustice and disregard for Black people and POC has been prevalent in this world long before these last four years and continues rampantly. Just because it may not directly effect you or you may not be at total awareness, doesn't mean you shouldn't care. Witnessing and being part of protests that are fighting to ignite a revolution where we can bring the change we so desperately need has emphasized the importance of community and art. Through our art, Spencer, Andres and I want to inspire the audience to be a part of something bigger and that matters.

Graduating in this unsettling period of time brings a boat-load of pressure and questions to the table. While theatre companies along with the entire industry find new ways to continue working safely, I can't help but to think about how this will affect us as a whole in the long run. Worrying about the distant future has never done me any good, but as I get closer to being thrust into the "real world" I think about where I want to go in this life and what I would like to leave behind when I move on to the next one. Thinking about how universal theatre is, I would love to continue in pursuit of this piece of art that has always been prominent in my life. Taking what I have learned in my time as a student and understanding the impact theatre has on people, from all sides and not just the stage, has shown me clear paths. As long as I am involved in life changing and revolutionary art, alongside creatives of all mediums and modes, I will be happy. I hope to open an art therapy studio or a theatre space for Black/POC youth in underfunded art

districts that allows them the freedom to create, learn, understand and be true to themselves and their peers.

The show must go on, and it will. As we continue to reinvent the state of theatre, I am grateful to be able to use my creative freedom and bring awareness to what I have always felt is important and aligns with my beliefs. Growing security in myself as a performer throughout the process of *La Gente de Mucho Más Allá* has given me much needed insight on how art impacts the world and how to navigate my future with art.

## Technical Essay

As hectic as the year of 2020 has been, we have had to adapt to the circumstances of the world in which masks and social distancing are in place for the safety of not just ourselves, but everyone around us. Navigating these new measures in the world of theatre has been a difficult task, but not impossible. The uncertainty of the future of theatre led to a continuous change of plans for what I would be doing for my senior project, wrapping up my time at Purchase. With the help of Spencer Strong and Andres Vasquez, who were the brains of the conception of *La Gente de Mucho Más Allá*, I was finally cast and locked into a senior project. For me, this was not just a senior project, but a chance to step back into my role as an actor after 4 year of not putting myself out there and reevaluate experience with theatre. I was immediately drawn to the idea of incorporating and bringing awareness to the immigration process that Andres had brainstormed for the show. With some input of my own, we thought about what it would take to get this show to exactly where we wanted it to be, while being aware of COVID-19 guidelines. Having in-person rehearsals, figuring out a setting in which we could adhere to social distancing, performing with masks on... these are just some cautionary measures we had to take in preparation for our production to go up safely.

After careful consideration over the spring and summer, seniors were given a choice as to how they would like to go forward with their senior projects. Those who felt they could pull it off completely remote, did so. Those who felt comfortable with returning to campus under extremely careful measures and passionate about their piece being performed live and in-space, returned. Andres, Spencer and I knew we had less time than usual to get this show researched, written, rehearsed, directed, budgeted and executed in a manner that did the stories we were sharing justice. This did not discourage us. We were confident in ourselves and our ability to



push through with hard work, to accomplish this academic goal and reach this required obstacle bringing us one step closer to graduation.

Before Andres and Janelle McNeil could start co-writing the script, our task for the beginning of this process was conducting interviews and research. We interviewed family, friends, and friends of friends who have gone through, or are still in, the process of immigration. Luckily for me, most of my family is made of immigrants, which made the interviewing process much easier, as well as giving us an enormous amount of information to work with. Following interviews and while the authors finalized the script, I patiently waited. As an actor, there was not much I could do until I had my script and could begin my process of learning and getting into my character. When the moment finally came and the script was in my hands, I was elated and began work immediately.

When I got my script, the first thing I did was read it, cover to cover. Being that my character was based on Spencer's brother-in-law, José, I was able to ask her as well as Andres questions about my character without fearing I should already know. Getting into the character of a gay immigrant who is pursuing his dream of dance and navigating the curveballs life has thrown at him was an informative and challenging experience. Noting the similarities of José's life to my own, as well as the many differences, I made a point to remove myself, Gabriel, from the narrative and immerse myself into the mind and body of José Luis Juarez. While we are both gay men pursuing artistic careers that are often undermined, I have not endured the experience of picking up your whole life and moving to a new country in hopes of being able to move forward with your dreams. Becoming José had me carry myself in a different way. Walking lightly and on my toes as dancers do, practicing a Mexican accent that never saw the light of day, reading up on

how the immigration process goes and if there are any hardships LGBTQIA+ immigrants face; these were the beginning processes of becoming José.

After becoming familiar with my interpretation of José, it was time to start bringing the script to life. Our first Zoom rehearsal, consisting of Andres and I, started with a read through, focusing on my piece of the script. Andres gave me notes on where I would try to speed through the words and asked me (in the character of José) many questions about my life and what had gotten me to this point, where I am in the script. Andres broke the script down into four sections and gave me homework to get down the first section as well as tongue twisters to help me slow down my speech. Rehearsal outside of blocked rehearsal time is essential to the process of getting into character and getting down lines. As my character was based on a real-life person and the script was formed by an interview with José, I listened back on this audio file many times, finding different mannerisms in his speech as well as his enunciation. The time by myself with my script also allowed me to play with different aspects of the character, such as certain line deliveries or the nature of their movement within the piece. Showing these tactics and bringing them into the rehearsal space allowed us to see how well they worked or didn't work and get notes from the director on how they would like to see it portrayed.

As Zoom rehearsals continued, they would usually have the same format of how we utilized our time. The first few minutes would be used to warm up, using the tongue twisters like "eleven benevolent elephants," "pad kid poured curd pulled cod," and "really leery, rarely Larry" to name a few. We would continue on to the script, seeing how much I had memorized, going over any homework assigned from the previous rehearsals. Through Zoom, vocal and book work was the most we could accomplish. Thankfully, we were allowed to book certain rehearsal spaces under cautionary COVID-19 guidelines. After figuring out scheduling that worked with

both me and Andres, as well as the stage managers and the availability of the space, we finally began our in-person rehearsal process.

Amidst a pandemic, rehearsals went very differently than what I am used to. When we got to the space, our temperatures were taken and we were given hand sanitizer. After making sure we were all clear to continue safely, we went straight to work. The stage managers sat socially distanced at a table in the front of the space while Andres and I began rehearsals. Like Zoom, we would start with tongue twisters. Now that we were in-person, Andres had me working on carrying myself as a dancer. A new technique we tried was having me walk from corner to corner of the space, without my feet making a sound. I would try different variations of feet placement and walking/running to ensure lightness on my feet. Remaining in character throughout all of rehearsal had me floating through the space like air.

Once we warmed up, we started blocking my scene. At first, I would read through my script, essentially focusing on the section we were working on that week. From there, Andres would direct me into movement as to not stay stagnant while delivering my monologue. Adding movement around specific words in the script for me to remember helped us find the most natural way José would carry himself. The same can be done with expression. In the script, when talking about my family back in México, I would strike a sense of remembrance and longing across my face. My emotional journey continued through the worry in telling my parents about my dreams, to the relief when they assured their support of me, the elatedness of being in a new country, to the anger of realizing the stereotypes and hardships thrown at me. The importance of delivering a line with not only my voice, but my body language and facial expressions is in place in order to ensure the audience understands the story being told to them.

Andres and I continued Zoom rehearsals at least one day out of the week, even if we had the space booked, to make sure the little time we had would be put to good use. Spencer now joined us for the remainder of our rehearsals which thoroughly helped us as she knew the person my character was based on personally. Spencer also offered helpful feedback to Andres and I on blocking the scene and how I expressed certain lines. Once my scene was blocked and my monologue memorized, the remainder of rehearsals before tech week were focused on my ability to stay in character and timing my delivery and the beats of my monologue. The week before tech, the set had been loaded in and we were able to see the exact blocking we had worked with up until this point. With our stage space being split into four sections, one for each room of our museum experience, we now had new dimensions to work with. Andres and I re-blocked my scene to safely and comfortably fit myself and the two-person audience and allow for my movement throughout the piece as we intended. By this time in the rehearsal process, we were able to go through my monologue at least four times during rehearsal to ensure my comfort in being off book and maintaining the imperative timing throughout, as well as my ability to follow Andres' direction.

Entering tech rehearsals, we worked with the design and tech students on the sound and lighting of the show. Andres chose an ambient sound that would play in the background to give off the impression of being in an exhibit at a museum. As an actor, during tech my job was to be in character and able to recount my monologue as many times as needed to make sure I was well lit and visible to the audience. The lighting crew had to play with the lights and shift them from their brackets to adjust to my height and how far off from center I move during my monologue. Once all the lights were in their respective place and I did a run through to ensure satisfaction to

not only the director but the DT's, my job for tech was done. There were now only two dress rehearsals left until opening night.

The week of dress rehearsal and opening night came around and I was confident in a successful show, given how much work and time we all put in. Getting to the CMFT Building, which is where our performance would be brought to life, on the day of our first tech rehearsal, the reality set in. I was to perform as an actor for the first time in 4 years, in my senior project production at that. A wave of nostalgia hit as I settled into the dressing room and changed into José's khakis, light blue button up shirt and dress shoes. The weeks of rehearsals flashed before me and I realized just how much I missed this feeling. The feeling of accomplishment, of doing something you love and still finding joy in it. The dress rehearsals felt like a breeze, only stopping to adjust light fixtures or ensuring the four different rooms in the museum were on their respective timing to allow the flow of the audience. We got through both dress rehearsals and it settled in that all the hard work Andres, Spencer, the crew, and I put into *La Gente de Mucho Más Allá* would soon be shared with our peers. I didn't grow nervous or shy at this thought; in fact I was very proud of myself and the whole team. This pride continued through the two shows we did. As opening night came to a close, I realized how prepared we were despite doubting ourselves mere minutes before we opened the doors for the audience.

We saw a few technical difficulties in our way but nothing that hindered the impact of the performance. We were able to smoothly transition our audience from room to room, allowing them to immerse themselves in the different elements of theatre we had prepared: Andres and his movement piece, my monologue, the newscast on a TV surrounded by chicken wire, and in the last room, three podiums with a different heirloom in each, paired with an audio story tied to each heirloom. In the end, our audience of eight and ourselves were able to discuss the matters of

the production we just put on for them as well as answer and ask any questions. We received much praise, especially for the detailed works of each room, and we were able to hear the emotions we evoked through our performance. On our second and last show, we were able to pull from what we learned from all of that feedback and improve our performance. Once the shows were over, I felt relieved and as if a weight had been lifted from my chest. In many ways, I was glad to be done with the performance aspect of my senior project, but I was also able to acknowledge the fact that I still had love for theatre in my heart, and while this may not be the career I want to continue to pursue, I can always come back to it.

With the help of Andres' direction and the character of José, I was able to achieve personal goals I had set for myself with this project, as well as get a better understanding of my relationship to theatre. My speech slowed down not only in performance mode but in my everyday life. I am a creator and can do anything I set my mind to. I should not measure my success by that of others. All is possible with dedication as well as guidance and teamwork. I am grateful to have been part of *La Gente de Mucho Más Allá* and to have created magic when it felt like there was none left. While the world is divided on how to navigate the pandemic while also still learning new things about COVID-19 rapidly, one thing quarantine and the pandemic have shown is that art is a healing tool. Art can be used as an escape or as release. Art tells stories and evokes emotions, and it makes you question things. Theatre as an art form has been a safe haven for many throughout its existence, me included.

## **LGBTQ+ Immigrants: Disproportionately Detained and Disregarded**

The United States immigration system has grown tremendously over the last 20+ years. Immigration detention has seen a 500% increase in detainees within their facilities between 1994 and 2009 (Turney 3). Since this increase in immigration detention, LGBTQ+ immigrants are faced with disparate treatment once detained because of their identity and expression. In addition, the vagueness and constant change within legislative policies administered in detention centers continue to exacerbate these injustices. The immigration system is a threatening force that abuses its power and does not benefit anyone in custody whatsoever, especially transgender immigrants.

Victoria Arellanos's story is just one of many that shed light on mistreatment faced by transgender immigrants. With immigration detention centers becoming increasingly privatized over time, transgender Latine immigrants have been disproportionately marginalized within these facilities. In 2007 at a detention center in San Pedro, CA, 23-year-old transgender Victoria Arellano died from AIDS. Victoria tested positive for HIV two years before being detained. In those two years before her arrest, Victoria was on HIV medications that had rendered her undetectable (negating the chances of the virus being transmitted). Once detained, ICE medical staff did not keep Victoria on her prescription, which I previously mentioned must be taken every day (Hernandez). Over the next few weeks, Victoria began vomiting and urinating blood. Aware of her conditions and the state she was in, ICE officials offered Victoria only Tylenol and told her to drink a lot of water (Lipscombe 1). As her condition worsened, fellow inmates of Victoria's took matters into their own hands and began to care for her. No amount of pleading with medical staff or ICE agents could make them care. After finally being taken to the hospital, Victoria revealed she received no help but instead was taunted and harassed by the hospital workers. The

abandonment she faced eventually led to her death, ruled to be by meningitis which is a condition associated with advanced AIDS.

Based on research done by the Williams Institute at UCLA, approximately 267,000 LGBTQ+ immigrants are living within the states, with 15,000 to 50,000 of those being undocumented transgender adults (Goldberg & Kerith). However, because the United States Census Bureau collects no data on trans and gender non-conforming people, the numbers are not exactly accurate. If the United States Census does not recognize trans and gender non-conforming people, one can only imagine the neglect and mistreatment they face in immigration detention, especially with laws in place that do not protect nor respect their identity. Transgender immigrants are among the most vulnerable to discrimination and violence. According to a report by the Center for American Progress in 2013, LGBT immigrants in immigration detention centers face an increased risk of abuse while in detention (Pooja). Forms of abuse include sexual assault, extensive use of solitary confinement, verbal and physical, misgendering, as well as denial of medical care. In extreme cases, abuse has even led to death while in ICE custody. Along with the inaccurate numbers surrounding the population of trans immigrants, the construction of immigrant detention facilities has made it more difficult to research the incidents of violence within. Between lawsuits and victims coming forward, we know the violence and mistreatment exists.

In similarity to Victoria's tragic story, there are accounts of transgender immigrants that take similar routes and unfortunately oftentimes have similar endings. When it comes to transgender people, some (not all) choose to change parts of themselves that remind them or reflect the gender they were assigned at birth but are not aligned with their identity. This is the process of transitioning. Transitioning for transgender people can be done in various ways and



like mentioned before, is not the route all transgender folks take. Hormone therapy and surgery (or surgeries) are medical options in transition and are often combined with mental health therapy. Surgeries procedures change the look and function of your genitals so that it matches your gender identity. Hormone therapy is the process of taking a medicine that helps increase or decrease sex characteristics. For those in transition to female, the estrogen hormone AIDS in the development of female physical traits like breast developments, increased body fat, and voice getting higher to name the most notable. For those in transition to male, the testosterone hormone helps in the development of growing facial hair, lowering the octave of voice, and more muscle development. The effects of hormone therapy are reversible by stopping the intake of these medicines (Romito & Husney).

In 2015, in a memo addressed to several ICE directors and ICE Health Services, Thomas Homan of the Department of Homeland Security stated the importance of trans people having access to mental treatment and hormone/hormone withdrawal therapy. Transgender people who are detained by ICE while on hormone treatment are susceptibly more vulnerable to withheld medication. While hormone therapy is reversible by choice, a cold-turkey withdrawal from them can lead to serious medical conditions. Symptoms of withdrawal from hormone therapy can include “emotional lability, desperation which can lead to depression and anxiety, psychiatric and self-injurious behaviors” (Turney 22). The withdrawal symptoms further prove the need for mental health and hormone withdrawal therapy for transgender detainees.

There has been an astounding number of reports against ICE facilities (from specifically trans immigrant detainees) across the country detailing the refusal of medical treatment, abuse from guards and other inmates, and extended periods in solitary confinement. In regard to abuse from other inmates, a prominent danger trans woman faced in ICE custody was being forcefully

placed into detention with male detainees. The misgendering and misplacement of the transwomen in detention centers put them at an increased risk of being taunted, sexually assaulted, and violated. In 2015, ICE's response to the dangers they put transwomen through was to create "pods" specifically for transgender people in custody (Herrera). Even with the creation of these "pods", as stated previously the broad and vague policies put in place for ICE to follow do not directly advocate for LGBTQ+ detainees, ICE has not stopped misgendering transgender detainees and placing them in the hostile environment of their opposite-identity. Trans detainees are left to fend for themselves against not only other inmates but also guards. Often when transgender immigrants experience abuse and bring it to the attention of guards, they are placed in solitary confinement under the guise that is it "for their own protection."

Recently, the San Francisco Public Defenders Office and Freedom for Immigrants (a nonprofit organization) helped in the release of a transgender woman, Lexis Hernandez Avilez, from ICE detention. During her time in the detention center, Lexis was diagnosed with gender dysphoria and came out as a transgender woman. Despite this, Avilez was never placed with the female population nor provided hormone treatment or female clothing. Instead, she was placed in solitary confinement throughout her time in ICE custody. In a statement by Deputy Public Defender Hector Vega, he recounts the mental hardships this placed on Avilez, leading her to become suicidal. Fortunately, Lexis's story did not end there. In April of 2020, an immigration judge ordered Avilez released on a \$10,000 bond. By the following week, Lexis's family had announced they had raised the money for the bond with the help of Freedom for Immigrants, and Lexis's excruciating 17-, month-long detention had come to an end.

There is no direct regulation of conditions within immigration centers. The standards of immigration detention center conditions fall into a grey area where the only explicit mention of

regulation comes from the Immigration and Nationality Act (INA). The INA states that “the applicable agency must provide appropriate places of detention.” (Papst 9) This broad rule leads the conditions of over 200 immigration centers across the country to emulate jails or prisons. Unlike criminal jails and prisons, the immigration detention system operates under civil law. The Bipartisan Policy center states: “Unlike criminal detention and jail... prescribed by criminal law... overseen by state or federal judges, this civil detention is subject to the rules, regulations, and policies prescribed by the immigration law and DHS regulations... authorized by officers of the executive branch.” Even with this difference in authority, many immigration detention centers are located within jails operated by the federal or state government. This leads to immigrants, with no criminal charges, being placed amongst criminals who have been convicted or accused of crimes.

While in immigration detention centers, being placed in housing with criminals is not as common, the living conditions and treatment are in a way, fraternal twins. The process of being placed in ICE custody has direct links to the detaining of someone by police. Handcuffed and shackled, stripped of your belongings, assigned to holding cells.... This is the treatment given to immigrants hoping to find a better way of life in the United States. This is also the treatment of people accused or convicted of criminal offenses in jails and prisons. Based on their behavior, it might seem that ICE guards resent not being “real cops,” while still desiring the punitive power that comes with a position of authority. This often results in more hostile and aggressive policing which is a problem for all immigrants being detained. However, studies show that LGBTQ+ detainees, specifically trans-women and HIV-positive folks, are at an increased risk for medical issues, violence, harassment, and neglect from ICE agents.

When the HIV/AIDS epidemic began in the 1980s, uncertainty, and confusion of the virus fueled the growing fear of foreigners entering the United States borders. The president at the time, Ronald Reagan, required all incoming immigrants to be tested for HIV (Winston). Any person found infected, regardless of evidence of advanced AIDS symptoms, was not allowed admission into the country. This was the only acknowledgment made by President Reagan on the HIV/AIDS crisis. Support for the restriction of HIV-positive immigrants was backed up by the fear of those infected becoming a public charge or benefiting from our national health care and resources. What the government failed to realize in this political stunt was that there were already laws in place stating that immigrants must have the financial means to support themselves, which would already prevent them from becoming a public charge. By missing this key factor, the lack of care and stigma surrounding HIV- positive increased.

On January 4, 2010, after persistent advocacy, a 22-year ban on non-US citizens living with HIV was lifted (Winston). The restriction of entrance to the United States based on medical conditions was first introduced through the INA in 1952. The medical reasoning behind this ban initially included mental health disorders, leprosy, and “any dangerous contagious virus.” The ambiguity of “any dangerous contagious virus” was under the discretion of the CDC. Throughout the history of this restriction, the list of these dangerous viruses was stretched and in the 1980s, HIV/AIDS was included (Wintson). While the lifted restriction of those living with HIV allowed entry to the US was a step in the direction of reducing the stigma surrounding HIV-positive people, there were also setbacks following the removal of the ban. A negative to the lifted restrictions is the removal of mandatory HIV testing for immigrants taken into ICE custody. Someone unaware of their HIV status can be at risk by unknowingly transmitting the virus and

could result in the advancement of AIDS, at which point treatment to support the infected immune system is too late.

Since the discovery of HIV/AIDS in the 80s, advanced scientific research and understanding of the virus have produced various treatments for HIV. The first was introduced in 1989 and was a drug called azidothymidine or AZT. Research showed that AZT slowed the progression of HIV into AIDS. Within two years of AZT's emergence, two more antiretroviral medications were introduced. For those affected by HIV, these medications seemed like hope was around the corner. Unfortunately, due to the high cost of treatment (over \$10,000), it was not within reach for many. As of today, there are over twenty approved antiretroviral medications in the US. These medications, often referred to as Highly Active Antiretroviral Therapy (HAART), are to be taken every day for the rest of the HIV-positive persons' life. When used properly, these medications work with the immune system (specifically T-cells) of the infected person and allow them to become undetectable holders of the virus. T-cells in a healthy immune system range from 500-1600, once they go below 200, a person will receive an AIDS diagnosis (Land). Even with all the medical advancements and knowledge gained since HIV emerged, the stigma surrounding HIV-positive people still runs rampant throughout society.

Within immigration detention centers, those who are HIV-positive are often mistreated and neglected because of their status. Much like hormone therapy for transgender people, HIV-positive people who are fortunate enough to have access to antiretroviral medications must be consistent with their intake. Missing doses of HIV medication can increase the possible development of drug resistance, which in turn decreases the effectiveness of the drug (Tong). Being that the antiretroviral medications are keeping T-cells up and building up the immunity to HIV, missing even just one dose can cause T-cells to skyrocket. As was the story of Victoria at

the beginning of this paper, that is the case for many HIV-positive detainees in immigration detention centers. The stigma surrounding HIV-positive people remains rampant today and is a clear reason that medical neglect continues to happen.

The guidelines for medical operations and health services within ICE detention centers are governed by DHS's Detention Management Control Program. The criteria for ICE medical services do not follow force of law which allows fewer repercussions when ICE agents fail to give adequate medical care. Medical benefits that are covered read:

“The ICE Medical Program has an established covered benefits package that delineates the health care services, medical products, and treatment options available to all detainees in ICE custody. The ICE-covered services package emphasizes that benefits are provided for conditions that pose an imminent threat to life, limb, hearing or sight, rather than to elective or non-emergent conditions.” (Lipscombe 16)

With no national standards, detention facilities are at liberty to have varied policies regarding non-emergency care, and what they classify as emergencies. In other words, ICE works on a case to case basis. For many facilities, there is no on-site HIV specialist. This fact is a major setback for HIV-positive patients since they cannot get specialized care that deals with their specific needs. To provide care, prior approval from the Division of Immigration Health Services (DIHS) is required in the form of a treatment authorization request, or TAR. Without the TAR, detention centers cannot be reimbursed by the DIHS for medical care. More than 40,000 TAR's are submitted each year with a 90% approval rate (Lipscombe 9). According to ICE memos, medical costs due to TAR refusal recorded HIV as the greatest cost saving category. The high cost of HIV medications further challenges treatment being provided.

As the United States Immigration System has grown over time, the outdated and imprecise policies for the detention centers have allowed living conditions to mirror those of jails and prisons. While the immigration process is no walk in the park for anyone, LGBTQ+ detainees, specifically transgender and HIV-positive immigrants, are statistically more likely to face abuse in many forms, medical neglect, and harassment from ICE Border Patrol Agents. There is unnecessary death at the hands of the United States Immigration Detention Centers and ICE agents. Deaths that could be avoided had they been shown a little more empathy and compassion. With all the government funding and the way society has progressed over the years, ICE is more than capable of rewriting laws that incorporate inclusionary language as well as getting access to proper and efficient medical care for LGBTQ+ and HIV-positive immigrants.

## Works Cited

1. “Decriminalizing Illegal Border Crossing: What Does It Mean? An Explainer of Civil vs. Criminal Immigration Enforcement.” *Bipartisan Policy Center*, bipartisanpolicy.org/blog/decriminalizing-illegal-border-crossing-what-does-it-mean-an-explainer-of-civil-vs-criminal-immigration-enforcement/.
2. Goldberg, Shoshana K., and Kerith J Conron. “LGBT Adult Immigrants in the United States.” *Williams Institute*, 23 Feb. 2021, williamsinstitute.law.ucla.edu/publications/lgbt-immigrants-in-the-us/.
3. Hernandez, Sandra. “A Lethal Limbo.” *Los Angeles Times*, Los Angeles Times, 1 June 2008, [www.latimes.com/archives/la-xpm-2008-jun-01-op-hernandez1-story.html](http://www.latimes.com/archives/la-xpm-2008-jun-01-op-hernandez1-story.html)
4. Herrera, Jack. “Why Are Trans Women Dying in ICE Detention?” *Pacific Standard*, Pacific Standard, 4 June 2019, psmag.com/social-justice/why-are-trans-women-dying-in-ice-detention.
5. Karma R. Chávez PhD (2011) Identifying the Needs of LGBTQ Immigrants and Refugees in Southern Arizona, *Journal of Homosexuality*, 58:2, 189-218, DOI: [10.1080/00918369.2011.540175](https://doi.org/10.1080/00918369.2011.540175)
6. Land, Emily. “Fact Sheet: Undetectable Viral Load.” *San Francisco AIDS Foundation*, 7 June 2019, [www.sfaf.org/collections/beta/fact-sheet-undetectable-viral-load/](http://www.sfaf.org/collections/beta/fact-sheet-undetectable-viral-load/).
7. Lipscombe, Carl Kenneth. *Tylenol and an Ice Pack: An Inadequate Prescription for HIV/AIDS in Immigration Detention Centers*. [www.hivlawandpolicy.org/sites/default/files/Tylenol%20and%20an%20ICE%20Pack%20-%20An%20Inadequate%20Prescription%20for%20HIV%20AIDS%20in%20Immigration%20Detention%20Centers%20%28Lipscombe%29.pdf](http://www.hivlawandpolicy.org/sites/default/files/Tylenol%20and%20an%20ICE%20Pack%20-%20An%20Inadequate%20Prescription%20for%20HIV%20AIDS%20in%20Immigration%20Detention%20Centers%20%28Lipscombe%29.pdf).



8. News, Bay City. "Misgendered Trans Woman Gains Release from Immigration Detention after 17 Months." *SFBay*, SFBay, 25 Apr. 2020, [sfbayca.com/2020/04/24/misgendered-trans-woman-gains-release-from-immigration-detention-after-17-months/](https://sfbayca.com/2020/04/24/misgendered-trans-woman-gains-release-from-immigration-detention-after-17-months/).
9. Papst, Kelsey E. "Protecting the Voiceless: Ensuring ICE's Compliance with Standards That Protect Immigration Detainees." *Scholarly Commons*, [scholarlycommons.pacific.edu/mlr/vol40/iss1/9/](https://scholarlycommons.pacific.edu/mlr/vol40/iss1/9/).
10. Pooja Gehi, Struggles From the Margins: Ann-Immigrant Legislation and the Impact on Low-Income Transgender People of Color, 30 WOMEN'S RTS. L. REP. 315, 318 (2009).
11. Reyes, Guillermo. "Deporting the Divas."
12. Romito, Kathleen, and Adam Husney. "Medical and Other Transition Options for Transgender People." *Medical and Other Transition Options for Transgender People | Michigan Medicine*, [www.uofmhealth.org/health-library/acd1551](http://www.uofmhealth.org/health-library/acd1551).
13. Tong, Warren. "Here's What You Need to Know about HIV Drug Resistance." *San Francisco AIDS Foundation*, 16 July 2020, [www.sfaf.org/collections/beta/heres-what-you-need-to-know-about-hiv-drug-resistance/](http://www.sfaf.org/collections/beta/heres-what-you-need-to-know-about-hiv-drug-resistance/).
14. Turney, CT, et al. "Give Me Your Tired, Your Poor, and Your Queer: The Need and Potential for Advocacy for LGBTQ Immigrant Detainees." *UCLA Law Review*, 21 Sept. 2019, [www.uclalawreview.org/give-me-your-tired-your-poor-and-your-queer-the-need-and-potential-for-advocacy-for-lgbtq-immigrant-detainees/](http://www.uclalawreview.org/give-me-your-tired-your-poor-and-your-queer-the-need-and-potential-for-advocacy-for-lgbtq-immigrant-detainees/).

15. Winston, Susanna E., et al. "The Impact of Removing the Immigration Ban on HIV-Infected Persons." *Mary Ann Liebert, Inc., Publishers*, 29 Nov. 2011, [www.liebertpub.com/doi/abs/10.1089/apc.2011.0121?journalCode=apc&](http://www.liebertpub.com/doi/abs/10.1089/apc.2011.0121?journalCode=apc&).

## Artistic Production

Attached on this page is a link to view the performance of *La Gente de Mucho Más Allá* in full! I have also added in two photos from the set.

Link: <https://prezi.com/view/TPzTmWvC1y7uqvt7buPJ/>

Photos (taken by DJ Fralin):

