TRUMP’S PUBLIC CHARGE PROPOSAL IS HURTING IMMIGRANT FAMILIES NOW
Even Though DHS’s Proposed Regulation is Not Final

The Trump Administration’s policies are harming immigrant families—with negative impacts on health, emotional well-being and economic stability. A Kaiser Family Foundation report showed that under this Administration¹:

- Immigrant families are experiencing sudden and severe financial hardship - struggling to pay bills like rent and childcare, as well as problems paying for food.
- Children have increased mental health issues and behavior changes, more difficulty paying attention at school, and more problems sleeping.
- Families have growing fears about participating in public programs.

The proposed changes to public charge policy in the U.S. are not final, but they are already causing significant harm. Fear and confusion - known as the chilling effect - are causing people to disenroll from programs or forgo benefits to which they are eligible. The impact is far-reaching, given that one in four children in the U.S. has at least one foreign-born parent. A Manatt Health analysis estimates that as many as 26 million people and their families could be dissuaded from using public benefits under the proposed rule change.²

Across the country, reports of the rising confusion and fear among immigrant clients and patients and their families are already surfacing:

- In a 2018 survey of health care providers in California, more than two-thirds (67 percent) noted an increase in parents’ concerns about enrolling their children in Medi-Cal (California’s Medicaid program), WIC, and CalFresh (California’s SNAP program); nearly half (42 percent) reported an increase in skipped scheduled health care appointments.³

- One Medicaid health plan in Texas found that leaked versions of the public charge proposal contributed to declining enrollment in its state; sharing that "it is thought that nearly 150,000 fewer individuals currently access Medicaid in Texas in part due to the leaked rule."⁴ Another Medicaid health plan in California - along with many

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of its contracted providers – has already received calls from Medicaid enrollees expressing their fear of being considered a public charge and requesting information on how to disenroll from the program.5

- A recently published Kaiser Family Foundation/California Health Care Foundation survey reported that 40 percent of the uninsured in California responded that they were “very worried” or “somewhat worried” that “if you sign up for health insurance you will draw attention to your or your family’s immigration status.”6

- WIC agencies in at least 18 states say they’ve seen drops of up to 20 percent in enrollment, and they attribute the change largely to fears about the public charge policy. WIC providers in Washington state, Kansas and New York state almost all said they have seen immigrant mothers and their children drop from WIC, citing public charge concerns. A WIC agency in Longview, Texas, reported it’s losing an estimated 75 to 90 participants per month to public charge fears. In Beacon, N.Y., an agency estimated it’s lost 20 percent of its caseload. In St. Louis, Missouri, a provider said it’s seen a few dozen drop in the last year.7

- Covered California’s 2019 Open Enrollment Early Observations and Analysis report noted that greater decreases in new plan elections among Korean-, Spanish- and Mandarin-speaking individuals may have been in part due to the fears about the proposed public charge regulations.8

- After a decade of steady increases in SNAP participation, participation among children with immigrant mothers fell by nearly ten percentage points from 2017 to the first half of 2018, while employment rates for this group were unchanged. The drop in participation may be related to more nuanced changes in national immigration rhetoric and increased federal action to deport and detain immigrants. These findings demonstrate that rhetoric and the threat of policy changes, even before changes are enacted, may be causing families to forego nutrition assistance.9

- Legal Aid Foundation of Los Angeles attorneys have received phone calls from clients who are survivors of domestic violence and sexual assault, and who currently receive some form of public benefits as they rebuild their lives. They want to know if they should immediately dis-enroll from these programs. Even after being explained that their form of immigration status is exempt from the public charge test, clients remain fearful that their receipt of public benefits will bar them from stabilizing their immigration status.10

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Across the country, social services providers have provided first-hand accounts of people in immigrant families who are already afraid to participate or allow their children to participate in health care and nutrition programs.

- A North Carolina pediatrician treated a 9-year-old Latina girl who was so terrified her parents would be deported while she was at school that she was experiencing recurring headaches, stomach pain, and anxiety. She was missing school due to her fear and these resulting health issues. Her parents are aware that she needs medical care but are scared to seek treatment because of the public charge issue.11

- After hearing about public charge, a mom in North Carolina with legal permanent resident status (“green card holder”) decided to terminate (health insurance) Marketplace coverage for herself and Medicaid coverage for her U.S. citizen children, despite the advice of a health care enrollment navigator. No one in her family would be directly harmed by the current or proposed public charge rule. As an LPR, she is not subject to public charge and coverage under the ACA is not subject to public charge under the proposed rule. But even when these facts were explained, the mom terminated her coverage.12

- When she heard about the proposed rule, a mother in Houston disenrolled her kids from SNAP, which had provided the family with $340 in food assistance each month. She also disenrolled her 13-year-old daughter from Medicaid out of fear and confusion about how the daughter’s use of Medicaid would impact her own green card. Now her daughter has cavities that need filling, and vision that keeps getting worse every year. Yet she’s afraid to use Medicaid to pay for glasses or a trip to the dentist.13

- In Florida, an outreach worker discussed a child’s options for coverage, including Medicaid and Emergency Medicaid, with [the child’s] mother, a green card holder. However, the child’s mother “just was not remotely interested in trying” to enroll in the programs available to her because “she was applying for citizenship and she was afraid that it would negatively impact her citizenship.” The woman specifically mentioned public charge when she turned down the services.14

- A hotel housekeeper with a working adult son received food stamps that weren’t worth a lot — about $50 a month. Although she was entitled to food stamps as a green card holder from Mexico, she heard from a friend that getting the benefit could be counted against her if she applied for citizenship, which she was planning to do. So she disenrolled.15

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• A service provider in California said, “It’s also because of the news they hear. One family disclosed that they didn’t apply for WIC because they heard that immigration would come to their door.”16 And a home visitor in NC reported a “major reluctance to enroll or re-enroll in public benefits. Moms are afraid to sign back up for Medicaid, food stamps, and other services.”17

• A mother in Florida said: “People have told me that I cannot apply for food stamps nor Medicaid for [my daughters] if I am doing my residency. I don’t know if it’s true or not... I’ve decided not to renew because I am afraid, because I don’t want them to deny me my migration status ... [I’ve heard] that I cannot apply for my children because, although they are American citizens, because I am a public charge.” “A mí me han dicho que yo no puedo aplicar para los, los food stamps, ni siquiera el Medicaid para las niñas, si yo estoy haciendo mi residencia, sí, so... No sé esto qué tan cierto sea o no he decidido no renovar porque tengo miedo a que mi, mi residencia basado en Medicaid de los niños, porque en realidad yo aplico no para mí, es para los niños. Y no quiero renovarlo por eso, porque tengo miedo, porque no quiero que me nieguen mi, mi beneficio migratorio... Que yo no puedo aplicar para los niños porque, aunque sean ciudadanos americanos porque ya soy carga pública.”18

• A woman in California who is eligible for SNAP but has not applied due to fear said “because of the experiences that people have had, realizing when they go to arrange their documents, they ask them ‘Have you been a burden for the country? In which way? Have you applied for food stamps? Have you been in the free lunch program? Have you filed your taxes?’ So all those questions, when you go to arrange your documents, makes people afraid, fearful, that they won’t be able to become residents. So many refrain from that.” “[Bueno por la experiencia que han tenido personas, que se han dado cuenta cuándo van a arreglar sus documentos, entonces le preguntan ‘Usted ha sido una carga para el país? En qué forma? Usted ha aplicado para estampillas de comida? Ha estado en el programa de lonche gratis? Usted ha hecho los impuestos?’ Entonces todas estas preguntas, cuándo van a arreglar sus documentos, les da miedo, temor...que no van a poder hacerse residentes. Entonces muchos se abstienen de eso.”19

• A woman in California reported her fear of applying for and using SNAP: “What did Trump say? That people requesting [food] stamps or CalFresh, they were going to investigate them and if they’re not eligible, or not long-term residents they were going to investigate them and take them away, deport them.” [“Qué dijo Trump? Que las personas que pidieran estampillas o eso de CalFresh las iban a investigar y si no eran elegibles o residentes de mucho tiempo los iban a investigar y sacarlos, deportarlos.”]20

Written by Lena O’Rourke with the Protecting Immigrant Families Campaign, April 2019.

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