

Trump's Public Charge Regulation Is Hurting Immigrant Families Now

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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 shows that under this administration, immigrant families are experiencing sudden and severe financial hardship, struggling to pay bills like rent and childcare, as well as problems paying for food.¹

Changes to the public charge policy already caused significant harm even before they went into effect in February 2020. Fear and confusion — known as the *chilling effect* — are causing people to disenroll from programs or forgo benefits for 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 because of the rule change.**² Just two months after the proposed rule was published, **one in seven adults in immigrant families reported that they or a family member had declined to participate in a government benefit program for fear of risking future green card status.**³

Now, there is evidence that immigrants are afraid to access medical treatment for COVID-19 and necessary economic supports because of public charge.⁴

- A physician who provides medical care to farmworkers in California stated that his patients are “afraid to seek medical care” and are “fearful of negative immigration consequences if they use publicly subsidized medical services due to the public charge rule” during the pandemic. These people, who harvest and process the crops that keep our nation fed, **are working while sick because they cannot afford to feed their own families if they stay home, and they’re “afraid to apply for nutrition assistance programs ... due to the fear that if they receive those benefits, the public charge rule will negatively affect their immigration status in the future.”**⁵
- A medical resident working at a community health center in Connecticut reported having seen patients with COVID-19 symptoms who were afraid to go to the hospital or seek testing because of public charge. An attorney in California reported that survivors of human trafficking and crime who lost their

¹ S. Artiga and B. Lyons, *Family Consequences of Detention/Deportation: Effects on Finances, Health, and Well-Being* (Kaiser Family Foundation, 2018), <https://www.kff.org/disparities-policy/issue-brief/family-consequences-of-detention-deportation-effects-on-finances-health-and-well-being/>.

² *Public Charge Proposed Rule: Potentially Chilled Population Data Dashboard* (Manatt Health, 2018), <https://www.manatt.com/insights/articles/2018/public-charge-rule-potentially-chilled-population>. Calculation of the potentially chilled population based on families with at least one noncitizen and earned income under 250 percent of the federal poverty level.

³ H. Bernstein, et al., *One in Seven Adults in Immigrant Families Reported Avoiding Public Benefit Programs in 2018* (Urban Institute, May 2019), <https://www.urban.org/research/publication/one-seven-adults-immigrant-families-reported-avoiding-public-benefit-programs-2018>.

⁴ Hamed Aleaziz, “Immigrants Are Scared of Getting Coronavirus Treatment Because of Trump's Crackdown, Doctors and Lawyers Say,” *BuzzFeed News*, April 13, 2020, <https://www.buzzfeednews.com/article/hamedaleaziz/immigrants-coronavirus-treatment-fears-public-charge-policy>.

⁵ Motion by Government Plaintiffs to Temporarily Lift or Modify the Court's Stay of the Orders Issued by the United States District Court for the Southern District of New York, Dept. of Homeland Security, et al. v. New York, et al. (April 13, 2020), http://supremecourt.gov/DocketPDF/19/19A785/141515/20200413153014307_19A785%20Motion%20to%20Temporarily%20Lift%20or%20Modify%20Stay.pdf.

jobs or experienced reduced income because of COVID-19 were afraid to apply for unemployment and receive nutrition assistance programs to support their families.⁶

- Immigrants are **disproportionately concentrated in “essential” industries and occupations**. Approximately 6 million immigrants are working in jobs at the frontline of the crisis, like health care, essential retail and wholesale, manufacturing, and agriculture, **putting them at risk for contracting COVID-19 on the job**.⁷
- Immigrants are also **overrepresented in industries that have been hard-hit by layoffs**, such as restaurants, hotels, cleaning services, and childcare. Another 6 million immigrants work in these industries and face economic insecurity during this unprecedented time.⁸

Before the pandemic hit, social services providers provided firsthand accounts of people in immigrant families who are 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 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**.⁹
- After hearing about public charge, a mom in North Carolina with lawful permanent resident status (she has a “green card”) decided to terminate Affordable Care Act Marketplace health insurance 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 public charge regulation. As a person with a green card, she is not subject to public charge, and having coverage under the ACA is not part of the public charge assessment. **But even when these facts were explained, the mom terminated her coverage**.¹⁰
- When she heard about the public charge regulation, 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.¹¹

Written by NILC’s Holly Straut-Eppsteiner on behalf of the Protecting Immigrant Families Campaign, cochaired by Center for Law and Social Policy (CLASP) and National Immigration Law Center (NILC), April 2020.

⁶ *Ibid.*

⁷ Julia Gelatt, *Immigrant Workers: Vital to the U.S. COVID-19 Response, Disproportionately Vulnerable* (Migration Policy Institute, March 2020), <https://www.migrationpolicy.org/research/immigrant-workers-us-covid-19-response>.

⁸ *Ibid.*

⁹ K. Clarke-Pearson and L. Pereda, “Another Blow to Immigrants and Their Families,” *Herald Sun*, July 9, 2018, <https://www.heraldsun.com/opinion/article214593040.html>.

¹⁰ Holly Straut-Eppsteiner, *Documenting through Service Provider Accounts Harm Caused by the Department of Homeland Security’s Public Charge Rule* (National Immigration Law Center, February 2020), <https://www.nilc.org/documenting-harm-caused-by-the-department-of-homeland-securitys-public-charge-rule/>.

¹¹ Teo Armus, “A proposed federal policy won’t target immigrants for using welfare. In Texas, they might drop out anyway,” *The Texas Tribune*, September 28, 2018, <https://www.texastribune.org/2018/09/28/public-charge-immigration-chilling-effects-texas/>.