

December 16, 2019

House Committee on Education and Labor
2176 Rayburn House Office Building
Washington DC, 20515

Re: "Growing up in fear: How the Trump Administration immigration policies are harming children"
Full Committee Hearing, December 4, 2019

Dear Chairman Scott and distinguished members of the House Committee on Education and Labor,

Thank you for the opportunity to submit testimony on behalf of Children's HealthWatch on the detrimental impact the Trump Administration's immigration policies have on the health and well-being of children. As a nonpartisan network of pediatricians, public health researchers, and children's health and policy experts committed to improving children's health in America, we are acutely aware of the harmful health and economic consequences of increased immigration and enforcement policies, and how they threaten the health and well-being of immigrant families, specifically children.

The mission of Children's HealthWatch is to improve the health and development of young children by informing policies that address and alleviate economic hardships. We accomplish this mission by interviewing caregivers of young children on the frontlines of pediatric care, in urban emergency departments and primary care clinics in five cities: Boston, Minneapolis, Little Rock, Baltimore, and Philadelphia. Since 1998, we have interviewed over 70,000 caregivers, including more than 15,000 at Boston Medical Center, and analyzed data from those interviews to determine the impact of public policies on the health and development of young children.

As pediatricians and public health researchers, we are gravely concerned about the culture of fear perpetuated by controversial policies that target immigrants, including families with young children, across the United States and their effects on economic hardship and health. Since the start of the Trump Administration, families of immigrants have been unfairly targeted by a number of new policies and through multiple Departments and executive processes, including changes to:

- **Public charge (Department of Homeland Security, Department of State, and anticipated Department of Justice)**
- **Sponsor deeming and liability (White House memo)**
- **Fee waiver, fee schedule, and other fee changes (DHS)**
- **2020 Census – attempt to add a citizenship question**
- **Public housing access for mixed-status families (Department of Housing and Urban Development)**
- **Presidential proclamation on the suspension of entry of immigrants who would financially burden the healthcare system**

Immigrant families are an integral part of our communities —they are our neighbors, coworkers, friends, and fellow parents. One in four children under age 8 in the U.S. have at least one immigrant parent; of those children, 93.3 percent were born in the United States.^{1,2} Even though citizen children with an immigrant parent are more likely to live in a family with a full-time worker compared to children of US-born parents,³ their families disproportionately experience food insecurity, struggle to afford housing

costs, and lack access to health care.^{4,5,6} Each of these hardships is associated with adverse health and developmental outcomes for young children,^{7,8,9} including US citizen children of immigrant mothers.²

Immigrants are also integral to our economy, making up 17.4% of the US workforce in 2018. Their children are projected to offset the decline in working-age population as Baby Boomers retire by adding 18 million working-age people to the population between 2015 and 2035.¹⁰ Furthermore, immigrant families are a fundamental part of our American history and values. For hundreds of years, the United States has welcomed immigrants and their dream for a better, more prosperous life. However, the changes detailed in the recent policy proposals listed above threaten these values as they effectively only allow the wealthy to immigrate to and become successful in the United States. Policies of fear and punishment, such as the one laid out in these rules, do not build a brighter future for American communities with healthy people and strong workers; to the contrary, such policies will compromise the health of current and future generations, diminish their ability to excel in school, work and life, and diminish the human potential of communities across the nation.¹¹

Public charge:

The changes detailed in the DHS and DOS public charge rules threaten our country's health as they force immigrant families to choose between providing basic necessities that keep children healthy, like food, shelter, and medical care, and having their family remain together in the United States. Concretely, based on our extensive clinical and research experience, we know these regulatory measures deter families from accessing programs that could prevent or alleviate economic stressors – even when they are eligible for assistance.¹² Changes to public charge will also exacerbate existing hardships experienced by immigrant families by further preventing families from accessing supports that are currently available to all citizen children and immigrants with certain documented statuses. Not receiving needed support will further jeopardize the health, and body and brain growth of our youngest children, and the long-term health of our country. Moreover, it will lead to major increases in healthcare costs for the nation.^{13,14,15} For example, even before the rule was finalized, families in our pediatric clinics reported making agonizing choices to remove their families from vital assistance programs that ensure their children are able to eat healthy foods and receive medical care, out of fears for their future immigration status.¹⁶ These choices have immediate and lasting consequences for the young patients in our clinics that imperil their current and future health. Our research over the last twenty years and the work of many others demonstrates that if families are able to access supports when they fall on hard times, the health of all family members, the well-being of our communities, and our economy are strengthened.^{3,17,18,19} Punishing families utilizing public services designed to improve public health places millions of children at risk of adverse health and developmental delays during a critical window of development. This, in turn, will have immediate and long-term effects on our country's health and education systems, and the strengths and skills of our workforce.

In addition to the DHS public charge rule, the Administration has also published changes to public charge criteria and information required from immigrants and other visa applicants through the Department of State (DOS). If implemented, this will have similar effects on children and immigrant families, and discriminate against individuals from low-income countries – countries that are disproportionately people of color – because the vast majority of people fall below the proposed 125 percent-of-poverty threshold included as a consideration in the public charge determination. Worldwide, approximately 81% of the total population falls below this income level; in low-income countries in particular this percent is extremely high, with 99% of the population of South Asia, 99% of the population of Sub-Saharan Africa, and 79% of the population of Latin America and the Caribbean falling below the United

States 125 percent-of-poverty threshold.²⁰ By requiring immigrant and other visa applicants to demonstrate ability to immediately financially support themselves following entry to the United States partly based on their current wealth or immediate earnings, specifically using the DS-5540 to “collect more detailed information on an applicant’s ability to support himself or herself”, the Department is ignoring the limited and disproportionate amount of wealth and earnings available in the majority of other countries, and the fact that many immigrants will become employed in the US and thus earn increased incomes.²¹ While immigrants seeking to rejoin family in the United States, can count their family’s income towards the 125-percent test, the test will remain hard for those joining family of modest or limited means because the arriving individual will have income on their home country’s wage scale. This may lead to family separation if only some members of a family, based on differences in wealth and earnings, are permitted entry to the United States. This would inflict unnecessary hardship and trauma on both immigrants and future generations of US citizen children, as family separation has documented profound impacts on child health and well-being.^{22,23} Furthermore, the public charge rule and the subsequently stringent DS-5540 public charge questionnaire disregards the fact that a country’s low wage rates do not reflect a potential immigrant’s core traits and skills or their ability to develop skills and succeed in the United States. Our national history and a breadth of evidence have shown that immigrants have achieved significant upward mobility for themselves and their children, helping strengthen the nation and its middle class, its industries, and its innovation sector.²⁴

Fee waiver, fee schedule, and other fee changes:

The proposed changes to the fee schedule and other immigration benefit request requirements create an additional burden for immigrant families. We are particularly concerned about the drastic increase in naturalization and other application fees, as well as the establishment of a new \$50 fee to seek asylum. If put in place, an asylum fee would dramatically undermine American values and further risk the lives of asylum seekers, including children. If implemented, the U.S. would become only the fourth nation in the world to charge people who are fleeing for their lives and seeking asylum, unnecessarily politicizing human life.

The proposed rule also includes a drastic 83 percent increase to the naturalization application fee, raising the cost from \$640 to \$1,170. Previous research demonstrates immigrants with low incomes are able to improve their financial stability following naturalization as they are often then afforded better access to educational opportunities, jobs, and other resources.²⁵ However, this extreme increase in cost would make naturalization impossible for many immigrants by restricting citizenship to only those who can afford it. This places the health of immigrants and their children at risk, and contributes to inequities that privilege affluence.

At the same time that DHS is seeking this historic increase in the fee for naturalization and other benefits, it is planning to completely cut-off access to immigration and naturalization for certain people by eliminating well-established fee waivers. These waivers allow qualifying, low-income and vulnerable people and families to maintain their immigration status or take the next step to become a permanent resident or citizen. Immigration experts report the filing fee associated with various immigration benefits can be an insurmountable obstacle for an immigration benefit or naturalization application. The changes to the fee waiver application and acceptable documentation will discourage eligible individuals with low incomes from filing for both fee waivers and immigration benefits. Terminating this program will put families at risk of potentially losing their documents and becoming vulnerable to deportation. The proposed rule would also increase or establish application fees for lawful permanent residency, DACA, certain asylum claims, and several other applications. Furthermore, it would transfer over \$110 million from USCIS to Immigration and Customs Enforcement for enforcement purposes, contributing to

an increased focus on restrictive immigration policies and enforcement that create fear and stress that negatively affect children's physical and mental health and cognitive development.²⁶

Citizenship question in 2020 census:

Asking an untested question about citizenship status would increase fear in immigrant communities – among people who are U.S. citizens or have legal non-citizen status and those with undocumented status alike – and ultimately decrease Census participation.²⁷ This would lead to undercounting low-income and immigrant communities, putting the accuracy of the Census and critical health and social programs, which rely on Census data for accurate distribution of federal, state, and local funding, at risk for generations to come.²⁸ These include programs that are critical to support the health and well-being of children, including Medicaid, Children's Health Insurance Program (CHIP), the Supplemental Nutrition Assistance Program (SNAP), the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), section 8 housing vouchers, and the federal school lunch program. Although the memo to add a citizenship question to the 2020 census was withdrawn, the proposal likely still contributed to a chilling effect within immigrant communities.

Public housing access for mixed-status families:

In May 2019, the Administration proposed a rule to restrict mixed-status families from accessing public housing, a change that would harm child and family health by placing thousands of families at risk of eviction, homelessness, housing instability, and family separation and inflicting unnecessary trauma and hardships on both immigrants and US citizen children. Our research and the research of others show young children and their families require affordable, safe, and stable homes to become and remain healthy. The proposed changes to section 214 of the Housing and Community Development Act threatens the ability of thousands of mixed-immigration status families to afford a stable home by restricting who is permitted to live in subsidized housing and access housing benefits. This includes evicting family members not receiving public assistance, and no longer permitting eligible children in otherwise ineligible households to receive housing assistance. If passed, this would force mixed status families to make the excruciating decision to either be evicted as a family and face the possibility of homelessness or unstable housing, or separate in order for some family members to maintain access to affordable housing. Either way, this policy would displace current residents, including children, split families apart, exacerbate hardships experienced by mixed status families, and potentially destabilize the health of entire communities.

The effects of this policy will not only prevent families from accessing evidence-based housing programs for improving housing stability, but also endanger the current health of our youngest children and the long-term health of our nation. As stated previously, one in four children under age 5 in the U.S. has at least one immigrant parent; of those children, 93.3 percent were born in the United States.^{11,12} This includes children of undocumented immigrants, as well as other types of immigrants ineligible for housing assistance. Under current law, these US born or otherwise eligible children in mixed status families are still entitled to assistance, even when the caregiver (or leaseholder) is not. The proposed rule would change this by requiring all heads of households and leaseholders be eligible immigrants or US citizens. This change and related loss of benefits would directly and adversely affect the health and development of American children. According to HUD, 70 percent of mixed status families consist of eligible children and ineligible caregivers; by HUD's own estimate, these 55,000 children in approximately 17,000 households that are legally eligible for benefits would be removed from public assistance as a result of the change prohibiting ineligible caregivers to serve as a leaseholder on their behalf.²⁹ Disqualifying families and eligible children from affordable housing will only exacerbate homelessness, poverty, and suffering across American communities and most significantly among US

born and other eligible children who are entitled to equal protection under the law and to government support.

Additionally, this policy may cause family separation among immigrants, which has profound impacts on child health and well-being.^{30,31} Instead of facing the economic cost or threat of homelessness posed by family eviction, eligible members may remain in assisted housing while their loved ones, who do not receive benefits or place any burden on the public housing system, are displaced. Family separation is an extremely stressful and traumatizing experience for children, which neuroscience shows can alter the architecture of a child's brain and have lasting consequences.³² It also can have long term impacts on family bonding, development, and child social, emotional, and behavioral outcomes.³³

According to the agency's Regulatory Impact Assessment, HUD assumes that most mixed status households will leave HUD's assisted housing as a result of the rule, in order to remain together. This policy is specifically designed to evict families, most of whom are eligible to receive housing benefits, which our research and the work of others links to a sequelae of long-term poor health and hardships. Recently presented research from Children's HealthWatch demonstrated that compared to families without an eviction history, children in families with a history of evictions within the last five years, regardless of immigration status, are more likely to be in fair/poor health and at developmental risk, their mothers are more likely to report depressive symptoms, and their families are more likely to endure multiple economic hardships. Alarming, we show families with a history of eviction are five times more likely to experience homelessness and three to four times more likely to experience other forms of housing instability compared to families without an eviction history.³⁴ These findings are consistent with a host of others' research, which document the harmful effects eviction has on children, entire families, and communities.^{35,36,37,38,39}

If implemented, this proposed rule would forcibly displace thousands of individuals and families, including US citizens and children, and directly contribute to poor health and hardships, including homelessness, associated with eviction. By HUD's own analysis of the rule's regulatory impact, half of current residents living in households potentially facing eviction and homelessness are children who legally qualify for aid, putting HUD at odds with its fundamental purpose to assist American citizens and other eligible members of society in accessing safe, stable, and affordable housing. Given this overwhelming evidence on eviction, housing instability, homelessness, and family separation, we believe that the proposed rule would put at risk an already economically and socially vulnerable population of Americans and immigrants who rely on housing assistance, with no benefit to our country as a whole.

Presidential proclamation on the suspension of entry of immigrants who will financially burden the healthcare system:

Access to affordable health care is critical for the health of young children and their parents. Our research shows when families with infants and toddlers are unable to afford health care for themselves or their children, or have to sacrifice other basic needs to afford medical care, the health of their child is placed at risk.⁴⁰ Public health insurance, however, buffers families from the high costs of medical care and prescription medicines, ensuring they are able to seek care when they need it. Research from other groups shows children with adequate health insurance coverage are more likely to receive preventive care and immunizations than those who lack coverage.⁴¹ Conversely, studies indicate that reducing health insurance coverage among children has long-term negative effects on children's health, educational attainment, and financial stability as adults.¹⁴ The Proclamation threatens to undermine the nation's health and the health of children and families by restricting immigrants' ability to purchase such

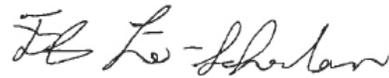
comprehensive health insurance available through the Affordable Care Act (ACA) marketplaces. Congress elected to make lawfully residing immigrants eligible for subsidized marketplace coverage because doing so advances the health of our nation. The Proclamation puts the nation's health at risk by ignoring Congress and instead requiring individuals to buy costly and less comprehensive health coverage.

The harmful, and deeply counterproductive focus of the Trump Administration to attempt to implement harmful and restrictive immigration policy and to increase enforcement in sweeping fashion has contributed to a culture of fear in the immigrant community, and is already harming the health and well-being of children across America. Furthermore, many of these policies, including public charge and the Presidential Proclamation, are facing injunctions and court proceedings, demonstrating the legal controversy of these unprecedented attacks on immigrants. These policies do harm, and not just to the immigrants directly affected. The policies will drive up national healthcare and education costs and impair over the long term our national health, educational achievement, and economic status. They build an invisible wall to keep out immigrants, including children, and are an affront to the American Dream. However, there is still time to protect the nation's health and values before these policies go into effect and do more harm. We strongly oppose these administrative actions that do injury to the health of children and their families and thus urge Congress to protect our immigrant neighbors.

Sincerely,



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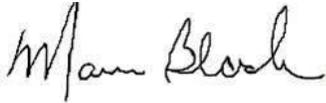


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