

Date: May 3, 2021

To: Los Angeles County Board of Supervisors

From: Molly Rysman, Acting Executive Director and Chief Programs Officer

cc: Rigoberto Reyes, Executive Director, Office of Immigrant Affairs

RE: REPORT BACK ON ITEM NO. 8, OCTOBER 19, 2021 AGENDA: SERVICES FOR UNDOCUMENTED INDIVIDUALS AND IMMIGRANTS EXPERIENCING HOMELESSNESS

The following report is in response to Item No. 8 from the 10/19/21 agenda, authored by Supervisor Solis, which seeks to assess the scope of and identify gaps in service delivery for immigrants and undocumented individuals experiencing homelessness. The report was completed by the Los Angeles Homeless Services Authority (LAHSA) in close collaboration with the Department of Consumer and Business Affairs' Office of Immigrant Affairs (OIA), with additional input from other County departments, community-based organizations and service providers, and others, as directed by the motion.

The report covers a range of topics and includes:

- Input sessions and information gathering completed from key stakeholders
- Estimates on the scope of the population of immigrants and undocumented people experiencing homelessness
- Current services available within the homeless services system for undocumented people experiencing homelessness
- Existing gaps in homelessness prevention and homeless services for undocumented people at risk of or experiencing homelessness
- Recommendations to improve services for this population and address existing gaps

LAHSA and OIA welcome the opportunity to work with the Board of Supervisors to address these issues and increase the success of service delivery for this population. Please do not hesitate to contact us for any additional questions regarding this report at <u>mrysman@lahsa.org</u> or at (213) 225-6572.

MR:NV:AV:sv

I. INTRODUCTION AND BACKGROUND

On October 19, 2021, the Los Angeles County Board of Supervisors (Board) directed the Los Angeles Homeless Services Authority (LAHSA), in collaboration with the Department of Consumer & Business Affairs' (DCBA) Office of Immigrant Affairs (OIA), the Department of Public Social Services (DPSS), the Department of Health Services (DHS), the Department of Mental Health (DMH), the Chief Executive Office's Homeless Initiative (CEO-HI), and community and faith-based organizations that work with immigrants and undocumented individuals experiencing homelessness, to assess the scope of, and identify gaps in service delivery for, the population of immigrants and undocumented individuals experiencing homelessness. Additionally, the Board directed the above groups to develop a plan including policy recommendations to improve outreach and services for this population (Item 8 on the October 19, 2021 agenda).

On January 13, 2022, the First Supervisorial District, as the author of the motion, approved an extension on the report back due date for an additional 90 days in order to gather more robust public feedback and provide a more comprehensive overview of the undocumented population experiencing homelessness. As a result, LAHSA and OIA submitted an interim report on February 4, 2022 which provided updates on the below issues:

- Current policy issues affecting the undocumented community
- Work completed to date on the report
- An overview of services available to this population
- An update of legal services funding and representation for the immigrant community
- The planned work for the months ahead

The following report back has been developed in collaboration with various Los Angeles County agencies, homeless service providers, immigration service providers, and legal service providers and will cover:

- Input sessions and information gathering completed
- Estimates on the scope of the population of immigrants and undocumented people experiencing homelessness
- Current services available within the homeless services system that can serve the undocumented population
- Current gaps in homelessness prevention and homeless services for undocumented people experiencing homelessness
- Recommendations to better serve this population and address existing gaps

II. INPUT SESSIONS AND INFORMATION GATHERING

LAHSA and OIA worked as co-leads on the report back due to each agency's unique connections to the homeless services sector and the immigration services sector. LAHSA and OIA held biweekly planning calls to discuss how to effectively gather feedback and to discuss the direction of the report. The following meetings were held by LAHSA and OIA in order to obtain robust input from County agencies, homeless service providers, immigration service providers, and legal service providers to inform the report:

Meetings with County Agencies:

- Joint meeting with all County agency stakeholders to discuss cross-departmental issues related to immigrants experiencing homelessness held on December 3, 2021, and March 31, 2022
- Meeting with County Department of Mental Health on March 8, 2022
- Meeting with County Department of Public and Social Services on March 16, 2022
- Meeting with Chief Executive Office Homeless Initiative on March 30, 2022
- Meeting with County Department of Health Services on April 4, 2022

Communication/Meetings with Community-Based Organizations:

- Survey distributed on February 28, 2022 and input session held on March 2, 2022
 - Participation include a total of 15 different agencies that provided input including The People Concern, LA Family Housing, Weingart Center, HOPICS, Immigrant Defenders Law Center, African Communities Public Health Coalition, CARECEN, Inner City Law Center, Esperanza Immigrant Rights Project of Catholic Charities, and Public Counsel.

III. <u>SCOPE OF THE POPULATION OF IMMIGRANTS AND UNDOCUMENTED PEOPLE</u> <u>EXPERIENCING HOMELESSNESS</u>

Reliability of Data on Immigrants Experiencing Homelessness

In order to assess the scope of any population experiencing homelessness, the most comprehensive source of available data is the Homeless Management Information System (HMIS), managed by LAHSA. The HMIS is used to collect and maintain client-level data on the provision of housing and services to people experiencing or at-risk of homelessness throughout the Los Angeles Continuum of Care (LA CoC) to facilitate better service coordination. This data is also used in the aggregate to monitor trends in service delivery, housing placements, or other demographic shifts in the population experiencing homelessness. However, the HMIS has major limitations in the realm of immigration data, some of which are by design. Out of an abundance of caution, LAHSA removed data elements related to, and stopped tracking data elements pertaining to, immigration/status information in the HMIS in early 2017 to ensure such data would not be available if it were compelled to be produced by federal immigration enforcement authorities. As a result, assessing the true scope of individuals experiencing homelessness who are undocumented or have an immigration status issue proved to be a barrier.

There are a number of other barriers to assessing the scope of this population, the largest being the fear and perceived stigma associated with lacking a permanent resident immigration status, especially for those who are undocumented. This fear and stigma deepened during the last Presidential Administration, as federal policy was frequently used as a tool to threaten deportation and detention to immigrant communities. This caused a "chilling effect" in which these communities retreated from accessing mainstream benefits and services out of concern that participating in these services could lead to deportation or other harms. Furthermore, these threats have made it difficult for direct service providers to obtain information on a person's status, as clients are, at times, unwilling to disclose their status. Service providers have had to come up with creative ways to glean a clients' status so they can assess what services an individual is and is not eligible for. Because this direct information is not always readily shared or accessible, the current data is not reliable.

Overview of Proxy Data

LAHSA worked to devise proxy data measures, which were used to gauge the population experiencing homelessness that were undocumented or had an immigration status and were in the HMIS. One of the proxies used was identifying the number of people who were unhoused, age 18 and up, engaged in a Street Outreach program, who did not know their Social Security number (SSN), and were active in the HMIS. Additionally, LAHSA also pulled data on unhoused, age 18 and up clients enrolled in all other programs, who did not know their SSN, and were active in the HMIS. The other proxy used was looking for the words "undocumented," "visa," "immigrant," and "immigration" throughout the case notes for all unhoused clients, age 18 and up, active in a Street Outreach program within HMIS.

The data included clients in the HMIS as of March 30, 2022. Overall, the data showed that of the base population of the 18,858 active enrollees in a Street Outreach program, 23.8% did not know their SSN. Of the base population of 45,676 active enrollees in all other programs, 12.3% did not know their SSN, and out of the base population of 57,845 active enrollees in HMIS, the percentage of individuals with case note(s) containing at least once instance of the word "visa," "undocumented," "immigrant," and/or "immigration" was negligible and reflected less than 1% of clients, potentially indicating the sensitivity with which case managers operate in regard to the data and personal information of their clients with status challenges.

Regarding the data of Street Outreach clients without an SSN, SPAs 4 and 8 had the highest concentrations of this population, with SPAs 2, 6, and 5 close behind. For clients in all other programs without an SSN, SPAs 2, 3, and 4 had the highest concentrations. In a number of SPAs there were more non-Hispanic/non-Latin(a)(o)(x) individuals without an SSN than Hispanic/Latin(a)(o)(x) individuals, suggesting that this may not be a reliable indicator of immigration status. Regarding the clients whose case notes included at least one instance of the word "undocumented," "visa," "immigrant," and/or "immigration," SPAs 2 and 4 consistently had the highest concentrations. These clients were largely Hispanic/Latino.

Limitations with Utilizing HMIS Data

As stated above, the accuracy of the data is limited due to the fact that immigration status is not tracked in the HMIS. As a result, the data that was reviewed has a number of limitations. With regards to the clients who do not have an SSN entered into the HMIS, a significant limitation is that a considerable number of clients may not know or remember their SSN, irrespective of immigration status. This is likely to be a common situation as well, due to the traumatic nature of experiencing homelessness as well as the mental health and substance use experiences that may affect one's functionality. This may lead to these proxy measures overestimating the number of undocumented and other immigrants with barriers related to their status in the homeless population. Another limitation across all the data is a potential lack of willingness of the client to discuss immigration status with case managers or other staff. Additionally, case managers may be hesitant to write down information about a client's immigration status. Both of these may lead to these proxies providing an underestimate of this population.

Need for Additional Data

There is a clear need for accurate data surrounding immigrants and undocumented people experiencing homelessness but that need must be carefully balanced with the need to ensure data is kept safe and clients seeking services feel secure and comfortable doing so. Failure to do so may result in deeper mistrust of public systems and service providers, which can only exacerbate vulnerability. Existing

research from the USC Dornsife Equity Research Institute and California Community Foundation estimates that undocumented immigrants make up roughly 8% of the total population of Los Angeles County.¹ This number was reached using a pooled 2010-2014 version of the American Community Survey (ACS) microdata.² Existing research from this study can be utilized as a multiplier against the population experiencing homelessness. Further analysis should be performed using this research and the results of the 2022 Greater Los Angeles Homeless Count. Discussions were held with LAHSA and OIA staff, community-based organizations, and Los Angeles County (County) agencies on recommendations to collecting this data (see Section VI below).

IV. <u>CURRENT HOMELESS SERVICES AND HOMELESSNESS PREVENTION SERVICES AVAILABLE</u> FOR THE UNDOCUMENTED POPULATION

While eligibility for homeless services resources and homelessness prevention services vary across immigration statuses, eligibility for those who are undocumented can be limited. However, the County and City of Los Angeles (City) have worked to fund and provide benefits and resources without documentation restrictions where possible. In many cases, service providers and agency partners have noted that the undocumented population lacks awareness of what resources and services they are in fact eligible for. As such, this report seeks to clarify the resources, benefits, and services that can be provided to undocumented individuals and individuals part of mixed-status households.

Homelessness/Housing Resources

Interim Housing

All, or 100%, of interim housing (or shelter) resources throughout the County, including interim housing funded through federal, state, or local resources, are available regardless of immigration status. In general, all state and local funding sources within the City and County can fund programs for people experiencing homelessness regardless of immigration status. Likewise, emergency shelter and short-term housing assistance, including transitional housing funded through the federally-funded Emergency Solutions Grants (ESG) program, does not have status restrictions.³ However, ESG-funded transitional housing is not available if provided in the form of rental assistance based on the applicant's income – the transitional housing site must be owned or leased by the ESG recipient or subrecipient for the purposes of providing transitional housing.⁴

Permanent Housing and Housing Services

There are also no status restrictions on Rapid Re-Housing (RRH), which comprises time-limited rental assistance for permanent housing coupled with case management, funded through the ESG program.⁵ As a result, the RRH and Recovery Re-Housing (a locally administered rental assistance program developed in response to the COVID-19 pandemic) programs funded through the City and/or County's allocations of ESG and CARES Act ESG (ESG-CV) are available to all populations regardless of status. Shallow subsidies funded by the City and/or County as well as the County's flexible housing subsidy pool (FHSP), which can

¹ USC Dornsife Equity Research Institute & California Community Foundation. (2021). *State of Immigrants in LA County.*

² Pastor, M. & Scoggins, J. (2016). "Estimating the Eligible-to-Naturalize Population."

³ National Housing Law Project. (January 29, 2021). "Immigration Requirements: Other Assistance Programs for Housing and Homelessness (ESG, CDBG, HOME, FEMA, CRF, and ERAP)."

⁴ Ibid.

⁵ Ibid.

provide permanent housing options for clients with complex health needs, are available to those who are undocumented. However, General Relief (GR) subsidies are not available for undocumented individuals, as these individuals are not eligible for GR (see Section V below). As stated above, all state and local funding sources within the City and County can fund programs for people experiencing homelessness regardless of immigration status.

The County Department of Mental Health (DMH) runs the DMH Housing Assistance Program, which provides assistance to people experiencing homelessness and receiving mental health services, regardless of immigration status, to help their move into permanent housing. The County Department of Health Services' (DHS) Housing for Health (HFH) program also provides supportive housing for DHS patients experiencing homelessness with complex medical and behavioral health issues. Most programs run by HFH are available regardless of immigration status (aside from the Section 8 Housing Choice Vouchers utilized by HFH).

HFH's Countywide Benefits Entitlements Services Team (CBEST) also serves clients regardless of immigration status, except undocumented individuals are not eligible for Social Security Disability Insurance (SSDI) and the Cash Assistance Program for Immigrants (CAPI). CBEST also has an active contract with a legal services provider that offers very limited scope immigration and documentation technical assistance to clients. The services focus on verifying eligibility for disability benefits and/or replacing any residency documents that prove a client's authorization to reside in the United States (U.S.). Furthermore, HFH and OIA are working on a partnership to assist clients with immigration status issues to identify benefit eligibility, resolve complex immigration issues (including removal proceedings), and replace residency documents, enabling CBEST to then pursue disability benefits on behalf of these eligible immigrants.

The federal emergency rental assistance program, funded through the December 2020 Consolidated Appropriations Act for 2021 and the March 2021 American Rescue Plan Act (ARPA), also does not pose restrictions based on immigration status.⁶ Similarly, Stay Housed LA, a collaboration between the City and the County, contains resources, including information on rental assistance programs, which can be useful for undocumented individuals and case managers. Finally, while undocumented immigrants are restricted from many federally-assisted housing programs such as public housing, the Section 8 Housing Choice Voucher program, and Section 8 project-based housing, some can still reside as long as they are part of a mixed-status family in which one or more household members is an immigrant eligible for these programs or a U.S. Citizen, although assistance is pro-rated based on the number of eligible household members.

Public Benefits

Healthcare Programs

Currently, restricted scope Medi-Cal is available for all individuals residing in California, regardless of immigration status. In the past few years, full-scope Medi-Cal has become available for individuals up to age 26, regardless of immigration status and, beginning in May of this year, full-scope Medi-Cal will be available to individuals aged 50 and older regardless of immigration status. Additionally, My Health LA, a no-cost health care program for low-income individuals run by DHS, is also open to individuals aged 26 and up regardless of immigration status who do not qualify for full-scope Medi-Cal. The program will only

⁶ National Low Income Housing Coalition. (April 2021). "Frequently Asked Questions: Eligibility for Assistance Based on Immigration Status."

be available for individuals 26 to 49 as of May 1, 2022 due to the older adult Medi-Cal expansion to undocumented individuals 50 and older.

Cash Assistance and Nutrition

The California Work Opportunity and Responsibility to Kids (CalWORKs) Housing Support Program, a program which assists low-income families in obtaining and maintaining housing, can be accessed through the Coordinated Entry System (CES) by undocumented individuals who are part of a family in which at least one household member is receiving CalWORKs. However, CalWORKs, in addition to CalFresh and the State Temporary and Permanent Homeless Assistance Program, are only accessible to those who are part of mixed-status households. School breakfast and lunch programs are open to all children regardless of immigration status and the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is also available for undocumented individuals.

California, and Los Angeles County, also offers one other benefit program specifically for immigrants – CAPI, which is a program created for immigrants who are ineligible for Supplemental Security Income (SSI). Additionally, the Refugee Cash Assistance program, which is a state-administered federal program, provides cash aid for refugees without children. Unfortunately, however, neither of these programs are available for undocumented immigrants as they primarily serve legal immigrants and refugees. However, short-term non-cash emergency disaster assistance funded by the federal government (i.e., Disaster CalFresh) is available for those who are undocumented.

Health and Mental Health Resources

The following services provided through DMH are available regardless of immigration status: specialty mental health care services including assessments, individual and group treatment, rehabilitation, and outreach and engagement services provided by the Homeless Outreach and Mobile Engagement (HOME) Team; Subacute Psychiatric Treatment Beds; Crisis Residential Treatment Programs; Enriched Residential Services; and Enriched Residential Care Facilities, also known as Board & Cares. For Board & Care clients who are undocumented and do not have income, DMH is able to pay the SSI rate for them and the enhanced rate on top of that. While there are a number of mental health resources available for the undocumented population experiencing homelessness, there still remains barriers to using them, which will be discussed in Section V below.

Similarly, DHS provides all of its regular service to patients regardless of immigration status, including primary care, specialty care, hospital care, urgent care, substance use disorder treatment, other behavioral health care, pharmacy services, transportation support, legal services, language services, and Office of Diversion and Reentry services, among others.

Legal Services

Organizations such as the Immigrant Defenders Law Center (ImmDef), Esperanza Immigrant Rights Project, the Central American Resource Center (CARECEN), Public Counsel, and Kids in Need of Defense (KIND) are all agencies that work within the County to provide legal services to adults, families, and children in immigration court removal proceedings. This includes unaccompanied immigrant minors who come to the U.S. and are released to sponsors or kept in the care and custody of the U.S. Department of Health and Human Service's Office of Refugee Resettlement (ORR). These organizations can provide deportation defense and case management services to these minors and assist with either releasing them

to their family members or help them obtain housing if they are in extended foster care. As with the above, while these resources exist, barriers still remain which will be discussed in Section V below.

The County is also developing key initiatives related to legal services for undocumented communities. One is support of a statewide "kinship navigator" pilot program which would provide \$25 million over three years to support relatives/sponsors in navigating the process to get their child relative released promptly from federal custody and to assist them with enrollment in benefits, counseling, and other supports to promote better outcomes.

Another initiative was a pilot program labeled the Los Angeles Justice Fund, which was launched in 2017 in partnership with the County, City of Angeles, and philanthropy (Weingart Foundation and California Community Foundation) to provide legal representation to low-income County residents at risk of deportation. Thanks to action by the Board, the pilot program is being converted into an ongoing, comprehensive program – Legal Services for Immigrants at Risk of Removal – to provide legal representation and critical community support to the County's most vulnerable immigrant groups. OIA is currently working with the lead administrator (the Coalition for Humane Immigrant Rights), CBEST, and community-based organization (CBO) partners to design a service module within the program that focuses on providing legal counsel and representation for immigrants experiencing or at risk of homelessness. Legal services for clients and the module aims to make services accessible through a direct referral system. The program is set to launch around June of this year and the bulk of funding for the service module for immigrants experiencing or at risk of homelessness will support disabled immigrants referred by the CBEST program.

Language Access Services

LAHSA created a Language Access Plan (LAP) which was approved by the U.S. Department of Housing and Urban Development (HUD) in April 2020, in response to a requirement for all CoCs to create a LAP per Title VI of the Civil Rights Act. Through the creation of the LAP, LAHSA provides the following services at no cost to any person who requests them: the use of LAHSA's bilingual staff; interpreters (both in-person or through the phone); written translation of vital documents; and referrals to community partners. LAHSA's lobby also contains posters, signs, and informational notices about the language access services offered and LAHSA's website includes this information as well.

Furthermore, LAHSA staff are now required to complete two modules of LAP training – the first module was launched in May 2021 and so far, 490 employees have completed the training. The second module will be launching later in the spring of 2022. LAHSA's Capacity Building Unit is also currently in the process of setting up translation services, through JR Translation Services, Inc., for all contracted service providers. LAHSA will be funding this service and \$200,000 has been allocated to support the implementation of the LAP. Additionally, contractually, all LAHSA subrecipients must provide appropriate language access in their programs. There is continuous ongoing monitoring and updating of the LAP as well.

V. <u>CURRENT GAPS IN HOMELESSNESS PREVENTION AND HOMELESS SERVICES FOR</u> <u>UNDOCUMENTED PEOPLE EXPERIENCING HOMELESSNESS</u>

There are a number of significant gaps within the homeless services and homelessness prevention services systems for undocumented people, that have stemmed from both capacity needs and policy failures. The

failure of immigration policy reform at the federal level has led to a lack of permanent federal housing resources for this population, and a lack of available public benefits. Additionally, shortfalls in communication and knowledge have led to gaps within knowledge about public benefit eligibility, tenants' rights, and available resources for the undocumented population. Population specific barriers have also uniquely affected single adults and older adults. Finally, training and capacity barriers have led to gaps within the collaboration across various sectors, in languages access, technology, and transportation, and within the legal services sector.

Failure of Federal Policy

Federal Inaction on Immigration Reform

A primary, animating barrier that overhangs all other barriers to serving this population effectively has been the failure of federal policy surrounding immigrant and undocumented individuals' rights and Congressional inaction on immigration reform. When the new Presidential administration took over in January 2021, there were hopes of comprehensive immigration reform. However, a number of bills introduced to create pathways to citizenship for various groups were unable to move forward. Furthermore, following a December 2021 Senate parliamentarian ruling against including immigration reform in the budget reconciliation package, most analysts concluded that any immigration reform is highly unlikely for the foreseeable future.

Additionally, the Deferred Action for Childhood Arrivals or "DACA" program remains at risk due to ongoing litigation. At present time, existing DACA beneficiaries may continue to renew their work authorization, but the program is closed to new applicants. Despite a 2020 decision by the Supreme Court rejecting the previous Administration's attempt to end the program, the Supreme Court may revisit the legality of the program in the future.

The lack of Congressional action on comprehensive immigration reform has had a profound impact on immigrants experiencing or at risk of homelessness. The majority of undocumented immigrants have no path to obtain lawful immigration status under existing law, even with qualified legal representation, and are ineligible to receive most federal benefits. While California has made important expansions to Medi-Cal eligibility, and expansions to CalFresh and unemployment insurance have been proposed, lack of access to these resources leaves undocumented immigrants vulnerable to homelessness.

Lack of Federal Housing Assistance, Inadequate Market-Rate Housing

The largest barrier that exists within the homeless services system for undocumented individuals experiencing homelessness is their ineligibility for many permanent housing resources funded through the federal government. Undocumented individuals that are not part of mixed-status households are not eligible to participate in programs such as public housing, the Section 8 Housing Choice Voucher program, and Section 8 project-based rental assistance, and are also not eligible for permanent supportive housing funded through the Continuum of Care program. As a result, many undocumented individuals remain in interim housing for long stays or may find themselves falling back into homelessness when the rental subsidies that they are eligible for, such as RRH, ends.

Additionally, many immigrant communities tend to be employed in non-traditional and seasonal jobs. When a subsidy runs out or an individual is left to find market-rate housing on their own, it may be much more difficult for them to stabilize with the income received in those sectors. Furthermore, it may be infeasible for those individuals to produce needed verification of employment and income, which is typically required by landlords and property managers for both market rate and subsidized housing units.

Relatedly, permanent and other housing assistance options (outside of interim housing) typically require documents and information such as SSNs/Individual Taxpayer Identification Numbers (ITIN), identification cards, verification of homelessness, and other documents to qualify, regardless of the participants' immigration status. This also presents a barrier for populations experiencing homelessness in general, and especially for undocumented individuals, who may lack these documents. It additionally presents a barrier for case managers and LAHSA Document Specialists who may have to navigate complex and confusing immigration laws to obtain proper documentation.

Competition for Resources

Another barrier that stems from the lack of available of housing resources for undocumented people experiencing homelessness, is that, although there are scarce resources available for undocumented individuals in Los Angeles County, no current prioritization for this population exists. Additionally, because it is more difficult to get undocumented clients "document-ready" and able to move into housing quickly, documented clients with similar acuity and housing needs may be moved in or connected to housing units first to ensure vacancies are filled quickly. Since undocumented clients have a smaller pool of resources to tap into, this can result in lengthier periods of homelessness. LAHSA is currently in the process of working with the CES Policy Council to reorient the CES prioritization policies and triage methods to be more equitable and will work to assess the impacts on immigrant and undocumented individuals.

Public Benefit Eligibility

As mentioned above, undocumented individuals are not eligible for a majority of federally-funded resources, including critical means-tested safety net benefits such as the Supplemental Nutrition Assistance Program (SNAP), or CalFresh, Supplemental Security Income (SSI), SSDI, Temporary Assistance for Needy Families (TANF), or CalWORKs, and Section 8 Housing Choice Vouchers. As stated above, Medi-Cal is available to anyone under age 26 regardless of immigration status and will soon be available to everyone over 50, regardless of immigration status. However, the gap for those ages 26 to 49 remains. Governor Gavin Newsom's budget proposal for Fiscal Year 2022-2023 includes \$819.3 million for this expansion, which is proposed to occur in 2023-2024. California Assembly Bill (AB) 4 (Arambula) also proposes this expansion. However, nothing has been formally passed by the legislature.

Social Security retirement benefits are also unavailable even to undocumented immigrants who have paid into the system for decades. Ineligibility for the preceding programs also has repercussions on eligibility for other public benefits – ineligibility in CalWORKs makes one ineligible to participate in the Greater Avenue for Independence (GAIN) program as well as the CalWORKs Temporary and Permanent Homeless Assistance Programs. On top of that, even programs fully funded by the County, such as GR, are not eligible for those who are undocumented. GR specifically presents a large gap for undocumented individuals experiencing homelessness, as it is often the only resource for individuals who cannot qualify for unemployment insurance and who are indigent.

Proration of Benefits

While some benefits can be provided to mixed-status families, there still remains a gap as the benefits are prorated based on the number of qualifying individuals and sometimes the difference can be around \$150 to \$200 dollars per family. For example, a four-person household composed of one undocumented parent and three U.S. born children would net a CalWORKs grant benefit of \$925 under current rules. If the entire household were to be aided (including the undocumented parent), the benefit would amount to \$1,116, a difference of \$191. Additionally, proration in CalWORKs can affect a family's assistance in the CalWORKs Permanent Housing Assistance Program. One of the requirements of the CalWORKs Permanent Housing Assistance Program is that the assisted family's rent amount must not exceed 80% of their income in order

to qualify for security deposit/utilities assistance, which can become a challenge; larger CalWORKs grants could assuage these impacts.

Communication Barriers and Knowledge Gaps

Confusion Over Federal Policy and Climate of Fear

The changes proposed to the public charge rule in 2018, in which the Department of Homeland Security (DHS) proposed to expand the list of public benefits (among other changes) that, if used, could label someone a "public charge," brought on a new wave of confusion and fear for immigrant communities as well as service providers. If an immigrant is labeled a public charge – which is determined by a combination of factors including public benefit usage – they become ineligible to receive a visa and/or ineligible to be admitted to the U.S., thereby hindering their ability to obtain status as a legal permanent resident (LPR). The rule was finalized in August 2019 but was embroiled in a series of legal proceedings which delayed implementation. The rule eventually was implemented for a short while, starting on February 24, 2020, but was ultimately formally struck down and rescinded by the current Administration on March 9, 2021.

As a result, the federal government is adhering to the previous guidance on public charge that was updated in 1999. Although the 2019 public charge rule is no longer considered under any circumstances, it may still be contributing to a "chilling effect" in immigrant communities whereby immigrants are deterred from accessing needed public benefits out of fear. This fear stems from confusion and miscommunication about the rule in general as well as the multiple court challenges that occurred between 2018 and 2020. A December 2021 survey of 1,000 Americans in mixed-status immigrant families, commissioned by the Protecting Immigrant Families Campaign, showed that 46% of families who needed assistance during the pandemic abstained from applying due to concerns over their immigration status.

In addition, confusion and lack of knowledge around mixed-status eligibility for benefits prevents undocumented individuals from knowing which benefits to seek out or which information about the composition of their family to disclose. There is also a general apprehension around discussing status for fear of deportation or retaliation, all of which was emphasized during the last Administration.

Lack of Knowledge Of Available Resources and Existing Tenants' Rights

Many immigrant and undocumented populations are unaware that they are entitled to the same tenants' rights as any other California tenant; this leaves many in this population especially vulnerable to eviction, harassment, and price-gouging as they are typically not on a lease and have limited rights to a unit and legal recourse. As a result, many of these individuals and families find themselves doubled or tripled up in unsafe and unstable housing situations, vulnerable to being condemned by local authorities and the tenants evicted. Additionally, as indicated by the feedback session for community-based providers held on March 2, 2022, there is widely varying knowledge surrounding the public benefits, housing, and homelessness resources available for undocumented populations. Many service staff are unaware of the locally funded housing/health resources that do not have status restrictions. Additionally, due to the complicated nature of public benefit eligibility between federal, state, and local resources, underutilization of these resources persists. This confusion exists at the client level as well as at the provider level – many clients are unaware of how much information to disclose or what to ask for while case managers and outreach workers must navigate a maze of resources with various funding sources and restrictions.

Population Specific Barriers

Single Adults

Currently, there is a large gap for single, undocumented adults experiencing or at risk of homelessness. Many public benefits such as CalFresh and Section 8 Housing Choice Vouchers, as indicated in Section IV above, are not available unless the individual is part of a mixed-status family. As a result, single adults with no children who are undocumented, cannot benefit. Furthermore, this age group (26 to 49) is currently left out of Medi-Cal as well, as children and older adults have been prioritized in the past.

Older Adults

The population of older adult immigrants has grown in recent years and is projected to increase significantly in the coming decade. Previously, the overwhelming majority of immigrants participated in the workforce and often returned to their countries of origin as they aged and became unable to work. But with federal changes that have resulted in increased border security and legal penalties for departing the U.S. after accruing unlawful presence, many undocumented immigrants are remaining in the U.S. for longer periods of time. This includes older adults who face the difficult choice of returning to their countries of origin after decades in the U.S. or remain in the U.S. without legal status. Older undocumented adults cannot access Social Security retirement benefits even if they have paid into the system. This compounds their risk of becoming homeless.

Unaccompanied Minors

In Fiscal Year 2021, 4,249 unaccompanied children were released to Los Angeles County sponsors; for Fiscal Year 2022, the County is on track to receive a comparable or larger amount. Most of the legal service providers who serve this population report that they lack the resources and staff to provide adequate case management and support to all their minor clients, as there is no right to counsel in immigration court at the government expense, even for children. Some providers are also inexperienced when serving this particular population and may not know the culturally appropriate service engagement practices or be able to identify/meet needs related to community integration. Additionally, about two-thirds of this population are ages 15 to 17. As a result, upon arrival, communication and relationship breakdowns often occur between the minor and their sponsor due to cultural, societal, and social differences as well as due to the trauma endured during, and prior to, their journey. As a result, many legal services providers report having to confront emergency housing issues for these clients as they turn 18.

Training and Capacity Barriers

Collaboration Across Sectors

During the feedback session for community-based providers held on March 2, 2022, staff heard varying degrees of partnership, collaboration, and referrals made between homeless service providers and immigration/legal service providers. Some sessions indicated that service providers knew which legal services to refer to and that legal services providers had a resource for clients experiencing homelessness, however other sessions indicated a lack of knowledge or relationship for a referral. Other service providers expressed that case managers often did not have the capacity or bandwidth to deal with immigration legal needs. Many providers did not have in-house legal counsel, and for legal services that do exist within the homelessness sector, the sophistication needed to handle complex immigration issues may be missing.

Legal Services Capacity Needs

As stated above, there are a number of legal service providers that exist across the County to provide immigration legal advice and representation to adults, families, and children, yet the capacity and

bandwidth of these providers becomes a barrier. While this is clearly a barrier for the unaccompanied minor population (see above), immigration representation and case management support resources for families and single adults facing removal are even more scarce.

Furthermore, Measure H-contracted legal services providers, who work within the homeless services system, lack the ability and infrastructure to handle complex immigrant legal cases, as they primarily handle eviction or other housing-related issues. As a result, these agencies often to refer immigration cases out to legal services providers, such as CARECEN and Esperanza Immigrant Rights Project. However, as stated above, the legal services system is currently lacking the capacity to handle these cases quickly.

The largest gap for undocumented individuals experiencing homelessness is getting them document ready for entry into housing programs such as RRH and Recovery Re-Housing, which can be done via obtaining clients a U-Visa (for survivors of crime) or granting them asylum (for those who fear persecution), among other routes. LAHSA is currently in the process of centralizing its prevention program, which will include hiring staff with legal training to triage, spot legal issues, and make service connections more quickly. This will help staff understand what pathways to citizenship should be explored for undocumented and immigrant clients experiencing or at-risk of homelessness, moving them one step closer to document readiness for housing.

Lastly, some legal service providers raised that the one-year limit on legal services under Measure H strategies A1/A5 was a barrier to serving clients with immigration status legal issues, as most immigration legal issues, such as asylum cases, often take longer than one year to resolve. LAHSA can provide waivers to extend this time-limit, however, which may not be widely known by legal service providers. As such, LAHSA will ensure additional information on this waiver process is provided to legal services providers.

Language Access, Technology, and Transportation

Language access and cultural competency, particularly for Indigenous languages and Black/African languages, remains a gap across the County as well. Community-based providers expressed the need for more staff with varying spoken languages or more language access avenues. Additionally, this need was felt most acutely when it came to mental health resources. Community-based providers referenced the inability to communicate effectively with someone in need of mental health resources who spoke a non-English language, especially one outside of Spanish. Providers also referenced the lack of mental health capacity, including long-term treatment, to serve immigrants in their native language.

Community-based providers also mentioned that technology and transportation emerged as barriers to serving this population. As the COVID-19 pandemic shifted life online, the digital divide deepened.⁷ This became even more apparent for immigrant communities and those with limited English proficiency. Many forms became paperless, and many services and meetings moved online, making it very difficult for certain groups of people to get the real time, comprehensive assistance they needed. Additionally, auto-receptionists proved to be confusing for immigrant populations, especially those who spoke languages other than English and Spanish. These barriers often deter these populations from seeking the services they need, putting them more at risk for homelessness. Finally, while California AB 60 made strides in providing Driver's Licenses to undocumented folks, those who do not own a car face barriers in navigating public transportation.

⁷ USC Dornsife Equity Research Institute & California Community Foundation. (2021). *State of Immigrants in LA County.*

VI. RECOMMENDATIONS TO BETTER SERVE THIS POPULATION

In order to address the barriers that exist, a number of recommendations have been developed and are shared below. These recommendations include ways to improve upon homelessness prevention and homeless services for immigrant and undocumented people experiencing homelessness, such as increasing housing options through a subprogram within the FHSP, exploring the feasibility of changing eligibility requirements for the GR program, and increasing capacity for enforcement of tenants' rights. Additionally, recommendations are suggested to build and improve capacity across sectors, such as implementing trainings for service staff, increasing infrastructure and linkages, increasing education and trainings for the community, and exploring the feasibility of a repository of benefit/resource information. Finally, recommendations are provided to improve language access, data collection, and for needed state and federal advocacy.

Recommendations for Housing, Homelessness Prevention, and Homeless Services

Explore Feasibility of Creating a Targeted Subprogram within the FHSP

As stated throughout this report, the lack of capacity in, and flexibility around, long-term housing resources presents as a large and limiting barrier to serving the undocumented population experiencing homelessness. The FHSP is a program which already exists within the County and is available to serve individuals regardless of immigration status. However, since the program's overarching target is for clients with high health needs, documented clients with similar acuity and housing needs still have the ability to be prioritized ahead of, or the same as, undocumented clients. As a result, it is recommended to create and fund a subprogram with the FHSP that can target rental subsidies that are not time-limited for undocumented individuals, until their immigration status has changed or funds are exhausted.

In order to fund this subprogram, it is recommended that the Board continue its advocacy to the state for the establishment of an ongoing funding source dedicated to funding local jurisdiction's homelessness responses. The Board should additionally explore using American Rescue Plan (ARP) funds to pilot the subprogram locally first. While Measure H is a flexible funding source that is available to serve undocumented immigrants experiencing homelessness, it is a limited funding source which is already obligated to existing programs, and Measure H must be reauthorized if it is to continue beyond 2027. For this reason, the Board must look beyond Measure H.

Explore Feasibility of Removing Documentation Requirements for GR

The GR program is 100% funded through the County, which presents an opportunity to change eligibility requirements to allow those who are undocumented to apply. Understanding that GR is already a costly program and may not be feasible to open up to all undocumented immigrants who need it, it is recommended to do an analysis for expanding GR and an analysis of any potential state law modifications that may be required to implement such an expansion. Additionally, extra consideration would need to be taken in regard to public charge concerns, given that cash aid for income maintenance is currently considered in a public charge test.

Enforcement of Tenants' Rights

Community-based providers also referenced a lack of information around tenants' rights and prevention of landlord harassment. In addition to increasing education around this (see below), the Board should request an assessment of the strength and capacity of the enforcement of tenants' rights protections, particularly for immigrants and undocumented individuals, within DCBA.

Recommendations to Build Capacity to Improve and Connect Across Sectors

Implement Targeted Trainings for Homeless Services and Legal Services Staff

This report recommends that ongoing trainings be implemented for staff of legal services and immigration services providers on the available services within CES as well as on the homelessness prevention services and homeless services programs available to immigrant and undocumented populations. In addition, this report recommends ongoing trainings be implemented for LAHSA's Document Specialists, case managers, and/or outreach workers, on the immigration-legal system, including the Freedom of Information Act, the identifying documents needed to house and serve this population, what benefits and resources are available for immigrant and undocumented people experiencing homelessness, and the most effective ways to get this population enrolled in services.

Part of the training should also include how and when to inquire about status – what leading questions are needed and how to ask in a trauma informed way that maintains client trust. Lastly, the training should include various pathways to citizenship for this population, including asylum, Special Immigrant Juvenile Status, obtaining a U-Visa, and other pathways. Quickly identifying potential pathways to citizenship can help with getting clients document ready and housed much faster. It should be noted, however, that these trainings are solely for educational purposes to ensure that Document Specialists, case managers, and outreach workers have the tools and knowledge to engage in the proper referral pathways based on a clients' situation. The trainings are not a substitute for legal advice.

Increase Capacity in the Homeless Services/Medical Services Systems on Immigration Legal Issues

In supplement to the trainings for homeless service providers on immigration legal issues, it is recommended for the Board to approve the Fiscal Year 2022-2023 Measure H funding recommendation to create a pilot program focused on representation for people enrolled in RRH who have barriers to obtaining and maintaining permanent housing due to immigration issues, currently proposed under Measure H Strategy B3. Once approved and implemented by LAHSA, it is recommended to assess the housing and other outcomes of the pilot program and determine if permanent implementation is feasible and necessary. The pilot program can allow the homeless services system to leverage the institutional knowledge of immigration legal service providers, by allowing them to tap into Measure H funding to assist clients who fall into both systems.

Additionally, it is also recommended to communicate to legal service providers, via electronic communication and any subsequent trainings, on the ability to, and process for, requesting an extension from LAHSA to waive the one-year resolution requirements within the A1/A5 Scope of Required Services. Finally, it is recommended to provide a targeted and sustainable funding source to DHS' Medical Legal Community Partnership program, which provides immigration and other legal services to DHS patients. A targeted investment would ensure immigration-related legal services are available to undocumented DHS patients on an ongoing basis.

Allocate Funding to Increase Capacity for County Legal Services Program for Immigrants

This report recommends allocating additional funds to the Legal Services for Immigrants at Risk of Removal Program as a significant amount of additional funding will be needed to reach a larger and more targeted percentage of immigrants experiencing or at risk of homelessness. Additional funding will also be needed to provide legal representation to a larger percentage of unaccompanied minors, who often turn 18 long before their immigration court cases are resolved. This local investment plus the state "kinship navigator" program would go a long way to reducing the number of transitional age immigrant youth who become homeless.

Build Linkages Through Dedicated Funding and Robust Referral Pathways

In order to build better linkages between County departments and CBOs, this report recommends providing dedicated funding, similar to the County COVID-19 Community Equity Fund, so that CBOs that serve immigrants or provide immigrant-related services can offer more robust case management support for the populations they serve, in order to connect them to needed County resources.

Furthermore, in order to increase communication and collaboration across the homeless services, immigration services, and legal services sectors, it is recommended to disseminate information on proper referral pathways, via training or electronic communication, in each SPA for homeless service providers, immigration/legal service providers, trusted faith-based organizations, and trusted community clinics. The information provided should include who the referral partner is for each sector (homeless and immigration/legal), how to contact, and what they can assist with. Faith-based partners and community clinics are included as well, as some are frequently used and trusted by the undocumented community, who may tend to steer away from traditional service providers.⁸

Increase Community Education/Trainings

Due to the widespread confusion and fear from the immigrant community about accessing and applying for public benefits or resources, it is recommended that there be a robust Countywide push to increase education and trainings related to a number of issues affecting the community. One such issue is the hesitancy to disclose status information to outreach workers, case managers, and other system-linked staff. While this is a reasonable hesitation and should be respected, it can make it difficult for service staff to understand what resources are and are not available for the specific client. Therefore, it is recommended to create a formal, culturally competent, trauma-informed, document/notice stating that status information will not be shared for any purpose relating to immigration enforcement. The document should be given to all outreach clients (regardless of ethnicity/race/status) when connection is first made.

Another issue affecting the community is confusion about what benefits and rights are available. As a result, it is also recommended to create a document/pamphlet that includes high level information about the benefits, services, and rights available to immigrant and undocumented populations. The document/pamphlet should include but not be limited to, information around the current public charge rule (who it will affect and what is counted), information on what qualifies an individual to receive homeless services, information on tenants' right and how to prevent and report landlord harassment, and information on the new rollout of Medi-Cal for all individuals aged 50 and older regardless of immigration status. This document/pamphlet should also be provided to all outreach clients via Countywide outreach teams, regardless of ethnicity/race/status, so as to prevent stigmatization of receiving the information.

Explore Feasibility of Creating an Online Benefit and Resource Repository

Relatedly, access to, and information about, the resources and benefits available to immigrant and undocumented individuals appear to vary provider by provider and even case manager by case manager. Additionally, federal benefits can differ from state benefits which can also differ from local benefits. While certain immigration providers compile information about what undocumented and immigrant populations are eligible for, at times the information is irrelevant to Los Angeles County or is not comprehensive enough.

⁸ Chinchilla, M. (2019). *Stemming the Rise of Latino Homelessness: Lessons from Los Angeles County*. UCLA Latino Policy & Politics Initiative.

As a result, this report recommends exploring the feasibility of creating an online repository which holds a comprehensive list of the available benefits and resources for each immigration status, including for those who are undocumented, specific to the County and City of Los Angeles. The repository should include information on housing, homelessness (including shelters), public benefits, mental health, health, and legal services that are available. It should also include other eligibility requirements and the documentation needed for each service. Lastly, the County should consider having this repository hosted by a trusted CBO to increase utilization and dispel fear.

Recommendations to Improve Language Access

Assess Need for Improvements to Countywide Language Access and Equity Plan, Allocate Funding to Bolster and Expand LAHSA's Language Access Plan

In January 2022, the Board directed OIA to develop and submit a Countywide Language Access and Equity Plan within 180 days. It is recommended, based on the findings of this report back, to assess the need for improvements to the Countywide Language Access and Equity Plan, and ensure that the unique needs of immigrants and undocumented people experiencing homelessness are taken into account. Additionally, this report recommends allocating funding to LAHSA to expand its LAP, based on the results of this report back. Both plans should take into consideration possible trainings for frontline staff on ways to identify Indigenous language speakers, as well as providing more outreach, education, and information for Black immigrants to empower them to request services in their languages.

Both language access plans should also consider providing "I Speak" cards to all outreach workers, translating vital County documents into languages other than Spanish if not already, and implementing video translation services where person-to-person is not available. Among certain language groups, written materials may not be useful for various reasons, including low literacy rates and limited use of written language. Thus, outreach materials with graphic content and video/audio messages are critical. Special focus should also be on mental health-specific resources and all documents should be created with culturally relevant communication strategies and trauma-informed care in mind.

Recommendations to Improve Data Collection

LAHSA will explore the ability to include a question in the 2023 Greater Los Angeles Homeless Count demographic survey related to immigration status and primary language. The demographic survey is a 60-question survey utilized during the LA CoC's annual Point-in-Time Count that gathers various characteristics of the population experiencing homelessness. Including an immigration status-related question will require convening a workgroup to discuss how to craft the question(s) or which proxies to use in a sensitive and trauma-informed way, as well as how specific of a status is needed in order to assess the diversity within the immigrant population. It should be noted that the demographic survey is only administered to a sample of the population experiencing homelessness.

It is also recommended to further explore the ability to leverage healthcare data, such as Medi-Cal and My Health LA, to assess the scope of the undocumented population along with income information to glean the subset of that population who may be experiencing homelessness or at-risk. This data, however, may not be fully comprehensive, however, as some individuals experiencing homelessness may not be connected to health benefits. Additionally, it is recommended to include information on trauma-informed ways to ask about status and language information during outreach (i.e, what leading questions to ask, how to word, etc.) in the recommended trainings for service staff on undocumented and immigrant populations (see above).

Recommendations for State and Federal Advocacy

State Advocacy

Over the past decade or so, California has become the leading state on pro-immigrant policies, enacting legislation that improves opportunities for economic mobility and expands access to higher education, health care, and public benefits for undocumented immigrants. However, significant gaps still remain in enacted policy. In order to fill those gaps, it is recommended for the Board to support, or to continue to support, the following state proposals:

- Health4All/Food4All Governor Newsom's Fiscal Year 2022-2023 Budget Proposal: The proposal includes \$819.3 million for Medi-Cal expansion in 2023-2024 to those ages 26 to 49, regardless of immigration status. It also includes \$35 million to expand state-funded CalFresh eligibility to those aged 55 and older, regardless of immigration status. A revised version of the proposed budget is expected in May and the state legislature will have until June 15 to pass it. It is recommended to also advocate for an earlier Medi-Cal expansion implementation date than is proposed.
- Health4All AB 4 (J. Arambula): This bill would remove immigration status as an eligibility barrier to comprehensive health coverage, ensuring all income-eligible Californians ages 26 to 49 can enroll in Medi-Cal regardless of immigration status.
- SafetyNet4All AB 2847 (E. Garcia): This bill would require California to develop and fund a oneyear Excluded Worker Pilot Program that would provide \$300 a week for up to 20 weeks to immigrant workers who lose their job and are excluded from unemployment benefits due to their immigration status.
- Foor4All Senate Bill (SB) 464 (M. Hurtado): This bill would provide state-funded food access benefits to all Californians who are currently ineligible for CalFresh due to their immigration status.

Not only would these above campaigns help close the gap for undocumented people experiencing or atrisk of homelessness, but they are also viable given the current budget surplus.

In addition to these advocacy efforts, it is also recommended to advocate for legislation that would allow local jurisdictions to enforce certain tenants' rights provided by the state, akin to language that was contained in SB 1190 (M. Durazo) which was signed into law in 2020, but which was removed from the final version of the bill. Lastly, it is recommended to continue advocating for increased funding for immigrant and undocumented populations in the Governor's budget.

Federal Advocacy

The largest restrictions when serving undocumented immigrants, lie at the federal level and as stated above, in Section V, there has been a longstanding failure on that level to enact meaningful change. As such, it is recommended to advocate for any comprehensive immigration reform legislation that can help create a path to citizenship for undocumented and immigrant individuals. The Board should continue support of bills such as House of Representatives Bill (HR) 6 (L. Roybal-Allard), which provides a pathway to citizenship for U.S.-raised immigrant youth known as "Dreamers," Temporary Protected Status recipients, and Deferred Enforced Departure beneficiaries, and HR 1177 (L. Sanchez)/Senate Bill (S) 348 (R. Menendez), which would create an eight-year pathway to citizenship for many undocumented immigrants currently living in the U.S. The Board should additionally consider support, where feasible, of

the following bills which create a pathway to citizenship for certain categories of immigrants or increase access to public benefits for immigrants:

- **HR 1435 (B. Rush):** This bill would provide Temporary Resident status for certain parents and spouses of citizens or lawful residents of the U.S.
- **HR 1537 (Z. Lofgren):** This bill would create a program for farmworkers to earn legal status through continued agricultural employment and reforms the H-2A program.
- HR 1909 (J. Castro)/S 747 (A. Padilla): This bill would create a pathway for eligible immigrants, who were essential workers during the COVID-19 pandemic, to apply for obtain permanent resident status.
- **S 264 (R. Durbin):** This bill would provide Dreamers at path to citizenship.
- **HR 2382 (N. Barragan):** This bill would create a more navigable and accommodating pathway to citizenship for veterans honorably discharged from the U.S. military.
- **HR 1182 (M. Takano)/S 3212 (A. Padilla):** This bill would help prevent the deportation of noncitizen veterans, improve the pathway to citizenship for eligible military service members and their families, and grant deported veterans an opportunity to return home to the U.S.
- HR 4137 (R. Grijalva)/S 2265 (T. Duckworth): This bill would establish a veterans' visa program to permit veterans who have been removed from the U.S. to return as immigrants.
- **HR 6797 (J. Vargas)/S 3227 (T. Duckworth):** This bill would facilitate naturalization services for noncitizen veterans who have been removed from the U.S. or are inadmissible.
- **HR 5227 (P. Jayapal):** This bill would allow all lawfully present immigrants to access federal programs without bars or waiting periods.

Additionally, the Board should consider opposition, where feasible, of legislation which would create barriers to accessing needed assistance for immigrant and undocumented populations, such as:

- **HR 756 (G. Grothman):** This bill would restrict certain federal assistance programs to only individuals verified to be U.S. citizens.
- **S 1075 (T. Cotton):** This bill would withhold funding authorized under ARPA from any state or unit of local government that fails to certify that it is not providing relief funds or monetary payments that are targeted exclusively to individuals who are believed to be unlawfully present in the U.S.

In addition to the legislative advocacy above, the Board should:

- Advocate to remove immigration status restrictions for the Section 8 Housing Choice Voucher program, public housing programs, as well as for permanent supportive housing funded by the Continuum of Care program.
- Advocate for legislation/funding that provides more flexibility or more local control for who and what can be served with such funding, especially as it pertains to housing resources.
- Continue to monitor the federal regulatory process, and advocate where necessary, to ensure federal rules on immigrant access to benefits are as low barrier as possible.

Lastly, the Board should provide comment on, where feasible, and education surrounding upcoming changes to, the Public Charge Ground of Inadmissibility rule, as is proposed in the February 24, 2022 Federal Register. This notice of proposed rulemaking (NPRM) provides an opportunity to codify the rollback of the 2019 public charge rule and clarify that non-cash housing, food, and medical (except when

used for long term institutionalization at the government's expense) benefits are not considered in a public charge determination. The NPRM also provides an opportunity to make the public charge rule clearer and more concise, which can help not only combat the chilling effect it has caused but can help lead to more fair and consistent adjudications as well. The Board should provide comment on the NPRM if able to do so by April 25, 2022. If feasible, the Board should push to have the Public Charge Ground of Inadmissibility and Deportability rules removed altogether, as future administrations may have an opportunity to reimpose restrictive rules. Additionally, when the new Public Charge Ground of Inadmissibility rule is finalized, the Board should create an education and outreach campaign around it and what it means for immigrant communities.

VII. <u>CONCLUSION</u>

According to the U.S. Census Bureau, there were over 3.4 million foreign born individuals living in Los Angeles County in 2019, with just over half of them being naturalized citizens, and approximately 951,000 undocumented individuals. This represents 30-40% of the total population of the County and there is a high likelihood that this is an undercount. Furthermore, due to the numerous barriers and restrictions placed on various immigrant and undocumented populations, they are highly vulnerable to falling into, and remaining in, homelessness. The Board has made great strides in serving this population, but it is urgent and necessary to continue removing barriers and filling in gaps where possible.