RESOLUTION OF THE LOS ANGELES HOMELESS SERVICES AUTHORITY OPPOSING THE DEPARTMENT OF HOMELAND SECURITY’S PROPOSED “INADMISSIBILITY ON PUBLIC CHARGE GROUNDS” RULE

WHEREAS, the Los Angeles Homeless Services Authority (LAHSA) is a joint-powers authority of the City and County of Los Angeles and serves as the lead agency in the Los Angeles Continuum of Care (LA CoC);

WHEREAS, LAHSA is responsible for funding a significant portion of the interim housing, permanent housing, and supportive services for individuals and families experiencing homelessness in Los Angeles County;

WHEREAS, LAHSA’s mission is to combat homelessness and to ensure everyone in the LA CoC has access to safe and stable housing;

WHEREAS, Los Angeles County is home to nearly 3.5 million immigrants, according to the 2017 American Community Survey, and 58 percent of children in Los Angeles County have at least one immigrant parent, according to the 2016 American Community Survey;

WHEREAS, all Los Angeles County residents should have access to healthcare, nutrition, and housing regardless of citizenship status and without fear of repercussions;

WHEREAS, the Department of Homeland Security is proposing a new rule which would expand criteria used to label someone as a “public charge” by including vital non-cash assistance, like housing benefits and the Supplemental Nutrition Assistance Program (SNAP, also known as food stamps), and lowering the threshold for determination as a public charge;

WHEREAS, in Los Angeles County and in accordance with federal rules, Housing Choice Vouchers and public housing are accessible to legal permanent residents, refugees, and asylum-seekers while other immigrants can still utilize those services so long as they are part of a mixed-status household;

WHEREAS, interim housing and emergency interventions in Los Angeles County are open to all residents, regardless of citizenship status in accordance with long-standing federal, state, and local rules;

WHEREAS, hundreds of thousands of legal immigrants who reside in Los Angeles County utilize public benefits such as General Relief, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF), and Medicaid, according to the Los Angeles County Department of Social Services;

WHEREAS, Los Angeles County provides public benefits and subsidized housing as a safety net to help prevent our most vulnerable populations, including immigrants, from falling into homelessness;

WHEREAS, this proposed rule could have detrimental effects on families who have lawfully migrated to Los Angeles County, forcing them to choose between obtaining the services they need and reuniting with family;

WHEREAS, this proposed rule could potentially deprive children of receiving medical care, sufficient nutrition, or proper shelter, thereby negatively affecting their growth and development;
WHEREAS, there were over 9,200 newly homeless individuals in the LA CoC this year and 46 percent of these newly homeless individuals cite economic factors such as loss of housing and unemployment as the primary causes, according to LAHSA’s 2018 Point-In-Time Count;

WHEREAS, this proposed rule could potentially add to the number of newly homeless individuals by possibly preventing eligible Los Angeles County residents from accessing Housing Choice Vouchers, Section 8 project-based rental assistance, and subsidized housing, which in turn could deprive them of safe and stable housing;

WHEREAS, this proposed rule may lead to negative impacts on the health and public safety of the general public in Los Angeles County by landing more people on the street, driving up health care costs through increased use of emergency services, and forcing people into using alternate methods to obtain basic needs;

WHEREAS, these programs provide basic human needs and therefore prevent future personal and public health crises which are considerably most costly;

WHEREAS, nationwide, many jurisdictions have already seen declining enrollment and increased disenrollment of many public benefits such as Medicaid, SNAP, and the Supplemental Nutrition Program for Women, Infants, and Children from immigrant households, including citizens, on account of misinformation and confusion about proposed rules, potentially causing adverse impacts on individuals and families who would otherwise not be affected by this proposed rule;

WHEREAS, this proposed rule has the potential to have a negative impact on Los Angeles County due to our diverse and multicultural population;

WHEREAS, the Los Angeles County Board of Supervisors and the California Attorney General, have expressed opposition a stand against this proposed rule;

NOW, THEREFORE, BE IT RESOLVED that the Los Angeles Homeless Services Authority does hereby oppose the Department of Homeland Security’s proposed rule, titled “Inadmissibility on Public Charge Grounds” as is posted in the Federal Register, Docket No. USCIS-2010-0012.
October 26, 2018

Ms. Samantha Deshommes
Office of Policy and Strategy, U.S. Citizenship and Immigration Services
Department of Homeland Security
20 Massachusetts Avenue NW
Washington, DC 20529-2140

Re: Docket No. USCIS-2010-0012 – Inadmissibility Based on Public Charge Grounds

Dear Ms. Deshommes,

On behalf of the Los Angeles Homeless Services Authority (LAHSA), we submit our response to the request for comments regarding *Inadmissibility on Public Charge Grounds* as issued in the Federal Register (Docket No.USCIS-2010-0012). LAHSA is a joint-powers authority for the City and County of Los Angeles and serves as the lead agency in the Los Angeles Continuum of Care (LA CoC). LAHSA is responsible for funding a significant portion of the interim housing, permanent housing, and supportive services for individuals and families experiencing homelessness in Los Angeles County.

The LA CoC serves one of the largest and most diverse populations in the nation. Roughly 3.5 million of Los Angeles County’s 10 million residents are immigrants; 44% of households are headed by a foreign-born family member.¹ LAHSA is committed to ensuring that all households in the LA CoC have access to the services and housing that they are eligible for and we believe that doing so is an essential part of our mission to end homelessness. In that vein, we are deeply concerned that the proposed expansion of the public charge grounds for inadmissibility will have a deleterious impact on families and children across the broader Los Angeles region. This proposal penalizes households that lawfully turn to social benefit programs designed to lift people out of poverty, leaving more families and children on the brink of homelessness without access to assistance that might prevent their entry into homelessness.

Los Angeles faces a crisis of housing affordability that leaves low-income families, regardless of immigration status, struggling to meet basic housing, health, and educational needs. Over 300,000 households in Los Angeles County earn less than $20,000 annually and spend more than half that income on rent. These households are making hard choices between rent and needed medical care, groceries, and basic needs for their children. As such, we are concerned over the inclusion of federal housing assistance among the public benefit programs under consideration in this proposal. Subsidized-housing programs like the Housing Choice Voucher (HCV) program and public housing mitigate this crisis and help to lift the burden that families face. Without this assistance, many of these households would potentially fall in to homelessness, which incurs far greater public costs than providing housing assistance.

Access to rental assistance, in turn, gives low-income families the flexibility to cover necessities like food, transportation, and childcare that are fundamental to long-term self-sufficiency and ultimately reduce healthcare and public safety expenditures throughout the region. Research finds that housing vouchers reduce family homelessness and result in housing stability, improving prospects for upward mobility. Instead, this proposed policy attaches a “heavily-weighted” negative value to the use of housing benefits, punishing households that turn to public assistance to provide their families with a safe, secure place to sleep at night.

Homelessness among families and children is acute in Los Angeles County, where more than 52,000 residents experience homelessness on a given night. Of this, 16% are family members experiencing homelessness. This past year marked the first decrease in homelessness in four years, and more than 16,000 residents were placed into permanent housing, a 16% increase from 2016 and a 51% increase from 2015; populations including veterans and chronically homeless individuals saw double-digit drops in homelessness. At the same time, more people are falling into homelessness for the first time, tempering the important gains being made in our community. In 2018, there was a 14% increase in first-time homelessness, driven largely due to economic factors including a job loss, evictions, and other financial challenges. In addition, the number of seniors experiencing homelessness rose by 22% from 2017 to 2018. The alarming growth in the newly-homeless population and senior homeless population underscores the urgency in connecting residents with public assistance to prevent more families, children, and seniors from losing their housing. As we know, the impacts of homelessness are far-reaching and multi-generational, coming at a high cost to both families and communities.

Beyond the importance of subsidized housing, healthcare, and nutrition programs providing for basic human necessity, these programs are extremely cost-effective. Housing interventions like rental assistance are considerably more economical than the costs associated with people who have already fallen into homelessness. Between increased emergency room usage, higher volumes of calls to local first responders, and other factors, a person experiencing homelessness can cost local governments up to $60,000 annually, which is about triple the cost of providing subsidized housing.\(^2\) Programs that provide for healthcare and nutrition assistance show similar long-term cost-savings.

**Unintended Consequences**

LAHSA has deep concern over the unanticipated consequences and the potential “chilling effect” this policy change will have on our immigrant communities, regardless of people’s immigration and citizenship status. This is a phenomenon well-documented in this proposal, which alludes to the steep decline in welfare enrollment among immigrants following the passage of the Personal Responsibility and Work Opportunity Act (PRWORA) and introduction of Temporary Assistance for Needy Families (TANF) in 1996. Ahead of this proposal, families with children are forgoing necessary health and nutrition assistance for which they are lawfully eligible for out of the real and perceived fear of jeopardizing their immigration status. Some states saw enrollment rates for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) decline by up to 20% following PRWORA’s enactment, which health providers attribute to immigration concerns.

This policy is primed for devastating impact in Los Angeles County, where 58% of children live in an immigrant household. Apart from enrollment declines, recent research finds that the restrictions

imposed on immigrant access to welfare have long-standing impacts on their children. A 2015 study found lower high school graduation rates—an indicator of future social mobility—among children of non-citizens in states where TANF eligibility was less inclusive of immigrant residents.³

Penalizing households for using public assistance does little to reduce poverty; in fact, DHS recognizes that this proposed rule has the potential to increase poverty, along with housing instability, negative health impacts on families and children, and costs to the public. Public benefit programs are vital to the work LAHSA does in reducing and ending homelessness among families in the region; by stripping families of their ability to turn to housing assistance without fear, this rule, if enacted, leaves families and children across the region increasingly vulnerable to homelessness. These families will not simply cease to need housing assistance or depart Los Angeles because the consequences of seeking assistance have increased. These families are fixtures of the communities they call home and will instead become more vulnerable and likely to fall in to homelessness where they will incur far higher public costs.

Prohibitive Threshold

LAHSA is concerned over the restrictive threshold for public benefits used to estimate benefit dependency described in the proposed rule. As proposed, the monetized value of public benefits, including Section 8 Housing Vouchers and Section 8 Project-Based Rental Assistance, are limited to 15% of the Federal Poverty Guidelines (FPG)—or $1,821—for a household of one within a 12-month period. This standard sets impossible limits on housing assistance, the largest expense most families face. In the City of Los Angeles, the Section 8 Voucher Payment Standard for a two-bedroom unit (a standard based on federally-determined Fair Market Rents) is $1,970 per month, more than the yearly threshold detailed in the proposal.

Similarly, the proposed rule severely penalizes those receiving non-monetizable benefits, such as public housing, for more than 12 months within a 36-month period. As with 15% FPG standard, research suggests that this threshold would be prohibitive for all households participating in federal housing programs, regardless of immigration status. A 2017 U.S. Department of Housing and Urban Development (HUD) study finds that 90% of households entering housing programs remain through the first 12 months. The average length of stay for public housing is 5.9 years, with participants across all programs receiving public assistance for longer periods of time.⁴ Unsurprisingly, market conditions, particularly in tight rental markets like Los Angeles, play a significant role in determining how long families stay in housing. The HUD study finds a negative relationship between an occupant’s length of stay and rental occupancy rates, reflecting the difficulty for extremely low-income families to secure affordable housing options in markets like Los Angeles. Alternatively, the same HUD report concluded that sources of income and income levels “were not found to be good predictors of the length of stay,” based on findings that households with greater stability may, in fact, opt to stay in housing assistance longer.

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Prospective Use

LAHSA is concerned by the use of prospective assessments to determine admissibility. The proposal places the onus on immigration authorities to determine whether an applicant may depend on public assistance using a severely restrictive set of thresholds. This policy penalizes the use of public benefits, when in fact, research finds that safety-net programs are correlated with the positive health and education outcomes that help low-income families escape poverty. Food insecurity, for example, is well-known predictor of physical and mental health. The Center for Budget and Policy Priorities (CBPP) reported a 30 percent drop in food insecurity among children after just six months of participation in the Supplemental Nutrition and Assistance Program (SNAP).\textsuperscript{5} SNAP usage was also linked to a 25% (or $1,400) drop in medical costs among adult participants compared to low-income individuals not enrolled, an example of reduced costs to the public that result from benefit usage.

We appreciate the opportunity to provide comment on this proposal. Ensuring that immigrant families can access health and housing benefits, without fear, is essential to our work in addressing homelessness in our community. We look forward to working with DHS on examining the policies that protect and support our non-citizen population and provide all families and children with an opportunity to thrive.

Sincerely,

Kelli Bernard
Chair, LAHSA Commission

Peter Lynn
Executive Director

\textsuperscript{5} Carlson, S., & Keith Jennings, B. (2018). SNAP is linked with improved nutritional outcomes and lower health care costs. Center on Budget and Policy Priorities.