

## **Immigrant TANF Priorities**

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Members of immigrant families comprise 20 percent of the U.S.'s low-wage workers. Unfortunately, current law prevents many immigrant families from securing assistance and work support services that help low-income families achieve economic mobility—even though immigrants pay taxes that support these very programs. Immigrants, especially recent entrants, were singled out by the restrictive eligibility rules in the 1996 federal welfare law. These immigrant restrictions apply not only to the TANF block grant, but to other vital work support and safety-net programs, including health care, food stamps, and Supplemental Security Income (SSI). More than one in five children in the United States has at least one immigrant parent. The nation cannot implement an effective anti-poverty strategy that excludes immigrants and their family members.

Congress and the president have recognized the need to restore public benefits to immigrants. In 2002, the Bush administration helped to advance a restoration of food stamps to immigrant children, their families, and immigrants with disabilities. The Senate Finance Committee also included immigrant restorations in the Medicare bill last year. And, President Bush's 2005 budget includes an SSI extension for immigrant seniors and immigrants with disabilities who are scheduled to lose their benefits.

This year, we hope to build on the gains of the past year with the following recommendations:

***Give states the option of providing health coverage under Medicaid and/or the State Children's Health Insurance Program (SCHIP) to lawfully present pregnant women and children (Immigrant Children's Health Improvement Act, or ICHIA)***

- ◆ **ICHIA provides flexibility and fiscal relief for states.** States have been relatively generous in continuing to provide state-funded safety-net services for low-income immigrants. Almost one-third of the states are spending their own money to cover at least some of the immigrants who are ineligible for federally funded Medicaid and/or SCHIP. Some of these programs are in jeopardy because of state fiscal shortfalls. This proposal would bring significant fiscal relief to these states and grant them the flexibility to make the choices that best meet the needs of their populations.



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- ◆ **Health care decisions should be made on the basis of public health considerations.** The goals of the Medicaid and SCHIP programs are undermined when states are not permitted to use federal funds to provide basic health services to lawfully present immigrants. According to a 2003 Urban Institute study, children of immigrants in low-wage households were uninsured at a rate 74 percent higher than children with U.S. citizen parents.
- ◆ **Emergency care is a costly and ineffective means of delivering primary care.** It is well established that the nation saves more than \$3 for each \$1 it spends on prenatal care, and \$9-\$10 for the lifelong rehabilitative and other care of infants born prematurely. Failing to provide basic preventive care for kids leads to a reliance on expensive emergency care and increases the likelihood of serious and costly health problems for these children later on in life. Similarly, failing to provide prenatal care increases the need for costly medical interventions after birth.

***Give states the option to provide TANF services to lawfully present immigrants (including TANF-funded child care, job-training, and transportation programs)***

- ◆ **TANF restoration would improve child well-being.** Work supports and welfare-to-work programs help reduce child poverty by facilitating the economic mobility of immigrant parents. More than one in five children in the U.S. has at least one immigrant parent. The nation cannot implement an effective anti-poverty strategy that excludes immigrants and their family members.
- ◆ **Immigrants are more likely to hold jobs in low-wage sectors that are sensitive to fluctuations in the economy.** Current restrictions exclude immigrants from programs that could help them attain skills needed to advance in the labor market and provide a safety net when they are temporarily unemployed. Lifting current restrictions on TANF-funded education and job-training programs can help them move into jobs with higher pay and greater stability.
- ◆ **Working immigrant families are penalized.** Since TANF already includes mandatory work requirements and a time limit on assistance, both of which apply regardless of immigration status, additional eligibility restrictions that apply specifically to immigrants serve no useful purpose.

***Extend SSI for elderly and disabled refugees, asylees, and Cuban/Haitian entrants***

- ◆ **The Bush administration supports the extension of SSI benefits.** Recognizing that “some individuals have been unable to obtain citizenship within seven years due to a combination of processing delays, and for asylees, statutory caps on the number who can become permanent residents,” the president’s fiscal year 2005 budget includes language to help legal immigrants at risk of losing SSI to retain this critical assistance.

- ◆ **Elderly and disabled refugees shouldn't be punished for immigration processing delays.** Refugee groups are technically eligible to apply for citizenship after they have been in the U.S. for at least 5 years. But backlogs in processing citizenship applications caused by increases in the number of applications, computer problems, insufficient staffing levels in some areas, and lengthy background checks put in place after the attacks of Sept. 11, 2001, have led to significant delays. Most of these immigrants cannot become citizens within the 7-year SSI eligibility period even if they apply for citizenship on the very first day they are eligible to do so. Other seniors and persons with disabilities are hampered by their inability to meet the naturalization-related English and civics requirements, despite their best efforts.
- ◆ **SSI saves seniors and persons with disabilities from destitution.** Refugees, asylees, and Cuban and Haitian entrants come to this country to escape persecution. They often have witnessed or endured unimaginable violence and come here having escaped with little more than the clothing on their backs. Refugees who qualify for SSI are by definition either elderly or disabled and generally unable to work. Their SSI grant is often their only source of income, without which many of these seniors and persons with disabilities risk hunger, homelessness and despair. Indeed, when threatened with the termination of their SSI benefits in 1996–7, several elderly immigrants committed suicide. In addition, in some states, the loss of SSI may also mean a loss of health coverage.

***Clarify that state and local governments may use their own money to provide services to “not-qualified” immigrants***

- ◆ **Current law limits states' flexibility.** Section 411 of the welfare law requires that states wanting to continue providing services to certain immigrants after Aug. 22, 1996, must pass new laws authorizing the use of funds for that purpose. The provision interferes with state and local governments' authority to spend their own funds. It also places additional burdens on states by requiring them to reauthorize their current immigrant eligibility rules.
- ◆ **Current law has caused several counties to impose unprecedented immigrant restrictions on basic and preventive care.** Because of section 411's lack of clarity, several county hospitals in Texas and New Mexico denied medical care under their indigent care program to “not-qualified” immigrants because they believed that providing such care violated federal law. In New Mexico, this decision resulted in the deaths of two people.
- ◆ **Current law undermines existing state laws and constitutions.** Many states and localities already have laws requiring public hospitals to provide medical care to all indigent and needy residents. Section 411 of the welfare law has the effect of overriding a state's decision to provide this coverage, and county hospitals have used the 1996 federal welfare law to circumvent their obligations to serve immigrant indigent residents.

***Eliminate current restrictions on domestic violence victims' eligibility for public benefits (the Women Immigrants' Safe Harbor Act, or WISH)***

- ◆ **Lack of resources poses a significant barrier to escaping from domestic violence.** Victims often are prevented from leaving their abusers by the knowledge that doing so will expose them and their children to economic hardship. Victims of abuse often are economically and socially isolated. This is particularly true of immigrant victims who are far from close family and friends and may have a harder time obtaining community support due to language or cultural barriers. A recent study found that more than two-thirds of battered immigrant women still trapped in abusive relationships cited lack of money as the biggest obstacle to leaving.
- ◆ **Family members are affected when a victim cannot leave her abuser.** In cases where domestic abuse occurs between two intimate partners, studies reveal that children in the household also are physically abused the majority of the time. Children suffer from health and school troubles as result of witnessing domestic violence in the home. Victims need timely access to benefits, not only to escape abuse, but to protect their families.

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