TANF and Immigrants in Texas:

Lessons for Reauthorization

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Introduction

The 1996 federal welfare law created the Temporary Assistance for Needy Families (TANF) block grant and contained sweeping changes to immigrants' eligibility for basic cash assistance and other social support programs. Significant restrictions on eligibility were imposed and additional requirements for access to benefits were added. In states across the country, and especially in those—like Texas—with large immigrant populations, the effects of these changes have been significant. Statistics show a marked decline in program participation, even among immigrants still eligible for assistance and among U.S.-citizen children of immigrant families.[1] Other studies point to increased hardship among immigrant families and striking increases in demand on already overburdened community services.

In 2002, the TANF program must be "reauthorized" or continued—by Congress. As Congress deliberates the reauthorization of TANF, many major policy issues will be debated and the five-year history of the program reviewed. Though TANF caseloads have declined dramatically and work participation is up, concerns remain about the well-being of low-income families. Many who have left the rolls struggle in low-wage jobs, lacking the additional supports necessary to move toward family security. National research has shown that many immigrant families are among those still struggling and that their hardship has deepened because of the restrictions on TANF, Food Stamps and Medicaid.

In a number of states, immigrant families and their children make up a significant proportion of the low-income population. Texas is one of those states. If state and federal policymakers are serious about moving welfare reform into the next phase and helping families not only to leave

[1] Throughout this paper, "citizen" means "U.S. citizen" unless otherwise noted.

public assistance, but also to escape a life of grinding poverty, then the particular policies affecting immigrants must be part of the discussion. It is important to remember that many of these are legal immigrants—individuals and families who have been authorized to live and work in the United States and who pay taxes that support the very programs they have been barred from utilizing. Moreover, many immigrant families are "mixed households" including both immigrants and citizens, especially citizen children.

The immigrant benefit restrictions of the federal welfare law have been among its most controversial provisions and are likely to be a subject of debate during reauthorization. Some of the most restrictive policies have already been reversed. In 1998, the federal government restored Food Stamps to some categories of immigrants, and just recently President Bush has suggested he will seek further Food Stamp restorations. While these are substantial and meaningful changes, it is important that the limitations placed on immigrants' access to temporary assistance and work supports under TANF be among the issues up for review and reconsideration in 2002.

> In this document, the term, "legal immigrant" is used to refer to "qualified aliens" under PRWORA. The term "undocumented immigrant" is used to refer to all immigrants who are not lawfully present, which includes both persons who entered the U.S. without permission, and those who entered lawfully, but remained here after the period of their visa had expired. For additional detail see Appendix A.

Immigrant families in Texas have always utilized the state's meager cash assistance in limited numbers, but this emergency support can be crucial to the well-being of families in crisis. The availability of TANF for the relatively small subset of legal immigrants likely to qualify will help promote a return to self-sufficiency for this population when they have suffered a breakdown in their support systems. Moreover, access to TANF-funded employment services such as English as a Second Language (ESL) classes and work supports such as child care and transportation, could make the crucial difference in the success or failure of immigrants' efforts to become productive members of their new country.

This paper will present a Texas context for TANF reauthorization and the specific question of immigrant eligibility for TANF assistance and TANF-funded services. It will present data on immigrants in Texas and their current and historical utilization of selected benefit programs. It will review related research on the effects of benefit restrictions on immigrant families, provide qualitative information from state agency and community service providers working with low-income immigrant families, and summarize state legislative and policy responses to the federal law changes. Finally, the paper will offer recommendations to policymakers for consideration during Congressional reauthorization of the TANF program and beyond.

Policy Background

The 1996 welfare law contained major changes to immigrants' eligibility for a number of programs, including TANF, Medicaid, Food Stamps, Supplemental Security Income (SSI) and other federally funded benefits.[2] This paper will focus on changes to immigrants' access to TANF and the impact of these changes in Texas.[3] Information on immigrants' utilization of other programs will be presented for context, along with related state policy and program responses.

Prior to the federal law changes in 1996, legal immigrants were eligible for cash assistance (then called AFDC, or Aid to Families with Dependent Children) in Texas on the same basis as other very low-income Texas residents with U.S. citizenship. With passage of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), access to TANF and TANF-funded programs changed significantly. Most legal immigrants arriving after enactment of the law (August 22, 1996) are barred from TANF for their first five years in the United States, and federal TANF funds may only be spent on them after that bar is exhausted. This five-year bar applies not only to cash assistance but also to other services funded with federal TANF dollars such as employment assistance, child care, transportation and other "non-cash" benefits.[4]

Groups exempted from this ban are:

- refugees, asylees and those granted withholding of deportation (may receive TANF only for the first five years in the U.S.);
- legal immigrants who are veterans of, or on active duty with, the U.S. military; and,
- persons (couples, families) with 10 years (40 quarters) of U.S. work history.

States also have options on how to treat legal immigrants after their "five-year bar." PRWORA allowed states to choose whether or not to continue Medicaid[5] and TANF for qualified immigrants. Additionally, states are allowed to make distinct decisions regarding pre-PRWORA immigrants, and those arriving on or after August 22, 1996. Also, most "after" group immigrants are subject to the so-called "deeming" of sponsor income, meaning that the income of the relative who sponsored their entry into the U.S. is counted as though available to them. As a result, fewer immigrants are likely to qualify for TANF than was true before the 1996 law. Texas is one of only five states not opting to offer TANF or TANF services to immigrants after their

[2] The welfare law also created new classifications for immigrants. More details on this issue can be found in Appendix A.

[3] For more detailed information on other immigrant benefit eligibility aspects of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 see the National Immigration Law Center (NILC) at: www.nilc.org or background information from CPPP at http://www.cppp.org/policy/programadmin/index.html#Immigrants.

[4] States are required to maintain certain historical levels of state funding to receive the federal TANF block grant. Known as Maintenance of Effort (MOE) funds, these state dollars can be used to provide state-funded benefits to immigrants. More discussion of MOE-funded immigrant benefits is provided in the "State Response" section of the paper.

[5]. HCFA (now CMS) has very clearly directed states that the Agency will assume that a state IS going to provide Medicaid to qualified immigrants in the "after" group, after their five-year bar ends, UNLESS the state submits a Medicaid State Plan Amendment (SPA) indicating their intention to exclude those immigrants (Dear State Medicaid Director letter, October 4 1996; State Medicaid Manual, 3210.1). Texas has not submitted such an "SPA," although 2001 legislation authorizing Medicaid coverage for this group was vetoed and state eligibility policy manuals indicate that the post-PRWORA entrants are not covered.

five-year bar.[6] In the future each of these states can and may yet exercise the option to provide TANF to this group.

State officials in Texas have made the policy changes required to implement the federal welfare law and its array of immigrant benefit restrictions. However, very few steps have been taken to alleviate the impact on needy immigrants, their families and the programs that serve them. As a result, the well-being of immigrant families has deteriorated, and this devolution of responsibility to the state has largely resulted in new—and unfunded—demands on local communities.

Immigrants in Texas

Texas is home to more than 2 million residents who are not U.S. citizens. These numbers include both legal and undocumented immigrants because the U.S. Census does not record the immigration status of non-citizens; but historical data from the Immigration and Naturalization Service (INS) suggests that about half of these residents have legal residency status.[7] Non-citizens in Texas make up 10% of the state's total population and represent 11% of all non-citizens in the country (Table 1). Texas has nearly the same number of non-citizens as New York, with California having the highest non-citizen population at 5.4 million.

Table 1

Non-citizens in the U.S. and the Four Most Populous State, 2000			
	Total Population (in millions)	Non-citizens (in millions)	Non-citizens as percent of total
United States	277.4	18.534	6.7%
California	34.7	5.420	15.6
Texas	**20.6**	**2.049**	**9.9**
New York	18.0	2.066	11.4
Florida	15.2	1.574	10.4
TX % of U.S.	7.4%	11.1%	NA

SOURCE: Current Population Survey, March 2001 Annual Supplement, U.S. Bureau of the Census and U.S. Department of Labor, Bureau of Labor Statistics.

Non-citizens and their families tend to be poorer than their citizen neighbors. In Texas, non-citizens had a poverty rate of 22% in 2000, compared to the state's overall poverty rate of 15%. This compares to a national non-citizen poverty rate of 20% and an overall U.S. poverty rate of

[6] Only Idaho, Indiana, Mississippi, South Carolina and Texas have not exercised the option to provide TANF to immigrants who entered the U.S. on or after August 22, 1996, and who have resided here for at least five years.
[7] Immigration and Naturalization Service, http://www.ins.usdoj.gov/graphics/aboutins/statistics/index.htm.

11%. Interestingly, when looking at foreign-born residents who have become naturalized citizens the poverty rate differences nearly vanish. In Texas naturalized citizens have a 14% poverty rate, the same as the poverty rate for native-born citizens (Table 2). This may suggest that as immigrants find their way into the workforce and navigate the arduous naturalization process, their hard work pays off in increased economic standing. It may also suggest that immigrants with more resources (income, education, supports) have an easier time completing the naturalization process. Whatever the case, state efforts to provide education, training and other employment assistance to immigrants can help nurture this transition from immigrant to U.S. citizen.

Table 2

Poverty rate by Citizenship Status in the U.S. and the Four Most Populous States, 2000				
	Total Population	Native-Born Citizen	Naturalized Citizen	Non-Citizen
United States	11%	11%	10%	20%
California	13%	12%	11%	23%
Texas	**15%**	**14%**	**14%**	**22%**
New York	14%	13%	16%	19%
Florida	11%	10%	10%	15%

SOURCE: Current Population Survey, March 2001 Annual Supplement, U.S. Bureau of the Census and U.S. Department of Labor, Bureau of Labor Statistics.

Texas is a very large state with 27 major metropolitan areas and a long border with Mexico. The immigrant population varies significantly among different regions, with marked concentrations in border regions. Communities along the Texas-Mexico border are among the poorest in the state and in the nation. Thus, some areas of the state have been particularly hard-hit by the immigrant benefit restrictions, while others have experienced a more limited impact. Those communities with immigrants representing a significant proportion of their population bear a disproportionate burden from the immigrant benefit restrictions. Unfortunately, these same communities are among the state's poorest, with limited local resources to make up for lost federal and state assistance.

Table 3 provides non-citizen resident statistics for eleven metropolitan areas in Texas. The non-citizen population ranges from 608,028 in Houston to 6,590 in Killeen-Temple. When looking at the non-citizen population as a proportion of each area's total population, non-citizens in the Beaumont-Port Arthur area represent only 2.1% of the total population, while non-citizens in the McAllen-Edinburg-Mission area account for more than one in five residents (21.4%). Not surprisingly, three border regions are among the four areas with the highest percentages of non-citizens.

Table 3

Selected Texas Metropolitan Areas Ranked by Percent of Non-Citizen Population, 2000			
	Total Population	Non-citizen	Percent Non-citizen
McAllen-Edinburg-Mission	513,812	109,999	21.4%
Brownsville-Harlingen-San Benito	304,556	50,227	16.5%
Houston	3,783,606	608,028	16.1%
El Paso	606,805	94,016	15.5%
Dallas (PMSA)	3,179,115	441,228	13.9%
Austin-San Marcos	1,125,316	101,347	9.0%
Fort Worth (PMSA)	1,535,258	124,614	8.1%
San Antonio	1,438,618	93,431	6.5%
Corpus Christi	343,643	9,008	2.6%
Killeen-Temple	259,417	6,590	2.5%
Beaumont-Port Arthur	337,142	7,089	2.1%

SOURCE: Current Population Survey, March 2001 Annual Supplement, U.S. Bureau of the Census and U.S. Department of Labor, Bureau of Labor Statistics.

There has been considerable attention paid recently to the poor economic conditions in the Texas border region. For several legislative sessions in a row there have been high-profile attempts to improve educational resources, infrastructure, economic development and workforce opportunities. Given the statistics discussed above, specific state programs and policies to address the circumstances of non-citizen immigrants must be a central component of any of these efforts. State policymakers leading the fight for border development should make restoration of federal benefit programs for immigrants a part of their agenda. Their Congressional colleagues should do the same.

The non-citizen immigrant statistics above offer only a partial view of the ripple effects of federal program eligibility restrictions. Many more Texans are affected by policies limiting immigrant access to public programs, because so many immigrants live in families that include citizens. Recent U.S. Census data shed light on just how significant mixed-immigration families are in Texas. There are 5.74 million children in Texas.[8] Some 19% of these children (1.12 million) live in a "mixed immigration family" one in which one or more of the parents is a non-citizen. When looking at only low income children (below 200% of the poverty income) 29%, or 794,000 live in a "mixed family."[9] The Urban Institute's 1999 National Survey of American Families (NSAF) found that 78% of children in mixed-immigration families were born

[8] Tabulations of three-year (1999-2001) CPS data by the Center on Budget and Policy Priorities

[9] The most recent CPS data – from 2001, which has sample size for Texas large enough to make these numbers valid, shows these percentages climbing. The 2001 data show fully 23% of all children in "mixed families" and 34% of low-income children in "mixed families."

in the United States and therefore are U.S. citizens.[10] With nearly eight out of ten children of immigrants potentially eligible for government programs, the 1996 restrictions not only have reduced assistance to immigrants, but the fear and confusion among immigrant communities in the wake of these changes is depriving many U.S. citizens of needed services. Table 4 offers data on the numbers and percentages of low-income children (under 200% of poverty) in "mixed families." Texas is second only to California in both the number of low-income children and in the percentage of low-income children who are in families with a non-citizen parent.

Table 4

Low-Income Children (under 200% of poverty) in Mixed-Immigration Families			
	Number of low-income children	Number in mixed-immigration families	Percent in mixed immigration families
United States	27,780,000	5,678,000	20%
California	4,351,000	2,189,000	50%
Texas	**2,711,000**	**794,000**	**29%**
New York	1,975,000	543,000	27%
Florida	1,482,000	390,000	26%

SOURCE: Tabulations of three year (1999-2001) CPS Data by the Center on Budget and Policy Priorities

Another characteristic of immigrants in Texas that affects their access to public programs is limited proficiency in the English language. Without the ability to communicate well in English and to comprehend English-language documents, navigating the maze of public program application processes can be daunting. In Texas, nearly three-fourths (74.1%) of all foreign-born residents come from Latin America. This compares to 50% nationally (Table 5). The inference is clear then, that Spanish will most likely be the language spoken by the majority of immigrants in Texas. It is, however, worth noting the growing diversity in countries of origin among immigrants and the multiple languages now spoken in communities like Houston. Census data also offer insight into the potential language barriers facing these immigrants. Table 6 shows the language spoken at home for the population 5 years of age and older. In Texas, out of almost 6 million residents who speak a language other than English at home, 5.2 million (or 86%) speak Spanish. Of those Spanish speakers, 2.4 million—nearly half (46.5%)—speak English less than "very well." Looking only at responses from adult immigrants aged 18 to 64, almost 427,000 Spanish speakers are estimated to speak English "not at all."[11] Improving access to public programs among eligible immigrants and their families will require significant efforts to address language barriers. Ensuring that immigrants are able to gain and retain employment at decent wages also requires adequate language training opportunities through programs such as English as a Second Language (ESL).

[10] Randy Capps, *Hardship among Children of Immigrants: Findings from the 1999 National Survey of America's Families,* Urban Institute, February 2001.
[11] Census 2000 Supplementary Survey Summary Tables

Table 5

Region of Birth of Foreign-Born Residents, 2000				
	United States	%	Texas	%
Foreign-born population with region of birth reported	30,464,003		2,909,747	
Latin America	**15,471,784**	**50.8%**	**2,157,343**	**74.1%**
Asia	8,364,026	27.5%	501,647	17.2%
Europe	4,772,270	15.7%	140,422	4.8%
Africa	839,547	2.8%	64,053	2.2%
Northern America	836,068	2.7%	40,279	1.4%
Oceania	180,308	0.6%	6,003	0.2%

SOURCE: Census 2000 Supplementary Survey Summary Tables, QT-02. Profile of Selected Social Characteristics: 2000.

Table 6

Language spoken at home, Population 5 years of age and over, 2000				
	Total Population 5 Years & Over (in millions)	Language other than English (in millions, percent of total)	Spanish (in millions)	Spanish Spoken and English spoken less than "very well" (in millions)
United States	254.7	44.9 (17.6%)	26.7	12.5
California	30.6	12.1 (39.5%)	7.8	3.9
Texas	**18.7**	**5.6 (29.9%)**	**5.2**	**2.4**
New York	17.1	4.7 (27.5%)	2.4	1.1
Florida	14.7	3.2 (21.8%)	2.3	1.0

SOURCE: U.S. Census Bureau, QT-02. Profile of Selected Social Characteristics: 2000, Census 2000 Supplementary Survey Summary Tables.

Program Utilization

One of the misperceptions that drove the immigrant eligibility restrictions in the 1996 welfare law was that immigrants over-utilized public benefit programs and were drawn to the United States by access to those programs. Analysis by the Center on Budget and Policy Priorities reveals that the use of TANF cash assistance by immigrants has historically been only a few

percentage points higher than native households. Moreover, after controlling for income and family composition, the difference in utilization rates disappears.[12]

The effect of the federal benefit restrictions on immigrants in Texas has been significant. Dramatic declines in the number of immigrants receiving TANF and Food Stamps have paralleled the general caseload declines experienced between 1995 and 2000. However, the proportion of recipients who are immigrants has also declined. While some of this change reflects the specific immigrant restriction polices put in place in 1996, the scale of the change raises concerns about declining access to programs by immigrants still eligible for benefits. General observations that caseload declines have outpaced much more limited declines in poverty rates, and in the total number of those eligible for benefits, point to the loss of benefits among eligible citizen children of immigrants as part of the equation.

From 1996 to 1997, Food Stamp enrollment nationwide among citizen children with legal immigrant parents dropped by 37%. In contrast, enrollment by children in families that did not include legal immigrant parents dropped by only 15%.[13] Experts attribute much of the decline to the mistaken belief among immigrants that the use of hunger and health benefits may jeopardize the immigration status of a family member.

In 1996, 19,907 immigrants received AFDC in Texas, prior to the PRWORA changes and the creation of TANF. These clients made up 3.6% of all cash assistance recipients at that time. By 2001, only 6,468 were receiving TANF cash assistance, or 2.1% of all recipients. This represented a 67.5% decline in participation which compares to an overall TANF caseload decline of 44% during the same period.[14] For Food Stamps the trend has been similar, if more dramatic. In 1996, 168,517 immigrants received Food Stamps—8.7% of all recipients. By 2001, this number had dropped to 49,274, or 4.5% of the caseload, a 70.8% decline. [15]

Given the large percentage of low-income children in "mixed-immigration families," program statistics on these families further illuminate the impact of benefit restrictions. In October 2001, the Texas Department of Human Services (DHS) estimated there were 67,937 Food Stamp households with at least one ineligible adult immigrant member. This represents 12.2% of all Food Stamp households. In the same month 16,561 TANF households (12.6% of the total) had at least one ineligible adult.[16]

In Food Stamp households with an ineligible immigrant parent, DHS reported there were 147,597 citizen children and 2,177 non-citizen children receiving benefits in October 2001. In TANF households with an ineligible immigrant parent, 35,087 citizen children and 178 non-citizen children were receiving assistance. All of these children—citizen and non-citizen alike—

[12] Shawn Fremstad, *Immigrants and TANF: What do We Know?* Center on Budget and Policy Priorities, forthcoming publication.
[13] Jenny Genser, "Who is leaving the Food Stamp Program?: An analysis of Caseload Changes from 1994 to 1997," Office of Analysis, Nutrition, and Evaluation, The Food and Nutrition Services, U.S. Department of Agriculture, 1998.
[14] In July 1996 there were 647,202 TANF recipients which declined to 359,501 in October 2001.
[15] Texas Department of Human Services, July 1996 and October 2001 point-in-time enrollment ("SAVERR cutoff") data.
[16] Texas Department of Human Services, October 2001 point-in-time enrollment SAVERR cutoff data.

receive reduced Food Stamp or TANF benefits for their households due to their parent's ineligibility.

Statistics on the number of immigrants receiving other TANF-funded services, such as the employment assistance program for cash assistance recipients—Choices—are incomplete or non-existent. Data on participation by eligible immigrants in the Food Stamp Employment and Training program were unavailable from the Texas Workforce Commission. The number of children of immigrants receiving subsidized child care was not part of the scope of this research but offers an important follow-up inquiry. Information about immigrants' access to workforce services in general, and the limited data available, are discussed in a later section.

The Well-being of Immigrants in Texas since 1996

Trying to understand the real-life impact of the 1996 immigrant restrictions has been the task of a number of state and national research projects. Three particular efforts contain data about Texas or are focused specifically on immigrant families in Texas. Each of these paints a picture of increased hardship among immigrant communities, immigrant families and, notably, the citizen children of immigrant families. Significantly increased demand on local service providers has been a conspicuous side-effect of the program restrictions. The studies also point to a very limited state level response from Texas to address these circumstances, particularly compared to other states' efforts. These findings should be well considered as state and federal policymakers review continued restrictions on program eligibility and contemplate the restoration of some benefits for these populations.

Urban Institute Research

Studies by the Urban Institute (UI) paint a picture of hardship among immigrant families in Texas and the limited assistance available to them in the wake of welfare reform. In a report titled *Hardship Among Children of Immigrants: Findings from the 1999 National Survey of America's Families*, the Urban Institute pointed to a "growing body of evidence suggesting that immigrants and their families are staying away from public assistance to a greater extent than citizens, even when they remain eligible for aid."[17]

The UI study, using data from the 1999 National Survey of American Families, examined several indicators of well-being for the children of immigrants in eight states with high immigrant populations (California, Colorado, Florida, Massachusetts, New Jersey, New York, Texas, and Washington). According to the report, children of immigrants[18] in Texas suffer significantly higher levels of hardship in the areas of food, health care and housing compared to those in other states.

The Urban Institute estimated that more than one-third of the children of immigrants in Texas live in poverty, compared to less than a fourth of the children of immigrants nationwide. At 36%,

[17] Randy Capps, *Hardship Among Children of Immigrants: Findings from the 1999 National Survey of America's Families,* Urban Institute, February 2001.
[18] Defined the same as a child in a "mixed immigration family:" any child with at least one non-citizen parent.

this poverty rate places Texas worst among the eight states in the study. Looking at the broader group of children in families defined as "low income" at or below 200% of the federal poverty level[19]—Texas again ranks worst. Nearly three-fourths of Texas' children of immigrants live in families with incomes below 200 percent of poverty. This is compared to only 41% of Texas children of U.S. citizens. Nationally, only 52% of children in immigrant families are below 200% of poverty.

Table 7

Well-Being of Children of Immigrants		
Indicator	**Texas**	**U.S.**
Below poverty	36%	24%
Below 200% of poverty	73%	52%
Food concerns	49%	37%
No health insurance	40%	22%

SOURCE: Urban Institute, Data from the 1999 National Survey of American Families

The UI study also explored the issue of food insecurity. Texas again stands out. Nearly half of all children of immigrants in Texas live in families struggling to keep food on the table. This compares to 37% nationally and to 33% of citizen-headed families in Texas. Housing circumstances and access to health insurance were also part of the study. More than a third of children in mixed-immigration families in Texas live in crowded housing. Fully 40% of children in mixed-immigration families are uninsured.[20]

These statistics are all the more troubling because it is very likely that most of the children in mixed-immigration families in Texas would, in fact, be eligible for services designed to address the hardships reflected. As mentioned earlier, the Urban Institute has estimated that 78% of the children of immigrants were born in the U.S. and are themselves U.S. citizens. Even though these citizen children are eligible for all benefits, the evidence shows they are not accessing these benefits at the same rate as children of native-born parents. Moreover, research in recent years has found that immigrants' participation in benefit programs for which they qualify has dropped at a much sharper rate than for U.S. citizens.

Welfare, Children and Families

A Johns Hopkins University-based research effort has taken a closer look at the issue of access by the citizen children of immigrant families to TANF and other "in-kind" benefits like Food Stamps, Medicaid and WIC (Women, Infants and Children) benefits. *Welfare, Children, and Families: A Three City Study* is an ongoing research project in San Antonio, Boston and

[19] $35,300 for a family of four in 2001.

[20] Randy Capps, *Hardship among Children of Immigrants: Findings from the 1999 National Survey of America's Families,* Urban Institute, February 2001.

Chicago.[21] The overall purpose of this study is to document the impact of welfare reform policies on children and families in low-income neighborhoods in the three study sites.

A recent policy brief from the study examined whether the native-born (citizen) children of immigrant parents receive public benefits at rates comparable to children of U.S. citizen parents. Across all three cities, the children of non-citizen parents were less likely to receive TANF than children of citizen parents. The researchers noted a particular concern among the immigrants they interviewed about applying for cash assistance (TANF)—even when on behalf of their citizen children. Respondents feared it would "count against them" as they pursued permanent residence and U.S. citizenship. Additionally, the TANF application asks detailed questions about household composition, another aspect that may make immigrant families wary. This is despite the fact that all the mothers who were interviewed had arrived in the country by 1996 and were most likely eligible for assistance themselves—as were their children.

When looking at benefits like Food Stamps and Medicaid the differences in access were not as stark in San Antonio and Boston. The researchers were somewhat puzzled by the relative similarity among children of immigrants and those of citizens in their use of Food Stamps and Medicaid. While it may relate to a more established, homogenous immigrant community in San Antonio, where some of the latent fear of seeking assistance has been mollified by peer experience, the researchers also raised concerns about how representative the respondents were. The most at-risk families are often those hardest to find and least willing to answer researchers' queries. While questions remain about Food Stamps and Medicaid, utilization of TANF in San Antonio is clearly less likely among children of immigrants than the children of citizens, despite the probability of similar eligibility for assistance.

Center for Immigration Research

The Center for Immigration Research (CIR) is located at the University of Houston. In 1999 the Center completed a report titled *Effects of the 1996 Immigration and Welfare Reform Acts on Communities in Texas and Mexico*. Research was conducted in five Texas counties (El Paso, Harris, Hildago, Tarrant and Webb) and in four border regions of Mexico. As with the other studies, low-income families were the focus; both community organizations and households were interviewed. Of the 508 respondents who reported their citizenship status, 38% were U.S. citizens, 39% were legal immigrants, 16% were undocumented and 6% did not respond to the question. Forty-two percent of the Texas respondents had less than a ninth grade education, and 65% had less than a high school education.[22]

The federal restrictions on immigrant eligibility for benefit programs had a disproportionate effect on the counties in the study. Changes in access to Food Stamps are particularly noteworthy. By the Fall of 1997 a large majority of legal immigrants in those counties had lost their access to Food Stamps. For example, in El Paso County by September 1997, only 9,078

[21] Andrew Cherlin, Paula Fomby, Ronald Angel, and Jane Henrici. *Welfare, Children and Families: A Three-City Study.* "Public Assistance Receipt Among Native-Born Children of Immigrants," Policy Brief 01-3, October 2001. For more information on this research project see http://www.jhu.edu/~welfare/

[22] Jacqueline Hagan, Nestor Rodriguez and Randy Capps. *Effects of the 1996 Immigration and Welfare Reform Acts on Communities in Texas and Mexico,* Center for Immigration Research, University of Houston, Preliminary report, March 1999.

legal immigrants were receiving Food Stamps, compared to 38,826 in July 1996. While some of this dramatic decline was related to economic factors, the scale of the change points to welfare reform policy changes as the major cause. Partial federal restorations of Food Stamp benefits since 1996 have offset some of this initial impact, but utilization of benefits continues to lag.

CIR interviewed community organizations, churches and advocates who all expressed a growing concern about increased hardships among immigrant families. At the same time, many service providers reported being overwhelmed by increased demand for help from needy U.S. citizens as well, compounding concern about their ability to meet the needs of immigrants. In El Paso, a 60-member coalition of safety-net providers reported a dramatic rise in persons seeking food after 1996. Immigrant hospitality houses with food banks in Houston reported being unable to keep up with increased demand from immigrant families. In addition to the issue of food assistance, access to medical care was another frequent topic of concern among those interviewed. Failure to apply or re-apply for, and even self-withdrawal from, Medicaid was noted in the findings. Interviews with both households and service providers pointed to eligibility changes and to a fear of receiving public benefits or providing information on applications as reasons for the declining utilization of Medicaid. Health care officials expressed concern over these trends given the high incidence of public health problems in many of the communities surveyed.

The CIR study also noted two classifications of workers who reported difficulties in the wake of welfare reform and its immigrant benefit restrictions—informal workers and farmworkers. With large numbers of immigrants in these job categories and the especially large percentage of them in border counties, these workers have been particularly hard hit by the requirement to document a 10-year work history in order to qualify for benefits. Both informal workers and farmworkers often have sporadic work histories that are very difficult to document. Their typically low wages leave them having to rely on public assistance for certain periods of under-employment or unemployment. Both El Paso and Laredo reported large numbers of farm workers who lost benefits under the new rules.

Conclusion

All three of these research efforts raise concerns about the well-being of immigrants and their families in the wake of the 1996 changes. Hardships are evident among both those who have been denied access to assistance and those still eligible but staying away from services through fear or misunderstanding. It is notable that the local service providers who report major increases in demand do not distinguish between the two immigrant groups, they merely feel overwhelmed with trying to find services for all those coming through the door. Addressing these impacts on immigrants and their communities will require parallel efforts to both open the door again to safety-net services like TANF, Food Stamps and Medicaid and improve access for those already eligible.

Front-line Experiences

To complement the research findings described above and to present the perspective of local agencies, service providers and advocates, the Center conducted surveys and interviews with individuals and organizations representing various service sectors in communities around the state. The Center targeted entities that specifically served immigrants as well as public and private agencies that included immigrants among those they served. Questions were asked about access to, and utilization of, their services by immigrants as well as their clients' experiences with state and federal benefit programs. Specific questions sought to reveal the impact of the 1996 immigrant benefit restrictions and any changes in the demand for services.

The surveys and phone interviews were conducted with the following four groups:

- Social services providers (e.g., food pantries, health clinics, homeless service providers, shelters, employment assistance providers),
- Agencies providing services to victims of domestic violence,
- Recipients of TANF-funded grants targeting clients with barriers to employment, and
- Representatives of local workforce development boards (LWDBs) and their service contractors.

Additionally, the Center has been conducting a number of community briefing and listening sessions on the reauthorization of TANF, Food Stamps, Transitional Medicaid and Child Care. In each of these a set of questions related to immigrants' access to benefits is included. A summary of comments to date from those sessions is included.

Emergency Services Provider Survey

A questionnaire was sent to a network of emergency services providers, many of them food pantries. Almost 40 providers responded. A copy of the questionnaire with tabulated results can be found in Appendix B. A summary of the findings is presented here.

Impact on providers:

- Almost three-fourths (73%) of the respondents serve a clientele that is less than 25% immigrants, 6% have a clientele that is about half immigrants, 3% has a clientele that is 75% immigrants, and 5% has a clientele that is more than 75% immigrant.
- About four-fifths (81%) of respondents find it harder to find services or funding for clients that are immigrants, and 54% find it much harder to serve immigrants. Almost one-fifth (19%) of respondents find little difference in how hard it is to serve immigrants versus citizen clients.
- Almost two-thirds (64%) of respondents state that clients with immigration issues need more of their services than do citizens because they are denied access to government programs. Examples of additional demands included: direct services such as food (no access to Food Stamps), health care, housing, holiday assistance, employment assistance, translation services, legal referrals and transportation. Several respondents noted that their immigrant

clients required more frequent food aid and longer shelter stays, because jobs were harder to find for immigrants.

- Several respondents note that, of all the services offered to clients, helping immigrants to find jobs was the most difficult, due to language barriers, stigma and lack of proper documentation and other support services. This, in turn, has meant that immigrant clients require more services and more staff time from emergency providers.
- Of the respondents who routinely provide assistance to help clients enter the workforce (i.e., ESL classes, job training, child care and transportation), 84% find it harder to find services or funding for clients who are legal or undocumented immigrants, and 46% find it much harder.
- In one instance, a respondent agency noted that while it offered employment services to its clients, it does not assist undocumented clients with finding a job.
- Almost four-fifths (79%) of respondents state that demand for their services from non-citizens has increased over the last five years.

Observations about the state's (DHS) record in assisting Limited English Proficiency clients:

- Four-fifths of respondents state that it is harder for their LEP clients to complete the application process when they apply for benefits at a DHS office, and 47% of respondents say that it is much harder.
- Lack of understanding of the application process can lead to eligible families being denied benefits, according to several respondents.
- Almost two-thirds (63%) of respondents state that interpreters or bilingual staff are either usually (40%) or always (23%) available at DHS offices to assist LEP clients. About one-fourth (23%) of respondents state that interpreters or bilingual staff are there half the time, while 13% note that they are rarely available. The lack of consensus in response to this question (relative to other responses) suggests that availability of bilingual staff may vary widely from office to office, or region to region.
- Almost three-fourths (73%) of respondents state that they do NOT send an advocate with LEP clients to the DHS office. One respondent notes that this is because they do not have the resources to provide this assistance.
- Over four-fifths of respondents state that DHS forms and notices mailed to their clients are available in Spanish. One respondent states that while this is true of most notices, "crucial" documents often are not made available in Spanish.

In identifying difficulties encountered in helping their immigrant clients, providers seem to place equal blame on the difficulty of job placement and retention for immigrants and LEP clients as on the lack of available government assistance for them. This underscores the notion that restoring TANF and other services (especially employment services and work supports) to immigrants would support the goals of TANF—to help move low-income individuals off of government assistance and into work.

Domestic-Violence-Related Service Providers

Texas provides very limited cash assistance through its TANF program. Eligibility requirements are very stringent and only the most needy, or those in real crisis, have access to assistance. Among those who sometimes turn to the TANF program for help are women fleeing violent relationships. For women who may often leave with little more than the clothes on their backs, TANF and other support services can provide the crucial emergency help they need to put their lives back together.

Battered immigrant women are among those served by domestic violence programs around the state. While the Violence Against Women Act (VAWA) created new opportunities for battered immigrant women to petition for lawful permanent residency,[23] these women, like other legal immigrants, do not have access to TANF benefits and other federally funded programs if they arrived on or after August 22, 1996. As a result, many local agencies serving battered immigrants—VAWA petitioners and others—find themselves having to address these clients' needs with services that previously would have been provided through state and federal programs. To understand the impact of federal immigrant restrictions on this group of service providers the Center enlisted the help of the Texas Council on Family Violence (TCFV). TCFV staff sent a questionnaire to local member agencies of the council. The questions focused on issues related to assisting battered immigrant women in the wake of the immigrant benefit restrictions of 1996.

The findings of these surveys mirrored those of the other emergency services providers above. Of the local agencies responding to the survey, estimates of the percentage of clients who were immigrants ranged from less than 25% in Perryton (on the Oklahoma border) and Longview (east Texas) to more than 75% in Del Rio (on the Mexico border). Respondents from other border areas—Brownsville and El Paso—stated that immigrants made up about half of their client population.

When asked to compare the difficulty in finding services for their immigrant clients compared to others they serve, all respondents replied that it was "much harder." All of the respondents also noted that their immigrant clients needed more assistance and for longer durations. Most commonly, the difficulty in obtaining services for these clients resulted in longer shelter stays. Several respondents noted with dismay that another result of the limited access to TANF, Food Stamps and other support services was that battered immigrant women often returned to their violent partners because it was too hard to "make it on their own." When asked about the difficulty in obtaining employment related-services (ESL, education and training, transportation and child care), respondents also replied that it was "much harder." Similarly, the experience of trying to assist immigrant clients in accessing services through DHS was described as difficult at best. All of the agencies responding noted that the demand on their programs by battered immigrant women has increased markedly over the last five years.

[23] For more information on this issues see the Texas Council on Family Violence at: http://www.tcfv.org/ and the NOW Legal Defense and Education fund at: http://www.nowldef.org/.

Innovation Grants

In 1999, the Texas legislature appropriated $12 million in federal TANF funds to the Texas Department of Human Services for the "Barriers Initiative." The goal of this targeted funding was to support local initiatives designed to serve TANF clients with identified "barriers" to employment. About $5 million of these funds has been used to support an intensive pilot project in four sites called the "Employment Retention and Advancement" project. The balance of the funds has been distributed, through a competitive process, to existing community- and faith-based organizations to provide a variety of support services to TANF eligibles. Among the most recent round of fourteen grantees were four that included ESL classes in their proposed activities. Two of these organizations have explicit missions to serve immigrants.

Responses from the organizations, and conversations with the University of Texas evaluation team working with DHS, made it clear that the TANF restrictions in particular are severely limiting creative efforts to serve immigrants. The director of Catholic Charities of Dallas' Immigration Counseling Services, a recipient of one of the grants, expressed dismay at uncovering an unanticipated barrier in implementing her program. The project seeks merely to offer ESL and adult literacy classes to low-income immigrants in Fort Worth—no cash assistance or other material supports. Spanish-language media in the area agreed to run public service announcements about the classes, and the agency was overwhelmed with the response. Hundreds of individuals called inquiring about how to enroll.

As the intake staff ran through qualifying questions with applicants, they became aware that a significant proportion of those seeking help would not be eligible due to their immigration status and the restrictions on the use of TANF funds for immigrants. Staff began keeping records of those who appeared ineligible. While many had no formal immigration status or were "in process," a considerable number were legal immigrants and met all other criteria, but had not gained their Legal Permanent Resident status before August 22, 1996. Of 270 inquiries between December 6 and December 31, 2001, only seven were determined eligible. Fifty-two were LPRs but were not here before August 22, 1996.

Project evaluators visited another Innovation grantee serving immigrants in Elgin (a small community near Austin). They asked the staff about how the TANF funding restrictions had affected their efforts to meet project goals and serve their target population. The evaluators discovered that the program uses funds other than the TANF-funded grant to cover those ineligible due to TANF restrictions. The director said that if she did not have these other funds she would not have participated in the initiative. However, a negative side-effect was noted. The strict adherence to legal resident eligibility guidelines for the DHS grant has caused problems in a program that traditionally has served local populations on a "no questions asked" basis. She remarked that having to ask for documentation has scared away some potential clients and diminished the trust others feel for the agency.

These vignettes provide a glimpse into the ripple effect caused by the restrictions on immigrant benefit eligibility for TANF. Not only is cash assistance unavailable, but also affected are services funded with TANF dollars such as ESL and adult literacy. This raises a specific consideration for the TANF reauthorization debate. While full restoration of TANF assistance and services for immigrants should be the goal, even relaxing the restrictions on "services" apart

from "assistance" would have a beneficial effect on state and local efforts to serve their immigrant communities. Doing so would allow the state and their local agency partners to offer programs like those mentioned in the *Innovation Grants* section above—ESL and adult literacy classes, education and training, transportation assistance and an array of other work supports to help immigrants find work, build their skills and make their way in their new country.

Texas Workforce System

Since 1996, a complete overhaul of Texas' workforce system has paralleled the sweeping changes to welfare and public benefit policy. Nearly all employment-related services are now consolidated in a single state agency—the Texas Workforce Commission (TWC). Direct management of workforce development services has been devolved to 28 Local Workforce Development Boards (LWDBs) around the state. The boards manage an array of programs (delivered through private contractors), most notably Workforce Investment Act (WIA) programs, the federal Welfare-to-Work program, an employment program for TANF clients called Choices; the Food Stamp Employment and Training Program (FSET), all subsidized child care services and several other programs. The Choices program is funded with TANF dollars and provides TANF recipients with employment assistance. Immigrants' access to this program -1996" legal immigrants who are current TANF recipients. WIA services are more broadly available to immigrants, as described below.

The point of entry for nearly all of these services is a system of "One-Stop" centers managed by the LWDBs. These Centers are supposed to offer an "integrated" system for all those seeking employment assistance. For legal immigrants looking for work or training, or for those mandated to participate in the TANF work program, these centers are often a first stop. Under the WIA system, basic job search assistance, help with resumes, access to job banks and related services make up what is termed "core services." Actual education and training activities, from ESL classes to specific technical training courses, fall into a category known as "intensive services." Core services are open to anyone who walks into a One-Stop center. However, to gain access to "intensive services" an applicant must be legal immigrant or otherwise "work authorized." TANF-related employment services are restricted to TANF recipients and carry the same immigrant-related restrictions as TANF cash assistance.

As evidenced above, when it comes to serving immigrants, the array of programs managed by the local boards and offered through their "One-Stops" presents a challenge. Immigrant eligibility varies considerably by program and funding stream.[24] This can be very confusing both for program staff and for potential clients and can result in conflicting policies and procedures—even in a supposedly "integrated" system.

For the purposes of this paper the Center for Public Policy Priorities (CPPP) conducted phone interviews with local workforce board staff and their contractors to try and understand their polices related to serving immigrants and the process facing an immigrant seeking employment assistance. CPPP staff contacted eight local workforce boards and local workforce contractors in five of those regions. Additionally, we contacted several community-based organizations serving immigrants who had responded to our other survey efforts and asked for their perspective on

[24] For more detail on immigrant eligibility for employment programs see the National Immigration Law Center, and in particular their *Guide to Immigrant Eligibility for Federal Programs, 2001* - http://www.nilc.org/pubs/Guide_promo.htm.

immigrants' access to the local workforce development system. Finally, a data request was submitted to TWC for information on immigrant participants in the Choices and WIA programs and other data related to LEP and ESL issues. While the TWC data is limited, it is added to the discussion below.

General Themes:

- Some of those with a long history of working within the workforce system expressed concern that the move away from "categorical services" to an integrated "one-stop" approach may leave immigrants at a disadvantage. While the one-stop centers are indeed open to all who walk in the door, navigating the available services and obtaining access to education and training opportunities requires assertiveness and a certain knowledge base about what is available. Concern was expressed that those with more barriers to work or who approach government help with trepidation—such as immigrants—could be getting lost in the new system.
- The Workforce Investment Act contains specific requirements for local workforce boards to ensure that their contractors do not discriminate against immigrants. All the board staff queried about enforcement of this provision suggested that the required monitoring was taking place. However, contractors who were called were unable to recall specific oversight activities related to immigrant access and one respondent suggested there was "no
- TWC deserves credit for making it very clear that the core services offered by One-Stops are for everyone who walks in, regardless of citizenship. Every person interviewed mentioned this.

Interviews with LWDB Staff:

- There is universal recognition of the fact that core services are open to everyone.
- When asked about specific initiatives targeting immigrants, two boards mentioned the Migrant and Seasonal Farmworker Program that helped with funding for outreach to farmworkers. Funding for the program ended in December 2001.
- As mentioned above, board staff affirmed their activities to monitor non-discrimination compliance: some spoke of using their own staff, while others used contracted auditors. Though the questions were about the process for preventing discrimination against immigrants, the responses seemed to suggest more focus on compliance with the Americans with Disabilities Act.
- None of the boards seemed to be conducting any ongoing outreach activities to immigrants or to immigrant communities or to have specific policies and procedures for serving immigrants in their One-Stops.

Interviews with Workforce Contractors:

- As with board staff, there is a universal recognition of the fact that core services are open to everyone. However, when asked about the process an immigrant would undertake if seeking help at a One-Stop, most contractors report that the sign-in and registration forms include a request for a Social Security number (SSN). For those who do not have a SSN, the process seems to vary. Some contractors refer clients to the Social Security office to fill out an

application and/or provide a "pseudo number" until the individual receives a SSN. One of the contractors in Houston—Houston Works—specifically directs its staff not to request a SSN until absolutely necessary (i.e. if applying for WIA intensive services).

- Access to Spanish language materials and translation services seems to vary from area to area. It is not clear that the main intake form is universally available in Spanish, let alone other languages. A One-Stop center employee in El Paso was not aware that the form was even available in Spanish, and another in McAllen reported that TWC had only recently provided them with a translated version. In border areas and in the larger urban workforce areas, it appears that most materials are available in Spanish and English. However, it was remarked that the Spanish-language material tends to be more out of date, as translation takes time and effort. Some centers demand that providers who drop off pamphlets for distribution at the One-Stops provide them in both languages.
- Border centers have almost entirely bilingual staff while those interviewed elsewhere report having at least some bilingual staff representation.
- Workforce Centers in border regions generally offer their orientation sessions in both English and Spanish. One workforce center in Southwest Houston conducts orientations in English, Spanish and Vietnamese. Other non-border workforce centers tend to provide a one-on-one orientation to non-English speakers.
- With respect to immigrant-related policies, contractors do not report much direct board scrutiny. However, one center noted that the local board used "mystery shoppers" to come to the Centers to "check up on things."
- On a positive note, the One-Stop centers along the border appear to be reasonably popular because they do provide translation/interpretation services.

After interviewing local workforce boards and their contractors, the CPPP contacted community-based organizations serving immigrants in four workforce areas for their perspective on the local workforce system and its accessibility to their clients. The responses were somewhat surprising, but perhaps indicative of the larger challenges facing immigrants both in seeking work and accessing support services. The local CBOs that were contacted are largely unaware of the availability of workforce services for their clients. CPPP staff spoke with administrative and front-line staff at organizations throughout Texas who not only did not know that immigrants were eligible for services at workforce centers, but also did not even know that the one-stop centers existed. One administrator of a work program for immigrants expressed frustration at the opportunities his clients had missed because he was unaware of the services that might be available. Others have tried and failed to build a working relationship with their local workforce system. A representative of a legal service organization recounted attempts to make connections with her local workforce development board, only to give up in exasperation after her entreaties went unanswered.

In summary, interviews with those inside the workforce system and those serving immigrants in the same communities raise several concerns about immigrants' access to available employment services. There is clearly little interaction between these two sectors, and each would benefit from efforts to build partnerships to better serve the immigrant population. The availability of translated materials and interpreter services may be creating unnecessary, and easily removed,

barriers to services. Intake forms requiring Social Security numbers when they are not required for program eligibility can also be creating apprehension among potential immigrant clients. Inconsistent eligibility policies among various employment programs creates confusion and works against a truly "universal access" workforce system.

The general lack of information about immigrants' utilization of workforce services was another overarching theme from the interviews with workforce staff and CBOs. This was only reinforced when trying to obtain program participation data from TWC. We requested information for two programs: the Choices program and services under the Workforce Investment Act (WIA). Agency staff were very helpful, and it is clear that the databases include appropriate categories of information, but staff cautioned that reporting inconsistencies may limit the usefulness of the data. Program participation data for each workforce region would be very useful in understanding local access issues, but these statistics are not currently available. Table 8 presents selected characteristics of Choices participants for state fiscal year 2001.

Table 8

Choices Participants	
State Fiscal 2001 (September 2000-August 2001)	
Total CHOICES Participants	84,852
Choices Non-Citizen or Language Barrier Variables	
Refugee/Parolee	130
Resident Alien	1,267
Eligible Non-Citizen	32
Deficient Basic Literacy	263
English as a Second Language	204

SOURCE: Texas Workforce Commission, Performance Reporting

*The total is the unduplicated count across the variables

Because WIA has specific reporting requirements related to legal immigrants receiving intensive services, the data below (Table 9) may more accurately reflect the number of immigrants receiving these services. However, there may be no way to capture how many immigrants use only the core services in One-Stop Centers, as this information is not captured.

Table 9

Workforce Investment Act (WIA) Participants Grant 95, 96 & 97	
June 30, 2000 to July 1, 2001	
Total WIA Participants	72,472
WIA Non-Citizen or Language Barrier Variables	
Refugee/Parolee	127
Resident Alien	5,240
Eligible Non-Citizen	342
Deficient Basic Literacy	1,207
Total*	5,709

SOURCE: Texas Workforce Commission, Performance Reporting

*The total is the unduplicated count across the variables

Listening Sessions

As part of its work on reauthorization over the past year, the Center for Public Policy Priorities has hosted community briefing and listening sessions around the state. These meetings have focused on gaining community-level input (to date, in Houston, Lubbock, San Antonio and El Paso) into the Congressional reauthorization of TANF, Food Stamps, Transitional Medicaid and the Child Care and Development Block Grant. Additional meetings are scheduled for the Spring of 2002. Session attendees have included state legislators and agency staff, community-based and faith-based organizations serving low-income families, local advocates and even clients. The meeting format includes specific questions related to immigrants access to benefits. Responses to these questions have raised a number of issues related to the accessibility of federal programs to non-citizens and persons with limited English proficiency (LEP). A summary of comments received so far is provided below.

- Prenatal care access is a problem for post-1996 Qualified Alien (QA, or legal immigrant) women, due to the five-year bar on Medicaid AND Texas' failure to implement post-five-year bar coverage.
- Outreach and community education on "public charge" protections have not been adequate to overcome fears of negative immigration consequences from the use of Medicaid by QAs and their U.S.-citizen family members. Community-based organizations report that, despite improved printed materials and training efforts by the agency, some DHS staff continue to provide misinformation and to discourage parents from applying for benefits for their citizen children. CBOs recommend much more robust community education and outreach efforts.
- Immigration policy is not the only area in which community education is needed; homeless immigrant parents fear applying for benefits, believing that the Child Protective Services agency may remove their children if they reveal that they are homeless.

- out complex programs for their own staff

based" outreach and education is critical, emphasizing that sending unsolicited pamphlets is not effective.

Obtaining document
wish to apply for benefits for their citizen children.

In Houston, Lubbock and San Antonio, CBOs report that interpreter services are frequently bilingual staff who do not understand program rules (e.g., clerical staff recruited to interpret) often lack the vocabulary to translate accurately.

believe that immigra

- In the Lubbock area, CBOs report that interpreter and translation services are inadequate to accommodate significant numbers of German speaking Mennonite immigrants, despite the

- Health care providers need clear guidelines and instructions on how to claim payment for Emergency Medicaid services for their post 1996 legal immigrant clients (as well as for undocument

Conclusion

As with the research studies discussed in an earlier section, these surveys and interviews point to the same dual problem: real, and increased hardships among immigrant families who have lost benefits and continuing barriers to access to services among those still eligible. They also point squarely to the same solutions. Restoring federal benefits to immigrants not only will provide much needed assistance in times of crisis but opens the door to other services that can help them become employed so they can support themselves. Addressing access problems, like language barriers and fear of seeking government help, will ensure that eligible families get help when they need it and work supports so they won't in the future.

Policy Response

After the passage of PRWORA in 1996, debate continued about the controversial immigrant provisions of the law. Since then, Congress has restored benefits to certain children, elderly and disabled immigrants.[25] However, most immigrants who arrived after August 22, 1996, remain ineligible for basic assistance programs for at least five years after their entry into the United States. As the process of reauthorizing TANF continues this year, it is likely that immigrant access to federal programs will again be discussed and, perhaps, further policy change will result. The Senate Farm Bill, which includes reauthorization of the Food Stamp program, contains proposals to restore Food Stamps to more legal immigrants, and the Bush

[25] Supplemental Security Income (SSI) benefits have been restored to most elderly and disabled immigrants who were in the U.S. when the new federal law was enacted. Additionally, Food Stamp eligibility has been restored for most elderly and disabled immigrants, as well as for immigrant children already in the U.S. when the law passed.

Administration has recently proposed restoring Food Stamps for legal immigrants after they have lived in the U.S. for five years. As these deliberations move forward the current restrictions on TANF for immigrants need to be reconsidered.

In addition to past federal action and the prospect of more changes by Congress and the Administration in the coming year, states have had their own policy responses to the immigrant benefit restrictions. Under the 1996 federal law, states were given latitude to develop their own policies and programs to address the impact of federal changes on benefits to immigrants. Some of these choices came with the promise of federal financial participation, and others left states having to use their own revenues if they wished to continue to serve certain categories of immigrants. Other states with large immigrant populations have generally invested more state funds to maintain immigrants' access to support programs than has been the case in Texas.[26]

This section will re
immigrants have changed in Texas since 1996. While the restoration of benefits to immigrants in Texas has indeed been very limited, it is worth noting a number of unsuccessful legislative roposals that would have extended benefits. These and state- -level responses will also be

responsibilities with regard to serving their immigrant populations. States are able to decide

provide state and federally funded TANF and Medicaid to immigrants who arrived in the United States prior to August 22, 1996;

- -funded substitute benefits for immigrants losing their eligibility fo programs, including:
  - substitute food stamp benefits,
  2.
  3. a TANF- five-
  4. state- edicaid benefits for the same post-
- extend any state- federal programs;
- [27]

[26] Wendy Zimermann and Karen C. Tumlin, *Patchwork Policies: State Assistance for Immigrants under Welfare Reform*, 1999, Urban Institute, Assessing the New Federalism, Occasional Paper No. 24.
[27] Ibid.

already in the country before enactment of the new welfare law. However, the decision on

unresolved. States were required to explain in their original TANF State Plans how they would treat both the "before" and the "after" qualified immigrants. Texas' draft state plan in September 1996 indicated that the state would allow TANF eligibility by qualified immigrants after their -year bar was completed. But, at the last minute, the language was changed to make the choice; that is, the official document submitted stated that Texas would not allow the year bar is over. This policy decision was never discussed in the legislature, and as such, did not reflect any kind intent.

Texas (like all other states) was required to submit a TANF State Plan Renewal, in the Fall of 1999. A number of state legislators requested that the Texas Health and Human Services Plan language to make TANF available to qualified immigrants after their five year bar. In response, THHSC changed the language in the state plan to say that the state reserves the right to provide TANF to post August 22, 1996, qualified immigrants after t -year bar is satisfied, . The

such an

five-

While the Governor's office did spearhead an early, but very limited, restoration of Food Stamp benefits, other efforts have not been implemented, and the state given the issue any priority attention. Texas' low-level attention to immigrant access to benefits compares poorly with other states. A report by the Urban Institute provides an analysis of state responses to the 1996 immigrant benefit restrictions and offers some perspective on Texas' inaction.

The report, titled reviewed how states have responded to the new options and responsibilities afforded them PRWORA. Nineteen states are providing TANF during the five- funds.[28] This "TANF substitute program" is the most common, but Texas is not among the states exercising this option. Providing a substitute Food Stamp program is the next most common option, with seventeen states taking this action. Texas is among these states but its program is among the most restrictive, with only about 300 recipients currently. Texas limits its food assistance to the handful of elderly immigrants (age 65 and over) who were in the country prior to August 22, 1996, but did not have their benefits restored under the partial Food Stamp restorations enacted by Congress in 1998. Fourteen states provide Medicaid during the five-year bar, and five states provide substitute SSI benefits; Texas provides neither.[29] Eleven states have

[28] Wendy Zimermann and Karen C. Tumlin, *Patchwork Policies: State Assistance for Immigrants under Welfare Reform*, 1999, Urban Institute, Assessing the New Federalism, Occasional Paper No. 24.
[29] Ibid.

responded with naturalization initiatives (e.g., ESL classes, civics instruction, application assistance) to help immigrants become citizens and thus have equal access to public benefits when needed. Texas is not among them.

The report raises serious concerns about the growing inequity among states in their treatment of immigrants. The authors note that the devolution imbedded in the TANF law led to variations across states in services to both citizens and non-citizens, but that for immigrants this variation has been magnified. Under the new law immigrants lose access to federal benefits but can also be further restricted from both state and federal programs through state authority. Texas is used as a specific example of this problem:

> Take Texas and Massachusetts as examples. Before welfare reform, immigrants in Massachusetts generally had the same access to federal and state assistance as citizens. The same was true in Texas, but both groups—immigrants and —had more assistance available in Massachusetts than Texas, because Texas provides few state benefits to any group. Following welfare reform, many -enactment were barred from TANF and Medicaid for five years. In Massachusetts, those immigrants get state funded Food Stamps, TANF and Medicaid, and they retain access to state funded general assistance (GA) cash and health benefits if they need them. In get state- -funded cash or medical
>
> than immigrants in Massachusetts do, but they also have fewer state services to

tool and gives each state a "score" based on an evaluation of 12 separate categories of immigrant eligibility decisions. States were then grouped into four categories. Those states with the

are in category 4. Texas joins 11 other states in category 4—those with the least available services to immigrants.[30]

Summary of immigrant-related policy decisions and legislative action in Texas since 1996

As noted above, Texas has had a very limited state response to federal restrictions on immigrant eligibi
worth noting, in particular the provision of health insurance to immigrant children during their five year bar. The chart below summarizes immigrant- enacted in Texas since the passage of PRWORA. Also included is information about the State Immigrant Food

Attorney General with serious implications for health services to immigrants. There were a

[30] Wendy Zimermann and Karen C. Tumlin, *Patchwork Policies: State Assistance for Immigrants under Welfare Reform*, 1999, Urban Institute, Assessing the New Federalism, Occasional Paper No. 24.

number of legislative proposals that were not ultimately successful but do provide an indication of the concern some policymakers felt about immigrant access to benefits and services. A chart of these proposals can be found in Appendix C.

Legislation or initiative currently in effect	Summary of legislation or initiative	Year
Health insurance for legal immigrant children during five-year bar (HB 445)	This provision passed as part of Texas' law that established the Children's Health Insurance Program (CHIP). Legal-immigrant children receive state-funded CHIP benefits provided their families' income does not exceed 200% of the federal poverty level.	1999, 76th Legislature
State Immigrant Food Assistance Program (SIFAP)	SIFAP provided state-funded nutrition assistance to seniors and persons with disabilities who were in the country prior to August 22, 1996 and cut off from federal Food Stamp benefits. Most of the target population had their Food Stamps restored by the federal government shortly after SIFAP was established; currently, the program serves roughly 300 seniors who did not have their benefits restored.	1998, established by Governor Bush
In-state tuition for immigrants (HB 1403)	Allows immigrant children attending Texas colleges and universities to qualify for in-state tuition provided they graduated from a Texas high school or received their GED in Texas.	2001, 77th Legislature

Other policy initiatives that affect immigrants		
Attorney General opinion on health care for undocumented immigrants	State Attorney General John Cornyn issued an opinion stating that provisions of PRWORA make it illegal for the Harris County Hospital District (Houston) to subsidize certain non-emergency health care services to low-income uninsured residents who are undocumented residents. This opinion generated concern among other hospital districts about their liability in providing such care and led two small hospital districts to discontinue subsidizing certain services for undocumented residents. Most hospital districts decided to continue providing such care until Congress or the Texas legislature acts to clarify discrepancies between PRWORA and Texas state law regarding care for the medically indigent.	July 2001

Immigrants' Access to Benefits

For immigrants still eligible for public benefits or who have family members—such as citizen children—who are eligible, the first step they must take is applying for assistance. For many immigrants this process can either be an insurmountable hurdle or an open door. Here too, recent initiatives by the state have improved historically confusing forms and procedures. However, access for non-English speakers continues to be a problem and creates additional barriers for immigrants who are potential clients.

The Front Door

During the legislative interim year of 2000, state House and Senate committees began a far reaching effort to improve access to low-
Department of Human Services initiated a workgroup of advocates, legislative staff and state

Medicaid and Food Stamps. With the myriad changes made to these programs at both the federal and state levels since
confusing. With particular relevance to this discussion, the application did not provide clear

parents seeking benefits only for their citizen children. The application was also somewhat confusing about the requirements for providing a Social Security number. While the application roviding interpreter
assistance to those with limited English proficiency did not necessarily follow.

mation for immigrants)."[31] The

improved application form, specifically with regards to immigrants' access to benefits. The entire application is still provided in both English and Spanish. On the first page of general instructions is a section devoted to "Important Information for Immigrants," which states clearly that individuals can apply for benefits even if some members of their family are not eligible due to immigration status; that neither SSN or citizenship status information is required for non-applicant household members; that use of most benefits will not threaten immigration status; and, that refugees and asylees can use any benefits without hurting their chances for getting a green card or U.S. citizenship. The application also includes other direct messages to immigrant families; for example, reassuring them that DHS does not report SSNs to the INS and inquiring if they need any other immigrant or refugee services.[32]

In addition to these efforts, both Medicaid and SCHIP application and outreach materials now include reassuring information about "public charge" issues and confidentiality. However, lic charge" and confidentiality issues,
barriers remain. Questions about the financial liability of immigrant sponsors for properly received Medicaid benefits are unresolved. Also, parents who are undocumented immigrants can find the task of proving their income in order to enroll their U.S. citizen children daunting. Some

[31] From a DHS memo describing the Application Workgroup, May 15 - June 27, 2000.
[32] To download a copy of the DHS forms 1010 A & B go to: http://www.dhs.state.tx.us/Forms/Form1010.html.

immigration attorneys continue to discourage parents who hope to gain permanent resident status from enrolling their children.

State agency leadership and staff are to be commended for their focused efforts to address historical barriers to immigrants in the application process for public assistance. Education and outreach among immigrants about these improvements is still needed to reverse years of fear and confusion that have led many to avoid seeking assistance altogether. Unfortunately, ongoing staff reductions at DHS severely limit the agency's ability to conduct such efforts. Moreover, until federal policymakers actually restore more benefits to immigrants, and state policymakers take advantage of existing options, few resources will be available to those immigrants intrepid enough to apply.

¿Como se dice?

proficiency (LEP). Given the high frequency of LEP among the immigrant population, access to

ensure that many immigrant families in need can navigate the complicated process for receiving assistance.

(*Guevara v. Bost Villareal v. Bost*). Gulf Coast Legal Services filed suit in Houston in April formation and certification
materials to Food Stamp clients as required by federal law. Furthermore, the suit alleges that

for the six named plaintiffs, who are persons with limited English proficiency. A settlement

the settlement include improvements to the application form, provision of adequate interpreter serv
communications with clients (when needed). The second suit, as yet unresolved, was filed in March 2001 and contains similar complaints.

Language barriers to services
emergency services providers we surveyed (see *Front line Experiences* section above). Despite

DHS showed it scoring well among respondents (all of them current DHS clients – perhaps a crucial factor). In fact, Spanish-speaking clients rated DHS higher in almost every area when compared to English speakers. However, in a "Mystery Shopper" customer service evaluation

person), callers identified differences in levels of convenience and service offered to English speakers and Spanish speakers in the following areas:

- **omated systems:**

- **Telephone customer service representatives (CSRs):** again, Spanish speakers rated CSRs lower than English speakers and were put on hold for longer (3.1 versus 2.7 minutes) and transferred more frequently (2.9 versus 1.2 times).[33]

In a direct response to questions about current LEP services, DHS provided an overview of state and regional efforts, summarized below.

Presently, there are no standardized procedures across the regions for the provision of services to LEP persons. Regional offices and various local offices work together to develop procedures for meeting the "unique" needs of their service area. These procedures include the use of bilingual caseworkers, volunteer interpreter pools, and friends or family members.

In August 2000, the U.S. Department of Justice (DOJ) issued policy guidance on discrimination against persons with limited English proficiency. The purpose of these guidelines was to assist federal agencies and state and local agencies that administer federal funds in complying with Title VI of the Civil Rights Act of 1964 in providing services to LEP persons. At the heart of the DOJ's guidance is an explanation of Title VI's requirement that all recipients of federal funding take reasonable steps to ensure "meaningful" access to the information and services they provide. The following four factors are to be used in determining whether "reasonable" measures have been taken to fulfill the Title VI requirement: number or proportion of LEP individuals; frequency of contact with the program; nature and importance of the program; and resources available.

In response to the guidance, DHS contracted directly with the AT&T language line to assist bilingual caseworkers and volunteers with the interpretation needs of their clients. In June 2001, DHS reissued instructions to the regional offices regarding language line access codes and procedures.

Presently, DHS says that it is working on improvements that will standardized and enhance its current procedures in serving LEP clients. This project will result in standard operational procedures for the regions. The project will also recommend improvements in the area of worker training, contract language for DHS providers, monitoring of LEP service delivery and compliance with LEP requirements, and a new LEP procedures section in the DHS Administrative Handbook. It is also producing a standardized poster in 10 languages to inform clients of their right to an interpreter.

While these steps are encouraging, the ongoing experience of clients, advocates and service providers suggests that language barriers still exist and room for improvement remains.

Public Charge

One of the biggest concerns for immigrants who might need public services and benefits is whether the use of those services or benefits will jeopardize their efforts to gain legal status or become a U.S. citizen. Additionally, many citizen children and spouses of immigrants have

[33] Business Resources, "Customer Service Evaluation Report," Prepared for Texas Department of Human Services, February 6, 2001. http://www.dhs.state.tx.us/publications/MysteryShopper.pdf

avoided using benefits to which they are fully entitled because they feared the impact on their immigrant relatives. This fear stems from a concept based in historic INS policy that immigrants to the U.S. can be denied entry if they are found likely to rely on government benefits for their support—to become a "public charge." While this fear is largely unfounded, particularly for immigrants who already have LPR status, it is important to understand this issue. A full discussion can be found in Appendix D.

Implications and Recommendations

The five-year history of the TANF program and the law that created it faces significant analysis and review as Congress takes up the task of reauthorization. The challenge for federal and state policymakers, and to all who have been affected by the law, will be to ensure that the lessons learned result in a continuation of those elements that are succeeding and reconsideration of those that are not. Already, an emerging consensus is supporting the goal of building on existing achievements and extending the TANF program's goals beyond mere caseload reduction toward a reduction in poverty among the nation's low-income families. Achieving such a goal will require a number of adjustments to current TANF policies, but it will be impossible without directly addressing the immigrant-related provisions of the law.

Texas provides ample evidence of why this is true. Non-citizens—both legal and undocumented immigrants—make up 10% of the state's population. Twenty-two percent of these non-citizen residents live in poverty. A fourth of the children of immigrants—80% of whom are U.S. citizens—live in poverty and more than a third don't get enough to eat. Among all low-income children (under 200% of poverty), 29%—nearly 800,000 children—live in families with at least one non-citizen parent. Despite these high levels of need only 6,468 legal immigrants receive TANF assistance and 49,274 use Food Stamps, out of the 2 million non-citizens in Texas. These numbers have declined from pre-1996 levels of 19,907 (TANF) and 168,517 (Food Stamps). As a direct result of the federal restrictions on immigrants' access to public benefits, hardships among immigrant families have increased and the costs of serving needy immigrants has merely been shifted to already overwhelmed local service providers. Immigrants and their families have not only lost access to basic benefits they might need in times of crisis, but also to employment assistance, work supports and other services that could help them escape poverty.

Any meaningful efforts to combat poverty in Texas and to build on the successes of the TANF program must include a focus on the well-being of immigrants, their children and their families. To date, Texas' response to the federal changes and their impact on immigrants has been limited at best. As the state looks to its future, both immediate and long-term, none of its stated goals of improving education, job-opportunities, and economic development will be fully effective if they do not include specific initiatives targeting its immigrant population.

The good news is that TANF reauthorization offers opportunities for Texas, and the nation, to learn from the past five years and make policy adjustments that will include its vital and vibrant immigrant communities in the movement forward.

This paper has attempted to offer some of the lessons learned. Below are recommendations for state and federal policymakers.

Recommendations for federal policymakers

Restore immigrants' access to TANF and other federal benefits restricted by the 1996 federal welfare law. Retaining these restrictions is directly at odds with the stated goals of TANF and the missions of other low-income programs like Food Stamps and Medicaid. Legal immigrants pay taxes that support these programs yet are denied access to those same programs

in times of need. High levels of poverty among immigrant families and among the children of immigrants (many of them U.S. citizens) makes access to safety-net programs necessary and appropriate. Their needs do not vanish because federal funds are unavailable; the burden of assisting them only shifts to local communities. Deprived of access to the services that could help them achieve self sufficiency, these families add to the increased demand for the limited resources of local emergency food and shelter providers. Work requirements and time limits already restrict the utilization of TANF by all clients, there is no need to continue the separate and unfair restrictions on the few immigrants who might utilize these benefits.

Specific provisions for immigrants who are victims of domestic violence must be considered if full restoration of immigrants access to federal programs does not occur. If TANF, Food Stamps, Medicaid and other programs retain some restrictions on immigrant eligibility, specific waivers of the restrictions—the five year bar in particular—should be granted to immigrants who are victims of domestic violence and need safety-net services to weather their crisis and get back on their feet. The current imposition of the five year bar on VAWA petitioners creates a "catch-22" that deprives families fleeing violence of access to the basic supports they need.

Consider providing immigrant access to TANF-funded "services" as opposed to full restorations do not occur. TANF regulations currently contain a differentiation between the concept of assistance—cash and cash-like benefits—and services, such as employment assistance, ESL and adult literacy classes, transportation, work supports, etc. In states like Texas with low cash benefits,[34] the other types of services that potentially come with TANF eligibility can be just as valuable, if not more so. As research for this paper clearly illustrates, TANF-funded services for legal immigrants—separate from cash assistance—could foster a number of creative efforts to assist legal immigrants with the skills and supports they need to become employed or improve their skills and work opportunities.

Align the immigrant eligibility guidelines for workforce services. Currently, employment services under the Workforce Investment Act (job search assistance, education and training, work supports, etc.) are open to all legal immigrants. However, similar employment services paid for with TANF dollars are not. Conflicting policies such as these make the goal of universal access to workforce services through the new system of one-stop centers difficult to achieve. All employment assistance programs should be open to legal immigrants, and aligning eligibility policies to make this happen should be a priority. Restoring TANF eligibility to legal immigrants is needed to make seamless service provision possible, and will support immigrants' efforts to work and support themselves.

Exempt TANF (non-cash) services from sponsor deeming rules, and clarify sponsor liability issues. The federal welfare and immigration laws of 1996 created a new level of financial responsibility for U.S. citizens and lawful permanent residents who "sponsor" the immigration of a family member. The current "deeming" of a sponsor's income to be available to the immigrant results in denying recent immigrants not only access to cash assistance, but also access to services like English language instruction, employment assistance, adult literacy classes, transportation, work supports, and job training. These TANF services (as distinguished from cash assistance and cash-like benefits) should be exempted from deeming.

[34] The maximum TANF cash benefit for a family of three in Texas is $208 per month.

Unanswered questions about sponsor liability for the costs of public benefits have resulted in income-eligible immigrants being unwilling to access care. Sponsors may, through disability or loss of their own employment, find their incomes diminished to the point where they and/or their sponsored immigrant family member may qualify for a public benefit (i.e., even after the sponsors' income deemed available to the immigrant). Also, a sponsored immigrant may qualify for a benefit without any loss of income by the sponsor, because certain benefits have income eligibility thresholds that are higher than the minimum 125% of federal poverty income (FPL) required of sponsors: Food Stamps (130% FPL), Medicaid maternity coverage (185% FPL in Texas), and the State Children's Health Insurance Program (200% FPL in Texas). Sponsor liability should be clarified to allow sponsored immigrants who qualify for benefits even after deeming of the sponsor's income to access Medicaid, Food Stamps or CHIP without creating a debt for the sponsor, in circumstances where the sponsor has not abandoned the sponsored immigrant.

Expand services to those with limited English proficiency, make ESL services a countable work activity. Given the significant numbers of immigrants with language barriers, ESL and literacy classes will be a critical component of any efforts to help immigrants become U.S. citizens and to support themselves and their families. All workforce programs should expand efforts in this area and TANF rules should be changed to explicitly allow ESL as a countable work activity. The U.S. Departments of Labor and Health and Human Services should work together to develop and make available "best practice" materials and curricula on helping those with language barriers become employed and improve their work skills.

Align immigrant eligibility policies among all child care programs. Child care can be the most crucial support in helping low-income families work and escape poverty. Eligibility for services under the federal Child Care and Development Fund (CCDF) are based on the immigration-status of the child. This clear guidance is lacking in the use of TANF funds for child care, with many states basing eligibility for child care services on the immigration status of the parent. Immigrant eligibility for child care paid for with TANF dollars should be the same as under the CCDF program.

Improve state reporting on LEP persons, on ESL services and on immigrants' participation in services. Available data on the extent of language barriers among workforce clients and immigrants in particular is limited at best. Because ESL is not an explicitly defined work activity under TANF or other employment programs, gathering information on these programs and their utilization is equally problematic. Knowledge about these issues is essential, particularly in Texas, if immigrants and others with language barriers are to be successfully assisted in preparing for and obtaining gainful employment. The federal government should require better reporting on these issues.

Recommendations for State Policymakers

Encourage Congress and the Administration to restore federal public benefits (TANF, Medicaid, Food Stamps, and other programs) to legal immigrants that were restricted under the 1996 federal law. During TANF reauthorization Congress and the administration will be looking to the states for guidance. Governors, state legislators and other state policymakers can play a role in shaping the debate but they must be actively engaged. Federal policymakers need to hear from states about what has and has not worked and how low-income populations have been affected by the 1996 welfare law. If the particular immigrant-related provisions are to be reviewed and modified, states like Texas with large immigrant populations need weigh in. Texas' Congressional delegation needs to lead the fight for immigrant benefit restrictions and should be supported by state lawmakers. The federal restrictions have shifted significant cost burdens for meeting the needs of immigrants to state and local services just as the economic downturn adds pressure to an already tight state budget. Restoration of federal programs will be a timely, and needed, fiscal response to state budget pressures.

If the restoration of TANF to all legal immigrants is limited to TANF-funded services and not cash assistance, urge federal policymakers to align those policies with other work support programs. One option under discussion in Washington is a separate treatment of TANF cash assistance from other TANF funded services and work supports – such as child care, transportation, ESL classes, etc., for the purposes of considering immigrant eligibility. As noted in the paper, easing access to TANF-funded services would provide resources to help immigrants become employed and support their families. Moreover, differences in eligibility between the TANF-funded Choices program and other programs managed by Texas' local workforce boards (WIA, child care, etc.) create confusion and hinder efforts to build an integrated workforce development system.

Immigrant benefit restorations may come in the form of "state-options." State leaders and policymakers should publicly commit to taking advantage of any options to use federal funds to provide services to legal immigrants. Texas has not yet opted to provide TANF and Medicaid to legal immigrants who have exhausted their five-year bar on receipt of these benefits. This existing state option under current federal law remains in limbo because key state leaders have remained silent and neglected to give guidance to other state lawmakers and state agency leadership. Congress needs to hear from states about their intent to take advantage of federal options if they are to be offered under a revamped TANF law.

Regardless of the whether new state options are part of TANF reauthorization, Texas should act now to provide TANF and Medicaid to its post five-year bar immigrants. There is no reason to delay in taking advantage of this federal option, particularly as low-income communities feel the affects of a slowing economy and local service agencies and medical providers struggle to provide services that could be supported with federal dollars.

Take advantage of other state options if federal restorations are not forthcoming. Even if the federal government does not restore TANF to legal immigrants other state-options exist to serve these clients. States can use their state TANF Maintenance of Effort (MOE) funds to serve legal immigrants otherwise barred from federally funded services. Currently Texas uses TANF

MOE funds to serve its two-parent TANF families. This same mechanism could be used to fund assistance or services to legal immigrants. One possibility would be to extend the current TANF two-parent program to two-parent, legal immigrant families.

Build on recent efforts to improve access to services to Limited English Proficient (LEP) clients. DHS, TWC and other state agencies need to continue their efforts to improve access to clients with language and literacy barriers. This should include expanded translation services, broader availability of multiple language materials and linkages to English as a Second Language (ESL) classes. State agencies could provide direct access to ESL and literacy classes for their clients or offer referrals to other community programs. The Texas Workforce Commission (TWC) should share information about ESL classes offered through their system with all other local state agency offices. All clients with identified language barriers should receive information about available ESL classes. Expanding these efforts could be supported by shifting TANF funds from the Texas Education Agency's Adult Education program to TWC to support targeted adult literacy and ESL services to immigrants and others with limited English proficiency.

State agencies should develop specific outreach efforts to the immigrant community to improve access to needed programs. The disproportionate decline in utilization of TANF, Food Stamps and other programs among immigrants and their families demands a proactive response from state agencies whose mission is to serve low-income Texans. While improvements to the application process and to public education efforts have been made, more intensive efforts are needed. As some of the local providers interviewed for this paper remarked, sending out flyers is not adequate; face-to-face outreach is required. The Health and Human Services Commission (HHSC) should coordinate a cross agency effort to develop targeted outreach strategies that get workers out into immigrant communities to educate them on the benefits for which they and their children are eligible. Out-stationed workers, partnerships with immigrant serving agencies, and other innovative strategies should be employed. One domestic violence shelter in El Paso reported that access to benefits has improved markedly since DHS has been sending a worker to their shelter once a week to assists clients in applying for benefits. Building on such examples can help reverse recent trends, get assistance to those who need it, and help alleviate the fear many immigrants have of approaching government agencies for help.

The Texas Workforce Commission (TWC) should develop linkages to the immigrant community and expand ESL services. One-Stops may be technically open to anyone but this appears largely unknown among the immigrant service providers interviewed by the Center. Both TWC and these local agencies are missing opportunities to help immigrants find work, improve their jobs skills and advance in the workplace. TWC could develop specific outreach materials for immigrants and the agencies that serve them. TWC staff could even offer presentations about available employment services at those agencies serving immigrants. Opportunities also abound for better coordination with local providers of ESL classes to help link them to innovative work-place oriented ESL curriculum, and their clients to work opportunities. Local workforce boards should also seek ways to assist immigrants in documenting their work history—a requirement they face when applying for some federal programs.

Local Workforce Development Boards (LWDBs) should ensure that intake forms are available in Spanish and other languages when needed and that Social Security numbers (SSNs) are not required to sign in for core services at One-Stop centers. It is unclear if the main intake forms used at One-Stop centers are universally available in Spanish or if procedures for translation assistance are consistent across workforce board areas. The Texas Workforce Commission should review these issues and assist LWDBs with developing appropriate materials and protocols. Social Security numbers should not be required on sign-in sheets used in One-Stops for those accessing only core services. SSNs should be requested only when needed to determine eligibility for specific programs. Clear guidance about which programs need a SSN and which do not should be readily available, in English and Spanish, to all clients. Current practices may be creating inadvertent barriers to immigrants' utilization of workforce services and should be modified.

Texas should fund an aggressive effort to provide naturalization assistance to immigrants. A glaring gap in Texas' services to immigrants is any coordinated effort to help them become U.S. citizens. A number of states have invested in these efforts in the wake of the benefit restrictions imposed in 1996. Such an effort in Texas could include outreach and education efforts, English and civics classes, assistance in preparing and applying for citizenship, and even assistance with fees and costs related to the naturalization process. These efforts could be spearheaded by the state but implemented in partnerships with community organizations. Even a modestly funded program could make a big difference in Texas and help thousands of immigrants become full, participating members of their new country.

Appendix A

Terms used to identify groups of immigrants in this document.

Qualified and Not Qualified immigrants

In this document, the term, “legal immigrant” is used to refer to “qualified aliens” under PRWORA. The term “undocumented immigrant” is used to refer to all immigrants who are not lawfully present, which includes both persons who entered the U.S. without permission, and those who entered lawfully, but remained here after the period of their visa had expired.

Before PRWORA, most legally present immigrants were treated the same as U.S. citizens for purposes of federal benefit eligibility. PRWORA created new terms, "qualified alien", and "not qualified alien." These terms do not have meaning in immigration law, but are used to group immigrants according to their eligibility for various kinds of public benefits.

The group labeled as "not qualified" now includes both undocumented persons and several groups of legally present immigrants, generally persons who have some type of temporary or transitional immigration status. It is important to note that most types of employment authorization or “work visas” fall into this “not qualified” category.

The “qualified” grouping includes lawful permanent residents (LPRs, colloquially known as “green card holders,” as well as refugees and persons granted asylum (asylees) and several other less-known categories of persons granted residence in the U.S. for humanitarian reasons. Despite connotation suggested by the term "qualified," PRWORA considerably reduced eligibility of qualified immigrants for benefits. The PRWORA benefits cuts created exceptions for time-limited use of federal benefits by refugees, asylees, and certain other humanitarian-purpose immigrants.

Major Classifications of Immigration Status for Benefit Eligibility under PRWORA

Qualified	Not Qualified*
Lawful (legal) permanent residents	Undocumented and Out-of-status persons (not lawfully present)
Refugees, Asylees	*Legally present not qualified:*
Withholding of Deportation	Employment visas (including agricultural workers)
Granted Conditional Entry	Temporary protected status
Parolees (immigration law term, unrelated to criminal justice)	Lawful Temporary Residents
Domestic Violence VAWA petitioners	Family Unity Status
	Certain persons subject to voluntary departure
	Certain persons subject to stays, suspensions of deportation
	Non-immigrants: (e.g., tourists, students)
	*List is not exhaustive

Appendix B

Emergency Services Provider Survey
"Serving the Immigrant Population"

Undocumented immigrants and most legal immigrants who came to the U.S. after August 22, 1996, cannot get Food Stamps, Medicaid or TANF (cash assistance). We are trying to get a sense of how big a problem this is for providers of emergency assistance, such as food, rental assistance, health care, etc. Please answer the questions that apply to your organization and the type of services you provide.

1. Can you give a rough estimate of what percentage of your clients are immigrants or not U.S. citizens? N=37

Less than 25%	About half	About 75%	More than 75%
73%	16%	3%	5%

2. Compared with clients who are U.S. citizens, how much harder is it to find services or funding for your immigrant clients? (For example, housing, financial assistance, utility assistance, food, GED, ESL, job training, child care, etc.) N=37

About the same	A little harder	Much harder
19%	27%	54%

3. Do your clients with immigration issues need more of your direct services than U.S. citizen clients because they are denied access to <u>other</u> government programs and benefits? N=36

Yes	No
64%	36%

If "Yes", please give examples (i.e., require longer shelter stays, more direct emergency cash or food aid, etc.)

Examples included direct services such as food (no access to Food Stamps), health care, housing, holiday assistance, employment assistance, translation services, legal referrals, and transportation. Several respondents noted that their immigrant clients required more direct services, such as more frequent food aid and longer shelter stays, because jobs were harder to find for immigrants. One respondent noted a "revolving door" scenario with immigrant clients: their counselors spend more time with immigrant clients because they return more often for help and because there are so few programs out there to help them.

4. If you routinely help clients to access programs to help them enter the workforce (i.e., ESL classes, job training, child care, transportation), how much harder is it to find

services or funding for clients who are undocumented or who already have a green card? N=26

About the same	A little harder	Much harder
15%	38%	46%

5. When your immigrant clients try to apply for benefits at DHS (for example, for their children who are U.S. citizens), how easy is it for those with Limited English Proficiency to complete the application process? N=30

About the same	A little harder	Much harder
20%	47%	33%

One respondent noted that language, not citizenship is the problem. For example, LEP clients cannot understand the food stamp application process and are often denied even when eligible.

6. Are interpreters or bilingual staff easily available at the DHS office? N=30

Always	Usually (75%+)	Half the time	Rarely (>25%)	Never
23%	40%	23%	13%	

7. When you have a client with Limited English Proficiency, do you generally send an advocate with the client to the DHS office to avoid language access problems? N=30

Yes	No
27%	73%

One respondent noted that they simply did not have the resources to send advocates with clients all the time.

8. Are DHS forms and notices mailed to your clients generally made available in Spanish? N=32

Yes	No
84%	16%

9. Do you have special problems with program access for clients who speak only a language other than Spanish? N=33

Yes	No
40%	61%

10. Has demand for your services by clients who are not U.S. citizens increased over the last 5 years? N=33

Yes	No
79%	21%

11. What other special challenges do you face when looking for funding to serve your legal immigrant and undocumented immigrant clients?

Responses included: helping clients become citizens; assisting migrant families; helping LEP clients; providing interpreters for job interviews; lack of funding; encountering bias against "those people"; fear of deportation; limited access even when programs are available (e.g., can't get to job because can't get driver's license, OR don't have proper ID or SSN to complete applications, get job); and limited jobs available for immigrants/LEP clients.

Appendix C

Unsuccessful state proposals to address the impact of federal immigrant benefit restrictions

Proposed Legislation	Summary of proposal	Session/Year
TANF for legal immigrants after five-year bar (HB 2395)	Would have allowed Texas to provide federally funded TANF cash assistance to legal immigrants who came to the U.S. after August 1996, and whose sponsors were no longer providing financial support, such as victims of domestic violence or immigrants whose sponsors have died or become disabled.	2001, 77th Legislature
Medicaid for legal immigrants after five-year bar (HB 1422)	Would have allowed otherwise-eligible legal immigrants who entered the U.S. on or after August 22, 1996, and who have completed a five-year federal bar on use of Medicaid, to enroll in Medicaid.	2001, 77th Legislature (passed as part of SB 1156 omnibus Medicaid bill, vetoed by Governor Perry)
Pregnancy Medicaid benefits for legal immigrants during five-year bar (HB 1422)	Would have directed the Texas Medicaid program to exercise any federal law option to allow otherwise-eligible pregnant legal immigrants who entered the U.S. on or after August 22, 1996 to access Medicaid Maternity benefits, without imposing a five-year waiting period.	2001, 77th Legislature (passed as part of SB 1156 omnibus Medicaid bill, vetoed by Governor Perry)
Social Security numbers and driver's licenses (HB 396)	Would have allowed non-U.S. citizens to get a Texas driver's license with specified forms of identification.	2001 (passed by 77th Legislature, vetoed by Governor Perry)
Higher Food Stamp benefit for children in "mixed" immigration status families (HB 1959)	Would have increased Food Stamp benefits for children of legal immigrant parents by exercising the state option to disregard the income of the ineligible parent when calculating the allotment for the eligible members of the family.	2001, 77th Legislature
Food assistance for legal immigrants (HB 1218)	Would have expanded SIFAP to provide food benefits to legal immigrant children and persons with disabilities who are not eligible for Food Stamps because they arrived in the United States after the passage of the welfare act (August 22, 1996), and to immigrant seniors aged 60 and older who were legally present before the passage of the Act, but who had not already turned 65 by that date.	1997, 1999, 2001 (Versions of this legislation have been introduced during the last three sessions; all have failed to pass.)
Limited benefits to legal immigrants fleeing domestic violence during five-year bar (HB 3210)	Would have created a small pool of grant funds for domestic violence agencies and refugee assistance providers to use to provide limited benefits to legal immigrants fleeing domestic violence, who entered the U.S. on or after August 22, 1996.	2001, 77th Legislature

Appendix D

Immigrant Access to Benefits—Public Charge

One of the biggest concerns for immigrants who might need public services and benefits is whether the use of those services or benefits will jeopardize their efforts to gain legal status or become a U.S. citizen. Additionally, many citizen children and spouses of immigrants have avoided using benefits to which they are fully entitled because they feared the impact on their immigrant relatives. This fear stems from a concept based in historic INS policy that immigrants to the U.S. can be denied entry if they are found likely to rely on government benefits for their support—to become a "public charge." It is important to remember the following issues related to public charge:

- **The public charge test is principally a concern for persons who are attempting to get a visa to enter the U.S. for legal permanent residence ("green card" status).** Applicants for immigration to the U.S. can be denied entry if they are found likely to rely on government for their support.
- **Legal Permanent Residents (LPRs or Green Card Holders) are rarely subject to a public charge test.** Generally, people who already have legal permanent resident (LPR) status are not subject to a public charge test. Under extremely rare circumstances, a legal permanent resident could be deportable as a public charge but only after six specific circumstances are all found to be true.
- **There is no public charge test for legal immigrants becoming citizens.** When a legal permanent resident applies for citizenship, there is NO public charge test. The use of public benefits could negatively affect the immigrant's ability to become a citizen only if those benefits were fraudulently received. The immigrant would then be denied citizenship based on failure to establish "good moral character." [35]

The "public charge" policy has always been the subject of considerable fear, misinformation and confusion among immigrants, which was only exacerbated by the immigrant provisions of the federal welfare law. In looking at the impact of the immigrant benefit restrictions, this "fear factor" is often pointed to as a component of the significant decline in immigrants' utilization of benefits for which they or their family members are, in fact, still eligible.

Fortunately, the Immigration and Naturalization Service (INS) published new and clarifying guidance on the issue of public charge in 1999. This guidance should have alleviated most of the concerns of immigrants related to the use of public benefits and their immigration and naturalization status.[36] However, getting this information to immigrants as well as to front-line caseworkers and service providers has been a challenge.

[35] For more detailed information about public charge see the CPPP policy page at http://www.cppp.org/products/policypages/91-110/91-110html/PP91.html or the National Immigration Law Center at http://www.nilc.org/

[36] See the same websites above for information on the INS Public Charge guidance.

State agencies in Texas are to be commended for their efforts to get the word out about the public charge guidance to clear up misinformation in the immigrant community and encourage access to available services. In January 2000, the Center for Public Policy Priorities was asked to help develop training materials on "Public Charge" policies for state agency caseworkers. Staff of the Center were then invited to conduct the initial mandatory training on immigrant eligibility and public charge policy for all state health and human services agencies, and provided more than a dozen training sessions for state agencies over the year.

CPPP assisted DHS in developing excellent training materials on the application rights of non-citizens, as well as on the Public Charge guidance of May 1999. Despite these good efforts, staffing and funding limits have kept the training materials from translating into consistent understanding across the front lines. Chronic DHS under-staffing has resulted in much training being limited to "self-study," which is apparently of limited efficacy. A more active form of training than self-study is probably needed. While DHS agency officials clearly understand the proper policy today, reports from the field suggest that many front-line eligibility workers may not truly understand, communicate and implement correct policies. Fortunately, the newly revised application form (combined Medicaid, TANF, and Food Stamp application) specifically states that non-applicants need not provide a Social Security number (SSN) and offers clear information about public charge, so state workers should now be better informed about correct policy despite problems with training.

Additionally, the Center has created Texas-specific client information flyers related to Public Charge and immigrant access to benefits. These flyers have been distributed to other organizations and made available for downloading from the CPPP website. The Center has offered numerous trainings statewide to organizations regarding immigrant eligibility for public benefits.