



SUPPORTING IMMIGRANT FAMILIES AND THEIR CHILDREN

Perspectives from Bay Area Public Health Departments and Behavioral Health Programs

Local Health Departments and Funders supporting and protecting the health of documented and undocumented immigrants and their families during these distressing times will provide direct benefits to public health and all of society. They can make the biggest impact by ensuring immigrant families are not deterred from enrolling in critical health services, building the capacity of staff and systems to provide trauma informed, culturally and linguistically appropriate services, increasing access to legal support and representation, advocating for policies at the local and state level protecting immigrants, and delivering welcoming communications to change the narrative.

THE NEED

The current narrative and policy of exclusion of immigrants living in the U.S. has increased their anxiety, fear, and vulnerability [1]. As a result, fewer immigrants are accessing public health programs and services such as the Women and Infant Children (WIC) Program and available medical services. Reduced access and disenrollment from critical health services and supports leads to worse health outcomes, maternal and infant health, health coverage, and educational outcomes; mental health distress; poverty; hunger; unemployment; and homelessness [2], [3].

The most recent data from the Public Policy Institute of California shows that more than 30% of the Bay Area's population is foreign-born; of those almost half are naturalized citizens, and another 26% have some legal status (including green cards and visas) [4]. That leaves an estimated 240,000 undocumented residents living in the metropolitan areas of San Francisco, Oakland, and Hayward, and an estimated 120,000 in the metropolitan areas of San Jose, Sunnyvale, and Santa Clara [5]. Data collected via 2017 surveys and interviews by BARHII and its member public health departments suggests that most of our immigrant population is feeling newly vulnerable, even the more than 50% who have legal status.

Preliminary data from BARHII's Rapid Response Survey (May 2017) shows that since November of 2016, agencies have heard from clients that:

- 33%** are afraid to leave the house or neighborhood
- 43%** have family members at risk of detention and deportation
- 55%** are experiencing increased fear or other mental health impacts
- 58%** are afraid to sign up for public programs and services

"A client called to request cancellation of CalFresh benefits for her children, stating she feared receiving benefits would create legal issues for her in the future which could result in her deportation. I informed the client her information is not shared. However, the client insisted we cancel her CalFresh benefits." – BARHII interview

One of the major findings from BARHII's Summer 2018 qualitative study on the impacts of the Northbay Fires on marginalized groups is that immigration fears are a major barrier to recovery. Service providers and County employees in Napa and Sonoma repeatedly highlighted immigration fears and ICE raids as a major barrier for immigrant community to seek needed services, shelter, or aid. Immigrant families felt particularly fearful that accessing services and support and reporting property damage and losses caused by the fire would draw negative attention from authorities. Immigrant families were hesitant to provide personal information to service providers during the intake process at the Local Assistance Centers or shelter because of fear that their information would be shared with immigration authorities.

A Summary of Interviews with Bay Area Behavioral Health Services Staff

BACKGROUND

In April and May of 2018 BARHII, conducted interviews with seven behavioral health leaders from Alameda, Marin, Napa, San Francisco, Solano, Santa Clara, and Contra Costa Counties. The interviews focused on identifying existing and emerging needs of immigrant communities, activities that county Behavioral Health Departments have taken to address these needs, and gathering ideas about how private funding could address unmet needs. Below is a summary of the themes that emerged from these conversations.

REGIONAL NEEDS

Many pressing issues pre-date current shifts in immigration policy

Immigrants, especially the undocumented, experience many additional barriers to access mental health services. Lack of insurance, stigma around mental health issues, limited resources and capacity of providers to meet the local demand for services, and the mobility of some immigrant families around the region, particularly farmworkers, interfere with a coordinated continuum of care to address people's health (and behavioral health) needs.

The intensifying climate around immigration has exacerbated existing issues and, in many cases, has led to a decrease in service utilization

People are frightened about being targeted by ICE or being deported, and are becoming more hesitant about sharing their personal information to enroll in public programs. Even if Behavioral Health does not ask about immigration status, there is still misinformation becoming a barrier for people to seek services, which can worsen mental health if people do not get the treatment and support they need in a timely manner. The fear of an encounter with ICE is leading many people to isolate themselves and minimize trips from home to grocery stores, clinics, etc. There is also misinformation and uncertainty causing fear and confusion about what types of activities and places are safe or not. In some cases, this chronic fear and anxiety is leading to an increased usage of behavioral health services, having a deep impact on the wellbeing of providers via vicarious trauma. The intensifying climate around immigration has shifted the focus from addressing issues people have been working on like their relationship, housing, etc. to mere anxiety and concerns about immigration issues.

Language and cultural barriers prevent county staff and service providers from reaching populations in need of mental health care and access to legal services and deportation defense

There is a lack of diversity amongst mental health providers and not enough providers that reflect the populations they serve. Providers need training and skills to understand the history, context, and role and impact of public systems on communities, as well as their own implicit bias. Providers may misinterpret or overlook needs of populations they serve, especially when they come from a different cultural context than their clients. There is an urgency to provide deportation defense since, often, breadwinners get detained or deported, leaving behind families with unmet needs. In some counties, non-county organizations are taking the lead on providing legal defense services.

REGIONAL RESPONSES TO EXISTING AND EMERGING NEEDS OF IMMIGRANT COMMUNITIES

Infrastructure and Contracts, Training for County Staff, and Welcoming Communications

Some counties have put in place infrastructure and contracts to support immigrant families and delivered training for county staff and clinic managers about serving all residents regardless of immigration status, how to talk with clients concerned about sharing their information, and about what to do in the case that ICE shows up to clinics. Others strengthened and expanded existing efforts within their counties to address the impact of these immigration related policies. Counties have also taken the leadership to communicate welcoming messages and clarify that providers are not working with ICE. They are utilizing outreach workers to have a presence in the community and educate residents about available services, emphasizing that county services are available regardless of immigration status.

Some of the Activities that Counties Have Engaged in to Address Emerging Needs:

Infrastructure and Contracts to Support Immigrant Families

- Alameda County used the information from the Behavioral Health Care Services town hall meetings to develop an RFP, through which \$3.7 million in awards for contracts are being made. These grants will help the department learn about how to address needs and existing gaps in services.
- Santa Clara County has an Office of Immigrant Relations and has allocated \$3.5 million towards legal services and deportation defense for immigrants. The office funds organizations to provide outreach and education about KYR, resources available to immigrant communities.
- Solano County has funded organizations to provide deportation defense and to provide for families left behind when someone is detained or deported.
- San Mateo County's Office of Diversity and Equity was asked to lead overall efforts to address immigration concerns, especially around communication and outreach, and hosted town hall meetings as well.

Trainings for Staff

- Marin County provided training to staff on talking with clients about immigration, race, and racism in the current political climate.
- Santa Clara County trains eligibility workers on any changes related to immigration (e.g. Executive Orders, DACA, etc.) and to provide information about resources that could be

shared with clients. The county uses this training and a task force meeting with departments as an opportunity to stay in communication with the issues that departments are facing and what staff is seeing in communities. The County will train staff on changes to public charge when they have clearer information. The County also provides trainings for behavioral health staff to offer support and resources for their own mental health and self-care, as well as how to address potential I-9 audits.

Welcoming Communications and Outreach to Immigrant Families:

- Alameda County Behavioral Health Care Services held town hall meetings to reach out to underserved populations and understand their mental health needs. Feedback from these forums highlighted the need for culturally responsive services and the need to address stigma around mental health.
- Napa County has done extensive community outreach and messaging in response to the fires to let residents know that county services are available to all regardless of immigration status and to encourage the use of mental health and other county services.
- San Francisco County has an Office of Civic Engagement and Immigrant Affairs and was a leader in creating messaging materials to welcome all residents to the county's services and address fear in the community.
- Santa Clara County launched a media campaign to let immigrants know they are welcome. The county has also been involved in a few lawsuits challenging policies that target immigrant communities. The county also published a brochure looking at the impact of deportations on mental health and resources in county, and what people should look for in terms of signs of stress, and the impacts of deportation, and fear of deportation. The county has a public line in their office that anyone can call. They also have toolkits and work with schools and legal service providers to help families create family emergency plans.
- Solano County has outreach staff that arrange presentations for community members around Know Your Rights, DACA, and to answer questions about accessing county services. They have also advocated for the needs of immigrant communities in schools (which is an important place to reach immigrants seeking services).
- Marin and Solano Counties partner with schools to better understand if and how children are being impacted and ensure that resources for immigrant communities are made available.
- San Mateo County has developed multilingual welcoming messages and posters that were made available to county staff and community-based organizations.

HOW COULD HEALTH DEPARTMENTS MAKE THE BIGGEST IMPACT?

Public health staff in our member public health departments can make a difference to ensure access to health-promoting services to immigrant communities and to promote healing to mitigate the stresses that emerge from our current political environment's messages of hate and exclusion. Here are some things that health departments can do to be responsive and address the changing public health needs of immigrant families:

Ensure Immigrant Families are not Deterred from Enrolling in Critical Programs

- Ensure that immigrant families and their children are not deterred from enrolling in critical programs by promoting health agency policies to provide services to all people, including recommendations for ensuring that enrollment practices do not deter immigrants from

accessing benefits on behalf of themselves or their children. Review other health agency policies and services considering how undocumented populations may be impacted.

- Encourage and support the efforts of sister agencies to protect undocumented people and their families. Coordinate and connect Behavioral Health, Public Health, Social Services, and Community Clinics to reach immigrant populations to provide trauma informed health and mental health services.

Trauma Informed, Culturally, and Linguistically Appropriate Health and Mental Health Services

- Ensure that programs have access to best practices and training on trauma-informed care to be responsive to the communities served and funding to implement those practices.
- Provide training for public health staff on how to prepare for an ICE raid and distribute guidelines for internal policy protections.
- Provide training to public health staff in anti-hate and anti-bias for the workplace, which can support trauma-informed health and mental health services.

Advocate for Immigrant Families and their Children

- Continue to advocate for state bills protecting immigrants, including AB 6: State Fund Legal Representation for Immigrants, SB 54: California Sanctuary State Bill, and AB 3: Create Training for Immigration Legal Defense.
- Support cities, counties, and states that pledge to provide sanctuary in different forms to undocumented residents and to reject 287(g) agreements.
- Advocate that local and state government create a legal defense fund for undocumented residents.
- Connect undocumented clients and their families with legal rights and community organizing groups
- Encourage labor enforcement to adopt and implement policies that protect worker rights, regardless of immigration status.

Communications to Change the Narrative

- Change the narrative of Behavioral Health's role beyond being the "safety net" to focus on equity in how it does its work, it communicates, and its mission and vision.
- Work to change a narrative that portrays undocumented people negatively. Increase awareness and share stories highlighting the new stresses and dangers our immigrant population is facing.
- Provide welcoming communications via websites, printed materials, and radio to reach immigrant communities, ensure all people understand that they are welcome at the agency, and assure them that services are still available.

HOW COULD PRIVATE FUNDING MAKE THE BIGGEST IMPACT?

The philanthropic community should protect, defend, and elevate the well-being of immigrant families and their children with strategic and innovative investments in urgent support to programs that serve them as well as long term systemic responses. A comprehensive philanthropic agenda would include:

Legal Support and Representation

- Create a legal defense fund for undocumented residents to gain access to affordable legal services and representation for immigrant families. Resources are needed in communities to provide free legal advice, access to attorneys, and representation to families on immigration, child custody, and family law to help families navigate the legal system.
- Contribute to funds to serve people who have been detained (by ICE and in jails). County funding to this end is limited (general funds).
- Provide funding for rapid response networks to ensure support is available when needed, especially for dispatchers and attorneys.

Trauma Informed, Culturally, and Linguistically Appropriate Mental Health Services

- Fund innovative work. Counties are usually “limited” by funding. Availability of discretionary funding for counties could allow them to implement promising strategies, which can provide evidence to advocate for using general funds and not be tied to their mandates.
- Fund prevention work that is outside the scope and funding of MHSA (which primarily helps people with serious mental illness) to help the region serve people that are being left out of programs and identify ways to work together to reach immigrant populations to provide trauma informed, culturally, and linguistically appropriate outreach and mental services.
- Address the need to diversify the field of mental and behavioral health care providers. Efforts are needed to diversify the field of mental health care so that providers reflect and connect to populations served. Funding could provide internships, mentorships for diverse young people, and outreach starting in middle and high school.
- Provide funding for community-based hubs (e.g. family resource centers or churches who have better trust and understanding of immigrant communities) where residents can access mental health services as well as jobs and other county resources. Many people need help navigating the county’s complicated systems and processes (e.g. eligibility for entitlements).

Cross Sector Collaborations

- Fund opportunities to engage different stakeholders in the process of making change to promote health equity and to address the root causes of pressing immigration issues facing our communities.
- Insist in the partnerships between Behavioral Health and legal services, immigration, community-based organizations, and churches to be responsive to the needs of immigrant families and their children.

Communications Campaigns to Change the Narrative

- Support efforts for outreach and communicate welcoming messages to immigrant families about policies that affect them and Know Your Rights and legal observer (for ICE raids) trainings. Work to change the narrative that portrays undocumented people negatively. Funders can issue broad statements aimed at influencing key constituencies or speak out on specific policy issues.
- Raising awareness among the public and policymakers about the importance of young children of immigrants to our country’s future. National, state, and local foundations should use their own credibility and prominence to elevate the importance of the wellbeing of young children and the urgency of a supportive policy, research, and advocacy agenda.

References

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- [4] "Immigrants in California," *Public Policy Institute of California*. .
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