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December 6, 2018

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U.S. Citizenship and Immigration Services, Department of Homeland Security  
20 Massachusetts Avenue NW  
Washington, DC 20529-2140

Dear Sir/Madam:

California Food Policy Advocates (CFPA) strongly opposes the Department of Homeland Security's (DHS) proposed change to the 'public charge' rule. This rule threatens to sharply restrict access to food, which runs counter to CFPA's mission to ensure all Californians have access to nutritious, affordable food.

Programs like the Supplemental Nutrition Assistance Program (SNAP, or CalFresh in California), Medicaid (Medi-Cal in California), and Section 8 Housing Vouchers, help families meet their basic needs so they can stay strong and productive, and raise children who thrive. The proposed rule change would accomplish the opposite. If enacted, these changes will create and intensify immigration-related fears that undermine access to critical programs—even for eligible, lawfully-present immigrants and their family members. Under this policy, fewer people would have access to food, housing, and health care, which would have devastating effects on local economies, public health, and the wellbeing of our society as a whole.

The proposed rule would force immigrant families to make an impossible choice between meeting their basic needs and pursuing a legal and permanent future together in the United States. Redefining public charge to describe a person who receives one or more public benefits is inconsistent with legislative history and fails to consider the tax revenue and economic growth foreign-born residents create. In targeting non-monetary benefits, DHS would effectively penalize participation in programs that have historically promoted upward mobility. When families can stay together, keep themselves healthy, and contribute to our economy, that makes things better for all of us. Enacting this change won't just hurt immigrants—it would drive entire communities deeper into poverty and hunger.

## **1. Fear Will Discourage Millions from Accessing Supports They Are Entitled to Utilize**

Applying such a broad definition of ‘public charge’ would exacerbate immigration-related fears, undermining access to critical assistance programs—even for eligible immigrant residents, citizens, and their family members. Uncertainty about to whom the rule applies will cause immigrants not regulated by this policy to disenroll from health, nutrition, and other benefit programs for which they are eligible. Page 51266 of the proposed rule states that the “chilling effect” of this rule would not be comparable to that which was observed following the enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), because that law changed eligibility requirements, whereas this rule would change enrollment incentives. However, this claim does not explain why refugee Food Stamp use dropped 60 percent between 1994 and 1997, despite their eligibility remaining unchanged by PRWORA.<sup>1</sup> The assumption of a 2.5 percent rate of disenrollment is a gross underestimate of this proposal’s potential chilling effect. If DHS were to calculate the costs and consequences of this policy using a more accurate rate of disenrollment, the projected impacts on public health and the economy would be significantly greater.

### ***The rule will have a disproportionate impact on children and people of color***

Approximately 25.9 million people would be potentially chilled by the proposed public charge rule, accounting for an estimated 8 percent of the U.S. population. This number represents individuals and family members with at least one non-citizen in the household and who live in households that are income-eligible to receive the programs included in this proposal. Of this population, approximately 9.2 million are children under 18 years old, or approximately 13 percent of our nation’s child population.<sup>2</sup> According to Current Population Survey (CPS) data, nearly 90 percent of these children are U.S. citizens.

People of color represent 90 percent of the potentially chilled population. An estimated 70 percent are Latino, 12 percent are Asian American and Pacific Islander, and 7 percent are Black people.<sup>3</sup>

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<sup>1</sup> United States Department of Agriculture Food and Nutrition Service, Office of Analysis, Nutrition, and Evaluation. (1999) *Who is Leaving the Food Stamp Program? An Analysis of Caseload Changes from 1994 to 1997*. Available at <https://fns-prod.azureedge.net/sites/default/files/cdr.pdf>

<sup>2</sup> 2012-2016 5-Year American Community Survey Public Use Microdata Sample (ACS/PUMS); 20122016 5-Year American Community Survey (ACS) estimates accessed via American FactFinder; Missouri Census Data Center (MCDC) MABLE PUMA-County Crosswalk. Custom Tabulation by Manatt health, 9/30/2018. Found online at <https://www.manatt.com/Insights/Articles/2018/Public-Charge-Rule-Potentially-Chilled-Population>.

<sup>3</sup> 2012-2016 5-Year American Community Survey Public Use Microdata Sample (ACS/PUMS); 20122016 5-Year American Community Survey (ACS) estimates accessed via American FactFinder; Missouri Census Data Center (MCDC) MABLE PUMA-County Crosswalk. Custom Tabulation by Manatt health, 9/30/2018. Found online at <https://www.manatt.com/Insights/Articles/2018/Public-Charge-Rule-Potentially-Chilled-Population>.

### ***Disenrollment will degrade public health and trigger an economic ripple effect***

Based on disenrollment rates observed post-PRWORA, The Migration Policy Institute estimates that anywhere between 5.4 and 16.2 million immigrants would disenroll from these programs if the proposed rule were enacted.<sup>4</sup> In California, nearly 3 million immigrants and their children could be impacted by these changes. If the proposed rule is finalized, UCLA Center for Health Policy Research estimates that between 129,000 and 301,000 people would disenroll from CalFresh, and between 317,000 and 741,000 from Medi-Cal.<sup>5</sup> Disenrollment of this scale would trigger an economic ripple effect capable of devastating local economies across the U.S.

The proposed rule serves only to cultivate a culture of fear and distrust in government programs, which is not in our nation's best interest. Persons seeking permanent legal status in the U.S. might be willing to sacrifice public benefits or forgo benefits for their children—even if the rule does not apply to them—just to play it safe. In a 2018 survey of health care providers in California, more than two-thirds noted an increase in parents' concerns about enrolling their children in Medi-Cal, WIC and CalFresh, and nearly half reported an increase in skipped scheduled health care appointments.<sup>6</sup> This includes legal permanent residents, refugees, and other such groups who are exempt from the public charge test. These accounts illustrate how this rule would punish immigrants who have done everything by the book in their pursuit of a legal future in the U.S.

Given the demographic makeup of the potentially chilled population, this rule will bring the most harm to children and people of color. This would stifle children's potential and exacerbate racial disparities in health access and educational attainment, the consequences of which would be far-reaching and long-lasting.

## **2. This Rule Would Make It Harder For Families to Reach Economic Security**

Use of supplemental benefits does not indicate lack of “self-sufficiency” as the proposal states; more often, the opposite is true. From SNAP and Section 8 Housing Vouchers, to Medicaid health coverage, economic security programs close the gaps for families struggling to make ends meet. The benefits alone do not fulfill participants' basic needs. Rather, they lessen the burden of monthly food, rent, and medical expenditures, making these programs effective upward mobility tools.

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<sup>4</sup> Batalova, Jeanne, et al. (2018). *Chilling Effects: The Expected Public Charge Rule and Its Impact on Legal Immigrant Families' Public Benefits Use*. Migration Policy Institute. Available at: <https://www.migrationpolicy.org/research/chilling-effects-expected-public-charge-rule-impact-legal-immigrant-families>

<sup>5</sup> Ninez Ponce, Laurel Lucia and Tia Shimada (2018). *How Proposed Changes to the 'Public Charge' Rule Will Affect Health, Hunger and the Economy in California*. UCLA Center for Health Policy Research. <http://www.calhealthreport.org/2018/11/08/researchers-warn-public-charge-rule-changes-lead-hardship-economic-losses-california/>

<sup>6</sup> The Children's Partnership, California Children in Immigrant Families: The Health Provider Perspective,” <https://www.childrenspartnership.org/wp-content/uploads/2018/03/Provider-Survey-Infographic-.pdf>

As public assistance programs provide direct relief to constrained household budgets, they promote upward mobility through improvements to participants' mental and physical health. Food insecurity, housing instability, and lack of access to health care are all negative social determinants of health that result in increased incidence of chronic, preventable diseases, harmful stress and higher health care costs. SNAP, housing assistance, and Medicaid ameliorate negative impacts by providing families, children, and seniors with a critical foundation for health and well-being. In addition to reduced health care costs, these health benefits make it possible for participants to develop the skills necessary to get higher paying jobs. Participation also has positive longer-term effects on children. Many studies find lasting performance improvements in school and boosts to earning power as adults.

Denying access to these programs on the basis of promoting "self-sufficiency" is entirely contradictory, as it would effectively make it harder for families to get ahead. Ensuring these supports remain available for all members of our communities not only sustains the population, but promotes opportunity and economic mobility for the next generation.

**Given California Food Policy Advocates' expertise in relieving hunger, the following arguments against the proposed rule pertain to the social and economic benefits of SNAP participation.** This is not to diminish the importance of subsidized housing and health care, as each of the programs included in this proposal are vital and beneficial for the nation as a whole. Preventative health care, food assistance and housing stability are interrelated.

***a. SNAP gives working families a leg up***

The economic recovery hasn't reached parts of the country, and there just aren't enough living-wage jobs in many of our communities. Many full-time workers do not make enough in wages to get by. In California, more than 49 percent of CalFresh participants are in working families, but their low wages still won't afford them what they need to get ahead.<sup>7</sup> These are our home health care aides, child care workers, cashiers, cooks, restaurant servers, janitors, and security guards. They pay taxes, educate their children, and participate in the economy, but receive low pay and few benefits for their labor. SNAP helps these families put food on the table, while freeing up earned income for other essential items, like diapers and medication. In doing so, SNAP lifted 8.4 million people above the poverty line in 2015—including 3.8 million children.<sup>8</sup> The resulting reduction in financial stress helps people focus on moving forward, rather than staying afloat.

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<sup>7</sup> Number of CalFresh-participating families with one or more workers drawn from 2017 ACS 1-year estimates, "B22007: Receipt of Food Stamps/SNAP in the Past 12 Months by Family Type by Number of Workers in Family in the Past 12 Months." Available Here: [https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_17\\_1YR\\_B22007&prodType=table](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_17_1YR_B22007&prodType=table)

<sup>8</sup> CBPP (2018). *Economic Security and Health Insurance Programs Reduce Poverty and Provide Access to Needed care*. Center on Budget and Policy Priorities. Available Here: <https://www.cbpp.org/research/poverty-and-inequality/chart-book-economic-security-and-health-insurance-programs-reduce>

SNAP further supports the workforce by reducing food insecurity, which is in itself a barrier to employment. When people can afford nutritious food they are better prepared to learn and develop the skills necessary to get higher paying jobs; we also see increased workplace productivity, and improved physical and mental health outcomes. This rule would place unnecessary barriers between immigrant families and programs that help them get ahead.

**b. SNAP spurs economic activity**

The rule change would lead to devastating losses for local economies. In 2017, SNAP participants spent about \$63 billion in SNAP benefits on food purchases. Program disenrollment would therefore hurt the bottom lines of the 260,000 SNAP-participating retailers nationwide, including supermarkets, grocery stores, neighborhood “mom and pop” stores, and farmers markets.<sup>9</sup> Importantly, these economic losses extend far beyond food retailers. This is because SNAP enables people to make purchases they would otherwise not have made. These expenditures directly support retailers, augmenting the incomes and spending of others along the food chain: farmers, retailers, food processors and distributors. This triggers a ripple effect that supports U.S. spending and production on a grand scale. USDA Economic Research Service estimates that \$1 billion in SNAP spending boosts GDP by \$1.79 billion, and creates 8,900-17,900 full-time equivalent jobs.<sup>10</sup> Given this relationship, disenrollment on the scale likely to result from enactment of the proposed rule would mean devastating losses for local economies and food chain industries.

Since a large share of the potentially chilled population resides in California, the economic ripple effect of the proposed rule would be substantial. The UCLA Center for Health Policy Research estimates the combined effects of CalFresh and Medi-Cal disenrollment would cause the State of California to lose up to \$151 million in state and local tax revenue, and 2.8 billion in lost economic output. These revenue losses would result in up to 17,000 lost jobs.<sup>11</sup>

Hunger, housing instability, and poor health are all barriers to economic opportunity. In supporting these basic needs, SNAP, housing assistance, and Medicaid provide a foundation for greater economic security. Restricting access to these highly effective economic security programs will only increase strain on our communities, as more and more of our neighbors are forced to make do with their low wages. Economic consequences are only one element of the harm the proposed rule would create, as these changes to ‘public charge’ would have both immediate and long-lasting impacts on public health and generational opportunity.

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<sup>9</sup> CBPP (2018). *SNAP Retailers Database*. Center on Budget and Policy Priorities. Available at: <https://www.cbpp.org/snap-retailers-database>

<sup>10</sup> Based on 2017 SNAP expenditures; United States Department of Agriculture Economic Research Service (2010). *The Food Assistance National Input-Output Multiplier (FANIOM) Model and Stimulus Effects of SNAP*. Available at: [https://www.ers.usda.gov/webdocs/publications/44748/7996\\_err103\\_1\\_.pdf](https://www.ers.usda.gov/webdocs/publications/44748/7996_err103_1_.pdf).

<sup>11</sup> Ninez Ponce, Laurel Lucia and Tia Shimada (2018). How Proposed Changes to the ‘Public Charge’ Rule Will Affect Health, Hunger and the Economy in California. UCLA Center for Health Policy Research.

### **c. SNAP means better health, better diets—and lower health care costs**

Health is highly influenced by diet, which is why ensuring all members of our communities can afford nutritious food is paramount to the health and security of our nation. When people can access nutritious food, we see improved physical and mental health, along with higher attendance in schools and better academic performance. SNAP makes it possible for more people to reap the benefits of good nutrition, even when money is tight. Restricting access for immigrants and their families would increase food insecurity, along with the hunger, poor nutrition, and harmful stress it produces. This, along with restricted access to health care and housing assistance, would degrade public health and stifle the next generation's ability to contribute to our shared future prosperity.

Without SNAP, immigrants and their families are more likely to suffer the health consequences of food insecurity, making the United States sicker as a whole. SNAP reduces the overall prevalence of food insecurity by as much as 30 percent, and is even more effective among the most vulnerable, such as children and those with very low food security.<sup>12</sup> SNAP enables participants to purchase higher quality, healthier foods than their incomes would otherwise afford, thereby reducing their risk of developing diet related conditions, including cardiovascular and kidney disease, diabetes, anemia, and depression. Likewise, early access to SNAP among pregnant mothers and in early childhood is associated with improved birth outcomes and long-term health into adulthood.<sup>13</sup>

Additionally, SNAP helps alleviate financial constraints that may compromise health. Food insecurity among working-age adults, makes them about four times more likely to skip needed medications because of cost than those in food-secure households.<sup>14</sup> SNAP reduces the likelihood of medication nonadherence and frees up resources for preventive health care, by reducing what families pay out of pocket for food. At the same time, SNAP reduces the stress associated with tough financial decisions in times of economic hardship. SNAP can spare parents and their children the toxic effects of financial stress, which often manifest as depression, unhealthy behaviors (e.g., smoking, physical inactivity, substance abuse), and family discord.<sup>15</sup>

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<sup>12</sup> James Mabli et al. (2013). *Measuring the Effect of Supplemental Nutrition Assistance Program (SNAP) Participation on Food Security*. Food and Nutrition Service, USDA. Available at:

<https://www.fns.usda.gov/measuring-effect-snap-participation-foodsecurity-0>

<sup>13</sup> CBPP (2018) *Report: SNAP Is Linked with Improved Nutritional Outcomes and Lower Health Care Costs*. Center on Budget and Policy Priorities. Available at

[https://www.cbpp.org/research/food-assistance/snap-is-linked-with-improved-nutritional-outcomes-and-lower-health-care#\\_ftn4](https://www.cbpp.org/research/food-assistance/snap-is-linked-with-improved-nutritional-outcomes-and-lower-health-care#_ftn4)

<sup>14</sup> Seth A. Berkowitz, Hilary K. Seligman, and Niteesh K. Choudhry, (2014). *Treat or Eat: Food Insecurity, Cost-Related Medication Underuse, and Unmet Needs*. The American Journal of Medicine. Available at: 127(4):303-310, 2014, [http://www.amjmed.com/article/S0002-9343\(14\)00030-8/fulltext](http://www.amjmed.com/article/S0002-9343(14)00030-8/fulltext)

<sup>15</sup> Alaimo K, et al. (2002). *Family food insufficiency, but not low family income, is positively associated with dysthymia and suicide symptoms in adolescents*. The Journal of Nutrition;132:719-725.

And Laitinen J, et al. (2002). *Stress-related eating and drinking behavior and body mass index and predictors of this behavior*. Preventative Medicine;34:29-39.

Adequate nutrition promotes health and reduces participants' need for future medical care. Better health means lower health care costs. A national study found that, on average, low-income adults participating in SNAP incur nearly 25 percent less in annual medical care costs than non-participants.<sup>16</sup> As SNAP supports better diets, better health, and lower medical costs, it provides short- and long-term relief to state and federal health care budgets.<sup>17</sup> If this rule intends to reduce the level of government spending to support U.S. residents, DHS should make careful consideration of the short-and long-term impacts disenrollment would have on health systems and related externalities. SNAP, housing assistance, and Medicaid are all means of preventative care. Using fear to keep immigrants and their families from receiving such care is not only cruel, but counterproductive.

**d. SNAP promotes the health and well-being of America's children**

There is no way to target individual immigrants without harming their families—when you hurt parents, you hurt children. 1 in 4 U.S. children has at least one immigrant parent.<sup>18</sup> In California, it's nearly 1 in 2 — 49 percent of children have at least one immigrant parent.<sup>19</sup> The proposed rule would cause immigrant parents to forgo benefits for their children that are proven to contribute to better health and economic outcomes in adulthood. SNAP helps families afford an adequate diet for their children; 44 percent of SNAP participants are children, and over two-thirds of all participants live in families with children.<sup>20</sup>

SNAP supports healthy growth and development by reducing food insecurity and ensuring good nutrition. A study of early participants in the Food Stamp Program found that adults who had access to Food Stamps as young children reported better health and had lower rates obesity, high blood pressure, heart disease, and diabetes.<sup>21</sup> Likewise, good nutrition supports mental health, reducing a child's risk of developing cognitive and behavioral problems, anxiety and depression. A recent study looked at the effect changing SNAP eligibility had on the health of

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<sup>16</sup> Seth A. Berkowitz et al. (2017). *Supplemental Nutrition Assistance Program (SNAP) Participation and Health Care Expenditures Among Low-Income Adults*. JAMA Internal Medicine. Available at [https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2653910?amp%3butm\\_source=JAMA+Intern+MedPublishAheadofPrint&utm\\_campaign=25-09-2017](https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2653910?amp%3butm_source=JAMA+Intern+MedPublishAheadofPrint&utm_campaign=25-09-2017)

<sup>17</sup> CBPP (2018). *SNAP Is Linked with Improved Nutritional Outcomes...* Available at [CBPP.org](http://CBPP.org)

<sup>18</sup> Artiga, Samantha and Damico, Anthony (2018). *Nearly 20 Million Children Live in Immigrant Families that Could Be Affected by Evolving Immigration Policies*. Kaiser Family Foundation. Available at: <https://www.kff.org/disparities-policy/issue-brief/nearly-20-million-children-live-in-immigrant-families-that-could-be-affected-by-evolving-immigration-policies/>

<sup>19</sup> U.S. Census Bureau, American Community Survey (Oct. 2017). Available at: <https://www.kidsdata.org/topic/573/foreign-parents250/table#fmt=786&loc=2&tf=88&sortColumnId=0&sortType=asc>

<sup>20</sup> USDA FNS (2018) Trends in Supplemental Nutrition Assistance Program Participation Rates: Fiscal Year 2010 to Fiscal Year 2016. Available at: <https://www.fns.usda.gov/snap/SNAP-participation-rates-FY-2010-2016>

<sup>21</sup> Hilary Hoynes, Diane Whitmore Schanzenbach, and Douglas Almond (2016). *Long-Run Impacts of Childhood Access to the Safety Net*. American Economic Review, 106(4):903–934. Available at <https://gspp.berkeley.edu/assets/uploads/research/pdf/Hoynes-Schanzenbach-Almond-AER-2016.pdf>

children with immigrant parents after PRWOA. The study found that every \$1,000 in annual Food Stamp benefits a young child received led to a 15 percent decline in less than-very-good health in later childhood. Conversely, parental loss of Food Stamp eligibility for one year while their child was young increased health expenditures by \$130 per child at school age.<sup>22</sup>

***SNAP helps children achieve greater economic security than their parents***

At FR 51174, the Department asks about public charge determinations for non-citizen children under age 18 who receive one or more public benefit programs. Receipt of public benefits before the age of 18 is no indication of future use. In fact, the opposite is true. The best way to help children achieve greater financial security in adulthood than their parents is to protect them from the damaging effects of poverty, poor health, and poor nutrition.

Public assistance programs improve children's health and their family's financial stability, which in the long-run translates to greater economic security for the next generation. SNAP feeds children's bodies and minds, which prepares them to learn and achieve academically. Research suggests that SNAP participation can lead to improvements in reading and mathematics skills among elementary children, especially young girls, and increase the chances of graduating from high school by as much as 18 percentage points.<sup>23</sup> Like Medicaid and housing assistance, SNAP makes more disposable income available for families. This gives families the opportunity to produce better outcomes for their children. Women who had access to food stamps as young children reported improved economic self-sufficiency; i.e., were more likely to graduate high school, be employed, and have higher earnings, and less likely to participate in Temporary Assistance for Needy Families (TANF) or SNAP.<sup>24</sup>

Children will determine our nation's future prosperity; policies enacted by this administration should aim to help them reach their full potential. These changes would weaken children's ability to contribute to our society, the consequences of which would be felt for generations.

***e. SNAP helps seniors stay healthy and age in place***

These changes to public charge would push older immigrants out of programs that help them stay healthy and age in place. Protecting seniors from hunger, poverty, and poor health strengthens entire communities, and should be made a national priority. According to the U.S. Census Bureau, older immigrants make up 15 percent of adults age 65 and over. Many of these older immigrants labored their whole work lives at restaurants, construction, farming, landscaping, caregiving and other physically demanding, low-paying jobs without benefits. They too deserve to age with dignity, and public assistance programs like SNAP help them do so.

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<sup>22</sup> Chloe East. (2016). *The Effect of Food Stamps on Children's Health: Evidence from Immigrants' Changing Eligibility*. University of Colorado Denver. Available at: [http://cneast.weebly.com/uploads/8/9/9/7/8997263/east\\_jmp.pdf](http://cneast.weebly.com/uploads/8/9/9/7/8997263/east_jmp.pdf)

<sup>23</sup> Edward Frongillo, Diana F. Jyoti, and Sonya J. Jones, (2006). *Food Stamp Program Participation is Associated with Better Academic Learning among School Children*. *Journal of Nutrition*, 136(4):1077-80. Available at: <http://jn.nutrition.org/content/136/4/1077.full>

<sup>24</sup> Hilary Hoynes, et al. (2016). *Long-Run Impacts of Childhood Access to the Safety Net*.

Food-insecure seniors are more likely to seek medical attention, including office visits, overnight stays in a hospital, and emergency rooms, than food-secure seniors.<sup>25</sup> Fortunately, SNAP is an effective anti-hunger program—a lifeline for seniors. Research from Northeastern University found that SNAP participation among food-insecure seniors decreased the likelihood of hospitalization by 45.8 percent, compared to eligible non-participants.<sup>26</sup> SNAP’s ability to loosen tight budgets is especially helpful to seniors, who often live on fixed incomes that can force them to make difficult trade-offs that affect their health. One study found that older SNAP participants with diabetes were about 30 percent less likely to skip their medication compared to eligible non-participants with diabetes.<sup>27</sup>

When seniors can afford food, health care, and housing, they can better tend to their health, which improves their lives and those of their families and caregivers. This rule would diminish these social benefits while increasing health care costs. This rule would make it more difficult for U.S. citizens and residents to welcome aging parents into the country, which ignores the critical roles many grandparents play in caring for their grandchildren and other family members. Additionally, immigrants provide care for America’s aging population, making up one quarter of the direct care workforce. But because these jobs tend to be part time and low-wage, nearly half live at or below 200 percent of federal poverty guidelines, and more than 40 percent rely on programs such as SNAP and Medicaid.<sup>28</sup> This rule would make it harder for them to afford to remain the U.S. The ripple effect would be a shortage in direct care workers, leaving many older Americans and people with disabilities without access to the caregiving they need.

Ensuring older immigrants access to vital health and nutrition programs promotes intergenerational well-being, while rewarding their contributions to our society with dignity. Here, the benefits outweigh the costs.

### **3. Disenrollment Will Strain State and Local Governments, and Charitable Networks**

With fewer people participating in federally funded support programs, the responsibility of addressing hunger and poverty would fall on state and local governments, and charitable networks. Specifically, these changes will adversely affect our government agencies charged with administering these programs and serving our communities, including schools and universities, child welfare agencies, public housing authorities, public health systems and

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<sup>25</sup> Seth A. Berkowitz et al. (2017). *Supplemental Nutrition Assistance Program (SNAP) Participation and Health Care Expenditures Among Low-Income Adults*.

<sup>26</sup> J. Kim, (2015). *Are Older Adults Who Participate in the Supplemental Nutrition Assistance Program Healthier Than Eligible Nonparticipants? Evidence from the Health and Retirement Study*. *The Gerontologist*, 55 (Supplement Issue 2):672. Available at: [https://academic.oup.com/gerontologist/article/55/Suppl\\_2/672/2489236](https://academic.oup.com/gerontologist/article/55/Suppl_2/672/2489236)

<sup>27</sup> Mithuna Srinivasan and Jennifer A. Pooler. (2017). *Cost-Related Medication Nonadherence for Older Adults Participating in SNAP*. *American Journal of Public Health*. Available at: <http://ajph.aphapublications.org/doi/10.2105/AJPH.2017.304176>

<sup>28</sup> Robert Espinoza, PHI, *Immigrants and the Direct Care Workforce* (2017). available at <https://phinational.org/resource/immigrants-and-the-direct-care-workforce/>.

hospitals. The prevalence of hunger and poor health does not go away, despite barriers to effective safety net program support.

### ***Create an unmanageable demand for charitable food providers***

While food banks across the country do the important work of providing food directly to those who need it, the SNAP program is far more efficient at tackling hunger. Feeding America food banks nationwide deliver more than four billion meals annually to people facing hunger; still, SNAP serves 12 meals for every one meal food banks provide.<sup>29</sup> If this rule is enacted, charitable networks simply will not be able to meet the need once met by SNAP.

### ***Compromise school's ability to provide free and reduced price meals***

Students can't learn when they are hungry and 1.7 million children in California are food insecure.<sup>30</sup> School meals can be a key strategy for getting students the food they need to learn and grow, and a major support for families struggling to make ends meet. Like SNAP, the National School Lunch and Breakfast Programs are highly effective at reducing food insecurity for school-aged children.<sup>31</sup>

In addition, school meal programs can be an effective tool to help children reach their full academic potential. Healthy and well-nourished children are more likely to attend class, be ready to learn, stay engaged, and perform well in school. School nutrition is linked to multiple indicators of academic success, including increased literacy and mathematical scores; improved cognitive function; higher grades; and decreased aggressive behavior and disciplinary problems.<sup>32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51</sup>

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<sup>29</sup> Knott, Mark (2018) *New Data Shows Millions of Hungry Americans Ineligible for Federal Nutrition Assistance*. Feeding America. Available at:

<https://www.feedingamerica.org/about-us/press-room/MMG2018Release>

<sup>30</sup> Feeding America. (2018). *Child Food Insecurity in California 2018*. Feeding America Map the Meal Gap. Available at: <http://map.feedingamerica.org/county/2016/child/california>.

<sup>31</sup> Ralston, K. and Coleman-Jensen, A. (2017). *USDA's National School Lunch Program Reduces Food Insecurity*. United States Department of Agriculture Economic Research Service. Available at: <https://www.ers.usda.gov/amber-waves/2017/august/usda-s-national-school-lunch-program-reduces-food-insecurity/>.

<sup>32</sup> Adolphus, K., Lawton, C. L., & Dye, L. (2013). *The effects of breakfast on behavior and academic performance in children and adolescents*. *Frontiers in Human Neuroscience*.

<sup>33</sup> Winicki, J., & Jemison, K. (2003). *Food Insecurity and Hunger in the Kindergarten Classroom: Its Effect on Learning and Growth*. *Contemporary Economic Policy*, 21 (2), 145-157.

<sup>34</sup> Jyoti, Diana F.; Frongillo, Edward A.; Jones, Sonya J. (2005). *Food Insecurity Affects School Children's Academic Performance, Weight Gain, and Social Skills*. *Journal of Nutrition* 135: 2831-2839.

<sup>35</sup> Craig Gundersen, Brent Kreider, and John Pepper. (2012) *The Impact of the National School Lunch Program on Child Health: A Nonparametric Bounds Analysis*. *Journal of Econometrics* 166: 79–91.

<sup>36</sup> Nord M, Romig K. (2006). *Hunger in the summer: seasonal food insecurity and the National School Lunch and Summer Food Service programs*. *J Child Poverty*.12:141– 58

<sup>37</sup> Edmonds CJ and Jeffes B. (2009). *Does having a drink help you think? 6-7-Year-old children show improvements in cognitive performance from baseline to test after having a drink of water*. *Appetite* 53.3: 469-472.

<sup>38</sup> Kempton MJ, Ettinger U, Foster R, et al. (2011). *Dehydration affects brain structure and function in healthy adolescents*. *Hum Brain Mapp*. 32:71-79.

For these benefits and more, schools rely upon modern strategies to most efficiently and cost-effectively identify students eligible for free and reduced-price school meals. Meals are part of the business of schools and while they serve an incredibly important benefit for students, it is critical that schools see a certain level of participation (leveraging economies of scale) in order to maximize their return. Direct certification, a bipartisan-supported and federally-mandated program that has been in place nationally for nearly 15 years, allows schools to utilize data sharing systems that electronically identify students eligible for free and reduced-price meals based on their enrollment in other means-tested social service programs (i.e., SNAP, TANF, and Medicaid).<sup>52</sup> Time and time again, direct certification is rigorously assessed and proven to simplify the school meal enrollment process and decrease error.<sup>53</sup> It is a major benefit to students and schools. However, for direct certification to work effectively, students must have unadulterated access to the aforementioned means-tested programs. The proposed rule both directly and indirectly interferes with students access to food assistance and health care – whether by punishing families or terrifying families – and as a result will effectively change the usefulness and value of direct certification. A school district’s ability to leverage the federally-mandated practice of direct certification will be weakened, increasing the cost of administration of the program and decreasing students’ access to school meals.

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<sup>39</sup> Edmonds CJ and Jeffes B. (2009). Does having a drink help you think? *Appetite* 53.3: 469-472.

<sup>40</sup> Mahoney, C. R., Taylor, H. A., Kanarek, R. B., & Samuel, P. (2005). *Effect of breakfast composition on cognitive processes in elementary school children*. *Physiology & Behavior*, 85: 635-645

<sup>41</sup> Hernandez, Daphne C.; Jacknowitz, Alison. (2009). *Transient, but Not Persistent, Adult Food Insecurity Influences Toddler Development*. *Journal of Nutrition* 139: 1517-1524

<sup>42</sup> Meyers AF, Sampson AE, Weitzman M, et al. (1989) *School breakfast program and school performance*. *Am J Dis Child*;143:1234e9.

<sup>43</sup> Bradley, BJ, Greene, AC. (2013). *Do Health and Education Agencies in the United States Share Responsibility for Academic Achievement and Health?* *Journal of Adolescent Health*, 52: 523-532.

<sup>44</sup> Nansel TR, Huang TK, Rovner AJ, Sanders-Butler Y. (2010). *Association of school performance indicators with implementation of the Health Kids, Smart Kids program: Case study*. *Public Health Nutrition*;13:116e22.

<sup>45</sup> Murphy JM, Pagano ME, Nachmani J, et al. The relationship of school breakfast to psychosocial and academic functioning: Cross-sectional and longitudinal observations in an inner-city school sample. *Arch Pediatr Adolesc Med* 1998;152:899e907

<sup>46</sup> Alaimo, K., Olson, et al. (2001). *Food insufficiency, family income, and health in US preschool and school-aged children*. *American Journal of Public Health*. 781-786.

<sup>47</sup> Cook, J. T., & Frank, D. A. (2008). *Food security, poverty, and human development in the United States*. *Annals of the New York Academy of Sciences*, 1136, 193-209.

<sup>48</sup> Whitaker, R. C., Phillips, S. M., & Orzol, S. M. (2006). *Food insecurity and the risks of depression and anxiety in mothers and behavior problems in their preschool-aged children*. *Pediatrics*, 118(3), e859-68.

<sup>49</sup> Melchior M, Chastang J-F, Falissard B, et al. (2012). *Food Insecurity and Children’s Mental Health: A Prospective Birth Cohort Study*. Uddin M, ed. *Plos ONE*. 7(12): e52615.

<sup>50</sup> Brown, J. L., Beardslee, W. H., & Prothrow-Stith, D. (2008). *Impact of school breakfast on children’s health and learning: An analysis of the scientific research*.

<sup>51</sup> Kimbro RT, Denney JT. (2015). *Transitions into food insecurity associated with behavioral problems and worse overall health among children*. *Health Affairs*. 34(11): 1949-1955.

<sup>52</sup> GovTrack.us. (2018). S. 2507 — 108th Congress: Child Nutrition and WIC Reauthorization Act of 2004. Retrieved from <https://www.govtrack.us/congress/bills/108/s2507>

<sup>53</sup> Levin, M. and Neuberger, Z. (2014). *Improving Direct Certification Will Help More Low-Income Children Receive School Meals*. <https://www.cbpp.org/sites/default/files/atoms/files/7-25-14fa.pdf>.

Furthermore, another federal option that simultaneously increases access and ease of administration of the school meal programs is the Community Eligibility Provision (CEP), which will also be compromised by the proposed rule. CEP enables schools to offer two no-cost meals—known as universal school meals—to all students each school day. The meals meet federal nutrition standards and help ensure students have the nutrition they need to learn throughout the day. CEP leverages direct certification to determine the level of need within a school and to calculate the appropriate level of reimbursement per participating student. To become eligible for CEP, schools must show a high level of direct certification.

The benefits of serving meals universally free are extensive:<sup>54, 55</sup>

- When meals are offered to all children, school meal participation increases, in part because universal meals ends stigma—especially in middle and high schools.
- Kids who participate in school meals are more likely to eat fruits, vegetables, and milk. These nutrient-dense foods contribute to a healthier Body Mass Index (BMI) and lower childhood obesity. Health benefits are particularly pronounced among low income students.
- Traditional approval for free and reduced-price meals, through paper applications, can yield errors, and some children who need meals can fall through the cracks due to transient families, language barriers and other communication breakdowns. When access to school meals is no longer linked to the application and income verification process, there is less room for error.
- Universal meals eliminate the need for students to pay a cashier and allow them more time to eat. When a child eats two free, nutritious meals a day at school, it can reduce financial strain on the family food budget.
- Research, as aforementioned, shows a well-nourished child is a better learner, test-taker and participant in school.
- Schools no longer have to foot the bill for unpaid meal fees, or try to collect them from families. This allows school nutrition staff to focus on preparing and serving healthy meals and eliminates a significant financial burden for school districts and families.

The proposed rule interferes with all of these benefits by decreasing the effectiveness of direct certification and limiting school's ability to adopt universally free school meals through the CEP.

Over the past two years, California has reduced its reliance on paper applications for school meals and expanded universally free meals. The more than 3,700 California schools that have been able to streamline their school meal programs and extend the benefits of school meals to hundreds of thousands of students are at jeopardy. Placing unnecessary barriers between students, social service programs, and school meals unfairly takes food away from immigrant students and their peers, compromising food security and educational outcomes.

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<sup>54</sup> Logan, C. W., Connor, P., et al. (2014). Community Eligibility Provision Evaluation. Available at: <http://www.fns.usda.gov/sites/default/files/CEPEvaluation.pdf>.

<sup>55</sup> FRAC. (2018) Community Eligibility Continues to Grow in the 2016-2017 School Year. Available at: [http://www.frac.org/wp-content/uploads/CEP-Report\\_Final\\_Links\\_032317.pdf](http://www.frac.org/wp-content/uploads/CEP-Report_Final_Links_032317.pdf).

#### 4. Immigrants Contribute to the Nation, Their Opportunity Is the ‘American Dream’

As workers, business owners, taxpayers, and neighbors, immigrants are an integral part of California’s diverse and thriving communities and make extensive contributions that benefit all. The proposed public charge rule would push tax-paying immigrants out of programs that help them survive off low-wage jobs, denying millions of people the ‘American Dream’ they strive for. This limits not only immigrants’ ability to improve their earnings and their families’ circumstances, it also hinders their ability to contribute to the national economy.

Immigrant labor and spending power supports the U.S. economy, while their tax contributions fund the public programs this rule intends to exclude them from. Both documented and undocumented immigrants combined contribute more than \$328 billion each year in taxes; and their spending on food and health services support businesses and provides jobs to American workers.<sup>56</sup> According to the Institute on Taxation and Economic Policy, undocumented immigrants (who are ineligible for public assistance programs) contribute an estimated \$11.74 billion each year in state and local taxes. \$3.1 billion of that total estimate comes from undocumented immigrants residing in California.<sup>57</sup> Of those tax-paying immigrants who are eligible for public assistance, research shows they are less likely to utilize such benefits than low-income native-born adults and children. About half of low-income citizen children in citizen households receive SNAP, compared to about one-third of non-citizen children and two-fifths of citizen children with non-citizen parents.<sup>58</sup>

Our nation’s strength and security depend on investing in and protecting our people—not some, but all people. Immigrants who strive for opportunity and security in the U.S. should not be penalized for, or made fearful of, participating in programs that make the ‘American Dream’ more attainable. We all benefit when mothers, fathers, grandparents, sisters, and brothers can stay together and support each other. And when we reduce poverty, hunger, and ill-health, we build prosperity that advances us all. The proposed rule is an affront to our family values and history as a nation that welcomes immigrants. This policy would rob immigrants of resources that help them get ahead, while robbing this country of the many contributions immigrants make to the economy and our society.

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<sup>56</sup> The New American Economy (2018). Taxes & Spending Power. Available at: <https://www.newamericaneconomy.org/issues/taxes-&-spending-power/>

<sup>57</sup> Lisa Christensen Gee, Matthew Gardner, Misha E. Hill, and Meg Wiehe. (2017). *Undocumented Immigrants State and Local Tax Contributions*. Institute on Taxation and Economic Policy. Available at: <https://itep.org/wp-content/uploads/ITEP-2017-Undocumented-Immigrants-State-and-Local-Contributions.pdf>

<sup>58</sup> Leighton Ku and Brian Bruen (2013). *The Use of Public Assistance Benefits by Citizens and Non-citizen Immigrants in the United States*. Cato Institute. Available at: [https://object.cato.org/sites/cato.org/files/pubs/pdf/workingpaper-13\\_1.pdf](https://object.cato.org/sites/cato.org/files/pubs/pdf/workingpaper-13_1.pdf)

### **The Proposed Rule is Not Only Cruel, But Counterproductive**

The proposed changes to the public charge rule do nothing to promote “self-sufficiency” by penalizing tax-paying immigrants who came to the United States to improve their circumstances, and make better lives for their children. Instead, it accomplishes the opposite by forcing people to forgo benefits like SNAP, which have had decades of evidence-based success in lifting Americans out of poverty and hunger. When the “self-sufficiency” argument is considered alongside the evidence presented here, little justification remains for these changes—aside from xenophobia and classism.

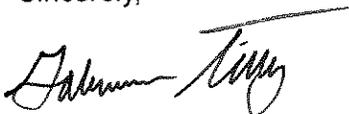
SNAP, housing assistance, and Medicaid all address symptoms of poverty that keep people locked in cycles of instability. In doing so, these programs make entire communities healthier, while creating opportunity for the next generation to achieve financial security. This vision of a future where all people have what they need to thrive holds more promise for our country than the myopic perspective presented in this proposal.

### **CFPA Urges DHS to Rescind This Proposal**

Given our over 25 years of experience in fighting for Californians’ right to have equitable access to nutritious foods, CFPA stands in opposition to changes to public charge that would increase hunger and poverty. We firmly assert that people eligible for public assistance should not be penalized or suffer adverse immigration consequences for participating. Helping immigrants obtain the nutrition they need is an investment that strengthens our communities in California, and communities across the country. This rule runs counter to the national identity we aspire to realize. Our nation should be one in which all of us are allowed to live and work with dignity. These changes to public charge would decimate the vision of a more inclusive, healthier country that can be resilient in the face of life’s challenges. Foreign-born or native-born: we would all be worse off as a result.

We ask that DHS immediately withdraw this proposed rule. Forcing families to choose between their ability to care for and ensure the well-being of their children is cruel and contrary to our legacy as a nation that provides opportunity to all.

Sincerely,



Gabrielle Tilley

Policy Advocate

California Food Policy Advocates