



One in Six Adults in California Immigrant Families Reported Avoiding Public Benefits in 2019

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California has moved proactively to support immigrant families in response to restrictive federal immigration and safety net policies, but policies like the new “public charge” rule still pose risks, especially in the context of the COVID-19 pandemic. The new rule significantly expands the criteria for determining whether applicants for permanent residency, or green cards, may be denied based on past or potential use of government benefit programs. Even before the rule took effect in February 2020, widespread chilling effects were evident. Nationwide, many immigrant families—including those who would not be subject to the rule—avoided enrolling in public benefit programs for fear of immigration consequences (Bernstein et al. 2019; Bernstein, McTarnaghan, and Gonzalez 2019; Straut-Eppsteiner 2020; Tolbert, Artiga, and Pham 2019).

This phenomenon has become even more alarming during the COVID-19 pandemic, in which many immigrant families are vulnerable to acute medical and economic hardship. Families may avoid medical care and public supports for fear of being deemed a public charge, despite formal clarification by the federal government that COVID-19 testing and treatment will not be considered. This issue is magnified in a state like California, where one in four people were born outside the US (foreign born) and nearly half of nonelderly adults live in families with at least one foreign-born member.¹ Thus, it is critical to understand how the rule is affecting immigrant families, where these families are getting their information about the rule, and which sources they trust to communicate accurate messages about the rule and its impacts.

This brief draws on unique data from California participants in the Well-Being and Basic Needs Survey (WBNS), a nationally representative, internet-based survey conducted in December 2019. This survey round assessed awareness and knowledge of the public charge rule, sources of information on the rule, and chilling effects reported by adults in immigrant families who speak English or Spanish. The California sample included 498 nonelderly adults born outside the US or living with one or more foreign-born family members (hereafter called adults in California immigrant families), who make up about 46 percent of all nonelderly adults in California and about one-quarter of all nonelderly adults in the US, according to the 2018 American Community Survey. We complemented survey findings with follow-up interviews with 17 adults in California immigrant families who reported experiencing chilling effects in the WBNS. We find the following:

- Chilling effects for adults in California immigrant families increased between 2018 and 2019.
 - » Of all adults in California immigrant families, 17.7 percent reported that they or a family member did not participate in a noncash government benefit program, such as Medi-Cal (California's Medicaid program), CalFresh (California's Supplemental Nutrition Assistance Program), or a housing program, in 2019 for fear of risking future green card status, up from 12.2 percent in 2018.
 - » Follow-up interviews described how these decisions to stop or avoid program participation were based on limited information and abundant caution.
- Awareness of and confidence in understanding of the public charge rule were widespread, but many adults in California immigrant families did not understand key aspects of the rule.
 - » Two-thirds of adults in California immigrant families (65.3 percent) were aware of the public charge rule and 69.9 percent were confident in their understanding of the rule. Yet, only 22.5 percent knew it does not apply to citizenship applications, and only 18.2 percent knew children's enrollment in Medi-Cal will not be considered in their parents' public charge determinations.
 - » Follow-up interviews also illustrated confusion and misunderstanding about the rule, including about who it applies to and when it takes effect.
- Adults in California immigrant families were most likely to trust government agencies and legal professionals for information about how using public benefits would affect their or their family member's immigration status, but very small shares reported getting information on the public charge rule from these sources.
 - » Legal professionals were the most trusted source (67.9 percent), followed by US Citizenship and Immigration Services (USCIS; 63.3 percent), state government agencies (55.4 percent), and local government agencies (50.4 percent), but most adults in California immigrant families reported getting information on the rule from the media or personal networks, which they trust less.
 - » Follow-up interviews confirmed a desire for official information from government sources, highlighted barriers to accessing legal assistance, and confirmed a reliance on personal networks and media for information on the rule, as well as mistrust of the media.

Background

As part of a broader policy agenda to limit immigration, the Trump administration has enacted significant changes to implementation of public charge determinations (box 1), part of the admissions process for permanent residency and temporary visas. The administration moved to significantly expand the rule in 2018. After circulating drafts of the new rule and a vigorous public comment period,² litigation efforts temporarily halted implementation of the final rule.³ This included several lawsuits in California, including one led by California Attorney General Xavier Becerra in partnership with several other states.⁴ However, Supreme Court rulings in January and February allowed the administration to begin implementing the rule nationally while legal challenges continued in the lower courts. The rule took effect nationwide on February 24, 2020.⁵

BOX 1

What Is the New Public Charge Rule?

The new public charge rule vastly expands the criteria through which immigrant applicants may be denied admission to and residency in the US for having received public benefits or being deemed likely to receive public benefits in the future. Departing from past practice, where only primary reliance on cash benefits or long-term medical institutionalization were considered, the new rule redefined the “totality of circumstances” test to consider not only previous use of certain cash *and* noncash benefits but a wide range of personal characteristics, including income and assets, age, health, family size, and education and skills, like English proficiency.

The new rule expands the list of benefits to be considered in a public charge determination to include SNAP (formerly known as food stamps), nonemergency Medicaid for nonpregnant adults ages 21 and over, and Section 8 housing assistance or public housing. The revised public charge determination does not consider receipt of federally funded Medicaid for emergency care, pregnancy-related care, or care for children under age 21, nor, in California, state-funded Medi-Cal for undocumented children and young adults ages 19 to 25 (ITUP 2019a).

The rule applies to applications for green cards from within the US and abroad, applications for temporary visas from abroad, and changes or extensions to temporary visas from within the US (e.g., student visas). The rule does not apply to citizenship applications or green card renewals, though a green card holder who leaves the US for more than six months may be subject to a public charge test. Several humanitarian admission groups are exempted, including refugees and asylees; survivors of trafficking, domestic violence, or other serious crimes (T or U visa applicants and holders); Violence Against Women Act self-petitioners; and special immigrant juveniles (Protecting Immigrant Families 2020a).

In addition to expectations that the rule will transform immigrant admissions by excluding many applicants from Asia, Latin America, and Africa,⁶ there is significant concern about the chilling effects produced by the rule, as immigrant families avoid benefit programs and other resources for which they may be eligible for fear of risking a potential public charge determination. More than 200 pages long, the new regulation is confusing to both families and service providers about who is subject to a public

charge test, whose benefit receipt will be considered, and which programs will be considered. This confusion may explain why many families have opted out of programs to avoid potential risks to their immigration status despite suffering negative consequences to their health and well-being (Bernstein, McTarnaghan, and Gonzalez 2019; Greenberg, Feierstein, and Voltolini 2019; Protecting Immigrant Families 2020b; Straut-Eppsteiner 2020). In addition, legal professionals may advise extreme caution and avoidance of benefit programs because of the potential immigration consequences (Bernstein, McTarnaghan, and Gonzalez 2019) and their limited understanding of eligibility for benefits (Straut-Eppsteiner 2020).

Families across the US, including in California, have experienced increasing fear and insecurity around changes in federal immigration policies and heightened immigration enforcement over the last several years, which has led many to avoid engaging with public services and their communities (Ben-Porath et al. 2020; Children's Partnership and California Immigrant Policy Center 2018). Estimates of potential chilling effects in California produced during the public charge rule's formal comment period predicted that up to 2.2 million people could disenroll from Medi-Cal and CalFresh because of the rule, two-thirds of them children (Ponce, Lucia, and Shimada 2018). Half of children in California have at least one immigrant parent, and they make up 60 percent of children in families with incomes below 200 percent of the federal poverty level (Children's Partnership and Kidsdata.org 2018).

Though California is one of the most progressive states when it comes to immigrant eligibility for public benefits, residents are still experiencing chilling effects because of federal immigration policies. California has filled gaps in federal safety net eligibility rules in several ways. It was among the first states to expand Medicaid to a greater number of nonelderly, low-income adults under the Affordable Care Act.⁷ Further, many lawfully present immigrants are barred from enrolling in federally funded Medicaid for five years after obtaining lawfully present status (known as the five-year bar), but California eliminates this five-year bar for lawfully residing pregnant mothers and children (Kaiser Commission on Medicaid and the Uninsured 2015). Unique in the US, California also extends Medi-Cal eligibility to undocumented children and young adults under age 26 (ITUP 2019b). California also uses state funds through its California Food Assistance Program to extend Supplemental Nutrition Assistance Program (SNAP) eligibility to qualified immigrants during the five-year bar.

Our previous analysis of survey data collected in December 2018, during the public comment period on the then-proposed rule, found that one in seven adults in immigrant families—and one in five adults in low-income immigrant families—nationwide reported chilling effects in the previous year (Bernstein et al. 2019). Qualitative follow-up interviews with survey respondents in spring 2019 highlighted their fear and confusion about the rule, a reliance on the media for information and little access to professional advice, and hardship for adults and children after losing supports (Bernstein, McTarnaghan, and Gonzalez 2019). This brief draws on new WBNS data collected from adults in immigrant families in December 2019, after release of the final rule but before implementation, and 17 follow-up telephone interviews with adults in California immigrant families conducted in February and March 2020, around the time of implementation. These data provide unique information on trends in chilling effects in California, as well as information on the level of awareness and knowledge of the

rule, where immigrant families are getting their information on public charge, and which sources they trust to provide helpful information about how using public benefits could affect their immigration status. This information is critical during this unprecedented health and economic crisis, when, like all families, immigrant families in California will need supports.

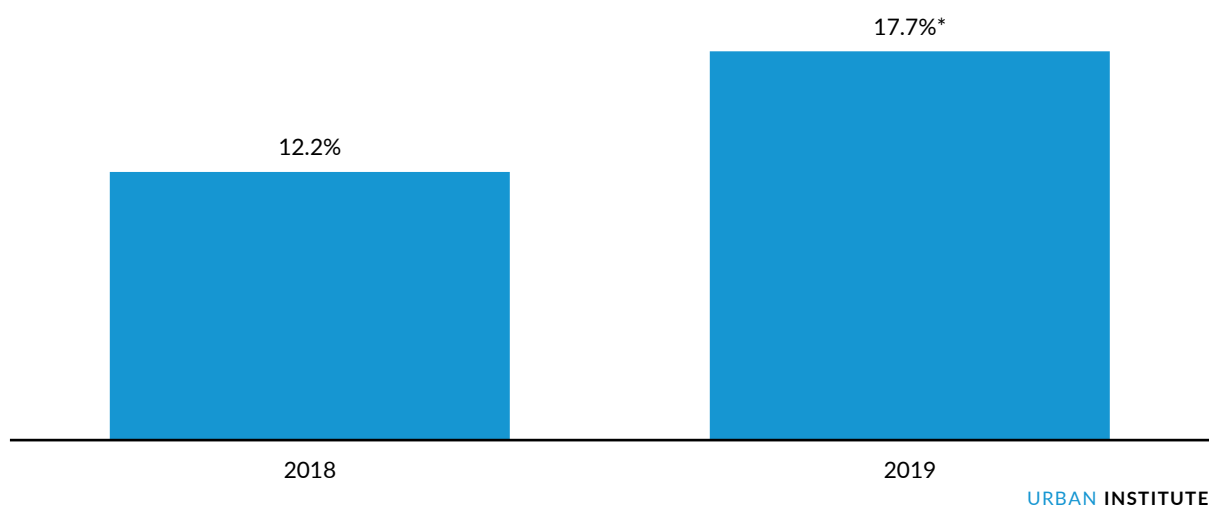
Findings

Chilling effects for adults in California immigrant families increased in 2019.

Controlling for the demographic characteristics of adults in each survey round, we find that chilling effects increased among adults in California immigrant families between 2018 and 2019 (figure 1). In 2019, 17.7 percent of adults reported that they or a family member avoided a noncash government benefit program (e.g., Medi-Cal/CHIP, CalFresh, or housing subsidies) for fear of risking future green card status, up from 12.2 percent in 2018. This change was statistically significant at the 0.10 level. Nationally, 15.6 percent of adults in immigrant families reported chilling effects in 2019, but we did not find a statistically significant increase from 2018 to 2019 (data not shown).⁸

FIGURE 1

Share of Adults in California Immigrant Families Who Avoided Noncash Government Benefits in the Past Year Because of Green Card Concerns, December 2018 and 2019



Source: Well-Being and Basic Needs Survey, December 2018 and December 2019.

Notes: Adults are ages 18 to 64. Estimates are regression adjusted for a respondent's gender, age, race and ethnicity, educational attainment, family size, chronic health conditions, residence in an urban or rural area, internet access, homeownership status, citizenship status, family composition, and family income as a percentage of the federal poverty level; the presence of children under age 19 in the respondent's household; whether the respondent participated in both the 2018 and 2019 survey rounds; and how long the respondent has been a member of the KnowledgePanel.

*/**/** Estimate differs significantly from 2018 at the 0.10/0.05/0.01 level, using two-tailed tests.

If adults in California immigrant families avoid Medicaid or subsidized Marketplace health insurance coverage because of immigration concerns, they likely have few alternative coverage options. Nearly 4 in 10 adults in California immigrant families (39.6 percent) do not have access to employer-sponsored health insurance (data not shown).

Follow-up interviews suggested uncertainty and confusion about the rule had encouraged many respondents to avoid programs despite need. Interviewees noted that they avoided applying for or dropped out of programs out of an abundance of caution, a lack of understanding of how the public charge rule may affect them in the future, and the desire to avoid jeopardizing any future immigration processes. One interviewee said fear around the public charge rule was the reason she did not pursue CalFresh and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), even though she had experienced an illness and needed support:

El año pasado yo estuve enferma...y estuve a punto de aplicar para CalFresh pero me dio miedo. Me dio miedo porque yo dije, no, no quiero ser una carga pública, no quiero que me afecte. El WIC incluso. Están diciendo...que sería mejor no continuar en el WIC porque [toda] esa comida, leche, y los vales que le dan para jugo, esto y lo otro, pues, el gobierno es el que lo está pagando.

Last year I was sick...and I was about to apply for CalFresh, but I got scared. I got scared because I thought, no, I don't want to be a public charge, I don't want this to affect me. WIC even. They're saying...that it would be best not to continue with WIC because [all the] food, milk, and vouchers that they give you for juice, this and that, well, it's the government that's paying for it.

In many cases, interviewees reported making quick decisions about participating in benefit programs based on limited information. One person recalled withdrawing from programs after hearing a lawyer on television:

Nada más escuché el abogado en la televisión. Pensé que no era conveniente [continuar con los beneficios]. Si el gobierno lo considera como carga pública, no está bien que siga recibiendo ese servicio.

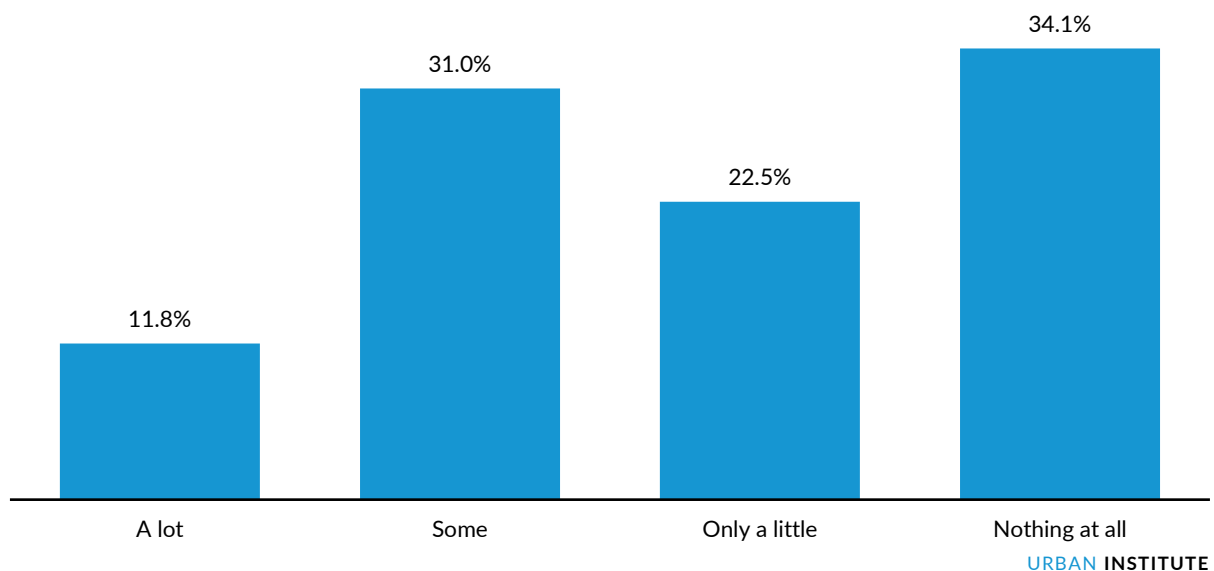
I just heard a lawyer speak on TV. And then I thought it wasn't a good idea [to continue receiving services]. If the government considers it a public charge, then it is not ok to continue receiving the program.

Awareness of and confidence in understanding of the public charge rule were widespread, but adults in California immigrant families did not understand key aspects of the rule.

Overall, nearly two-thirds of adults in California immigrant families reported hearing at least a little about the public charge rule (figure 2). Seven in 10 adults in California immigrant families who were familiar with the public charge rule (i.e., excluding those who have heard nothing about the rule) reported being very or somewhat confident in their understanding (data not shown).

However, most adults in California immigrant families who have heard about the rule either do not know or do not understand what the rule does and who it applies to. Though almost half (47.5 percent) knew the new rule expanded the list of benefits considered in public charge determinations, only 22.5 percent knew it does not apply to citizenship applications, and 18.2 percent knew children's enrollment in Medicaid will not be considered in their parents' public charge determinations (figure 3).

FIGURE 2
How Much Adults in California Immigrant Families Have Heard about the Public Charge Rule, December 2019

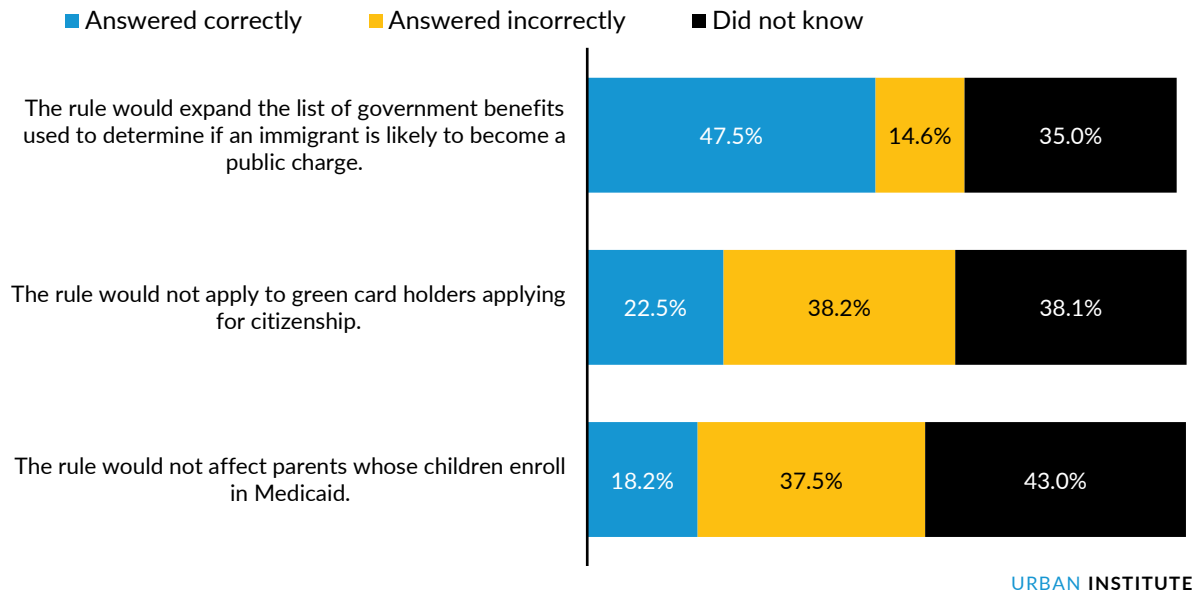


Source: Well-Being and Basic Needs Survey, December 2019.

Notes: Adults are ages 18 to 64. Data for this survey question are missing for 0.6 percent of the sample.

FIGURE 3

Understanding of Key Parts of the Public Charge Rule among Adults in California Immigrant Families Who Have Heard about the Rule, December 2019



Source: Well-Being and Basic Needs Survey, December 2019.

Notes: Adults are ages 18 to 64. Respondents were asked whether statements about the public charge rule were true or false and were randomly assigned to different wording for the second and third statements (e.g., “would apply” versus “would not apply” for the second statement). We present the true statements here. Missing data are not presented, so totals do not add up to 100.

The follow-up interviews confirmed a lack of understanding of the rule: Most of the 17 interviewees recognized the term public charge and described it as a federal policy change that would make it difficult for immigrants to adjust their immigration status if they used public benefits. But interviewees were confused about which programs would be considered and who would be affected. Reinforcing the survey findings, some interviewees incorrectly believed the rule would apply to naturalized citizens and permanent residents and did not know which programs would be considered:

Si pides cualquier ayuda del gobierno, pueden negarte tu residencia. O incluso ciudadanía.

If you get any aid from the government, they can deny you your residency. Even citizenship.

Several interviewees noted that the rule has many exceptions, making it difficult for them to understand if it would apply in their specific cases and if they should change their benefit usage as a result. One respondent was advised not to cancel government benefits before the rule took effect. But with the rule now in place, she considered whether the rule's exceptions would include her case:

Me dijeron que...no debería de cancelar [el beneficio] por el momento, que...en ese tiempo, según [la norma] todavía no entraba en vigor. Ahora sí ya entró en vigor, pero yo tengo entendido que...aun así, hay excepciones, no es...parejo para todos, no lo es.

They told me that...I shouldn't cancel [benefits] for the moment, that...at that time, supposedly [the rule] was not in effect yet. Now that it is in effect, it is my understanding that...even so, there are exceptions, it isn't...one size fits all for everyone, it isn't.

Interviewees also expressed confusion about whether the rule was already in effect. Though they did not mention dates, some interviewees heard the rule had already taken effect early in 2020. Others believed the rule had been in effect since late 2019, and still others were unsure of the rule's status because they had heard about ongoing legal challenges. According to one interviewee, the confusion over the revised rule's implementation—including the status of various legal challenges—has caused people to stop receiving benefits:

Estaban diciendo, y que le he podido explicar a algunas personas, es que la ley va a entrar en vigencia el 24 de febrero, pero hay unos abogados que están en defensa...están demandando...Por ahorita [la norma] va a entrar en vigor, pero que no va a ser definitivo. Pero ahí donde dice—no va a ser definitivo o va a entrar en vigor—es donde empieza la confusión, porque muchas personas ya están parando de pedir la ayuda.

They were saying, and what I have been able to explain to some people, is that the rule will take effect on February 24, but there are some attorneys on the case...they're suing...For now [the rule] will be implemented, but it won't be definitive. But see, that there—that it's not definitive or that it will be implemented—is where the confusion starts, because already many people are not seeking out aid.

Interviewees seldom had accurate information about the rule, but a few interviewees had sought out information and confirmed whether they would be affected by the rule. One said she avoided SNAP because she heard it could affect her chance of obtaining a green card. But after researching the topic on her own, she realized the rule would not affect her immigration case because children's receipt of benefits is not included in parents' public charge determinations. Because her children—not she—received benefits, she decided to reenroll them.

Some interviewees understood which programs were included in the rule. As an undocumented immigrant, one interviewee knew she would be ineligible for the types of programs included in the rule, though her children were. She also knew which programs would be considered:

Pues, lo que he escuchado es...que inmigrantes que quieren arreglar sus papeles...Se me hace que [si durante] los últimos 12 meses han estado agarrando los beneficios de estampillas, Medi-Cal, Sección 8, les van a afectar. Pero...depende, no es para todos eso...A veces me siento un poco confundida. Sí entiendo la información que están diciendo, pero a la vez me siento un poco confundida. Lo que no entiendo es, ¿cómo es carga pública la persona? Por ejemplo, yo, aunque no quiera, yo agarro los beneficios de estampillas, pero son para mis hijos, no son para mí porque, aunque yo quiera...no me las dan a mí, no soy elegible. Igual, la Medi-Cal, tampoco. No la puedo yo tener. Entonces es lo que yo no entiendo. Cuando yo pregunté con un abogado eso me dijo: "No, eso no le afecta porque los beneficios que usted agarra no son para usted, son para sus hijos." Entonces por eso le digo, a veces me siento confundida de eso.

Well, what I've heard is that...for immigrants seeking to fix their papers...I believe that [if] they have been using food stamp benefits, Medi-Cal, Section 8 [during] the last 12 months, it will affect them. But...it depends, because it doesn't apply to everyone...I sometimes feel a bit confused. I do understand the information they're saying, but at the same time I feel a bit confused. What I don't get is, how can a person be a public charge? For example, I, even if I don't want to, I get food stamp benefits, but they're for my children, not for me, because even if I wanted them...I wouldn't get them, I'm not eligible. Same thing with Medi-Cal. I can't get that. So that's what I don't get. When I asked a lawyer, that's what he told me: "No, that won't affect you because the benefits you get are not for you, they're for your children." That's why I'm telling you, sometimes I feel confused about this.

Even interviewees with a more sophisticated understanding of the rule's details expressed general confusion and uncertainty about how to obtain concrete information about the rule.

Adults in California immigrant families were most likely to trust government agencies and legal professionals for information about how using public benefits would affect their or their family member's immigration status.

In addition to trusting lawyers and legal aid organizations, adults in California immigrant families who heard about the public charge rule were most likely to report high levels of trust in government sources, like USCIS and state and local agencies, to provide helpful information if they had a question about how public benefits use would affect their or their family member's immigration status. But among adults in California immigrant families who heard about the rule, the most trusted sources were also least likely to have been a source of information on the public charge rule. For instance, most adults would trust information from USCIS a great deal or a lot (63.3 percent), but only 8.3 percent reported hearing about the public charge rule from this source. This was similar for state agencies, which 55.4 percent of adults reported trusting but only 2.4 percent got information from, and local agencies, which 50.3 percent of adults reported trusting but only 1.2 percent reported getting information from (figure 4).

Consistent with this finding, none of the 17 interviewees reported receiving information about the public charge rule through any government agency. However, several strongly desired information from official government sources, especially their county government. One interviewee described how government would be trustworthy, and they would prefer to hear directly from those entities rather than by word of mouth:

Me gustaría que viniera directamente del estado, del que impone las leyes. Del gobierno, o del county o del estatal. Yo no quiero escuchar de la bodeguita o de fulanita de tal. Yo quiero escucharlo de una institución confiable.

I'd like it to come directly from the state, from those in charge of the law. From the government, whether county or state. I don't want to hear from the *bodeguita* or from so-and-so. I want to hear it from a reputable institution.

A few interviewees specifically noted that social workers in government benefits offices could be well positioned to provide answers and are a trusted source of information. In one respondent's opinion, staff at government benefits offices should be informed about new rules, laws, and policies and could help inform people about how they may affect immigration processes:

Yo pienso que a las diferentes oficinas de esos programas—CalFresh, WIC, Medi-Cal—e ir a cada oficina y tener unas ciertas preguntas específicas de migración...Yo pienso que los trabajadores de estos programas podrían ayudarlos mejor y si están enterados de las noticias, de las nuevas reglas, nuevas políticas, leyes, y cómo podrían estar informados.

I think to the different program offices—CalFresh, WIC, Medi-Cal—and going to each office and having specific questions about immigration...I think that the staff in those programs could help more if they are up to date on the news, new regulations, new political developments, laws, and how they could be more informed.

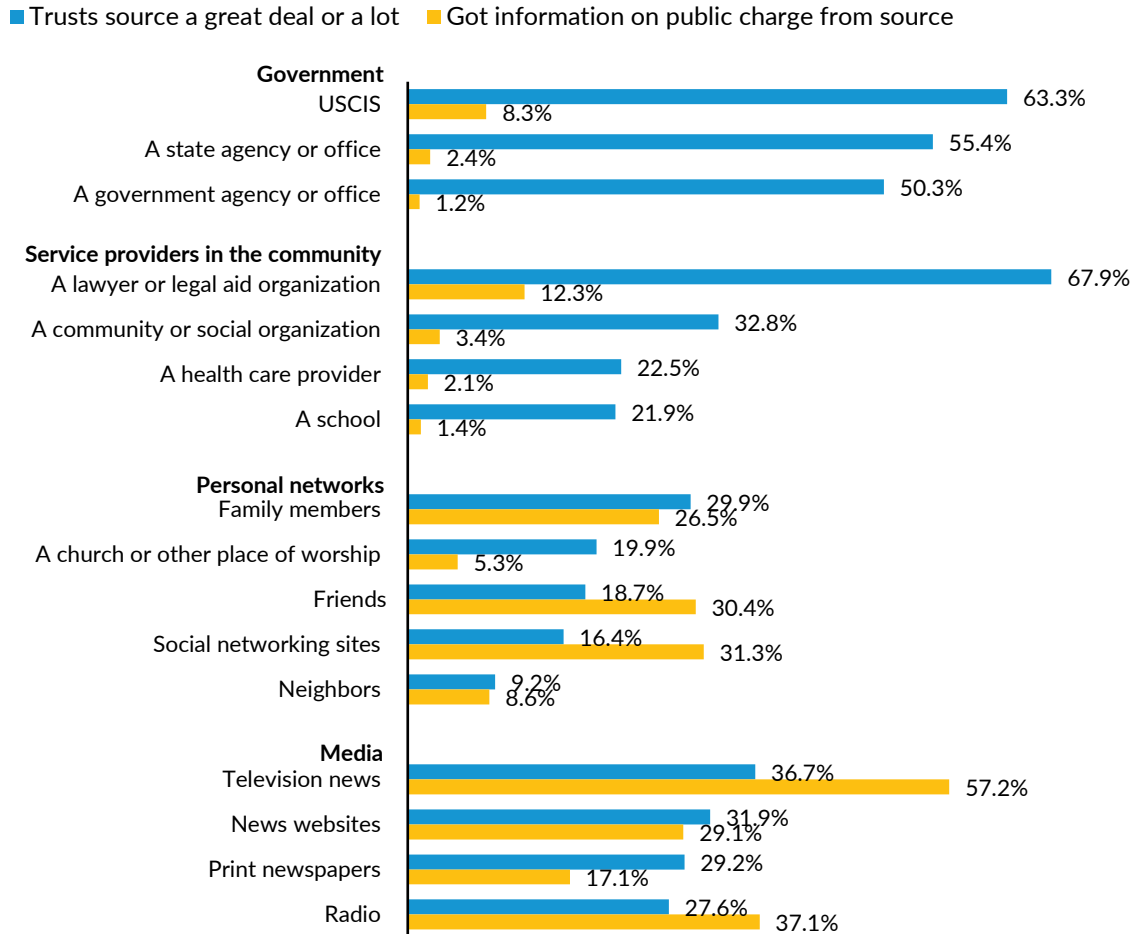
The survey results show adults in California immigrant families also have high levels of trust in lawyers and legal aid organizations, but low shares actually received information on the public charge rule from legal professionals: 67.9 percent of adults in California immigrant families who heard about the rule would trust the advice of a lawyer or legal aid organization, but only 12.3 percent got information about the rule through this source (figure 4).

The follow-up interviews shed some light on this discrepancy. Most interviewees volunteered lawyers as one source they would most trust for information about the rule. However, interviewees cited barriers to getting legal assistance, including not being able to afford private legal services, not knowing how to access *pro bono* legal services, and concerns that long wait times for appointments for *pro bono* legal services would make it impossible to get a timely response.

A relatively low share of adults in California immigrant families reported receiving information on public charge from community or social organizations (3.4 percent). In the follow-up interviews, no interviewees reported receiving information from community-based organizations, even though some interviewees had previously accessed information about government programs through organizations like community health clinics or home visiting programs.

FIGURE 4

Trusted Sources of Information on How Using Public Benefits Affects Immigration Status and Sources of Information on the Public Charge Rule Consulted by Adults in California Immigrant Families Who Have Heard About the Rule, December 2019



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Source: Well-Being and Basic Needs Survey, December 2019.

Notes: USCIS = United States Citizenship and Immigration Services. Adults are ages 18 to 64. Health care providers include hospitals, doctor's offices, health clinics, or other health care providers. Social networking sites are platforms such as Facebook, Twitter, WhatsApp, or WeChat.

The sources from which adults in California immigrant families were most likely to have received information on the rule were considered less trustworthy. Television news was the most common source of information about the rule (57.2 percent). However, only 36.7 percent of adults reported a high level of trust in television news as a source of information about public benefits use and immigration status. Similarly, 31.3 percent of adults learned about the rule from social media, but only 16.4 percent placed a high level of trust in social media as a source of helpful information.⁹

The follow-up interviews also confirmed that personal networks and television news are immigrant families' primary sources of information on the public charge rule, despite interviewees having reservations about the quality of information from these sources. Interviewees cited television, friends, and family as key sources of information about the public charge rule, but they also expressed doubt that the information they received from those sources was reliable. With television media specifically, interviewees were concerned that coverage of the rule was producing fear in the audience. One interviewee said she relies on major Spanish-language media networks and trusts they provide full and accurate details, but she also believed they tend to exaggerate:

Sinceramente, hay dos medios latinos... A veces he visto también que exageran, pero dan como una información precisa. Últimamente lo han dicho...por ejemplo...de las personas que pueden aplicar para estos programas, no son todos, pero algunos, con excepción—no van a tener problemas a la hora de arreglar un documento.

Honestly, there are two Latino media outlets... Sometimes I've also seen them exaggerate, but they [can] give precise information. Lately they've said that...for example...of the people who apply for these programs, not all of them, but some of them, with exceptions, are not going to have trouble when it comes time to fix their papers.

Most interviewees reflected that their decisions to stop participating in or avoid applying for a benefit program were solely based on information from television news, social media, or conversations with friends. Additionally, most interviewees did not fully understand whether or how the rule would apply in their particular case. One interviewee said people like herself need more information to make better decisions about whether to avoid or participate in benefit programs:

Sería bueno tener...más información sobre eso de la carga pública, principalmente para todas las personas que necesitan o están en trámite de arreglar su situación migratoria. Porque ya conociendo los pros y los contras de tener esas ayudas o no tenerlas, ya uno buscaría la forma de vivir sin ellas...Y si realmente no afectan [los beneficios]...que la sigan utilizando.

It would be good to have...more information about public charge, especially for those who need to or are in the process of fixing their immigration status. Because knowing the pros and cons of getting that aid or not, one could find a way to live without it...And if the [benefits] really won't affect [one's immigration status]...to continue using them.

Discussion

These findings echo those in our companion brief focused on adults in immigrant families nationally (Bernstein et al. 2020). They show that chilling effects expanded among California immigrant families between 2018 and 2019, as the public charge rule was finalized and entered litigation and as its status remained unclear to the public. These results are alarming in the unprecedented context of the COVID-19 pandemic. Given limited access to and fear of participation in public benefits programs and disproportionate exposure to the virus from working in the most directly affected industries, immigrant communities are particularly vulnerable to threats to health and well-being during the current crisis (Gelatt 2020; Gonzalez et al. 2020). USCIS released guidance on March 13 clarifying that seeking out testing for or treatment of COVID-19-related illness would not be considered in public charge determinations, but the implementation details remain unclear, and the fear and confusion swirling around the rule will be difficult to pierce. The Supreme Court also rejected requests to suspend implementation of the rule during the pandemic.¹⁰ Many worry that immigrant families may be afraid to enroll in public programs that expand access to medical testing and treatment for COVID-19, putting into sharp relief the public health risks of these chilling effects.¹¹

These results show where California immigrant families have been getting information about the public charge rule, which is not consistent with the sources they are most likely to trust on questions related to public benefits and immigration matters. They suggest a desire for more information from government sources and a need to reduce barriers to legal assistance. Our findings also uncover details on the lack of knowledge and the extent of misunderstanding about the public charge rule and who it applies to. They suggest that decisions to drop out of benefit programs are being made amid confusion about the rule.

Though California has moved far beyond other states in expanding eligibility for benefit programs to support multiple-immigration-status families and undocumented residents, federal policies like the public charge rule are still leading immigrant families to fear program participation because of concerns about immigration consequences. California government agencies must continue educating and reassuring families struggling to understand the rule, which has become even more urgent during the COVID-19 crisis. Our results suggest state, county, and city government agencies have significant roles to play in educating the public and disseminating accurate information about the rule, as noted in recent research (Vision Strategy and Insights 2020). Messaging efforts from state officials, who have been outspoken in their defense of immigrant rights and protections against excessive federal immigration enforcement, can be particularly important in localities where immigrants feel less welcome. Communications from government agencies may be more powerful than those from community-based organizations.

Families have questions about the specifics of their own situations, and individual legal assistance is needed to complement broader public education efforts. Free and low-cost legal services, like those funded by the state in California,¹² could also bridge divides between legal assistance providers and social workers, who have different areas of expertise and may offer conflicting advice to families

weighing program participation decisions with potential immigration consequences. Though workers in benefit program offices should not necessarily advise clients on the potential immigration consequences of program participation, they should be equipped to refer clients to accessible legal assistance.

Excluding multiple-immigration-status families and those lacking Social Security numbers from federal relief measures, like the Coronavirus Aid, Relief, and Economic Security, or CARES, Act, risks leaving out many people in need (NILC 2020). Not only does excluding this group endanger many people suffering from economic and medical hardship, it also limits the impact of efforts to protect community well-being and boost the overall economy. In California, state and local efforts to fill the gaps left by the federal government have so far included clarification that emergency Medicaid covers COVID-19 testing and treatment, a \$75 million emergency relief fund for undocumented immigrants, an executive order to protect continuous access to safety net services, creation of multilingual educational materials, supports for immigrant-owned businesses, and protections from evictions and utilities shut-offs for renters.¹³ To both weather and recover from the current crisis, California immigrant families need wider eligibility for federal relief and coordinated efforts among state, county, and city government agencies and their partners to mitigate chilling effects and ensure access to health care and supports.

Data and Methods

Data

SURVEY DATA

We draw on data from the December 2019 round of the Well-Being and Basic Needs Survey, a nationally representative, annual survey of adults ages 18 to 64 launched in December 2017.¹⁴ Our analysis is based on the WBNS core sample and an oversample of noncitizens. To assess chilling effects and related issues specific to California, we constructed a set of weights for analysis of the California population of nonelderly adults who are foreign born or living with a foreign-born relative in their household. The weights are based on the probability of selection from the KnowledgePanel and benchmarks from the American Community Survey for nonelderly adults in immigrant families in California who are proficient in English or primarily speak Spanish.¹⁵ The language criterion is used in the weighting to reflect the survey sample, because the survey is only administered in English or Spanish. Our full analytic sample for this brief consists of 498 adults in California immigrant families.

SEMISTRUCTURED INTERVIEW DATA

To learn more about where families get their information on eligibility for and use of public benefits and related implications for immigration status, our research team conducted follow-up telephone interviews with adults in California immigrant families who (1) reported chilling effects on the survey, meaning they or a family member avoided participating in noncash public programs (e.g., Medicaid/CHIP, SNAP, or housing assistance) in 2019 because of worries about future green card

status and (2) were willing to be contacted about participating in a follow-up interview. The interview recruitment pool consisted of 45 adults in California immigrant families.¹⁶

All but one interview was conducted in Spanish, and interviews generally lasted 20 minutes. The interviews included questions on knowledge about, sources of information on, and access to information on government benefit programs and the public charge rule; decisionmaking related to the rule; and experiences of chilling effects. The 17 interviewees were diverse in regions of residence, ages, citizenship/immigration statuses, and other demographic characteristics (table 1).

TABLE 1
Interviewees' Demographic Characteristics

	Number of interviewees
Interview language	
Spanish	16
English	1
Respondent citizenship and immigration status	
Naturalized citizen	3
Noncitizen	12
Permanent resident	5
Not a permanent resident	7
US-born	2
Age	
25–34	4
35–44	4
45–54	6
55–64	3
Race/ethnicity	
Hispanic	15
Non-Hispanic, other or multiple races	1
Non-Hispanic white	1
Marital status	
Married	13
Living with a partner	2
Not married and not living with a partner	2
Educational attainment	
Less than high school	3
High school graduate	5
Some college	7
Bachelor's degree or higher	2
Number of people in the household	
1	1
2–4	11
5–6	5
Household citizenship and immigration status	
All foreign-born family members are naturalized citizens	4
All noncitizens are permanent residents	5
One or more noncitizens are not permanent residents	8

Sources: Interview language was collected in the December 2019 round of the Well-Being and Basic Needs Survey. All other characteristics come from Ipsos' panel profile questions, which respondents complete when they first join the KnowledgePanel and is updated annually.

Note: Permanent residents are green card holders; we use the latter term in this brief.

Survey Measures

CHILLING EFFECTS WITHIN A FAMILY

For all 498 adults in California immigrant families in our sample, we define chilling effects as either not applying for or stopping participation in a noncash government benefit program, specifically Medicaid or CHIP, SNAP, or housing subsidies, within the previous 12 months because of concerns that the respondent or a family member could be disqualified from obtaining a green card.¹⁷ We also collected information on avoidance of additional programs not listed in the public charge rule, including WIC and Marketplace health insurance coverage.¹⁸ A respondent could have defined family as both their immediate family and other relatives who may live with them or in another household. Respondents may have reported chilling effects for a program for which they may not have been eligible; for instance, some parents likely reported chilling effects on the program participation of a citizen child, or a higher-income respondent may have reported chilling affecting a relative with lower income.

AWARENESS OF THE PUBLIC CHARGE RULE

We asked all adults in immigrant families in our sample to report how much they had heard about the public charge rule:¹⁹ a lot, some, only a little, or nothing at all.

GENERAL UNDERSTANDING AND CONFIDENCE IN UNDERSTANDING OF THE PUBLIC CHARGE RULE

For the following measures, we report estimates for the 367 adults in California immigrant families who reported having heard at least a little about the public charge rule.

Confidence in understanding of the rule. This measure indicates whether respondents reported that they were very, somewhat, not too, or not at all confident in how well they understood the public charge rule.

Understanding of the public charge rule. To gauge understanding of key elements of the rule, we asked respondents to report whether they thought three statements about the rule were true or false (respondents could also answer “don’t know”). These statements included (1) whether the rule would expand the list of government benefits used to determine if an immigrant is likely to become a public charge (true); (2) whether the rule would apply to green card holders applying for citizenship (false); and (3) whether parents could have a harder time getting a green card if their children enroll in Medicaid (false). Respondents were randomly assigned to affirmative or negative versions of the second and third statements. Figure 3 shows the true version of each statement.²⁰

SOURCES OF INFORMATION AND TRUSTED SOURCES

The following two measures are also based on the 367 adults in California immigrant families who reported having heard at least a little about the public charge rule.

Sources of information about the public charge rule. To understand where adults in immigrant families have been getting their information, we asked respondents who heard about the rule to report

all the sources from which they had heard about it, listing options encompassing government sources, service providers, personal networks, and media.

Trusted sources on public benefits use and immigration. We asked respondents to report how much they would trust various sources to provide helpful information if they had a question about how using public benefits affects their immigration status or that of someone in their family, providing the same options listed above. Respondents could report trusting each source a great deal, a lot, somewhat, not much, or not at all.

ACCESS TO EMPLOYER-SPONSORED HEALTH INSURANCE

Finally, we define access to employer-sponsored health insurance as having health insurance coverage through an employer or, for those without such coverage, whether their or a family member's employer *offers* health insurance.

Analysis

We first compare chilling effects between 2018 and 2019 for adults in California immigrant families overall. These estimated changes are regression adjusted to control for any changes in the demographic characteristics of the adults in immigrant families participating in each survey round. We control for a respondent's gender, age, race and ethnicity, educational attainment, family size, chronic health conditions, residence in an urban or rural area, internet access, homeownership status, citizenship status, family composition, and family income as a percentage of the federal poverty level; presence of children under age 19 in the respondent's household; whether the respondent participated in both the 2018 and 2019 rounds of the survey; and how long the respondent has been a member of the KnowledgePanel.

Next, we examine awareness of the public charge rule among adults in California immigrant families.²¹ We assess knowledge of the rule overall and among those who reported being very or somewhat confident in their understanding of the rule. We then compare respondents' sources of information about the rule with the sources they would trust the most if they had a question about how using public benefits affects their immigration status. All estimates are weighted to represent the population of nonelderly adults in California immigrant families (as described above) and account for the complex survey design.

The findings presented in this brief are primarily drawn from the survey data. We also incorporate quotes and themes from the follow-up interviews with adults in California immigrant families who reported chilling effects. The qualitative results do not provide a representative sample, but they complement the quantitative results by shedding light on people's experiences on the ground. We include direct quotations spoken in Spanish and English translations.

Limitations

One limitation of the WBNS is its low response rate, which is comparable with that of other panel surveys accounting for nonresponse at each stage of recruitment.²² WBNS survey weights reduce but do not eliminate the potential for error associated with sample coverage and nonresponse, which are likely larger for the subgroup of adults in immigrant families.²³

In addition, because the WBNS is only administered in English and Spanish, our analytic sample does not describe the experiences of the full spectrum of adults in California immigrant families. Our study excludes adults with limited English proficiency whose primary language is not Spanish. We estimate these excluded adults represent between 5 and 15 percent of all nonelderly adults in California immigrant households as defined for this brief; according to the 2018 American Community Survey, in California, about 5 percent of this group speaks English less than well²⁴ and speaks a primary language other than Spanish.

Some measurement error is likely for questions related to citizenship statuses of respondents and relatives in the household, particularly among adults who are undocumented or have been in the US for a short time (Van Hook and Bachmeier 2013).

During the follow-up interviews, six interviewees indicated they or their family members had *not* decided to avoid participation in noncash public programs because of immigration concerns. There are several possible explanations for a mismatch between what respondents reported on the survey and what they shared during the follow-up interview, including potential misunderstanding of the original survey question, as well as mode effects, whereby respondents may have been less likely to reveal sensitive information in a one-on-one interview than an online survey.

Notes

- ¹ "State Immigration Data Profiles: California," Migration Policy Institute, accessed April 30, 2020, <https://www.migrationpolicy.org/data/state-profiles/state/demographics/CA>.
- ² *Inadmissibility on Public Charge Grounds*, 83 Fed. Reg. 51114 (Oct. 10, 2018).
- ³ *Inadmissibility on Public Charge Grounds*, 84 Fed. Reg. 41292 (Aug. 14, 2019).
- ⁴ State of California Department of Justice, "Attorney General Becerra Leads Coalition of Five Attorneys General, Files Suit Challenging Trump Administration Public Charge Rule," news release, August 16, 2019, <https://oag.ca.gov/news/press-releases/attorney-general-becerra-leads-coalition-five-attorneys-general-files-suit>.
- ⁵ The Supreme Court ruling on the national injunction in January did not apply to Illinois, which had a separate case before the court that was ruled on in February.
- ⁶ Jeanne Batalova, Michael Fix, and Mark Greenberg, "Through the Back Door: Remaking the Immigration System via the Expected 'Public-Charge' Rule," Migration Policy Institute, August 2018, <https://www.migrationpolicy.org/news/through-back-door-remaking-immigration-system-expected-public-charge-rule>.

- ⁷ “Status of State Action on the Medicaid Expansion Decision,” Henry J. Kaiser Family Foundation, last updated April 27, 2020, <https://www.kff.org/health-reform/state-indicator/state-activity-around-expanding-medicaid-under-the-affordable-care-act>.
- ⁸ Though impossible to assess in California given the limited sample size, chilling effects increased nationally among families most likely to be directly affected by the rule, rising from 21.8 percent to 31.0 percent for adults in immigrant families in which at least one member was not a permanent resident. See Bernstein and colleagues (2020).
- ⁹ In this context, social media are platforms such as Facebook, Twitter, WhatsApp, or WeChat.
- ¹⁰ Lawrence Hurley, “US Supreme Court Refuses to Block Trump Immigration Policy during Pandemic,” *Reuters*, April 24, 2020, <https://www.reuters.com/article/us-usa-court-immigration-idUSKCN2263FQ>.
- ¹¹ Catherine Kim, “Low-Income Immigrants Are Afraid to Seek Health Care amid the COVID-19 Pandemic,” *Vox*, March 13, 2020, <https://www.vox.com/identities/2020/3/13/21173897/coronavirus-low-income-immigrants>.
- ¹² “Immigration Services,” California Department of Social Services, accessed May 5, 2020, <https://www.cdss.ca.gov/immigration-services>.
- ¹³ “Resource Guide for State and Local COVID-19 Emergency Responses,” *New American Economy*, last updated April 1, 2020, <https://www.newamericaneconomy.org/uncategorized/15553/?emci=2cfe09ee-7773-ea11-a94c-00155d03b1e8&emdi=2c4823b1-2874-ea11-a94c-00155d03b1e8&ceid=377678>; “Up-to-Date COVID-19 Information,” *Western Center on Law and Poverty*, May 1, 2020, <https://wclp.org/covid-19-coronavirus-information-response-and-considerations/>; “COVID-19 Guidance for Immigrant Californians,” *State of California*, accessed May 4, 2020, <https://covid19.ca.gov/img/wp/covid-19-immigrant-guidance-final-accessible-1.pdf>
- ¹⁴ For each round of the WBNS, the core sample is a stratified random sample of approximately 7,500 nonelderly adults drawn from Ipsos’ KnowledgePanel, a probability-based online panel recruited primarily from an address-based sampling frame, and includes a large oversample of adults in low-income households. The additional oversample of approximately 300 noncitizens is designed to support analyses of current policy issues affecting immigrant families. The panel includes only respondents who can complete surveys administered in English or Spanish, and adults without internet access are provided free web-enabled devices and internet access to facilitate participation.
- ¹⁵ We define adults with English proficiency as those who speak English at least well, as classified in the American Community Survey. Adults with limited English proficiency are those who speak English less than well. This is a broader measure than is commonly used to define English proficiency; in most analyses, a person must speak English very well to be classified as having English proficiency (Wilson 2014). We use the following measures for weighting: gender, age, race and ethnicity, educational attainment, presence of children under age 18 in the household, census region, homeownership status, family income as a percentage of the federal poverty level, access to the internet, and family composition. We benchmark non-Hispanic respondents who are not white or black by two categories: (1) other race born in Asia and (2) multiple races or other race not born in Asia.
- ¹⁶ Using a recruitment script developed by the Urban team, Ipsos staff called 45 Spanish- and English-speaking respondents to invite them to participate in a qualitative telephone interview. Of the 45 respondents, 3 (7 percent) refused to participate in the study. Twenty-two could not be reached for reasons such as disconnected calls, a wrong or unavailable phone number, or unreturned voice messages. Ipsos successfully scheduled 20 respondents for an interview, and of those, Urban successfully reached and interviewed 17.
- ¹⁷ We drew on measures developed by researchers at the University of California, Los Angeles, for an immigrant follow-up survey to the California Health Interview Survey. For the exact wording of this and other questions on the WBNS, see the survey questionnaire at https://www.urban.org/sites/default/files/wbns_2019_questionnaire.pdf.

We learned in follow-up interviews to the 2018 survey that some respondents did not understand the distinction between the two separate survey items measuring chilling effects: “not applying for a program”

versus “stopping participating in a program.” Consequently, we combined responses to report on the questions together: either not applying for or dropping out of a noncash assistance program.

Because of the insufficient sample size of adults in California immigrant families who reported a chilling effect, we do not report what specific programs were avoided. For national estimates of avoidance of specific programs, see the accompanying brief, Bernstein and colleagues (2020).

- ¹⁸ We asked about additional programs not listed in the public charge rule because of reports that families were avoiding such programs; see, for example, Emily Moon, “Why Is Participation in Food Assistance Programs like WIC Declining?” *Pacific Standard*, May 8, 2019, <https://psmag.com/news/why-is-participation-in-food-assistance-programs-like-wic-declining>.
- ¹⁹ This question was asked later in the survey than the questions on chilling effects. For the exact wording of this and other questions on the WBNS, see the survey questionnaire at https://www.urban.org/sites/default/files/wbns_2019_questionnaire.pdf.
- ²⁰ Respondents were randomly assigned to one of two versions of this question. For the exact wording of this and other questions on the WBNS, see the survey questionnaire at https://www.urban.org/sites/default/files/wbns_2019_questionnaire.pdf.
- ²¹ We allocate missing citizenship status data for respondents using their responses to the Ipsos panel profile question on citizenship; absent that information, we impute respondent citizenship status.
- ²² However, studies assessing recruitment for the KnowledgePanel have found little evidence of nonresponse bias for core demographic and socioeconomic measures (Garrett, Dennis, and DiSogra 2010; Heeren et al. 2008), and WBNS estimates are generally consistent with benchmarks from federal surveys (Karpman, Zuckerman, and Gonzalez 2018).
- ²³ Though the weights are designed to produce nationally representative estimates for adults in immigrant families, the survey’s design implies our analytic sample of 498 adults in California immigrant families has precision comparable to a simple random sample of approximately 196 adults, increasing the sampling error around our estimates.
- ²⁴ See endnote 15 for a definition of English proficiency.

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