

MEMORANDUM

April 11, 2019

TO: Health and Human Services (HHS) Committee
Education and Culture (E&C) Committee

FROM: Linda McMillan, Senior Legislative Analyst *LM*
Vivian Yao, Legislative Analyst *VY*

SUBJECT: **Unaccompanied Minors and New Immigrant Families**

PURPOSE: Updates and Panel Discussion

Expected for this session:

Dr. Jonathan Brice, Associate Superintendent, Montgomery County Public Schools (MCPS)
Dr. Maria Navarro, Chief Academic Officer (MCPS)
Margarita Bohorquez, Supervisor, International Admissions and Enrollment (MCPS)
Vickie Buckland, Acting Director, Department of Health and Human Services (DHHS)
JoAnn Barnes, Chief, DHHS Children, Youth, and Family Services
Luis Cardona, DHHS Positive Youth Development Coordinator
Diane Vu, Director, Office of Community Partnerships
Kaori Hiramawa, Manager, Gilchrist Immigrant Resource Center
Robin Riley, Director, Department of Recreation

Armando Trull, Armando Media and former National Public Radio reporter
Catholic Charities of the Archdiocese of Washington: Joan Fowler Brown (Chief of Staff),
Jacqueline Rishty (Legal Services), Norma Solano and Julieta Machado (community and
employment services), Karina Novice (Strong Families)
Diego Uriburu, Executive Director, Identity Inc.
Elisabeth Lopez, Managing Attorney, Kids in Need of Defense (KIND)

At this session, the Joint Committee will have an opportunity to (1) receive updates from MCPS on enrollment trends for foreign born students and ESOL enrollment; (2) receive updates from the DHHS, Community Partnerships, and Recreation on trends in programs that serve new

immigrant children and families; (3) receive an update on the County’s Children Fleeing Violence Workgroup; and, (4) hear observations and have a discussion with Armando Trull, Catholic Charities, Identity, and KIND regarding the situation facing unaccompanied minors and families entering the United States at the Mexican border and how they are providing services and supporting immigrant children and families locally.

General Background Information

As general background information for this discussion, attached at © 1-6 is an April 2019 commentary from Doris Meissner and Sarah Pierce of the Migration Policy Institute that highlights the reasons for the current situation at the border including a significant increase in the number of families with children apprehended (see chart ©3). Information from Pew Research Center indicates that from January to June 2015 unaccompanied children were 11% and family units were 10% of all apprehensions at the southwest boarder. For the same time period in in 2018, unaccompanied children were 13% and family units were 24% of apprehensions; a 140% increase for family units.

The Migration Policy Institute commentary notes that:

The political climate and government instability in Guatemala and Honduras, the countries that account for more than 85 percent of the current flows, have been steadily worsening...Such lack of hope makes people – especially the young – more prone to migrate. And, drought, crop disease, and water shortages have disrupted agriculture and caused food insecurity in the Northern Triangle countries. (©2). Following its recommendations, it says, “Until Central Americans can experience political stability and citizen security in their home countries, political turmoil, gang violence, corruption, increased climate and agricultural challenges will drive people to seek better life prospects.” (© 6)

The United States Department of Health and Human Services Office of Refugee Resettlement’s website includes the following information on “Unaccompanied Alien Children Released to Sponsors.” This includes children from all countries, not just Latin America.

	Montgomery County	Prince George’s County
Federal FY19 (Oct 2018 through Feb 2019)	341 (5 months)	476 (5 months)
Federal FY18	356	571
Federal FY17	782	1,056
Federal FY16	1,079	1,420
Federal FY15	534	664
Federal FY14	1,117	1,328

The Migration Policy Institute has an online data hub with “State Immigration Data Profiles.” This is for all immigrants, not just minors. It shows that significant percentages of the Maryland immigrant population in 2017 are from Latin America, Asia, and Africa.

Immigrant Data – Maryland – 2017 Total Population 6,052,177 (U.S. and foreign born)

	Number	%
Maryland population foreign born	927,936	15.3%
Foreign born population:		
Born in Africa	161,993	17.5%
Born in Asia	303,807	32.7%
Born in Europe	85,064	9.2%
Born in Latin America (South America, Central America, Mexico, Caribbean)	364,853	39.3%
Born in North America (Canada, Bermuda, Greenland, St. Pierre&Miquelon)	8,879	1.0%
Oceania	3,340	0.4%

Migration Policy Institute

Attached at © 7-14, is an article from Kaiser Health News, “On the Border, Volunteer Doctors Struggle to Provide Stopgap Care to Immigrants.” It describes the healthcare situations faced by immigrants and those trying to serve them. It notes that while the government provides services in facilities, people have serious needs upon release. Committee members may find this article information as DHHS discusses the recent increases in new enrollments in Care for Kids and the health and dental care needs that must be addressed.

DHHS and Community Partnership Programming

- Care for Kids: New enrollments are up 21% from the same period last fiscal year. Dental care is a significant need and cost for the program. There is concern that the number of renewals is down. The reasons are not clear, but it may in part be the general concern about using government services. (©15)
- While the numbers are relatively small (6 last school year and 4 currently), School Health is case managing pregnant or parenting youth that are unaccompanied minors. (©16)
- Regional Youth Services (RYS): UpCounty RYS reports serving 52 unaccompanied minors in FY19 to-date compared to 40 in all of FY18 and 32 in all of FY17. However, Mid-County RYS and Silver Spring East County do not have the same large increase. Mid-County reports serving 5 youth who reported fleeing violence in their home country in the first half of FY19 compared to 15 for all of FY18 and Silver Spring/East County has served 7 in the first half of FY19 compared to 12 in all of FY18. (©16-17)
- Some observations from Linkages to Learning and Regional Youth Services providers include the high percent of people that have experienced trauma, the need for housing, legal and employment services, and growing concern about accessing government services.

- Information on ©18-19 provides the use of Positive Youth Development Services for all of FY18 and FY19 through February. The following table highlights a few categories. Projecting usage indicates that all programs will exceed FY18 levels.

	FY18 (full year)	FY19 (through February)
Positive Youth Development (curriculum based programs)	363	336
Case management services	309	238
Mental health services	38	36
Recreation services	NA	59
Workforce development services	6	5
Family Strengthening Programs (parents served)	44	77
Total unduplicated youth served	455	380

- The Latino Health Initiative continues to provide Family Reunification assistance and uses a curriculum that it has adapted from Fairfax County Public Schools (Family Reunite program) and the National Compadres Network’s La Cultura Cura: Cara y Corazon (Culture Cures: Face and Heart). LHI expects to serve 75 parents and 97 children in FY19. So far in FY19, 50% of families are from El Salvador, 39% from Honduras, and 11% from Guatemala. LHI also discusses the complex trauma that has been experienced by families, families’ concerns about the current anti-immigrant climate and what the “Public Charge” impacts really mean. (©21-24)
- An overview of services at the Takoma East Silver Spring “TESS” Center is provided at ©25-26. TESS serves low-income, primarily immigrant families and served 2,759 unduplicated residents in FY18. The information notes that because they are well know in the community, they are often the first point of contact for new Americans. TESS is also a location for the Neighborhood Opportunity Network whose “connectors” help match residents with non-profits and other service providers. TESS shares its concerns that the number of walk-in clients has dropped and people are unwilling to apply for services because of their concerns that information might not be safe. Staff is observing that families are showing increasing stress. (©25-26)
- Information on Community Partnerships and the Gilchrist Center is included at ©27-36 and includes the array of April 2019 Immigration, Citizenship, and Legal Services workshops and information sessions.

Children Fleeing Violence Crisis Workgroup

The Workgroup helps to ensure that Montgomery County has a comprehensive and coordinated response to the crisis among the public, nonprofit, and private sector organizations serving immigrants in the County. In addition to staff from MCPS, current membership includes:

- Council President Nancy Navarro
- MCPS Board of Education: Karla Sylvestre
- Office of Community Partnerships/Gilchrist Center
- DHHS
- Montgomery County Police Department,
- Department of Recreation
- Montgomery College
- Collaboration Council for Children, Youth, and Families
- Non-Profit Organizations: Catholic Charities; Identity; CASA de Maryland, Latin American Youth Center/Maryland Multi-Cultural Center; Family Services; EveryMind; Primary Care Coalition, Dove Counseling and Education
- The Latin American Advisory Group

Panel Participants

Armando Trull is an EMMY and TELLY award-winning journalist and strategic communications consultant in Washington D.C. He was previously a Senior Reporter at WAMU and has experience covering stories of mass migration, refugees, gangs, natural disasters, and protests and has traveled throughout the United States, Latin America, Europe and the Middle East. Mr. Trull is a frequent guest on local and national programs to discuss the United States Latino community, Central American migration, United State's Immigration policy, trans-national groups and gangs.

Catholic Charities is one of the County's main non-profit partners in providing an array of health, human services, housing programs and programs to serve minority communities. The County provides funding to Catholic Charities to run the Strong Families Initiative to build family resilience in a setting that is trusted by the Latino community. They provide legal services, job readiness programs, and emergency support and case management.

Diego Uriburu, Executive Director, Identity, Inc. Identity's mission is to create opportunities for Latino youth and their families to reach their highest potential. It envisions a just and equitable society that nurtures all youth and is enriched by their contributions. Its core values are: Young people come first; Every child has potential; Youth deserve more than one chance; Society is enhanced by cultural diversity; and, Serve others is a privilege and requires excellence. Identity provides programs for family reunification, case management and safety-net supports, mental health services, and the Savings Lives Through Soccer program.

Kids in Need of Defense (KIND) works to ensure that no refugee or immigrant child faces deportation or removal proceedings alone. They work in several locations nationally. In Maryland they provide direct representation in partnership with law firms, legal departments, law schools, and Bar Associations. In Maryland, KIND generally represents children after they have been released from Office of Refugee Resettlement custody. KIND has been working with children who have separated from their parents at the border. Montgomery County provides two grants to KIND to assist with their work.

COMMENTARIES
APRIL 2019

Policy Solutions to Address Crisis at Border Exist, But Require Will and Staying Power to Execute

By [Doris Meissner](#) and [Sarah Pierce](#)

[Border Security](#)

[Border Enforcement](#)

[Smuggling & Trafficking](#)

[Illegal Immigration & Interior Enforcement](#)

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Jaime Rodriguez Sr./U.S. Customs and Border Protection

Closing the U.S.-Mexico border, as President Trump is threatening, and cutting off aid to the countries of Central America from which migrants have been fleeing will only feed the crisis that now exists at key points along the border. Shock-and-awe actions, such as family separation, have not worked in taming the forces driving migration from the region—and indeed may be driving more movement. It's well past time to truly grapple with what explains the increased number of arrivals in recent months and to put real solutions in place, difficult as they will be to execute.

Against the backdrop of historical push-pull factors driving this migration—endemic violence, limited economic opportunity, and poor governance in El Salvador, Guatemala, and Honduras; as well as available jobs and longstanding social and family ties in the United States—it appears the flows have recently spun up rapidly because of a convergence of factors:

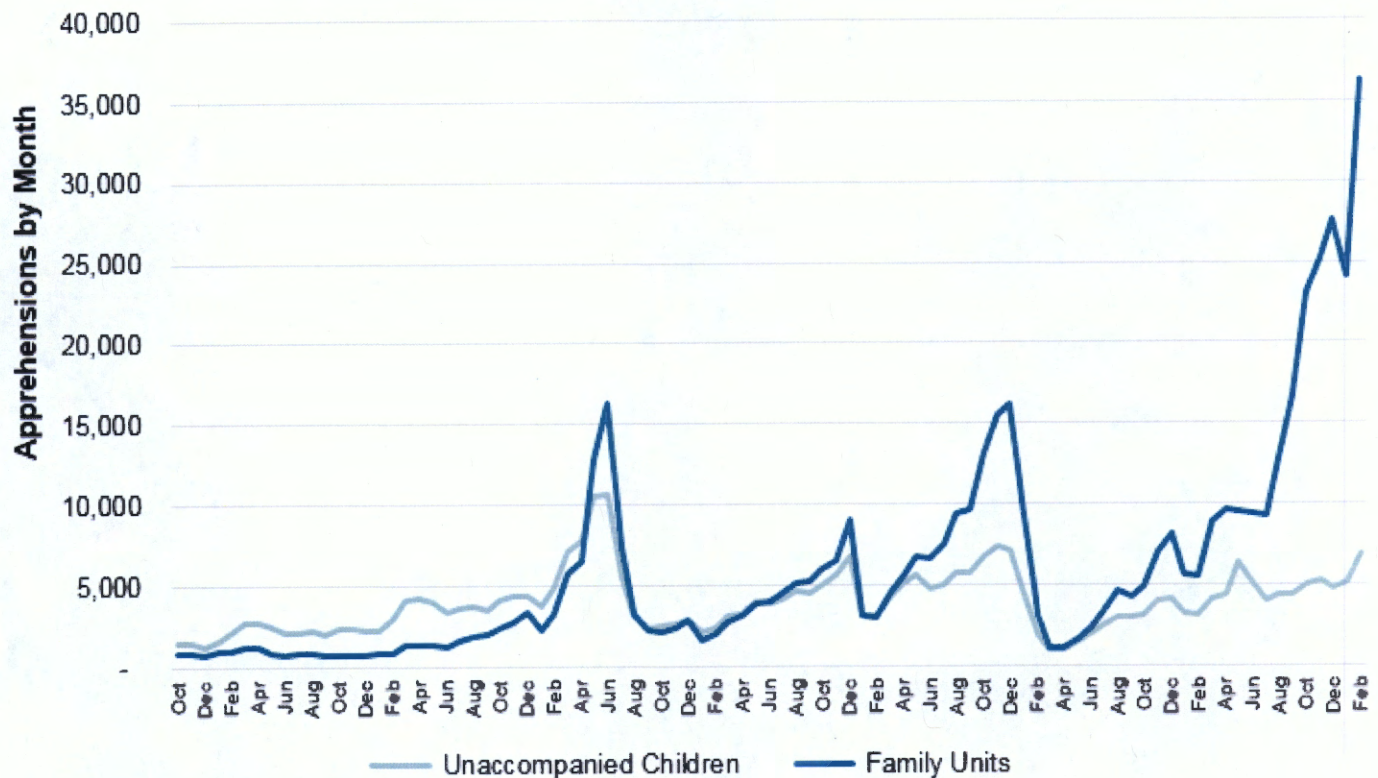
- The rise of migrants banding together and traveling in “caravans” has threatened the business model of smuggling networks. While only a small percentage of migrants have arrived in caravans, their emergence as a safer mode of travel seems to have led smuggling organizations to more aggressively recruit customers, offering new and more options for getting to the United States. Express bus travel and lower smuggling fees for certain services or combinations (with reduced costs if an adult travels with a child) are features of these changes, as is the advent of “large groups,” the term U.S. Customs and Border Protection (CBP) uses for groups of 100 people or more arriving at the border together.
- The start-and-stop nature of the administration’s efforts to deter asylum seekers has had the opposite effect, seemingly spurring on prospective migrants to journey to the United States before policies harden further. In addition to the zero-tolerance policy that generated family separation, other measures taken by the administration have narrowed the criteria for asylum eligibility, attempted to prohibit applications between ports of entry, and are requiring some asylum seekers to remain in Mexico during the pendency of their claims. The actions have been rapid-fire and stop-start, because of political pushback and court rulings. Combined with telegraphing construction of a wall, the perception has clearly taken hold to migrate now, before policies become more restrictive.
- The political climate and government instability in Guatemala and Honduras, the countries that account for more than 85 percent of current flows, have been steadily worsening. Honduras is in a political stalemate and Guatemala is beset by rampant corruption as it approaches its next presidential election with no candidates who offer anything different. Such lack of hope makes people—especially the young—more prone to migrate.
- Drought, crop disease, and water shortages have disrupted agriculture and caused food insecurity in the Northern Triangle countries.
- Tight U.S. labor markets have made jobs readily available in certain sectors. The recent flows are not sustainable, and the breakdowns in the immigration enforcement system are cascading rapidly. Overwhelmed government officials are releasing migrants into the United States in large numbers, without full processing and vetting. They are dropping off migrants at churches and bus stations in border communities with little or no notice, overwhelming local actors and already inadequate facilities and support resources.

Among the answers the administration is seeking are to amend the Trafficking Victims Protection Reauthorization Act of 2008, which governs the treatment of unaccompanied children, as well as to change the protections in the 1997 Flores settlement, which limits the time in detention of families. Such measures are not likely to be enacted by Congress, fail to adequately address the actual roots of this problem, and ignore recommendations by medical professionals against detaining children.

Indeed, as Figure 1 below shows, unaccompanied children are not where the sizeable increase in arrivals are, though they appear to be on pace to equal the numbers during the peak year of 2014. Instead, the sharp increases are in family migration, which spiked the month following the end of the family-separation policy and have continued

unabated since. The migrate-now phenomenon is vividly underscored by the trend these data demonstrate.

Figure 1. Monthly Border Patrol Southwest Border Apprehensions of Unaccompanied Children and Family Units, FY 2012-19 YTD*



* The 2019 data are through February 2019.

Sources: U.S. Customs and Border Protection (CBP), "Southwest Border Migration FY 2019," updated March 5, 2019, www.cbp.gov/newsroom/stats/sw-border-migration; U.S. Border Patrol, "Total Unaccompanied Alien Children (0-17 Years Old) Apprehensions by Month," accessed March 29, 2019, www.cbp.gov/sites/default/files/assets/documents/2019-Mar/bp-total-monthly-uacs-sector-fy2010-fy2018.pdf; U.S. Border Patrol, "Total Family Unit Apprehensions by Month," accessed March 29, 2019, www.cbp.gov/sites/default/files/assets/documents/2019-Mar/bp-total-monthly-family-units-sector-fy13-fy18.pdf; CBP, "United States Border Patrol Southwest Family Unit Subject and Unaccompanied Alien Children Apprehensions Fiscal Year 2016," updated October 18, 2016, www.cbp.gov/newsroom/stats/southwest-border-unaccompanied-children/fy-2016; U.S. Border Patrol, "Total Illegal Alien Apprehensions by Month," accessed March 26, 2019, www.cbp.gov/sites/default/files/assets/documents/2019-Mar/bp-total-monthly-apps-sector-area-fy2018.pdf.

Given the circumstances surrounding Central American migration in recent months, as well as historically, there are a range of responses the administration and Congress could take immediately to address and begin to resolve the crisis. They need to be coupled with others that require a longer-term horizon.

Immediate Term

First, the Department of Homeland Security (DHS) could have a quick effect on the flows by equipping the asylum system with the means to do its work effectively. This would require changing how asylum processing takes place at the U.S.-Mexico border. Asylum officers from U.S. Citizenship and Immigration Services (USCIS) conduct an initial screening interview (the “credible fear” interview) to determine if the applicant has a “significant possibility” of establishing eligibility for asylum. Those who pass are then allowed into the United States where they can apply for asylum before an immigration judge. But because of massive backlogs in the immigration court system, such hearings are currently two, three, or even four years off. These long delays serve as an incentive for those without protection needs to also seek asylum, overburdening the system.

As we have argued for months, the administration could change how asylum processing occurs at the border and allow asylum officers to fully decide cases. This way, final determinations could be made within months, not years, in a nonadversarial, less resource-intensive setting than before judges in courtrooms. Cases that are granted would reduce the numbers being added to court caseloads and those eligible for protection would get it in a timely manner, while those who are ineligible would be returned to their home country.

Under this streamlined procedure, those found ineligible for asylum should have a chance to appeal to an immigration judge. However, the immigration courts should designate dockets or groups of judges to adjudicate such cases, again in order to build timeliness into the system and make possible the return of those to their home countries whose appeals fail. This new reality would be quickly understood by would-be migrants who do not have strong—or any—protection claims.

At the same time, fairness is an essential hallmark of a healthy asylum system. To that end, the Justice Department should restore the criteria that permitted violence by nonstate actors to be considered in deciding asylum cases, both by asylum officers and immigration judges. During his time as attorney general, Jeff Sessions enacted a legal change that made it much more difficult for victims of gang and domestic violence to qualify for asylum.

The proposal outlined above, which can be done administratively and by allocating and managing resources differently, would change the perverse incentives that lead people to claim asylum regardless of whether they may be eligible, just as it would preserve and strengthen the integrity of the asylum system.

Second, some share of the billions of dollars newly available to CBP and DHS (\$2 billion in additional appropriations for CBP from the agreement that ended the shutdown and \$1 billion reprogrammed by the Department of Defense in furtherance of the president’s national emergency declaration to get funds to build new border barriers) should be directed at deepening the ability of the asylum system to work in response to the crisis at the border.

The size of the asylum officer corps should be increased and funds already provided for new immigration judges should be used to hire and train on an urgent, emergency footing. In addition, border locations and communities must be funded to set up reception centers suited to processing families and children.

Funding should also support alternatives to detention, principally the use of ankle bracelets, as more cost effective and less harmful than detention. A network of community-based case management practitioners and legal representation should also be built in to ensure appearance at asylum interviews and hearings at the high rates pilot programs for such policies have demonstrated.

Third, the administration must work in close partnership with Mexico, whose position on Central American migration and migrants has changed under its new president to focus on human rights, economic development, and regional responsibilities. Migrants can get work permits in Mexico, which officials say is experiencing labor shortages, and can also apply for asylum there.

However, Mexico's capacity to implement its goals is insufficient. The United States could help by supporting training and technical assistance, either directly or through the UN High Commissioner for Refugees (UNHCR) and the International Organization for Migration (IOM). Both are working intensively with Mexico to strengthen its migration management efforts by supporting INM, the Mexican immigration agency, and the significantly underfunded COMAR, its asylum agency,

Security cooperation with Mexico is equally important and attainable. In recent years, Mexico has returned far more migrants to Central America than has the United States. Returns are continuing under its new presidency. In response to indications of a new caravan from Honduras, Mexico reports it will "contain" migrants seeking to cross the Isthmus of Tehuantepec, the narrow stretch of approximately 130 miles across Oaxaca and Veracruz through which Central Americans must pass. Collaboration with Mexican law enforcement is also fruitful in identifying security threats and disrupting networks of human smugglers who move migrants on foot or by bus and other means from Central America through Mexico.

Deepening engagement on these and related fronts is very much in the U.S. national interest at this time.

Finally, Homeland Security Secretary Kirstjen Nielsen has said that the United States should revive an in-country refugee processing program that would consider protection cases in the region without people setting off on long journeys to reach the United States. Such a program, similar to one created for Central American youth by the Obama administration and terminated by the Trump administration, would be another helpful piece of the puzzle in alleviating pressure on the border.

Longer Term

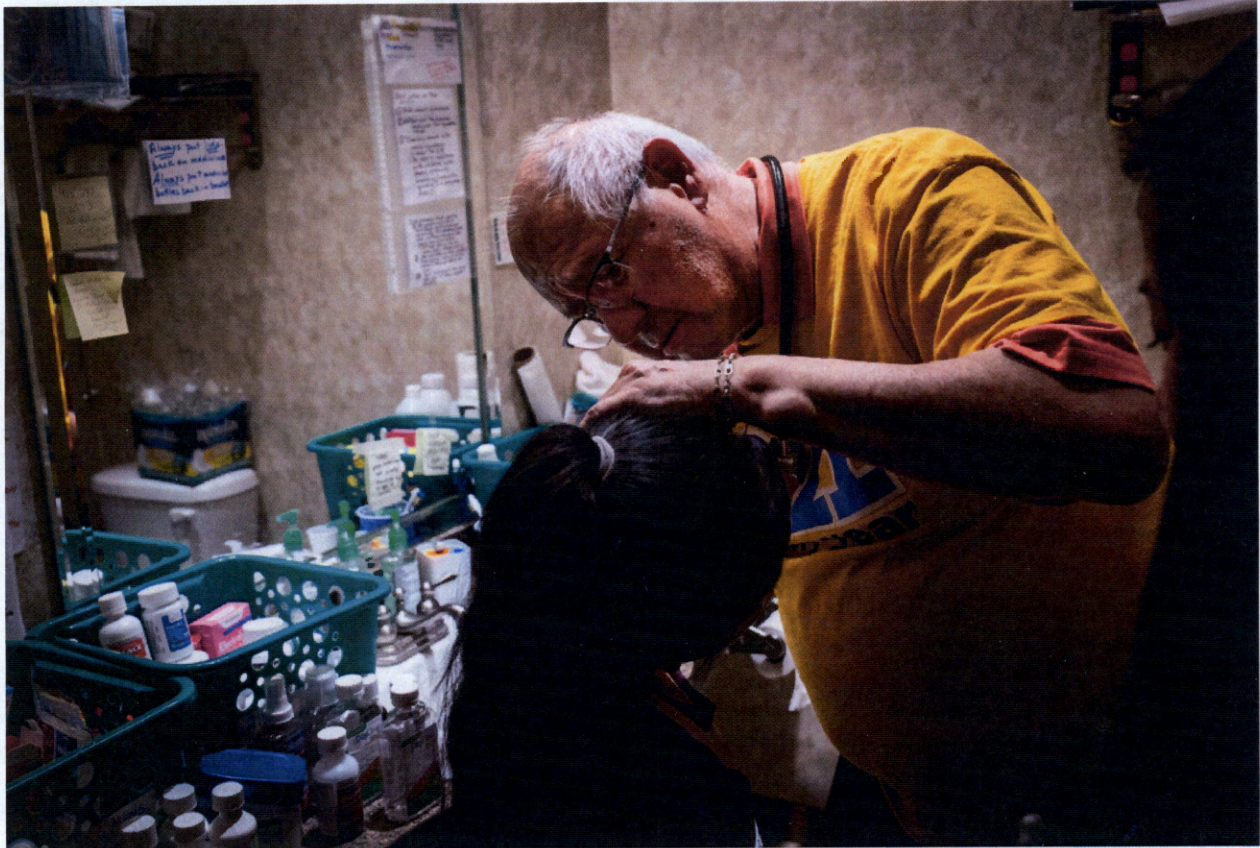
In the longer term, the United States must help foster a more stable, economically productive Central America. Until Central Americans can experience political stability and citizen security in their home countries, political turmoil, gang violence, corruption, increased climate and agricultural challenges, and weak economies will drive people to seek better life prospects. Migration is one of the answers to which they will invariably turn.

Secretary Nielsen just signed an accord with Central American governments to combat human trafficking and smuggling, fight transnational criminal organizations and gangs, expand information and intelligence sharing, and strengthen security. This is a positive step. The prospect of cutting aid estimated at \$500 million as a punitive measure because of migration from the region moves the dial in exactly the wrong direction and is antithetical to U.S. interests. The reality is that even more will need to happen in the realm of sustained, continued partnership to deliver citizen security, improved policing, progress against corruption, and economies that can successfully reintegrate returnees.

There are no quick fixes to the problems now playing out at the border. However, both immediate and longer-term policy solutions are there for the United States if it is serious about managing and reducing further increases in the flows and in addressing the causes of this migration. What is needed is the willingness and staying power to act on these policy solutions.

On The Border, Volunteer Doctors Struggle To Provide Stopgap Care To Immigrants

By Anna Maria Barry-Jester • APRIL 5, 2019



Dr. Carlos Gutierrez examines a young girl in a makeshift clinic at a shelter in El Paso. The girl's mother said she had developed a deep cough while in immigration custody. (Anna Maria Barry-Jester/California Healthline)

EL PASO, Texas — It wasn't the rash covering Meliza's feet and legs that worried Dr. José Manuel de la Rosa. What concerned him were the deep bruises beneath. They were a sign she could be experiencing something far more serious than an allergic reaction.

Meliza's mom, Magdalena, told the doctor it started with one little bump. Then two. In no time, the 5-year-old's legs were swollen and red from the knees down.

De la Rosa noticed a bandage-covered cotton ball in the crook of Meliza's elbow, a remnant of having blood drawn. During their time at the Immigration and Customs Enforcement detention facility, Meliza had been sent to a hospital, Magdalena

explained, cradling the child with her 5-foot frame. They had run tests, but she had no way to get the results. Through tears, she begged for help. "My daughter is my life," she told him in Spanish.

The doctor would see nearly a dozen patients that March evening at his makeshift clinic inside a warehouse near the El Paso airport. That week, similar ad hoc community clinics would treat hundreds of people, some with routine colds and viruses, others with upper-respiratory infections or gaping wounds. Like Meliza, all were migrants, mostly from Central America, a river of families arriving each day, many frightened and exhausted after days spent in government detention.

De la Rosa, an El Paso pediatrician, is one of dozens of doctors volunteering on the U.S.-Mexico border as the flow of migrants crossing without papers and asking for asylum climbs to a six-year high. Unlike previous waves of immigration, these are not single men from Mexico looking to blend in and find work. Most are families, fleeing gang violence, political instability or dire poverty.

President Donald Trump has declared a national emergency on the southern border to free up billions of dollars in funding to construct a wall as a means of stemming the tide of asylum seekers. He was expected to make an appearance in Calexico, Calif., on Friday to tour a 30-foot section of fence that was rebuilt last year.

But the federal government isn't covering the cost of the humanitarian crisis unfolding in border communities like El Paso.

In the absence of a coordinated federal response, nonprofit organizations across the 1,900-mile stretch have stepped in to provide food, shelter and medical care. Border cities like El Paso, San Diego and McAllen, Texas, are used to relying on local charities for some level of migrant care. But not in the massive numbers and sustained duration they're seeing now. As the months drag on, the work is taking a financial and emotional toll. Nonprofit operators are drawing on donations, financial reserves and the generosity of medical volunteers to meet demand. Some worry this "new normal" is simply not sustainable.

“The care we are providing we could never have foreseen, or imagined spending what we are spending,” said Ana Melgoza, vice president of external affairs for San Ysidro Health, a community health system providing care for migrants crossing into San Diego. She said her clinic has spent nearly \$250,000 on such care since November.



Dr. José Manuel de la Rosa writes a prescription at a makeshift clinic in an old warehouse in El Paso. (Anna Maria Barry-Jester/KHN)

An Emotional And Financial Toll

In October, the U.S. Immigration and Customs Enforcement agency drastically changed how it handles migrant releases from its detention facilities. Families seeking asylum no longer would get help coordinating travel to live with relatives or sponsors while claims were processed. Since the policy shift, thousands of migrants have found themselves in border cities without money, food or a way to communicate with family. From Dec. 21 to March 21, 107,000 people were released from ICE detention to await immigration hearings.

In El Paso, which has seen a 1,689% increase in border apprehensions of migrants traveling with family members compared with last year, volunteer doctors are staffing a network of clinics. Kids with coughs and colds, diarrhea and vomiting are common. Some migrants have severe blisters on their feet that need cleaning, or diabetes that's out of control because, they say, their insulin was thrown away by border patrol agents.

For de la Rosa, this is just the latest work in a career tied to border health. Born and raised in El Paso, he has served on the U.S.-Mexico Border Health Commission since President George Bush appointed him in 2003. He was founding dean of the city's Paul L. Foster School of Medicine when it opened a decade ago as one of the few programs in the country that require all students to take courses in "medical Spanish," designed to bolster communication with Spanish-speaking patients.

As he entered the warehouse-turned-shelter that evening in late March, he pulled off his signature bow tie and draped a stethoscope around his neck. He thinks it's a gift to be able to help people who would otherwise have no way to get care. "Sometimes I don't know if I'm doing it for me or for them," he said. "It is so fulfilling."

But cases like Meliza's are frustrating. (She and other patients are referred to by their first or middle names in this story because of their concerns that speaking to the news media could affect their asylum cases.)

After passing an initial screening to claim asylum, Meliza and her mother had been taken to the warehouse, where volunteers gave them food and a bed, and helped arrange travel to South Carolina, where they could live with a family member as their asylum claim proceeds.

Meliza's rash began while they were in detention, Magdalena told de la Rosa, and four days in, she was sent to a hospital. But they were released from custody before getting the test results. De la Rosa called the hospital, hoping the labs would offer clues as to whether the girl might have leukemia; Henoch-Schonlein purpura, a disorder that can cause kidney damage; or just an allergic reaction. The hospital asked de la Rosa for a privacy waiver from the mother, but by the time he could return to the shelter for her signature, she had boarded a bus for South Carolina. That would be the last he saw of her.



De la Rosa examines a rash on 5-year-old Meliza's legs. Though he believed it was likely an allergic reaction, bruising raised the concern of something more serious. (Anna Maria Barry-Jester/KHN)

'The Best We Can Do'

Dr. Carlos Gutierrez, another El Paso pediatrician, is also desperate for communication with the doctors who work inside the detention facilities. When people are released with complicated health issues — like a man who recently showed up with a flesh-eating bacterial infection and a wound so big they could see his bone — the volunteer doctors often have to start from scratch, trying to determine what a patient has and what treatment they've been given.

For most of the past five months, Gutierrez has used the lunch break from his private pediatric clinic to see migrants. He works in one of several hotels being rented out by Annunciation House, a nonprofit that runs the area's main shelter network.

The organization, which is funded through donations from religious organizations and individuals, has dug deep, spending more than \$1 million on hotels in the past four or five months, its executive director said at a city council meeting. It struggles to accommodate everyone — Annunciation House recently scrambled to open a temporary shelter so that 150 people wouldn't have to sleep in a city park.

On his way to the hotel, Gutierrez reviewed the day's text message from the organization's director outlining how many refugees would be arriving that day: 510.

The first patients to his "clinic" — a hotel room bathroom — were 9-year-old twins from Guatemala. They were traveling with their mother, Mirian, who said she fled her hometown after local men threatened to kidnap one daughter if she didn't pay protection money to operate her tortilla stand.

Mirian and her daughters had crossed a small river to reach what she believed was New Mexico, she said, imagining that the authorities they surrendered to would be like the U.S. tourists she'd met in her hometown. "There, when the tourists arrive, they are so nice. Even doctors come to help us," she said in Spanish.

But it was not a warm welcome. During the six days they spent in custody, one of her daughters contracted bronchitis, she told Gutierrez. They were healthy when they entered, she said, but sleeping on cold concrete floors and eating skimpy ham and cheese sandwiches broke them down. "They treat you like you're trash," she said.

Mirian showed Gutierrez an inhaler she had been given in the detention facility and asked what it was for. Her other daughter had developed a deep cough and needed attention, she said. After examining both girls, Gutierrez showed Mirian how to use the inhaler. The girls would be fine, he told her, but with their lungs as congested as they were, it might be weeks before they recovered.

"I mean, this is the best we can do," Gutierrez said, after prescribing an antibiotic to a little girl with an ear infection. "We could be doing it better. But when they are in our care, nobody is dying."



Immigration officials are releasing up to 700 people a day into El Paso, Texas. Ciudad Juárez, Mexico, can be seen in the distance. (Anna Maria Barry-Jester/KHN)

Necessary Work

More than two dozen people have died while in immigration custody under the Trump administration, according to a recent NBC News analysis. The government says it added nurses and doctors to its facilities after two children died in December. Immigration authorities are now taking 60 children a day to the hospital and doing medical screens for every child under 18, U.S. Customs and Border Patrol Commissioner Kevin McAleenan said during a March news conference.

But many people still have serious needs upon release. When Gutierrez and his colleagues started these clinics, they were meant to temporarily fill a gap caused by the change in government policy. Asked if he thinks the volunteer work is sustainable, he shook his head and sighed. "I'm so tired."

The financial model — relying on donations and volunteers — also has its limits. Asylum seekers generally don't qualify for social services, including Medicaid, before they have been granted asylum. In California, negotiations are underway to make some of the \$5 million in emergency funds the state is spending at the border

available to reimburse clinics for care, according to the office of state Sen. Toni Atkins. Physicians in Texas and Arizona were not aware of similar conversations in their states.

Dr. Blanca Garcia, another El Paso pediatrician, has been volunteering a few days a week since October. Like many of the doctors, she cites a moral and financial argument for providing care to the migrants, who are in the country legally once they apply for asylum. These are vulnerable people who might not otherwise seek care, and for every diagnosis of strep throat, she is likely preventing an expensive emergency room visit, she said.

Still, there are limitations to what they can provide.

Cristian, 21, and his 5-month-old baby, Gretel, arrived at an El Paso shelter in a former assisted living facility early one afternoon. He'd never been alone this long with his daughter, he said. His wife — a minor — had been separated from them at the border, put in the custody of the Department of Health and Human Services. Cristian didn't know when she might be released.

While in detention, he had spent several nights with Gretel on a concrete floor in a room with more than a hundred other men, he said. He asked a guard for a better sleeping situation. Instead of receiving help, he said, he was punished by being forced to sit and stare at a wall for over an hour as Gretel cried in his arms.

Still breastfeeding before she was separated from her mother, she would suck on his nose and at his shirt. He was worried that she wasn't getting enough to eat, and that the formula he was giving her wasn't as good for her as breast milk. Dr. Garcia told him the baby looked healthy.

Still, Cristian was anxious, and grew increasingly distressed as he recounted their history.

"Will the baby be OK?" he asked in Spanish.

She assured the young father he was doing everything he could.

This KHN story first published on California Healthline, a service of the California

HHS Services to Unaccompanied Minors

Care for Kids

Children Fleeing Violence (Unaccompanied Minors) has significantly impacted the enrollment volume of Care for Kids (CFK), primarily the new children-

- New enrollment has increased by **21%** in FY19 compared to the same time frame in FY18. Based on feedback from partners in the tri-state area, children are being rapidly released from detention centers. This trend began in January 2019 and the children are from El Salvador, Guatemala and Honduras.
- CFK is experiencing a slight decrease in the number of children being renewed which is reflected by the unduplicated number of children served.

Care for Kids	FY18 July - Feb	FY19 July - Feb	%
Number of New Enrollees	670	812	21%
Specialty Dental – Number of Encounters	349	406	16%
Unduplicated Number of Children	4,930	4,799	-3%

- Many of the new CFK enrollees have lacked access to medical and specialty care services, notably dental. Cost for specialty dental have increased considerably in response to the complex oral health needs of the new children.
- As a general rule, the unaccompanied children are older, and many have received no oral health care at any point in their lives. Some of these children require sedation services or other complex procedures that cannot be handled by County Dental Services. CFK children are seen by County Dental for screenings, preventative and basic restorative care.

School Health Services

School nurses have reported pregnant or parenting teens identified as unaccompanied.

The statistics for SY 2017-2018 (FY 18) case management of pregnant and parenting unaccompanied students:

6 students pregnant or parenting:

- 4 students were parenting when they enrolled in MCPS.
 - 1 student with twins
 - 1 student enrolled at 17 years old with a 4-year-old child
- 2 of the students became pregnant after arriving in the US
 - 1 teen reported that her pregnancy was the result of a traumatic event (student was parenting when she arrived in US)

The statistics for SY18-19 (FY19), as of April 2, 2019, the school nurses are case managing 4 new (this SY) pregnant and/or parenting unaccompanied students:

- 1 student arrived with an infant
- 1 was pregnant when she arrived
- 2 became pregnant when they arrived in the US

5 of the 6 pregnant or parenting students from SY 2017-2018 remain enrolled in MCPS and continue to be followed by school nurses.

Child Welfare Services

In fiscal year 2019 (through March 31), we have had 5 allegations of sex trafficking (one also involved labor trafficking). These cases did not involve any unaccompanied minors.

Our screening unit has not received many calls re: unaccompanied minors. (We do keep a log in our screening unit to ensure that we keep track of these types of calls).

We had the following: (none of which we accepted for an investigation)

- a call from the Texas Resettlement Office related to teenage youth who was a runaway from their host relative
- Newly arrived intact family using corporal punishment not rising to CPS intervention. School was willing to do an outreach through their ESOL program.

Positive Youth Development

See spreadsheet for “Recently Arrived Youth Served- July 1, 2018-February 28, 2019”

Linkages to Learning

Linkages to Learning (LTL) is community school partnership with an integrated focus on health, social services, community engagement and leadership to support student learning, strong families and healthy communities. Services are provided at 29 schools (see www.montgomeryschoolsmd.org/ltl for list of sites).

Regional Youth Services (RYS) are a basic set of community and school-based prevention and early intervention mental health services provided to school-age youth and their families who cannot access these services via insurance or elsewhere in the community. School-based services are targeted to schools with high FARMS rates who do not have Linkages to Learning or a High School Wellness Center. RYS serves children and adolescents who do not have serious observable mental or behavioral health problems, but who have, or are at risk of developing, mental/emotional/behavioral health problems that are mild to moderate in nature. Services include information and referral; youth, family and group counseling; and parent education.

- Upcounty region (Contractor: Family Services, Inc)
 - LTL trends:
 - Unaccompanied minors served:

FY17	FY18	FY19 to date
32	40	52

- Rockville region (Contractor: City of Rockville)
 - LTL at Maryvale ES has:
 - Seen an increase this year of families fleeing violence and political issues from Nicaragua
 - Reported challenges in accessing Spanish-speaking long-term/intensive mental health services for all family members
- Mid-County (Kensington/Wheaton/Aspen Hill) region (Contractor: EveryMind.)
 - Reported that most items reported in 2016 are still reflective of current trends
 - LTL trends:
 - 75-80% of families receiving child/family therapy and/or family case management have experienced some level of trauma or have needs related to immigration or reunification
 - For recipients of mental health services, still seeing overall higher levels of trauma and youth presenting with anxiety, depression, grief, family issues around reunification, etc.
 - Housing, legal services, and employment opportunities are the most difficult to find accessible resources for within the county. Housing and legal resources are both limited in what is available and often very costly.
 - Lack of consistent employment and income due to legal status compound financial stressors when families are faced with high housing, legal or medical costs.
 - English language classes and services in Spanish are continued needs
 - Since 2016 election, have seen fluctuations in individuals withdrawing from or declining programs and resources (both when enrolling in LTL services and when being referred to county services) they are eligible for due to immigration fears.
 - RYS trends:
 - Individuals who have reported fleeing violence in their home country within the last 12 months at the time of intake:

FY17	FY18	FY19 thru Q2
13	15	5

- 90% or more of youth and/or their parents served over the last few years have experienced trauma related to immigration or reunification
 - Higher levels of trauma across referrals (with most youth presenting with symptoms of trauma, anxiety, depression, grief, acculturation, etc.) have remained consistent
 - Saw sharp drop in willingness to access services due to immigration fears after 2016 election
 - Has been trending up and down over the past few years and seems to tie to various political fluctuations
 - Continued high levels of needs for basic supports among clients such as food, clothing, housing, and legal support
 - Cases of youth experiencing housing insecurity where they are “couch surfing” or being shuffled among extended family members without consistent long-term housing.
- Silver Spring/East County Area (Contractor: YMCA Youth & Family Services)
 - RYS trends:
 - Families who have reported fleeing violence in their home country:

FY16	FY17	FY18	FY19 to date
4	10	12	7

Recently Arrived Youth Served, July 1, 2017 - June 30, 2018

Contracts	Total Positive Youth Development Services (curriculum based programs)	Total Case Management Services	Total Mental Health Services	Total Workforce Development Services	Total GED/ESOL Services	Family Strengthening Program (# of parents served)	Total Services Provided	Total unduplicated youth served
Crossroads and Up-County Youth Opportunity Centers	8	45	10	6	4	N/A	73	45
Gaithersburg HS Wellness Center	63	12	4	0	0	0	79	63
Northwood HS Wellness Center	42	18	5	0	0	34	99	49
Watkins Mill HS Wellness Center	46	86	15	0	0	0	170	85
Wheaton HS Wellness Center	53	22	4	0	0	10	69	62
MCAS/LHI/REC/CM	126	126	N/A	0	0	0	252	126
Street Outreach Network	13	0	0	0	0	0	13	13
Youth Violence Prevention Coordinator	12	0	0	0	0	0	12	12
Total	363	309	38	6	4	44	767	455

Recently Arrived Youth Served, July 1, 2018- February 28, 2019

Contracts	Total Positive Youth Development Services (curriculum based programs)	Total Case Management Services	Total Mental Health Services	Total Recreation Services	Total Workforce Development Services	Total GED/ESOL Services	Family Strengthening Program (# of parents served)	Total Services Provided	Total unduplicated youth served
Strengthening Families Initiative Program	22	5	2	0	0	0	3	32	22
Crossroads and Up-County Youth Opportunity Center	6	33	8	N/A	5	3	N/A	55	33
Gaithersburg HS Wellness Center	42	18	5	0	0	0	34	99	49
Northwood HS Wellness Center	28	8	4	0	0	0	34	74	32
Watkins Mill HS Wellness Center	52	43	6	59	0	0	0	160	56
Wheaton HS Wellness Center	39	12	0	0	0	0	6	51	41
MCAS/LHI/REC/CM	119	119	11	0	0	0	0	249	119
Street Outreach Network	10	0	0	0	0	0	0	10	10
Safe Space	11	0	0	0	0	0	0	11	11
Youth Violence Prevention Administrator	7	0	0	0	0	0	0	7	7
Total	336	238	36	59	5	3	77	748	380

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Latino Health Initiative

Program Summary

In response to the unique challenges facing Latino families in Montgomery County reuniting after a prolonged period of separation, the Latino Health Initiative (LHI) of the Montgomery County Department of Health and Human Services (DHHS) continues to deliver the Family Reunification services.

Family Reunification services aim to strengthen Latino families separated by migratory circumstances by providing family-based, culturally competent psycho-educational workshops, as well as navigation support services to enhance families access to health and social services.

Families who participate in family reunification workshops develop key skills necessary to rebuild family relationships, enhance communication and start a process of emotional healing to effectively overcome the challenges they face in the process of reunification.

Families receiving navigation support are supported in their efforts to locate, apply and receive needed health care and social services, assistance in enrolling children in Montgomery County Public Schools (MCPS) and assistance in connecting to public and private legal assistance.

Navigation Assistance

Supplementing the program workshops is the Navigation assistance provided to help families access county resources, applying for programs and services, and enrolling children in public schools. This support included having LHI staff and Health Promoters regularly visit the MCPS Rocking Horse Center to inform families about county resources.

In FY17 LHI maintained a robust presence at Rocking Horse, assigning staff and Health Promoters to the site to provide navigation assistance. As the number of families accessing the Rocking Horse Center diminished over the years, LHI reduced the number of staffing assignments to Rocking Horse.

In FY18 only 2 health promoters were assigned to visit the site, and their engagement with families was less intensive than in prior years. At this time LHI focused resources on enhance family reunification workshops.

By FY19, LHI visited Rocking Horse as part of its routine outreach effort to partners to provide flyers and information about upcoming programs but did not provide any navigation assistance. FY19 data is not available yet.

Number of Children Assisted by LHI Staff and Health Promoters

FY17

Type of Assistance	Number of Children for whom assistance was REQUESTED	Number of Children for whom assistance was RECEIVED	Percent of requests GRANTED
Legal Services	413	141	34%
Health Care	590	328	56%
School Enrollment	540	455	84%
Family Reunification	205	92	45%
Mental Health	51	10	20%
Dental Services	509	328	64%

FY18

Type of Assistance	Number of Children for whom assistance was REQUESTED
Legal Services	4
Health Care	122
School Enrollment	36
Family Reunification	10
Mental Health	10
Dental Services	328

Family Reunification Assistance

LHI delivers Family Reunification workshops providing participating families with skills for improving communication within the family to start the process of emotional healing. Separate workshops are held for parents/caregivers, and for children. Workshop cohorts meet weekly for 6-8 weeks in the spring and fall and incorporate group-based approaches and techniques as well as psychodrama methodologies to address topics such as children’s behavioral issues, balancing the demands from two cultures, school engagement, and re-establishing family values, traditions, and the role of the parent. Workshops strengthen families by emphasizing family resilience and building off Latino cultural pillars of dignity, respect, trust, and love.

Workshops are delivered by trained facilitators (enrolled in the LHI’s Welcome Back Center for foreign trained health professionals) and utilize a curriculum LHI has adapted from Fairfax County Public Schools’ Family Reunite program, and from the National Compadres Network Inc.’s La Cultura Cura: Cara y Corazón (Culture Cures: Face and Heart) program. LHI’s curriculum reflects cultural and linguistic competency through use of popular and adult education methodologies which are learner-centered, interactive, and rely on participants’ experiences.

Program workshops are usually delivered at the MCPS schools who families recognize as a trusted community resource. This partnership has been especially critical to recruitment and engagement efforts, as families are apprehensive about accessing programs and services.

Family Reunification Program Data

Participants Served & Number of Workshops

	# of Family Reunification Workshops	# of Parents SERVED	# of Children SERVED	# of Children receiving Navigation
FY19 projected based on current Spring 2019 participation*	7	75	97	0
FY19 as of Feb. 2019	3	32	32	0
FY18	8	62	67	140
FY17	11	75	88	631

*Spring 2019 workshops are currently in session and will run into early June. Final participant numbers will be available then.

Participants Country of Origin

	El Salvador	Honduras	Guatemala	Other*	Total
FY19	50%	39%	11%	0%	100%
FY18	70%	16%	4%	11%	100%
FY17	55%	13%	9%	24%	100%

*Other participant countries of origin include Peru, Nicaragua and Venezuela

Program Trends

Complex Trauma

Minors have fled violence and hardship in their home countries where they may have been exposed to physical and sexual violence, extortion, and human trafficking. Their journeys to the US and their stays in US detention have also exposed them to myriad forms of trauma.

Exposure to violence and hardships may cause deep physiological and emotional trauma, manifested in significant mental health needs, impacting immigrants' ability to adapt to their new surroundings, and to re-establish healthy family relationships. A major motivation for Latino immigration is to reunify with their families, making the trauma much more complex.

Following years of separation families struggle to reacquaint themselves with each other, especially when new siblings and/or step-parents are involved. Parents may feel guilty about leaving their children behind, while children may feel angry, betrayed, or abandoned.

Add to this the stresses of learning a new language and culture, academic demands of school, managing social pressures, and facing the economic challenges of many low-income immigrant families and its clear to see the enormous strain on families and on county systems.

Anti-Immigrant Climate

The anti-immigrant climate fostered by the federal government over the past 2 years – including hateful and antagonistic language used by administration officials in the news and through social media, has had a chilling effect on Latino families. We've heard directly from participants that they are hesitant about participating in our program due to the growing and vociferous anti-immigrant sentiment they see and experience. News about ICE (Immigration and Customs Enforcement) raids, deportations and family separations are foreboding.

Public Charge

Further exacerbating the anti-immigrant sentiment is the impact of the public charge policy debate that would force families to choose between accessing important health insurance and public financial assistance programs and becoming a permanent resident or renewing a work visa. Families are simply deciding to not access public and social services they are eligible for.

Key Program Findings

Despite the above-mentioned trends, LHI has succeeded in reaching Latino families in need by leveraging contacts and relationships developed over years with MCPS personnel, as well as with our cohort of culturally competent family reunification facilitators.

Through our years of work delivering family reunification services to Latino families the program has identified 3 emergent themes: Length of Separation, Impact of Separation and Benefits of Facilitated Group Discussion.

Length of Separation

Based on program data collected, the number of years children have been separated from their parents is between 9 to 13 years. We see an association between years of separation and the affective ties between parents and children: the more years of separation, the less affection. Most workshop participants described experiencing a deficit of affection and love. Parents' immigration related decisions cause children to bear unresolved emotional pain and longstanding resentments that can hinder family reunification efforts.

Impact of Separation

Program data also shows children on average were 4 years old at the time of separation. Being separated from parent(s) at an early age has profound implications for the parent-child bond; children have reported seeing the parents they were separated from as strangers.

Benefits of Facilitated Group Discussions

The facilitated group discussions are an important step for participants in addressing the pain and ongoing challenges present within their reunified families. Sharing personal and emotional feelings was not just beneficial to the one affected parent or child, but also to fellow workshop participants who listened to each other's stories, reflected on their own experiences, and identified with the challenges faced by others.

Developing communications tools, receiving support and guidance for navigating the world around them, and having a safe space to share and learn from each other's experiences has helped participants improve their family relationships and lead more healthy lives.

Program Evaluation

The program evaluates the effectiveness of program workshops by measuring parents/caregiver's self-confidence to overcome challenges faced in the process of reunifying their families, and adolescents' feelings about their relationship with their parents.



Increase in Parent's Self-Confidence

The table below shows an increase in parents' self-confidence to overcome challenges faced in the family reunification process. According to parents' self-reports, their confidence increased in each of the five Family Reunification Program components (overall improvement of 26.6 %).

Parents' Self-Confidence Overcoming Challenges in the Process of Family Reunification Percentage Responding "Fairly Confident" or "Very Confident"

	Pre - test	Post - test	% Change
Spending time with your child, getting to know each other better; Reestablishing a positive relationship	77.5	100.0	29%
Preventing a disagreement with your child from escalating to a fight; Using effective communication skills	65	97.5	50%
Reestablishing mutual respect with your child; Reestablishing parental authority	77.5	97.5	25.8%
Being able to manage your own stress; Coping with stress	70	92.5	32.1%
Teaching your child cultural traditions & values; Incorporating cultural traditions and values to strengthen the families' bond	95	100	5.3%
Overall (increase)	77	97.5	26.6

Improvement in Adolescent-Parent Relationship

The table below shows that based on adolescents' self-reports, the adolescent-parent relationship improved in each of the Family Reunification Program's five components (overall improvement of 43%).

Changes Reported by Adolescents in the Relationship with Their Parents Percentage Responding "Always" or "Often"

	Pre- test	Post- test	% Change
Spending time together to know each other better; Having a positive relationship with their parents	44.7	68.4	53.0
Speaking calmly about problems at school; Using effective communication skills with their parents	31.6	57.9	83.2
Understanding parents have rights and responsibilities for their child's safety and well- being; Recognizing parental authority	78.9	97.4	23.4
Talking about the things that produce stress; Ability to talk about their feelings	34.2	47.4	35.6
Including family and country traditions in daily life; Sharing family and country traditions and values	55.3	78.9	42.7
Overall (increase)	48.9	70	43

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Overview of the Takoma East Silver Spring "TESS" Community Action Center:

Part of DHHS Montgomery County's Community Action Agency (MCCAA) and the Office of Community Affairs, the Takoma East Silver Spring (TESS) Community Action Center provides direct services and referrals to a low-income, primarily immigrant community in Long Branch, serving 2,759 unduplicated residents in FY18. A significant number of customers have limited English Proficiency, having originated from Central America, Mexico, Africa, Caribbean nations, as well as from other countries and from areas throughout the United States.

As a walk-in DHHS site that connects residents to public and private resources to address their needs, and as a Neighborhood Opportunity Network (NON) Site, MCCAA's bilingual TESS staff (English, Spanish and Amharic) join with "NON" connectors, partners and volunteers to assist residents, helping them to resolve problems and to apply for services, including: SNAP/nutrition programs (including food pantries); medical assistance and health referrals; housing resources (including utility and rental assistance); child care (including subsidies, MCPS Head Start/Prekindergarten, and summer camp).

In addition to application assistance (including notarizing documents and providing linkages and referrals to public and private resources, TESS hosts free legal services (through the Bar Association's Pro Bono Program), free tax assistance (VITA); programs for young children and their parents in the summer and school-year (MCPS Judy Center, DHHS, Head Start), a monthly senior social group; English classes and conversation groups (IMPACT Silver Spring), Summer Meals for children (MCPS); holiday giving; health & nutrition programs (Mary's Center, CHEER, Crossroads Farmers Market, the Latino Health Initiative, Manna, Behavioral Health Services, Share); and, special programs and events.

About Unaccompanied Minors and New Immigrant Families

For decades, TESS has been a first point of contact for new Americans, including those from Central America. Integrating new family members or friends within the household is often a challenge, with struggles related to acculturation and adjustment, authority, and identity. Many children/youth have experienced long periods of separation from a parent or extended family member, or have been traumatized by gangs. They often have difficulty adjusting to new step-parents and siblings. Some older youth resist attending school, as they did not have the benefit of a strong education in their own country, and do not feel prepared, or they feel obligated to work to provide financial support, or to stay at home to care for siblings.

How do people find you or find out about you? Where do your referrals come from?

As TESS has been in the same storefront location since the 60s, word-of-mouth referrals from neighbors, host-families or their own family living (or formerly residing) in the community is the primary source. TESS staff, non-profit and faith partners all share outreach about resources available at TESS and through the Long Branch Partners. Key messaging includes the capacity of TESS to provide

bilingual assistance, including "packaging" to prepare applications for a variety of programs, gathering documentation to help enroll children in school, and sharing information about a variety of free and low-cost programs, including healthcare, food and clothing assistance, and referrals for immigration assistance.

Trends/Challenges

- The daily intake of walk-in customers has been reduced since 2017, as fears about immigration and "government" have increased.
- The program has noted a drop among people willing to apply or re-certify for SNAP and other public benefits due to concern about public charge and the effect on immigration status and future citizenship, even among those programs historically considered "safe."
- Customers seem more comfortable seeking food and assistance referrals to nonprofit and faith-based providers; they express appreciation to TESS staff helping them to complete referrals.
- Staff report that many customers are reluctant or refuse to have their personal information to be entered in the eICM system. *(An analysis of TESS sign-in sheet information from FY18 is currently underway to better understand this trend).*
- Staff observe that many families are experiencing more stress. Parents shared that this adversely affects children.
- Fewer adults are coming forward to discuss or report physical or sexual abuse, or financial exploitation, for fear that a partner or friend will be deported.
- Staff are observing increasing participation at TESS among French-speaking, Cameroonian residents.
- With the development of the Purple Line, customers, partners and neighboring businesses have shared with TESS and partners that their rent for housing and the storefront businesses are increasing, straining budgets.
- Staff report that seniors who cannot afford to live independently are moving in with adult family members, many of whom are already in overcrowded living situations.
- Some parents have approached TESS for information about their LGBTQ children—there is a lack of understanding.
- Staff report that parents (and guardians) are unfamiliar with social media and the technology their children are using and experience a lack of control.

Immigration, Citizenship, and Legal Services April Workshops and Information Sessions (Office of Community Partnership newsletter)

> Free Legal Services Provided by Pro Bono Program

The Pro Bono Program provides FREE LEGAL SERVICES to low-income county residents in civil cases. The Pro Bono Program provides two means for residents to receive free services: at a legal advice clinic or through the client intake line for referral to an attorney volunteer for direct representation. Information is available in [English](#) and [Spanish](#).

- The Montgomery County Maryland Bar Foundation Pro Bono Program Legal Clinics meet twice a month throughout Montgomery County (Eastern Montgomery Regional Services Center & Germantown meet only once a month). Each clinic is staffed by attorneys versed in different areas of practice including immigration. Click [here](#) for schedules.
- Please note that the East county clinic that meets the 1st Thursday of every month has two Immigration attorneys to address inquiries regarding immigration.

The Pro Bono Program is committed to helping the residents of Montgomery County, MD. Individual circumstances may vary and in some cases we may not be able to assist everyone. Call the Pro Bono Program at 301-424-7651 between the hours of 9:00 a.m. - 3:00 p.m. Monday - Thursday for additional information.

>Free Citizenship Application Workshop hosted by APALRC

The APALRC will host a free Citizenship Application Workshop on Saturday, April 27th from 10 a.m. to 2 p.m. at the Rockville Memorial Library. At this workshop, attendees can expect to receive free one-on-one assistance in completing the paperwork to apply for naturalization/U.S. citizenship.

- This workshop is free and open to all regardless of country of origin or nationality. Assistance with Fee Waiver, Reduced Fee, and Medical Exception applications will also be provided, as applicable. We encourage everyone who is interested in attending this workshop to register in advance either online at www.apalrc.org/citizenship-guide or by calling 202-706-7135.

>FREE Citizenship Classes Throughout Montgomery County

Baltimore City Community College (BCCC), a Maryland state agency, provides FREE citizenship preparation classes throughout Montgomery County, including locations in Gaithersburg, Germantown, Rockville, Silver Spring, and Wheaton.

- Citizenship classes prepare students with the ESL skills and knowledge of U.S civics and the naturalization process to complete the federal citizenship exam and successfully become U.S citizens. Classes are multi-level and are offered on various schedules to meet the needs of learners, including weekends and evenings. See the Spring 2019 schedule [here](#).
- Spring classes and registration will begin on April 6, 2019. To register, please, bring your green card and social security card to any class time and location. Walk-ins are welcome. Please check the BCCC website to see the full class schedule. Contact Citizenship Program Coordinator Yana Cascioffe for more information at 410-986-3201 or ycascioffe@bccc.edu.

>Citizenship Information Sessions Presented by Montgomery College and Catholic Charities

Are you a legal, permanent resident preparing for the U.S. citizenship test and interview? Come to an information session and discover how Montgomery College and Catholic Charities may be able to

help you for free! Information sessions: April 9th at 6 p.m. or April 13th at 9a.m. See [website](#) for more information.

>Free Citizenship Preparation Classes in Montgomery County

Montgomery College (MC) provides FREE citizenship preparation classes throughout Montgomery County, including locations in Rockville, Silver Spring, and Wheaton. Multi-level classes are funded through a grant from United States Citizenship & Immigration Services (USCIS) at various schedules to meet the needs of learners.

- Registration will begin on April 9th at 6pm or April 13th at 9am at 9am. To register, please bring your green card to Montgomery College, 11002 Veirs Mill Road, Wheaton, MD, 20902. Please check the [MC Citizenship Website](#) for more information or call 240-567-8839.

>Kids in Need of Defense (KIND) Baltimore office is hosting a two-part training in Rockville

- Representing Children in Immigration Matters - Part 1: Special Immigrant Juvenile Status (SIJS), Thursday, April 18th, 12:30 p.m. - 1:30 p.m. Click [here](#) for more information.
- Representing Children in Immigration Matters - Part 2: Asylum, Thursday, May 9th, 12:30 p.m. - 1:30 p.m. Click [here](#) for more information.

>Free Immigration Clinic hosted by AYUDA

Ayuda offers free consultation clinics which provide clients with brief advice and referrals.

- The next clinic (in English and Spanish) is April 26, 2019 from 10 a.m. to 12 p.m. at the Honduran Consulate at 1990 M Street NW, Suite 104, Washington, DC 20036. Clients should bring all immigration documents, identifying documents, any police reports, and any criminal court records if they have been accused or convicted of a crime.

>Know Yours Rights Presentation

Washington DC-Maryland Justice for Our Neighbors will be holding a Know Your Rights presentation for community members on April 4, 2019 at 6pm at Epworth Church (9008 Rosemont Dr., Gaithersburg, MD 20877).

- An attorney will present information on immigrants' rights at work, home, and in public spaces. The attorney will also discuss forms of immigration relief. The presentation will be conducted in English, Spanish, and French. Free food and childcare will be provided. In these uncertain times, it is important to know how the law affects immigrants and their communities. Please join us! [More information is available in English, Spanish, and French.](#)
- Please note our NEW Maryland office address as of 3/18/2019: 8757 Georgia Ave, Suite 800 Silver Spring, MD 20910. Main line: (240) 594-0600 Direct: (202) 243-7301. Office hours: 8:30-4:30 Monday through Friday.

>HIAS Contact Information

HIAS will be using a new phone number for their legal intake line: 301-844-7248.

HIAS offers phone intake the first Friday of the month (from 9 a.m. - 5:00 p.m.). The next intake will be on Friday, April 5th.

Language Services and Financial Assistance

>Language Services by Ayuda

Do you provide services to Maryland victims of crime? Do you ever need a spoken or sign interpreter to communicate with the victims whom you serve? The Language Access Program at Ayuda can provide you with professionally trained, trauma-informed interpreters at no cost (because of funding from the Maryland Governor's Office of Crime Control and Prevention).

>Financial Assistance for Citizenship Application Fees offered by CASA

CASA, in partnership with Montgomery County, is offering financial assistance to those who are eligible to apply for citizenship but cannot afford to pay the application fee. Residents of Montgomery County who earn less than 300% of the federal poverty guideline may qualify for a scholarship in the amount of \$150 or \$300 to help pay the application filing fee. Interested applicants should call (240) 560-2272 for more information. Flyers are available in [English](#) and [Spanish](#). Note: Low-income individuals seeking to apply for citizenship may also be eligible for a [fee waiver](#) or [reduced fee](#) through USCIS.



CHARLES W. GILCHRIST
**IMMIGRANT
RESOURCE CENTER**

Welcome. Connect. Together We Thrive.



MISSION: We are Montgomery County's resource center for immigrants. We strengthen the County by connecting our diverse communities with educational, economic and civic resources so all may thrive here.



Students say,

"The Gilchrist Immigrant Resource Center helped us..."

- By providing a place where we can practice writing and reading
- By giving us good programs to help all immigrants in this area
- By providing caring teachers who teach us what we don't know
- By equipping us with knowledge so we do not have to be afraid of the computer
- By giving people more information about many things in the USA

What is the Gilchrist Immigrant Resource Center?

- A Welcome Center
- A Learning Center
- An Information & Resource Center
- A Celebration of Diversity
- A Space to Build Community



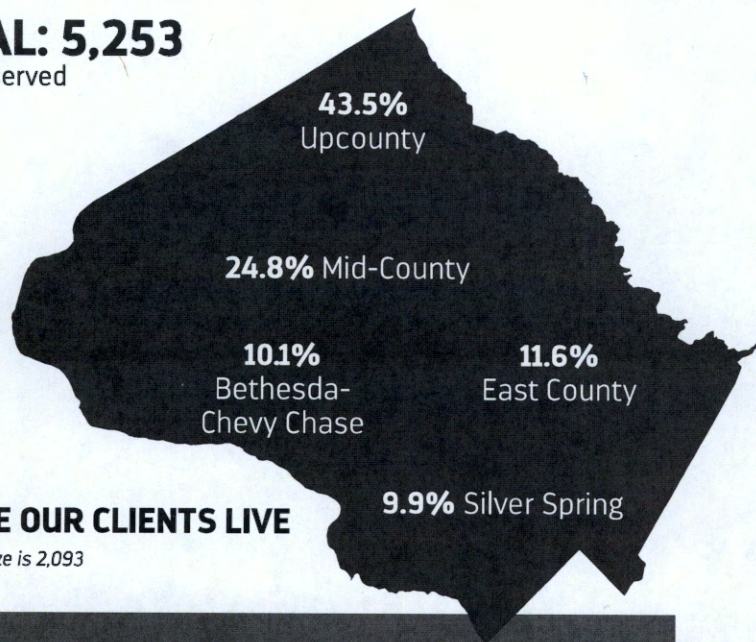
WE CONNECTED RESIDENTS TO A RANGE OF SERVICES AND RESOURCES.

3,736 clients referred to services by visiting one of our centers

1,517 clients referred to services over telephone

TOTAL: 5,253

clients served



WHERE OUR CLIENTS LIVE

*Sample size is 2,093

REFERRED SERVICES

ESOL	38.87%
Computer Class	15.95%
Citizenship	7.81%
Other	7.73%
Legal Services (Non-immigration)	6.26%
Health and Human Services	4.82%
Montgomery College Programs (GL & EC only)	4.70%
Workforce Development	4.19%
Immigration Issues	3.71%
Taxes	1.66%
Welcome Letter	0.93%
Children and Youth	0.91%
Volunteering	0.84%
Housing	0.80%
Spanish Language Class	0.57%
Spanish Literacy Class	0.25%

"I am a young person with university degree from my country. I want to learn the [English] language to improve myself and help others like us who have dreams." – Student from Winter 2018 ESL class



GEOGRAPHIC ORIGINS OF GILCHRIST CENTER CLIENTS*

*Clients who accessed information and referral services

Central America	22.5%
South America	21.3%
North America	10.5%
East Africa	9.5%
West Africa	8.6%
South Asia	5.5%
Central Africa	5.3%
North Africa and Middle East	5.2%
East Asia	3.8%
Caribbean	3.7%
Southeast Asia	1.7%
Other	2.4%



Through our relationships with key partner organizations:

- **1,128** enrolled in a range of classes, including English, computers, and employment-related classes and academic/career advising program offered by Montgomery College
- **1,058** received free legal help from Montgomery County Bar Foundation Pro Bono Program and Asian Pacific American Legal Resource Center
- **677** learned English as a Second Language in Literacy Council of Montgomery County classes
- **707** prepared for the civics portion of the naturalization test and interview through Baltimore City Community College Citizenship Program

WE SERVED RESIDENTS BY PROVIDING THEM WITH PROGRAMS TO MEET THEIR NEEDS.

Through volunteer-taught Gilchrist Center classes:

7,310	+	747	=	8,057
students attended drop-in classes		students registered in session-long classes		students gained English as a Second Language (ESOL), Spanish, computer or job search skills



"The Gilchrist Center has given me, personally, an incredible confidence and pride in our county. This is the place where immigrants can be welcomed and, in turn, turn around to welcome someone else."

– Jodie Asher, volunteer at our Wheaton site

WE BUILT CULTURAL COMPETENCY AND COMMUNITY THROUGH OUR VOLUNTEER PROGRAM.

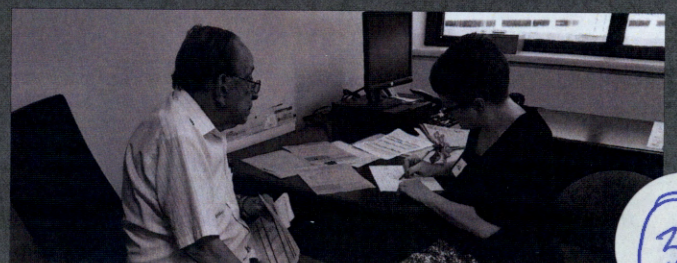
- **96** volunteers taught classes and provided program support
- **5,031** total volunteer hours
- **\$124,215** leveraged in volunteer hours *

*value based on number of volunteer hours times national estimated value of volunteer time as stated by http://independentsector.org/volunteer_time

FY2018 HIGHLIGHTS

FY2018 brought unforeseen challenges to the Gilchrist Center due to the need to re-locate, not once, but twice. Although the Center had long been planning the move to our new Headquarters in Wheaton, unexpected circumstances forced us to vacate our prior space early, before the new permanent location was ready. It was only through the resourcefulness and perseverance of our staff that we were able to find interim space to continue operations and avoid a lengthy closure of the Center. Though moving offices both to the interim space and then to our new Headquarters involved many challenges, thanks to the hard work of our staff, partners and volunteers, we were able to greatly minimize the disruption in services to the community and still have a successful year, as discussed in the Highlights below.

- The Headquarters in Wheaton moved to a new permanent location in the Westfield South Building in January, after a few months at a temporary office. The Gilchrist Center celebrated its move in April with partner organizations and dedicated volunteers, along with County Executive Ike Leggett and Councilmember Nancy Navarro.
- As a member of Cities for Citizenship, a coalition of local governments encouraging eligible residents to apply for U.S. citizenship, we launched a Citizenship Initiative website to streamline the information related to citizenship application and its service providers. The website is www.montgomerycountymd.gov/gilchrist/citizenship.
- In partnership with Department of Technology Services, we designed and implemented a new data tracking system. The new system uses tablets making customer information collection much more effective and efficient. The new automated system received a National Association of Counties Achievement Award, which is awarded to outstanding programs of the year.
- Montgomery County was chosen as one of the four U.S. communities for the Welcoming Communities Transatlantic Exchange Program, the U.S.-Germany exchange program for immigrant integration practitioners. The German delegation stayed for four days in Montgomery County, visiting MCPS, Linkages to Learning, Impact Silver Spring, Montgomery College, etc. The Montgomery County team of four, one of who is the Gilchrist Center staff, will be visiting German cities in November 2018 as part of the program.
- A delegation of six British cities visited Montgomery County in May 2018 through the University of Oxford's Inclusive Cities Program to learn about best welcoming practices and exchange ideas with Montgomery County's immigrant integration practitioners.



THANK YOU

The Gilchrist Immigrant Resource Center thanks all the volunteers who have given their time, enthusiasm, understanding and energy to our work. We have succeeded in all we have done thanks to you!

JOIN US IN OUR WORK

Become an ambassador for your community and help welcome our new neighbors! Download the volunteer application form from our website at www.montgomerycountymd.gov/gilchrist or call 240.777.4940 for more information.

OUR TEAM

www.montgomerycountymd.gov/gilchrist/contact_us.html

*Gilchrist Center
Manager*

Kaori Hirakawa

*Program Manager,
Wheaton*

Anna DeNicolo

*Program Manager,
East County*

Josephine Garnem

*Program Manager,
Upcounty*

Yunie Hong

Operations Coordinator
Gabriela Raudales

*Information and
Referral Specialists*

Carla Ayala

Graigni Loor-Iwasaki

Jean Jacques Luboya

June Lee

Natalie Chhuan

Martha Guzman

Maxwell Ji

Norah George

Taylor Trombley

*Office of Community
Partnerships Director*

Bruce Adams



CHARLES W. GILCHRIST

IMMIGRANT RESOURCE CENTER

Welcome. Connect. Together We Thrive.

LOCATIONS

Headquarters

Westfield South Building
11002 Veirs Mill Road, Suite 506
Wheaton, MD 20902

240.777.4940

Gaithersburg Library

18330 Montgomery Village Avenue,
2nd Floor
Gaithersburg, MD 20879

240.777.4960

Upcounty Regional Services Center

12900 Middlebrook Road
Germantown, MD 20874

240.777.6950

East County Regional Services Center

3300 Briggs Chaney Road
Silver Spring, MD 20904

240.777.8406

The Gilchrist Immigrant Resource Center is part of Montgomery County's Office of Community Partnerships. OCP's mission is to strengthen relationships between the Montgomery County government and the residents it serves, with special focus on underserved and emerging communities and our neighbors in need.



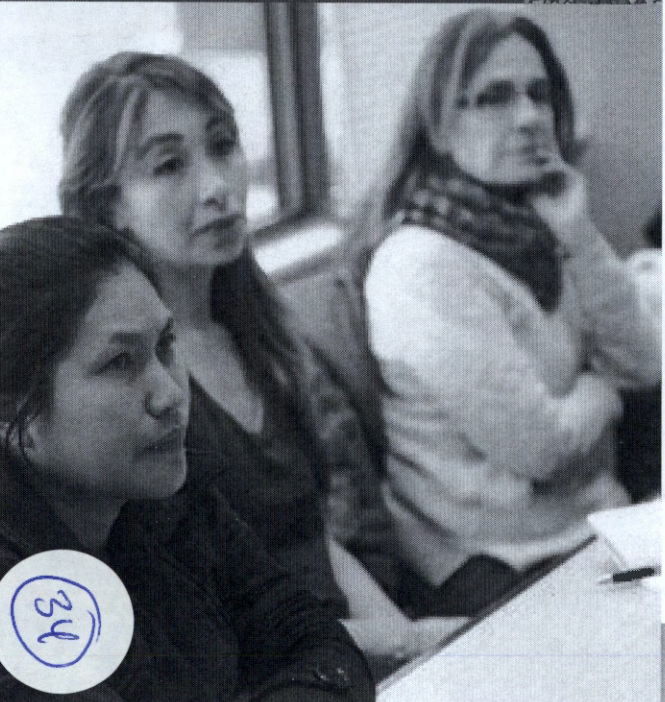
Main Number: 240.777.4940

GilchristCenter@montgomerycountymd.gov

www.montgomerycountymd.gov/gilchrist



The Charles W. Gilchrist Immigrant Resource Center is Montgomery County's welcome center for immigrants. We strengthen the County by connecting our diverse communities with educational, economic, and civic resources so all may thrive.



OUR LOCATIONS

Headquarters until 2017
Mid-County Regional Center
2424 Reedie Drive, Suite 220
Wheaton, MD 20902

240.777.4940

Headquarters starting January 2017
11002 Veirs Mill Road, 5th Floor
Wheaton, MD 20902

240.777.4940

Gaithersburg Library
18330 Montgomery Village Avenue, 2nd Floor
Gaithersburg, MD 20879

240.777.4960

Upcounty Regional Center
12900 Middlebrook Road
Germantown, MD 20874

240.777.6950

East County Regional Center
3300 Briggs Chaney Road
Silver Spring, MD 20904

240.777.8406



CHARLES W. GILCHRIST
**IMMIGRANT
RESOURCE CENTER**
Welcome. Connect. Together We Thrive.

Main Number: 240.777.4940

GilchristCenter@montgomerycountymd.gov

www.montgomerycountymd.gov/gilchrist

This Quick Start Guide was made possible because of funding by the Fund for Montgomery, including generous contributions from Former County Executive Sidney Kramer & Family, Montgomery County Executive Ike Leggett, Aris Mardirossian, Montgomery County Muslim Foundation, Bruce Adams & Margaret Engel, Former Member of Congress Mike Barnes, Barbara Goldberg Goldman & Michael Goldman, Marvin Lang, Steve Silverman, Sanford and Doris Slavin Foundation, and Annie Totah.



CHARLES W. GILCHRIST
**IMMIGRANT
RESOURCE CENTER**
Welcome. Connect. Together We Thrive.

QUICK START GUIDE FOR IMMIGRANTS IN MONTGOMERY COUNTY, MD



The Gilchrist Immigrant Resource Center is here to serve you. When you need help, please call us. We will connect you to the resources you need.

Visit us in Wheaton, Gaithersburg,
Germantown and Silver Spring.

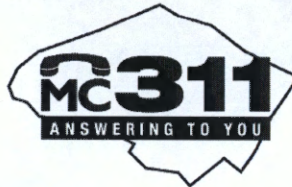
www.montgomerycountymd.gov/gilchrist



**FOR POLICE, FIRE
AND AMBULANCE,
CALL 911**



311 is Montgomery County's phone number for non-emergency government information and services.



Dial 311 or visit

www.montgomerycountymd.gov/311

311 telephone operators speak English and Spanish. Interpreters that speak other languages are available.

On the 311 website, use the search box to find the help you need. Results will show in English only.



infoMONTGOMERY

infoMONTGOMERY is an extensive online database of health, education, and human service resources throughout Montgomery County.

Visit www.infomontgomery.org or call (301) 354-4905.

Go to "Find Help" and click on "Immigrants and Community Newcomers" or use the search box to find the help you need.

OTHER USEFUL RESOURCES

How Faith Communities in Montgomery County Can Welcome Our New Neighbors

(Provides resources for refugees).

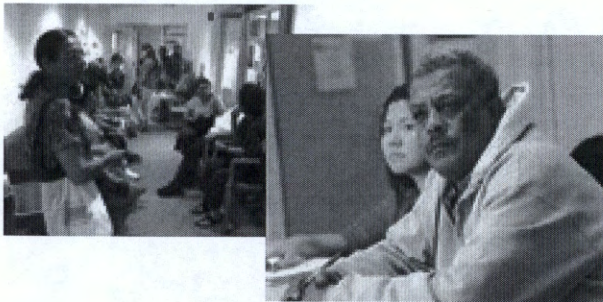
www.montgomerycountyinterfaithmd.org

Click on Media/Events, then Media to view the guide.

Catholic Charities Quick Resource Guide

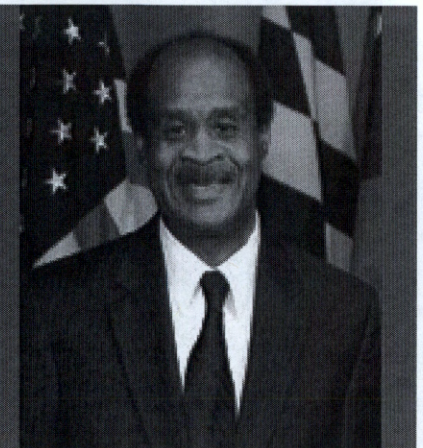
www.catholiccharitiesdc.org/CommunityResources

Under Maryland, click on Montgomery County.



"Montgomery County is the wonderful place it is today because we have welcomed new people to our community. Because we strive to be one of the most welcoming communities in the nation, Montgomery County has become a talent magnet for people from across the country and around the world. Our Gilchrist Center is here to help immigrants thrive in Montgomery County. This brochure, along with the Center's website and staff, can help you connect to the services you need to succeed."

– Montgomery County Executive Ike Leggett



ENGLISH FOR SPEAKERS OF OTHER LANGUAGES (ESOL) AND BASIC COMPUTER CLASSES

We can connect you to quality, free or low-cost ESOL programs and basic computer classes throughout the County.

Directory of Classes: For a directory of classes in the area, visit Montgomery Coalition for Adult English Literacy at www.mcael.org/directory or (301) 881-1338

Montgomery College: The Adult ESOL and Basic Skills for College and Careers offers many helpful classes. Visit cms.montgomerycollege.edu/wdce/aelg.html or (240) 567-5188

Literacy Council of Montgomery County: Offers English classes with more classroom hours and individual tutors. Visit www.literacycouncilmcmd.org or (301) 610-0030

Montgomery County Public Libraries: Offers ongoing English conversation classes and limited computer classes. Visit www.montgomerycountymd.gov/library or call (240) 777-0007 to find the branch closest to you

Gilchrist Center: Offers basic computer classes, English conversation classes, and weekly ESOL classes on a limited basis. Visit www.montgomerycountymd.gov/gilchrist or (240) 777-4940

CITIZENSHIP

Eligible permanent residents can apply to become U.S. citizens. Check your eligibility at www.uscis.gov. Several programs provide free classes to prepare you with the English skills and U.S. history, politics, and civics necessary to pass the citizenship test.

Montgomery College: cms.montgomerycollege.edu/wdce/aelg/citizenship.html or (240) 567-8169

Baltimore City Community College: www.bccc.edu/citizenship or (410) 986-3201

CASA de Maryland: www.wearecasa.org/services/citizenship or (240) 560-2272

LEGAL SERVICES

Several organizations offer free or reduced cost help from licensed attorneys.

Free Civil Legal Clinic: Montgomery County Bar Foundation offers free weekly legal clinics on a range of topics. Visit montbar.site-ym.com/?ClinicsClinicas or (301) 424-3454

Immigration Legal Services Directory: For a directory of legal service providers in the County helping immigrants and refugees, visit: www.montgomerycountymd.gov/partnerships/immigration-legalsupport.html

HEALTH AND HUMAN SERVICES (HHS) RESOURCES

For more information on community resources and referrals to programs, contact the Neighborhood Centers.

- **Gaithersburg** (Family Services): (240) 773-1151
- **Wheaton** (Catholic Charities): (301) 942-1790
- **Silver Spring** (TESS Community Center): (240) 773-8260

The County provides extensive resources on health and human services. Visit www.montgomerycountymd.gov/HHS/ProgramIndex/HealthServicesindex.html

CHILDREN AND YOUTH

Many resources exist for children in Montgomery County.

Free Preschool: Children who are 4 years old by September 1 from low-income families can enroll in free Montgomery County Public Schools (MCPS) Pre-Kindergarten and Head Start programs. Visit www.montgomeryschoolsmd.org or call (301) 230-0676

Childcare: LOCATE: Childcare is a free referral service with information about all regulated childcare in Maryland. Visit www.marylandfamilynetwork.org/programs-services/locate or call (877) 261-0060

Enrolling in MCPS: Visit the MCPS' International Admissions Office to enroll a student who has not attended school in the U.S. during the previous two years. Children can enroll regardless of immigration status. www.montgomeryschoolsmd.org/internationaladmissions or (301) 230-0686

Youth programs: Many groups provide support to youth and their families, including after school activities, mentoring and recreation. Check with your school, local recreation center, or visit www.infomontgomery.org/youth-development for more information.

HOUSING

Montgomery County offers a range of housing help.

Affordable Housing:

- **Housing Opportunities Commission:** www.hocmc.org or (240) 627-9400
- **Montgomery County Department of Housing and Community Affairs:** www.montgomerycountymd.gov/dhca

Emergency Financial Assistance: For help with rent, eviction, foreclosure, or utility disconnection:

- Visit www.montgomerycountymd.gov/hhs/programIndex/FinHousingServicesindex.html
- **Germantown Regional Office:** (240) 777-4448
- **Rockville Regional Office:** (240) 777-4550
- **Silver Spring Regional Office:** (240) 777-3075
- **East County Regional Office:** (240) 777-4470

FINANCIAL LITERACY

Learn more about saving, borrowing, managing credit, and buying a home.

- **Asian-American Homeownership Counseling:** www.aa-hc.org or (301) 760-7636
- **Latino Economic Development Center:** www.ledcmetro.org or (866) 977-LEDC
- **Coalition for the Advancement of Financial Education:** www.cafemontgomerymd.org or (240) 654-5964

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HEALTHCARE

The County provides a wealth of health care resources.

Health Insurance: If you do not have health insurance, and you want to obtain it, call (855) 642-8572 or visit www.marylandhealthconnection.gov

Primary Care: For primary and preventive medical care for uninsured adults, visit the Primary Care Coalition of Montgomery County at www.primarycarecoalition.org or (301) 628-3405. For a list of medical clinics, visit Montgomery Cares at www.montgomerycares.org. You can also call 311 for more information

Children's Health Care: Care for Kids provides access to health care for uninsured children in the County. You must enroll by visiting one of the County Health and Human Services (HHS) offices. Call (301) 628-3438 for more information.

Mental Health: For mental health information and referrals in the County, contact the Mental Health/Substance Abuse Screening and Referral Program at (240) 777-1770

The County's Minority Health Programs:

- **African American Health Program:** www.onehealthylife.org or (240) 777-1833
- **Asian American Health Initiative:** www.aahiinfo.org or (240) 777-4517
- **Latino Health Initiative:** www.lhiinfo.org or (240) 777-3221

CRISIS SERVICES

Montgomery County provides help during crisis situations.

- All situational and psychiatric crises: (240) 777-4000
- Abused persons and domestic violence: (240) 777-4673
- Adult abuse and neglect: (240) 777-3000
- Child abuse and neglect: (240) 777-4417
- Victim assistance and sexual assault: (240) 777-1355 or (240) 777-4357 (24 hours)

Visit www.montgomerycountymd.gov/hhs and select "Crisis Services."

FOOD ASSISTANCE

Emergency food assistance is available through the government or food pantries.

- **SNAP (Food Stamps):** You can apply online for food stamps at www.marylandsail.org or by visiting a County office. Visit www.montgomerycountymd.gov/hhs and under "Benefits/Housing," select "Food" for office locations.
- **Manna Food** (various locations): www.mannafood.org or (301) 424-1130
- **Catholic Charities** (Silver Spring): www.catholiccharitiesdc.org/MFC or (301) 942-1790
- **Mid-County United Ministries** (Wheaton): www.mumhelp.org or (301) 929-8675
- **SHARE Food Network** (various locations): (301) 864-3115

EMPLOYMENT

Several organizations provide job skills training that can lead to employment.

Worksource Montgomery:

www.worksourcemontgomery.com or (240) 403-4012

CASA de Maryland: www.wearecasa.org/vocationaltraining or (240) 491-5775

Montgomery College Workforce Development and Continuing Education:

cms.montgomerycollege.edu/wdce or (240) 567-5188

Catholic Charities Education and Employment Training: www.catholiccharitiesdc.org/Education-and-Employment or

- Silver Spring: (301) 942-1790
- Gaithersburg: (301) 740-2523
- Washington, DC: (202) 939-2400

A Wider Circle: www.awidercircle.org or (301) 608-3504

Interfaith Works: www.iworksmc.org/vocational-services or (301) 585-4471 ext. 13

TAXES

The Volunteer Income Tax Assistance program provides free tax preparation services for low to moderate income County residents, at various locations throughout the County. Call (240) 777-1123 or visit:

- www.montgomerycountymd.gov/HHS-Program/OCA/VITA/VITA.html
- www.montgomerycountymd.gov/CASHBACK/

SENIORS AND PEOPLE WITH DISABILITIES

Montgomery County has many resources for seniors and people with disabilities:

- **Seniors:** www.montgomerycountymd.gov/senior/index.html or (240) 777-3000
- **People with disabilities:** www.montgomerycountymd.gov/HHS/ProgramIndex/DisabilityServicesindex.html or (240) 777-3000

FRAUD/SCAMS/DISCRIMINATION

Laws exist to protect you from unfair and deceptive business acts. You can file a complaint with one of the agencies below:

- **Montgomery County's Office of Consumer Protection:** www.montgomerycountymd.gov/ocp or (240) 777-3636
- **Maryland Department of Labor, Licensing and Regulation:** www.dllr.state.md.us or (410) 230-6001
- **Federal Trade Commission:** www.ftccomplaintassistant.gov

Discrimination and Hate Crimes: Human rights laws protect you from discrimination and crimes of hate/violence. If you think you have been a victim, contact:

- **Montgomery County's Office of Human Rights:** www.montgomerycountymd.gov/humanrights or (240) 777-8450
- **Maryland Commission on Civil Rights:** www.mccr.maryland.gov or (410) 767-8600
- **Equal Employment Opportunity Commission:** www.eeoc.gov

The Promise of Latino Youth in Montgomery County

by C. Andrew Conway, MSW and Amy Lewin, PsyD

October 2018 | University of Maryland School of Public Health, Department of Family Science | Prepared for Identity

Background

Between 2000 and 2017, Montgomery County's Latino population increased by 90%, the most dramatic growth of any minority group. Latinos now make up 18.6% of the Montgomery County population (approximately 190,550 individuals). About one-third of the county's Latino population are 19 years old or younger¹ and they are, in fact, the fastest growing demographic in the county's public schools, now exceeding 32% of the student population (approximately 52,320 Latino students).

With this exponential growth, the percentage of the county's Latino community now mirrors that of the Latino population across the United States — approximately 18% of the total population² (or 56.6 million residents), 32% of whom are youth under 18 years old. However, Montgomery County's Latinos are distinct from the national Latino population, which is primarily U.S. born and of Mexican descent. Montgomery County Latinos are predominantly from Central American countries and have come to the United States to escape civil wars and human rights abuses. The majority of the county's Latino youth are immigrants or children of immigrants who fled their homelands due to civil wars, violence, political instability, or economic crisis.

Identity has been working with at-risk youth and their families for the last 20 years to close the gap between the promise of young people and the negative life outcomes they face without opportunities to reach their highest potential. Identity provides direct services to youth and families, and works to make community systems more responsive and appropriate to the needs of the local Latino community.

The rapid growth in the county's Latino youth population, which continues to outpace the infrastructure available to serve them, combined with current political and social stressors on Latino families, lead to significant concerns about how Latino youth in the county are faring. In response, Identity partnered with a team of researchers from the

University of Maryland School of Public Health to assess select indicators and determinants of social-emotional and academic well-being, and job readiness, in order to guide Identity, educators, policy makers, and county stakeholders in efforts to improve outcomes for our county's Latino youth.

Data Used for This Report

The data referenced in this report come from several sources as noted throughout the report, including Maryland State Department of Education, Montgomery County Public Schools (MCPS), the National Children Health Survey, the Youth Risk Behavior Survey, Kids Count, and other research studies.

The report also uses data from the Identity baseline survey given to all new Latino youth participating in Identity programs in middle schools, high schools, and Youth Opportunity Centers, in fiscal years 2016 and 2017. These data consist of the youths' self-report, and therefore represent conservative estimates of challenges, as youth often underreport problematic behaviors or distressing symptoms. All Identity baseline data presented in this report were collected upon entry into Identity's programs, prior to receiving any intervention. This is not evaluation or outcome data.

The Identity middle and high school youth sample includes 1,125 Latino youth from nine middle schools (38%) and five high schools (62%), of which 54.5% are male and 45.5% are female. The sample from the Identity Youth Opportunity Centers (YOCs) includes 309 Latino youth of which 63% are male and 37% are female, with a mean age of 19 years. In the YOC group, 14.9% had a high school diploma; 49.8% dropped out of school; 7.4% were expelled; 27.8% were still in school; and 60% were unemployed. Additionally, the report includes FY2018 data from a sample of 440 parents of youth enrolled in Identity's elementary, middle and high school programs.

Summary of Findings

The Promise of Latino Youth report tells a story of lost potential, and a breach in the compact between a community and its youth to help them achieve their highest potential. The data present a group of Latino youth in Montgomery County who express great hope and motivation for their futures, in stark contrast to the reality we see unfolding for them.

- Latino youth in Montgomery County report high academic motivation, high academic expectations, and a positive outlook for the future, which diminish as they get older and/or face significant challenges.
- In actuality, Latino youth in Montgomery County are exceptionally vulnerable, facing significant barriers to success in their studies, work, and life: starting school unprepared for kindergarten, reading below grade level throughout elementary school, experiencing the school system's highest dropout rates, struggling to earn a post-secondary credential, and experiencing high rates of adversity and psychological distress.

Social-Emotional Trends

Future Expectations

Research has demonstrated that having hopeful and positive expectations for one's future is related to the positive development of a range of important social-emotional outcomes including self-regulation, self-efficacy, and good relationships.³ However, Latino students may have fewer of these positive expectations than other groups of students. For example, in one study of 9th graders, Latino students were less likely than Black and White students to have high expectations regarding their education.⁴

Identity youth generally report at baseline that they feel positively about their futures, feel confident they will accomplish life goals, and feel prepared to deal with problems they may face in the future. However, the percentage of Identity youth who have these positive future expectations significantly decreases with age: **87%** of middle school students feel positively about their futures, and this number decreases to **76%** of high school students. Indicators related to life expectations for YOC youth reflect even lower future expectations, with only **67%** feeling positive about their future. These baseline data suggest that as they get older, and face significant challenges without adequate support, increasing numbers of Latino youth lose this important sense of hope and confidence about their futures.

Conflict Management

A young person's ability to effectively navigate challenging situations with peers or adults is an important component in the development of positive relationships and job readiness and retention. Youth who manage conflict through positive communication and effective problem-solving are better able to handle problems with peers and family, show an increased ability to cope with anxiety, and may be less likely to engage in substance abuse or have interactions with the police.⁵⁻⁸

At baseline, the youth served by Identity are struggling with the development of these important skills. Among middle and high school youth, **80%** reported at least some degree of challenge with conflict management skills such as communicating with others they have a problem with, finding ways to relax in order to deal with things that get on their nerves, or finding non-aggressive ways to deal with anger.

Symptoms of Depression

Studies have shown that Latino youth are likely to experience much higher rates of depression symptoms than White youth, and other minority youth, and the rates of depression symptoms in Latino youth are on the rise⁷. Depression symptoms can negatively impact social-emotional health, physical health, and the overall quality of life for an individual. Depression symptoms are related to many of the stressors that the youth served by Identity face: immigration, acculturation, and family separation.^{9,10}

Nationally, Latino youth have been found to be more likely than White youth (**34%** compared to **30%**) to feel sad or hopeless, a key symptom of depression.¹¹ A separate national study found that **22%** of Latinos reported depressive symptoms compared to **18%** of White youth⁹. This pattern is seen in the youth served by Identity: at baseline, **30%** of Identity middle and high schoolers report heightened levels of depression

symptoms, and **37%** of youth from the YOCs report heightened levels of depression symptoms (sadness, easily bothered, lack of enjoyment, loneliness). Foreign-born youth were even more likely than US-born peers (**34% vs 29%**) to report experiencing elevated symptoms of depression.

We also find that depression levels negatively impact Identity youths' academic motivation. Those who reported heightened symptoms of depression were **almost two times** as likely as youth reporting lower levels of depression symptoms to express uncertainty about graduating high school.

Academic Trends

Academic Expectations

Academic motivation among Identity youth is high, with **93%** reporting that they care about getting good grades. Yet only **83%** of Identity high school youth report that they expect to graduate from high school. This percentage is dramatically lower than the **98%** of high school students nationally who expect to graduate from high school;¹² it is also far lower than the **92%** of Identity middle school youth expecting to graduate high school. This discrepancy suggests that as Latino students age and experience barriers to academic success, they become markedly less optimistic about their ability to graduate.

3rd Grade Reading level

Reading proficiently by the end of third grade (as measured by the National Assessment of Educational Progress [NAEP] at the beginning of fourth grade) is a critical benchmark in a child's educational development. Up until the end of third grade, most children are learning to read. Beginning in fourth grade, however, they are reading to learn, using reading skills to gain more information in subjects such as math and science, to solve problems, to think critically about what they are learning, and to act upon and share that knowledge in the world around them.¹³

The Maryland 2017 NAEP reading results for a sample of Maryland fourth graders show that only **22%** of Maryland's Latino fourth graders are proficient or advanced in grade level reading, compared to **55%** of their White and **27%** of their Black peers. Results from the 3rd grade Maryland Comprehensive Assessment Program (MCAP) English/Language Arts standardized testing for Montgomery County, similarly show that Latino 3rd grade students underperform all other student groups in reading. Only **25%** of Latino students met 3rd grade expectations, in stark contrast to **67%** of White 3rd grade students and **33%** of Black 3rd graders who met or exceeded the expectation.¹⁴

Graduation Rates

In 2017, the U.S. Department of Education and the National Center for Education Statistics announced that high school graduation rates rose to a new high, with more than **84%** of US students graduating on time in 2016, up almost a percentage point from 2015.¹⁵ While all minority groups saw a rise in on-time graduation rates, gaps persist. Only **76%** of Black students and **79%** of Latino students graduated on time, compared to **88%** of White students and **91%** of Asian/Pacific Islander students.

In contrast to the increase seen nationally, Latino student graduation rates in both Maryland and Montgomery County have been trending downward:¹⁴

Maryland and Montgomery County Graduation Rate: % by group (4-year adjusted cohort)

Year	Latino		Black		White	
	MD	MoCo	MD	MoCo	MD	MoCo
2017	73.98	78.54	85.44	88.21	92.66	≥ 95
2016	76.55	80.37	84.06	87.69	92.41	≥ 95
2015	76.89	79.64	82.29	86.78	92.03	94.94
2014	77.46	80.03	80.54	86.42	91.91	94.94

Consistent with these state and county data, **71%** of Identity youth report at baseline expecting that they will attend college or university. This is significantly less than the **87%** of a nationally representative sample of high school students who expect to attend college.¹² Such limited educational attainment creates and perpetuates a cycle of poverty, economic hardship, and negative health outcomes for local Latino youth.

Workforce Development Trends

Dropout Rates

Workers with less than a high school credential are the lowest earners, on average. High school dropouts (16 to 24-year olds who are not enrolled in school and have not earned a high school diploma or equivalency credential) earn approximately \$600,000 less over a lifetime than high school graduates. In turn, high school graduates earn approximately \$1,000,000 less over a lifetime than college graduates.

While the Latino high school dropout rate has been falling nationally to 10% in 2016,¹⁶ Montgomery County and Maryland high school dropout rates show Latino youth trending in a troubling direction.

State and County Level Dropout Rates: % by Group¹⁴

Year	Latino		Black		White	
	MD	MoCo	MD	MoCo	MD	MoCo
2017	19.5	13.76	8.43	6.25	5.28	≤ 3
2016	16.82	12.27	9.04	6.12	5.51	≤ 3
2015	15.55	11.9	9.88	6.69	5.58	≤ 3
2014	14.68	11.1	10.57	6.79	5.85	≤ 3

College Completion Rates

Nationally, Latinos are making big inroads in college enrollment. In 2016, **35%** of Latinos ages 18 to 24 were enrolled in a two- or four-year college, up from 22% in 1993. Yet, graduation is elusive. As of 2014, only **15%** of Latinos held a bachelor's degree or higher.¹⁷

Identity youth express a strong desire to attend college, with **78%** of middle school students and **66%** of high school students reporting that they expect to attend college. However, in Montgomery County, where a quarter of public high school students go to Montgomery College (MC), only **10%** of Latinos earn an associate's degree within three years. In their first year at MC, **87%** of Latino students require remedial Math and **50%** require remedial English.¹⁸ This additional educational and financial burden of not being prepared for college studies is a significant impediment to Latino youth completing college. Overall, only **25%** of Latinos age 25 and older in Montgomery County have a Bachelor's Degree, as compared to **71%** of White residents and **43%** of Black residents.¹⁹ By the year 2020, **69%** of the jobs in Maryland will require a college education, potentially leaving large numbers of Latino residents out of the job market.²⁰

Unemployment

Nationally, the unemployment rate has fallen since the height of the recession in 2009. In 2018, the national unemployment rate is **4.9%** for Latinos, **3.7%** for Whites and **6.8%** for Blacks.²¹ The unemployment rate for Latinos in Montgomery County is also trending down, with rates ranging from 3-4% in recent years. However, approximately six in ten Latinos in the county work in low-wage occupations that do not offer health insurance.¹

Among Identity youth enrolled in Youth Opportunity Center programming in FY2016 and FY2017, **60%** were unemployed and, of these, **82%** wanted a job. A 2014 Identity study of nearly 1,000 Montgomery County Latino youth, ages 14 - 24, found that **77%** of high school dropouts surveyed had never received any job training. Even among the high school graduates who were not employed, the percentage who had never received any type of job training was high at **62%**.²²

Contributing Factors

Adverse Childhood Experiences

The negative impacts of exposure to abuse, neglect, or household dysfunction in childhood can persist well into adulthood. Such Adverse Childhood Experiences (ACEs) are associated with a significantly increased risk for a growing number of health problems including heart and lung disease, cancer, smoking, alcoholism, drug abuse, mental health issues, suicide attempts, diabetes, and stroke; and this risk increases as the

number of experienced ACEs increases²³⁻²⁵ Identity youth are experiencing a number of these possibly life-altering adversities, including witnessing domestic violence, parental divorce, parental death, household substance abuse, and racial discrimination, at higher rates than youth across the state or the nation:

Percentages of Identity Youth Who Have Experienced Specific ACEs: Comparisons with Youth Across the State and the Nation²⁶

	Identity Youth (%)	MD Youth (%)	US Youth (%)	Latino Youth in MD (%)	Latino Youth in US (%)
Parent Separation/Divorce	30.7	18.1	25	19.3	27.8
Lived with someone who is a problem drinker/drug user or has substance use disorder	16.6	6.3	9	9.9	8.8
Felt they were treated unfairly due to their race	13.7	4	3.7	6.3	4.4
Witnessed Domestic Violence	7.5	4	5.7	3.4	5.7
Lived with someone who has a mental illness	7.3	5.4	7.8	1.9	6.4
Parent Death	5.2	3.2	3.3	1.6	3.1
Parent Incarcerated	1.9	3.9	8.2	3.9	8.3

The vast majority of Latino youth in Identity programs (84%) have experienced at least one ACE (including adversities listed in the table above, plus economic hardship). More than a third (38%) of Identity youth have experienced two ACEs, and 12% have experienced three or more.

The events considered to be standard ACEs overlook potentially significant adverse events unique to immigrant youth, particularly separation from parents due to immigration issues. In our sample, 45% of Identity youth reported being separated from one or both of their parents due to immigration issues. On average they report being separated from their mother for 6.7 years and from their father for 8.9 years. Recent research has clearly established the long-term psychological impact of separation for both parents and children.²⁷ After being separated, children are at greater risk for a range of social-emotional difficulties including impairments in emotional attachment, self-esteem, and mental health.²⁸

ACEs impact more than just an individual’s health and well-being. New research shows that they can also have lasting effects on subsequent generations. Parents’ exposure to ACEs during their own childhoods may affect their own mental health and parenting behaviors in ways that negatively impact the health and well-being of their children.^{29,30} Therefore, in order to promote child mental health, we must also address the effects of adversities experienced by their parents. To better understand this contributing factor, Identity surveyed 440 parents of children served by Identity in FY2018. Like their children, parents of the youth in Identity programs also report high rates of ACEs: 71% had been exposed to at least one ACE in their youth, and 29% were exposed to three or more ACEs. Like their children, adults typically underreport trauma at intake before a rapport and trust have been established. Parents reported exposure to specific ACEs at the following rates:

Percentages of Identity Parents Who Have Experienced ACEs During Their Own Childhoods

ACEs	% of parents
Parent Separation/Divorce	26.5
Parent Death	20.3
Witnessed Domestic Violence	17.8
Lived with someone who is a problem drinker/drug user or has substance use disorder	15.9
Lived with someone who has a mental illness	7.9
Parent Incarcerated	4.4

Limited English Proficiency

Students with limited English proficiency have greater challenges academically as they navigate school in an unfamiliar language. For all age groups, the percentage of students with limited English proficiency in Montgomery County is approximately twice the percentage of that across the state. We see these high levels of limited English proficiency among foreign-born Identity youth, approximately **81%** of whom indicate a preference for using Spanish. Having parents with limited English proficiency creates additional challenges for students because parents are not able to help with homework, or to communicate easily with teachers. Among the sample of parents of youth served by Identity, **88%** report not feeling comfortable speaking English.

Percentage of Students with Limited English Proficiency¹⁴

Year	Elementary School	Middle School	High School
2016	MCPS: 23.6% MD: 11.1%	MCPS: 8.7% MD: 4.5%	MCPS: 9.1% MD: 4.8%
2017	MCPS: 23.9% MD: 11.6%	MCPS: 8.9% MD: 5%	MCPS: 10.4% MD: 5.8%

Kindergarten Readiness

The beginning of a child’s formal education is an important developmental milestone. Early success or failure can have a lasting effect. Early childhood education (ECE) is an important step in preparing children, particularly those from low-income families, for success in formal education. Nationally, the rate of ECE participation among Latino children from low-income families is growing, but still low, with usage rates ranging from 50-80%.³⁴ Barriers to accessing ECE include affordability, parents’ non-standard work schedules, limited English proficiency, lack of information about ECE options in a community, differences in eligibility and documentation requirements across states, and feeling less safe and welcome in the current political climate.³⁴ The lack of access to ECE for Latino children seen nationally is reflected locally. In 2017, only **24%** of Montgomery County’s Latino children demonstrated kindergarten readiness, a key outcome of ECE, compared to **67%** of White peers.³⁶

Poverty

Currently, 27% of all Latino children in the United States, are in poverty, and an additional 30% are near poverty (100-199% of the federal poverty line), which is more than any other racial/ethnic group.^{31,32} Nearly two-thirds of Latino children live in families with incomes less than two times the federal poverty level.^{33,34} The vast majority of Latino children who live in or near poverty live in households with at least one employed adult.³¹ A similar disparity is found in Montgomery County where Latino residents have the lowest median household income at \$68,322 (as compared to Black residents at \$69,482 and White residents at \$122,142). And 15% of Latino children live below the poverty level (compared to Black children at 16% and White children at 3%).¹⁹ These national and county statistics are consistent with what we see among the Latino youth served by Identity, **72%** of whom receive Free and Reduced Meals at School (FARMS). This rate is significantly higher than the **35%** of children across all of MCPS who received FARMS in 2016 and 2017.³⁵

Conclusion

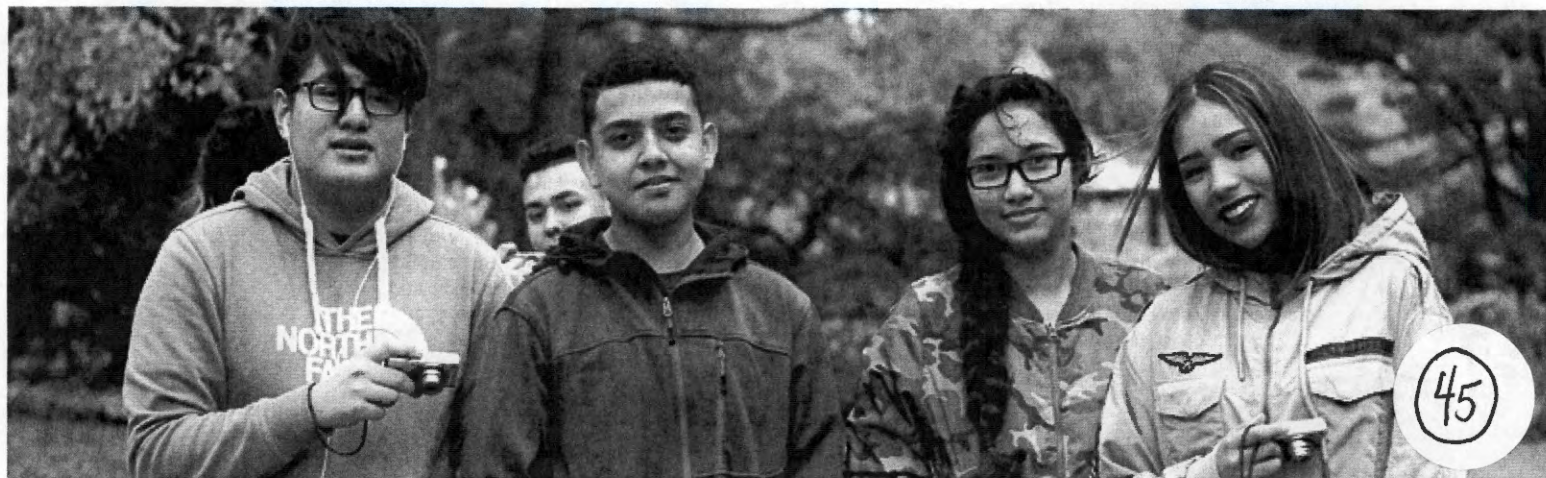
In Montgomery County, as in Maryland and the US as a whole, the inequities in indicators and determinants of social-emotional and academic well-being and job readiness point to a growing and urgent need for interventions and action to close the gap between Latino youths’ great hopes and motivation for their futures and the reality of their lost potential.

Founded in 1998, Identity works with Latino youth ages 7-25, and their families, who live in high-poverty areas of Montgomery County, MD and are most at risk for poor social-emotional, academic, and work-life outcomes. Identity supports their successful transition into adulthood in school, in the community, and on the playing fields with bilingual and trauma-informed programs that strengthen social-emotional wellbeing, and support academic and economic achievements. Before and after school programs offer social-emotional skill building, and math and reading enrichment. Identity-run Wellness Centers offer high school students on-site programs and services that build their skills in body and mind. Youth Opportunity Centers, based in the community, provide disconnected youth with the skills and support they need to reconnect to school and the workforce, including GED preparation, soft skill-building and intensive case management. Identity works with parents to increase connection to their children's schools, and strengthen their ability to advocate for their child's education. Wraparound services, available to all clients, include comprehensive family case management, mental health and substance abuse counseling, and recreation. Through its five Youth Centers, Identity works with a multicultural mix of youth and their families who face similar challenges.

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MONTGOMERY COUNTY PUBLIC SCHOOLS

Unaccompanied Youth Presentation

County Council Briefing

April 12, 2019



MONTGOMERY COUNTY PUBLIC SCHOOLS

Admissions Process for International Students at the International Admissions & Enrollment (IAE) Office at Rocking Horse Road Center (RHRC)

Eligibility:

- Students age seven or older by September 1 who have not attended school within the U.S. or a U.S. school system (i.e. Department of Defense schools or an accredited American International school in a foreign country) within the past two years must be referred to IAE at 240-740-4500 to begin the enrollment process. Students under age seven may directly enroll in their home school.
- IAE reviews requests for enrollment for all students living with a court-appointed guardian who has an established bona fide residence in Montgomery County.
- Students placed with relatives/friends in Montgomery County by the Office of Refugee Resettlement (ORR) follow the same process, but are granted a tuition waiver for enrollment.

Intake Process Supporting Families from Intake to Enrollment

- IAE identifies the enrollment needs of families during a comprehensive phone interview and schedules an intake appointment as soon as possible.
- Intake specialists meet with the families (30-90 minutes) to review documents for enrollment (birth certificates, adult photo IDs, proof of residency, school transcripts, etc.).
- Testing Assessors administer the English Proficiency exam (WIDA) to all eligible students to determine referral for English for Speakers of Other Languages (ESOL) services.
- Families are sent to the clinic in room 100 at RHRC to complete the immunization requirements.
- IAE grants all ESOL families an orientation in which the file is reviewed; the Free and Reduced-price Meals System (FARMS) application is submitted; additional referrals are made; and enrollment appointments with schools are scheduled.

International Student INTAKE Totals

Fiscal Year	Students
2015	4,128
2016	4,877
2017	5,051
2018	3,215
2019 (through 4/10/19)	3,797

Total Cleared International Students by level (2018-2019)

School Level	International Students
Elementary School	1,279
Middle School	696
High School	1,003

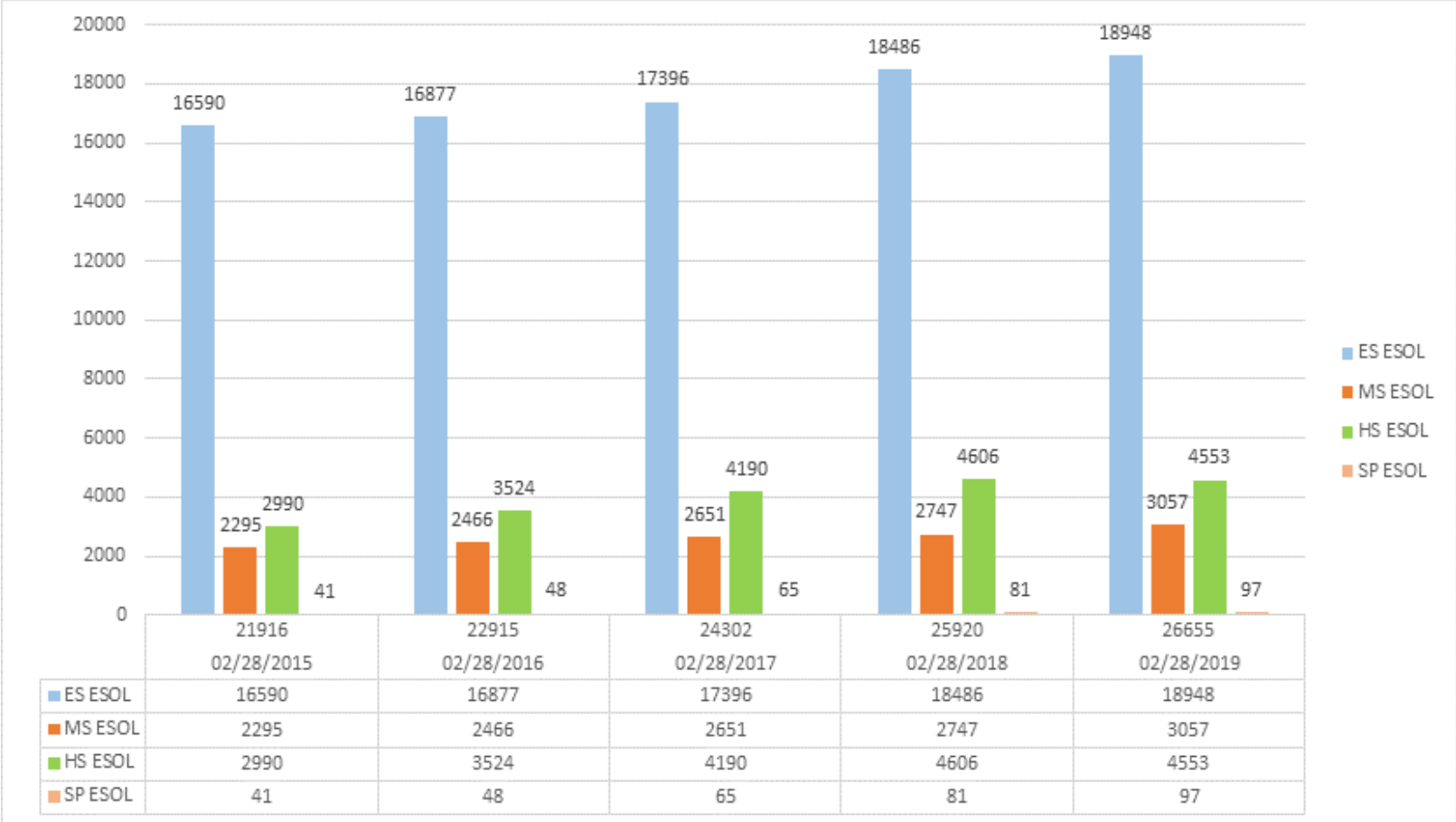
International Students -Top 6 Home Languages

	FY'15	FY'16	FY'17	FY'18	FY'19
Amharic	196	221	250	129	131
Chinese	224	205	180	130	113
English	543	500	540	418	329
French	233	314	241	150	148
Portuguese	132	194	226	160	146
Spanish	1,814	2,208	2,483	1,056	1,377

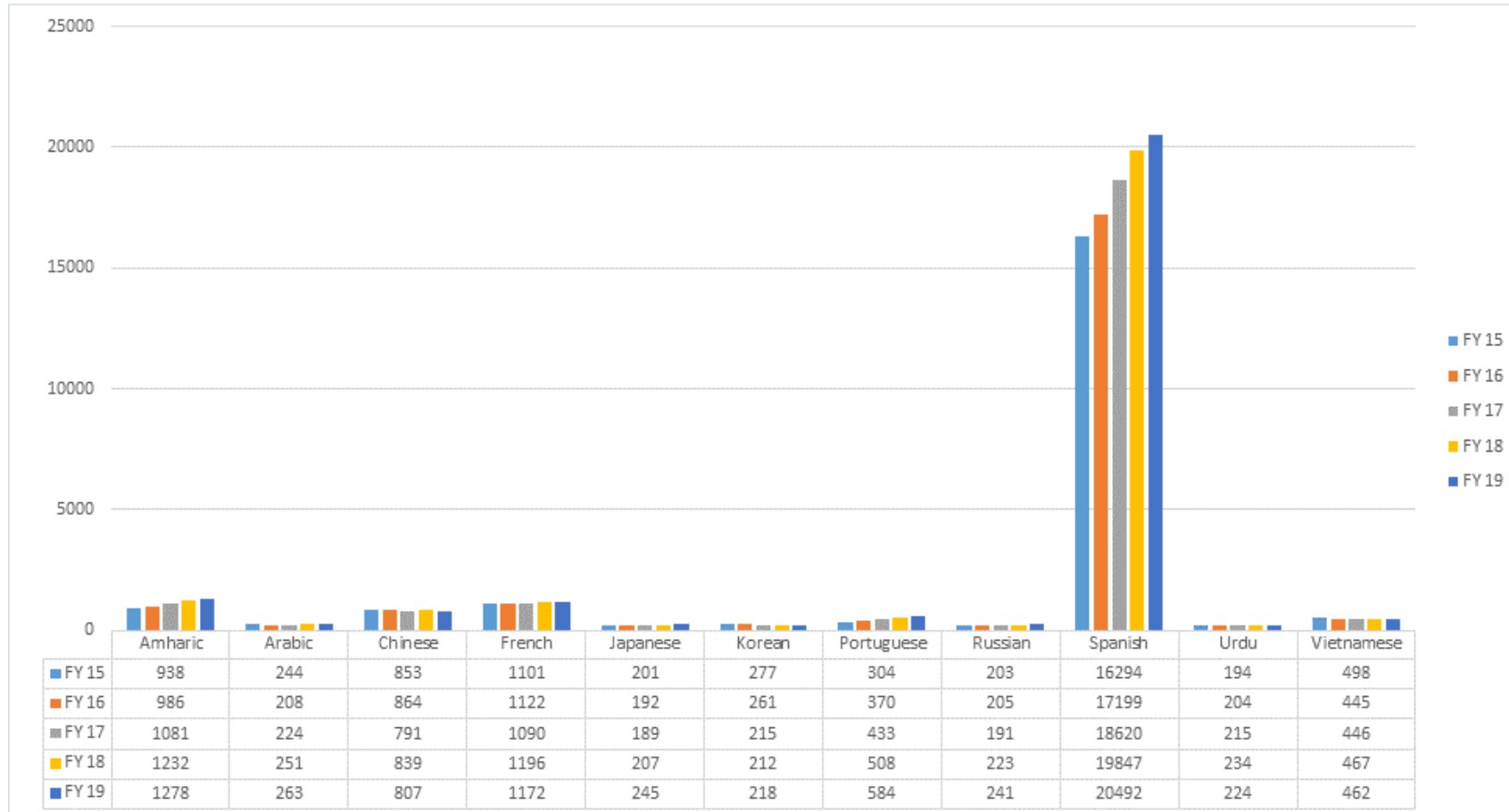
Unaccompanied Minor (ORR) Intakes

Fiscal Year	Unaccompanied Minors
2015	177
2016	227
2017	264
2018	93
2019	116

ESOL Enrollment by School Level



ESOL Student Enrollment by Language



Multidisciplinary Education Training & Support (METS) Enrollment

