Impact of COVID-19 on Immigrants in Alameda County

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1. LOCAL CONTEXT
Density Distribution of the Foreign Born Population

- **32%** are foreign born
- **44%** are not citizens
- **56%** are naturalized citizens
- **129,500** are undocumented

Source: ACS 2018 1-year estimates
Regions and Countries of Origin

Source: ACS 2018 1-year estimates
Educational Attainment of Foreign Born and Native Born Residents of Alameda County

Source: ACS 2018 1-year estimates
Economic Status

Poverty Rate of Foreign Born and Native Born Residents of Alameda County

Source: ACS 2018 1-year estimates
Language Abilities

- **43.7%** of **Chinese** households speak English “less than very well”
- **25.7%** of **Mexican** households speak English “less than very well”
- **16.9%** of **Filipino** households speak English “less than very well”
- **15.4%** of **Indian** households speak English “less than very well”

Source: ACS 2018 1-year estimates
Takeaways

▷ Immigrants are most concentrated in the Fremont, Union City, San Leandro, and Oakland areas.

▷ The biggest immigrant groups are Chinese, Indian, Mexican, Filipino, and Vietnamese.

▷ The biggest language needs are Chinese and Spanish.
2. HOW IS COVID-19 IMPACTING THE FOREIGN-BORN POPULATION?
EDUCATION
General Overview

▷ Each school district differs in the resources available to their students.

▷ We chose to do a case study on Oakland Unified.

▷ There are other districts (Albany, Emeryville, Berkeley, etc.) that have high needs but offer fewer services.
Case Study: Oakland Unified Language Needs

~51.1% of children that attend Oakland Unified speak another language at home.

Oakland Unified School District: Language Spoken at Home (children 5 years+)
Source: National Center for Education Statistics 2017

- English Only: 48.9%
- Speaks English very well: 38.0%
- Speaks English less than very well: 13.1%
Language speakers that have the most limited English:
- Chinese
- Spanish
- Vietnamese
- Other Asian or Pacific
- Arabic
- Russian, Polish or Slavic
- French, Haitian or Cajun
- Tagalog
Case Study: Oakland Unified Language Needs

Languages Offered on OUSD website:
- Spanish
- Chinese
- Khmer
- Arabic

Languages Offered on Alameda County Office of Education website:
- Spanish
- Chinese (Simplified and Traditional)
- French
- German
- Hmong
- Italian
- Japanese
- Korean
- Portuguese
- Russian

Language speakers that have the most limited English:
- Chinese
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- Russian, Polish or Slavic
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- Tagalog
The poverty rate for immigrants in Alameda County is 5.8%.

Many of these households depend on school lunches as a source of food for their children.

There are gaps between the physical distribution of immigrants who live in poverty and locations offering free school lunches at this time.
Poverty Density and Free Lunch Locations

Source: BIMI & Alameda County Office of Education
Case Study: Oakland Unified Poverty and Lunch Locations

- **Children who attend OUSD:**
  - 25.6% Families with income below the poverty level
  - 28.4% Families with Food Stamp/SNAP benefits (National Center for Educational Statistics 2017)

- **9%-48% Foreign Born Population in Poverty**

- **There is a gap** between foreign born families that live in areas of high poverty and the resource distribution of locations offering free school lunches

- **Resources Available:**
  - Monday: 8:00-12:00, 3 breakfasts, 3 lunches, 3 dinners per student and 1 adult meal per child
  - Thursday: 8:00-12:00, 2 breakfasts, 2 lunches, 2 dinners per student and 1 adult meal per child
  - 12 school sites
  - Meals served the week of April 23, 2020: 204,711
Resources offered by Oakland Unified:

- **Free e-books** through library services
- **Computer Access**: must call to request a chromebook
- **Internet Access**: Some of the first devices that were lent to students have access to hotspots but there is no free wifi resources. OUSD refers to Comcast’s 60 days for $9.99 program for low income families.
In Alameda county ~95% of households have access to a computer and ~91% of households have internet access.

As of April 14, 2020, the requests for devices from members of OUSD were 1,422 and requests for hot spots were 2,514.

OUSD has announced that they are working with city organizations and donors to help close the technology gap. As they receive donations the district will be purchasing devices or hot spots.

OUSD ordered more Chromebooks but due to Covid-19 they are experiencing delays.
Policy Recommendation: Educational Resources

1) It is important to match the languages that are needed with languages that are provided on websites and on flyers. Many school districts only offered two language options (Spanish and English).

1) Similar to Oakland Unified other school districts are only offering free lunch in some of their school sites. There are foreign born communities that don't have a local access to these resources. Opening more locations for those who live in high poverty would relief financial stress on these communities.

1) Alameda County Office of Education should provide funding for internet access and not just computer because there is a higher need for internet. Distributing devices with hot spots is ideal if only one student is in need, but in areas with many students in need, offering access to community hotspots would be most ideal.
EMPLOYMENT AND OCCUPATION
Service and Business-Related Impacts

▷ A high percentage of immigrants work in industries that would make them “essential workers” (17% are in the service industry).

▷ There are no legal standards for employers regarding the protection of their workers (National Immigration Law Center).

▷ Layoffs in the Bay Area, including Alameda County, have increased greatly over the past month (The Mercury News) - immigrants who are laid off or unable to find work need financial assistance from non-profits and governmental aid.

▷ Essential immigrant workers must be provided with the necessary protection.
Availability of Personal Protection Equipment

While the Occupational Health and Safety Administration and the CDC have offered employers guidance on COVID-19, no enforceable legal standard or regulation is in place to require employers to take certain minimum steps to protect workers who are on the frontlines of this crisis and risking their health and safety (National Immigration Law Center).

Many donation clinics, such as the Alameda County Disaster Relief Funds, do not provide PPE to migrant essential workers other than workers involved in the medical industry.

Workers’ conditions are patients’ conditions

Highland has broken sinks and empty hand sanitizer dispensers. Masks and gloves are not accessible at the hospital; nurses must submit requisition orders, and they are expected to reuse the disposable N95 masks that protect against coronavirus.

Monica, an emergency room nurse who has started bringing her own masks to work, said that management is telling workers to keep their N95 masks because “if we lose it, we cannot get another one.” John Pearson, another nurse in Highland’s ER, emphasized that N95s are single-use masks: “This is like if someone told you to use one paper towel to clean the house.”

Things are even worse for housekeeping, registration clerks, radiology techs, and other workers who interact with patients who may have Covid-19 in the emergency room: management is denying them basic life-saving personal protective equipment (PPE) like gloves and masks altogether. Bosses tell housekeeping to reuse cloth wipes while cleaning.
Case Study: Nonprofit Financial Assistance

Apply

California Governor Gavin Newsom issued a stay at home order to protect the health and well-being of all Californians in order to slow the spread of COVID-19.

The unfortunate consequence of this order is that many people are left without work. Our undocumented community cannot qualify for unemployment or most other benefits available to help get through this order.

We have created UndocuFund San Francisco to help those in our undocumented community experiencing hardship. We are working to raise money to help and will do our best to help as many people possible. We depend on the generosity of the community to donate to our fund in order to provide assistance.

You are eligible if you are undocumented and live or work in San Francisco, or lost employment in San Francisco due to the pandemic. To be added to our waitlist for assistance related to the coronavirus pandemic, complete the application.

▷ On the application, there is a warning that “UndocuFund-SF support is only available based on the money we can raise. [...] We may not be able to help everyone. By completing this application, you will be added to our waiting list.”

▷ Due to the organization’s limited resources and funding, the timeline for the grant and criterion for selection are unclear.
Under the CARES Act, most individuals earning less than $75,000 are eligible for a one-time cash payment of $1,200. [...] To be eligible for a cash rebate, individual filers and their spouse if filing jointly must have valid Social Security Numbers (SSNs).

This excludes undocumented immigrants. (National Law Immigration Center)
Policy Recommendation: PPE for Essential Workers

1) The Alameda County Government should institute a bill that introduces periodic random checks to ensure that employers have personal protective equipment for all workers readily available. These measures would protect essential workers, especially immigrants, who are disproportionately affected by COVID-19 due to lack of protective equipment.

1) The Alameda County Government should consider the implementation of government-sponsored community PPE drives that have a channel system with immigrant community centers. For example, individuals who contribute handmade face masks or donations of hand sanitizer specifically for immigrant communities could qualify for a tax deduction or other income benefits.
Policy Recommendation: Economic Relief Efforts

1) The Alameda County government should **provide funding and assistance to nonprofits** that serve vulnerable populations, especially immigrants, during this time. Such funding and assistance would allow organizations to **support more individuals**, **provide more clarity** regarding their selection and timeline process, and **give more assistance** to individuals in completing the application.

1) Government services for COVID-19 economic relief should implement **rapid response consultant lines for application and translation help**. Through this, they can aid immigrants in procuring and identifying necessary documentation, and identifying specific relief funds that cater towards their economic and citizenship status.
HEALTHCARE
Immigrant Use of Health Services

▷ Around 84,000 individuals are uninsured in Alameda County, and an overwhelming percentage of these individuals (65,000 individuals) are non eligible due to immigration status.

▷ According to HealthAffairs.org, the Inadmissibility on Public Charge Grounds penalizes immigrants who have used forms of public assistance including Medicaid, making it harder for them to adjust their immigration status.

○ Even as testing and treatment for COVID-19 has been explicitly excluded from the public charge rule and as the U.S. Citizenship and Immigration Services (USCIS) has explicitly encouraged immigrants to receive care, many immigrants had already acted to limit their interactions with medical institutions and their reliance on public assistance.
One problem with Medi-Cal is that coverage for refugees is short-term, and organizations raise concerns about the complicated paperwork and problems with the system that leave people without coverage even when they think they have it. Medi-Cal coverage does not start until two months after the date of qualification, and membership cards take as much as five months to arrive.

Many Alameda County refugees face systematic issues that cause them to increasingly impacted by the slow Medical process.

Source: migrationpolicy.org and Johns Hopkins University HUB
Immigrants usually utilize emergency hospitals and urgent care at the last second, and often don’t utilize preventative care.

There exists a treatment paradox: For many immigrants, there is a perception that larger facilities are ideal for health care due to resource abundance, and have better services and more language access. However, in reality, clinics are a better option, both in terms of language access and in terms of obtaining primary care for their whole family.

Highland Hospital is the main emergency hospital in Alameda County, and is utilized more by immigrants and refugees than any other health facility because it will accept insuranceless patients. However, both Children’s Hospital and Kaiser are identified by community organizations as having better language accessibility than Highland. Immigrants without insurance are barred from these smaller clinics, which are better equipped for language needs.

Source: Language Access Needs in Alameda County: The California Endowment
COVID-19 Testing

▷ Free COVID-19 testing is provided to people who live or work in Alameda County regardless of insurance or immigration status, meaning that this service is accessible by all Alameda County residents.

▷ Priority appointments will be given to health care workers and those that are at the highest risk.

▷ However, almost ALL of the testing places are by drive-through - and all require either online screenings, referrals, or the creation of an appointment. Only about two services offer walk-up only, but all require appointment creations, and a few require physician referrals.

▷ Many require appointments, but few offer language services to accommodate phone calls to create these appointments.
Policy Recommendation:
Distribution of Information

1) Implementation of **specific warnings for Medicare and MediCal usage**, and assurance that reliance on government benefits for COVID-19 will not cause difficulty in migration on all government insurance-related websites. Similarly, **government outreach** to community leaders, fliers, schools, and immigrant school centers will help to ensure this information is widely-available.

1) Implementation of a **MediCal card tracking portal available in several languages** in which individuals are able to track the status of their MediCal application, card shipment process, and whether their current status is protected to increase process transparency.

1) To disperse public information on what clinic or healthcare plan is best suited for the various needs, income, and insurance status of migrants,
   a) The Alameda County Government should offer **consultants that recommend specific hospitals or clinics** that fits within the migrant’s socioeconomic conditions, language needs, and emergency-related situations with COVID-19 symptoms.
   b) **Pamphlets** detailing all available clinics listing language support and preventative hospital treatment must be released to all migrant community centers, post offices in immigrant-heavy districts, schools, clinics, and supermarkets.
   c) **Social workers** should remain in constant contact with immigrant-heavy schools, legal, and social centers to ensure that information is readily dispersed.
**Policy Recommendation: COVID-19 Testing and Treatment**

1) **Expend budget of $30,000,000 allowing mobile computers that have one-step contact with face-to-face bedside virtual medical interpreters** in large hospitals such as Highland Hospital to improve its services with immigrant patients, particularly as the hospital is the most popular choice for immigrants. As COVID-19 rates increase, the budget for translation services must be improved. These computer systems directly offer a translation service that can reach a translator within seconds, and then aid conversations between healthcare professionals and patients.

1) **Government grants for large hospital units and small clinics to purchase PatientPing**, which allows sharing of patient information, discharges, and recent tests conducted on patients. This allows immigrants to access clinics for rehabilitation and COVID-19 treatments - if referred to a large hospital without adequate translational resources, patients can be referred to smaller clinics equipped for language specifications. When discharged, all hospitals with the system will have access to tests conducted and treatment history to prevent double testing procedures.

1) **COVID-19 testing centers should include increased walk-in mobile facilities** and locations directly next to BART and public bus stations to increase testing access for immigrants who have little access to private transportation, are unable to place phone calls, or do not have referrals from physician offices.
FOOD ACCESSIBILITY
Use of Food Stamps

Use of Food Stamps/SNAP Benefits by Foreign Born and Native Born

Source: ACS 2018 1-year estimates
Food Insecurity

Food insecurity is defined by the U.S. Department of Agriculture as “limited or uncertain availability of nutritionally adequate foods or uncertain ability to acquire these foods in socially acceptable ways.”

Alameda County already has a 12.2% rate of food insecurity (Feeding America).

COVID-19 is making life even more challenging for those that are food insecure and those living paycheck-to-paycheck.
Many of the people now depending on food banks have never had to do this before, and it can be difficult to navigate. Officials in Alameda County Social Services Agency have made things easier by introducing a new interactive map that allows users to identify food services closest to them.

The map is available at acgov.org/maps/food-services.htm
Barriers for Immigrants

▷ Although this effort is successful in providing information, it is not always in a language-accessible way.

▷ Additionally, individuals might not be able to leave the house or might not have access to transportation to these services.
Immigrant Serving Organizations

The Center for Empowering Refugees and Immigrants (CERI) is an organization that received funding from Alameda County Behavioral Health Care Services and works to help members of their community through:

- **Delivering groceries** to elders and to families with small children.
- **Translating COVID-19 related information** and sharing it with clients.
- Outreach to local leaders to **advocate for more emergency funds** for clients who need cash assistance for rent or groceries.
Vietnamese American Community Center of the East Bay is a refuge and resource for low-income, South-East Asians and other underrepresented immigrant communities.

- They work on community frontlines to help care for the underserved immigrant and refugee families in their community.

- They provide COVID-19 information and graphics in Vietnamese.

- They work with Alameda County Community Food Bank to distribute to those in need and to also provide translation services.
Policy Recommendation: Food Insecurity

▷ **Subsidizing programs for food delivery companies** to partner with food banks to deliver to migrant communities.

▷ Implementing more **widespread distribution of easy-to-use sources** that give information on all food banks, and increasing circulation of the avgov.org map.

▷ Alameda County should recognize the organizations that are already addressing food insecurity in underrepresented communities and **allot more funding towards these organizations**.
Thank you!  
Questions?