>> Hi, everyone, thank you for

joining our Webinar today.

My name is Anima.

I am a program assistant at

Futures Without Violence.

Today we are going to get

p.m.

p.m. Pacific,

as a Webinar.

This Webinar -- as a reminder

this Webinar will be closed

captioned and recorded.

The recording slides and

transcript will be posted on our

website here and e-mailed to you

after.

Please use the chat function and

send any questions to the Q&A,

and I am putting all that I have

said in the chat above.

>> Okay, thank you, Anima, and

welcome, everyone.

We are so excited to be here

today and to share this learning

space with you.

We are so fortunate to partner

with three leading experts in

the field that will share

expertise and their knowledge

with us today.

So on behalf of futures, we

would like to welcome you to

today's Webinar titled

"supporting survivors at the

intersection of immigration and

Child Welfare."

So I would like to take a moment

to introduce our presenters.

With Latinos united for peace

and equity, we have Dr. Rebecca

Rodriguez.

Dr. Rodriguez is a community

psychologist that evaluates

culturally specific and

community centered intervention

approaches to prevent

inter-personal violence.

Dr. Rodriguez brings ten years

of experience in program

evaluation, collaborating with

community-based and culturally

specific Domestic Violence and

sexual assault response

organizations in the U.S. and

abroad.

Her latest project is healing

modality and trajectories among

diverse survivors in Colorado.

Dr. Rodriguez is Director of

evaluation and impact at Latinos

united for peace and equity, the

national arm of Latino where she

continues to investigate the

role of cultural and family

dynamics and the social,

political context on survivors'

experiences of gender-based

violence.

In this capacity, Dr. Rodriguez

served as the evaluation

capacity leading for promising

futures, a national initiative

to develop evidence-based

interventions for children,

youth, and parents exposed to

Domestic Violence, and builds

national implementation

strategies that will lead to

local improvements in Domestic

Violence programs and

community-based intervention.

Prior to joining LUPE,

Dr. Rodriguez served as Director

of research and evaluation at

the national Latino network for

healthy families and

communities.

She also spent eight years

co-facilitating peer support

groups for Latino youth exposed

to Domestic Violence and

supporting their development as

youth.

Dr. Rodriguez is a proud mother

of three, the child of Mexican

migrant farm workers and a first

generation college graduate.

With violence intervention

programs, we have Katia Amaya

Salinas.

She serves as the associate

Director of community partners

at the Violence Intervention

Program.

She currently oversees three

community programs located in

Manhattan and the south Bronx.

The community programs offers a

range of holistic services to

survivors of Domestic Violence

from psycho educational

counseling, housing advocacy,

economic empowerment, and

educational literacy.

The Violence Intervention

Program, or VIP, is a

community-based nonprofit

organization that serves the

Latin X community in New York

City.

The VIP's mission is to lead

survivors of Domestic Violence

to safety and empower them to

live free of violence so that

they may sustain their full

potential.

Katia received her masters in

social work from New York

University, silver school of

social work where she focused

her studies in working with

immigrant families and policy

practice.

She's a licensed social worker

in New York state, and FIFI,

certified in field instruction.

After receiving her masters in

social work, Katia worked

extensively with youth, at-risk

of sexual assault, youth in the

juvenile Justice system, and

helped families navigate the

welfare system -- sorry,

navigate the Child Welfare

system through advocacy and

education.

In addition, Katia has a

background in working with

trafficking survivors, immigrant

families, and accompanies

minors.

Before joining the VIP, Katia

worked as a supervising social

worker for the children and

family services program at

sanctuary for families where she

managed a staff of licensed

clinicians and provided direct

mental health services to

children and families in

practice by domestic and

gender-based violence.

She received training at the

Ackerman institute in family

therapy and started with

behavioral therapy, cognitive

behavior therapy, effective

behavior therapy, and structured

psychotherapy for adolescence

responding to chronic stress.

We also have the Latino network,

Rosie Hidalgo.

She has worked in the movement

to end Domestic Violence over 25

years as a public interest

attorney and as a national

policy advocate.

Currently, she is a senior

Director of public policy for

Casa de Esperanza for healthy

families and community, the

National Resource Center with a

focus on training, research, and

policy advocacy to prevent and

end Domestic Violence and sexual

assaults.

She also serves on the steering

committee of the national task

force to end sexual and Domestic

Violence.

Rosie previously served as the

deputy Director for policy at

the office on violence against

women at the United States

Department of Justice.

Previously, she worked as an

attorney at legal services for a

program for low income families

in New York City and Virginia

and served on the American Bar

Association's commission on

domestic and sexual violence.

Rosie received her

under-graduate degree from

Georgetown University, and her

law degree from New York

University School of Law.

Thank you very much to our

impressive and expert

presenters.

Let's see here.

Sorry about that.

So everyone can see, technology

is not my forte but I am still

here.

So this Webinar is supported by

promising futures -- now I lost

my train of thought so I will

back up a bit and say that in

addition to being so grateful,

so Honored, and so excited to

have our presenters and our

partners here today, we are also

very grateful and thankful for

their ongoing commitment and

supporting the critical work

needed to supporting parents and

children, experiencing Domestic

Violence.

Additionally, we want to share

that this Webinar is supported

by promising futures, which is

the national capacity building

center to expand services for

children, youth, and abused

parents impacted by Domestic

Violence.

Let's see if it works now.

There you go.

So, our vision is a world where

all children and families have

everything that they need to

heal and thrive in a world free

of violence.

Our goals are to help programs

create the experiences and

conditions that prevents family

violence and help children and

families heal and thrive in the

after-math of family violence,

to strengthen the program's

ability to capture and share

their stories of impact.

So for additional information we

want to encourage you to visit

our website at

promisingfutureswithoutviolence.

org where you can find a wealth

of resources for yourself and

for your program and for your

professional development.

So now, I am going to stop for a

couple of seconds here, and we

want to know who is in the room.

Right.

So you have heard a bit about

us, and I am sorry, I didn't

even introduce myself.

I am all over the place.

I'm Wendy Ella.

My pronouns are she/her/hers,

and I am part of the promising

futures team at Futures Without

Violence.

It is an Honor to be here so now

that you know a little bit about

myself and the presenters, we

would like to know who is in the

room, or who is in our space

today.

So I am going to ask my

colleague, Anima, to actually do

a poll question because we would

like to know what is your role.

So there should be a poll that

pops up in the screen, and if

you could just take two seconds

to please tell us whether you

are a Domestic Violence

advocate, child welfare worker

or administrator, an attorney, a

therapist, or councilor, a

funder -- let's just take two

seconds.

Okay.

Maybe just two more seconds, and

then we can see the result.

All right, so we hope everyone

had a chance to answer, and

let's take a look at the

results.

40% of you are Domestic Violence

advocates.

4% in the Child Welfare field,

as a worker or administrator,

and 4% attorney.

We have 13% therapist or

counselors, and we do have one

funder in the room.

And 38% are other, in another

capacity.

So thank you for answering that.

We are so excited, like we just

said, to spend time with you

today.

Before I hand it over to our

first presenter, just a couple

of reminders.

Please remember, as Anima said,

that you can get a transcript,

the slides, and the resources

that we are going to share to

you with you today after today's

Webinar.

Additionally, we would like to

ask you that if you have any

questions that come up, please

specifically use the Q&A feature

in the bottom of the screen.

We are asking that you kindly

reserve that feature for

presentation-specific questions.

The chat, we are encouraging you

to use if you have any

observation, comments or

statements that come up or

impressions that come up that

you want to share, use the chat

box.

Reserve the Q&A for

presentation-specific questions.

We allocated a little bit of

time at the end of all the

presentations for the

presenters, so hopefully to be

able to answer those questions.

So without further adieu, I am

going to stop sharing now, and I

am going to ask Dr. Rodriguez to

start her presentation titled

"introduction to immigrant

survivors at the intersection of

Child Welfare."

Thank you, Dr. Rodriguez.

The time is yours.

>> Thank you very much, Wendy,

for that introduction, and for

the space to be able to share

with you all today.

Let me make sure these are

going.

I am so excited to be here with

you today and to talk about an

issue that I am extremely

passionate about, and that my

research and professional

experiences have centered to

this day.

So earlier this year, when I had

kind of this idea for this

Webinar, I was really excited to

have an opportunity where we

could kind of bring together,

you know, research around the

experience of survivors and

families in the U.S., who exist

within the intersection of

immigration and child welfare.

But also, lean into what that

looks like in providing practice

on the ground and some of the

policy oriented solutions or

tools that you might use in your

practice as advocates.

So just a bit of background

about the organization that I

work with.

Caminar Latino is a 30-year-old

community-based Domestic

Violence organization that's

based in Atlanta, Georgia.

They served predominantly

Latino, immigrant survivors,

including their children and

including people who use

violence, both men and women.

So our mission is really to

create opportunities for Latino

families to transform their

lives and communities and work

to change the social conditions

that give rise to the violence

that happens in our communities.

Latinos united for peace and

equity is a branch of that work.

So just to get us started with a

bit of context -- I am sure that

some of you may already know

this.

I did notice a lot of Latino

organizations in the chat, as

you were introducing yourselves

so that's wonderful, and

welcome.

So more than 44 million

immigrants live in the United

States.

So that's about one in seven

foreign born residents based on

2018 data.

So at least 26% of children

under the age of 18 live with at

least one immigrant parent.

Many of the U.S. and

foreign-born children live in

families where there is mixed

status, so this could be, you

know, where some of the adults

and children in the household

might be U.S. citizens, and

while others are lawful,

permanent residents, or have

temporary status to work or

student visas or other

specialized visas, and still

some lack lawful status to live

and work in the U.S.

These are the folks that people

often refer to as undocumented

or unauthorized immigrants.

So the families that most of my

research and work has focused on

are those who are at higher risk

for families operation.

So just to give you the scope of

the issue, that's about, or

about 5.5 million children, of

which the majority are U.S.-born

citizens, who live in families

where, with at least one parent

who is unauthorized or

undocumented.

So when it comes to increasing

the risk of family separation,

west see that the Latinos who

make up about 77% of the

unauthorized immigrant

population in the U.S., make up

over 90% of immigrants removed

by ICE or immigration and custom

enforcement.

And also, in terms of higher

risk, newer work is showing that

black immigrants are much more

likely than national, through

other regions, to be deported

due to criminal convictions.

It's no surprise that black and

brown children are most affected

by family separation, when

caught in the immigration

system, which is, you know, by

the way, is pretty much a

textbook definition of

institutional racism.

We can see how it is manifesting

itself here in the lives of

black and brown families.

So it's hard to estimate the

actual number of families that

are separated.

So DHS, the Department of

Homeland Security is only

required by Congress to document

the number of parents of U.S.

citizen children removed each

year, not necessarily the

numbers detained, which when you

put a child into a detention

center there is family

separation there, as well.

But as you can see, the number

of families has increased

exponentially over the last few

years.

And what some research is

finding is that this correlates

with increases in work related

enforcement, so for example, you

might recall one of the largest

raids in Mississippi just last

year were ICE detained on the

700 people in a single day, most

of who had children at school on

that day, and it's also

correlated with local criminal

Justice system cooperating with

immigration enforcement.

So families know this, and they

live within there reality so

when sufficient survivors of

violence who already are

apprehensive of systems like

immigration, like the criminal

Justice system, like child

welfare system, it's no surprise

that immigration, immigrant

survivors are less likely to

call the police for help,

whether that's related to their

abuse or not.

Less likely to go to family

courts, and a recent survey also

found from advocates that they

were reporting that many

immigrant victims of domestic

and sexual violence were still

afraid to go to the police or

get support.

So what happens to -- to a

parent when they are detained.

It's no surprise that family

relationships, especially parent

and child attachment is strained

due to that separation during

the detention.

And the strained parent and

relationships can continue after

they are released from a

detention center.

So this was a study that I

wanted to mention really quick

that looked at Latino immigrant

women and children's

experiences, post-detention.

I wanted to point out the things

that are really, real challenges

to survivors, each after they

exited the detention center

itself.

So the findings really point to

increased vulnerability for

women and children.

Some reported how they were

given no advanced notice of

their release.

One woman describing how her and

her children that were detained

were dropped off at a bus

station with no resource, no bus

fare, no food, and no way to get

back to their community.

Also following release, they may

not have, you know, the same

apartment to go back to, as many

women had paid rent informally,

so they are also continuing to

be the criminalization of women

that were released, with some

force to wear ankle monitors and

pay hefty fine, and of note,

while released, many still did

not have the legal authorization

to work in the United States.

So just a summary.

The detention specific traumas

that women are experience are

one piece of the puzzle and

should be taken into context.

You consider the traumas from

other forms of violence, and

that's experiencing Domestic

Violence or for children

witnessing that Domestic

Violence.

Some of the research, like I

mentioned, discussed, you know,

heightened levels of fear and

mistrust of police, but there is

also, as you would expect,

psychological distress,

increased mental health needs,

and even some work documenting

the poor, educational outcomes

for children.

So how do these families end up

in this nexus of an immigration

system and a Child Welfare

system?

So the applied research center

did a study that begins to

capture the various ways that

families intersect with Child

Welfare and immigration that can

specifically lead to family

separation.

So they found three paths.

The straight path, and this is

the one that I mentioned a

little bit, where a parent is

first detained.

Which then follows with the

child being taken into Child

Welfare custody.

So this is especially worrisome

in states where a parent's

detention or deportation can be

considered neglect, but also

thinking about when kinship

placements are not possible.

So the second parallel path, in

this case, there are allegations

of child abuse or neglect and

cross reporting where a local

law enforcement agent is

notified, and they may

throughout that investigation

uncover the participant's

status.

So again, really highlighting

those ties between immigration

customs enforcement and local

law enforcement systems.

I want to point out while there

very well may be co-occurring

child abuse and Domestic

Violence, research finds that

Domestic Violence increases the

risk of child mal-treatment, and

that family's involvement in the

Child Welfare systems, but

sometimes, it can be when Child

Welfare is used as a form of

control over the survivor and

their children by the abuser.

And this kind of third path, so

say that you have a family that

is already involved within the

Child Welfare system, but the

parent is, is detained by ICE,

which can really interrupt the

project, or process, I don't

know why I said project.

If you have a moment, I think

that there are a lot of unique

ways in which our families we

serve can end up at this nexus

of immigration and child

enforcement, and if you could

share in the chat any other ways

that you have seen it kind of

happen within the communities

you are serving.

Okay.

And I think I am about at time.

Yeah, so you will have access to

these slides, and then I have

tried to add resources and links

within them so you can kind of

learn more, and also feel free

to talk with me or email me.

I will share my information.

I guess the last thing that I

will just say is, you know, in

the research we are getting a

better understanding of the

challenges that immigrant

survivors are facing and how,

you know, they might get into

Child Welfare, but there is much

less on what are those effective

practices to support the

survivors, and I think that

that's where my program

evaluation comes on, and I think

that there is a lot of value in

capturing kind of what

organizations like yourselves

might be doing, as well, and

lifting that up for more

practice-based evidence.

I am so sorry, I ran out of

time.

Thank you.

>> No apologies.

This is great.

Thank you very much.

Thank you for sharing your

contact information,

Dr. Rodriguez.

Such useful information and

helpful.

And again, if you have any

questions, please use your Q&A

feature.

We will try to get to some of

those at the end.

I would like to shift us to our

next presenter.

Katia Amaya Salinas is with best

Child Welfare practices when

working with immigrant children

and families.

Katia, the time is yours.

Thank you.

>> Okay.

Well, I just wanted to thank

everyone for being here and

thank you for giving me the

opportunity to share some

expertise in my field, and as

Wendy mentioned before, I work

for a program called the

Violence Intervention Program

here in New York City.

I am a trained social worker,

and I've been working with

immigrant families, children and

families for, I think, over

eight years now.

It's really exciting work, and

definitely my passion.

I will jump in regarding the

work that I have done in working

with children involved in the

welfare system.

I am not in charge of the

slides.

If you hear me say next, don't

be alarmed.

So next.

So I am going to start off with

a case that I had.

This case, in particular, is

when I was working for an

organization.

I am going to give you a little

summary of her case because this

is really important to know in

regards to the children that we

see coming in.

They are involved in these

systems.

So I am going to start with a

case of Maria.

A little bit about Maria.

Maria was 16 years old when she

was referred to me by her

immigration attorney to help her

process her migration story and

abuse and neglect history.

Maria is originally from

Honduras and decided to leave

and make the journey to the

United States when she was 15

years old.

By the time that I had her on my

list, she was 16.

Maria's mother died when she was

nine years old, and after her

mother's death her biological

father sent her to live with a

family friend who neglected and

abused her.

Other things Maria's mother

lived in a Domestic Violence

relationship with her mother.

Maria witnessed the abuse most

of her life, and her father was

an alcoholic.

These are all contributing

factors.

Maria's abuse and neglect was

seen as getting hardly enough to

eat, doing domestic chores in

the home regularly that are way

beyond the scope of someone at

her age, and not having clean or

new clothes to wear, emotional

abuse, verbal abuse.

She's worthless.

She's not worthy of love.

These are some of the things

that she told me that she would

hear constantly.

After living with a family

friend for three years -- so

Maria was sent by her father

after her mother died to live

with a family friend, and after

living three years with this

woman who was definitely abused

her and neglected her, the woman

decided that she would no longer

was no longer need and had sent

her back to live with her

biological father.

In the care of her father, the

father's new girlfriend neglect

and had abused -- the neglect

and abuse continued.

Maria was not given enough food

to eat.

She had to work making tortillas

to get money to feed herself in

school.

After living with her father she

decided to leave and live with

her older sister.

While in the new community she

started to get harassed by a

local gang member.

After the gang member started

harassing her and threatening

her, saying that she wanted to

make her, her woman, she had no

other choice, to flee the

country.

Her only option was to be harmed

or killed by a gang member.

She is going to stand by.

Okay.

I am sorry.

So she was at a point that she

was either going to continue to

be threatened by the gangs and

potentially killed or go to the

United States where she had her

older sister and brother, so she

decided to leave.

So her migration story is that

she left to live with the rest

of her family members.

There were several teams that

traveled with her.

They did not have enough money

to make it to the United States.

She had to have them send the

rest of the money in order for

her to be safely brought over to

the Mexico-Arizona border.

Her journey took her a week and

a half, and she had to wait for

her family to get the money.

Meanwhile she was kept in safe

houses along the way.

By the time that she arrived to

the Mexico and Arizona border

she was really dehydrated.

Her detainment -- she and

another teen, she was traveling

with were picked up by border

patrol and provided watered, and

placed on what she describes

what looked like and felt like

an icebox.

This is very common of a

description used by the people

-- by people who have traveled

the journey.

She was placed in what she

called an icebox.

It's a holding cell for what

seemed to her for many hours.

She went to a detention center.

The social worker at the

detention center tried to get in

touch with her siblings in New

York City.

She was able to get in touch

with them.

So before she was reunited with

her siblings in New York City

she was moved to another

detention center in Florida, and

she remembers having an hour to

be outside every day, and she

also began to learn English

classes.

Lastly her transition to her new

life.

So she was fortunate enough to

be reunited with her oldest

sister and brother.

Her oldest sister had attained a

U visa due to her own Domestic

Violence history and had her own

family in the United States

already, so she was able to

continue the same immigration,

to see the same immigration

lawyer that helped her sister

with the U visa and connected

her to myself.

The attorney referred her to

therapy to help process her

trauma.

I made sure that she was

connected to support groups in

school, which also at that time

there was an influx on

unexpected minors, so she was

able to get support with other

children who had made the

journey at that time, really

great support, and after many

months in therapy she was able

to process the trauma and talk

about her story, which is really

pivotal for her to be able to

stand trial in the immigration

environment, or immigration

trial.

It was a lot of work.

She was finally granted

protective status, and that was

really pretty amazing.

So that is my work with Maria,

and I am going to ask you guys a

question.

So next, next slide.

So after listening to my case

example, just a question for

you, all, what do you think are

some challenges Maria might

faces a she begins her new life

in the U.S.?

And you can put it in the chat

box.

I will give you a couple of

seconds.

To respond.

>> As we wait for folks to

respond, we have one question.

It says, and it's from Arlene.

It says in the case of Maria,

are there child social services

to help their citizens due to

neglect of parent or caregivers?

>> Child social services?

Yes.

>> Due to neglect.

>> So because she was connected

-- so yes.

When I received the call, there

is a social worker, and she

didn't come out of the picture

until she was connected to me,

another social worker.

In this instance she was -- she

didn't have to go through CPS

because obviously, she had

already, her sister, who vouched

for her, you know, as her

caretaker, and she didn't have

-- sorry, one second.

She didn't have -- she didn't

have to go through the Child

Welfare system.

>> Thank you.

>> So I am seeing something, the

culture shock, the insecurity

reaching out for help, being

threatened by others because of

her race, language barriers,

assimilation stress, her status,

PTSD, limited resources -- so

thank you guys for posting

these.

Yeah.

I think that these are all

really great answers to this.

So next I have also put some

challenges, and I think you

definitely have some of the

things that I mentioned, which

is the compounded trauma, PTSD

due to the abuse and neglect,

and witness to Domestic

Violence, gang violence and

migration and detainment and

language access, and adapting to

new cultures and environments

and systems, lack of support of

community resources, and family

separation, and also economic

challenges.

Obviously, her sister had her

own family, and so it was a

little difficult to maintain

her, but she was able to provide

for her for the most basic needs

and along with her families, we

were able to also provide some

money to the family.

Great.

So the next one.

Another question that I have for

you, what do you think are some

protective factors in Maria's

case example?

I will give you like maybe

another five seconds.

Yes, great, her family, her

brother and sister, right, yes,

absolutely.

She has an, has an innate

resilience, her age.

Yeah.

Therapy, right, supports, great.

These are all amazing.

Okay.

Great.

Next, I have also -- I think you

guys have more than I could have

put on the Page, so thank you.

So some protective factors are,

as Katia said, older brothers

and sisters.

She was living with her older

sister for a trial, access to

character right, immigration

attorney, therapist, she was

connected to us.

Access to education, which she

did not get very much when she

was back, in Honduras.

She had a strong bond with her

mother and with her siblings so

that also is very important, so

the primary years of attachments

are from 0-5, so if you have a

strong, a strong primary

caretaker during that time, you

know, your chances of adversity

minimalizes a little bit.

Great.

The next slide.

That was just a bit about Maria,

so thank you guys for your

answers and questions.

I am going to move into some

best practices when working with

immigrant families, children and

families.

I am going to name a couple.

So you want to make sure that

when you are doing your

assessments with families, that

you are making sure that it's

child focused.

You are making sure that the

safety and permanency of the

children are at the forefront.

You want to make sure it's

family centered services, so

children, parents, extended

families are involved in all

phases, engagement assessment

is, and implementation of your

cases.

And another thing that is really

important is making sure that it

is strength-based.

So emphasizing that the strength

and resources that are for the

children and family, um, making

sure it's also individualized

and making sure that it

addresses the unique needs of

the family.

Each family brings in completely

different, a different case, a

different family history,

dynamics, so you want to make

sure that you are addressing

those needs.

You want to make sure you are

practicing cultural humanity.

Making sure you are learning

about your culture.

Examining your own cultural

beliefs and cultural identity.

It's very important because we

are not experts in other's

cultures and making sure that

you are taking a stance from

their perspective and trying to

understand from their

perspective.

And you want to make sure that

it is community-placed so

planning and complementing keeps

the plans that you are

under-taking with other

community partners, you know, at

VIPs, where we are making sure

our clients are connected to

different support systems, you

know, either for food, for

nutrition, for health care, for

dental care, making sure that

you are helping them expand

their support system.

Okay.

Next.

So some case management needs

that may arise as you are in the

planning stages with these

families, and something to keep

in mind as you do your work with

them.

Is that number one, job as

navigators, to connect clients

to different systems.

Our jobs, as case workers, as

social workers, as therapists is

to help our clients connect.

I said this before, to different

support systems so in addition

to make appropriate legal

referrals for families, parent

and child, so making sure that

you are providing them access to

referrals or immigration

attorneys, having on hand what

type of immigration partner, law

organizations are in your

community.

And having it ready.

There are family law referrals

for custody issues that may

arise.

In addition, you want to make

sure that you are also able to

accompany these -- your clients

to appointments, so for example,

to courts, or to the consulate.

A lot of the clients are coming

in, but they don't have

documentation, and for us to

advocate for them to get birth

certificates at a consulate or

-- and also, dealing with

Domestic Violence survivors, and

court dates, they may support

them and you will be the only

support system for them.

In addition, you want to make

sure that you are providing

access to health care and to

help the family.

I think Rosie will talk about

this a little bit further, so I

am just going to review it.

Children have the right to

health care, and the United

States, some states are more --

provide more, more robust

funding for children like New

York and California.

You want to make sure that your

children are connected to it.

So providing referrals to health

care providers and also free

mental health clinics regardless

of status.

If you are in New York, there is

a lot of programs that we can

connect our clients to where

they are either sliding scale,

or some are free, like at VIP we

provide free services to our

clients.

In addition we want to make sure

that we are providing access to

nutrition, public benefit, so

you are making sure that you are

asking them, you know, it

depends on the clients.

Some children, if they were born

here are eligible.

Their parents had come over -- I

am sorry, I lost my train of

thought, had come over, and they

might not be eligible.

Their children are, so you want

to make sure that you are

providing, assessing who is

eligible in the family.

And also providing information

to local food banks, community

programs, to also food

assistance, and in New York

City, there is free food

delivery services and in certain

boroughs that were impacted by

Covid-19 so that's been a really

great resource.

Making sure to have access to

their education, support

systems, and maybe a social

worker in their school, in

addition to the advocacy work

that you are doing.

In addition, it's really

important to provide adequacy

letters on behalf of family, the

family for to help assist in

immigration cases.

That's a really big part of our

job at VIP is, you know, once we

provide psycho educational

counseling, we then help to

provide an advocacy letter

because a lot of our clients are

in the process with their

immigration status.

And lastly, is safety planning.

>> And Katia, there is a

question that is for you, or

Rebecca on trauma and children

in detention centers.

So I don't know, this may be one

of you -- Rebecca, would you be

okay answering the question?

It's really about trauma and

some of the experiences that the

kids may experience at detention

centers.

>> I could give it a shot and

Katia, do you want to jump in?

I think for the particular study

that I was talking about, those

were really adult women's

narratives, and they did talk

about having those

post-traumatic stress

experiences.

I have not seen anything in

terms of children.

What about you, Katia?

>> The question is about the

trauma that the children are

presenting?

>> Yes, so it exactly reads,

"have you found an unaccompanied

minors or those separated from

their caregivers report hearing

voices, seeing chatter when they

are in iceboxes or detention

centers."

>> I haven't had clients report

that to me per se, but that does

not mean -- you could have

clients that are coming in with

pre-existing and mental health

issues, and that's a

possibility, and it exacerbates

it because you are

re-traumatizing them, in these

experiences, right.

It is really inhumane

experiences.

I definitely haven't seen it but

don't think it's not a

possibility.

>> Thank you both.

>> I don't have too much time so

I will keep going.

I think that it's really

important to discuss safety

planning for children and

families who are involved in

these systems, so you want to

create a plan for the whole

family, so you want to identify

a trusted adult that your

children can turn to in the

event of an emergency so a

teacher, a mentor, an extended

family member.

Making sure they memorize their

information.

You want someone that you trust

to care for your children in the

event of an emergency,

detainment or deportation.

It is a real, you know, real

things that are happening in our

community.

Making sure other persons and

adults are 18 and over, and

ideally, who goes close enough

to pick up their -- who is close

enough to pick up their

children.

And in addition, to update and

collect important documents.

What some of these documents --

you want to make sure that they

are all stored in one place.

So the person that you have as

an emergency contact knows where

is it is.

In daycare, they have school

records, immunization, medical

records, social security cards,

passports, contact information

for the caregiver that they

might need, making sure that you

have the orders of protection

for DV survivors.

Licenses.

I.D.s.

These are all really important

documents to be able to store in

one place.

And in addition you want to seek

help from others and support

others to help them in reuniting

with their family.

You want to consult a family law

attorney, either to help you in

changing the legal custody for

your child.

You want to make sure that you

are also in touch with community

groups that are working to

advocate for immigrant rights.

Having information about their

rights.

And just remembering if your

children were born in the United

States, he or she has rights to

certain benefits.

These are all really important

for safety planning.

I also provided a resource that

we use at VIP, particularly,

with Domestic Violence victims,

and so that's in your resource.

It gives you a plethora of

examples of what you can use.

Okay, next.

Just to mention some other

impact that Covid had on the

families, the children and

families that we see,

particularly at VIP.

Some of the impacts have been

lack of access to health care,

like PPE and basic cleaning

supplies, like access to food

and to childcare and access to

technology and Wi-Fi and tablets

for children.

Lack of employment due to

illness and lack of employment,

unemployment insurance.

So how can you help as an

advocate?

That is my question to you.

I am at time, but I will use my

last one minute to let you know

that there is so much that you

could do.

In New York City we had mutual

aid support groups, so there

were neighbors who identified

themselves as assistants, or if

you needed assistance during

Covid, they provided resources,

food, clothing, food delivery,

and there is also a Covid

resource guide that went around

through the nonprofits in New

York City, like a living

document, with every single

resource in New York City that

you could need.

So there is so much that you

could do, and thank you.

>> Thank you, Katia.

Thank you very much.

This is, actually -- it's good,

right.

It's not great but good that

there is so much information and

so much, so thank you, Katia,

for your presentation.

Now I would like to give the

spotlight, the stage to Rosie,

who will be presenting on

advocacy for immigrant survivors

at the intersection with CPS.

Thank you very much.

>> Great, thank you very much,

Wendy and the whole team at

futures that has really pulled

together to make this happen

today, and Katia and Rebecca for

all you have done to really

highlight so many critical

issues.

As Wendy said, I am Rosie

Hidalgo, and I am Director of

public policy at Casa de

Esperanza, the national Latino

network for healthy families and

communities.

And Casa de Esperanza started

more than 38 years ago in the

twin cities and continues to

work on the ground not only with

shelter but a lot of

collaborative, family advocacy,

working with youth as peer

educators and working with

allies, so we see every day how

critical that work in the front

lines is and how critical the

work that each of you is doing,

and really creating those

trusted spaces where immigrant

survivors feel safe coming

forward to get the help and

support they need, and I love

how Katia and Rebecca listed a

strength-based approach, really

Honoring the courage, resiliency

and vision of a better future

for themselves and their

families.

And Casa de Esperanza launched

our work about 11 years ago, it

was funded under the TA and

technical assistance through a

grant.

It's a project that focuses on

bringing together national

policy advocacy, research,

training, and forming a network

across the country, so that we

can all continue to advance and

improve access to safety and

services for survivors.

So I encourage you, if you are

not signed up to be getting our

biweekly newsletters and a lot

of information and resources

that are available as we all, in

solidarity, work to improve

safety for immigrant families.

As we were talking about

preparing the presentation, one

of the things, and I think it

has come through clearly as an

example that Katia was sharing,

is that when you are working

with an immigrant family, right,

or with the survivors of

Domestic Violence, we recognize

that there are the abuser

generated risk that might have

brought them forward, but also,

we realize that there are these

life generated risks and systems

generated risk.

So really doing comprehensive

services and support, and doing

safety planning requires us to

look at all the levels and their

intersection, right.

So a life generated risk might

be, for example, what Maria

experienced earlier in her life

and having to flee her country,

with additional Health barriers,

and then, you know, someone is

up in a relationship where there

is Domestic Violence, sexual

abuse, there is the abuser

generated risk that we have to

do safety planning around, but

as we have seen systems can be

supported or the systems,

themselves, can generate

additional risk and undermine

safety, whether that is with the

child protective services

system, my handling this and

trauma informed way, and lifting

up the rights of immigrant

families, and it could be the

role of local law enforcement,

if it gets entangled with the

immigration and enforcement such

as the undermined victims and

witnesses coming forward to seek

help.

So I think a lot of the work has

to be not only the individual

advocacy but systems advocacy,

each of us from your vantage

point of what you are seeing in

your community and you are

helping to inform the policies,

protocols, and make sure that

there are pathways to safety.

Before I get into some specific

remedies under the violence

against women act, I want to put

out on the table, right, it's

important for us all to remember

that there is important legal

protections available to all in

this country regardless of

immigration status.

And I think what's important to

realize is that often the tool

of abusers are sharpened by the

fact that they can manipulate

and misinform and tell a

survivor that she doesn't have

rights and she is no one in this

country and that no one is going

to offer preservation or support

for her, so we have to

proactively, constantly be

making sure that we are helping,

as a form of prevention, as a

form of support, immigrants, and

immigrant families, understand

that they have a range of really

important rights, including in

the constitution, the right to

due process and illegal search

and seizure.

Let's say if someone comes and

knocks on a door, you know, from

ICE, and maybe has a document

signed, it's not the same as a

warrant that enables them to go

into someone's home, so people

need to know that.

They, too, have a right, a

search warrant would have to be

signed by a judge, the same as

any other search warrant.

And ICE individuals are not

judges.

So just letting people know what

their rights are is really

important, and we do have some

resources that you can use in

doing that community education

and education in your programs.

Federal laws, there is a whole

range of laws that apply

regardless of the status,

including civil rights laws, the

right to access services

regardless of race ethnicity and

national origin, that they have

meaningful access to services,

and we will talk more about that

later.

And we will talk about services

protected under law regardless

of immigration status, as well

as the remedies in the family

violence act, VAWA.

There is international laws

critical here, and those apply

to the right to seek asylum or

refugees, and those have been

very much challenged over the

last couple years and there is a

need and tremendous effort to

fortify the compliance with

international laws and really

improve the protections for

those seeking asylum and refugee

status.

In addition, there is unique

state laws so it is important

for everyone to be aware of and

at the local level, what

additional protections there

might be in terms of privilege,

confidentiality, and additional

services and support around

housing, and the U visa

certification, so we will get

more into that, but I want to

make sure that we have that

overview.

Now, back in 1996 when Congress

passed what they called the

welfare reform act, PRWORA, the

acronym.

It did limit access to certain

families it, made it harder for

immigrants to access these, but

Congress did say that all

individuals are eligible for

emergency services, services

necessary for the preservation

of life or safety regardless of

immigration status.

As long as they are services

in-kind so that means not like

cash benefits, and they are not

means tested, so a perfect

example is Domestic Violence

shelters.

Those are necessary for life or

safety, and it's an in-kind

service, you are not handing out

cash but making available the

services of a Domestic Violence

shelter and the food it provides

and all the support.

It's not means tested because we

don't check the income

qualifications to access the

Domestic Violence shelter.

That's one example of how it is,

and it made it very clear that

anyone should be able to access

not only short-term shelter, but

also, as HUD later said,

transitional housing programs up

to two years.

There is a guidance letter, with

HUD, and HHS updated this with

services necessary for life or

safety regardless of immigration

status.

It includes crisis counseling

and other intervention programs,

even outside of shelter

settings.

It includes child and adult

protection services.

And other things you will see

here, community food banks,

medical and public Health

service necessary for life or

safety.

That's why you see emergency

Medicaid, that immigrants,

regardless of immigration

status, and that includes

pregnant women who may be

undocumented.

They are eligible for emergency

Medicaid, and this is -- we are

going to get into it later but

the USCIS has put out guidance

in this time of Covid to make

sure that people are aware that

they should be able to access

Covid testing treatments, later

vaccinations when those become

available.

Regardless of the status, and it

won't count towards any charge

determinations.

It's important to get those out

and Fema is providing supplies

and foods and other things, and

those are available regardless

of immigration status.

So it's important for us to get

the word out there proactively.

Many times community groups may

not know what's available,

faith-based organizations may

not know what's available and

who they can refer to, and they

need to know that your

organizations are there, and

that you welcome everyone

regardless of immigration

status, that their

confidentiality will be

protected and you will provide

services.

So in addition to those general

issues with regard to services,

you want to highlight, we want

to highlight when the violence

against women act was passed in

1994, Congress at that time in a

bipartisan manner created

special remedies, special

immigration relief for victims

of Domestic Violence.

It's because Congress realized

the advocates that said, we are

seeing someone who is married to

a U.S. citizen.

Married to someone who is a

legal, permanent resident, who

could have petitioned for that

person to adjust their status as

a spouse, but chose not to.

Why not?

When you think about it,

Domestic Violence is a tool of

power and control.

What greater power and control

than to keep one's spouse

intentionally undocumented, and

then you keep them fearful of

calling the police, afraid of

losing custody, without work

authorization, afraid of

deportation, a whole range of

issues, right.

So at that time, when it was

passed Congress said we don't

want the immigration system to

be used as a tool of abuse, to

sharpen the tools of abusers,

and that's when this petition

was created, and I will talk

more about that remedy and about

the additional remedies when the

violence against women act has

been reauthorized and through

the traffic and victims

protection act.

It's important for us to realize

that in the context of those

remedies, there are special

confidentiality protections, as

well, so for example, if an

immigrant survivor is falling a

VAWA petition because she's

married to someone who is

married to a permanent, legal

resident that's abusive, this

makes sure -- her spouse is not

notified.

So those are very special

provisions to create a path

pathway to safety.

So there is a range of

immigration relief that may be

available to those who

experience Domestic Violence,

dating violence is, sexual

assault, child abuse,

trafficking.

And this panel I put up was

created by the Department of

Homeland Security, DHS as part

of the blue campaign to address

trafficking.

I put it up here to show, and

it's important for all of us,

people on this call, and I am so

appreciative of the time you are

taking to be on this call and

learn about the resources and

pathways to safety.

You don't have to become an

expert on all of these.

You are on the front lines to at

least make sure that you are

aware that there are a range of

potential options, and the

critical role that you can play

on the front lines to say I

heard that there was something

about being married to a U.S.

person or legal resident, how do

I make sure I connect this

person to a well trained

advocate on this or an attorney

that can help them.

So in that context, as we

mentioned, the VAWA self

petition is also available for

children who are abused by an

adult, you know, who is a U.S.

citizen, of a U.S. legal

permanent parent but could also

be the step child.

So the child experiencing the

abuse, even if the mom, herself,

is not abused in the context of

Domestic Violence, the mother

can help filing this petition

for the VAWA self petition for

both the children and is the

parent, the non-abusive parent.

That's the VAWA self petition,

which is a critical remedy

because it creates a pathway

forward for permanent legal

residency and to citizenship,

able to get work authorization.

What happens is when Congress

went to reauthorize VAWA, a lot

of advocates said the VAWA self

petition is all well and good

but sometimes a person

perpetrating the harm is not a

U.S. citizen or U.S. legal

permanent resident or sometimes

there is not a marriage, and so

how do we make sure that there

is a pathway for safety for

those individuals?

So the U visa was added as part

of the victim protection act

with reauthorization in 2000 so

those with unqualifying crime,

and those include Domestic

Violence, sexual assault,

trafficking, stalking, a range

of other types of harm, if they

suffered substantial physical

and mental abuse as a result of

that, and are willing to be

helpful in the investigation of

prosecution of a crime, they may

be eligible to apply for a U

visa, and you know, for those of

you who are involved in this,

you may be aware that there is a

significant backlog of cases.

Right now there is only 10,000 U

visas available annually.

And nonetheless the individuals

can apply, and ultimately, when

their cases are reviewed they

may be eligible for the work

authorization, for deferred

status, and so it is an

important remedy, and we will

talk about the role that child

protective services can play as

being Certified people, but

first, the t visa for human

trafficking if someone is a

victim of trafficking, there is

5,000 visas a year, we never

reached that, so individuals who

apply for a T visa would have a

quicker pathway than for the U

visa, it's important to have

someone to screen and determine

what might be different pathways

for immigration relief.

These forms bring with it

opportunities to help the

survivor, the children, be able

to achieve stability and safety

to become permanent residents,

also known as the Green card,

and a pathway to get work

authorization, and in the case

of the T visa for victims of

trafficking, it includes access

to public benefits, similar to

the way that refugees can access

public benefits, but it's

important that we connect

individuals to attorneys or

advocates that can help them --

help them navigate these.

One of the characteristics is

they have to show that they have

been or are willing to be

helpful in the investigation or

prosecution of one of the

qualifying crimes.

And people also think about the

fact that it is law enforcement

that has to provide that

certification, and I want to

lift up today that's one pathway

to who might be able to certify,

but also, child protective

services can also play a role in

certifying.

They are one of the agencies,

even if the person is not

pursuing criminal charges, just

the fact that they are insisting

in the investigation of a child

protect services case is

sufficient for the designating

of the individual and CPS

certified.

Not that anyone can certify.

Each agency has to have someone

who has been designated as a

qualifying individual to certify

that helpfulness.

But you should be aware of that,

and be aware that Adult

Protective Services comes out

and the judges can.

It could be judges in the

context of family court cases or

other cases to say this

individual seeking an order of

protection has been willing to

assist as investigations are

going forward so there is a

range of different certifying

agencies.

I just want to make sure that we

keep that in mind, but at the

same time, learning about what

the protocols are in your

jurisdiction, if, in fact, they

are going to be seeking a law

enforcement certification.

The full range of who can

certify, so it is important to

keep in mind s in addition to

those -- to those remedies,

there is another called special

immigrant juvenile status, and I

saw someone ask about that in

the chat, so that's great.

People were putting, you know,

they were looking up and doing

that kind of screening that we

all need to be doing when

thinking about a case scenario.

And in fact, you are right, that

is a remedy that in the case of

Maria, that the young person may

have been entitled to, so it

recognizes that when there is a

young person, the applicant has

to be under 21 years of age, and

they have to at some level be

subject to the courts, either

the juvenile courts, family

courts, and having somewhere or

another there is a court finding

with regard to this young person

having experienced abuse,

neglect, abandonment, and

something along those lines, in

state law, so it's interesting,

unless there is a court or the

local level that enters that,

you cannot apply without that,

similar to the visas.

So even though the applicant has

to be under 21, we realize in

many states, the reality is that

that finding by a court usually

has to occur before the young

person is 18.

So for example, a young person

brought into the Foster care

system, and in many states you

have to be under 18 to be

brought into Foster care.

But they can get Foster care

services up until 21.

What oftentimes the Foster care

system had discovered was here's

this child who is a ward of the

state, and yet once they age out

at 21, if they age out into

undocumented status, imagine how

difficult without having work

authorization or being able to

get a multitude of different

services and assistance, that's

one of the reasons it became

evident that special immigrant

juvenile status was an important

pathway to help this young

person have legal immigration

status so that as they age out

they have a better pathway to

safety and is stability.

But the child doesn't have to be

a ward of the state or brought

into the Foster care system.

It could be -- as long as there

is a finding of one parent, is

no longer able to care for that

child due to abuse, neglect, or

abandonment, that's sufficient

where a court can enter that and

even if they have the mom and

living with mom but there is a

finding that the father, had

been abusive or there had been

abandonment and that's

sufficient to move forward with

juvenile status, and also, a

general finding it is in the

best interest of the minor not

to return to their country of

origin because of the

circumstances there.

So again, this is a special

remedy that we should be

thinking about as we are working

with different families and

seeing how to get pathways to

safety.

If a parent is brought in, like

Rebecca and Katia was talking,

about it could happen different

ways, as Rebecca laid out.

It could have been a workplace

raid.

It could have been an abuser at

times who has filed charges

against a victim, right, or the

victims is engaged in

self-defense.

We have seen those cases where

the law enforcement might

actually end up arresting and

putting into, you know, the

criminal legal system an

individual who is undocumented

that then potentially that

becomes made aware to ICE, and

they could be put on a pathway

to removal.

So there are many different ways

where at times we see, you know,

parents being put into

detention, and they have further

risk because of their

immigration status, potentially,

being put on the pathway to

removal.

So if we see a parent who has

been put into immigration

detention, it is so critical,

right, to try to prevent to the

extent possible the child be in

the child welfare system.

So like Katia was saying, that's

the safety planning we need to

do, what I call enhanced safety

planning.

Not just planning with regard to

someone who has been abusive but

safety planning in terms of

systems.

If you have a power of attorney,

if you have a legal guardian, a

temporary legal guardian or

registered with the schools, who

is going to pick up this child,

luckily, the child can go

somewhere else and not be

initially put into the Child

Welfare system.

It's important we recognize that

Federal law doesn't require

workers to contact immigration

enforcement if they encounter

someone without authorized

status, and if someone is

detained or deported, it's not

grounds for this.

The parents who lack status do

have constitutional rights, the

right to a hearing, they have

the right to goals of

reunification.

And there is a really great

resource with the American Bar

Association center on children

and the law has developed about

immigrants on the child welfare

system, so the link to that is

below.

But it's important to realize

even ICE has guidance.

There's been a large outcry,

Rebecca showed, shattered

families, when that came out,

there were a lot of discussions

about how parents were having

parental rights terminated

without a fair opportunity.

And so further guidance has come

out, and you can look at these

links through ICE, but it is

important to realize even if a

parent is put into immigration

detention, that decision of

where they are going to be

placed, sometimes they are

300 miles away to a detention

center, that's an opportunity to

say no, the placement should be

closer because they have

children and we don't want them

to lose contact with their

children.

And the ICE detention facilities

have an obligation to make sure

that there are those

opportunities for visitation,

and that there are opportunities

to coordinate travel, and that

if a parent is going to be

removed or maybe they decide

that they don't want to have

detention and they want to be

returned to the country of

origin, there is a right for the

child to travel with them and

make sure if they get the child

to travel with them those

arrangements are made.

And to try to request a transfer

of the detained parent closer to

where they are at.

This is an important resource.

There is a call center line, and

there is also an on-line

detainee locator system that

people can use, if you hear a

parent has been detained and you

are not sure where they are

placed, it's a way to try to let

the -- you know, the officials

know there are children here,

that we need to make sure and

focus on the reunification, so

again, how can advocates help?

Initial screening, identifying

different possibilities or

eligibility for different

pathways for immigration relief.

Establishing that relationship

of trust and confidentiality is

so important.

Connecting someone to good legal

services.

There are a lot of people

standing in immigrant

communities, and you may have

heard of people who don't really

have a legal degree, claiming

that they can provide

representation for thousands of

dollars from immigrant families.

And we need to make sure that we

know who are the trusted legal

representations to make those

connections and make sure that

language access is available at

every step, both with your

services, law enforcement, child

protective services -- all of

them have the obligation to

ensure adequate language access.

As Katia said, collecting

documents and proof.

That can assist in their legal

case, and oftentimes the

attorneys are not able to put in

the amount of time it takes to

gather that important

information, and coordinate with

consulates to get a marriage

certificate in the country of

origin so these are important

services that advocates can do.

And supporting immigrant

survivors through this stressful

process.

It can be how do we have the

trauma informed strength-based

advocacy and do the -- and the

systems advocacy.

And the survivorship should

carry, the name of a phone

number if they are detained and

to know what their A number is,

if they are in the immigration

system.

That can help people identify

where someone is.

And as we said, family safety

planning, so critical, so there

is some additional resources.

We encourage you to integrate

that to not only your individual

safety planning but your system

safety planning and making sure

that there are temporary legal

guardians or power of attorney,

and we mentioned, know your

rights materials, we have links

to those, and really knowing who

are the community-based

organizations in your community

that people trust?

How are you partnering with them

and how are you maybe exchanging

training?

How are you making sure that

they can refer people to you?

So due to limited time I will

not go a lot into public

benefits.

I included some slides to make

sure that you were aware of the

great resources.

The national immigrant women's

advocate project, out -- big in

OVW funding, there was a whole

map, and you can click on our

state and see what are the

public benefits, either

immigrant survivors or their

children may be eligible.

Like Rebecca said, many families

are mixed status families, and

even if mop doesn't have the

immigration status, the child

may have been born here and now

they are eligible for even food

stamps or Medicaid or prorated

housing subsidies.

Are there others with a

different range of status that

may qualify for things, but very

important for you, to know about

the resource and know what's

available, and not only Federal

but locally.

Some states are more generous

like New York and California and

go above and beyond, so no --

and there is great community

groups, in your community that

really supplement and make

different resources available

for immigrants, so really it's

important to know who those are.

With regard to HUD public

housing.

There is a rule that might be

coming out that would change it,

but for now it's important to

keep in mind that there is

eligibility for mixed

immigration families with regard

to HUD public housing.

You can reach out if you have

specific questions for T.A. on

that, and with regard to the

public charge.

So Katia asked I mention this.

We have done Webinars on public

charge, and you can find it on

our website.

But really there is a problem

with public charge, it created

much more confusion, and has a

chilling effect and has

prevented immigrant families and

their kids from accessing many

services to which they are

entitled.

I heard from an advocate saying,

this mom, removed her kids from

Medicaid, and these kids were

born in the U.S., eligible for

Medicaid but this immigrant mom

was so afraid somehow she had

heard something about public

charge, was afraid that would

block her pathway to getting

immigration status, and that's

not the case about any children

who are entitled to any type of

public benefit.

That does not impact the

immigrant's survivor parent in

terms of public charge.

And interestingly, it is

actually not something that can

impact most of the clients you

are working with.

It's really at the point that

someone is going to adjust to a

Green card mostly from a

family-based petition, but the

reality -- and those who have a

Green card, there is a lot of

confusion.

They think I won't be able to be

a U.S. citizen.

It does not apply to them.

So you will see there is a lot

of myths as to who it applies

to.

And the other important part, it

does not apply to survivor-based

forms, so anyone pursuing the

visas, those with T visas are

eligible, the public charge

won't apply to them.

So they are really good

resources developed by

protecting immigrant families.

They have them available in many

different languages.

We do have a link to that in our

resource sheet.

I know I covered it quickly, but

more than anything I want people

to realize that advocates need

to get informed so that we are

not feeding into that confusion

and help really families access

whatever services they are

eligible for, and like I

mentioned, health care in this

time of Covid is so critical.

So emergency Medicaid is

critical.

Connecting people to community

Health clinics, recognizing that

there is, as mentioned before,

an alert that all immigrants

should be able to access testing

treatment, preventative care

including vaccinations related

to Covid-19, and none of that

will be considered a negative

factor in a public charge

determination.

I mentioned language access.

We have great resources on

language access, and again,

lifting up, what we really need

is a coordinated community

response, not just systems, how

do all of us together work to

enhance the pathways to safety

and stability?

So we have many resources, look

forward to any additional

questions, and I will stop

there, Wendy, and I don't know

if there are any questions that

you want to list?

>> So thank you very much,

Rosie, that was so informative

and great and thank you to you,

to Rebecca, to the information

you shared today, and it was

absolutely helpful, amazing, and

we learned so much, so thank you

very much.

So Katia and Dr. Rodriguez have

been answering some of the

questions.

So there is no pending questions

at the moment.

But again, we want to say thank

you.

I know that we've been saying

this in the chat, but I wanted

to remind folks that you will

get the full captioning

transcript, the recording, and

the power slides.

I also want to share the screen

and go to the evaluation.

Oops, sorry, to the evaluation

slide because -- so if you need

a completion of attendance

certificate or completion

certificate, where we are asking

folks to please go to this link,

which will also be e-mailed to

you, and complete the

evaluation.

And I will share my screen right

now.

And so hopefully you can see it.

That is our survey monkey

evaluation link.

And you should be able to

download it, download it, and it

would also be sent to you.

Again, we want to thank you very

much to all these experts and

presenters on the topic.

It is so important, and that we

learned so much.

And thank you for being here.

You have gotten everyone's

contact information so please,

if there is any remaining

questions, reach out, and again,

please take one second of your

time to complete our evaluation.

The survey monkey link.

Thank you, Dr. Rodriguez.

Thank you Rebecca and Katia for

this wonderful, wonderful,

wonderful presentation and

Rosie.

This will be available on our

website and again, all the

materials will be sent out to

everyone who registered for

today's presentation.

So thank you, everyone.

Have a great rest of your day.

>> Thank you.

>> Take good care.

Bye.

>> Bye.

>> Thank you.