



Community Support for Migrants Navigating the U.S. Immigration System

Introduction

Every year the U.S. government detains hundreds of thousands of noncitizens. The government arrests and imprisons people seeking protection at the border, as well as people with longstanding ties to the United States, in costly and harmful immigration detention centers. People must navigate the complexities of the U.S. immigration process while incarcerated, usually without legal counsel. A vast body of evidence demonstrates that detention is inhumane and abusive, as well as extremely costly.¹ There is growing consensus that it should be phased out entirely.

The U.S. government has long known that it does not have to detain people. There exists a broad array of community support services²—including legal, housing, transportation, social, and medical services—to help people participate meaningfully in their immigration proceedings. The support offered by these services is completely distinct from current government “alternative to detention” (ATD) programs³ that rely on systems like electronic monitoring, have extremely limited or no accompanying social services, and often measure outcomes with flawed, enforcement-centered compliance metrics.

The results of a voluntary survey conducted in November and December 2020 underscore that a strong footprint of community-based service capacity exists around the country. It provides a window into foundational capacity that can be scaled up and in which the government should invest to help move the U.S. immigration system away from its reliance on mass detention.

The survey results point the way toward a fundamentally new approach to supporting those in the immigration process—one that rejects detention and deterrence and instead leverages the deep experience within the non-governmental organization (NGO) community to institute a truly protection-centered system. A new approach that focuses on ensuring individuals and families get legal representation and the type and level of support they need to successfully navigate the immigration system is long overdue. Robustly funded community support services provided by experienced, trusted community organizations should be at the heart of a welcoming approach that never contemplates detention. As the data and analysis presented here demonstrate, there is a strong foundation for this in the community non-profit and international humanitarian protection sectors that should be scaled up to finally move away from the use of detention.

Nationwide Survey and Convening Around Community Support Services

In late 2020, the American Immigration Council (the Council) and Women's Refugee Commission (WRC) conducted a voluntary survey of community support services, which we defined broadly to include legal, medical, mental health, social, transportation, housing, educational, repatriation, and other services.⁴ Over 300 offices from 244 organizations responded, ranging from affiliates of major national immigration service providers to smaller, regional organizations.⁵ Many provide numerous types of community services to immigrant and protection-seeking individuals and families with a wide variety of legal cases or other needs. The survey was followed by a convening in the third week of January 2021, in which over 220 individuals participated. Discussion centered on urgent questions such as the challenges and successes of organizations providing community-based support services, the connections between these services and specifically the urgent need for legal counsel, and lessons learned from government-funded immigration case services.

The key takeaway from the survey is that nationwide there is critical expertise and capacity to provide a broad range of necessary services to those in the immigration process.⁶ There is also widespread interest in expanding services with appropriate funding. These services have been chronically underfunded but could be scaled up, particularly if supported by appropriate funding streams.

Key Findings

- Responding organizations provide a wide range of community support services, through both direct provision of services and referrals. Immigration legal services, social assistance, and housing assistance were among the most frequently provided. Not all organizations provide all services, and the survey and convening both highlighted the critical importance of collaboration and connections between organizations.
- More than two-thirds of responding organizations indicated a strong interest in expanding capacity; many organizations cited funding constraints as a key reason they have not expanded.
- This strong interest in expanding capacity is timely given that many organizations also predicted an increased need for services if Trump administration policies that blocked access to asylum or release from detention are reversed. Organizations have also seen an increased demand due to COVID-19.
- Just over 70% of responding organizations provide long-term services for those already in their final destinations, 50% provide short-term services, such as temporary housing or access to transportation upon release from the border or detention, and 42% provide both short- and long-term services.
- Many organizations have either a large capacity or serve small populations each year. 34% of respondents provide at least one service to over 500 people per year, while 37% provide at least one service to fewer than 50 people per year. The convening showed a strong interest in collaboration between these organizations.

Survey Methodology

The Council and WRC, with the support of the research firm Beacon Associates, launched the survey in November and December 2020. It was open for 19 calendar days and disseminated via email.⁷ The survey was voluntary, and respondents were not compensated for participation. Participants were informed of the survey's purpose and the anticipated use of their data in the introduction. Most questions in the survey were not required, and many were conditional based on previous responses. As such, not all organizations answered every question in the survey.

The survey consisted of questions designed to assess the following:

- Geographic locations and other basic information about the responding organization.
- Types of services provided, whether those services are to support individuals in the short or long term, and the number of individuals who receive those services.
- Current and future needs of individuals and organizations, based on current capacity, the COVID-19 pandemic, and predicted future policy changes.
- The types of funding received, including various government sources of funding.
- The nature of relationships with a wide range of government officials.

It is important to note that the survey represents a snapshot of the services, needs, and funding of the organizations that responded. **These survey findings are neither an exhaustive nor fully representative picture of the entirety of organizations across the United States providing what we defined as community support services.** We nonetheless hope that it can help inform key questions, discussion, funding considerations, and policymaking around the future of community support services.

Survey Findings

Who Responded to the Survey?

244 organizations providing services in 39 states and Washington, DC submitted 301 complete responses.⁸ Respondents were almost all non-profit organizations. They almost evenly represented organizations with only one office and organizations with multiple offices.

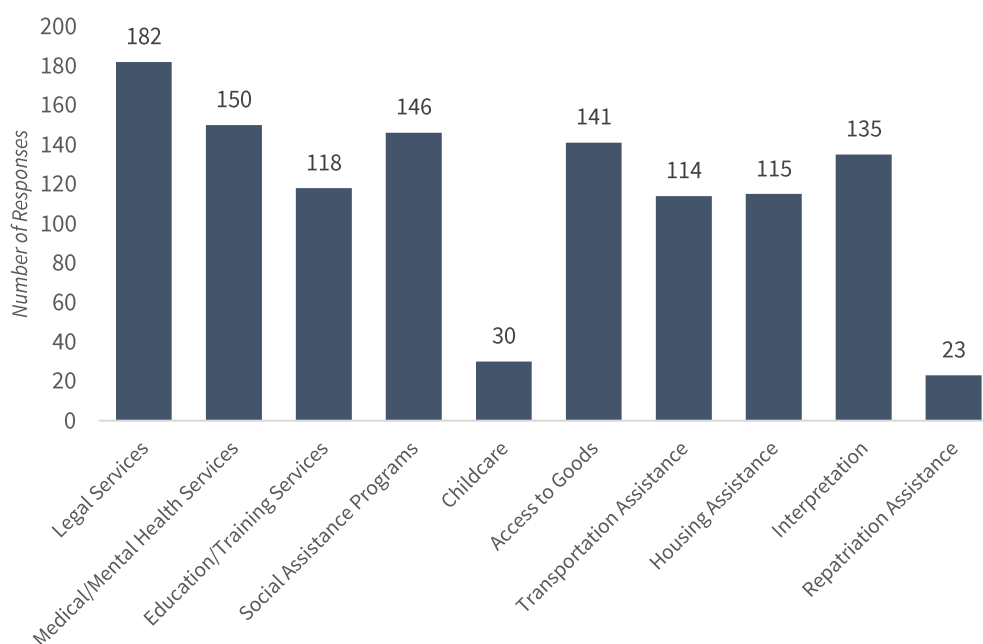
While the survey is not comprehensive of all community-based case management or other support services across the country, it is a strong sample of such capacity and potential. Around 71% of those who responded provide long-term services such as assisting with long-term housing or legal services throughout the duration of a person's immigration proceedings. Just over 50% of those who responded provide short-term services, such as temporary housing or access to transportation, in cases where someone has just been released from the border or a detention center. Around 42% reported providing both short- and long-term services.⁹

Many of the individuals and families receiving services are seeking immigration relief such as asylum, while others are challenging their deportation before an immigration judge. About half of the responding organizations provide support services to refugees and those who have already been granted asylum, or to unaccompanied children.¹⁰

Services Provided by Responding Organizations¹¹

The survey points to areas of breadth and depth but also areas for growth. Respondents were asked to answer questions regarding the types of services their organizations provided, the impact of COVID-19 on the need for services, and the impact of significant changes in immigration policy at the U.S.-Mexico border from 2017-2020 on the number of clients they served. Respondents were also asked to report how many people were served in each category of services surveyed. Given the unprecedented changes to asylum, border, and immigration policies in recent years, respondents were asked to estimate the number of clients served per year, based on 2015-2016 as a reference point—before the Trump administration enacted policies dismantling access to asylum at the border or further preventing release from detention—instead of more recent numbers.

Figure 1 Services that responding organizations reported providing to immigrants and asylum seekers during and upon conclusion of their immigration proceedings.



Notes: This question received 276 responses.

66% of Responding Organizations Provide Legal Services, and More than 60% of Responding Organizations Provide Long-Term Legal Services

Access to legal representation for those in immigration proceedings is critical to fairness and due process and increases the likelihood both of participating in court hearings and obtaining immigration relief.¹² About 61% of responding organizations provide long-term immigration legal services such as representation throughout a person's immigration case. 46% reported providing full representation in immigration cases and just over half—51%—of respondents provide referrals to other legal service providers but with ongoing supervision or other support.

62% of responding organizations provide some form of short-term immigration legal services. Those mostly include Know Your Rights presentations to non-detained people and screenings and referrals to other service providers, as well as assistance with short-term case representation, accompaniment to U.S. Immigration and Customs Enforcement (ICE) check-ins, and one-time services to unrepresented individuals.

There is a spectrum of organizational capacity, from serving small, to mid-size, or large populations. 56% of the responding organizations that provide short-term legal services and 49% that provide long-term legal services do so for fewer than 50 or more than 500 people per year, with other organizations falling in between.

Approximately 41% of responding organizations report providing assistance with other critical legal matters, including criminal defense, housing and eviction, intimate partner violence, family court and child custody, and locating and/or helping to reunite separated family members.

Over Half of Responding Organizations Provide Referrals to Medical and Mental Health Services¹³

Many responding organizations do not provide direct medical and mental health services, and many of those who do reported providing these services to a small number of people. About 22% of responding organizations provide direct medical services, which include both physical and mental health services. About half—51%—of responding organizations provide referrals to external medical or mental health service providers.

Few responding organizations provide direct medical services associated with COVID-19 but about a third provide referrals for care associated with COVID-19.

Many Responding Organizations Connect Clients with Social Services: Education, Training, Social Assistance Programs, and Childcare

Almost half of responding organizations provide referrals to social assistance programs (federal, state, or local programs such as CHIP, food stamps, and SNAP) and about 39% provide direct assistance with enrollment in outside programs. Half of responding organizations that provide these services serve a mid-size population; 28% do so for fewer than 50 clients every year; and about 22% provide such services to over 500 clients every year. About 43% of responding organizations provide assistance with education-related needs. These include after-school programs, English as a Second Language (ESL) services, and job training.

Childcare is an area of clear need. Only about 5% of responding organizations provide childcare and about 5% of organizations provide referrals to childcare. Of the 52 organizations who reported offering childcare-related services, about half provide such services to fewer than 50 clients.

Many organizations provide clients either directly or indirectly with clothing, furniture, and food. About 39% provide people directly with clothing, food, and other goods. About 42% provide referrals to outside organizations that provide goods like clothing and furniture, while 41% provide referrals to food and nutrition assistance, such as food banks. Of the organizations that reported offering these services, 31% serve fewer than 50 clients per year and 22% reported serving over 500 clients per year.

More than a Third of Responding Organizations Provide Transportation Services

About 37% of responding organizations provide some level of local transportation services. These include directly providing local transportation (32%) to court hearings, asylum interviews, or other appointments, or providing assistance with navigating local transit (31%). About 20% of organizations provide or pay for long-distance (defined as more than an hour away) transportation.

More than 40% of Responding Organizations Provide Housing Assistance

About 42% of responding organizations provide some type of housing assistance (including referrals to housing, and the provision of on-site housing).¹⁴

Areas of Current and Future Need

The last four years have been an extraordinarily challenging and tumultuous time for those serving adults and families in the immigration process. The Biden administration has committed to a new approach to those seeking protection at the border and in the immigration process, promising to undo the harms of the last four years and address longstanding systemic issues. In the survey, we asked responding organizations to identify how this might impact the need for services, so that policymakers and funders can be prepared to support organizations responding to hopefully positive shifts in immigration and asylum policy.

Not surprisingly, respondents predict that demand for all types of services would increase if policies preventing individuals and families from seeking humanitarian protection or policies that keep people in detention are rescinded.¹⁵ Demand for legal services and housing were most strongly predicted to increase, with more than 85% of respondents anticipating these particular needs. Similarly, organizations predicted that not all demand for services would be immediately met when asked to estimate the ability of organizations in their area or region (based on the respondent's knowledge) to respond to demand if Trump administration policies and practices on the border or detention were reversed.

However, parallel to the predicted increase in demand on services was a strong interest in expanding organizational capacity, indicating that with further investment, the core capacity of responding organizations could grow. More than two-thirds of respondents indicated they wanted to expand their capacity for each service type, except for childcare and medical services, but have been unable to do so. In particular, more than 80% of respondents want to expand capacity for legal services, mental health services, education and training, social assistance, or housing services, but have been unable to do so.¹⁶

Funding is one key consideration in the ability of an organization to expand services. The COVID-19 pandemic has only made this need more apparent, as respondents strongly indicated (84%) that the pandemic has increased the need for funding at their organization.¹⁷ Participants were also asked what other considerations impact their ability to expand services; two-thirds of respondents indicated that availability of support or administrative staff is an important consideration for them, while over half indicated that access to physical space and access to non-organizational efforts for the purposes of referrals would be considerations.¹⁸ Several organizations commented anecdotally in the survey and convening that the need for improved access to community support services technology and client-centered technology is another key consideration in expansion. Several other responders pointed to the importance of more connection and collaboration between providers on the local level, and between local and national providers.

The COVID-19 Pandemic Has Dramatically Increased the Need for Many Services

A significant number of respondents reported seeing an increased need in all categories of services they provide due to the COVID-19 pandemic. In particular, about 60% of respondents reported seeing an increased need for legal services due to the pandemic, while about 31% reported that the pandemic did not impact the need for legal services. 80-90% of respondents reported a jump in demand for medical (82%) and mental health services (87%). The need for social services also climbed, with 89% of respondents seeing an increased need.¹⁹

The Federal Government and Others Should Invest in Scaling Up Appropriate Community Capacity

Community-based models have been chronically under-resourced, as the federal government has invested taxpayer dollars in jails and enforcement technology rather than support services. The survey inquired about current sources of funding, how funding has changed in recent years, the impact of the COVID-19 pandemic on funding, and whether they would consider potential funding from a variety of sources.²⁰

The primary sources of funding reported by responding organizations are individual donations (84%), philanthropy (72%), and faith-based funding (60%). 42% of respondents have received some form of federal government funding since 2015, 38% received some form of state government funding, and 35% received some form of local government funding.²¹

Three-quarters of respondents indicated that they would be open to a variety of funding sources, including government funding.²² Current sources of funding and relationships with government agencies both show a correlation with the willingness of an organization to consider government funding for expanding community support services. 57% of organizations that do not currently receive any federal funding would consider government funding in the future; organizations that have a working relationship with at least one federal agency would be 14% more likely to consider government funding than organizations without any federal relationships.

Respondents were then asked to consider specific sources of government funding for the purpose of expanding community support services.²³ 87% of responding organizations would consider either state or local government funding for the purpose of expanding community support services. 74% would consider at least

one type of federal funding, while 12% would consider all listed sources of federal funding for expanding these services. Out of the listed potential federal funding sources, 54% of responding organizations would consider Victims of Crime Act (VOCA) funding, while 50% and 46% would consider Office of Refugee Resettlement (ORR) funding from refugee resettlement funds or unaccompanied children's services funds, respectively. No other sources of federal funding would be considered by more than 40% of respondents.

ICE was the least favorable source of any potential government funding to respondents. 30% of respondents would consider ICE funding for community support services, while 34% would consider ICE funding for Know Your Rights presentations. 31% were not sure whether they would consider ICE funding. In addition, one-quarter of respondents would consider other types of federal funding for community support services, but not funding from the Department of Homeland Security (DHS).

Anecdotal comments by several respondents reveal that at least a few organizations would find unrestricted funding most helpful to their organizations. Several respondents expressed that restrictions on current funding sources make it difficult for them to serve clients and families holistically and limit the types of clients they can serve. Discussion at the convening indicated a need for more robust trauma response services and professional development resources.

Respondents Reported a Wide Variety of Working Relationships with Government Entities at All Levels

Finally, responding organizations were asked to select specific federal and local government agencies with which they have a current, local working relationship.²⁴

Respondents indicated a wide variety of relationships with different entities, with less than 10% of respondents indicating that they had no relationships with any of the listed agencies. Organizations are more likely to have a relationship with any single local agency than with any single federal agency; the least common local relationship is with law enforcement (45%), while the most common federal relationship is with ICE (33%).

86% of organizations have a working relationship with at least one state or local agency, and two-thirds of respondents have a relationship with their local immigrants' rights or services department. 55% of respondents have a relationship with at least one federal agency. The majority of responding organizations, 51%, have both state and local working relationships.

When asked about changes in their relationships with government agencies in the last five years, responding organizations largely reported that relationships with federal government agencies stayed the same, with the exception of ICE and Border Patrol, where a number of organizations reported worsened relationships. At the same time, relationships with state and local agencies stayed the same or improved over the same time period, with nearly half of responding organizations reporting that relationships with local agencies improved.²⁵

Next Steps

At a time when the need for a transformative vision of how to support individuals and families navigating the U.S. immigration system could not be greater and the need to end detention could not be more urgent, both the survey and subsequent national convening help to clarify that more needs to be done—and that the momentum exists to do so. Numerous reports capturing both international and U.S. programming lessons learned and best practices already demonstrate the opportunity for change.²⁶ While not exhaustive, the survey findings underscore the depth and breadth of services available, and the need and opportunities for and interest in growth. That growth should include thoughtful consideration of how these services can best and most appropriately serve those who need them and ensure that community support services are ultimately measured not by enforcement metrics but how successfully a person or family navigates their immigration process while also finding stability in the community where they live during that time.

The survey and convening underscore the need for further discussion that centers the trusted, community-based organizations who serve those in the immigration process and assesses how to best fill the needs identified by this survey while expanding the best practices that already exist. At the same time, policymakers, lawmakers, and funders all have an opportunity to transform how these services can play a role as part of a broader shift in the approach to the immigration process. As one example, we hope the newly funded DHS Office for Civil Rights and Civil Liberties (CRCL) community support services pilot can begin a shift to a different approach, one that eventually contemplates funding community-based support services outside of DHS altogether.²⁷

Ultimately, we urge congressional appropriators and the Biden administration to end the use of detention and inappropriate surveillance “ATD” programs, and instead invest to expand the capacity of organizations already providing community-based support services.

Endnotes

1. "Individuals in Immigration and Customs Enforcement (ICE) Custody Face Grave Risk of Death and Harm During COVID-19 Pandemic," American Immigration Council, American Immigration Lawyers Association, El Paso Immigration Collaborative (EPIC), American Friends Service Committee (AFSC), Southern Poverty Law Center (SPLC), May 7, 2020: <https://www.americanimmigrationcouncil.org/advocacy/council-files-civil-rights-complaint-over-dangerous-ice-detention-policies-during/> (complaint filed with DHS oversight agencies regarding ICE's failure to take necessary steps to minimize the spread of Covid-19 within ICE detention facilities and the high likelihood of infection faced by the thousands of people in ICE custody during the pandemic); see also "Supplement—Failure to Provide Adequate Medical and Mental Health Care to Individuals Detained in the Denver Contract Detention Facility," American Immigration Council and American Immigration Lawyers Association, June 11, 2019: <https://www.americanimmigrationcouncil.org/content/inadequate-medical-care-colorado-immigration-detention-continues/> (complaint filed with DHS oversight agencies and ICE detailing concerns regarding dangerously inadequate medical and mental health care at ICE facility); Women's Refugee Commission, Prison for Survivors: the Detention of Women Seeking Asylum in the United States (September 2017), <https://s33660.pcdn.co/wp-content/uploads/2020/04/Prison-for-Survivors-REPORT-FINAL.pdf>; Women's Refugee Commission, Center for Reproductive Rights, Human Rights First, and American Friends Service Committee, Pregnant Immigrants and Asylum Seekers During COVID-19, (September 2020), <https://www.womensrefugeecommission.org/wp-content/uploads/2020/09/Pregnant-Immigrants-Asylum-Seekers-during-COVID-19.pdf>; National Immigrant Justice Center and Detention Watch Network, ICE Lies: Public Deception, Private Profit (Washington, DC: 2018), https://immigrantjustice.org/sites/default/files/content-type/research-item/documents/2018-02/IceLies_DWN_NIJC_Feb2018.pdf.
2. Our organizations use the term "community support services" here to encapsulate the broad array of services that are provided by a range of community-based organizations to individuals and families at different stages of the U.S. immigration process. The term "case management services" has also been widely used by policymakers, NGOs and particularly refugee resettlement agencies that have long provided humanitarian programming. We are mindful that many ongoing conversations exist around how best to term these services.
3. Notably, the Office for Civil Rights and Civil Liberties (CRCL) within the Department of Homeland Security (DHS) has recently been funded to launch a small "case management" pilot program. Details regarding scope, location, and parameters of the pilot program remain vague at the time of publication of this Factsheet, though the Council, WRC, and other NGOs in the community remain interested in engaging with CRCL for the purposes of providing feedback and guidance.
4. The American Immigration Council (Council) and Women's Refugee Commission (WRC) would like to thank the many partners who contributed to the survey and subsequent convening. This includes partner organizations who were integral to contributing to both efforts, and the hundreds of organizations who took the time to respond to our survey and/or participated in our January 23, 2021 convening. In particular, the U.S. Conference of Catholic Bishops (USCCB), Detention Watch Network (DWN), Freedom for Immigrants (FFI), the International Rescue Committee (IRC), the National Immigration Justice Center (NIJC), and the Vera Institute of Justice provided invaluable contributions.
5. Organizations with multiple offices were asked to submit one response per office, leading to a greater number of individual responses than the number of total responding organizations.
6. The Council and WRC created a map which represents responses to the survey. The data represented in this map is a snapshot of available services for immigrants in the United States as of December 2020 at the completion of the survey but is not a comprehensive list of all organizations or services. <https://batchgeo.com/map/33a1e981dceea77bfe4300d34fdb280>
7. Participants for the survey were selected in several different ways in order to be as representative as possible. Affiliates of national organizations including Catholic Charities, the Catholic Legal Immigration Network (CLINIC), Lutheran Immigration and Refugee Service (LIRS), and HIAS, as well as organizations that partner with the Immigration Justice Campaign (a partnership of the American Immigration Council and the American Immigration Lawyers Association), were initially listed. Many, but not all, of the organizations on the initial recipient list are faith-based.

These organizations and several listservs were then contacted with a pre-survey intended to introduce the nationwide survey and confirm the best contact information to whom the survey should be sent. The pre-survey also asked organizations to name fellow organizations in their area that provide community support services to immigrants, and to share the pre-survey with other organizations. Organizations that responded to the survey or were named by respondents were added to the survey recipient list. Any affiliates or partners of organizations on the recipient list that were named on their organizational websites were also added. Responding to the pre-survey was not required in order to participate in the nationwide survey. Contact information for organizations that did not respond to the pre-survey was obtained from that organization's website or Facebook page.

The survey itself was distributed via email to all organizations on the recipient list as well as to the same listservs that received the pre-survey. Multiple reminders were sent to both the recipient list and the listservs. Recipients of the survey were encouraged to forward the survey to any other organizations they believed should participate.

8. The geographic distribution of responses by state is as follows: California – 49 responses; Texas – 46 responses; New York – 22 responses; Illinois – 21 responses; Minnesota – 13 responses; New Jersey – 12 responses; Arizona, Pennsylvania – 11 responses; Georgia – 10 responses;

Colorado – 8 responses; Florida, Indiana, Maryland, Michigan, Virginia – 6 responses; Connecticut, Louisiana, Massachusetts, New Mexico, Ohio, Washington DC – 5 responses; North Carolina – 4 responses; Kansas, Missouri, New Hampshire, Oregon, Rhode Island – 3 responses; Idaho, Iowa, Nebraska, Nevada, Utah, Washington – 2 responses; Alabama, Alaska, Arkansas, Kentucky, Maine, West Virginia, Wisconsin – 1 response.

9. This question received 278 responses.
10. This question received 300 responses.
11. 276 of the 301 responses to the survey engaged with the survey's "Services Provided" section by answering an initial question to select what categories of services – corresponding to the headers in this section of the fact sheet – that office provides. Respondents were then given conditional follow-up questions about specific services provided for only the categories they selected in the initial question. All percentages referring to services provided by responding organizations are out of those 276 responses (unless specified otherwise), as the remaining 25 responses did not indicate what services they provide. Figure 1 also represents these 276 responses.
12. "Measuring In Absentia Removal in Immigration Court," Ingrid Eagly and Steven Shafer, January 28, 2021, <https://www.americanimmigrationcouncil.org/research/measuring-absentia-removal-immigration-court>.
13. For the purposes of the survey, direct medical services were defined as the provision of one-time screening for acute medical needs, provision of on-site emergency medical care, treatment of COVID-19 symptoms, provision of ongoing mental health services, testing for COVID-19, assistance with safe quarantine or isolation for those who may have contagious illnesses, and provision of ongoing medical care.
14. When referring to direct provision of housing, short-term housing was defined as lasting less than two weeks, medium-term housing was defined as two to eight weeks, while long-term housing was defined as eight weeks or more. Referrals to housing defined short-term as less than two weeks and long-term as more than two weeks.
15. Each category of services received between 227-251 responses to this question.
16. Each category of services received between 98-209 responses. Responses of "We do not provide this service" have been excluded.
17. This question received 258 responses. Responses of "I don't know" and "Prefer not to answer" have been excluded.
18. This question received 274 responses. Responses of "Prefer not to answer" have been excluded.
19. Each category of services received between 94-273 responses. Responses of "Our organization does not provide these services" have been excluded.
20. In recognition of the sensitivity of these questions, the funding section was preceded by a disclaimer that responses to the section would only be used anonymously and in aggregate, in order to protect the privacy of respondents. The disclaimer also noted that the questions around consideration of future funding would not be considered or presented as a commitment to accepting additional funding or expanding services. All questions in the funding section were optional. Responses of "prefer not to answer" were excluded from the following data.
21. This question received 280 responses. Respondents that selected "I prefer not to answer" to all categories of funding have been excluded.
22. This question received 265 responses. Responses of "Prefer not to answer" were excluded.
23. This question received 237 responses. Responses of "Prefer not to answer" were excluded. Organizations were asked about a variety of sources of funding including: state government; local government; the Federal Emergency Management Agency; Immigrations and Customs Enforcement (ICE) funding for either Know Your Rights presentations or for community support services; Executive Office for Immigration Review (EOIR) Legal Orientation Program (LOP) and Information Court Help Desk; the Office for Victims of Crime (VOCA); the National Qualified Representative Program (NQRP); and Office of Refugee Resettlement (ORR) refugee resettlement funds and unaccompanied children's services funds.
24. This question received 296 responses. Agencies listed in the survey included ICE, Customs and Border Protection (CBP) Border Patrol and Office of Field Operations, the Department of Health and Human Services (HHS), various state agencies, local family or child services agencies, local law enforcement, local public health departments, local housing or homelessness services departments, local human or social services departments, and local immigrants' rights or services departments.
25. Each listed agency received between 57-334 responses, depending on the number of responding organizations that had a relationship with that agency. Responses of "We did not have a relationship in the past 5 years" were excluded.
26. See, for example, National Immigrant Justice Center, A Better Way: Community-Based Programming As An Alternative To Immigrant Incarceration, (Washington, DC: April 22, 2019), <https://immigrantjustice.org/research-items/report-better-way-community-based-programming-alternative-immigrant-incarceration>; Women's Refugee Commission, The Family Community support Program: Why Community support Can and Must Be Part of the US Approach to Immigration, (Washington, DC: June 13, 2019), <https://www.womensrefugeecommission.org/research-resources/the-family-case-management-program-why-case-management-can-and-must-be-part-of-the-us-approach-to-immigration/>; American Immigration Council, Measuring In Absentia Removal in Immigration

Court, (Washington, DC: January 28, 2021), <https://www.americanimmigrationcouncil.org/research/measuring-absentia-removal-immigration-court/> (detailing the critically important role of legal counsel for those in immigration proceedings).

27. New models of community-based support services, especially when government funded, should also incorporate lessons learned from the government's Family Case Management Program that both began to incorporate more appropriate principles of community support but also suffered from having been operated by a subsidiary of the private prison company GEO Group. see "The Family Case Management Program: Why Case Management Can and Must Be Part of the US Approach to Immigration," Women's Refugee Commission, (Washington, DC: June 13, 2019) <https://www.womensrefugeecommission.org/research-resources/the-family-case-management-program-why-case-management-can-and-must-be-part-of-the-us-approach-to-immigration/>