

The Senate's Reconciliation Bill Is Catastrophic for Immigrant Women and Families

As early as next week, the Senate will vote on its version of the reconciliation (or spending) bill. The Senate bill amends or modifies many aspects of the House reconciliation bill passed last month.

The Women's Refugee Commission (WRC) traced five of the most critical ways the **House reconciliation bill would be catastrophic** for immigrant women and families. This updated factsheet looks at the Senate bill, identifying some of the provisions most damaging for women and girls and identifying areas where the bills differ.

The Senate bill retains some of the most damaging provisions of the House bill, including allocating more than \$150 billion dollars for immigration detention and oversight, upending protections for immigrant children in detention, and defunding sexual and reproductive healthcare services for immigrant women.

The Senate bill also goes further than the House bill in many areas. Most importantly, the Senate bill adds Medicaid to the list of public benefits that are restricted to US citizens and legal permanent residents, eliminating access for refugees, people who have been granted asylum, domestic violence survivors, survivors of human trafficking, and other immigrants who are legally present in the United States. **The practical effect of the bill is to ensure that vulnerable immigrants, including survivors of human trafficking and domestic violence, have no meaningful access to healthcare, even healthcare that is not funded by federal dollars.**

Research shows that public benefits are critical to allowing victims to leave abusive situations and still provide for themselves and their families. Eliminating access to these benefits may force some victims to remain in abusive situations longer because they cannot provide essential services to themselves or their children.

The Women's Refugee Commission has identified five of the most damaging ways the Senate reconciliation bill would harm immigrant women, children, and families.

1. Eliminating access to healthcare and food assistance for immigrant survivors of domestic violence, human trafficking, and persecution

Current law allows immigrant survivors of human trafficking, domestic violence, and other violent crimes who have been granted T visas, U visas, and other humanitarian visas to access Medicaid, food assistance through the Supplemental Nutrition Assistance Program (SNAP), and some other public benefits. Asylees (persons who have been granted asylum), refugees, and other categories of migrants who the government has already determined cannot return to their home countries because of an extreme risk of violence and persecution are also eligible. When exactly in the process migrants become eligible depends on the type of visa or status they hold.

The **House bill** would make these survivors ineligible for Medicare and SNAP. It would also prevent them from purchasing their own health insurance on Affordable Care Act (ACA) marketplaces. **The Senate bill adds Medicaid to the list of public benefits that refugees, domestic violence survivors, human trafficking survivors, and other vulnerable immigrants would be ineligible to receive.**

Eliminating access to federal Medicaid for eligible immigrants is especially harmful in light of the bill's tax on states that use their own funds to provide healthcare coverage to vulnerable immigrant populations who are not eligible for federal Medicaid (described further below). Human trafficking and domestic violence survivors must wait years, even decades, for their claims to be adjudicated. During that time, they are not eligible for most public benefits (exact coverage varies by visa type). State-funded coverage is often the only way that immigrant survivors, especially domestic violence survivors, can get access to healthcare for themselves and their children. **The combination of eliminating access to federal Medicaid and cutting off access to state-funded healthcare could force some domestic violence survivors to wait for 25 years or more to get access to healthcare.**

For immigrant survivors, many of whom are low income and have complex health needs stemming from poverty and abuse, waiting the additional years or even decades to access Medicaid and food assistance may simply be insurmountable. Alongside the elimination of ACA coverage, these provisions make it nearly impossible for survivors to meet their most basic and urgent healthcare needs, which may force many to remain in abusive situations longer than they otherwise would.

2. Punishing states that use their own funds to provide healthcare to immigrants, including survivors of domestic violence and human trafficking

At the same time as it seeks to eliminate survivors access to federal Medicaid, the **bill would also punish states** that use their own funds to provide public benefits to immigrants. Currently, **14 states** use state funds to provide full Medicaid-like health coverage to adults or children regardless of immigration status. An additional 20, for a total of **34 states**, provide healthcare coverage to some smaller subset of immigrants.

The **types of coverage** vary substantially. Several states, for instance, **fund healthcare coverage** for survivors of domestic violence, human trafficking, and other violent crimes as soon as they file for a humanitarian visa or at a much earlier stage of the adjudication process. This allows qualifying immigrant victims to get access to healthcare for themselves and their children as soon as they leave an abusive relationship and during the years or decades they must wait to have their claim adjudicated. Other states provide greater coverage to children, the elderly, or other vulnerable groups.

The Affordable Care Act also gave states the option of providing pregnancy and postpartum coverage regardless of immigration status. Currently **10 states extend pregnancy coverage** to all immigrants. Eight of those states extend coverage up to 12 months postpartum.

Like the House bill, the **Senate bill would withhold billions of dollars in federal Medicaid funding**

to states that use their own funds to provide state-funded healthcare to many of these categories of immigrants, including domestic violence survivors, human trafficking survivors, and refugees.

If enacted, these provisions would make it prohibitively costly for states to provide basic healthcare coverage to even the most vulnerable immigrant populations in their communities. A state that wants to use its own funds to provide vital healthcare services to domestic violence survivors to help them leave abusive situations faster, or to immigrant children regardless of immigration status, would face a nearly insurmountable financial penalty for that choice. States would be forced to either rescind this vital coverage, or reduce services to all residents, including US citizens.

3. Defunding Planned Parenthood and other healthcare centers that provide sexual and reproductive healthcare to immigrant women

The Senate bill also **contains a provision to defund Planned Parenthood** and other clinics that provide sexual and reproductive health services to low-income and immigrant women. These services include cancer screenings, birth control, prenatal care, and other essential treatments that Planned Parenthood provides to women regardless of immigration status. Federal law prohibits any of these funds from being spent on abortion.

Clinics like Planned Parenthood rely on federal funding, including Medicaid and Title X, to be able to provide healthcare to low-income and immigrant women who would otherwise be unable to receive care. If the bill were to pass, **more than 90 percent of healthcare centers would be at risk for closure**, with no other providers able to replace services.

The administration has made clear that eliminating access to sexual and reproductive healthcare for immigrants is one of their primary goals. In a March letter to providers terminating their Title X funding, the **administration cited “overtly encouragel[ing] illegal immigrants to receive care”** as one of the reasons these clinics were being targeted.

In the absence of these services, an **immigrant woman may have nowhere to turn for treatment**. For domestic violence survivors, victims of human trafficking, and victims of rape or sexual assault, sexual and reproductive healthcare may be urgent, even lifesaving. Funding clinics like Planned Parenthood is necessary to ensuring immigrant women can receive necessary treatment.

4. Expanding the Department of Homeland Security’s ability to detain immigrant families and children while eliminating legal safety standards

The bill includes a **\$45-billion budget for Immigration and Customs Enforcement (ICE) to fund immigration detention**, including family detention facilities. This figure is more than **13 times ICE’s budget** in FY 2024.

At the same time as the bill seeks to expand ICE’s capacity to detain children and families, it also seeks to undermine laws that provide minimum safety and care requirements for children in custody. Specifically, the bill seeks to eliminate **strict legal requirements** that limit how long children

can be detained; instead, it would allow the government to detain immigrant children indefinitely, for months or even years. The bill also directs Customs and Border Patrol (CBP) officers to conduct invasive physical examinations on children as young as 12 to search for tattoos and other markings that they believe may suggest gang affiliation.

The Women's Refugee Commission has conducted extensive research on both **family detention** and **detention of immigrant children**. Our findings are unequivocal—there is no safe or humane way to detain kids. The **American College of Physicians, American Academy of Pediatrics**, and numerous other bodies have found the same. Even ICE's own Advisory Committee on Family Residential Centers has concluded that being detained for any amount of time **has profound and permanent effects** on their mental and physical health.

Immigrant women are also at grave risk of harm from such a vast rapid expansion of detention facilities. **Detention conditions are already deteriorating rapidly**, as the government seeks to detain and deport immigrants at a pace too swift for even basic human rights. Women have reported being **held in conditions so extreme they feared for their lives**, including being chained for hours on prison buses without access to food or water, told to urinate on the floor, and packed into tiny cells of over 25 people with nothing to sleep on but a concrete floor. Immigrant women also experience **high rates of sexual assault and abuse** in detention.

Even as conditions worsen, the administration has effectively eliminated oversight over even the most egregious forms of abuse in its facilities. In March, the administration **terminated the oversight bodies** responsible for ensuring that detention facilities comply with civil rights laws, like the **Prison Rape Elimination Act** (PREA), and the government's own detention standards. The administration has also **eliminated the programs that allowed legal service providers to enter detention facilities** to monitor conditions and provide basic rights training.

The bill's proposal to rapidly expand detention at such an unprecedented scale will exponentially worsen conditions for immigrant women and children. Coupled with the lack of oversight and repeal of basic detention standards, the bill would create an expansive and "black box" system where migrants and their lawyers have few means of preventing and responding to abuse.

5. Imposing exorbitant fees on immigrants applying for humanitarian protection or sponsoring unaccompanied children

The **bill imposes steep and often unprecedented fees on migrants** who apply for humanitarian protection. These include new fees for abused children applying for Special Immigration Juvenile Status (SIJS), which allows migrant children fleeing child abuse, human trafficking, and some other crimes to remain legally in the United States.

The bill also seeks to change the law around when a child can qualify for SIJS. Currently children must demonstrate that they cannot reunite with one of their parents due to abuse, abandonment, or neglect. This allows, among other scenarios, children who live in a household with one abusive

parent and one non-abusive parent to leave safely. The bill would require that children demonstrate that they cannot reunify with both of their parents, or else pay \$500 fee—prohibitive for many abused or abandoned children. Forcing children to pay for humanitarian protection they may not be able to afford may prevent them from leaving abusive households, or force them back into abusive situations because they cannot pay for their safety.

The bills also impose exorbitant costs on unaccompanied children (children who cross the US border without a parent or guardian) and the families who sponsor them. There are currently no fees to sponsor unaccompanied children. The government depends on sponsors to come forward and care for these children, which it cannot afford to do. The House bill includes a **minimum of \$8,500 in sponsorship costs**. The Senate bill reduces this number by eliminating at \$3,500 standalone sponsorship fee, but retains other mandatory fees that will cost most sponsors a minimum of \$5,000. These fees are prohibitive for virtually all unaccompanied children and sponsor families, which may force many children to stay in dangerous situations or make them vulnerable to human trafficking to pay these costs.

WRC is gravely concerned about the extreme harms that the reconciliation bill will impose on immigrant women and children. These provisions are violent, costly, and will place all Americans at risk of losing the vital services we all depend on. We strongly urge all members of Congress to oppose the reconciliation bill and stand up for our most fundamental rights and freedoms.

For more information, contact Zain Lakhani, director, Migrant Rights and Justice Program, ZainL@wrcommission.org.

Women's Refugee Commission

The Women's Refugee Commission (WRC) improves the lives and protects the rights of women, children, youth, and other people who are often overlooked, undervalued, and underserved in humanitarian responses to crises and displacement. We work in partnership with displaced communities to research their needs, identify solutions, and advocate for gender-transformative and sustained improvement in humanitarian, development, and displacement policy and practice. Since our founding in 1989, we have been a leading expert on the needs of refugee women, children, and youth and the policies that can protect and empower them. womensrefugeecommission.org.

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