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# **Policy & Advocacy Report**

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## Upcoming Meetings & Events

#### THE MUSLIM BAN REVISTED: *TRUMP V. HAWAII* TWO YEARS LATER – APR 15

The American Bar Association (ABA) will host a webinar exploring legal developments since *Trump v. Hawaii*, the 2018 Supreme Court case upholding President Trump's travel ban. Speakers include Representative Judy Chu (D-CA-27) and legal experts. For more information and to register, click <u>here</u>.

#### WEBINAR ON IMMIGRANT WORKERS' RIGHTS AND COVID-19 – APRIL 15

The National Immigration Law Center, the National Employment Law Project, and the Occupational Safety and Health Law Project will host a webinar on the recent COVID-19 relief bills and legal recourses to enforce workers' rights to healthy and safe workplaces. Register <u>here</u>.

#### AAPI COMMUNITY ACTION PHONE-BANKING FOR COVID-19 RELIEF

The Asian-American advocacy organization NAKASEC will host a community and phone-banking event on April 15 at 6:30 pm EST, April 16 at 5 pm EST, and April 17 at 2 pm EST to call Congress in order to pass an inclusive COVID-19 Bill for all immigrants. Register here.

#### WEBINAR ON COVID-19 RELIEF LEGISLATION – APRIL 16

Refugee Council USA will host a webinar for refugee service providers and partners to provide analysis on the CARES Act and other legislation regarding COVID-19. Register in advance here.



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## Code Blue: The Intersection of Healthcare and Human Trafficking Victims

#### By Kelly Ann Whelan

In American hospitals, a code blue means that a patient has suddenly developed a medical emergency, such as a cardiac arrest. Doctors and nurses run down hallways and rush up stairs to get to the patient in crisis.

But what about human trafficking victims? There is no code for "human trafficking victim in need of rescue." The majority of hospitals do not provide specific training to doctors, nurses, and staff on identification and assistance. However, in many cases, hospitals are where trafficking victims could be identified and placed on the path to rescue and recovery.

During this time of COVID-19 related quarantine and social distancing, many victims are unable to access medical services when at other times they would have been taken to the hospital. Further, while some victims may be taken to the hospital, due to a lack of training amidst the general strain on medical services, they will not be identified. In this paper, we first look at why and how hospitals could be a place for trafficking victims to be identified. Then we look at an example of where training is implemented and what effects it has had on the rescue of victims. Finally, we discuss how COVID-19 has affected human trafficking victims, in particular in terms of medical care and identification.

Read this week's full brief here.

## Ongoing Issues

#### NEW USCIS GUIDANCE FOR LIBERIANS

USCIS has issued a policy guidance for adjustment of status applications based on the Liberian Refugee Immigration Fairness (LRIF) provision in the National Defense Authorization Act for Fiscal Year 2020 (NDAA). Read it here.

#### FEDERAL REGISTER ANNOUNCEMENT, COMMENTS DUE – APR 28

The Executive Office for Immigration Review (EOIR) and the Department of Justice (DOJ) have published a Notice of Proposed Rulemaking (NPRM) to the Federal Register regarding some EOIR forms, including instituting a \$50 fee for an asylum application. Fees for other forms could increase by up to 900%. Submit comments here.

#### USCRI COVID-19 RESOURCES

#### Nonprofit Organizations and the CARES Act

COVID-19 Bill #1: Coronavirus <u>Preparedness and Response</u> <u>Supplemental Appropriations Act</u> (March 6)

COVID-19 Bill #2: Families First Coronavirus Response Act (March 18)

COVID-19 Bill #3: Coronavirus Aid, Relief, and Economic Security (CARES) Act (March 28)

Bill Preview: Coronavirus Immigrant Families Protection Act (April 6)

## **Issue Updates**

## Washington State Creates Loan Program for Undocumented

#### Students

On Thursday April 2, Governor Jay Inslee signed SB6561, which creates an undocumented student support loan program in the State of Washington. The bill allows the State to offer low-interest student loans and allows access to those loans for students excluded from federal loan programs, such as DACA recipients. Read the bill <u>here</u>.

# • Phoenix EOIR Court Allows Remote Appearances for Detained Juvenile Cases

On Friday, April 3, Assistant Chief Judge Amy Hoogasian issued an order for the Executive Office for Immigration Review (EOIR) court in Phoenix allowing telephonic appearance in detained juvenile cases without the need to file a motion. The order applies to counsel from the Department of Homeland Security (DHS), respondents' attorneys, friends of the court, pro bono counsel, and appointed child advocates. Read the order <u>here</u>.

### • Ninth Circuit Upholds Ruling Requiring Bond Hearings

On Tuesday, April 7, the Ninth Circuit Court of Appeals upheld a district court ruling in the case of *Aleman González v. Barr.* The court affirmed a lower court injunction requiring bond hearings for certain immigrants who have been detained for six months. Read the court's decision <u>here</u>.

## • ORR Confirms Six COVID-19 Cases Among Unaccompanied Youth, 39 Among Care Staff

On Friday, April 10, the Office of Refugee Resettlement (ORR) filed an affidavit in the ongoing case *Lucas R v. Azar.* Written by Amy Cohn, the affidavit covers ORR's procedures to comply with the *Flores* settlement during the current outbreak of COVID-19. In the letter, ORR confirmed six COVID-19 disease cases among unaccompanied children in three New York programs, as well as 39 self-reports of positive COVID-19 test results among personnel affiliated with ORR programs in six states.

## • New CRS Sidebar on Immigrant Eligibility for CARES-Act Benefits

On Tuesday, April 7, the Congressional Research Service released a Legal Sidebar reviewing immigration-related eligibility requirements for receiving benefits under the recent CARES act. The sidebar covers the tax rebate, which will be \$1200 for most filers with a social security number, and expansions to unemployment insurance. Read the sidebar <u>here</u>.

# **USCRI** Time Machine

This week's Time Machine comes from USCRI's 1991 report War and Famine in the Sudan. Facing humanitarian tragedy brought about by a combination of armed conflict and drought, USCRI researcher Roger Winter wrote:

"Frankly, the short-run prospects for achieving the kind of comprehensive relief operation suggested here to be the goal are not good. There are, however, a few signs of change. In February the government of Sudan, I suspect feeling the isolation it had generated and seeing the reality on the ground in the north and west, shows signs of beginning to meet donor governments' demands. It quietly acknowledged the problem and its inability to respond adequately. It made noises of a willingness to cooperate in a relief program. At this writing, it is too soon to know that its cooperation will materialize and that it is willing to see aid go to any Sudanese in need, not just those that fit its military interests...

"With or without Sudan government approval, the highest priority should be given to:

"1. Expanding the carrying capacity of cross-border operations from Kenya and Uganda. Logistically, the resources exist in Kenya. The

operation out of Uganda has been very spotty, but can be improved.

"2. Extending the routes of the current cross-border operations deeper into Sudan. Land-based deliveries as far as Bor have begun though with no help from the U.S. or from OLS. Forwarding by water from Bor to Ayod, Waat, and Kongor has also begun. While there are limits as to how far a gerrymandered operation can go, the intent must be to bring food increasingly closer to those in need.

"3. Opening new cross-border channels. While some food undoubtedly enters Sudan through informal channels, additional routes—such as through the Central African Republic, Chad, or Ethiopia—are needed. Formalized routes are necessary, given the volumes of supplies that are needed inside Sudan. Some may bridle at the thought of Ethiopia as a jumping-off point for relief transmission into Sudan. I believe such reactions are misguided. We must get our priorities straight..."

## **Global Gigabyte**

In Germany, a group of Iranian refugees are making face masks for residents of a local nursing home. The group has already sewn 735 face masks in a period of 10 days, with plans to continue production. "It's truly an excellent gift during the crisis and times of uncertainty for people," said local Mayor Elisabeth Herzog von der Heide. Read more <u>here</u>.

If you have any questions or comments, please contact Kelly Ann Whelan at <u>kwhelan@uscrimail.org</u>.

