
The Triennial Comprehensive Report on Immigration

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Executive Summary

Background

In 1986, the Immigration Reform and Control Act (IRCA) was signed into law. It represented a new approach on the part of the United States to control immigration, especially illegal immigration. While IRCA is best known for its amnesty and employer sanctions provisions, it also contains a number of other provisions, including major reporting requirements on the implementation and impact of the new law. The most comprehensive of these is a triennial report on immigration, mandated in Section 401. Each report is to address the following subjects for the preceding 3-year period and project it for the succeeding 5-year period:

- The number and classification of aliens admitted (whether as immediate relatives, special immigrants, refugees, or under the preferences classifications, or as nonimmigrants), paroled, or granted asylum, during the relevant period.
- A reasonable estimate of the number of aliens who entered the United States during the period without visas or who became deportable during the period under Section 241 of the Immigration and Nationality Act (INA).
- A description of the effect of admissions and other entries of immigrants, refugees, asylees, and parolees into the United States during the reporting period on the economy, labor, and housing markets; the education system; social services; foreign policy; environmental quality and resources; the rate, size, and distribution of population growth in the United States; and the effect on specific States and local units of Government with high rates of immigration resettlement.

The report may also include recommendations on changes in numerical limitations or other policies under Title II of the INA bearing on the admission and entry of aliens to the United States.

Responsibility for the Triennial Report

The lead responsibility for the development and production of the report was given to the Attorney General in coordination with the Secretary of Labor by Executive Order on February 10, 1992. On behalf of the Attorney General, the Immigration and Naturalization Service (INS) contacted 10 other Federal agencies whose responsibilities fall in the areas to be addressed in the report. The agencies were asked to report on the fiscal year (FY) 1995-1997 period and to project, if possible, for the FY 1998-2002 period. Most of the agencies were able to submit relevant material, although their focus on immigration and their ability to provide information regarding the effect of immigration on their program areas varies widely. The INS prepared a section on the number, categories, and location of aliens in the United States. The INS also compiled the sections contributed by the other agencies and prepared introductions to selected sections.

The report includes six chapters in three parts.

Part I, *Population Impacts*. This section addresses the level of immigration and its effect on the population of the United States and individual States. Chapter 1, *International Migration to the United States*, which was prepared by the INS, summarizes information on the flow of migrants to the country. The primary focus is on lawful permanent migration, but material is also presented on temporary migration and on other categories. Estimates of the population residing illegally in the United States and of emigration are included.

Legal immigration (the admission of foreign-born persons for lawful permanent residence) during the FY 1995-1997 period covered by this report totaled 2.43 million or an average of 800,000 per year. This was 9 percent less than the 2.68 million admitted during the FY 1992-1994 period. There was no evidence of a decline in the demand to immigrate during FYs 1995-1997. Instead, a temporary provision in immigration law caused applications for adjustment of status to nearly double, creating a backlog, while an increase in applications to naturalize created another large workload that may have diverted some resources from processing immigrant applications. As the backlogged applications are completed, immigration is expected to resume an upward trend. Growth in immigrant numbers will come from two sources: 1) recent legislation under which persons from selected Central American and Caribbean nations may apply to become lawful permanent residents, and 2) family-sponsored immigration as permanent residents naturalize and become eligible to sponsor their immediate relatives for lawful permanent residence.

In other categories, the number of temporary visitors (nonimmigrants) to the United States grew from 17.6 million in FY 1990 to 24.8 million in FY 1996, a 41 percent increase. The typical visitor is a tourist, but millions of others arrive as visitors on business, as students or exchange visitors, and in many other categories. Nonimmigrant admissions are expected to continue to increase at a rate governed by economic, social, and political factors. As of October 1996, the INS estimated the number of aliens who had taken up residence illegally in the United States at 5 million, with a net annual inflow of 275,000 during the 1992-1996 period. Emigration of foreign-born residents from the United States is estimated to have been 1.6 million during the 1980's. The limited data available indicate that current levels of emigration of foreign-born residents could be more than 250,000 annually, increasing as immigration increases.

Chapter 2, *International Migration and Population Change in the United States*, was prepared by the U.S. Census Bureau. It presents data on the total U.S. population and its foreign-born component based on the decennial census and the Current Population Survey. The 1990 census showed 19.8 million foreign-born persons, or 7.9 percent of the resident population. (Because the Census Bureau attempts to count everyone living in the United States, these figures include long-term nonimmigrants and persons without lawful status as well as legal immigrants.) Net migration from abroad (immigration less emigration) was estimated to have added 5.5 million persons to the population between April 1, 1990 and July 1, 1997 and is projected to add another 4.1 million between July 1, 1998, and July 1, 2002. Census data demonstrate the uneven impact of immigration; about three-fourths of the foreign-born population have settled in just six States.

Part II, *Education and Social Services Impacts*. This section contains material from four Federal agencies that are responsible for education and social services programs. Particular attention is paid to programs that are targeted at defined immigrant populations or that, by their nature, are likely to serve these populations. Where available, data are presented on the extent to which the foreign-born population used mainstream programs.

The U.S. Department of Education (DOEd) contributed Chapter 3, *Impact of Immigrant Students on the U.S. Educational System*. It describes and summarizes programs that may serve recent immigrants. Most are based on the students' education or financial need. Only the Immigrant Education program provides assistance on the basis of immigration status. In 1998, roughly \$2 billion in DOEd funding supported services that benefited several million students with limited English proficiency.

Chapter 4, *Immigration and Social Services*, incorporates material from the U.S. Department of Health and Human Services (HHS), the Social Security Administration (SSA), and the U.S. Department of Agriculture's (USDA) Food and Nutrition Service (FNS) program. All three agencies administer programs designed to provide income support for needy persons or to alleviate the effects of poverty in other ways. Many of these programs compile data on the immigration status or country of birth of their service populations, making it possible to estimate the extent to which foreign-born persons are served. Other programs have provided a more general range of services and, during the reporting period, did not maintain records on immigration status. This chapter highlights changes in the access of noncitizens to many of these programs under the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("welfare reform"), which took effect during the period covered by this report. The chapter also describes research projects recently

undertaken to study the adjustment and well-being of immigrant families, sponsored jointly by HHS, FNS, INS, and other Federal agencies.

HHS reports that from 1995 to 1997, the percentage of legal immigrants in the caseload of the Aid to Families with Dependent Children (AFDC) program fell from 6.0 percent to 5.3 percent. This decline mirrored the overall decline in the total AFDC (now Temporary Assistance for Needy Families, TANF) caseload and is attributed primarily to welfare reform. HHS, through its Office of Refugee Resettlement (ORR), also administers a program of services designed to help recently arrived refugees become resettled and find jobs. From 1995 to 1997, 306,500 refugees¹ arrived, a drop of 22 percent compared with the 1992-1994 period. The SSA reports a drop in the number of aliens receiving benefits under its Supplemental Security Income (SSI) program, from 785,410 in December 1995 to 669,630 in December 1998, at which time aliens made up 10 percent of the SSI caseload. The USDA reports that the number of foreign-born persons receiving food stamps fell from 2.1 million in FY 1995 to 1 million in FY 1998, of which 40 percent were naturalized citizens. In 1998, 5.1 percent of the food stamp caseload was foreign-born persons.

Part III. International Impacts. The chapters in this section place migration to the United States in an international context. Chapter 5. Selected Economic Impacts of International Migration, was contributed by the Bureau of Economic Analysis of the U.S. Department of Commerce. This chapter presents estimates of five categories of international transactions related to nonimmigrant and immigrant flows: travel expenditures in the United States by foreign visitors, their related passenger fares paid to U.S. carriers, education services to foreign students, personal remittances by foreign-born residents in the United States to persons abroad, and the amount of wealth that immigrants bring with them when they enter the United States. The first three are major components of rapidly expanding exports of U.S. services, while the fourth is a major component of private unilateral transfers, and immigrant wealth is a component of the capital account. The dollar volume in each of these categories increased from 1995 to 1998.

Chapter 6. The Foreign Policy Impact of Immigration, was authored by the U.S. Department of State. Immigration issues continue to play an important role in the foreign relations of the United States. U.S. immigration laws have traditionally been generous, and the United States has long been the favored destination of large numbers of immigrants. Their participation in the fabric of American life has strengthened the relationships between their native countries and the United States. Many foreign governments pay close attention to U.S. immigration law and policy.

Recommendations

This report does not make recommendations on changes in numerical limitations or other policies under Title II of the INA bearing on the admission and entry of aliens to the United States.

¹ Also statutorily eligible for ORR services are Cuban-Haitian entrants and Amerasian immigrants from Vietnam.

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Introduction

In November 1986, the Immigration Reform and Control Act (IRCA) of 1986 was signed into law. This legislation represented a new approach on the part of the United States to control immigration, particularly illegal immigration. To deter illegal migration, the Act authorized an increase in border enforcement and made it illegal for an employer to knowingly hire an alien who does not have permission to work in this country. These enforcement measures were balanced with programs that legalized the status of illegal aliens who entered the country prior to January 1, 1982, or who worked as agricultural laborers for at least 90 days in specific perishable commodities during the May 1985 through May 1986 period.

While IRCA is best known for these measures dealing with illegal immigration, it contained a number of other provisions, including major reporting requirements on the implementation and impact of IRCA and other aspect of immigration. The most comprehensive of these requirements is a triennial report on immigration mandated in Section 401. Beginning in January 1989 and continuing every third year thereafter, a comprehensive report on the impact of immigration is required to be submitted to the Congress. Each report must provide the following for the preceding 3-year period and project it for the succeeding 5-year period:

1. The number and classification of aliens admitted (whether as immediate relatives, special immigrants, refugees, under the preference classification, or as nonimmigrants), paroled, or granted asylum during the relevant period.
2. A reasonable estimate of the number of aliens who entered the United States during the period without visas or who became deportable during the period under Section 241 of the Immigration and Nationality Act (INA).
3. A description of the impact of admissions and other entries of immigrants, refugees, asylees, and parolees into the United States during the reporting period on the economy, labor, and housing markets; the education system; social services; foreign policy; environmental quality and resources; the rate, size, and distribution of population growth in the United States; and the impact on specific States and local units of government with high rates of immigration resettlement.

The report may also include recommendations on changes in numerical limitation or other policies under Title II of the INA encompassing the admission and entry of aliens to the United States.

The inclusion of Section 401 within IRCA reflects the belief on the part of Congress in the need to examine, comprehensively and on a regular basis, the increasingly complex issue of the effect of immigration on the United States.

Responsibility for the Triennial Report

The lead responsibility for the development and production of the report was given to the Attorney General in coordination with the Secretary of Labor by Executive Order on February 10, 1992. On behalf of the Attorney General, the Immigration and Naturalization Service (INS) contacted the other Federal agencies whose responsibilities fall in the areas to be addressed in this report. The Departments of State (DOS), Labor (DOL), Health and Human Services (DHHS), Agriculture (USDA), Education (DOEd), Commerce (DOC), and Housing and Urban Development (HUD), as well as the Social Security Administration (SSA) and the Environmental Protection Agency (EPA) were requested to prepare sections for the report. Each agency was asked to provide descriptive material covering Federal fiscal years 1995 through 1997 and, if possible, projections covering the next 5 years through 2002.

These agencies differ widely in their responsibility for immigration and immigrants, and their ability to provide information concerning the impact of immigration on their program areas also varies. This edition of the Triennial Report includes sections discussing the impact of immigration on the education system (DOEd), social services (DHHS, SSA, and USDA), international monetary flows (DOC), foreign policy (DOS), and the population of the United States (U.S. Census Bureau). The INS prepared a section on the number of aliens admitted in, categories, and location of aliens in the United States. The INS also compiled the sections contributed by the other agencies and prepared brief introductions to selected sections.

Coverage, Content, and Organization of the Triennial Report

This comprehensive report on immigration contains, as required, information on all major categories of immigration and material addressing the effect of immigration on a wide variety of subject areas. The material is organized by subject matter area into the following four parts:

Part I, Population Impacts, addresses the contribution of immigration to U.S. population growth, with material prepared by the INS and the U.S. Census Bureau. Chapter 1, International Migration to the United States, defines and examines various immigrant and nonimmigrant categories. Included are projected immigration levels by category for fiscal years (FYs) 1998-2002, along with data on the number of immigrants and those in other significant categories who entered the country during FYs 1995-1997. The primary focus of this chapter is on lawful, permanent migration, but it also includes estimates of the number of aliens who enter without visas or who arrive with nonimmigrant visas and fail to depart before the visa expires. Estimates of the rate of emigration of legal permanent residents from the United States are also included. Chapter 2, International Migration and Population Change in the United States, prepared by the U.S. Census Bureau, presents data on the growth of the total U.S. population and its foreign-born component beginning with the 1990 census and updated through 1997. The projections of population growth extend through 2002. The updates and projections employ data from the Census Bureau's Current Population Survey. These data sources are also used to provide information on the impact of the interstate migration of foreign-born and U.S.-born persons on state population growth.

Part II, Education and Social Services Impacts, describes social service programs with an emphasis on the extent to which they serve immigrants; with chapters prepared by DOEd, DHHS, SSA, and the USDA. These chapters pay particular attention to the changes wrought in their programs by the 1996 amendments to the immigration and welfare laws.

Part III, International Impacts, addresses the international impact of immigration, with Chapter 5, Selected Economic Impacts of International Migration, prepared by the Bureau of Economic Analysis (DOC), and Chapter 6, The Foreign Policy Impact of Immigration, by the Department of State.

For the issue areas of the labor market, the housing market, and environmental quality, no specific material is included because the relevant Federal agencies could not provide sufficient information to support such a discussion.

Each major section of the report is introduced by a cover page that contains an abstract of the material presented, as well as the name and mailing address of the agency or agencies responsible for the preparation of the section. Tables of contents are provided for all chapters.

As mentioned previously, 5-year projections have been included for expected immigration as well as for the total U.S. population. However, for topic areas such as foreign policy, education, and social services, 5-year projections could not reliably be made.

The report does not examine in detail the special programs created by the enactment of IRCA or the specific impacts of those programs. These programs have been discussed and analyzed in other reports mandated by IRCA, including state legalization impact assistance grants, the legalization and special agricultural worker programs, and employer sanctions.

Finally, where appropriate, the report includes discussions regarding promising avenues for future research and data collection. Recommendations regarding changes to Title II of the INA are not made in this report.

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The Triennial Comprehensive Report on Immigration

Part I

Population Impacts

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International Migration to the United States

Abstract

Aliens can be admitted legally to the United States in numerous ways: As immigrants, nonimmigrants, refugees, asylees, and parolees. Some of these statuses confer a right to remain permanently, and some are temporary. Because an alien entering in one category can change status to another, these categories are not mutually exclusive. This chapter presents and analyzes data on the various types of aliens admitted to the United States from Fiscal Year (FY) 1995 to FY 1997 and discusses admissions for FYs 1998-2002. In addition, this chapter provides estimates of the emigration of persons residing in the United States and of the resident illegal alien population.

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Introduction

The number of immigrants granted legal permanent residence in the United States during FYs 1995-1997 was 2.43 million, or an average of 800,000 per year. Legal immigration was 14-18 percent less than expected during this period because of a backlog in immigrant applications awaiting a decision at the Immigration and Naturalization Service (INS). There was no evidence of a decline in the demand to immigrate during FYs 1995-1997. Legal immigration was 9 percent lower in FYs 1995-1997 than FYs 1992-1994, when 2.68 million aliens, or 900,000 per year, became legal permanent residents.

This section provides summary information on immigration law, definitions and concepts, the immigrant application backlog, and other factors that may have affected legal immigration in FYs 1995-1997. Data are presented on trends in selected characteristics of persons who became legal permanent residents during this period compared with the previous three years. Projections of legal immigration through FY 2002 are also included.

Data on immigration shown in this section were obtained from INS administrative records. These data provide information on the flow of aliens who become legal permanent residents during a year or other specified time period.¹ The year of admission or adjustment to legal permanent residence is generally not the same as the year of entry for aliens who live in the United States some time before becoming legal residents (for example, refugees, asylees, or students and temporary workers who obtain permanent jobs and are able to adjust their status under an employment category).

Immigration Law and Definitions

Immigrants are persons admitted to the United States for permanent residence, who either have immigrant visas issued overseas or adjust their status in the United States to permanent residence. Included as immigrants are persons entering the United States for the first time with immigrant visas, persons adjusting their status from temporary nonimmigrant categories to permanent resident status, and refugees and asylees who have fulfilled their residency requirements and are becoming permanent residents.

Under the Immigration and Nationality Act (INA), legal immigrant status is granted for three primary reasons: for family reunification, to supply needed labor for U.S. employers, and for humanitarian concerns. Annual limits set by the Immigration Act of 1990 determine worldwide immigration levels for family preferences (relatives of legal permanent residents and relatives of U.S. citizens other than spouses, parents, and children), employment preferences (aliens with certain job skills), and diversity immigrants (aliens from historically low immigrant sending countries). Since FY 1995, the maximum annual limit for preference and diversity immigrants has been 675,000 (see Table 1-1). Minimum limits for family and employment preferences are 226,000 and 140,000, respectively.² Diversity immigration is limited to 55,000 annually.

¹ The Census Bureau provides information on the total foreign-born population at one point in time. Census data distinguish citizens from noncitizens but make no distinction between legal and illegal residents.

² The annual limits on family and employment preferences may fluctuate from year to year because the previous year's total of preference immigrants, immediate relatives of U.S. citizens, and other categories consisting of very small numbers of immigrants affects the current year's limits. Unused family preferences are included in the calculation of the current year's employment preference limit. Unused employment preferences and the number of immediate relatives of U.S. citizens admitted for legal permanent residence in the previous year are included in the calculation of the current year's family preference limit. In FY 1996, the limit on family preferences was set at nearly 312,000 (86,000 above the normal 226,000 limit) because increases in adjustment of status applications pending a decision during FY 1995 resulted in fewer than expected approvals for immediate relatives of U.S. citizens and employment preferences.

Immediate relatives of U.S. citizens are not subject to any numerical limitation. This has been the single largest category of immigrants since 1986 excluding aliens who were legalized under the Immigration Reform and Control Act (IRCA) of 1986.

Refugees and asylees are the other major categories of legal immigrants. Although there are no limits on the number of refugees that may be granted legal permanent residence each year, the number of aliens admitted to the United States as refugees is limited by an annual ceiling established by the President in consultation with Congress. There is no limit on the number of persons who can be granted asylum, but asylees wishing to adjust to legal permanent residence are subject to a 10,000 annual limit.

The remaining categories of immigrants tend to have either time bound limits (e.g., Soviet and Indochinese parolees) or numerical limits (e.g., cancellation of removal) and represent a very small percentage of immigrants. During FYs 1995-1997, these categories accounted for less than 2 percent of all legal immigrants.

Adjustment of Status Application Backlog

Between FY 1994 and FY 1995, the number of adjustment of status applications received at INS nearly doubled from 317,000 to 578,000 (see Chart 1-1). Most of this increase is attributable to a shift in the immigrant application workload from the Department of State (DOS) to INS that resulted from implementation of the Section 245(i) provision of immigration law. Section 245(i) was in effect from October 1994 to January 1998. It allowed illegal aliens who were living in the United States and eligible for permanent residence to pay a penalty fee and apply for adjustment of status at the INS office. Previously, they were required to leave the country and obtain a visa abroad from the DOS. As an indication of workload shift, adjustments of status represented 39 percent of all legal immigrants in FY 1994, 47 percent in FY 1995, 54 percent in FY 1996 and 52 percent in FY 1997.

The number of adjustment of status applications continued to increase after FY 1995 and reached 759,000 by the end of FY 1997. The increase during FYs 1996 and 1997 may be partly due to the naturalization of aliens legalized under IRCA who then sponsored immediate relatives for immigrant status. By the end of FY 1996, nearly 300,000 IRCA legalized aliens had naturalized, many of whom had immediate relatives (spouses, children, and parents) who were exempt from annual limits and could apply for legal permanent residence without a wait.

Adjustment of status application processing at INS failed to keep pace with the volume of applications received beginning in FY 1995. The 'normal' pending caseload, which had averaged about 120,000 each year through FY 1994, doubled by the end of FY 1995, continued to increase during FY 1996 and reached nearly 700,000 by the end of FY 1997. A backlog in the naturalization application caseload may also have contributed to the adjustment of status application backlog in FY 1997, when INS's efforts to reduce the naturalization backlog may have diverted some resources to that work.

INS estimates that legal immigration would have been approximately 350,000-450,000 higher during the FY 1995-1997 period had adjustment of status applications pending a decision not increased beyond the pre-FY 1995 level. These estimates are based on several assumptions. First, the historical application denial rate of 7 percent would continue through FYs 1995-1997. Second, 15 percent of applications were for family preferences, none of which contribute to an increase in pending. The DOS regulates immigration under the preference system to match the annual limits as closely as possible and compensates for a decline in adjustment of status preference applications by issuing visas to aliens abroad on what is a lengthy waiting list of preference applicants. The DOS process tends to insure that the total number of family preference applicants will be near the annual limit each year regardless of the number of pending adjustment of status applications even though individual applicants may experience delays in getting their applications adjudicated. It should be noted that unlike family preferences, there is little waiting time for most employment preferences (except third preference unskilled workers), so that an increase in pending caseload would tend to lower legal immigration. The lower bound estimate of 350,000 takes into account

the increase in the family preference limit that occurred in FY 1996 because of pending adjustment of status applications in FY 1995.

Table 1-1 — Preference Categories of Immigrants Subject to the Numerical Limits: FYs 1992-1997

Preference	Provision	FYs 1992-1994	FYs 1995-1997
Family-sponsored immigrants		465,000 ¹	480,000 ¹
Family-sponsored preferences		226,000	226,000
First	Unmarried sons and daughters of U.S. citizens	23,400 ²	23,400 ²
Second	Spouses, children, and unmarried sons and daughters of permanent resident aliens	114,200 ³	114,200 ³
Third	Married sons and daughters of U.S. citizens	23,400 ³	23,400 ³
Fourth	Brothers and sisters of U.S. citizens (at least 21 years of age)	65,000 ³	65,000 ³
Immediate relatives of adult U.S. citizens (spouses, children, and parents) and children born abroad to alien residents		Not limited Assumed to be 239,000 ¹	Not limited Assumed to be 254,000 ¹
Employment-based preferences		140,000	140,000
First	Priority Workers	40,040 ⁴	40,040 ⁴
Second	Professionals with advanced degrees or aliens of exceptional ability	40,040 ³	40,040 ³
Third	Skilled workers, professionals, needed unskilled workers	40,040 ³	40,040 ³
Fourth	Special immigrants	9,940	9,940
Fifth	Employment creation ("Investors")	9,940	9,940
IRCA Legalization Dependents		55,000	-----
Diversity		40,000	55,000
Total		700,000¹	675,000¹

Note: The annual limit is adjusted based on visa usage in the previous year.

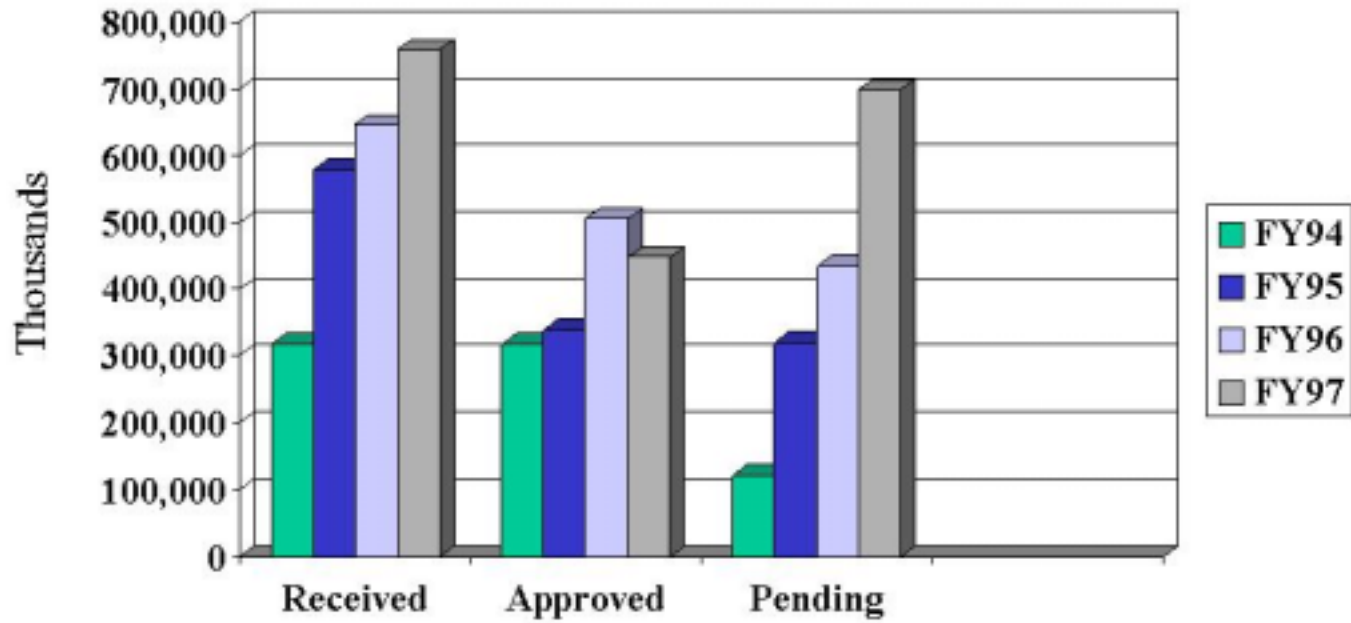
¹ The number of immediate relatives of U.S. citizens included in these figures is assumed to be 254,000 (239,000 in FYs 1992-1994). Immediate relatives may enter without any limitation; however, the limit for family-sponsored preference visa immigrants in a fiscal year is equal to 480,000 (465,000 in FYs 1992-1994) minus the number of immediate relatives admitted in the preceding year. The limit of family-sponsored preference visas cannot go below a minimum of 226,000--the worldwide limit of 480,000 minus 254,000 (465,000-239,000 in FYs 1992-1994).

² Plus unused family 4th preference visas.

³ Visas not used in higher preferences may be used in these categories.

⁴ Plus unused employment 4th and 5th preference visas.

Chart 1-1 — Trends in Immigrant Adjustment of Status Applications: FYs 1994-1997



■	FY 1994	317,164	317,544	121,067
■	FY 1995	577,719	339,399	320,730
■	FY 1996	646,585	505,230	435,250
■	FY 1997	759,292	448,044	699,332

The impact of the backlog in adjustment of status applications on the composition of legal immigrants during FYs 1995-1997 is unknown. Demographic information is not stored in the INS immigrant automated case tracking system until aliens are approved for legal permanent residence.

Other Factors Affecting Legal Immigration in FYs 1995-1997

Demand to immigrate. The annual number of family and worker petitions filed with INS is a leading indicator of the demand to immigrate because for most aliens, having a petition filed is the first step in the immigration process. An increase in the total number of family and worker petitions from 596,000 in FY 1995 to 789,000 in FY 1996 and to 972,000 in FY 1997 suggests a decline in immigration was not likely. In addition, economic conditions favorable to immigration, including low unemployment, prevailed during the FY 1995-1997 period.

Changes in immigration limits and immigrant classes of admission. New categories represented less than 1 percent of legal immigration during FYs 1995-1997. The maximum worldwide limits on immigration decreased 25,000 (less than 4 percent) from 700,000 during FYs 1992-1994 to 675,000 beginning in FY 1995 (see Table 1-1). The 25,000 decrease resulted from three changes: (1) a 55,000 limit for dependents of IRCA legalized aliens was in effect only during FYs 1992-1994, (2) Diversity immigration limits increased 15,000 from 40,000 in FYs 1992-1994 to 55,000 beginning in FY 1995, and (3) the maximum family preference limit was increased from 465,000 during FYs 1992-1994 to 480,000 beginning in FY 1995.

The Illegal Immigration Reform and Immigrant Responsibility Act (IIRIRA). IIRIRA, enacted in September 1996, was directed at enhancing enforcement activities against illegal immigrants and expediting the removal of criminal and deportable aliens, along with many other provisions. Some of the provisions of IIRIRA, including 3 and 10 year bars to admissibility for aliens unlawfully present in the United States, may make it more difficult for illegal aliens living in the United States to adjust to legal permanent residence. However, most of the provisions of IIRIRA were not effective until April 1997. That and the adjustment of status backlog make it very unlikely that IIRIRA affected legal immigration before FY 1998.

Immigrant Characteristics

There were relatively few changes in the demographic characteristics of legal immigrants during FYs 1995-1997 compared to the preceding 3 years, FYs 1992-1994. However, because of the backlog in adjustment of status cases during FYs 1995-1997 and the fact that the characteristics of persons in the backlog are unknown, it may be misleading to draw conclusions about trends in the composition of legal immigrants from these data.

Category of Admission

One of the few categories showing an increase in legal immigrants in each year of the FY 1995-1997 period was immediate relatives of U.S. citizens. The proportion of immigrants who were immediate relatives increased from 27 percent during FYs 1992-1994 to 35 percent during FYs 1995-1997 (see Table 1-2). This increase was expected partly because of the naturalization beginning in FY 1995 of IRCA legalized aliens who could then sponsor their immediate relatives, primarily spouses and children, for legal permanent residence.

Family preference immigration exceeded 226,000 in both FY 1995 and FY 1996 because the carryover provisions of immigration law allow higher limits when the previous year's total for immediate relatives of U.S. citizens minus the number of unused employment preferences falls below 254,000. In FY 1995 the family preference limit was set at 253,721 because of unused employment preferences the previous year. In FY 1996 the limit was 311,819 because employment preference and immediate relative immigration were lower than expected in FY 1995 due to the adjustment of status backlog. In FY 1997, the limit (226,000) was not reached because of the backlog.

Table 1-2 — Immigrants Admitted for Legal Permanent Residence by Major Category of Admission: FYs 1995-97 vs. 1992-94

Category of Admission	1995		1996		1997		1995-97		1992-94	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	720,461	100.0	915,900	100.0	798,378	100.0	2,434,739	100.0	2,682,685	100.0
New arrivals	380,291	52.8	421,405	46.0	380,718	47.7	1,182,414	48.6	1,538,492	57.3
Adjustments of status	340,170	47.2	494,495	54.0	417,660	52.3	1,252,325	51.4	1,144,193	42.7
Immediate relatives of U.S. citizens¹	222,254	30.8	302,090	33.0	322,440	40.4	846,784	34.8	746,336	27.8
Spouses	123,238	17.1	169,760	18.5	170,263	21.3	463,261	19.0	419,486	15.6
Parents	48,382	6.7	66,699	7.3	74,114	9.3	189,195	7.8	183,562	6.8
Children	48,740	6.8	63,971	7.0	76,631	9.6	189,342	7.8	137,259	5.1
Children born abroad to alien residents	1,894	0.3	1,660	0.2	1,432	0.2	4,986	0.2	6,029	0.2
Family-sponsored preferences	238,122	33.1	294,174	32.1	213,331	26.7	745,627	30.6	651,860	24.3
Unmarried sons/daughters of U.S. citizens	15,182	2.1	20,909	2.3	22,536	2.8	58,627	2.4	38,486	1.4
Spouses and children of alien residents	144,535	20.1	182,834	20.0	113,681	14.2	441,050	18.1	361,555	13.5
Married sons/daughters of U.S. citizens	20,876	2.9	25,452	2.8	21,943	2.7	68,271	2.8	67,771	2.5
Siblings of U.S. citizens	57,529	8.0	64,979	7.1	55,171	6.9	177,679	7.3	184,048	6.9
Employment-based preferences	85,336	11.8	117,499	12.8	90,607	11.3	293,442	12.1	386,501	14.4
Priority workers	17,339	2.4	27,501	3.0	21,810	2.7	66,650	2.7	47,623	1.8
Prof. w/advanced degree or of excep. ability	10,475	1.5	18,462	2.0	17,059	2.1	45,996	1.9	102,301	3.8
Skilled, professionals, unskilled	50,245	7.0	62,756	6.9	42,596	5.3	155,597	6.4	212,213	7.9
Chinese Student Protection Act	4,213	0.6	401	0.0	142	0.0	4,756	0.2	48,212	1.8
Needed unskilled workers	7,884	1.1	11,849	1.3	8,702	1.1	28,435	1.2	28,289	1.1
Other skilled, professionals	38,148	5.3	50,506	5.5	33,752	4.2	122,406	5.0	135,712	5.1
Special immigrants	6,737	0.9	7,844	0.9	7,781	1.0	22,362	0.9	22,627	0.8
Investors	540	0.1	936	0.1	1,361	0.2	2,837	0.1	1,086	0.0
Pre-1992	X	Z	X	Z	X	Z	X	Z	651	Z
Diversity programs	47,245	6.6	58,790	6.4	49,374	6.2	155,409	6.4	108,435	4.0
Permanent	40,301	5.6	58,245	6.4	49,360	6.2	147,906	6.1	X	Z
Transition	6,944	1.0	545	0.1	14	0.0	7,503	0.3	108,435	4.0
Legalization dependents	277	0.0	184	0.0	64	0.0	525	0.0	141,690	5.3
Refugees and Asylees	114,664	15.9	128,565	14.0	112,158	14.0	355,387	14.6	365,814	13.6
Refugee adjustments	106,827	14.8	118,528	12.9	102,052	12.8	327,407	13.4	337,369	12.6
Asylee adjustments	7,837	1.1	10,037	1.1	10,106	1.3	27,980	1.1	28,445	1.1
Other categories	12,563	1.7	14,598	1.6	10,404	1.3	37,565	1.5	282,049	10.5
Amerasians	939	0.1	956	0.1	738	0.1	2,633	0.1	31,191	1.2
Parolees, Soviet and Indochinese	3,086	0.4	2,269	0.2	1,844	0.2	7,199	0.3	37,686	1.4
Suspension of Removal ²	3,168	0.4	5,811	0.6	4,628	0.6	13,607	0.6	4,701	0.2
Total, IRCA legalization	4,267	0.6	4,635	0.5	2,548	0.3	11,450	0.5	193,642	7.2
Other	1,103	0.2	927	0.1	646	0.1	2,676	0.1	14,829	0.6

¹ May enter without limitation; the number admitted may affect the limit on family sponsored preference immigrants in the following year.

² Became "cancellation of removal" effective April 1, 1997, with the implementation of the Illegal Immigration and Immigrant Responsibility Act of 1996.

X Not Applicable. Z Rounds to less than .05 percent

Employment preference immigration was below the 140,000 annual limit during each year of the FY 1995-1997 period due to slack demand for most preferences and the backlog in adjustment of status applications. Admissions in the third preference exceeded the 40,000 annual limit in FY 1996 due to the use of previously unused visas from higher preference categories. Demand for unskilled worker visas remained high during FYs 1995-1997; the 10,000 limit would probably have been reached in FY 1995 and FY 1997 were it not for the backlog.

The number of refugees and asylees adjusting to legal permanent residence averaged about 120,000 during each year of the FY 1995-1997 period. Refugees accounted for more than 90 percent of the combined total since asylee adjustments are limited to 10,000 per year. As in 1992-1994, most of the refugees adjusting status were natives of the former republics of the Soviet Union and Vietnam (see Refugee section). The leading country of birth for asylees during FYs 1995-1997 was the People's Republic of China.

The number of aliens admitted under the Diversity Program during FYs 1995-1997 averaged 52,000 each year. This was slightly less than the 55,000 annual limit. The leading countries of birth for diversity immigrants during this period included the former Soviet Union, Poland, Albania, Nigeria, Ethiopia, Ghana, and Bangladesh.

Region and Country of Birth

North America passed Asia to become the leading source continent for legal immigrants in FY 1996. By FY 1997, 39 percent of legal immigrants were from North American countries compared to 33 percent from Asian countries (see Table 1-3). Mexico was the leading country of birth during FYs 1995-1997, followed by the Philippines, Vietnam, China, and India. These five countries were the birthplace of 38 percent of legal immigrants during FYs 1995-1997.

Geographic Residence of Immigrants

Immigration remained highly selective in terms of both State and metropolitan area of intended residence during FYs 1995-1997. Six States, including California, New York, Florida, Texas, New Jersey, and Illinois, have been the most popular destinations of legal permanent residents since 1971. These six States were the intended residence of 68 percent of legal immigrants during FYs 1995-1997 and 71 percent during FY 1992-1994 (see Table 1-4).

The leading metropolitan destinations for immigrants during FYs 1995-1997 were New York City and Los Angeles, which received 15 percent and 7 percent, respectively, of all legal immigrants. Ten metropolitan areas accounted for 45 percent of all legal immigrants during FYs 1995-1997. These same metropolitan areas were the destination of 49 percent of legal immigrants during FYs 1992-1994.

Age and Gender of Immigrants

Immigrant populations have traditionally been younger and more heavily female than the total U.S. resident population. FYs 1995-1997 followed the traditional age pattern. During the period, 45 percent of all immigrants granted legal permanent residence were between the ages of 15 and 34 compared with 29 percent for the total U.S. population in 1996.³ A smaller proportion of immigrants than the U.S. resident population were ages 65 and over (5 percent versus 13 percent). More than one-half of immigrants were female during both FYs 1995-1997 (54 percent) and FYs 1992-1994 (52 percent).

³ Statistical Abstract of the United States 1997, p.16. Reference: U.S. Bureau of the Census, *Statistical Abstract of the United States 1997* (117th edition.) Washington, DC 1997.

Table 1-3 — Immigrants Admitted for Legal Permanent Residence by Region and Selected Country of Birth: FYs 1995-97 vs. 1992-94

Region and Country of Birth		1995	1996	1997	1995-97		1992-94	
		Number	Number	Number	Number	Percent	Number	Percent
Total		720,461	915,900	798,378	2,434,739	100.0	2,682,685	100.0
Africa		42,456	52,889	47,790	143,135	5.9	81,581	3.0
Asia		267,931	307,807	265,786	841,524	34.6	1,007,591	37.6
Europe		128,185	147,581	119,898	395,664	16.3	464,562	17.3
North America		231,526	340,540	307,488	879,554	36.1	957,653	35.7
Caribbean		96,788	116,801	105,299	318,888	13.1	301,655	11.2
Central America		31,814	44,289	43,676	119,779	4.9	155,628	5.8
Other North America		102,924	179,450	158,513	440,887	18.1	500,370	18.7
Oceania		4,695	5,309	4,342	14,346	0.6	14,663	0.5
South America		45,666	61,769	52,877	160,312	6.6	156,606	5.8
Unknown		2	5	197	204	Z	29	Z
Top countries (1995-97 rank)								
1	Mexico	89,932	163,572	146,865	400,369	16.4	451,761	16.8
2	Philippines	50,984	55,876	49,117	155,977	6.4	178,014	6.6
3	Vietnam	41,752	42,067	38,519	122,338	5.0	178,694	6.7
4	China	35,463	41,728	41,147	118,338	4.9	133,013	5.0
5	India	34,748	44,859	38,071	117,678	4.8	137,254	5.1
6	Dominican Republic	38,512	39,604	27,053	105,169	4.3	106,824	4.0
7	Cuba	17,937	26,466	33,587	77,990	3.2	71,938	2.7
8	Ukraine	17,432	21,079	15,696	54,207	2.2	53,709	2.0
9	Jamaica	16,398	19,089	17,840	53,327	2.2	45,343	1.7
10	Russia	14,560	19,668	16,632	50,860	2.1	41,347	1.5
11	Korea	16,047	18,185	14,239	48,471	2.0	53,396	2.0
12	El Salvador	11,744	17,903	17,969	47,616	2.0	62,151	2.3
13	Haiti	14,021	18,386	15,057	47,464	1.9	34,429	1.3
14	Poland	13,824	15,772	12,038	41,634	1.7	81,398	3.0
15	Canada	12,932	15,825	11,609	40,366	1.7	44,092	1.6
16	Colombia	10,838	14,283	13,004	38,125	1.6	50,866	1.9
17	United Kingdom	12,427	13,624	10,651	36,702	1.5	50,628	1.9
18	Pakistan	9,774	12,519	12,967	35,260	1.4	36,068	1.3
19	Peru	8,066	12,871	10,853	31,790	1.3	37,828	1.4
20	Yugoslavia (former)	8,307	11,854	10,750	30,911	1.3	8,818	0.3
Subtotal		475,698	625,230	553,664	1,654,592	68.0	1,857,571	69.2

Z Rounds to less than .05 percent.

Table 1-4 — Top States and Metropolitan Areas of Intended Residence of Immigrants Granted Legal Permanent Residence: FYs 1995-97 vs. 1992-94

	State and Metropolitan Area	1995	1996	1997	1995-97		1992-94	
		Number	Number	Number	Number	Percent	Number	Percent
Total		720,461	915,900	798,378	2,434,739	100.0%	2,682,685	100.0%
	<u>State</u>							
1	California	166,482	201,529	203,305	571,316	23.5%	805,251	30.0%
2	New York	128,406	154,095	123,716	406,217	16.7%	444,962	16.6%
3	Florida	62,023	79,461	82,318	233,802	9.2%	180,643	6.7%
4	Texas	49,963	83,385	57,897	191,245	7.9%	199,071	7.4%
5	New Jersey	39,729	63,303	41,184	144,216	5.9%	142,682	5.3%
6	Illinois	33,898	42,517	38,128	114,543	4.7%	132,676	4.9%
7	Massachusetts	20,523	23,085	17,317	60,925	2.5%	70,124	2.6%
8	Virginia	16,319	21,375	19,277	56,971	2.3%	49,532	1.8%
9	Maryland	15,055	20,732	19,090	54,877	2.3%	48,244	1.8%
10	Washington	15,862	18,833	18,656	53,351	2.2%	51,188	1.9%
	Subtotal	548,260	708,315	620,888	1,877,463	77.1%	2,124,373	79.2%
	<u>Metropolitan Area</u>							
1	New York, NY	111,687	133,168	107,434	352,289	14.5%	380,738	14.2%
2	Los Angeles – Long Beach, CA	54,669	64,285	62,314	181,268	7.4%	313,484	11.7%
3	Miami, FL	30,935	41,527	45,707	118,169	4.9%	91,202	3.4%
4	Chicago, IL	31,730	39,989	35,385	107,105	4.4%	121,637	4.5%
5	Washington, DC-MD-VA	25,717	34,327	31,444	91,488	3.8%	80,166	3.0%
6	Orange County, CA	18,187	17,580	18,190	53,957	2.2%	74,946	2.8%
7	Houston, TX	14,379	21,387	17,439	53,205	2.2%	72,128	2.7%
8	San Francisco, CA	15,773	18,171	16,892	50,836	2.1%	61,022	2.3%
9	Boston-Lawrence, MA ¹	16,750	18,726	13,937	49,413	2.0%	57,386	2.1%
10	San Diego, CA	12,077	18,226	14,758	45,061	1.9%	55,602	2.1%
	Subtotal	331,904	407,386	363,501	1,102,791	45.3%	1,308,311	48.8%

¹ Includes Lowell and Brockton

Projected Legal Immigration: 1998-2002

Due primarily to uncertainty about the timing of reduction in the backlog of adjustment of status applications pending a decision, legal immigration is not projected to 2002. In the last Triennial Comprehensive Report on Immigration, INS projected legal immigration to increase to about 900,000 in FY 1998 and FY 1999 due to the large wave of naturalizations and subsequent sponsorship of relatives for immigration by IRCA legalized aliens and other immigrants during the mid-1990's. Legal immigration was expected to stabilize at a lower level of about 850,000 for at least several years and then gradually increase as naturalizations increased, reflecting the overall higher levels of legal immigration during the last decade of the 20th century than previously. However, largely because of the backlog in adjustment of status applications, legal immigration in FY 1998 reached only 660,000. Complete immigrant data for FY 1999 are not available at the time of this report, but since the backlog continued to increase, legal immigration for the year is not expected to have exceeded the FY 1998 level of 660,000.

Legislation enacted since the last projections, the Nicaraguan Adjustment and Central American Relief Act (NACARA) of 1998 and the Haitian Refugee Immigration Fairness Act (HRIFA) of 1999, is expected to increase legal immigration during FYs 2000-2002. NACARA permitted certain Cuban and Nicaraguan nationals and dependents who had been residing illegally in the United States since December 1, 1995 to apply for adjustment of status by April 1, 2000. In addition, certain nationals of Guatemala, El Salvador, and former Soviet Bloc countries residing in the United States before specified dates in 1990 were allowed to apply for cancellation of removal under special rules and then for adjustment of status. HRIFA allowed certain Haitian nationals who were present in the United States on December 31, 1995 to apply for adjustment of status by April 1, 2000. The total population that will apply for adjustment of status under NACARA or HRIFA is unknown, but INS estimates that it may number several hundred thousand. The timing of adjustments of status under NACARA and HRIFA is dependent on progress in reducing the adjustment of status backlog.

Summary and Conclusions

During FYs 1995-1997, U.S. immigration policy continued to promote admission based on family reunification, employment, and humanitarian concerns. A total of 2.43 million aliens were granted legal resident status during FYs 1995-1997. This was less than the 2.68 million becoming legal immigrants during FYs 1992-1994 principally because of a backlog in the processing of adjustment of status applications at INS.⁴

Assuming no major changes in immigration policy, future growth in immigration levels is expected to come primarily from family-sponsored aliens. Refugee admissions constitute a small proportion of the total and fluctuate annually depending on international political events. Demand for employment-based visas has not recently exceeded the supply. During the FY 1995-1997 period, demand for family-preference visas exceeded the supply, and admissions increased for immediate relatives who are exempt from numerical limit. Once the backlog in adjustment of status applications is reduced, these trends are likely to lead to higher levels of family-sponsored immigration as permanent residents naturalize and become eligible to sponsor their relatives for legal permanent residence.

⁴ For detailed INS data on immigrants and other categories of admission to the United States, consult the INS web site at <http://www.ins.usdoj.gov/graphics/aboutins/statistics>

The Refugee Act of 1980, which added Sections 207 and 208 to the INA, established the definition of a refugee in U.S. law and set out refugee and asylum policy. As defined in U.S. law, persons who cannot return to their home country because of persecution or a well-founded fear of persecution on account of race, religion, nationality, membership in a particular social group, or political opinion are considered to be “refugees.” The INA states that aliens who are still within their home country and who face persecution for any of these reasons also may be designated as refugees by the President after appropriate consultation with the Judiciary Committees of Congress. The President sets a ceiling annually for the admission of refugees after consideration of the need for resettlement of refugees of special humanitarian concern to the United States and after consultation with Congress. The ceiling may be adjusted throughout the year in emergency situations.

Several related but distinct sets of numbers are commonly used to describe refugee admissions to the United States. Refugees apply and are approved overseas under the program established in the annual consultation and under the limits of the ceiling. Actual annual arrivals of refugees always lag the number approved because of the arrangements that must be made for resettlement of refugees. Finally, 1 year after admission to the United States, refugees are eligible to apply to adjust their status to that of permanent resident alien. Each concept describes a different stage in refugee processing, and although closely related, they are not equivalent. In addition, the Cuban Adjustment Act of 1966 remains in effect. Under its provisions, Cuban nationals who enter the United States in something other than refugee status may adjust status after 1 year to become permanent resident aliens.

An asylum applicant must meet the definition of a refugee. The distinction between a refugee and an asylee is the location where the application is made. The refugee applies overseas to enter the United States, while the potential asylee applies within the United States or at a port-of-entry (POE). No numerical limits are imposed on grants of asylum.⁵ An asylee may apply to adjust status to that of permanent resident alien after 1 year in asylee status. There is no limit on the number of refugees who may adjust status in a year, but the law limits asylee adjustments to 10,000 a year.

Refugee Approvals

The number of persons approved overseas for refugee status decreased from 115,000 in FY 1992 to less than 78,000 in FY 1997. These statistics are depicted in Table 1-5. Decreases in the number of persons approved from Vietnam and Laos accounted for the large decrease in the East Asia region. While the total number of approvals in the Eastern Europe and Soviet Union region remained fairly constant, a growing proportion were citizens of Bosnia-Herzegovina and fewer were citizens of the republics of the former Soviet Union. The number of refugees from Africa grew during the period, mostly due to an increase in the number of Somali citizens approved for refugee status. Refugee approvals for Latin America and the Near East did not change greatly over the period.

The annual number of refugees who adjust status to become permanent resident aliens is closely linked to the number of refugee arrivals in immediately preceding years. The average annual number of refugee arrivals was 111,000 during the FY 1992-94 period and 81,000 during the FY 1995-97 period. The number of adjustments under the Refugee Act exhibited a similar pattern; the number of adjustments decreased from 106,000 a year during the FY 1992-94 period to 90,000 during the FY 1995-97 period. The Cuban Adjustment Act of 1966 provides a vehicle for adjustment to permanent resident alien status of Cubans outside the context of the Refugee Act. The number of Cubans adjusting status under this law was nearly 9,600 in FY 1995, increasing to 20,100 in FY 1996, and 28,000 in FY 1997.

⁵ A partial exception to this statement was established in Section 601 of the IIRIRA of 1996. Persecution for resistance to coercive population control methods was defined as one type of persecution for political opinion, and a limit of 1,000 grants annually of asylum and refugee status combined was placed upon this category.

Table 1-5 — Refugee Approvals by Geographic Area of Chargeability:
FYs 1992-1997

Geographic Area of Chargeability	1992	1993	1994	1995	1996	1997
Total	115,330	106,026	105,137	78,936	74,491	77,600
Africa	5,667	6,813	5,748	4,895	9,681	7,854
East Asia	31,751	38,314	40,639	23,023	11,891	6,810
Eastern Europe and Soviet Union (former)	68,131	52,090	48,963	45,900	47,611	56,379
Latin America and Caribbean	4,121	3,991	2,513	1,933	982	1,860
Near East	5,660	4,818	7,229	3,068	4,246	4,539
Not Reported	0	0	45	117	80	158

Asylum Applications and Approvals

The annual number of persons claiming asylum in the United States has fluctuated greatly since 1980, when the law governing asylum was enacted, but the trend has been sharply downward since 1995. The total number of cases filed in FY 1997 was 86,000 as shown in Table 1-6, nearly 69,000 fewer than the 154,000 applications filed in FY 1995. Two developments were responsible for much of that trend: settlement of the “ABC” class action lawsuit and asylum reform.

The trend in asylum claims filed by persons from Central America during the past few years has been affected by the number of claims filed or reopened under the terms of the American Baptist Churches (ABC) v. Thornburgh settlement. Under the terms of this 1991 class action settlement, many nationals of El Salvador and Guatemala were allowed to file or renew their claims for asylum. Nationals of Guatemala had a filing deadline of March 31, 1992, which was the peak year for their claims at nearly 44,000. The 187,000 nationals of El Salvador who had registered for Temporary Protected Status (TPS) in 1991 became eligible to file for asylum at the expiration of their TPS period in 1992. They were later granted additional time under deferred enforced departure periods, which extended until December 1994, and they ultimately had until January 31, 1996 to apply for asylum under the ABC agreement. The number of ABC claims filed by nationals of El Salvador surged during 1996 before the filing deadline. Filings of ABC claims by Salvadorans numbered more than 75,000 in FY 1995 and nearly 66,000 in FY 1996 but declined to about 8,000 in FY 1997.

In March 1994, the INS published proposed regulations designed to streamline the asylum decision process, discourage frivolous claims, and integrate the work of the Asylum Officer Corps with the work of the immigration judges. These regulations took effect on January 4, 1995, and reduced the number of new non-ABC claims. New receipts that are neither ABC nor reopened cases dropped dramatically, from 122,589 in calendar year 1994 to 54,142 in 1995, 53,692 in 1996, and 49,938 in 1997. However, nationals of Mexico, Somalia, and Iraq significantly increased their number of asylum claims during FYs 1995-97. Mexicans submitted 18,820 asylum applications in FY 1997, the most of any country during that fiscal year, compared to only 614 in FY 1992. The period from October 1996 to April 1997 saw many applications filed by Mexicans who wished to be placed in proceedings before an immigration judge in order to file for suspension of deportation before the effective date of the modifications enacted in the IIRIRA.

Table 1-6 — Asylum Cases Received by the INS and Individuals Granted Asylum by Selected Nationality: FYs 1992-1997¹

Nationality	1992	1993	1994	1995	1996	1997
Asylum Cases Received by the INS						
Total	103,964	144,166	146,468	154,464	128,190	85,866
Albania	130	318	314	378	365	1,007
Bangladesh	1,044	3,776	3,682	1,858	1,033	1,162
China	3,464	14,465	10,871	4,987	3,515	5,653
Cuba	2,376	2,699	3,209	1,260	766	638
El Salvador	6,781	14,616	18,600	75,138	65,588	8,156
Ethiopia ¹	1,003	1,227	897	922	1,093	1,087
Guatemala	43,915	34,198	34,433	23,202	13,892	10,898
Haiti	5,374	10,908	9,499	2,571	4,425	5,378
Honduras	1,127	2,805	4,385	3,163	1,836	1,851
India	3,224	5,698	4,508	3,351	4,684	4,926
Iraq	167	176	148	125	443	2,351
Liberia	1,378	877	799	745	757	898
Mexico	614	6,397	9,323	9,703	9,729	18,820
Nicaragua	2,075	3,180	4,682	1,908	2,034	1,674
Pakistan	3,348	4,536	3,323	2,486	1,412	1,441
Peru	1,148	3,150	2,885	1,405	786	975
Philippines	4,022	3,986	2,384	971	1,654	1,389
Somalia	154	135	123	205	1,161	1,919
Soviet Union ¹	5,856	5,955	4,592	2,437	2,360	2,731
Yugoslavia ¹	2,331	2,774	1,866	768	897	902
Other Countries	14,433	22,290	25,945	16,881	9,760	12,010
Individuals Granted Asylum						
Total	3,959	7,464	11,764	17,493	18,556	15,896
Afghanistan	90	70	159	335	216	262
Albania	23	30	47	147	433	378
China	277	336	414	535	433	497
Cuba	214	319	494	524	634	312
El Salvador	110	74	187	237	195	172
Ethiopia ¹	347	352	672	1,098	818	448
Guatemala	94	172	373	1,065	889	344
Haiti	120	636	1,060	749	1,491	694
India	78	357	584	1,108	1,709	886
Iran	231	347	638	785	607	408
Iraq	70	101	214	204	918	5,540
Liberia	209	247	305	615	694	471
Nicaragua	341	291	520	484	418	129
Pakistan	83	176	219	512	442	264
Peru	113	241	470	688	464	243
Somalia	122	121	150	286	529	708
Soviet Union ¹	442	923	1,175	1,556	1,440	1,108
Sudan	73	133	248	397	343	266
Syria	16	638	1,032	680	304	35
Yugoslavia ¹	78	496	906	1,414	2,470	629
Other Countries	828	1,404	1,897	4,074	3,109	2,102

¹ For comparability, Ethiopia, the Soviet Union, and Yugoslavia are represented throughout as they were constituted at the beginning of FY 1992. "Cases received" includes reopened cases as well as new applications filed.

The number of claims for asylum granted each year varies within a much narrower range than the number filed because a relatively small proportion of the claims are successful. Approximately one-fifth of the adjudicated cases were approved during the FY 1995-97 period.⁶ Iraqis and nationals from the former Yugoslavia and Soviet Union had the most approvals during the 3-year period. When an asylum case is granted, the applicant's spouse and minor children are also eligible for asylum status, whether they are already in the United States or waiting outside the country to join the asylee.

From 1980-1990, the annual number of asylees who adjusted to permanent resident alien status was limited by the statutory cap of 5,000. By the late 1980's, more persons had been granted asylum than this cap could accommodate, and the backlog of eligible applicants for adjustment of status was large and still growing. The Immigration Act of 1990 set a new annual cap of 10,000 and waived the limit for persons whose applications had been filed before June 1, 1990. This provision allowed a record number of 22,664 asylees to adjust their status in FY 1991, and the total number of asylee status adjustments also exceeded 10,000 in FYs 1992 and 1993. By FY 1994, the backlog was cleared, and only 6,000 asylees adjusted status. Because more than 10,000 persons have been granted asylum annually since 1994, the cap on adjustment of status should be reached again in future years.

The data reported herein on asylum applicants cover only the casework of the INS Asylum Officer Corps, the so-called *affirmative* asylum cases. These figures do not include those cases filed by apprehended aliens in removal proceedings, the so-called *defensive* asylum cases, or the cases denied by the INS that later are renewed with immigration judges, who are part of the Executive Office for Immigration Review in the Department of Justice. However, the statistics on adjustments to permanent resident status cover all aliens previously granted asylum (including spouses and children), whether the grant was by INS officials or immigration judges.

Refugee Projections: FYs 1998-2002

Trends in the number of refugees admitted to the United States are among the most difficult to predict of all categories of immigration because they are dependent on political events worldwide as well as on U.S. response to those events. Based on expected refugee ceilings for the next several years, refugee admissions are projected to continue declining gradually from the peak of 115,000 reached in FY 1992, leveling at approximately 80,000 a year. This trend would return refugee admissions to a level approaching that of the mid-1980's.

Adjustments to permanent resident alien status under the Refugee Act typically follow the trend in refugee arrivals, lagging admissions by slightly more than 1 year. This pattern will be disrupted over the next several years as the INS attempts to reduce a growing backlog in adjustments to legal permanent status. While the number of refugee adjustments may average about 80,000 per year from 1998-2002, the number of adjustments may be as low as 30,000 towards the beginning of the period. The number of adjustments will increase as INS begins to reduce the backlog.

Adjustments of status under the Cuban Adjustment Act of 1966 will also be affected by the backlog in adjustment of status processing. Cuban Adjustment Act adjustments totaled 28,000 in 1997 but may be half that total in 1998-2000. The number of adjustments is expected to average 20,000 a year over time. Therefore, total adjustments of status under the two Acts are expected to average about 100,000 during FYs 1998-2002, with substantially lower annual numbers in the beginning of the period and substantially higher numbers later if the INS is able to reduce its processing backlog.

⁶ Data on asylum are tabulated by both cases and persons. Standard analytical practice calls for calculation of trends in asylum filing and approval rates based on cases. However, analysis of the population granted asylum, including the number subject to the cap on adjustment of status, requires data on persons given asylum status.

Asylum Projections: FYs 1998-2002

Trends in the number of asylum applicants are even more volatile and difficult to project than trends in refugee admissions because they are not subject to overseas control, and they respond more quickly to world events. Recent legislation also changes the outlook for new asylum applicants and those with cases pending. As part of an effort to discourage claims that are filed merely as a defense against removal, section 604 of IIRIRA placed a limit of 1 year on the length of time a person could be present in the United States before filing an asylum application.⁷ This measure is expected to reduce the number of claims filed in future years. The NACARA and HRIFA laws described above (p. 15) are likely to reduce the number of asylum claims granted, since asylum applicants who benefit from this legislation will have their applications for cancellation of removal or adjustment of status considered under these laws first. The adjudication of NACARA claims is being integrated into the affirmative asylum process, and asylum applicants who are granted relief under NACARA will have their asylum claims administratively closed. Because these nationality groups account for more than 80 percent of the asylum backlog, the number of asylum claims granted is expected to fall.

The number of asylum claims projected for FYs 1998-2002 is shown in Table 1-7. These estimates are lower than the average for recent years, based on the assumption that the asylum reform measures of the past few years will continue to have the desired effect of deterring frivolous claims. On the other hand, a reduction in frivolous claims should result in a higher **proportion** of claims granted by INS. The number of persons granted asylum is projected to be 13,000 in FY 1998 and to increase to 17,000 for the next 2 years before falling to about 15,000. In the longer term, as fewer claims are filed and the backlog of claims is reduced, the number of claims granted is projected to decline.

Table 1-7 — Projected¹ Asylum Cases Filed with the INS and Individuals Granted Asylum: FYs 1998-2002

Projections	1998	1999	2000	2001	2002
Asylum cases filed with INS	55,000	45,000	50,000	50,000	50,000
Individuals granted asylum by INS	13,000	17,000	17,000	15,000	15,000

¹ Projections were developed by INS.

⁷ Exceptions are possible for changed country conditions or other extenuating circumstances.

A parolee is an applicant for admission to the United States who is allowed to enter on a case-by-case basis for urgent humanitarian reasons or significant public benefit. A grant of parole does not constitute a formal admission to the United States, and in most cases it permits the alien to remain in the country for only a brief, temporary period. When the conditions supporting the parole cease to exist, the parolee must depart.

Parole Categories

In general, the parole authority allows the INS to respond in individual cases that present needs for which no remedies are available elsewhere in the Immigration and Nationality Act. The prototype case arises in an emergency situation. For example, the sudden evacuation of U.S. citizens from dangerous circumstances abroad often includes household members who are not citizens or permanent resident aliens, and these persons are usually paroled. When aliens are brought to the United States to be prosecuted or to assist in the prosecution of others, they are paroled. Parole is sometimes used to reunite divided families. More examples of the use of parole are presented below.

Since FY 1992, INS has classified paroles in six categories. A brief description of each follows.

Port-of-Entry Parole

Port-of-entry parole is the single category used most often. It applies to a wide variety of situations and is used at the discretion of the supervisory inspector, usually to allow short periods of entry. Examples include allowing otherwise inadmissible aliens to attend a funeral and permitting the entry of emergency workers, such as fire fighters, to assist with an emergency.

Advance Parole

Advance parole may be issued to persons residing legally in the United States in something other than lawful permanent resident (LPR) status, who need to travel abroad and return, and whose conditions of stay do not allow for routine re-entry.

Deferred Inspection Parole

Deferred inspection parole may be conferred by an immigration inspector when aliens appear at a port-of-entry with documentation, but after preliminary examination, some question remains about their admissibility which can best be answered at their point of destination.

Humanitarian Parole

Humanitarian parole is the category reserved for aliens who need specialized medical care in the United States or because a severe medical condition makes detention or removal of an otherwise inadmissible alien inappropriate, or for similarly compelling reasons.

Significant Public Benefit Parole

Significant public benefit parole is intended for use with aliens who enter to take part in legal proceedings, either as witnesses or defendants. It may also be invoked in other situations where legal grounds for admitting an alien do not currently exist, but the entry of the alien is considered advisable in the public interest.

Overseas Parole

Overseas parole is the only category that may begin a period of long-term admission to the United States. In recent years, most of the aliens INS has processed through overseas parole have arrived under special legislation or international migration agreements.

Grants of Parole, FY 1995 through FY 1997

The period from FY 1995 through FY 1997 saw an increase in parole admissions compared with the experience of the early 1990's. In FY 1995, 113,542 grants were made under the parole authority.⁸ In FY 1996, parole admissions increased to 138,334, and FY 1997 saw a further increase to 199,843. Table 1-8 displays the total number of paroles granted during these fiscal years for the 16 countries that had at least 2,500 paroles in FY 1997.

While INS may grant parole to a national of any country, the 16 countries listed in Table 1-8 accounted for 74, 70, and 74 percent of all paroles in the 3 years, respectively. Our neighboring countries were prominent. Mexico's share of the total increased from 18 percent in FY 1995 to 34 percent in FY 1997, and Mexico's increase of nearly 48,000 accounted for more than half of the overall rise in paroles. Cuba had the most paroles in FY 1995, second in FY 1996 and third in FY 1997. Many paroles from Cuba took place under the Cuban Migration Agreement, which is discussed below. Canada also placed among the top three countries in each year.

Analysis of the trends in parole by category provides some insight into their causes. Table 1-9 displays the parole data by groupings for the top five countries in each group for the 3 years.

Port-of-entry parole, the largest category, grew by more than 90,000 from FY 1995 to FY 1997. Our immediate neighbors, Mexico and Canada, represented 31 percent of these paroles in FY 1995, and their share increased to 41 percent in FY 1997. The other paroles in this category were distributed among many countries. Most countries showed an increase between the 2 years, but Mexico accounted for 41 percent of the substantial increase of 92,700 in the category. Because port-of-entry parole allows for some administrative flexibility to deal with situations that could not have been foreseen, its use can be expected to rise as the volume of international travel rises.

Table 1-8 — Grants of Parole for Leading¹ Countries of Citizenship:
FYs 1995-1997

Country of Citizenship	FY 1995	FY 1996	FY 1997
All countries	113,542	138,334	199,843
Mexico	20,378	27,904	68,045
Canada	6,404	8,985	15,392
Cuba	31,446	19,833	8,247
United Kingdom	3,116	6,335	8,187
China (PRC)	3,012	4,099	6,105
India	2,235	3,997	5,485
Soviet Union (former)	3,145	3,304	5,364
Philippines	3,691	3,478	5,218
El Salvador	1,949	3,587	4,467
Germany	1,274	2,471	3,348
Korea	1,373	2,345	3,281
Japan	1,373	2,230	3,146
Colombia	1,430	2,266	3,098
Pakistan	1,398	2,207	2,733
Brazil	843	1,793	2,672
Taiwan	855	1,665	2,612

¹ Countries are listed if their nationals had at least 2,500 grants of parole in FY 1997; rankings are in order by 1997 totals.

⁸ The data system from which these figures are taken counts the number of admissions under the parole authority, not the number of persons paroled during the year; some persons may have been paroled and counted more than once. These tables were calculated from Table 607 maintained by the INS Statistics Branch, Office of Policy and Planning.

The volume of advance paroles also rose greatly between FY 1995 and FY 1997, but at less than 5 percent of all paroles in these years, its impact on the total trend was small. Nationals of Canada and Mexico were the most numerous in both years. The increase in grants of advance parole to nationals of Mexico accounted for half of the increase in this category between 1995 and 1997.

The use of deferred inspection increased only slightly from FY 1995 to FY 1997, and its share of total paroles fell from 8 percent in FY 1995 to 5 percent in FY 1997. Mexico and Canada again predominated in this category, with 26 percent to 29 percent of the deferred inspections during the 3-year period. The increases by country were modest.

The use of humanitarian, significant public benefit, and overseas parole can vary substantially, because they are invoked to deal with emergency situations, illness or medical necessity, legal actions, and overseas programs that admit persons of special concern to the United States. This combined category is the only one whose use declined during the 3-year period. For this reason, these categories are combined for presentation in Table 1-9. Nationals of Mexico and Canada were admitted in substantial numbers in this category as well as in the others.

Cuban nationals made up more than half of these admissions in FY 1995 and FY 1996, but their share fell to 20 percent in FY 1997. Most of these Cubans were arriving under the 1994 Migration Agreement with Cuba. In that accord the United States agreed to admit 20,000 persons yearly by direct application in Havana, to prevent dangerous attempts to escape from Cuba by raft. Some Cuban nationals who apply for this program qualify for admission as refugees and some as lawful permanent residents; the remainder are paroled. The number of Cuban parole entries was at its highest in FY 1995, soon after the agreement was made. It has dropped in later years, suggesting that more of the Cubans have been entering in other immigration categories. Under the Cuban Adjustment Act of 1966, as amended, Cuban parolees may adjust their status to that of lawful permanent resident after 1 year of residence in the United States.

Persons from the former Soviet Union made up another noteworthy group in this combined parole category. Special legislation⁹ in 1989 established a program for adjustment to lawful permanent resident status of persons from the former Soviet Union, Vietnam, Laos, or Cambodia who had been paroled after being denied refugee status. The program applied to persons who were granted parole beginning August 15, 1988. Most of the persons who qualified for this immigration benefit arrived in the early 1990's, before the time period covered in Table 1-9. Like the Cubans, these parolees may apply to adjust to lawful permanent resident status after 1 year of U.S. residence.

Projected Parole Admissions: 1998-2002

The use of parole to admit aliens to the United States has proved very difficult to forecast, since it is invoked in so many situations, some of them very ordinary and others reflecting emergency conditions in distant nations. As the volume of international travel increases, the use of port-of-entry parole will grow to respond in unforeseen situations. The growth in the number of foreign nationals living in the United States in temporary statuses will give rise to more instances of the need for advance parole. The existence of the Cuban Migration Agreement will keep parole admissions from Cuba relatively high, and international events may cause the use of humanitarian, significant public benefit, and overseas parole to rise and fall. In summary, admissions under the parole authority are likely to remain relatively high by historical standards.

⁹ Section 599E of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 1990, Public Law 101-167, commonly known as the "Lautenberg Amendment."

Table 1-9 — Grants of Parole by Category, by Selected Country of Citizenship:¹
FYs 1995-1997

Class of Admission/Country of Citizenship	FY 1995	FY 1996	FY 1997
All paroles	113,542	138,334	199,843
Port-of-Entry paroles	58,652	93,822	151,385
Mexico	14,898	22,018	52,677
Canada	3,209	5,417	9,121
United Kingdom	2,343	5,208	7,013
China (PRC)	2,376	3,436	5,301
India	1,623	3,343	4,696
Advance paroles	2,367	5,256	8,998
Mexico	284	1,008	3,571
Canada	486	1,084	1,885
United Kingdom	113	313	333
India	114	212	246
El Salvador	37	187	196
Deferred inspections	9,311	8,483	10,109
Mexico	1,742	2,018	2,000
Canada	670	459	795
United Kingdom	404	457	499
Colombia	230	211	313
Jamaica	193	185	304
Humanitarian, significant public benefit, and overseas paroles	43,212	30,316	29,355
Mexico	3,454	2,539	9,797
Cuba	28,139	17,488	5,893
Canada	2,039	1,972	3,591
Soviet Union (former)	1,697	1,150	2,398
El Salvador	212	877	1,043

¹The top five countries in each category in FY 1997 were selected; rankings are in order by 1997 totals.

Nonimmigrants

A nonimmigrant is an alien admitted to the United States for a specified temporary period but not for permanent residence.

Temporary Visitors to the United States

While the typical nonimmigrant is a tourist who visits for a few days to several months, there are numerous classes of nonimmigrant admission. These include business travelers, students, ambassadors, representatives to international organizations, temporary workers, exchange visitors, treaty traders and investors, and intracompany transferees. A number of classes of admission allow nonimmigrants to enter the United States for temporary employment purposes: workers with specialty occupations; with extraordinary ability or achievement in the sciences, arts, education, business, or athletics; and to perform services or labor when unemployed persons capable of performing such tasks cannot be found in the United States. Authorization to work in this country also may be granted to exchange visitors who enter temporarily to study, teach, or conduct research; intracompany transferees who enter to provide temporary managerial or executive services in the United States to international firms or corporations; and industrial trainees. Although not considered as employed in the United States, treaty traders and treaty investors enter temporarily to conduct trade or to invest substantially in enterprises under the provisions of treaties of commerce and navigation between the United States and foreign states.

Nonimmigrant Admission Levels

During the 1980's, nonimmigrant admissions fluctuated from 11.8 million in FYs 1981 and 1982 to a low of 9.3 million in FY 1984. Since FY 1984, nonimmigrant admissions have increased each year, to nearly 25 million in FY 1996 (Table 1-10).¹⁰ For the 7-year period FYs 1990-96, nonimmigrant admissions have increased by more than 41 percent.

Visitors for pleasure is the class of admission with the largest number of entries, generally constituting approximately three-quarters of total nonimmigrant admissions. *Temporary visitors for business*, the second largest class, make up about 15 percent of all nonimmigrant entries. The U.S. Department of Commerce defines "tourists" as visitors for pleasure, business travelers, and students. Under this definition, tourists account for approximately 93 percent of all nonimmigrant visitors to the United States each year, showing an increase during the FY 1990-96 period of 42 percent. While entries by temporary workers and trainees and their families increased by more than 81 percent during this period, intracompany transferees and their families had the largest percentage increase (108 percent). Visitors for pleasure and visitors for business each had a 42 percent increase, followed by students and their families (29 percent), and exchange visitors and their families (20 percent). Treaty traders and treaty investors and their families declined for the period (-6 percent).

More than half of all nonimmigrants entering the United States in FY 1996 were citizens of five countries: Japan, the United Kingdom, Germany, Mexico, and France (Table 1-11). These five countries were the leading countries for the entire 1990-96 period, although the ranking has varied somewhat, with Germany supplanting Mexico in third place after 1990. For each of these countries, visitors for pleasure outnumbered all other classes of entry. The largest number of pleasure visitors in FY 1996 was from Japan, which also had the highest percentage in this category (89 percent). Approximately 8 out of 10 nonimmigrants from the top 10 countries were pleasure visitors; this percentage has remained steady throughout the 1990-96 period. In contrast, the percentage of pleasure visitors of total nonimmigrant admissions from China was 58 percent.

¹⁰ No data are available for FY 1997.

Table 1-10 — Nonimmigrant Admissions by Major Classes of Admission:
FYs 1990-1996

Class of admission	1990	1991	1992	1993	1994	1995	1996	Change 1990-1996	
								Number	Percent
All classes	17,574,055	18,920,045	20,910,880	21,566,404	22,118,706	22,640,539	24,842,503	7,268,448	41.4%
Temporary visitors	16,079,666	17,234,400	19,229,066	19,879,443	20,318,933	20,886,867	22,880,330	6,800,664	42.3%
Business	2,661,338	2,616,335	2,788,069	2,961,092	3,164,099	3,275,334	3,770,326	1,108,988	41.7%
Pleasure	13,418,328	14,618,065	16,440,997	16,918,351	17,154,834	17,611,533	19,110,004	5,691,676	42.4%
Treaty traders/investors and families	147,536	155,049	152,385	144,644	141,030	131,777	138,568	-8,968	-6.1%
Students and families	355,207	374,420	401,287	403,273	427,721	395,480	459,388	104,181	29.3%
Temporary workers, trainees, and families ¹	174,161	203,417	217,073	221,676	260,065	274,246	315,693	141,532	81.3%
Exchange visitors and families	214,644	223,430	231,292	239,405	259,171	240,364	256,725	42,081	19.6%
Intracompany transferees and families	102,555	113,034	120,779	132,143	154,237	173,745	213,762	111,207	108.4%
Other ²	500,286	616,295	558,998	545,820	557,549	538,060	578,037	77,751	15.5%

¹ Includes workers, spouses, and children under the U.S.-Canada Free-Trade Agreement, beginning January 1989 and ending December 1983, and the North American Free-Trade Agreement, beginning January 1994.

² Includes People's Republic of China and Taiwan.

Table 1-11 — Nonimmigrant Admissions by Selected Class of Admission for Top Ten Countries of Citizenship: FYs 1990-1996
(Numbers in Thousands)

Country of Citizenship	1990		1991		1992		1993		1994		1995		1996	
	All classes	Visitors for Pleasure	All classes	Visitors for Pleasure	All classes	Visitors for Pleasure	All classes	Visitors for Pleasure	All classes	Visitors for Pleasure	All classes	Visitors for Pleasure	All classes	Visitors for Pleasure ³
All countries	17,574	13,418	18,920	14,618	20,911	16,441	21,566	16,918	22,119	17,155	22,641	17,612	24,843	19,110
Japan	3,359	2,845	3,422	2,927	3,963	3,480	3,632	3,185	3,974	3,524	4,463	4,002	4,521	4,006
United Kingdom	2,490	1,990	2,681	2,208	2,998	2,494	3,178	2,656	3,116	2,550	3,023	2,436	3,376	2,725
Germany ¹	1,214	981	1,437	1,211	1,713	1,477	1,894	1,651	1,709	1,445	1,836	1,551	2,035	1,701
Mexico	1,301	1,020	1,406	1,098	1,539	1,193	1,575	1,214	1,659	1,276	1,178	861	1,299	916
France	780	590	836	654	869	685	902	719	907	718	975	778	1,083	860
Brazil	377	286	490	371	489	366	552	432	622	492	829	689	883	728
Korea	279	148	356	213	400	251	441	290	581	395	673	466	850	585
China ²	363	208	411	234	477	277	566	318	615	383	666	408	722	422
Italy	438	335	518	419	648	544	634	530	614	502	592	478	656	528
Netherlands	334	240	372	281	401	306	438	342	462	355	475	362	527	400
Other	6,646	4,780	6,991	5,002	7,414	5,368	8,701	6,390	7,024	5,515	7,931	5,581	8,891	6,239

¹ Prior to FY 1991, includes East and West Germany.

² Includes People's Republic of China and Taiwan.

³ These figures differ from those published earlier in the INS Statistical Yearbooks due to corrections in the data base.

NOTE: Rankings for countries based on admissions for FY 1996.

Data on nonimmigrants admitted to the United States are based on their arrival as recorded by the collection of Form I-94, Arrival/Departure Record. These data represent each arrival event during the year rather than the actual number of individuals admitted. Nonimmigrants in several classes of admission, especially students and visitors for business, often make multiple entries to the United States in any given year. Additionally, the nonimmigrant data do not include most of the millions of citizens of Canada and Mexico who cross the border for brief periods of time.

Projected Nonimmigrant Flows: FYs 1998-2002

During the 5-year period 1998-2002, nonimmigrant admissions are expected to increase, though it is difficult to predict the magnitude due to the variability of the political, economic, and social factors that affect foreign travel throughout the world and to the United States. Countries in Asia, Latin America, and to a lesser extent Europe experienced economic difficulties to varying degrees beginning in 1997, but recoveries in these economies would spur pleasure and business travel for the 1998-2002 period. The relative strength of the U.S. economy and, consequently, the U.S. dollar will have an impact on the flow of travelers to the United States. Since more than 90 percent of nonimmigrant admissions are tourists, future changes in nonimmigrants admitted to the United States, the third most visited destination of international tourists, will be greatly influenced by factors that affect this group. U.S. economic policy toward free trade (e.g., expanding free trade agreements with countries in addition to Canada and Mexico, and lowering trade tariffs for China) and social policy toward facilitation of travel to this country (e.g., the Visa Waiver Pilot Program) will continue to encourage travel from abroad. Additionally, the expansion of less restrictive travel policies abroad (e.g., from the republics of the former Soviet Union and China) and the continued development of capitalist economies and the spread of technology throughout the world will have a profound impact on international travel. Changes in these economic, social, and political arenas point to expansion of travel throughout the world and to the United States for the period 1998-2002.

As already noted, although millions of nonimmigrants are admitted to the United States each fiscal year, they do not remain in the country. Nonimmigrants are admitted for a temporary period of time and are to depart by the end of that period. Each year, some nonimmigrants adjust to lawful permanent resident status under various provisions of the Immigration and Nationality Act. In recent years, approximately 20 percent of the immigrants admitted in any fiscal year originally entered the United States as nonimmigrants. The vast majority of nonimmigrants, however, depart the United States as required under the terms of their visas.

Emigration

Accurate, detailed, and timely estimates of emigration would contribute to the development and evaluation of U.S. immigration policy, the derivation of accurate national and local population estimates (including estimates of unauthorized immigration), and the measurement of coverage of the decennial censuses. The limited data that are available indicate that emigration is a large and growing component of U.S. population change. However, partly because of inherent methodological difficulties, data on emigration from the United States are not being collected.

The collection of statistics on emigration from the United States was discontinued in 1957; no direct measure of emigration has been available since then. Estimates compiled in this country and statistics collected in other countries indicate that emigration from the United States has increased steadily since the 1950's, exceeding 100,000 per year since 1970. These figures are consistent with U.S. historical experience; between 1900 and 1990, approximately 38 million immigrants were admitted, and an estimated 12 million foreign-born persons emigrated. That is, for every 100 immigrants admitted, approximately 30 returned home, as shown in Table 1-12.

Table 1-12 — Immigration and Emigration by Decade: 1901-1990

Period	Immigrants to the United States (Thousands)	Emigrants from the United States (Thousands)	Net Immigration (Thousands)	Ratio: Emigration/Immigration
Total, 1901-90	37,869	11,882	25,987	0.31
1901-10	8,795	3,008	5,787	0.34
1911-20	5,736	2,157	3,579	0.38
1921-30	4,107	1,685	2,422	0.41
1931-40	528	649	-121	1.23
1941-50	1,035	281	754	0.27
1951-60	2,515	425	2,090	0.17
1961-70	3,322	900	2,422	0.27
1971-80	4,493	1,176	3,317	0.26
1981-90	7,338	1,600	5,738	0.22

Note: Figures on emigration are estimated for the years after 1957.

Source: 1992 *Statistical Yearbook*, Table 1; Warren, Robert and Ellen Percy Kraly, 1985, *The Elusive Exodus: Emigration From the United States*, Population Trends and Public Policy Occasional Paper No. 8, March, Population Reference Bureau; Washington, DC

During the 1995-1997 period, the U.S. Census Bureau used an annual emigration figure of 220,000 foreign-born (and 48,000 native-born) persons for computing national population estimates (see Chapter 2). Statistics on U.S. residents migrating to other countries published by the United Nations and the Economic Commission for Europe show that emigration from the United States is likely to be well above 200,000 foreign-born persons annually, as shown in Table 1-13.

Table 1-13 — Estimated Emigration from the United States to Top 10 Countries of Destination in the 1980's

All countries	241,000
Mexico	55,000
United Kingdom	31,000
Germany	29,000
Canada	20,000
Japan	19,000
Philippines	19,000
Guatemala	13,000
Indonesia	9,000
Australia	8,000
Italy	4,000

Source: 1989 United Nations Demographic Yearbook, Table 28; Economic Commission for Europe, CES/710/Corr

The U.S. Census Bureau has produced the most recent estimates and projections of emigration from the United States. The following information is presented in detail in the Bureau's population projections for the 1999 to 2100 period.¹¹

The Census Bureau produces projections of the U.S. resident population by age, sex, race, Hispanic origin, and nativity. The projections are based on assumptions about future births, deaths, and international migration. Although alternative series are produced, the preferred or middle series is most commonly used. The Census Bureau releases new national population projections periodically.

A major innovation in the current projections of international migration relates to the projection of the emigration of foreign-born residents. Because the Census Bureau projected the foreign-born population separately in the projections, they were able to model foreign-born emigration as a function of the population at risk, in much the same way that they projected mortality. Thus, foreign-born emigration is projected, in all series, as rates by age and sex, rather than as a constant number of emigrants.

For the middle series, the foreign-born emigration *rates* were assumed to remain constant throughout the duration of the projections. That is, trends in emigration are driven mainly by the size of the foreign-born population and secondarily by its composition by age, sex, and country of birth. The standardized rate (standardized by age, sex, and country on the 1990 base population) was set at 12.1 per thousand population.

As shown in Table 1-14, the Census Bureau's assumptions yield an annual emigration trend from 252,000 in 1991 to 278,000 in 1998, the base year for the projections. Approximately 300,000 foreign-born persons are projected to emigrate annually in the 2000-2005 period. In the longer run, emigration is projected to increase steadily with the growth of the foreign-born population, finally reaching a projected annual level of more than 500,000 in the year 2100. The juxtaposition of constant in-migration with increasing emigration throughout the last 70 years of the 21st century yields a decline in the numerical level of annual net migration to the United States, and an even greater decline in the impact of this component relative to overall population size.

¹¹ *Methodology and Assumptions for the Population Projections of the United States: 1999 to 2100.* Population Division Working Paper No. 38, Frederick W. Hollmann, Tammany J. Mulder, and Jeffrey E. Kallan, Population Projections Branch, Population Division, Bureau of the Census, January 2000.

Table 1-14 — Estimates and Projections of Foreign-Born Emigration from the United States:
1991 to 2005

Year	Foreign-born emigration (1000s)
1991	252
1992	254
1993	258
1994	260
1995	263
1996	267
1997	273
1998	278
1999	282
2000	287
2001	293
2002	298
2003	303
2004	308
2005	311

Source: U. S. Census Bureau Internet release, January 13, 2000

Background

In 1994, the INS released detailed estimates of the undocumented immigrant population residing in the United States as of October 1992.¹² Those estimates were useful for a variety of purposes, including planning and policy development at the national and State level, evaluating the effects of proposed legislation, and assessing the fiscal impacts of undocumented immigration.

Over the next 2 years, the INS revised those estimates and updated them to October 1996. The estimates presented here incorporate data on the foreign-born population collected by the Census Bureau, improvements in the methodology recommended by the General Accounting Office (GAO), suggestions provided by outside reviewers, and further analyses of the INS' data sources and estimation procedures. Estimates of the undocumented population were computed for each State of residence and for nearly 100 countries of origin.¹³

Although they have been useful for a number of purposes, the INS' estimates, including those shown in this report, have inherent limitations. They have been restricted to periodic "snapshots" of the total population; the estimated rate of population growth is an average number that does not measure trends; and some of the data series used to make the estimates were projected from earlier periods.

After completing the estimates described in this report, the INS began to develop a new approach that would generate annual estimates of the population and illustrate trends in population growth, using the most dependable annual data series available. The new estimates will be based primarily on information from INS administrative data systems and detailed estimates of the foreign-born population collected each month in the U.S. Census Bureau's monthly Current Population Survey (CPS). Unfortunately, the estimates derived using the revised methodology have not been completed and reviewed. Therefore the estimates presented here are as of October 1996.

Methodology

The estimates presented here were constructed by combining detailed statistics, by year of entry, for each component of change that contributes to the undocumented immigrant population residing in the United States. For most countries of the world, the typical way of entering the undocumented population in the United States is to arrive as a nonimmigrant and stay beyond the specified period of admission. This segment of the population, referred to here as "nonimmigrant overstays," constitutes approximately 40 percent of the undocumented immigrant population residing in the United States. The rest of the population, more widely publicized, enter surreptitiously across land borders, usually between official ports-of-entry. This part of the population, often referred to as having "entered without inspection" (EWI), includes persons from nearly every country, but a large majority of them are from Mexico; most of the rest are natives of Central American countries.

Primary Sets of Data

The figures presented here were constructed from five primary sets of data. Each following data set was compiled separately for 99 countries and each continent of origin.

¹² Warren, Robert, 1994, *Estimates of the Unauthorized Immigrant Population Residing in the United States, by Country of Origin and State of Residence: October 1992*, Unpublished paper, U. S. Immigration and Naturalization Service.

¹³ Warren, Robert, 1997, *Estimates of the Undocumented Population Residing in the United States: October 1996*, Unpublished paper presented at the Joint Statistical Meetings, Anaheim, CA.

- **Entered before 1982**—Estimates (as of October 1988) of the undocumented immigrant population who established residence in the United States before 1982 and did not legalize under IRCA. The assumption used to estimate this part of the population is based on estimates developed by the Census Bureau using data from the June 1988 CPS.
- **Net overstays**—Estimates for 1982-1996 of the net number of nonimmigrant overstays, for 99 countries of origin, derived from INS databases. Estimates were derived by using the following methods:
 - Matching INS I-94 arrival/departure records.
 - Adjusting for the incomplete collection of departure forms.
 - Subtracting the number of nonimmigrant overstays who subsequently either departed or adjusted to legal resident status.
- **Net EWIs**—Estimates of the number from each country who EWI and established residence here between 1982 and 1996. A very large majority of all EWIs are from Mexico. Average annual estimates of Mexican EWIs were derived by using the following methods:
 - Adjusting the CPS count of the Mexican-born population for underenumeration.
 - Subtracting the estimated legally resident population counted in the CPS.
 - Subtracting the estimated number of net overstays.
- **Mortality**—Estimates of the annual number of deaths to the resident undocumented immigrant population. The estimates were derived using an annual crude death rate of 3.9 per 1,000, which was computed using a modified age distribution of IRCA applicants and age-specific death rates of the foreign-born population.
- **Emigration**—Estimates of the number of undocumented immigrants who resided here at the beginning of a period (either October 1988 or October 1992), and who emigrated from the United States in the following 4-year period. Estimates of emigration are based on statistics published by the Census Bureau in Technical Paper No. 9.

Construction of the Estimates

Estimates of the undocumented immigrant population were derived for October 1988, October 1992, and October 1996 for 99 individual countries and for each continent of origin. The calculations were carried out separately for overstays and EWIs.

Estimates by State of Residence

In the earlier estimates for October 1992, the State distribution of the undocumented population was based on the U.S. residence pattern of each country's applicants for legalization under IRCA; the results were totaled to obtain State totals. This equation assumed that, for each country of origin, undocumented immigrants who resided in the United States in October 1992 had the same U.S. residence pattern as IRCA applicants from that country. The revised and updated estimates presented here incorporate the same assumption for the October 1988 undocumented population. However, it was necessary to develop new methods of deriving State estimates for October 1992 and 1996 that would reflect more recent patterns of geographic settlement.

As noted, the estimates of the undocumented population were constructed separately for overstays and EWIs. This separation permitted the distribution of the overstay and EWI populations to States using data most appropriate for the type of population. For overstays, the cohorts that arrived in the 1988-1992 and

1992-1996 periods were distributed to State of residence based on annual estimates of overstays by State of destination for 1986-1989. For EWIs who entered during these periods, the totals were distributed to State of residence using INS statistics for the early 1990's on the destination of the beneficiaries of aliens who legalized under IRCA.

Limitations

Estimating the size of a hidden population is inherently difficult. Overall, the figures presented here generally reflect the size, origin, and geographic distribution of the undocumented immigrant population residing in the United States during the mid-1990's. The estimates probably reduce the range of error for the total population to a few hundred thousand rather than a few million, which was the error range during the late 1970's and into the 1980's. The estimates for most countries should be fairly precise because they were constructed primarily from data on nonimmigrant arrivals, departures, and adjustments of status that have relatively small margins of error.

Although the estimates are based on the most reliable information available, they clearly have limitations. For example, the estimates make no allowance for students or other long-term nonimmigrants, and the estimates for some countries could be understated because of special circumstances (for example, Dominicans entering illegally via Puerto Rico, ships arriving undetected from China, etc.).

The figures for some countries overstate the actual undocumented population. In general, the net nonimmigrant overstay figures are more likely to be overestimates than underestimates because the collection of departure forms for long-term overstays who depart probably is less complete than for those who depart within the first year.

The estimates include a large number of persons who have not been admitted for lawful permanent residence, but are permitted to remain in the United States pending the determination of their status or until conditions improve in their country of origin. This category includes many of the undocumented immigrants from El Salvador, aliens from other countries in a status referred to as "deferred enforced departure," and IRCA applicants whose cases have not been finally resolved.

In a few cases, the estimates appear to be too high, but there is no basis for making downward adjustments. For example, the estimates for the Bahamas appear to be much too large because they imply that a relatively large proportion of the population is residing illegally in the United States, whereas large-scale undocumented immigration from the Bahamas has not been observed previously. In addition, undocumented immigration from Dominica is considerably higher than would be expected based on the number of IRCA applicants from Dominica. This overstatement could have occurred because of processing problems with I-94 arrival/departure documents, with the result that overstays from Dominica are overestimated and those from the Dominican Republic underestimated.

The number of EWIs is the most difficult component to estimate with precision, and errors in this component have the largest effect on the estimated undocumented population from Mexico. In particular, the shortage of information about two components (emigration of legally resident immigrants and the undercount in the CPS) makes it difficult to derive acceptable residual estimates of the number of undocumented immigrants counted in the CPS.

The estimates presented here are based on the most extensive array of figures ever compiled for the purpose; nevertheless, they should be used with caution because of the inherent limitations in the data available for estimating the undocumented immigrant population. This uncertainty was addressed by using alternative assumptions to produce "high" and "low" population estimates for October 1996. In the following discussion of the estimates, the midrange population figures are used for simplicity of presentation.

Results

National Estimates

The total number of undocumented immigrants residing in the United States in October 1996 is estimated to be 5 million (see Table 1-15), with a range of about 4.6 to 5.4 million, depending upon the assumptions used. The estimate for October 1996 is about 1.1 million higher than the revised estimate of 3.9 million for October 1992; this estimate implies that the population grew by approximately 275,000 annually during the 1992-1996 period, about the same as the annual growth of 281,000 estimated for the previous period. The original INS estimates for October 1992 and October 1988, released in 1994, showed average annual growth of 300,000.

The undocumented population grows at varying levels from year to year, but the data available to make these estimates do not permit the derivation of annual figures to measure year-to-year changes. However, the similar levels of growth for the 1988-1992 and 1992-1996 periods, 281,000 and 275,000, respectively, suggest that the overall level of growth has been fairly constant over the past decade. These data also indicate that the rate of growth of the undocumented resident population has declined since 1988.

State of Residence

The estimates for States reflect the well established pattern of geographic concentration of undocumented immigrants in the United States. California was the leading State of residence, with 2 million (40 percent) of the total number of undocumented residents in October 1996. Seven States—California (2 million), Texas (700,000), New York (540,000), Florida (350,000), Illinois (290,000), New Jersey (135,000), and Arizona (115,000)—accounted for 83 percent of the population in October 1996.

The estimated undocumented population of California has grown by an average of about 100,000 annually since the end of the IRCA legalization program in 1988. More than 83 percent of total growth of the undocumented population since 1988 has occurred in the top seven States. With the exception of Massachusetts (6,000), none of the remaining 43 States grew by more than 3,000 undocumented residents annually. In 27 States, the undocumented population grew by an average of 1,000 or less each year.

Country of Origin

Mexico is the leading source country of undocumented immigration to the United States. In October 1996 an estimated 2.7 million undocumented immigrants from Mexico had established residence here, as shown in Table 1-15. Mexican undocumented immigrants constituted about 54 percent of the total undocumented population. The estimated population from Mexico increased by just over 150,000 annually in both the 1988-1992 and 1992-1996 periods.

Table 1-15 — Estimated Illegal Immigrant Population for Top 20 Countries of Origin and Top 20 States of Residence: October 1996

Rank	Country of Origin	Population	Rank	State of Residence	Population
	All Countries	5,000,000		All States	5,000,000
1	Mexico	2,700,000	1	California	2,000,000
2	El Salvador	335,000	2	Texas	700,000
3	Guatemala	165,000	3	New York	540,000
4	Canada	120,000	4	Florida	350,000
5	Haiti	105,000	5	Illinois	290,000
6	Philippines	95,000	6	New Jersey	135,000
7	Honduras	90,000	7	Arizona	115,000
8	Dominican Republic	75,000	8	Massachusetts	85,000
9	Poland	70,000	9	Virginia	55,000
10	Nicaragua	70,000	10	Washington	52,000
11	Bahamas	70,000	11	Colorado	45,000
12	Colombia	65,000	12	Maryland	44,000
13	Ecuador	55,000	13	Michigan	37,000
14	Trinidad & Tobago	50,000	14	Pennsylvania	37,000
15	Jamaica	50,000	15	New Mexico	37,000
16	Pakistan	41,000	16	Oregon	33,000
17	India	33,000	17	Georgia	32,000
18	Ireland	30,000	18	District of Columbia	30,000
19	Peru	30,000	19	Connecticut	29,000
20	Korea	30,000	20	Nevada	24,000
	Other	721,000		Other	330,000

Source: *Statistical Yearbook of the Immigration and Naturalization Service, 1996*, United States Immigration and Naturalization Service, Washington, D.C., 1997, p.198.

The estimated number of Mexican undocumented immigrants who arrived between 1990 and 1996 is based on a comparison of INS administrative data with data on country of birth and year of immigration collected by the Census Bureau in the March 1994, 1995, and 1996 CPSs.¹⁴ Demographic analysis by INS of the CPS data indicates that approximately 230,000 undocumented Mexican immigrants established residence annually between 1990 and 1996. This amount is the net annual addition of undocumented Mexicans who arrived during the period. Note that it does not reflect the average annual growth of the Mexican undocumented population. To compute average annual growth, it is necessary to subtract the number of undocumented Mexicans who lived here in January 1990 and who emigrated, died, or adjusted to legal permanent resident status during the 1990-1996 period. This last step produces the estimate cited above of just over 150,000 annual growth of the Mexican undocumented population since 1988.

In October 1996, 15 countries were each the source of 50,000 or more undocumented immigrants, shown in Table 1-15. The top five countries are geographically close to the United States—Mexico, El Salvador, Guatemala, Canada, and Haiti. Of the top 15 countries, only the Philippines and Poland are outside the Western Hemisphere. The estimated undocumented population from Poland has declined by more than 25 percent (from 95,000 to 70,000) since 1988, possibly reflecting changed conditions in that country over the last several years.

¹⁴ The Census Bureau does not collect information on immigration status in the CPS or in the census.

Although undocumented immigrants come to the United States from all countries of the world, relatively few countries add substantially to the population. The annual growth of the undocumented population can be grouped into four disparate categories: (1) Mexico, with more than half of the annual growth, adds just over 150,000 undocumented residents each year; (2) 6 countries—El Salvador, Guatemala, Canada, Haiti, Honduras, and the Bahamas—each add between 6,000 and 12,000 annually; (3) 13 countries each add about 2,000 to 4,000 annually; and (4) the remaining approximately 200 other countries add a total of about 30,000 undocumented residents each year (see Table 1-15). A large majority of the additions each year, more than 80 percent, are from countries in the Western Hemisphere.

Summary

Approximately 5 million undocumented immigrants were residing in the United States in October 1996, with a range of about 4.6 to 5.4 million. The population was estimated to be growing by about 275,000 each year, which is about 25,000 lower than the annual level of growth estimated by the INS in 1994.¹⁵

California is the leading State of residence with 2 million, or 40 percent, of the undocumented population. The seven States with the largest estimated numbers of undocumented immigrants—California (2 million), Texas (700,000), New York (540,000), Florida (350,000), Illinois (290,000), New Jersey (135,000), and Arizona (115,000)—accounted for 83 percent of the total population in October 1996.

The 5 million undocumented immigrants made up about 1.9 percent of the total U.S. population, with the highest percentages in California, the District of Columbia, and Texas. In the majority of States, undocumented residents comprise less than 1 percent of the population.

Mexico is the leading country of origin with 2.7 million, or 54 percent, of the population. The Mexican undocumented population has grown at an average annual level of just over 150,000 since 1988. The 15 countries with 50,000 or more undocumented immigrants in 1996 accounted for 82 percent of the total population. The large majority, over 80 percent, of all undocumented immigrants are from countries in the Western Hemisphere.

About 2.1 million, or 41 percent, of the total undocumented population in 1996 are nonimmigrant overstays. That is, they entered legally on a temporary basis and failed to depart. The proportion of the undocumented population who are overstays varies considerably by country of origin. About 16 percent of the Mexican undocumented population are nonimmigrant overstays, compared with 26 percent of those from Central America and 91 percent from all other countries.

¹⁵ Compare the Census Bureau estimate (refer to p. 53 in Chapter 2) of 225,000 per year. The two sets of estimates are prepared using different approaches and pertain to slightly different time periods.

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International Migration and Population Change in the United States

Abstract

In 1990 there were 20 million foreign-born people residing in the United States; by 1997, the foreign-born population had increased by 30 percent to total 26 million. These new arrivals have had an uneven effect on State population trends; about three-fourths of those who arrived during the 1990's settled in just six States. During the next 5 years, migration from abroad is projected to account for approximately 4.1 million new U.S. residents, or 44 percent of national population growth.

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Introduction

International migration has been a key element of population change in the United States. Different analytical methods and data sources provide varying images, but all evidence to date indicates that the size, composition, and distribution of both the nation's and the States' populations have been vitally affected by the dual processes of international and domestic migration. In the next decade, changes in the determinants and consequences of these processes will involve many factors, including policy decisions; however, current patterns are likely to persist.¹

The Census of 1990: A Count of the Foreign-Born Population

The 1990 census counted 19.8 million foreign-born people in the United States, indicating that 8 percent of the nation's population were born abroad to non-citizen parents.² The majority of these international migrants (73 percent) were living in one of six States:

- California (6.5 million)
- New York (2.9 million)
- Florida (1.7 million)
- Texas (1.5 million)
- New Jersey (967,000)
- Illinois (952,000)

Six other States housed another 10 percent of the foreign-born:

- Massachusetts (574,000)
- Pennsylvania (369,000)
- Michigan (355,000)
- Washington (322,000)
- Maryland (313,000)
- Virginia (312,000)

More than 4 of every 5, or about 85 percent, of the foreign-born population resided in one of the above 12 States. See Table 2-1.

In five States, the foreign-born population constituted more than 10 percent of the total population:

- California (21.7 percent)
- New York (15.9 percent)
- Hawaii (14.7 percent)
- Florida (12.9 percent)
- New Jersey (12.5 percent)

¹ Statistics for this report were derived from: 1) 1990 Census of Population; 2) estimates of the resident population of states, July 1, 1990, to July 1, 1997; 3) projections of the State populations for 1998 to 2002. Full citations are listed at the end of the text. For more information about obtaining these sources, contact the U. S. Census Bureau's Statistical Information Office at (202) 457-2422 or e-mail pop@census.gov.

² Foreign-born people who are not legal permanent residents, such as executives of multinational corporations, refugees, students, and undocumented aliens, are included.

International Migration Between 1990 and 1995

A total of 4 million migrants entered and remained in the United States between 1990 and 1995, or an average of 744,000 per year (all migration numbers in this report represent the net totals, unless otherwise noted). The arrivals were not evenly distributed throughout the nation, but rather tended to concentrate in areas where the foreign-born population already resided. One-third of all international migrants during this time period (1.2 million) went to California, which has by far the highest number of foreign-born residents. Another 16 percent of all international migrants (584,000) went to New York, which had the second highest foreign-born population. The other States that had large foreign-born populations, namely Texas, Florida, Illinois, and New Jersey, also had high numbers of international migrants during this time period (each received 185,000 or more). See Table 2-1.

International Migration Between 1995 and 1997

There were 1.8 million migrants added to the population of the United States from July 1, 1995 to July 1, 1997, or an average of 890,000 per year. This figure is 20 percent higher than the average from 1990 to 1995. The nation's total population grew by 1.9 percent during this 2-year span, or by 5 million people; international migrants constituted 36 percent of this population change. See Table 2-2.

The States that received the highest numbers of international migrants were the same as earlier in the decade. California received 26.9 percent of the international migrants (481,000), New York received 14.4 percent (257,000), and another 30.5 percent was split between Texas (185,000), Florida (174,000), New Jersey (103,000), and Illinois (83,000).

Two smaller States also received a large number of international migrants relative to their population size. The District of Columbia, with 552,000 residents in 1995, received 7,000 international migrants from 1995 to 1997. A similar situation took place in Nevada; the State was home to 1.5 million people in 1995, and 15,000 international migrants arrived from 1995 to 1997.

International Migration as a Component of State Population Change

A degree of complexity is added when sub-national population change is examined, because people move between States.³ There are two kinds of migration: international (from abroad) and domestic.⁴ Between 1995 and 1997, every State experienced a positive flow of international migrants; however, the pattern across individual States was not uniform. California, Florida, Illinois, New Jersey, New York, and Texas received the largest share of international migrants. Between 1995 and 1997, 72 percent of the migrants from abroad settled in these six States.

³ For a discussion of the methodology used to allocate the international migration flow to States and internal migration flows between States, see the U. S. Bureau of the Census (1992).

⁴ Note that the domestic migration estimates sum to zero at the national level.

**Table 2-1 — State Population Counts and Estimates, Population Change, and Net Migration:
1990 to 1995 (in Thousands)**

State	Population Count April 1, 1990			Population Estimate July 1, 1995	Population Change 1990 - 1995		Net Migration 1990 - 1995	
	Total	Foreign Born	Percent Foreign Born		Number	Percent	Domestic	Inter- national ¹
United States	248,765	19,767	7.9	262,765	14,000	5.6	0	3,719
Alabama	4,040	44	1.1	4,270	230	5.7	81	7
Alaska	550	25	4.5	602	52	9.4	(7)	4
Arizona	3,665	278	7.6	4,307	642	17.5	312	55
Arkansas	2,351	25	1.1	2,480	129	5.5	78	5
California	29,786	6,459	21.7	31,472	1,686	5.7	(1,569)	1,209
Colorado	3,294	142	4.3	3,738	444	13.5	247	29
Connecticut	3,287	279	8.5	3,262	(25)	(0.8)	(152)	33
Delaware	666	22	3.3	719	53	7.9	19	4
District of Columbia	607	59	9.7	552	(54)	(9.0)	(87)	16
Florida	12,938	1,663	12.9	14,180	1,242	9.6	613	282
Georgia	6,478	173	2.7	7,189	710	11.0	346	48
Hawaii	1,108	163	14.7	1,183	75	6.8	(38)	30
Idaho	1,007	29	2.9	1,164	157	15.6	98	8
Illinois	11,431	952	8.3	11,866	435	3.8	(296)	190
Indiana	5,544	94	1.7	5,787	242	4.4	65	12
Iowa	2,777	43	1.6	2,841	64	2.3	2	9
Kansas	2,478	63	2.5	2,575	97	3.9	(11)	12
Kentucky	3,687	34	0.9	3,856	169	4.6	63	7
Louisiana	4,222	87	2.1	4,328	106	2.5	(59)	14
Maine	1,228	36	3.0	1,233	5	0.4	(20)	2
Maryland	4,781	313	6.6	5,023	243	5.1	(18)	57
Massachusetts	6,016	574	9.5	6,058	41	0.7	(190)	77
Michigan	9,295	355	3.8	9,663	368	4.0	(130)	42
Minnesota	4,376	113	2.6	4,605	229	5.2	50	25
Mississippi	2,575	20	0.8	2,690	115	4.5	30	3
Missouri	5,117	84	1.6	5,337	220	4.3	59	17
Montana	799	14	1.7	868	69	8.7	47	2
Nebraska	1,578	28	1.8	1,635	57	3.6	6	7
Nevada	1,202	105	8.7	1,528	327	27.2	230	21
New Hampshire	1,109	41	3.7	1,146	37	3.3	(2)	3
New Jersey	7,748	967	12.5	7,962	215	2.8	(214)	185
New Mexico	1,515	81	5.3	1,684	169	11.1	62	19
New York	17,991	2,852	15.9	18,145	154	0.9	(1,024)	584
North Carolina	6,632	115	1.7	7,186	553	8.3	275	26
North Dakota	639	9	1.5	641	3	0.4	(15)	2
Ohio	10,847	260	2.4	11,138	291	2.7	(51)	25
Oklahoma	3,146	65	2.1	3,271	126	4.0	30	13
Oregon	2,842	139	4.9	3,141	299	10.5	178	32
Pennsylvania	11,883	369	3.1	12,040	157	1.3	(82)	55
Rhode Island	1,003	95	9.5	989	(14)	(1.4)	(46)	8

**Table 2-1 — State Population Counts and Estimates, Population Change, and Net Migration:
1990 to 1995 (in Thousands) (Continued)**

State	Population Count April 1, 1990			Population Estimate July 1, 1995	Population Change 1990 - 1995		Net Migration 1990 - 1995	
	Total	Foreign Born	Percent Foreign Born		Number	Percent	Domestic	Inter- national ¹
South Carolina	3,486	50	1.4	3,699	213	6.1	48	8
South Dakota	696	8	1.1	735	39	5.5	14	2
Tennessee	4,877	59	1.2	5,235	358	7.3	216	14
Texas	16,986	1,524	9.0	18,694	1,708	10.1	345	354
Utah	1,723	59	3.4	1,991	269	15.6	72	13
Vermont	563	18	3.1	582	20	3.5	3	2
Virginia	6,189	312	5.0	6,602	412	6.7	55	67
Washington	4,867	322	6.6	5,433	566	11.6	263	64
West Virginia	1,793	16	0.9	1,822	28	1.6	21	2
Wisconsin	4,892	122	2.5	5,137	245	5.0	75	13
Wyoming	454	8	1.7	478	25	5.5	7	1

Source: U.S. Census Bureau. *State Population Estimates and Demographic Components of Population Change, Annual Time Series*, July 1, 1990 to July 1, 1998 (includes April, 1990 census population counts) [ST-98-7].

Note: Negative numbers are given in parentheses.

¹Federal United States. citizen and Puerto Rican movement are excluded. Emigration is subtracted indirectly, as these estimates reflect the U.S. resident population.

**Table 2-2 — State Population Estimates, Population Change, and Net Migration:
1995 to 1997 (in Thousands)**

State	Population Estimate July 1, 1995	Population Estimate July 1, 1996	Population Estimate July 1, 1997	Population Change 1995 - 1997		Net Migration 1995 - 1997	
				Number	Percent	Domestic	Inter-national ¹
United States	262,765	265,190	267,744	4,979	1.9	0	1,788
Alabama	4,270	4,291	4,322	52	1.2	20	3
Alaska	602	605	610	8	1.3	(10)	2
Arizona	4,307	4,432	4,553	246	5.7	142	26
Arkansas	2,480	2,505	2,523	43	1.7	22	3
California	31,472	31,762	32,182	710	2.3	(407)	481
Colorado	3,738	3,814	3,892	154	4.1	74	18
Connecticut	3,262	3,264	3,267	5	0.2	(42)	19
Delaware	719	727	735	16	2.3	6	2
District of Columbia	552	540	530	(23)	(4.1)	(34)	7
Florida	14,180	14,425	14,677	497	3.5	246	174
Georgia	7,189	7,334	7,490	301	4.2	163	26
Hawaii	1,183	1,187	1,192	9	0.8	(26)	13
Idaho	1,164	1,186	1,209	45	3.9	21	4
Illinois	11,866	11,934	11,989	123	1.0	(133)	87
Indiana	5,787	5,827	5,865	78	1.4	11	8
Iowa	2,841	2,849	2,854	14	0.5	(9)	6
Kansas	2,575	2,585	2,601	27	1.0	(9)	7
Kentucky	3,856	3,883	3,910	54	1.4	18	4
Louisiana	4,328	4,340	4,354	25	0.6	(33)	6
Maine	1,233	1,238	1,242	9	0.7	4	1
Maryland	5,023	5,058	5,095	71	1.4	(25)	37
Massachusetts	6,058	6,083	6,114	57	0.9	(25)	33
Michigan	9,663	9,734	9,780	117	1.2	(26)	29
Minnesota	4,605	4,648	4,687	82	1.8	17	13
Mississippi	2,690	2,710	2,732	41	1.5	11	2
Missouri	5,337	5,369	5,408	71	1.3	31	9
Montana	868	877	879	10	1.2	3	1
Nebraska	1,635	1,648	1,657	22	1.3	2	4
Nevada	1,528	1,600	1,679	150	9.8	108	15
New Hampshire	1,146	1,160	1,172	26	2.3	14	2
New Jersey	7,962	8,008	8,058	96	1.2	(85)	103
New Mexico	1,684	1,708	1,724	40	2.4	1	10
New York	18,145	18,142	18,146	1	0.0	(451)	257
North Carolina	7,186	7,309	7,431	245	3.4	149	14
North Dakota	641	643	641	(0)	(0.1)	(6)	1
Ohio	11,138	11,170	11,193	55	0.5	(51)	15
Oklahoma	3,271	3,296	3,322	50	1.5	15	8
Oregon	3,141	3,195	3,243	102	3.3	57	16
Pennsylvania	12,040	12,034	12,011	(28)	(0.2)	(93)	28
Rhode Island	989	988	987	(2)	(0.2)	(12)	4
South Carolina	3,699	3,737	3,788	89	2.4	39	5

**Table 2-2 — State Population Estimates, Population Change, and Net Migration:
1995 to 1997 (in Thousands) (Continued)**

State	Population Estimate July 1, 1995	Population Estimate July 1, 1996	Population Estimate July 1, 1997	Population Change 1995 - 1997		Net Migration 1995 - 1997	
				Number	Percent	Domestic	Inter-national ¹
South Dakota	735	737	738	3	0.4	(5)	1
Tennessee	5,235	5,307	5,372	137	2.6	85	8
Texas	18,694	19,033	19,386	691	3.7	119	185
Utah	1,991	2,022	2,065	74	3.7	17	8
Vermont	582	586	589	6	1.1	2	1
Virginia	6,602	6,667	6,737	136	2.1	15	39
Washington	5,433	5,519	5,614	181	3.3	74	35
West Virginia	1,822	1,820	1,815	(6)	(0.4)	(7)	1
Wisconsin	5,137	5,174	5,201	64	1.3	10	5
Wyoming	478	480	480	2	0.4	(4)	1

Source: U.S. Census Bureau. State Population Estimates and Demographic Components of Population Change, Annual Time Series, July 1, 1990 to July 1, 1998 [ST-98-7].

Note: Negative numbers are given in parentheses.

¹Federal U.S. citizen and Puerto Rican movement are excluded. Emigration is subtracted indirectly, as these estimates reflect the U. S. resident population.

Table 2-3 shows that between July 1, 1990 and July 1, 1997, four of the six States gaining the largest shares of foreign migrants also sustained notable losses of domestic migrants. For example, although California had a gain of 1.7 million international migrants, it lost almost 2.0 million domestic migrants. The other three States with high international migration gain and domestic migration losses (New York, Illinois and New Jersey) were similar; they lost more population to domestic migration than they gained in international migration. For example, New York gained 826,000 international migrants, but lost 1.5 million residents to domestic migration. Between 1990 and 1997, Illinois lost more people to domestic migration than it gained from international migration. New Jersey sustained a loss of domestic migrants that nearly equaled the gain of foreign migrants to the State.

Although it is unclear what proportion of these domestic out-migrants are international migrants moving on to other States, it is clear where they are moving. Domestic migrants are heading for States in the South and West; Florida, Georgia, Texas, and Tennessee each gained between 200,000 and 700,000 domestic migrants, while Washington, Colorado, and Nevada each gained between 200,000 and 300,000 domestic migrants.

Two of the six States with high international migration gain had positive domestic migration as well. Florida's population increased by around 1.7 million people from 1990 to 1997, and domestic migration was the most important factor in that change. Births outnumbered deaths by only 324,000, but 859,000 people were added due to domestic migration (compared with 454,000 due to international migration). Population growth in Texas of 2.3 million people was due to natural increase (1.3 million) and domestic and international migration (500,000 each). See Table 2-3.

Between 1990 and 1997, about one-fourth of the nation's growth (23.9 percent) occurred in Florida and Texas. New York received more migrants from abroad than Texas, but domestic migration losses for New York allowed Texas to replace it as the second most populous State, behind California.

**Table 2-3 — Components of Population Change for the Six Major International Migration Destination States:
July 1, 1990, to July 1, 1997 (in Thousands)**

State	Population Change	Births	Deaths	Domestic Migration	Net International Migration	Residual Change ¹
California	2,257	4,030	1,536	(1,975)	1,687	51
Florida	1,659	1,345	1,021	859	454	22
Illinois	543	1,322	737	(429)	275	112
New Jersey	301	823	507	(299)	283	0
New York	144	1,953	1,169	(1,475)	826	9
Texas	2,341	2,267	936	464	538	8

Note: Negative numbers are given in parentheses.

¹Subnational estimates are constrained to sum to an independently derived estimate of the national population. The residual is the difference between an area's population as estimated by the sub-national population estimation procedure before and after imposing this constraint. In this table, federal U.S. citizen and Puerto Rican movement have been included in "residual change."

Population Projections

International Migration Between 1998 and 2002

The population of the United States is expected to reach 279 million by the year 2002. The change since 1998 from all components will be about 9.2 million people. The contribution to population growth of migration from abroad will be about 4.1 million, or roughly 1.5 percent of the 1998 population. International migration will count for around 44 percent of total population change in the United States. See Table 2-4 (and the Population Projection Methodology section for a discussion of how these projections were derived).

Through the first few years of the 21st century, the same six States are expected to continue to be the primary destinations for migrants from abroad. California, Florida, Illinois, New Jersey, New York, and Florida will probably receive about 72 percent of the foreign migrant population. California alone will probably accommodate more than one-third of the new additions (1.5 million). However, migration from abroad is not expected to match the outward movement of domestic migrants (-1.9 million) from California during this same period.

Methodology

Methodology for Decennial Censuses

Every 10 years the Census Bureau conducts a census of the U.S. population, collecting information about people residing in each State, the Commonwealth of Puerto Rico, and outlying areas. Census questionnaires are sent to every housing unit. Residents of housing units are counted and included in the total population count, along with residents of group quarters, such as college dormitories, prisons, and nursing homes. The military population is counted either in on-base or off-base housing.⁵

⁵ In 1990, certain segments of the overseas population (U. S. Armed Forces personnel, civilian U. S. Federal employees, and dependents of both groups) were allocated to their home States and included in the populations of those States for apportionment purposes only. For a brief description of the apportionment process, see "Population Trends and Congressional Apportionment." 1990 Census Profile. March 1991.

The numbers appearing in the first column of Table 2-1 reflect the resident population of the United States from the 1990 census.⁶ People from foreign countries and citizens from U.S. territories, including the Commonwealth of Puerto Rico, were counted as members of the U.S. resident population if they lived in the 50 States or the District of Columbia on April 1, 1990.

Foreign-born status is determined from the answers to two census questions. The first question asks, "In what U.S. State or foreign country was this person born?"⁷ If the person was born abroad, then the next question is used to determine whether or not they will be classified as foreign born. The next question asks, "Is this person a citizen of the United States?" If a person indicates "Yes, U.S. citizen by naturalization," or "No, not a citizen of the United States" then they are classified as foreign-born. The second question is necessary since not all people born abroad are included in the foreign-born population. For example, a child born in Germany of U.S. parents or a child born in Puerto Rico is a U.S. citizen at birth and excluded from the foreign-born category. The 1990 count of the foreign-born population in Table 2-1 is the sum of people who resided in the 50 States and the District of Columbia on April 1, 1990, and who met the above criteria for foreign-born status.

Table 2-4 — State Population Projections, Projected Change, and Projected Net Migration: 1998 to 2002 (in Thousands)

State	Population Projection July 1, 1998	Population Projection July 1, 2002	Projected Population Change 1998 - 2002		Projected Net Migration 1998 - 2002	
			Number	Percent	Domestic	International ¹
United States	270,002	279,189	9,187	3.4	0	4,056
Alabama	4,374	4,525	152	3.5	105	11
Alaska	634	672	38	6.0	(3)	5
Arizona	4,575	4,990	415	9.1	304	49
Arkansas	2,574	2,683	108	4.2	99	5
California	32,100	33,138	1,038	3.2	(1,887)	1,477
Colorado	4,009	4,304	295	7.3	213	23
Connecticut	3,282	3,292	10	0.3	(110)	50
Delaware	749	783	34	4.5	23	4
District of Columbia	532	522	(10)	(1.9)	(50)	22
Florida	14,812	15,650	837	5.7	597	315
Georgia	7,616	8,108	492	6.5	330	51
Hawaii	1,228	1,289	62	5.0	(10)	31
Idaho	1,276	1,407	131	10.3	113	6
Illinois	11,966	12,136	170	1.4	(302)	167
Indiana	5,954	6,122	168	2.8	68	18
Iowa	2,878	2,919	41	1.4	(3)	13
Kansas	2,628	2,706	78	3.0	14	17
Kentucky	3,943	4,040	97	2.5	52	11
Louisiana	4,391	4,465	73	1.7	(50)	14
Maine	1,252	1,268	16	1.3	(1)	3
Maryland	5,189	5,354	165	3.2	(33)	97
Massachusetts	6,151	6,244	93	1.5	(144)	131
Michigan	9,634	9,716	82	0.9	(188)	50

⁶ These census numbers exclude the U.S. population living in places other than the 50 States and the District of Columbia.

Table 2-4 — State Population Projections, Projected Change, and Projected Net Migration:
1998 to 2002 (in Thousands) (Continued)

State	Population Projection July 1, 1998	Population Projection July 1, 2002	Projected Population Change 1998 - 2002		Projected Net Migration 1998 - 2002	
			Number	Percent	Domestic	International ¹
Minnesota	4,746	4,905	159	3.4	41	31
Mississippi	2,770	2,857	87	3.1	42	4
Missouri	5,457	5,616	159	2.9	86	17
Montana	919	975	56	6.1	50	2
Nebraska	1,679	1,729	50	3.0	21	5
Nevada	1,744	1,970	226	12.9	219	19
New Hampshire	1,197	1,249	52	4.4	31	5
New Jersey	8,091	8,262	171	2.1	(151)	185
New Mexico	1,792	1,925	134	7.5	87	4
New York	18,140	18,168	28	0.2	(1,020)	584
North Carolina	7,554	7,975	421	5.6	353	32
North Dakota	654	669	15	2.2	3	2
Ohio	11,260	11,369	109	1.0	(117)	39
Oklahoma	3,334	3,416	83	2.5	29	15
Oregon	3,299	3,488	189	5.7	144	33
Pennsylvania	12,158	12,238	80	0.7	(65)	60
Rhode Island	994	1,002	8	0.8	(27)	18
South Carolina	3,786	3,929	142	3.8	82	9
South Dakota	759	792	34	4.4	21	1
Tennessee	5,504	5,793	290	5.3	253	16
Texas	19,565	20,670	1,104	5.6	343	200
Utah	2,107	2,297	189	9.0	86	13
Vermont	605	627	22	3.6	14	1
Virginia	6,854	7,133	279	4.1	77	99
Washington	5,693	6,020	326	5.7	172	66
West Virginia	1,836	1,845	9	0.5	12	2
Wisconsin	5,249	5,394	144	2.8	50	22
Wyoming	507	542	35	6.9	26	1

Source: U.S. Bureau of the Census. Population Projections for States, by Age, Sex, Race, and Hispanic Origin: 1995 to 2025. [PPL-47].

Note: Negative numbers are given in parentheses.

¹Federal U.S. citizen and Puerto Rican movement are excluded. Emigration is subtracted indirectly, as these estimates reflect the U.S. resident population.

Population Estimates Methodology

The Census Bureau produces postcensal estimates of the population by employing a “components of change” methodology. The resident population enumerated in the 1990 census (see Table 2-1) forms the base of the postcensal population estimates for the 1990’s. To this census base, for each estimate period, the births that occurred to U.S. resident women have been added, the deaths of U.S. residents subtracted, and the international migration and the movement of U.S. Armed Forces and federal citizens to the United States added. The estimates of international migration are based on administrative records. The

⁷ Respondents indicating they were born outside the United States are not asked if they entered the country “legally.”

INS supplies the Census Bureau with information on legal international migrants. The Office of Refugee Resettlement and the State Department supply the Census Bureau with data on people admitted to the United States as refugees.⁸

Two important types of international migration for which accurate and current data are unavailable are undocumented international migration and emigration (including the permanent emigration of legal residents). Undocumented international migrants are people who either engage in unauthorized movement across the national frontier or overstay a visitor permit or other nonimmigrant visa.⁹ Since 1990, the Census Bureau has added 225,000 people per year to its annual population estimates to account for undocumented population growth.¹⁰ Also, for the 1995-1997 time period, around 268,000 people per year (220,000 foreign-born and 48,000 natives) have been subtracted to cover the emigration of legal residents.¹¹

Many demographers calculate the contribution of migration to population change as a proportion, with net migration in the numerator and the sum of net change ([births minus deaths] plus [in-migration minus out-migration]) in the denominator. For example, to calculate the contribution of international migration between 1990 and 1997, divide 5.5 million ("International" totals from Tables 2-1 and 2-2) by 18.3 million ("Population Change" totals from Tables 2-1 and 2-2), and multiply by 100, to arrive at 30 percent.

Some demographers argue that this approach is flawed. First, the components are not mutually exclusive. Some international migrants die within a year of entering the country, and some newborn babies emigrate within a year of their birth. Second, if international migration is negative, but population change is positive (as it was in the 1930's), assessing the contribution of foreign migration with the traditional method has little meaning, as the numerator is a negative migration number, and the denominator is excess births.

Another approach that can be used to assess the contribution of international migration to population change is to compute a proportion, where international migration is the numerator and births and international migration (the two components that add population) are in the denominator. This approach currently produces a result of about 20 percent per annum at the national level, as each year the population adds about one international migrant for every four births.¹²

The 1990 population includes the international migrants who entered before 1990 and their progeny. Some demographers contend that to measure the effect of international migration on population change, one must consider the fertility of migrants, which would lead to higher estimates since fertility rates of new migrants initially exceed those of residents whose parents were also residents. In sum, various measures produce different results, and it is essential to consider policy context when characterizing the contribution of international migration to population change.

Population Projection Methodology

The Census Bureau developed a series of national and State population projections based on an array of assumptions about the components of change: fertility, life expectancy, and migration. The middle series of these projections is sometimes called the preferred series. Table 2-4 presents data based on the preferred series.¹³

⁸ A more complete discussion of the procedures used to develop postcensal population estimates can be found in several sources listed at the end of this review, including U.S. Bureau of the Census (1995).

⁹ And therefore have no currently valid paperwork associated with their presence.

¹⁰ For a discussion of the basic methodological approach and recent modifications, see U.S. Bureau of the Census (1995); Robinson, J.G. (1994); Passel, J. and K. Woodrow (1987); Woodrow, K. (1992); Woodrow, K. et al. (1987).

¹¹ See U.S. Bureau of the Census (1994b).

¹² See R. Warren (1994), J. Passel (1994).

¹³ See U.S. Bureau of the Census (1996b, 1994a). The population projection data used in this report are found in (1996a).

In the preferred series, it is assumed that migration at the national level will remain constant throughout the projection period at about 820,000 people per year (about 1,043,000 legal international migrants and 222,000 emigrants) and 225,000 undocumented migrants. These numbers reflect the changes in immigration law that took place in 1990 and current knowledge of emigration, undocumented migration, and movement to and from Puerto Rico.

Comparisons of the Native and Foreign-Born Populations in the United States in 1997

International migration has always been an important source of population growth and change in the United States. In recent years, the increased flow of people from abroad has renewed interest in the immigration process and the growth of the foreign-born population.

In these comparisons, data from the March 1997 Current Population Survey (CPS) are used to describe the demographic, social, and economic characteristics of native and foreign-born populations in the United States.¹⁴ Foreign-born naturalized citizens, foreign-born noncitizens, and natives are compared in terms of age, sex, race, Hispanic origin, residence, marital status, educational attainment, labor force participation, poverty, and use of selected public programs. The type, size, and income of households are also noted.¹⁵

The findings suggest that the native and foreign-born populations in the United States are, in many ways, dissimilar. However, their differences range from complex to superficial. Moreover, neither group is a homogeneous entity; many distinctions exist, particularly between naturalized citizens and noncitizens. Quite often, the characteristics of the native population are similar to those of one or more of various foreign-born groups.

Demographic Characteristics

In March 1997, one-third of the 26 million foreign-born people in the United States were naturalized citizens and two-thirds were noncitizens. Hispanics (who may be of any race) accounted for 44 percent of the foreign-born population; Asians and Pacific Islanders accounted for 24 percent. Together, these groups accounted for 68 percent of the foreign-born population but only 9 percent of the native population (about 2 percent of Asians and Pacific Islanders were of Hispanic origin). In 1997, 94.4 percent of the foreign-born population lived in metropolitan areas compared with 78.9 percent of the native population. The median ages of the foreign-born population (37) and the native population (34) did not differ greatly, but their age distributions differed considerably. In the foreign-born population 10 percent were under 18 years of age and 44 percent were age 25 to 44, whereas the corresponding proportions in the native population were 28 percent and 30 percent. The sex ratio (males per 100 females) was 101 for the foreign-born population and 95 for the native population.

Social Characteristics

In 1997, 1 of every 11 households in the United States was headed by a foreign-born person (10.4 million). Forty-four percent of these households were headed by naturalized citizens (4.6 million), and the other 56 percent were headed by noncitizens (5.8 million). Of the 7.7 million married-couple families that included

¹⁴ See U.S. Bureau of the Census (1999).

¹⁵ A few points should be noted regarding the citizenship classification 1) many households contain a mixture of people with differing citizenship statuses; household-level citizenship status is classified by the citizenship status of the householder; 2) one should not use the terms naturalized citizen and noncitizen interchangeably with legal and illegal immigrant. A large proportion of the legally admitted foreign-born population was in a noncitizen status (refugee and/or in the country less than 5 years and therefore not yet eligible for application for citizenship, or in a nonimmigrant status such as student or exchange visitors). Furthermore, some noncitizens who are also legal international migrants may never seek U.S. citizenship; 3) the CPS does not ask questions about the legal status of foreign-born people.

at least one foreign-born spouse, 62 percent had both spouses foreign born, 22 percent had a foreign-born wife and a native husband, and 17 percent had a foreign-born husband and a native wife. The average size of families with a foreign-born householder was 3.8 compared to 3.1 for families with a native householder. The proportion of the population 25 years old and over who had completed high school or more education was lower among the foreign-born population (65 percent) than among the native population (84 percent). However, the proportion with a bachelor's degree or more education was 24 percent for both the foreign-born and native populations.

Economic Characteristics

Labor force participation in 1997 was higher for foreign-born men age 16 and older (78.8 percent) than for native men of this age group (73.6 percent), but the difference is due primarily to differences in age structure rather than differences in age-specific rates. Men aged 25 to 54, who had the highest participation rates, represented 65 percent of foreign-born men 16 years old and older, compared with 58 percent of native men 16 years old and older. For women, the labor force participation rate was lower among the foreign-born population (53 percent) than among the native population (61 percent), but here the difference is primarily due to age-specific participation rates. In the 25 to 54 year age span, the participation rates were 66 percent for foreign-born women and 78 percent for native women. The unemployment rate was higher for the foreign-born population (6.9 percent) than among the native population (5.4 percent). In 1996, median income for households with a foreign-born householder was \$30,000, compared with \$36,100 for households with a native householder. About 21 percent of the foreign-born population were in poverty, compared with 13 percent of the native population. About 39 percent of the foreign-born population under age 18 were in poverty compared with 20 percent of the native population of the same ages. Foreign-born households were more likely to use means-tested programs providing non-cash benefits, such as Medicaid, food stamps, or housing assistance (24 percent) than native households (17 percent).

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The Triennial Comprehensive Report on Immigration

Part II

Education and Social Services Impacts

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Immigration and the U.S. Educational System

Abstract

The Department of Education (DOEd) administers a variety of programs that may serve recent immigrants. Most are based on the students' educational or financial need. Only the Immigrant Education program provides assistance on the basis of immigration status. In 1998, roughly \$2 billion in DOEd funding supported services that benefited students with limited English proficiency, many of whom are immigrants.

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Introduction

Discussions of the impact of immigration on the nation's education system usually focus on growth in school enrollments in communities where immigrants settle, the need to provide special training for schoolchildren whose native language is not English, and the need of some adults for English language instruction. In the decennial census and the Current Population Survey (CPS), the U.S. Census Bureau collects information on all these topics, for both foreign-born and native-born residents. At the time this report is being prepared, detailed information from the CPS on English proficiency has not been published, and the results of the 2000 Census are not yet available. Therefore, the material below summarizes data collected in the 1990 Census that was used in the last Triennial Report to provide background information and context for the program descriptions that follow.

- In 1990, foreign-born persons aged 3 and older accounted for 6.4 percent of total enrollment in “regular” schools at all levels, from preprimary through college. At the elementary and high school level, they numbered 2.2 million or 5.1 percent of the total enrollment of 42.6 million.
- At the college level, 10.9 percent (1.9 million persons) of the total enrollment were foreign born, including a significant number of aliens on student visas.
- Citizen children born in the United States to immigrant families constitute part of the impact of immigration on school enrollment, by increasing the population that must be served and in many cases by adding to the numbers in need of English language instruction, because English is not spoken in their homes.
- In 1990, 6.3 million persons aged 5 to 17 were reported to speak a language other than English at home; three-fourths of them were native-born citizens, and the majority of them were bilingual.
- About 2.4 million persons aged 5 to 17 were described as not speaking English “very well.”
- Among adults aged 18 and over, 25.5 million spoke a language other than English at home, and 11.6 million of them were characterized as not speaking English “very well.” This number might be treated as a measure of the potential demand for English language training for adults, although many will not seek formal language training.

Because the proportion of foreign-born persons in the U.S. population increased during the 1990's from 8 percent to an estimated 10 percent, data collected in 2000 are expected to show increases in all these measures of the impact of immigration on the educational system.

Impact of Immigrant Students on the U.S. Educational System

For more than 200 years, the United States has been highly successful in welcoming new immigrants and providing them with the opportunity to prosper and make a contribution to the growth of this country. Our greatness, in no small share, is the product of the blood, sweat, tears, and wisdom of these immigrants. Today, the challenge of providing new immigrants with the opportunity they seek is greater than ever before. The basic educational requirements for meaningful employment have increased enormously over the last 50 years. Quality employment now requires a sophistication with the English language and a range of technical competencies that were unnecessary just a few decades ago. This challenge is further heightened by the current rate of immigration. Since 1970, the number of foreign-born persons living in the United States has nearly tripled, rising from 9.6 million to 26.3 million in 1997. The magnitude of this latest wave of immigration has had the greatest impact on the educational systems of the six States where 76 percent of new immigrants reside -- California, New York, Texas, Florida, New Jersey, and Illinois.

High rates of immigration create a significant burden, particularly on the Nation's elementary and secondary schools. The cost of providing public education is underwritten by local property tax revenues, and to a lesser extent by State and Federal funds. Recent immigrants frequently earn low wages and, in the short run, contribute less than established residents to the cost of instructing their children. However, a number of Federal programs assist local school districts in meeting this cost. For example, the Immigrant Education program provides assistance to local educational agencies with concentrations of recent immigrant students. For fiscal year (FY) 1996 and again in 1997, the Administration sought to double the appropriation for this program from \$50 million to \$100 million, a request that the Congress accepted for 1997. In 1998, the Administration proposed to again increase funding for this program to \$150 million, which the Congress accepted. Similarly, the Department requested increases in other programs, such as the Title I, Education for the Disadvantaged program, that serve large numbers of disadvantaged students, many of whom are recent immigrants.

The material that follows provides more detailed information on programs that the Department of Education administers that serve significant numbers of immigrant students.

Federally Funded Educational Services for Immigrant Students

The vast majority of educational programs administered by the U.S. Department of Education serve students on the basis of educational or financial need. Many of these programs serve significant numbers of recent immigrant students who are not yet proficient in English and are, consequently, classified as limited English proficient. At the elementary and secondary level, immigrant students are served under the Title I (Education for the Disadvantaged) Grants to Local Educational Agencies program; the Title I Migrant Education program; and the Bilingual Education program. Many older immigrants are served under the Adult Education program and the Vocational Education Basic State Grants program. At the postsecondary level, federally funded student financial assistance is available to certain non-citizens who intend to become citizens or permanent residents. However, of all the programs administered by the Department, only the Immigrant Education program provides assistance on the basis of immigration status.

Elementary and Secondary Education

In the case of elementary and secondary education programs, educational need is typically defined in terms of academic achievement. For example, in 1998 Title I Grants to Local Educational Agencies served an estimated 11.8-12.3 million low-achieving students, from pre-K through grade 12. These students received supplemental instruction to assist them in achieving to the same high standards as all other children. In 1998, an estimated 2 million students who received these services were limited English proficient. While some of these students were born in the United States, many were immigrants.

Another program authorized by the Title I legislation provides grants to State educational agencies for educational services for students who are children of migrant agricultural workers and fishermen. In 1998, an estimated 141,000 of some 564,000 students served were identified as limited in English proficiency. It is likely that many of these students were immigrants.

In 1998, the Bilingual Education program served almost 1.3 million students. This program provides instructional services to assist students in learning English and achieving to high standards in the academic curriculum. Based on 1991-92 data from a descriptive study of services provided to limited-English-proficient students, the Department estimates that about 60 percent of the students served by this program were born outside the United States.

As previously mentioned, the Department also administers the Immigrant Education program, which provides grants for supplementary educational services and costs to local educational agencies enrolling substantial numbers of recent immigrants. Immigrant students may be counted for formula allocations under this program only if they have been enrolled in U.S. schools for less than 3 academic years. Participation is limited to districts with at least 500 such students or where immigrant children represent at least 3 percent of the enrollment. Funds are channeled through State educational agencies, which award subgrants to school districts on the basis of the number of immigrant students enrolled. Beginning in FY 1996, States could also distribute these funds to local educational agencies through competitive grants. In FY 1998, a total of 1,047 local educational agencies, enrolling almost 820,000 eligible immigrant students, qualified for subgrants under this program. California schools enrolled 26 percent of these students, New York schools 16 percent, Florida schools 13 percent, and Texas schools 8 percent. According to State educational agency reports for school year 1995-96, nearly two-thirds of these students were from just 10 countries: Mexico, the Dominican Republic, Vietnam, the Philippines, Russia, El Salvador, Haiti, China, Poland, and Jamaica. Table 3-1 lists the numbers of immigrant students reported by participating States for FY 1998.

Table 3-2 lists elementary and secondary programs, funded by the Department, that serve large numbers of limited English proficient persons. The table also provides data on the number of such persons served and the funds estimated to be used for these services.

Adult and Vocational Education

The FY 1998 appropriation for the Vocational Education State Grants program was more than \$1 billion. Basic State Grants assist States and outlying areas to expand and improve their programs of vocational education and provide equal access in vocational education to "special-needs" populations. The populations assisted by Basic State Grants range from adults who need retraining to adapt to changing technological and labor market conditions, to limited English proficient secondary school students. Grant recipients are required by law to make special efforts to ensure that special-needs students, including limited English proficient students, many of whom are likely to be immigrants, have full access to the complete range of vocational education programs and services.

In FY 1998, the budget for the Department's Adult Education Grants to States program was more than \$345 million, which supported services to more than 4 million persons. Under this program, adult and family literacy and high school equivalency instruction is provided through public schools, community colleges, community-based organizations, private businesses, churches, libraries, and labor unions. The Department estimates that 33 percent of the participants in federally funded adult education classes are limited English proficient. It is likely that the great majority of these participants are immigrants.

Table 3-2 lists adult and vocational programs, funded by the Department, that serve large numbers of limited English proficient persons. The table also provides data on the number of such persons served and the funds estimated to be used for these services.

Higher Education

In FY 1998, 92 percent of the Department's appropriation for postsecondary education was for student financial aid. The student financial assistance programs authorized by Title IV of the Higher Education Act of 1965, as amended, provide student financial aid to needy students who are U.S. citizens or permanent residents.

During the fall of 1996, about 4.1 percent (788,230) of all students enrolled in institutions of postsecondary education were eligible noncitizens. During the same period, about 432,912 eligible noncitizens received assistance under the Department's Title IV student financial assistance programs.

Any student aid applicant who is a permanent resident or has other eligible noncitizen status must provide documentation of that status to receive Title IV student financial aid. Such documentation may be provided automatically through the results of a computer match of information from the financial aid application form and Immigration and Naturalization Service (INS) records. If this process fails to confirm the student's status, the institution of higher education must collect additional documentation from the student to verify the student's immigration status.

U.S. Department Of Education Programs Serving Limited English Proficient (LEP) Persons

The U.S. Department of Education operates a variety of programs designed to meet the special instructional needs of limited English proficient (LEP) children and adults. Roughly \$2 billion in 1998 funds supported services that benefited several million LEP students. These figures do not include student financial aid.

The Bilingual Education program is the primary program within the Department designed to address the needs of LEP children. In addition, the Immigrant Education program provides services for LEP students who are recent immigrants. (See Table 3-1.)

Table 3-1 — Emergency Immigrant Education Program Grants: FY 1998

State	Number of Immigrants	Percent of Immigrants	Grant Award
Alabama	1,692	0.21%	\$309,637
Arizona	25,428	3.10%	\$4,653,343
California	212,976	25.99%	\$38,974,766
Colorado	7,625	0.93%	\$1,395,381
Connecticut	4,264	0.52%	\$780,315
District of Columbia	2,501	0.31%	\$457,685
Florida	105,674	12.89%	\$19,338,421
Georgia	11,114	1.36%	\$2,033,870
Hawaii	2,235	0.27%	\$409,007
Idaho	2,782	0.34%	\$509,108
Illinois	58,904	7.19%	\$10,779,476
Iowa	3,432	0.42%	\$628,059
Kansas	5,115	0.62%	\$936,049
Kentucky	1,621	0.20%	\$296,644
Louisiana	2,353	0.29%	\$430,601
Maine	488	0.06%	\$89,304
Maryland	8,490	1.04%	\$1,553,676
Massachusetts	17,876	2.18%	\$3,271,321
Michigan	8,084	0.99%	\$1,479,378

Table 3-1 — Emergency Immigrant Education Program Grants: FY 1998 (Continued)

State	Number of immigrants	Percent of Immigrants	Grant Award
Minnesota	5,068	0.62%	\$927,448
Missouri	2,951	0.36%	\$540,035
Montana	207	0.03%	\$37,881
Nebraska	2,710	0.33%	\$495,932
Nevada	5,742	0.70%	\$1,050,790
New Jersey	28,306	3.45%	\$5,180,019
New Mexico	7,946	0.97%	\$1,454,124
New York	131,177	16.01%	\$24,005,488
North Carolina	5,986	0.73%	\$1,095,442
North Dakota	487	0.06%	\$89,121
Ohio	2,352	0.29%	\$430,418
Oklahoma	2,139	0.26%	\$391,439
Oregon	6,347	0.77%	\$1,161,506
Pennsylvania	4,427	0.54%	\$810,144
Rhode Island	8,436	1.03%	\$1,543,794
Tennessee	2,834	0.35%	\$518,624
Texas	65,061	7.94%	\$11,906,211
Utah	11,729	1.43%	\$2,146,416
Vermont	211	0.03%	\$38,613
Virginia	11,886	1.45%	\$2,175,147
Washington	17,153	2.09%	\$3,139,012
Wisconsin	2,901	0.35%	\$530,885
Territories	12,505	1.53%	\$2,288,426
Total	819,523	100.00%	\$149,973,318

Note: Unlisted States did not participate in the grant program in FY 1998.

Other programs also serve significant numbers of LEP students. Table 3-2 below lists the major programs that served LEP students in 1998, the estimated number of such persons, and the estimated amount of funding used to serve them. In some cases LEP students are served by more than one program.

Table 3-2 — Major Programs That Served LEP Students in FY 1998

	Estimated Number of LEP Students Served	Estimated FY 1998 Funds (\$000)
I. Programs with the primary purpose of serving LEP students		
<u>Bilingual Education</u>	1,270,092	\$199,000
The Bilingual Education program is designed to build local capacity to teach English to LEP students and assist them in meeting the same challenging State educational standards as apply to all other students. Grants help school districts establish programs that will continue once Federal funds are reduced or no longer available. Awards to institutions of higher education increase the pool of trained teachers and strengthen the skills of teachers currently providing instruction to LEP students. The estimates above represent all LEP students served by the Bilingual Education program and are based on data from 1997 grantees.		
<u>Immigrant Education</u>	821,215	\$150,000
This program provides formula grants to States for subgrants to school districts that enroll substantial numbers of recent immigrant students. Virtually all of these students are limited English proficient. The student estimate is the total number of eligible immigrants reported by States in their 1997 applications.		
II. Other programs that devote significant resources to serving LEP students		
<u>Title I Grants to LEAs</u>	2,040,000	\$1,232,700
This program supports supplementary education services provided by local school districts to children who are failing, or most at risk of failing, to meet State academic standards. A significant number of children served have limited proficiency in English. The dollar and child estimates are derived from 1993 program data.		
<u>Title I Migrant Program</u>	141,000	\$76,370
This program provides funds to States for compensatory education services to children of migrant agricultural workers and fishermen. Nearly 75 percent of all the program's participants are Hispanic and a significant number lack English proficiency. Estimates of LEP funding and of the number of LEP children served are derived from program data.		
<u>Individuals with Disabilities Education Act-Grants to States and Preschool Grants</u>	218,000	\$150,000
These programs provide funds to States for the education of children with disabilities. Approximately 3.6 percent of the children served lack proficiency in English; this estimate is based on data provided in the 1994 Elementary and Secondary School Civil Rights Survey and State reported special education data for the 1997-98 school year.		
<u>Vocational Rehabilitation Migrant and Seasonal Farmworkers Program</u>	4,400	\$1,020
The Migratory Workers program makes comprehensive vocational rehabilitation services available to migrant or seasonal farmworkers with vocational disabilities. Emphasis is given to outreach, specialized bilingual rehabilitation counseling, and coordination of vocational rehabilitation services with services from other sources. Most projects supported under this program serve LEP adults.		
<u>Vocational Education Basic State Grants</u>	267,496	\$25,966
This program assists States to expand and improve their programs of vocational education and provide equal access in vocational education to "special-needs" populations. Estimates of the number of LEP adults served are derived from State data collected by the Office of Vocational and Adult Education.		
<u>Adult Education State Programs</u>	1,854,406	\$135,961
This activity provides formula grants to States to assist educationally disadvantaged adults in developing basic literacy skills and achieving certification of high school equivalency. States are required to give special attention to the needs of LEP adults. Estimates of the number of LEP adults served are derived from State data collected by the Office of Vocational and Adult Education		
Total expenditures, all programs		\$1,971,017

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Immigration and Social Services

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Introduction

The impact of immigration on social services in the United States is commonly discussed in fiscal terms: What proportion of the cost of social programs can be attributed to the participation of immigrants in those programs? Most of the Federal social programs that serve immigrants are administered by the Department of Health and Human Services (DHHS), the Social Security Administration (SSA), and the U.S. Department of Agriculture (USDA). They include programs that serve a broad range of U.S. citizens and lawful permanent residents, such as Medicaid, Temporary Assistance for Needy Families (TANF), Supplemental Security Income (SSI), and food stamps; and programs aimed at special populations, such as recently arrived refugees and migrant farmworkers. The program descriptions in this chapter were contributed by the departments responsible for them. Particular emphasis is given to the changes in the program eligibility of non-citizens that were enacted in the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996, commonly known as *welfare reform*.

Many social programs are designed to provide income support for needy persons or to alleviate poverty in other ways. In all but a few instances, programs that provide direct benefits to individuals or households have eligibility criteria that disqualify persons who are not legally present in the United States. Programs that determine eligibility on an individual basis often collect data on the country of birth and/or the immigration status of applicants and are able to report on their participation and the cost of benefits paid to them. Other programs provide a more general range of services and do not maintain records on the immigration status of persons who benefit.

In 1999 the U.S. Census Bureau published a report on the characteristics of the resident foreign-born population as shown in the March 1997 Current Population Survey (CPS).¹ The report includes information on the money income, wages, poverty status, and means-tested program participation of foreign-born individuals and of households headed by foreign-born persons. That information is summarized here to provide a context for the program information that follows. The reference year for the income-related information is 1996, since the questions refer to the most recent calendar year at the time of the survey. The reader should keep in mind that the CPS and the decennial census locate and count some people who are present in the United States without legal authorization, as well as some long-term alien residents such as students and executives of multinational corporations. Because of this, the surveyed population reflects extremes of wealth and poverty to a greater extent than a survey limited to lawful permanent residents would.

This introduction concludes with information on Federally sponsored research that is under way to measure the effects of welfare reform on immigrant use of social programs.

Income and Earnings

Money income² is lower among foreign-born households than among native households.³ In 1996 the median income for foreign-born households was \$30,000 compared with \$36,100 for native households. Among foreign-born households, the median income ranged from \$33,100 when the householder's length of residence in the United States was 20 years or more to \$25,900 for householders whose length of residence was less than 10 years. The average size of foreign-born households in 1997 was 3.32 persons, and these households averaged 1.6 wage earners. Native households had an average size of 2.56 persons with 1.39 wage earners. The lower proportion of earners among members of foreign-born households reflects the higher proportion of household members under age 18 in the foreign-born households.

¹ Schmidley, A. Dianne and Campbell Gibson, U.S. Census Bureau, Current Population Reports, Series P23-195, *Profile of the Foreign-Born Population in the United States: 1997*. U.S. Government Printing Office, Washington, DC, 1999. The detailed tabulations on which this report was based are available from the U.S. Census Bureau as PPL-115.

² The income data does not include the value of non-cash benefits such as food stamps, medicare, medicaid, and other types of non-cash benefits.

³ Households are classified as native or foreign-born according to the nativity of the householder. Nearly one-third of the members of foreign-born households were born in the United States.

Full-time, year-round workers who are foreign-born had median earnings in 1996 of \$25,000 for males and \$20,800 for females, compared to \$33,200 and \$24,100, respectively, for native male and female workers. As with household income, earnings were highest for workers who had resided in the United States for the longest period of time. The median earnings of workers who resided for 20 years or more was \$35,200 for males and \$24,200 for females, compared to \$19,900 for males and \$16,800 for females with less than 10 years in the United States.

Poverty Status

The poverty⁴ rate is higher among the foreign-born population than among the native population. In 1996 the poverty rate was 21.0 percent for the foreign-born population and 12.9 percent for the native population. Despite this contrast, the patterns of poverty within each group by characteristics such as gender, age, and family type are similar. Among the foreign-born population, the poverty rate ranged from 11 percent for those who had lived in the United States for 20 years and over to 29 percent for those who had lived in the United States for less than 10 years.

Poverty rates are high for children living in families with foreign-born householders, regardless of whether the children are foreign-born or native-born. For the children in these families who were foreign-born, the poverty rate in 1996 was 39 percent, and for the children who were native-born, it was 30 percent. Native children accounted for nearly three-fourths of the related children under 18 years old living below the poverty level in families with foreign-born householders. Poverty rates would be lower under an alternative definition of income that includes the value of means-tested non-cash benefits, but the contrast between foreign-born and native-born persons would remain.

Means-Tested Program Participation

The participation rate in means-tested programs⁵ is higher among foreign-born households than among native households. In 1996 (just before the provisions of the PRWORA took effect), 24 percent of households with foreign-born householders participated in one or more means-tested programs providing noncash benefits, compared to 17 percent of native households. For participation in one or more of the means-tested programs providing cash benefits, the corresponding figures were 10.6 percent for foreign-born households and 7.5 percent for native households. (Nearly all of the households receiving cash benefits were also receiving non-cash benefits.) Among foreign-born households, participation rates in 1996 were higher when the householder was a noncitizen (29 percent) than when the householder was a naturalized citizen (18 percent). This finding is important in that PRWORA imposed new restrictions on access to benefits by noncitizens.

Research on the Impact of Welfare Reform on Immigrants

Several efforts are under way to measure the effects of the significant policy changes in immigrant eligibility on families and on Federal programs. Some preliminary evidence is already available. Data from the CPS show that between 1994 and 1997, use of public benefits among noncitizens fell more sharply (35 percent) than among citizens (14 percent). Noncitizens accounted for 23 percent of the overall decline in welfare caseloads that occurred between 1994 and 1997, even though they were only 9 percent of the households receiving welfare in 1994.⁶ Parallel results were found in an analysis of Los Angeles

⁴ The poverty definition used by the Federal government for statistical purposes is based on a set of money income thresholds that vary by family size and composition and do not take into account non-cash benefits or taxes.

⁵ Means-tested programs are those that require the income and/or assets of an individual or family to be below specified thresholds in order to qualify for benefits. These programs provide cash and non-cash assistance to portions of the low-income population. The non-cash programs included here are food stamps, housing assistance, and Medicaid. The cash programs included here are Aid to Families with Dependent Children, General Assistance, and Supplemental Security Income.

⁶ Michael Fix and Jeffrey Passel, Trends in Noncitizens' and Citizens' Use of Public Benefits Following Welfare Reform: 1994-97, The Urban Institute, Washington, DC, March 1999.

County data on Medicaid and TANF applications. Applications in these two programs declined 71 percent among noncitizens although there was no such decline among citizens.

These declines in noncitizen participation occurred prior to full implementation of the PRWORA eligibility changes. It has been suggested that these findings indicate the presence of a “chilling effect” on noncitizen participation independent of the actual implementation of new eligibility restrictions based on immigration status. Much confusion and perhaps erroneous information appears to exist in immigrant communities and among local service providers about who is eligible and for what benefits. Immigrants also have been fearful that individuals who apply for and receive benefits may suffer adverse immigration consequences related to the application by the INS of the “public charge” doctrine. Recent guidance by the INS on “public charge” issues and policies⁷ should help to clarify for immigrant families and benefit providers what are or are not the consequences related to receipt of different benefits.

The findings cited above were part of a Federal Government-financed project by the Urban Institute to examine the impact of PRWORA on immigrants, their families and communities (see the more detailed description below). Additional data and analyses from this and other DHHS-funded studies about the effects of PRWORA on immigrants and DHHS programs will become available in the near future.

The Office of the Assistant Secretary for Planning and Evaluation (DHHS)—together with the Administration for Children and Families (DHHS), the Health Care Financing Administration (DHHS), the Department of Agriculture (Economic Research Service and Food and Nutrition Service), and the Immigration and Naturalization Service—has sponsored a study by the Urban Institute to gather information on the health and economic status of immigrants, their families, and their communities. The study took place in New York City and Los Angeles. It consists of several parts: (1) 1,650 household interviews in each city, with in-depth follow-up interviews of 150 households in each city; (2) interviews with community organizations (both governmental and non-governmental); and (3) analyses of data on immigrants from several existing data sets both at the national level (e.g., the CPS, the National Health Interview Survey, etc.) and using local administrative data for the focal cities. Data collection was completed in the summer of 2000. The study will include a profile of immigrants and their communities that can be compared to citizens. The analysis will identify trends and indicators of well-being for immigrants and communities. A final report is expected in 2001, with some interim analyses available sooner. Earlier findings from this study on the utilization of benefits by citizens and immigrants have already been mentioned. More information about the project and copies of the earlier reports in their entirety can be found at the Urban Institute’s web site (<http://www.urban.org>).

New Immigrant Eligibility Laws that Impact HHS Programs

The Department of Health and Human Services (HHS) administers a wide range of health and social service programs for families and individuals residing within the United States. During the period covered by this report [fiscal years (FYs) 1995-1997] major new welfare reform legislation was passed under the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193, hereinafter referred to as “PRWORA”). Enacted on August 22, 1996, PRWORA substantially changed the laws governing immigrant⁸ eligibility for many HHS-administered services and assistance programs.

The new law makes the rules on immigrant eligibility for major cash, medical, and other safety net assistance programs considerably more complex. For example, a needy immigrant’s eligibility for benefits under major HHS programs -- Temporary Assistance for Needy Families (TANF), Medicaid, and the State

⁷ The INS published in the *Federal Register* a notice of proposed rulemaking (NPRM) on May 26, 1999, clarifying the various issues regarding benefit use and “public charge” determinations. The INS also published in the same *Federal Register* a memo to field personnel implementing immediately the “public charge” policy put forth in the NPRM.

⁸ In this section, the term “immigrant” is used as a synonym for “alien,” not as “immigrant” is defined in the Immigration and Nationality Act, unless the context indicates otherwise.

Children’s Health Insurance Program (SCHIP—which began in FY 1998) -- now depends not only on the type of visa held by the individual (e.g., legal permanent resident, refugee, asylee, parolee, etc.), but also the date by which the immigrant entered the country (before or after PRWORA’s date of enactment), and individual State and/or local policy choices regarding immigrant eligibility for these programs.

Most “qualified aliens”⁹ arriving on or after August 22, 1996 are banned from receiving “Federal means-tested public benefits” during their first 5 years in the United States.¹⁰ On August 26, 1997, HHS published a notice in the Federal Register interpreting the term “Federal means-tested public benefit” and concluding that among HHS programs, Medicaid (except for emergency services) and TANF benefits meet the definition. Subsequently the State Children’s Health Insurance Program (SCHIP) was created by Congress, and it became a third “Federal means-tested benefit” program administered by HHS.

Although there is a mandatory 5-year ban on assistance under TANF, Medicaid, and SCHIP for non-expected immigrants entering after PRWORA enactment, States were required to provide coverage to qualified aliens who were already receiving such assistance as of August 22, 1996. States were required to cover these qualified aliens until January 1, 1997. After that time, States have had the flexibility to determine whether or not to provide TANF, Medicaid, or SSBG assistance to non-expected legal immigrants who meet the criteria of qualified aliens.¹¹

However, as a result of PRWORA, “non-qualified” aliens -- primarily undocumented aliens and non-immigrants (including students and tourists) but also certain lawful immigrants with temporary statuses -- are not eligible for most “Federal public benefits,” and the law requires agencies providing such benefits to implement procedures that verify the citizenship and immigration status of all applicants. Nonprofit entities that provide Federal public benefits are exempt from the verification requirement. On August 4, 1998, HHS published a notice in the Federal Register interpreting the term “Federal public benefit.”¹² The notice listed the 31 HHS programs that deliver Federal public benefits and are required to verify the citizenship and immigration status of applicants in order to avoid providing benefits to non-qualified aliens.

Immigration status-based eligibility is a new requirement for many of these programs. For programs such as the Child Care and Development Fund, the Low Income Home Energy Assistance Program (LIHEAP), SSBG, and the disability programs, program administrators and direct service providers (unless they are nonprofits) must now implement new procedures for verifying citizenship and immigration status in compliance with INS regulations, incurring new administrative costs in the process. HHS is currently reviewing the public comments on this notice.

⁹ “Qualified aliens” include: legal permanent residents; asylees; refugees; aliens paroled into the United States for at least 1 year; aliens whose deportations are being withheld; aliens granted conditional entry (prior to April 1, 1980); battered alien spouses, battered alien children, the alien parents of battered children, and alien children of battered parents who fit certain criteria; and Cuban/Haitian entrants (Section 431 of PRWORA, as amended).

¹⁰ Exceptions to this 5-year ban are made for refugees, asylees, aliens whose deportation is being withheld, Amerasians, Cuban/Haitian entrants, veterans, and members of the military on active duty, their spouses and unmarried dependent children.

¹¹ At this time, Wyoming is the only State that has chosen to make most qualified aliens ineligible for TANF and Medicaid assistance.

¹² The HHS programs which provide “Federal Public Benefits” according to the August 4, 1998 interpretation are: Adoption Assistance, Administration on Developmental Disabilities (ADD) – State Developmental Disabilities, Councils (direct services only), ADD – Special Projects (direct services only), ADD – University Affiliated Programs (clinical disability assessment services only), Adult Programs/Payment to Territories, Agency for Health Care Policy and Research Dissertation Grants, Child Care and Development Fund, Clinical Training Grant for Faculty Development in Alcohol & Drug Abuse, Foster Care, Health Profession Education and Training Assistance, Independent Living Program, Job Opportunities for Low Income Individuals (JOLI), Low Income Home Energy Assistance Program (LIHEAP), Medicare, Medicaid (except assistance for an emergency medical condition), Mental Health Clinical Training Grants, Native Hawaiian Loan Program, Refugee Cash Assistance, Refugee Medical Assistance, Refugee Preventive Health Services Program, Refugee Social Services Formula and Discretionary Program, Refugee Targeted Assistance Formula and Discretionary Program, Refugee Unaccompanied Minors Program, Refugee Voluntary Agency Matching Grant Program, Repatriation Program, Residential Energy Assistance Challenge Option (REACH), Social Services Block Grant (SSBG), State Child Health Insurance Program (SCHIP), and Temporary Assistance for Needy Families (TANF).

There remains, however, a substantial number of HHS programs that do not condition receipt of services on an individual's citizenship or immigration status. Because the chilling effects of recent policy changes may extend beyond the programs directly affected, it is possible that immigrant participation in other HHS programs may also have declined. However, data that would allow determination of the indirect effect of PRWORA on these HHS-administered programs are not ordinarily collected. For example, community health centers provide preventive and primary health care to persons in need of such services. These centers serve medically underserved and disadvantaged populations that often include immigrants. These centers play a significant role in ensuring the health of immigrant communities, as well as maintaining the overall public health. However, because receipt of center services has never been based on an individual's citizenship or immigration status, the centers do not collect information on the immigration status of the people they serve. Similarly, many other HHS programs which do not base eligibility on citizenship or immigration status do not collect such data from participants or recipients.

The budget impact on most HHS programs of the statutory changes has been minimal at the Federal level. Most HHS programs, with the significant exception of Medicaid, are either discretionary programs with fixed appropriations or mandatory programs with "close-ended" appropriations. Therefore in these programs the number of immigrants that are served would have no effect on Federal spending levels, which are fixed. Use of services by fewer or more immigrants generally would have no budget impact. The new laws restricting Medicaid eligibility for most legal immigrants entering the country on or after August 22, 1996, do have the effect of reducing Federal outlays under that program.

Four operational components in HHS provide services and benefits that go to citizens and immigrants: the Administration for Children and Families (ACF), Public Health Service (PHS), Administration on Aging (AoA), and the Health Care Financing Administration (HCFA). Summaries of the major programs administered by these agencies follow. In addition to programs that provide services and benefits, HHS also funds important research and evaluations, some of which address issues related to immigrants and immigration. Key research in these areas funded by the Office of the Assistant Secretary for Planning and Evaluation (ASPE) and the National Institute on Child Health and Human Development (NICHD) is also summarized below.

HHS Research and Evaluation

Office of the Assistant Secretary for Planning and Evaluation (ASPE)

ASPE conducts research in order to gain a better understanding of broad issues related to immigration policy and the well being of immigrant families. Our current research has particular emphasis on obtaining better information about the impact of immigration policies on HHS benefit programs for the disadvantaged. These efforts are particularly important in light of the policy changes brought about by PRWORA, but also because the usefulness of current program administrative data for evaluating these issues is so limited.

ASPE – together with ACF, HCFA, the Department of Agriculture (the Economic Research Service and the Food and Nutrition Service), and the Immigration and Naturalization Service – has sponsored a study by the Urban Institute to gather information on the health and economic status of immigrants. The study took place in New York City and Los Angeles and gathered information on the effects of welfare reform on immigrants and their communities. The study consists of several parts: (1) 1,650 household interviews in each city, with in-depth follow-ups of 150 households in each city; (2) interviews with community organizations (both governmental and non-governmental); and (3) analyses of data on immigrants from several existing data sets both at the national level (e.g., CPS, National Health Interview Survey, etc.) and using local administrative data for the focal cities. Data collection was completed in the summer of 2000. The study will include a profile of immigrants that can be compared to citizens. The analysis will identify trends and indicators of well-being for immigrants and their communities. A final report is expected in 2001, with some interim analyses available sooner. More information about the project and copies of the earlier reports in their entirety can be found at the Urban Institute's web site (<http://www.urban.org/>).

ASPE has also contracted with the Urban Institute to maintain a micro-simulation computer model used to analyze the effects of government tax, transfer, and health programs on individuals, families, households, and on Federal and State budgets. This Transfer Income Model – or TRIM – can model the effects of policy changes in 12 major tax, transfer, and health programs for the entire noninstitutional population of the United States. TRIM provides a source for detailed information on programs and their changes over time and can be used to address a wide range of policy questions, including estimating effects of possible or actual changes in program and policy rules. Since the enactment of PRWORA, ASPE has provided resources to ensure that new parameters are established in TRIM to permit estimates to be made by citizenship and immigration status.

Finally, ASPE has worked with other agencies, both within and outside HHS, to try to improve information on the citizenship and immigration status of individuals under existing, or planned, surveys. For example, we have been working with the National Center for Health Statistics, which is part of the Centers for Disease Control and Prevention of HHS, to test the feasibility of collecting information on citizenship and immigration status as part of the Department's major survey of health status, the National Health Interview Survey (NHIS). We have also worked with the U.S. Census Bureau to ensure that the new Survey of Program Dynamics (SPD) required under PRWORA includes information on the citizenship and immigration status of individuals, similar to information already collected in the Bureau's CPS and Survey of Income and Program Participation (SIPP).

National Institute of Child Health and Human Development (NICHD)

The movement and distribution of populations within and across national boundaries affects population growth rates, the diversity of local and national populations, and the pressure of population growth on local environments. Migration also has important influences on the well-being of individuals and families, as well as that of sending and receiving communities. Despite its importance, of the three components of population growth – fertility, mortality, and migration – research on migration has been the least developed within NICHD.

NICHD undertook to redress this disparity in the early 1990's with a series of strategic investments in data on migrants and program initiatives to stimulate research. The initiatives included: research on Hispanic child health, including the social, behavioral and cultural factors related to such health; research on U.S. immigration in general; and identifying population movement as an NICHD Area of High Program Relevance (FYs 1996-1998) and as a Special Emphasis (FY 1999-). As a result, the number of NICHD-supported investigator-initiated research projects on migration has more than tripled since FY 1993.

Immigration and Immigrants

In the United States, the relatively large flows and wide diversity of immigrants have both short- and long-term impacts on population size, composition, and growth, as well as broad social and economic implications. In fact, immigration will play the dominant role in America's future population growth, through the combined effects of adding new people and maintaining higher fertility levels. By most estimates, the non-Hispanic white population will comprise only 50 percent of the total population by 2050. The number of school-age children will expand rapidly in that time. NICHD-supported research is providing a much richer picture of the health and well-being of immigrant children and families in the United States and is forcing serious reconsideration of conventional wisdom concerning immigrants and immigration.

Children and Families of Immigrants

Immigrant children are the fastest growing segment of the U.S. population. One-fifth of U.S. children aged 18 and under are growing up in immigrant families. However, past research on immigrants has focused mostly on adults. The physical and mental health of children in immigrant families is of critical interest, because central features of adult functioning – labor force productivity, quality of parenting, civic participation – will be profoundly affected by whether children in immigrant families experience healthy development and successful adaptation to American life in the 21st century.

With support from NICHD and ASPE, the National Research Council/Institute of Medicine undertook a major synthesis of past research on immigrant children and commissioned new analyses. Their report issued in 1998, *From Generation to Generation: The Health and Well-Being of Children in Immigrant Families*, documents that immigrant children are as healthy or healthier than children of U.S.-born parents, but their health status appears to decline the longer they have been in the United States. Using new data from an NICHD-supported study, the report showed that first generation immigrant youth are healthier physically and are less involved in risky behavior (sexual activity, juvenile delinquency, violent behavior, substance abuse) than are second generation and native youth. For some ethnic groups, family and neighborhood factors such as poverty, single parent households, and unsafe or isolating neighborhoods, reduce the health protection associated with immigrant status. Lack of health insurance coverage was 3 times more likely for non-citizen children, and nearly twice as likely for citizen children in immigrant families, compared to children whose parents were born in the United States. However, immigrant families are optimistic about their children's chances for upward mobility and extremely resilient to the difficulties of their immigrant status.

Repudiating Conventional Wisdom about Immigration

Already, a number of findings stemming from NICHD-supported research projects are beginning to repudiate conventional thinking about the changing characteristics of immigrants over time, the process of

immigrant adaptation and assimilation. There is a greater awareness of how important it can be to distinguish between immigrants who are citizens or not, foreign-born or not, and/or legal or not, when describing health or socioeconomic status.

- New immigrants are not really new. In the NIS pilot survey (see discussion below), only about a third of immigrants who obtained their residence papers during July and August of 1996 were actually new to the United States. The majority had between 2 and 7 years of previous experience in this country. In addition, about 20 percent of new legal immigrants in that study entered illegally at either their first or their last trip to the United States. This finding has begun to change how researchers think about “immigrants” and underscores the ambiguities associated with information about “duration of stay,” since it is not clear what is being reported as “year of entry” in the decennial census and major national surveys such as the Current Population Survey.
- Legal immigrants are better schooled, on average, than the native-born population. The skill levels of legal immigrants are much higher than originally thought from analysis of census data. The median years of schooling completed among those aged 25 and above is 13 years, a full year higher than among the native-born. The proportion with postgraduate education, 21 percent, is almost 3 times larger than among the native-born. However, legal immigrants also have a higher proportion with low levels of schooling than the native-born—more than 3 times as many legal immigrants (20 percent) as native-born (6 percent) have completed less than 9 years of schooling.
- The skill level of legal immigrants entering the United States is improving. Data from the 1970-1990 decennial censuses suggest that the labor market skills of recent immigrants are quite low and have been declining significantly relative to skills of the native-born population. However, NICHD-supported research on legal immigrants over the period 1972-1995 paints a much different picture. During most of the last 25 years, the labor market skills of male legal immigrants have been as high or higher than that of male native-born workers. In addition, there has been a steady rise in the skill-level of legal immigrants during the last half of the 1980’s and throughout the 1990’s. The changing skill composition of legal immigrants was influenced by changes in immigration laws and changing economic conditions in sending countries and the United States. Proposals to reduce legal immigrant flows in response to concerns about declining immigrant skill levels could produce the opposite result by reducing the number of highly skilled legal immigrants and encouraging additional illegal immigrant flows into the labor market.
- Legalized immigrants do experience upward mobility. Analysis of the Legalized Population Surveys suggests that immigrants, even while undocumented, were quickly incorporated into the labor force, albeit at the lower end of the occupational scale. With time in the United States and with legalization of their status, however, their jobs improved and, as a group, they experienced upward mobility not unlike that attributed to immigrants who arrived earlier in the 20th century. They do not languish at the bottom of the socioeconomic ladder as some research has suggested.

New Immigrant Survey (NIS)

Many fundamental questions about immigration remain unanswered: the effects of current immigration flows on future immigration entitlements, changes in the skill composition of entry cohorts of immigrants over time, the number and types of immigrants, their return to their home country, the transitions between legal and illegal statuses, the contributions of immigrants to the economy, and patterns of adaptation and assimilation. Despite the importance of the issues, immigration policy is handicapped by the lack of reliable and relevant longitudinal data. To address this major data limitation, the NICHD, the Immigration and Naturalization Service (INS), the National Science Foundation (NSF), and the National Institute on Aging (NIA) cooperatively funded a New Immigrant Survey Pilot Study (NIS-P). The pilot study demonstrated the feasibility of sampling new green card holders from INS administrative records, tested different strategies for locating and retaining the sample, and developed the substantive content of the survey instruments. In addition, the NIS-P has already provided some new information about the behavior of legal immigrants (highlighted above), demonstrating the potential usefulness of a full-scale New Immigrant Survey (NIS), which could provide immediate policy-relevant information on immigrants in the

United States and also serve as the foundation for a sustained effort to track their life-course. A decision to implement a full NIS for an initial 5-year period was made in FY 2000, and planning is under way.

HHS Programs and Services

Administration for Children and Families (ACF)

Office of Refugee Resettlement

The Federal government, through the Office of Refugee Resettlement (ORR), funds and administers programs for persons who have been admitted into the United States with refugee status, for those who have been granted asylum, for Cuban and Haitian entrants, and certain Amerasians (referred to collectively hereinafter as "refugees"). The primary objective of these programs is to help refugees become self-sufficient as quickly as possible after their arrival in the United States.

Agency Summary

Federal resettlement assistance to refugees is provided primarily through a State-administered refugee resettlement program. States are responsible for planning, administering, and coordinating refugee resettlement activities. Services and assistance available to refugees include cash and medical assistance, social services, and care of unaccompanied minors. More detailed information on ORR programs appears in the *Report to the Congress on the Refugee Resettlement Program*, published annually.

Cash and Medical Assistance

Many working-age refugees from all parts of the world are able to find employment soon after arrival in their new communities. For those who need services before placement in jobs, short-term financial support may be available through the local resettlement agency. However, when refugees require additional assistance and training beyond short-term support, they may apply for help from the State-administered cash and medical assistance programs, which are supported with Federal funds.

Refugees are eligible to apply for cash assistance benefits under title IV-A of the Social Security Act or Supplemental Security Income (SSI) programs and may participate as long as they continue to meet program eligibility requirements. Refugees who qualify for AFDC or, after 8/22/96, TANF, or SSI also become eligible for Medicaid benefits. Refugees also may be eligible for the Medicaid medically needy program if they have incomes slightly above that required for Medicaid eligibility and incur medical expenses that bring their net income down to the State Medicaid eligibility level.

The Refugee Act of 1980, as codified in the Immigration and Nationality Act, permits ORR to reimburse States for title IV-A payments made to refugees, for Medicaid costs incurred on a refugee's behalf, and for refugee SSI costs in those States which supplement Federal SSI payments. This reimbursement period, originally limited to 36 months, was reduced to 31 months in 1986, 24 months in 1988, and 4 months in 1990. Since 1990, ORR appropriations have not been sufficient to continue reimbursing States for these costs.

Some refugees do not qualify for cash assistance under the title IV-A or SSI programs because they do not meet the categorical eligibility criteria. These refugees may receive special cash assistance called Refugee Cash Assistance (RCA) which is provided at the same level as the former AFDC program. As with the aforementioned programs, the original period of eligibility was limited to 36 months after entry into the United States. The period of eligibility was reduced to 18 months in FY 1982, 12 months in FY 1989, and 8 months in FY 1992. The RCA eligibility period has remained stable at 8 months.

In all States, refugees eligible for RCA are also eligible for Refugee Medical Assistance (RMA) for the same period as RCA. Refugees also may be eligible for RMA alone if they have incomes slightly above

that required for Medicaid eligibility and incur medical expenses that bring their net income down to the Medicaid eligibility level. States are reimbursed for RMA costs.

After the period of eligibility for RCA and RMA has expired, refugees who continue to be ineligible for title IV-A, SSI, or Medicaid may qualify for State- or locally funded General Assistance (GA) programs on the same basis as other residents of the locality in which they reside. Similarly, refugees not eligible for Medicaid or no longer eligible for RMA may be eligible for State- or locally funded General Medical Assistance (GMA) programs. The Federal government previously reimbursed States for their GA and GMA costs for a period of months after entry into the United States, but since 1990, appropriations have not been sufficient to allow ORR to provide such reimbursement.

In FY 1997, the refugee cash and medical assistance expenditures were approximately \$191.6 million.

Unaccompanied Minors

Resettlement of unaccompanied minor refugees who require foster care upon their arrival in the United States is provided through two national voluntary agencies, the United States Catholic Conference (USCC) and Lutheran Immigration and Refugee Service (LIRS). These agencies place the refugee children in licensed child welfare programs operated by their local affiliates. Unaccompanied minor refugees are eligible for the same general range of child welfare benefits available to non-refugee children in the State. They are placed in home foster care, group care, independent living, or residential treatment facilities. States receive Federal reimbursement for costs incurred on their behalf until the month after their 18th birthdays or such higher age as is permitted under the State's child welfare plan (Title IV-B of the Social Security Act).

Social Services

Federal funding is available to States for a broad range of social services to refugees. Currently, about 85 percent of the social service funds are allocated directly to States according to their proportion of all refugees who arrived in the United States during the 3 previous fiscal years. States with small refugee populations receive at least \$75,000 in social service funds. States use most of their social service funds for employment-related services, such as English language training, employment counseling, job placement, and vocational training. States may also provide services identified in ORR regulations, such as orientation, translation, social adjustment, transportation, and day care.

Discretionary Projects

The remaining social services funds are used for a variety of initiatives and individual projects intended to contribute to the effectiveness and efficiency of refugee resettlement service delivery. During FY 1995-1997, major discretionary projects included the following:

- The Citizenship program helps hard-to-reach refugees, such as the elderly, homebound and preliterate, prepare for citizenship. Grants were awarded to voluntary and State refugee agencies and mutual assistance associations.
- The Elderly Refugee program assists older refugees to become citizens and links them to mainstream agencies at the local level for services for aging residents.
- The Community Orientation program provides new arrivals with culturally and linguistically appropriate orientation training in preparation for their new life in the United States.
- The Microenterprise Development Initiative assists refugees in starting or expanding small business through training in business skills, access to credit, and individualized business technical assistance.

- The Preferred Communities program assists national voluntary agencies with placement of newly arriving refugees in communities with good job opportunities.
- The Mental Health program increases access to mental health services for refugees through a program of training and orientation for clinicians who work with refugees and, when needed, through provision of direct clinical services.
- The Unanticipated Arrivals program enables communities to respond to the arrival of new ethnic populations of refugees and entrants, particularly where the existing service systems do not have appropriate bilingual capacity.
- The Ethnic Community program provides new ethnic communities with small amounts of funds to form advisory groups or associations for the purpose of community and grass roots organizing.
- The Community and Family Strengthening program supports services to strengthen communities and families. These grants offer English language training, citizenship services, literacy and parental skills, crime prevention services for refugee youth, services to victims of domestic violence, specialized services for women, the establishment of local community organizations and parent-school relationships.

Targeted Assistance

This program provides employment services to refugees and entrants who reside in counties with unusually large concentrations of refugees. The substantial need of these populations for services has necessitated supplementation of local service resources.

In addition to the county targeted assistance program, Florida has received funds to provide health care to eligible Cuban/Haitian entrants and for the Dade County public school system to support education for entrant children.

In FY 1995, ORR awarded \$44.5 million to 42 counties in 20 States. In FY 1996, \$44.3 million was awarded to 39 counties in 21 States. In FY 1997, ORR awarded \$44.5 million to 45 counties in 20 States.

Match Grant Program

This program provides an alternative to the Federally funded, State-administered program. In FY 1995-1996, ORR, through the Match Grant program, provided up to \$1,000 per refugee on a dollar-per-dollar matching basis, to voluntary agencies participating in the program. In mid-FY 1997, the Federal match was raised to \$1.40 per dollar raised by the voluntary agencies up to a maximum of \$1,400 per refugee. The goal of this program is to help refugees attain self-sufficiency within 4 months after arrival. Matching grants fund a range of activities, including case management, employment services, maintenance assistance, and support services.

Because of increases in the number of arriving Jewish refugees from the former Soviet Union who are traditionally served by this program, matching grant appropriations have increased in recent years from \$32.6 million in FY 1994 to \$39.3 million in FY 1997.

Refugee Preventive Health

The Preventive Health program assists States and localities in providing health screening and preventive services for newly arriving refugees. These funds are intended to give the States the capacity to coordinate preventive health services available through public health programs, Medicaid and the refugee medical assistance (RMA) program. Service provision includes screening of all contagious diseases of public health concern, immunizations, preventive therapy and orientation to the U.S. health care system.

Impact of Immigration on ORR Programs

Although a person may meet the criteria for admission into the United States as a refugee, the existence of the U.S. refugee admissions program does not automatically entitle that individual to enter. The annual admissions program is a legal mechanism for admitting an applicant who is among those persons for whom the United States has a special concern and who is otherwise eligible. The need for resettlement, not the desire of a refugee to enter the United States, is a governing principle in the management of the U.S. refugee program.

Refugees arrive through a highly regulated process. Crisis events that increase the flow of refugees may be unpredictable, e.g., the circumstances that developed in Iraq in the fall of 1996 resulting in the U.S. government airlifting 6,600 Kurdish and Iraqi evacuees from a temporary safe-haven in Turkey to Guam for asylum processing. More typically, refugees are admitted to the United States through a procedure that balances foreign policy considerations against perceived domestic concerns, such as unemployment and housing shortages. The refugee resettlement process is much more controlled than the arrival of immigrants, who have outnumbered refugee arrivals in recent years by a magnitude of 7 or 8 to 1, since a high proportion of immigrants are immediate relatives of U.S. citizens and not regulated by the immigration preference system.

Demographic Impact¹³

From FY 1995 to FY 1997, the United States admitted 306,500 refugees, Amerasian immigrants, and Cuban and Haitian entrants, compared with 395,100 in the previous 3-year period (FY 1992 to FY 1994). These persons came from nearly 50 countries, with the largest number arriving from the republics of the former Soviet Union. For the period FY 1983 through FY 1997, the United States admitted a total of 398,600 Soviet refugees. From FY 1995 to FY 1997, 91,500 Soviet refugees arrived (23 percent of the total) compared with 152,400 in the previous 3-year period (38 percent of the total).

Refugee arrivals from Cuba, Iraq, Somalia, and the former Yugoslavia have increased substantially in recent years. For the period FY 1983 through FY 1997, the United States admitted 112,700 Cubans, 31,900 Iraqis, 21,800 Somalis, and 52,600 refugees from the former Yugoslavia. From FY 1995 to FY 1997, the United States admitted 65,900 Cuban refugees and entrants compared with 29,100 in the previous 3-year period; 15,500 Iraqi refugees compared to 12,900 in the previous 3-year period; 13,900 Somali refugees compared to 7,700 in the previous 3-year period; and 43,300 refugees from the former Yugoslavia compared to only 9,300 in the previous 3-year period. Arrivals from these five countries account for 75 percent of all arrivals for the period FY 1995 to FY 1997.

Although Vietnamese refugees and Amerasian immigrants retain the largest share of arrivals, Southeast Asian numbers have declined in recent years. For the period FY 1983 through FY 1997, the United States admitted 430,800 Vietnamese refugees and Amerasian immigrants. From FY 1995 to FY 1997, 57,700 Vietnamese and Amerasian immigrants arrived (13 percent of the total) compared with 123,600 in the previous 3-year period (29 percent of the total). The decline in Laotian refugees is more dramatic. For the period FY 1983 through FY 1997, the United States admitted 113,400. From FY 1995 to FY 1997, 6,800 Laotians arrived (6 percent of the total) compared with 20,400 in the previous 3-year period (18 percent of the total). The last year in which Cambodian refugees arrived in any significant numbers was FY 1990.

Geographic Impact

Refugees arriving in the United States are placed in all 50 States, the District of Columbia, and several territories. The placement process strives to spread the impact of refugees around the country. Refugees are generally not placed in a location that already has a large refugee population unless they have a close relative residing in the area. Since most recent refugees have been joining relatives who became established earlier, their distribution still does not parallel that of the overall U.S. population. Southeast

¹³All arrival figures are rounded to the nearest 100.

Asian refugees have settled in every State and one territory. However, some refugee groups are concentrated in a handful of States including Florida, Illinois, and New York.

For the period FY 1983 through FY 1997, the top five resettlement States in order of magnitude were California, New York, Florida, Texas, and Washington. Thirty-six percent of Southeast Asian refugees reside in California, and 22 percent of non-Southeast Asian refugees reside in New York. From FY 1995 to FY 1997, as well as from FY 1992 to FY 1994, the top five resettlement States were the same but not in the same order. From FY 1995 to FY 1997, as well as from FY 1992 to FY 1994, California resettled more Southeast Asian refugees (mostly from Vietnam) than any other State. From FY 1995 to FY 1997, Florida resettled more non-Southeast Asian refugees (mostly from Cuba) than any other State, followed by New York which resettled mostly refugees from the former Soviet Union. From FY 1992 to FY 1994, New York resettled more non-Southeast Asian refugees (mostly from the former Soviet Union) than any other State. Parenthetically, California also resettled the second largest number of refugees from the former Soviet Union during both time periods. From FY 1995 to FY 1997, as well as from FY 1992 to FY 1994, California resettled more Somalis than any other State, followed by Georgia and Virginia. Florida has consistently resettled the vast majority of Cubans. From FY 1995 to FY 1997, Michigan followed by Texas and then by California resettled the greatest number of refugees from Iraq, compared to FY 1992 to FY 1995, when California resettled the greatest number of refugees from Iraq followed by Michigan and Illinois. Finally, Washington resettled significant numbers of refugees from the former Soviet Union, Vietnam, and the former Yugoslavia from FY 1995 to FY 1997 and again significant numbers of refugees from the former Soviet Union and Vietnam from FY 1992 to FY 1994.

Economic Impact

The economic impact of refugee arrivals depends on many factors: the employment potential of refugees, including their education skills, English language competence, and health; the needs that they have as individuals and members of families for financial resources, whether for food, shelter, or child-rearing; and the economic environment in which they settle, including the availability of jobs, housing, and other local resources.

In the short term, the primary question is whether or not refugees who obtain employment are able to become self-sufficient. To address this question, ORR conducts an annual native-language survey of refugees, Amerasian immigrants, and entrants who have entered the United States during the previous 5 years. The most recently published survey, conducted in the fall of 1997, includes interviews with 1,983 households. Survey results reveal the following:

- Employment increases with residence in the United States
Results from the 1997 survey indicate that the employment-to-population ratio (EPR) of refugees aged 16 or older who have come to the United States during the 5 previous years was 53.9 percent, compared to an equivalent rate of 63.8 percent for the overall U.S. population. Although lower than that of the U.S. population as a whole, refugee employment appears to increase with each year of residence. While the overall EPR for the 1997 arrivals was only 50 percent, the EPR of refugees who had arrived in 1992 was 58 percent. It should be noted that the survey sample population includes refugees who have been in the country for only a short time and also excludes from the survey sample many refugees who arrived prior to 1992 (who are more likely to be residing in self-sufficient households).
- Use of public assistance varies widely among refugee households
The 1997 survey indicates that over 55 percent of refugee households were self-supporting. The hourly wage for all working refugees was \$6.82 for 1997 arrivals and \$8.12 for 1992 arrivals, with an overall average of \$7.38. About 21 percent of the households were among the ranks of the working poor, having some earned income, but still qualifying for public assistance. Another 21 percent of the refugee households had no earned income and depended entirely on public assistance. Household receipt of public assistance reflects not only problems finding employment, but also differences in

need and ability. For example, 27 percent of self-supporting households reported they had at least one member fluent in English compared to 9 percent of households that depend entirely on public assistance. Another example involves SSI. Twenty-one percent of refugee households had at least one household member who received SSI. However, utilization varied greatly according to the number of refugees over age 65. Refugees from the former Soviet Union were found to utilize SSI most often. With about 16 percent of their 5-year population aged 65 or over, 37 percent of their households received SSI. By contrast, only 8 percent of refugees from Latin America were aged 65 or older, and 5 percent or less of all remaining refugee groups were 65 or over. The median age for the seven refugee groups (formed from the survey respondents) ranged from a low of 27 years for Africa to 41 years for the former Soviet Union.

Office of Community Services

Community Services Block Grant Program

Program Summary

Community Services Block Grants (CSBG) are awarded to States who in turn provide grants and contracts to a network of public and private community based organizations, (including Community Action Agencies and migrant and seasonal farm worker organizations) to provide services and undertake activities to ameliorate the causes and conditions of poverty in local communities. CSBG funds also are made available to Indian Tribes who apply directly to the Office of Community Services (OCS). In FY 1997, \$489.6 million was appropriated to carry out the purposes of the CSBG Program.

Recipients of CSBG funds are required to provide a range of services and activities to address the following needs: employment, education, making better use of available income, housing, nutrition, emergency services, and health. States and Indian Tribes have the flexibility to provide, consistent with the statute, such services and activities that they determine best meet the needs of low-income individuals and families.

Impact of Immigration on CSBG Program

Federal data on the extent to which immigrants can and do access CSBG programs are unavailable. There has been no statutory or regulatory requirement to collect such information either on the part of OCS or the states or tribes receiving CSBG funds. Because the CSBG budget is not calculated based on the number of individuals served, there is no impact directly attributable to immigrant or citizen utilization.

Discretionary Grants Program

Program Summary

In FY 1997, the CSBG Discretionary Grants Program provided \$24.5 million in assistance to programs of national and regional significance. Assistance is available on a competitive basis to the following entities: private, locally initiated community development corporations that sponsor enterprises providing employment, training, and business development opportunities for low-income residents; public and private non-profit agencies that provide activities benefiting migrants and seasonal farm workers; public and private organizations that carry out programs in rural and community facilities development; and private, non-profit organizations that provide recreational activities for low-income youth.

Impact of Immigration on Discretionary Grants Program

Funding is provided for the development of projects to aid low-income individuals in general and does not focus on any particular needy population, such as immigrants or refugees. Eligible organizations representing such groups must compete with all other applicants for funding. Immigrants and refugees probably receive services from projects funded under the discretionary grants program, particularly from projects directed towards serving migrants and seasonal farm workers, but there is no data available

indicating the number and location of such users. There are no restrictions on serving immigrants in projects funded under this program.

Community Food and Nutrition Program

Program Summary

The Community Food and Nutrition Program in FY 1997 provided \$4 million in assistance to public and private agencies at the community-based, state, and national levels for the purposes of: coordinating existing food assistance resources; assisting in identifying sponsors of child nutrition programs and initiating new programs in underserved and unserved areas; and developing innovative approaches at the State and local levels to meet the nutritional needs of low-income people. Funding for this program is provided on a competitive basis as well as distributed to States on a formula basis.

Impact of Immigration on Community Food and Nutrition Program

The impact of immigration on this program is similar to that of the Discretionary Grants program. While there is no data available on the extent to which this program serves immigrants; it is reasonable to assume that immigrants who are served by this program benefit to the same extent as citizens who also are served.

Low Income Home Energy Assistance Program (LIHEAP)

Program Summary

The Low Income Home Energy Assistance Program helps low-income people meet their home energy costs. In FY 1997, \$1 billion was appropriated for the regular program, and \$215 million in contingency funds was released. Recipients of funding were the States, the District of Columbia, Indian tribes and tribal organizations, and U.S. territories.

Impact of Immigration on LIHEAP

There is no Federal information on the extent to which immigrants can and do access LIHEAP. The LIHEAP statute does not specify immigrants as a target group for assistance. LIHEAP grantees and other interested parties were notified on August 6, 1998 that, subject to certain important exceptions, providers of LIHEAP-funded energy assistance (other than nonprofit charitable organizations) were required to verify the immigration and citizenship status of applicants in order to ensure that non-qualified aliens do not receive non-excepted LIHEAP benefits and services. Because the budget for LIHEAP is not determined by the number of persons who access its services, there is no effect on its budgetary total attributable to immigrant access or restriction.

Social Services Block Grant (SSBG)

Program Summary

The Social Services Block Grant (Title XX of the Social Security Act) provides formula grants directly to the 50 States, the District of Columbia, and eligible territories and commonwealths. Under SSBG, Federal funds are available without a matching requirement. In FY 1997, States received a total allotment of \$2.5 billion. Within the specific limitations in the law, each State has the flexibility to determine what services will be provided, who is eligible to receive services, and how funds are distributed among the various services offered. State and local Title XX agencies (i.e., county, city and regional offices) may provide these services directly or purchase them from qualified agencies and individuals.

Also, in the Omnibus Budget Reconciliation Act of 1993, Congress amended Title XX of the Social Security Act to provide a one-time set-aside in grant funds totaling \$1 billion for localities designated as Empowerment Zones and Enterprise Communities. These grants are called "EZ/EC SSBG" funds and are

separate and distinct from the regular "Title XX Social Services Block Grant" in both the flexible program uses for the funds and the decision-making authority for determining those uses.

Specifically, Title XX was amended to permit a greatly expanded range of programmatic activities that can be financed with EZ/EC SSBG monies, as opposed to the more limited options for "regular" Social Services Block Grant funds, including economic/community development and infrastructure projects. Furthermore, all decision-making authority for using EZ/EC SSBG funds to finance particular activities is vested in the local EZ/EC lead entity and community-based governance process, as opposed to the State under the "regular" Title XX Social Services Block Grant; in the EZ/EC program, the State primarily functions as a "pass-through" funding conduit for the EZ/EC SSBG award.

EZ/EC SSBG funds were provided to 6 urban and 3 rural empowerment zones and 95 enterprise communities to assist those localities in addressing their specific needs. Among the programs that the EZ/EC's identified as relevant to their communities are: programs to train and employ zone residents in the construction and rehabilitation of public infrastructure and affordable housing; after-school programs to keep schools open during the evenings and on weekends; and drug and alcohol prevention and treatment programs that provide comprehensive services for pregnant women, mothers, and their children.

Impact of Immigration on SSBG Programs

Each State must submit a pre-expenditure report to the Secretary of HHS on the intended use of SSBG funds. The only requirement in the statute is that the report include information about the type of activities to be funded and the characteristics of the individuals to be served. While there is no specific information available in these reports on the social services provided to immigrants and refugees, a State has the flexibility to offer services under SSBG to these groups (other than to non-qualified aliens, subject to important exceptions related to the type of service being provided, and the type of organization providing the service). Under PRWORA, States have the option to deny SSBG assistance to non-excepted qualified aliens beginning January 1, 1997, but based on the information submitted in State SSBG plans, no State is currently denying SSBG-funded services to qualified aliens. Because the budgets for SSBG programs are not based on the number of individuals that use their services, immigrant use has no effect on the budget outlays.

Although many of the 104 EZ/EC localities receiving EZ/EC SSBG funds may include immigrant populations, the size and configuration of those designated areas prohibits a valid assessment of that population and the services they currently may be receiving.

Head Start

Program Summary

Head Start is a national program that provides comprehensive educational, medical, health, nutritional, social and other services to primarily low-income preschool children and their families. In FY 1997, about 794,000 children received Head Start services. Up to 10 percent of Head Start's enrollment may be reserved for children from families above the Federal poverty level (FPL). Also 10 percent of enrollment must be reserved for preschool children with disabilities (currently, about 13 percent of Head Start's national enrollment are children with disabilities). In addition, Head Start funds programs for Indian and migrant children. The 1994 reauthorization of the Head Start Act established a new Early Head Start program for low-income families with infants and toddlers. In FY 1997, \$159 million was used to support 173 projects to provide Early Head Start child development and family support services in all 50 states and in the District of Columbia and Puerto Rico. These projects, plus a number of Parent and Child Centers and Comprehensive Child Development Programs, served 22,000 children under age 3 in FY 1997. In FY 1997, there were 1,456 Head Start grantees and approximately 600 delegate agencies in the 50 states, the District of Columbia, and eligible territories and commonwealths.

Impact of Immigration on the Head Start Program

There are no data on the number of immigrants being served by the Head Start program. As far as the budget is concerned, since Head Start's budget is not based on the number of children and families served, immigrant access to this program does not affect it.

Office of Family Assistance

Aid to Families With Dependent Children (AFDC)

Note: as indicated before, AFDC was replaced by the Temporary Assistance for Needy Families with the enactment of P.L. 104-193 on August 22, 1996.

The Aid to Families with Dependent Children program (Title IV-A of the Social Security Act) was a Federally-funded program administered by States and certain territories. In the AFDC program, States made assistance payments to needy families with dependent children deprived of parental support or care because of a parent's absence, death, incapacity, or the unemployment of a parent who is the principal earner.

In order to become eligible for AFDC payments, the individual had to be a citizen or lawfully admitted for permanent residence or otherwise permanently residing in the United States under color of law. However, provisions included in the Immigration Reform and Control Act of 1986 (IRCA) disqualified newly legalized immigrants from participation in the AFDC program for a period of 5 years from the date of receipt of their legalized status; the only exceptions to this disqualification were for Cuban and Haitian entrants.

An application from a sponsored alien not otherwise disqualified under IRCA who applied for AFDC within 3 years of his/her entry into the United States was evaluated by having the sponsor's income and resources deemed available to the alien according to a prescribed formula for a period not to exceed 3 years from the alien applicant's date of entry.

In FY 1997, total State and Federal expenditures for the AFDC program were \$5.2 billion.

Impact of Immigration on AFDC

Table 4-1 shows the AFDC reciprocity rates for legal immigrants (including refugees) from 1993 to 1997, not including recipients of emergency assistance.¹⁴ According to this table, the legal immigrant proportion of all AFDC recipients has remained relatively modest, between 5 and 6 percent of the total AFDC population. There was a decrease of nearly 30 percent in the number of immigrant recipients of AFDC, from a high of 825,126 in FY 1995 to 601,896 in FY 1997. This decrease generally mirrors the overall decrease in total AFDC caseload during this period, and is attributable primarily to welfare reform.

Table 4-1 — AFDC Reciprocity Rates for Legal Immigrants: FYs 1993-1997

	1993	1994	1995	1996	1997
Number of Legal Immigrant Recipients	722,814	823,318	825,126	744,654	601,896
Number of All AFDC Recipients	14,045,207	14,246,450	13,752,095	12,621,250	11,356,535
Percent of Legal Immigrant AFDC Recipients	5.1	5.8	6.0	5.9	5.3

¹⁴ These figures are based on the AFDC Quality Control (QC) File, a sample of State administrative data that were used to study the trends in immigrant usage of AFDC. Quality Control data were drawn from monthly samples provided by each State and were used to determine errors in payments to recipients. Some potential problems with the AFDC QC data included an insufficient number of sample immigrant cases in some states and problems relating to the proper coding of citizenship status in some States.

Emergency Assistance (EA)

Program Summary

Emergency Assistance was a State-administered optional program that provided temporary financial assistance and services to needy families with children to prevent destitution and provide shelter. The Federal Government shared 50 percent of the costs of these benefits with the States. If a State elected to operate an EA program, it provided assistance to any family member, otherwise eligible for AFDC, including one who is a citizen or an alien lawfully admitted for permanent residence or otherwise residing in the United States under color of law. A State also had the option to provide EA to undocumented immigrants.

States had flexibility in defining what constituted an emergency and the type and amount of assistance that they would provide. Assistance could have been in the form of cash, services, or items a family needs, such as food, clothing, and furniture. Federal matching funds were available only for emergency assistance that the State authorized during one 30-day period in any 12 consecutive months. Funds could be available to meet needs that arose before the 30-day period or that extended beyond the 30-day period.

In FY 1997, total Federal/State expenditures for the EA program were approximately \$679 million.

Impact of Immigration on EA Program

No Federal information is available on the impact of immigration on the EA program.

Temporary Assistance for Needy Families (TANF) Program

Program Summary

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 eliminated the AFDC, Emergency Assistance, and Jobs Opportunities and Basic Skills Training (JOBS) programs and created the TANF program. The TANF program is a block grant program. TANF block grants to States total \$16.5 billion annually through FY 2002. States had until July 1, 1997 to implement their TANF programs. The TANF program also has a cost-sharing requirement, known as maintenance-of-effort (MOE), to ensure that States continue to contribute their own money toward meeting the needs of eligible families. Under the maintenance-of-effort requirement, States must maintain their own spending at 80 percent of their FY 1994 spending level (or 75 percent if they meet the required work participation rates). The MOE funds may be used in the TANF program either by commingling them with Federal TANF funds or by segregating them, and they may also be used in separate State programs outside TANF. The MOE requirement at the 80 percent level totals \$11.1 billion annually and \$10.4 billion at the 75 percent level. Essentially, States must use their TANF and MOE funds consistent with the purposes of the new law, which focuses on reducing welfare dependency and helping families become self-sufficient. The new law also contains strong work requirements and places a time limit on most assistance. States have broad flexibility in the design and operation of their welfare programs.

Basic Policy on Non-Citizens

PRWORA imposed restrictions on the ability of some non-citizens to receive Federal or State and local public benefits. The TANF program, using Federal TANF funds or State funds commingled with Federal TANF funds, generally provides a Federal public benefit, which means only qualified aliens may receive Federally funded TANF benefits (subject to important exceptions related to the type of service being provided and the type of organization providing the service). Non-exempt qualified aliens entering the country on or after August 22, 1996 are banned from receiving Federal TANF benefits for 5 years. Thereafter, States may choose whether or not to provide Federal TANF benefits to otherwise eligible qualified aliens.

States may also use their own funds to assist qualified aliens as well as certain non-qualified aliens. Specifically, States may use segregated State funds in TANF or funds in separate State programs to provide TANF or other State or local public benefits to qualified aliens not eligible for TANF under the 5-year bar, nonimmigrants under the Immigration and Nationality Act or aliens paroled into this country under section 212(d)(5) of such Act for less than 1 year. States may also use MOE funds to provide State TANF or other State or local benefits to illegal aliens if the State enacts a law after August 22, 1996 that affirmatively provides that illegal aliens are eligible to receive (all or particular) State or local public benefits. If a State determines that a particular State-funded benefit or service available in the State is not a public benefit, then the State may provide that benefit to any eligible alien family member.

Office of Child Support Enforcement

Program Summary

Established in 1975, the Child Support Enforcement (CSE) program is a joint Federal and State effort (Title IV-D of the Social Security Act). Its goals are to ensure that children are supported financially by their parents, to foster family responsibility, and to reduce welfare costs.

Impact of Immigration on CSE Program

Data on immigrants' use of CSE services are not available. CSE cases fall into four categories: TANF, non-TANF, Medicaid only, and Foster Care. There are no restrictions or limitations on use of services by immigrants.

Administration on Developmental Disabilities (ADD)

Program Summary

The Administration on Developmental Disabilities administers the programs authorized under the Developmental Disabilities Assistance and Bill of Rights Act, as amended. The goal of these programs is to assure that individuals with developmental disabilities and their families participate in the design of, and access to, culturally competent services, supports, and other assistance and opportunities that promote independence, productivity and integration and inclusion into the community. The Developmental Disabilities programs work in partnership with individuals with developmental disabilities and their families, State governments, local communities, and the private sector to address such issues as prevention; diagnosis; early intervention; therapy; education; training; employment; leisure opportunities; community and institutional living.

Many services supported by ADD and provided by States and local communities are available to immigrants and refugees with disabilities and their families. The Developmental Disabilities programs are comprised of the following four programs:

- State Developmental Disabilities Councils, which promote capacity building and advocacy, the development of consumer and family centered comprehensive system, and a coordinated array of supports, and other assistance designed to help people with developmental disabilities.
- The Protection and Advocacy (P&A) Program, which provides for the protection and advocacy of legal and human rights through formula grants to States.
- University Affiliated Programs (UAP), which provide interdisciplinary training, exemplary service, technical assistance, and information dissemination activities.
- Projects of National Significance (PNS) are awards to innovative public or private non-profit institutions that seek to enhance the independence, productivity, integration and inclusion into the community of people with developmental disabilities. Monies also support the development of national and State policy.

Impact of Immigration on the ADD

The impact of immigration on local ADD-supported programs is unknown and difficult to assess, as eligibility for ADD-related programs was not based on immigration status prior to the enactment of PRWORA. Direct services provided by many of the ADD programs are considered to be Federal public benefits and are therefore only available to qualified aliens. However, since many of the ADD grantees are non-profit organizations, verification of citizenship and immigration status is not required. It should also be noted that because the budgets for ADD's programs are not calculated based on the number of individuals served, immigrant use has no effect on the total budget.

Public Health Service

Substance Abuse and Mental Health Services Administration (SAMHSA)

Agency Summary

SAMHSA conducts several programs that might be affected by immigration into the United States: the Refugee Mental Health Program; two SAMHSA-administered block grants; a program providing assistance to homeless individuals with serious mental illness; a program providing comprehensive community-based services for children with serious emotional disturbance; a program providing protection and advocacy for individuals with serious mental illness; a program that provides assistance to communities in developing resources to prevent substance abuse; and several demonstration programs. Descriptions of these programs are included in Appendix A.

Refugee Mental Health Program (RMHP)

Program Summary

The RMHP originated in ADAMHA in 1980 in response to the arrival of nearly 125,000 Cubans on the South Florida shores. The basic mission of the RMHP was to provide mental health assessment, treatment and consultation. In 1992, in conjunction with the reorganization of ADAMHA, the activities of the RMHP were transferred to the Refugee Mental Health Branch, Center for Mental Health Services, SAMHSA. At that time, consultative activities were expanded to other Federal agencies, most notably, the Office of Refugee Resettlement (ORR), Administration for Children and Families, DHHS. In 1995, the original Cuban/Haitian activities of the RMHP were transferred to the Department of Justice. At the same time, the consultative activities were transferred to the Special Programs Development Branch, CMHS, SAMHSA.

Since 1995, the Special Programs Branch of RMHP, through an interagency agreement with the ORR, provides mental health consultation and technical assistance to Federal, State, local agencies, and ORR-funded programs. These activities include on-site and telephone consultation, community assessments, development and dissemination of technical assistance documents, and development and provision of workshops and training programs to resettlement staff and mental health personnel. RMHP staff may also be assigned to special missions. For example, RMHP staff were involved in the planning for Operation Provide Refuge in 1999 and served on the Director's staff overseeing all health/mental health planning and services for Kosovar Albanians processed at Fort Dix, N.J. Later, in 1999, RMHP staff participated in a Presidential Delegation to Kosovo, which was tasked with conducting a comprehensive psychosocial needs assessment of returning refugees.

Impact of Immigration on the Refugee Mental Health Program

For the Refugee Mental Health Program, policies which potentially affect mass migrations or repatriations have a significant impact on program activities.

Block Grants

Program Summaries

- **Community Mental Health Services Block Grant.**
The Community Mental Health Services Block Grant provides funds to the States and Territories to enable them to carry out the States' plans for providing comprehensive community mental health services to adults with serious mental illness and to children with a serious emotional disturbance; evaluate programs and services carried out under the plan; and conduct planning, administration, and educational activities related to providing services under the plan.
- **Substance Abuse Prevention and Treatment (SAPT) Block Grant.**
The SAPT Block Grant provides funds directly to States to provide substance abuse prevention and treatment services based upon State Needs Assessments and State Plans.

Impact of Immigration on Block Grant Programs

For the SAMHSA block grants, because these funding mechanisms are primarily based on population-driven formulas for determining State allotments, a significant increase in a State's population caused by immigration would require an increase in the State's allotment. Allotments to other States would decrease correspondingly. However, receipt of services from these programs has not been dependent on citizenship or immigrant status, and there is no information regarding immigrant utilization of services.

Assistance to Homeless Individuals with Mental Illness

Program Summary

SAMHSA supports a program to assist homeless persons with severe mental illness, initially through the Mental Health Services to the Homeless (MHSH) block grant, and then through the Projects for Assistance in Transition from Homelessness (PATH) formula grant program. Both the MHSH block grant and the PATH program have provided outreach and mental health treatment programs to homeless persons with serious mental illness and, under the PATH program, to those individuals at risk of homelessness.

Impact of Immigration on Assistance to Homeless Individuals with Mental Illness Program

Eligibility for this program has not been dependent on citizenship or immigrant status. Therefore, no information regarding utilization of services by immigrants is available.

Comprehensive Community Mental Health Services for Children and their Families Program

Program Summary

The Comprehensive Community Mental Health Services for Children and Their Families Program was authorized in 1992 in the ADAMHA Reorganization Act to provide grants to States, political subdivisions, Indian tribes, and tribal organizations for provision of an array of community-based services organized into a system of care for children with serious emotional, behavioral, or mental disorders, and their families.

Impact of Immigration on Comprehensive Community Mental Health Services for Children and Their Families Program

This program does not condition eligibility for its services on immigrant status. No information is available regarding immigrant utilization of services.

Protection and Advocacy for Individuals with Mental Illness (PAIMI)

Program Summary

The PAIMI Act of 1986 authorizes formula grant allotments to be awarded to Protection and Advocacy (P&A) systems that have been designated by the Governor in each State (and the District of Columbia and certain territories) to protect the rights of and advocate for individuals with disabilities. The allotments are to be used to pursue administrative, legal, and other appropriate remedies to redress complaints of abuse, neglect, and rights violations and to protect and advocate the rights of individuals with mental illness through activities to ensure the enforcement of the Constitution, and Federal and State statutes.

Impact of Immigration on PAIMI

Receipt of services from this program has not been dependent on citizenship or immigrant status, and information regarding immigrant utilization of services is not available.

Discretionary Grant Programs

Program Summaries

SAMHSA offers discretionary grant funding primarily through the Knowledge Development and Application (KD&A) program. The goal of this program is to develop new knowledge about ways to improve the prevention and treatment of substance abuse and mental illness, and to work with State and local governments as well as providers, families, and consumers to apply that knowledge effectively in everyday practice. These programs have included Targeted Capacity Expansion, Target Cities, HIV/AIDS Outreach, State Incentive Grants, Pregnant and Postpartum Women and Infants programs, Community Action grants, and Children of Substance Abusing Parents.

Impact of Immigration on Discretionary Programs

SAMHSA's discretionary programs have not conditioned eligibility for services on citizenship or immigrant status. Consequently, there is no information regarding immigrant utilization of services available. However, since the programs' budgets are not determined by the number of persons accessing their services, immigrant access would not affect the total budget.

Centers for Disease Control and Prevention (CDC)

Agency Summary

The mission of the Centers for Disease Control and Prevention is to prevent unnecessary illness and premature death. CDC strives to achieve national prevention objectives by:

- conducting surveillance, epidemiologic investigation, and laboratory research;
- serving as national and international reference laboratories;
- providing assistance, including grants, to State and local health departments; and
- disseminating findings through partners in academic institutions, medical care settings, and business and labor groups.

Services funded by CDC and provided by State and local health departments are available to immigrants and refugees. For example, CDC's Preventive Health and Health Services Block Grant is designed to give states flexibility to fund priority prevention programs tailored to specific needs. This Block Grant funds a wide variety of preventive health services. CDC also funds state-level activities in immunization, tuberculosis control, sexually-transmitted disease prevention and control, HIV/AIDS prevention and

education, health education and health promotion. In addition, CDC manages a national program for control of infectious diseases.

CDC's Division of Quarantine has the regulatory responsibility to prevent the introduction of communicable diseases into the United States. This mission is accomplished by monitoring the overseas medical examination of immigrants and refugees applying for permanent U.S. residency. The Division of Quarantine writes and disseminates the guidelines for this medical examination and informs State and local health departments of the arrival of all refugees and immigrants with diseases of public health significance.

Impact of Immigration on CDC Programs

The impact of immigration on local preventive health services supported by CDC grant funds is unknown and difficult to assess. Eligibility for CDC-supported services is not based on immigration status, and national data on the immigration status of recipients is not maintained. However, it is reasonable to assume that immigrants benefit from CDC services. Therefore, changes in immigration and program eligibility could impact the local operation of CDC programs substantially, particularly in communities with high concentrations of immigrants. As for the budgets of these programs, immigrant use has no effect on the budget totals since they are not based on the number of individuals served.

Health Resources and Services Administration (HRSA)

Agency Summary

The Health Resources and Services Administration, through the programs that it funds and administers, seeks to improve the health of the Nation by assuring quality health care to underserved, vulnerable, and special-need populations and by promoting appropriate health professions workforce capacity and practice, particularly in primary care and public health. In FY 1997, HRSA provided \$3.4 billion to 80 programs. Together, HRSA's programs operate with the goal of improving access to care for millions of Americans.

Impact of Immigration on HRSA Programs

HRSA administers preventive and primary health care programs that address the needs of disadvantaged and underserved populations. These programs seek to minimize infant mortality, eliminate racial disparities in health, and to bring down cultural and linguistic barriers that limit access to care.

Since HRSA-funded programs are located in areas most accessible to underserved and disadvantaged populations, it can be assumed that these programs serve immigrants. However, since the eligibility for these programs is not dependent on citizenship or immigration status, no information regarding utilization of services by immigrants is available.

The service delivery programs funded by HRSA include:

- Community and Migrant Health Centers, Health Care for the Homeless, Health Services for Residents of Public Housing, and Healthy Schools, Healthy Communities;
- Maternal and Child Health Title V block grant, Special Projects of Regional and National Significance, Community Integrated Service Systems, and pediatric emergency medical services;
- Ryan White grants to States, metropolitan areas and local service providers for the provision of primary and support services for persons living with HIV/AIDS.

Program descriptions are in Appendix B.

Administration On Aging (AoA)

Agency Summary

In the United States, 45 million people are 60 years of age or older. Some of these older individuals are at risk of losing their independence, including 4 million people over age 85, those living alone without a care giver, members of minority groups, older persons with physical or mental impairments, low-income older persons, and those who are abused, neglected, or exploited.

The Administration on Aging (AoA) was established by the Older Americans Act of 1965 (OAA) to meet the diverse needs of the increasing number of older individuals. The AoA is the Federal focal point and advocacy agency for older persons. It works closely with its nationwide network of State Agencies on Aging, Area Agencies on Aging, and Tribal Organizations to plan, coordinate, and develop community-based systems of services designed to meet the unique needs of older persons and their care givers. It funds in-home and community-based supportive and nutrition services including: Access services (e.g., information and assistance, transportation, and case management); In-home services (e.g., home repair, home-delivered meals, personal care, and homemaker-home health aide); Community-based services (e.g., senior centers, congregate meals, day care, nursing home ombudsmen, health promotion, etc.); and Care giver services (e.g., respite, counseling, and education).

Impact of Immigration on the AoA

The effect of immigration on local OAA supported services is unknown and difficult to assess, because OAA programs do not collect information on immigration status. However, it is reasonable to assume that immigrants benefit from OAA programs and services, particularly in communities with high concentrations of older immigrants. As for the budget, immigrant use of OAA programs would not affect the total budget since it is not calculated based on the number of individuals accessing those programs.

Health Care Financing Administration (HCFA)

Medicaid

Program Summary

The Medicaid program is a State-administered, Federally assisted program providing medical assistance to individuals and families who meet certain eligibility requirements. Medicaid Stateplans provide assistance to certain low-income families, children, pregnant women, and to certain low-income individuals who are aged, blind or disabled. In FY 1997, 34.9 million individuals received medical assistance. Medicaid benefits totaled \$161 billion, of which \$91 billion was the Federal share.

Table 4-2 shows the total number of Medicaid recipients and the percentage of recipients in each of the following categories for FY 1997.

Table 4-2 — Medicaid Enrollees by Program, FY 1997

Program	Persons enrolled (millions)	Percent
Total	34.9	100.0
Aged/Blind/Disabled	10.1	28.9
AFDC-Children	15.3	43.8
AFDC-Adults	6.8	19.5
Other	2.7	7.7

Impact of Immigration on the Medicaid Program

Prior to enactment of PRWORA (P.L. 104-193) on August 22, 1996, title XIX of the Social Security Act permitted full Medicaid eligibility to otherwise eligible non-citizens who were lawful permanent residents or persons permanently residing in the United States under color of law (PRUCOL). Such non-citizens who were members of a group covered by the State Plan and met all other eligibility requirements (e.g., related to income) could receive Medicaid. In addition, non-citizens in an immigration status not described above could, if they otherwise met Medicaid eligibility criteria, receive Medicaid for the treatment of an emergency medical condition.

Passage of PRWORA greatly changed the eligibility of non-citizens. The new eligibility criteria limit full Medicaid eligibility to so-called “qualified aliens.” This classification incorporates lawful permanent residents and the following formerly PRUCOL categories: asylees, refugees, parolees for more than 1 year, conditional entrants, Cuban/Haitian entrants, aliens whose deportation is being withheld under the INA, and battered alien spouses, battered alien children, the alien parents of battered children, and alien children of battered parents who fit certain criteria.

Welfare reform also imposed additional requirements and limitations on the Medicaid eligibility of qualified aliens based on whether their date of entry into the United States was before, or on or after, August 22, 1996. It established a 5-year bar to eligibility for non-emergency services applicable to qualified aliens who enter the United States on or after August 22, 1996. However, this bar does not apply to those qualified aliens who are exempt from it by law. For example, refugees, asylees, and individuals with status as an active duty member of the United States armed forces or as a veteran are exempt from the 5-year bar applicable to other qualified aliens. In addition, lawful permanent residents who entered the United States before August 22, 1996, and who possess 40 quarters of work in the United States without use of means-tested benefits are exempt from the limitation on eligibility contained in welfare reform.

Some PRUCOL aliens who prior to welfare reform were eligible for full Medicaid are now considered non-qualified aliens. However, otherwise eligible aliens, whether qualified aliens or not, are eligible to have payments made for treatment of emergency medical conditions. Emergency medical condition is defined to mean that an individual, after sudden onset, has acute symptoms of sufficient severity such that the absence of immediate treatment could cause serious jeopardy to any bodily organ or part (paraphrase of 1903(v) of the Social Security Act).

Passage of the Balanced Budget Act of 1997 eased the limitations on qualified aliens’ eligibility for Medicaid. These changes consist of:

- Extending from 5 to 7 years the exemption from the limits imposed by welfare available to refugees, asylees, active duty military and veterans.
- Adding Amerasians to the exempt groups above.
- Including Cuban/Haitian entrants as refugees.

- Permitting qualified aliens who were receiving SSI on the day PRWORA was enacted to continue to receive SSI and any Medicaid for which they were eligible, and permitting qualified aliens who were living in the United States on the date welfare reform was enacted, who were not receiving SSI but who are or become disabled, to receive SSI and Medicaid.
- Providing that aliens who were receiving SSI on the date PRWORA was enacted, based on an application filed before January 1, 1979, for whom SSA lacks evidence that they are not qualified aliens will be considered to be qualified aliens for the purpose of SSI and Medicaid eligibility.
- Clarifying that American Indians born outside the United States will be recognized as qualified aliens (lawful permanent residents) and exempt from the 40 quarters requirement.

In 1998, Congress passed legislation which further protected the benefits of SSI recipients. Those non-qualified aliens, formerly PRUCOL aliens, who were receiving SSI on the date welfare reform was enacted would continue to be eligible to receive both SSI and Medicaid. Thus, all aliens who were receiving SSI on August 22, 1996, remain eligible for those benefits and for Medicaid to the extent Medicaid is provided to individuals in a State receiving SSI.

Medicare

Program Summary

The Medicare program is a Federal health insurance program for most people age 65 or older and certain people with disabilities. The Medicare program has two parts; Hospital Insurance (Part A) and Supplemental Medical Insurance (Part B). Generally, most people age 65 and older have access to Medicare Part A benefits, based on their own or their spouse's employment, without having to pay a premium. Medicare Part A is "premium-free" for individuals who meet the age requirement and for whom any of these three statements is true:

- They receive benefits under the Social Security or Railroad Retirement system.
- They could receive benefits under the Social Security or Railroad Retirement system but have not filed for them.
- The individual or their spouse had Medicare-covered government employment.

Individuals under 65 years of age also can get premium-free Medicare Part A benefits if they have been a disabled beneficiary under Social Security or the Railroad Retirement Board for more than 24 months.

Part B benefits are available to almost all resident citizens 65 years of age or over; to certain aliens 65 years of age or over, even those who are not entitled to Part A; and to disabled beneficiaries entitled to Medicare Part A. Most Medicare Part B enrollees are eligible for Part B because they are eligible for premium-free Medicare Part A benefits based on the work described previously. All Medicare Part B enrollees pay premiums. The premiums differ in amount based on the how the enrollees became eligible for Medicare Part B (e.g., previous employment, buy-in option, etc.).

Table 4-3 shows the number of individuals enrolled in Medicare in calendar year 1997 and benefit payments made during 1997.

Table 4-3 — Medicare Enrollees and Benefit Payments, 1997

	Medicare Enrollees (millions)	Benefit Payments (billions)
Hospital Insurance (Part A)	38.0	\$137.8
Aged	33.2	121.8
Disabled	4.8	16.0
Supplemental Medical Insurance (Part B)	36.4	72.8
Aged	32.1	62.4
Disabled	4.3	10.4

Impact of Immigration on the Medicare Program

Legal immigrants and citizens who are not otherwise eligible may opt to buy-in to the Medicare program, if they meet certain eligibility criteria. Immigrants must be over age 65 and must meet a 5-year U.S. residency requirement before becoming eligible to purchase Medicare, Part B. Individuals age 65 or older not otherwise entitled to Part A may purchase Part A coverage if they are enrolled in Part B. Legal immigrants must have resided in the United States continuously for 5 years prior to the month in which they apply for Part A. Purchasers of Part A must be enrolled in Part B, thus all immigrants who exercise this purchasing option are required to meet the 5-year residency requirement for both Parts A and B. In 1997, the number of individuals paying Hospital Insurance (Part A) Premiums totaled 352,000, which is less than 1 percent of the total number of Medicare Part A enrollees in that year. In 1994, the number of individuals opting to buy-in to Medicare Part A was 301,000. Because of the way this data was gathered and maintained, it is not possible to determine the number or percentage of immigrants included in these totals.

Other than this residency requirement, Medicare does not have any special eligibility requirements for non-citizens or non-residents. Any individual residing in the United States may enroll in Medicare if s/he meets the enrollment requirements related primarily to age and contributions (managed by the Social Security Administration), or may purchase it if contributions are not sufficient. In addition, since immigrants are younger than the general population and generally attached to the workforce, new immigrants represent a positive contribution to the Medicare Trust Funds and help support the system.

Appendix A: Additional Information on SAMHSA Programs

Federal Refugee Mental Health Program

The Office of Refugee Resettlement (ORR), Administration for Children and Families (ACF), has an intra-agency agreement (IAG) with the Refugee Mental Health Program (RMHP), Special Programs Development Branch (SPDB), Division of Program Development, Special Populations, Center for Mental Health Services (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA). The purpose of the IAG is to provide refugee mental health consultation, advice, and guidance to the refugee resettlement network and to serve as the focal point in the Federal government on mental health issues and services for refugees and torture survivors. RMHP activities include:

- Providing technical assistance and consultation on mental health and social adjustment issues to resettlement agencies and community-based organizations that are trying to establish and/or expand mental health services or collaborate with local professionals to respond to mental health needs of refugees;
- Providing consultation to ORR staff on refugee mental health program development, with particular emphasis on new program initiatives;
- Educating and providing consultation to public and private mental health clinics and programs about mental health needs and social adjustment issues of refugees, identification and management of severe mental illness in refugees, and variables involved in prevention of various behavioral problems or psychiatric disorders;
- Conducting regional workgroup meetings, conferences, and symposia on special refugee populations, including newly arrived refugee groups, or special mental health and social adjustment issues, including but not limited to issues of violence, torture, and trauma;
- Identifying refugee mental health materials, programs and expertise available nationally and maintaining an up-to-date, retrievable collection of these resources;
- Providing technical assistance and consultation in the area of refugee mental health to scientists and health professionals within SAMHSA and on behalf of SAMHSA to other agencies; and
- Responding to refugee emergencies or special initiatives during national crises (upon the special request of other Federal programs or agencies).

Substance Abuse Prevention and Treatment (SAPT) Block Grant (Formula Grant)

The SAPT Block Grant provides financial assistance to States and Territories to support projects for the development and implementation of prevention activities and treatment services directed to the diseases of alcohol abuse, alcoholism, drug abuse, and drug addiction. Funds may be used at the discretion of the Single State Authority for substance abuse prevention and treatment to achieve the statutory objectives, including the fulfillment of certain requirements. Not less than 20 percent of the funds shall be spent for programs for individuals who do not require treatment for substance abuse, to educate and counsel such individuals and to provide for activities to reduce the risk of abuse by developing community-based strategies for prevention of such abuse, including the use of alcoholic beverages and tobacco products by individuals to whom it is unlawful to sell or distribute such beverages or products. In FY 1993, States were required to expend not less than 5 percent of the grant to increase (relative to FY 1992) the availability of treatment services designed for pregnant women and women with dependent children (either by establishing new programs or expanding the capacity of existing programs). A similar requirement existed for FY 1994 relative to FY 1993 levels. For FY 1995 and subsequent fiscal years, States are required to expend an amount equal to the amount expended for FY 1994 (See 42 U.S.C. 300x-22(c)). States must require programs of treatment for intravenous drug abuse to admit individuals into treatment within 14 days after they make such a request, or 120 days of a request, if interim services are made available within 48 hours. States must require any entity receiving block grant funds to routinely make available, directly or

through arrangements with other public or nonprofit entities, tuberculosis services such as counseling, testing, treatment, and States with an AIDS case rate of 10 or more such cases per 100,000 individuals (“designated States”) must carry out 1 or more projects to make available early intervention services for substance abusers at risk for the human immunodeficiency virus (HIV) disease (See 42 U.S.C. 300x-24(b)). Other statutory requirements also apply. The formula grant accounts for approximately 47 percent of all public funds made available by States and territories to more than 7,000 subrecipients, e.g., managed behavioral healthcare organizations, regional and county authorities, local governments, and community based organizations, to support the delivery of treatment services to individuals and families impacted by substance abuse. It provides the majority of funding in 26 states and 5 other jurisdictions. Additional information regarding the SAPT Block Grant program is available on CSAT’s Treatment Improvement Exchange (TIE) web site (<http://www.treatment.org>) or via the SAMHSA home page (<http://www.samhsa.gov/csat>).

Community Mental Health Services Block Grant

The Community Mental Health Services Block Grant provides financial assistance to States and Territories to enable them to carry out the State's plan for providing comprehensive community-based mental health services to adults with a serious mental illness and to children with a serious emotional disturbance; to evaluate programs and services carried out under the plan; and to conduct planning, administration and educational activities related to providing services under the plan.

The States in developing their mental health plans, which are an integral component of the application process, must address the 12 criteria of community mental health systems that are required in the law. States are given considerable flexibility in the use of the funds; however, the funds should be used to implement activities described in the mental health plan and may not be used to provide inpatient services; to make cash payments to intended recipients of health services; to purchase or improve land, purchase, construct, or permanently improve (other than minor remodeling) any building or other facility, or purchase major medical equipment; to satisfy any requirement for the expenditure of nonfederal funds as a condition for the receipt of Federal funds; or to provide financial assistance to any entity other than a public or nonprofit private entity. States are permitted to use up to 5 percent of grant funds for administrative costs related to administering the funds.

In order to ensure that Federal funds are not supplanted, States must demonstrate that they are maintaining their State expenditures for community based mental health services at the same level as the average for the previous 2 years and must maintain State expenditures for the integrated services system for children with serious emotional disturbances at not less than the FY 1994 base amount. In general, any amount paid to a State under the program shall be available for obligation until the end of the fiscal year for which the amounts were paid, and if obligated by the end of such year, shall remain available for expenditure until the end of the succeeding fiscal year.

Community involvement in the State’s planning process is another significant component of the Mental Health Block Grant. The law requires that each State have a mental health planning council that is made up of State residents that are interested in or involved in the mental health system including providers, advocates, consumers of services, or family members of consumers. The mental health planning council duties include reviewing and commenting on each State’s plan for mental health services, advocating for persons with serious mental illness and serious emotional disturbance, and monitoring and evaluating the adequacy of mental health services in the State.

Comprehensive Community Mental Health Services for Children and their Families Program

The Comprehensive Community Mental Health Services for Children and Their Families Program was authorized in 1992 in the ADAMHA Reorganization Act to provide grants to States, political subdivisions of States, Indian tribes, and tribal organizations for the provision of an array of community-based services organized into a system of care for children with serious emotional, behavioral, or mental disorders and their families. Funded initially at a level of \$4.9 million in FY 1993, the appropriation was increased in FY 1994 to \$35 million and to \$60 million in FY 1995 and FY 1996, \$70 million in FY 1997, \$73 million in FY 1998, \$78 million in FY 1999, and has been increased to \$83 million in FY 2000. The purpose of the program is to plan, develop, and implement systems of care that are comprehensive, community-based, coordinated, family-focused, and culturally competent.

The individuals served by these systems of care are persons from birth to age 21, who currently or at any time during the past year have had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet the diagnostic criteria specified within DSM-IV, that resulted in a functional disturbance. Approximately 14 to 20 percent (8 to 13 million) of all American children experience mental and emotional disturbances. Included in this group are approximately 3.5 million youngsters (5 percent of the child and adolescent population) who have serious emotional disturbances.

The Comprehensive Community Mental Health Services for Children and Their Families Program has funded 65 grants since 1993. Twenty-two grants have completed their 5-year funding cycle, and 43 currently funded grants are in the early or middle stages of development. An ongoing comprehensive evaluation of the program indicates that over 42,000 children and their families have been served. Outcome findings show notable improvements for children after 1 year in services such as: (1) **Law Enforcement Contacts Reduced** -- No law enforcement contacts were reported for 43 percent of the children who had one or more contacts in the 12 months before entering services; (2) **School Grades Improved** -- The percentage of children with average or above average school grades increased by 20 percent; (3) **Fewer School Absences** -- The percentage of children attending school very infrequently (1-25 percent of the time) decreased by 38 percent; and (4) **Mental Health Improved** -- A reliable positive change in behaviors as assessed by clinicians was observed among 36 percent of the children.

Protection and Advocacy for Individuals with Mental Illness (PAIMI) Program

The Protection and Advocacy for Individuals with Mental Illness (PAIMI) Act of 1986 (42 U.S.C. 10801 et seq.) authorized formula grant awards to protection and advocacy (P&A) systems designated by the Governors of each State and five Territories, and the Mayor of the District of Columbia. The awards are used by the State P&A systems to protect and advocate on behalf of individuals with mental illness who are abused and/or neglected, or at risk for abuse/neglect or other civil rights violations while in care or in treatment at a public or private residential facility. To ensure enforcement of the Constitutional and statutory rights (Federal and State) of individuals with mental illness, State P&A systems are empowered to pursue a variety of intervention strategies, such as administrative, systemic, legal, etc., to redress complaints of abuse, neglect, and rights violations and to protect and advocate the rights of individuals with mental illness.

Under the PAIMI Act, State P&A systems are authorized to (1) investigate suspected incidents of abuse or neglect or other violations of rights of individuals with mental illness; (2) gain access to the records of individuals with mental illness; and (3) access public and private facilities that provide care or treatment to these individuals when investigating allegations of abuse or neglect. The systems may also address issues that arise when the individual with mental illness is transported to, admitted to, or discharged from (90 days post-discharge limitation) a residential care or treatment facility. The eligibility criteria for PAIMI program services are as follows: an individual who has a significant mental illness or emotional impairment, as determined by a mental health professional qualified under the laws and regulations of the State; and who is an inpatient or resident in a facility rendering care or treatment; who is being admitted to/transported from a facility; or who is involuntarily confined in a municipal detention center for reasons other than serving a sentence from conviction for a criminal offense. Pursuant to the PAIMI Act, facilities may be public or

private, include hospitals, nursing homes, group or foster home, semi-independent or supervised housing, juvenile detention centers, homeless shelters, jails and prisons.

Each State P&A system is administered by either a multi-member governing authority or a board of directors comprising members who broadly represent and are knowledgeable of State mental health consumer needs and issues. The PAIMI Act mandates that each State P&A system establish an advisory council, comprised of at least 60 percent recipients or former recipients of mental health services or their family members, to advise the governing authority/board on policies and priorities to be carried out in protecting and advocating the rights of individuals with mental illness.

Knowledge Development and Application Program (Discretionary)

In FY 1996, the Center for Substance Abuse Treatment (CSAT) amended its discretionary grant portfolio and implemented the Knowledge Development and Application (KD&A) Program. The KD&A Program is designed to increase efficiency and effectiveness of substance abuse treatment services throughout the nation. The Knowledge Development (KD) programs, e.g., the Marijuana Treatment Program and the Wrap Around Services Impact Study (WASIS), utilize the findings of the health services research projects funded by the National Institutes of Health (NIAAA, NIDA) to replicate the interventions introduced in a controlled environment and determine if such interventions can produce similar results in a variety of clinical settings. The Knowledge Application (KA) programs, e.g., the Addiction Technology Transfer Center (<http://www.nattc.org>), the National Leadership Institute (<http://www.nli4cbos.org>), and the Knowledge Application Program, facilitate the exchange of exemplary practice information and prepare treatment providers to adopt exemplary practices that have been replicated in the field. Additional information regarding the SAMHSA/CSAT Knowledge Development and Application Programs, e.g., copies of the Guidance for Applicants and the Knowledge Development (KD) grantees is available on the SAMHSA home page (<http://www.samhsa.gov>).

KD&A Program Summary (FY 1996 and FY 1997)

Cooperative Agreement for a Multisite Study of the Effectiveness of Brief Treatment for Cannabis (Marijuana) Dependency TI 96-02 (Short title: Cannabis Dependence Treatment). The Marijuana Treatment Project (MTP) is comparing two experimental groups (Brief Treatment Group vs. Extended Treatment Group) and a control group (Delayed Treatment Control Group). The MTP recruited 450 participants (68 percent male, 32 percent female, mean age 36 years) and conducted follow-up evaluations at 4-, 9-, and 15-months post-treatment. Post-treatment follow-up rates among participants were greater than 80 percent at the three post-treatment intervals. The MTP preliminary data indicate that chronic marijuana smokers will participate in marijuana-specific treatment and will respond to treatment—the study found significant reductions in days of use after treatment.

Cooperative Agreement for Wrap-Around Services for Clients in Non-Residential Substance Abuse Treatment Programs; Evaluating Utility and Cost-Effectiveness in the Context of Changes in Health Care Financing TI 96-03 (Short title: Wrap-Around Service). The Wrap-Around Services Impact Study (WASIS) is examining the impact of treatment retention and outcome when substance abuse treatment services are augmented with an array of wrap-around services, e.g., transportation, childcare, housing, medical care, advisory legal services, educational/vocational opportunities, etc. The study involves 11 Single County Authorities, 41 service delivery units, and more than 2,000 service recipients in rural and western Pennsylvania. Preliminary WASIS findings confirm that an enriched treatment experience (Table 1-E Model for Comprehensive Alcohol and Other Drug Treatment, CSAT Technical Assistance Publication No. 11, *Treatment for Alcohol and Other Drug Abuse: Opportunities for Coordination*) contributes to retention in treatment and a reduction in substance use among services recipients. For example, the provision of child care, transportation, educational opportunities, and housing contribute independently to retention in treatment ($p < .03$), and the provision of basic needs (e.g., food, clothing) and transportation contributes independently to reduced substance use.

Cooperative Agreements for Managed Care and Adolescents TI 97-001 (Short Title: Adolescent Managed Care). This is a re-issuance of a previous Guidance for Applicants (GFA) TI 96-01 that focused on managed care for adults who are substance abusers, individuals with severe mental illness, and categorically-eligible women and children. The previous GFA, Cooperative Agreements for Managed Care and Vulnerable Populations, was co-sponsored by the three SAMHSA Centers (CSAT, the Center for Mental Health Services, and the Center for Substance Abuse Prevention). This announcement is sponsored by CSAT only and includes adolescent substance abusers who, in addition, may be involved with the juvenile justice system and/or may be receiving services in the mental health system.

The previous GFA funded 15 Study Sites and a Coordinating Center. Applications for this GFA shall be for Study Sites and a Coordinating Center. The existing Coordinating Center, Human Services Research Institute (HSRI) in Cambridge, Massachusetts, has been selected to apply for a single-source award as the Coordinating Center for this Adolescent Managed Care Knowledge Development and Application (KDA) study. Since HSRI is the Coordinating Center for the existing managed care Study Site cooperative agreements, they are in a unique position to integrate these new adolescent cooperative agreements into the ongoing initiative.

In this GFA, a collaborative, multi-site study approach will be used to evaluate the effects of different models of managed care on publicly-funded adolescents with substance abuse problems. The cooperative agreement mechanism is being used because the complexity of the program requires substantial programmatic involvement of CSAT staff to facilitate communication and coordination across projects.

Cooperative Agreements for a Multi-Site Study of the Effectiveness of Treatment for Cannabis (Marijuana) Dependent Youth TI 97-002 (Short Title: Cannabis Youth Treatments). The purpose of this program is to compare the effectiveness of a variety of interventions and treatments for adolescents (ages 12-18) meeting the criteria for cannabis dependence as currently defined by DSM-IV. It is likely that while some young people will seek treatment on their own, others will do so only under pressure from parents, schools or other agencies (e.g., juvenile justice agencies). The purpose of this program is twofold: (1) to test the relative effectiveness and cost effectiveness of a variety of interventions targeted at reducing/eliminating marijuana abuse and dependency in adolescents; and (2) to provide validated models of these interventions to the treatment field.

CSAT's Cannabis Youth Treatment (CYT) project (<http://www.chestnut.org/li/cyt>) is the largest randomized experiment ever undertaken of adolescent treatment. The CYT project has already made significant advances by developing five treatment manuals for use in clinical practice. The project has screened 1,000 adolescents, and 606 adolescents (61 percent) met the inclusion criteria. Of the 606 adolescents who met the inclusion criteria, 500 adolescents (83 percent of the screened eligibles) were recruited and randomized, and more than 70 percent of the adolescents met the criteria for completing treatment. Post-treatment client and collateral follow-up, as reported by clients and confirmed by client urinalysis and collateral interviews, is being conducted at 3-, 6-, 9-, and 12 months. The project will make comparisons of five promising approaches as well as cost and cost-effectiveness estimates for the five treatment interventions. The CYT project is being conducted by Chestnut Health Systems, Inc., Bloomington, Illinois; Operation PAR, Inc., St. Petersburg, Florida; Child Guidance Center, Children's Hospital of Philadelphia, Pennsylvania; and the University of Connecticut Health Center, Farmington, Connecticut. During the past 3 years, CSAT has funded more adolescent treatment studies than were found in the entire research literature prior to 1997.

Cooperative Agreements on Criminal Justice Diversion Interventions for Individuals with Co-occurring Mental Illness and Substance Abuse Disorders SM 97-006 (Short Title: Criminal Justice Diversion Program). This program addresses a services priority: diversion of individuals with co-occurring severe mental illness and substance abuse disorders from the criminal justice system to community treatment alternatives. It seeks to provide an empirical basis for understanding the effectiveness of pre-booking and post-booking models of criminal justice diversion in improving selected outcomes for individuals with co-occurring disorders who are alleged to have been involved in criminal activity. The primary outcomes to

be assessed include but are not limited to: criminal recidivism, time incarcerated, psychiatric hospitalization, psychiatric status, functional status, continuity of participation in treatment, homelessness, emergency treatment utilization, and frequency of substance abuse.

Grantees participating in the program, upon approval of the final evaluation plan, will study the differences in these outcomes for individuals with criminal justice encounters adjudicated without diversion and those diverted to community treatment programs in lieu of jail. In addition, a coordinated, multi-site evaluation will be used to test the relative effectiveness of different diversion models and to synthesize the intervention results at the Federal program level. In this way, the study addresses both intra-site effectiveness at the individual client level and relative effectiveness across program models. Because of the complexity of the program, requiring substantial programmatic involvement of Federal staff to facilitate communication and coordination across projects, the cooperative agreement mechanism was used.

Appendix B: Additional Information on HRSA Programs

Primary Health Care Programs

- **Community and Migrant Health Centers**

Community and Migrant Health Centers (C/MHCs) provide culturally sensitive, family-oriented preventive and primary health care services. They also provide essential ancillary services such as dental, laboratory test, X-ray, and pharmacy services. In addition, many centers provide other health and community services such as transportation, translation, nutrition, and health education. Health center services are tailored to meet the specific needs of the communities they serve, including the needs of special population groups, such as migrant farmworkers and individuals who are homeless.

- **Health Care for the Homeless**

The Health Care for the Homeless (HCH) Program emphasizes a multi-disciplinary approach to delivering care to homeless persons, combining aggressive street outreach with integrated systems of primary care, mental health and substance abuse services, case management, and client advocacy. Emphasis is placed on coordinating efforts with other community health providers and social service agencies.

- **Health Services for Residents of Public Housing**

The mission of the Public Housing Primary Care (PHPC) Program is to provide residents of public housing with increased access to comprehensive primary health care services through the direct provision of health promotion and disease prevention activities and primary health care services on the premises of public housing developments, or at least other locations immediately accessible to residents of public housing.

- **Healthy Schools, Healthy Communities Program**

The Healthy Schools, Healthy Communities (HSHC) Program provides comprehensive primary care and preventive health care services including ancillary and enabling services. These services are culturally sensitive, appropriate, family-oriented and tailored to meet the specific needs of the community and youth served.

- **National Hansen's Disease Program**

The National Hansen's Disease Program (NHDP) offers health care to Hansen's Disease (HD) patients at Carville, Louisiana, at other contract supported locations in the Baton Rouge area, and in grant supported outpatient regional clinics. The NHDP also coordinates with local health agencies, Medicare and Medicaid agencies to assure care for HD patients.

Approximately 700 center grantees with over 3,000 sites across the United States and its territories provide primary health care for 8.3 million underserved persons. For FY 1997, the Community Health Center program, which includes funding for Migrant Health Centers, Health Care for the Homeless, Health Services for Residents of Public Housing programs, and Healthy Schools, Healthy Communities, was appropriated \$802 million.

Of the \$802 million appropriated in FY 1997, the MHC program was appropriated \$68.6 million and provided services to over 550,000 migrant and seasonal farmworkers and their families. The HCH program (which includes funding for the HSHC Program) was appropriated \$69.3 million and provided services to nearly 438,000 clients. The PHPC Program was appropriated \$9.8 million and served more than 44,000 clients. The NHDP was appropriated \$17.1 million in FY 1997 and provided services to 125 residents and over 3,000 ambulatory patients.

Maternal and Child Health Block Grant

The Maternal and Child Health (MCH) Block Grant program is a Federal/State partnership program designed to improve the health of mothers, children and adolescents. The populations served by these grants are primarily low income, uninsured, disadvantaged mothers and infant children. States use block grant funds to provide preventive and primary health care to pregnant and postpartum women and to infants, children, and adolescents, as well as specialized services to children with special health care needs. States also use the funds to support initiatives that address State- and community-specific needs, public health screening, assessment, health education, and disease prevention.

In FY 1995, the program provided health services for approximately 16,973,487 women, infants, children, children with special health care needs, and others (Maternal and Child Health Bureau Report, 1994-1995, p. A-16). Additionally, the figures for FY 1996 and FY 1997 show that 18,768,852 and 24,014,719 people, respectively, were served by the MCH Block Grant Program (MCHB Report, 1996, p. A-10, and the Title V Information System, respectively).

A special set-aside of the Block Grant funds special projects of regional and national significance (SPRANS) by providing support for research in such areas as genetic diseases and hemophilia and training for providers of such services. In FY 1995, the MCH Block Grant Program was appropriated \$683.9 million, and of this amount, \$101 million was set aside for SPRANS projects. Respectively, the MCH Block Grant appropriations were \$678.2 million and \$681.0 million for FYs 1996 and 1997.

The Community Integrated Service Systems grants made through the MCH Block Grant help to build healthy homes for mothers and children. Rooted in the communities they serve, integrated service systems reach out to families in need and provide a range of services in ways that accommodate their clients' culture and living circumstances.

The Traumatic Brain Injury (TBI) program, also funded with MCH Block Grant set-aside funds, supports activities by States that implement Statewide systems that ensure access to comprehensive and coordinated TBI services.

During FYs 1995-97, the Healthy Start Program supported interventions aimed at decreasing contributing factors to infant mortality rates in more than 22 communities with infant mortality rates at least 1.5 times the national average. Each Healthy Start site creates its own menu of services, but most include outreach to women and families at high risk for premature birth and premature death, coordination and case-by-case management of services to women and their infants, family education, and services for fathers. The Healthy Start Program was appropriated \$104.2 million for FY 1995, \$92.8 million for FY 1996, and \$95.9 million for FY 1997.

The Emergency Medical Services for Children program aims to enhance and expand delivery of emergency medical services to acutely ill and seriously injured children. The goal of the program is to reduce child and youth mortality and morbidity sustained as a result of severe acute illness or trauma. The EMSC Program was appropriated \$9.9 million for FY 1995, \$10.8 million for FY 1996, and \$12.5 million for FY 1997.

Ryan White Comprehensive AIDS Resources Emergency (CARE) Act Programs

Part A (Title I) of the CARE Act authorizes grants for outpatient and ambulatory health and support services to Eligible Metropolitan Areas (EMAs) with a cumulative total of more than 2,000 cases of AIDS for the most recent 5-year period. These grants fund systems of community-based care composed of approximately 25 categories of medical and other health and social support services for individuals with HIV in EMAs. These services are intended primarily for low income/underinsured people living with HIV/AIDS.

Part B of the CARE Act provides grants to States and territories for the provision of more than 25 types of medical and other health and social support services delivered primarily through regional HIV service delivery consortia for individuals with HIV, the provision of home and community-based case, support for State AIDS Drug Assistance Programs and for Health Insurance Continuation Programs for low-income persons with HIV disease.

Part C of the CARE Act provides funding to outpatient, primary care service providers for HIV early intervention services that are not otherwise reimbursable. Early intervention services aimed at preventing and/or reducing HIV-related morbidity are emphasized by these programs as part of the program of comprehensive care. Early intervention consists of the medical, educational, and psychological services designed to prevent the further spread of HIV, forestall the onset of illness, facilitate access to services, and to provide psychosocial support to HIV-infected individuals and their families.

The purpose of Part D of the CARE Act is to improve and expand the primary care and support services for children, youth, women and families in order to increase access to comprehensive, coordinated, community-based family-centered systems of care.

In FY 1995, \$356.5 million was appropriated for the Title I program; \$198.1 million for Title II, \$52.3 million for Title III; and \$26 million for Title IV.

In FY 1996, \$391.7 million was appropriated for the Title I program; \$260.8 million for Title II, \$56.9 million for Title III; and \$29 million for Title IV.

In FY 1997, \$449.9 million was appropriated for the Title I program; \$416.9 million for Title II, \$69.6 million for Title III; and \$36 million for Title IV.

Social Security Retirement, Survivors, and Disability Insurance (RSDI)

Program Summary

The RSDI program is designed to partially replace the income that is lost by a worker and/or his or her family when the worker retires in old age, becomes severely disabled before retirement age, or dies. About 97 percent of the jobs in paid employment and all self-employment are covered under Social Security.

Impact of Immigration on RSDI Program

The RSDI program generally treats aliens the same as U.S. citizens. There are two exceptions, as follows:

- Under the alien nonpayment provision, a beneficiary who is not a citizen or national of the United States and has been outside the United States for 6 consecutive calendar months may not be paid benefits beginning with the seventh month of absence. Benefits resume when the beneficiary returns to the United States and remains for 1 full calendar month. Certain exceptions in the law to this general rule allow many aliens to receive their benefits outside the United States without interruption. These exceptions are based, for the most part, on the citizenship of the individual.
- Entitled aliens who are deported for certain reasons under the INA may not be paid benefits. Benefits may again be payable if the deported alien is subsequently admitted for permanent residence by the INS.

Table 4-4 — Aliens Not Paid RSDI Benefits Under Nonpayment Provisions, By Selected Month

Month	Nonpayment After 6-Month Absence	Nonpayment Due to Deportation
March 1992	13,103	762
March 1995	16,689	951
March 1998	18,613	950
March 1999	18,581	956
August 1999	18,943	960

Note: Figures are not available for 1993 or 1994.

Some aliens enter the United States illegally. Others enter legally but lose their status because they remain in the United States beyond the period of their authorized stay. Many of these aliens work in the United States long enough to become insured for RSDI benefits.

For claims filed before December 1, 1996, individuals in the United States meeting RSDI eligibility requirements are paid benefits without regard to citizenship or alien status. However, effective with applications filed December 1, 1996, or later, an alien must be lawfully present in the United States, as defined by the Attorney General, to receive RSDI benefits in the United States.

**Table 4-5 — Number of Aliens Affected by the Lawful Presence Provisions,
By Selected Month**

Category of Aliens Affected by Lawful Presence Provision	August 1997	November 1998	October 1999
LAPR aliens and other aliens not needing reverification of lawful presence	13,654	27,584	37,475
Aliens needing reverification of lawful presence in the United States	1,060	2,187	3,356
Subtotal: Lawfully present aliens	14,714	29,771	40,831
Aliens in the United States who are not lawfully present and whose benefits are suspended	732	782	1,146
Aliens who have failed to cooperate in providing evidence of lawful presence in the United States and whose benefits are suspended	908	711	928
Subtotal: Aliens suspended due to failure to meet lawful presence requirements	1,640	1,493	2,074

Enumeration Process (Issuing Social Security Numbers)

Program Summary

The nine-digit Social Security number (SSN) was originally intended only to keep track of the earnings of people who worked in jobs covered under the Social Security program. By the early 1970's the use of the number expanded as the government and private sector increasingly used it as a multipurpose identifier. Because of the risk of fraud and widespread use of the SSN and the SSN card, Congress enacted legislation requiring all applicants for SSNs to provide evidence to establish age, identity, and citizenship or alien status.

An individual, whether citizen or alien, needs an SSN to obtain a job, pay taxes, or receive benefits under many government benefit programs. SSA issues SSN cards to those aliens admitted for permanent residence and to some admitted on a temporary basis, with or without work authorization.

Aliens, like all applicants, must meet certain requirements to obtain SSNs. In addition to providing evidence of age, identity, and alien status, applicants age 18 and older applying for original SSN cards must appear for a personal interview. Lawful aliens who want SSN cards for work purposes must prove they are authorized to work, usually by showing their INS documents. SSA issues unrestricted SSN cards to permanent resident aliens and refugees. In September 1992, SSA began issuing SSN cards with the legend "VALID FOR WORK ONLY WITH INS AUTHORIZATION" to aliens lawfully admitted to the United States with temporary work authorization. SSA issues SSN cards with the legend "NOT VALID FOR EMPLOYMENT" to lawful aliens not authorized to work who need an SSN for non-work purposes (for example, to obtain a driver's license in a State that requires an SSN for that purpose). In February 1996, SSA began defining a valid non-work reason as a Federal, State, or local statute or regulation that requires the individual to provide an SSN to obtain the benefit or service. SSA issues SSN cards to illegal aliens only when they will be paid benefits under a program financed in whole or in part from Federal funds. They receive cards annotated "NOT VALID FOR EMPLOYMENT."

Impact of Immigration on SSN Issuance

Each year, SSA issues millions of original and replacement SSN cards. About one-fourth of the original cards and about 7 percent of the replacement cards are issued to aliens. The majority of the cards go to aliens who are authorized to work, as described above. The totals for FYs 1992 through 1996 are shown in Table 4-6.

Table 4-6 — Original and Replacement SSN Cards Issued: FYs 1992-1996

Year	Total Issued	Total Issued to Aliens	Percent of Total Cards Issued Which Were Issued to Aliens	Percent of Cards Issued to Aliens Who Were Work Authorized
Original SSN Cards				
1992	7 million	1.6 million	23	74
1993	6.2 million	1.5 million	24	73
1994	6 million	1.4 million	23	62
1995	6 million	1.5 million	25	63
1996	5.7 million	1.3 million	23	76
Replacement SSN Cards				
1992	10.7 million	0.765 million	7	91
1993	10.7 million	0.800 million	7	92
1994	10.4 million	0.790 million	8	93
1995	11.2 million	0.795 million	7	91
1996	10.9 million	0.774 million	7	95

Supplemental Security Income (SSI)

Program Summary

The SSI program provides cash assistance directly to aged, blind, and disabled persons to help bring their income up to a Federally established minimum level. SSA administers SSI payments nationwide. Eligibility has been limited to individuals (and their eligible spouses) who are age 65 and over, blind, or disabled; are U.S. citizens or certain aliens; and whose countable income and resources fall below Federally established levels.

SSI operates as a program of last resort. Applicants are required to apply for all other benefits for which they may be eligible before evaluation for SSI eligibility. The SSI program then provides monthly payments to make up the difference between countable income and the minimum income floor established by statute. The minimum income in calendar year 1998 was \$494 a month for individuals and \$741 a month for individuals with an eligible spouse.

There is a close relationship between the SSI program and the Medicaid Program. In all but 18 States, the application for SSI is also an application for Medicaid. Seven States and the Commonwealth of the Northern Mariana Islands use the SSI eligibility criteria to determine Medicaid eligibility but require a separate application for Medicaid. Finally, 11 States use at least 1 Medicaid eligibility criterion that is more restrictive than the SSI program.

Eligibility of Various Categories of Aliens in the SSI Program

Prior to August 22, 1996, to be eligible for SSI benefits, an individual had to be a U.S. citizen or national, an alien lawfully admitted for permanent residence, or an alien who was a permanent resident under color of law (PRUCOL).

Legislation enacted on August 22, 1996 (and subsequently amended), eliminated the PRUCOL category for almost all aliens. Under current law, to be SSI-eligible an alien must be in a “qualified” status and meet one of the exceptions to the general bar on eligibility that applies to qualified aliens.

Qualified aliens include: Lawfully admitted permanent residents (LAPRs); refugees admitted to the United States pursuant to section 207 of the INA; asylees pursuant to section 208 of the INA; parolees under section 212(d)(5) of the INA for a period of at least 1 year; an alien whose deportation has been withheld under section 243(h) of the INA as in effect prior to April 1, 1997, or whose removal has been withheld under section 241(b)(3); an alien granted conditional entry pursuant to section 203(a)(7) of the INA as in effect prior to April 1, 1980; Cuban and Haitian entrants as defined in section 501(e) of the Refugee Education and Assistance Act of 1980; and certain aliens who have been battered or subjected to extreme cruelty or whose children or parents have been so treated.

Exceptions that permit qualified aliens to receive SSI include (but are not limited to): LAPRs who can be credited with 40 qualifying quarters of work, qualified aliens with U.S. military active duty or veteran status, and qualified aliens who were lawfully residing in the United States on August 22, 1996, and are blind or disabled. In addition, nonqualified aliens who were receiving SSI on August 22, 1996, may remain eligible as long as the PRUCOL status and all other SSI eligibility criteria are met.

Program Size

Table 4-7 shows the Federal funds for 1992-1998; the total number of recipients (citizens and aliens) of SSI program benefits in December of each year; and, in addition to Federal funds, State supplementation paid to SSI recipients.

Table 4-7 — Size of Total SSI Program, 1992-1998

Month	Persons Served (millions)		
December 1992	5.6		
December 1993	6.0		
December 1994	6.3		
December 1995	6.5		
December 1996	6.6		
December 1997	6.5		
December 1998	6.6		
	Other Resources Available to Program (billions)		
Calendar Year	Federal Funds (thousands)	Federally Administered	State Administered
1992	\$18,246,934	\$3.4	\$0.6
1993	\$20,721,613	\$3.3	\$0.6
1994	\$22,175,233	\$3.1	\$0.6
1995	\$23,919,430	\$3.1	\$0.5
1996	\$25,264,878	\$3.0	\$0.6
1997	\$25,457,387	\$2.9	\$0.8
1998	\$26,404,793	\$3.0	\$0.8

Note: Program data cover all U.S. citizens and aliens. The figures for 1992 through 1994 have been revised in light of new data from files produced in past years.

Number of Aliens in the SSI Population

The number of aliens in the SSI population in December of each year from 1992 through 1998 is shown in Table 4-8.

Table 4-8 — Aliens in the SSI Population, 1992-1998

Month	Aliens Receiving SSI Benefits
December 1992	601,430
December 1993	683,150
December 1994	738,140
December 1995	785,410
December 1996	724,990
December 1997	650,830
December 1998	669,630

Note: The figures for 1992 through 1994 have been revised in light of new data from files produced in past years.

Impact of Immigration on the SSI Program

Aliens made up 10 percent of the SSI recipients in December 1998.

Alien Participation in the Food Stamp Program

Abstract

The U.S. Department of Agriculture, through its Food and Nutrition Service (FNS), administers 15 domestic nutrition assistance programs. The Food Stamp Program (FSP) is the largest nutrition program, with explicit Federal statutory restrictions on the eligibility and participation of aliens. The National School Lunch and School Breakfast Programs condition eligibility for benefits on eligibility for a free public education.

Until the enactment and implementation of welfare reform, most immigrants admitted legally into the country were eligible to receive food stamps, provided that they met the other criteria for eligibility. Aliens eligible for benefits included legal permanent residents, refugees, asylees, and persons granted withholding of deportation. Aliens applying for food stamps had to provide acceptable documentation to verify that they were eligible aliens. Undocumented aliens have never been eligible to receive food stamp benefits.

P.L. 104-193, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), restricted the eligibility of aliens for food stamp benefits. Refugees, asylees, and persons granted withholding of deportation continued to be eligible for benefits for the first 5 years after arrival in the United States. However, legal permanent residents, the largest group of aliens who were eligible for food stamps, lost their eligibility immediately if they were not current participants in the Food Stamp Program or at their next re-certification unless they:

- were members of the armed services, veterans, or the spouse or dependent of a member of the armed services or a veteran;
- could demonstrate that they paid Social Security taxes for 40 quarters; or
- became U.S. citizens.

Even legal permanent resident aliens who met one of the exemption criteria were barred from participation in the Food Stamp Program for the first 5 years after arrival, unless they were originally admitted as refugees and later converted status.

P.L. 105-18, the Supplemental Appropriations Act for FY 1997, included authority for States to purchase food stamps from the Federal government to use for a State-funded food assistance program for legal immigrants.

P.L. 105-85, the Agricultural Research, Extension and Education Reform Act of 1998, was enacted in June 1998. This law restored eligibility to permanent resident aliens who were legally living in the United States at the time that PRWORA was enacted and who were either disabled, under age 18, or over 65 as of August 1996, when PRWORA was enacted. Additionally, the new law extended the exemption permitting food stamp eligibility of refugees, asylees, and persons granted withholding of deportation from 5 to 7 years.

On May 25, 1999, the Vice President announced new Immigration and Naturalization Service (INS) policy which clarified that receipt of nutrition assistance benefits provided by FNS does *not* make an immigrant a “public charge” – that immigrants would not be subject to deportation, denied entry into the United States, denied permanent residency, or denied citizenship because of receipt of food stamps, WIC benefits, free and reduced price school lunches, or other nutrition assistance provided by FNS.

In FY 1998, the most recent year of data on the citizenship status of FSP recipients, an estimated 1.03 million FSP recipients (5.3 percent of the caseload) were foreign-born, and of that, 616,000 were aliens (3.1 percent of the caseload). Immigrants (all foreign-born, including naturalized citizens and aliens) received 5 percent of FSP benefits; 3 percent of benefits were received by aliens.

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Introduction

The U.S. Department of Agriculture (USDA) through its Food and Nutrition Service (FNS) administers 15 domestic nutrition assistance programs (Table 4-9). Four programs (the Food Stamp Program, the Nutrition Assistance Program for Puerto Rico, Pacific Island Assistance, and Food Distribution on Indian Reservations) help meet the basic needs of low-income families and individuals. The remaining programs provide supplemental benefits to groups with special needs, especially those at different developmental stages: infants, children, child-bearing women, and the elderly.

Table 4-9 — Domestic Food Assistance Programs

The Food Stamp Program
The Nutrition Assistance Program for Puerto Rico
The Food Distribution Program on Indian Reservations
The National School Lunch Program
The School Breakfast Program
The Summer Food Service Program
The Child and Adult Care Food Program
The Special Milk Program
Special Supplemental Food Program for Women, Infants and Children
Farmers Market Nutrition Program
Commodity Supplemental Food Program
The Emergency Food Assistance Program
Pacific Island Assistance
Commodities to Charitable Institutions and Summer Camps
Nutrition Program for the Elderly

The Food Stamp Program (FSP) is the cornerstone of domestic nutrition assistance, accounting for more than half of all dollars spent in FY 1998. It provides a monthly benefit to households and individuals with low income and few assets in the 50 States, the District of Columbia, Guam, and the Virgin Islands. The Nutrition Assistance Program for Puerto Rico, Pacific Island Assistance, and the Food Distribution Program on Indian Reservations serve a similar function in Puerto Rico, on the Trust Territories, and on Indian reservations, respectively. In FY 1998, food stamp recipients received \$16.9 billion in benefits. In an average month, 19.8 million people received food stamps.

The National School Lunch Program serves children in schools and residential institutions. It is available to 98 percent of public school children and more than 90 percent of all school children. The School Breakfast Program serves the same group but is less widely available. It is most frequently found in schools serving high proportions of lower income students. The Special Milk Program primarily serves children in schools not participating in other child nutrition programs. The Child and Adult Care Food Program serves children and functionally impaired or elderly adults cared for in day care centers, family day care homes, and adult day care programs. The Summer Food Service Program provides meals to school children in needy areas during school vacations.

The Special Supplemental Food Program for Women, Infants and Children, popularly known as the WIC Program, serves low-income infants, children and child-bearing women who are found to be at nutritional risk. WIC provides nutritious supplementary food, nutrition education, and referrals to health care services. The Commodity Supplemental Food Program serves essentially the same group, and in addition provides benefits to the elderly in certain areas.

The Emergency Food Assistance Program provides commodities for home consumption through food banks and other charitable institutions. Commodities for Charitable Institutions provides commodities to

soup kitchens and similar organizations to support meal service to needy recipients. The Nutrition Program for the Elderly supplements other programs for the elderly with cash and commodities for meals in senior citizen centers and similar settings.

Four programs (the Food Stamp Program; the National School Lunch Program; the Special Supplemental Food Program for Women, Infants and Children; and the Nutrition Assistance Program for Puerto Rico) paid out nearly \$30 billion in benefits to program participants in FY 1998, 89 percent of all food assistance benefits. FSP alone provided \$16.9 billion in benefits to participants, 56 percent of all food assistance benefits in FY 1998.

Among the domestic food assistance programs administered by USDA, FSP is by far the largest with explicit Federal statutory restrictions on the eligibility and participation of aliens. (The National School Lunch Program and the School Breakfast Program condition eligibility for benefits on eligibility for a free public education.) Moreover, FSP is the only program for which any data exist on participation by immigrants. Consequently, this discussion focuses exclusively on the extent of participation by aliens in FSP.

What follows is a brief description of FSP, eligible alien categories, a system for verifying eligible alien status, and the most recent data available on alien participation in FSP.

The Food Stamp Program

Program Description

FSP is a nationwide program which helps low-income families and individuals buy the food they need to maintain a nutritious diet. In an average month in FY 1998, about 19.8 million people received food stamp benefits at an annual cost of \$16.9 billion.

The Food Stamp Act of 1977, as amended, defines the group of people who comprise a household for food stamp purposes and sets uniform criteria for their eligibility. These include a gross and net income limit, a resource limit, and a variety of non-financial criteria.

To be eligible for food stamps, the gross monthly income of most households must be at or below 130 percent of the Federal poverty guidelines (\$21,720 annually for a family of four effective October 1, 1999) and net income – after allowable deductions – must be at or below 100 percent of the guidelines. Households with an elderly or disabled member are subject only to the net income test. Gross income includes all cash payments to the household with a few exceptions that include non-recurring lump sum payments and reimbursement of certain expenses. Deductions subtracted from the household's gross monthly income to determine its net income include: a standard deduction, an earned income deduction, a dependent care deduction, an excess shelter expense deduction, a special medical deduction (for elderly or disabled persons), and a child support deduction for court-ordered payments to another household.

The value of a household's assets (excluding a home, personal belongings, and certain vehicles) is also accounted for in determining program eligibility. Most households are permitted up to \$2,000 in countable resources. Households with at least one person age 60 years or older are allowed up to \$3,000.

People can qualify for benefits only as part of a "food stamp household." In general, a food stamp household may consist of an individual who lives alone or who lives with others but usually purchases and prepares food separately; or groups of individuals who live, purchase food, and prepare meals together.

FSP includes several provisions to encourage able-bodied participants to seek and hold jobs. With certain exceptions, physically and mentally fit food stamp participants must register for and accept suitable employment. Able-bodied participants without dependents must work at least half time or participate in a qualifying work training activity to be eligible for more than 3 months in a 3-year period.

The maximum amount of food stamps a household can receive is set according to 100 percent of the June cost of the Thrifty Food Plan (TFP) for a reference family of four, adjusted for household size. (TFP is the least costly food plan developed by the Center for Nutrition Policy and Promotion at USDA, which suggests the amounts of food that could be consumed by males and females of different ages to meet dietary standards.) The maximum allotments are revised periodically to reflect changes in the cost of foods included in the TFP. The food stamp benefit issued to each household is based on the number of people in the household and the amount of net income available after subtracting allowable deductions. Monthly benefits are equal to the maximum allotment for that household less 30 percent of its net income.

Eligibility of Aliens in the Food Stamp Program

Under current regulations, an individual applying for food stamps who is not a citizen of the United States must provide acceptable documentation which verifies that he or she is an eligible alien (the exception is for those applying for disaster assistance benefits).

Prior to the enactment of P.L. 104-193, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), the following groups of aliens were considered "eligible aliens":

- those with the status of lawful permanent resident;
- those admitted as refugees;
- those granted asylum; and
- those for whom the Attorney General had withheld deportation.

PRWORA dramatically altered the eligibility of aliens for Federal means-tested programs, including the Food Stamp Program. Aliens legally in the United States became ineligible for food stamps unless they belonged to one of the groups described below:

- those admitted as refugees or asylees, or those who have had their deportation withheld within the last 5 years;
- active-duty military personnel, honorably discharged veterans, and their spouses and dependent children; or
- those with 40 or more quarters of earnings and no public assistance receipt.

Even legal permanent resident aliens who met one of the exemption criteria were barred from participation in the Food Stamp Program for the first 5 years after arrival, unless they were originally admitted as a refugee and later converted status.

PRWORA provided that those aliens receiving benefits as of August 22, 1996, were allowed to continue receiving benefits until the first of either their re-certification date or August 22, 1997. For new applicants, the alien restrictions generally became effective October 1, 1996. Section 510 of P.L. 104-208, the Department of Defense Appropriations Act of 1997, allowed aliens currently receiving benefits to continue on the caseload until the first re-certification after April 1, 1997 or until August 22, 1997.

These restrictions were modified somewhat by P.L. 105-185, the Agricultural Research, Extension, and Education Reform Act of 1998. This law restored eligibility to permanent resident aliens who were legally residing in the United States at the time that PRWORA was enacted and who are either disabled, under age 18, or over 65 as of August 1996, when PRWORA was enacted.

P.L. 105-18, the Supplemental Appropriations Act for FY 1997, included authority for States to purchase food stamps from the Federal Government to use for a State-funded food assistance program for legal immigrants.

On May 25, 1999, the Vice President announced new INS policy which clarified that receipt of nutrition assistance benefits provided by FNS does *not* make an immigrant a “public charge” – that immigrant would not be subject to deportation, denied entry into the United States, denied permanent residency, or denied citizenship because of receipt of food stamps, WIC benefits, free and reduced price school lunches, or other nutrition assistance provided by FNS.

Alien Verification in the Food Stamp Program

The Immigration Reform and Control Act of 1986 (IRCA) established the Systematic Alien Verification for Entitlements (SAVE) program, a two-level verification system developed and maintained by the Immigration and Naturalization Service (INS). Between October 1, 1988, and August 22, 1996, agencies administering FSP were required to validate the documentation of an alien applicant's status by accessing the INS database or by submitting manual verification requests to INS. However, PRWORA made use of SAVE optional.

Alien Participation in the Food Stamp Program

The most recent data available on the extent of participation by lawful aliens in FSP is based on data from the food stamp quality control system. The quality control system is an ongoing review of a sample of food stamp households to determine if they are eligible to participate and receive the correct benefit. FNS uses this sample -- consisting of approximately 51,000 participating households during the year -- to provide detailed information on the characteristics of participants, including alien status. Aliens are defined as all recipients who are not United States citizens; however, since undocumented aliens are not permitted to receive food stamps, almost all aliens are legal permanent residents, refugees, asylees, or those who have been granted withholding of deportation.

As shown in Table 4-10, aliens make up a relatively small proportion of the total food stamp caseload and receive a small fraction of the total benefits. In FY 1998, the most recent year that we have data on the citizenship status of participants, 616,000 aliens living in 351,000 households received food stamps. Non-citizens represented 3.1 percent of all food stamp recipients. They received 3.0 percent of all food stamp benefits in that year. The overwhelming majority of alien recipients were lawful permanent residents; other aliens represented only one-third of the alien caseload and only 1 percent of all food stamp recipients.

In 1998, for the first time, the number of naturalized citizen participants exceeded the number of permanent resident alien participants (409,000 versus 405,000). The total number of foreign-born persons receiving food stamps was 1 million, representing 5 percent of the caseload and 5 percent of benefits received.

In the general population, resident aliens predominately live in a small number of States (California, Texas, New York, and Florida). Consistent with this pattern, the quality control sample data suggest that alien participation in FSP is highly localized. In 1998, 157,000 alien recipients lived in California, 66,000 lived in Texas, 60,000 lived in New York, and 28,000 lived in Florida. These 4 States accounted for over 75 percent of all aliens receiving food stamps, and no other State had as many as 10,000 permanent resident aliens receiving food stamps. However, because the sample size used to estimate alien participation is relatively small, these estimates should be interpreted with care.

**Table 4-10— Citizenship Status of Food Stamp Recipients:
FYs 1995-1998**

Citizenship Type	FY 1995	FY 1996	FY 1997	FY 1998
Native Born Citizen	24,508,000	23,428,000	21,158,000	18,704,000
Naturalized Citizen	244,000	277,000	367,000	409,000
Permanent Resident	1,451,000	1,463,000	1,023,000	405,000
Refugee	384,000	377,000	265,000	198,000
Other Alien	9,000	8,000	10,000	13,000
Alien Subtotal	1,844,000	1,848,000	1,298,000	616,000
Foreign-born Subtotal	2,088,000	2,125,000	1,665,000	1,025,000
Total Caseload	26,955,000	25,926,000	23,117,000	19,969,000

Notes: Figures are based on the Food Stamp Program Quality Control System (QC) full-year data for FYs 1995 through 1998. Because the QC data are based on a sample and are weighted by household size, the individual aggregate participation numbers may vary somewhat from administrative data on Food Stamp Program participation.

Because the citizenship status is unknown for some participants, numbers will not sum to their total.

Permanent residents include those coded as having obtained legal status through the Immigration Reform and Control Act's amnesty provisions.

Refugees include those granted asylum.

Other aliens may include aliens granted withholding of deportation, non-immigrants admitted for a specified period, Mexican citizens with border-crossing cards, undocumented aliens, and non-citizens whose exact status is unknown.

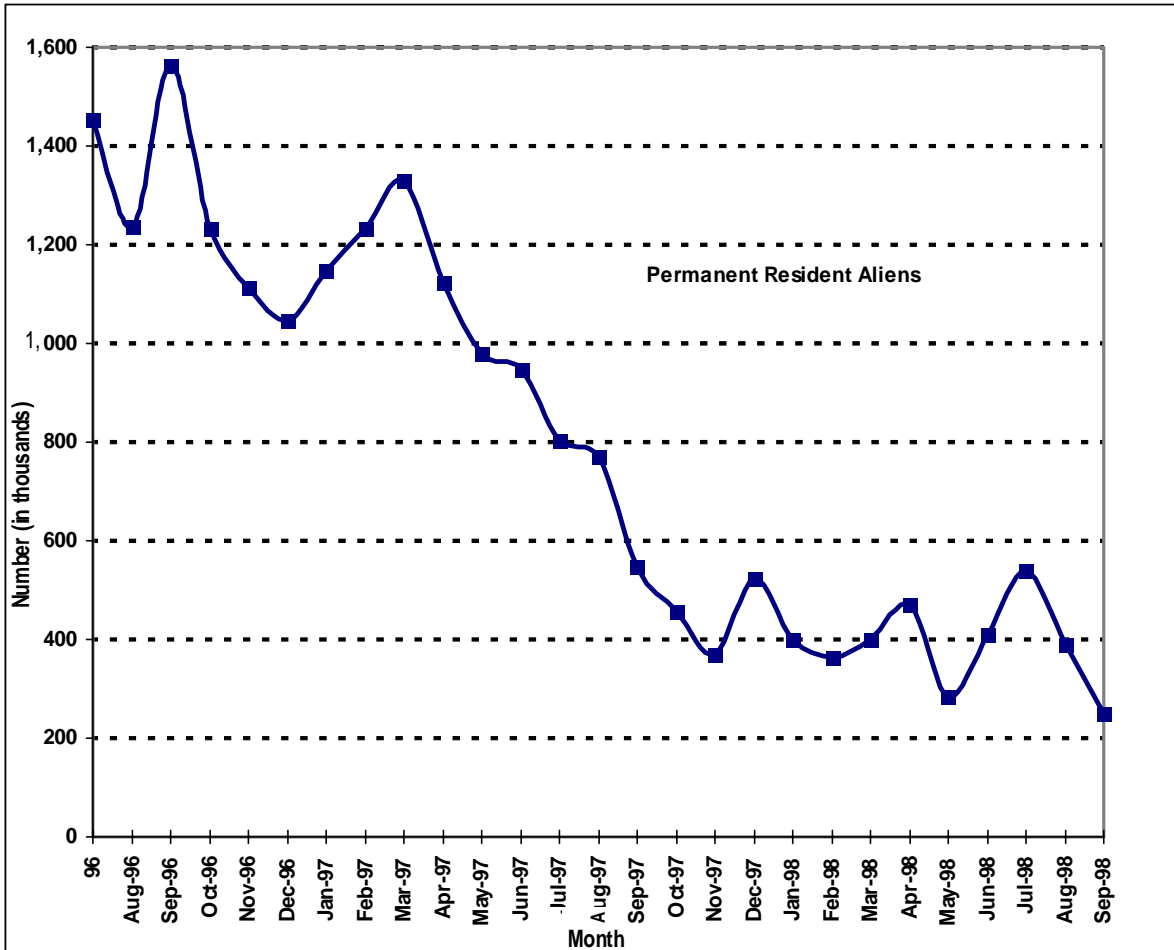
Recent Trends in Food Stamp Participation among Immigrants and Their Families

The number of people receiving food stamps fell by 8 million between 1994 and 1998, a decline of nearly 30 percent. However, while declines were steep among many subgroups of participants, declines were especially sharp among legal immigrants.

In 1994, nearly 1.5 million legal immigrants received food stamps. This number dropped sharply after welfare reform was enacted. The number of legal immigrants receiving food stamps declined steadily throughout late 1996 and most of 1997 (Chart 4-1) and stayed level in 1998. The decline was gradual throughout FY 1997. This indicates that as current immigrants left the program, they were not replaced by new immigrant participants.

Restrictions on participation by legal immigrants appear to have deterred participation by their children, many of whom retained their eligibility for food stamps. Participation among U.S.-born children living with their legal immigrant parents fell faster than participation among children living with native-born parents (Table 4-11). The number of participating children living with legal immigrants fell by 60 percent, versus 12 percent for children living with native-born parents.

Chart 4-1 — Legal Immigrant Participants in the Food Stamp Program:
July 1996 through September 1998



**Table 4-11 — Number of Children Participating in the Food Stamp Program by Citizenship Status of Parents:
FY 1996 and FY 1998 (Thousands)**

	Participants: 1996	Participants: 1998	Participation Change	Percent Change
Children Living with Legal Immigrants	1,176	333	-843	-72 %
Children Not Living with Legal Immigrants	11,486	10,070	-1,416	-12 %

Although those admitted as refugees (and asylees and those granted withholding of deportation) remained eligible for benefits if they had arrived in the United States within the past 5 years (now 7 after enactment of the Agricultural Research, Extension and Education Reform Act), the number of refugees receiving food stamps fell by nearly half. Many of those coded as “refugees” in the data may have, in fact, arrived more than 5 years ago. Another reason for the participation decline may be confusion among refugees about their eligibility, particularly if they had converted to legal permanent resident status, as many do after a year in this country.

The number of naturalized citizens receiving food stamps rose by 162,000 between 1994 and 1998, an increase of 66 percent (Table 4-12). The number of households rose by 62 percent. This increase reflects the surge in naturalizations starting in 1993.

**Table 4-12 — Number of Legal Immigrants Receiving Food Stamps by Immigration Status:
1994 and 1998 (Thousands)**

	Participants: 1996	Participants: 1998	Participation Change	Percent Change
Permanent Resident Aliens	1,453	243	-1,210	- 83 %
Refugees	379	360	-19	- 5 %
Naturalized Citizens	247	409	+162	+ 66 %
All Legal Immigrants	2,079	1,012	-1,067	- 51 %

State-Funded Food Assistance Program for Immigrants

In June 1997, the President signed into law legislation that provided authority for States to purchase food stamps from the Federal government to use in a State-funded food assistance program for legal immigrants.

The first State to implement this provision was Nebraska, which in August 1997 began providing benefits to all legal immigrants made ineligible as a result of welfare reform. Other States soon followed suit, and by September 1998, 12 States provided 175,000 legal immigrants with State-funded food stamps (either in the form of coupons or Electronic Benefit Transfer payments). Some States provided benefits to subgroups: California provided benefits to children and the elderly; New York, Illinois, and New Jersey provided benefits to children, the elderly, and the disabled; Florida provided benefits to the elderly only; Maryland provided benefits to children; and Ohio provided benefits to SSI recipients. Maine, Nebraska, Rhode Island, Washington, and Wisconsin provided benefits to all legal immigrants made ineligible.

A handful of States ran food assistance programs for legal immigrants independently of the Federal government. These included Connecticut, Massachusetts, and Minnesota, which provided benefits to all legal immigrants made ineligible; and Texas, which provided benefits to the elderly and to disabled SSI recipients.

The Agricultural Research, Extension and Education Reform Act, which was implemented in November 1999, restored eligibility to many of the groups targeted by State food assistance programs. A few States discontinued their food assistance programs, while others changed the target population. By August 1999, nine States provided State-funded food stamp benefits to legal immigrants, while four other States provided independent food assistance programs for legal immigrants. The State-funded programs provided benefits to 105,000 legal immigrants. Table 4-13 shows the State-by-State participation in these programs.

Table 4-13 — State-Funded Food Programs for Legal Immigrants: August 1999

State	Starting Date	Targeted Population	Persons Served (Monthly Estimate)*	Issuance (Monthly Estimate)*
State Funded Food Stamp Programs (Benefits Purchased from the Federal Government)				
California	09-01-97	Most legal immigrants otherwise eligible in the U.S. before 8/22/96 and certain immigrants arriving on or after 8/22/96	Coupons -- 83,973 EBT -- 9,220	Coupons -- \$4,164,802 EBT -- \$495,183
Illinois	01-01-98	Parents of FS eligible children and 60-64 yr. olds; must have been in the U.S. on 8/22/96	EBT -- 606	EBT -- \$31,550
Maine	09-01-98	Legal immigrants otherwise eligible	Coupons -- 398	Coupons -- \$19,720
Maryland	10-01-97	Children under 18 arriving in the U.S. after 8/22/96	EBT -- 360	EBT -- \$30,000
Nebraska	08-01-97	Legal immigrants otherwise eligible	Coupons -- 790	Coupons -- \$62,674
New York	09-01-97	Elderly (60-67 yr. olds) living in the same county since 8/22/96	Coupons -- 3,790 EBT -- 361	Coupons -- \$377,209 EBT -- \$30,376
Ohio (Phasing out program)	04-01-98	SSI recipients who resided in Ohio as of 8/22/96	Coupons -- 4 EBT -- 7	Coupons -- \$163 EBT -- \$483
Washington	09-01-97	Legal immigrants otherwise eligible	Coupons -- 5,073	Coupons -- \$401,695
Wisconsin	08-01-98	Legal immigrants otherwise eligible	Coupons -- 766	Coupons -- \$34,082
Total			Coupons-94,794 EBT--10,554 105,348	Coupons -- 5,060,345 EBT -- \$587,592 \$5,647,937

Independent State-Funded Food Assistance Programs				
Connecticut	04-01-98 State EBT	Legal immigrants otherwise eligible	Unknown	Unknown
Massachusetts	10-01-97 State EBT	Legal immigrants otherwise eligible	Unknown	Unknown
New Jersey	03-10-99 State EBT	Parents of FS eligible children complying with work requirements; elderly (65 or older) arriving after 8/22/96; GA unemployables	Unknown	Unknown
Rhode Island	10-01-98 State EBT	Legal immigrants otherwise eligible	Unknown	Unknown

* Estimates are based on information reported by States to USDA and are an average of the prior 3 months. "EBT" refers to "Electronic Benefit Transfer" payments.

The Triennial Comprehensive Report on Immigration

Part III

International Impacts

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CHAPTER

5

Selected Economic Impacts of International Migration

U.S. Department of Commerce
Bureau of Economic Analysis
Washington, DC 20230

Introduction

The Bureau of Economic Analysis (BEA) prepares estimates of five categories of international transactions (see attached table) related to nonimmigrant and immigrant flows: travel expenditures in the United States by foreign visitors, their related passenger fares paid to U.S. carriers, education services to foreign students, personal remittances by foreign-born residents in the United States to persons abroad, and the amount of wealth that immigrants bring with them when they enter the United States. Travel, passenger fares, and education are major components of rapidly expanding exports of U.S. services, collectively accounting for more than 38 percent of the annual totals in 1995-98. Personal remittances abroad by the foreign-born population in the United States is a component of private unilateral transfers, and immigrants' transfers are a component of the capital account. BEA does not project economic activity for future years.

Travel and Passenger Fare Exports

Travel exports include aggregate purchases of goods (food and gifts) and services (lodging, recreation/entertainment, and local transportation) by foreign residents visiting the United States for less than 1 year for business or personal reasons. Expenditures by Canadian and Mexican visitors include border transactions that often involve short stays (some less than 24 hours). Passenger fare exports are fares received by U.S. operators for transporting foreign residents between the United States and a foreign country and between two foreign countries.

The method for estimating both travel and passenger fare exports combines data on the number of foreign travelers to the United States as provided by the Immigration and Naturalization Service (INS), with average expenditures/passenger fares developed from the travel surveys conducted by the Tourism Industries Office of the International Trade Administration, U.S. Department of Commerce. Travel exports increased from \$63.4 billion in 1995 to \$71.3 billion in 1998. Passenger fare exports increased from \$18.9 billion in 1995 to \$20.0 billion in 1998. The three countries with the largest number of nonimmigrant visitors to the United States in 1998 were Japan, the United Kingdom, and Canada.

Education Exports

Foreign students are defined as individuals enrolled in institutions of higher education in the United States who are not U.S. citizens, immigrants, or refugees. The value of these students' tuition, room and board, and living expenses are recorded as private service exports. Population totals and characteristics are obtained from annual surveys of accredited U.S. institutions conducted by the Institute for International Education. These data are matched with average tuition/room/board expenditures compiled by the National Center for Education Statistics, U.S. Department of Education, to arrive at estimates of total education exports.

Education exports increased from \$7.5 billion in 1995 to \$8.9 billion in 1998. Students from Japan, China, South Korea, Taiwan, and India accounted for more than 40 percent of the foreign student population in the United States during 1995-98. Foreign students from Canada were also significant during this period.

Personal Remittances Abroad of the Foreign-born Population

Personal remittances abroad by the foreign-born population in the United States are a major component of private unilateral transfers in the U.S. international accounts. Remittance estimation is the aggregated product of three variables that are specified by country of nativity and duration of stay in the United States: population (converted to family units), average family income, and income propensity to remit abroad.

Foreign-born population levels and associated socioeconomic characteristics are obtained from the decennial censuses of 1980 and 1990 which identify population totals, family totals, and average family incomes by country of nativity and by duration of U.S. residency (in 5-year intervals). Annual inter-decennial flows are based on data from INS and the U.S. Census Bureau's Current Population Survey. These data are combined with remittance/income relationships of the foreign-born population (arrayed by

country of nativity and 5-year intervals of U.S. residency) that were estimated from income and remittance questions on a sample survey of legalized aliens conducted by the INS for 1987 activity and a follow-up survey of the same sample conducted by the U.S. Department of Labor for 1991 activity. The source data and survey results support the following broad conclusions: a significant number of families do not remit, even for recent immigrants; the proportion of income remitted is significantly higher for persons from developing countries than from developed countries; the proportion of income remitted is highest in the initial years of U.S. residency and drops sharply thereafter; and the proportion of income remitted is higher for single foreign-born persons than for foreign-born persons with family in the United States.

Remittances increased from \$11.8 billion in 1995 to \$15.5 billion in 1998. More than 50 percent of remittances went to countries of South and Central America during 1995-98.

Immigrants' Transfers

Immigrants' transfers are the amount of wealth that immigrants bring with them when they enter the United States. The estimates are based on the number of individuals immigrating to the United States each year, the per capita gross domestic product (GDP) of their home country, and wealth-to-income ratios.

Immigrants entering the United States include both legal and undocumented foreign-born individuals who expect to reside in the United States for more than 1 year. Legal immigration totals by country of birth and year of entry are from the INS, and estimates of undocumented foreign-born individuals are based on INS published work.

Annual per capita GDP, converted into U.S. dollars, is used as a proxy estimate of income for immigrants from each country for each year of entry. Population and GDP estimates are from the United Nations and the International Monetary Fund.

The wealth-to-income relationships were derived from periodic current population reports from the Bureau of the Census, based on a longitudinal study on wealth and asset ownership of households in the United States for 1983, 1988, 1991, and 1993.

In order to arrive at estimates of immigrant transfers, the number of immigrants from each country for each year is multiplied by the associated per capita GDP of each country converted into U. S. dollars, with the resulting product for each country further multiplied by the wealth-to-income ratio derived from U. S. relationships.

Immigrants' transfers increased from \$0.66 billion in 1995 to \$0.76 billion in 1998. More than 45 percent of immigrant transfers' were from Canada and the countries of Central and South America during 1995-98.

Table 5-1 — Selected U.S. International Accounts and Components¹
1995-1998 (Millions of dollars)

	CY 1995	CY 1996	CY 1997	CY 1998
U.S. Service Exports	217,637	237,749	258,828	263,661
Travel – Exports	63,395	69,751	73,301	71,250
Passenger Fares – Exports	18,909	20,413	20,789	19,996
Other Private Services – Exports	63,502	72,412	85,566	92,116
Education – Exports	7,515	7,887	8,343	8,964
Private remittances and other transfers, net	20,796	22,384	25,341	26,668
Personal Remittances from the United States	11,846	12,860	14,132	15,491
Immigrants' Transfers	658	773	681	756

¹Account estimates appear in table 1 of the international transactions presentation in the July 1999 issue of the *Survey of Current Business*: Services - line 4, Travel - line 6, Passenger fares - line 7, Other private services - line 10, and Private remittances and other transfers, net - line 38.

Source: U.S. Department of Commerce, Bureau of Economic Analysis, Balance of Payments Division

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The Foreign Policy Impact of Immigration

Abstract

Immigration issues continue to play an important role in the foreign relations of the United States. U.S. immigration laws have traditionally been generous, supporting family reunification and refugee protection and providing a source of skilled labor. Because of its democratic style of government and sound economic opportunities, the United States has long been the favored destination of large numbers of immigrants. The participation of immigrants in the fabric of American life has strengthened the relationships between their native countries and the United States.

Many countries strongly support a generous U.S. immigration and asylum policy, which provides not only an outlet for workers and professional unable to find employment at home, but also for refugees looking for protection from persecution. As a result, many foreign governments pay close attention to U.S. immigration law and policy. Many have closely followed the effect of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 on their nationals in the United States. Foreign governments will follow continuing public and Congressional debates as to whether additional changes to the law should be made.

The number of immigrant visas issued by the State Department from 1995 to 1997 fluctuated. In 1995, 409,405 immigrant visas were issued reflecting a 9 percent decrease from 1994. This decrease was due largely to the ending of the Transition Visa Program for spouses and minor children of persons who were legalized under the Immigration Reform and Control Act of 1986. In 1996, 425,930 immigrant visas were issued, reflecting a 4 percent increase from 1995. This increase was due largely to a greater number of immediate relative visas available. In 1997, 418,889 immigrant visas were issued, reflecting a 1.7 percent decrease from 1996. This slight decrease was attributable to lower limits on family-sponsored preference categories.

U.S. Department of State
Bureau of Population, Refugees, and Migration
Washington, D.C. 20520

Western Hemisphere

The United States continued to be a magnet for immigration from the Western Hemisphere. Geographic proximity and increasingly close economic relationships with its neighbors have continued to promote immigration in recent years. The Western Hemisphere accounts for the largest volume of immigration from any region in the world.

Mexico

Mexico, with a population of 95 million and an annual growth rate of nearly 2 percent, provided more legal and illegal immigrants to the United States than any other nation. From 1995 to 1997, Mexico remained at the head of the top 10 countries receiving immigrant visas to the United States. Mexico remained an oversubscribed country, meaning that it produced more visa applications than were available to the country. Also in 1995 and 1997, Mexico was responsible for one of the highest numbers of U.S. asylum applications.

Mexico's level of economic prosperity had a direct impact on the United States as it affects trade and migration. In 1994, Mexico joined the North America Free Trade Agreement (NAFTA) which has increased economic ties among the United States, Canada, and Mexico. This trade agreement helped the economy of Mexico grow by 3.5 percent in 1994, and Mexico now accounts for 10 percent of U.S. trade. However, in 1995, Mexico experienced a severe financial crisis, which required international financial assistance, including a \$20 billion loan from the United States. So long as significant disparities in wages and job opportunities remain between the U.S. and Mexican labor markets, permanent or seasonal migration to the United States will continue to have strong appeal to Mexicans.

The U.S. – Mexico Binational Commission is a cabinet-level body that meets annually to address issues of concern on both sides of the border, including migration and border affairs. The Commission has working groups, including one on Migration and Consular Affairs, which maintain a regular dialogue on immigration issues.

The Illegal Immigration Reform and Immigrant Responsibility Act of 1996 addressed changes in border enforcement, alien smuggling, document fraud, employment of aliens and public benefits, all of which directly affected Mexican migration to the United States.

Haiti

Immigration has long been an important issue in our bilateral relationship with Haiti. Haiti is the least-developed country in the Western Hemisphere and one of the poorest, most densely populated countries in the world. Recent large-scale emigration to the United States, and secondarily to Canada and Caribbean neighbors, has resulted in about one out of every six Haitians living abroad.

In 1995, fostering democracy in Haiti was important for many reasons, not the least of which is its geographical proximity to the continental United States. In addition to the steady stream of legal immigrants to the United States, tens of thousands of undocumented Haitian migrants were intercepted at sea by the U.S. Coast Guard during the 1991-1994 period of illegal military rule. In 1994, migrants who refused to return to Haiti were provided a safe haven at Guantanamo Bay Naval Station in Cuba. Subsequent U.S. military intervention, resulting in President Aristide's ultimate return to power, ended the exodus.

From 1995 to 1997, Haiti was one of the top 10 countries whose nationals were issued U.S. immigrant visas. The United States also received one of the largest numbers of asylum applications from Haitians. In December 1997, the United States conferred Deferred Enforcement Departure status on Haitians who were paroled into the United States or who had not applied for asylum.

The refugee admission ceiling for Haiti decreased over 50 percent from 1995 to 1997. This was a result of continued democratic development and regional peace efforts, which virtually ended the flight of persons. In 1996, the in-country screening program was closed. If unrest arises again, the potential remains for mass outflow of Haitian migrants.

Dominican Republic

Immigration to the United States from the Dominican Republic has decreased since 1995. The number of immigrant visas issued to Dominicans declined approximately 50 percent since 1994. The stricter affidavit-of-support requirement could have contributed to the decline. Despite this decrease, the Dominican Republic consistently remains one of the top 10 countries to receive U.S. immigrant visas and is therefore considered a high admission country.

The United States has a strong interest in a democratic, stable and economically healthy Dominican Republic. Its standing as the largest Caribbean economy, the second largest in terms of population and land mass, and its proximity to the United States and other small Caribbean nations make the Dominican Republic an important partner in hemispheric affairs. The Dominican Republic has worked closely with U.S. law enforcement officials on issues such as control of contraband and illegal immigration from Haiti.

Cuba

Migration is one of the few areas in which the U.S. government and the Cuban government have a formal bilateral agreement. The original agreement was signed in 1984 in the wake of the Mariel Boatlift. Since that time, immigrant visa and refugee processing at the U.S. Interests Section in Havana has frequently been affected by the overall state of U.S. – Cuba relations.

The Castro regime has altered between obstruction and facilitation of departures and has not hesitated to play the “migration card.” In the summer of 1994, the Cubans stopped enforcing restrictions on departures. The resulting outflow of “rafters” into the Florida straits led to a new agreement in which the United States promised to admit 20,000 persons each year with immigrant visas, refugee or parole status, who would apply and be interviewed in Havana. This agreement resulted in a new U.S. policy of returning rafters to Cuba after asylum screenings.

Under the 1994 agreement, it was anticipated that parolees, some of whom are selected in a special lottery to reach the 20,000 annual minimum, would augment immigrant visa and refugee cases. Yet, despite this new agreement, the issuance of immigrant visas in Havana peaked at 6,040 in 1995 and declined to 2,999 in 1997. In 1997 the Government of Cuba imposed extraordinarily high exit fees, which could explain the decreasing numbers. The vast majority of the refugee admissions in 1996 and 1997 were identified through the in-country processing in Havana pursuant to the 1994 agreement.

Canada

Canadian and U.S. immigration officials have a history of close cooperation on immigration issues. Like the United States, Canada is a major immigrant and refugee resettlement country that also faces serious problems of controlling the entry of an unprecedented wave of illegal immigrants and individuals seeking asylum. In the early 1990’s, the Canadian government passed new comprehensive legislation that reformed Canadian immigration policy. In particular, the new legislation streamlined asylum processing. The Canadians have been very interested in European efforts to standardize asylum policies and have suggested that similar efforts be made in North America. Canada and the United States have a continuing dialogue on asylum and immigration issues of mutual concern, particularly the questions of border security and how to reduce asylum shopping.

Europe

Poland

Poland made great progress in the 1990's toward achieving a fully democratic government and a market economy. Poland applied to become a full member of NATO and has entered into negotiations towards accession to the European Union.

Immigration issues have long been a major concern in Poland because of strong family ties with the Polish community in the United States. In 1996, the number of immigrant visas issued to Polish nationals made Poland one of the top 10 countries to receive U.S. visas. The demand for immigration to the United States remained high.

Ireland

Emigration has long been a vital element in the U.S.–Irish relationship. Developments in U.S. immigration law are of major importance to the Irish government and public and are a frequent topic in official discussions and parliamentary debate. Emigration patterns have been closely linked to Irish economic conditions, and emigration to the United States has declined significantly with Ireland's economic boom in the 1990's. For the first time in modern history, immigration to Ireland, especially of non-Europeans, is a growing phenomenon.

Ireland has benefited from several programs to increase diversity among the immigrant population to the United States.

Russia and the Commonwealth of Independent States

Since the dissolution of the Soviet Union in December 1991, increased freedom of travel has become standard in Russia and most of the newly independent states (NIS). Therefore, the number of Russian visa applicants rose dramatically from 1995 to 1997.

The United States continues to operate a major refugee resettlement program from the former Soviet Union in categories of religious minorities prescribed by statute and other individuals of concern. During the period from 1995 to 1997, the highest number of refugees resettled in the United States were from Russia.

In 1995, the refugee admissions ceiling for the former Soviet Union and Eastern Europe was 48,000. This ceiling was reduced in 1996 to 45,000, as there were a decreased number of asylum seekers from Eastern Europe due to democratic reforms. The admission ceiling was increased to 48,000 in 1997 with the largest numbers of refugees coming from the NIS and the former Yugoslavia.

Bosnia

A Bosnian refugee admission program was established in 1993 for Bosnians of special humanitarian concern to the United States. Those eligible were vulnerable Bosnian Muslims and couples in mixed marriages referred for resettlement by the United Nations High Commissioner for Refugees (UNHCR). This group included former detainees, torture victims, and women victims of violence as well as Bosnian Muslim relatives of U.S. citizens, lawful permanent residents, asylees, or refugees. In 1996, the 3,000 unallocated refugee funded admissions were used to address the ever-growing number of Bosnians seeking asylum. The numbers of refugees from Bosnia increased from 1,485 in 1995 to 21,357 in 1997. Additionally, the 1997 Dayton Peace Accord expanded eligibility to all Bosnians to allow reunification of close family members, regardless of ethnicity.

In 1996, the United States granted Temporary Protected Status to Bosnians living in the United States. In 1995 and 1996, Bosnian asylum applications had among the highest approval rates. In 1996 and 1997, Bosnians were the third largest group of refugees resettled in the United States.

Middle East

In Lebanon, Syria, Jordan and Egypt, depressed economies continued to create pressures for emigration, particularly to the United States. The return home of Egyptian, Jordanian and Palestinian guest workers from the Gulf further added to this impetus. The exodus of Lebanese during the 16-year civil war continued to have derivative effects, as family members joined “anchors” already in the United States.

Terrorism by radical Islamic groups, especially the 1993 World Trade Center bombing in New York City and concerns about the potential for future acts of terrorism, resulted in stricter security measures in the screening of immigrants worldwide. These measures included improved name check capabilities at overseas U.S. missions.

Israel continued to address the challenge of integrating the huge influx of immigrants from the former Soviet Union into Israeli society. Many had subsequently sought onward emigration to the United States.

Iraq

The number of Iraqi refugees resettled in the United States continued to decline from its peak in 1995 of 4,984 admissions to 2,679 admissions in 1997. Even with this decline, Iraqi asylum applicants had the highest approval rates, at 94.7 percent in 1997. Post-Gulf War refugee application processing for Iraqis continued in Turkey, in processing posts in Europe, and from camps in Saudi Arabia. In 1995, 3,000 Iraqi refugees were resettled from the Rafha refugee camp in Saudi Arabia, where the United States has participated since 1992 in a multi-country resettlement effort led by the UNHCR.

The refugee admission ceiling for the Middle East/South Asia region declined from 5,000 in 1995 to 4,000 in 1997. This decrease was due to indications from the Government of Saudi Arabia that it would fund resettlement of a significant number in Iran.

South Asia

Emigration from India, Pakistan and Bangladesh continued at high levels in 1995 to 1997. While many immigrants from South Asia arrive bearing family or employment-based visas, illegal immigration through identity or document fraud remains significant.

India

India ranked fourth in the top 10 countries to receive U.S. immigrant visas in the 1995-1997 period. India's explosive economic growth in certain sectors, especially the computer industry, sparked an ever-rising demand for employment-related non-immigrant visas, as the Indian computer sector developed a link with its U.S. counterpart. Although such visas do not bestow U.S. permanent residence on the bearer, in practice, many such visa holders subsequently adjust status to U.S. permanent residence and eventually become U.S. citizens. Large numbers of Indian students who come to the United States for university education also eventually adjust to U.S. permanent resident status. The movement of Indian computer experts and students adds to well established immigration patterns generated by natives of India already in the United States, thus maintaining immigration from India at significant levels.

Pakistan

Similarly, emigration from Pakistan continued unabated from 1995 to 1997. Pakistanis continued to be one of the top 10 nationalities who are issued U.S. immigrant visas. There were large numbers of unemployed and underemployed young men and women in Pakistan, even those with some technical and professional skills, who were eager to seek better prospects outside Pakistan.

East Asia

China

Since the 1980's, Chinese students have comprised the largest foreign student population in the United States. The experience of the U.S. Embassy in Beijing and Consulates General in Guangzhou, Shanghai, Chengdu and Shenyang is that Chinese students generally prolong their stay in the United States, exhausting all educational possibilities and then seeking legal means to adjust status.

The number of immigrant visas issued to the Chinese was consistently in the top 10 countries receiving U.S. immigrant visas from 1995 to 1997. China posts saw a dramatic increase in fraudulent employment-based non-immigrant visa applications. Guangzhou reports that many applications in this visa category were based on fraudulent or non-existent businesses or fraudulent job offers.

Chinese organized alien smuggling has been of particular concern to a number of government agencies. Efforts to engage the Chinese government and other countries with known staging areas for smuggling Chinese into the United States have increased significantly since 1990.

In 1996, Congress passed legislation that modified the definition of *refugee* in a way favorable to Chinese asylum applicants. The law defined resistance to persecution under China's coercive one-child policy (e.g. forced sterilization and abortion) as one form of persecution for political opinion.

Hong Kong

Hong Kong has a steadily increasing population, reaching 6.8 million in 1998. Hong Kong reverted to Chinese sovereignty on July 1, 1997, although it retained considerable autonomy, except in the areas of defense and foreign relations. A special immigrant visa program established by the 1990 Immigration Act provided immigration opportunities for Hong Kong-based employees of U.S. firms. The law permitted applicants to use the visas as a safety net, requiring them to have immigrated before January 1, 2002. Unexpectedly, the program has not generated the interest its drafters had anticipated.

Indochina/Vietnam

The protection and resettlement of Indochinese refugees remains a significant concern of U.S. policy in East Asia. The United States continued to work closely with both first asylum and resettlement nations and with the UNHCR to resolve the situation of the remaining refugees in the first asylum countries in Southeast Asia and Hong Kong. Under the Comprehensive Plan of Action, adopted by the 1989 International Conference on Indochinese Refugees, the United States and more than 50 other resettlement countries had pledged to resettle newly arriving asylum seekers who were found to be bona fide refugees.

The Comprehensive Plan was successful in dramatically reducing new arrivals and facilitating voluntary repatriation. By the end of 1995, the United States completed all processing for direct resettlement of Vietnamese refugees from first asylum camps of Southeast Asia and Hong Kong. As a result, the refugee admission ceilings were lowered from 40,000 in 1995 to 10,000 in 1997. The numbers of refugees resettled in the United States has dropped by more than half since 1995, from 80,000 in 1995 to 35,000 in 1997. Even with this decline, Vietnamese refugees continued to be the second highest in numbers of refugees resettled in the United States.

The U.S. Orderly Departure Program (ODP) from Vietnam continued to be a major area of cooperation between the two countries, allowing for the processing of former reeducation-camp prisoners, former U.S. Government employees, former employees of private U.S. organizations, and Amerasian immigrants for resettlement in the United States. Immigrant visa petitions are also processed under the ODP, and the Vietnamese continued to be in the top 10 countries to receive U.S. immigrant visas.

In January 1997, the United States negotiated an agreement with Vietnam on the implementation of the Resettlement Opportunity for Vietnamese Returnee (ROVR) program inside Vietnam. Under ROVR, returnees to Vietnam were allowed to register for a resettlement interview in Vietnam to determine if they qualified under a broad set of criteria as being of “special interest” to the United States. This program was designed to encourage the remaining screened-out camp populations to return to Vietnam voluntarily and to ensure that persons of special interest to the United States had an opportunity to pursue resettlement once in Vietnam. Some 9,000 individuals registered to participate in ROVR, and an additional 4,500 – 5,000 who returned between October 1995 and April 1996 may still register.

Africa

With some six million refugees, sub-Saharan Africa hosts about a third of all the world’s refugees. In 1995, the African refugee landscape continued to be dominated by refugees in the “Great Lakes” region – Rwanda, Burundi, Tanzania, and the Democratic Republic of the Congo. In light of the volatile political and ethnic circumstances in many African countries, refugee-processing posts in Africa were authorized to process, without prior authorization from Washington, applications by nationals of an African country who were referred to the U.S. program by UNHCR. In 1997, there was an expansion of the African resettlement program and a greater reliance on UNHCR for refugee referrals, which created a more flexible program and more diverse African caseloads.

From 1995 to 1997, U.S. refugee admissions from Africa remained at about 7,000 a year. These were primarily Somalis, Sudanese, Liberians and Ethiopians. Most of the processing was carried out in Kenya with remaining African admissions coming from other refugee processing posts in Africa and Europe. During the 1995-1997 period, asylum applications from Somalia and Sudan had the highest approval rates among African countries. In 1996, Somalis were the fourth largest group of refugees to be resettled in the United States.

Although immigration to the United States from Africa has risen somewhat in recent years, Africa nevertheless accounts for a relatively small percentage of immigrants to the United States. There has been considerable interest from African countries in the Diversity Visa program, which allocates visas to countries with a low rate of immigration. Applicants for this program are selected in an annual lottery. In 1995 (compared to 1994), Africa saw an increase in issued U.S. immigrant visas of 153 percent to 28,514 visas, a direct result of many African countries qualifying in the Diversity Visa category.

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Acronyms and Glossary

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Acronyms

ABC	American Baptist Churches
ACF	Administration for Children and Families
ADAMHA	Alcohol, Drug Abuse, and Mental Health Administration
ADD	Administration on Developmental Disabilities
ADMS	Alcohol, Drug Abuse, and Mental Health Services
AFDC	Aid to Families with Dependent Children
AIDS	acquired immunodeficiency syndrome
AoA	Administration on Aging
ASPE	Office of the Assistant Secretary for Planning and Evaluation, DHHS
BEA	Bureau of Economic Analysis
C/MHC	Community/Migrant Health Centers
CACFP	Child and Adult Care Food Program
CARE	Ryan White Comprehensive AIDS Resources Emergency Act
CDC	Centers for Disease Control and Prevention
CIS	Commonwealth of Independent States
CMHS	Center for Mental Health Services
CPS	Current Population Survey
CSAT	Center for Substance Abuse Treatment
CSPA	Chinese Student Protection Act
CPST	Commission on Professionals in Science and Technology
CSBG	Community Services Block Grant
CSE	Child Support Enforcement
CYT	Cannabis Youth Treatment
DHHS	Department of Health and Human Services
DOC	Department of Commerce
DOEd	Department of Education
DOL	Department of Labor
DOS	Department of State
DV	Diversity Visa
EA	Emergency Assistance
EC	Enterprise Communities
EMS	Emergency Medical Services
EPA	Environmental Protection Agency
EPR	employment-to-population ratio
EU	European Union
EWI	entries without inspection
EZ	Empowerment Zone
FNS	Food and Nutrition Service
FPL	Federal poverty level
FSP	Food Stamp Program
FY	fiscal year
GA	General Assistance
GAO	General Accounting Office
GDP	gross domestic product
GFA	Guidance for Applicants
GMA	General Medical Assistance
HCFA	Health Care Financing Administration
HCH	Health Care for the Homeless
HD	Hansen's disease
HIV	human immunodeficiency virus
HRIFA	Haitian Refugee Immigration Fairness Act
HRSA	Health Resources and Services Administration

HSHC	Healthy Schools, Healthy Communities
HSRI	Human Services Research institute
HUD	Department of Housing and Urban Development
IIRIRA	Illegal Immigration Reform and Immigrant Responsibility Act
IMMACT90	Immigration Act of 1990
INA	Immigration and Nationality Act
INS	Immigration and Naturalization Service
IRCA	Immigration Reform and Control Act
IQCS	Integrated Quality Control System
JOLI	Job Opportunities for Low Income Individuals
KD	Knowledge development
KD&A	Knowledge development and application
LAPR	Lawfully admitted permanent resident
LEA	Local Educational Agency
LEP	limited English proficient
LIHEAP	Low Income Home Energy Assistance Program
LIRS	Lutheran Immigration and Refugee Service
LPS2	Second Legalized Persons Survey
MCH	Maternal and Child Health
MHSH	Mental Health Services to the Homeless
MSA	Metropolitan Statistical Area
NACARA	Nicaraguan Adjustment and Central American Relief Act
NAFTA	North American Free Trade Agreement
NAS	National Academy of Sciences
NHDP	National Hansen's Disease Program
NHIS	National Health Interview Survey
NIA	National Institute on Aging
NICHD	National Institute of Child Health and Human Development
NIS	New Immigrant Survey
NPRM	Notice of Proposed Rulemaking
NSCG	National Survey of College Graduates
NSLP	National School Lunch Program
NSF	National Science Foundation
OCS	Office of Community Services
ODP	U.S. Orderly Departure Program
OIG	Office of the Inspector General
ORR	Office of Refugee Resettlement
P&A	Protection and Advocacy
PAIMI	Protection and Advocacy for Individuals with Mental Illness
PATH	Projects for Assistance in Transition from Homelessness
PHPC	Public Housing Primary Care
PHS	Public Health Service
PLC	Permanent Labor Certification
PNS	Projects of National Significance
PRC	People's Republic of China
PRUCOL	permanently residing in the United States under color of law
PRWORA	Personal Responsibility and Work Opportunity Reconciliation Act
QC	Quality Control
RCA	Refugee Cash Assistance
RMHP	Refugee Mental Health Program
RMA	Refugee Medical Assistance
RSDI	Social Security Retirement, Survivors, and Disability Insurance
S&E	science and engineering
SAMHSA	Substance Abuse and Mental Health Services Administration
SAPT	Substance Abuse Prevention and Treatment
SAVE	Systematic Alien Verification for Entitlements

SAW	Special Agricultural Worker
SBP	School Breakfast Program
SCHIP	State Children's Health Insurance Program
SDR	Survey of Doctorate Recipients
SED	Survey of Earned Doctorates
SEIU	Service Employees International Union
SFSP	Summer Food Service Program
SIPP	Survey of Income and Program Participation
SOFTPAC	Software Professionals Political Action Committee
SPD	Survey of Program Dynamics
SPRANS	special projects of regional and national significance
SSA	Social Security Administration
SSBG	Social Services Block Grant
SSDI	Social Security disability insurance
SSI	Supplemental Security Income
TANF	Temporary Assistance for Needy Families
TFP	Thrifty Food Plan
TRIM	Transfer Income Model
TPS	Temporary Protected Status
UAP	University Affiliated Programs
UNHCR	United Nations High Commission on Refugees
USCC	United States Catholic Conference
USDA	U.S. Department of Agriculture
USINT	U.S. Interests Section
WASIS	Wrap-Around Services Impact Study
WIC	Special Supplemental Food Program for Women, Infants, and Children

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Glossary

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Glossary

Adjustment to Immigrant Status—Procedure allowing certain aliens already in the United States to apply for immigrant status. Aliens admitted to the United States in a nonimmigrant or other category may have their status changed to that of lawful permanent resident if they are eligible to receive an immigrant visa and one is immediately available. In such cases, the alien is counted as an immigrant as of the date of adjustment, even though the alien may have been in the United States for an extended period of time.

Agricultural Workers—As a nonimmigrant class of admission, an alien coming temporarily to the United States to perform agricultural labor or services, as defined by the Secretary of Labor. This nonimmigrant category was established as a separate class of admission by the Immigration Reform and Control Act of 1986.

Alien—Any person not a citizen or national of the United States.

Amerasian (Vietnam)—Immigrant visas are issued to Amerasians under Public Law 100-202 (Act of December 22, 1987), which provides for the admission of aliens born in Vietnam between January 1, 1962, and January 1, 1976, if the alien was fathered by a U.S. citizen. Spouses, children, and parents or guardians may accompany the alien.

Asylee—An alien in the United States or at a port-of-entry unable or unwilling to return to his or her country of nationality, or to seek the protection of that country because of persecution or a well founded fear of persecution. Persecution or the fear thereof may be based on the alien's race, religion, nationality, membership in a particular social group, or political opinion. For persons with no nationality, the country of nationality is considered to be the country in which the alien last habitually resided. Asylees are eligible to adjust to lawful permanent resident status after 1 year of continuous presence in the United States. These immigrants are limited to 10,000 adjustments per fiscal year.

Cancellation of Removal (Formerly Suspension of Deportation)—A discretionary benefit adjusting an alien's status from that of deportable alien to one lawfully admitted for permanent residence. Application for cancellation of removal is made during the course of a removal hearing before an immigration judge.

Cuban/Haitian Entrant—Status accorded 1) Cubans who entered the United States illegally between April 15, 1980, and October 10, 1980, and 2) Haitians who entered the country illegally before January 1, 1981. Cubans and Haitians meeting these criteria who have continuously resided in the United States since before January 1, 1982, and who were known to the INS before that date, may adjust to permanent residence under a provision of the Immigration Reform and Control Act of 1986.

Immediate Relatives—Certain immigrants who because of their close relationship to U.S. citizens are exempt from the numerical limitations imposed on immigration to the United States. Immediate relatives are: spouses of citizens, children (under 21 years of age) of citizens, parents of citizens 21 years of age or older, and orphans adopted by citizens who are at least 21 years of age.

Immigrant—An alien admitted to the United States as a lawful permanent resident. Immigrants are those persons lawfully accorded the privilege of residing permanently in the United States. They may be issued immigrant visas by the Department of State overseas or adjusted to permanent resident status by the Immigration and Naturalization Service in the United States.

Immigration Act of 1990 (IMMACT90)—Public Law 101-649 (Act of November 29, 1990), which increased total immigration to the United States under an overall flexible cap, revised all grounds for exclusion and deportation, authorized temporary protected status to aliens of designated countries, revised and established new nonimmigrant admission categories, revised and extended the Visa Waiver Pilot Program, and revised naturalization authority and requirements.

Immigration and Nationality Act—The Act which, along with other immigration laws, treaties, and conventions of the United States, relates to the immigration, exclusion, deportation, or expulsion of aliens.

Immigration Reform and Control Act (IRCA) of 1986—Public Law 99-603 (Act of November 6, 1986), which was passed in order to control and deter illegal immigration to the United States. Its major provisions stipulate legalization of undocumented aliens, legalization of certain agricultural workers, sanctions for employers who knowingly hire undocumented workers, and increased enforcement at U.S. borders.

Intracompany Transferee—An alien, employed by an international firm or corporation, who seeks to enter the United States temporarily in order to continue to work for the same employer, or a subsidiary or affiliate, in a capacity that is primarily managerial, executive, or involves specialized knowledge.

National—A person owing permanent allegiance to a State.

Naturalization—The conferring, by any means, of citizenship upon a person after birth.

Nonimmigrant—An alien who seeks temporary entry to the United States for a specific purpose. The alien must have a permanent residence abroad (for most classes of admission) and qualify for the nonimmigrant classification sought. The nonimmigrant classifications are: foreign government officials, visitors for business and for pleasure, aliens in transit through the United States, treaty traders and investors, students, international representatives, temporary workers and trainees, representatives of foreign information media, exchange visitors, fiancé(e)s of U.S. citizens, intracompany transferees, NATO officials, religious workers, and some others. Most nonimmigrants can be accompanied or joined by spouses and unmarried minor (or dependent) children.

Parolee—An alien, appearing to be inadmissible to the inspecting officer, allowed to enter the United States under urgent circumstances or when that alien's entry is determined to have significant public benefit. Parole does not constitute a formal admission to the United States and confers temporary admission status only, requiring parolees to leave when the conditions supporting their parole cease to exist.

Per-Country Limit—The maximum number of family-sponsored and employment-based preference visas that can be issued to any country in a fiscal year. The limits are calculated each fiscal year depending on the total number of family-sponsored and employment-based visas available. No more than 7 percent of the visas may be issued to natives of an independent country in a fiscal year; dependencies of independent countries cannot exceed 2 percent. The per-country limit does not indicate, however, that a country is entitled to the maximum number of visas each year, just that it cannot receive more than that number. Because of the combined workings of the preference system and per-country limits, most countries do not reach this level of visa issuance.

Permanent Resident Alien—See Immigrant.

Preference System (Immigration Act of 1990)—The nine categories since FY 1992 among which the family-sponsored and employment-based immigrant preference visas are distributed. The family-sponsored preferences are: 1) unmarried sons and daughters of U.S. citizens; 2) spouses, children, and unmarried sons and daughters of permanent resident aliens; 3) married sons and daughters of U.S. citizens; 4) brothers and sisters of U.S. citizens. The employment-based preferences are: 1) priority workers (persons of extraordinary ability, outstanding professors and researchers, and certain multinational executives and managers); 2) professionals with advanced degrees or aliens with exceptional ability; 3) skilled workers, professionals (without advanced degrees), and needed unskilled workers; 4) special immigrants; and 5) employment creation immigrants (investors).

Refugee—Any person who is outside his or her country of nationality who is unable or unwilling to return to that country because of persecution or a well-founded fear of persecution. Persecution or the fear thereof may be based on the alien's race, religion, nationality, membership in a particular social group, or political opinion. A person with no nationality must be outside the country of last habitual residence to qualify as a refugee. Refugees are exempt from numerical limitation (though worldwide ceilings by geographic area are set annually by the President) and are eligible to adjust to lawful permanent residence after 1 year of continuous presence in the United States.

Refugee Approvals—The number of refugees approved for admission to the United States during a fiscal year. Refugee approvals are made by Immigration and Naturalization Service officers in overseas offices.

Refugee Arrivals—The number of refugees the Immigration and Naturalization Service initially admits to the United States through ports of entry during a fiscal year.

Special Immigrants—Certain categories of immigrants who were exempt from numerical limitation before FY 1992 and subject to limitation under the employment-based fourth preference beginning in 1992: persons who lost citizenship by marriage; persons who lost citizenship by serving in foreign armed forces; ministers of religion, their spouses and children; certain employees and former employees of the U.S. Government abroad, their spouses and children; Panama Canal Act immigrants; certain foreign medical school graduates, their spouses and children; certain retired employees of international organizations, their spouses and children; juvenile court dependents; certain aliens serving in the U.S. Armed Forces, their spouses and children; and religious workers, their spouses and children.

Student—As a nonimmigrant class of admission, an alien coming temporarily to the United States to pursue a full course of study in an approved program in either an academic (college, university, seminary, conservatory, academic high school, elementary school, other institution, or language training program) or a vocational or other recognized nonacademic institution.

Treaty Trader or Investor—As a nonimmigrant class of admission, an alien coming temporarily to the United States, under the provisions of a treaty of commerce and navigation between the United States and the foreign state of such alien, to carry on substantial trade or to direct the operations of an enterprise in which he has invested a substantial amount of capital, and the alien's spouse and unmarried minor (or dependent) children.

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