



The President's Advisory Commission on Asian Americans, Native Hawaiians, and Pacific Islanders

Commission Subcommittee Summaries

March 2023



Table of Contents

- Introduction** **1**
- Subcommittee on Belonging, Inclusion, Anti-Asian Hate and Anti-Discrimination** **2**
 - Subcommittee Membership 2
 - Summary of Meetings and Presentations 2
 - Summary of Recommendations 3
 - Recommendation: Establish Permanent Staff and Agency Home to Support WHIAANHPI and the President’s Advisory Commission 4
 - Recommendation: Increase Access to Victim Services for AA and NHPI Victims 6
- Subcommittee on Language Access** **8**
 - Subcommittee Membership 8
 - Summary of Meetings and Presentations 8
 - Summary of Recommendations 9
 - Recommendation: Improve Language Assistance Services in 988 Suicide & Crisis Lifeline 10
- Subcommittee on Data Disaggregation** **12**
 - Subcommittee Membership 12
 - Summary of Meetings and Presentations 12
 - Summary of Recommendations 13
 - Recommendation: Data Inclusion for U.S. Territories 14
- Subcommittee on Health Equity** **16**
 - Subcommittee Membership 16
 - Summary of Meetings and Presentations 16
 - Summary of Recommendations 17
 - Recommendation: Establish an AA and NHPI Youth Mental Health Campaign 19
 - Recommendation: Establish National Programs to Raise Awareness, Evaluate, and Address Health Disparities, Such as Heart Disease and Obesity, in AA and NHPI Sub-groups Living in the United States, Specifically with a Focus on Children and Youth 21
 - Recommendation: Collect Language Access Data from Federally Funded Community Health Centers, and Develop Measures for Reporting in the Uniform Data System 23
- Subcommittee on Economic Equity** **25**
 - Subcommittee Membership 25
 - Summary of Meetings and Presentations 25
 - Summary of Recommendations 26
 - Recommendation: Increase Export Opportunities for AA and NHPI Small Businesses 27
- Subcommittee on Immigration and Citizenship Status** **29**
 - Subcommittee Membership 29
 - Summary of Meetings and Presentations 29
 - Summary of Recommendations 30
 - Recommendation: Expand Access to Legal Representation for Noncitizens in Removal Proceedings 31
 - Recommendation: Extend H1-B Visa Grace Period for Finding Employer Sponsor 33
- References** **34**



Introduction

On May 28, 2021, President Biden signed Executive Order (EO) 14031 establishing the President's Advisory Commission on Asian Americans, Native Hawaiians, and Pacific Islanders (the Commission) within the U.S. Department of Health and Human Services (HHS). The 25-member Commission, co-chaired by HHS Secretary Xavier Becerra and U.S. Trade Representative Ambassador Katherine Tai, advises the President on ways the public, private, and non-profit sectors can work together to advance equity, justice, and opportunity for Asian American, Native Hawaiian, and Pacific Islander (AA and NHPI) communities in the United States. At its inaugural meeting on February 3-4, 2022, the Commissioners formed six subcommittees to advance equity, justice, and opportunity for AA and NHPI communities in accordance with EO 14031:

1. Belonging, Inclusion, Anti-Asian Hate, Anti-Discrimination Subcommittee
2. Health Equity Subcommittee
3. Immigration and Citizenship Status Subcommittee
4. Language Access Subcommittee
5. Data Disaggregation Subcommittee
6. Economic Equity Subcommittee

Between February 2022 and March 2023, the six subcommittees met regularly to gather information and develop recommendations for presentation to the full Commission. The Commission's recommendations are grounded in community and stakeholder feedback and are being submitted to the President on a rolling basis. At its May 12, 2022, in-person meeting, the Commission voted unanimously to move forward 14 recommendations, which were transmitted to President Biden in August 2022. At its September 28, 2022, in-person meeting, the Commission voted unanimously to move forward an additional nine recommendations. At its December 5-6, 2022, virtual meeting, the Commission voted to advance 13 additional recommendations.

The Commission held its fifth public meeting on March 14, 2023, where 10 additional recommendations were approved by the full Commission. This document includes meeting summaries and the final recommendations approved at the March 2023 meeting.



Subcommittee on Belonging, Inclusion, Anti-Asian Hate and Anti-Discrimination

Subcommittee Membership:

- **Co-Chairs:** Luisa Blue and Dr. Kamal Kalsi
- **Members:** Emily Chen, Grace Huang, Daniel Dae Kim, Naheed Qureshi, Smita Shah
- **Non-Commissioner Member:** Madihha Ahussain
- **DFO:** Zeyen Wu

Summary of Meetings and Presentations:

The Belonging, Inclusion, Anti-Asian Hate, and Anti-Discrimination Subcommittee meets bi-weekly. Following the Commission's fourth quarterly meeting on December 5 and December 6, 2022, the Subcommittee met on December 13, 2022, January 10, January 24, February 14, February 21, and March 7, 2023. The Subcommittee received presentations from the following subject matter experts who helped to inform their recommendations:

- **Mary McCord, Executive Director, Institute for Constitutional Advocacy and Protection (ICAP), Visiting Professor of Law at Georgetown University Law Center:** Provided an overview about hate and white supremacist ideology, as well as specific commentary about the context of hate incidents against AA and NHPI communities arising from the COVID-19 pandemic.
- **Kate Peterson, Director of State Victim Resource Division, Office for Victims of Crime (OVC), U.S. Department of Justice; Jasmine D'Addario-Fobian, Director of Discretionary Programs Division, OVC, U.S. Department of Justice:** Provided an overview of the operations of OVC, including sources of funds, programs, grantees, and other information. The speakers also provided information about AA and NHPI-serving grantees.
- **Cynthia Deitle, former FBI Special Agent, and former Director, Civil Rights Reform, Matthew Shepard Foundation:** Provided information about the investigatory operations and outreach mechanisms of the FBI and local law enforcement as it pertains to communities vulnerable



to hate incidents, as well as ideas and initiatives to improve hate crimes reporting and tracking.

- **Chris Hsiung, Undersheriff, San Mateo County, California:** Provided information on hate crimes investigations and reporting issues from a law enforcement perspective.

Summary of Recommendations:

The Belonging, Inclusion, Anti-Asian Hate, and Anti-Discrimination Subcommittee approved the following two recommendations at the March 14, 2023, full Commission meeting:

- **Recommendation:** The Commission recommends that the federal government establish a permanent home agency with permanent career and political staff, and ongoing funding, to support the White House Initiative on Asian Americans, Native Hawaiians, and Pacific Islanders (WHIAANHPI) and the President's Advisory Commission on Asian Americans, Native Hawaiians, and Pacific Islanders.
- **Recommendation:** The Commission recommends that the U.S. Department of Justice's Office for Victims of Crime (OVC) increase the availability and accessibility of victim services for AA and NHPI crime victims through outreach, increased emphasis on AA and NHPI-serving organizations, and expanding the capacity of existing grantees to serve AA and NHPI communities.



Recommendation: Establish Permanent Staff and Agency Home to Support WHIAANHPI and the President’s Advisory Commission

Problem Statement:

The White House Initiative on Asian Americans, Native Hawaiians, and Pacific Islanders (WHIAANHPI) is established via Executive Order 14031. Since its inception during this current administration, it has been staffed predominantly by part-time and temporary personnel that sometimes rotate through for assignments as short as three months. This undermines the President’s Advisory Commission on AA and NHPIs (Commission) ability to execute longer term goals, degrades institutional memory, and limits the effectiveness of the Commission’s efforts as it must constantly work through the churn of new staff.

Recommendation:

The federal government should establish a permanent home agency with permanent career and political staff (Full Time Employees), and continue to include ongoing funding in the President’s budget to support the work of WHIAANHPI and the President’s Advisory Commission on AA and NHPIs.

Background and Rationale:

The White House Initiative on Asian Americans, Native Hawaiians, and Pacific Islanders (WHIAANHPI) is a critical organization that works to improve the lives of Asian Americans, Native Hawaiians, and Pacific Islanders across the country. However, for the Initiative to be truly effective, it needs a permanent home agency and more permanent support staff.

Establishing a permanent home agency and more permanent staff members would provide greater stability and continuity to the Initiative’s work. The current model of moving to a new agency every few years and relying mostly on short-term detailees can lead to inconsistent progress and limited institutional memory.

The President’s Advisory Commission on Educational Excellence for African Americans, and the President’s Advisory Commission on Advancing Educational Equity, Excellence, and Economic Opportunity for Hispanics have always been housed within the U.S. Department of Education, and have full-time career staff that support these Commissions. WHIAANHPI should mirror those other President’s Advisory Commissions and have full-time career staff that span administrations.



More permanent staff would enable WHIAANHPI to expand its reach and impact. With additional resources, WHIAANHPI could work more closely with local communities, engage more stakeholders, and carry out more robust public education and outreach efforts. This, in turn, would help to raise awareness of the issues faced by AA and NHPIs and lead to more effective policy solutions.

More permanent staff would help to ensure that WHIAANHPI's work across administrations is guided by a clear strategic vision and plan. With more staff in place, WHIAANHPI could work more closely with partners to set long-term goals, develop and implement effective strategies, and track progress over time. This would ensure that WHIAANHPI is making the greatest possible impact, and that it is accountable to the communities it serves.

More permanent staff and a permanent home agency would help to create a more sustainable funding model for the Initiative. Currently, WHIAANHPI relies on funding contributions from U.S. Department of Health and Human Services divisions that can be unpredictable. By establishing a stable staffing structure, the Initiative could better position itself to seek out consistent funding to sustain its work into the future.

Finally, having more permanent staff would help to create a more professional and effective organization. With more staff in place, the Initiative could invest in training, technology, and other resources that would help to build its capacity and improve its overall performance. This, in turn, would help to ensure that the Initiative is providing the highest quality of service to AA and NHPI communities.



Recommendation: Increase Access to Victim Services for AA and NHPI Victims

Problem Statement:

While there has been increased attention on the harm and trauma that AA and NHPI community members continue to face from hate-crimes and other interpersonal violence, many AA and NHPI community members face barriers accessing culturally and linguistically appropriate victim services and supports.¹ In addition, AA and NHPI culturally specific organizations face challenges accessing funding to provide such services,² in part due to unfamiliarity with the funding structures imposed by State and territorial funding formulas, as well as minimal guidance or support provided to State and territorial grantees about how to reach, much less fund, trusted AA and NHPI community organizations.

Recommendation:

The Office for Victims of Crime (OVC) in the Department of Justice should increase the availability of, and accessibility of victim services for AA and NHPI crime victims, including victims of bias and hate incidents. This includes addressing barriers to funding for culturally specific organizations that are trusted in AA and NHPI communities by: (1) investing in increased outreach, both by OVC and grantee States and Territories to culturally specific organizations about funding opportunities, (2) modifying OVC's funding agreements with States and Territories to increase the pass-through funds granted to culturally specific organizations serving AA and NHPs, other Black, Indigenous, and People of Color (BIPOC) communities, and other disabled BIPOC organizations, (3) supporting OVC grantees and subgrantees to strengthen the cultural relevance of programs and linguistic capacity to serve AA and NHPI communities.

Background and Rationale:

According to a recent national survey of over 1,000 AAPI respondents, one in five Asian Americans and one in five Pacific Islanders experienced a hate incident in 2020 or 2021, with 62.9% reporting verbal harassment, 16.1% reporting physical assaults, and 8.6% reporting online harassment.³ There was a 224% increase of reported hate crimes against AAPI community members from 2020 to 2021,⁴ and a 2022 survey of over 2,400 AAPI women showed that during the previous year, 74% of AAPI women reported personally experiencing racism and/or discrimination, 38% reported experiencing sexual harassment, and 12% reported experiencing gender and/or race-based physical violence.⁵



The Victims of Crime Act is the largest federal funding source supporting victim services in the United States. The OVC administers victim services funding, as well as victims' compensation, primarily through state formulas funding, and also administers discretionary victim-services related initiatives.⁶ During FY 2023, the President requested \$1.75 billion for Crime Victims Fund programs in his budget proposal, including a new initiative in the U.S. Department of Justice's Civil Rights Division, aimed at fighting gender-based violence, discrimination, and harassment.⁷

Because AA and NHPI victims are significantly less likely to contact law enforcement for assistance following a hate crime than other victims,⁸ investment in programs and resources that communities trust is particularly important. AA and NHPI community-based organizations often play the role of serving as "volunteer" or unpaid liaisons and interpreters for mainstream organizations that lack experience and expertise working in AA and NHPI communities.

OVC was unable to produce data on how many AA and NHPI-culturally specific organizations receive funding when requested by the President's Advisory Commission Subcommittee, in particular, related to addressing hate-crimes.⁹ Although OVC collects information about grantee program recipients/clients/customers and crime types, OVC could strengthen its data collection and reporting of data about the primary and preferred languages that crime victims speak, read, and write. Such data would be useful to measure accountability for access to funding for underserved communities, including developing benchmarks for State and/or territorial planning for funding distribution that engages culturally specific organizations, including trusted members of BIPOC, LGBTQ, and deaf/hard of hearing communities, as well as those with other disabilities.

In addition, when AA and NHPI victims reach out for help, they often face significant challenges accessing existing programs that are funded to support victims. For example, despite legal obligations for recipients of federal funding to provide language access, victims are often unaware of, or unable to navigate such programs.

Currently, OVC does not obligate its grantees to engage in language access assessment and planning to ascertain and address the needs of community members whose first primary spoken language is not English. In order to strengthen the capacity of its grantees and subgrantees, OVC could support language access efforts by designating specific federal resources to engage in language access planning and development of programming, including specifically dedicating funding for interpretation and translation services in languages of lesser diffusion. In order to meaningfully reach AA and NHPI victims, these resources and initiatives should be invested in trusted community-based supports and programs that are culturally relevant and linguistically accessible.



Subcommittee on Language Access

Subcommittee Membership:

- **Co-Chairs:** Dr. Amy Agbayani, Victoria Huynh, Dr. Kimberly Chang
- **Members:** Kerry Doi, Grace Huang, Ajay Bhutoria, Simon Pang
- **Ex-officio Member:** Laureen Laglagaron, Attorney Advisor, Federal Coordination and Compliance Section, Civil Rights Division, U.S. Department of Justice
- **DFO:** Zeyen Wu

Summary of Meetings and Presentations:

The Language Access Subcommittee meets bi-weekly. Following the Commission's fourth quarterly meeting on December 5 and December 6, 2022, the Subcommittee met on January 3, January 20, February 3, February 17, and March 3, 2023. The Subcommittee received presentations from the following subject matter experts who helped to inform their recommendations:

- **Cannon Han, Senior Program Manager, Asian Pacific Institute for Gender Based Violence:** Provided information on language access challenges/barriers of AA and NHPI limited English proficient (LEP) communities, and recommendations based on implementation of Title VI in state and local government.
- **Dr. Keiki Kawai'ae'a, Director of Ka Haka 'Ula O Ke'elikōlani College of Hawaiian Language, University of Hawai'i at Hilo; Member, Native Educator Education Committee of the National Indian Education Association; Board Member, World's Indigenous Nations Higher Education Consortium:** Provided background on the history of Native Hawaiian language preservation and current language revitalization efforts, including programs, funding, and federal support, for Native Hawaiian language promotion and preservation.
- **Stanton K. Enomoto, Senior Program Director, Office of Native Hawaiian Relations, U.S. Department of the Interior:** Provided an overview on the relationship between Native Hawaiians and the federal government, and shared information about current federal efforts to incorporate Native Hawaiian language and perspectives into the Department of Interior's work.



- **Monica Johnson, Director, 988 and Behavioral Health Crisis Coordinating Office, Office of the Assistant Secretary, Substance Abuse and Mental Health Services Administration, U.S. Department Health and Human Services (HHS-SAMHSA); John Palmieri, Deputy Director, 988 and Behavioral Health Crisis Coordinating Office, Office of the Assistant Secretary, HHS-SAMHSA; James Wright, Division Director, Crisis Operations, 988 and Behavioral Health Crisis Coordinating Office, Office of the Assistant Secretary, HHS-SAMHSA:** Provided background on the structure and basic operations of the 988 Suicide and Crisis Lifeline, and information about current interpretation and in-language options for 988.

Summary of Recommendations:

The Language Access Subcommittee approved the following recommendation at the March 14, 2023, full Commission meeting:

- **Recommendation:** The Commission recommends expanding the availability and access to the 988 Suicide and Crisis Lifeline through providing language assistance services in multiple AA and NHPI languages and expanding outreach to AA and NHPI communities.



Recommendation: Improve Language Assistance Services in 988 Suicide & Crisis Lifeline

Problem Statement:

The 988 Suicide & Crisis Lifeline only offers in-language support in English and Spanish, which is not accessible to many limited-English proficient (LEP) individuals in AA and NHPI communities.

Recommendation:

The Commission recommends expanding the availability and access to the 988 Suicide and Crisis Lifeline through providing language assistance services in multiple AA and NHPI languages and expanding outreach to AA and NHPI communities:

- By September 2023, the Substance Abuse and Mental Health Services Administration (SAMHSA) should translate 988 materials in webpages, social media, listserv announcements, and public outreach material into the top AA and NHPI languages, consistent with the HHS Equity Action Plan, to address the inequities causing underutilization of the 988 Lifeline by AA and NHPI populations;
- By September 2023, SAMHSA should partner with federal agencies, including the U.S. Department of Education, to focus on youth outreach in schools and colleges, as well as AA and NHPI community organizations and media, to promote the 988 service and the availability of mental health services;
- By 2024, SAMHSA should develop a national action plan with regional language specificity to expand the capacity of the 988 Suicide & Crisis Lifeline to provide 24/7 live in-language counseling services in the top AA and NHPI languages (in addition to interpretation services), and increasing resources to community-based AA and NHPI organizations that can serve languages of lesser diffusion.

Background and Rationale:

Currently, the 988 hotline, text, and chat functions only offer in-language support in English and Spanish, which may not be accessible to all individuals in the United States.¹⁰ The 988 hotline is a vital resource for individuals experiencing mental health crises and offers the most easily accessible mental health support in the country. It is an essential tool for individuals in emotional distress to access crucial help and support.



There are several benefits to offering 988 services in multiple AA and NHPI languages. First and foremost, it would increase access to support for people who may not speak English or Spanish. This is especially important in times of crisis, when being able to speak with a trained crisis counselor in one's own language can be especially helpful. When individuals call 988, they should be connected to a trained crisis counselor who will listen to concerns and offer support and resources to help individuals in crisis through the situation. Options should be provided to select counselors who speak AA and NHPI languages.

Second, offering the service in-language in multiple AA and NHPI languages would help to reduce the stigma surrounding mental health and substance use issues within AA and NHPI communities. Many people may be reluctant to seek help for these issues due to cultural or language barriers, and providing support in their own language could encourage more people to seek the help they need.¹¹

Finally, offering 988 services in multiple AA and NHPI languages would show that HHS values the diversity of the United States and is committed to providing equal access and support for all communities.



Subcommittee on Data Disaggregation

Subcommittee Membership:

- **Co-Chairs:** Sarah Min, Dr. Raynald Samoa, Dr. Robert Underwood
- **Members:** Emily Chen, KaYing Yang
- **Non-Commission Members:** Dr. Ninez Ponce, Dr. Joseph Keawe Kaholokula
- **DFO:** Sarah Edwards

Summary of Meetings and Presentations:

The Data Disaggregation Subcommittee meets bi-weekly. Following the Commission's fourth quarterly meeting on December 5 and December 6, 2022, the Subcommittee met on December 12, 2022, January 9, January 23, February 6, February 27, and March 6, 2023. The Subcommittee received presentations from the following subject matter experts who helped to inform their recommendations:

- **Anna Owens, Deputy Chief, Office of Strategic Alliance, U.S. Census Bureau; Mayumi Hairston Escalante, Partner Liaison, Office of Strategic Alliance, U.S. Census Bureau; Nicole Scanniello, Assistant Division Chief for Communications, American Community Survey Office, U.S. Census Bureau; Bina “Kawe” Mossman-Saafi, Branch Chief, Congressional Affairs Office, Office of Congressional and Intergovernmental Affairs, U.S. Census Bureau:** Presented an overview on the U.S. Census Bureau's Office of Strategic Alliance, as well as their outreach strategies to reach AA and NHPI communities and facilitate data sharing.
- **Neil Weare, President and Founder, Equally American; Cara Brumfield, Associate Director, Center on Poverty and Inequality, Georgetown Law; Jae June Lee, Policy & Data Analyst, Center on Poverty and Inequality, Georgetown Law:** Presented on advancing data equity in the U.S. territories.



Summary of Recommendations:

The Data Disaggregation Subcommittee approved the following recommendation at the March 14, 2023, full Commission meeting:

- The Commission recommends that the White House issue an Executive Order that gives the U.S Territories comparable treatment to Puerto Rico in the standards, policies, and norms in federal departments and agencies regarding the treatment of U.S. Territories in the statistical system.



Recommendation: Data Inclusion for U.S. Territories

Problem Statement:

Of the five U.S. Territories, only Puerto Rico receives more state-like treatment in the federal statistical system as a result of the 1992 Presidential Memorandum signed by President George H.W. Bush.¹² The other U.S. territories—American Samoa, Guam, the Northern Mariana Islands, and the U.S. Virgin Islands—are not included in the federal statistical system. This disproportionately and unfairly excludes the people living in those territories from essential statistical data on housing, labor force participation, demographic changes, and environmental challenges that in turn excludes them from visibility in policy making, political representation¹³ and \$1.5 trillion in federal funding that is issued based on these data.¹⁴

Recommendation:

The Commission recommends that the White House issue an Executive Order that gives the U.S. Territories comparable treatment to Puerto Rico in the standards, policies, and norms in federal departments and agencies regarding the treatment of U.S. Territories in the statistical system.

Background and Rationale:

The five U.S. Territories—Puerto Rico, the U.S. Virgin Islands, Guam, the Northern Mariana Islands, and American Samoa, equal 3.6 million people or the equivalent of the five smallest U.S. states combined.¹⁵ Despite the notable population, the U.S. Territories are largely neglected from the federal statistical systems. There are four primary surveys contributing to population, household, and workforce data: the Decennial Census (Census), the American Community Survey (ACS), the Population Estimates, and the Current Population Survey (CPS).¹⁶ Of these four data sets, most U.S. Territories are only represented in one, the Decennial Census.¹⁷ The exception to this is Puerto Rico, which is represented in three of the four surveys.¹⁸

The overwhelming majority of the populations of the remaining territories represent people of color, and the three Pacific Island territories have mostly AA and NHPI populations. This level of exclusion is simultaneously a racial justice as well as an equity issue. The data from these surveys are used to inform policy in areas of housing, education, healthcare, and political representation, among other key issues.¹⁹ Further, these data are used to determine allocations for federal funding exceeding \$1.5 trillion.²⁰ Subsequently, the absence of data denies the territories the ability to access data on



their economic, health care, educational, population migration and “social vulnerability” indices which has dramatic impacts on policy making. For example, the failure to include territories in the other datasets affects the allocation of housing programs, road construction, employment programs and response to climate change.²¹

Additionally, the exclusion from federal data paves the way to exclusion from private data collections and reporting. Recently, IMPLAN, a private firm that conducts economic impact research, announced that they will no longer include the Pacific Island territories due to the inadequacy of the Census generated economic data.²² In 2021, President Biden declared that “there can be no second-class citizens in the United States of America”,²³ and signed Executive Order 14031 which solidified his commitment to equitable, disaggregated data for the AA and NHPI community.²⁴



Subcommittee on Health Equity

Subcommittee Membership:

- **Co-Chairs:** Teresita Batayola, Kerry Doi, Mia Ives-Ruble
- **Members:** Victoria Huynh, Dr. Kimberly Chang, Michelle Ka'uhane, Dr. Kamal Kalsi, Ajay Bhutoria
- **Non-Commission Member:** Dr. Quyen Ngo-Metzger
- **DFO:** Caroline Goon

Summary of Meetings and Presentations:

The Health Equity Subcommittee meets bi-weekly. Following the Commission's fourth quarterly meeting on December 5 and December 6, 2022, the Subcommittee met on December 15, 2022, January 12, February 9, February 23, and March 9, 2023. The Subcommittee received presentations from the following subject matter experts who helped to inform their recommendations:

- **Amy Alexander, MD, President & Founding Member, Association for College Psychiatry, President-Elect, Association of Women Psychiatrists, Director, Student Mental Health Fellowship, and Clinical Assistant Professor, Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine;**
Anne S. Li, MD, DFAACAP, Director, Children's Comprehensive Psychiatric Emergency Program, NYC Bellevue Hospital Center, and Clinical Assistant Professor, Department of Child and Adolescent Psychiatry, New York University Langone;
Warren Y.K. Ng, MD, MPH, President, American Academy of Child and Adolescent Psychiatry, Medical Director, Outpatient Behavioral Health, Director, Clinical Services Child and Adolescent Psychiatry, Professor of Psychiatry, Columbia University Medical Center and New York-Presbyterian/Morgan Stanley Children's Hospital;
Donna Tran, MPH, National President, Asian Pacific American Medical Student Association, Medical Student Rep, Association for College Psychiatry;
Maryam Zulfiqar, MD, Student Mental Health Fellow, Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine: Provided an overview on the



landscape of mental health, bullying, suicide prevention, and other topics of concern to the AA and NHPI population.

- **Eliseo J. Perez-Stable, MD, Director, National Institute on Minority Health and Health Disparities, National Institutes of Health (NIH); Shobha Srinivasan, PhD, Senior Advisor for Health Disparities, Office of the Director, Division of Cancer Control and Population Sciences, National Cancer Institute, NIH; Yuling Hong, MD, PhD, FAHA, Chief, Epidemiology Branch, National Heart, Lung, Blood Institute, NIH; T. Jake Liang, MD, Chief, Liver Diseases Branch, National Institute of Diabetes and Digestive and Kidney Diseases, NIH; Gabriel Lai, PhD, Program Director, Environmental Epidemiology Branch, Epidemiology and Genomics Research Program, Division of Cancer Control and Population Sciences, National Cancer Institute, NIH:** Provided an overview of the current landscape of AA and NHPI health disparities/outcomes research, and highlighted barriers and challenges to supporting this work, including low funding rates for AA and NHPI research grants.
- **Mina Fedor, Founder and Executive Director, AAPI Youth Rising; Jaslene Lai, Founding Board Member and Website Manager, AAPI Youth Rising; Ethan Su, Board Member and Middle-School Representative, AAPI Youth Rising:** Provided information and perspective on the barriers and challenges facing AA and NHPI youth as it relates to mental health and other health inequities that affect AA and NHPI youth.
- **Carter Blakey, Deputy Director, Office of Disease Prevention and Health Promotion (ODPHP), Office of the Assistant Secretary for Health (OASH), U.S. Department of Health and Human Services (HHS); Emmeline Ochiai, Senior Advisor, ODPHP/OASH/HHS:** Provided an overview of the Healthy People 2030 Framework and how its mission is to promote, strengthen, and evaluate the nation's efforts to improve the health and well-being of all people.

Summary of Recommendations:

The Health Equity Subcommittee approved the following three recommendations at the March 14, 2023, full Commission meeting:

- **Recommendation:** The Commission recommends that the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Education



(ED) launch an AA and NHPI youth mental health campaign; increase targeted funding to the National Institutes of Health (NIH) for research on culturally competent effective treatments and approaches for AA and NHPI individuals with mental health symptoms; and expand the Substance Abuse and Mental Health Services Administration (SAMHSA) minority fellowship programs and Health Resources and Services Administration (HRSA) loan repayment programs to target AA and NHPI behavioral health trainees and professionals.

- **Recommendation:** The Commission recommends that HHS and ED establish national programs to raise awareness, evaluate, and address health disparities, such as heart disease and obesity, in AA and NHPI sub-groups living in the United States, specifically with a focus on children and youth.
- **Recommendation:** The Commission recommends that HRSA collect language access data from federally-funded community health centers, and develop measures for reporting in the Uniform Data System (UDS) on the percentages and numbers of patients with preferred languages other than English, including data on the languages spoken; the percent and number of patients who are limited English proficient (LEP); and the percent and number of visits in which professional interpreters were utilized for LEP patients.



Recommendation: Establish an AA and NHPI Youth Mental Health Campaign

Problem Statement:

While the leading cause of death for AA and NHPI youth is suicide, AA and NHPI youth are some of the least likely to utilize mental health services.

Recommendation:

- As part of the national AA and NHPI mental health summit, the Commission recommends the launch of an AA and NHPI youth mental health campaign run by a collaboration between the U.S. Department of Health and Human Services (HHS) and U.S. Department of Education (ED).
 - Campaign would include a community volunteer mentorship component similar to the Obama Administration’s “My Brother’s Keeper” initiative²⁵ to help create healthy mental health environments that build resilient AA and NHPI youth.
 - Create an education campaign for AA and NHPI youth on culturally competent healthy mental health practices and take into account other parts of their identity, including generation, multi-racial, refugee, and adoptive status.
 - Run ads partnering with AA and NHPI celebrities discussing the importance of claiming cultural and community identity, however defined, which are protective factors against racism, homophobia, and ableism, and their impacts on mental health. Publish ads on platforms utilized by AA and NHPI communities.
- Increase targeted funding to the National Institutes of Health (NIH) for research on culturally competent effective treatments and approaches for AA and NHPI individuals with mental health symptoms.
- Expand the Substance Abuse and Mental Health Services Administration (SAMHSA) minority fellowship programs and Health Resources and Services Administration (HRSA) loan repayment programs to target AA and NHPI behavioral health trainees and professionals.



Background and Rationale:

Mental health issues for AA and NHPI youth are on the rise. Suicide was a leading cause of death for Asian Americans and Pacific Islanders youth in 2019.²⁶ Major depressive episodes rose in AA and NHPI youth from 10 percent to 13.6 percent from 2015 to 2018.²⁷ As stigma and discrimination rose throughout the pandemic, Asian Americans who experienced these issues saw an increase in anxiety, depression, and sleep issues.²⁸ In the first quarter of 2021 alone, anti-Asian hate crimes rose 164 percent.²⁹ There is a significant need for culturally competent mental health professionals. In 2020, the U.S. population included 7.2 percent Asians and 0.5 percent Pacific Islanders.³⁰ Unfortunately, only 1.1 percent of mental health counselors were Asian in 2022.³¹



Recommendation: Establish National Programs to Raise Awareness, Evaluate, and Address Health Disparities, Such as Heart Disease and Obesity, in AA and NHPI Sub-groups Living in the United States, Specifically with a Focus on Children and Youth

Problem Statement:

There is a need to raise awareness, evaluate, and address health disparities, such as heart disease and obesity, in AA and NHPI sub-groups living in the United States, specifically with a focus on children and youth. There is limited data from research studies that examine treatment patterns and outcomes in AA sub-groups, such as South Asians,³² and a lack of national education campaigns that are targeted at AA and NHPI communities.³³

Recommendation:

The Commission recommends the establishment of national programs by the U.S. Department of Health and Human Services (HHS) and the U.S. Department of Education (ED) to raise awareness, evaluate, and address health disparities, such as heart disease and obesity, in AA and NHPI sub-groups living in the United States, specifically with a focus on children and youth.

- Development of obesity monitoring and intervention programs by the Centers for Disease Control and Prevention (CDC) that focuses on AA and NHPI children and youth to dispel misconceptions and educate AA and NHPI communities on how to stay healthy and reduce the impact of chronic diseases using culturally relevant materials, resources, and languages.
- Creation of a centralized database containing research and data as well as nutritional options related to AA and NHPI communities that are affected by heart disease and obesity, such as South Asians.³⁴
- Work with SAMHSA, HRSA, HHS Office of Minority Health (HHS OMH), and CMS to increase training, technical assistance, and resources for healthcare providers to improve cultural competency and language barriers and ensure that the needs of AA and NHPI patients are being met.
- Ensure agency-wide collaboration between HHS and ED to create and disseminate relevant educational information via community outreach in multiple AA and NHPI languages. The resources developed should be implemented in school health curriculums and be targeted to AA and NHPI



children and youth on topics such as the detrimental effects of high sugar consumption, and education on how to read food nutrition labels.

- Collaborate with Federally Qualified Health Centers (FQHCs), community, and patient stakeholders.

Background and Rationale:

Heart disease (cardiovascular disease) is more than just heart attacks and is a broad category that includes disorders related to heart function, blood vessels, muscle, and electrical system and valves. In 2020 alone, cardiovascular disease killed about 697,000 individuals in the United States, which comes out to 1 in every 5 deaths.³⁵ Heart disease is a leading cause of death among AA and NHPIs (18.9% of deaths in Asians, and 20.8% of deaths in Native Hawaiian or Pacific Islander).³⁶ A major risk factor for heart disease is obesity, and for Non-Hispanic Asian children and youth between 6-17 years of age, 11% of this population is obese.³⁷ Cultural misconceptions and limited access for certain AA and NHPI populations, such as those who are Limited-English Proficient (LEP), to preventive care and treatment for obesity exacerbate the problem among these populations.



Recommendation: Collect Language Access Data from Federally Funded Community Health Centers, and Develop Measures for Reporting in the Uniform Data System

Problem Statement:

Professional/Certified Interpreters provide better health outcomes than ad hoc interpreters (e.g., family members and bilingual, not certified staff).

Recommendation:

By 2024, for AA and NHPI communities, as well as other limited English proficient (LEP) populations, the Health Resources and Services Administration (HRSA) should collect language access data from federally-funded community health centers (CHC). HRSA should develop measures for reporting in the Uniform Data System (UDS) on percentages and number of patients with preferred languages other than English, including data on the languages spoken; the percent and number of patients who are LEP; and the percent and number of visits when professional/certified interpreters were utilized for LEP patients, excluding the utilization of family members as interpreters.

HHS should permanently require the collection of language access data beyond the May 11, 2023 expiration of the COVID-19 Public Health Emergency declaration.

Background and Rationale:

Professional/Certified Interpreters provide better health outcomes than ad hoc interpreters (e.g., family members and bilingual, not certified staff). Among four groups of AAPI women, 75.2% of women sampled preferred to speak a non-English language with their medical provider. Of this sample, 31.8% did not use any kind of interpretation and 44.9% used family and friends (ad hoc interpreters). Those who used medical interpreters had the highest percentage of mammograms and clinical breast exams (CBE) compared with other groups (no medical interpreters or ad hoc interpreters). Further analysis shows that those who used medical interpreters had 1.85 greater odds of a mammogram, 3.03 greater odds of a CBE, and 2.34 greater odds of a Pap smear than those who did not use any type of interpreter after controlling for other variables (ex. age, education, years in U.S., etc.).³⁸

In all four areas examined — Communication (e.g., errors and comprehension), Utilization, Clinical Outcomes, and Satisfaction with care — the use of professional interpreters is associated with improved clinical care at a higher rate than the use of ad hoc interpreters. In fact, the “utilization” studies collected showed that use of trained



professional interpreters is associated with decreased disparities between patients with a language barrier as compared with patients receiving care from language concordant clinicians/staff.³⁹

Migrant and refugee families with LEP reported greater satisfaction with aspects of care when a professional interpreter service was used compared with using ad hoc interpreters in any model (in-person, video, or telephone).⁴⁰

The most methodologically rigorous studies on interpreter services and communication reveal the following: (1) those who need but do not get interpreters have a poor self-reported understanding of their diagnosis and treatment plan and frequently wish their health care provider had explained things better; (2) ad hoc interpreters misinterpret or omit up to half of all physicians' questions, are more likely to commit errors with potential clinical consequences, have a higher risk of not mentioning medication side effects, and ignore embarrassing issues when children are ad hoc interpreters; and (3) interpreter services can affect communication and the quality of psychiatric encounters, including positive effects of bilingual providers, and an adverse impact of ad hoc and no interpreters.⁴¹



Subcommittee on Economic Equity

Subcommittee Membership:

- **Co-Chairs:** Ajay Bhutoria, Simon Pang, Smita Shah
- **Members:** Luisa Blue, Dr. Kimberly Chang, Kerry Doi, Michelle Ka'uhane, Kevin Kim, Ai-jen Poo
- **DFO:** Caroline Goon

Summary of Meetings and Presentations:

The Economic Equity Subcommittee meets bi-weekly. Following the Commission's fourth quarterly meeting on December 5 and December 6, 2022, the Subcommittee met on January 6, January 20, February 3, February 17, and March 3, 2023. The Subcommittee received presentations from the following subject matter experts who helped to inform their recommendations:

- **Summer Lee Haunani Sylva, Senior Advisor for Native Hawaiian Affairs, Office of the Secretary, U.S. Department of the Interior (DOI):** Provided an overview of DOI's initiatives for the Native Hawaiian community, including its draft consultation policy and procedures, Hawaiian Homes Commission Act oversight, and native language revitalization efforts.
- **Exodie C. Roe, III, Associate Administrator for the Office of Small and Disadvantaged Business Utilization (OSDBU), General Services Administration (GSA); Paul Martin, Director, IT Services Contract Operations Division, GSA; Carena Jackson, Acting Director, Small Business Compliance and Goaling Division, OSDBU, GSA:** Provided an overview of the GSA contracting and procurement process, including the selection, awards, and post-awards process, and data related to AA and NHPIs.
- **Arun Venkataraman, Assistant Secretary of Commerce for Global Markets, and Director General of the U.S. and Foreign Commercial Service, International Trade Administration:** Provided an overview of the resources available to small businesses, and information related to the increase of global exports from the United States.
- **William W. Beach, Commissioner of Labor Statistics, Bureau of Labor Statistics, U.S. Department of Labor:** Provided an overview of



the Bureau of Labor Statistics and shared relevant data regarding industries that AA and NHPI workers are concentrated in, including low-wage industries.

Summary of Recommendations:

The Economic Equity Subcommittee approved the following recommendation at the March 14, 2023, full Commission meeting:

- **Recommendation:** The Commission recommends that the federal government provides support and resources to AA and NHPI small businesses to help them expand their export operations in order to help reduce the U.S. import/export trade imbalance.



Recommendation: Increase Export Opportunities for AA and NHPI Small Businesses

Problem Statement:

AA and NHPI small businesses face barriers in accessing international markets, limiting their potential for growth and expansion. As a result, they miss out on the opportunities and benefits of exporting their products and services.

Recommendation:

By June 30, 2024, the federal government should provide support and resources to AA and NHPI small businesses to help them expand their export operations in order to help reduce the U.S. import/export trade imbalance. In addition, the steps below will help to bring an increasing number of AA and NHPI small businesses into the export marketplace:

- Increase awareness of tools and resources available through the Commerce Department, the United States Trade Development Agency (USTDA), Export-Import Bank of the U.S., and the Small Business Administration (SBA) for small AA and NHPI-owned businesses looking to expand their exports via targeted outreach sessions with AA and NHPI small businesses. Increase outreach to AA and NHPI communities and organizations to raise awareness of the benefits of exporting for small businesses.
- Gather and share data on export demands from other countries with AA and NHPI small businesses. Establish measurements to track if AA and NHPI small businesses are eligible, matched and benefiting.
- Provide training, educational programs, and language assistance to AA and NHPI small business owners on how to effectively navigate the export process and identify potential international markets for their products and services.
- Utilize U.S. consulates and embassies to provide AA and NHPI small businesses with global market outreach, including matchmaking and networking opportunities with foreign buyers and distributors. Develop targeted outreach programs to connect small AA and NHPI-owned businesses with potential international buyers and partners.
- Increase funding for market research and trade missions to help small AA and NHPI-owned businesses identify new export opportunities. Invest in trade promotion and export assistance programs that specifically target small AA and NHPI-owned businesses. Offer grants and low-interest loans to small AA



and NHPI-owned businesses to help them invest in the infrastructure and equipment needed to expand their exports.

- Provide technical assistance to small AA and NHPI-owned businesses to help them comply with international trade regulations and standards.
- Facilitate trade missions and delegations to key international markets to provide AA and NHPI small businesses with the opportunity to showcase their products and services to potential buyers and partners.

Background and Rationale:

Increasing exports for small businesses in the United States can bring a lot of benefits such as increased revenue and job creation, exposure to new markets and customers, and access to a larger pool of suppliers and partners. AA and NHPI small businesses are diverse, have unique characteristics, and are an essential part of the American economy. By providing them with the support and resources they need to expand their export operations, we can help them to grow and thrive, which will ultimately benefit the entire country.



Subcommittee on Immigration and Citizenship Status

Subcommittee Membership:

- **Co-Chairs:** Grace Huang, KaYing Yang
- **Members:** Ajay Bhutoria, Simon Pang, Dr. Amy Agbayani, Dr. Robert Underwood
- **Ex-Officio Member:** Carol Wu, Senior Policy Advisor, Immigration Section, Office for Civil Rights and Civil Liberties, Department of Homeland Security
- **DFO:** Sarah Edwards

Summary of Meetings and Presentations:

The Immigration and Citizenship Status Subcommittee meets bi-weekly. Following the Commission's fourth quarterly meeting on December 5 and December 6, 2022, the Subcommittee met on, January 11, January 25, February 8, February 14, February 22, and March 9, 2023. The Subcommittee received presentations from the following subject matter experts who helped to inform their recommendations:

- **Matt Adams, Legal Director, Northwest Immigration Rights Project:** Presented an overview on the U.S. Citizenship and Immigration Services (USCIS) Controlled Application Review and Resolution Program (CARRP), including the factors used to make determinations and recommendations to improve the process.
- **Jennifer Sudweeks, Foreign Service Officer, Bureau of Consular Affairs, U.S. State Department:** Presented on the processing of immigrant visas, including family-based, employment-based, and diversity visas.
- **Mary Cheng, Deputy Director, Executive Office for Immigration Review, U.S. Department of Justice (DOJ); Lauren Alder Reid, Assistant Director, Executive Office for Immigration Review, DOJ:** Presented on language access in immigration courts, including how current policies and resources impact decision making for limited English proficient or non-English speakers.



Summary of Recommendations:

The Immigration and Citizenship Status Subcommittee approved the following two recommendations at the March 14, 2023, full Commission meeting:

- **Recommendation:** The Commission recommends that the U.S. Department of Justice (DOJ) and the U.S. Department of Homeland Security (DHS) expand access to legal representation for those in removal proceedings through grants to non-profit and other legal aid organizations with the purpose of providing universal legal representation. The President's annual budget request to Congress for FY 2025 and future years should include allocations to support these programs.
- **Recommendation:** The Commission recommends that DHS' U.S. Citizenship and Immigration Services (USCIS) extends the grace period for H1-B workers from 60 days to 180 days to allow those who have lost their jobs to find a new sponsor, without threatening their status or the status of their families.



Recommendation: Expand Access to Legal Representation for Noncitizens in Removal Proceedings

Problem Statement:

Despite the dire consequences of deportation on directly impacted Asian American and Pacific Islander (AAPI) individuals, families, and communities, individuals subject to removal are not provided with court-appointed counsel, who can greatly influence the outcome of immigration cases.

Recommendation:

The Commission recommends that the U.S. Department of Justice (DOJ) and U.S. Department of Homeland Security (DHS) expand access to legal representation for those in removal proceedings through grants to non-profit and other legal aid organizations with the purpose of providing universal legal representation by taking the following steps:

- The President's annual budget request to Congress for FY 2025 and future years should include allocations to support programs to provide indigent legal representation for individuals in immigration court proceedings.
- The Administration should explore what funds are available within DHS, DOJ, and other agencies that could be used to support increasing indigent legal representation (i.e., appointed counsel) in immigration proceedings in all jurisdictions, including at the Board of Immigration Appeals (BIA).

Background/Rationale:

The negative impacts of deportation are felt by AAPI individuals, families, and communities.⁴² Some who are removed are repatriated to dangerous environments, and removals may result in torture, rape, and murder.⁴³ Individuals who have been deported often struggle to support their families, and coupled with the trauma and stigma of the deportation, may find it difficult to maintain contact with family members.⁴⁴ Separation of children from a parent due to deportation is associated with economic hardship, housing instability, and food insecurity.⁴⁵

Individuals of Chinese, Indian, Nepalese, Bangladeshi, Pakistani, Filipino, and Vietnamese descent were among the top 25 nationalities of individuals placed into removal proceedings in Fiscal Years 2014-2018.⁴⁶ Legal representation in immigration court can greatly reduce the likelihood of deportation. However, less than 50% of litigants in immigration court have counsel.⁴⁷ Individuals with legal representation



are five times more likely to seek relief from deportation⁴⁸ and detained individuals are 10.5 times more likely to win relief, when represented by counsel.⁴⁹ Further, when individuals have legal counsel, they are exponentially more likely to participate in the legal process, appearing for their hearings over 96% of the time, because a lawyer can help them navigate the system and manage language barriers.⁵⁰ These statistics are unsurprising given the complexity of federal immigration law and the barriers and challenges individuals face as they attempt to prepare their cases, including recent trauma, lack of financial resources, unfamiliarity with the U.S. legal system, and language inaccessibility.

Although individuals have the right to legal counsel in immigration court proceedings, they do not have the right to counsel appointed free of cost. For individuals who are detained, approximately 70-80% are unrepresented.⁵¹ The Administration has made public statements committing to reduce barriers in access to justice and the courts, including addressing the need for legal services, restoring the Department of Justice's Access to Justice function and reinvigorating the White House Legal Aid Interagency Roundtable.⁵² Given the devastating impacts of deportation on AAPI families, increasing access to legal counsel for all in immigration court proceedings should be a priority in the Administration's efforts to increase access to justice for all.

For some additional context, there exist some government-funded programs that support legal representation in immigration proceedings. For example, the National Qualified Representative Program provides appointed counsel for detained individuals who have serious mental or developmental disabilities and are unable to represent themselves.⁵³ There is also a legal representative program for Unaccompanied Children funded by the Department of Health and Human Services' Office of Refugee Resettlement.⁵⁴ Some DOJ discretionary grant programs support legal representation for victims of domestic and dating violence, sexual assault, and stalking in immigration proceedings.⁵⁵ In addition, more than 40 states and localities have created programs to provide legal representation to individuals facing removal proceedings. For instance, California currently allocates over \$50 million in funding per year to immigration legal services.⁵⁶



Recommendation: Extend H1-B Visa Grace Period for Finding Employer Sponsor

Problem Statement:

Individuals who have been residing in the United States on H1-B⁵⁷ visas face hardship and disruption as job loss results in the risk of losing their ability to remain in the United States if they are unable to find new employer sponsors within 60 days of being laid off. Burdensome H1-B visa restrictions and lengthy processes make it challenging for H1-B visa holders to complete the necessary processes within 60 days.⁵⁸

Recommendation:

The Commission recommends that the Department of Homeland Security's U.S. Citizenship and Immigration Services (DHS USCIS) extend the grace period for H1-B workers from 60 days to 180 days to allow those who have lost their jobs to find a new sponsor, without threatening their status or the status of their families.

Background and Rationale:

H1-B visa holders face significant consequences when they are laid off from their jobs⁵⁹ that has direct implications to workers from India, China, South Korea, the Philippines, Taiwan, and Pakistan as countries among the top ten holders of H1-B visas.⁶⁰ After termination, H1-B visa holders have a 60-day grace period during which they must seek a change of immigration status, have another employer file an H1-B petition on their behalf,⁶¹ or leave the United States.⁶²

H1-B workers encounter many barriers that make it difficult to complete all requirements for maintaining their status within the current 60-day grace period. The job market can be challenging, which is especially true for workers in specialized fields.⁶³ If individuals are able to complete multiple rounds of interviews and receive a job offer within the short period of time, they still face the time-consuming and complex process of transferring their H1-B status.⁶⁴ Additionally, based on delays at USCIS, this process can take longer than 60 days to complete.⁶⁵

H1-B workers who are unable to find a new job or transfer their H1-B visa within the 60-day grace period are required to leave the United States. Some workers have been in the U.S. for several years or decades. These individuals suffer stress and anxiety as they are forced to uproot their families and rapidly sell their homes and other assets.⁶⁶ Extending the grace period beyond 60 days improves the likelihood impacted workers will be able to successfully transition and supports the Administration's goals to improve socioeconomic status and employment opportunities for the AA and NHPI communities.



References

¹ Ishak, Natasha. “AAPI Community Groups have received little government support since the Atlanta Shootings.” March 16, 2022. <https://prismreports.org/2022/03/16/aapi-communities-atlanta-shooting/>.

² Ibid.

³ Aggie, Yellow Horse, Russell Jeung, and Ronae Matriano. “Stop AAPI Hate National Report: 3/19/20 - 6/30/21.” Stop AAPI Hate, 2021. <https://stopaapihate.org/wp-content/uploads/2021/11/21-SAH-NationalReport2-v2.pdf>.

⁴ Leven, Brian, Kiana Perst, Analissa Veniola, et al. “Report to the Nation: 2020s-Dawn of a Decade of Rising Hate.” California State University - San Bernardino, 2022. <https://www.csusb.edu/sites/default/files/2022-08/Report%20To%20The%20Nation8-4-22.pdf>.

⁵ Pillai, Drishti and Alyssa Lindsey. “The State of Safety for Asian American and Pacific Islander Women in the U.S.” <https://www.napawf.org/our-work/march-2022/state-of-safety>.

⁶ Office for Victims of Crime. “About OVC Funding.” January 6, 2023. <https://ovc.ojp.gov/funding>.

⁷ Office of Justice Programs. “FY 2023 Budget Request Overview.” U.S. Government Publishing Office. “Commerce, Justice, Science, and Related Agencies Appropriations Bill.” In House Report 117-395, June 30, 2022. <https://www.govinfo.gov/content/pkg/CRPT-117hrpt395/html/CRPT-117hrpt395.htm>.

⁸ Lantz, Brendan and Marin Wenger. “Are Asian Victims Less Likely to Report Hate Crime Victimization to the Police? Implications for Research and Policy in the Wake of the COVID-19 Pandemic.” *Crime & Delinquency*, 68(8), 1292–1319, August 20, 2021. <https://doi.org/10.1177/0011287211041521>.

⁹ Meeting of the President’s Advisory Commission on Asian Americans, Native Hawaiians, and Pacific Islanders, Subcommittee on Belonging, Inclusion, Anti-Asian Hate, and Anti-Discrimination, January 24, 2023.

¹⁰ 988 Suicide and Crisis Lifeline. <https://988lifeline.org/>.

¹¹ American Psychiatric Association. “Mental Health Facts For Asian Americans/Pacific Islanders.” 2020. <https://www.psychiatry.org/File%20Library/Psychiatrists/Cultural-Competency/Mental-Health-Disparities/Mental-Health-Facts-for-Asian-Americans-Pacific-Islanders.pdf>.

¹² U.S. Government Publishing Office. Public Papers of the Presidents of the United States: George H.W. Bush (1992-1993, Book II) – Memorandum on the Commonwealth of Puerto Rico. In Public Papers of the Presidents of the United States: George H.W. Bush (1992-1993, Book II) (p.2171), November 30, 1992. <https://www.govinfo.gov/content/pkg/PPP-1992-book2/html/PPP-1992-book2-doc-pg2171.htm>.

¹³ June Lee, Jae, Cara Brumfield, and Neil Weare. “Advancing Data Equity for U.S. Territories.” Georgetown Law Center on Poverty and Inequality, 2022. <https://www.georgetownpoverty.org/wp-content/uploads/2022/11/AdvancingDataEquityUSTerritories-Nov2022.pdf>.

¹⁴ Fienberg, Howard, Mary Jo Hoeksema, and Steve Jost. “America’s Essential Data at Risk: A Vision to Preserve and Enhance the American Community Survey.” Census Project, March 2022. https://censusproject.files.wordpress.com/2022/03/census_white-paper_final_march_2022.pdf.

¹⁵ June Lee, Jae, Cara Brumfield, and Neil Weare. “Advancing Data Equity for U.S. Territories.” Georgetown Law Center on Poverty and Inequality, 2022. <https://www.georgetownpoverty.org/wp-content/uploads/2022/11/AdvancingDataEquityUSTerritories-Nov2022.pdf>.

¹⁶ Ibid.

¹⁷ Ibid.

¹⁸ Ibid.



¹⁹ Ibid.

²⁰ Ibid.

²¹ U.S. Congress Joint Hearing before the Subcommittee on Information Policy, Census, and National Archives, “Census Data: Special Issues Related to U.S. Territories.” May 2008. Statement of Frank L. Mills, PH.D., Director, Eastern Caribbean Center, University of the Virgin Islands. <https://www.govinfo.gov/content/pkg/CHRG-110hhrg44911/html/CHRG-110hhrg44911.htm>.

²² IMPLAN Data Team. “U.S. Territory Data.” <https://support.implan.com/hc/en-us/articles/1260801708470-U-S-Territory-Data>.

²³ Limtiaco, Steve. “Biden: There can be no second-class citizens.” Pacific Daily News, June 8, 2021. https://www.guampdn.com/news/local/biden-there-can-be-no-second-class-citizens/article_583fd1be-c74e-5088-9ce8-34c83a3c1739.html.

²⁴ Executive Order No. 14031, 86 Fed. Reg. 29675 (2021).

²⁵ The White House. “My Brother’s Keeper.” <https://obamawhitehouse.archives.gov/my-brothers-keeper>.

²⁶ U.S. Department of Health and Human Services, Office of Minority Health. “Mental and Behavioral Health – Asian Americans.” <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=54#1>.

²⁷ Substance Abuse and Mental Health Services Administration. “2018 National Survey On Drug Use And Health: Asians/Native Hawaiians And Other Pacific Islanders (NHOPI).” https://www.samhsa.gov/data/sites/default/files/reports/rpt23248/3_Asian_NHOPI_2020_01_14_508.pdf.

²⁸ Lee, Suyeon and Sara F. Waters. “Asians and Asian Americans’ experiences of racial discrimination during the COVID-19 pandemic: Impacts on health outcomes and the buffering role of social support.” *Stigma and Health*, 6(1), 70–78, 2021. <https://psycnet.apa.org/fulltext/2020-77454-001.html>.

²⁹ Levin, Brian. “Report to the Nation: Anti-Asian Prejudice & Hate Crime,” Center for the Study of Hate & Extremism, California State University San Bernardino. 2021.

³⁰ Jones, Nicholas, Rachel Marks, Roberto Ramirez, et al. “2020 Census Illuminates Racial and Ethnic Composition of the Country.” U.S. Census Bureau, August 12, 2021. <https://www.census.gov/library/stories/2021/08/improved-race-ethnicity-measures-reveal-united-states-population-much-more-multiracial.html>.

³¹ U.S. Bureau of Labor Statistics. “Household Data Annual Averages: Employed persons by detailed occupation, sex, race, and Hispanic or Latino ethnicity.” <https://www.bls.gov/cps/cpsaat11.pdf>.

³² Palaniappan, Latha, Maria Rosario Araneta, Themistocles Assimes, et al. “Call to Action: Cardiovascular Disease in Asian Americans: A Science Advisory From the American Heart Association.” *American Heart Association*, 122(12), 1242–1252 (August 23, 2010). Yom, Stephanie and Maichou Lor. “Advancing Health Disparities Research: The Need to Include Asian American Subgroup Populations.” *Journal of racial and ethnic health disparities*, 9(6), 2248–2282 (2022). <https://doi.org/10.1007/s40615-021-01164-8>.

³³ Kwon, SC, S Patel, C Choy, et al. “Implementing health promotion activities using community-engaged approaches in Asian American faith-based organizations in New York City and New Jersey.” *Translational behavioral medicine*, 7(3), 444–466 (2017). <https://doi.org/10.1007/s13142-017-0506-0>.

³⁴ H.R.3131 - 116th Congress (2019-2020): South Asian Heart Health Awareness and Research Act of 2020. (September 30, 2020). <https://www.congress.gov/bill/116th-congress/house-bill/3131>.

³⁵ Centers for Disease Control and Prevention. “Heart Disease Facts.” October 14, 2022. <https://www.cdc.gov/heartdisease/facts.htm>.

³⁶ Ibid.



- ³⁷ U.S. Department of Health and Human Services, Office of Minority Health. “Obesity and Asian Americans.” March 26, 2020. <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=55>.
- ³⁸ Dang, Jeff, Jessica Lee, Jacqueline Tran, et al. “The role of medical interpretation on breast and cervical cancer screening among Asian American and Pacific Islander women.” *J Cancer Educ* 25(2): 253-262. PMID: PMC2878591 (2020) <https://pubmed.ncbi.nlm.nih.gov/20352398/>.
- ³⁹ Karliner, Leah, Elizabeth Jacobs, Alice Chen, et al. “Do professional interpreters improve clinical care for patients with limited English proficiency? A systematic review of the literature.” *Health Serv Res* 42(2): 727-754. PMID: PMC1955368 (2007). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1955368/>.
- ⁴⁰ Boylen, Susan, Sarah Cherian, Fenella Gill, et al. “Impact of professional interpreters on outcomes for hospitalized children from migrant and refugee families with limited English proficiency: a systematic review.” *JBIM Evid Synth* 18(7): 1360-1388. PMID: 32813387 (2020). <https://pubmed.ncbi.nlm.nih.gov/32813387/>.
- ⁴¹ Flores, Glenn. “The impact of medical interpreter services on the quality of health care: a systematic review.” *Med Care Res Rev* 62(3): 255-299. PMID: 15894705 (2005). <https://pubmed.ncbi.nlm.nih.gov/15894705/>.
- ⁴² Southeast Asia Resource Action Center. “The Devastating Impact of Deportation on Southeast Asian Americans.” 2018. <https://www.searac.org/wp-content/uploads/2018/04/The-Devastating-Impact-of-Deportation-on-Southeast-Asian-Americans-1.pdf>.
- ⁴³ Stillman, Sarah. “When Deportation is a Death Sentence,” *The New Yorker*, January 8, 2018, <https://www.newyorker.com/magazine/2018/01/15/when-deportation-is-a-death-sentence>. U.S. Department of State. 2022 Report to Congress Pursuant to Section 5 of the Elie Wiesel Genocide and Atrocities Prevention Act of 2018. <https://www.state.gov/2022-report-to-congress-pursuant-to-section-5-of-the-elie-wiesel-genocide-and-atrocities-prevention-act-of-2018/>.
- ⁴⁴ Artiga, Samantha and Barbara Lyons. “Family Consequences of Detention/Deportation: Effects of Finances, Health, and Well Being.” Kaiser Family Foundation, 2018. <https://www.kff.org/report-section/family-consequences-of-detention-deportation-effects-on-finances-health-and-well-being-issue-brief/>.
- ⁴⁵ Chaudhary, Ajay, Randolph Capps, Juan Pedroza, et.al. “Facing our future: Children in the aftermath of immigration enforcement.” The Urban Institute, February 2, 2010. <https://www.urban.org/sites/default/files/publication/28331/412020-Facing-Our-Future.PDF>.
- ⁴⁶ U.S. Department of Justice. “Statistics Yearbook Fiscal Year 2018.” <https://www.justice.gov/eoir/file/1198896/download>.
- ⁴⁷ U.S. Department of Justice. “Executive Office For Immigration Review Adjudication Statistics.” January 16, 2023. <https://www.justice.gov/eoir/page/file/1062991/download>.
- ⁴⁸ Eagly, Ingrid and Steven Shafer. “Access to Counsel in Immigration Court.” American Immigration Council, September 28, 2016. <https://www.americanimmigrationcouncil.org/research/access-counsel-immigration-court>.
- ⁴⁹ Straut-Eppsteiner, Holly. “U.S. Immigration Courts: Access to Counsel in Removal Proceedings and Legal Access Programs.” Congressional Research Service, July 6, 2022. <https://crsreports.congress.gov/product/pdf/IF/IF12158/3>.
- ⁵⁰ Ingrid, Eagly and Steven Shafer. “Measuring In Absentia Removal in Immigration Court.” American Immigration Council, January 28, 2021. <https://www.americanimmigrationcouncil.org/research/measuring-absentia-removal-immigration-court>.
- ⁵¹ TRAC Immigration. “State and County Details on Deportation Proceedings in Immigration Court.” 2019. <https://trac.syr.edu/phptools/immigration/ntahist/>.



⁵² The White House. “Memorandum on restoring the Department of Justice’s access to justice function and reinvigorating the White House Legal Aid Interagency Roundtable.” May 18, 2021. <https://www.whitehouse.gov/briefing-room/presidential-actions/2021/05/18/memorandum-on-restoring-the-department-of-justices-access-to-justice-function-and-reinvigorating-the-white-house-legal-aid-interagency-roundtable/>.

⁵³ Corradini, Michael. “National Qualified Representative Program.” Vera Institute of Justice. <https://www.vera.org/projects/national-qualified-representative-program>.

⁵⁴ Vera Institute of Justice. “Legal Services for Unaccompanied Children.” <https://www.vera.org/projects/legal-services-for-unaccompanied-children>.

⁵⁵ U.S. Department of Justice, Office on Violence Against Women. “Legal Assistance for Victims Program.” <https://www.justice.gov/ovw/page/file/1548296/download>.

⁵⁶ American Immigration Lawyers Association and American Immigration Council. “Policy Brief: The Biden Administration and Congress Must Guarantee Legal Representation for People Facing Removal.” January 2021. <https://www.aila.org/advo-media/aila-policy-briefs/legal-representation>.

⁵⁷ U.S. Department of Labor. “H-1B Program.” <https://www.dol.gov/agencies/whd/immigration/h1b>.

⁵⁸ Gyamfi Asiedu, Kwasi. “‘A race against time’: U.S. tech layoffs put foreign workers on ticking clock.” Los Angeles Time, February 19, 2023. <https://www.latimes.com/politics/story/2023-02-19/tech-layoffs-foreign-worker-visa-time-limit>.

⁵⁹ Chen, Te-Ping. “Tech Layoffs Hit H1B Visa Workers Hard.” The Wall Street Journal, February 10, 2023. <https://www.wsj.com/articles/tech-layoffs-hit-h1b-visa-workers-hard-ca03c2cd>.

⁶⁰ “H-1B Visa Statistics by Country of Birth.” <https://immigrationroad.com/visa/h1b-worker/h1b-visa-statistics.php>.

⁶¹ U.S. Citizenship and Immigration Services. “Options for Nonimmigrant Workers Following Termination of Employment.” December 19, 2022. <https://www.uscis.gov/newsroom/alerts/options-for-nonimmigrant-workers-following-termination-of-employment>.

⁶² Ojeda, Rommel and April Xu. “What Can H1B Visa Holders Do After Being Laid Off?” Documented New York, February 8, 2023. <https://documentedny.com/2023/02/08/h1b-visa-layoffs-lottery-twitter-facebook-amazon-meta/>.

⁶³ Kreighbaum, Andrew. “Rolling Tech Layoffs Snag Green Card Prospects for H-1B Workers.” Bloomberg Law, January 31, 2023. <https://news.bloomberglaw.com/daily-labor-report/rolling-tech-layoffs-snap-green-card-prospects-for-h-1b-workers>.

⁶⁴ Anderson, Stuart. “Twitter And Other Tech Layoffs Raise H-1B Visa Employment Issues.” Forbes, November 4, 2022. <https://www.forbes.com/sites/stuartanderson/2022/11/04/twitter-and-other-tech-layoffs-raise-h-1b-visa-employment-issues/?sh=a2ce8204db60>.

⁶⁵ Gyamfi Asiedu, Kwasi. “‘A race against time’: U.S. tech layoffs put foreign workers on ticking clock.” Los Angeles Time, February 19, 2023. <https://www.latimes.com/politics/story/2023-02-19/tech-layoffs-foreign-worker-visa-time-limit>.

⁶⁶ Shah, Simone. “‘A Failed and Broken System’ Tech Layoffs Set the Clock Ticking for Foreign Workers.” Time, December 23, 2022. <https://time.com/6239846/tech-layoffs-visa-h1b/>.