

CENTERING LIVED EXPERTISE TO ADDRESS FOOD INSECURITY

Addressing Challenges Faced by Immigrant Populations Seeking Public Benefits

Alice Aluoch is a technology and global health professional, with a passion for advocacy, development, and strategic investments in global health. She was inspired to pursue anti-poverty work due to her experiences as a child in Kenya.

“I saw poverty firsthand and faced the difficult choices that a lot of girls and young women face when growing up with limited resources,” noted Alice. “My parents, even though struggling, chose education for us. I decided to pay it forward. I was convinced there was a better life on the other side, where girls could be teachers, doctors, musicians, or whatever else they wanted to become.”

Alice started [Mfariji Africa](#), a nonprofit organization dedicated to supporting girls in marginalized communities in Kenya complete their education. Her work in anti-poverty continued when she moved to the U.S. in 2013 and joined [RESULTS](#), a nonprofit that brings together people who use their voices to influence political decisions that can bring an end to poverty. She started as a volunteer and eventually became a senior associate for grassroots expansion. Through this role, Alice developed expertise in relationship building with members of Congress. This work had a great impact on Alice — it showed her that her voice, even from the comfort of her home in Delaware, can influence policy, by making a phone call or writing a letter to members of Congress.



Who: Alice Aluoch

Role: Founder and Executive Director, Mfariji Africa; and Senior Manager, Global Health Council

“I’m most proud of my work in bridging the gap and bringing voices — especially from the African Diaspora — that do not usually have a seat at the table and providing a safe space to discuss our unique challenges in addressing poverty and actively engaging our communities through advocacy.”

CENTERING LIVED EXPERTISE TO ADDRESS FOOD INSECURITY: PROFILE SERIES

No one understands public benefit programs as well as the community members served. This series shares the voices of people with direct experience using programs such as Medicaid, SNAP, and WIC on the value of cross-program coordination and incorporating lived expertise into policymaking and implementation processes. This series is a product of [Exploring Cross-Agency Partnerships to Address Food Insecurity](#), a national initiative led by the Center for Health Care Strategies with support from the Robert Wood Johnson Foundation.

At RESULTS, Alice founded the [African Leadership Cohort](#) to address the lack of immigrant representation in volunteers and leaders. This group brings together leaders from communities across the country who do not always have a seat at the table and provides a safe space to discuss their unique challenges and encourage participants to connect with their communities.

Alice currently works at [Global Health Council](#) as the Senior Manager for Membership and Development and continues to advance global health priorities by uniting advocates, implementers, policy makers, and other stakeholders.

Alice serves as a community partner with lived expertise on [Exploring Cross-Agency Partnerships to Address Food Insecurity](#), a national initiative led by the Center for Health Care Strategies with support from the Robert Wood Johnson Foundation. In this profile, Alice shares her perspectives on opportunities to address challenges and barriers for immigrant families accessing public benefits, like Medicaid and SNAP.

What unique challenges do immigrant families face when accessing public assistance programs?

There are many challenges, but the biggest barrier is fear. There's a complex web between public benefits laws and immigration laws, which makes it difficult for immigrant families to navigate state and federal programs. Oftentimes, immigrants who are eligible for state benefit programs like SNAP are not enrolled because they fear that applying will impact their immigration status. For example, it has caused intense confusion where parents who are waiting on their green cards will not apply for their child even when their child was born in America and rightfully qualifies for those benefits. The lack of transparency as to how the enrollment information is shared across programs can deter many immigrants from applying. There's also the ingrained fear of the [public charge rule](#), especially after the Trump Administration expanded criteria in 2019. That more expansive 2019 public charge rule is [no longer in effect](#), but immigrants still have persistent fears about how enrollment in government programs could impact their ability to get a visa or green card.¹

Language and cultural barriers are also a hindrance for many immigrants accessing benefits. For many of us, English is not a first language, which makes it very hard to thoroughly understand and complete applications without help. This begs the questions — why aren't the applications and notices consistently made available in plain or preferred languages?

What are some of the common challenges immigrants face in maintaining public benefits?

The process for retaining SNAP and Medicaid benefits is not streamlined in most states. I think about how often we need to submit the same information across agencies. How is that data stored and shared across agencies — can it be? For instance, if an individual qualifies for SNAP, why do they not automatically qualify for Medicaid? Why do they need to redo the entire process if nothing has changed? How can states reduce the number of recertifications?

How can state agencies make the renewal process more accessible for immigrant populations?

The renewal process can be more user-friendly. For example, case workers could automatically update eligibility for other programs when individuals are in the office for SNAP renewal. It would also be helpful if the [renewal process for SNAP and Medicaid were aligned](#) to allow people to complete both at once. And to take it one step further, print the renewed electronic benefit transfer card while individuals are there for SNAP.

There is an opportunity to standardize requirements and [streamline applications and enrollment processes as some states have done](#) given how similar income and other requisites are across programs. If possible, combine the applications or try to make the application more person-centered by allowing people to see what public benefits they qualify for across all programs and apply using an all-in-one application, [such as Minnesota's integrated benefits application](#).

To address language and cultural barriers, state agencies can create a dedicated unit for SNAP and/or Medicaid to assist immigrants with applications and other needs and employ individuals with lived experiences and from the immigrant communities they serve. This could be helpful in closing the eligibility and enrollment gaps and in creating more inclusive and comfortable environments within local state offices where applicants go to apply.

Where are opportunities for state agencies to enhance engagement with immigrant populations?

Community leaders can serve as a bridge when outreaching to communities, especially communities of color or people who are marginalized. Many communities experiencing poverty have been taken advantage of for a very long time by systems and power structures, which makes it difficult to build trust. If a state agency wants to improve engagement with immigrant populations, then they must go into those communities and work with existing grassroots organizations that are trusted by the community.

It would also be helpful for state agencies to work with community-based organizations. There are a lot of immigrant grassroots organizations doing incredible work, like providing English lessons and free interpretation services, that could assist with applying for public benefits. State agencies don't always need to go into the communities — they can provide the needed information to community partners and let them disseminate it to reach more people.



ABOUT THE CENTER FOR HEALTH CARE STRATEGIES

The Center for Health Care Strategies (CHCS) is a policy design and implementation partner devoted to improving outcomes for people enrolled in Medicaid. We support partners across sectors and disciplines to make more effective, efficient, and equitable care possible for millions of people across the nation. For more information, visit www.chcs.org.

ENDNOTES

¹ CHCS Note: Immigration officials no longer consider SNAP enrollment in public charge determinations. Similarly, Medicaid and CHIP enrollment is not considered, except as it relates to support for long-term institutional care. For more information, visit <https://www.uscis.gov/green-card/green-card-processes-and-procedures/public-charge/public-charge-resources>.