

Kristi Noem
Secretary of Homeland Security
Washington, D.C. 20528

Re: DHS Docket No. USCIS-2025-0304, U.S. Citizenship and Immigration Services

I am writing on behalf Children's Defense Fund – New York (CDF-NY), in response to the Department of Homeland Security's Notice of Proposed Rulemaking (NPRM) to express our strong opposition to the changes regarding "public charge," published in the Federal Register on November 19, 2025.

Established in 1992, CDF-NY has elevated the most pressing issues affecting disadvantaged children and youth across New York State. Our mission is rooted in the belief that all children and youth deserve the tools and environments to achieve their full potential and thrive. Today, CDF-NY collaborates with children, youth, families, and statewide partners to advance collective action around youth and family justice, economic mobility and health equity.

Back during the first Trump Administration, the changes to the Public Charge Rule, added public benefits that could prevent immigrant applicants from adjusting their legal status. The Public Charge Rule deems an immigrant inadmissible on grounds of potentially becoming a public charge to the United States. The adjustment of the Public Charge Rule gave the Department of Homeland officials broader authority to deem an applicant a "public charge" to the government. The policy adjustment created fear in low-income communities and further increased nutritional, health and economic needs for mixed-status families, as enrollment numbers for much needed assistance programs decreased significantly. Most importantly, due to fear, millions of U.S. citizen children suffered the devastating consequences.¹

Denying access to preventive care adds multiple layers of personnel work and costs as it shifts the burden to hospital emergency departments and, ultimately, to state budgets and taxpayers. Children and youth who are unable to access preventive health care will eventually enter the health care system at more complex and expensive points. Delayed treatment leads to worse health outcomes, including, and poor maternal and infant health, all of which require more intensive, costly interventions.

A recent survey study by Kaiser Community Foundation and the New York Times found that since January 2025, roughly one in six immigrant parents nationwide have stopped participating in government programs that help pay for food, housing, or health care "because they did not want to draw attention to their or a family member's immigration status."² This is an alarming

¹ "Chilling Effects". Batalova, Jeanne, Michael Fix, and Mark Greenberg. "CHILLING EFFECTS." (2018).

² Pillai, Drishti, et al. "KFF/New York Times 2025 Survey of Immigrants: Health and Health Care Experiences During the Second Trump Administration" at p. 3. KFF. Nov. 18, 2025.

finding as more U.S. citizen children are not receiving essential public benefits supports at a crucial time in their development.

New York children in mixed-status families already face significant barriers to accessing healthcare and other vital resources.

CDF-NY partners on the ground observe a chilling effect on immigrant families, who are increasingly afraid to access services their children need and are entitled. These organizations are deeply concerned about the devastating impacts that the proposed changes to “public charge” could have on the children we serve who are U.S. citizens and are part of mixed-status households with immigrant parents. In New York State, more than 1.4 million children (37% of the state’s child population) have at least one immigrant parent, and over 88% of these children were born in the United States.³ Many of these U.S. citizen children depend on early preventive healthcare and other government-funded support services like SNAP and early education to thrive.

In areas like Rochester, White Plains, Portchester and New York City, partners report widespread fear and a decline in social service and early education enrollment among mixed-status families. One partner agency reported that health centers have seen a significant decline in patients. The agency reports that some immigrant families are hesitant to apply for health and other public services for fear that their information will be used against them. Another social service agency has also seen a noticeable decline in recent immigrants’ enrollment in its early childhood education and parent engagement programs, as well as their food pantry services.

Enhanced Fear and Confusion

The proposed rule would remove the regulations that provide “bright line” guidance to immigration officers on the law of public charge, that only past receipt of cash assistance for income maintenance or long-term institutionalization at government expense would be considered in the public charge assessment. Including access to health treatment as a public charge, adds fear and enhances economic and health-related risks to U.S. citizen children. In addition, without a clear prohibition on considering benefits used by family members, the rule will cause families to worry about whether the receipt of benefits by family members – including U.S. citizen children – will be held against them in a public charge assessment.

The proposal states that if the rule is finalized, then forthcoming policy guidance will consider current or past use of any public benefit in determinations of whether someone is a public

<https://www.kff.org/immigrant-health/kff-new-york-times-2025-survey-of-immigrants-health-and-health-care-experiences-during-the-second-trump-administration/>.

³ Profile of the Immigrant Population in New York”. The Vera Institute of Justice. September 2023.

<https://verainstitute.files.svdcn.com/production/downloads/publications/profile-of-foreign-born-population-new-york-city.pdf> 22 “New Americans in New York.” American Immigration Council. 2024.

charge. Without clear guardrails to limit the kinds of public benefits programs that immigration officers may consider in determining whether someone is likely to become a public charge. For example, there is nothing in the proposed rule to prevent the Department of Homeland Security (DHS) from denying a mother's application for permanent residence under the public charge ground of inadmissibility simply because she sought prenatal care through Medicaid while she was pregnant to ensure the health of her unborn child.

Similarly, the proposed rule would permit DHS to deny a green card domestic violence survivor because she reported her abuser to the police and received victim services through the local police department to ensure her safety and that of her children. This practice will empower abusers while trapping abused women and U.S. citizen children in dangerous situations, putting their lives at risk, and deterring them from seeking help or reporting crimes, even when they experience severe physical or sexual violence.

Currently, lawful permanent residents often face a five-year bar before they can access federal benefits. The current structure of the social welfare system creates barriers for mixed-status families with U.S. citizen children to move out of poverty, access higher education, and access affordable health care, all of which are essential to allowing the children in these families to thrive long-term in the U.S. The new rule is broad and ambiguous and could deny a green card to a parent whose U.S. citizen child pays in-state tuition or receives state-based financial aid from a public college or university.

Conclusion

At the minimum, we respectfully ask that any changes to the public rule will not be retroactive. U.S. citizen children from mixed-status households have been suffering from the chilling effect of the public rule, as the proposed changes will further increase poverty, lack of early education and health outcomes for millions of children. These children deserve a chance to fulfill their full potential.

Thank you for the opportunity to comment on this important matter that can potentially impact millions of U.S. citizen children. If you have any questions about anything in the comments or the materials, please contact Juan Diaz, Policy Manager, CDF-NY, by email at jdiaz@childrensdefense.org

Sincerely,
Juan Diaz, MS

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