



Immigration Reform and Administrative Relief for 2014 and Beyond: A Report on Behalf of the Committee for Immigration Reform Implementation (CIRI), Human Resources Working Group¹

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Executive Summary

Successful implementation of any broad-scale immigrant legalization program requires an adequately funded infrastructure of immigrant-serving organizations. In 2014, President Obama announced an expanded Deferred Action for Childhood Arrivals (DACA) program, as well as the Deferred Action for Parents of Citizens and Lawful Permanent Residents (DAPA) program, which would make it possible for approximately five million people to attain lawful, albeit temporary, status and employment authorization. As the initial DACA program instituted in 2012 has already stretched the capacity of immigrant-serving organizations to their limits or even beyond them, the possibility of full implementation of DAPA and the expanded DACA programs presents a formidable challenge for these organizations.

In this paper, the Human Resources Working Group of the Committee for Immigration Reform Implementation (CIRI) draws on the lessons of

¹ This article is the product of the Human Resources Working Group of the Committee for Immigration Reform Implementation (CIRI). The views expressed may not reflect the opinions of the authors' respective organizations, which are included for identification purposes only.

the Immigrant Reform and Control Act of 1986 (IRCA), DACA, and other initiatives to provide a roadmap for immigrant service delivery agencies and their partners in planning for implementation of the expanded DACA and the DAPA programs, with an eye (ultimately) to broad legislative reform. In particular, this paper focuses on the funding and human resources that the immigrant service delivery field, writ large, would require to implement these programs.

If expanded DACA and DAPA were implemented, the CIRI Working Group estimates that, of the total of five million that may be eligible, 1.08 million individuals will require extensive application assistance, generating the need for approximately three times more full-time staff than are currently in the field. Moreover, without additional funding and staff, agencies will likely not be able to shift a portion of staff time to accommodate any new program, even taking the typical fee-for-service model into account. Thus, the paper identifies a pressing need for “upfront” funding as early in the program as possible for outreach, public education, combating *notario* fraud, advocacy, and assistance to self-filers.

In terms of the financial resources needed, the Working Group’s analysis shows that about \$83 million, net after collection of fees, is a reasonable estimate for the potential nonprofit sector “funding gap” required to assure effective application assistance services to the eligible low-income people likely to apply for the expanded DACA and DAPA programs. Wise front-loaded investments can help to maximize coordination and minimize duplication, ensure education and outreach, and channel applicants to the most appropriate sources of assistance. While investments required to build the necessary infrastructure are significant, the costs will be far outweighed by the benefits, not just to the DACA/DAPA population but to the society at large.

Introduction

Although it may not seem so to casual observers, the journey toward comprehensive immigration reform is well underway. It began nearly 30 years ago with passage of the Immigration Reform and Control Act of 1986 (IRCA), a signature achievement of the immigrant rights community. While IRCA led to the legalization of roughly three million persons, it failed to legalize sufficient numbers of unauthorized persons, to expedite family reunification, and to reform the underlying legal immigration system. Those shortcomings, combined with largely ineffectual enforcement through the early 1990s, paved the way for the growth of the unauthorized population to nearly 12 million in the mid-2000s. The 1990s provided some new milestones, including modest increases in legal immigration, limited legalizations of Central American and Haitian refugees, and harsh new enforcement measures. The journey continued with the introduction of the first of many comprehensive immigration reform bills a little over a decade ago, two of which passed the Senate in 2006 and 2013, respectively.

It moved slowly ahead with the release of the “Morton memo” on prosecutorial discretion in June 2011. It made a huge leap forward with the Deferred Action for Childhood Arrivals (DACA) program in August 2012, and continued with the Department of Homeland Security’s issuance of a rule in January 2013 that eased the application process abroad for the immediate relatives of US citizens whose visa petitions have been approved. In June 2013, the Senate passed comprehensive legislation, which was not considered in the House. The journey advanced with the advent of “Parole in Place” for relatives of active and formerly active US military personnel in November 2013, and with the Haitian Family Reunification Parole Program, which allows for the “parole” and work authorization of the family members of US citizens and lawful permanent residents (LPRs) two years before their immigrant visa priority date becomes current.

In one of the most momentous developments in the immigration field since IRCA, on November 20, 2014, President Obama announced an expanded DACA program, the Deferred Action for Parents of Citizens and Lawful Permanent Residents (DAPA) program, which covers the parents of US citizens and LPRs, and an expanded provisional waiver program (Form I-601A waivers). The DAPA program will potentially cover 3.89 million persons and the expanded DACA program 1.52 million, with 262,000 eligible for both programs (Warren 2014).² Good estimates do not exist for the numbers of potential visa recipients covered by the provisional waiver program; however, this procedure—which allows unauthorized persons to apply for a waiver to unlawful presence prior to their departure from the United States—could encourage tens of thousands to secure visas abroad that would permit their re-entry via the legal immigration system.

Although it appears that comprehensive legislative reform is unlikely in the immediate future, the development of an implementation infrastructure is essential to ensure the success of interim immigration relief programs. In this paper, we seek to draw on the lessons of IRCA, DACA, and other initiatives to provide a roadmap to guide immigrant service delivery agencies and their partners in planning for implementation of the expanded DACA and the DAPA programs, with an eye (ultimately) to broad legislative reform. In particular, this paper focuses on the funding and human resources that the immigrant service delivery field, writ large, will require to implement these programs.

History

Immigration Reform and Control Act (IRCA) Legalization

Notwithstanding significant challenges and subsequent criticism, by almost every measure IRCA’s legalization programs were highly successful. In sum:

- About 75 percent of those eligible for the regular legalization program (1.76 million applicants of an estimated 2.3 million eligible) submitted complete applications; of these, just over 1.6 million (91 percent) were granted LPR status. Overall, just

² Warren’s estimates gibe closely with those produced by the Migration Policy Institute. After subtracting “dual eligibles” from the DAPA numbers, MPI estimated that 3.7 million and 1.5 million would be eligible for DAPA and expanded DACA, respectively (2014).

fewer than three-quarters of those estimated to be eligible received LPR status (Kamasaki 2013).

- More than 1.3 million people applied for the Special Agricultural Worker (SAW) program; of these, nearly 1.1 million (85 percent) were granted LPR status (ibid.).

The total of nearly three million legalized made IRCA by far the most successful legalization program conducted by any country before 1986 or since then.³ By way of contrast, 3.2 million persons were regularized in 27 European nations between 1996 and 2007, although such programs have generally fallen into disfavor in Europe as a policy tool in recent years (Kerwin, Brick, and Kilberg 2012).

Of the applicants for the regular legalization program, about 20 percent filed applications through Qualified Designated Entities (QDEs), mainly nonprofit practitioners and service providers established by IRCA to serve as a buffer between the undocumented and the government; the comparable number for the SAW program was 25 percent. However, accounts from both the government and QDE network sources suggest as many as half of those that filed applications directly with the Immigration and Naturalization Service (INS) received some form of assistance from a QDE, lawyer, union, or other service provider (Meissner and Papademetriou 1988; North and Portz 1989).⁴

The US Catholic Conference (USCC), which operated the largest nonprofit network of legalization assistance providers, reported assisting nearly 450,000 people who were potentially eligible for legalization and ultimately filed about 175,000 completed applications. The type of assistance provided to the larger group of “potential eligibles” included outreach efforts through workshops and fairs, classroom-type sessions for group preparation of pre-applications, and other activities. This diversity of types of assistance, combined with variances in record-keeping systems within USCC’s decentralized network, suggest that this data should be interpreted with caution. Nevertheless, taken together, the evidence suggests that 50 percent or more of potential IRCA legalization and SAW applicants sought some type of assistance from a nonprofit provider, and of these, perhaps 35 to 45 percent eventually completed an application with the original provider or another QDE (Meissner and Papademetriou 1988, 61-79).⁵ Virtually all of those who filed

3 All of the programs implemented abroad were smaller, and most far simpler and more inclusive, than IRCA. The Canadian program, implemented more than a decade prior to IRCA, was a true “amnesty,” providing immediate adjustment of status for virtually the entire unauthorized population. However, the program had a short, two-month application window, compared to IRCA’s 12-month application period; Canada’s program legalized perhaps one-fifth to one-quarter of its unauthorized population (Gonzalez-Baker 1990; North and Portz 1989; Brick 2011).

4 Meissner and Papademetriou reference one INS estimate to this effect; North and Portz conclude “about half” of legalization applicants received some type of assistance from a nonprofit provider; they note that five-to-six percent of applications were filed by private attorneys.

5 Reports on the program, as well as anecdotal accounts, suggest substantial “forum shopping” by IRCA legalization applicants, many of whom appear to have been seeking the quickest, least expensive process for submitting applications. The USCC created an intensive screening and review process at the program’s outset in anticipation of a high burden of proof and demanding evidentiary requirements, which slowed the preparation and filing of its cases. An internal USCC memorandum issued about one-third of the way through legalization acknowledged that many prospective applicants had lost patience with their program model, characterized by “too much caution, too many delays, too much overcrowding, too many steps, too much ‘bureaucracy’” and thus went elsewhere. See Meissner and Papademetriou 1988, 61-79.

applications through a QDE received one-to-one counseling, typically over two or three in-person appointments. These figures suggest the importance of a robust civil society response in ensuring appropriate outreach, service-delivery, and program participation (even for those who ultimately self-file) in any large-scale immigrant benefit program, like DACA, DAPA, and the provisional waiver program.

IRCA also advanced the “registry” date from June 28, 1940 to January 1, 1972. Registry allows long-term unauthorized residents—i.e., who entered the country prior to the cut-off date and who meet other requirements—to become LPRs. More than 72,000 persons have legalized under this program since 1987. Remarkably, Congress has not advanced the registry date since IRCA, contributing to the creation of an unauthorized population that includes an estimated 1.9 million persons who have been in the United States for 20 years or more, 1.6 million for 15 to 19 years, and 3.1 million for 10 to 14 years.⁶ Moreover, the average length of stay for the US unauthorized population is increasing dramatically each year.

Every account of the period described both the government and nonprofits as being “overwhelmed,” “stretched,” and “challenged” by the legalization and SAW programs. Other program shortcomings included an ineffective INS public education campaign, controversial eligibility lawsuits, and disproportionate application rates for subgroups, with Hispanics overrepresented and Asians and Africans underrepresented.

Nevertheless, the IRCA programs legalized nearly three million people, constituting almost 75 percent of those eligible for regular legalization. Importantly, a number of expected problems never substantially materialized and, setting aside policy differences with advocates, INS generally performed at a high level during legalization. For example, there are virtually no credible reports of INS misusing the legalization process for enforcement purposes. Creation of a parallel legalization infrastructure within INS was especially important for this oft-criticized agency whose previous public face emphasized enforcement.

At the beginning of the program, many advocates feared that the \$185 fee (capped at \$420 for a family of four or more)—combined with fingerprinting, medical, legal, and other fees that could add up to \$200 per applicant—would prevent many from applying. Although practitioners noted some hardship cases, cost did not appear to be a major deterrent to applying, nor were many stories of extreme hardship reported. Many predicted severe problems during the second stage as temporary residents sought English/civics courses from an already overburdened adult education infrastructure.⁷ However, aided by State Legalization Impact Assistance Grants (block grants included in IRCA) the education systems and legalization applicants both “muddled through” without significant numbers of temporary residents being denied access to LPR status.

6 “Estimates of the Unauthorized Population for States.” Center for Migration Studies. Accessed March 9, 2015. <http://data.cmsny.org/>

7 IRCA required applicants for permanent residence to either pass an English/civic test or be enrolled in an approved course.

Germaneness to Future Legalizations

There are many differences between the IRCA programs and the environment in which they took place and those announced by President Obama in November 2014. Technological changes should make the application assistance process less burdensome today than under IRCA. For example, the widespread availability of information via the Internet should ease access to documentation of continuous residence and workforce participation, should facilitate increased outreach efforts, and should enable high numbers of self-filers. Additionally, the immigrant-serving field is considerably larger, more diverse, and more experienced than under IRCA, and the extraordinary growth, development, and increasing sophistication of the immigrant rights community should lead to a better coordinated and more extensive public education, service delivery, and advocacy response to the DACA, DAPA, and provisional waiver programs, and beyond (Campos 2014).

However, potential hurdles for applicants and the immigrant rights community remain. High application fees, combined with “low-bono” attorney and nominal charitable legal agency fees, will constitute a substantial burden for the unauthorized, 28 percent of whom fall below the federal poverty line.⁸ A more recent point of comparison to the expanded DACA and new DAPA programs is the implementation of the initial DACA program, discussed below.

DACA Experience

In August 2012, the Obama administration began implementation of DACA, which offers deferral of deportation and work authorization for unauthorized residents who: (1) arrived prior to age 16, are at least 15 years of age at the time of applying, and continuously resided in the United States since June 2007; (2) on June 15, 2012, were physically present in the United States, had no lawful status, and were under 31 years of age; (3) are currently in school, have graduated high school, or obtained a GED; and (4) have not committed disqualifying crimes. The formal planning period for both the Department of Homeland Security’s US Citizenship and Immigration Services (USCIS) and the legal and nonprofit sectors was very brief—less than two months elapsed between the program’s initial announcement in June of 2012 and the beginning of the application process. On November 20, 2014, President Obama expanded this program to cover a three-year (renewable) period, to remove the age limit on beneficiaries, and to move forward the required entry date to January 1, 2010.

DACA targets a young population that has higher levels of education, English proficiency, and literacy relative to the unauthorized population overall. These factors, which would tend to facilitate DACA applications, might be offset by the absence of an application period deadline, the ability to apply for DACA as a defense against deportation, and the \$465 application fee, all of which might be disincentives to apply immediately. Thus, while there are important differences between DACA and the likely structure of broader programs like those contemplated in proposed reform legislation, DACA provides a more contemporary experience than IRCA. Analyses of the early years of DACA’s implementation have found:

⁸ “Estimates of the Unauthorized Population for States.” Center for Migration Studies. Accessed March 9, 2015. <http://data.cmsny.org/>

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- Through the first quarter of fiscal year 2015, USCIS received a cumulative total of 770,338 initial applications for processing, approving 638,897 and denying 38,597. There are a remaining 49,670 pending processing, of a total pool of eligibles estimated to be about one million (US Citizenship and Immigration Services 2015).⁹
- When accounting for children aged 13 and 14 in 2012 who have since aged into eligibility, the number of immediately eligible youth increases to 1.4 million.
- In addition to the 500,000 or so people eligible for DACA who have not yet applied, about 426,000 individuals aged 15 to 30 do not yet meet the education criteria (Batalova et al. 2014). These “not-yet-eligibles” are predominantly male, and compared to DACA eligibles overall are more than twice as likely to be limited-English-proficient, have higher workforce participation rates and higher poverty rates, and are three times more likely to be parents themselves (Batalova, Hooker, and Capps 2013).
- Five states had application rates of 60 percent or more for immediately eligible youth: Arizona, Texas, Nevada, Colorado, and North Carolina; California, Illinois, and New York have seen half of their immediately eligible population apply (Batalova et al. 2014). Lower-than-expected application rates in states including Massachusetts, New Jersey, Virginia, and Florida could be related to the demographic make-up of their unauthorized populations. Higher-than-expected application rates came from Mexicans and Central Americans, who constitute 74 percent of those eligible but 86 percent of those who had applied as of March 2014; “under-indexing” states tend to have lower proportions of these populations.
- Asians in particular have lower-than-expected application rates, similar to what occurred under IRCA. The Korean application rate stands at 24 percent, while the rate for Chinese applicants is near zero, even though China ranks ninth among the top ten countries of origin for immediately eligible applicants (Batalova et al. 2014).
- Longer-term residents (10 years or more) and those who were 10 years of age or younger when they arrived are over-represented among DACA applicants (Singer and Prchal Svajlenka 2013).

Findings from one survey of DACA recipients suggest that the program contributes significantly to increased employment, bank and credit card access, and the availability of driver’s licenses (Gonzales and Terriquez 2013). Seventy percent of respondents to another survey noted they had been hired or moved to a new job upon receiving DACA (Wong and Valdivia 2014). The role of immigrant-serving organizations in the implementation of DACA seems substantial, as only three-in-ten DACA recipients in one survey sample submitted their application wholly on their own. Fully one-third attended a free DACA workshop and four-in-ten paid for legal assistance (ibid.). These numbers highlight the need for a robust and well-resourced implementation infrastructure.

However, nonprofits, unions, and others assisting DACA applicants surveyed by Grantmakers Concerned with Immigrants and Refugees (GCIR) reported severe strains on nonprofit and legal assistance capacity involving insufficient human resources (staff and volunteers); inadequate/inconsistent service delivery models and case management

⁹ Note that initial estimates of DACA eligibles in 2012—subject to change as components of the population age in, age out, and graduate, drop out of, or enroll in secondary school—ranged from 1.089 million (Batalova, Hooker and Capps 2013) to 936,000 (Immigration Policy Center 2012) and 950,000 (Passel and Hugo Lopez 2012).

systems; excessive duplication of certain key functions (i.e., producing materials like manuals and tool kits); insufficient resources for outreach (notwithstanding some effective partnerships with Spanish media); and other concerns. Despite these concerns, DACA has both been a “wake up call” and a base to build on for preparations for a larger legalization effort.

The GCIR survey also identified promising innovations emerging from DACA implementation, including improved online application assistance systems, promising micro-loan models, and numerous intra- and cross-sector partnerships that have the potential to increase the capacity to serve unauthorized persons seeking legalization. That said, some of these promising models have not been tested fully. Overall, the immigrant rights community needs to devote more resources and attention to developing and replicating successful, horizontally integrated programs, which combine public education, community mobilization, and legal expertise. As occurred in 1986 and in subsequent smaller legalization efforts (e.g., the Nicaraguan and Central American Relief Act/ABC settlement), the traditional immigrant-serving sector, augmented by energetic new players including the United We Dream/Own the DREAM networks, has demonstrated substantial adaptability and resilience throughout the DACA process (McGarvey 2013).

The overall result—completion of applications from about 60 percent of those estimated to be immediately eligible for DACA—should be considered a highly respectable showing, albeit lower than under IRCA’s legalization program (Batalova et al. 2014). This positive assessment is specifically warranted in light of the extremely brief DACA planning period, the service delivery and capacity challenges, the absence of any government funding for application assistance, and other factors limiting the government’s outreach and processing systems.

Looking Ahead

Notably absent in the crush of IRCA implementation was any thought of steps needed to strengthen the immigration legal landscape afterwards (Bill Ong Hing, Charles Kamasaki, and Jack Holmgren, pers. comm.). Almost alone among the many groups actively engaged in the implementation of IRCA, the Catholic Church created a permanent entity—the Catholic Legal Immigration Network (CLINIC)—to strengthen and expand services in the aftermath of legalization.¹⁰ CLINIC is now by far the largest immigrant legal service network in the country, with some 275 affiliates across the nation.

Given the growing demand for low-cost, high-quality immigration services, the need for a stronger, established infrastructure to sustain services for this population and to facilitate implementation of any new policies or programs is apparent. Should comprehensive immigration reform legislation pass prior to a substantial build-up of the immigrant-serving sector, the insufficiency of the current infrastructure would become glaringly obvious.

10 In the midst of the legalization program, CLINIC was created on August 18, 1988.

Resources Needed for Processing

Based on historical data from past mass legalizations, one might assume that the lower bound of those likely to apply for DAPA and expanded DACA over two years might be about 60 percent of the estimated five million eligible, close to the DACA rate over the 2012-2014 period, resulting in approximately three million applicants. Conversely, a plausible upper bound might be equivalent of IRCA's 75 percent application rate, or about 3.75 million applicants. At least half of these applicants will likely require some assistance from a lawyer or nonprofit service provider. Demographic data suggest that about 32 percent of these applicants need low-cost assistance. The professional judgment of the members of the Human Resources Working Group is that between four and eight hours of staff time will be required for each of these applicants. The Working Group's specific assumptions:

- A total of about 5 million people may be eligible for the expanded DACA and the new DAPA programs.
- Between 60 percent (DACA rate) and 75 percent (IRCA rate) of those will come forward and apply, the majority of whom will "self-file."¹¹
- About 40 percent of applicants will need either full or partial help from a nonprofit assistance provider to apply (Wong and Valdivia 2014, 5).¹²
- About 80 percent of those needing help will be low-income or need free or low-cost assistance.
- Between four and eight hours per case, on average, will be needed to aid those seeking assistance.¹³
- One full-time equivalent (FTE) staff is 1,650 hours per year (subtracting other duties, holidays, and leave)

As noted above, we estimate that between 3 and 3.75 million people will likely apply for either expanded DACA or DAPA, or for both.¹⁴ Of these applicants, between 960,000 and 1.2 million people will need assistance of between four and eight hours of staff time and, due to lower incomes, cannot afford a private attorney. Taking the midpoints of these projections, the Working Group believes that an estimated 1.08 million people requiring an average of six hours of time per case will generate a need for 6,480,000 staff hours, or about 3,927 full-time equivalent staff. Based on those assumptions, the potential range of FTE staff needed is listed in Table 1, with the mid-point case highlighted.

11 Some self-filers will obtain private counsel. Others may avail themselves of certain resources produced or provided by the government and nonprofits, but will not receive extensive application assistance.

12 About half of IRCA applicants received "some assistance" from a nonprofit. One recent survey concluded that "only 30% of respondents submitted their DACA application on their own." However, Wong's definition of "self-filers" appears to exclude an applicant who attends an informational workshop or clinic and then files without additional assistance. By contrast, unless that applicant went on to seek additional assistance, s/he would be included in the Working Group's definition of "self-filer."

13 Some expert commentators question the "average cost per case" approach, noting that for some populations, such as farmworkers, cases are not distributed evenly along a continuum but tend to skew heavily toward more difficult ones (Kissam and Intili 2014).

14 Some observers predict fewer applications than we do under the expanded DACA and DAPA programs. The Congressional Budget Office, for example, recently estimated that 150,000 and 1.5 million would apply for expanded DACA and DAPA, respectively—about a 50 percent application rate—through the end of FY 2017 (2015).

Table 1. Number of Full-time Equivalent Staff Needed

Applicants Assisted	4 Hours/Applicant	6 Hours/Applicant	8 Hours/Applicant
960,000	2,327	3,491	4,655
1,080,000	2,618	3,927	5,236
1,200,000	2,909	4,364	5,818

The kinds of activities these staff will be engaged in are described in further detail in the following sections.

Types of Work Required

Public Education/Fraud Prevention

The combination of lack of status and need to provide for their families make undocumented immigrants especially vulnerable to being taken advantage of by those who engage in the unauthorized practice of law (*notarios*). When the Senate introduced the Border Security, Economic Opportunity, and Immigration Modernization Act (S. 744), many *notarios* immediately began falsely promising those without status that for a “small” fee, they would ensure those individuals were put “in the front of the line” when immigration reform passed, and would receive status right away. When the bill passed in the Senate in June 2013, many immigrants thought that it had become law, and went straight to their local *notarios* to apply for status.

To prevent this vulnerable community from falling victim to scams by *notarios* or experiencing difficulty in the application process due to misinformation, it is essential that community organizations have the resources to provide education to the immigrant community on multiple levels. Accurate information on individual eligibility and the application process should be legally sound, easily understood, culturally relevant, and linguistically diverse.

Members of the Committee for Immigration Reform Implementation have prepared materials for both service providers and applicants (such as resource guides, charts, check lists, notices and warnings against *notario* fraud), translated such materials into other languages, delivered webinars and in-person community-based presentations to disseminate the information, and other activities, many of which can be found at the CIRI website (www.adminrelief.org).

Outreach, Screening, Application, and Ancillary Services

Through town hall and community meetings, ethnic radio and newspapers, individuals can receive quality information from trusted sources on the status of immigration reform. Mass education before and after program or policy change is important to ensure that individuals

receive accurate information regarding when they can apply for status, what documentation they need, and best practices for applying.

To properly assist the five million-plus individuals who qualify for DACA, DAPA, provisional waivers filed on Form I-601A, or another form of relief, community organizations must have the ability to screen individuals for eligibility, assist them with application completion, provide case management, and facilitate the maintenance of eligibility. In addition, “ancillary” services potentially required by the population include tax preparation for initial application, renewal and adjustment, assistance for securing records from prior contact with law enforcement or the immigration agency, job training and placement to show continuous employment for renewal and eventual adjustment to lawful permanent residency, and English-as-a-second language classes to show English proficiency when eventually applying for citizenship.

A complex and multi-layered array of legal and non-legal service needs requires large-scale, multi-purpose immigration assistance networks within communities. Legal service providers and community agencies must be organized and in communication to provide quality services to immigrants seeking status. Initial screenings may be done in large settings to determine who is eligible to apply for status. From there, it may be possible for volunteers or paralegals to assist with straightforward cases, but those with complicated cases will likely require referral to low-cost attorneys or BIA-accredited representatives. A substantial percentage of the unauthorized potentially qualifies for LPR status, but may be unaware of their eligibility, and a thorough legal screening is necessary in these cases (Wong et al. 2014). In the “standard” legal service model, once the application is submitted, organizations must manage each case to ensure that the clients are given the correct referrals to afford themselves other remedies or to stay eligible for renewal of status.

The above-described “standard” case management model would require staff investments toward the upper range of the working group’s estimated four to eight hours per case. For a very large program including expanded DACA and DAPA, however, it is likely that more truncated but still valid models will be deployed that would result in staff investments closer to the lower end of the range.¹⁵ Regardless of the specific model(s) employed, the basic processing of mass numbers of individuals for administrative relief typically requires coordinated efforts of legal service providers, volunteers, community-based organizations and multiple service providers, many of whom have not worked together previously. All of the players within this immigration assistance network are essential to ensure that individuals receive quality services and obtain the most substantial form of relief available.

Current Capacity

The Immigration Advocates Network’s (IAN’s) National Immigration Service Provider Directory shows that across the United States, there are 1,020 nonprofit organizations providing immigration legal services. Those organizations employ 2,018 attorneys and many fully and partially Board of Immigration Appeals Accredited Representatives. The

¹⁵ So-called “assisted pro se” filers may receive some help from, but will not be formally represented by, legal service and other organizations.

BIA roster of recognized organization lists 852 service providers, many of which are included in IAN's directory (BIA 2015). The Board lists 1,393 accredited representatives at present (*ibid.*). Additionally, IAN's directory lists 1,276 paralegals or other legal workers who are not accredited, but who can contribute to this work. Therefore, the total number of legal staff from charitable legal service programs that are available to participate at some level in work related to administrative relief is 4,687 (IAN 2015).

Assuming that one full-time employee works 1,650 hours per year and assuming that these workers will be able to spend 25 percent of their time on any new immigration initiative, current nonprofit legal services providers will be able to provide at best 1,933,387 hours towards the new administrative relief programs, or the equivalent of 1,172 full-time employees. If 100 percent of this "shifted capacity" were available, it would be equivalent to over seven million hours, about enough to process a small scale administrative relief program the size of DACA, or a potential applicant pool of 1.25 million people. However, these agencies already accommodate very demanding caseloads and will need an infusion of funding and staffing, particularly at the outset of these programs, in order to maximize their work on expanded DACA and DAPA. There is thus a pressing need for "upfront" funding as early in the program as possible for outreach, public education, combating *notario* fraud, advocacy, and assistance to self-filers, which are generally not covered by the cost estimates that follow. Without additional funding and staff, agencies will likely not be able to shift 25 percent of staff time to accommodate any new program.

In sum, the current available capacity of the field is a under 1,200 full-time equivalent staff, while more than three times that number will be required to serve those eligible for the expanded DACA and the DAPA programs.

Law School Immigration Clinics

One way to increase legal capacity is to expand the use of law school immigration clinics, as occurred during IRCA and to a lesser extent under DACA. Law students supervised by professors can play a significant role in providing legal services to potentially eligible administrative relief applicants through community education, direct representation, and collaboration with nonprofit immigration service providers.

There are over 200 legal immigration clinics in the United States, far more than during IRCA (Anjum Gupta, *pers. comm.*). The focus of these immigration clinics varies. The majority of clinics provide legal representation to a limited number of clients, often limiting their caseload to specific types of immigration cases, such as asylum, special immigrant juvenile cases, or survivors of domestic violence. Other clinics engage in activities that involve client representation through models distinct from direct client casework such as impact litigation with an advocacy or larger policy focus. The capacity of clinics is limited by a variety of factors, including the availability of credits, prescribed institutional goals, and both student and professor time constraints.

Nonetheless, law school clinics can provide a variety of services to deliver and/or supplement administrative relief efforts. Responses from these clinics to a recent survey initiated by the law school affinity group demonstrate significant interest in a variety

of administrative relief activities including direct representation, participation in group processing workshops, development of best legal practices, “know your rights” and “how-to” guides, community education and outreach, website development and data collection. The Working Group is confident that as implementation of administrative relief begins, more law school programs will collaborate to provide legal services to eligible applicants.¹⁶

One significant challenge to collaboration with law clinics and integration of law students is the coordination required to match clinics and law students with non-profit organizations that have direct contact with potential clients. An optimal solution might be to procure funding for a staff person at one or more national service providers to serve as a liaison to law schools to maximize legal services for administrative relief. An alternative model is to use regional or state-based leaders from established nonprofits or law school clinics and *pro bono* programs. In fact, in response to the affinity group’s survey, some clinic programs have already volunteered to serve as coordinators.

The Private Immigration Bar and Pro Bono Attorneys

The American Immigration Lawyers Association (AILA) is the national bar association of more than 14,000 immigration attorneys throughout the country. AILA is represented within CIRI and is an important partner when considering the ability of nonprofit legal service providers to leverage their own limited resources. Time and again, AILA members have played a significant role in the provision of legal services, including low-cost and *pro bono* services. During the prior legalization and in response to more recent *pro bono* crises, AILA members have answered the call to fill the legal services needs gap. In particular, AILA and the National Immigration Project of the National Lawyers Guild have played critical roles in addressing specialized issues, such as appeals of denied applications during IRCA and assisting applicants potentially affected by criminal exclusions under DACA. That said, most attorneys will not be able to provide exclusively *pro bono* and “low bono” services to administrative relief applicants; according to North and Portz (1989), about five percent of IRCA applicants, for example, hired private counsel.

Another source of assistance that should be considered is the private non-immigration bar. Recent opportunities for *pro bono* collaboration have shown that large law firms that can provide personnel and resources may have a role to play in any upcoming administrative relief effort, although many already are highly invested in addressing the recent increases in unaccompanied minors from Central America. Despite expressed interest, the level of such resources can be extremely difficult to quantify before specific commitments are made and aggregated.

¹⁶ One of the exemplary law school clinics known to the Working Group is the DePaul University College of Law’s Asylum and Immigration Clinic in Chicago, Illinois, which supports some 26 community-based organizations that provide immigration services. The University of Texas’ School of Law sponsored more than a dozen DACA workshop sessions around the state, with a special emphasis on areas with modest nonprofit capacity such as the Lower Rio Grande Valley.

Nascent Capacity

Nascent capacity can be found in agencies that, on the basis of their mission, client caseload, constituency, geographic service area, or any combination thereof, may be predisposed to adding immigration legal services to their cadre of offerings, or assisting in coordinated programs by providing necessary non-legal services. Although these organizations may not currently provide legal services to immigrants, they may be able to play a unique role in increasing capacity for administrative relief.

Potential sources of implementation support services include religious institutions. Churches provide safe and trusted locations for immigrants to receive legal information and services, enabling them to perform supporting roles for the work of immigration attorneys and accredited representatives, provided they receive appropriate training and technical assistance. Recently, a coalition of 15 evangelical church-based organizations that represent more than 28,500 churches in the United States came together with the goal of rapidly increasing the number of churches that are recognized and accredited to provide immigration legal services; the Immigration Alliance is committed to dramatically multiplying the number of sites across the country providing low-cost, high-quality immigrant legal services over the next three years.¹⁷

The Catholic network of programs is illustrative of how dramatically the concept of nascent capacity can impact the provision of services. Thirty percent of the CLINIC network is other than Catholic; many of these organizations do not self-identify principally as immigration providers, but as:

- libraries;
- job training/workforce development programs;
- domestic violence shelters/treatment programs;
- English language programs;
- African- and Caribbean-led programs;
- labor unions;
- parish- and faith unit-based charitable organizations and ethnic ministries;
- family resource centers; and
- DREAMer and other student groups.

Their participation in the CLINIC network demonstrates how these and other kinds of agencies could be further developed to expand capacity for implementation of DAPA and expanded DACA.

One notable example of rapid development of nascent capacity is the network of domestic violence treatment programs providing immigration assistance. In the space of a decade, this sector has grown to more than 50 sites throughout the country, with an emphasis on rural communities lacking traditional immigration legal services capacity. This capacity was grown through a single grant from the federal government of \$500,000. The funding primarily supported robust immigration law training and technical assistance for small programs that sought recognition and accreditation from the Board of Immigration Appeals in order to legally provide immigration services. And, as noted earlier, the largely volunteer-

¹⁷ See: www.theimmigrationalliance.org.

driven United We Dream/Own the Dream network was able to build significant applicant assistance capacity for the initial DACA implementation in a brief period of time.

Other networks offer similar opportunities. Many in the pro-immigrant organizing and advocacy community, including members of the Fair Immigration Reform Movement (FIRM) and the PICO National Network, are establishing new programs to serve those within their constituencies that may be eligible for administrative relief. Similarly, the National Partnership for New Americans, regional organizations supported by the Center for Popular Democracy, and local affiliates of the National Council of La Raza and the Service Employees International Union are all planning to expand existing and/or establish new capacity for DAPA and expanded DACA implementation. These networks are already deeply embedded in immigrant communities, are fully culturally-competent, and many have developed innovative program models in related fields, including enrollment in health care and other benefit programs, applying for driver's licenses, and in the naturalization process.

Nurturing, expanding, strengthening, and promoting the sustainability of this nascent capacity is a crucial element of any viable strategy for assuring sufficient application assistance for expanded DADA and DAPA implementation.

Funding

Fee-for-Service Programs

Fee-for-service or “earned income” programs have been around for a long time and client fees account for roughly one-third of immigration legal services funding within the CLINIC network.¹⁸ Fees for service, combined with multiple other sources of support, account for the close to 100 percent sustainability record of the CLINIC network programs and much of the rest of the non-profit immigration field.¹⁹ CLINIC has advocated for the need to charge fees since the Ford Foundation funded the creation of *Immigration Management: Building Blocks for a Successful Program* and the accompanying Immigration Program Management trainings in the mid-1990s.

What does this mean in terms of gross income for the CLINIC network? According to the annual survey of CLINIC network programs done by the Center for Applied Research in the Apostolate (CARA), it amounted to \$12,856,396 for the 142 affiliates that completed that section of the survey in 2013. If the balance of programs that did not report this are assumed to have made even half as much in fee revenue then the total would be \$17,881,263.

In a field without significant government support, the fee-for-service program is the most important source of income and often the only source of unrestricted funding. In a sense,

¹⁸ As of the end of September 2014, the CLINIC Network consisted of over 275 affiliates. More than 30 percent of these charitable legal programs for immigrants are other than Catholic, so that this network represents a broad spectrum of the field.

¹⁹ The Working Group recognizes that coordination between various service providers might lead to tension regarding funding sources, with *pro bono* attorneys wary of fees and one-on-one organizational service providers relying on fees for institutional sustainability.

the ability to generate fees will determine the level of participation by these agencies in DACA and DAPA, and the expansion of these programs to accommodate eventual legislative reform. A well-run program will generate a consistent fee revenue stream for years, as well as more responsive and empowered clients. By contrast, programs that depend exclusively on the scant grant funding available for direct services are generally not sustainable. As the DACA experience shows, fee-for-service programs require intentional development. Some in the DACA service and applicant community were adamant about not charging/paying even nominal fees for those services. As a result, many of the services were transitory and lacked the financial support to be sustainable. The irony is that, but for the field's commitment to fee-for-service programs before DACA, there would have been little capacity to accommodate these applicants during DACA implementation.

Although an infusion of funding to hire staff is necessary at the outset of these programs, and in most cases some ongoing subsidy is required, fee-for-service programs can both reduce the need for ongoing outside funding and ensure some degree of sustainability over the long term. One simple fee-based model illustrates the point; assuming a single staffer:

- completes 1.33 applications per day (6 hours per application);
- has 206.25 productive work days in a year (1,650 hours); and
- charges a \$200 agency service fee per application.²⁰

Under this scenario, a single staffer could be at least partially self-supporting, producing over \$50,000 of fee income per year (calculation: $1.33 \times 206 \times \$200 = \$54,863$ of fee income generated per year, per staffer).

BIA-recognized groups may only charge “nominal” fees, and most effective programs have other sources of funding. Nevertheless, the Working Group strongly believes that every effort should be made to make fee-for-service programs the norm in order to build capacity that is sustainable over the long term.

Costs and Gaps

The next question involves determining the dollar costs required to employ the staff required for effective implementation of DAPA and expanded DACA. As it is difficult to anticipate exact staff compensation across an extremely diverse field, and since the total FTEs required likely will consist of various combinations of lawyers, BIA-accredited representatives, and other professional staff, paraprofessionals, volunteers, students, *pro bono* attorneys, and other non- or lower-paid assisters, there is great variation in the amount of funding that might be required to cover staff costs.

Calculations of cost for each combination of low, mid, and high application levels, various per-applicant staff time estimates, and different salary amounts are listed in Tables 2A-2C, below, with the mid-point estimates highlighted in Table 2B.

²⁰ Informal surveys conducted by CLINIC gave an average charge per DACA application of \$200 (mainly for one-on-one service) for the initial application. An informal survey of one workshop at the Ready America Conference in February 2015 produced an average DACA application assistance charge of \$190.

Table 2A. 960,000 Applicants Assisted

Cost/FTE Employee	4 Hours/Applicant	6 Hours/Applicant	8 Hours/Applicant
\$50,000	\$116,363,636	\$174,545,455	\$232,727,273
\$75,000	\$174,545,455	\$261,818,182	\$349,090,909
\$100,000	\$232,727,273	\$349,090,909	\$465,454,545

Table 2B. 1,080,000 Applicants Assisted

Cost/FTE Employee	4 Hours/Applicant	6 Hours/Applicant	8 Hours/Applicant
\$50,000	\$130,909,091	\$196,363,636	\$261,818,182
\$75,000	\$196,363,636	\$294,545,455	\$392,727,273
\$100,000	\$261,818,182	\$392,727,273	\$523,636,364

Table 2C. 1,200,000 Applicants Assisted

Cost/FTE Employee	4 Hours/Applicant	6 Hours/Applicant	8 Hours/Applicant
\$50,000	\$145,454,545	\$218,181,818	\$290,909,091
\$75,000	\$218,181,818	\$327,272,727	\$436,363,636
\$100,000	\$290,909,091	\$436,363,636	\$581,818,182

However, these overall expense calculations do not account for the offsetting of costs with various fee-for-service models. The potential income generated by fee-for-service programs calculated at different fee levels are presented in Table 3, with the Working Group's best estimate highlighted:

Table 3. Revenue Generated by Fee-for-Service

Fee	Applicants Assisted		
	960,000	1,080,000	1,200,000
\$100	\$96,000,000	\$108,000,000	\$120,000,000
\$150	\$144,000,000	\$162,000,000	\$180,000,000
\$200	\$192,000,000	\$216,000,000	\$240,000,000

While potential revenues from fee-for-service appear to greatly offset the cost of full-time equivalent employees, as noted previously, many applicants will be unable to pay a fee upwards of \$150, especially given a government application fee of \$480 and the likelihood that some lower-income households will have multiple applicants. Assuming the average fee-for-service is \$150, and the median assumption for the number of applicants needing

assistance proves accurate, the difference or gap between fee revenue and staff cost, at varying levels of staff cost, are outlined in Table 4. The Working Group’s best estimates of this gap are highlighted:

Table 4. Cost Differential for 1,080,000 Applicants Assisted with a \$150 Fee

Cost/FTE Employee	4 Hours/Applicant	6 Hours/Applicant	8 Hours/Applicant
\$50,000	-\$31,090,909 ²³	\$34,363,636	\$99,818,182
\$75,000	\$34,363,636	\$132,545,455	\$230,727,273
\$100,000	\$99,818,182	\$230,727,273	\$361,636,364

The Working Group believes that some amount between the lower and mid-point estimates in Table 4 of \$34 million and \$132 million, or about \$83 million, net after collection of fees, is as reasonable an estimate as any for the potential nonprofit sector “funding gap” required to assure effective application assistance services to the eligible low-income people likely to apply for the expanded DACA and DAPA programs. On the one hand, this gap could be reduced by any number of factors, including:

- improved efficiencies, such as the expanded use of technology to reduce application assistance costs and/or to assist self-filers;
- increased nonfinancial government support, potentially including access to subsidized AmeriCorps, VISTA and Retired Senior Volunteer Program resources;
- expanded private philanthropy, including contributions from foundations, corporations, and individuals; and
- higher fees charged/collected.

Moreover, wise front-loaded investments can help to maximize coordination and minimize duplication, ensure education and outreach to empower self-filers, assist applicants to prepare by collecting documents beforehand, and channel applicants to the most appropriate sources of assistance, thus minimizing confusion, forum shopping, and the vulnerability of the population to fraud.

On the other hand, it is also true that some other factors could exacerbate the gap, including:

- protracted litigation or legislative battles that complicate the program itself and confuse applicants;
- unreasonable or overly restrictive documentation or application requirements, or
- slow adjudications that could increase per-applicant staff time required and/or raise doubts about the efficacy of the program;

²¹ The Working Group does not believe this number is plausible; it essentially assumes that virtually all DACA and DAPA applicants can/will be assisted through mass-processing models staffed almost exclusively by para-professionals and volunteers, regardless of whether they are eligible for other remedies or have difficult cases.

- insufficient support from private philanthropy; and
- insufficient fee revenue.

Beyond the actual advocacy or litigation resources required, these and other factors could force service providers to invest more heavily in outreach and education, reducing resources for application assistance itself. Finally, it should be noted that all of these estimates are highly sensitive to even modest changes in assumptions and should be treated with caution.

Conclusion

The prospect of facilitating lawful, albeit temporary, status for as many as five million people presents formidable challenges to the nonprofit legal assistance field and will require substantial support from the nonprofit sector itself and private philanthropy, as this analysis shows. But these costs are far outweighed by the benefits, not just to the DACA/DAPA population but especially to the society at large.

On the cost side of the equation, as with all other immigration services, such as applications for visas to enter the country and naturalization, all of the government's expenses required to operate the DACA/DAPA programs will be covered by user fees paid by the applicants themselves. In addition, this analysis suggests that between two-thirds and three-quarters of the cost of the application assistance infrastructure required will be borne by DACA/DAPA applicants, with the balance provided by the private nonprofit and philanthropic sectors, which is not to say that a majority of the total income of charitable immigration programs engaged in this work will come from fees-for-service.

That a substantial portion of this relatively low-income population will probably be willing to absorb such costs attests to the obvious benefits afforded by deferred action—being able to live and work without the constant threat of deportation and family separation. Numerous studies have shown that those moving from unauthorized to lawful status will also experience greater economic opportunity, since they will be far less vulnerable to exploitation in the labor market. Moreover, the gains to participants in a broad-scale legalization program like deferred action are far exceeded by the economic benefits to the country as a whole. Recently the Center for American Progress (Mathema 2015) calculated some of the economic gains over the next 10 years from providing deferred action to the DACA- and DAPA-eligible population, which include:

- wage increases to DACA and DAPA recipients of \$103 billion;
- a cumulative increase in the Gross Domestic Product of \$230 billion;
- income increases for all Americans of \$124 billion;
- creation of more than 288,000 new jobs for all Americans; and
- tax revenue increases of an additional \$41 billion to the Social Security system.

The prospect of accruing such enormous societal benefits at literally no cost to the taxpayer represents a rare opportunity for US society. Fully realizing these benefits, however, will require a significant and intentional investment in building and sustaining the infrastructure needed to maximize participation in deferred action.

As detailed in this report, effective implementation of expanded DACA and DAPA will indisputably require a substantial expansion of the capacity of the nonprofit legal services and immigrant-serving sectors. Significantly, there is no risk that a substantial commitment to building capacity will prove wasteful, for even if one assumes that implementation of expanded DACA and DAPA may be considerably delayed, currently existing needs more than justify a large expansion of relevant sector capacity. Demand for services still far exceeds supply. Even assuming that pre-DACA supply of and demand for legal services to assist lower-income immigrants was at equilibrium, there is a need for immediate additional capacity to assist at least three discrete groups:

- the over 560,000 people initially eligible for DACA that have yet to apply (Batalova et al. 2014, 1);²²
- the over 400,000 individuals who would be eligible for DACA but have not met the education requirement (ibid.); and
- the substantial percentage of the unauthorized population who may be eligible for other forms of relief, which for the purpose of this article we conservatively estimate to be in the range of one million, although this number may in fact be much higher.²³

Applying the same methodology used above for expanded DACA/DAPA populations to this potential applicant pool, using the mid-point estimates, produces the following results:

- Total potential applicants: ~ 2 million
- Total requiring assistance: 640,000
- Total FTEs needed at 6 hrs/case: 2,327
- Total cost at \$75k/FTE: \$175 million
- Less fees at \$150/case: (\$96 million)

Perhaps the first step toward building a nonprofit infrastructure commensurate with future needs is the realization that the existing infrastructure is insufficient to meet current needs. In all events, this insufficiency comes at a cost to American society, a cost that in the future may be multiplied many times over, if we do not begin planning now to build and sustain an infrastructure with an expanded capacity to reap the many benefits of a broad-scale legalization program.

22 Batalova et al. (2014) estimated that 1.2 million were immediately eligible for DACA. An estimated 2.1 million individuals are currently or potentially eligible for DACA, including those who will age-in over the coming years and those who would be eligible otherwise, but who do not currently meet the education requirement. Subtracting the total number of those who have been approved for DACA (638,897) from the potentially eligible pool indicates there are almost 1.4 million who might need assistance with DACA applications, with over 560,000 immediately eligible.

23 Wong et. al. found that 14.3 percent of individuals eligible for DACA were also eligible for some other immigration benefit or form of relief. They also found potential eligibility rates were far higher for unauthorized persons screened by charitable immigration programs during normal office intake and screening procedures (i.e., not during DACA screening).

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