

BOARD OF SUPERVISORS

NIKKI FORTUNATO BAS SUPERVISOR, FIFTH DISTRICT CHAIR, AC Together for All

September 18, 2025

Honorable Board of Supervisors County of Alameda 1221 Oak Street, Suite 536 Oakland, CA 94612

Re: INFORMATIONAL ITEM: Update from September 4, 2025 Alameda County Together for All Ad Hoc Committee Meeting on Impacts of Federal Administration Policies and Budgets on Alameda County Communities & Recommendations to Address Impact

Dear Board Members:

At the September 4, 2025 Alameda County Together For All (ACT for All) ad hoc committee meeting, the committee heard important updates and recommendations regarding the impacts of the Federal Administration's policies and budgets on Alameda County communities, specifically on: refugees and asylum seekers, reproductive justice and youth led solutions to support sexual and mental health, healthcare access, and food security. The committee, which consists of myself and Supervisor Elisa Márquez, is sharing this information with the full Board and the public to help inform our future actions to protect our safety net services, which we will discuss at the September 30th Board work session on the Essential County Services Fund of Measure W.

Below are brief summaries of the topics and a list of presenters with their presentations:

Healthcare

We heard sobering updates about what healthcare budget cuts mean for our community. Thousands of residents, including many of our immigrant neighbors, will lose their health insurance, while payments to community clinics and public hospitals will be reduced. This combination will leave hospitals, clinics, and frontline providers grappling with higher levels of

uncompensated care, threatening both access to care and the stability of our local healthcare system. Due to H.R. 1 and state budget changes, there will be an estimated annual cut in funding of more than \$150 million for the public hospital system and community health clinics.

Some of the health care related provisions within the federal H.R. 1 and 2025-26 California State Budget include:

- Prohibition in payments to family planning and abortion providers, effective now
- Medi-Cal enrollment freezes for undocumented adults, effective January 2026
- Reduction in payments to Federally Qualified Health Centers (FQHCs) for services provided to undocumented patients, effective July 2026
- Elimination of Medicaid coverage for asylum seekers, refugees, and other immigrants, and reduction of federal reimbursements to states providing coverage to unqualified immigrants, effective October 2026
- Establishment of work requirements and 6-month eligibility redeterminations, effective January 1, 2027

Food Security & Justice

In Alameda County, 1 in 4 residents are food insecure. The need today is greater than the height of the COVID pandemic and yet the funding to meet the need is lower due to the loss in pandemic era ARPA funding. The recent emergency augmentation by the Board with Measure W funding of \$4 million was designed to partially make up the difference.

Now, due to H.R. 1, there will be an estimated \$70 million annual cut in CalFresh for Alameda County residents. This cut will be difficult to mitigate given the amount of the loss in food assistance. A group of organizations has come together to implement a plan to best meet the needs of the community. At the ACT for All meeting, they asked for \$19.5 million in annual funding to resource this system that will draw upon the lessons learned during COVID. The request includes Alameda County Community Food Bank (ACCFB) food procurement, prepared meals, support for CBO's involved in distribution, ACCFB infrastructure, Market Match (to extend CalFresh benefits) and coordination of this new food system.

Reproductive & Gender Justice

Access Reproductive Justice (Access RJ), California's only abortion fund founded in Oakland in 1993, works to make abortion care accessible through a statewide volunteer network guided by reproductive justice principles: the right to have or not have children, to parent in safe communities, and bodily autonomy. In the wake of the *Dobbs* decision and ongoing federal attacks, including defunding Planned Parenthood and Medicaid cuts through H.R. 1; Access RJ has expanded its Healthline team and seen rising demand, especially from uninsured, low-income, and rural callers. Despite the growth of telehealth abortion services which also are insufficient at meeting all the needs a caller may have and cannot be met online, significant

barriers remain, including cost, logistics, legal risks, and fear. Many Alameda County residents must travel for care due to clinic limitations, underscoring the need for stronger local provider partnerships. Access RJ offers free, confidential, bilingual support, practical assistance, and linkages to trusted providers, and seeks \$300,000 annually for five years to expand staffing, procedural support, outreach, and integration of abortion services into Alameda County's primary care and LGBTQ+ networks. They emphasize the importance of sustaining mutual aid efforts and improving targeted outreach, and local clinic collaborations.

Youth Empowerment, Reproductive & Gender Justice

The Dream Youth Clinic, led by Dr. Aisha Mays and founded in 2017, is a youth-led organization offering no cost medical services, youth leadership programs, and advocacy rooted in a reproductive justice framework that centers Black girls, Black youth, and gender-expansive youth in Oakland. Operating out of three locations, including Covenant House, the Dream Empowerment Lounge, and the Tiny House; the clinic also runs programs like Restorative Justice Summer, a yearlong initiative for Black and Brown girls focused on policy, advocacy, and reproductive justice. Key policy goals that came out of their project this summer include increased funding for youth centered programming, expanded mental health services, sexual violence prevention, and the creation of a Youth Safety, Health and Empowerment Fund. The clinic calls for crisis hotlines, safety kits, free youth only transit, and broader outreach to marginalized youth, especially those in foster care or experiencing homelessness. Their presentation emphasized the importance of safe spaces and investing in youth to ensure they are heard, supported, and protected.

Refugees and Asylum Seekers

Between 2021 and 2025, the International Rescue Committee (IRC), JFCS East Bay, and JFS Silicon Valley collectively resettled 2,426 refugees in Alameda County, providing essential services such as housing, legal aid, healthcare, and employment support. Following a January 2025 executive order that paused refugee resettlement, the Alameda County Board of Supervisors allocated \$616,000 in emergency funds to support 325 new arrivals lacking federal aid. However, extended case management will end in September 2025, and state support for Ukrainians and Afghans will not begin until 2026. With 35.7% of the county's population foreign-born and nearly half speaking a language other than English at home, continuity of services is critical to newcomer stability and integration. These agencies stress culturally competent, trauma-informed care that addresses social determinants of health and prioritizes family reunification and long-term self-sufficiency. Given the federal rollback of refugee support, the agencies are seeing a \$10 million gap over 3.5 years (July 2026–December 2029) to ensure uninterrupted services for vulnerable newcomers. Supervisors asked further detail on funding sources, spending breakdowns, and coordination with other service providers.

For additional information, please refer to:

- Video of the September ACT for All meeting: https://alamedacounty.granicus.com/player/clip/9774?view_id=2&redirect=true
- More information about the ACT for All meetings since February 2025: https://district5.alamedacountyca.gov/actforall/
- September meeting presenters and their presentations: bit.ly/Sept2025ActForAll
 - o Mitch Margolis, International Rescue Committee
 - **Robin Mencher, JFCS East Bay**
 - Sonja Goetsch-Avila, Program Director at Access Reproductive Justice
 - Dr. Aisha Mays, Dream Youth Clinic Director
 - Aneeka Chaudhry, AC Health, Interim Director
 - Allison Pratt, Alameda County Community Food Bank
 - Dr. George Ayala, Public Health Department, AC Health
 - Dr. Steven Chen, Recipe4Health, AC Health
 - Melanie Moore, Oakland Thrives

The impact of federal policies and budgets on Alameda County residents is severe and getting worse as the federal administration continues to dismantle the safety net. ACT for All will closely monitor the situation at the federal level and keep the Board informed.

Respectfully submitted,

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Nikki Fortunato Bas, Supervisor

Alameda County Board of Supervisors

Fifth District

H.R. 1 & Federal Policy Shifts Implications for Health Safety Net

BOS ACT Committee | September 4, 2025 Aneeka Chaudhry, Interim Agency Director



Major H.R. Provisions

- Layered safety net losses over the next several years: stricter eligibility rules, increased local costs, and reduced funding
- Up to 3.4 million Medi-Cal members may lose coverage in California
- Up to 660,000 Covered California enrollees may become uninsured
- \$30+ billion in federal funding at risk annually for California
- Major disruption to Medi-Cal financing across state programs, counties, hospital systems, and clinics



Upcoming Medi-Cal Changes (H.R. 1 & State Budget)

2025 2026 2027 2028

- 1-year ban on payments to abortion providers such as Planned Parenthood*
- Prohibition on new or increased provider taxes
- End of Biden eligibility and enrollment rule and nursing home staffing rule
- State applications for \$50 billion Rural Health Transformation Program

- Freeze on new Medi-Cal enrollments for Unsatisfactory Immigration Status (UIS) individuals ages 19 and older
- Reinstate the Medi-Cal asset limit at \$130,000 for individuals and \$65,000 for each additional household member
- End of full-scope dental coverage for adult UIS Medi-Cal populations
- Reduction of enhanced FMAP for emergency services provided to immigrant populations
- Change of eligibility definition for "qualified alien"

- Work requirements for able-bodied adults, aged 19 to 64, without dependents (expansion population)
- Eligibility redeterminations frequency increased to once every six months
- \$30/month Medi-Cal premium begins for UIS individuals between ages 19-59

- Reduction of existing provider taxes begins for Medicaid expansion states and are decreased by 0.5% per year until they reach 3.5%
- Reduction of state-directed payments by 10% each year until they reach 100% of Medicare rates
- States to enact cost-sharing for individuals in the expansion population with incomes greater than 100% of the federal poverty level (FPL)

CalAIM Impacts

Current waiver effective through 2026 **Recent Changes to Federal Policy Unknowns**

- DHCS to submit waiver renewal to CMS in January 2026
- Renewal concept paper reviews the current priorities and progress and lays out the initiatives the state intends to seek federal authority to continue
- Rescission of Guidance on Health-Related Social Needs Waivers
 - No changes to current waiver, "CMS will consider" HRSN in future waiver negotiations "on a case-by-case basis"
- No changes to ILOS provided through CalAIM
 - No changes to ECM
 - CMS guidance: No new approvals for workforce initiatives
- How H.R. 1 be implemented and how it will impact CalAIM
- Possible future guidance issued between now and waiver renewal
- Consideration of current federal priorities



Alameda County Impacts

Phased, significant coverage losses:

 State Medi-Cal enrollment freezes and new federal work requirements expected to push ~130,000 Alameda County residents off Medi-Cal coverage in next 1–2 years

System-wide strain:

- HealthPAC costs increase 3-4x, as provider networks (AHS and FQHCs) lose Medi-Cal enrollees and revenue
- AHS estimated impact: \$5M-\$15M in 2026, \$40M-\$70M in 2027, \$70M-\$120M in 2028
- CHCN estimates losing \$27M per year by 2027
- ACBHD *Prop 1* funding shifts, including cuts to behavioral health prevention (\$20M-\$26M)
- Higher county-borne costs for Social Services programs that support wellbeing:
 CalFRESH county costs increase from 15% to 22.5% by 2027



Other Pending Factors

- Reinterpretation of 1996 Personal Responsibility & Work Opportunity Reconciliation Ask (aka Welfare Reform Act)
- Health and Human Services Appropriations Bill (House)
 - \$108B funding for HHS, which is a \$7B decrease from FY 25
 - Reduce approximately \$1.7B funding to CDC
 - Funding cuts to Ryan White HIV/AIDS program
 - Restricts funding to abortion services and diversity, equity and inclusion initiatives
 - Eliminate ability to fund harm reduction activities for substance abuse treatment disorders
- Uncertainty whether Congress will pass a budget, a Continuing Resolution or allow for partial government shutdown



Impact Mitigation Strategies & Priorities

Closely monitoring Federal and State implementation guidance

- Impacts on staff and programs
- Impacts on community members and providers

Developing systemwide data (SSA, AAH, AHS, CHCN)

- # of people affected by work requirements
- # of people affected by immigration-related Medi-Cal changes
- # of people losing Covered CA subsidies
- Uncompensated care costs

Medi-Cal outreach and enrollment

- Collectively addressing work requirements
- Keeping eligible people enrolled is critical for residents and providers

HealthPAC

- Access to care for people losing coverage
- Support key safety net partners
- Leverage in alignment with key AC Health priorities: behavioral health, public health CHIP, homelessness
- Coverage policy and financial impact analysis

Continued engagement and systems approach

- Communications and community education networks
- Community Provider Advisory Group
- Planning through Behavioral Health (Prop1), Housing & Homelessness Services (Home Together Plan), and Public Health (Community Health Improvement Plan)
- Developing community-centered response frameworks (SAFE)

Thank you



Alameda County Together for All Ad-Hoc Committee





Alameda County Food Security Plan

In the face of impending federal cuts to safety nets, we suggest a 2 pronged approach for immediate action:

Consolidate Countywide Food Assistance Under ACCFB Leverage economies of scale in procuring, aggregating, and distributing food to meet community need

2. Establish a Food Hub Network in Alameda County Coordinate food hubs to strategically procure food from local farms, shift aggregated food to where it is needed most, reduce waste, and ensure more residents get access to fresh food



Consolidate Countywide Food Assistance Under ACCFB



ACCFB has existing scale and capacity to serve Alameda County's most vulnerable while also integrating and supporting innovative partnerships with local farmers and prepared meal providers.



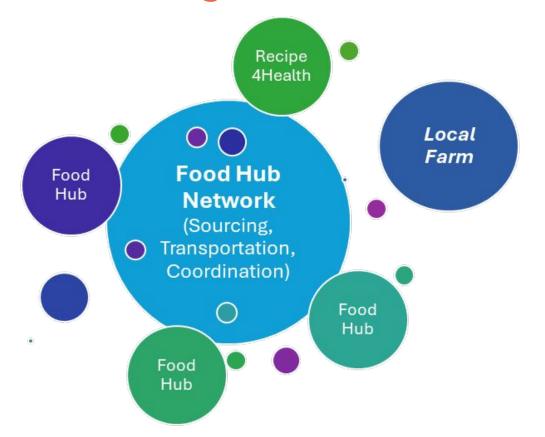
Currently Food Hubs Operate In Silos



Currently each Food Hub has its own contracts, agreements with farmers and distribution sites, and its own transportation plan.



Connect Existing Food Hubs in a Food Hub Network



Proposed Food Hub Network handles sourcing and purchasing agreements, provides refrigerated transportation, contracts with food recovery vendor, and coordinates food hub partners to ensure broad and equitable distribution of healthy foods to retail and charitable food providers, as well as public systems initiatives such as Recipe4Health.



Healthy Food as Medicine

George Ayala, PsyD Steven Chen, MD





Concerns

T2 policies will result in:

- Greater food, housing insecurity, and chronic disease/condition burden.
- Increases in the number people ineligible for Medi-Cal (an estimated 80,000 people) and who are without access to health care.
- Decreases in the availability of community health and support services.
- Diminished availability of community-based reproductive health services for low-income cisgender women and birthing people.
- Increases in hate-motivated violence.



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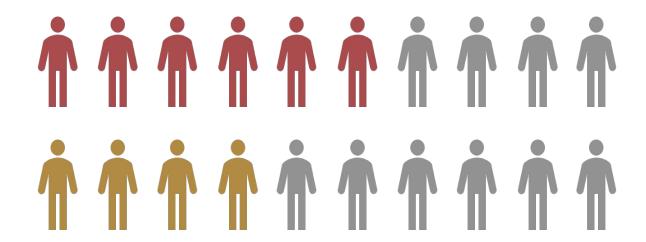


Unhealthy Diet, Food Insecurity, and Chronic Conditions

An unhealthy diet is #1 driver of mortality and chronic disease (500,000 deaths per year in the US)

Food insecurity creates **2X** the risk of developing diabetes

6 in 10 adults have a chronic disease



4 in 10 adults have two or more



Healthy Food as Medicine

Nutrition services (in jeopardy)

- Healthy Retail: fresh produce at corner stores
- Diabetes Program: classes and health education
- SNAP Education (ending 10/1/2025)
 - Nutrition education and workshops
 - School and community gardens
 - Walking clubs and Bingocize for older adults in affordable senior housing
 - Farmers' Market Vouchers

WIC: pregnant people and children 0-5

- Direct food access
- Breast feeding support
- Nutrition education
- Linkage and referral to other services

Recipe4Health





What is Recipe4Health?

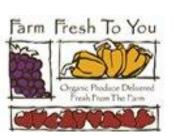
Food + Health Coaching

to treat, prevent, and reverse chronic conditions and food/nutrition insecurity



FOOD – Produce Boxes

Local
Organic
Regenerative
BIPOC led farms





HEALTH COACHING

Move Nourish Connect Be



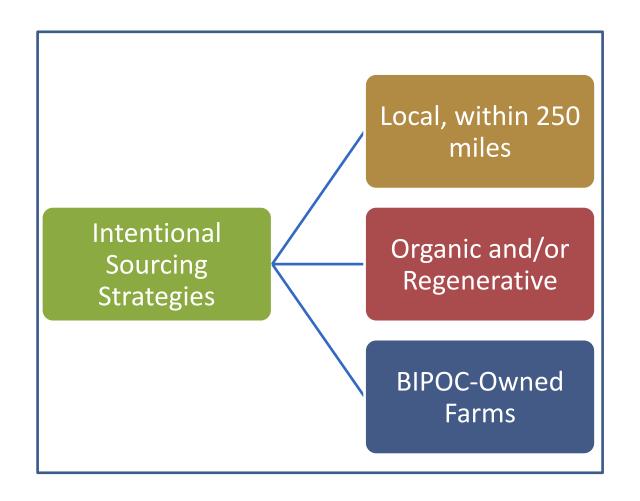






Recipe4Health is a health multiplier

Where does the food come from?

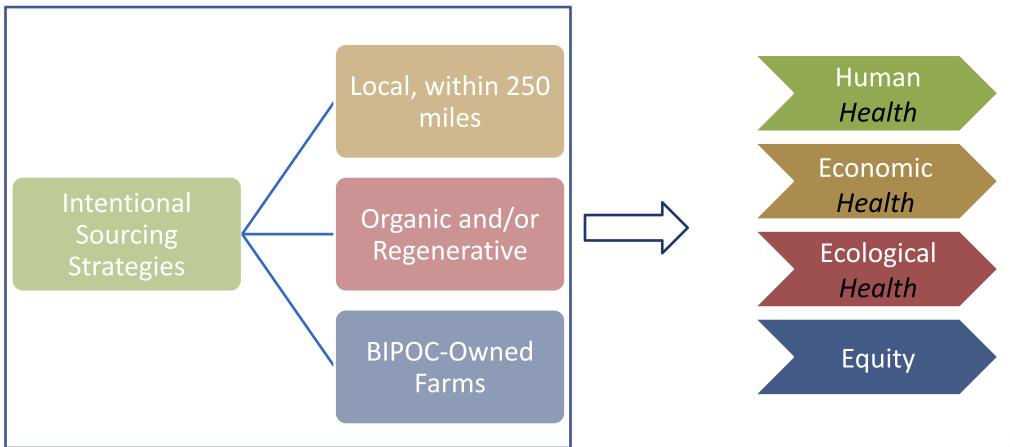




Recipe4Health is a health multiplier

Where does the food come from?

Generates H³E co-benefits:

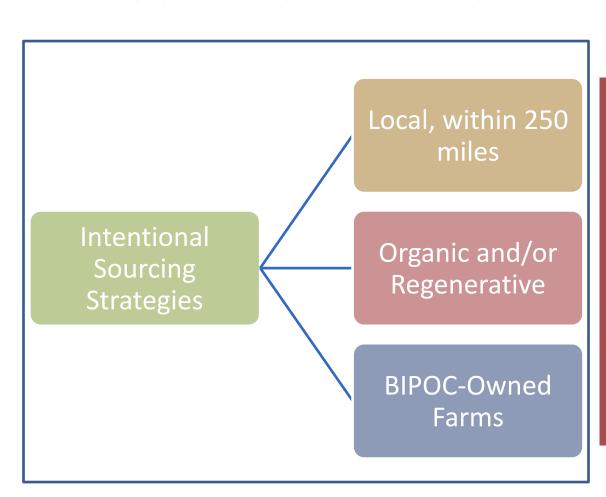




Recipe4Health is a health multiplier

Where does the food come from?

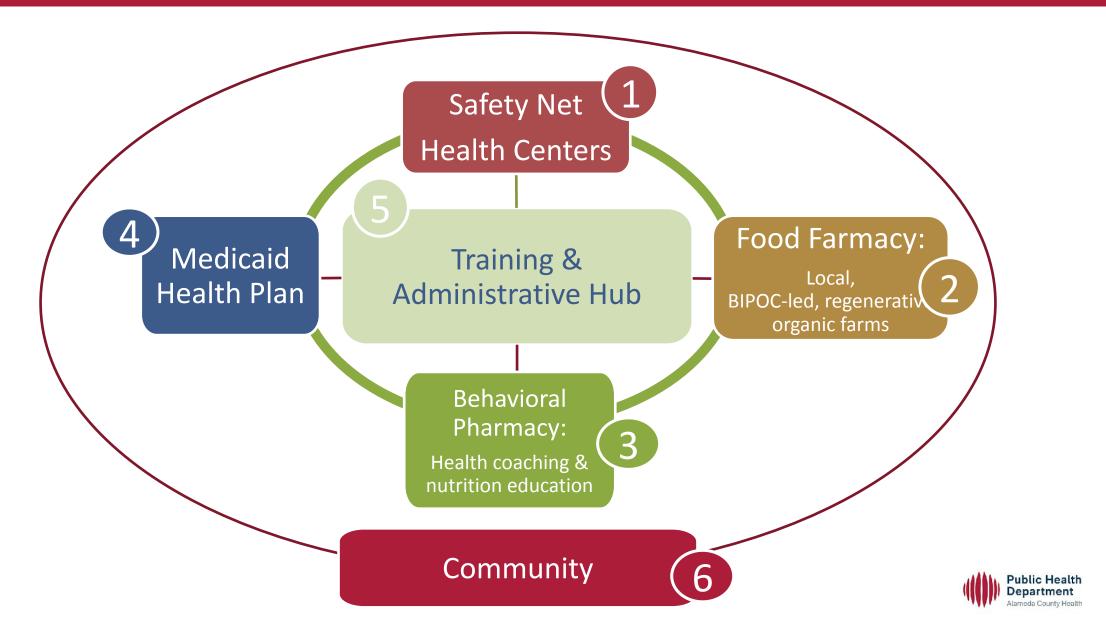
Generates H^3E co-benefits:



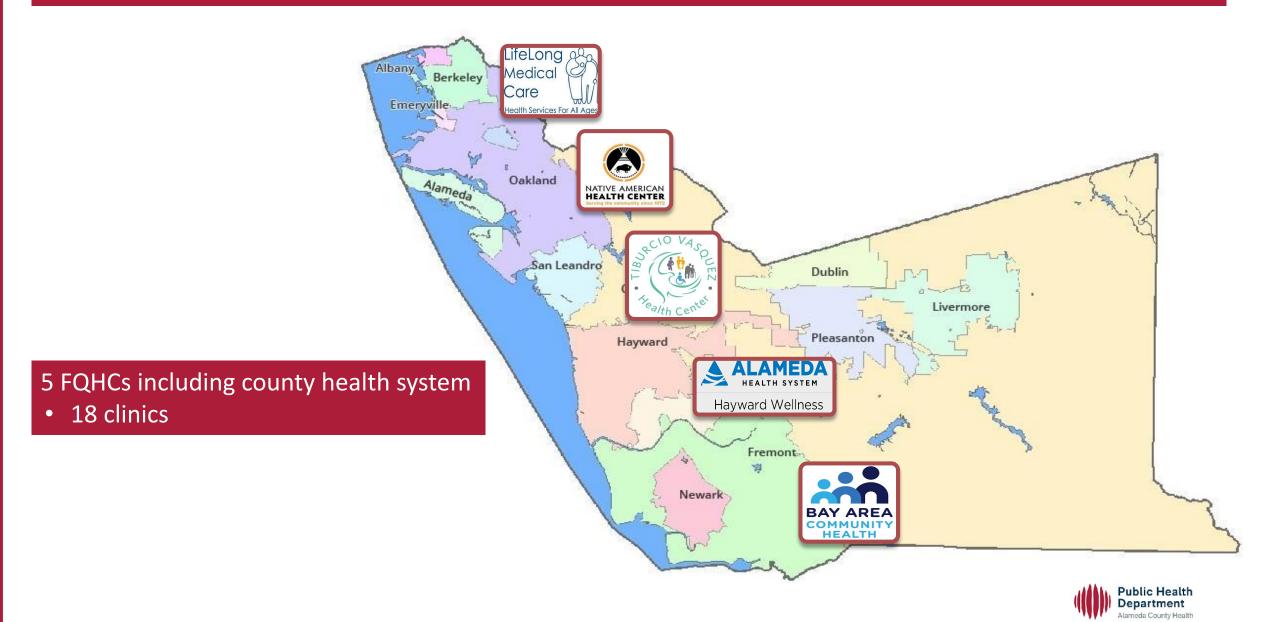




Recipe4Health: 6 ingredients to scale impact



Ingredient #1: Federally Qualified Health Centers (FQHCs)



Ingredient #2: Food Farmacy (Farms and Food Hub)



Local Regenerative and Organic Farms

Nutrient Dense, Delicious Produce





> 45 local farms



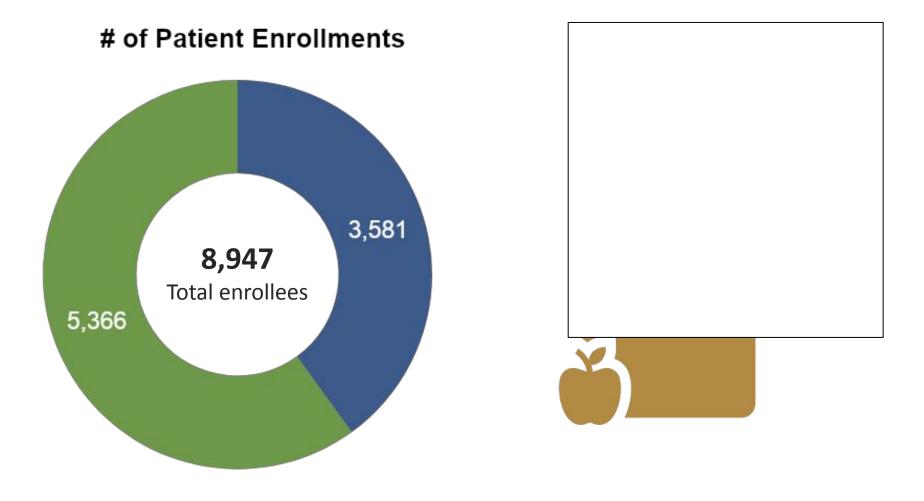
BIPOC Farmers as Farmacists

Discreet Doorstep Delivery





Recipe4Health Program Reach (1/01/2020 – 7/31/2025)



■Health Coaching + Food Farmacy
■Food Farmacy
Only



Human Health and Recipe4Health



Improved Health Behaviors

- + 0.8 servings of vegetables & fruits per day
- + 39 minutes of physical activity per week



Improved Mental Health

- 44% reduced depressive symptoms
- 32% reduced anxiety symptoms



Improved Food Security

• 67% report food security after 3-months (compared to only 43% before services)



Reduced Chronic Conditions

- 32% with prediabetes/diabetes show meaningful improvement in sugar control
- 66% improve "unhealthy cholesterol" by at least 10% to reduce heart disease



Reduced healthcare costs

15% reduced likelihood of ER visits compared to control group



THANK YOU!



H.R. 1 SNAP Cuts to Low-Income Residents

SNAP matters:

- > 179,000 Alameda County residents receives CalFresh benefits (March 2025)
- ➤ H.R. 1 represents a topline ~ 20% cut to SNAP/CalFresh

IMPACT related to HR1 SNAP cuts

- ➤ H.R. 1 cuts <u>SNAP for every participant:</u> a loss of \$7 per person/month between 2027-2031 and \$15 per person/month between 2032-2034 (the minimum benefit is only \$23/month)
- Loss to CA of \$15m in federal match for CalFresh outreach
- ➤ This cut starts at a day's worth of benefits each month, rising to almost two days' worth by the end of the decade
- ➤ ACCFB is seeing an historic decline in CalFresh applications due to fear and confusion in community



IMPACT: SNAP-ED Program: \$1.6m in annual SNAP-Ed funding to Alameda County is permanently eliminated

- GONE: funding for Cooking for Health Academy, physical activity classes for seniors, 20 Healthy Retail Stores and nutrition education that serves ACCFB's network
- LOST: economic vitality for county, school district partners, interns, and resident champions who provide nutrition education and physical activity support

H.R.1 SNAP Impacts to County Residents:

H.F. Findle es Bully of the worspoices in Time Limit & Immigrant Exlusions the 1996 Welfare Act that further punishes and excludes vulnerable

populations.

➤ Time Limit IMPACT: In the two largest congressional districts (CD 12 and 14), 8,000 older adults and (55 to 64) in households without children are at risk of losing some amount of CalFresh benefits due to work requirements. This number rises to 19,000 for adults (18-64) in households with school-age children who are at risk of losing some or all CalFresh.

- Not a work requirement: at best, is a paperwork hurdle to document hours. No job or Employment & Training spot is provided prior to ending food aid.
- Rolling out end of January 2026
- Immigrant Exclusion IMPACT: Prevents most immigrants, including refugees, asylees, victims of domestic violence, survivors of labor or sex trafficking, from accessing food assistance.
- Resulting in a potential loss of nearly \$70 million in food for Alameda County residents based on average monthly benefit of \$300



Recommendation: Fully fund Alameda County's Food Security Plan

Because food is a basic human right

Fund ACCFB's food procurement, distribution and ability to fill key gaps through partnership

\$8.5 million Food procurement/distribution

\$4 million Prepared meals (unhoused/seniors)

\$3.5 million Operational sustainability for network partners

\$1 million Infrastructure support for ACCFB

\$350k ACCFB to administer Summer Food for CBO

partners

Leverage and support existing community food system infrastructure

\$1.5 million Alameda County Food Hub Network

\$1 million Market Match



ACCESS REPRODUCTIVE JUSTICE

Alameda County Board of Supervisors Together for All Committee Presentation September 4th, 2025

Sonja Goetsch-Avila (she/they) Program Director



ABORTION FUNDS BRIDGE THE GAP

ACCESS REPRODUCTIVE JUSTICE was founded in Oakland in 1993 by clinic escorts, who witnessed barriers pregnant people faced in obtaining abortions

Direct Service = Healthline

- The heart of ACCESS RJ. Making care accessible for low-income, young, BIPOC, LGBT, genderexpansive, disabled and rural callers
- Funding and practical support through statewide volunteer network

Movement Building = Policy Advocacy + Volunteer Engagement + Outreach and Education





REPRODUCTIVE JUSTICE

- The right to have a child
- The right to not have a child
- The right to parent our children in safe and sustainable communities
- The right to bodily autonomy

Source: SisterSong





Forced sterilizations for people with disabilities decried by members of Congress

In Buck v. Bell, SCOTUS affirmed 'the constitutionality of Virginia's law allowing state-enforced sterilization.'







Adriana Smith

Trans Protesters Have Been Arrested in Front of the Supreme Court

By Katja Vujić, a writer at The Cut covering culture, news, wellness, and style.



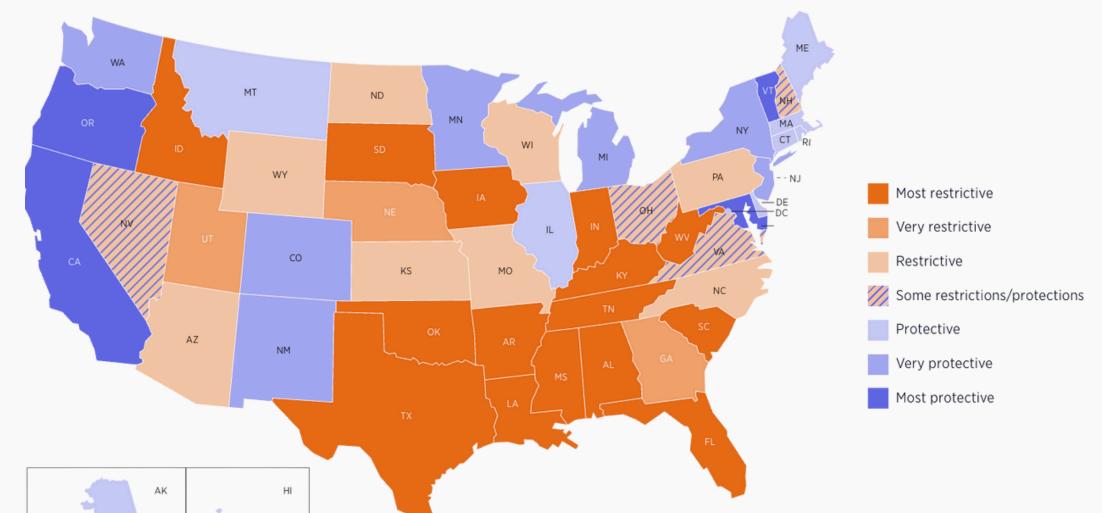
U.S. ABORTION POLICIES



policies they have in effect. Select any state for details about abortion policies, characteristics of state residents and key abortion statistics, or select a policy to see which states have bans, restrictions or protections in place.

Policies current as of August 19, 2025





Abortion is completely banned in 12 states:
AL, AR, ID, IN, KY, LA, MS, OK, SD, TN, TX, WV

Nearly 1 in 5 are having to travel out of state

Abortion via Telehealth has increased from 0 virtual clinics in 2020, to 69 virtual clinics in 2022

Guttmacher Institute August 2025

IMPACT 3 YEARS POST - DOBBS

2022

- Roe v Wade overturned
- ACCESS RJ co-leads FAB
 Council and champions
 historic legislative package
 for expansion and protection
 of abortion care
- ACCESS RJ expands our Healthline department by 300%

FY 22-23

- 1,421 callers supported
- \$512,058 spent on caller support
- 405 out of state callers

FY 23-24

- 2,006 callers supported
- \$1,337,080 spent on caller support
- 375 out of state callers

FY 24-25

- 1,900 callers supported
- \$1,237,602 spent on caller support
- 320 out of state callers

California Data

Alameda County Data

FY 22-23

- 36 callers supported
- 6 appointments w/ AC providers
- Majority of callers were AC residents and left AC for care

FY 23-24

- 102 callers supported
- 37 appointments w/ AC providers
- Majority of callers were AC residents and left AC for care

FY 24-25

- 79 callers supported
- 18 appointments w/ AC providers
- Majority of callers were AC residents and left AC for care

Federal Attacks & Funding Cuts

SCOTUS Decisions

- Dobbs v. Jackson Women's Health
- United States v. Skrmetti
- Medina v. Planned Parenthood

HR 1: The Big Ugly Bill

- Defund Planned Parenthood provision
- Slashed Medicaid funding
- Strict eligibility requirements

Escalated state violence targeting immigrants

- ICE threats at health centers and hospitals
- Centers for Medicare & Medicaid Services (CMS) shares
 Medicaid member personal data with ICE







SOLUTIONS

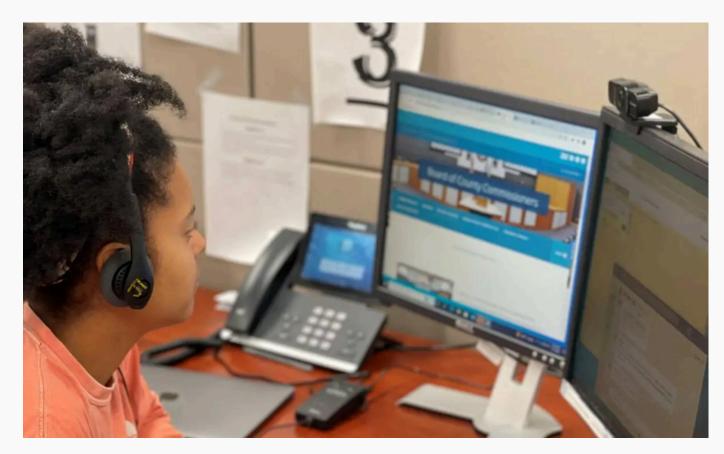
How ACCESS RJ can utilize our infrastructure and expertise:

As barriers increase, we are prepared to offer:

- Free, confidential, bilingual + unbiased support
- Linkage to practical support for all logistical needs associated with accessing care
- Linkage to trusted providers and direct financial support

Increased Healthline capacity to effectively support callers with accessing gender-affirming healthcare – in addition to full-spectrum reproductive healthcare – in Alameda County

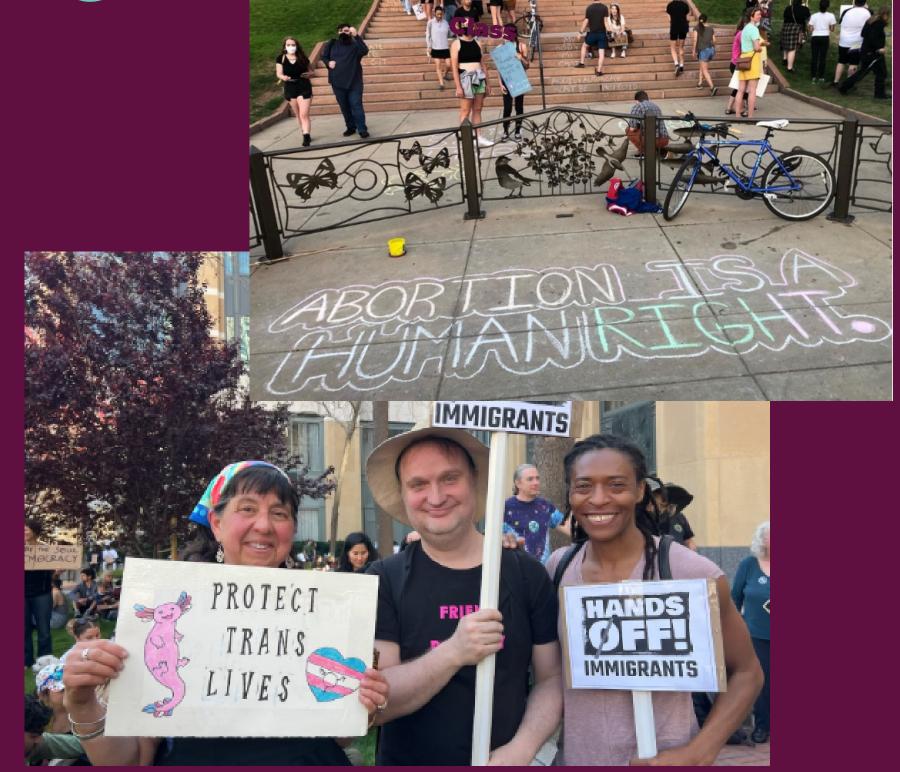




Alameda County X ACCESS RJ

Who we are, what's at stake and how local government can step in

- 5-7 clinics offering in-clinic and medication abortion services
- Patient-centered providers and community-based organizations
- ~40 active practical support volunteers





RECOMMENDATIONS

\$300,000 / year for 5 years to support:

- Staffing capacity, training and outreach for expanded healthline services
- Procedural and practical support funding
- Strengthened partnerships with local genderaffirming care providers and LGBTQ+ community organizations

Integration of abortion services in Alameda County primary care settings for increased access



Thank you.

Questions?







WHO IS DREAMS

DREAM WELLNESS

COVENANT HOUSE TINY HOUSE

DREAM EMPOWERMENT LOUNGE

The mission of Dream Youth Clinic is to provide no-cost, youth-led, health services, youth programs, youth leadership opportunities and digital health education utilizing a reproductive justice framework centering **Black** Girls, Black youth, youth of color, and gender-expansive youth.

> BAY AREA YOUTH 13-25

DREAM + YOUTH REPRODUCTIVE JUSTICE



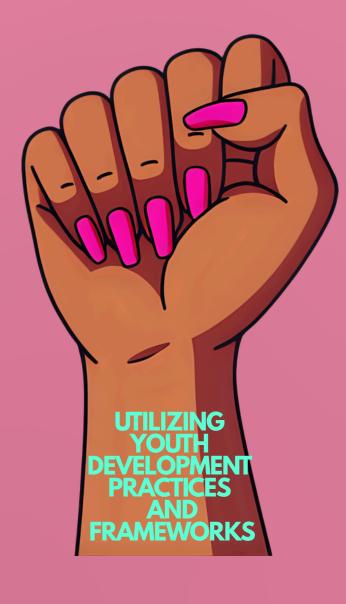


RJ IS THE FOUNDATION OF OUR YOUTH WORK

WE SEE THE
SYSTEMS OF
OPPRESSION
THAT CHALLENGE
OUR YOUTH

WERESOURCE OUR YOUTH AS THEY LIVE WITHIN THESE SYSTEMS OF OPPRESSION WE INTERROGATE
THE
SYSTEMS OF
OPPRESSION
THAT CHALLENGE
OUR YOUTH

WE EQUIP OUR YOUTH TO ADVOCATE AND CHANGE THE SYSTEMS OPPRESSION THAT CHALLENGE YOUTH







REPRODUCTIVE JUSTICE SUMMER



Year-round program for Oakland Black and Brown female identified youth ages 13-24 addressing how reproductive justice principles affect youth.



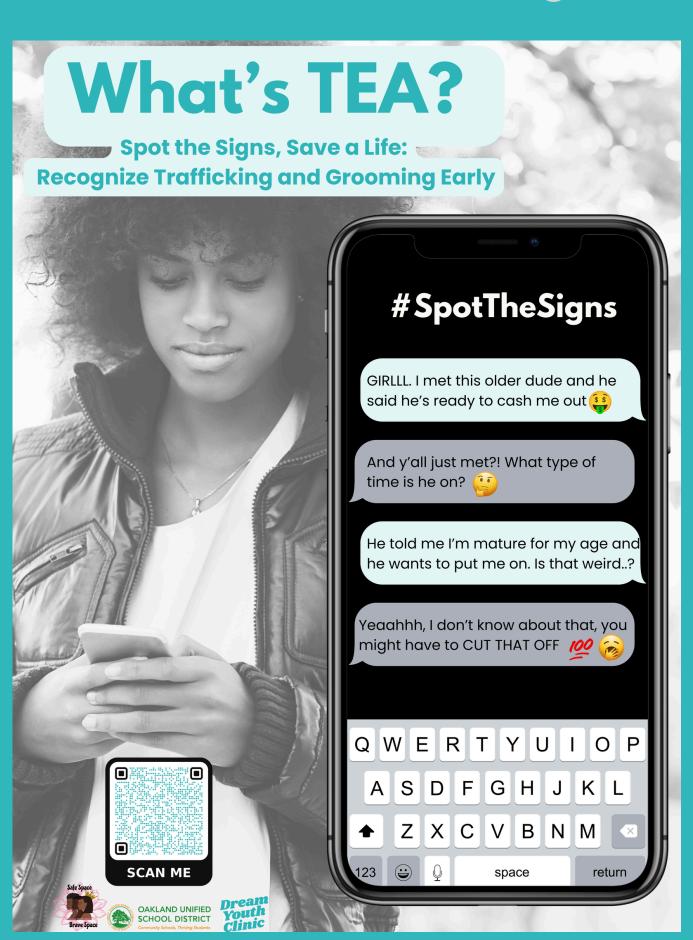
- Empower Black and Brown, femme, youth voices
- Create youth-focused reproductive justice content
- Propose: Youth Reproductive Justice policy and advocacy
- Provide input and leadership on how to engage youth in the RJ movement



SAFE SPACE BRAVE SPACE FOR YOUTH

A YOUTH-LED PROGRAM CENTERING FEMME-IDENTIFYING YOUTH THAT FOCUSES ON FEMME SEXUAL VIOLENCE PREVENTION, LEADERSHIP DEVELOPMENT, YOUTH-LED POLICY ACTION, REPRODUCTIVE JUSTICE, AND BUILDING COMMUNITY POWER.

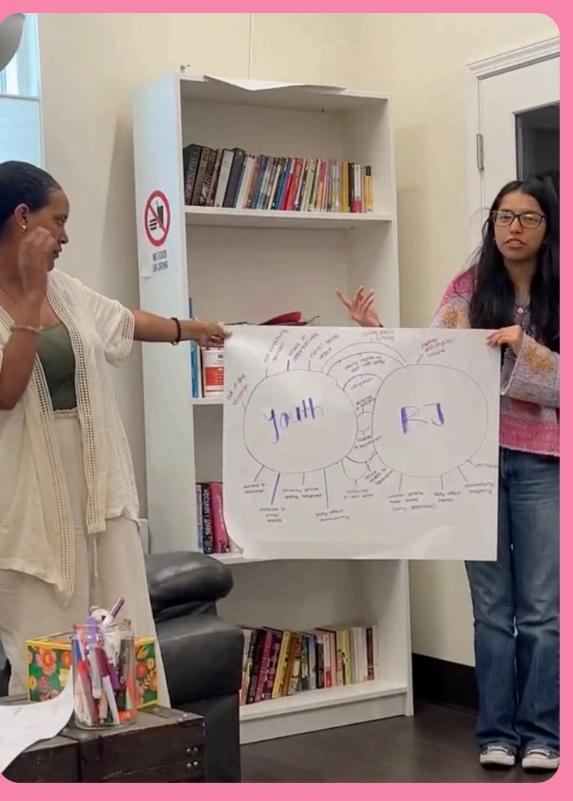
OUR GOAL IS TO INSPIRE OUR LOCAL CIVIC LEADERS TO RESOURCE COMMUNITY INITIATIVES FOR YOUNG PEOPLE TO BE SAFE FROM SEXUAL VIOLENCE, HAVE ACCESS TO NECESSARY RESOURCES, AND ARE SUPPORTED TO LEAD CHANGE.





OUR RJ POLICY GOALS -DIGINAMED





01

FUNDING TO SUPPORT FREE & SAFE YOUTH CENTERED PROGRAMMING

02

INVEST IN YOUTH
MENTAL HEALTH
SERVICES &
PROVIDERS

03

INCORPORATE
REPRODUCTIVE JUSTICE
BASED PROGRAMMING INTO
YOUTH SPACES (SCHOOLS,
PARKS, YOUTH CENTERS,
ETC.)

RJ SUMMER YOUTH WOICES

Dream Youth Clinic

WHAT CHANGE DO YOU WANT TO SEE IN THE COMMUNITY?

SAFETY:

"I would want my community like Oakland, Oakland in general, to have more like safer events where people want to bring their kids out, and wanna like enjoy, without being, like, fearful of something happening or like, fearful of like someone getting injured, or a fight breaking out, or just like chaos. I would like something like that."

"I mean, not everything has to be kid oriented, I know everybody don't got a kid...just those type of get togethers where you can, like, do something...don't want to worry about like, oh, I can't afford this place ... is dangerous over there, my parents or my family not comfortable with me going over there. So i think spaces like that we should have more of."

YOUTH MENTAL HEALTH:

"Asking for, like, more like. I feel like. Yes, people talk about mental health a lot, or talk about depression a lot. But I feel like people don't necessarily take the time to pay attention to it like, as much as I like for young people, because like, if you really look at it like a lot of the stuff that's going on, like even with violence and a lot of the fighting, all of the ghetto stuff, it's a lot of the youth. Like all the bipping cars, and like things like that. When a lot of that was going on I was out there too."

"So like I'm not saying be nosey and pay attention to people's background but like consider that people come from traumatic things and they think it's normalized and it's okay, like stealing, boosting, all that different stuff. Be more aware and be more aware from them, you can't help anyone who doesn't want to be helped but you can try."

SAFE SPACE BRAVE SPACE FOR YOUTH RJ POLICY GOAL

Dream Youth Clinic

We are asking for the creation of an annual Youth Safety, Healing, and Empowerment Fund: specifically earmarked funds to support youth impacted by sexual assault, sexual violence, or other forms of interpersonal violence.

Funds would go directly to trusted, youth-serving, community-based organizations that provide:

- Prevention education Fund youth gender-based violence prevention programing in youth community centers and schools
- Healing services Provide youth-led restorative justice services and healing circles
- Long-term support Ensure dedicated space and resources for youth organizing and leadership,
- Safety resources Youth Safety Kits, law enforcement trainings
- Youth-led programming Oakland Youth Emergency Hotline

The goal is to create safe, healing-centered, and empowering spaces for youth not just to respond to harm, but to prevent it.



CALLTOACTION



WHAT YOUTH NEED FROM ALAMEDA COUNTY BOARD OF SUPERVISORS



1

Funding to support FREE youth-centered events, programming, and opportunities

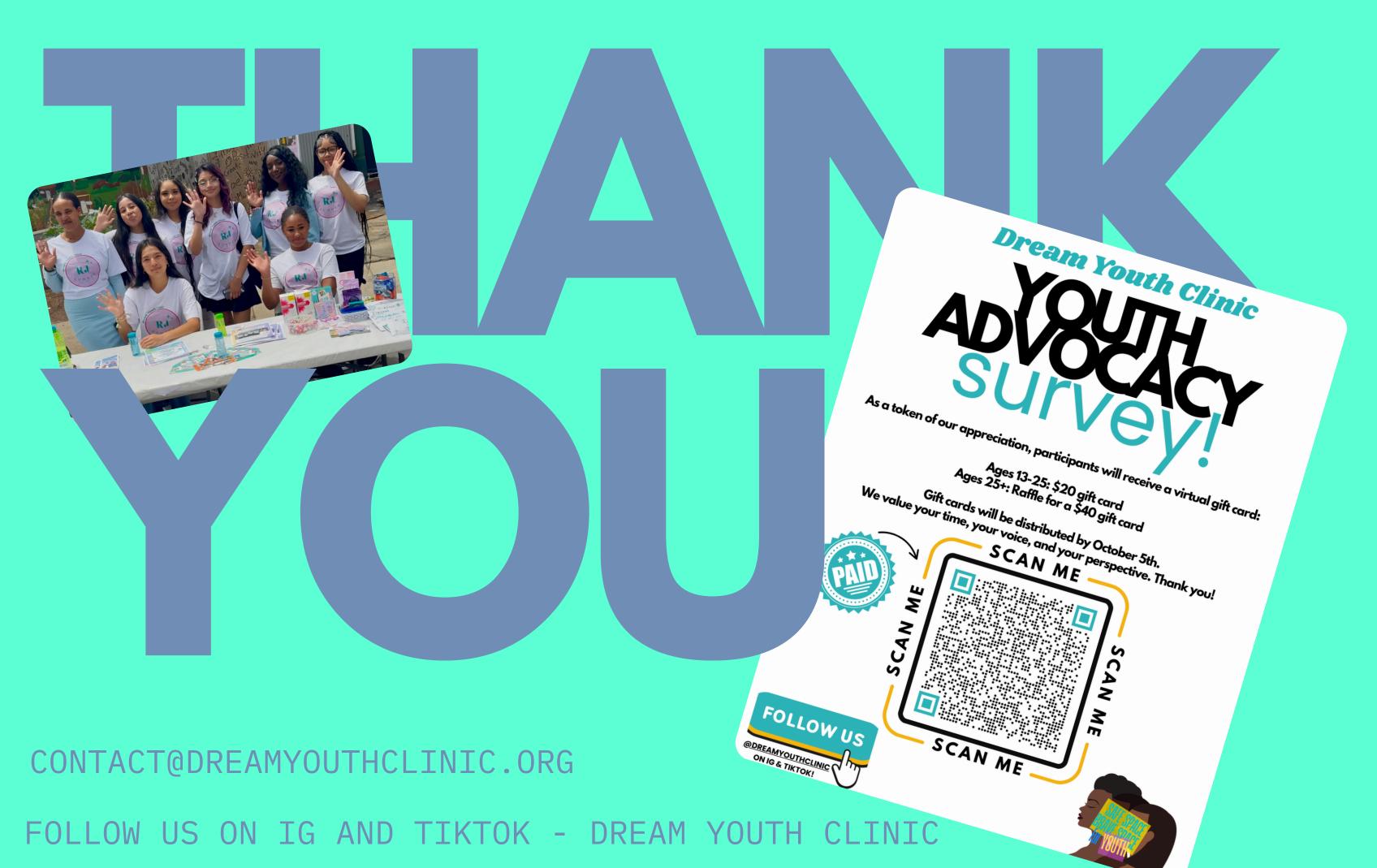
2

Funding for FREE Youth Mental Health Services



Funding to support youth to be safe from sexual violence in the community





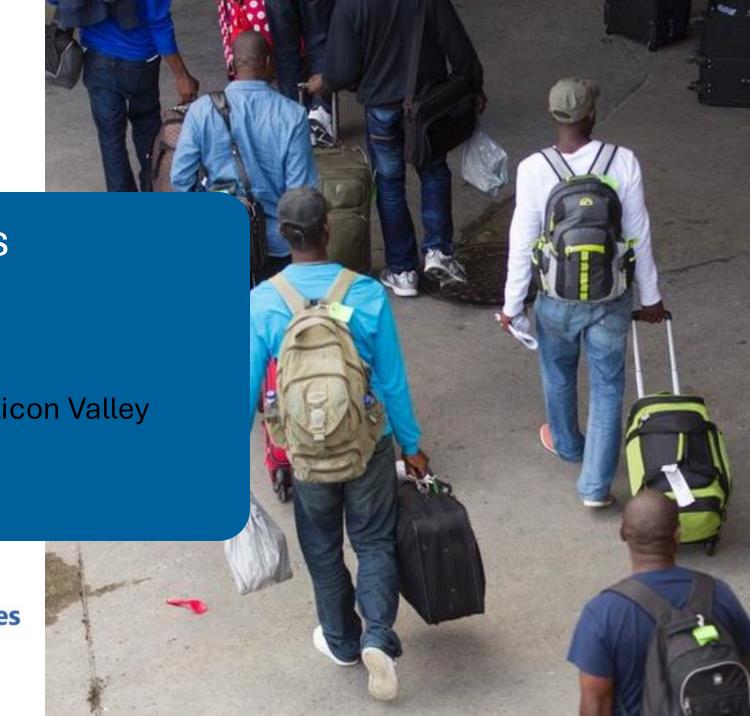
Newcomer Services in Alameda County

A Collaborative by IRC Oakland, JFCS East Bay, JFS Silicon Valley September 4, 2025









Addressing the January 2025 Stop Work Order



Alameda County Board of Supervisors granted \$616,780.57 in emergency funding to address the Stop Work Order and provide continuity of services for all who arrived without Federal support for resettlement services.



□ PRESIDENTIAL ACTIONS

REALIGNING THE UNITED STATES REFUGEE ADMISSIONS PROGRAM

The White House

January 20, 2025

325 New Arrivals to Alameda County Directly Impacted by Stop Work Order

- > JFS Silicon Valley: 64
- > JFCS East Bay: 105
- > IRC Oakland: 156

Alameda County's Newcomer Landscape

- **Immigrant share**: ~35.7% foreign-born in Alameda County (ACS 2023). Census.gov
- Youth: 4 in 7 children have at least one immigrant parent; 86% born in the U.S.
- Housing burden: 45% of renter households in Alameda County are cost-burdened and 23% are severely cost-burdened; 71% of extremely low-income renters pay >50% of income on housing. DPSS LA CountySocial Services Agency
- Linguistic diversity: ~48% of residents speak a language other than English at home; large LEP communities. Census.gov
- Immigrant's constitute 40% of the county's labor force.

 Vera Institute of Justice



Family Stability and Continuity of Services for Alameda County Newcomers



Principles of Newcomer Services

We:

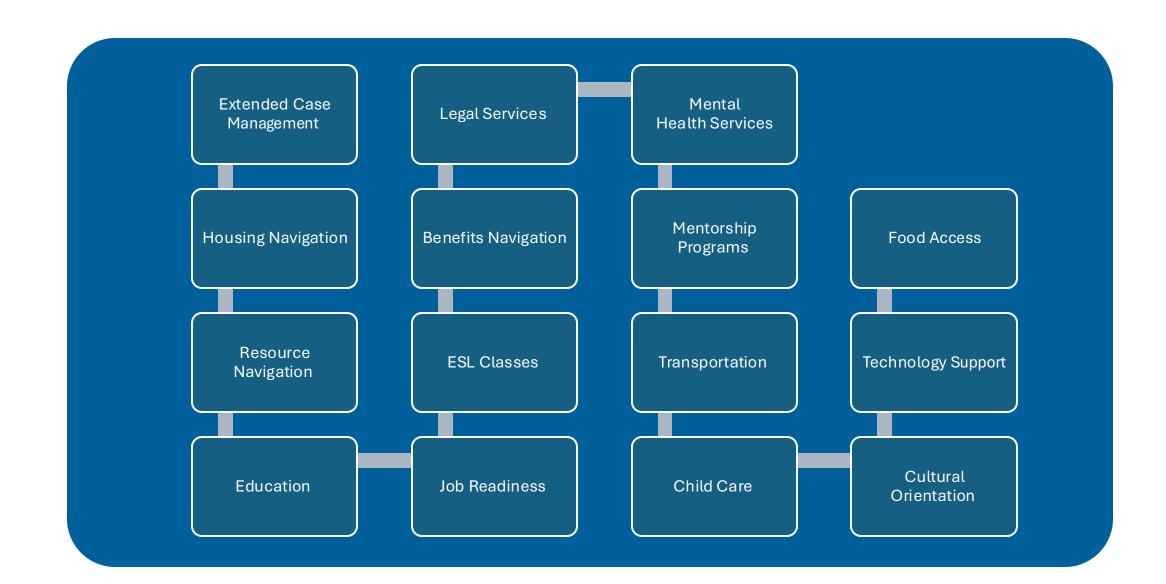
- Prioritize family reunification and family staying together.
- Posses a high degree of cultural competence, including staff with lived experiences similar to those of our clients.
- Are field-based- we meet people where they are.
- Provide trauma-informed services building safety and trust.
- Build long-term relationships that lead to self-sufficiency.
- Partner with clients to meet their goals.
- See investing in newcomers is investing in the community.



Social Determinants of Health and Newcomer Needs



Priority Services



5-Year Impact





Since 2021, we have resettled 2,426 refugees in Alameda County.

- > JFS Silicon Valley resettled 321
- > JFCS East Bay resettled 707
- > IRC Oakland resettled 1,398



- Connected resettled families in Alameda County with safe housing, healthcare, education, access to benefits and jobs.
- Housing stability strengthened through landlord partnerships and expanded housing options.
- **Economic self-sufficiency** supported clients employed, trained, and starting businesses.
- Prioritized **health and wellness** access to physical/mental healthcare and social supports.
- Expanded **educational opportunities** children enrolled in schools
- Fostered **resilience** and **belonging** newcomers thriving and enriching Alameda's cultural and civic life.



Timeline



Populations to Be Served

Family Reunification and Sanctuary

- Refugees
- Special Immigrant Visa Holders
- Asylum Seekers and Temporary Status Immigrants
- Secondary Migrants
- Internally Displaced Americans



Anticipated Client Outcomes

- Increased housing stability for newcomers
- Higher employment & income levels
- Expanded legal protection
- Improved mental health and wellness outcomes
- Food security and healthcare access
- Stronger integration into Alameda County communities



Call to Action

Continuity of Services
July 1, 2026 – December 31, 2029
to ensure:

- Self-Sufficiency
- Stability
- Opportunity
- Dignity and Belonging

for Alameda County Newcomers.







Invest \$10M over 3.5 years in this collaborative newcomer services initiative

-remainder of this administration + transition to rebuild-

Support culturally responsive, trauma-informed, holistic newcomer programs

Ensure newcomers can access services addressing all areas of the **Social Determinants of Health**