

IN RE THE MEETING OF)
THE BOARD OF DIRECTORS OF)
LEGAL SERVICES CORPORATION)
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TRANSCRIPT OF PROCEEDINGS

Los Angeles, California

Friday, November 8, 2002

Reported by:
LYNN ZINK
CSR No. 9466

JOB No. 874052

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IN RE THE MEETING OF)
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Transcript of Proceedings, taken at
930 Hilgard Avenue, Los Angeles, California,
beginning at 9:00 a.m. and ending at 11:42 a.m.
on Friday, November 8, 2002 before LYNN ZINK,
Certified Shorthand Reporter No. 9466.

1 Legal Services Corporation's
2 Provision for the Delivery of Legal Services Committee
3 Meeting Attendee List

4 NAME TITLE

5 *****COMMITTEE MEMBERS PRESENT*****

6 ERNESTINE P. WATLINGTON, Chair
7 DOUGLAS S. EAKELEY (ex-officio)
8 MARIA LUISA MERCADO
9 F. WM McCALPIN

10 *****BOARD MEMBERS PRESENT*****

11 HULETT H. ASKEW
12 LA VEEDA MORGAN BATTLE
13 JOHN N. ERLNBORN

14 (ATTENDING AS DIRECTOR & PRESIDENT)

15 EDNA FAIRBANKS-WILLIAMS
16 THOMAS F. SMEGAL, JR.

17 *****STAFF & PUBLIC PRESENT*****

18 RANDI YOUELLS Vice President for Programs
19 MAURICIO VIVERO Vice President for Governmental
20 Relations & Public Affairs
21 DAVID RICHARDSON Treasurer & Comptroller
22 ERIC KLEIMAN Press Secretary
23 MICHAEL GENZ Director, Office of Program
24 Performance (OPP)
25 AHN TU Senior Counsel, OPP
26 ROBERT GROSS Senior Counsel, OPP
27 JULIE CLARK Vice President for Government
28 Relations, National Legal Aid and
29 Defenders Associations ("NLADA")
30 LINDA PERLE Senior Attorney-Legal Services,
31 Center for Law and Social Policy
32 ("CLASP")
33 DON SAUNDERS Director for Civil Legal Services,
34 NLADA
35 ROBERT DIETER University of Colorado (Nominee)
36 THOMAS FUENTES Tait & Associates (Nominee)
37 MICHAEL McKAY McKay Chadwell (Nominee)
38 ROBERT COHEN Executive Director, Legal Aid Society
39 of Orange County, Inc. (LASOC)

1 Legal Services Corporation's
2 Provision for the Delivery of Legal Services Committee
3 Meeting Attendee List

4	NAME	TITLE
5	NEAL DUDOVITZ	Executive Director, Neighborhood Legal Services of Los Angeles County (NLSLA)
6	BRUCE IWASAKI	Executive Director, Legal Aid Foundation of Los Angeles (LAFLA)
7	YOLANDA ARIAS	Directing Attorney of GBU, LAFLA
	JOANN LEE	Directing Attorney of API Unit, LAFLA
8	CRYSTAL SIMS	Director of Litigation, LASOC
	MARY LOU CZERNER	LOSAC
9	NANCY RIMSHA	Directing Attorney, Health Consumer Action Center, LASOC
10	STEWART KWOH	Asian Pacific American Legal Center Attorney, LASOC
11	MONIQUE TRINH	Attorney, LAFLA
	BARBARA SCHULTZ	Directing Attorney, Training, LAFLA
12	DENNIS ROCKWAY	NLSLA
	MICHELE MELDEN	NLSLA
	YOLANDA VERA	NLSLA
13	CHRISTINA KU	NLSLA
	DAVID PALLACK	NLSLA
14	NORA BOYAJIAN	NLSLA
	REBECCA YEE	NLSLA
15	JEFF ISBELL	LASOC
	JULIET STONE	Asian Pacific American Legal Center (APALC)
16	LIZA HIRSCH MEDINA	NLSLA
17	HEATHER H. HUA	LASOC
	VANTA	NLSLA

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1 Los Angeles, California, Friday, November 8, 2002

2 9:00 a.m. - 11:42 a.m.

3

4 MS. WATLINGTON: Good morning. I'd like to start
5 the Provision Committee meeting which is this November
6 8th hearing, Los Angeles. And let's get the approval of
7 the agenda. How many committee members? You, Maria --
8 I need the approval of the agenda.

9 MR. McCALPIN: So moved.

10 MR. EAKELEY: Can I just note my appearance and
11 apologize for leaving, but I have to make a quorum in
12 the Finance Committee. But I'll be back as soon as the
13 quorum's made and the vote's taken.

14 MR. McCALPIN: If the other committee member would
15 disengage her conversation, she could second the motion.

16 MS. MERCADO: Second.

17 MS. WATLINGTON: It's been moved and seconded the
18 approval of the agenda. All in favor say aye.

19 MR. McCALPIN: Aye.

20 MS. WATLINGTON: Opposed.

21 MS. MERCADO: I'm not opposing it.

22 MS. WATLINGTON: We have the minutes of the meeting
23 Friday, August 23rd, 2002. I need approval of those
24 minutes.

25 MR. McCALPIN: It's your turn.

1 MS. MERCADO: I move that we accept the minutes
2 because I didn't see any corrections, but that does not
3 mean you didn't see any.

4 MR. McCALPIN: Second.

5 MS. WATLINGTON: It's been moved and seconded the
6 approval of the committee meeting minutes of Friday,
7 August 23rd. All in favor say aye.

8 MR. McCALPIN: Aye.

9 MS. MERCADO: Aye.

10 MS. WATLINGTON: Oppose it say. The motion's
11 carried.

12 We have a big agenda here. We have the panel
13 here. Again, Mike is in charge and will introduce and
14 let us know who the rest of the panel is.

15 MR. GENZ: Madam Chair, Members of the Committee,
16 good morning and thank you.

17 Our first panel is on the delivery of legal
18 services in many languages. While this is a challenge
19 all across the country, we are in the right place here
20 for this presentation. There are more than 100
21 languages represented in the Los Angeles basin.

22 Our three host programs are Neighborhood Legal
23 Services of Los Angeles County, Legal Aid Foundation of
24 Los Angeles, and the Legal Aid Society of Orange County.
25 These programs have recognized and addressed the need to

1 represent in so many languages. They represent an
2 enormous population. Almost 2,000,000 low-income people
3 in this area. They have a combined staff of 246
4 dedicated people. Those people speak the language of
5 their community. As you will see, they've done a great
6 job in that.

7 In the last year, in 2001, the start of the
8 work they did was 36,000 cases. Of course those cases
9 themselves affected many, many people beyond that. And
10 they also engaged in many other types of services
11 covering countless thousands of others.

12 It's my honor this morning to introduce the
13 directors of those programs. Neal Dudovitz out of
14 Neighborhood Legal Services of Los Angeles County.

15 Neal.

16 MR. DUDOVITZ: Good morning.

17 MR. GENZ: Bruce Iwasaki of the Legal Aid
18 Foundation of Los Angeles.

19 Bruce.

20 MR. IWASAKI: Hi.

21 MR. GENZ: And Bob Cohen of the Legal Aid Society
22 of Orange County.

23 MR. COHEN: Good morning.

24 MR. GENZ: We are blessed in our community with
25 wonderful leaders, and these are three of the best and

1 most dedicated. They have worked together, coordinated
2 and collaborated to have an integrated justice system.
3 They have worked very hard on the issue that forms this
4 panel today. They are dedicated to the highest quality
5 legal representation for those who speak all languages,
6 and they are dedicated to spreading the numbers of
7 people served.

8 At this point I'm going to pass it over to Bob.
9 Thank you.

10 MR. COHEN: Good morning, Madam Chair and Members
11 of the Committee. First I'd like to say that we're
12 honored that you've come to Southern California to join
13 us for your ninth anniversary, and we're especially
14 honored given the weather that we've brought you. And I
15 have to make this personal note. What a record that you
16 have on behalf of legal services and all the clients we
17 serve, and we certainly applaud you for being our
18 leaders for such a long time. Thank you very much.

19 (Applause.)

20 MR. COHEN: Our three programs -- Neighborhood
21 Legal Services, Legal Aid Foundation of Los Angeles, and
22 Legal Aid Society of Orange County -- work well
23 together. Sometimes our work complements each others.
24 Sometimes we work directly together on projects, and
25 sometimes we take on separate different service

1 experiments. But it's all for the benefit of our client
2 community, and you'll see examples today of each
3 approach.

4 In every case, however, we want you to know
5 that we work together for the benefit of our client
6 community. This is a keenly held and felt
7 responsibility by all of us.

8 We first want to let you know a little bit
9 about the magnitude of our service responsibility. Los
10 Angeles County has a population of over 9.7 million.
11 It's the largest county in the country, and you may
12 already be aware of that. But a lesser known fact,
13 Orange County with its population of 2.8 million is the
14 fifth largest in the country. Has a population larger
15 than the city of Chicago and many of our states.

16 Not only is the population large, but as Mike
17 stated, it's very diverse. And we're particularly
18 fortunate here because last night we received some
19 slides on diversity from Dave Maddix of the Office of
20 Inspector General, and we're going to share those with
21 you.

22 Just by way of preview, I will tell you that
23 L.A. by itself has over 1.1 million Asians, and Orange
24 County has 390,000. L.A. has 874,000 blacks, and Orange
25 County has 45,000. And L.A. has 4.2 million Hispanics,

1 and Orange County has 867,000 -- a large and diverse
2 population. And if we can go through just a few of
3 these slides and you can get a feeling for the
4 diversity.

5 Can you pop that, Jeff? The thing that I want
6 you to look at is that the grid, the densities, the
7 highest density areas it's kind of a brown shade. You
8 have to pardon my view of the colors. It's over 25,000
9 persons per square mile of the census track. And the
10 lesser shades right under that 10,000 to 25,000 and
11 before that it's 25,000 to 10,000. So you can see if we
12 shift, you want to shift back, you can see how the
13 populations are centered and how large they are.

14 But this is diversity. And Bruce's Power Point
15 is going to be talking about how we manage to provide
16 service in a diverse community and how diversity and
17 poverty impacts upon our client community and upon the
18 services that we provide for them.

19 The program today, in addition to our Power
20 Point is going to highlight areas of health advocacy and
21 housing rights. Additionally, we're going to be looking
22 at services to non-English speakers, specifically those
23 services provided to our Southeast Asian client
24 community in conjunction with the Asian Pacific American
25 Legal Center.

1 Our staff is going to be introduced as they
2 speak, but I especially wanted to recognize Jeff Isbell,
3 who is our community education director at the Legal Aid
4 Society of Orange County. Jeff has much experience with
5 video productions. We stole him from KYOU-TV, and
6 you'll see -- well, his guiding hand has touched much of
7 the work that you're going to see today.

8 Next I'd like to introduce Neal. Neal has some
9 welcoming remarks, and he will be introducing the staff
10 who have welcoming remarks of their own.

11 Neal.

12 MR. DUDOVITZ: Good morning again. Welcome to
13 usually sunny Southern California. We make you feel all
14 at home today with a little rain. We would like to have
15 our staff greet you and which will give you some sense
16 of the diversity of our staff and their bilingual
17 capacities.

18 MS. GOMEZ: (Introduction in Spanish.)

19 My name is Sarah Gomez, and I work for the
20 Legal Aid Foundation of Los Angeles serving the Latin
21 community.

22 MS. YEE: (Introduction in Cantonese.)

23 My name is Rebecca Yee. I work at Neighborhood
24 Legal Services, and I serve the Cantonese-speaking
25 client community.

1 MS. CREMEEN: (Introduction in Khmer/Cambodian.)

2 My name is Pitoura Cremeen. I work with the
3 Legal Aid Foundation of Los Angeles serving the
4 Cambodian community.

5 MS. BOYAJIAN: (Introduction in Armenian.)

6 Hello. My name is Nora. I work at
7 Neighborhood Legal Services serving the Armenian
8 community.

9 MS. PARK: (Introduction in Korean.)

10 Hello. My name is Ann Park, and I work for the
11 Legal Aid Foundation of Los Angeles serving the Korean
12 community.

13 MS. TA: (Introduction in Chiu Chow.)

14 Hello. My name is Van Ta, and I work for
15 Neighborhood Legal Services, and I serve the Chiu Chow
16 community.

17 MS. MORIMOTO: (Introduction in Japanese.)

18 Hello. My name is Chikako Morimoto, and I work
19 at Legal Aid Foundation of Los Angeles serving the
20 Japanese-language community.

21 MS. MEDINA: (Introduction in Russian.)

22 Good morning. My name is Liza Hirsch Medina.
23 I work at Neighborhood Legal Services and our program
24 also serves Russian-speaking immigrants.

25 MS. MAK: (Introduction in Thai.)

1 Good morning, everyone. My name is Irene Mak,
2 and I work at Neighborhood Legal Services and I serve
3 the Thai-speaking community.

4 MS. HUA: (Introduction in Vietnamese.)

5 Hello. My name is Heather Hua, and I work at
6 Legal Aid of Orange County serving the Vietnamese
7 community.

8 MR. CHENG: (Introduction in Mandarin.)

9 Hi. My name is Tony Cheng, and I work at the
10 Legal Aid Foundation of Los Angeles serving the
11 Mandarin-speaking community.

12 MS. SETAREH: (Introduction in Farsi.)

13 Hi. My name is Daliah Setareh. I work at
14 Legal Aid Foundation of Los Angeles serving the Iranian
15 community, and a lot of the clients I helped are victims
16 of domestic violence.

17 MR. DUDOVITZ: Thank you.

18 (Applause).

19 MR. DUDOVITZ: Just so you know, that is not all of
20 our bilingual staff but a sample, and one of the other
21 points just to understand here in Southern California,
22 everything we do in our programs are essentially done in
23 English and Spanish. Spanish for us is just an
24 alternative language. And hopefully eventually we'll
25 have enough staff we can have three or four of

1 alternative languages.

2 One final note before Bruce will Power Point.
3 We have put up for you a map of Los Angeles and Orange
4 County. I will be remiss if I didn't point out about 25
5 percent of the northern portion of the county is left
6 off of this map which includes a portion of our service
7 area and an important area called the Antelope Valley.
8 And again, to give you the sense of the numbers of
9 people we're dealing with, there are about 40,000 poor
10 people up in the Antelope Valley that aren't even on
11 this map.

12 In addition, when you have a chance, we have
13 marked with different colored dots where the various
14 Legal Services offices are in L.A. and Orange County.
15 We brought a map so that you could see what's left off.
16 Way up on the top where it says Lancaster/Palmdale
17 there's some dots. That's not on this map here. So
18 L.A. County is a huge area. It contains, as Bob noted,
19 lots of people including sadly lots of poor people.

20 So with that I will let Bruce tell you a little
21 bit more about our clients.

22 MR. IWASAKI: Madam Chair, Members, thank you very
23 much. I think what I might do is stand up there, and
24 then we can all sort of look in the same direction with
25 the permission of the Chair.

1 MS. WATLINGTON: On your way up there, did I see
2 where apartments, the market rent for a two bedroom was
3 1,000?

4 MR. IWASAKI: We have lots to talk about on that.

5 MS. WATLINGTON: I thought I saw that. I wasn't
6 sure. I didn't believe it.

7 MR. IWASAKI: We also have a hard copy version of
8 this presentation that we can pass out. But I didn't
9 want that to be distracting. These are some headlines
10 of the issues facing our client community. And in the
11 presentation today we wanted to highlight some of that.

12 Los Angeles County and Orange County combined
13 have close to 2,000,000 people below the poverty line.
14 100 percent poverty line. So if all of those people
15 were one city, that would be the fourth largest city in
16 the United States. What we want to discuss today are
17 changes in the low-income community in Southern
18 California and trends unique to Southern California,
19 touch on affordable housing issues, although much of
20 that will also be discussed later this morning, and also
21 reemphasize some of the language diversity issues faced
22 by our client community and the challenge of responding
23 to that.

24 One thing that's very important is
25 understanding the growth of poverty in Southern

1 California during the 1990's. In the decade of the
2 1990's the increase of poverty in the United States was
3 about 1.9 million. Now, let me -- that amount in
4 California in the decade of the '90s, I'd like you to
5 think for a moment in your head what you think that
6 might be. Do you think that would be 20 percent? 30
7 percent? In fact it's more than 50 percent of the
8 increase in poverty in the United States was in
9 California during the 1990's.

10 And just for further emphasis for Los Angeles
11 County, what was that increase? That amount was
12 480,000. So roughly a quarter of the increase of
13 poverty in the entire country was in L.A. County. There
14 was also a sizable increase in Orange County. 60,000.

15 Just covering some other basic statistics about
16 the increase in poverty in Los Angeles and Orange
17 County, starting at the more general level in
18 California, in 1990 the poverty rate was 12 and a half
19 percent, but that increased in 2000. But the poverty
20 rate was even higher in Los Angeles County to start with
21 and increased even more. And the figures in Orange
22 County while lower over all reflected a sizable increase
23 for that population.

24 In fact it's very important to understand that
25 the demographics of Orange County are changing

1 dramatically. It's not all a Beach Boys situation at
2 all. During the 1990's the increase in poverty was well
3 over 25 percent. Just this week the "Los Angeles Times"
4 reported on the economic problems of Orange County. The
5 unemployment claims increased by a rate faster than any
6 other Southern California county. And, again, the
7 language access issues. The percentage of people that
8 speak a language other than English in Orange County is
9 over 40 percent, over a 1,000,000 people.

10 This demonstrates part of the trend lines of
11 poverty rates in the United States and California.
12 You'll notice that before the late 1980's California had
13 a lower rate of poverty than the rest the country. But
14 after that point it went way up. It's coming down, but
15 it's still at a rate higher than the rest of the United
16 States.

17 Obviously a very important area for all of our
18 programs is representing children. And the number of
19 children in poverty in the United States is a deplorable
20 number. It's 15.8 percent. However, in California,
21 that number is even higher. And in Los Angeles County a
22 staggering amount, over 700,000 children below the
23 poverty line. We're not talking about 125 percent of
24 poverty. Orange County, the number of children living
25 in poverty is close to 100,000.

1 This is another graph. It compares California
2 and the U.S. The top two lines are the low income rate,
3 basically the 20th percentile rate, not the poverty
4 rate. And the other lines are the poverty rate. And as
5 you can see, as the other graph indicated, more recently
6 California is at a higher level than the rest of the
7 country for children in poverty.

8 A very important fact -- I know this committee
9 is aware, and I think we need to make this more salient
10 in the rest of the general population -- is that our
11 clients are working. Poor people are working. The
12 portion of poor children in California who live in
13 families with at least one employed parent is two
14 thirds. And another important statistic is that this is
15 a significant increase.

16 Again, to emphasize working families, the
17 percentage of California families with children that are
18 poor that have at least one full-time worker is nearly
19 half. And there are a lot of those families. And a lot
20 of children in those families, over 1,000,000.

21 This is another representation of that that
22 shows that the working poor, there's a higher percentage
23 of the poor who are working in California than in the
24 rest of the country marginally.

25 The other unique fact about poverty in

1 California is that two-parent families make up about
2 half of the poor families in California. In fact,
3 compared to one-parent families, it's also 48 percent.
4 So it's basically even.

5 Another development -- this is across the
6 country as well, I think more pronounced in California
7 -- is income inequality. Basically stagnant wage
8 increases at the lower end; whereas, at the 90th
9 percentile significant real wage growth.

10 Not looking at wages, but looking at income
11 generally, in California the wealthiest 1/20th of
12 Californian's increased their income by over 50 percent;
13 whereas, the lowest 20 percent actually lost during that
14 time.

15 Again, this compares California with the rest
16 of the country. Looking at the bottom graph, that's the
17 rest of the U.S. At least from the late '60s, everyone
18 had increased real wages a little bit, although the
19 poorer one was, the less that increase. Whereas in
20 California the bottom 25 percent and the bottom 10
21 percent lost over that time.

22 We'll be talking more about the crisis in
23 affordable housing later, but I wanted to give you just
24 some basic information about that. This is one thing
25 that the chair probably saw earlier. Fair market rent

1 for a two-bedroom apartment in Los Angeles County is
2 over \$800. It takes close to \$33,000 a year to afford
3 an apartment like that in L.A. County. And if you work
4 the minimum wages, how many hours would you have to
5 work? Over 100 hours a week. That's even more than
6 associates bill in law firms. So that's obviously
7 impossible.

8 Looking at the same figures in Orange County
9 it's even worse because of the high cost of housing.
10 Basic two-bedroom apartment costs almost \$1,100. You
11 need to make almost \$44,000, which I'm afraid to say is
12 more than what we pay some of our attorneys. And at the
13 minimum wage, you'd have to work full time and never
14 sleep to afford a basic, not a fancy, two-bedroom
15 apartment in Orange County.

16 This is another way of depicting some of that.
17 You remember for L.A. County the affordable housing wage
18 we talked about income was at 33,000. The census tracks
19 where the median income was below 23,000 are represented
20 in red. And similarly for Orange County where the rate
21 was about 44,000, those areas are in red. So you can
22 see where those population areas are. It doesn't quite
23 capture the size, though. It looks like a small area,
24 but it represents over 1.2 million people in the
25 situation where they cannot afford basic housing. 1.2

1 million people is more than everybody who lives in
2 Dallas, Texas.

3 I want to close by giving some information
4 about language diversity in Southern California. More
5 than 120 languages are spoken in the region. And the
6 percentage that speak English only, what do you think
7 that would be? It's only a little over 50 percent. And
8 the percentage that speak in Spanish is nearly a third.

9 Some of these graphs we'll go through
10 relatively quickly are California data from K through
11 12, because the agencies that collect the most data on
12 language happen to be the education system. It also
13 gives you a sense of where trends are going to be in the
14 future. But you can see the growing trends for English
15 learners over the years.

16 This is sort of a decade-by-decade snapshot of
17 both the growth and the number of students speaking
18 different languages and the ranking of the most number
19 of students speaking different languages. And you can
20 see how some of that has changed in interesting ways.

21 This is the trend line for English learners
22 speaking Spanish. Obviously going up very high. And
23 the next two will be on different Asian languages.
24 These are various Southeast Asian languages. And
25 Cantonese, Tagalog, and Korean.

1 I'll turn it over to the next presentation.

2 Thank you.

3 (Applause.)

4 MR. DUDOVITZ: Thank you, Bruce. We now have some
5 of our staff to talk to you a little bit about what we
6 do in our program to address the diversity of our client
7 base. So it is sometimes overwhelming, but I think
8 we've developed a number of exciting projects and
9 programs to help make legal services accessible to all
10 our client community.

11 MS. LEE: Good morning. My name is Joann Lee. I'm
12 the directing attorney of the Asian and Pacific Islander
13 Community Outreach unit at the Legal Aid Foundation of
14 Los Angeles, and I'm just going to talk to you today a
15 little bit about what we're doing at Legal Aid
16 Foundation of Los Angeles to serve limited English
17 proficient communities.

18 Just to give you a little bit of background
19 about the Asian and Pacific Islander community in Los
20 Angeles, there are about 1.2 million in the county.
21 It's about 13 percent. Almost one of five Asian and
22 Pacific Islanders in Los Angeles County lives in
23 poverty. The majority are foreign born. 45 percent
24 cannot read or speak English. And there are more than
25 300 Asian languages and dialects spoken among 34 Asian

1 ethnic groups.

2 To meet this challenge, these are our areas of
3 practice. And you'll see they're mostly divided up by
4 substantive area. And within each of those substantive
5 areas, of course, we do have Spanish-language capacity
6 integrated all throughout. But because of the
7 challenges that exist in the Asian and Pacific Islander
8 community, we actually have a unit that's dedicated to
9 doing outreach and serving this community, and I'm going
10 to talk a little bit about that unit.

11 Basically we consider ourselves an entry point
12 for the monolingual Asian and Pacific Islander
13 community. We have language lines which I'll go into a
14 little bit more where people can call and speak to
15 advocates in their own language. We have
16 community-based clinics where we go out into the
17 community, partner with community-based organizations,
18 and meet clients one on one face to face. And, of
19 course, we have direct referrals with very strong
20 relationships that we developed with community-based
21 organizations.

22 Just to give you an example of the different
23 types of languages we have, we have staff who answer
24 phones in Cantonese, Mandarin, Japanese, Korean, Khmer,
25 which is Cambodian, and Vietnamese.

1 We also run a number of community-based clinics
2 as I stated before. We have a total of nine per month.
3 And just to give you some examples, in the Thai
4 community we work with the Thai Community Development
5 Center. In the Koreatown community we work with many
6 different organizations because one of our services is
7 located right in the Koreatown area. In Little Tokyo we
8 have a clinic at the Little Tokyo Service Center. We
9 have a clinic in the Chinatown area which is located
10 near downtown. And we also have a clinic for the
11 Cambodian community in Long Beach with an organization
12 called the United Cambodian Community.

13 Just to give you an overview of who we are,
14 this is our staff. We have two full-times attorneys,
15 two part-time attorneys. We have two staff members who
16 provide paralegal and outreach support. We have an
17 administrative secretary, and we have seven to ten law
18 students. And they're really the heart of our unit
19 because they provide a lot of the bilingual capacity.
20 If we can't handle the case in our unit, they will
21 follow the clients to the other units and provide the
22 full range of services to that client. And we pay our
23 law students so we've really made a commitment to being
24 able to serve these communities.

25 One of the most important components is

1 outreach. Many of these communities are isolated. They
2 don't have access to mainstream news. They don't have
3 access to the courts. Many of the social service
4 programs that exist do not have bilingual capacity; so
5 we find that we need to do a lot of outreach, a lot of
6 community education. So we focus a lot of our efforts
7 in developing relationships with the ethnic media. And,
8 for example, I write a column in one of the Korean daily
9 newspapers. It comes out once a month, and it gives
10 basic legal advice and ways to contact us if people need
11 help.

12 We continue to build our relationships with
13 local community groups. We've had town hall meetings
14 where we invite the client communities to come. We give
15 them briefings on updates in various areas of law and we
16 ask them what needs are pressing in their communities.
17 And then we participate as much as possible in local
18 community affairs so we just remain visible.

19 So that's just an overview of what we're doing
20 at LAFLA in terms of their limited English proficiency
21 communities. Thank you. I'm just going to hand it over
22 to Irene with the Neighborhood Legal Services.

23 MS. MAK: Good morning. My name is Irene Mak. I'm
24 a family law attorney at Neighborhood Legal Services,
25 and I'm also the supervising attorney for the Asian

1 Language Project at Neighborhood Legal Services. I'd
2 like to talk about our service expansion into the San
3 Gabriel Valley area within the last couple of years.

4 We have been in partnership with six other
5 agencies to provide family law, domestic violence, and
6 other services to victims of domestic violence in our
7 new service area. We work with two different law
8 schools -- one is the U.C.L.A. Law School, and the other
9 one is University of Laverne Law School -- using the
10 clinical students to assist us at the domestic violence
11 clinic, and they also help us to staff our workshops,
12 and they also assist us at the self-help centers.

13 And we also are in partnership with two social
14 service agencies, all in the San Gabriel Valley area.
15 One is the Santa Anita Family Services, and the other
16 one is the Foothill Family Services. And the reason we
17 are in partnership with this social services is we want
18 to make sure the victims of domestic violence receive
19 both social services, counseling, as well as legal
20 services.

21 And to show our commitment to improve the
22 quality of life for battered women, we also have a
23 collaborative project with two major domestic violence
24 shelters out in the San Gabriel Valley area. One is
25 called House of Ruth, and the other one is called Wings

1 of YWCA. And our attorneys actually travel out to these
2 shelters to interview clients and provide legal
3 representations to the victims of domestic violence.

4 And the Wings of YWCA has a special API program
5 that conducts extensive Asian Pacific Islander outreach
6 into the community. A lot of their clients are
7 monolingual Chinese clients, and a lot of them only
8 speak Chinese and they don't know English. And to show
9 our commitment from Neighborhood Legal Services, we send
10 attorneys out there to Wings to work with the victims of
11 domestic violence. And the staff that we send out
12 there, they have the linguistic capability and they also
13 understand the culture, and they are able to communicate
14 with clients that are monolingual Chinese speaking.

15 And we provide both Mandarin- and
16 Cantonese-speaking staff attorneys to go to the shelters
17 to assist the monolingual Chinese client, and we also
18 have staff that speak other Asian language that will go
19 out there to do that.

20 And we have done extensive outreach in the
21 Asian communities since our expansion into our new
22 service area in San Gabriel Valley. We are really proud
23 and excited of what we have done in our new service
24 area. I think so far we have made a tremendous positive
25 impact on the lives of traditionally underserved Asian

1 Pacific Islander community. And I think we have make a
2 big difference on the life of the victims of domestic
3 violence, and I think it's our goal and our endeavor to
4 continue our good work in our service area.

5 I'm going to turn it over to our deputy
6 director Yvonne Mariajimenez.

7 MS. MARIAJIMENEZ: Good morning. I'm Yvonne
8 Mariajimenez. I'm the Deputy Director of Neighborhood
9 Legal Services, and I just wanted to elaborate a little
10 bit on two of the projects that Neighborhood Legal
11 Services operates in order to increase access to the
12 court system to the poor.

13 As Irene was mentioning, Neighborhood Legal
14 Services operates domestic violence clinics in
15 collaboration with the courts and the bench and bar and
16 the law schools. We have been operating the clinics for
17 over 10 years. We currently operate five in Los Angeles
18 County. And these clinics will by the end of this year
19 have provided assistance in issuing over 5,000 temporary
20 restraining orders.

21 Now, the unique part of these clinics is that
22 we are able to place clients, domestic violence
23 survivors, with pro bono lawyers who will represent them
24 at the permanent restraining order phase and also follow
25 up on divorce or paternity or whatever family law

1 related assistance as needed.

2 The other project that Neighborhood Legal
3 Services implemented in November, 2000 was the self-help
4 centers. We opened up a self-help center in the valley,
5 the San Fernando Valley, and within a year it had served
6 over 15,000 visitors to that center.

7 Now the self-help centers are more than just
8 providing information and materials. They actually
9 provide one-to-one assistance to assist individuals in
10 explaining the systems, the judicial systems, assistance
11 in preparing the pleadings that people will need. And
12 we've actually implemented workshops so that, for
13 example, in the family law area, people are actually
14 walked through phases of a divorce so that they have a
15 workshop when they first come in to fill out paperwork.
16 They'll come in for a default setting for a trial
17 preparation.

18 So it's more of an extensive assistance. The
19 Van Nuys self-help center is looked throughout the state
20 as one of the premier pro per assistance models that we
21 have. And it has been so successful that we are
22 implementing additional self-help centers. By the end
23 of next year we will have hopefully five centers in
24 operation. One of them will be an operation with the
25 Legal Aid Foundation of Los Angeles. And as part of

1 those self-help programs, we've developed extensive
2 materials, community education materials, that are
3 translated into most of the languages spoken in our
4 service areas. So we also provide written material
5 information education to our clients.

6 One of the things I wanted to highlight is that
7 these two projects, although they're run with funds,
8 with equal access to the state bar, we find in analyzing
9 the data that we have, that more than 90 percent of the
10 individuals assisted in these two projects are very low
11 income and poor working families. And in fact, almost
12 90 percent of them are income eligible for legal
13 services. We also found that in analyzing the data, we
14 find that most of the visitors to the centers, 48
15 percent of them or more, speak Spanish or are
16 monolingual Spanish speakers.

17 And so these additional projects complement the
18 services. They increase the leverage or resources and
19 we're able to assist many more people in the community.
20 Self-help will never replace legal services. We find
21 that attorney representation, attorney assistance is
22 very necessary in accessing the judicial system and
23 being effective.

24 And the very last area I wanted to cover very
25 briefly is our outreach component that all of our

1 programs have. Neighborhood Legal Services last year
2 provided actual outreach to 48,000 individuals. Those
3 are measured results. People who are actually counted.
4 We also do extensive, as the other programs do as well,
5 extensive outreach using media channels. We're on
6 radio, television, and print media, both in the Spanish
7 language and in the Chinese languages, providing
8 community education over the wire. And there we don't
9 have measured results, but what we do know is that
10 hundreds of thousands of listeners are provided with
11 information over the airwaves.

12 So this is examples of how we leverage our
13 resources to impact the community. Thank you.

14 MS. TRINH: Good morning, everyone. My name is
15 Monique Trinh. I'm a Vietnamese attorney with the Legal
16 Aid Society of Orange County. I would like to tell you
17 a little bit about how we came about figuring out what
18 our client community in the Asian Pacific Islander
19 portion has come about.

20 A few years ago in an effort to ensure that we
21 are servicing our market community, the staff at Legal
22 Aid used the 1990 census to create in GIS map. This GIS
23 overlay represents the community. The blue dots
24 represent our clients, whereas the red dots represent
25 poor or, as we call them, low-income people. We don't

1 call them poor. And we were very concerned with the
2 areas within the blue circle which consist of the Garden
3 Grove city and the Westminster cities. And we later
4 found out the reason why we are not serving these areas
5 is because the majority of the residents are Vietnamese
6 monolingual speaking people. So this resulted in a
7 partnership with community organizations to outreach to
8 these Vietnamese communities.

9 We work with different organizations. They
10 consist of Ocapita, the Vietnamese Community of Orange
11 County, the Vietnamese American Bar Association,
12 Cal-Optima, Family Resource Centers, Catholic Charities,
13 and St. Ann's Cross Cultural Community Center. Our
14 outreach efforts include in-person presentations at the
15 different community development counsel sites, as well
16 as the women, infant, and children nutritional sites.

17 Earlier this year we were on a radio station
18 reaching about 300,000 listeners informing the
19 Vietnamese communities of our free legal services. We
20 gave out Vietnamese brochures on health fairs and about
21 the Vietnamese holiday festivals and events.

22 Two years ago the Legal Aid created a community
23 kiosk system called the I-CAN which creates completed
24 court forms for end users input in the system. We
25 currently only have one module called the license denial

1 review for the District Attorney's office involving
2 Vietnamese. And Jeff will be giving you just a little
3 demo of that.

4 (Tape running the foreign language.)

5 MS. TRINH: Our community education department,
6 Jeff is the director of it, created a video safety plan
7 for the domestic violence restraining order module.
8 This video was recreated in Chinese, and Jeff will also
9 give you a little bit of the demonstration.

10 (Tape running in foreign language.)

11 MS. TRINH: We are now in the process of making
12 I-CAN available to the Vietnamese community. We are
13 hoping to have all the I-CAN modules translated into
14 Vietnamese for the upcoming Vietnamese New Year tent
15 festival around February of 2003. These modules would
16 consist of the domestic violence restraining order; the
17 small claims; unlawful detainer, which is eviction
18 defense; and the earned income tax credit module. Yes,
19 you can fill out your tax return and e-file it with the
20 IRS.

21 Superior Court Judge Nguyen from West Justice
22 Center will host this event to introduce the I-CAN to
23 the Vietnamese community. In the near future we hope to
24 have available a full range of family law matters as
25 well on the I-CAN system. Within the last six months

1 Legal Aid served over 115 Vietnamese clients. With the
2 Asian Language Legal Intake Program acting as the
3 central intake office, we are providing services to an
4 increased number of Vietnamese and Chinese residents
5 throughout Orange County and Southeast L.A.

6 On that note, I would like to turn it over to
7 Stewart and Juliet of that project.

8 MR. DUDOVITZ: We have one final group is going to
9 be noted.

10 (Applause.)

11 MR. DUDOVITZ: And we want to highlight for you, if
12 you'll indulge us a couple more minutes, a couple of the
13 real collaborative projects, projects that our three
14 programs have worked on together with other
15 organizations, and we want to start by introducing
16 Stewart Kwoh and Juliet Stone of the Asian Pacific
17 American Legal Center who are partners with us in a very
18 important project.

19 MR. KWOH: My name is Stewart Kwoh. I'm Executive
20 Director and the President of the Asian Pacific American
21 Legal Center of Southern California. Welcome to Los
22 Angeles. Sorry about the rain. You're going to see
23 more rain in these few days than we have had all of last
24 year's rainy season. So we apologize.

25 The Asian Pacific American Legal Center is a

1 19-year-old nonprofit organization. It has about 45
2 staff, including 15 attorneys. We have our budget is
3 supported mainly by foundations and corporations and
4 individuals from our community. We see less than 15
5 percent government funding.

6 We have looked at some of the recent data, and
7 I just wanted to share with you just the brief synopsis
8 of the Asian Pacific American community. There's about
9 4.2 million Asian Americans and Pacific Islanders in the
10 state of California. In Los Angeles County there's
11 about 1.2 million, and in Orange County there's over
12 400,000 Asian Americans.

13 Of the Asian community or of the state of
14 California's population, about 10 percent of the
15 population speaks in Asian or Pacific Islander language
16 at home. And of those 10 percent of Californian's,
17 about 56 percent do not speak English very well. And in
18 the years between 1990 and 2000, those who did not speak
19 English very well grew over 27 percent. So there's a
20 very significant portion of the Asian American and
21 Pacific Islander community in California that really
22 does have a very limited English proficiency.

23 The poverty rates hover around 15 percent.
24 However, in some of the Asian ethnic groups, like the
25 Southeast Asian and Pacific Islanders, the poverty rate

1 can range from 30 to 50 percent. And the subjects that
2 they or the issues that they face include domestic
3 violence, housing, employment, government benefits, et
4 cetera.

5 I think the question that our agency was faced
6 with was in this growing Asian Pacific American
7 population, how is it that we will provide -- our agency
8 provides legal services, training and advocacy work.
9 But the question that we were faced with, and it is
10 certainly a question that confronts the legal aid
11 organizations in Southern California, as this population
12 continues to grow, as the language diversity continues
13 to grow, how is it that we can be efficient and
14 effective in serving this community?

15 For example, in L.A. County alone there are
16 eight Asian ethnic groups that have between 20,000 and
17 330,000 each. Is it our future to have eight different
18 Asian language speaking receptionists at each office?
19 We didn't think that that was very efficient. And in
20 the long term not very effective.

21 So what we have been thinking about, and our
22 thinking was shared by the legal aid organizations, is
23 how can we look at a common legal intake program where
24 we could do common outreach, where we could have a
25 common screening program, and then do common legal

1 intake. And that was the genesis of the Asian Language
2 Legal Intake Project. It is a collaboration amongst the
3 Asian Pacific American Legal Center, the Legal Aid
4 Foundation of Los Angeles, Neighborhood Legal Services,
5 and the Legal Aid Society of Orange County.

6 Juliet Stone our project director will explain
7 the details of that project, but I just wanted to
8 comment on how this collaboration has been so valuable
9 for not only our individual agencies, but for the
10 community.

11 We felt that in order to get the initial
12 funding, our best strength was to go to various
13 foundations. It wasn't going to -- it was unlikely that
14 government funded legal aid groups would be able to
15 secure that funding. And for the Asian Pacific American
16 Legal Center, we felt that if we just went in on our
17 own, our ability to receive that funding would be
18 limited as well. But by combining our efforts and
19 developing a collaboration, we were able to secure two
20 major grants of over 300,000 in each of our first two
21 years. And that laid the ground work for our project.

22 The other thing that was needed is a
23 collaboration of all of our staff members who do legal
24 services and in particular the executive directors. And
25 I just want to thank Bruce and Bob and Neal for their

1 wonderful commitment to this project. They have come to
2 every planning meeting. Now, staff is doing a lot of
3 implementation, but every planning meeting, and that
4 numbered over ten meetings just in the last year and a
5 half. And I think it's really a commitment, and I just
6 want to thank them as well as the Legal Service
7 Corporation for allowing this collaboration to actually
8 get off the ground.

9 We're nearing the end of our second year. It
10 literally took us over a year to set up, and Juliet will
11 explain why it took so long. But we have great hopes
12 that we will serve more people, more people in depth, we
13 will be able to allow our staff to focus in on their
14 strengths and their talents without every single
15 attorney having to do intake, screening, outreach, and
16 the actual case work all in one person.

17 And so now we're being more efficient, and we
18 think we will be more effective at reaching tens of
19 thousands of people. Thank you very much.

20 MS. STONE: Thank you, Stewart.

21 Well, between Stewart and Joann, they did most
22 of my presentation; so I'll try to be really brief.
23 We're starting on page 4 already. I passed out the
24 Power Point so that you could see the entire thing. You
25 can look at it at your leisure, but I won't go through

1 census date since everybody has already done that. But
2 ALLIP, as Stewart already said, was set up to increase
3 sufficiency by combining resources.

4 If each attorney and paralegal can focus on
5 giving extended representation rather than counsel and
6 advice, then many more people will be served, and also
7 you can do more in-depth service for the community. And
8 that is really how our clients are served best.

9 Right now we help Chinese clients both in
10 Mandarin and Cantonese, and Vietnamese clients as well.
11 We are hoping to add Korean and Khmer in the near
12 future. Of course that has to do with budget, but
13 hopefully that will all work out.

14 We are a centralized intake system for L.A. and
15 Orange County, and we help clients in all areas of law
16 -- family, immigration, consumer, public benefits,
17 employment, and housing. In addition we also help
18 clients with many other issues that might come up that
19 they really have no way to handle because they just
20 don't speak English. So they need that little extra
21 helping hand.

22 A client will call our hotline and will be
23 helped immediately within their own language so that
24 they feel comfortable. One of the best things I think
25 about ALLIP is that our staff are actually members of

1 the community that they're serving. They understand
2 their community. To the clients they're their daughters
3 or their sons or their friends, and so they feel much
4 more comfortable in sharing very sensitive details which
5 is often a problem in Asian communities.

6 Of the clients that call, 87 percent are helped
7 solely on the hotline with counsel advice or referred to
8 appropriate community-based organizations or social
9 services agencies. For instance, we might make an
10 appointment for them with the Social Security
11 Administration office, make sure they already have an
12 interpreter so that they're already partway along the
13 process so that there won't be as many hitches
14 hopefully. They can always call us back.

15 One of the best things about the collaborative
16 was that questionnaires and scripts were created by
17 working groups over a year and a half long so that the
18 intake process could be streamlined and seamless. These
19 scripts and questionnaires were done by the working
20 groups, and the working groups also ended up helping
21 their overall client base because, for instance, the
22 family law group would get together, and each of the
23 attorneys would learn from each other and thus help all
24 of their clients which was wonderful.

25 An extensive CBO list was also created with

1 about 200 different organizations that have helped us
2 with outreach and we have leveraged the trust that those
3 CBO's have within their community to help us as well.

4 I'm going to end with an illustrative story,
5 and I will just say that the attorney who worked on this
6 case was Irene Mak, who you've already heard from, and
7 we love Irene.

8 The story of Mrs. C. She was a Chinese woman
9 from Taiwan, had been married for 13 years with a child.
10 She had been in the marriage with mental, physical, and
11 emotional abuse from the beginning, had very little
12 formal education, had very little understanding of how
13 the legal and social system worked in America, and was
14 very scared.

15 Thankfully she reached out to a shelter in the
16 San Gabriel Valley and learned of ALLIP, had a flier.
17 She called the number, was greeted by one of our
18 advocates and was surprised and happy to find out that
19 she had options. She didn't realize she had any. She
20 was very sheltered, wasn't real allowed to go out, was
21 very scared.

22 The ALLIP advocates explained that she could
23 get a divorce. It didn't matter if her husband wanted
24 one. If she wanted one, that was good enough. She
25 could get public benefits so she wouldn't have to worry

1 right away about getting a job because she had to care
2 for her child and figure out how to deal with being an
3 abused spouse. So could get CalWORKS. She could get
4 Medi-Cal. She was referred to NLS, helped by Irene, and
5 helped to learn to leave her abuser. She filed for
6 divorce which is still pending. She obtained full
7 temporary custody of her child over the strenuous
8 objections of her husband. This holistic legal service
9 and seamless intake system helped someone who was scared
10 and afraid to get out there in the community.

11 She's still, of course, starting out. She's
12 like a little bird, but she's hopefully going to be
13 okay, and it seems like she's doing very well. And I
14 will end that and turn it over to Yolanda Arias from
15 LAFLA who will discuss the CalWORKS collaborative that
16 works on policy issues within California of LAFLA, NLS
17 and LASOC.

18 MR. IWASAKI: Just before doing that, since Stewart
19 said such nice things about us, I know I'm speaking for
20 Bob and Neal, that without Stewart's leadership, the
21 ALLIP project could not have happened, and this is a
22 terrific example of building comprehensive integrated
23 client-based, client-centered work together. And so I
24 just want to thank Stewart for being here and giving his
25 presentation.

1 I'd now like to turn it over to one of my staff
2 Yolanda Arias who will be talking about another
3 collaborative project.

4 MS. ARIAS: Hello. My name is Yolanda Arias. I'm
5 the directing attorney of the government benefits unit
6 of the Legal Aid Foundation of Los Angeles. I'm very
7 pleased to be here today to talk about some work that
8 we've done in collaboration with APALC and Neighborhood
9 Legal Services in the area of language access for
10 CalWORKS recipients. I'd like to acknowledge that this
11 presentation was prepared in conjunction with Kate Meiss
12 of Neighborhood Legal Services.

13 In the CalWORKS program in Los Angeles County,
14 there are about 41 percent of everyone on CalWORKS is
15 limited English proficient. That's about 66,000
16 households of everyone on CalWORKS is non-English
17 speaking. There are six threshold languages and that
18 six threshold languages means that at least 5 percent of
19 the people on CalWORKS speak a language other than
20 English. There are many other languages spoken that
21 don't reach the 5 percent but their numbers are
22 significant.

23 In doing work with our clients, Neighborhood
24 Legal Services and Legal Aid Foundation of Los Angeles
25 identified many problems that our limited to English

1 proficient clients' experience. We found that our
2 limited English proficient clients were
3 disproportionately referred to dead end jobs like
4 restaurant workers, garment workers, and janitorial
5 workers. They were not provided opportunities to get
6 English as a second language education. There are
7 virtually no vocational training programs for people who
8 do not speak English in Los Angeles County. And the
9 LEP's portion of the Welfare to Work Program didn't get
10 started for nine months.

11 We found that limited English proficient
12 individuals did not have equal and meaningful access to
13 services because notices of action and forms and
14 brochures were only in English and not in languages that
15 the CalWORKS recipients could understand. This resulted
16 in children trying to translate complicated notices and
17 forms to their parents.

18 And there was also a failure to provide
19 bilingual workers for the non-English speaking CalWORKS
20 recipients. And this also resulted in strangers and
21 children interpreting in the offices for the CalWORKS
22 recipients. I'd like to give you one example. One of
23 our paralegals was doing outreach at one of the district
24 offices, one of the welfare offices. And a worker, not
25 knowing that Elva was with Legal Aid, recruited her to

1 translate for a client that was sitting there because
2 they didn't have the ability to provide a worker who
3 could speak the language.

4 We began gathering evidence of discrimination
5 Asian Pacific American Legal Center, Neighborhood Legal
6 Services, and Legal Aid Foundation of Los Angeles. We
7 worked together to gather data for our Complaint. We
8 sent public records request to explore the welfare
9 agencies' data. We helped clients through their
10 problems, and we gathered their stories. And we did
11 outreach to community groups and gave them education on
12 what their rights were under the Civil Rights Act. And
13 we developed a comprehensive record of the problems that
14 they experienced for inclusion in the Complaint.

15 And LAFLA, Neighborhood Legal Services, and the
16 Asian Pacific American Legal Center filed an Office of
17 Civil Rights Complaint with the Department of Health and
18 Human Services in December of 1999. As a result of our
19 filing the Complaint, we entered into mediation with the
20 Office of Civil Rights and with the Welfare Department
21 to try and resolve these problems. It took about a year
22 to come up with a settlement agreement that we could
23 agree with. And even though OCR and the Welfare
24 Department are still in mediation, we expect the
25 settlement agreement to be signed soon.

1 As a result of our efforts in helping clients
2 with language access problems, we've obtained some
3 pretty good results to this date. The Welfare
4 Department has instituted a new position, that of a
5 civil rights officer who oversees compliance with civil
6 rights requirements. And the Welfare Department has a
7 new emphasis on translating documents. They send us,
8 Legal Services, the documents, the forms, so that we can
9 check them over to make sure that the translations are
10 accurate and that the content is accurate as well.

11 And DPSS, the Welfare Department here in L.A.
12 County, is putting \$1.5 million into training programs
13 for the limited English proficient individuals. There's
14 more work to be done. But together, advocates from
15 Neighborhood Legal Services, Legal Aid Foundation of Los
16 Angeles, and the Asian Pacific American Legal Center
17 will monitor the situation and hopefully working
18 together we can improve access to our limited English
19 proficient individuals to welfare services so that they
20 have better success in leaving welfare ultimately.
21 Thank you.

22 (Applause.)

23 MS. WATLINGTON: Thank you. Before we go into the
24 other part of the presentation by Ahn Tu, we'll have a
25 five-minute break here.

1 (Recess.)

2 MS. WATLINGTON: We'd like to continue here. This
3 has been very interesting. I'm learning the great work
4 that they're doing here for clients in the Los Angeles
5 area. I'd like to turn it over to Ahn Tu.

6 MS. TU: Thank you, Madam Chair. My name is Ahn
7 Tu. I'm the Program Counsel at the Office of Program
8 Performance at LSC. I'm very honored today to be here to
9 introduce to you a group of people, attorneys from
10 programs in the Los Angeles region. As part of my
11 responsibility at LSC, I work very closely with these
12 programs. And I'm just thrilled that you, the Board of
13 Directors, have the opportunity to hear about all of
14 their good work which I have had the pleasure and the
15 fortune to work much more closely with them.

16 This panel has actually two panels, two
17 presentation. They will be talking to you about the
18 substantive advocacy of the three programs. As you
19 know, as Bruce Iwasaki presented earlier today, housing
20 is a serious -- like most of the country, but even more
21 so, because of the housing costs in the area, it is a
22 very, very serious problem. And to respond to the needs
23 of their clients, the three programs have their
24 experienced, highly trained, highly dedicated staff to
25 address the housing issue.

1 The second panel, in the interest of time I
2 will not -- I will just turn it over to the housing
3 panel, and then after that the second panel will talk to
4 you about the health care issue. And I just want to say
5 one thing that California is very innovative in their
6 approach of delivering legal services to clients.
7 Health care issue, until California really shed the
8 light on it, was not a priority for many legal services
9 program. But with California pioneering in addressing
10 that need, you see that there are more and more programs
11 around the country helping clients with that.

12 So I'm now going to turn over to Dennis Rockway
13 who is the Director of Advocacy and Training at LAFLA
14 who will give you an overview about the crisis in
15 housing in the region.

16 MR. ROCKWAY: Thank you. I have about two thirds
17 of my voice this morning, but I don't have a graph for
18 that particular statistic. But I would like to talk
19 about the housing crisis in California particularly in
20 our communities.

21 It's a crisis fueled by skyrocketing house
22 costs which really affect everyone, including the middle
23 class. For instance, the city of Los Angeles has the
24 lowest rate of home ownership aside from New York of any
25 city in the country. If you were to try to purchase

1 even the most modest single-family house in Los Angeles,
2 you'd have to pay upwards of over \$200,000.

3 Not surprisingly, though, the severest impact
4 from the housing crisis is upon our clients, low- and
5 very low-income people. The bottom line is there simply
6 is not enough decent housing affordable at prices that
7 our clients can afford to pay. Our clients pay grossly
8 high proportions of their rent for housing, generally
9 between 50 and 80 percent.

10 And too often their options keep them living in
11 substandard housing, overcrowded housing, or in the
12 extreme circumstances, no housing at all. The
13 fundamental issue, of course, is that of affordability.
14 And in our region, and that's what we'd like to focus on
15 in Los Angeles County and Orange County, the situation
16 is catastrophic.

17 The next slide we have illustrates a
18 particularly important ratio I would ask you to consider
19 for a moment, and that is the ratio between low-income
20 renters, that is low-income households who rent the
21 low-cost units that are available.

22 You can see that in the heart of Orange County
23 in the most populated urban center there, Anaheim/Santa
24 Ana area, that ratio is 4.6 to 1. That disparity is
25 explained by a large low-wage workforce and an extreme

1 scarcity of affordable units. What's significant about
2 that ratio is that it establishes Orange County with the
3 dubious distinction of having the worst affordable
4 housing shortage in the nation.

5 If we look, though, at the Los Angeles/Long
6 Beach ratio, which is the second worst shortage in the
7 state of California, you can see the enormous gap of
8 over 300 units that are missing. They're simply not
9 there, though there are households who need those units
10 in order to afford housing. Last year just 1,200 new
11 units came on line, affordable units, which were not
12 nearly enough even to keep even and keep that huge
13 figure from getting much worse.

14 The next slide shows us an interesting look, I
15 think, at the impact of rental costs on low-wage
16 workers. And it asks us to consider how many hours in a
17 week someone working at the minimum wage needs to work
18 in order to earn enough to afford a low-end one-bedroom
19 apartment. As you can see in both Orange County and Los
20 Angeles County, someone would have to work between two
21 and three full-time jobs each week just to be able to
22 afford that lower end one-bedroom apartment.

23 Not everyone, though, can deal with the
24 one-bedroom apartment. For instance, a parent with
25 children would need a two-bedroom apartment. And the

1 next slide takes a slightly different perspective and
2 asks us to consider how much money a full-time employee
3 would need to earn per hour in order to afford a lower
4 end two-bedroom apartment. Well, you can see that cost
5 is over \$16 an hour in Los Angeles County and \$22 an
6 hour in Orange County. The minimum wage in California,
7 which is higher than the federal minimum wage, is \$6.75
8 an hour.

9 Please listen to one client's comment.

10 "See, I worked at a nursery for like
11 13 years. Last year I injured my knee at work.
12 When I went back to work, I couldn't do the
13 same job I was doing before, and my knee swelled
14 up so bad that the doctor put me on disability
15 for like a year. Well, now my wife has to
16 work two jobs to support the family. She works
17 as a janitor from 6:00 in the morning until
18 1:00 a.m., and then she has a second job in a
19 factory from 6:00 a.m. to 2:00 p.m. She gets
20 \$6.65 an hour.

21 "Well, we share a two-bedroom apartment
22 with another family so that we can afford the
23 rent which is 850. There are eleven of us
24 with seven children. We have a lot of things
25 wrong with the apartment like there's a leak

1 in the living room ceiling. There's mold,
2 cockroaches. The manager says he'll increase
3 the rent if he does any repairs. So what are
4 we going to do? We live with it.

5 "It's really hard on the children to
6 have to share such a small apartment. It's
7 just difficult for them because of all the
8 noise. There's no place for them to be alone."

9 Economic forces explain most of the
10 affordability crisis. The market produces jobs, and the
11 market produces housing. But the market does not
12 produce jobs that pay enough to enable workers to be
13 able to afford the housing. The great majority of Legal
14 Aid clients live in market rate unsubsidized private
15 housing. Yet government subsidies provide some relief
16 to renters.

17 But the next slide we have points out a
18 significant problem among the subsidized units which is
19 that during the last five years, thousands of subsidized
20 units have disappeared because the subsidies have
21 terminated. That's, as you can see, over 7,000 units in
22 Los Angeles County and over 1,000 units in Orange
23 County. What that means is that all the former
24 residents of those units need to go out into the private
25 market to seek affordable housing, but we know that that

1 housing won't be there.

2 Certainly the most extreme manifestation of the
3 housing crisis is homelessness. Our region is the
4 nation's homeless capital. Large numbers of poor people
5 have no fixed regular residence or they stay in a
6 temporary shelter or they live on the street, in a car,
7 or in an abandon building. Those are the criteria that
8 make up the federal definition of homelessness. On any
9 given night in Los Angeles, between 50- and 85,000
10 homeless people are without -- no place to live.

11 In Orange County the figure is 23,000. That's
12 adults and an increasing number of children. And while
13 the most conspicuous concentration of homeless people is
14 probably in skid row near downtown Los Angeles, you can
15 find conspicuous concentrations of homeless people in
16 Santa Ana and in the San Fernando Valley and in Santa
17 Monica and in Long Beach and in fact all throughout the
18 region.

19 Substandard conditions define most of the
20 housing that our clients live in. About a quarter of a
21 1 million families in L.A. County reside in substandard
22 housing. That's 12 percent of all of the housing units
23 in Los Angeles County. Orange County, 76,000 families
24 reside in substandard housing. That's about 8 percent
25 of the total units in Orange County. And those are

1 families living with conditions like no heat, unsafe
2 electrical wiring, inoperable plumbing systems, and
3 rodent infestation. And in Los Angeles County about
4 40,000 families live in garages.

5 Here's another client's comments.

6 "I live with my husband and our baby
7 in the front half of a garage. There's
8 another family that shares the garage with
9 us, and then there are three more families
10 that all live in the main house. The floor
11 of the garage is lifting up from a tree root
12 and the walls are cracked and there's no
13 insulation. We don't have any heat, and
14 there aren't any windows. In the wintertime
15 we freeze, and in the summer when we open
16 up the garage to get more air, there are
17 just flies everywhere.

18 "Each family has their own refrigerator,
19 and there are constant blackouts because the
20 fuses blow. I have to keep my refrigerator
21 in the garage now so our food doesn't get
22 stolen like it used to when it was kept in
23 the kitchen. We have to share the kitchen
24 and the bathroom with other families. The
25 plumbing is always broken, and the owner

1 won't fix it. We pay \$250 a month just to
2 share the garage, and the owner already
3 told us that our share of the rent's going
4 to go up to 300. We don't have any choice
5 but to stay here because we can't afford to
6 rent a real apartment."

7 Overcrowded housing is also an acute issue in
8 our region. Three quarters of a million households in
9 Los Angeles County, which is a fourth of all the
10 occupied units, are overcrowded; another 150,000 units
11 in Orange County, which is 16 percent of all of those
12 units. So with our very limited resources that our
13 programs are given to work with, you can see we face an
14 overwhelming scale when confronting the region's housing
15 crisis.

16 Our programs work together to share information
17 and to share ideas, and we've all developed a range of
18 strategies for our housing work. Those strategies are
19 generally about individual representation, self-help,
20 collaborative projects, policy advocacy, community
21 education, and affirmative litigation. We have housing
22 advocates with us here this morning from each of our
23 three programs. Each will highlight two of the
24 strategies and share with us how housing advocates use
25 those strategies to do housing work. Thank you.

1 MS. SIMS: Madam Chair, Members of the Committee,
2 my name is Crystal Sims. I'm the Director of Litigation
3 and Training at Legal Aid Society of Orange County.
4 Advising and representing individual clients and
5 assisting them with housing problems is a major focus of
6 all of our programs. Examples of the types of housing
7 issues that we deal with can range from providing
8 assistance on the eviction process, advice on the
9 process, advice on getting security deposits returned,
10 advice on getting repairs done, assistance in preparing
11 pleadings in eviction cases, and also representation in
12 court for tenants who are facing eviction and home
13 owners who are the victims of predatory lending schemes
14 or home improvement scams.

15 Because of very limited resources and a heavy
16 demand for assistance on housing issues, we necessarily
17 have to prioritize the cases in which individual
18 representation will be provided either at court hearings
19 or at administrative hearings.

20 Despite limited resources, however, clients are
21 provided with a range of assistance, and this can
22 include advice and counsel, assistance in preparing
23 pleadings, and assistance in going through the eviction
24 process even if the client is not going to be
25 represented.

1 In evaluating the cases that we are able to
2 take for representation, we focus on those cases where
3 the tenant has a meritorious defense and where the
4 tenant will benefit from representation. Other factors
5 that we take into consideration are whether
6 representation will be of benefit possibly to other
7 tenants or where the case may present an opportunity to
8 educate the court.

9 In eviction cases, for example, we provide
10 representation to the extent that resources are
11 available or the landlord has breached the implied
12 warranty of habitability and has failed to maintain the
13 property in habitable condition. In California in an
14 eviction case a tenant can ask to have the court order
15 that repairs be made in addition to reducing the rent
16 because of substandard conditions. So representation
17 can be of benefit to a tenant in this situation.

18 We provide representation in cases in which the
19 landlord is retaliating against tenants who complained
20 about conditions at the property and then served the
21 tenants with a notice terminating the tenancy.

22 When clients are at risk of losing a housing
23 subsidy such as a Section 8 voucher, representation is
24 provided because the client risks losing a very valuable
25 housing subsidy given the cost of housing in Los Angeles

1 and Orange County, which Mr. Rockway has shown you. In
2 addition, we also provide representation to clients at
3 administrative hearings where they are threatened with
4 losing their housing subsidies.

5 Discrimination is an ongoing problem in
6 housing, particularly for mentally disabled clients.
7 For example, representation could be provided in a
8 subsidized housing conviction case where a landlord
9 failed to make reasonable accommodation for the
10 disability as required by law.

11 We also deal with home ownership issues. We
12 assist home owners who have obtained loans from
13 predatory lenders and risk losing their homes because of
14 the exorbitant interest rates they're forced to pay. We
15 also assist clients who have entered into unlawful home
16 improvement contracts.

17 The reality is that there are not enough
18 attorneys to assist all of the clients who need help
19 even in the most meritorious cases. So each of the
20 programs has developed methods to deal with helping
21 clients to help themselves. For example, in my office
22 we do a weekly landlord/tenant clinic at which we show a
23 video, we give an overview of the eviction process, and
24 we assist clients in preparing their Answers. They're
25 also given scripts to help them present their evidence

1 at trial.

2 But to deal with the pressing need for pro per
3 assistance, the Legal Aid Society of Orange County
4 developed I-CAN which is a kiosk and Internet-based
5 legal services system designed to provide pro per
6 litigants with convenient and effective access to vital
7 legal services, including eviction defense.

8 The eviction defense module, which is one of
9 the approximately nine modules that are now available on
10 I-CAN, is geared toward simple and routine cases. I-CAN
11 users are greeted by a screen video guide who asks
12 simple-to-understand questions and then explains legal
13 terms to court protocols. The kiosk version uses a
14 touch screen and a standard keyboard; the web version
15 requires a mouse and keyboard entry.

16 As the user responds to each question, court
17 pleadings are initiated. By the end of the session
18 properly formatted court pleads are completed, printed,
19 and ready for filing. I-CAN also educates clients on
20 possible defenses and on landlord/tenant law as they're
21 going through the process. In addition to generating
22 the answer, I-CAN also gives information about filing
23 and service, and information on how to prepare for trial
24 and how to present their case. And we have found that
25 clients who use I-CAN generally feel more prepared for

1 court and more familiar with the court process.

2 We are in the process of preparing videos on
3 how to prepare for trial, how to present a case, and how
4 a real trial proceeds. Usage is steadily increasing
5 with this module. It's currently being used in Orange
6 and San Diego County and Sacramento County as well as
7 being available on the web. And it will soon be
8 available in Los Angeles County.

9 And I'd like to show you some of the locations
10 where we actually have kiosks in Orange County where
11 clients can go and get their Answers prepared. In our
12 office in Santa Ana we currently have six kiosks
13 available. The court in Fullerton, which we refer to as
14 north court, in the northern section of the county has a
15 kiosk. The harbor court which is in Newport Beach
16 currently has a kiosk. City hall in Irvine has a kiosk,
17 and there are four kiosks available in the city of
18 Orange at the family law courthouse. And there they
19 have standing room only waiting to use it. They're able
20 to generate family law pleadings there in addition to
21 all of the other modules that are available on I-CAN.

22 MR. McCALPIN: What's the cost of a kiosk?

23 MS. SIMS: It's approximately \$8,000.

24 MR. McCALPIN: Eight?

25 MS. SIMS: Yes. Thank you.

1 MR. SMEGAL: Is there any follow-up data on how
2 successful the clients are in handling their own legal
3 activities in this way?

4 MR. McCALPIN: Bob's going to tell us.

5 MR. COHEN: Yes. About 80 percent of those who
6 start on the system finish their pleadings. And the
7 data from our evaluation -- we've been evaluated by the
8 University of California -- shows that the court can
9 handle pleadings, can handle pro per matters over four
10 times faster. So from the court point of view it's
11 great for freeing up their docket.

12 Clients are very satisfied with the system. We
13 get high marks from them. It's 80 to 90 percent easy to
14 use and useful. So it's a big success. But you have to
15 remember we're competing against no service whatsoever.
16 But to the extent that we can provide a meaningful
17 service that puts someone in a position to state a
18 claim, it's a good first step.

19 MR. SMEGAL: Thank you.

20 MR. McCALPIN: Do they get into contested cases?

21 MS. SIMS: Yes. Absolutely. Especially in the
22 landlord/tenant context, they are responding to a
23 Complaint to evict them. And then they can raise
24 defenses that the property has not been maintained or
25 the landlord has retaliated or other defenses that are

1 available.

2 MR. McCALPIN: I was thinking in the family law
3 cases particularly.

4 MS. SIMS: Family law cases are also contested
5 sometimes too.

6 MR. PALLACK: Good morning. My name is David
7 Pallack. I'm one of the attorneys at Neighborhood Legal
8 Services. A collaboration with government officials and
9 community agencies is another strategy we use in dealing
10 with housing problems. Currently in the city of Pomona
11 we're collaborating with city officials, a local
12 college, a nonprofit housing developer, and local
13 residents to revitalize a blighted residential area in
14 the southern part of the city. Let me just show you
15 where Pomona is. Let's see if I can find it. Pomona's
16 over here on the right-hand side of the map. It's a
17 city of about 150,000.

18 And the area that we're working on is a
19 low-income residential neighborhood. There's about 300
20 rental units. Most of them are fourplexes. It's high
21 crime, drugs, gangs, substandard living conditions,
22 absentee landlords, and some abandoned buildings as
23 well. And our goal here is to help the city and the
24 nonprofit developer purchase and rehabilitate at least
25 40 units and sell them to low-income families. The idea

1 behind that is that if people own their own property,
2 they'll take better care of it and they will invest more
3 into the community. And it will also expand other
4 property owners in the neighborhood.

5 So in addition to working with the city and the
6 nonprofit to purchase and rehabilitate the units, we're
7 working with Cal-Poly Pomona a local college to educate
8 the community on a number of important issues. One is
9 home ownership. We don't want the folks that wind up
10 buying these homes to be victims to predatory lenders
11 once they build up some equity in the homes.

12 Another area is community of services and
13 access to community services. When somebody leaves a
14 mattress in the street, we want the people to know who
15 to call to get rid of it. And a third area is the area
16 of tenants rights. Many of the tenants, people living
17 there, will still be tenants, and we want them to know
18 what their rights are to have livable housing and how to
19 contact government agencies and, of course, the rights
20 to habitable housing.

21 A second strategy we employ is policy advocacy.
22 In the city of Pasadena we're working with the city to
23 provide more affordable housing. Pasadena is a city of
24 about 134,000. It's where the Rose Bowl and Rose Parade
25 are. It's located right up here about the middle of

1 this map.

2 One way to provide affordable housing is to
3 require developers to provide some affordable housing
4 when they develop a new project. This is particularly
5 important in Pasadena because there are very few vacant
6 developable parcels of property left. At the request of
7 the city council, our office went and spoke with the
8 city council and worked with the city planning
9 department to develop an ordinance. And what the result
10 was is that the city adopted an ordinance that requires
11 developers of projects that have ten or more residential
12 units in them, to provide at least 10 percent of those
13 units for low-income families and 5 percent for moderate
14 income families.

15 In the city of Glendale we approach the problem
16 in a slightly different way. And there we worked with
17 the city also to improve the condition of the housing in
18 the existing housing stock. And Glendale is right next
19 to Pasadena, and it's the largest of the three cities.
20 It has a population of about 195,000.

21 One problem with cities that have a low vacancy
22 rate, such as Glendale, is the affordable housing are
23 often of substandard condition and lack certain
24 services, and this particularly affects low-income
25 families. The problem is that tenants who complain

1 about housing conditions are often faced with eviction.

2 Under California law generally a landlord can
3 evict a tenant by giving them a 30-day notice to move,
4 and they don't have to give them any reason. So tenants
5 are often discouraged from reporting housing code
6 violations because they fear eviction. And some tenants
7 that do complain actually do face eviction. So again at
8 a council member's request, our office spoke to the city
9 council, and as a result Glendale City Council enacted
10 an ordinance that requires landlords to have a good
11 reason before they can evict a tenant and it also
12 prohibits them from retaliating against tenants who have
13 complained about their rights to habitable housing. And
14 currently our office is working on a task force with
15 both landlord and tenants advocates to fine tune this
16 new ordinance.

17 MS. FAIRBANKS-WILLIAMS: Question. Do your regular
18 landlords have a black list of people that they have
19 rented to that they don't like, they pass this on to
20 other landlords?

21 MR. PALLACK: There are actually companies that
22 compile that information. They're consumer credit
23 reporting agencies that specialize in tenant
24 information. And they compile lists of all tenants who
25 have been involved in eviction cases and sell that

1 information to prospective landlords.

2 MS. SCHULTZ: Good morning. My name is Barbara
3 Schultz, and I'm an attorney in the housing unit at
4 Legal Aid of Los Angeles. I'm going to talk to you this
5 morning about community education and affirmative
6 litigation.

7 In terms of community education, we have
8 created extensive written materials concerning an array
9 of housing issues that we give to walk-in clients, we
10 mail to call-in clients, and we hand out at our various
11 presentations. Throughout any given year we do well
12 over 100 tenant rights presentations, workshops, and
13 trainings. And we give these to tenants, to
14 community-based organizations, to service providers, to
15 pro bono attorneys, and to city housing inspectors
16 amongst some.

17 The topics we cover include foreclosure and
18 other home ownership areas, eviction defense and trial
19 preparation, how to get repairs done on your home, rent
20 control rights. And we also have a special project I
21 wanted to mention. We have two outreach workers who are
22 dedicated solely to lead poisoning prevention education.
23 And this project is particularly important to some of
24 our affirmative litigation.

25 Presently we're involved in about three types

1 of affirmative litigation. Anti-slum or lead poisoning
2 lawsuits. We have subsidized housing litigation, and a
3 redevelopment lawsuit. And I want to go into a little
4 more detail about the latter, the redevelopment lawsuit.

5 Our local redevelopment agency recently created
6 a new redevelopment area. Let me show you where it is.
7 It covers most of the downtown area, and you can see
8 it's outlined in orange on this map. Roughly speaking
9 those are the boundaries. And we represent an
10 organization called the Los Angeles Coalition to End
11 Hunger and Homelessness and a couple individual
12 plaintiffs challenging this redevelopment plan. And the
13 main focus of our lawsuit is on an area called skid row.
14 And roughly that's the area in blue. You can see about
15 half of it is in this project area.

16 It's about 50 city blocks all told. As I said,
17 about half of that is in this redevelopment area. This
18 is actually a different redevelopment area. Skid row is
19 home to about 11,000 residents. On any given evening
20 about 3- to 4,000 of those residents are sleeping on the
21 streets. The remaining 7- to 8,000 live in a variety of
22 residential hotels that are scattered throughout the
23 skid row area.

24 The primary concern of our clients and the
25 reason we brought this lawsuit is that the plan as

1 written will not benefit those extremely low-income
2 residents of skid row. In fact, we believe that it's
3 actually going to exacerbate not alleviate the blight by
4 causing more homelessness because of the destruction or
5 conversion of some of these residential hotels. There
6 are about 5,000 units in the residential hotels in the
7 project area. And presently there are already several
8 hotels that are being converted into live/work spaces
9 which are not affordable to these residents.

10 One of our main concerns is with a practice
11 known as the 28-day shuffle. This is when the owner of
12 a hotel basically throws the resident out after 28 days
13 just for the night, sometimes just for an hour,
14 sometimes just moves them to another room. And the
15 reason they do this is to avoid creating a tendency
16 which requires a 30-day occupancy.

17 Now, the problem with this in terms of
18 redevelopment is that these residents will very likely
19 not be considered tenants in terms of relocation money
20 if these hotels are redeveloped. And probably an even
21 more important problem is that those units will not be
22 considered permanent units that require replacement
23 housing if those units are demolished or converted.

24 The other major problem we have is with the
25 affordability of the new or the replacement housing.

1 Presently affordable housing is defined as anything up
2 to 110 percent of median income. In L.A. that's over
3 \$41,000 for an individual. At the lowest end, extremely
4 low-income housing is up to 30 percent of median income.
5 To give you a sense of what this means, the average SSI
6 recipient is at about 20 percent median income. A
7 CalWORKS recipient at about 12 percent median income,
8 and a general relief recipient at only about 7 percent
9 median income. So it is --

10 MR. SMEGAL: 7 percent of 41,000?

11 MS. SCHULTZ: No. It's 7 percent of median, 100
12 percent income. So if we've got even extremely
13 affordable housing built up to 30 percent, it's
14 extremely unlikely that these residents are going to be
15 able to afford that affordable housing.

16 So what we hope to achieve and will achieve in
17 this lawsuit is a revised redevelopment plan where all
18 stakeholders, including the low-income residents of skid
19 row, will benefit from the plan. And we think this can
20 be easily achieved through amending the plan. And we
21 think that we need the plan amended to guarantee that
22 some, if not the majority, of the residential hotels
23 will be rehabilitated but maintained in their present
24 use, that relocation benefits will be assured to all
25 displaced persons, even those who are victims to the

1 28-day shuffle, and that the new housing that is built
2 is truly affordable to the residents that so desperately
3 need it. Thank you.

4 MS. WATLINGTON: The HUD is changing now. There
5 are no more Section 8. They're now called -- what used
6 to be Section 8 certificates, they're now all vouchers;
7 right?

8 MS. SCHULTZ: Uh-huh.

9 MS. WATLINGTON: So that's nationally. And how is
10 that affecting the housing as far as helping to assist a
11 low-income person with the thing? In many of these
12 departments that I do, it's working with the Housing
13 Authority, you know, is making it more difficult. They
14 are forcing much more restriction on me now that I have
15 to take from their list only because, you know, there's
16 no vouchers. It's just -- it's no more certificates,
17 just the voucher. How is that affecting the housing
18 here?

19 MS. SCHULTZ: Well, the problem in L.A. -- I'm sure
20 it's the same in Orange County -- is that there are
21 thousands of vouchers being returned to the Housing
22 Authority because they cannot find apartments, they
23 cannot find landlords to accept the vouchers because the
24 market is so hot right now. And as you heard earlier,
25 there's just not enough units out there.

1 MS. WATLINGTON: Thank you.

2 Sorry, Ahn Tu.

3 MS. TU: That's okay.

4 MS. WATLINGTON: Is that all the speakers?

5 MS. TU: The next -- yeah, I think so.

6 MS. MELDEN: Good morning. I thought I would come
7 up front. We're going to do another Power Point.

8 My name is Michele Melden. I'm a managing
9 attorney at Neighborhood Legal Services, and this
10 morning we're going to talk about the collaborative work
11 we do in health care between three programs --
12 Neighborhood Legal Services, Legal Aid Foundation of Los
13 Angeles, and Legal Aid Society of Orange County. I was
14 going to begin by talking about the structure of the
15 work that we do and sort of give you an overview of how
16 we got funded and the resources we have.

17 And then Yolanda Arias and Yolanda Vera who are
18 going to talk a little more in depth on the crisis
19 that's hitting Los Angeles County and the work that we
20 do and to address that. And finally Nancy Rimsha from
21 Legal Aid Society of Orange County who is going to give
22 some in-depth discussion of the health care issues they
23 face and what makes Orange County a little bit
24 different.

25 So first of all, we have the Health Consumer

1 Center of Los Angeles. It's a project of Neighborhood
2 Legal Services, and it's set up to help low-income
3 people address problems with getting health care. And
4 as you know, we have a crisis of the numbers of
5 uninsured growing. And that means that those people
6 either have to get onto a public program like Medi-Cal
7 or Healthy Families. Or if not eligible, and many
8 people are not because they're not linked by the
9 categories that make them eligible, they have to wind
10 their way through a system which we call the safety net
11 in Los Angeles. And we help with the most basic
12 problems -- getting coverage, finding a doctor, getting
13 a service that you need, and overcoming other barriers
14 that people face.

15 The Health Consumer Center of Los Angeles was
16 started through a grant from the California Endowment
17 that funded the whole Health Consumer Alliance which is
18 a consortium of projects located within legal service
19 programs throughout California. While most of the
20 funding comes from the Endowment, we have been
21 successful in leveraging that towards the sustainability
22 and currently have reached about 50 percent from other
23 sources including the county and the state.

24 Neighborhood Legal Services does not serve all
25 of Los Angeles County as you know. The service area is

1 shared with Legal Aid Foundation of Los Angeles and
2 Orange County. But through the partnerships our Health
3 Consumer Center works county wide. It's a seamless
4 system. And our partnerships are with Legal Aid
5 Foundation of Los Angeles. They've dedicated their most
6 expert health care advocates to work on policy issues
7 with us and help us with our case review.

8 We work with Bet Tzedek Legal Services which
9 has expertise in senior and nursing home issues. We
10 work with the Asian Pacific American Legal Center.
11 They've been full partners in helping us do outreach to
12 the API community and to work on policy issues around
13 language access. Mental Health Advocacy Services has
14 dedicated a full-time attorney to working on mental
15 health access issues. And Maternal Child Health Access
16 is an advocacy approached project dedicated to women's
17 and children's health care issues.

18 Our services involved are three-fold. They
19 involve first and foremost or hotline, which I'll go
20 more into depth later. But that really is sort of the
21 base and kernel of all the work we do. We take 25,000
22 calls a year, and we have about 10 counselors who deal
23 with calls on almost a full-time basis that come in
24 through the hotline. We do policy work, and we do
25 community outreach and education.

1 Here are some of the kinds of problems people
2 call about. Wanting to get coverage through Medi-Cal
3 and Healthy Families. Like I said before, not being
4 able to see providers. Complaints about other barriers
5 like language and transportation. We often get calls
6 just because people don't feel they have adequate
7 communication with providers. They don't feel they got
8 the respect they needed. They're not sure about the
9 quality of the care.

10 We have, like I said, 25,000 calls a year.
11 5,000 cases open and close. We have evaluated our data,
12 and we work intensively with families. Everyone who
13 calls basically gets a checkup no matter what the
14 problem is. Many people call just because they have a
15 medical debt they can't pay. But we ask them and we ask
16 about all their family members to see whether they're
17 covered by Medi-Cal or Healthy Families.

18 And if they look like they should be eligible,
19 we encourage them to apply. And we follow up with them
20 three times in three months to see whether they got on
21 to the program. In our analysis of our own data we've
22 estimated that each case touches about three people. So
23 in the 5,000 cases that have been opened and closed, we
24 touched about 15,000 people.

25 One of the advantages of being funded up front

1 through the Foundation is that we were able to invest
2 resources into a pretty and relatively sophisticated
3 database compared to the other data that we collect
4 through the program. And that enables us to sort of
5 analyze what we do a little bit more systematically and
6 figure out where we're going.

7 As you can imagine with the volume of cases
8 that we have, we're able to identify trends and patterns
9 pretty quickly. And so it is a program priority to try
10 to solve the bigger picture because again, even 15,000
11 people compared to the more than 1,000,000 uninsured in
12 Los Angeles County, you need to try to address the
13 bigger picture. We do impact litigation. We recently
14 won a case in the Appellate Court. But our number one
15 priority is getting a place at the table. We're often
16 invited to participate as stakeholders in policy forums.

17 Our current priorities are working on L.A.
18 County. We'll hear more about that shortly. Medi-Cal.
19 Medi-Cal's not only a benefit for our clients, but
20 Medi-Cal leverages state and federal money. And that
21 means that you're bringing money from outside the county
22 into the system and you're stabilizing provider networks
23 that be available to serve the floor. So it's a win-win
24 and it's a big priority for us.

25 And finally the linguistic aspect. You heard

1 about the diversity all morning, and we really take it
2 seriously. In fact, our community outreach and
3 education project was set up to address specific needs
4 of the different communities. That means that when we
5 reach out to these communities, we do it in a targeted
6 way. So, for example, with the Hispanic community, we
7 reach out to them principally through radio and media.
8 For the API community we were advised very early on to
9 try to work person to person with institutions of trust.
10 So we actually outstation counselors who speak the
11 native language and work in agencies outside of our
12 office.

13 For the African American population we work
14 with an agency that sends case workers who are from the
15 community door to door to work with people; so when
16 clients, potential clients, hear about us the first
17 person they hear about us from is somebody who is
18 African American. We are engaging a plan to reach to
19 the Antelope Valley and Lancaster area, which is a
20 remote big rural part northeast Los Angeles. I don't
21 have that pointer, but it's hard to reach people there,
22 and we're targeting them.

23 One of the other advantages of having this
24 database is that we can analyze who's calling and we did
25 a little review of the clients primary language and how

1 we were spread, and we thought it was very informative.
2 We separated out the API from the Khmer, which is
3 Cambodian, because we do have a Cambodian speaker who is
4 outstationed in Long Beach, and we wanted to separate
5 out those numbers. But you can see diversity. And here
6 we have the ethnicity. It pretty much tracks the
7 language diversity. And there we combine the API all
8 together.

9 We also were curious to see how we were doing
10 geographically because that is a big challenge in Los
11 Angeles to make sure that we reach all areas. And we
12 surprised ourselves I think by seeing how pretty much
13 evenly distributed we were throughout the county.

14 The problems that clients present with:
15 Linkage. That basically refers to getting coverage
16 through Medi-Cal, Healthy Families, access are problems
17 with services. You can see the overlap. But it's a big
18 need as presented by the clients, and it's a big
19 priority. We reviewed our own data. Again, this is an
20 independent evaluation, but we did go in to see how many
21 clients for whom we confirmed enrollment. And we were
22 very surprised that we had such a success rate here.

23 Another advantage of having Foundation funding
24 is that they required an independent evaluator to
25 evaluate our effectiveness. One of the things they do

1 is a consumer satisfaction survey. Everybody who calls
2 the line is asked whether they would consent to having
3 somebody call them to do a consumer satisfaction survey.
4 And those who consent get called, and here are some of
5 the results. We were very pleased to see them. Over 90
6 percent reported that they thought it was helpful. And
7 what I thought was most striking, about a fifth of them
8 had contacted another agency first, and 95 percent
9 reported that at their contacting agency they had no
10 further need to contact another agency. Thank you.

11 MS. ARIAS: I'm Yolanda Arias again from the Legal
12 Aid Foundation of Los Angeles. And I'm again pleased to
13 be here to talk with you about the collaboration between
14 Neighborhood Legal Services and Legal Aid Foundation of
15 Los Angeles and other advocacy groups in Los Angeles in
16 the health care area. One of the projects that we are
17 working on right now is a devastating set of cuts that
18 the L.A. County Board of Supervisors wants it make to
19 Los Angeles County's public health system.

20 As you heard earlier today, Los Angeles County
21 has a huge population and covers a very big geographic
22 area. Estimates are that in Los Angeles County there
23 are 2.7 million uninsured residents here, and the 2.7
24 million uninsured residents of Los Angeles County
25 outnumber of entire populations of 18 states in the

1 United States. So that's a huge number of just the
2 uninsured in Los Angeles County. And Los Angeles
3 County's public health system is the only source of
4 medical care for these millions of uninsured
5 individuals.

6 As a result of the huge geographic area of Los
7 Angeles County, you can imagine it's extremely difficult
8 for the poor or those with no other means of
9 transportation to get around to the different facilities
10 being ill, usually with children. So it's very
11 difficult for people to get around.

12 In order to deal with the enormous numbers of
13 uninsured, Los Angeles County had until recently four
14 full-service hospitals, six comprehensive health --

15 MR. McCALPIN: Public hospitals.

16 MS. ARIAS: Public hospitals. Six public
17 comprehensive health centers, 18 public clinics, and two
18 residential rehabilitation centers. L.A. County's
19 public health system cares for 800,000 people annually,
20 and most of these individuals have nowhere else to go.
21 Unfortunately Los Angeles County's health department is
22 facing an \$800,000,000 deficit. And help from the state
23 is unlikely or the federal government. The state itself
24 is dealing with a \$15,000,000,000 deficit.

25 As a way to deal with this massive deficit,

1 L.A. County government is proposing massive cuts to its
2 existing public health system. It plans to reduce
3 patient visits by 29 percent and plans to trim staff by
4 22 percent. L.A. County has already closed 15 community
5 clinics. That's a loss of 350,000 patient visits, and
6 that's a potential loss of 4,600 jobs.

7 Another critical service that impacts the
8 entire population of Los Angeles County is the risk of
9 reduction in L.A. County's emergency room and trauma
10 centers. L.A. County's public health system is the
11 backbone of the entire region's emergency room and
12 trauma center network. L.A. County's public emergency
13 room and trauma centers provide care for over 50 percent
14 of all car accident victims and gunshot wound victims.

15 This means that not just the poor are affected
16 by these cuts, but anybody in Los Angeles County who may
17 be involved in a car accident. There was a recent
18 example of how important our trauma center was. It
19 occurred on Sunday. There was a 200-car pileup on the
20 Long Beach Freeway, and many of those injured
21 individuals were taken to public trauma centers
22 emergency rooms.

23 The County does plan to cut emergency room and
24 trauma centers at two of L.A.'s public facilities,
25 leaving only two public facilities to serve all 9.9

1 million residents of Los Angeles County. Experts have
2 told us that closing these major hospitals could
3 overwhelm L.A.'s entire medical system. E.R. rooms, as
4 you can imagine, will be snarled, and trauma centers
5 will collapse.

6 There is some hope on the horizon regarding the
7 emergency room and trauma centers. Recently voters by
8 75 percent passed a measure to provide funding to save
9 the emergency room and trauma centers. We'll just have
10 to see how that works out.

11 There are dire public health consequences to
12 the reductions that the County is planning to make also.
13 The County plans to cut spending on public health by 10
14 percent, and as you see the reductions will include
15 childhood immunizations, screenings for sexually
16 transmitted diseases, and visits for communicable
17 diseases like tuberculosis and hepatitis.

18 This impacts the entire Los Angeles County.
19 Many of the uninsured are working and many are working
20 in service industry jobs. And I think everyone would
21 agree that we would want the person working in our
22 favorite restaurant to have access to screening and
23 treatment for tuberculosis and hepatitis.

24 Another closure that the County is planning to
25 make is Roybal Comprehensive Health Center which is East

1 Los Angeles that serves over 35,000 patients. There are
2 six comprehensive health centers in Los Angeles County,
3 and these are the health centers where most of the
4 uninsured go for their primary care, their preventative
5 care, prenatal care and care for chronic conditions like
6 diabetes and high blood pressure. And when the federal
7 government bailed out Los Angeles County's health system
8 in the last 10 years, the goal was to increase the
9 number of outpatient visits.

10 With the closure of the 15 clinics and the
11 Comprehensive Health Center, the County will be left
12 with only seven health clinics that will offer primary
13 care. The remaining clinics do not have the capacity to
14 serve the huge number of displaced patients. And
15 doctors warn that the closures will force patients to
16 delay service, will delay treatment, and that will cause
17 their conditions to deteriorate, and then they'll have
18 to seek more expensive emergency room care.

19 The County also plans to reduce beds and close
20 outpatient clinics at L.A.C.U.S.C. Medical Center which
21 is the County's flagship hospital. Doctors tell us that
22 for every inpatient bed that is lost, that's an E.R.
23 space that's not available. Because once people are in
24 the E.R., they may have to be admitted into an inpatient
25 bed. And even though the emergency rooms don't have the

1 capacity to take these patients in, they're required to
2 until these patients are stabilized.

3 So this results in patients in hallways on
4 gurneys, heart attack victims who are in a noisy crowded
5 environment. And they can be in these hallways on
6 gurneys for up to four days. Doctors also tell us that
7 in the waiting rooms patients are dying because they
8 have less outright symptoms or symptoms that are more
9 severe. So they are treated last. And unfortunately
10 their conditions are serious, and they end up dying
11 because of the delay in service.

12 One more area where the county plans to cut is
13 in the rehabilitative hospitals that we have. Rancho
14 Los Amigos National Rehabilitation Center is a
15 nationally renowned rehabilitation center. It was
16 ranked ninth in the U.S. by "U.S. World and News Report"
17 as one of the nation's best rehabilitation hospitals.
18 Rancho treats about 42,000 people annually, uninsured
19 and insured alike. People who need to go there because
20 they've experienced brain injuries, stroke, or have
21 spinal cord injuries.

22 As you can see, these massive cuts are going to
23 have a devastating impact on Los Angeles on the Los
24 Angeles community. Los Angeles County officials already
25 acknowledge that the County system is overburdened. The

1 remaining County facilities will not be able to absorb
2 the huge number of displaced patients. And the impact
3 of these closures will affect not only the uninsured,
4 but everyone who lives in Los Angeles County. Private
5 hospitals will be overrun with uninsured patients who
6 have not been able to get the care they need and so
7 they're flood the emergency rooms.

8 Our clients look to legal services to help
9 maintain access to public health services, and Yolanda
10 Vera will talk now about some of the strategies that
11 we've developed to try and confront that problem.

12 MS. VERA: Good morning. My name is Yolanda Vera,
13 and I'm a staff attorney at Neighborhood Legal Services.
14 And I want to talk a little bit about some of the
15 strategies we develop with our partners at Legal Aid
16 Foundation of Los Angeles and some of the other
17 nonprofit legal organizations that we work with to
18 combat this massive, massive problem.

19 First, we realized that it was going to take
20 every bit of our resources, including resources that we
21 haven't traditionally used, and that we needed to
22 develop partnerships with some of the private community
23 stakeholders which are all part of the County's health
24 care system.

25 So we were invited to participate in numerous

1 coalitions to start hearing all the different
2 stakeholders' perspectives on crisis -- an example is
3 the Health and Mental Health Coalition, which is a
4 coalition that represents the health care industry, the
5 hospitals, the emergency rooms, the clinics, labor, as
6 well as consumer advocates -- and getting together and
7 sharing information with them on a regular basis.

8 Secondly, we've been invited to participate in
9 numerous advisory committees that the County has. The
10 County has developed a policy advisory group to advise
11 them on what they should be doing in terms of strategies
12 to seek long-term funding. They have a financial
13 advisory group, and they also have another group to
14 focus on what can they do with regards to the benefits
15 and what type of benefits should they provide uninsured
16 low-income county residents.

17 Finally, we've been getting our information
18 from the most important source of all our clients. Our
19 hotline receives approximately 25,000 calls a year.
20 Many of those calls are from persons who rely on the
21 clinics that are being cut. Another project we have
22 which is an amazing source of information is a project
23 that Neighborhood Legal Services has. It's been funded
24 by the California Endowment called the Vida Project. In
25 the Vida Project is a focused attempt to work with 1,200

1 uninsured families in the San Fernando Valley --
2 although we're going to be expanding into the San
3 Gabriel Valley -- to look really carefully with them how
4 we can develop their health access, how we can educate
5 them, and how we can develop leadership.

6 In the Vida, families in particular have been
7 our main source of what actually is happening on the
8 ground. What are they seeing? What are their waits?
9 What are their experiences on trying to get to their
10 doctor's appointments? So using all these different
11 sources of information, we decided to come up with --
12 well, this is our strategy for next steps.

13 The first step that we did was we realize that
14 the County on its own was making no effort to measure
15 what the consequences of these cuts were going to be on
16 health care in the community. The County has a process.
17 They're called Beilenson hearings. And all they are
18 really are before the County can make cuts in health
19 care services, they have to have a public hearing where
20 they have and invite testimony, for people to come
21 forward and say what the consequences would be.

22 So in partnership with Legal Aid Foundation of
23 Los Angeles, ACLU, among some other nonprofit groups, we
24 developed a task force team to start developing and
25 gathering that information to present it to the Board of

1 Supervisors.

2 We collected nine volumes of testimony, of
3 reports, of stories, approximately 200 declarations,
4 everything from declarations from emergency room doctors
5 and trauma care doctors at the facilities that could
6 talk about what the consequences would be both at their
7 facility and County wide if there were closures; experts
8 in chronic diseases -- diabetes, high blood pressure,
9 hypertension -- talk about what the medical consequences
10 are when there's delays in treatment. We had experts as
11 well who talked to transportation hurdles.

12 One of the facilities that's scheduled for
13 closure is not even on this map. It's above, high
14 desert. And high desert, as Michele was mentioning
15 earlier, is a very, very isolated community by hours.
16 By public bus it takes two hours, if that facility
17 closes, to get to the next closest hospital. And the
18 buses stop running at 5:00 o'clock. So we gathered
19 testimony from transportation experts on that as well as
20 using some of the reports that our local county
21 department developed and gathered. We presented that to
22 the Board of Supervisor.

23 Among other things we're doing is we're
24 starting to work on larger policy perspective in
25 partnership with some of the partners I mentioned

1 earlier from the health care industry. Examples of
2 which, we've been invited to work with the county and
3 state legislators on a potential fix that would look at
4 is there something we could do about the county
5 employees where we create an option where the county
6 employees could buy into the county health care system
7 and therefore becoming more a stakeholder because that's
8 where they obtain their care as well. And the county
9 could get a savings because rather than spending the
10 money on health insurance, they'd be investing it back
11 into their own system.

12 We've also been invited to look at options on
13 ways that we could draw down unspent federal dollars.
14 California tragically has approximately \$700,000,000 of
15 unspent federal moneys that were meant for health
16 insurance for children. Is there a way, if the money's
17 going to go unspent, that we could tap into those funds
18 to use them for uninsured families and for childless
19 workers within the county.

20 And we've also been looking at options which
21 would include drawing down other federal and state
22 moneys, including we've been invited to work with the
23 county on coming up with proposals on how can we
24 simplify what the rules are to access state health care
25 benefits so that when a patient presents themselves at a

1 county facility, it's easier for that front-line worker
2 to figure out, you know, I think Yolanda might be
3 eligible for this benefit or that benefit. So
4 brainstorming with the county on that.

5 And then lastly we've, of course, been looking
6 at potential on litigation. Although I think we'd all
7 be the first to say that litigation is the worst, worst
8 maker of health care policy. But if the lines are drawn
9 and we can't reach solutions, then unfortunately that
10 will be our last option. So Nancy.

11 MS. RIMSHA: Good morning. I'm the last but
12 hopefully not least of this committee. I'm Nancy Rimsha
13 the Directing Attorney of the Health Consumer Action
14 Center at the Legal Aid Society of Orange County. We
15 are a member of the Statewide Health Consumer Alliance
16 that Michele Melden mentioned. And a lot of what she
17 said about the type of services that we provide are very
18 similar to what Neighborhood Legal Services is doing in
19 this area. Our funding is from the California Endowment
20 and also state Equal Access to Justice funds.

21 These are the programs that we mostly assist
22 people with. We also do assist some people with private
23 health insurance. I wanted to point out that 38 percent
24 of our Health Consumer Action Center clients are 60
25 years old or over. So we're helping a lot of seniors.

1 And while a lot of them are on Medicare, a lot of them
2 are also relying on Medi-Cal, which is California's
3 version of Medicaid, to pay for prescriptions and other
4 things that Medicare doesn't cover. Healthy Families is
5 California's version of the Children's Health Insurance
6 program for families over the Medi-Cal income limits.

7 The services we offer as well are telephone
8 hotline which is the way that people enter our program.
9 Informal advocacy. A lot of health problems can be
10 solved by coordinating and making the system work. And
11 one of the things to remember in health advocacy is that
12 when we assist a client to obtain health coverage or
13 help them to use their health coverage better, we're
14 also getting a doctor or hospital paid most of the time.
15 So we're really helping to keep that health system
16 afloat with this type of work.

17 We also do in-depth representation,
18 administrative hearings, even go to court to try to
19 assist people. And I'm going to have some examples of
20 some clients we've assisted. We do a lot of community
21 outreach and education. We are at the table also in
22 every one of these health programs.

23 Very often, truly avoiding litigation is the
24 way to make better health policy. And go ahead and go
25 to the slide. We're involved in memberships of boards

1 of directors of community organizations, committees,
2 community agencies that call us in. And what we really
3 bring to that is expertise in health program
4 regulations. Very often people don't really understand
5 how these programs work, and we're the ones who also
6 have the case examples. And people say, well, this is
7 how the program works. And you say yes, but these are
8 the people we've seen and this is how we were able to
9 solve their problems.

10 We're doing about 500 cases a year actually.
11 It's a little over that. It's growing all the time.
12 People traditionally didn't think of a legal aid program
13 as assisting with health advocacy, but it's becoming
14 more and more a part of our work as the health crisis in
15 the United States continues to increase.

16 About 69 percent of our cases are counseling
17 advice. We're able to help people to help themselves
18 and about 23 percent higher level of service. Our
19 county population, as pointed out earlier, is getting
20 pretty close to 3,000,000. And we think of Orange
21 County as being the affluent county, but almost 12
22 percent of our adults are uninsured in Orange County.
23 That's almost 250,000 people. And 9 percent of our
24 children are uninsured. And that's almost 70,000
25 people.

1 So I'm going to go into some of the issues that
2 we deal with. In Medicare the two big issues that we
3 see are the prescription issue. And again, people are
4 then using Medi-Cal or the Medi-gap policies to pay for
5 prescriptions. And HMO problems, managed care, because
6 most of the people -- well, everybody on Medicare is
7 either disabled or over 65. And of course managed care
8 is difficult when you need a lot of health services.
9 The system is set up to provide less health services
10 generally.

11 This is an example of a Medicare HMO problem
12 that we were able to help people solve. This is Mr. and
13 Mrs. Covarubias who are Spanish-speaking senior citizens
14 who were in a Medicare HMO, but found that they were not
15 able to meet with a physician. They most of the time
16 only got to see a nurse practitioner, and they became
17 dissatisfied; so they tried to disenroll to get back
18 into regular Medicare.

19 They both needed cataract surgery. And
20 thinking that they were disenrolled from the health
21 plan, they each had one eye done by a physician who was
22 not an HMO provider. When the physician tried to bill
23 Medicare, they found out they were still in the Medicare
24 HMO. They had not successfully disenrolled so that
25 provider could not be paid. They were sued for \$8,000.

1 And that was just one of the providers. There were
2 probably anesthesiologists and pathologists and some
3 other people that also were not paid. And the problem
4 too was that the HMO is now bankrupt. So there was no
5 one even to talk to as far as trying to get out of the
6 HMO.

7 What we did for them is we answered the
8 Complaint. Because there was no one to talk to anymore
9 at the HMO, we made contact with the Medicare regional
10 office. We presented evidence of the family's many,
11 many efforts to disenroll from that HMO. We were able
12 to obtain HMO disenrollment 19 months -- this surgery
13 was in February of 2001. And we've been able to get
14 them disenrolled so that the physicians and all the
15 providers now can be paid by Medicare as they should
16 have been. And Mr. and Mrs. Covarubias are now not

17 afraid anymore to have the cataracts removed from their
18 other eye. So a year and a half later hopefully they
19 will be doing that.

20 Very often people do not seek health care
21 because of the bills they have experienced, and this is
22 sometimes even people with coverage that experience
23 medical bills and then are afraid to seek further
24 coverage and end up in the emergency rooms anyway when
25 they become very ill.

1 Medi-Cal is another area that we assist people
2 in. In Orange County we have a county organized health
3 system. This means that both the family group and the
4 disabled and elderly recipients of Medicaid are in
5 managed health care. So they need referrals for every
6 treatment, every specialist. They need approvals for
7 most of the medications, and so this keeps us very busy
8 as well.

9 Medi-Cal, there's about 250,000 -- actually I
10 heard a number yesterday. It's more like 275,000 now
11 Medi-Cal recipients in Orange County, and 190,000 of
12 those are enrolled in health networks. 55,000 of those
13 are Medicare and Medi-Cal, so mostly access Medi-Cal for
14 their prescriptions. And so we have a lot of issues
15 around prescription coverage.

16 The county organized -- and I want to say that
17 Cal-Optima, our local county organized health system, is
18 a very receptive agency who we deal with. We are on
19 committees there trying to make the system work better
20 for people because Medi-Cal is taking big reductions and
21 cuts due to our state budget crises potentially. And so
22 we're working with the county organized health system
23 all the time on trying to improve delivery of health
24 services.

25 The dental services in Medi-Cal are not part of

1 the Cal-Optima coverage, but are still handled by the
2 state of California. And dental services in California
3 have been quite a crises area, a lot of problems in all
4 of the Health Consumer Alliance programs. And in fact
5 there's just been a paper published using the data from
6 our program, from Neighborhood Legal Services, and the
7 other Health Consumer Alliance projects to describe the
8 types of dental issues that people have in Medi-Cal.

9 But this is just an example. Michael Plata is
10 another one of our clients, a young man who was disabled
11 due to being born with spina bifida. He had deformities
12 in his jaw and was unable to chew properly, couldn't eat
13 properly, and really needed braces even at this late
14 age.

15 However, California Medi-Cal excludes
16 orthodontics for anyone over 21 without any regard to
17 whether they have a medical need for orthodontics. We
18 helped Michael to request a state fair hearing, and he
19 obtained evidence from his physician as to the medical
20 necessity for him to have orthodontics.

21 The state approved the braces for him, but the
22 state has a history in quite a few areas of approving
23 things when a person has an advocate. But if you don't
24 have an advocate, they don't change the regulation. The
25 regulation still says no orthodontics or no partial

1 dentures even if you have the medical necessity.

2 So we're hoping that our collaborative efforts
3 with the other Health Consumer Alliance projects and,
4 for example, the dental paper that's just been
5 published, will bring light to some of these problems
6 that people have. And it's a way we work together to
7 improve services.

8 MS. MERCADO: Does that include elderly people who
9 may need dentures and stuff for chewing and all?

10 MS. RIMSHA: Well, that's an interesting area.
11 We've had several cases with partial dentures. The
12 state will approve full dentures, but they won't approve
13 a partial unless you have an opposing full denture. So
14 but we have had several cases -- yeah. And you can
15 have, like, you know, five teeth up here, and they'll
16 say no, you better pull them all out rather than giving
17 a partial.

18 So clearly if you -- and if we are able to show
19 medical need, in the old days I used to have to go to
20 court to get a partial denture. Now I've actually had
21 it approved by the state. So maybe things are improving
22 slightly. But the publicity that, for example, the
23 position paper that's being written on dental services,
24 this kind of publicity is the type of thing that, you
25 know, really brings people's attention to the problem,

1 and that's what we like to see happen.

2 The other program that we work with quite a bit
3 is Healthy Families. And this is a new program, only
4 been around for a couple years. I'm just about done.
5 I'm sorry. There's 69,000 uninsured children in Orange
6 County. Probably most of them are eligible for health
7 programs. So why are they not on the health programs?

8 There's a lot of community organizations out
9 there helping people apply for the Healthy Families
10 programs. This is not done at the welfare office.
11 Medi-Cal you don't apply anymore at welfare office.
12 Community organizations do the application processing.

13 However, many of our immigrant families, even
14 with citizen children, are afraid to apply for these
15 programs because they believe it will hurt their
16 immigration case. So we've been called in to
17 collaborate with some of these other organizations to do
18 community education on the fact that, yes, you can
19 insure your children. It will not hurt your immigration
20 case. And most of the children have been born here.

21 We also have problems in Orange County because
22 we have no county hospital. We have 18 private
23 community clinics only serving about 18,000 -- actually
24 they do about 24,000 visits a year, but we have 249,000
25 uninsured people in Orange County. So we do a lot of

1 work also with the county health program, but we're
2 rather unique in that we don't have a county hospital.

3 We do a lot outreach activities like everyone,
4 and actually one of the things I think that's really
5 important is that we've been going out to the providers.
6 I've been out to almost every hospital in Orange County
7 in the last year too letting them know that we serve
8 these people whose bills otherwise go unpaid. And in
9 this way we're a real partner with the providers.

10 The other thing that we do, as you may know
11 already with I-CAN, Orange County is very active in
12 community education in terms of video production, and
13 we've done health education videos, lead paint
14 poisoning, on car seat safety for infants. Jeff Isbell
15 produced these. And also gestational diabetes in
16 English and Spanish. We also did a video in conjunction
17 with the other Health Consumer Alliance projects,
18 especially Neighborhood Legal Services, to educate the
19 community on the fact that you can insure your children
20 and not have to worry about your immigration case, your
21 legalization case, you know, being affected by that.
22 Many people are legal permanent residents and could be
23 citizens. They still are afraid to enroll their
24 children. So this is to educate the public on that.

25 We're just very proud of the appreciation that

1 we receive from the community for the services that we
2 do, and we really do feel like we're part of keeping the
3 health system afloat. Thank you.

4 (Applause.)

5 MS. TU: Thank you very much, Madam Chair, Members
6 of the Committee. Thank you very much program staff.
7 I'm very proud to have this party to present them to
8 you, and they have been wonderful, and they worked very
9 hard and I'm very glad for your attention. Thank you.

10 MS. WATLINGTON: This is the end of our -- what's
11 on your agenda here?

12 MS. MERCADO: Considering any other business?

13 MS. WATLINGTON: They'll get a chance to consider
14 and act on other business. Public comments. And also
15 if there are no other, I need a motion.

16 MS. FAIRBANKS-WILLIAMS: Are there any public
17 comments from out there?

18 MS. WATLINGTON: Well, everyone's looking. I think
19 everybody's overwhelmed with all the information they
20 received. Got to digest it first.

21 MR. EAKELEY: Well, I move we adjourn, then.

22 MS. WATLINGTON: Second.

23 MR. McCALPIN: Second.

24 MS. WATLINGTON: It's been moved and seconded. The
25 meeting is adjourned.

