

Health Policy Brief

March 2020

Health and Social Service Implications of a Census Undercount in Los Angeles

Steven P. Wallace, Angubeen Khan, Homero E. del Pino

SUMMARY: The U.S. census is the constitutionally required count of every person living in the United States every 10 years, conducted by the U.S. Census Bureau. Experts have documented that Latinos are among the most likely to be undercounted. The count is used to draw legislative boundaries and to distribute billions of public dollars at the national, state, and local levels. This brief provides findings from a survey of 100 of the key stakeholders and service providers in Los Angeles County (LAC) most likely to be impacted by an undercount, and it also provides estimates of the funding that the county risks losing for health care and healthrelated services if there is an undercount in

the upcoming census. We found that 89% of 37 community-based organizations and 75% of 16 government agencies and health systems are concerned about an undercount and are, or will be, conducting census outreach to promote an accurate count. Across all programs in the county, we estimate that LAC could lose anywhere from \$117 million to \$586 million annually in federal funding if Latinos are undercounted by 2% to 10% percent, or nearly half a million individuals, in the upcoming census. This loss of funds would impact services received by all populations. These data document the importance of assuring that everyone is counted by the census.

The increased climate of fear will make many Latinos hesitant to participate in the census.

alifornia has a population of nearly 40 million, with 26% residing in Los Angeles County (LAC). Latinos, who are at risk of being undercounted in the upcoming census, make up nearly half (46%) of the county's population. The official U.S. Census Bureau report on past undercounts found an undercount of all Latinos nationally in the 1990, 2000, and 2010 census counts of 5%, 0.7%, and 1.5%, respectively. Independent researchers estimate that, based on national trends, Latino individuals may be undercounted anywhere from 2% to 3.6% in the 2020 census in California, statewide.

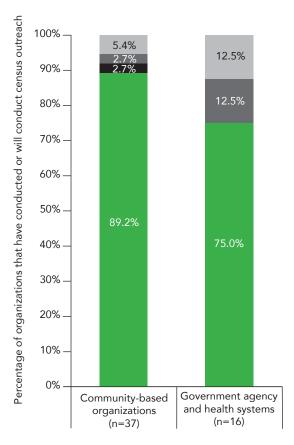
In 2018, the Trump administration proposed adding a citizenship question to the census (a proposal that was blocked by the U.S. Supreme Court in June 2019). Survey experts projected

that the citizenship question could have led to an additional 5.8% reduction in the count of Latinos nationally,⁴ and as much as a 50% reduction in some California congressional districts.⁵ Mexican immigrants were found to be the most sensitive to the question. Although the question is not included in the census for 2020, researchers from the U.S. Census Bureau still anticipate that the increased climate of fear will make many Latinos hesitant to participate in the census.⁴ Anxieties regarding the recent Supreme Court decision to uphold the Trump administration's expansions of "public charge"* criteria in applying for permanent residency and other

^{*}The designation of being at high risk of becoming a "public charge" based on the use of safety net programs can be used to deny potential immigrants their applications for legal residency.

Exhibit 1

Organizations Conducting Census Outreach and Concern About Inaccurate Census



- Have not conducted or will not conduct outreach; not concerned about impact of an inaccurate census
- Have not conducted or will not conduct outreach; concerned about impact of an inaccurate census
- Have conducted or will conduct outreach; not concerned about impact of an inaccurate census
- Have conducted or will conduct outreach; concerned about impact of an inaccurate census

punitive policy changes and rhetoric about immigrants have also fueled fears among Latinos about participating in the census.⁴

Based on estimates of the Latino undercount in past census-takings, the statewide projections of Latino undercount across California for 2020, and the potential residual impact of the addition of a citizenship question in the 2020 census, this brief examines the effects that a 2%, 5%, and 10% undercount of Latino immigrants and U.S.-born Latinos would have on federal funding for LAC. All calculations are reported in the Appendix (https://healthpolicy.ucla.edu/publications/Documents/PDF/2020/Latino-census-appendix-mar2020.pdf).

In 2017, California received about \$172 billion in federal funding that relied at least in part on census data.5 Federal funds reach LAC residents through county programs⁶ as well as through programs at other governmental levels. Widely used programs that use census-driven funds include the Supplemental Nutrition Assistance Program (SNAP, formerly called food stamps), Section 8 housing choice vouchers, and Federally Qualified Community Health Centers. Furthermore, a census undercount of Latinos would especially impact areas like LAC, which has a quarter of the total California population. About one-third of the total county population are low income (<200% of the FPL), about two-fifths (41.9%) are immigrants, and almost half are Latino. These groups rely heavily on the above programs, and they also are the most likely to be deterred from responding to the census.

Concerns of an inaccurate census are common among community organizations, government agencies, and health systems

We surveyed a convenience sample of 100 LAC organizations providing services for which census data determine some or all of the funding. The organizations in our sample address a spectrum of health and social issues, including housing, senior health, child and family health, domestic violence, food security, and immigrant rights. More than half of the organizations serve immigrants, children, and/or older adults. Almost all serve low-income individuals and families. The programs for which all or part of the funding is determined by census data whether directly or indirectly (i.e., censusdriven programs)—commonly cover health and health care, older adult services, food insecurity services, and programs for juvenile justice and crime prevention.

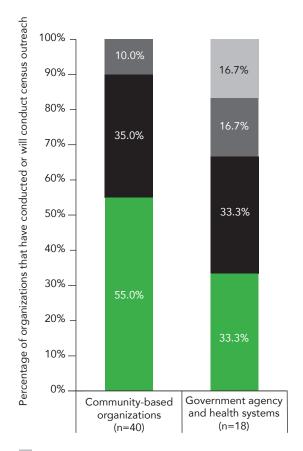
Since our survey was not designed to be representative of all LAC organizations, we cannot say that our findings can be generalized to the universe of local organizations. But the findings do illustrate likely trends among different types of

In 2017,
California
received about
\$172 billion in
federal funding
that relied at
least in part on
census data.

organizations. For example, among this diverse group of service and advocacy organizations, more than half have considered how an inaccurate census would impact their clients (59%, n=54), and slightly less than half have considered the impact on funding for their organization (46%, n=42) or the impact on other providers in their area (48%, n=44). Community-based organizations, which often depend on census-driven funding for many of their programs, are more likely than our responding government agencies and health systems to have considered the impact of a census undercount and to be engaged in outreach. (Exhibit 1). Nearly 90% (n=33) of community-based organizations that are concerned about the upcoming census have conducted or plan to conduct outreach in their community to increase census participation. In comparison, 75% (n=12) of government agencies and health systems that expressed concern over the upcoming census have conducted or plan to conduct census outreach.

Organizations with a large proportion of clients who are Latino reported higher levels of actions or plans for census outreach (Exhibit 2). Among community-based organizations, over half (55%) serve mostly or only Latinos and have conducted or will conduct census outreach activities. Another 10% serve mostly or only Latinos and do not plan to conduct outreach. About onethird (35%) of our respondents serve some or no Latinos but do plan to conduct census outreach. Among government agencies and health systems, one-third serve mostly or only Latinos and plan census outreach, and another third have lower proportions of Latinos and also plan census outreach. The same percentage of respondents (16.7%) have not conducted or do not plan to conduct census outreach and serve mostly or only Latinos, or serve few or no Latinos. Having a growing number of Latino clients served by either community-based organizations or by government agencies and health systems did not by itself appear to drive an increase

Organizations Conducting Census Outreach and Proportion of Latino Clients Served



- Have not conducted and will not conduct outreach; serve some or no Latinos
- Have not conducted and will not conduct outreach; serve mostly or only Latinos
- Have conducted or will conduct outreach; serve some or no Latinos
- Have conducted or will conduct outreach; serve mostly or only Latinos

in conducting or planning to conduct census outreach. One survey respondent described their approach:

We say, you're here in this center because it was [federally] funded and it is supposed to target the lowest-income households in the city of L.A. Without your participation [in the census], we will have fewer of these centers in the city to support families in the way we're supporting you.

Concerns of
an inaccurate
census are
common among
community
organizations,
government
agencies, and
health systems.

Exhibit 2

Exhibit 3 Projected Impact of a 2%, 5%, and 10% Census Undercount of Latinos on Funding and Services in Los Angeles County

Program	Total federal funding for California	Los Angeles County							
		Federal funding	Total unit service delivered	% of service used by Latinos	Latinos using service and associated federal funding	Cost per unit per year	Service/funding lost due to undercount		
							2%	5%	10%
Total census-driven funding	\$49 billion	\$12.7 billion ^a	10.12 million ^b	46%	4.7 million residents	\$1,259/ resident	93,104 residents	232,760 residents	465,520 residents
					\$5.9 billion		\$117.2 million	\$293 million	\$586.1 million
SNAP benefits for low-income households		\$1.9 billion	296,000 households	53%		\$6,530/ household	3,137 households	7,844 households	15,688 households
							\$20.5 million	\$51.2 million	\$102.4 million
Early Head Start Home visitations for children < 3		\$30 million	3,452 families	75%	2,589 families	\$8,690/ family	52 families	129 families	259 families
					\$22.5 million		\$450,000	\$1.1 million	\$2.2 million
Home-delivered meals for seniors (60+) & disabled adults		\$7.85 million	26,000 clients	30%⁴	7,800 clients	\$7.85/meal ^d	156 clients	390 clients	780 clients
			1 million meals		300,000 meals		6,000 meals	15,000 meals	30,000 meals
					\$2.4 million		\$47,100	\$117,800	\$235,000
Section 8 housing vouchers		\$585 million ^e	58,179 households	25%	14,545 households	\$10,060/ household	291 households	727 households	1,454 households
					\$146.3 million		\$2.9 million	\$7.3 million	\$14.6 million
Free & reduced-price meals	\$2.6 billion	\$676 million ^a	1,034,525 students	53% ^f	552,000 students	\$653/student	10,966 students	27,415 students	54,830 students
					\$358 million		\$7.2 million	\$17.9 million	\$35.8 million
HRSA Health Centers	4.9 million patients	\$166.4 million ^a	1.3 million patients ^a	61%	789,828 patients	- \$129/patient	15,797 patients	39,491 patients	78,983 patients
	\$640 million				\$101.8 million		\$1.9 million	\$5.1 million	\$10.2 million

Notes:

- a. Based on estimate that 26% of California's population is in LAC. $^{\mbox{\tiny 1}}$
- b. LAC total population¹
- c. Based on review of reports of home-delivered meals in the state and county, we use the estimate that 30% of home-delivered meal recipients are Latino.
- d. Cost to prepare and deliver one hot meal to client's home. 15
- e. Of the 622,298,626 in funding for Section 8 housing vouchers, 94% is from grants received through HUD. 17
- f. Fifty-seven percent of Latino students in LAC are enrolled in free or reduced-price meals schools (out of a total of 969,000 Latino students),¹⁹ making up about 53.4% of all students who received free or reduced-price meals in LAC.

A census undercount would impact funding for services in Los Angeles County

In fiscal year 2017, California received about \$172 billion in federal funding through 316 different census-driven federal programs.⁵ Medicaid funding for California is unlikely to be impacted by an undercount, and the implications for Medicare reimbursements are uncertain, leaving \$49 billion in funding that is likely to be affected. Federal programs use census data in funding formulas and allocations based on data that include

population counts, calculated poverty rates, median household incomes, the percentage of the population age 65 or older, the percentage that is rural, and the percentage with a bachelor's degree.⁵

Given that \$49 billion is likely to be impacted by an undercount at the state level, and that a quarter of the population in California resides in LAC, we estimated LAC received about \$12.7 billion in census-driven federal funding. This amount of funding exceeds twice the individual state budgets of Alaska, North Dakota, South Dakota, Vermont, and Wyoming. Based on the population estimates and the estimated proportion of census-driven federal funding designated for the county, LAC was estimated to receive about \$1,260 in census-driven funding per person. Therefore, a 2% to 10% undercount of Latinos in the upcoming census is estimated to result in an undercount of anywhere from 93,000 to 466,000 individuals and a loss of \$117 million to \$586 million in federal funding, impacting a wide range of health and social service programs serving all LAC residents. One community-based health care provider summed up the issue:

Any issues that our patients are facing, the census data touches: We're talking about housing, food insecurity, transportation, quality education, quality child care, and affordable child care. All of this impacts our communities, and it impacts our health and the health and safety of our communities. We want our communities to know that it's 10 years—that's a long time to wait to be counted, and you deserve to be counted.

Examples of the types of potentially impacted programs follow.

Supplemental Nutrition Assistance Program (SNAP, formerly Food Stamps)

SNAP provides nutrition benefits to supplement the food budget of needy families so they can purchase healthy food and move toward self-sufficiency.8 In 2016, SNAP provided just under \$1.93 billion dollars of federal funding to LAC to serve about 1.1 million SNAP benefit recipients across 296,000 households. 9,10 Fifty-three percent (157,000) of these households were Latino. 10 A 2% undercount of Latino households could mean a reduction of about \$20.5 million in federal funding for SNAP, with more than 3,000 fewer households receiving SNAP benefits. At a 10% undercount, LAC could lose \$102.4 million in federal funding for SNAP, reducing the county's ability to serve nearly 15,700 households across the general population.

Early Head Start home visitation programs for children ages 0-3

Early Head Start (EHS), intended to improve the health and development of children younger than 3 years, is granted to the following: families deemed to be at high risk or whose incomes put them below the federal poverty level; families who are homeless; those dependent on public assistance; or children in foster care.^{11,12}

One EHS program is quality home visitation for new mothers, which is intended to improve child cognitive and social development, child health, mental health, family safety, and parenting. The program also helps new mothers reach self-sufficiency by helping them to access vocational training and employment to decrease their use of public assistance.¹² Funding for EHS is partly census-driven and is expected to be affected by a census undercount. In 2016-2017, the county received about \$30 million in federal funding through EHS for 3,452 high-risk families with children.12 About 75% of children and families using Head Start (for children ages 3-5) or EHS were Latino; therefore, we estimate that approximately 2,600 of the families of children using home visitations were Latino. 11 A 2% to 10% undercount of Latino families in the upcoming census could result in a loss of between \$450,000 and \$2.2 million in federal funding for 50 to nearly 260 home visitations for high-risk families across all eligible families.

Home-delivered meals for seniors

In LAC, 26,000 seniors or disabled adults receive just under 1 million meals a year through county-level home-delivered meal services. Latino seniors (ages 60 and older) make up about 28% of seniors in the county. LAC, production and delivery of meals costs \$7.85/meal. With the assumed 2%, 5%, or 10% undercount of Latinos, overall, we project that federal programs for home-delivered meals would lose anywhere from \$47,000 to \$235,000 in federal funding

We're talking about housing, food insecurity, transportation, quality education, quality child care, and affordable child care.

— Community-based health care provider

More than
1 million
students in
LAC received
free and
reduced-price
meals through
census-driven
federal programs.

and the ability to serve anywhere from 156 to 780 clients, respectively, which would translate to 6,000–30,000 meals annually.

Section 8 housing choice vouchers for lowincome households

Section 8 housing choice vouchers help lowincome families, the elderly, and disabled individuals to afford safe and sanitary housing in the private market through subsidies for rental assistance available to legal residents. 16 In 2018, the Housing Authority of Los Angeles County gave 58,179 Section 8 housing choice vouchers to LAC residents, worth approximately \$585 million dollars of federal funding¹⁷ (or about \$10,000 per household per year). This amounts to more than 14,500 voucher users, requiring an estimated \$146.3 million in federal funding. In the case of a 2%, 5%, or 10% undercount of Latinos in the upcoming census, LAC is projected to lose anywhere from \$3 million to \$15 million overall in federal funding for Section 8 housing choice vouchers from the U.S. Department of Housing and Urban Development. This would mean nearly 300 to just over 1,450 fewer Section 8 housing choice vouchers for LAC residents.

Free and reduced-price meals in schools

From 2017 to 2018, nearly 1,034,525 students (70%) in LAC received free and reduced-price meals through census-driven federal programs such as the National School Lunch Program and the School Breakfast Program.^{7,18} Among 969,000 Latino students enrolled in LAC schools, at least 57%, or about 552,000 students, attend schools that have free or reduced-price meals.¹⁹ Based on this, we can estimate that about 53% of students (552,000 of the total 1,034,525 students in LAC receiving free or reduced-price meals) were Latino in the 2017–2018 academic year. The governor's budget for California reports that the federal government provides about \$2.6 billion dollars for these programs, 20 and given that a quarter of California's population resides in LAC, we estimate that about a quarter of these funds are used in LAC. At a 2%, 5%, or 10% undercount of Latino school-age children

and adolescents, overall, LAC could lose anywhere from \$7.2 million to \$36 million for free or reduced-price meals for 11,000 to 55,000 students.

Federally Qualified Community Health Centers (FQHCs)

In 2018, the U.S. Health Resources and Services Administration (HRSA), which funds the health center program through census-driven federal funding, granted 177 federally qualified health centers (FQHCs) \$640 million to serve about 5 million patients across California. Sixty-one percent of the patients served were Latino.²¹ Assuming that a quarter of the patients that use FQHCs in California are in LAC, and 61% of these patients are Latino, we estimate that FQHCs in LAC serve nearly 790,000 Latino patients annually. If California receives \$640 million dollars in federal funding for about 5 million patients across the state, we can estimate that about \$129 in federal funds are spent per patient. An undercount of Latino individuals in the 2020 census could result in a loss of anywhere from \$2 million in federal funds for 16,000 patients (2% undercount) to \$10 million dollars for just under 79,000 patients (10% undercount).

Policy Implications and Recommendations

The decennial census should accurately reflect the populations in each jurisdiction to ensure an appropriate distribution of federal resources. While the past several censuses have improved coverage, the current political climate around immigration is expected to discourage a larger than average number of Latinos from completing the census. Our projections of the direct impact on health care and healthrelated services show that an undercount could result in a loss of anywhere from a hundred million to nearly 600 million dollars in federal funding each year for safety net programs that needy families and individuals in LAC depend on. This translates into a loss of resources to serve thousands of clients in the area, and it demonstrates an urgency for community providers to conduct outreach to promote census participation among their clients.

Our survey of local organizations shows that trusted community providers are actively engaging their clients in outreach to promote census participation. However, this effort needs to be continued, and bolstered, particularly among government agencies and health systems as the post-April 1 effort to achieve a complete count continues. This effort toward full participation is essential, given the potential impact that even the lowest, but especially the highest, level of undercount of Latinos could have on federal funding and resources available to all those residing in LAC. California has learned a great deal about reaching the Latino community as a result of the problems encountered with enrollment of Latinos in Covered California in 2014, including the importance of using trusted community organizations and providing alternatives to computer forms.²²

The census needs to carefully track actual versus expected responses from communities and put additional resources into the communities that show the largest undercounts. The resources for addressing the health and other needs of those communities depends on a full and accurate count.

Conclusions

The data and calculations from this study demonstrate the impact that undercounting Latino individuals in the upcoming census could have on federal funding and the availability of health services and resources throughout Los Angeles County. Most of the organizations and agencies we contacted are concerned that an undercount of Latinos could be large, with major impacts on their funding and ability to provide services to all of their clients. Efforts are most common among community-based organizations that are in closest contact with hard-to-reach communities, but it is in the interest of all governmental and health systems agencies to also work for a complete count so that federal resources are proportional to actual local needs. With the 2020 census upon us, it is crucial to promote awareness of the

importance of participation and dispel fears related to the census among the county's Latino population, and to ensure that health organizations in LAC will be able to retain their full capacity to serve all the communities that depend on them.

Methodology

The UCLA Health Policy Research Center and UCLA CTSI recruited 100 community-based organizations, government agencies, and health systems across LAC by email to participate in a survey on the implications of a census undercount for their organization. The final sample of survey respondents included 91 respondents: 51 (56%) were from community-based organizations; 18 (20%) were from health-related government agencies; 21 (23%) were from larger health systems, health plans, or universities; and 1 (1%) identified their organization as being another type. All analyses exclude missing and "I don't know" responses.

We also conducted calculations of the county-level, census-driven resources and services at risk of losing funding due to undercounting of Latinos, using selected programs. Funding for these programs is strongly but not solely driven by census counts; each program has a different, complex mechanism to determine the extent of the federal funding allocated to the program that is census-driven. Our estimates are based on a simplifying assumption that federal funding for these services was census-driven at a 1:1 ratio, meaning that a 1% undercount would reduce funding by 1% locally. Thus, the estimations of the loss of services and federal funding for LAC projected in this brief are not meant to be exact, but rather illustrations of the degree of impact the county may face at a Latino undercount that ranges from 2% to 10%.

Acknowledgments

The authors wish to thank Carmen Reyes, Nathalie Vizueta, and Ninez Ponce for their thoughtful reviews of this brief, and Anna Peare for her assistance with interviews.

Author Information

Steven P. Wallace is an associate director at the UCLA Center for Health Policy Research and a professor at the UCLA Fielding School of Public Health. Angubeen G. Khan is a PhD student in the department of Community Health Sciences at the UCLA Fielding School of Public Health. Homero E. del Pino is an associate professor in the department of Psychiatry and Human Behavior at the Charles R. Drew University of Medicine and Science.

The resources for addressing the health and other needs of those communities depends on a full and accurate count.

10960 Wilshire Blvd., Suite 1550 Los Angeles, California 90024



The UCLA Center for Health Policy Research is part of the UCLA Fielding School of Public Health.



The analyses, interpretations, conclusions, and views expressed in this policy brief are those of the authors and do not necessarily represent the UCLA Center for Health Policy Research, the Regents of the University of California, or collaborating organizations or funders.

PB2020-1

Copyright © 2020 by the Regents of the University of California. All Rights Reserved.

Editor-in-Chief: Ninez Ponce, PhD

Phone: 310-794-0909 Fax: 310-794-2686 Email: chpr@ucla.edu healthpolicy.ucla.edu

Funder Information

This research and publication have been funded in part by the National Center for Advancing Translational Sciences at the National Institutes of Health (NIH) through UCLA CTSI Grant UL1TR001881 and the UCLA Resource Center for Minority Aging Research/Center for Health Improvement of Minority Elderly (RCMAR/CHIME) Grant AG021684. The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH.

Suggested Citation

Wallace SP, Khan AG, del Pino HE. 2020. Health and Social Service Implications of a Census Undercount in Los Angeles. Los Angeles, Calif.: UCLA Center for Health Policy Research.

Endnotes

- U.S. Census Bureau. 2020. American Community Survey, 2018. Provided by IPUMS USA, University of Minnesota. www.ipums.org
- 2 Hogan H. 1993. The 1990 Post-Enumeration Survey: Operations and Results. *Journal of the American Statistical Association* 88(423): 1047-60.
- Mule T. 2012. Census Coverage Measurement Estimation Report: Summary of Estimates of Coverage for Persons in the United States. Washington, D.C.: U.S. Census Bureau.
- 4 Elliott D, Santos R, Martin S, Runes C. 2019.

 Assessing Miscounts in the 2020 Census. Washington,
 D.C.: Urban Institute. www.urban.org/research/
 publication/assessing-miscounts-2020-census
- Reamer A. 2020. Brief 7: Comprehensive Accounting of Census-Guided Federal Spending (FY2017) — Part B: State Estimates. Washington, D.C.: The George Washington Institute of Public Policy. http://bit. ly/38HyiTT
- 6 County of Los Angeles Chief Executive Office. County of Los Angeles 2019-20 Final Budget. https://ceo. lacounty.gov/wp-content/uploads/2019/12/LA-County-2019-20-Final-Budget-Book_upload.pdf
- 7 Reamer A. 2020. Fifty-Five Large Federal Census-Guided Spending Programs—Distribution by State Counting for Dollars 2020: Report No. 5. Washington, D.C.: The George Washington Institute of Public Policy. http://bit.ly/33cxIse
- 8 U.S. Department of Agriculture. (n.d.) Supplemental Nutrition Assistance Program (SNAP). https://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program

- 9 Schumacher K. 2017. Fact Sheet: CalFresh Reduces Hunger in Every County in California, but Changes at the Federal Level Could Cut Benefits. California Budget & Policy Center. http://bit.ly/2Wfvl6N
- 10 California Department of Social Services. 2018. CalFresh Data Tables. https://www.cdss.ca.gov/ inforesources/research-and-data/calfresh-data-tables
- 11 Barnett WS and Friedman-Krauss AH. 2016. State(s) of Head Start. New Brunswick, N.J.: National Institute for Early Education Research, Rutgers Graduate School of Education. http://nieer.org/wp-content/uploads/2016/12/HS_Full_Reduced.pdf
- 12 Los Angeles County Perinatal & Early Childhood Home Visitation Consortium. Executive Summary: Home Visiting in Los Angeles County—Current State, Gaps & Opportunities. 2017. http://bit.ly/3cUoMwd
- 13 Workforce Development Aging & Community Services (WDACS). 2020. Elderly Nutrition Program: Doing Business With WDACs. https://wdacs.lacounty.gov/doing-business-with-wdacs/rfp/aaa-enp-1720/
- 14 The 2015 Los Angeles Healthy Aging Report. 2015. Los Angeles, Calif.: USC Edward R. Roybal Institute on Aging. http://roybal.usc.edu/wp-content/ uploads/2016/04/USC_Roybal-LA_HealthyAging.pdf
- St. Vincent Meals on Wheels. Just the Facts: Annual Report to Donors 2017. https://www.stvincentmow.org/ about-us/just-the-facts/
- 16 Los Angeles County Development Authority. (n.d.) "Section 8 Program—Applicants." https://wwwb. lacda.org/section-8/for-section-8-applicants
- 17 Housing Authority of the City of Los Angeles. 2018. 80 Years: Annual Report 1938-2018. http://online. fliphtml5.com/ctqqu/rzin/#p=23
- California Department of Education. California Longitudinal Pupil Achievement Data System (CALPADS). https://www.ed-data.org/county/Los-Angeles
- 19 Buenrostro M. 2018. Fact Sheet: Latino Students in California's K-12 Public Schools. California School Board Association. https://bit.ly/2IKp8Yi
- Newsom G. 2020. Governor's Budget Summary 2020-21. http://www.ebudget.ca.gov/FullBudgetSummary.pdf
- 21 2018 California Health Center Data—California Program Grantee Data. https://bphc.brsa.gov/uds/ datacenter.aspx?year=2018&state=CA
- Ortiz-Briones M. 2014. In First Year, Exchange Grappled With Latino Enrollment Challenges. Los Angeles, Calif.: USC Annenberg Center for Health Journalism. https://www.centerforbealthjournalism.org/ fellowships/projects/qualifying-obamacare-its-first-year-b

