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15 **UNITED STATES DISTRICT COURT**  
16 **NORTHERN DISTRICT OF CALIFORNIA**

17 CITY AND COUNTY OF SAN FRANCISCO,

18 Plaintiff,

19 v.

20 DONALD J. TRUMP, President of the United  
21 States, UNITED STATES OF AMERICA, JOHN  
22 F. KELLY, Secretary of the United States  
23 Department of Homeland Security, JEFFERSON  
24 B. SESSIONS, Attorney General of the United  
25 States, and DOES 1-100,

26 Defendants.

CASE NO. 3:17-cv-00485-WHO

**ADMINISTRATIVE MOTION FOR  
LEAVE TO FILE BRIEF AMICI  
CURIAE SUPPORTING PLAINTIFF**

Date: April 12, 2017  
Time: 2:00 pm  
Dep't: Courtroom 2  
Judge: Hon. William H. Orrick

Date Filed: March 22, 2017

Trial Date: Not yet set

1 The Service Employees International Union (“SEIU”), South Bay AFL-CIO Labor Council,  
2 American Federation of State County & Municipal Employees (“AFSCME”) Council 57, UNITE  
3 HERE Local 19, United Food and Commercial Workers (“UFCW”) Local 5, and Working  
4 Partnerships USA seek leave to file a brief amici curiae supporting the County of Santa Clara  
5 (“Santa Clara”) and the City and County of San Francisco (“San Francisco”) in their related cases  
6 challenging President Trump’s unconstitutional Executive Order regarding “sanctuary  
7 jurisdictions.” *See* Exec. Order 13768, 82 Fed. Reg. 8799 (Jan. 25, 2017). Undersigned counsel  
8 contacted counsel for the government before filing this administrative motion, and defendants  
9 responded that they take no position on the request to file an amici brief.

#### 10 **IDENTITIES AND INTERESTS OF AMICI CURIAE**

11 Proposed amicus SEIU is an organization of two million members who work in the public  
12 sector, in healthcare, and in property services nationwide, including thousands in Santa Clara and  
13 San Francisco who are united in SEIU local unions. SEIU Local 521 has 40,000 members in Santa  
14 Clara and other parts of the central Bay Area and Central Valley regions, including many members  
15 who do public-service work. SEIU Local 1021 has more than 54,000 members who work in local  
16 government, non-profit agencies, healthcare programs, and schools throughout Northern  
17 California, including many members who work for San Francisco. SEIU 2015 is a union of more  
18 than 325,000 homecare and nursing home workers throughout California, including more than  
19 64,000 in its Region 5 covering Santa Clara and San Francisco.

20 Proposed amicus South Bay AFL-CIO Labor Council represents 100 local unions in Santa  
21 Clara and San Benito Counties. These unions in turn represent over 100,000 local workers, many  
22 of whom could be directly affected by the Executive Order on sanctuary cities, and many of whom  
23 could be indirectly affected by the local budgetary impact of that Order because they are public  
24 employees.

25 Proposed amicus AFSCME Council 57 represents over 26,000 public employees employed  
26 at hospitals, health clinics, and other social services agencies located through California, including  
27 over 5,300 in Santa Clara County.

1 Proposed amicus UNITE HERE Local 19 represents 3,000 employees in the hospitality  
2 industry who work for employers in Santa Clara County. Many of Local 19's members reside in  
3 Santa Clara County and depend on public services provided by Santa Clara County.

4 Proposed amicus UFCW Local 5 ("Local 5") is a progressive labor union representing  
5 30,000 members who work in retail grocery, department stores, retail drug stores, candy stores,  
6 jewelry stores, agriculture and food processing, wholesale meat, seafood processing, financial  
7 services, education, and the cannabis industry among others. Local 5's geographic jurisdiction  
8 includes much of Northern California, parts of the Central Valley and Central Coast, and extends to  
9 Arizona. Local 5's 30,000 members and their families, including its 5,000 members in Santa Clara  
10 County and its 2,000 members in San Francisco County, regularly consume and depend on  
11 essential County services that promote public safety, provide public health services, and otherwise  
12 provide essential safety-net programs and social services, all of which are imperiled by this  
13 Executive Order.

14 Proposed amicus Working Partnerships USA is a community organization that drives the  
15 movement for a just economy by bringing together public policy innovation and the power of  
16 grassroots organizing. Working Partnerships builds the capacity of working people, low-income  
17 neighborhoods and communities of color to lead and govern. Based in Silicon Valley, Working  
18 Partnerships tackles the root causes of inequality and poverty by leading collaborative campaigns  
19 for good jobs, healthy communities, equitable development and climate justice, and a democracy  
20 that works for all.

21 Together proposed amici represent many thousands of Santa Clara and San Francisco  
22 residents who both provide and depend on the public services targeted by the unconstitutional  
23 Executive Order challenged in these cases. As described in greater detail in the proposed brief, the  
24 women and men who belong to the amici unions and who benefit from Working Partnerships  
25 USA's campaigns include Santa Clara and San Francisco public employees who provide services  
26 every day to the counties' most vulnerable residents and who believe their patients and clients will  
27 suffer when the plaintiff jurisdictions are denied federal funding. These public employees also  
28

1 worry about what will happen to their own livelihoods and loved ones in the event of severe budget  
2 cuts; they are breadwinners who support families, are putting children through college, and, in  
3 many cases, are members of immigrant communities themselves.

4 Furthermore, members of the amici unions, beneficiaries of Working Partnerships USA's  
5 campaigns, and their families include many Santa Clara and San Francisco residents who rely on  
6 the county programs that will be de-funded by President Trump's Executive Order. They depend  
7 on local government agencies for assistance and services essential to daily life.

### 8 **RELEVANCE AND USEFULNESS OF PROPOSED BRIEF**

9 Amici's proposed brief provides specific additional details about the public programs and  
10 services on which Santa Clara and San Francisco residents depend and which face severe budget  
11 cuts (and uncertainty) under the challenged Executive Order. In addition, the brief recounts the  
12 personal experiences of a number of public employees who work in these jurisdictions and who  
13 provide essential services. These employees are the lifeblood of the social safety net: nurses, a  
14 doctor, a homecare worker, a child welfare supervisor, and a social worker. They describe the  
15 human impact of President Trump's Order, including harm to their vulnerable clients and patients,  
16 harm to their own families who depend on them, and harm to members of immigrant communities  
17 who—newly fearful about contact with local government—will avoid seeking services.

18 One public employee whose story is told in the brief, Claudia Nicole Arevalo, currently  
19 provides in-home care for three patients, two of whom have no family to help them; Ms. Arevalo  
20 functions as their “nurse, housekeeper, psychologist, and chef, all in one.” Another, Lorena  
21 Briones, is a social worker whose recent clients have included an individual diagnosed with ALS  
22 who was incapable of any self-care; a 95-year-old woman living alone; a quadriplegic young  
23 person; a severely autistic young man; and a little girl with paranoid schizophrenia. Residents like  
24 these are the true victims of the Executive Order's vindictive and overbroad attack on public  
25 services.

26 Amici believe their proposed brief is relevant and may be of use to the Court in connection  
27 with at least two specific arguments advanced by the plaintiff jurisdictions. First, the experiences  
28

1 of these front-line public employees are relevant to Santa Clara's and San Francisco's arguments  
2 under the Spending Clause, because they show the breadth and depth of the Executive Order's  
3 threat to local jurisdictions' federally funded programs that have nothing at all to do with  
4 immigration enforcement. Second, their experiences, which are emblematic of experiences  
5 nationwide, are relevant because they show the irreparable harm that President Trump's executive  
6 order will do here and across the country absent preliminary injunctive relief.

7 **CONCLUSION**

8 For the foregoing reasons, proposed amici request that their motion be granted and their  
9 brief filed.

10  
11 Dated: March 22, 2017

/s/ Claire Prestel  
Claire Prestel

12  
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**CERTIFICATE OF SERVICE**

I hereby certify that, on March 22, 2017, a copy of the foregoing Administrative Motion for Leave to File Brief Amici Curiae, Brief Amici Curiae, and Proposed Order were filed and served pursuant to the Court’s electronic filing procedures using CM/ECF.

/s/ Claire Prestel  
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15 **UNITED STATES DISTRICT COURT**  
16 **NORTHERN DISTRICT OF CALIFORNIA**

17 CITY AND COUNTY OF SAN FRANCISCO,  
18  
19 Plaintiff,

20 v.

21 DONALD J. TRUMP, President of the United  
22 States of America, UNITED STATES OF  
23 AMERICA, JOHN F. KELLY, Secretary of the  
24 United States Department of Homeland Security,  
25 JEFFERSON B. SESSIONS, Attorney General of  
26 the United States, and DOES 1-100,

27 Defendants.

CASE NO. 3:17-cv-00485-WHO

**[PROPOSED] BRIEF AMICI CURIAE**

Date: April 12, 2017  
Time: 2:00 pm  
Dep't: Courtroom 2  
Judge: Hon. William H. Orrick

Date Filed: March 22, 2017

Trial Date: Not yet set

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Tuberculosis Control Branch, Cal. Dep’t of Pub. Health, *Responsibilities of Pub. Health Dep’ts to Control Tuberculosis* .....3

Thomas R. Frieden, M.D, M.P.H., *Government’s Role in Protecting Health and Safety*, 368 N. Eng. J. Med. 1857 (2013) .....3

1 **INTRODUCTION**

2 Amici together represent and advocate for millions of employees nationwide, including  
 3 many in the County of Santa Clara (“Santa Clara”) and the City and County of San Francisco (“San  
 4 Francisco”) who provide and depend on the public services threatened by President Trump’s  
 5 unconstitutional Executive Order. SEIU members, for example, work in Santa Clara and San  
 6 Francisco as public-employee doctors, nurses, homecare aides, and family support specialists. The  
 7 important work they do and services they provide are described in Part I of this brief; Part II tells of  
 8 their specific personal experiences and their concerns about the harm the Executive Order will do  
 9 to their patients and clients, to their own families, and to the trust in public-service professionals  
 10 that is essential to the care they provide.

11 The stories of these front-line workers are relevant to Santa Clara’s and San Francisco’s  
 12 arguments under the Spending Clause, because they show the breadth and depth of the Executive  
 13 Order’s impact on local jurisdictions’ federally funded programs that have nothing to do with  
 14 immigration enforcement. These workers’ experiences, which are emblematic of experiences  
 15 nationwide, are also relevant because they show the irreparable harm that President Trump’s  
 16 unlawful Order will do to public employees and people across the country. Indeed, Santa Clara,  
 17 San Francisco, and jurisdictions across the United States are already weighing an impossible choice  
 18 between two forms of irreparable harm to their workers and residents: Either they eliminate jobs  
 19 now to protect their budgets from the federal government’s failure to reimburse for costs incurred,  
 20 or they operate under a cloud of fiscal disarray.

21 **ARGUMENT**

22 **I. The Challenged Executive Order Undermines the Health and Well-Being of Millions**  
 23 **of Residents and Workers.**

24 President Trump’s Executive Order 13768, 82 Fed. Reg. 8799 (Jan. 25, 2017), poses an  
 25 immediate threat of irreparable harm to the over 2.7 million residents,<sup>1</sup> thousands of public

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26  
 27 <sup>1</sup> Cnty. of Santa Clara’s Mot. for Prelim. Inj. 1; City & Cnty. of San Francisco’s First Am.  
 28 Compl. for Declaratory & Inj. Relief ¶109.

1 employees, and essential public institutions and economies of Santa Clara and San Francisco—  
 2 harm that will be replicated in jurisdictions across the country if an injunction is not entered.

3 The Executive Order threatens Santa Clara’s and San Francisco’s receipt of \$2.9 billion in  
 4 federal funds—funds that support Santa Clara’s Valley Medical Center, Social Services Agency,  
 5 Public Health Department, and Office of Emergency Services, as well as San Francisco’s Human  
 6 Services Agency, Department of Public Health, Department of Emergency Management,  
 7 Department of Transportation, and other crucial public programs. These vital community  
 8 institutions protect and improve the health and well-being of Santa Clara’s and San Francisco’s  
 9 residents by ensuring that experienced and skilled public employees provide necessary services.

10 Indeed, California counties have a legal responsibility to provide health care to their  
 11 indigent populations, *see* California Welfare & Institutions Code §17000, and county hospitals and  
 12 public health departments enable Santa Clara and San Francisco to comply with this obligation.  
 13 Santa Clara and San Francisco County hospitals, such as the award-winning Valley Medical Center  
 14 and Zuckerberg San Francisco General Hospital,<sup>2</sup> provide high quality, cost-effective medical care  
 15 to all residents of the Counties regardless of their ability to pay. These safety-net hospitals care for  
 16 the most vulnerable patients in the health care system, providing extensive services, both inpatient  
 17 and outpatient care, to Medicaid and uninsured patients. *See, e.g.,* Katherine Neuhausen, *et al.*,  
 18 *Disproportionate Share Hospital Payment Reductions May Threaten Financial Stability of Safety-*  
 19 *Net Hospitals*, 33(6) *Health Affairs* 988–96 (2014). Funding cuts to county hospitals have serious  
 20 consequences for patients, including the loss of emergency medical care<sup>3</sup> and reduced access to  
 21 cancer treatments, intensive care beds, and surgery. One of the ripple effects caused by reduced  
 22

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23 <sup>2</sup> Valley Medical Center has received honors and awards for excellence from the March of  
 24 Dimes, American Diabetes Association, Veterans Affairs Department, and others. *See*  
 25 <https://www.scvmc.org/about/Pages/awards.aspx>. Zuckerberg San Francisco General Hospital is  
 an international leader in HIV/AIDS care and the only Level 1 Trauma Center in San Francisco  
 and Northern San Mateo County. *See* [http://zuckerbergsanfranciscogeneral.org/about-the-](http://zuckerbergsanfranciscogeneral.org/about-the-hospital/)  
 hospital/.

26 <sup>3</sup> Jane Wishner, *et al.*, *A Look at Rural Hospital Closures and Implications for Access to*  
 27 *Care: Three Case Studies*, The Kaiser Comm’n on Medicaid & the Uninsured: Issue Br. (July  
 28 2016), [http://files.kff.org/attachment/issue-brief-a-look-at-rural-hospital-closures-and-](http://files.kff.org/attachment/issue-brief-a-look-at-rural-hospital-closures-and-implications-for-access-to-care)  
 implications-for-access-to-care.

1 access to emergency treatments is increased hospital admission rates resulting in death. *See, e.g.,*  
2 Charles Liu, et al., *California Emergency Department Closures Are Associated with Increased*  
3 *Inpatient Mortality at Nearby Hospitals*, 33(8) *Health Affairs* 1323–1329 (2014).

4 Public health departments focus on prevention to protect their populations from illness,  
5 disease, and injuries. *See* Am. Public Health Ass’n, *The Role of Public Health in Ensuring Healthy*  
6 *Communities* (Jan. 1, 1995) (Policy Statement No. 9521(PP)). The Santa Clara and San Francisco  
7 Public Health Departments comprise dozens of programs and services addressing the specific  
8 health needs of their communities, ranging from lowering tuberculosis rates, combating Zika  
9 dangers, monitoring HIV/AIDS, and preventing the damaging effects of lead poisoning, to working  
10 with high risk mothers and babies. *See* Santa Clara Cnty. Pub. Health Dep’t,  
11 <https://www.sccgov.org/sites/sccphd/en-us/aboutus/Pages/default.aspx>; San Francisco Dep’t of  
12 Pub. Health, <https://www.sfdph.org/dph/default.asp>. Law mandates some public health department  
13 activities, such as the diagnosis and treatment of tuberculosis. *See* Tuberculosis Control Branch,  
14 Cal. Dep’t of Pub. Health, *Responsibilities of Pub. Health Dep’ts to Control Tuberculosis*,  
15 [http://www.ctca.org/filelibrary/Responsibilities of Public Health Departments to Control](http://www.ctca.org/filelibrary/Responsibilities%20of%20Public%20Health%20Departments%20to%20Control%20Tuberculosis_6-24-13_final.pdf)  
16 [Tuberculosis\\_6-24-13\\_final.pdf](http://www.ctca.org/filelibrary/Responsibilities of Public Health Departments to Control Tuberculosis_6-24-13_final.pdf).

17 Public health departments bring economic and productivity gains to their jurisdictions by  
18 saving millions of dollars in healthcare costs. One study found that each \$10 increase in per capita  
19 health department expenditures leads to a 7.4% decrease in infectious-disease mortality. *See* Paul  
20 Campbell Erwin, M.D., D.P.H., et al., *Resources That May Matter: The Impact of Local Health*  
21 *Department Expenditures on Health Status*, 127 *Pub. Health Reports* 89 (2012). “When  
22 government fails to protect and improve people’s health, society suffers.” Thomas R. Frieden,  
23 M.D, M.P.H., *Government’s Role in Protecting Health and Safety*, 368 *N. Eng. J. Med.* 1857  
24 (2013).

25 County social service agencies promote the economic and social well-being of individuals  
26 and communities, serving seniors, dependent adults, children, and the disabled. Santa Clara  
27 County’s Social Services Agency and San Francisco’s Human Services Agency offer In-Home  
28

1 Supportive Services to eligible aged, blind, and disabled residents who, without care, would be  
2 unable to remain safely in their own homes. These programs divert chronically impaired people  
3 from nursing homes by providing quality services at lower costs. Laurel Beck, Pub. Policy Inst. of  
4 Cal., *Cal.'s In-Home Support Program* (Nov. 2015), [http://www.ppic.org/main/publication\\_](http://www.ppic.org/main/publication_show.asp?i=1169)  
5 [show.asp?i=1169](http://www.ppic.org/main/publication_show.asp?i=1169). The protection of children from child abuse is also a primary function of the  
6 Santa Clara and San Francisco agencies: Social workers screen and investigate reports of child  
7 abuse and neglect, and ensure that children are protected while emphasizing less restrictive  
8 placement alternatives. Patricia A. Schene, *Past, Present, and Future Roles of Child Protective*  
9 *Servs.*, 8(1) *Protecting Children From Abuse & Neglect* 23–38 (Spring 1998).

10         Within these departments and agencies, public workers are the lifeblood of the community  
11 safety net, providing world-class health care, nursing the sick, caring for seniors and disabled  
12 individuals, keeping neighborhoods safe, educating children, and providing other essential services  
13 for all who live and work in Santa Clara and San Francisco. The Counties' physicians, public-  
14 health nurses, and homecare workers are on the front line of the healthcare system, responsible for  
15 integrating culturally sensitive hospital and in-home care. The Counties' social workers protect  
16 children and the elderly from abuse; their public health advocates ensure that individuals affected  
17 by mental illness have safe, supportive environments; and their emergency dispatchers give  
18 childbirth and CPR instructions over the phone while sending firemen, EMT staff, and sheriff's  
19 deputies to emergency situations. Ultimately, the Counties' health and social service workers are  
20 the foundation for planning, delivering, and managing Santa Clara's and San Francisco's complex  
21 infrastructures of critical public services.

22         The individuals whose experiences and concerns are recounted below are workers in Santa  
23 Clara's and San Francisco's county hospitals, public health departments, and social service  
24 agencies. They have chosen to work for these county institutions because of their deep  
25 commitment to providing comfort and service to those in need, and because of their belief in  
26 working for the public good. The experiences of these women and men illustrate the importance of  
27  
28

1 this case to millions of individuals and families, working people in these Counties and beyond, and  
2 the nation as a whole.

3 **II. The Human Impact of Executive Order 13768**

4 **A. Impact on Public Hospitals**

5 Nurses and doctors who work in the public-hospital system understand that federal funding  
6 cuts will be catastrophic for public health and that President Trump's Order, which seeks to compel  
7 county agencies to engage in immigration enforcement, will foster distrust of county workers and  
8 discourage immigrant families from seeking care.

9 Nurse Sasha Cuttler, who helps oversee quality and safety programs at Zuckerberg San  
10 Francisco General Hospital, worries that the Executive Order will affect public-health funding.<sup>4</sup>  
11 Mr. Cuttler is a 56-year-old city resident and member of SEIU Local 1021, has been a nurse since  
12 1985, and has dedicated his career to making improvements to public health. He notes that among  
13 its many roles, San Francisco General maintains the only psychiatric emergency room and trauma  
14 center in the city, provides health services for jails in San Francisco, and operates a rape crisis  
15 center.

16 Mr. Cuttler has a particular expertise in tuberculosis, having written a doctoral dissertation  
17 about control of the disease in San Francisco. In his research, Mr. Cuttler found that tuberculosis  
18 survival rates were tied to the city's provision of publicly funded, no-cost care, which allowed San  
19 Francisco to achieve lower infection rates and mortality levels than other cities. He believes that  
20 the Executive Order's anti-immigrant animus will further escalate fear among immigrant  
21 communities and lead patients not to seek care for infectious disease and other conditions: "Public  
22 health has no borders and making people afraid to accept care is a recipe for epidemic disease.  
23 That's an inevitable consequence." Furthermore, in Mr. Cuttler's experience, federal grant funds  
24 have been crucial to care improvement projects, such as a project funded by a grant from the  
25 federal Agency for Healthcare Research and Quality that reduced fall injuries in his hospital.

26 \_\_\_\_\_  
27 <sup>4</sup> Mr. Cuttler and the other individuals named here were interviewed by attorneys about  
28 their experiences and work. They have given amici permission to tell their stories, and records of  
their interviews and statements are on file with undersigned counsel.

1 Mr. Cuttler has already seen the impact of an increasingly anti-immigrant climate. Students  
2 from a local vocational high school who intern at his hospital have said that they have been  
3 harassed and told to “return to Mexico.” And Immigration and Customs Enforcement recently  
4 visited a daycare center two blocks from the hospital looking for someone. Mr. Cuttler believes  
5 these actions create fear among the patient population.

6 Dr. Joe, a second-year, internal-medicine resident at Valley Medical Center, is similarly  
7 concerned about serious consequences stemming from cuts in publicly funded healthcare services.<sup>5</sup>  
8 He, too, has experience with tuberculosis, having seen a patient in his primary care service who  
9 had not received any medical care for many years and who complained of a cough. Dr. Joe ordered  
10 an x-ray and learned that the patient had already lost half of one lung to tuberculosis. Without the  
11 County’s medical services, Dr. Joe’s patient would have not only risked further harm to himself but  
12 also continued to expose thousands of people to that dangerous disease.

13 Dr. Joe is particularly aware of the need for the culturally sensitive medical services that the  
14 County provides, which are essential to achieving trust among traditionally underserved  
15 populations. He remembers vividly a patient he saw last year who had been the victim of human  
16 trafficking and who came to him during her dialysis treatments. Using the network of services  
17 available at Valley Medical Center, Dr. Joe worked with a team of social workers, nurses,  
18 clinicians, and other staff to earn the patient’s trust and learn her full story. The information  
19 elicited turned out to be crucial to the patient’s proper diagnosis, treatment, and follow-up.

20 Given that experience and others, Dr. Joe believes it is critical that underserved populations  
21 who may have a distrust of the medical system have a safe place where their medical needs can be  
22 addressed. “I know how scary it is for people to trust a foreign and complex medical system. I  
23 have family members who were sick and I know how much it meant to them to have a doctor . . .  
24 who they really believed wanted to help them. I want to be that compassionate physician . . . .”

25  
26 <sup>5</sup> Dr. Joe asked that his last name not be printed in this brief. He has undergraduate and  
27 medical school degrees from the University of California, Davis, and he chose to do his residency  
28 at Santa Clara’s County hospital, Valley Medical Center, because he believes “passionately in the  
importance of serving vulnerable populations[.]” Dr. Joe is a member of SEIU’s Committee of  
Interns and Residents.

1           **B.       Impact on Public-Health Workers**

2           Public employees are also worried about the effect the Executive Order will have on their  
3 public-health work.

4           Pamela Ortiz, a 54-year-old mother of three and licensed vocational nurse, has provided  
5 safety-net health services for the county health system since 1997, including sixteen years working  
6 at a county methadone clinic. She is concerned that when services are cut because of President  
7 Trump’s Executive Order, she will not be able to conduct visits to provide testing, vaccination, and  
8 education to patients in residential substance abuse treatment programs. She fears patients will  
9 stop seeking testing and services as a result, thereby weakening public health for the community as  
10 a whole.

11           Ms. Ortiz believes her patients will not be able to afford private drug-treatment services and  
12 will wait longer for help, leading to increased hospitalizations and costs. Fear of rising costs is  
13 already a reality: One patient was recently misinformed that he had to pay hundreds of dollars for  
14 x-rays (though they were covered by the county); the patient left the program two days later. Ms.  
15 Ortiz worries that this will happen more often when services are cut and patients do not have a  
16 health care worker, like herself, whom they trust to provide services in a non-judgmental way. The  
17 rise in overdoses the country is already experiencing worries her, and when funding is cut, she  
18 predicts the situation will become much worse.

19           Ms. Ortiz viscerally understands the importance of a healthcare safety net. She was born at  
20 the county hospital, Valley Medical Center, and raised by her single mother in San Jose with the  
21 assistance of Aid to Families with Dependent Children (AFDC) benefits. Unfortunately, her  
22 mother died of congestive heart failure because of pneumonia in 1990, at the age of 54, because  
23 she lacked health insurance. Ms. Ortiz herself raised and sent two daughters to college with her  
24 salary, and hopes to do the same for her 15-year-old son. But because of the high cost of housing  
25 in San Jose (which has already forced her to live an hour and a half away from her job), she fears  
26 that if she is let go because of funding cuts she could face homelessness—and will face age  
27 discrimination in any search for a new job. For all these reasons Ms. Ortiz believes in county  
28



1 services, in the importance of preventive healthcare, and in reaching underserved populations.  
2 What makes the difference, she says, is “having the funding to treat, talk, test, and educate people  
3 and let them know they matter to us no matter where they come from.”

4 Marilyn Mara is a 51-year-old nurse employed by Santa Clara County’s Department of  
5 Public Health who emigrated from the Philippines at age 13 and who has worked for the County  
6 for eighteen years providing essential health services. She is concerned about the effects the  
7 Executive Order will have on the client population she serves, who are among society’s most  
8 vulnerable: “We work with high-risk populations including infants who can be medically fragile  
9 and premature, mothers with postpartum depression, pregnant and parenting teens, neglected and  
10 abused children, children with high levels of lead, obese children at risk for diabetes, patients with  
11 tuberculosis or other communicable diseases, adults and the elderly with chronic medical  
12 conditions, patients with history of domestic violence and substance-use, and others.” She worries  
13 that when services are cut, patients will rely more on emergency services and drive up costs; she  
14 believes cuts in funding “will be felt for years and maybe decades” in terms of public health.

15 In Ms. Mara’s experience, continuity of care is crucial, and trust plays an important role in  
16 achieving that continuity. If patients do not trust their providers, they will skip “regular well-child  
17 check-ups and immunizations, follow up less frequently with primary providers, and their medical  
18 conditions will worsen.” And Ms. Mara worries that the anti-immigrant animus of the Executive  
19 Order will have that effect: She believes fear of deportations or raids will lead members of  
20 immigrant communities to stay home and avoid seeking services.

### 21 **C. Impact on Social Services**

22 Public employees who provide other social services worry about the Executive Order’s  
23 effects as well.

24 Claudia Nicole Arevalo, a 51-year-old member of SEIU Local 2015, has worked for twenty  
25 years as a caregiver for the In-Home Supportive Services program in San Francisco. She currently  
26 provides home care for three different patients, two of whom have no family to help them. Ms.  
27 Arevalo cares for her patients ten hours per day Monday to Friday and for four hours on Saturday.

1 She assists them by doing their grocery shopping, cooking food, housekeeping, administering  
2 medication, accompanying them to medical appointments, and keeping them company. She  
3 describes herself as “a nurse, housekeeper, psychologist, and chef, all in one,” and she believes  
4 when public funding is cut, her clients will most likely get sicker and require more hospitalizations.

5 The Executive Order also worries Ms. Arevalo personally because she lives with her  
6 daughter and granddaughter and is afraid that when program funding is cut, she may not be able to  
7 support them. Ms. Arevalo emigrated from El Salvador in 1992 and has built a life here, like other  
8 hard-working immigrants. If she experiences pay cuts or loses her job, she will “lose everything  
9 I’ve built since I got here. I’ve bought a house and I’m paying for it every month. How would I  
10 eat? It would be the worst thing to happen to me.” Ms. Arevalo also sees “a lot of fear already in  
11 the immigrant communities. People are already not shopping or going out; they’re also getting sick  
12 and dying and preparing to go back to the countries of their births. The whole United States will be  
13 hit hard.”

14 Julie Meyers is a 62-year-old member of SEIU Local 1021 who works as a child welfare  
15 supervisor for San Francisco’s Human Services Agency. Ms. Meyers is on the front lines of  
16 ensuring that children are not neglected or abused and that families have the resources they need to  
17 stay united. She oversees a team of seven social workers who on a daily basis respond to referrals  
18 of potential child abuse with phone calls or home visits to determine risk. She works closely with  
19 the courts to ensure that families receive services they need and that children are safe. Ms. Meyers  
20 has been doing this life-saving work for twenty-seven years.

21 Ms. Meyers is concerned that when federal funding is cut, child-protective services will be  
22 cut back or eliminated, and San Francisco’s neediest children will be made even more vulnerable.  
23 She says immigrant children are already suffering the most: “A lot of them are unaccompanied.  
24 So they might be here by themselves, not speaking the language, not knowing who to trust, no  
25 money, no way to support themselves, so they’re the perfect target for abuse and exploitation.”  
26 She fears that without the services the agency provides to poor city residents, many more will  
27  
28



1 harm to communities and the public employees who serve them. Accordingly, amici urge the  
2 Court to enter the requested preliminary injunction.

3  
4 Dated: March 22, 2017

/s/ Claire Prestel  
Claire Prestel

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14 **UNITED STATES DISTRICT COURT**  
15 **NORTHERN DISTRICT OF CALIFORNIA**

16 CITY AND COUNTY OF SAN FRANCISCO,

17 Plaintiff,

18 v.

19 DONALD J. TRUMP, President of the United  
20 States, UNITED STATES OF AMERICA,  
21 JOHN F. KELLY, Secretary of United States  
22 Department of Homeland Security, JEFFERSON  
23 SESSIONS, Attorney General of the United  
24 States, DOES 1-100,

25 Defendants.

CASE NO. 3:17-cv-00485-WHO

**[PROPOSED] ORDER GRANTING  
ADMINISTRATIVE MOTION FOR  
LEAVE TO FILE BRIEF AMICI  
CURIAE**

Date: April 12, 2017  
Time: 2:00 pm  
Dep't: Courtroom 2  
Judge: Hon. William H. Orrick

Date Filed: March 22, 2017

Trial Date: Not yet set

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**[PROPOSED] ORDER**

On March 22, 2017, the Service Employees International Union, joined by others, filed an Administrative Motion for Leave to File Brief Amici Curiae. Having considered the papers and pleadings on file, the Court GRANTS the Administrative Motion for Leave to File Brief Amici Curiae and ORDERS that the brief submitted by the Service Employees International Union and co-amici be filed.

**IT IS SO ORDERED.**

Dated: \_\_\_\_\_, 2017

\_\_\_\_\_  
HONORABLE WILLIAM H. ORRICK  
JUDGE, UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA