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Message from CLINIC
Executive Director and Board Chairman

Arizona, Georgia, Utah, and Alabama. In the past year we witnessed an unprecedented groundswell of anger, frustration and fear aimed at immigrants in our communities played out through local legislation. Those efforts do not fulfill the need for a major overhaul of our immigration laws, they only serve to divide families, neighbors and the nation.

For those of us in the immigrant justice field, this year has been filled with defeats and celebrations. In spite of the challenges, we remain united in this work by our desire to serve the migrants, honoring their dignity and offering our respect. We hope for all to have a life in which one's daily work serves to sustain the family and a life where poverty, oppression, suffering, and violence are things of the past.

Our network numbers more than 200 non profit service providers supporting low income and other vulnerable immigrants. It speaks the truth, is driven by charity, and stands for justice. As Pope Benedict XVI explains in his encyclical, Caritas in Veritate (Charity in Truth), "charity goes beyond justice, because to love is to give...justice is inseparable from charity and intrinsic to it...charity demands justice: recognition and respect for the legitimate rights of individuals and peoples." Every day, CLINIC's network performs acts of charity, while demanding justice by giving a voice to the voiceless.

Whether preparing an application for a victim of domestic violence, representing a child facing deportation, seeking relief for an asylum seeker, or trying to reunite a family, CLINIC's network speaks someone's truth every day. It is only through that selfless exercise that we change our social and political institutions to embrace the higher call of love and respect for humanity.

This year we again offer our gratitude to the dedicated and driven staff of CLINIC for their vision and devotion to our mission to enhance and expand the delivery of legal services to low income and vulnerable immigrants and to meet the immigration needs identified by the Catholic Church.

What follows in this report is only a portion of the success and advancement that CLINIC has had in 2010. We are grateful to the staff and the network for these many efforts and all that they do each day to bring the truth to light.

Whether you are an advocate, a donor, an immigrant, a parishioner or someone new to the immigration debate, we offer this challenge: practice your charity in truth. Teach others that charity and justice go hand in hand. In this world where secular arguments dominate the immigration debate, continue to share your light and your love. Because those truths are the seeds that will yield compassion – those stories will remind everyone that human suffering must not go unnoticed; that mothers and fathers shouldn't be separated from their children; that parents should be able to lift their children out of poverty; and that those who flee persecution or devastation should be able to find a safe haven in our great country. Together, we stand for that and more.

Most sincerely,

Maria M. Odom
Executive Director
CLINIC

Most Rev. Richard Garcia
Bishop of Monterey
Chairman, CLINIC Board of Directors
A devastating earthquake left one in five Haitians homeless, severely injured, or dead.

A humanitarian crisis of unprecedented proportions followed. Thousands of survivors fled Haiti. Many were evacuated to the U.S. to receive emergency medical treatment. Some were here when the quake hit and had nothing to go back to, while others sought to reunite with family members.

The U.S. Department of Homeland Security (DHS) permitted a limited number of Haitians to come to the United States for humanitarian reasons in the immediate aftermath of the earthquake. President Obama also made Temporary Protected Status (TPS) available to assist Haitians who were in the U.S. on the day of the earthquake to allow them to live and work here legally until the situation at home improves. These measures were a good start but did not go far enough to fully meet the needs of the Haitian community. For example, the fees for the applications for TPS and work authorization total over $500. Many individuals had difficulty paying these fees for themselves and their families, especially while trying to send money to relatives in Haiti. When they could gather the fees and file their applications, many submitted the complicated documents without the assistance of a legal professional who understood the forms and the consequences of filing them with errors.

On behalf of its network, CLINIC's Executive Director and Director of Advocacy urged the Secretaries of State, Health and Human Services, and Homeland Security to revisit their policies. CLINIC advocated for relief not just for Haitians already in the U.S., but also for the loved ones they left behind. As CLINIC pushed forth administrative advocacy efforts, its network of community-based legal immigration service providers helped those filing for TPS for the first time, as well as those whose applications rejected or denied because of error or ineffective assistance.

- More than half a million Haitians live in the U.S., a fifth of whom likely do so without legal status
- Haitians have a higher rate of naturalization than all other immigrant groups
- More than 50,000 Haitians had applied for TPS as of June 2010

Jacqueline's case
Six years ago, Jacqueline was granted asylum in the U.S. after escaping Haiti where her husband was murdered for political reasons. She was forced to leave her seven-year-old son, Pierre, behind in the care of her aunt. When the earthquake hit, her aunt was killed and Pierre disappeared. After two weeks, Pierre was found alive. Jacqueline filed a humanitarian parole application for Pierre through Catholic Charities of Dallas, where she lived. Her attorney contacted CLINIC's Center for Immigrant Rights for help and CLINIC staff brought the case to the attention of Department of Homeland Security. After surviving the earthquake and living outdoors for three months, Pierre reunited with his mother in Texas on April 13, 2010.
"I have been an attorney for approximately eight years and this is the first training I have attended that has been directly on point and helped me understand complex issues in an easy manner."

"It helped me being able to look at applications and tell right away if the applicant's eligible."

"I learned the steps to applying to become a Legal Permanent Resident through a family relationship."

"Loved the variety of teaching methods! I thought they were all really effective."

These comments from 2010 training evaluations, like hundreds of others, praise CLINIC's in-person and webinar trainings for their professionalism, clarity, and accessibility. CLINIC's training attorneys provide legal immigration training to more than 1,000 non-profit, community-based immigration service providers through phone consultations, multi-day trainings, webinars, broadcast e-mails, and a wide variety of publications. Their success in delivering legal support to this expanding network has made CLINIC widely recognized as the most productive legal support group in the field.

CLINIC offers its affiliates access to an attorney-of-the-day hotline, providing the network with an expert immigration attorney to answer questions on specific cases. In 2010 CLINIC's six training attorneys responded to an average of 20 calls or e-mails every day. Different levels of training are especially designed for attorneys, paralegals, and those seeking Board of Immigration Appeals (BIA) accreditation and are offered on a wide range of topics for beginning practitioners through the advanced legal immigration practitioner who is interested in honing skills and learning more on specific immigration topics. In 2010, CLINIC offered 28 in-person trainings attended by 1,024 people and 26 webinars attended by 3,007 people.

The Annual Convening
The Annual Convening is CLINIC's top training venue. The 2010 Convening was held in New Orleans and was attended by more than 250 people. During the two days, advocates learn the intricacies of this complex and ever-changing field through more than 40 lectures, workshops, and other training formats suited to the attendees' learning style.
Data suggest that immigrant women are more likely to stay in abusive relationships than their U.S. born counterparts.

The odds increase if immigrant women depend on another individual to adjust their immigration status in this country. Undocumented immigrant women and children are also vulnerable to crimes, like forced prostitution or human trafficking, since they may be more reluctant to ask for help from law enforcement for fear of detention or deportation.

For more than five years, CLINIC has been a leader in the Violence Against Women Project with funding from the Department of Justice. The Project helps organizations that aid immigrant survivors of domestic violence, sexual assault, and trafficking get acquainted with immigration law.

In 2010, the Project helped seasoned and less experienced providers in mostly rural areas get recognition and accreditation from the Board of Immigration Appeals, which allows non-attorneys do legal work. CLINIC offered training and mentoring to applying agencies, enabling them to better advocate for the survivors they serve.

The Project coordinates local communities’ and law enforcement’s response to these violent crimes. It gives providers the tools to evaluate scores of cases of victims seeking redress and protection. CLINIC stands with them against rogue or unauthorized law practitioners and helps them develop their own, culturally sensitive.

TO HELP MEET THE NEEDS OF THESE VULNERABLE POPULATIONS, CLINIC:

- Published two manuals entitled *The VAWA Manual: Immigration Relief for Abused Immigrants* and *A Guide for Legal Advocates Providing Services to Victims of Human Trafficking*
- Produced a manual entitled *Immigration Relief for Abused Immigrants* for its member agencies on visa applications
- Advocated with federal immigration authorities for effective implementation of the new U visa for victims of trafficking
As the number of foreign-born Catholics in the United States continues to rise, the number of U.S. men and women dedicating their lives to religious service goes down.

Responding to the need, the Church has reached out to foreign-born religious workers to address the growing need for spiritual and pastoral ministry in the U.S.

CLINIC’s Center for Religious Immigration and Protection assists more than 250 archdioceses, dioceses and religious institutions to bring foreign-born religious workers to the U.S. for education, formation, or ministry.

Recently, CLINIC’s religious immigration attorneys represented a South Korean priest who was lawfully working for the Church in the U.S. and was returning from a visit to the Holy Land. While he had a valid visa to re-enter the U.S., U.S. Customs and Border Protection (Customs) mistakenly stopped him and sent him back to South Korea.

The attorney and CLINIC’s Center for Immigrant Rights worked together with the Customs agency to resolve the error. The priest was issued a new visa and has now returned to the U.S., ministering to those in his parish and diocese.

The Center for Religious Immigration and Protection has a staff of seven attorneys and four legal assistants.

IN 2010 CLINIC’s CENTER FOR RELIGIOUS IMMIGRATION:  
- represented 78 dioceses and 172 religious communities. The majority of their clients are from Mexico, the Philippines and Colombia.  
- had an average of 1,000 active case files that may take a single client from initial entry into the U.S. to serve all the way through naturalization.
The BIA Pro Bono Project Celebrates 10 Years of Service

Securing detained immigrants’ rights to the due process of law has become increasingly challenging.

Without legal representation, detained immigrants have little hope of winning their cases before immigration judges. The Board of Immigration Appeals (BIA) Pro Bono Project was created to address these challenges.

One of the nation’s most successful pro bono initiatives, the BIA Pro Bono Project partners with more than 500 attorneys and law school clinics to provide free legal representation to poor asylum-seekers and long term legal residents, safeguarding the rights of the most vulnerable immigrants.

Since its inception in 2001, CLINIC has staffed and operated this Project, making a difference for hundreds of individuals who have seen their cases achieve favorable rulings all the way to the Supreme Court.

2010 BIA Pro Bono Project Precedent

In the Matter of Pedroza, a case that was first represented by a volunteer attorney through the BIA Pro Bono Project, the BIA found that convictions for crimes involving moral turpitude do not necessarily make immigrants ineligible for cancellation of removal when their term of imprisonment is less than one year and they qualify for the petty offense exception. This case’s decision was important because it offers second chances for individuals with family and community connections in the United States to remain in this country.

An Elderly Immigrant’s Plight

Mr. M.L., an 80-year-old legal resident who lives in California, faced imminent deportation. A judge decided the Mexico native, who suffers from Alzheimer’s disease and is wheelchair bound, deserved this fate for allegedly misleading an immigration officer about a minor conviction in his record. The evidence came from a short conversation carried out in English and without an interpreter. Like thousands of other immigrants, Mr. M.L. appeared at his first court hearing without a lawyer.

BIA Project volunteer attorneys from the O’Toole, Rothwell, Nassau & Steinbach firm and the University of California, Davis School of Law took the case on appeal. In 2010, after a long, hard battle, they were able to convince judges to drop the case and allow Mr. M.L. to stay in the U.S.

"Fortunately, many people who came across this case were able to ensure that our client was not unjustly deported," one BIA Project attorney said.

- In a Department of Justice study, immigrants who had representation through the Project were up to four times more likely to win a favorable decision before the BIA
- In 2010 the project matched 63 cases with 41 pro bono volunteers
Hurricanes Katrina and Rita left a trail of destruction and suffering that affected disproportionately the poor and minority communities around the Gulf Coast.

As a result of the hurricane, many immigrants were left to cope with lost or destroyed documents, impacting pending immigration cases. They were subject to abuse by unscrupulous employers, and unauthorized practitioners of immigration law that charged large sums of money in exchange for false hope.

Four years ago, CLINIC launched the Gulf Coast Immigration Project to protect the rights of immigrants in the areas afflicted by Hurricanes Katrina and Rita and to provide affordable immigration services.

With the financial support of Catholic Charities USA, the project started as a collaboration between CLINIC and five Catholic immigration programs in Louisiana and Mississippi. Throughout its involvement in the project, CLINIC trained 32 staff on program management and immigration law and provided $901,875 in funding to the agencies. That funding supported hiring and training more staff, and increased program capacity. As a result of the funding and CLINIC support, the programs assisted more than 5,800 individuals with a range of immigration matters, including providing representation to detainees.

In 2010, the project was devolved to the local agencies in Baton Rouge, Biloxi, Jackson, Lafayette, and New Orleans, which continue to hire and train more staff and expand the number of services that immigrants in the area sorely need.

**BY 2010, CLINIC’S GULF COAST IMMIGRATION PROJECT HAD PROCESSED:**
- More than 600 visa applications for relatives
- Nearly 300 employment authorizations
- More than 200 applications for naturalization
- More than 4,200 immigration consultations
Nearly two million undocumented immigrant children live in the United States today.

Some came with their parents or relatives. Some came here alone. These children may be fleeing severe abuse or persecution; others may be victims of trafficking for forced prostitution or other illicit activities. Some come just to reunite with their parents or siblings. They all seek a safe haven and hope for justice.

Thousands of these children are detained by the U.S. government every year and later are released into the custody of an adult. These custodians agree to take care of them and to make sure they attend their scheduled hearings before an immigration judge. But custodians may not always fully understand what this responsibility entails, nor do they have all the tools to successfully make sure the kids appear in court and hopefully, receive the relief available to them under our immigration laws.

The Executive Office for Immigration Review (EOIR) awarded CLINIC a national contract in 2010 to help custodians better understand their role. CLINIC’s Legal Orientation Program for Custodians of Unaccompanied Children (LOPC) partners with local non-profits in 13 cities (Atlanta, Boston, Charlotte, Dallas, Harlingen, Houston-Galveston, Los Angeles, Miami, Newark, New York, Philadelphia, San Francisco, and Washington, D.C.) who conduct the orientations and provide a local social service point of contact for the custodians and kids. Many of these partners are CLINIC’s long time affiliates.

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No Child’s Game
Two little girls, ages 5 and 11, were released to their aunt’s husband who agreed to be their custodian. When the children eventually went to live with their mother, the custodian refused to give her their court documents.

The LOPC Project Coordinator spoke with the sponsor, explained his limited responsibilities as a custodian, and the importance of the girls’ court documents to their immigration case. The custodian finally turned the court documents over to an attorney from the University of Tulsa’s law school clinic who agreed to take the case.
CLINIC strives to protect the rights of immigrants within the bounds of the U.S. legal system

In the last three years, the United States has seen a dramatic increase in the numbers of restrictionist, anti-immigrant enforcement laws at a state and local level. Immigration advocates fear that recent policies and practices implemented under these laws criminalize immigrants, instigate racial profiling, and violate their most basic rights.

Immigration enforcement's impact on communities is similar to that of natural disasters—families are displaced and separated; one or more breadwinners may be gone; children become more vulnerable and destabilized; securing enough resources to provide for the basic needs becomes challenging.

In 2010, CLINIC's advocacy staff worked with all 43 state Catholic Conference directors by providing analysis of pending bills, talking points, access to tool kits and other strategies to combat specific pieces of anti-immigrant legislation. Since 2008, CLINIC has been at the forefront of the fight against abusive immigration enforcement practices. CLINIC and partner organizations have developed strategies and resources to help advocates at the state and community levels counter enforcement actions.

Quick Facts about 2010 State & Local Immigration Laws

- 46 legislatures, including D.C., enacted 208 laws and adopted 108 resolutions regarding immigration issues.
- 10 bills related to immigration issues passed state legislatures but were vetoed by governors.
- 37 bills were enacted regarding law enforcement and immigrants.
- 26 bills related to ID/drivers licenses, other license issues, and immigrants were enacted.

The tools

- Advocacy: CLINIC educates the federal government and the public about flaws in our immigration system as well as how and why enforcement takes place.
- Rapid response: When a raid or other large scale enforcement action occurs, CLINIC sets in motion a process to help immigrant communities respond quickly.
- Know Your Rights Materials: CLINIC developed a Tool Kit to educate communities on how to respond to anti-immigrant initiatives and arbitrary law enforcement practices.
- Training & Education: Vast experience has turned into trainings and webinars. Advocates, activists, lawyers, and others touched by enforcement activities get the latest information and practice advisories from top-notch immigration law professionals.
In 2010, CLINIC saw a 7 percent increase in membership

Among CLINIC affiliates, 174 are Catholic organizations and 25 are non-Catholic. While the majority of affiliates are Catholic, the network is expanding to serve faith based and non faith based organizations that seek to provide immigration legal services. Some of the faiths now represented in the network are: Episcopal, Methodist, Coptic Orthodox, Seventh Day Adventist, and Evangelical.

Immigration Management Project
The Immigration Management Project (IMP) was created to help executive and program staff at non-profit immigration programs obtain training on program management, advocacy, case management, fundraising, and other areas essential to running a charitable immigration program.

CLINIC’s Field Support Coordinators (FSCs) work closely with program staff, guiding them through the process of applying for accreditation and recognition from the BIA as well as conducting trainings on program management topics.

In 2010 CLINIC introduced an advanced level immigration program management training available as an on-site and Web-based training. Three on-site management trainings were held in 2010 and attended by fifty-seven individuals.

In addition, CLINIC hosted an inaugural training on capacity building and BIA accreditation and recognition for national groups. The first gathering of national organizations to discuss the role of BIA accreditation and recognition was held in Washington, D.C. and had 13 national networks represented.

National Integration and Capacity Building Project
In 2010 CLINIC launched this project after being awarded a $500,000 grant for national capacity building from the Office of Citizenship. This grant allows CLINIC to provide technical assistance and funding to four affiliates—Catholic Charities of Buffalo, NY; Catholic Charities of Cleveland, OH; Catholic Services of Macomb, MI; and Catholic Charities of Stockton, CA—to establish new programs in English as a Second Language (ESL)/citizenship education and/or naturalization application assistance. The goal of this 18-month project is to expand citizenship services in underserved communities.

- Number of new BIA site recognitions obtained with CLINIC assistance: 25
- Number of new BIA individual recognitions received with CLINIC assistance: 35
### Statement of Activities

#### Revenue, Grants, and Other Support
- Catholic Relief Services Collection: $1,964,159.00
- Grants & Awards: $1,116,570.00
- Revenue & Support: $2,283,320.00
Total: $5,364,049.00

#### Expenses

**Programs**
- Direct Representation: $2,143,369.00
- Emergency Population Representation: $12,342.00
- Diocesan Support: $2,863,716.00
Total: $5,019,427.00

**Supporting Services**
- Fundraising Development: $271,059.00
- Management and General: $673,156.00
Total: $944,215.00

Total Expenses: $5,963,642.00

Net Assets Beginning of Year: $3,965,450.00
Net Assets End of Year: $3,365,857.00

### Statement of Financial Position

#### Assets

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<tr>
<th>Category</th>
<th>2010</th>
<th>2009</th>
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<td>Cash, cash equivalents, certificates of deposits</td>
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<td>Receivables</td>
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<td>Other Assets</td>
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<td>Other Long-Term Assets</td>
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#### Liabilities and Net Assets

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<td>Other Liabilities</td>
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<td>Total Liabilities</td>
<td>$941,165.00</td>
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**Net Assets**
- Total unrestricted: $2,511,872.00
- Temporarily restricted: $853,985.00

Total Net Assets: $3,365,857.00
Total: $4,307,022.00
**2010 Board of Directors**

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U.S. Conference of Catholic Bishops

Ambassador Johnny Young
Migration and Refugee Services, U.S. Conference of Catholic Bishops

**2010 Diocesan Advisory Committee**

CLINIC’s Diocesan Advisory Committee (DAC) provides advice and feedback on the full range of training, support and programmatic activities that CLINIC offers to its affiliates.

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CLINIC Board Member
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Nathaly Perez
Catholic Charities of East Tennessee
Knoxville, TN

Marjean Perhot
Catholic Charities of the Archdiocese of Boston
Boston, MA
2010 CLINIC Staff

CLINIC would like to thank the following staff members, interns, and volunteers who work every day on behalf of vulnerable immigrant populations. Through their tireless efforts CLINIC is able to continue growing as the nation’s largest network of exceptionally trained charitable immigration programs.

OFFICE OF THE EXECUTIVE DIRECTOR
Maria M. Odom
Executive Director
Maura Collins

CENTER FOR IMMIGRANT RIGHTS
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Director
Ann Atalla
Karen Herrling

CENTER FOR RELIGIOUS IMMIGRATION AND PROTECTION
Anne Marie Gibbons
Director
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Virginia Bethel
Rita Dhakal
Tamika Johnson
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Nina McDermott
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Minyoung Ohm
Anne Marie Pierce
Sairah Saeed
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Abeba Fesuh
Juakeita Norman
Jonathon A. Smith
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Lilianna Hernandez
Angelique Israel
Christina Jacquet
Megan Morissette
Roya Niazi
Michelle Paul
Natalia Ricardo
Nupinder (Nikki) Singh
Ruth Steinhardt

Our Mission:
To enhance and expand delivery of legal services to indigent and low-income immigrants principally through diocesan immigration programs and to meet the immigration needs identified by the Catholic Church in the United States.