

Congressional Testimony

ADL Submission for the

House Oversight and Government Reform Committee

at a hearing on

The Trump Administration's Child Separation Policy:
Substantiated Allegations of Mistreatment

Washington D.C.

July 12, 2019



*Working to stop the defamation of the
Jewish people and to secure justice and
fair treatment for all since 1913*

Dear Chairman Cummings and Ranking Member Jordan:

We write to provide the views of ADL (the Anti-Defamation League) in advance of the House Oversight and Government Reform Committee hearing on the “Trump Administration’s Child Separation Policy: Substantiated Allegations of Mistreatment.” Since our founding in 1913, ADL’s mission has been to stop the defamation of the Jewish people and to secure justice and fair treatment to all. We represent a community that has experienced the plight of living as refugees throughout its history. For those of us in the Jewish community – whose parents or grandparents, neighbors, or community members once faced a similarly callous and unwelcoming world in the darkest of times – we feel a particular responsibility to speak out. As a result, we have been advocating on behalf of immigrants and refugees and for sound and just immigration policies for generations.

America’s history is littered with government injustices that have left an indelible mark and continue to stain our society today. When our country has let prejudice and fear predominate over reason and compassion, we falter, with devastating consequences, and are left to apologize to people – and their descendants – who have suffered and to promise to learn from our mistakes and not to repeat them.

Today, as our government is relentlessly attacking migrants escaping violence and seeking refuge in our country, we need not wait for history to judge us or hold us to account to act.

Over the course of our history, our country has made deeply unjust and harmful decisions that still affect us today. Our founders built an independent country on the backs of slaves, which required a civil war to begin to remedy and whose inequities we are still addressing. During World War II, we incarcerated our own Japanese-American citizens and treated them as the enemy. Although our government has now apologized, the impacts on those who were incarcerated, and on our nation, continue to reverberate. During that war, the United States also refused entrance to millions of Jews fleeing the Holocaust. In one instance, we refused safe harbor to the *St. Louis* with its human cargo of desperate Jewish refugees. After being denied entrance to several countries including the United States, the *St. Louis* returned to Europe and many of its passengers died at the hands of the Nazis. But the painful lessons of our closed doors during and after the war helped lead the world and America to establish protocols and commitments for taking in refugees.

We know all too well what happens when people fleeing for their lives have nowhere to turn. Yet today, a cruel Muslim Ban is in effect, tearing apart families simply because of religious animosity and xenophobia, and causing severe damage to our nation’s highest ideals. At the same time, the number of refugee admissions to the U.S. has been slashed to an historic low. These actions – turning our backs on people fleeing for their lives and treating them with cruelty and inhumanity – defy the principles and values we celebrated just last week on our nation’s Independence Day.

Last year, the Administration expanded its “zero tolerance” policy, resulting in thousands of children being ripped out of their parents’ arms. Prior to this policy announcement, data revealed that hundreds of children had been taken from their parents while attempting to cross into the United States in 2018.

At the time, Americans spoke out against this policy, which was eventually rescinded. Yet, many children remain separated from their parents. The trauma of this cruel policy will linger through generations. Moreover, the detention of children has continued apace and we continue to learn more about the inhumane treatment and abuse of children and families in government detention facilities.

Six migrant children have died in U.S. custody since last September. Lawyers who visited migrant children in federal facilities [asked a judge to hold the government in contempt of court for violating the Flores Settlement](#), which put in place safeguards to ensure the health and safety of immigrant children held in government custody. After visiting the children being held at Clint Border Patrol Station in Texas, lawyers discovered that the children were being denied soap, blankets, and adequate access to water, showers, food, sleep, and medical care. A video of an Assistant U.S. Attorney [arguing](#) that guaranteeing hygiene and sleep were not required under *Flores* went viral. At the same time, the Department of Homeland Security’s [own inspector general found](#) that conditions for migrants, young and old, were squalid. This week, there were dozens of [accounts](#) of U.S. Customs and Border Protection agents sexually assaulting and retaliating against children being held in Arizona.

And it is impossible to forget the recent horror, when Óscar Alberto Martínez Ramírez [drowned with his daughter](#) Valeria, who was not even two years old, as they were crossing the Rio Grande River. The family sought asylum in the U.S. but because of the administration’s policy of “metering” – which limits the number of asylum seekers who can apply at ports of entry each day – they faced a long wait at the U.S.-Mexico border and in desperation tried to cross the river to Brownsville, Texas.

Seeking asylum is a fundamental legal right in the U.S. and core to our nation’s principles. However, the administration is undermining that fundamental right and value by also requiring more than 16,500 migrants to [wait in Mexico](#) while their asylum cases are pending in the U.S. – sending them back to dangerous conditions and creating insurmountable barriers to their ability to seek legal resources to pursue their claims.

There are also Administration policies that have torn apart families apart across our country. This includes the termination of Deferred Action for Childhood Arrivals and Temporary Protected Status protections; a proposed rule change that would prevent tens of thousands of mixed-immigration-status families from receiving public housing assistance; looming ICE raids targeted at families; and the targeting of parents for deportation in ways that violate traditional norms of safety.

When our country has faltered in the past, the voices calling for America to do better were drowned out. Today, America cannot let that happen again – these horrors require action.

For ADL, that means [fighting](#) efforts to dismantle refugee and asylum protections; continuing to [expose](#) nativist, extremist voices in the anti-immigrant movement and opposing the confirmation of nominees who seek to bring these views to the federal government; supporting efforts in the courts and legislatures to fight the Administration’s policies, including the [Muslim Ban](#), efforts to [punish](#) so-called “sanctuary cities”, and the [termination](#) of Temporary Protected Status; providing [support](#) to people of Mexican heritage who are victims of hate, bullying, and bigotry in the United States; and building a deep catalogue of curricular content, and lesson plans for tens of thousands of schools across the country that detail how America benefits from the rich diversity of immigrant stories and experiences.

And it means speaking out consistently and loudly against the policies of family separation that you are looking into today. For example, last year, when the policy of “zero tolerance” was first uncovered, ADL [worked with the Hidden Children Foundation](#) to highlight the lasting trauma of forcibly separating children from their parents by sharing the experiences of hidden children of the Holocaust. Now, we ask you to finally end these policies.

We urge you to ensure that our country stops criminalizing asylum seekers, allows refugees in to our country at levels commensurate with the largest refugee crisis since World War II, and treats those seeking asylum with the humanity and dignity they deserve.

Specifically, we encourage you to:

- Prioritize policies that promote child protection and end family separation at the border and throughout our country;
- Stop the Administration’s dismantlement of the U.S. asylum and refugee systems, including ensuring due process protections for asylum seekers and access to bond hearings for all asylum seekers;
- [End the administration’s failed and cruel Remain in Mexico policy](#);
- Ensure that government shelters are state-licensed to meet state law standards for child care facilities and are compliant with the *Flores* settlement agreement requirements;
- Prioritize the use of alternatives to detention to keep families together, including community-based programs operated by nonprofit organizations;
- Ensure the quick release of asylum seekers who pose no public safety risk to the community or flight risk;
- End the use of private prisons and county jails for immigration detention and improve detention standards for facilities housing immigrants;
- Require ongoing independent investigation and oversight of all immigration detention facilities and hold federal agencies accountable when facilities are found to be in violation of standards;

- Address the challenges in the Northern Triangle countries that have caused the surge in migration and people fleeing for their lives in order to help improve human and economic security in these countries and Mexico;
- Increase our country's refugee admissions cap to at least 95,000 per fiscal year; and
- Work together on comprehensive immigration reform.

We thank you for holding this hearing and look forward to working with you to address this humanitarian and human rights crisis.



The
CENTER for
VICTIMS of
TORTURE



**Statement for the Record by the Center for Victims of Torture
and Mount Sinai Human Rights Program**

U.S. House of Representatives Committee on Oversight and Reform

**“The Trump Administration’s Child Separation Policy: Substantiated Allegations of
Mistreatment”**

July 12, 2019

The Center for Victims of Torture (CVT) and Mount Sinai Human Rights Program commend the House Committee on Oversight and Reform for holding a hearing on the Trump Administration’s family separation policy, which created an *actual* crisis at the U.S. southern border. We appreciate the opportunity to submit this statement for the record.¹

Founded in 1985 as an independent non-governmental organization, the Center for Victims of Torture is the oldest and largest torture survivor rehabilitation center in the United States and one of the two largest in the world. Through programs operating in the U.S., the Middle East, and Africa—involving psychologists, social workers, physical therapists, physicians, psychiatrists, and nurses—CVT annually rebuilds the lives of nearly 25,000 primary and secondary survivors, including children. CVT also conducts research, training, and advocacy, with each of those programs rooted in CVT’s healing services. The organization’s policy advocacy leverages the expertise of five stakeholder groups: survivors, clinicians, human rights lawyers, operational / humanitarian aid providers, and foreign policy experts. The vast majority of CVT’s clients in the United States are asylum seekers. Indeed, according to the Department of Health and Human Services Office of Refugee Resettlement, research indicates that 44% of asylum seekers, asylees and refugees now living in the United States are torture survivors.²

¹ For questions or for more information about CVT’s work in this area and on related issues, please contact Andrea Carcamo, Senior Policy Counsel at the Center for Victims of Torture at acarcamo@cvt.org.

² Office of Refugee Resettlement. *Survivors of Torture Program*. Retrieved from <https://www.acf.hhs.gov/orr/programs/survivors-of-torture>

The Mount Sinai Human Rights Program (MSHRP), a pro bono organization within the Icahn School of Medicine, seeks to advance health, dignity, and justice, both locally and globally, by providing pro-bono, trauma-informed medical assessments, mental health evaluations, and access to social services and continuity medical care to U.S. asylum seekers who are survivors of torture and human rights abuses. The program also aims to inspire and educate healthcare professionals, students, and the broader community about the protection and advocacy of health and human rights. Since its launch in 2013, the MSHRP has served over 450 clients from nearly 70 countries and six global regions who are survivors of torture and are seeking asylum. The MSHRP's integrated, multi-disciplinary network of specialized hospital and community-based medical, legal, and social service programs assists survivors of torture and their families in improving their physical and mental health, developing and sustaining social connections, and revitalizing them in order to heal from their experiences and live rich and purposeful lives.

Family Separation Exacerbates the Trauma faced by Families fleeing Persecution

A significant number of the Central American families who come to the United States are survivors of torture,³ and many more are fleeing persecution. Because of the nature of trauma, oftentimes children who accompany traumatized parents experience symptoms as secondary survivors (even if they have not been directly harmed previously). These highly-traumatized populations are particularly vulnerable to the adverse effects of detention and separation from their loved ones.

The results of a clinical study of detained children conducted by the Mount Sinai Human Rights Program, “demonstrate that detained children, and especially those previously separated from their mothers, experience significant psychological distress.”⁴ The study concludes that “[c]hildren who had been separated from their mothers demonstrated a significantly greater number of emotional symptoms and total difficulties when compared to detained children who had not been separated from their mothers, suggesting that separation is associated with an increase in psychological distress.”⁵

According to Susan Jasko MSW, LICSW, a CVT therapist with over 20 years of clinical experience working with children and families:

³ Meyer and Pachico (Feb 1, 2018). Washington Office on Latin America. *Fact Sheet: U.S. Immigration and Central American Asylum Seekers*. Retrieved from <https://www.wola.org/analysis/fact-sheet-united-states-immigration-central-american-asylum-seekers/>.

⁴ MacLean, Agyeman, et al. (June 2019). *Social Science & Medicine* Vol 230. *Mental Health of Children held at a United States detention Center*. Retrieved from <https://www.sciencedirect.com/science/article/abs/pii/S0277953619302138?via%3Dihub>

⁵ MacLean, Agyeman, et al. (June 2019). *Social Science & Medicine* Vol 230. *Mental Health of Children held at a United States detention Center*. Retrieved from <https://www.sciencedirect.com/science/article/abs/pii/S0277953619302138?via%3Dihub>

“When children are young, they are bonding with their parents, and good bonding leads to positive relationships with other people in adolescence and adulthood. Breaking that bond can have consequences in the child’s ability to socialize with others. When children come from an area where they experienced violence, it teaches them that the world is not safe. Then, when they are separated from their parent, this idea is solidified, which can have a profound effect on the development of the child. If a child lives in a state of trauma, as children fleeing conflict areas that are separated from their families do, it can affect their brain development at a biological level as well.”

Many of the children Ms. Jasko has treated over the years were struggling with separation from or loss of parents, and all presented severe symptoms, including nightmares, fears, anxiety and depression.

Ms. Jasko’s experience is far from unique. Indeed, over 20,000 medical and mental health professionals and researchers working in the United States (including Dr. Andrea Northwood, CVT director of client services), have previously made clear through a signatory statement—directly to the DHS—that “[t]he relationship of parents and children is the strongest social tie most people experience, and a threat to that tie is among the most traumatic events people can experience.”⁶ They further explained that separating a child from a parent causes an effect known as adverse childhood experience (ACE), which can lead to multiple forms of impairment and increased risk of serious mental health conditions including post-traumatic stress disorder (PTSD).

Disturbingly, this information was not new to officials from the Trump administration: on July 31, 2018, Commander Jonathan White, formerly of the Department of Health and Human Services, testified that he raised the very real concern that separating families could cause long-term emotional and psychological effects on children when the policy was presented to him before its implementation.⁷

While the damage to children must be central to this hearing, we urge Members also to appreciate the harm family separation has caused, and continues to cause, to affected parents. At CVT, 67 percent of U.S. based clients—refugees and asylum seekers from around the world—have been separated from their families, sometimes by force and other times by necessity when clients must flee without warning to escape imminent danger. During her time at CVT, in addition to her work with children, Ms. Jasko has also treated adult clients seeking asylum who had no option but to leave their country without their children. “The uncertainty of not knowing

⁶ Physicians for Human Rights (June 14, 2018). *Letter to Secretary Nielsen and Attorney General Sessions*. Retrieved from https://s3.amazonaws.com/PHR_other/Separation_Letter_FINAL.pdf.

⁷ C-Span (July 13, 2018). *Public Health Service Commander Warned Against Family Separation*. Retrieved from <https://www.c-span.org/video/?c4742969/public-health-service-commander-warned-family-separations>.

when they will next see their children makes me worry about my clients,” she says, “as they express feelings of hopelessness and suicidal thoughts.”

Family Separation is a Technique Utilized by Tyrants and Other Oppressors That the United States Has Long Condemned

CVT has served hundreds of children, some of whom were subjected to separation as a tool to coerce their parents. For example, Jana, a 10-year-old Syrian girl, endured forced separation from her family and imprisonment before crossing the Syrian-Jordanian border seeking safety. She had been detained—along with other children—for nearly a month in an attempt to force her father to turn himself in. He did, and he was murdered. Saad’s brother, a young boy, was held for two weeks in prison and tortured. The militia sent pictures of his abuse to Saad’s family with a message warning them to leave Iraq. When his little brother was returned to them, Saad and his family fled to Jordan.

This is what tyrants, dictators, and other oppressors do. It is not how democracies are supposed to behave. And yet, the Trump Administration embraced the practice of separating children from their parents admittedly as a deterrent: to dissuade vulnerable people from seeking safe haven in the United States at all, and for those it did not entirely deter then to coerce them into forgoing their right to seek asylum and to sign a deportation order, which for many would return them to countries and circumstances where they face significant risk of further persecution, violence, or even death.⁸

Family separation of this kind is not only immoral, it is also unlawful. Most directly, Article 31 of the Refugee Convention prohibits contracting states from “impos[ing] penalties” on the basis of how a refugee arrived to the U.S.—whether through illegal entry, presence, or without authorization. Indeed, the international community has recognized the importance of a child’s bond with a parent, for example through Article 9 of the United Nations Conventions on the Rights of the Child (CRC), 196 countries have agreed that they “shall ensure that *a child shall not be separated from his or her parents against their will*, except when competent authorities subject to judicial review determine, in accordance with applicable law and procedures, that such separation is necessary for the best interests of the child.”⁹ Although the U.S. has not ratified this

⁸ Van Schaak, Beth (Nov 27, 2018). Just Security. *New Proof Surfaces that Family Separation was About Deterrence and Punishment*. Retrieved from <https://www.justsecurity.org/61621/proof-surfaces-family-separation-deterrence-punishment/>; Bernal, Rafael (June 19, 2018). The Hill. *HHS Official Says Family Separation Policy will ‘have Deterrence Effect.’* Retrieved from <https://thehill.com/latino/393000-hhs-official-says-family-separation-policy-will-have-deterrence-effect>.

⁹ United Nations Human Rights, Office of the High Commissioner (Sept 2, 1990). *Convention on the Rights of the Child*. Retrieved from <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>.

treaty (the only country in the world not to have done so), as a signatory the U.S. is bound to not engage in actions that “defeat” the CRC’s “object and purpose.”¹⁰

The United States must not underestimate how its actions reverberate globally; in particular the implicit permission that U.S. practice might give other nations to act the same. The United States cannot maintain a credible global leadership role in the human rights sphere if separating families to deter asylum seekers is the kind of example the executive branch is going to set.

Conclusion and Recommendations

The separation of families is an actual crisis at our Southern border, one that has had a profound impact on the lives of some of the world’s most vulnerable people, torture survivors among them. The practice must be stopped, those responsible should be held accountable, victims deserve redress, and preventive mechanisms need to be adopted. More specifically, we urge the executive branch and Congress to take the following actions, respectively:

Executive branch:

- Immediately reunify all families.
- End the practice of separating families to deter individuals from coming to the United States and seeking refuge.
- Ensure family separation determinations are not arbitrary, but instead made by child welfare professionals where the child’s safety is the primary consideration.
- Whenever there is an appropriate determination to separate a child from a parent for the child’s safety, ensure there is an adequate system to track the family and their relationship to each other.
- ICE and CBP must facilitate communications between a child and a parent who have been separated.
- Provide appropriate mental health assessment and treatment for detained children.

Congress

- Conduct rigorous, ongoing oversight of family separation and its consequences, with an immediate focus on ensuring the executive branch reunifies families and discontinues the practice of arbitrary family separation.

¹⁰ United Nations Treaty Collection, Chapter XXIII (May 23, 1969). *Vienna Convention on the Law of Treaties, Article 18*. Retrieved from https://treaties.un.org/pages/ViewDetailsIII.aspx?src=TREATY&mtdsg_no=XXIII1&chapter=23&Temp=mtdsg3&clang=en.



CWS Statement to the U.S. House Committee on Oversight and Reform, pertaining to its [hearing](#) “The Trump Administration’s Child Separation Policy: Substantiated Allegations of Mistreatment” on Friday, July 12, 2019

As a 73-year old humanitarian organization representing 37 Protestant, Anglican, and Orthodox communions and 25 refugee resettlement offices across 17 states, **Church World Service (CWS) urges Congress to recognize the importance of providing children access to life-saving protection and humane treatment at the border.** Children, families, women and men are fleeing violence, gang conscription, trafficking and sexual exploitation in the Northern Triangle. Individuals seeking safety within the region and in the United States have clear and compelling protection concerns and the United States has moral and legal obligations under [international](#) and [U.S. law](#) to see that individuals seeking protection are not returned back into the hands of traffickers and others who seek to exploit them.

CWS remains gravely concerned by reports of ongoing family separation. A [recent report](#) has uncovered evidence that DHS has continued the systemic practice of child separation, long after the [June 20, 2018 Executive Order](#) that supposedly ended this harmful policy. DHS officials continue to illegally separate children from their parents based on faulty and unproven claims of criminal activity or other characteristics that are unrelated to a parent’s ability to care for their child. This practice neglects due process and is extremely harmful to both children and their parents. CWS urges Congress to see the administration end family separation, eliminate criminal prosecution for migration-related offenses, and ensure swift family reunification.

CWS is strongly opposed to immigrant and family detention and any proposal that would undermine *Flores* protections. Detention in DHS custody is plagued with systemic [abuse](#) and inadequate access to medical care. Numerous reports have revealed the systemic human rights abuses, [sexual assaults](#), and dehumanizing conditions that exist in the detention facilities overseen by the current administration. These exceedingly overcrowded detention centers are [unsanitary, unhealthy, unsafe](#) and are leading to extreme, and [sometimes fatal](#), mental and physical health outcomes for children. These conditions and abuses are unconscionable and are not a result of a lack of funding or resources, but rather, are the result of [intentional policies](#) put in place to deter children and families from seeking protection. The American Association of Pediatrics has found that family detention facilities [do not meet basic standards](#) for children and [“no child should be in detention centers or separated from parents.”](#) CWS demands that Congress reject any proposal that would expand family detention or violate the *Flores* agreement’s long-standing consensus that children should not be detained for longer than 20 days. CWS also urges Congress to cut funding for detention, deportations, and border militarization - and to exert robust oversight over DHS detention centers to end harmful abuses.

CWS is equally troubled by any proposal that would weaken or eliminate provisions in the *Trafficking Victims Protection Reauthorization Act (TVPRA)*, which provides important procedural protections for unaccompanied children in order to accurately determine if they are eligible for relief as victims of trafficking or persecution. Weakening existing legal protections, especially for children, undermines the United States’ moral authority as a leader in combating human trafficking and increases vulnerabilities for trafficking victims by curtailing access to due process, legal representation, and child-appropriate services. CWS urges the administration and Congress to affirm the right of all people to seek protection and ensure that individuals seeking safety are not returned to their traffickers and exploitation.

CWS urges the administration to rescind its April 2018 information-sharing [agreement](#) between DHS and the Department of Health and Human Services (HHS) that turns HHS into an immigration enforcement agency. This practice prolongs family separation and results in children remaining in unsafe and unsanitary detention facilities for far too long. The agreement “requires HHS to share the immigration status of potential sponsors and other adults in their households with DHS to facilitate HHS’s background checks.” The population of detained unaccompanied children [ballooned](#), and the Office of Refugee Resettlement (ORR) at HHS continues to share information about all potential sponsors with DHS, needlessly prolonging child detention since sponsors are afraid to come forward out of concern about immigration consequences for themselves or a loved one. We demand that the administration immediately revoke this agreement so that children can be released as soon as possible and sponsors are not forced to choose between caring for their children or risking deportation.

Congress and the administration should utilize community-based, least-restrictive alternatives to detention (ATDs) that [connect individuals with family members, faith-based hospitality communities, and local services](#) to help them navigate the legal system. The Family Case Management Program (FCMP) is [effective and less expensive](#) than detention, connecting people with legal counsel, providing case supervision, and helping with child care. The program is [99% effective](#) at having families show up for check-ins and court appearances and also ensures departure from the United States for those who are not granted protection.

Our faith traditions call us to welcome the stranger. CWS calls on the administration to stop detaining children and families - and drastically improve conditions for asylum seekers, unaccompanied children, and other vulnerable populations in our care so that all people are treated with the inherent dignity they deserve.



Recommendations to Combat Abuse and Harm of Children in CBP Custody

July 11, 2019—Troubling [new reports](#) reveal that unaccompanied children, many of whom have fled to the U.S. in search of protection, are facing abusive treatment by Customs and Border Protection (CBP) agents charged with their care immediately after arriving in the U.S.

Children's reports of sexual assault, verbal and emotional abuse, threats, and retaliation by agents during their time in CBP custody are horrific. The [accounts](#) of prolonged detention of children in inhumane, unsanitary, and unsafe conditions at CBP facilities in Clint, Texas, and elsewhere are unacceptable. KIND has long advocated for reform and accountability to ensure the safety and well-being of children in our government's custody.

No child should face harm or abuse while in our government's care.

CBP must immediately take concrete steps to:

- ensure safe conditions and humane and appropriate treatment for all children, and hire child welfare professionals to care for the children in its custody
- fully investigate and hold accountable those responsible for abusing or harming children
- ensure the prompt transfer of unaccompanied children to the care and custody of the Office of Refugee Resettlement (ORR), as provided for by federal law.

What can be done to ensure this never happens again?

For many years, children, human rights monitors, and the government itself have reported inappropriate conditions for and treatment of children in CBP custody. CBP hold rooms, which are designed for only short-term use, are wholly unsuited to the care of children. CBP agents, who have expertise and training in law enforcement rather than child welfare, are similarly unprepared to provide children with necessary and appropriate care. These problems, which have long been documented, have too long been met with little to no accountability.

When unaccompanied children are held in CBP custody for weeks and months--in violation of federal law requiring their transfer to ORR within 72 hours--the likelihood of harm and abuse only increases.

KIND urges the following actions to ensure the safety and protection of *all* children in CBP custody:

1. Ensure that CBP hires trained and licensed child welfare professionals for all facilities holding children
2. Create systematic third-party oversight and public reporting in all federal facilities holding children, including Immigration and Customs Enforcement (ICE), CBP, and ORR, to ensure government compliance with minimum standards—complementing the critical role performed by *Flores* counsel and monitors
3. Ensure all allegations of abuse are referred to the FBI for investigation and prosecution
4. Ensure children are notified of their rights when in CBP custody.

What can be done for children who have suffered abuse?

Many unaccompanied children have fled to the U.S. in search of protection from threats to their lives, abuse, or neglect from which their countries cannot or will not protect them. Further victimization of these children at the hands of the U.S. government is abhorrent and must be met with immediate accountability and efforts to ensure children receive the protection, services, and assistance they need and deserve.

1. Every serious allegation should be reported to the FBI and local law enforcement
2. Every child who reports having suffered abuse should be referred to an attorney
3. Federal officials should prioritize requests for certifications for crime victim visas by child survivors of abuse
4. Children should be provided post-release social and legal services after they leave federal custody to support their healing process from trauma, harm, and abuse.

How can I help to ensure the safety of children in CBP custody?

Members of Congress and the public can support legislation that requires safe and appropriate conditions in detention facilities.

To this end, KIND urges support of the following legislation:

- The [Northern Triangle and Border Stabilization Act of 2019](#) (H.R. 3524) requires better treatment of detained children at the border, including by setting standards for CBP facilities and directing the hiring of child welfare professionals.
- The [Child Trafficking Victims Protection and Welfare Act](#) (S. 661) provides for the safe and appropriate treatment of children in CBP custody by requiring at least one licensed child welfare professional at ports of entry and Border Patrol stations that regularly hold a large number of children. The bill also provides minimum standards of care for children in CBP custody.

KIND further urges Congress to reject calls by the Administration and legislative proposals that would weaken or eliminate critical protections for children provided for by the Trafficking Victims Protection Reauthorization Act (TVPRA).

For more information, please contact Jennifer Podkul, 202-824-8692, jpodkul@supportkind.org

House Committee on Oversight and Reform
Hearing on “The Trump Administration’s Child Separation Policy:
Sustained Allegations of Mistreatment”
July 12, 2019



ZERO TO THREE
Early connections last a lifetime

Statement for the Record of Myra Jones-Taylor, Chief Policy Officer, ZERO TO THREE

Chairman Cummings, Ranking Member Jordan, and Members of the Full Committee:

On behalf of ZERO TO THREE, I want to express our deep appreciation to the Committee for holding this hearing. Together with the Subcommittee on Civil Rights and Civil Liberties hearing on “Kids in Cages: Inhumane Treatment at the Border” on Wednesday, and the Full Committee hearing on child trauma in general yesterday, this hearing helps keep the issue of children experiencing trauma and therefore the heightened impact of the ongoing, unconscionable treatment of children at our country’s southern border, in the consciousness of your colleagues and the public. In recent weeks, families, advocates, policymakers and Administration personnel have given us a window through the walls of the migrant detention camps, again focusing national attention on the life-altering experiences of families with children crossing the border. As we learn more about the young children being held in detention, where they are separated from their families and there are reports of grossly inadequate care, ZERO TO THREE is compelled to reiterate what decades of research on child trauma clearly spell out about its impact on young children.

Quite simply, subjecting young children to detention, often combined with separation from trusted adults and unhealthy living conditions, is tantamount to child abuse and could lead to lifelong harm. When children are put in situations like those we are seeing at the border, stress hormones flood their brains, disrupting their neurological circuitry in ways that profoundly affect their short- and long-term physical and emotional health, and their ability to form relationships and learn.ⁱ The science tells us that every second of delay is a million neural connections undermined in a baby’s brain. Babies need our urgent attention and action now.

Babies develop and learn within the context of their earliest relationships and experiences with the trusted adults around them. As babies, the ways in which we are held, talked to, and cared for teaches us about who we are and how we are valued – experiences that profoundly shape the people we will become. These experiences and relationships influence the foundational brain architecture on which all later learning will rest.

The period of extraordinary development that takes place in the first three years of life is also one of great vulnerability. Infants and toddlers who do not receive the positive experiences they need for strong development in the first few years of life, who are stripped of the protective relationships and environments that can buffer them from adverse experiences, can rapidly fall behind. This is precisely the situation in which very young children at the border find themselves: the actions of representatives of the United States government are placing their early development and long-term wellbeing at grave risk.

There is a common misperception that babies are too young to be affected by the events around them—that they do not notice when they are separated from their parents who are at the center of their world and placed in the care of a stranger. In truth, at the very foundation of babies’ development, intense trauma almost inevitably creates physiological damage to their brains and emotional damage

that they will carry into the future – particularly if their needs are not met appropriately and immediately. Out of deep concern for young children, families, and the future of our country, ZERO TO THREE remains in strong, informed opposition to any practice that causes trauma and long-term harm to children. As we apply our research-based lens to current immigration practices and debate, we have three priorities that we urge Congress to consider in formulating a response to this tragic situation:

Detention is not a humane or acceptable environment for babies and toddlers.

No amount of time in detention is safe for young children. Research has consistently shown that even a short amount of time in detention is harmful to children, particularly those who have already experienced trauma in their home countries or during their journey.ⁱⁱ Evaluations of children who have been detained, even with their families, reveal alarming outcomes for young children, with many displaying developmental delays and signs of emotional disturbance. The long-term harm of family detention on children is well known. Research has shown that children in detention are more susceptible to Post-Traumatic Stress Disorder (PTSD) symptoms as compared to adults.ⁱⁱⁱ Further, researchers have found regressions in child development, suicide attempts, and high levels of anxiety and depression in children in detention.^{iv} While even brief periods of detention impact children’s functioning, worsening mental health symptoms increase the longer a child is in detention.^v

In addition, the contention that children are only temporarily being held in camps does not change the impact on their development. Sending infants and toddlers to institutional detention is detrimental to their health and well-being. This past month, there were reports of toddlers at the border without diapers and teenage mothers wearing clothing stained with breast milk, indicating that children, including babies, are not being provided basics of hygiene and care.^{vi} Beyond these violations to basic needs, detention places children in an environment of confinement, deprivation of stimuli, and developmentally inappropriate and often harsh treatment, which cause severe stress for both the children and their caregivers. If there are no protections for children’s care, infants, toddlers and their families placed in detention facilities are entirely vulnerable to protracted, unlimited stays, abuse, and neglect.

Families who have been separated must be reunified immediately, and the practice of separating children from their parents must not continue.

While the practice of separating children from their families was prohibited over a year ago via an Executive Order, it is evident that this practice has continued. According to recent reports, very young children are still being placed in detention camps, even being removed from the trusted adults who care for them, and reportedly being turned over to unrelated older children, or border patrol agents for their care.^{vii}

These children experience trauma twofold. First, children are separated from the trusted adults to whom they are attached. While the rapid and foundational development of infants and toddlers makes them particularly vulnerable to trauma, families offer an essential buffer to those experiences. When young children, particularly those under three, are separated from their parents after crossing the border, that primary bond is severed. This involuntary separation is traumatic and creates stress reactions that can be toxic to the developing brain. Then, this trauma is compounded when children are

placed in the care of strangers that are, by all reports, ill-equipped to nurture their sense of safety, much less their healthy development. The broad consensus of researchers and practitioners is that to continue to separate families in this way is tantamount to child abuse.

The science of child development tells us that young children cannot be detained, with or without their families, without experiencing significant harm. Children must not be incarcerated, and those that have been separated from their families must be immediately reunited with their caregivers, providing them with the close relationship needed to cope with and recover from the trauma they have undergone. But this recovery requires expert support.

Young children who have been held in detention and/or have been separated from their families need access to voluntary infant and early childhood mental health services and support.

Further compounding the risks to their well-being, babies and their families who are in, or have experienced detention, may face inadequate access to services including the medical and mental health care they so desperately need. Children and families, babies and expectant mothers in particular, need specialized medical and mental health services in order to ensure healthy growth and development. Access to these types of specialized, individually tailored services is generally not possible in the context of detention, and the unlikelihood of appropriate mental health care applies particularly to infants and toddlers. The lack of access to care likely continues after detention without special efforts to connect children and families to appropriate services.

Decades of psychological and brain research have demonstrated that adverse experiences during this critical period of early childhood can have profound immediate and long-term harm on child development.^{viii} This type of trauma, particularly when not addressed by an experienced and trusted clinician, has severe implications for both physical and emotional health over time, increasing young children’s risk for learning difficulties, problems forming relationships, and adult health problems. We underscore that the experience of detention itself will be the cause of much of this trauma, bringing with it short- and long-term harm.

Caregivers, who are also deeply psychologically and physiologically impacted by their recent experiences, also need specialized support to provide their young children with the care they need. When families have been separated, reunification itself may be difficult, as separated young children do not have the capacity to understand what has transpired and may feel abandoned by their parents. Reports have confirmed what Infant and Early Childhood Mental Health (IECMH) specialists knew to be true from the beginning – that families separated at the southern border report that their children are suffering deep emotional wounds.^{ix} The experience of involuntary family separation is one that is incomprehensibly traumatic – for both the caregiver and the child. This is complex work, requiring a focus on both the parent and child, and requiring specialized expertise and developmentally appropriate, evidence-based support rooted in a deep understanding of IECMH.

Conclusion

Detention of young children at the border is unacceptable. As experts in early childhood development, we know that every second matters for the well-being of babies and toddlers, both now and in their

future lives. Appropriate support and treatment is urgently needed, and time is truly of the essence for the protection and care of young children’s rapidly developing brains.

In accordance with internationally accepted child rights, immigrant and refugee children should be treated with dignity and respect and should not be exposed to conditions that may harm or traumatize them. The practice of detaining children directly contradicts those very principles. While we focus on young children, we also note the reports of horrific conditions for older children as well and deplore the treatment they receive that seems devoid of consideration of their humanity and vulnerability.

For families with children, there are proven, cost-effective alternatives to detention that maintain family unity and protect the best interests of vulnerable children, including tested community-based case management programs. Most recently, in 2013, Lutheran Immigration and Refugee Services (LIRS) entered into an agreement with Immigration and Customs Enforcement (ICE) to screen vulnerable immigrants for release from detention and enrollment in LIRS’ Community Support Initiative. Between June 2013 and November 2014, 44 out of 46 formal referrals were in complete compliance – an appearance rate of 95.6%. These holistic programs that offer case management services, and facilitate access to legal counsel as well as safe, affordable housing have been shown to substantially increase program compliance without the extensive and expensive use of electronic monitoring.^x

We cannot stress the urgency of this situation enough. Even if reports of reductions in numbers of children in Border Patrol detention facilities are true, the children seem to have melted away with no assurance that their mental and physical health needs have been, or will be, met. Accordingly, we urge measures that flood existing facilities with pediatric and mental health practitioners and ensure children who are transferred to the custody of the Department of Health and Human Services or reunited with family have access to similar services. We understand all too well the lack of awareness about infant and early childhood mental health needs and have developed a list of IECMH resources in every state (<https://www.zerotothree.org/resources/2384-supporting-young-children-experiencing-separation-and-trauma>). We urge the Congress and all Americans to demand that this inhumane treatment of babies, older children, and adults at the border cease, and the effective alternatives mentioned above be initiated.

As we examine the treatment of babies at the border, we must use what decades of science and research tell us to inform policy and practice decisions *right now*. Their future – and the best interests of our nation – depend on it.

Thank you again for your time and commitment to infants, toddlers, and their families.

Sincerely,



Myra Jones-Taylor, Ph.D.

Chief Policy Officer, ZERO TO THREE

ⁱ National Scientific Council on the Developing Child. (2005/2014). Excessive Stress Disrupts the Architecture of the Developing Brain: Working Paper 3. Updated Edition. <http://www.developingchild.harvard.edu>

ⁱⁱ Mares, S. (2015). Fifteen years of detaining children who seek asylum in Australia – evidence and consequences. *Australasian Psychiatry*, 24(1), 1-14. doi:10.1177/1039856215620029

ⁱⁱⁱ Triggs, G. (2015). The Forgotten Children: National Inquiry into Children in Immigration Detention 2014. *The Medical Journal of Australia*, 202(11), 553-555. doi:10.5694/mja15.00551

^{iv} Acer, E., Byrne, O. (2015). Family Detention: Still Happening, Still Damaging. *Human Rights First*.

^v Mares, S. (2015). Fifteen years of detaining children who seek asylum in Australia – evidence and consequences. *Australasian Psychiatry*, 24(1), 1-14. doi:10.1177/1039856215620029

^{vi} 'There Is a Stench: Soiled Clothes and No Baths for Migrant Children at a Texas Center. (2019, June 25). Retrieved from <https://www.nytimes.com/2019/06/21/us/migrant-children-border-soap.html>

^{vii} Ibid.

^{viii} Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., . . . Marks, J. S. (1998). Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults. *American Journal of Preventive Medicine*, 14(4), 245-258. doi:10.1016/s0749-3797(98)00017-8

^{ix} Immigrant families struggling with trauma of separation. (2018, September 7). Retrieved from <https://www.apnews.com/cf1c03a8e9ae4969aa8e331862d6897b>

^x United States Government Accountability Office. (2014). Alternatives to Detention; Improved Data Collection and Analyses Needed to Better Assess Program Effectiveness. <https://www.gao.gov/assets/670/666911.pdf>