

STATEMENT FOR THE RECORD To the Subcommittee for Civil Rights and Civil Liberties, House Committee on Oversight and Reform July 9, 2019

Amy E. Kahn, Psy.D.

I am writing as a Clinical Psychologist and Trauma Expert, to convey my concern about the Detention Centers where immigrant children and adults are being held. I am a psychotherapist and a teacher of therapists for The Trauma Recovery EMDR Human Assistance Program (Trauma Recovery/HAP). I have been providing psychotherapy to recently arrived immigrants, and have conducted trainings for therapists who work at the border in El Paso. It is based on these recent experiences and my 40 years of providing psychological treatment to hundreds of victims of trauma, that I can state that the Detention Centers are inflicting unnecessary harm on those being held. The conditions we know to exist include the separation of children from parents, the extremely crowded rooms, the lack of clean drinking water and bathing facilities, and the lack of adequate food. These are causing trauma for these immigrants that is likely to be long lasting.

The current conditions in the Detention Centers are having a devastating impact. The separation of young children interrupts their ability to attach and feel connected to other children and adults. This leads to reduced regard for the feelings of others, rage and impulsivity, depression and eventually could cause a lack of empathy and criminal behavior.

A psychologist working on the border told me that she saw a group of teenage boys who had frozen expression on their faces. She cried and said, "They don't even act like children." A frozen expression is an indication of being wary and afraid, and possibly numbing oneself so as not to become overwhelmed by feelings of terror.

Living in a state of fear causes neurological changes that lead to anxiety, panic disorders and PTSD. We know that when young children experience even an hour of feeling terrified, the release of the stress hormone Cortisol increases, and elevated levels can be detected even a day later.

Another psychologist described how she was called in to a Detention Center to evaluate a woman who appeared to be psychotic. The woman only spoke an indigenous language from Central America, and was hysterical. It soon became clear that this woman was separated from her infant, and had no understanding of where the infant was taken or when she would see her again. She wasn't psychotic; she was acting as any mentally healthy mother would act under the circumstances.

It is our hope that this situation will end as soon as possible. Every day is creating psychological damage to these detainees, causing unnecessary suffering. It is my suggestion and plea that a safer living environment be created and a more methodical process for registering for asylum be developed. For example, in Obama's Family

Case Management Program (FCMP) children and parents were released to family members and sponsors in the US who provided acceptable living arrangements for them. Case managers were hired who aided immigrants to settle in a safe place and start their legal case for being granted asylum. Under this plan, 99% showed up for their asylum hearings.

I appreciate your consideration of my statement and response to the situation at the border. I can be reached at:

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Gratefully submitted, Amy E. Kahn, Psy.D.