Physicians for Human Rights



"You Will Never See Your Child Again"

The Persistent Psychological Effects of Family Separation

Executive Summary

February 2020





A seven-year-old girl from El Salvador so fearful of losing her mother again that she cannot sleep alone, has panic attacks that once landed her in the hospital, and can only go to school if her mother remains in the classroom with her.

A Honduran father so devastated after his son was taken from him that, a year later, he still has daily flashbacks, crying spells, and bouts of sweating, shaking, rapid heartbeat, and headaches.

A 29-year-old mother from Honduras, detained in Texas while her daughter was sent to a facility in New York, who is depressed, cannot concentrate or engage with other people, and feels overwhelmed and consumed by sadness.

A three-year-old boy whose father was separated from him while he slept on the floor of a detention center who has nightmares, paces anxiously, and is frightened of strangers, convinced that they will once again take him from his father.

These are just a few of the more than 5,500 cases of migrant parents and children who fled traumatizing violence and persecution in their home countries, only to be cruelly separated by authorities at the U.S. border. Even after being reunited, all struggle with PTSD, depression, and/or anxiety.

Executive Summary



The U.S. government's treatment of asylum seekers through its policy of family separation constitutes cruel, inhuman, and degrading treatment and, in all cases evaluated by PHR experts, constitutes torture.

The Trump administration's crackdown on asylum seekers has included the brutal intimidation tactics of family separation and family detention. These policies have profound health implications for migrant adults and children and violate basic human rights, including the right to be free from torture and enforced disappearance.

A new Physicians for Human Rights (PHR) investigation, based on psychological evaluations of asylum-seeking parents and children who were separated by the U.S. government in 2018, found pervasive symptoms and behaviors consistent with trauma; most met diagnostic criteria for at least one mental health condition, such as post-traumatic stress disorder (PTSD), major depressive disorder, or generalized anxiety disorder consistent with, and likely linked to, the trauma of family separation.

PHR evaluated 17 adults and nine children who had been separated under the policy for an average of 60-69 days; all but one child had been reunited at the time of evaluation. The investigation sought to explore two key questions: 1) What traumatic experiences did these asylum seekers report in their home countries, during their journey to the United States, and during and after their apprehension at the border?; and 2) What were the psychological effects associated with the forced separation of children from their parents and other family members after entry into the United States? The rich and intense narratives of our illustrative cohort help shed light on the experiences of separated families.

Due to targeted acts of violence in their home countries, all parents arrived at the U.S. border having already been exposed to trauma – most often as victims of gang activity – from death

Physicians for Human Rights February 2020 phr.org 1

Executive Summary

continued

threats, physical assault, relatives killed, extortion, sexual assault, or robbery. All parents expressed fear that their child would be harmed or killed if they stayed in their home country. In almost all cases, their children had already faced severe harm before fleeing – gangs drugged, kidnapped, poisoned, and threatened children, including threats of death, violence, or kidnapping, if they or their parents did not comply with the gang's demands. Parents were confident that the journey to the United States would result in protection for their children.

When they arrived in the United States, however, parents reported that immigration authorities forcibly removed children from their parents' arms, removed parents while their children slept, or simply "disappeared" the children while their parents were in court rooms or receiving medical care. Almost all reported that immigration authorities failed to provide any explanation as to why they were being separated, where their family members were being sent, and if or how they would be reunited. In addition, the asylum narratives documented instances of four parents who were taunted and mocked by immigration authorities when asking for the whereabouts of their children. Half of the parents interviewed by PHR clinicians reported poor conditions at the detention facilities where they were held, and the children also reported being mistreated or living in poor conditions while detained and while in foster care.

PHR clinicians chronicled that nearly everyone interviewed exhibited symptoms and behaviors consistent with trauma and its effects: being confused and upset, constantly worried, crying a lot, having sleeping difficulties, not eating well, having nightmares, being preoccupied, having severely depressed moods, overwhelming symptoms of anxiety, and physiological manifestations of panic and despair (racing heart, shortness of breath, and headaches), feeling "pure agony" and hopelessness, feeling emotional and mental anguish, and being "incredibly despondent." The evaluating clinicians noted that the children

"Every night I would go to bed alone, I was sad, and I would cry by myself."

A six-year-old Guatemalan girl who was separated from her mother and suffers from PTSD, separation anxiety disorder, and depression.

exhibited reactions that included regression in age-appropriate behaviors, crying, not eating, having nightmares and other sleeping difficulties, loss of developmental milestones, as well as clinging to parents and feeling scared following reunification with their parents.

The vast majority of mental health diagnoses given by the evaluating clinicians and depicted in the expert affidavits produced for immigration proceedings were highly consistent with these parents' and children's reports of their traumatic experiences in detention and family separation. At the same time, several clinicians commented on the likelihood that the present symptoms were exacerbated by pre-existing trauma from events and incidents in the asylum seekers' home countries. According to PHR's clinicians, most individuals (both adults and children) met diagnostic criteria for at least one mental health condition, such as post-traumatic stress disorder, major depressive disorder, or generalized anxiety disorder.

PHR's experts noted that all the individuals they interviewed demonstrated appropriate emotional reactions and did not show signs of exaggerating their plight, and uniformly described the asylum seekers as credible.

This study's findings provide evidence of the adverse physical and mental health effects linked to the Trump administration's family separation policy. In nearly every case encountered, PHR's expert medical evaluators noted that the trauma suffered by the parents and the children warranted further intervention and ongoing therapeutic support, because the events were causing "significant distress" and ongoing functional impairment. The interventions most frequently recommended included trauma-focused psychotherapy, removal from detention, and psychiatric medications.

PHR finds that the U.S. government's treatment of asylum seekers through its policy of family separation constitutes cruel, inhuman, and degrading treatment and, in all cases evaluated by PHR experts, rises to the level of torture.



Abner Raul, 10, speaks with his mother on the phone after being reunited with his father in Guatemala City. He was returned to his family months after they were separated and his parents deported. Photo: John Moore/Getty Images

The Persistent Psychological Effects of Family Separation

Mental Health Diagnoses of Migrant Parents and Children Separated by U.S. Immigration Policies

Parents

Gender	Age	Country of Origin	Duration of Separation	Diagnoses		
				PTSD	Depression	Anxiety
Male †	36	El Salvador	26 to 30 days	_	_	_
Female	30	Honduras	< 30 days	•	_	_
emale	28	El Salvador	30 days	•	_	_
Female	26	Honduras	40 to 41 days	•	•	_
Female	**	Guatemala	57 days	•	•	•
Female	24	***	< 60 days	•	•	•
Female	**	Honduras	60 days	•	-	_
Female	27	Guatemala	60 days	•	_	_
Female	39	Honduras	60 days	•	•	_
Male	40	El Salvador	60 days	•	_	_
Female	**	El Salvador	66 days	•	_	_
Female	29	Guatemala	71 days	•	•	_
Female	45	El Salvador	73 days	•	_	_
Male	32	Honduras	73 days	•	•	•
emale	29	Honduras	< 90 days	•	•	•
emale	24	Honduras	≈ 90 days	•	•	_
* †	33	Honduras	N/A		_	_

Children

Gender	Age	Country of Origin	Duration of Separation	Diagnoses		
				PTSD	Depression	Anxiety
Female	7	El Salvador	30 days	_	_	•
Male	8	Honduras	40-41 days	•	•	•
Male	8	Honduras	44 days	•	_	_
Female	6	Guatemala	51 days	•	•	•
Male ‡	6	Guatemala	60 days	•	•	•
Male	9	Honduras	60 days	•	_	_
Male	17	El Salvador	60 days	•	_	_
Female	6	Guatemala	4 months	•	_	_
Male	8	Honduras	> 4 months	_	•	•

- **Key*** Gender withheld at attorney's request
- ** Age withheld at attorney's request
- *** Country of origin withheld at attorney's request

- † Symptoms suggestive of trauma
- **‡** Split personality features

Executive Summary

continued

As defined by the United Nations Convention Against Torture, torture is an act 1) which causes severe physical or mental suffering, 2) done intentionally, 3) for the purpose of coercion, punishment, intimidation, or for a discriminatory reason, 4) by a state official or with state consent or acquiescence. In the cases that PHR documented, U.S. officials intentionally carried out actions causing severe pain and suffering, in order to punish, coerce, and intimidate Central American asylum seekers to give up their asylum claims, in a discriminatory manner. Torture and cruel, inhuman, and degrading treatment are violations of human rights and are prohibited under domestic and international law in any and all circumstances.

In addition, PHR concludes that the policy and practice of family separation also constitutes enforced disappearance, which occurs when state agents conceal the fate or whereabouts of a person who is deprived of liberty. In all cases included in the study, there was a period where parents were unaware of their children's

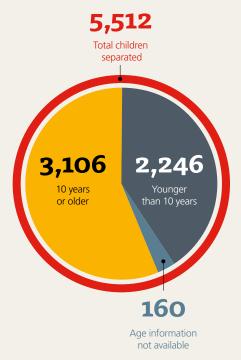
whereabouts and were not able to contact them. Government failure to track children and parents, to facilitate parental contact, or to plan for reunification deprived children of protection under the rule of law, because they were deprived of parental oversight and consent for their welfare without due process.

The U.S. government must uphold domestic and international standards by fulfilling its obligations to: provide redress to victims of torture and ill-treatment, including in the form of rehabilitative services; ensure the families of disappeared children know the truth of their family members' whereabouts by dedicating adequate government resources to ensure timely reunification for all separated families, including deported parents; and prosecute U.S. officials who have broken the law.

Read the full report at: phr.org/family-separation

Total Number of Migrant Children Separated from Their Parents

July 2017 to December 2019

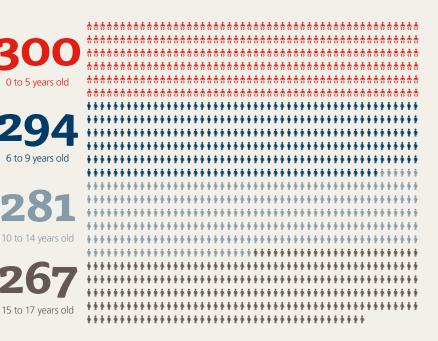


Source:

U.S. Departments of Homeland Security and Health and Human Services, as provided to the American Civil Liberties Union.

U.S. Officials Are Still Separating Migrant Children

From June 2018 to December 2019 alone, 1,142 children were separated from their families. 300 were very young children 5 years and under.



Recommendations

To the U.S. Government

The U.S. Administration, Department of Justice, and Department of Homeland Security should:

Protect families from future violations through reforming policies and practices:

- Prohibit the separation of families arriving together at the U.S.-Mexico border, except in cases where there has been a rigorous assessment of proven risk of present harm to the child, according to a best interest determination reflecting child protection best practices;
- Fully disclose information about numbers of separated and reunited families, the whereabouts and status of separated parents and children, and best interest determination findings to all family members and their legal counsel, and record this information in official records;
- Establish appropriate interagency communications and tracking systems for cases where parents and children are separated for lawful reasons in accordance with due process;
- Increase resources for and utilization of alternatives to detention through contracts with nonprofit organizations, such as the previous Family Case Management Program, and prioritize the timely release of children to community settings with referrals to low-cost legal and community resources;
- End detention of children, which is never in their best interest, and abide by federal standards for care of children in custody, including time limitations and licensing requirements determined by the Flores Settlement Agreement;
- End family detention, which has been shown to have unacceptably
 high health risks for children and is harmful to their psychological
 wellbeing, even when they are held with their parents;
- Ensure humane and adequate conditions of confinement in immigration detention, whether in Customs and Border Protection (CBP) or Immigration and Customs Enforcement facilities, including access to medical screening and treatment, and adequate food, water, and sleeping conditions;
- Fully implement all recommendations of the Department of Homeland Security (DHS) and Department of Health and Human Services Office of Inspector General and increase funding for independent oversight and review;
- Recognize and address displacement trends driven by human rights abuses by ensuring access to asylum in the United States.

Immigration authorities forcibly removed children from their parents' arms, removed parents while their children slept, or simply "disappeared" the children while their parents were in different holding cells or receiving medical care.

Provide reparations to victims who suffered harm through forced separations:

- Immediately reunify all families separated by the U.S. government, including a full reconsideration of parents who have allegedly waived reunification, and expeditiously review any alleged "red flag" cases with a trauma-informed lens;
- Establish a recovery fund to provide mental health screenings, psychiatric and behavioral health interventions, and traumainformed remedial medical and mental health services for separated families, with special consideration for the wellbeing of children;
- Provide redress in monetary compensation for the injuries families suffered resulting from the unlawful conduct of federal officers who intentionally inflicted this emotional distress;
- Provide redress in the form of attorneys' fees and costs which were incurred in order to address the consequences of forced separation.

Ensure accountability for rights violated through forced family separations:

- Acknowledge forced family separation without due process as unlawful and guarantee non-repetition, including through criminal prosecution of government officials who have engaged in unlawful conduct;
- Investigate and ensure accountability for all allegations of verbal and physical abuse in U.S. government custody.

The U.S. Congress should:

Protect families from rights abuses in the context of border and immigration enforcement:

- Enact legislation banning family separation and detention;
- Continue to exercise oversight of DHS agencies to halt any further family separations and hold government officials accountable to acknowledge the persistent harms of the family separation practice and to provide reparations to families injured by unlawful government conduct;
- Require DHS to provide information about numbers of separated and reunited families and the whereabouts and status of previously separated parents and children to appropriate Congressional committees and make aggregated data publicly available;
- Codify the minimum child protection standards of the *Flores* Settlement Agreement into law, in order to prevent indefinite detention of children in inhumane conditions;
- Require rigorous independent oversight for any funding related to CBP field operations and immigration detention, especially family and child detention;
- Decriminalize irregular entry, as required by the Refugee Convention, to ensure that administrative penalties for crossing between ports of entry are proportionate;

continued on back cover

Physicians for Human Rights February 2020 phr.org 5

Recommendations

continued



A Honduran father and his six-year-old son, who were separated for 85 days after they crossed into the United States. Photo: Mario Tama/Getty Images

Protect families from rights abuses in the context of border and immigration enforcement: *continued*

- Oppose policies that unlawfully limit access to asylum and uphold U.S. law, which establishes the asylum process for those with a credible fear of persecution, as well as the right to not be returned to likely persecution;
- Ratify the UN Convention on the Rights of the Child, signed by the United States in 1995 and ratified by every other country in the world.

Fund meaningful policy alternatives which are rights-respecting:

- Increase funding for alternatives to detention programming, contracted with non-profit organizations, that enable families to remain in the community and access basic services while their proceedings are pending;
- Increase funding to add asylum processing capacity by dedicating resources to the Executive Office of Immigration Review for immigration judges and to U.S. Citizenship and Immigration Services for asylum officers.



Physicians for Human Rights For more than 30 years, Physicians for Human Rights (PHR) has used science and the uniquely credible voices of medical professionals to document and call attention to severe human rights violations around the world. PHR, which shared in the Nobel Peace Prize for its work to end the scourge of landmines, uses its investigations and expertise to advocate for persecuted health workers and facilities under attack, prevent torture, document mass atrocities, and hold those who violate human rights accountable.



Shared in the 1997 Nobel Peace Prize