

FAMILY UNITY, FAMILY HEALTH



How Family-Focused Immigration Reform
Will Mean Better Health for Children and Families



EXECUTIVE
SUMMARY



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familyunityfamilyhealth.org

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FOREWORD

A sense of safety is critical to a child's health and well-being. Constant fear and anxiety harm a child's physical growth and development, emotional stability, self-confidence, social skills and ability to learn. Yet for millions of children in America, fear is a constant companion.

The lives of children with undocumented immigrant parents or guardians in the United States are saturated with fear – fear that the people they love and depend on will be arrested and taken away from them at any moment without warning. Many of these children were born here and are U.S. citizens. But under current immigration policy, their families can be torn apart with an arrest and deportation with little regard for their well-being or futures.

This important and timely report documents the profound and unjust impacts of deportation – and fear of deportation – on the children of undocumented immigrants. These children didn't choose their circumstance. But our misguided policies leave these children more likely to suffer from mental health issues and post-traumatic stress disorder than the children of documented immigrant parents. These children are more likely to experience aggression, anxiety and withdrawal and less likely to do well in school. If a parent is deported, they are at increased risk of going hungry, falling into poverty and dropping out of school. When one fifth of our nation's children are poor, the last thing we need are policies that will push more children into poverty and lives of despair without hope and opportunity.

An estimated 660,000 children – 150,000 last year alone – have been separated from one parent or both by our nation's heartless detain-and-deport immigration laws. According to a report by the National Council of La Raza and the Urban Institute, the majority of these children are under age 10—many are infants, toddlers and preschoolers. These children not only experience trauma now, but will likely suffer from this event for the rest of their lives. When children experience strong or prolonged adversity without adequate adult support, they are flooded with stress hormones which can disrupt the development of the brain and other systems, resulting in what researchers at Harvard's Center on the Developing Child call toxic stress response. This kind of trauma

increases the risk of stress-related disease well into adulthood.

Children are not the only ones harmed. When one parent is deported the health of the remaining parent suffers, sometimes even shortening the remaining spouse's lifespan. And the impact of deportation ripples outward, creating a climate of fear and paralysis in the entire community – children whose classmates are separated from their parents; businesses who lose valued workers; families who become scared to seek health care, to use public services or even to drive. Entire communities suffer from immigration policies that ignore the needs of our children. One event often has multiple consequences.

Congress appears to be moving toward comprehensive immigration reform. In order to address the unmet health and mental health needs detailed in this report, any new immigration policies must expand health and mental health coverage to all children and parents, and must not deny or reduce coverage to those who currently have it. Any immigration reform worthy of our American ideals must have as its foundation concern and compassion for children and families. Prioritizing family unity will not only improve these families' health and well-being but our society's as a whole. By removing children's fear we will restore their hope.

Marian Wright Edelman

President
Children's Defense Fund

Robert K. Ross, MD

President and Chief Executive Officer
The California Endowment

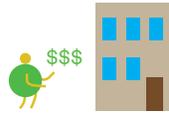
ONE EVENT CAN HAVE MANY CONSEQUENCES

 **Jorge Garcia** is an undocumented resident of the U.S. He came here in search of a better life. He lives with his partner **Elise**,  a U.S. citizen. Because Jorge entered the country without documentation he cannot gain status through marriage.

THE GARCIAS ARE A PART OF THEIR COMMUNITY



Jorge works at a factory. **Elise** is a teacher.



He pays rent to a landlord.



Elise buys food and clothing at the local store.



Their children, **Nina** and **Ben** go to grade school in town.



They volunteer with their local church.

BUT, THEN ONE DAY ...



Jorge is pulled over for having a broken taillight. The police realize he doesn't have papers and **he** is arrested.



He is detained for several months in an out-of-state prison.

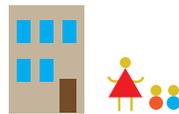


He is eventually deported, never to return.

SO...



Jorge stops coming to work. Other workers are afraid they might get picked up. Some stop coming to work too.



Without the support of **Jorge's** income, **Elise** cannot afford the rent. She is evicted and moves in with cousins who live in a different town. The psychological strain is enormous because **she** is financially strained and her **kids** have become despondent and worried.

AND...



Employers lose experienced workers. Families lose income. Landlords lose tenants. Storeowners lose revenue. The small town starts to lose its tax base, people begin to leave and the town's economic activity declines.



Nina and **Ben** switch schools suddenly because of the move. They feel abandoned and isolated in their new environment.



Elise's cousins are stretched thin and overcrowded with three new family members, their household goes from four to seven overnight.*



Nina and **Ben's** friends and former classmates hear of the deportation, become fearful and miss days of school.

*Nina and Ben were lucky to have two parents present. At any given moment 5,000 foster care children are children of deported parents.

DEPORTATION POLICY CREATES A CLIMATE OF FEAR AND PARALYSIS IN COMMUNITIES.



People are afraid to drive,



afraid to use parks and exercise outdoors,



afraid to use public services like clinics



and afraid to get involved in their communities.



FAMILY UNITY, FAMILY HEALTH

How Family-Focused Immigration Reform
Will Mean Better Health for Children and Families

Executive Summary

For the estimated 11 million undocumented immigrants living in the United States, the vigorous national debate on immigration reform will determine their future—whether they are allowed to stay, work and become citizens. But the undocumented themselves are not the only ones whose lives will be profoundly affected.

Nationwide, an estimated 4.5 million children who are U.S. citizens by birth live in families where one or more of their parents are undocumented. These children will grow up to be our future family members, neighbors and co-workers—and their health and well-being as children today will translate into their health and well-being as adults, ultimately shaping the health of our communities.

However, these children and their families live with anxiety about the future, fearful that arrest, detention or deportation will tear their families apart. Anxiety and fear are only part of the damaging impacts of their families' precarious legal status. Children of the undocumented may also suffer from poverty, diminished access to food and health care, mental health and behavioral problems and limited educational opportunities—particularly when a parent is arrested and detained or deported.

An extensive body of research shows that these factors are fundamental determinants of child health today, and their adolescent and adult health in the future. **Building on this research, this study provides further evidence that a continued policy of detention and deportation comes at the expense of health for children with undocumented parents.**

U.S. CHILDREN AFFECTED BY DEPORTATION, 2012

88,517 Removals in FY2012 who reported at least 1 U.S.-citizen child

X 2.10 Average number of children in undocumented households

X 82% Proportion of children to undocumented immigrants that are U.S.-born

152,426 Estimated number of U.S.-citizen children affected at FY2012 level

Sources:

• Migration Policy Institute. Analysis of 2008 U.S. Current Population Survey data with assignments of legal status by Jeffrey A. Passel at the Pew Hispanic Center.

• Passel JS, Cohn D. Unauthorized immigrant population: national and state trends, 2010. Pew Hispanic Center; 2011. Available at: <http://www.pewhispanic.org/2011/02/01/unauthorized-immigrant-population-brnational-and-state-trends-2010/>.

• Wessler S. Primary Data: Deportations of Parents of U.S. Citizen Kids. ColorLines.com. Available at: http://colorlines.com/archives/2012/12/deportations_of_parents_of_us-born_citizens_122012.html.

ABOUT THIS STUDY

We build on a body of evidence on the impact of immigration policy on communities, paying particular attention to the health and mental health of children and families.

Using existing research, predictive quantitative analysis and data from a convenience survey and two focus groups that we conducted, we shine a light on the consequences of a continued policy of detention and deportation on: physical health, mental health, educational and behavioral outcomes among children; adult health status and lifespan; and economic hardship and food access in households.

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Findings

We highlight the consequences of the threat of detention and deportation for the physical and mental health of children and families. Additionally, we project that a continued policy of deportation at the level reported in 2012 would mean that hundreds of thousands of families will experience hardship in the coming years. In particular, children will sustain these impacts across multiple measures of mental health and well-being.

IF DEPORTATIONS REMAIN AT 2012 LEVELS, WE ESTIMATE ANNUAL IMPACTS TO INCLUDE:



POORER CHILD HEALTH

Children of undocumented immigrants will continue to suffer from mental health issues, symptoms of post-traumatic stress disorder, lower use of health care than children of documented immigrants and reduced household income. An estimated 43,000 U.S.-citizen children will experience a decline in their health status after the change in household income associated with the absence of a primary earner.



POORER CHILD BEHAVIORAL OUTCOMES

Children of undocumented immigrants will suffer behavioral problems, such as aggression, anxiety and withdrawal, which can lead to poor school performance and poor development. Approximately 100,000 U.S.-citizen children will show signs of withdrawal after a parent's arrest.



POORER CHILD EDUCATIONAL OUTCOMES

U.S.-citizen children who live in families under threat of detention or deportation will finish fewer years of school and face challenges focusing on their studies.



POORER ADULT HEALTH AND SHORTER LIFESPAN

Almost 17,000 more undocumented parents of U.S.-citizen children will consider themselves in poor health

because of the loss of income from a deported partner; a factor that is linked to shorter lifespan. Similarly, due to lost income, the estimated 83,000 partners who remain in the U.S. after a primary earner is deported will lose an average of 2.2 years of life – collectively a loss of more than 180,000 years of life.



HIGHER RATES OF POVERTY

Median household income for undocumented immigrant households overall will drop to an estimated \$15,400, putting them below the poverty line. More than 83,000 households will be at risk of poverty.



DIMINISHED ACCESS TO FOOD

With the absence of their primary household earner, over 125,000 children will live in a food insufficient household. Without the support of food assistance, these children may experience hunger and malnutrition.

Focus group and survey findings showed that undocumented parents are deeply aware of how their lack of legal status and the constant threat of detention or deportation affect their children:

Almost 40% of children of undocumented parents did not see a doctor in the past year; almost three-fourths of the children of documented parents did. Research shows U.S.-born children of undocumented parents are twice as likely to lack health insurance as children born to citizens.

Nearly 30% of undocumented parents reported that their children were afraid either all or most of the time, much higher than among children of documented parents. Nearly half reported that their child had been anxious, and almost three-fourths of undocumented parents reported that a child had shown symptoms of post-traumatic stress disorder.

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“From the moment that immigration [authorities] came and threatened to knock down the door . . . my youngest son who was about 14 years old, he was like crazy . . . Anytime somebody knocks on the door, the first thing that my youngest son says to the rest is ‘Don’t open the door!’ . . . He cannot sleep well. He is more alert to sounds but before he didn’t have these behaviors . . . This is something that can produce a great trauma for a child.”
– *Isabella, an undocumented mother of three*



“The fact that they [my undocumented parents] weren’t able to get those jobs and I grew up being low income most of life, that does affect me. Because I was always feeling like, ‘Why can’t I be normal like the other kids?’”
– *David, a young person in the process of adjusting his legal status*

Undocumented parents also experienced considerable impact on every indicator of mental health due to the threat of detention or deportation: stress, fearfulness, sadness, withdrawal and anger. Seven out of ten also reported driving less and eight out of ten said they were less willing to report a crime.

The cost of current policies also carries a staggering price tag: Last year the U.S. spent more than \$1.2 billion to deport parents of U.S.-citizen children. This is money that could instead be spent on improving the health and well-being of families and children.

Recommendations

Our society professes to prize family values, but since 1998, U.S. immigration enforcement policies have affected an estimated 660,000 or more U.S.-citizen children who had one or more parents deported. In April 2013, the U.S. Senate released the “Border Security, Economic Opportunity, and Immigration Modernization Act,” (S.744) otherwise known as “comprehensive immigration reform.” The proposal could reduce many health and mental health harms highlighted throughout our report – most specifically by creating a path to citizenship that may decrease the risk of detention and deportation for millions of individuals and their families.

However, there remain many opportunities to improve health and well-being for these families. As policy-makers debate the specifics of immigration reform, a proposal that puts family unity first is the best opportunity to turn around the harm caused by current policies. We propose a series of recommendations that can begin to address the root causes of poor health status among families with undocumented members – namely, the fear, stress and potential trauma experienced by families whose unity may be threatened due to their legal status.

Our recommendations both affirm aspects of the current immigration reform proposal that are health-promoting for these families, and describe opportunities to go even further by creating the long-term safety and stability that are necessary for health.

Immigration reform must not create a host of new, unintended consequences for the health of these already vulnerable people. Immigration reform that preserves and protects family unity will advance conditions essential to the health and well-being of millions nationwide, and ultimately to the well-being of our country as a whole.

WE PROPOSE THE FOLLOWING RECOMMENDATIONS:

1 Ensure the “Border Security, Economic Opportunity, and Immigration Modernization Act” includes the following key components:

- a. A direct, clear, expedient and affordable path to citizenship for all undocumented immigrants*, ending their risk of detention or deportation. We recommend a path to permanent residence and eventual citizenship over a legal status that stops short of citizenship. The latter would not create long-term stability for families, or result in the health benefits associated with such stability.
- b. Financial requirements must be fair and include appropriate payment schedules that do not force families to choose between applying for legalization and other family needs. They must take into account the impact that fees and fines have on working families.

* Excluding those who pose a threat to national security.

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c. Elimination of mandatory detention laws that result in the arbitrary and unnecessary detention of parents and primary caregivers of U.S.-citizen children. The U.S. Department of Homeland Security should assess cases of detention on an individual, not blanket, basis.

d. Generous waiver provisions that recognize the importance of family unification. For principal applicants, bars to participation in the legalization program should generally be overcome in the interest of family unity. As is currently in the Senate proposal, for the previously deported parents of children who are citizens or permanent residents as well as for certain individuals who entered the U.S. as children, permit waivers should allow re-entry and a roadmap to citizenship for purposes of family unification and improved child well-being.

e. Allowing immigrants in the process of obtaining legal status to receive health insurance coverage and other means-tested public benefits after some designated and appropriate length of time.

f. Recognition that the health and well-being of children is often maintained by undocumented immigrant parents and other relatives who do not work outside the home or work in the underground economy. Consequently, consider revising the current work and income requirements in the proposal to be less rigid – specifically, by allowing applicants to submit alternate documentation of work history; allowing exceptions for the inability to work, health conditions and disabilities; and eliminating the Federal Poverty Level (FPL) income requirement as a threshold for eligibility.

g. As currently proposed in the Senate bill, modify current law to ensure that immigration judges are provided with the discretion to consider hardship to U.S. citizen or permanent resident children when deciding whether to deport a parent.

h. To overcome guardianship fear and lack of knowledge, permit the Centers for Medicare and Medicaid Services to allow non-parental relatives and public school staff to enroll children who are citizens in federally-funded programs, such as State Children's Health Insurance Program and Medicaid, and the U.S. Department of Agriculture to do the same for the Supplemental Nutrition Assistance Program, across all states.

2 Reduce the federal government's reliance on programs that needlessly target immigrant families. Specifically, we recommend that the Department of Homeland Security (DHS) reform its programs and policies related to detention and deportation as follows:

a. End the 287(g) program and partnerships between its immigration officers and state and local law enforcement agencies and significantly modify the Secure Communities program to only focus resources on people who pose a threat to national security.

b. Continue to apply agency-wide discretion to the prosecution of backlogged and new immigration detention cases to not deport parents who have children under the age of 18 and are citizens.

c. Use secure alternatives, including electronic monitoring and case management services, if detention is deemed necessary following an individual assessment. As is in the proposal, expand the use of Alternatives to Detention, such as community support programs, to ensure compliance with immigration cases in an effective, economical and family friendly manner.

d. Continue to collect and publicly release data on the numbers and characteristics of parents of U.S.-born citizen children in U.S. Immigration and Customs Enforcement (ICE) custody and deported.

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3 The Department of Homeland Security and other relevant federal agencies should put into place programs and policies that protect the health and well-being of children whose parents or primary caregivers are undergoing detention and deportation proceedings. This should include:

- a. As has been legislated in California, a mechanism to preserve the parent-child relationship, including allowing apprehended parents and primary caregivers access to phone calls to make childcare arrangements.
- b. Coordination between DHS, Health and Human Services, and specifically the Administration for Children & Families, to implement protocols and issue guidance to ensure parents are able to fulfill child welfare case plan requirements and participate fully in family court proceedings when parents are in custody or after deportation, as proposed in the Senate immigration reform bill and the HELP Separated Children Act (S. 1399/H.R. 2607, 112th Congress).
- c. Issuance of guidance and oversight and sensitivity training for DHS personnel responsible for enforcement to reduce trauma to children when performing immigration-related arrests in their presence.

4 As has been legislated in California and as included in the Senate proposal, state child welfare plans should include policies to promote the reunification of children in the child welfare system with parents and legal guardians who have been detained or deported, including authority to delay filing for termination of parental rights until certain conditions have been met, ensuring that children are placed with relative caregivers whenever possible regardless of immigration status, and to assist parents and legal guardians in making arrangements for their children prior or after removal.