



The
CENTER for
VICTIMS of
TORTURE

**Statement for the Record by the Center for Victims of Torture
U.S. House of Representatives Committee on Homeland Security
Subcommittee on Border Security, Facilitation, and Operations
*“Examining the Human Rights and Legal Implications of DHS’
‘Remain in Mexico’ Policy.”***

November 19, 2019

The Center for Victims of Torture (CVT) commends the House Homeland Security Subcommittee on Border Security, Facilitation, and Operations for holding an oversight hearing on the Trump Administration’s “Remain in Mexico” policy, the implementation of which has acted as a catalyst for the humanitarian crisis taking place 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 more than 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, based on research studies the Department of Health and Human Services Office of Refugee Resettlement estimates 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 “Remain in Mexico” Policy 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 harm and to becoming re-traumatized.

There are certain minimum requirements necessary for effective rehabilitation for torture survivors and survivors of similarly significant trauma, one of which is a felt-sense of safety. Before the Trump administration took steps to end access to asylum in the U.S., many asylum seekers would be able to stay with family and/or friends during the pendency of their immigration proceedings after passing a credible fear interview. This would allow them a modicum of stability and a chance at beginning the healing process. The Migration Protection Protocols (“MPP”) achieve precisely the opposite, placing asylum seekers in further danger, which exacerbates their trauma.

According to a recent report from Human Rights First (HRF), “[a]s of November 19, 2019, there are at least 400 publicly reported cases of rape, torture, kidnapping, and other violent assaults against asylum seekers and migrants forced to return to Mexico by the Trump Administration under this illegal scheme.”⁴ After visiting what has become a migrant camp in Matamoros, HRF observed:

More than one thousand children, families, and adults are sleeping on the streets in front of the Matamoros port of entry without adequate access to water or proper sanitation, too afraid to enter the city because of the extreme violence there. An American nurse, visiting as a volunteer, told Human Rights First researchers that many of the children were suffering from diarrhea and dehydration.⁵

Dr. Sondra Crosby, MD, a Physicians for Human Rights (PHR) medical expert and associate professor of medicine and public health at the Boston University School of Medicine and Public Health, made similar observations after visiting Matamoros:⁶

As a medical professional, I am extremely alarmed by the unsafe, unsanitary, and inhumane conditions in the large and growing migrant encampment in

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-immigrationcentral-american-asylum-seekers/>.

⁴ Human Rights First (November 18, 2019). *Delivered to Danger*. Retrieved from <https://www.humanrightsfirst.org/campaign/remain-mexico>.

⁵ Human Rights First (October, 2019). *Orders from Above: Massive Human Rights Abuses Under Trump Administration Return to Mexico Policy*. Retrieved from <https://www.humanrightsfirst.org/sites/default/files/hrfordersfromabove.pdf>.

⁶ Physicians for Human Rights (September 26, 2019). “*Unsafe, Unsanitary, Inhumane*”: PHR Medical Expert’s Observations at the Matamoros Migrant Encampment. Retrieved from <https://phr.org/news/phr-statement-on-migrant-protection-protocols/>.

Matamoros. This is a refugee camp in the making, mere steps from the United States – but one with no form of medical services, security, or reliable food and potable water supply for the more than 500 people living there.

The conditions I witnessed at the Matamoros encampment include:

- Lack of access to medical care, including prenatal or obstetric care;
- Insufficient access to food and increasing risk of anemia and malnutrition;
- Inadequate access to clean, potable water, which places pregnant women especially at increased risk of dehydration, heat stroke, and diarrheal diseases;
- Insufficient infrastructure, such as latrines, to ensure basic sanitary conditions; and
- Overcrowded living conditions in the open air that increase the risk of infectious diseases (respiratory diseases, measles, rubella, tuberculosis, and diarrheal diseases).

“While there are supposed to be certain protections for groups that are in particularly vulnerable situations,” she continued, “what I saw at Matamoros shows that this is not the case.... No human being should be subjected to these types of conditions.”⁷

Family Separation as a Result of MPP

Women’s Refugee Commission “has received and confirmed numerous reports of family separation through [Remain in Mexico]. This is especially concerning given the danger involved to those returned to Mexico, the difficulty in communicating or reunifying after such a separation, and the additional potential risk of trafficking this practice creates. The separation of families in this manner is a violation of due process and presents both logistical and safety issues.”⁸

This practice is cruel and will have long lasting negative consequences for families’ health and well-being, especially children. As Susan Jasko MSW, LICSW, a CVT therapist with over 20 years of clinical experience working with children and families, has explained:

“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.”

⁷ Physicians for Human Rights (September 26, 2019). “*Unsafe, Unsanitary, Inhumane*”: PHR Medical Expert’s Observations at the Matamoros Migrant Encampment. Retrieved from <https://phr.org/news/phr-statement-on-migrant-protection-protocols/>.

⁸ <file:///C:/Users/Andre/Downloads/Chaos--confusion--and-danger-Remain-in-Mexico--1-.pdf>

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 have previously made clear—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.”⁹ 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).

Conclusion and Recommendations

MPP is fueling the crisis at our southern border, and is having a profound impact on the lives of some of the world's most vulnerable people, torture survivors among them. The practice of returning asylum seekers to Mexico and separating families must be stopped, those responsible should be held accountable, victims deserve redress, and preventive mechanisms need to be adopted.

⁹ 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.