

Social Work Advocacy in Federal Immigration Courts: A Consultant's Reflection on Successful Cases

Luis H. Zayas

Abstract: *Advocacy for immigrant families undertaken by social workers, attorneys, and other supporters to protect against deportation, detention, and unfair government policies occurs mostly in immigration and federal courts. Social workers bring unique knowledge and skills that enhance legal teams' representation of immigrants. This paper provides case illustrations of social work's contribution in three types of legal actions. One illustration from immigration court demonstrates the social work consultant's role in cancellation of removal cases when undocumented immigrants have US-citizen children. A second case is a federal class-action lawsuit to end the detention of asylum-seeking families. The third case was a federal lawsuit to dismantle bureaucratic policies and procedures that undermined the legal rights and well-being of unaccompanied children. In each of these actions, social work knowledge influenced lawsuits that can have lasting policy impact. While this paper focuses on social work advocacy in immigration cases, social work extends to many other areas of advocacy in the legal system. Social work consultants must have a clear understanding of what the attorneys are requesting to ensure that they have the requisite knowledge and skill to be optimally effective and to practice ethically within the scope of their expertise. Other implications include maintaining familiarity with contemporary social and behavioral research and providing expertise confidently in written reports and oral testimony in court. When social workers bring their expertise to legal teams in immigration cases, they promote the profession's expertise and help families facing oppressive policies.*

Keywords: *Advocacy, deportation, detention, immigration courts, federal courts*

In today's complex and highly charged immigration environment, effective advocacy occurs when interdisciplinary teams of immigration attorneys, medical and public health specialists, and behavioral scientists bring their unique perspectives to pursue legal remedies for immigrants. Organized professional challenges to the government's treatment of asylum-seekers, unaccompanied minors, and undocumented immigrants and their United States-born and foreign-born children can effect change in immigration policies and enforcement practices of federal agencies. To demonstrate how social work expertise can be brought to bear in advocacy collaborations, this paper presents examples of social work advocacy with immigrant and human rights attorneys to protect undocumented parents on the verge of deportation and children and mothers from Central America seeking asylum in the U.S.

As callous as the immigration debates appear to be in the 21st Century, this is not the first time in American history that hateful vitriol has been spewed in the public square and the press. In fact, immigration has been a major battleground in the U.S. since the founding of the republic. As far back as 1751, Benjamin Franklin bemoaned the immigration of French, Swedes, and others as insufficiently White. Franklin questioned if German

Luis H. Zayas, PhD, professor and Sutherland Chair in Mental Health and Social Policy, Steve Hicks School of Social Work, professor of psychiatry and behavioral sciences, Dell Medical School, University of Texas, Austin, TX.

Copyright © 2022 Authors, Vol. 22 No. 1 (Spring 2022), 33-45, DOI: 10.18060/25294



This work is licensed under a [Creative Commons Attribution 4.0 International License](https://creativecommons.org/licenses/by/4.0/).

immigrants would “Germanize us instead of our Anglifying them,” predicting that they could never adopt our language or customs any more than they could acquire our complexion (Rampell, 2015, para. 3). In 1882, the Chinese Exclusion Act became the first significant law restricting immigration into the U.S. (Davis & Morrison, 2015; Railton, 2013). The difference now is that the same mean-spirited, anti-immigration rhetoric and unwelcoming national policies are inflamed by a 24-hour television news cycle and social media that push false narratives, distorted facts, and conspiracy theories to the deepest corners of society.

An example of harsh enforcement practices is the creation of “family residential centers” under the Obama Administration in 2014 to detain all female-headed families, including children, in secure, unlicensed facilities for the duration of their asylum hearings. The practice came from a misguided belief that doing so would deter other Central American migrants from coming to the U.S. Under the Trump Administration, the use of family detention centers was expanded and children’s “tent cities” were erected, including the notorious ones in Tornillo, Texas, and Homestead, Florida (Fernandez & Dickerson, 2018; Jordan, 2018). Perhaps the cruelest act of mistreatment occurred in the spring and summer of 2018 when the Trump Administration implemented a zero tolerance policy that separated children from their parents (U.S. House of Representatives, 2019). In the period between May 5 to June 9, 2018, over 2,340 children were separated from 2,200 parents at the border (Kates, 2018). The total numbers of families held in immigration detention is difficult to locate in government sources, but it is well in the tens of thousands (Detention Watch Network, 2021). As an example of the magnitude of immigration detention, the U.S. held 69,550 migrant children in custody between 2018 and 2019, including infants, toddlers, children, and teenagers (Sherman et al., 2019). Such policies and practices compel social workers to engage in policy advocacy activities that are often indirect, non-confrontational, episodic, and coalitional to fight the increasingly restrictive actions (Roth et al., 2018).

Advocacy to help immigrant children and families requires engagement with a complex federal system of legal, bureaucratic, administrative, and political structures. But effective legal advocacy does not happen through the efforts of lawyers alone. In the case of immigration, legal action requires the contribution of behavioral scientists, such as social work scholars and practitioners, to make compelling arguments for preserving human rights and avoiding damage to immigrants. The courts are a means for social work to demonstrate its expertise in cross-system, cross-disciplinary collaborations (Fino-Velasquez & Dettlaff, 2018). By bringing our unique expertise in human behavior, mental health, trauma, and family and community integration, social workers can enrich the effort of legal advocates (Brabeck & Xu, 2010; Furman et al., 2015; Hardina, 2014; Jagers et al., 2021). Indeed, the contribution of social and behavioral sciences knowledge can be highly influential in the decision-making of immigration and federal courts.

To illustrate how social work knowledge and practice can be used in collaborative advocacy practice, this paper presents social work contributions to lawsuits brought by or on behalf of immigrants and represent cases that reflect the salient and influential role of social work knowledge. One example involves advocacy in immigration court to prevent the deportation of parents whose citizen-children will experience exceptional hardship. A

second example illustrates advocacy in federal courts to end the practice of holding families requesting asylum in prison-like detention centers. The third case helped dismantle bureaucratic procedures of immigration detention that undermine the legal rights and mental health of unaccompanied children through federal courts, both under the U.S. Department of Justice.

Immigration Courts: Cancellation of Removal Hearings

In mixed-status families, undocumented parents are subject to “removal” (i.e., deportation) by the government. Immigrants have the right to appeal their deportation orders in immigration courts, operated by the Executive Office for Immigration Review under the Department of Justice. In immigration court, children who are U.S. citizens have no legal basis to protect their parents from deportation. But the presence of a U.S.-born offspring provides a starting point for requesting a cancellation of removal. Deportees must act pro-actively to have the court consider the “exceptional and extremely unusual hardship” that would befall their children if the parents were deported. Sadly, immigration courts do not observe the “best interest of the child” standard used in family court, which places the child’s welfare as the center of attention and decision-making. In immigration court, the best-interest standard is not present or observed; all decisions focus on the parent facing removal (Thronson, 2011; Wessler, 2011; Woltjen, 2014). The burden is on immigrant parents, not the court, to raise the issue of their children and to prove the potential hardship and suffering.

In proving hardship on citizen-children, legal teams will bring in at least two types of expert witnesses: country experts and behavioral science experts. The country expert brings knowledge of the public health issues, crime and violence, police and government functioning, and cultural, social, and economic conditions of the country that a U.S. citizen-child will face. The behavioral expert is the child mental health expert who can demonstrate why and how the removal of the parent will harm the citizen-child’s functioning and development. This expert must clearly articulate the potential damage of a parent’s deportation if the child must stay behind in the US or must move to a country the child has, in most instances, never known. In all cases, parents and child will be asked to consent to the evaluation and to have the evaluation entered into the court record and possibly augmented by testimony from the social work consultant.

In this form of advocacy, the social work expert assembles clinical impressions with support from scientific evidence to support the conclusions and recommendations. Such was the case of Carlos, an eight-year-old boy whose mother challenged her deportation orders. Carlos carried a diagnosis of Attention Deficit, Hyperactivity Disorder (ADHD) for which he received medication and an individualized school program. His evaluation showed a sensitivity to changes in his environment that led to rule-breaking and aggressive behavior. Social work expertise showed that without access to medication, psychotherapeutic intervention, school programs for children with special needs, and adequate parental monitoring, Carlos could face daunting challenges. From the country expert, we learned that the town in Mexico to which the family would return was a six-hour drive from adequate medical and behavioral care. If Carlos stayed in the U.S., there

was still the prospect that his father might be apprehended and deported. The report to the court stated, in part, that

There is cause for concern with Carlos's capacity to handle dramatic change in his environment or in separation from either or both of his parents. He does best in familiar settings that provide him with emotional stability and do not tax his attentional and hyper-motor problems. Carlos will be approaching puberty and adolescence soon. Without parental and professional monitoring, children with untreated ADHD risk developing conduct disorders under increased peer pressure and negative modeling of other youth. Too drastic a set of changes (such as places, schools, people, geography) can place him at risk for additional negative social behavior. Stability in his environment is essential for Carlos. Carlos benefits from medication and behavioral therapies, and these services cannot be overstated. They are critical for his growth and development, his sense of competency and self-efficacy, and his educational and occupational prospects. Removing these supports will place him at risk for psychological and behavioral problems, affecting his long-term well-being. This knowledge is further supported by a recent scientific report on health and mental health services for children in Mexico (Benjet et al., 2009) which shows that even in Mexico City, with its more abundant resources, pediatric and psychiatric services for children with emotional and behavior disorders are sorely lacking.

The judge ruled in favor of Carlos' mother's appeal, permitting her to remain in the US as a legal permanent resident. Knowledge of the scientific literature and clinical insights that were conveyed in the evaluation, supported by direct court testimony, and strategically introduced by the family's attorney were put to great effect in the case.

Of course, not all children carry diagnoses or behavioral problems, and the legal approach may require a different strategy. In such cases, the evaluator can bring the strengths perspective that is fundamental to social work. Such was the situation in the case of 14-year-old Miguel whose exhaustive psychosocial evaluation and review of school and pediatric records revealed a well-functioning high-school freshman. He had been raised by a single father, now facing deportation. Miguel admired his father's soccer playing and his father attended all his football games. Miguel said, "How am I going to live out my life without him? He is the only one out there for me. Without him, I don't know where I'd be." The report to the court concluded that

This is a remarkably well-adjusted young man. He is a bright, engaging, and respectful teen who is full of life and respects and admires his father. It is a tribute to his father who raised Miguel since toddlerhood with exceptional care. He is a very engaged father who has not relegated the care of his child to anyone else. His knowledge of Miguel's educational and medical histories, of Miguel's friends and whereabouts, and of his son's emotional states is indicative of the solid parenting he has provided. In the absence of any other caregivers, his father's deportation would have devastating effects on Miguel.

The judge ruled in favor of Miguel's father. These are just two examples of what competent legal and social work collaboration can achieve. Our teams of attorneys

representing two or more legal aid organizations and for-profit law firms and social workers has prevailed in these and about 90% of cases in which an evaluation demonstrated the exceptional and extremely unusual hardships that U.S citizen-children would face if they were separated from their parents or were to leave the US with their parents to countries they had never known.

Federal Court: Class-Action Challenging Detention of Children and Parents

As noted earlier, in 2014 the U.S. Department of Homeland Security (DHS) and Immigration and Customs Enforcement (ICE) detained immigrant families and refused to consider them for release on bond, recognizance, or other conditions (the “No-Release Policy”, The Bronx Defenders, 2020). This happened despite findings by immigration officers or judges that families had proven credible fear of persecution if they were to return to their home countries. Almost immediately, class-action lawsuits were filed against the government.

In response to the no-release policy, a class-action, *R.I.L.R. v Johnson 2014*, was filed in U.S. District Court in Washington, D.C., by a coalition of legal advocates to challenge the idea of detention as deterrence. Another lawsuit, *Flores v. Johnson 2015*, filed in the U.S. District Court for the Central District of California, asserted that, by detaining children and mothers for extended periods of time, the government was in violation of the “Flores Agreement” (Center for Immigration Studies, 2019). This 1997 consent decree affirmed that the Immigration and Naturalization Service must release a minor from its custody “without unnecessary delay” to ensure the minor’s safety or that of others. For the RILR case, a declaration was authored (i.e., a statement made under oath and signed under penalty of perjury) on the mental health impact of detention on children and mothers drawing on the author’s practice experience and the extant research literature.

The declaration was comprised of two sections. One section drew from the findings from interviews with more than 20 mothers and children in an ICE detention center located in Karnes, Texas. The other section contained a review of literature on the effects of detention on children. It was necessary to draw on neighboring social science literature because there was insufficient social work research specifically detailing the effects of immigration detention on children and parents. In addition to citing research on women’s imprisonment and juvenile detention, the declaration described a body of work on disrupted attachment and such consequences as maladaptive social and emotional development, cognitive impairments, academic failure, criminal involvement, and other behavioral, emotional, and psychological outcomes.

Disruptions in attachment affect general growth and development of the brain as well as social functioning, aggression, and reactions to stress (Byrne et al., 2012; Evans & Kim, 2013; McLaughlin et al., 2014). Focusing on children’s reactions to their mothers’ incarceration demonstrated the long-term damage to children’s capacity to make friends and navigate social situations, and that maternal incarceration predicted the children’s future antisocial and delinquent outcomes (Murray & Farrington, 2005; Nesmith & Ruhland, 2008). Detention or institutionalized living, and child-rearing in prisons, is a major childhood traumatic stressor, even under conditions of short or brief detentions

(Foster & Hagan, 2013). Findings show that the childhood trauma from maternal incarceration increases depressive symptoms among children (Abram et al., 2014). This has led researchers to conclude that incarceration-specific experiences place children at higher risk for maladjustment than exposure to general environmental risk in community settings (Dallaire et al., 2015).

In anticipation that the government attorney would argue that the typical stay for children in detention was but a few weeks and, therefore, not harmful, the declaration presented research showing that even short periods of detention constituted adverse childhood experiences. As such, the declaration concluded with an unambiguous statement about the harm of detention on children:

I can unequivocally state that the children in the Karnes facility are facing some of the most adverse childhood conditions of any children I have ever interviewed or evaluated. Untold harm is being inflicted on these children by the trauma of detention. What's more is that the children at Karnes are experiencing *trauma upon trauma upon trauma*. That is, they not only suffered the trauma of having their lives threatened and disrupted by fleeing their native countries, but they also experienced, witnessed, and heard of violent, traumatic events in their crossing through Mexico. On top of these two serial and often long-term traumatic experiences, the children are exposed to the deprivation and constant threat of living in a facility in which they have no sense of their future. . . . Based on my professional background and expertise . . . I can say with certainty that detention is inflicting emotional and other harms on these families, particularly the children, and that some of these effects will be long-lasting, and very likely permanent (Zayas, 2014, p. 15).

In both *R.I.L.R. v Johnson* and *Flores v Johnson*, federal judges found in favor of the plaintiffs and issued temporary injunctions. The government continued its practices by appealing and circumventing the judges' orders. Nevertheless, they were significant victories that forced the government to reconsider its approaches.

Federal Court: Dismantling Bureaucratic Practices

The third example of collaborative advocacy in federal court is a 2018 class-action filed against the Office of Refugee Resettlement (ORR), U.S. Department of Health and Human Services (DHHS), and a residential treatment center. As an arm of DHHS, ORR's responsibility is to safeguard unaccompanied minor children who are found at the border or the interior of the country. The lawsuit, *L.V.M. et al., v Lloyd et al. 2018*, filed in the Southern District of New York by the New York Civil Liberties Union, sought to rollback a policy instituted in mid-2017 by the ORR director appointed by the Trump Administration. That policy dictated that the ORR director would personally review all cases of children held in highly restrictive government-controlled facilities in New York State and approve release and reunifications decisions. The case went to the heart of whether ORR was indeed protecting youth in its custody. My role as the social work consultant was to review the policy and youth's case records to opine on its effectiveness and whether it represented typical best practices in child welfare. Of the 107 adolescent

males identified, 35 randomly selected cases were reviewed, roughly a third of the cases.

Predictably, the excessive bureaucratic overreach had, by early 2018, resulted in the approved releases of a handful of boys. The policy was only slowing down the process of getting the youth discharged into the custody of their parents or other sponsors. Furthermore, case records showed that the delays in release and reunification were causing severe, potentially irreversible, harm to the youth. Three conclusions emerged from the review that were included in the declaration.

1. The ORR director did not appear to be qualified to make release decisions. The director's deposition showed that he did not have any professional credentials or experience to make determinations on children's clinical conditions, readiness for release, or risk-of-harm. He had no previous history in the child welfare or child mental health system and held no academic degrees in a human service field. He was an attorney with no expertise in family law. A question for the court was how could this official make decisions that overruled mental health clinicians, social workers, case managers, and others with relevant expertise working with the youth, or even his own qualified, subordinate staff who had made recommendations to approve or disapprove releases of youth?

As illustration, the review drew the impressions of a psychiatrist about a 16-year-old male written in the medical record: "I cannot find any clinical basis to determine that the patient is at risk for violence in the community. On the contrary, he seems to be violence averse [and] observed behaviors have not been violent." In many cases, the director's decisions were clearly contraindicated by the records and at odds with the recommendations of psychiatric and social work staff. Moreover, the director did not explain his reasoning or provide any meaningful guidance to staff to ready the child for release.

2. The policy requiring director-level review is contrary to best practices. Senior-level reviews of individual cases that occur—if they occur—in large, interstate health and social welfare organizations are, in general, time-consuming. When such reviews are practiced, the executive will frequently defer to the professionals on the ground, those most proximal to the cases. But it was clear that without competent child welfare knowledge brought to bear on the director's decisions, best practices were not being used. The social work declaration read, in part,

None of the children whose cases I reviewed that were elevated to the Director level review exhibited behavior—either during or before custody—present the sorts of extraordinary circumstances that would warrant elevation of release decisions to senior management of such a large agency. Having read the director's deposition and his rationale for instituting the new policy, it is clear that he is *not* aware that the new policy represents a significant deviation from the manner in which such decisions are made at a variety of human services and child welfare agencies, such as foster care agencies, group homes, hospitals, and residential treatment facilities. . . . It is no surprise that the additional layers of review have contributed to significant delays in the rendering of release decisions. . . . The average length of time for a final review by the ORR director was approximately 35 days from when it was received in Washington but some cases took longer,

from 86 days to 142 days. (Zayas, 2018, para. 25)

3. *The director release review policy causes children in ORR custody severe and potentially irreversible harm.* The declaration included reference to authoritative reports (American Academy of Pediatrics, 2017), including one by the Advisory Committee on Family Residential Centers of the Department of Homeland Security (2016). The Advisory Committee report advised that “the separation of families for purposes of immigration enforcement or management, or detention is never in the best interest of children” (p. 2). The declaration to the court concluded that

Having reviewed the ORR policy documents, analyzed the lengths of stay, and the children’s case files, it is my opinion that institutionalization in ORR facilities is, for all relevant purposes, detention. ORR, even when contracting with [therapeutic residential facilities], restricts children’s movements, separates them from their loved ones, exacerbates any psychological challenges the youth might have, affects negatively their developmental trajectories, and causes more harm than good. . . . Many of the children whose files I reviewed were detained for significant periods before their cases were even elevated for the director’s review and the delays in this decision-making process only served to increase the harm to the youth. . . . [In one case, sexual abuse and in the other increased suicidal behavior]. (Zayas, 2018, para. 36)

There was enough evidence to persuade the federal judge that poor communication and decision-making had led to delays, and that, had the director allowed professional staff on the ground to use their best judgement, the delays, psychological damage, and egregious incidents might have been prevented. The policy was discontinued.

Discussion and Practice Implications

In the lawsuits described in this paper, behavioral science and social work practice knowledge were brought together to inform legal strategies and advocate for immigrant families and children. The paper demonstrates that legal teams are well-served when they incorporate social work experts to inform legal cases for the benefit of individual clients or classes of clients. Each of the illustrations were familiar grounds for social work.

In challenges to deportation orders, social workers provide insights into the mental health impact on the children born in the U.S. when undocumented parents are threatened with deportation. Children’s reactions to loss of parents and major environmental changes could include loss of community and belonging. Clinical and research knowledge has helped immigrant families with US-born children in appealing their deportation orders. The federal class-action to end the detention of children and mothers in prison-like settings was influenced by a combination of social work and behavioral science evidence. The deleterious mental health effect of detention or incarceration of any kind is a topic that the social work profession has long understood through its presence in the juvenile justice and other settings (Garcini et al., 2020; Huang, 2018; Lorek et al., 2009).

The action brought against ORR was especially germane to social work since it challenged policies and practices that should have been guided by the best available child

welfare evidence, but were not. In this regard, social work's presence on legal teams was not only indisputable, but it was also critical to the case. Drawing from knowledge of the field of child welfare and therapeutic residential facilities, the social work consultant found that the director was unqualified to make decisions about youth in custody. Moreover, the director was not qualified and should not have taken decision-making authority away from the clinicians on the ground. This too was contrary to best practices. The policy of director-level reviews had prolonged the stays of youth in highly restrictive custodial settings, causing and exacerbating severe, potentially irreversible harm to an already vulnerable group of immigrant children. In offering the opinion, the know-how of social work informed the judge's decision to overturn an unformed policy.

Social work expertise as well as knowledge borrowed from allied fields add to the strength of legal actions. There are several recommendations for social work education and practice that can be drawn from these examples. Graduate social work education, curricular materials, and syllabi should include content and instruction on working with attorneys, developing expertise in federal and immigration court systems, presenting the content of psychosocial evaluations and declarations, and being ready to testify in court to support legal and social arguments. One means for graduate education is to work closely with immigration clinics in university law schools (Margolin et al., 2010). This interaction can provide opportunities for student social workers to train with student attorneys in the litigation of individual cases or class-action cases in both federal and state courts.

Practitioners with the relevant degrees and credentials should establish close relationships with groups of immigration attorneys or local non-profit legal action groups (e.g., immigration, refugee, civil, and human rights organizations). Experience and knowledge that social workers bring are unassailable in courts. Preparing evaluations, declarations, and affidavits for litigators to introduce into the court record is a skill that grows with each new case, and each time the social worker is on the witness stand. The contributions that seasoned social work practitioners make in lawsuits cannot be overstated.

Conclusion

Social work consultants in immigration and federal courts, as in any court of law, must be well-prepared, confident, and self-assured. When testifying in support of their evaluations and reports, social workers should understand that opposing attorneys will attempt to undermine their motives for participation in the case. They will question if the expert witness is doing this for the money, or seeking public attention or acclaim, or always presenting findings that support immigrants, or even acting as a consultant who will testify for the highest bidder. This can cause anxiety and stress, perhaps an awkward moment on the stand. What social workers need to keep in mind is that the government attorney cannot impugn their knowledge of social and behavioral science or clinical skills and acumen. Holding confidently to expertise will override any of the arguments thrown at the expert social work witness.

Finally, the skills and expertise discussed in this paper are not limited to immigration and immigrants. Rather, social work consultants can extend their reach to juvenile court,

international adoptions that are brought to courts, mitigation in capital punishment cases, civil and drug courts, and in courts where attorneys seek justice for their clients. In cases such as these, and many others, social work-legal collaborations will advance the cause of social justice that is at the heart of the social work profession.

References

- Abram, K. M., Zwecker, N. A., Welty, L. J., Hershfield, J. A., Dulcan, M. K., & Teplin, L. A. (2015). Comorbidity and continuity of psychiatric disorders in youth after detention: A prospective longitudinal study. *JAMA Psychiatry*, *72*(1), 84-93. <https://doi.org/10.1001/jamapsychiatry.2014.1375>
- Advisory Committee on Family Residential Centers of the Department of Homeland Security. (2016, September 30). *Report of the ICE Advisory Committee on Family Residential Centers*. <https://www.ice.gov/sites/default/files/documents/Report/2016/ACFRC-sc-16093.pdf>.
- American Academy of Pediatrics. (2017, March 4). *AAP statement opposing separation of mothers and children at the border*. <https://www.aap.org/en/news-room/news-releases/pediatrics2/2017/immigrantmotherschildrenseparation/>
- Benjet, C., Borges, G., Medina-Mora, M. E., Zambrano, J., Aguilar-Gaxiola, S. (2009). Youth mental health in a populous city of the developing world: Results from the Mexican Adolescent Mental Health Survey. *Journal of Child Psychology and Psychiatry*, *50*, 386-395. <https://doi.org/10.1111/j.1469-7610.2008.01962.x>
- Brabeck, K., & Xu, Q. (2010). The impact of detention and deportation on Latino immigrant children and families: A quantitative exploration. *Hispanic Journal of Behavioral Sciences*, *32*, 341-361. <https://doi.org/10.1177/0739986310374053>
- Byrne, M. W., Goshin, L., & Blanchard-Lewis, B. (2012). Maternal separation during the reentry years for 100 infants raised in a prison nursery. *Family Court Review*, *50*, 77-90. <https://doi.org/10.1111/j.1744-1617.2011.01430.x>
- Center for Immigration Studies. (2019). The history of the Flores Settlement: How a 1997 agreement cracked open our detention laws. <https://cis.org/Report/History-Flores-Settlement>
- Dallaire, D. H., Zeman, J. L., & Thrash, T. M. (2015). Children's experience of maternal incarceration-specific risks: Predictions to psychological maladaptation. *Journal of Clinical Child & Adolescent Psychology*, *44*, 109-122. <https://doi.org/10.1080/15374416.2014.913248>
- Davis, C., & Morrison, M. (2015). *The Chinese Exclusion Act: Researching in the National Archives*. National Archives.
- Detention Watch Network. (2021). The United States government maintains the world's largest immigration detention system. *Detention 101*. <https://www.detentionwatchnetwork.org/issues/detention-101>

- Evans, G. W., & Kim, P. (2013). Childhood poverty, chronic stress, self-regulation, and coping. *Child Development Perspectives*, 7, 43-48. <https://doi.org/10.1111/cdep.12013>
- Fernandez, M., & Dickerson, C. (2018, October 12). Inside the vast tent city housing migrant children in a Texas desert. *New York Times* [online edition]. <https://www.nytimes.com/2018/10/12/us/migrant-children-tent-camp-texas.html?action=click&module=RelatedCoverage&pgtype=Article®ion=Footer>
- Finno-Velasquez, M., & Dettlaff, A. (2018). Challenges to family unity and opportunities for promoting child welfare in an increasingly punitive immigration landscape. *Advances in Social Work*, 18, 727-744. <https://doi.org/10.18060/21716>
- Flores v. Johnson*, 212 F. Supp. 3d 864 (C.D. Cal. 2015).
- Foster, H., & Hagan, J. (2013). Maternal and paternal imprisonment in the stress process. *Social Science Research*, 42, 650-669. <https://doi.org/10.1016/j.ssresearch.2013.01.008>
- Furman, R., Ackerman, A., Sanchez, M., & Epps, D. (2015). Immigration detention centers: Implications for social work. *Smith College Studies in Social Work*, 85, 146-158. <https://doi.org/10.1080/00377317.2015.1017411>
- Garcini, L. M., Domenech Rodríguez, M. M., Mercado, A., & Paris, M. (2020). A tale of two crises: The compounded effect of COVID-19 and anti-immigration policy in the United States. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12, S230–S232. <https://doi.org/10.1037/tra0000775>
- Hardina, D. (2014). Deferred action, immigration, and social work: What should social workers know? *Journal of Policy Practice*, 13, 30-44. <https://doi.org/10.1080/15588742.2013.855696>
- Huang, P. (2018, August 09). Health impacts of immigration detention on children. <https://healthlaw.org/health-impacts-of-immigration-detention-on-children/>
- Jagers, J. W., Wilford, A., Anderson, I., & Bettmann, J. (2021). Perceived effectiveness of parent representation social workers by legal professionals involved with indigent defendants. *Advances in Social Work*, 21, 100- 115. <https://doi.org/10.18060/24249>
- Jordan, M. (2018, December 23). Texas tent city housing 2,500 migrant children is said to close in January. *New York Times* [online edition]. <https://www.nytimes.com/2018/12/23/us/tent-city-closing-texas-migrant-children.html>
- Kates, G. (2018, June 20). Migrant children at the border: The facts. *CBS News*. <https://www.cbsnews.com/news/migrant-children-at-the-border-by-the-numbers/>
- Lorek, A., Ehntholt, K., Nesbitt, A., Wey, E., Githinji, C., Rossor, E., & Wickramasinghe, R. (2009). The mental and physical health difficulties of children held within a British immigration detention center: A pilot study. *Child Abuse & Neglect*, 33(9), 573-585. <https://doi.org/10.1016/j.chiabu.2008.10.005>
- L.V.M. v. Lloyd*, 318 F. Supp. 3d 601 (S.D.N.Y. 2018).

- Margolin, D., Berenson, S., Martin, L., Raab, K. P., & Zavez, M. (2010). Empowerment, innovation, and service: Law school programs provide access to justice and instill a commitment to serve. *Family Court Review*, 48, 672-684.
<https://doi.org/10.1111/j.1744-1617.2010.01341.x>
- McLaughlin, K. A., Sheridan, M. A., & Lambert, H. K. (2014). Childhood adversity and neural development: Deprivation and threat as distinct dimensions of early experience. *Neuroscience and Biobehavioral Reviews*, 47, 578-591.
<https://doi.org/10.1016/j.neubiorev.2014.10.012>
- Murray, J., & Farrington, D. P. (2005). Parental imprisonment: Effects on boys' antisocial behaviour and delinquency through the life-course. *Child Psychology and Psychiatry*, 46, 1269-1278. <https://doi.org/10.1111/j.1469-7610.2005.01433.x>
- Nesmith, A., & Ruhland, E. (2008). Children of incarcerated parents: Challenges and resiliency, in their own words. *Children and Youth Services Review*, 30, 1119-1130.
<https://doi.org/10.1016/j.childyouth.2008.02.006>
- Railton, B. (2013). *The Chinese Exclusion Act: What it can teach us about America*. Palgrave/Macmillan. <https://doi.org/10.1057/9781137339096>
- Rampell, C. (2015, August 28). Founding Fathers, trashing immigrants. *Washington Post*.
<https://www.washingtonpost.com/news/rampage/wp/2015/08/28/founding-fathers-trashing-immigrants/>
- R.I.L.R. v. Johnson*, 80 F. Supp. 3d 164 (D.D.C. 2015).
- Roth, B., Park, S. Y., & Grace, B. (2018). Advocating for structural change? Exploring the advocacy activities of immigrant-serving organizations in an unwelcoming policy context. *Advances in Social Work*, 18, 682-703. <https://doi.org/10.18060/21642>
- Sherman, C., Mendoza, M., & Burke, G. (2019, November 12). U.S. held record number of migrant children in 2019. *Associated Press*. <https://apnews.com/article/us-news-ap-top-news-honduras-trauma-immigration-015702afdb4d4fbf85cf5070cd2c6824>
- The Bronx Defenders. (2020). Lawsuit: ICE office in NYC has secret no-release policy. <https://www.bronxdefenders.org/lawsuit-ice-office-in-nyc-has-secret-no-release-policy/>
- Thronson, D. B. (2011). Clashing values and cross purposes: Immigration law's marginalization of children and families. In J. Bhabha (Ed.), *Children without a state: A global human rights challenge* (pp. 237-254). MIT Press.
<https://doi.org/10.7551/mitpress/9780262015271.003.0010>
- U.S. House of Representatives, Committee on Oversight and Reform. (2019). *Child separations by the Trump Administration*.
<https://oversight.house.gov/sites/democrats.oversight.house.gov/files/2019-07-2019.%20Immigrant%20Child%20Separations-%20Staff%20Report.pdf>
- Wessler, S. (2011). *Shattered families: The perilous intersection between immigration enforcement and the child welfare system*. Applied Research Center.

https://www.immigrationresearch.org/system/files/Applied_Research_Center---Shattered_Families.pdf

Woltjen, M. (2014). Unaccompanied immigrant children are most vulnerable. *Chicago Tribune*, June 27. <http://theyoungcenter.org/stories/chicago-tribune-op-ed-by-director-maria-woltjen/>

Zayas, L. H. (2014). *Declaration of Luis H. Zayas in R.I.L.R. v. Johnson*, 80 F. Supp. 3d 164 (D.D.C. 2015). Retrieval at https://chu.house.gov/sites/chu.house.gov/files/documents/Declaration%20of%20Luis%20Zayas_0.pdf.

Zayas, L. H. (2018). *Declaration of Luis H. Zayas in L.V.M. v. Lloyd*, 318 F. Supp. 3d 601 (S.D.N.Y. 2018). Available at <https://www.courtlistener.com/docket/6347254/lvm-v-lloyd/>

Author note: Address correspondence to Luis H. Zayas, School of Social Work, University of Texas, D3500, Austin, TX 78712. Email: lzayas@austin.utexas.edu