The role of medicine in family detention

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Disclosure

Dr. Allen is a paid subject matter expert for the **Department of Homeland Security** for the *Office of*Civil Rights and Civil Liberties (CRCL)

The opinions expressed today **do not** represent the position of the department or the U.S government.

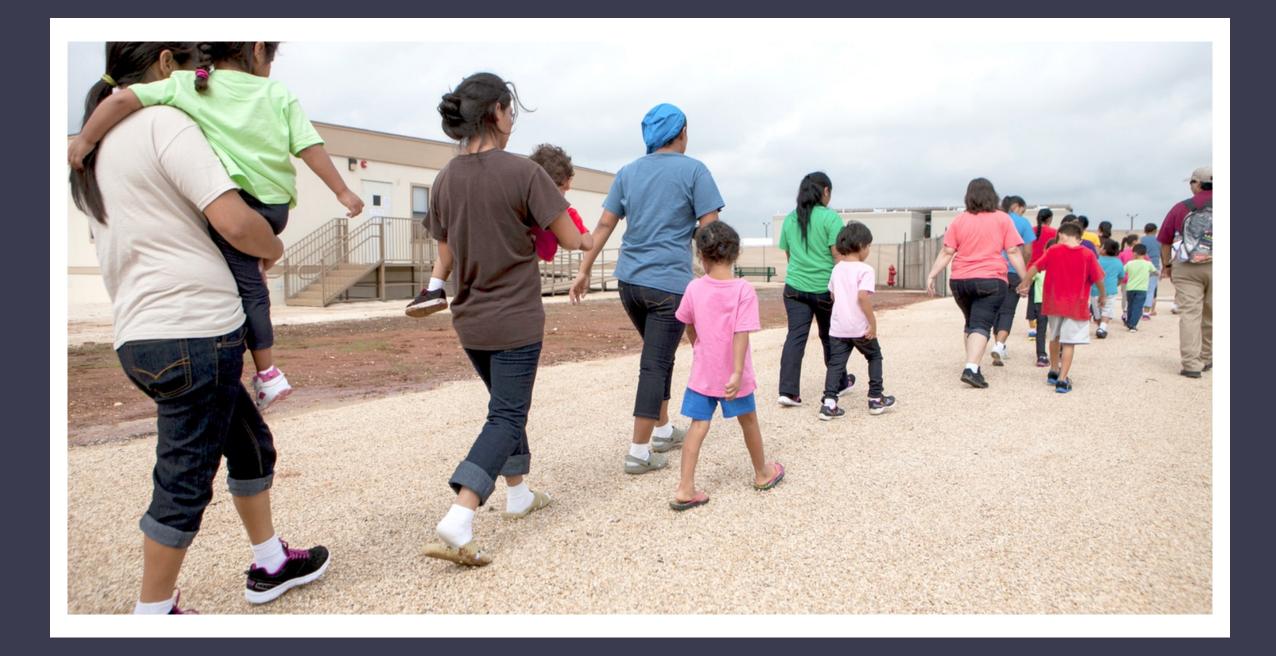
Medicine as a profession

Knowledge & Skills plus an ethical code

- Civic Engagement
- Dignity
- Autonomy
- Justice (particularly in health)

AMA Principles of Medical Ethics

- I. A physician shall be dedicated to providing competent medical care, with compassion and respect for human dignity and rights.
- III. A physician shall respect the law and also recognize a responsibility to seek changes in those requirements which are contrary to the best interests of the patient.
- VII. A physician shall recognize a responsibility to participate in activities contributing to the improvement of the community and the **betterment of** public health.
- VIII. A physician shall, while caring for a patient, regard responsibility to the patient as paramount.
- IX. A physician shall support access to medical care for all people.



Fundamental Flaw



- Institutional detention of innocent children and exposure to toxic stress
- Risk of harm is exacerbated by indefinite nature of detention





- Remote location of facilities
- Lack of pediatric expertise
- Poor coordination among agencies





- Infant at Artesia unrecognized severe dehydration
- Finger injuries at Karnes from prison doors
- Peri-natal injury diagnosis missed at Karnes
- Punitive confinement in medical isolation of toddlers for hitting other children at Dilley

The New York Times

July 18, 2018

Whistle-Blowers Say Detaining Migrant Families 'Poses High Risk of Harm'



Children line up in the cafeteria of a temporary home for women and children detained at the Texas border in 2014. Two physicians who studied such facilities told the government that children can suffer adverse health impacts even when confined with a parent. Eric Gay/Associated Press

By Miriam Jordan











What is a Whistleblower?

Whistleblowers are those who witness wrongdoing in the workplace and decide to speak up rather than stay silent to expose serious violations of public trust.

Legally, a common definition of a whistleblower is someone, typically an employee, who discloses information, either internally (to managers, organizational hotlines, etc.) or externally (to lawmakers, regulators, the media, watchdog organizations, etc.), that he or she reasonably believes evidences:

- a violation of law, rule or regulation;
- gross mismanagement;
- a gross waste of funds;
- abuse of authority; or
- a substantial and specific danger to public health or safety.



This definition captures two key points about whistleblowers. First, whistleblowers typically are current or former employees with direct, credible information about wrongdoing that they became aware of while on the job. Second, the concerns are serious and their disclosure promotes legal compliance or protects the public interest.







Caring for Immigrant Children and Families

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



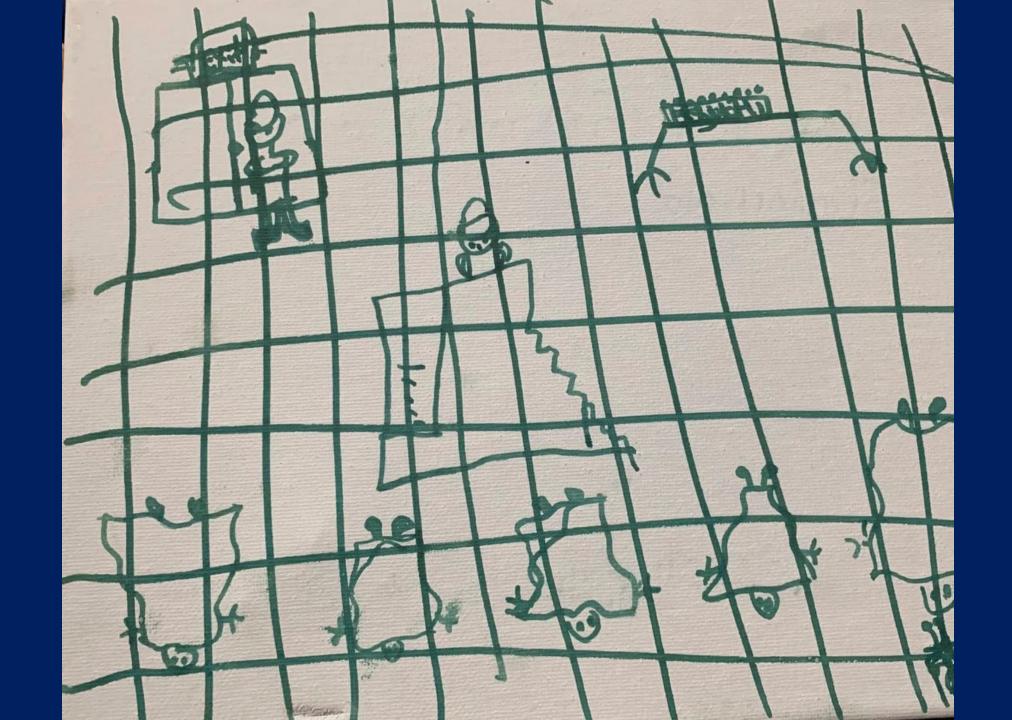








Figure 3. Overcrowding of families observed by OIG on June 11, 2019, at Border Patrol's Weslaco, TX, Station. Source: OIG









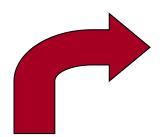


Early Experiences Are Crucial



- By age 3, 80% of synaptic connections are already made
- By the second decade of life growth levels off and pruning begins
- Increased experiences define the wiring of an infant's brain

Impact of Early Stress

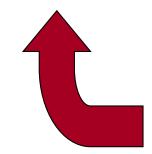


CHILDHOOD STRESS

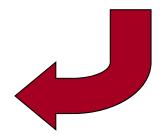


Hyper-responsive stress response; calm/coping

Chronic "fight or flight;" cortisol / norepinephrine



Changes in Brain Architecture





Newsweek

U.S. World Business Tech & Science Culture Sports Health

OPINION

WE VISITED THE SOUTHERN BORDER. THE CHILDREN WE SAW THERE NEED ACCESS TO PEDIATRICIANS. NOW | OPINION

SALLY GOZA AND KIM SCHRIER

ON 8/2/19 AT 1:03 PM EDT





"NO PLACE FOR ANY CHILD"

TOP PEDIATRICIAN DESCRIBES "HEARTBREAKING" DETENTION





They're ALL our Children





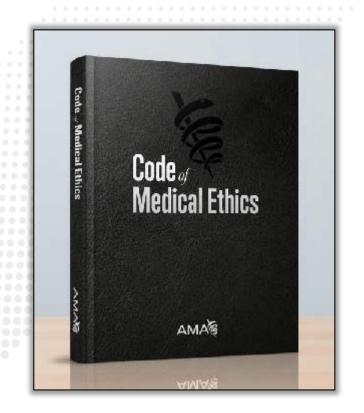
MEMBERSHIP MOVES MEDICINE

Family Detention in U.S. Immigration: The Interface of Medical Ethics and Advocacy

Patrice A. Harris, MD, MA
President
American Medical Association
November 2019

Health care is a basic human right

- A physician shall be dedicated to providing competent medical care, with compassion and respect for human dignity and rights.
- A physician shall respect the law and also recognize a responsibility to seek changes in those requirements which are contrary to the best interests of the patient.
- A physician shall support access to medical care for all people.







Areas of AMA advocacy

- Health and safety at the southern border
- Asylum-seekers and vaccines
- Mental health of children in DHS custody
- Family detention policies
- Deferred action for critically ill children
- Inadmissibility on public charge grounds



JAMES L. MADARA, MD EXECUTIVE VICE PRESIDENT, CEO ama-assn.org t (312) 464-5000

July 16, 2019

The Honorable Jerrold Nadler Chairman U.S. House Committee on The Judiciary 2138 Rayburn House Office Building Washington, DC 20515 The Honorable Doug Collins
Ranking Member
U.S. House Committee on The Judiciary
1504 Longworth House Office Building
Washington, DC 20515

Dear Chairman Nadler and Ranking Member Collins:

On behalf of the physician and medical student members of the American Medical Association (AMA), I am pleased to offer our support for passage of H.R. 3239, the "Humanitarian Standards for Individuals in Customs and Border Protection Custody Act," and urge the committee to quickly pass this important piece of legislation. As the largest professional association for physicians and the umbrella organization for state and national medical specialty societies, the AMA has been, and continues to be, deeply committed to ensuring the health and safety of all individuals regardless of immiration status.

We believe that conditions in Customs and Border Protection (CBP) custody are inconsistent with evidence-based recommendations for appropriate care and treatment of children and pregnant women. Conditions in CBP facilities, which include open toilets, constant light exposure, insufficient food and water, extreme temperatures, and forcing pregnant women and children to sleep on cement floors, are traumatizing. Such facilities are simply not appropriate places for children or for pregnant women. H. R. 3239 takes a critical step toward ensuring that appropriate medical and mental health screening and care are provided to all individuals including immigrant children and pregnant women in CBP custody.

Families seeking refuge in the U.S. already endure emotional and physical stress, which is only exacerbated when they are separated from one another or held in family detention facilities during the pendency of their immigration proceedings. It is well known that childhood traums and adverse childhood experiences created by inhumans treatment often create negative health impacts that can last an individual's entire lifespan. We, along with numerous other medical and mental health organizations, have previously offered our strong support for passage of H.R. 3239, and urge Members of Congress and the Administration to ensure that this type of legislation is included as part of any humanitarian response to the citation at the southern border.

Sincerely,

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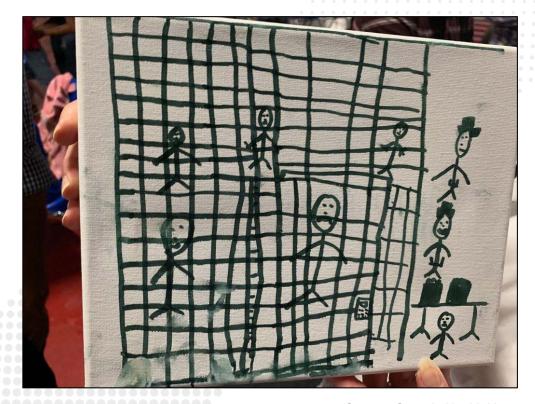
James L. Madara, MD





The lasting impact of childhood trauma

This drawing was completed by a child held at an immigration detention center.



Source: Georgia Health News





