




The Trauma of Immigration

and practical responses for community leaders working with immigrant populations

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- 1) Immigrant Stories and Client interviewing: understanding the needs and histories of your clients, and why it matters
 - 2) Protracted detention, gang membership allegations, family separation, and the trauma of navigating the immigration system in the United States
 - 3) Immigration Basics: accessing humanitarian relief during COVID 19
 - 4) Public benefits: availability to undocumented populations and “public charge”
 - 5) Long-term vision, defining roles, making sustainable change, and planning to protect vulnerable populations



Persistent issues highlighted by COVID 19

--economic instability for undocumented workers and poor working conditions

--food insecurity, inability to obtain drivers' licenses in Massachusetts

--health care disparities

--mental healthcare disparities

--detention, lack of funding for bail, incarceration of black and brown populations

--lack of access to justice, adequate educational and social resources, and **legal protections**



4. Immigrants from Central America remove their shoelaces while being detained by U.S. Border Patrol agents on August 17, 2016, near Roma, Texas. #



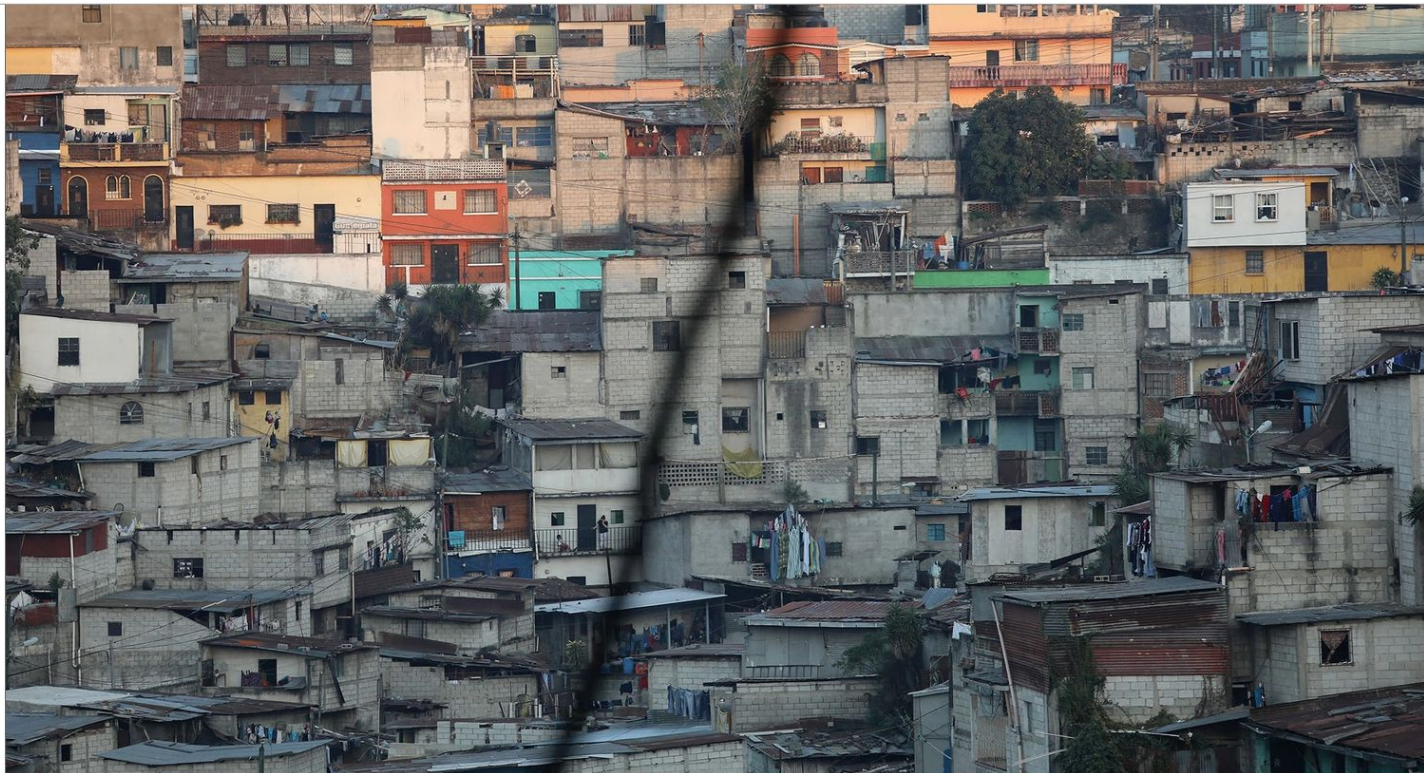
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14. In Guatemala City, Guatemala, homes climb up the hillside in the Limonada slum on February 8, 2017. Grinding poverty and high crime continue to drive emigration from Guatemala to the United States, even as the Trump administration moves to tighten border security. #

John Moore / Getty



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Cultural Norms and Taboos

“We always had enough food, of course. Each day, when I was at school, I was given a meal...we didn’t really eat at home.” --Teenage Client from El Salvador

“I love my parents because they give me everything I need. They just told me that I had to go to the United States for a few years to work, and then I can go back.”
--Teenage Client from Central America

**“The journey was hard, but lots of kids do it.”
--Teenager from El Salvador**





Mental Health Concerns

“I am too busy to see a therapist.” --Client from Africa

“I don’t need a psychiatrist. That stuff is bad. I don’t need to tell anyone anything.”-- Former Client

“He just needs rest; we can give him some time off from school.” --Mother of Client





Fear of Retribution/Distrust of Authority

“Will the government know that I said this?”

--Witness

“No, I never saw any gang members” [despite opposite information in State Department reports]

REFUGEE ROULETTE

**Disparities in Asylum
Adjudication and Proposals
for Reform**

**JAYA RAMJI-NOGALES,
ANDREW I. SCHOENHOLTZ,
AND PHILIP G. SCHRAG**

**FOREWORD BY SENATOR
EDWARD M. KENNEDY**





Case 1:

- born in El Salvador; severe cognitive impairment
- abandoned by his mother as an infant; grew up in extreme poverty with grandparents
- fled for the U.S., but was kidnapped and abused on his way here (fled gang threats)
- detained and accused of gang membership (Facebook photos wearing Nike shoes)



Case 2

--Client born in El Salvador; whipped and beaten by alcoholic father

--Client's brother murdered by a gang

--Client flees for U.S., nearly dies traveling across the border

--Client accused of gang membership because seen near other gang members; was pinned to be near a fight at school and was arrested.



Common to Both Cases

- regularly attended school
- strong work history
- strong family ties to the United States
- both abandoned, neglected or abused (thus eligible for immigrant juvenile status)
- both accused of gang membership (despite minimal evidence)
- both alleged to be “verified MS-13 gang members” by the Dept. of Homeland Security
- both detained and represented by the same attorney



Client 1, immigrant juvenile with significant cognitive impairment and no criminal history, DEPORTED by immigration judge after competency hearing, Federal habeas petition, appeal, and rehearing of asylum

Client 2, immigrant juvenile with severe history of physical abuse, GRANTED GREEN CARD AT TRIAL



Why the Divergent Outcomes?


- Different judges; overburdened court system (quotas)
- mental health care (lack thereof)
- backlog in the federal courts
- credibility (and how difficult credibility determinations are)
- effects of detention and client response to separation
- community involvement and support from social workers, school counselors, and the nonprofit sector



Inadequate Health and Psychological Care

“In reviewing the medical records from [Detention Facility], the care [Client] receives with respect to depression is below the usual standard of care. [Client] has not been provided with adequate psychotherapy and has not been provided any medication, despite his having symptoms that could be alleviated with standard anti-depressive medication and sleep medication...I would recommend [weekly psychotherapy with an eye toward sleep and anti-depressive medication].”

-Psychological Expert, Affidavit to Federal Court



**“I Would Never Put This
into a Criminal Intelligence
Database”**

--Thomas Nolan, Former Boston Police Gang Detective



10:59
🔊 </>

What A Boston Student's Deportation Reveals About School Police And Gang Intelligence

December 13, 2018

By [Shannon Dooling](#)



East Boston High School in 2017 (Courtesy East Boston High School)

This article is more than 1 year old.

This story can also be [read in Spanish](#).

It was a lunchtime argument among East Boston High School students that quickly fizzled. But what transpired that day set a series of actions in motion and, three years later, the repercussions are still unfolding for one young man named Orlando.

His story shows how observations of a seemingly-mundane high school argument can have a profound impact when placed in the hands of federal immigration officials.

'There's Too Much Death Here'

The small city of Metapán is about a two-hour drive from the Salvadoran capital of San Salvador. It's close to the border with Guatemala.

It's a hot and humid afternoon when we meet 22-year-old Orlando. He wipes sweat from his forehead every now and then and says it's safer for us to talk at

Gang database made up mostly of young black, Latino men

By PHILIP MARCELO July 30, 2019




In this Thursday, Feb. 14, 2019 an immigrant from El Salvador speaks with a reporter from The Associated Press, in Somerville, Mass. The informant was detained for seven months in 2018 by ICE, which accused him of being a member of MS-13 after he got into a fight at high school. Boston Police are tracking nearly 5,000 people, almost all of them young, black and Latino men, through a secretive gang database, newly released data from the department shows. (AP Photo/Steven Senne)

Councilors look to defund police programs, force reforms

By **Milton J. Valencia** Globe Staff, Updated June 5, 2020, 7:22 p.m.



 Police officers stood by as protesters gathered in front of the Jamaica Plain police station, this week
Police officers stood by as protesters gathered in front of the Jamaica Plain police station, this week JOHN TLUMACKI/GLOBE STAFF

Amid a growing national movement to redirect police department funding to public health and violence prevention efforts, several Boston city councilors on Friday vowed to use the upcoming municipal budget process to force changes in the Boston Police Department.

Councilors this week began to take an uncharacteristically skeptical look at police spending, in the wake of [massive protests](#) of police brutality and racism in and around Boston. On Thursday, they withheld approval of a \$850,000 state grant for the Boston Regional Intelligence Center — typically a rubber stamp affair — amid concerns that a [gang database](#) racially profiles city immigrants and Black and brown youth.





Refugee Protection Act

Markey, Edward J. - (D - MA)

255 Dirksen Senate Office Building Washington DC 20510

(202) 224-2742

Contact: www.markey.senate.gov/contact

Warren, Elizabeth - (D - MA)

309 Hart Senate Office Building Washington DC 20510

(202) 224-4543

Contact: www.warren.senate.gov/?p=email_senator

McGovern, James (D-MA)

408 Cannon House Office Building
Washington, DC 20515

(202) 225-6101



Changing enforcement priorities and lack of discretion

- Schools, churches, hospitals no longer sanctuary spaces
- Assault on sanctuary policies in states and municipalities
- Winding down DACA
- Attempting to terminate TPS (temporary protected status for those fleeing civil war, natural disaster)
- memos give disincentive for survivors of crime or human trafficking



Role of nonprofit agencies, health providers, and community leaders

--provide essential wraparound services

--bolster claims by serving as witnesses

--advocate for policy changes

--protect your constituents from unlawful ICE and policing tactics

--be a conduit for your constituents to access protection from crime, domestic violence, fraud, employment discrimination/wage theft

--help with access to legal, medical, and social services



U Visas: for survivors of crime

--must show that survivor suffered significant mental or physical abuse

--credibility is essential

--assistance to law enforcement agency is required



Asylum: path to citizenship for those who have suffered past persecution or fear future persecution

- fear is objectively reasonable

- credibility

- fear on account of a protected ground (race, religion, national origin, political opinion, membership in a particular social group)



Special Immigrant Juvenile Status

A path to citizenship for those:

--under 21 years old

--neglected, abused, abandoned by one or both parents and reunification not possible

--dependent upon a court

--unmarried

--best interests to remain in the United States



Good Moral Character and Discretion

- A client's community ties and involvement are major factors in whether or not they will get many types of relief, including green cards (permanent residence)
- The credibility of the person writing the recommendation, and the depth of their knowledge about the applicant for an immigration benefit, are essential
- Efforts to rehabilitate individuals with criminal history, drug or alcohol addiction, or other derogatory factors must be well-documented and include intensive and meaningful services



Public Benefits and Public Charge

- Public Charge rule went into effect on February 24, 2020
- Primarily affects those applying for green cards
- Lack of clarity around future enforcement
- Balancing needs for survival versus immigration risks



Unemployment: It's an *earned* benefit, not a public benefit for immigration purposes

Noncitizen workers who are authorized to work in the United States may apply for unemployment insurance benefits. Persons who are undocumented should not file for unemployment benefits. The [Massachusetts Department of Unemployment Assistance](#) provides additional information about filing for unemployment as a noncitizen. Unemployment benefits do not count for Public Charge decisions.



Emergency Care and COVID 19 testing

U.S. Citizenship and Immigration Services (USCIS) has **issued guidance** encouraging *everyone* with symptoms that resemble COVID-19 to seek necessary medical care. USCIS has said that COVID-19 tests and treatment will not be considered for Public Charge decisions.

--MassHealth Limited and MassHealth Safety Net: emergency medical care is **not** generally considered for purposes of public charge analysis



Mixed Status Households: benefits for children

--food assistance for children generally not considered for public charge analysis (SNAP, WIC, P-EBT)

RESOURCES AVAILABLE IN MULTIPLE LANGUAGES

<https://protectingimmigrantfamilies.org/know-your-rights/>

<https://www.mass.gov/service-details/covid-19-resources-available-to-immigrants-and-refugees>

--Ascentria, Friendly House, and Catholic Charities: cash assistance available as of today



Federal Stimulus Payments

- available to permanent residents filing taxes with social security numbers
- call legislators about expanding to undocumented/those working with Tax ID numbers
- call legislators about those who are married to undocumented people and workers



Funds available for undocumented populations

<https://www.massundocufund.org/apply>

--Mass UndocuFund provides funding on a weekly, rolling basis as funds are available.

--Again, Worcester-specific funding through Catholic Charities, Friendly House, and Ascentria. Household size, country of origin, and zip code



How can your agency respond?

--What is your plan from a policy perspective? Are you applying for funds specifically to assist your undocumented constituents and to fill their needs for wraparound services?

--What mental health care/counseling are you providing? What partnerships can you make? How can your cultural organization incorporate mental health care and support into its programming? What is your policy around emergency mental health services?

--How are you ensuring that undocumented populations are receiving physical healthcare?

--What are you doing to help your clients assert their rights in the workplace? In courtrooms? In schools? In their homes? In working with the local police?



How can your agency respond?

--do your constituents know what to do if ICE shows up at their home? At their school? If a family member is detained? Have you/will you conduct a know your rights training? Are you providing information in a language and format that is accessible, including considerations of illiteracy?

--Does your agency have a plan if ICE shows up seeking to make and arrest(s)?

--Do you have a bail fund or emergency fund to help immigrants with urgent needs (legal or otherwise)?

--Have you educated your staff on possible immigration relief to look for, but also advised them about the risks and illegality of providing legal advice or services if not licensed?



Resources

<https://protectingimmigrantfamilies.org/know-your-rights/> (to inform constituents about police/ICE interactions)

<https://www.mass.gov/service-details/covid-19-resources-available-to-immigrants-and-refugees>

<https://www.ilrc.org/> (guides to public benefits, basic immigration relief)

<https://www.ilrc.org/coronavirus-and-immigration-ilrc-resources-responses>

<https://www.americanimmigrationcouncil.org/research/sanctuary-policies-overview>

<https://cgrs.uchastings.edu/> (psych experts and affidavits explaining effects of trauma)



New Asylum Clinic at UMASS Medical School

The UMass Medical School Asylum Clinic is a medical student-run human rights initiative established by The Health Professionals for Human Rights student group. This initiative is focused on promoting medical and legal collaboration to provide forensic medical evaluations to survivors of prosecution and torture seeking asylum in the United States, specifically in the Worcester, MA area. Local healthcare providers, who are trained members of the Physicians for Human Rights Asylum Network, conduct forensic medical and psychological evaluations, write legal affidavits and testify as expert witnesses to provide evidence of an individual's prior persecution in their home countries.

*Given the COVID-19 pandemic, we are now conducting forensic medical evaluations virtually, if you have a client that needs a medical evaluation please email a summary of the case and language requirements to

umassmedasylumclinic@umassmed.edu



When in doubt, reach out

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<https://communitylegal.org/>

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[Family Health Center Worcester](#)

508-756-6206, ext. 23; AMooradian@gskandg.com

Direct Line: 774-314-9815 (text preferred)

[Community Healthlink](#) (affiliated with UMass Memorial)