



## **Statement on the Impact of Parent-Child Separation on Parents' Ability to Effectively Participate in Asylum Proceedings**

This statement was prepared by members of the Stanford Early Life Stress and Pediatric Anxiety Program (ELSPAP) and Human Rights in Trauma Mental Health Program (HRTMH), part of Stanford's Department of Psychiatry and Behavioral Sciences. ELSPAP is a multidisciplinary team with expertise in childhood trauma and posttraumatic stress. We aim to address the impact that trauma has on child development and family functioning through three core components: research, clinical work, and community outreach. HRTMH advances and applies the impact of trauma on survivors of human rights abuses with an eye towards informing transitional justice and judicial processes.

Parents/caregivers who have been separated from their children while presenting for political asylum are required to participate in typical asylum proceedings, including credible fear interviews. However, the trauma of separation/disruption is likely to negatively impact parents'/caregivers' ability to effectively participate in this process. The current statement provides a review of the psychological theory, literature, and empirical evidence relevant to this issue.

### **Impact of Parent-Child Separation/Disruption on Attachment**

Attachment is a scientifically researched life milestone that ensures the psychological and physical well-being of the attached individual (Bowlby, 1982). Humans are biologically pre-programmed to form attachments with others (especially children and parents/caregivers) because it guarantees survival. A secure attachment, in which caregivers are available and receptive to their child when needed (Ainsworth et al., 1978), provides safety and healthy development of self-esteem, eagerness to learn, trust, and self-reliance and, thus, is crucial for an individual's psychological, cognitive, neurobiological, and social development. The attachment relationship not only is important for child development, but also is critical for parents'/caregiver's growth and well-being (Bowlby, 1952). Therefore, ruptures in attachment can have a devastating impact on both the child and the parent/caregiver. Research has shown that ruptures in parent-child attachment (due to experiences such as trauma, loss, and separation) are associated with significant parental/caregiver distress and impairment in functioning (Bowlby, 1940; Glasgow & Gouse-Sheese, 1995; Mena et al., 2008; Suárez-Orozco, Bang, & Kim, 2011). Forced separation/disruption during immigration is a unique form of separation due to the inherent uncertainty. This may lead parents to experience "ambiguous loss," a situation in which there is no certainty that their child will return the

way he/she used to be (Boss, 2002). Since this loss cannot be reconciled with the uncertainty, the grief process is frozen. The impact of such a loss inhibits parents'/caregivers' cognitive functioning, which significantly impairs their coping and decision-making capabilities. In his report to the World Health Organization, Bowlby suggested that there are critical periods during separation/disruption and reunification that play a role in mitigating the harmful, long-lasting effects on parent-child attachment (Bowlby, 1952). He concluded, and a wealth of other research has since shown, that the greater the degree and length of the separation/disruption the more there is potential for irreversible damage.

### **Parent-child Separation/Disruption is a Source of Trauma and Traumatic Stress**

In addition to the impact on attachment, forced and unexpected separation/disruption of an individual from her/his loved ones is a source of trauma and traumatic stress. The Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> Edition (DSM-5; American Psychiatric Association, 2013) specifies the first criterion (Criterion A) for post-traumatic stress disorder (PTSD) as including “exposure to actual or threatened death, serious injury, or sexual violence” through direct experience, witnessing, or learning that the event occurred to a close family member or close friend. In the case of forced family separation/disruption, parents/caregivers are faced with a significant threat to their child's well-being; from the parents'/caregivers' perspective, the child is under threat and in danger of experiencing physical violence (with potential to result in serious physical injury), sexual violation, or even death. It is our opinion that forced family separation/disruption therefore meets Criterion A for PTSD. As a result, we can expect many parents/caregivers to experience the symptoms of PTSD following the separation/disruption from their children; such symptoms include intrusive thoughts and feelings (e.g., unwanted memories, flashbacks, nightmares), avoidance of trauma reminders (thoughts, feelings, and external stimuli), negative mood and cognition (e.g., memory difficulty, negative thoughts about the world), and hyperarousal (e.g., difficulty concentrating, irritability, hypervigilance). Not all of these symptoms are necessary in order to experience functional impairment. Furthermore, it is widely known that exposure to traumatic events and threats to an individual's or loved one's well-being commonly results in a wide array of psychological symptoms beyond PTSD (Briere & Scott, 2015), such as depression, anxiety, dissociation, mood instability, and psychosis. These symptoms of trauma-related distress can be expected to severely affect parents'/caregivers' ability to provide coherent testimony, recounting, and narrative in asylum proceedings, as will be discussed further in this declaration.

In addition to the traumatic impact of the singular experience of family separation/disruption, additional characteristics of asylum-seeking parents'/caregivers' forced separation/disruption from their children are expected to significantly exacerbate the symptoms of traumatic distress. First, as mentioned above, the traumatic separation/disruption is ongoing, the loss is ambiguous, and there is undetermined resolution. Without having any expectation or knowledge of children's well-being or plans for reunification, parents'/caregivers' distress will be continually heightened. Extended chronicity and duration of the trauma or related threat are known to increase the frequency and severity of trauma-related psychological symptoms (Ford et al., 2015).

Second, parents/caregivers experience a significant loss of control and helplessness in this situation. They have little or no knowledge of their children's whereabouts or well-being, and minimal control over the outcomes for their children. The lack of perceived control during traumatic events engenders a sense of helplessness, which exacerbates trauma-related distress and negative psychological outcomes (Ford et al., 2015).

Similarly, parents'/caregivers' inability to contact, comfort, and communicate with their children reduces their sense of control, and in many cases strips them of the opportunity to perform their highest priority function in society: to care for and ensure the well-being of their offspring. When individuals are prevented from executing their societal roles and functions, they can be expected to experience psychological distress; once again, this will exacerbate the symptoms related to the trauma of separation/disruption. Finally, asylum-seeking parents/caregivers have inherently experienced prior traumatic events in their lives, as this constitutes the basis for seeking asylum. Traumatic stress is cumulative, and exposure to multiple or repeated traumatic events over the lifespan has been shown to increase risk, severity, and complexity of trauma-related symptoms (Cloitre et al., 2009). Therefore, the trauma of forced family separation/disruption compounds the prior traumas experienced by parents/caregivers (commonly including violence exposure, abuse, and traumatic loss) with the expected impact of significantly worsening psychological outcomes, levels of functioning, and ability to effectively engage in asylum proceedings. A growing body of empirical research has indeed demonstrated that parent-child separation/disruption during immigration processes (as well as corresponding parental detention and threat of deportation) is associated with increased risk, rates, and severity of mental health problems for parents/caregivers (Brabeck & Xu, 2010; Linton, Griffin, & Shapiro, 2017; Rusch & Reyes, 2013; Suárez-Orozco, Bang, & Kim, 2011).

### **Neurobiological Effects of Stress**

Traumatic stress, such as being separated from one's child as described above, has measurable effects on neurobiological and physiological functioning. When humans experience a stressor, physiological and mental resources are diverted to responding to the stressor (Ulrich-Lai and Herman, 2009). This response involves engagement of emotion processing centers of the brain, release of stress hormones, and activation of the sympathetic nervous system, resulting in a "fight, flight, or freeze" reaction. Under these circumstances, the human brain focuses on surviving the immediate threat, and other areas of the brain essentially go on lockdown until the threat is resolved. Thus, more complex cognitive functions are impaired while the body focuses on maintaining safety. Executive functioning, or the ability to solve problems, evaluate consequences, and make decisions, is particularly vulnerable to the effects of stress (Arnsten, 2009).

As described above, forced separation/disruption during the immigration process involves an ongoing, ambiguous, unresolved stressor. This experience greatly disrupts and diminishes organization, planning, and problem-solving. In addition, remaining in this heightened state of stress response can lead to physical and mental exhaustion, likely exacerbated by lack of sleep in parents/caregivers detained and separated from their children. Thus, the traumatic stress of forced separation/disruption from children puts a parent/caregiver at an extreme disadvantage in the capacity to navigate the process of

getting out of expedited removal proceedings, submitting a claim for asylum, and completing a credible fear interview.

### **Impaired Ability to Conduct Interviews and Provide Testimony**

As previously discussed, parents/caregivers separated from their children are likely experiencing symptoms of PTSD and additional mental health difficulties. Of particular concern is the impact on cognitive functioning related to the neurobiological stress response. Research has consistently found that several cognitive functions, including but not limited to attention, communication, and memory, are significantly impaired in individuals with PTSD and traumatic distress (Flaks et al., 2014; Olff, Polak, Witteveen, & Denys, 2014). In terms of attention, abnormalities in concentration, shifting of attention, and working memory capacity are common (Flaks et al., 2014; Olff et al., 2014), largely due to intrusive and distressing memories and thoughts (Flaks et al., 2014). In regard to forced family separation/disruption, parents/caregivers can be expected to struggle with memories of being separated from their children and ongoing thoughts of concern for their wellbeing. Parents/caregivers are expected to be overwhelmed and preoccupied by their concern for their children, with their functioning dictated by the automatic “fight, flight, or freeze” responses that effectively render them incapable of focusing on secondary priorities or other historical events. Therefore, despite their intentions and efforts, they will likely experience difficulties in maintaining focus and processing information appropriately, negatively affecting their ability to participate in asylum proceedings and credible fear interviews.

In addition to impairing attention, intrusive and distressing memories and thoughts interfere with the ability to effectively recall information (Flaks et al., 2014; Schweizer & Dalgleish, 2011). Specifically, memories become fragmented and disorganized as well as difficult to retrieve (Polak et al., 2014; Schweizer & Dalgleish, 2011). This means that while individuals may recall sensations and emotions associated with a memory, they tend to encounter difficulties in retrieving details or in providing consistent and coherent retelling of events (Schweizer & Dalgleish, 2011). Further, emotionally-laden information is typically affected to a greater degree than emotionally-neutral information (Schweizer & Dalgleish, 2011). Thus, providing emotional narratives of events is particularly difficult for individuals experiencing symptoms of PTSD and trauma-related distress. This is especially true for asylum seekers with PTSD, who have been shown to demonstrate poorer memory specificity (Graham, Herlihy, & Brewin, 2014). In the case of forced family separation/disruption, even when attention is not diverted to separation from their children, parents/caregivers can be expected to experience difficulties in recalling information regarding their fears of persecution in their home countries. This may result in failing to provide important and relevant details to support their cases, negatively impacting their ability to provide comprehensive and compelling information in asylum proceedings. These difficulties are even further exacerbated in the case of currently separated parents/caregivers, as their trauma is ongoing and unresolved (thus heightening the frequency and severity of the traumatic stress response and related symptoms).

Additionally, memories, including those of traumatic events, are naturally susceptible to misinformation effects (Paz-Alonso & Goodman, 2008). Misinformation

effects occur when an individual's recall of episodic memories become less effective due to post-event information (Paz-Alonso & Goodman, 2008). This is further perpetuated by a delay between memory formation and memory recall (Paz-Alonso & Goodman, 2008). Thus, as more time passes, and new information is processed, preexisting memories become more difficult to effectively and coherently retrieve. In the case of forced family separation/disruption, parents/caregivers are expected to exhibit increasing difficulty in recalling information prior to separation/disruption. In addition, repeated attempts to report traumatic events in a detailed manner may exacerbate current symptoms of PTSD and trauma-related distress, which may be derived from child separation/disruption or other factors of the pre- and post-migration process including but not limited to insecurity regarding legal status and fear of repatriation (Schock, Rosner, & Knaevelsrud, 2015). The aforementioned cognitive impairments associated with PTSD have an overwhelming effect on communication. Further, they have been found to negatively impact the ability to effectively provide court testimony. Thus, it is expected that parents/caregivers experiencing these deficits will struggle to provide detailed and coherent testimony in asylum proceedings.

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