

NPA Statement June 2018

NPA Advocates for the Health and Wellbeing of Migrant Families



Over the last two months, more than 2,000 migrant children, ranging from infants to teens, have been removed from their parents' care and incarcerated in makeshift detention centers as part of the current administration's "zero tolerance" interpretation of longstanding immigration statutes. Such internment, **without plans for interim care or reunion**, is a crisis for these children, their parents, and our society as a whole.

Based on medical, ethical, and moral grounds the National Perinatal Association - a multidisciplinary organization of parents and professionals who serve and advocate for pregnant women, newborns, and their families - unequivocally denounces the practice of separating migrant children from their parents as part of the current administration's immigration policy. We call on all our elected officials to address the harm that this policy has inflicted and continues to inflict on migrant families.

Decades of research in child development clearly show that this kind of traumatic separation has long-lasting detrimental health effects, including a greater vulnerability to chronic health problems, increased risks for mental health disorders, eating and sleeping disturbances, poor academic progress, and unresolvable grief.

For babies who need breast milk, this separation has interrupted normal immunologic and emotional development, while at the same time placing the lactating woman at risk for various medical complications.

For older children and teens that may have already witnessed violence, experienced poverty, and lived with insecurity this separation represents a secondary trauma that has served to reinforce these negative experiences and circumstances they were fleeing from.

The scientific evidence is clear: Separating migrant children from their caregivers is tantamount to child abuse.

Since the inception of immigration laws in the 1980's aimed at prosecuting undocumented immigrants that have entered the United States, these matters had been handled as civil matters, allowing for families to remain intact while immigration proceedings were held. In April of this year, these proceedings were turned into criminal cases by the Department of Justice as part of a "zero tolerance" policy, thus justifying the separation of parents from their children. This change has resulted in an unprecedented number of children being remanded to custody of the state and detained in makeshift facilities, tent cities, and empty, repurposed warehouses and stores, with little legal, medical, or educational oversight and a complete lack of transparency.

www.nationalperinatal.org

The members of NPA believe we have a moral and ethical obligation to protect children through preservation of the family unit. Separating families subjects migrant children to the same level of toxic stress and trauma that we as professionals see in cases of child abuse and abandonment, and it represents a level of cruelty that is untenable in civil society.

Clear medical and developmental evidence demands immediate termination of this practice and requires that we provide positive, evidence-based interventions that will help to heal these families.

The National Perinatal Association will continue to support and speak out for women, children and their families from all walks of life, regardless of documentation, and we hope that our colleagues in the medical, developmental, and advocacy fields will do the same until this administration reverses this cruel and traumatic policy and creates a plan for reunification and trauma-informed intervention that can help these families heal and be restored.

Join us in our Call to Action! [Follow this link - www.nationalperinatal.org/migrant_families](http://www.nationalperinatal.org/migrant_families) - and find out how you, as a perinatal professional, can add your voice to the growing chorus of physicians, providers, parents, and families speaking out against this cruel and unjust policy and implementing policies and practices that support these families.



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