

Immigrant Inmates in the Correctional System

2018

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Introduction

In the last twenty years, the immigrant population has increased by “70 percent to about 43 million” making up about “13 percent of the population” with “one in every four Americans” being “either an immigrant or the child of one” with estimates that “one million immigrants have come legally to the United States each year” since 2000 (Preston, 2016, p.1). The Pew Research Center (2008) illustrated that by 2050 one in five Americans (19%) will be foreign born, non-Hispanic Whites who comprised 67 percent of the population in 2005 will now be 47 percent, Hispanics will rise from 14 percent of the population in 2005 to 29 percent, Blacks will represent around 13 percent, and Asians, who were 5 percent of the population in 2005 will be at 9 percent. By 2050, 54 percent of the American population will be minorities. With this changing cultural landscape has come some contentious political divides. For example, recently the United States presidential election of 2016 brought to the forefront a growing public perception that immigrants take jobs away from Americans by lowering wages because they work for less, and if they are undocumented or from certain geographic regions, they are more prone to violence. In 2016, during the presidential election one candidate when speaking about illegal immigrants said they “compete directly against vulnerable American workers” and that he would “boost wages and ensure jobs were offered to American workers first” (Preston, 2016, p.1). However, a 2016 report by the National Academies of Sciences, Engineering and Medicine that conducted

This is the authors’ original manuscript of the work published in final form as:

Khaja, K., & Jagers, J. W. (2018). Immigrant Inmates in the Correctional System. In W. T. Church & D. W. Springer (Eds.), *Serving the stigmatized: working within the incarcerated environment*.

research from 14 leading economists, demographers and various other scholars did not support the stereotype that illegal immigrants are taking away jobs (Blau & Mackie, 2016). Numerous researchers have found that the “most commonly invoked explanation for why native populations express negative views towards newcomers” is the fear that “immigrants threaten the social position and control over valued resources of the native born” (Timberlake & Williams, 2012, p. 870). Negative societal perceptions of immigrants have generally occurred in areas with “high visibility due to dense settlement in major cities, distinctly different patterns of dress or religious-cultural customs, or darker skin” (Timberlake & Williams, 2012, p.868). Anti-immigrant public opinion has also been affected by whether immigrants are unauthorized to work, also referred to generally as undocumented or illegal workers (Timberlake & Williams, 2012). All these factors have led to increasing antagonism directed towards immigrants living in the United States. In addition, the global wide spread terrorist acts committed by ISIS followers who have often video-taped their gruesome and horrific acts has led to growing fear, and anxiety about immigrants coming especially from Islamic geographical regions. The reality is that many studies have shown that immigrants have “lower crime rates than natives” living in the United States and that “immigrants are only one-fifth as likely to be incarcerated for crimes” (Somin, 2015, p.1). The growing public perception which has been fueled by some political leaders that we can reduce violent crime rates by “reducing immigration or deporting more illegals” is not accurate or realistic (Somin, 2015, p.1). Research shows that “within the native-born population, there are a number of demographic groups that have much higher than average crime rates. For example, a hugely disproportionate percentage of violent crimes are committed by young males, particularly homicides” (Somin, 2015, p.1). Adult men born in the United states are incarcerated two-and-a-half times more than men born in other countries (Butcher & Piehl, 2008). There is

growing concern today that immigration detention and incarceration has an uncanny resemblance to the “policies of criminal sanctions and mass incarceration used to fight the war on drugs” during the 1980’s that led to the “overincarceration of African American males” also known as the “browning of our American prison” system (USA Today, 2006, p. 7). Others argue that that “deportation of so-called ‘criminal aliens’” has become the driving force in U.S. immigration enforcement” (Chazaro, 2016, p.594).

Migration

During the 20th century the geographical origin of immigrants went through a major shift. In the 1900’s approximately 80 percent of immigrants came from Europe, with much smaller populations from Latin American, Asia, and other areas. However, by 2000 about 16 percent of people living in the United States who were born in foreign lands came from Europe with “half of all immigrants from Latin America, over a quarter from Asia, and another 6 percent from other regions (Timberlake & Williams, 2012, p. 869). Undocumented migration to the United States started back in 1965 because of changes to the U.S. immigration policy. Before this time, Mexicans had been given opportunities to access temporary worker programs easily with no numerical legal permanent residency restrictions. However, around the “end of 1964, the U.S. Congress abruptly terminated the Bracero program, and in 1965, it imposed the first ever numerical limitations on legal immigration from the Western Hemisphere” (Massey, Durand, & Pren, 2014, p. 1029). But, due to the organized migrant networks and monetary needs in Mexico “migrants simply drew on network ties to continue migrating without authorization to jobs waiting for them north of the border” as there were many employers willing to hire them in the underground economy (Massey, Durand, & Pren, 2014, p.1030). By 2010 there were at least 47 million Latinos living in the United States with undocumented immigrants making up one fifth

(19%) of this population (Arbona, Olvera, Rodriquez, Hagan, Linares, & Wiesner, 2010). The population today for undocumented residents is about 11 million, 60 percent are from Mexico and about 15 percent are from Central America with 5 percent having Latin American or Caribbean origins (Massey, Durand, & Pren, 2014).

The latest figures from 2014 illustrate that there are approximately 42.4 million immigrants who live in the United States, 13.3 percent of the total population of 318.9 million (Zong & Batalova, 2016). However, immigrants and their U.S. born children number about 81 million people, about 26 percent of the total population. Currently, the Census Bureau describes immigrants as being foreign born individuals which includes “lawful permanent residents, temporary nonimmigrants, and unauthorized immigrants” (Zong & Batalova, 2016, p.1). The largest immigrant group that makes up 28 percent of the 42.4 foreign born population are Mexicans. Immigrants to the U.S. from India, China (including Taiwan), and the Philippines make up about (5 percent each), El Salvador, Vietnam, Cuba, and Korea represent (3 percent each), and the Dominican Republic and Guatemala make up (2 percent each). The immigrants from these 10 countries represent 60 percent of the U.S. immigrant population (Zong & Batalova, 2016). In 2014, 48 percent of the foreign born population described their race as White, 26 percent as Asian, 9 percent as Black, and 15 percent as a different race, with 2 percent having two or more racial backgrounds (Zong & Batlova, 2016). “In 2014, the top five U.S. states by number of immigrants were California (10.5 million), Texas and New York (4.5 million each), Florida (4 million), and New Jersey (2 million) (Zong & Batalova, 2016, p. 1).

Immigrant Detention and Deportation

A lot of the debate and controversy by policy makers and activists on detention of undocumented immigrants has focused on “whether the well-being of individuals should supersede economic and security concerns” (Rocha, Hawes, Fryar & Wrinkle, 2014, p. 79). At the same time the enactment in 1986 of the Immigration Reform and Control Act (IRCA) and the Immigration Act of 1990 led to a dramatic increase in resources for Border Patrol and the Immigration and Naturalization Service (INS). The budget of Border Patrol increased substantially from \$151 million in 1986 to surpassing 1 billion in 2000 (Rocha, Hawes, Fryar, & Wrinkle, 2014). The U.S. government can now detain and deport “immigrants whom they find undesirable either because they are in the United States without authorization or because they have past criminal convictions” (Sladkova, Garcia-Mangado, & Quinteros, 2012, p.78). This was made possible by laws that included: the 1996 Illegal Immigration Reform and Responsibility Act (IIRIRA) and the Antiterrorism and Effective Death Penalty Act (AEDPA) which further broadened the definition of which types of people could be detained or removed from the United States. The IIRIRA law is also retroactive which makes it possible for immigrants to be deported “for offenses they committed before 1996 and for which they have already served their sentences” (Sladkova, Garcia-Mangado, & Quinteros, 2012, p.79). Studies have found that legal permanent residents have been incarcerated and deported for “shoplifting, jumping turnstiles, drunken driving, urinating in public, forgery, receipt of stolen property, petty drug crimes, or non-violent offenses” with poor access to judicial due process (Sladkova, Garcia-Mangado, & Quinteros, 2012, p.79).

There were 679,996 apprehensions in 2014 by U.S. Customs and Border Protection (CBP) and U.S. Immigration and Customs Enforcement (ICE), the two agencies within DHS responsible for the identification and removal of inadmissible noncitizens. The

Border Patrol reported 486,651 apprehensions (72 percent of all apprehensions) in 2014, a 16 percent increase from 420,789 in 2013. About 99 percent of Border Patrol apprehensions (479,371) occurred along the Southwest border. Additionally, ICE Enforcement and Removal Operations made 181,719 administrative arrests (27 percent of total apprehensions in 2014) and ICE Homeland Security Investigations made 11,626 administrative arrests (2 percent). (Zong & Batalova, 2016, p.1).

The majority of people apprehended in 2014 came from Mexico, Honduras, Guatemala, and El Salvador, making up 93% of all apprehensions (Zong & Batalova, 2016). Shankar (2010) reported that approximately half of the people removed from the United States had a criminal record with most of it related to drunk driving or drug related offenses. A study done by Sladkova, Garcia-Mangado, & Quinteros (2012) and other studies have illustrated concerns about the serious impact of detention and deportation of a parent(s) on their children. Such children are at greater risk of living in poverty, experiencing trauma related to emotional distress; having feelings of abandonment due to a parent(s) who disappeared suddenly, facing educational challenges, more chances of their health impacted, and more vulnerability to joining gangs etc. The study recommended “lawyers, community leaders, immigrant-serving and faith-based organizations, and other trusted community members should educate parents about the best ways to respond when they are detained” and found that more education was needed to ensure that eligible immigrants apply for U.S. Citizenship (p.92).

History of Immigration Policy

The “United States was founded by immigrants, colonists who came to the shores of the New World for economic gain and religious freedom” (Jaggers, Gabbard, & Jaggers, 2014, p.3). Yet,

historically there have always been attempts to control immigration by citizenship processes and implementation of border control for certain populations (Jacobson, 1998; Jagers, et al., 2014). From the early beginnings, the U.S. vision had not initially been about restricting immigration as the country needed more population. However, “late in the nineteenth century, nativism would take hold and incrementally, laws would slowly be implemented to regulate immigration” (Jagers et al., 2014.p.4) with five eras of immigration policy that framed the New World. During the *Open Door Era: 1776-1881*, the Naturalization Act of 1790 granted citizenship “to all white men of good moral character” with women getting citizenship via their husband or father (Jagers et al., 2014, p.4). The Alien and Sedition Acts of 1798 permitted “the president to deport any alien that was considered harmful to the safety of the United States” or “any alien from a country at war with the U.S.” (Jagers et al, 2014, p. 4). Slaves initially were not seen as citizens, but that decision was reversed with “the passing of the 13th and 14th amendments to the Constitution in 1865 and 1868” (Jagers et al., 2014, p.4). The *Era of Regulation: 1882-1916* occurred as increasingly more immigrants started to come from China and Europe. This led to formulation of the Chinese Exclusion Act of 1882 which stopped immigration of both skilled and unskilled labor from China for a decade, and was later extended. While Chinese already living in the U.S. could stay, they still experienced a great deal of discrimination and resentment and were essentially viewed as a threat to nativists getting higher wage increases and jobs. The Scott Act of 1888 did not permit Chinese from returning to the U.S. if they left, further isolating them from their cultural roots. Ellis Island reviewed immigrant applicants from Europe, and Angel Island became the entry point for Asian immigrants who wanted to live in the U.S. In 1906 the Naturalization Act was enacted which “required” all immigrants to learn English to get citizenship (Jagers et al, 2014). In 1907, the Dillingham Report which examined the effects of

migration for Congress recommended that immigration had to be less and could pose a risk to “American culture and society” (Jaggers et al., 2014, p.6). Subsequently, the *Era of Restriction: 1917-1964* led to more groups being denied entry into the U.S with the passage of the Immigration Act of 1917. A literacy test was now required to enter the U.S. with people from areas in Asia and the Pacific Islands barred from entry into the U.S. The Emergency Quota Act of 1921 provided specific “formula on how many could enter from a given country” (Jaggers, et al., 2014, p.7). Then in 1952 Congress enacted the McCarran-Walter Act that got rid of racial and ethnic descriptors of who could enter the U.S. and created “three classes of immigrants-the skilled immigrant or related to a U.S. citizen, the average immigrant and the refugee” (Jaggers, et al., 2014, p.7). The *Era of Liberalization: 1965-2000* was symbolic of “equalizing immigration policy, migration into the United States began to shift from predominantly European nations to Asian and other American countries” (Jaggers, et al., 2014, p.8) based on a “first come, first-served basis instead of using race or other sociocultural markers for distribution” (Jaggers et al., 2014, p.8). The *Era of Devolution: 2001-Present* was symbolized by the terrorist attacks on September 11th, 2001 against the World Trade Centers in New York City. Implementation of the Patriot Act of 2001 gave the “government the ability to deny admission or to deport any immigrant who is politically or socially affiliated with a group that undermines U.S. anti-terrorist activities, has been in a position to endorse such activity or intends to participate in terrorist activity against the U.S.” (Jaggers, et al, 2014, p. 9). Immigration security concerns led to a number of propositions being passed in different states. In Arizona this included restricting undocumented individuals from getting state benefits, being allowed to have a bail if they were involved in particular crimes, restrictions to in-state tuition or financial aid if they were attending public universities or colleges etc.

Delinquency and Immigrant Youth

Defining who is an immigrant isn't nearly as easy as many consider. The oft-cited definition is any individual who resides and was born in the country and comes into the United States. However, the spectrum of immigration types is far more complicated. Unfortunately, foreign-born families are often treated similarly, with some variation based on country of origin and ethnicity (Fridrich & Flannery, 1995; Bui & Thongniramol, 2005). Further complicating the immigrant definition are 1st and 1.5 generation youth. First generation immigrants are those born abroad who later migrate to the U.S. (Portes & Rumbaut, 2005; Sharpton, 2012). Between 1990 and 2015, the number of children with immigrant parents in the U.S. doubled to over 17 million (Migration Policy Institute, 2015). While not explicitly outlined, there is an underlying assumption that first generation immigrants are older youth or adults capable of *deciding* to migrate to a new country. On the other hand, 1.5 generation youth are born abroad but *accompany* parents, family, or other adults into another country. In contrast to 1.5 generation youth, children born in the U.S. to immigrant parents are referred to as second generation "immigrants."

Migrating to the U.S. presents specific challenges to immigrant youth – namely acculturation. There is much variation in the conceptualization of acculturation (Thomson & Hoffman-Goetz, 2009). Still, most definitions include aspects of psychological and social adaptation to new and different norms and values. This is cited as a major concern for those immigrating to a new country. While there is great variation in the impact of acculturation, it is widely accepted that the acculturation process can be difficult, and may result in adverse social, emotional, and familial problems (Berry, 2003; 1997).

One problem often encountered is *dissonant acculturation*, also known as the acculturation gap-distress hypothesis (Tezler, 2010). Immigrant adults arriving in the U.S. bring the norms, values, and cultural aspects from their home country with them. That is, they don't automatically adopt the values and norms of their host country. Instead, acculturation is a process of learning and of behavioral change. However, this can present some unique problems for children born in the U.S. (or those that migrated with their parents at a very young age). Parents encourage the uptake of values and norms that they themselves were taught, and this seems to be the basis of dissonant acculturation. As youth mature and have greater involvement with non-immigrant youth and families, their belief system is influenced by that of their parents and by the larger society, which has its own set of norms and values. The difference in values and norms expected by the parents, and those that are actually learned means that parent and child have different social and cultural perspectives. These differences are, at least partially responsible for family conflict and maladjustment (Costigan & Dokis, 2006).

Preference given to American cultural values by Hispanic youth is associated with high risk behaviors such as school conduct problems and psychosocial impairment, impacting the youth's ability to successfully function in society (Lau et. al, 2005). Aggression, isolation, and poor academic performance are all associated with juvenile delinquency leading to incarceration. These concerns are hardly addressed by current migration policy. At the time this chapter was written, the President of the United States was advocating for a \$20 billion border wall between the U.S. and Mexico, while also restricting entry to Muslims from the Middle East, a move not seen since the late 19th Century.

Crime and Adult Immigrants

Popular perception is that recent immigrants to the U.S. are more likely to commit crime, especially violent crime, than those native to the U.S. However, recent immigrants are far less likely to commit crime or to engage in anti-social behavior, even when accounting for education, income, and residence in urban communities (Sampson, 2008; Reid, Weiss, Aldeman, & Jarel, 2008; Ewig, Martinez, & Rumbaut, 2015; Vaughn, Salas-Wright, DeLisi, & Maynard, 2014), a fact established in the early part of the 20th Century (Speranza, 1911-1912). The question remains as to why do people *believe* that immigrants frequently engage in criminal acts? Martinez and Lee (2000) proffer a number of theories, such as limited opportunity structures (Bankston, 1998), the culture of poverty hypothesis (Lewis, 1965), and social disorganization (Bursik, 1988; Tjomas & Znaniecki, 1920) that may account for these factual discrepancies. Stumpf (2006) suggests group membership may also play a major role in the treatment of immigrants. The criminal justice system engages in discrimination (even if unintended) against immigrants who are then denied the same rights as citizens of the U.S. Still, these suggestions are all undergirded by negative public opinions about immigrants, opinions that have existed and developed since the early 19th Century (Roper Reports, 1995; Simon, 1993).

Popular perception has led to moral panic, a condition resulting in discriminatory legislation and intensified police enforcement in immigrant communities (Sabina, Cuevas, & Schally, 2013; Zatz & Smith, 2012). However, *victimization* of immigrants is a substantial problem, and is especially bad for immigrants from Latin America, and specifically Mexico, who are more socially disadvantaged (Tonry, 1997). Consequently, immigrants are less likely to report crimes against them or their community (Davis & Henderson, 2003). The popular fear mongering perception that immigrants engage in more criminal behaviors than U.S. citizens, combined with serious victimization may exacerbate already existing legal and political

problems. The reluctance to engage with law enforcement, even though prudent given known prejudices, may actually worsen perceptions.

Child Welfare Involvement & Immigrant Families

Immigrant families often have difficulty with child welfare agencies. Besides limitations imposed by poverty, immigrants face a unique set of problems. Among the most common are caseworkers' inadequate knowledge of immigration, cultural differences & acculturation, and challenges arising from language differences (Earner, 2007; Johnson, 2007). Despite opinions otherwise, child maltreatment is more common among native families than in immigrant families (Dettlaff, Earner, & Phillips, 2009). Unfortunately, child welfare practitioners' limited understanding of immigrant experiences, combined with negative perceptions about immigrants, involvement with the child welfare system results in unique problems that may yield serious family trauma (Pine & Drachman, 2005).

Often times, families involved with the child welfare system are provided services directed toward family unification, including health and mental health services. Those families who are undocumented and/or have limited English proficiency have a more difficult time *accessing* services, even when court mandated (Aydon, 2008). Moreover, non-White families often experience longer out-of-home placement and limited *availability* of services to reunify families (Chow, Jaffee, & Snowden, 2003; Lu, et al., 2004). This is especially problematic since immigrant caregivers involved with the child welfare system demonstrate serious mental illness, greater cognitive impairment, and more involvement with the justice and the incarceration system (Rajendran & Chemtob, 2009). There is also some evidence that children in Latino families receive fewer mental health services (Dettlaff & Cardoso, 2010).

Immigrant families have serious difficulties accessing and using services designed to facilitate family reunification. There is a strong association between histories of child maltreatment and delinquency (Landsford et al., 2009), adult criminality (Elklit, Karstoft, Armour, & Feddern, 2013), and future abuse of one's own children (Heyman & Slep, 2002). Limited access to services that help to reunify families most certainly has a significant negative effect on the long-term wellbeing of immigrant youth and families. Increasing access to high quality services for families involved in the child welfare system is an essential component for ensuring wellbeing into adulthood.

Services to Immigrants

Immigrants are already one of the most under-served populations. Similarly, individuals with previous criminal justice system involvement have difficulty accessing and using health and mental health services (Kim et al., 2011; Berk, Schur, Chavez, & Frankel, 2000). Moreover, there is limited access to legal representation for poor immigrants (Katzman, 2007). The resulting "storm" of limited access has been blamed for making the plight of immigrants in the US worse, potentially restricting any opportunity for upward mobility.

The healthcare system imposes a number of barriers, such as cost of care, which limits access and use of healthcare. Prevention of medical disease is a public health concern. In addition, prevention efforts serve an economic function, limiting individual expenditures on healthcare by maintaining health rather than fixing existing problems. Unfortunately, there are barriers specifically targeting immigrants that limit their use of healthcare. Inconsistent involvement with public health agencies places a significant burden on the healthcare system. Immigrants with chronic conditions such as HIV, and who need prenatal care or vaccination,

further exacerbate community health problems that could otherwise be addressed through increased access to healthcare (Kullgren, 2003).

A number of political determinants are associated with use of healthcare. Despite policy mechanisms like the Affordable Care Act, immigrants' often do not have health insurance. Undocumented immigrants are explicitly prevented from receiving the benefits provided by the affordable care act (National Immigration Law Center, 2014) and undocumented immigrants are only allowed Medicaid services in exceptional cases (Center for Medicare & Medicaid Services, 2014).

While married, older females are far more likely to have insurance and to access healthcare than other demographics (Nandi et al., 2008), many are left uninsured or under-insured. Many times immigrants from Mexico and Central America are forced back across the border into Mexico to receive treatment. While mostly self-initiated (Willow, Mendez-Luck, & Castaneda, 2009) some formal mechanisms have been established for Mexican immigrants to receive treatment in Mexico (Warner, 2012). Still, children from immigrant families are far more likely to be unhealthy (Huang, Yu, & Ledsky, 2006). Since adult wellbeing is largely influenced by health status, immigrant children do not have the best start. Poor health then likely perpetuates difficulties in accessing and using healthcare services.

Mental illness is often a major concern among immigrant groups. The source and severity of mental illness is effected by a number of unique circumstances not necessarily problematic in the native born population. For example, Latino immigrants must often acculturate to the social norms and expectations of individuals and groups in the U.S. This entails, to a certain degree,

rejection (or at least suppression) of one's own beliefs in order to adapt to a new set of attitudes and beliefs (Pumariega, Rothe, & Pumariega, 2005).

There is also a significant difference in access to and use of mental health services when compared to native born populations (Nandi, et al., 2011). This may be due in part to socioeconomic circumstance; those in poverty are less likely to receive treatment for mental illness (Chow, Jaffee, & Snowden, 2003). However, a number of barriers specifically applicable to non-European immigrants have been identified. Whitley and colleagues (2006) found that immigrants were reluctant to use services because of the over-use of medications, dismissive attitudes by practitioners, and beliefs in "non-traditional" techniques not employed by Western practitioners.

Surprisingly, many immigrants are unwilling to access community-based mental health services but are more enthusiastic about seeking mental health treatment from physicians (Kiramyer, et al., 2011; Vega et al., 1999). Among other approaches, school-based treatment has shown some success in providing accessible treatment for Latino children (Kataoka, et al., 2003). This reluctance to seek out and receive mental health treatment by immigrants, especially Latino immigrants, is most certainly related to cultural, familial, and legal concerns. Providing access to treatment in "sheltered" conditions, conditions where these concerns are adequately addressed should be implemented to ensure the well-being of families and to ensure less chances of getting involved with the judicial system.

Conclusion

With the growth of the immigration detention population, more private immigration facilities have been created in the United States. The Department of Homeland Security is

relying more on “private companies to detain an immigrant detainee population that’s reaching historic highs” (Speri, 2016a, para.1). In 2014 the immigration detention population was reported to have increased by 47 percent during the last decade (Speri, 2016). A 2016 report commissioned by the Department of Homeland Security that involved law enforcement, national security and military experts was critical of private immigration detention centers finding that correctional services, programs, resources, safety and security measures was not at the standards of general correctional services, and did not result in significant saving cost measures.

Immigration and Customs Enforcement (ICE) reports that “70 percent of its detainees are held in privately run facilities” (Speri, 2016b, para 11). Currently there are approximately 41,000 immigrants in detention with this number expected to rise to 45,000 soon. Detention Watch Network’s (2016) report states that the “U.S. immigration detention system is the largest in the world” with “over 200 detention facilities” and American tax payers paying “more than 2 billion each year to main the detention system” (Detention Watch Network, 2016, p.2). In August of 2016 the Department of Justice announced that it would begin phasing out private prisons with some reasons related to “investigative reporting on deaths as a result of medical neglect and other serious deficiencies” and also “years of careful research and advocacy by non-profit organizations, and organizing and resistance by people incarcerated in the facilities” (Detention Watch Network, 2016, p, 2).

The federal government of the United States has pledged to deport millions of immigrants that did not come here legally causing a serious crises for the emotional well-being of these families, many of whom are reporting severe anxiety, fear, and stress. Research by the Sentencing Project which is a criminal justice research and advocacy group found that residents not born in the United States will engage in crime less often than citizens born in the United

States. Another study by the Cato Institute reported that immigrants are “less likely to be incarcerated” relative to native “shares of the population” (Bernal, 2017, para. 3). One presidential candidate during the 2016 campaign trail stated that he felt illegal immigrants further posed an economic threat and were one of the reasons for crime increases. The 2018 federal budget of the “Department of Homeland Security’s (DHS budget” will increase by 3 billion to fund a “proposed border wall and executive orders on immigration” (Bernal, 2017, para. 4). Further during the 2016 presidential election on various occasions on candidate stated that he felt that immigrants “bring crime” often specifically mentioning individuals who had been murdered by immigrants who were not here legally (Bernal, 2017, para. 5). Many have been deeply troubled by such statements feeling it is creating societal hysteria, and increasing discriminatory views about immigrants that they are more prone to crime, factors that could explain increases in hate crimes towards immigrant populations living in the United States. The Cato Institute and the Sentencing Project do not support findings that immigrants commit more crimes than people born in the United States. Further the Cato Study found that “there are about 2 million U.S. born citizens, 123,000 undocumented immigrants and 64, 000 documented foreign citizens in jails” (Bernal, 2017, para. 9). Many families who may have had children born here but who did not come here legally and who have lived here for years now face threat of incarceration and ultimately deportation. This has heightened anxiety levels for many communities. Further, the Attorney General Sessions has “threatened to strip Justice Department funding from what are known as sanctuary city jurisdictions that don’t comply with a particular federal law about sharing information with Immigration and Customs Enforcement” (Zapotosky, 2017, para. 8). There is now an increase in lawsuits against the federal government because of this. Others are concerned that “crime victims, victims of sexual abuse and domestic violence, witnesses to

crimes who are aiding law enforcement, limited English speakers” and others who come to the courts for help who did not come here legally face a double jeopardy as they could be incarcerated and eventually deported if it is learned they are here illegally, making them more vulnerable to be repeated crime victims (Zapotsky, 2017, para. 13). The federal government’s persistent attempts to ban people coming from seven Muslim majority countries has also led to increasing fears within this community as well. The Southern Poverty Law Center reported that “at least 700 hateful incidents of harassment around the country against immigrants were reported during the week after the presidential election” (Davis, 2017, closing paragraph).

All of these potential changes also increase the risk that immigrant youth will not receive the services they need to address the psychosocial correlates of delinquent behavior. With a strong emphasis on deportation, youth who would have previously been provided services (i.e. probation, family therapy, etc.) may find themselves incarcerated for otherwise minor offenses. This approach serves to support political ideals about the supposed economic problems arising from immigration. Moreover, the belief that immigrants are criminals, despite evidence to the contrary, has previously enforced populist ideas (c.f. Arizona SB 1070) about the treatment of immigrants in the criminal justice system.

Trends and Future Directions

In May of 2017 immigration and customs enforcement conducted the biggest anti-gang operation which led to 1,300 arrests in the United States. Contrary to stereotypes “of the arrests, 933 were US citizens and 445 were foreign nationals, with 384 in the country illegally” (Kopan, 2017, para. 2). Further, “of the 1,378 total arrests, 1,095 were confirmed to be gang members or affiliates of a gang, ICE said, including mostly Bloods, followed by Sureños, MS-13 and the

Krips” (Kopan, 2017, para.5-6). Some have argued that the aggressive commitment by ICE to target gangs whose membership includes people of color, or diverse ethnicities is leading to higher incarceration rates of this population. However, various studies have shown that “immigrants are less likely to commit serious crimes or be behind bars than the native-born” and that “high rates of immigration are associated with lower rates of violent crime and property crime” which “holds true for both legal immigrants and the unauthorized, regardless of their country of origin or level of education” (Ewing, Martinez, & Rumbaut, 2015, para. 1). Thus contrary to myths, and stereotypes strict immigration laws and policies do not appear to be an appropriate strategy to address crime. The growing stigma of immigrants being associated with “criminality” had led to common misconceptions that immigrants are threats to the national security which is contrary to empirical evidence. What is deeply troubling is that “whole new classes of felonies have been created which apply only to immigrants, deportation has become a punishment for even minor offenses, and policies aimed at trying to end authorized immigration have been made more punitive rather than rational or practical. In short, immigrants themselves are being criminalized” with more immigrant communities fearing their incarceration rates will increase (Ewing, Martinez, & Rumbaut, 2015. para.1).

The United States is in the midst of a “great expulsion” of immigrants, both lawfully present and unauthorized, who tend to be non-violent and non-threatening and who often have deep roots in this country. This relentless campaign of deportation is frequently justified as a war against “illegality”—which is to say, against unauthorized immigrants. But that justification does not come close to explaining the banishment from the United States of lawful permanent residents who committed traffic offenses and who have U.S.-based families. Nor does it explain the lack of due-process rights accorded to so many of

the immigrants ensnared in deportation proceedings. Likewise, the wave of deportations we are currently witnessing is often portrayed as a crime-fighting tool. But, as the findings of this report make clear, the majority of deportations carried out in the United States each year do not actually target “criminals” in any meaningful sense of the word. (Ewing, Martinez, & Rumbaut, 2015, para.8).

Today more immigrant families are being separated with billions being spent on border enforcement. Many immigrants come to the United States to pursue better lives for their families. As Ewing, Martinez, and Rumbaut (2015) state, “public policies must be based on facts, not anecdotes or emotions” and that the continued increases in the “detention-and-deportation machine is designed to primarily track down and expel non-violent individuals, including legal residents of the United States who have worked and raised families here for many years” (Ewing, Martinez, & Rumbaut, 2015, para. 11). It is critical that as we move into the future that “US immigration policies accurately reflect the diversity and complexity of immigration to this country, based not on a reflexive politics of fear and myth, but on sound analysis and empirical evidence with “due process rights accorded to so many of the immigrants ensnared in deportation proceedings” (Ewing, Martinez, & Rumbaut, 2015, p.12-13). Undocumented workers who work in the “underground economy” are not protected by labor laws and have justifiable fears of being incarcerated and deported, leading to more opportunities for unethical employers to intimidate, abuse and exploit them for profit. More advocacy agencies, volunteer lawyers, and mental health supports systems must be put into place to support such workers who face increasing anxiety and stress about what the future holds for them and their children in the United States.

Sample Case

Juan is a 16 year old Hispanic adolescent with no known criminal record who was arrested for suspicion of trafficking marijuana. Juan's primary language is Spanish. At the time of his arrest his citizenship status was unknown. Juan is an American citizen who was born in Puerto Rico. He and his father moved to a rural county in the Southeastern United States when he was 12 to find stable employment. Initially, Juan was referred to Immigration and Customs Enforcement for processing. After determining his citizenship status, he was remanded to the jail in his hometown without bail pending trial. Juan met with the prosecutor. He was not afforded a translator. Subsequent to his meeting, Juan pled to possession of a controlled substance and was sentenced to 6 months in jail and 2 years of probation. Even though he was a first time offender, Juan's conviction for possession of a controlled substance meant he did not qualify for the county's diversion program. Diversion programs, such as Juvenile Detention Alternatives Initiative (JDAI) are designed to reduce the number of juveniles detained in prisons and jails. However, the county's diversion program excludes youth convicted of drug or violent offenses.

Three days after arriving in jail, Juan was assigned a Spanish-speaking mental health provider – Amanda. Amanda told Juan that she would be assessing him to identify any areas of concern. Amanda used the MAYSI-2 (Massachusetts Youth Screening Instrument) to identify potential mental health concerns. The MAYSI-2 identifies concerns with Alcohol/Drug Use, Angry-Irritable Behavior, Somatic Complaints, Suicidal Ideation, Thought Disturbances and Traumatic Experiences. The MAYSI-2 provides three levels of concern: no concern, caution, and warning. Warning is the most urgent outcome for each of the subscales, and indicates a need for immediate intervention by a mental health professional. Based upon discussions with Juan and an evaluation using the MAYSI-2, Amanda determined Juan had two areas of concern; the

MAYSI-2 indicated “Caution” for Somatic Complaints and “Warning” for Alcohol/Drug Use. To address the somatic complaints, Amanda referred Juan to the jail’s nurse practitioner to evaluate his physical health. At admission to the jail, Juan tested positive for marijuana and admitted to drinking vodka prior to his arrest. Further assessment of Juan’s substance use revealed that he drinks alcohol 3 or more times per day. Consequently, Amanda referred Juan to a substance abuse treatment program within the jail that included an abstinence-based peer support group and weekly meetings with a substance abuse counselor to address his needs and progress toward sobriety.

Juan’s time in jail was difficult. The county where he resided was a poor, rural area of the state. The population was largely English-speaking, white individuals. Besides Amanda, no one in the jail spoke Spanish. Juan’s limited ability to communicate using English made things even more difficult. He was unable to connect with any of the other inmates and most regarded him as just another immigrant. Moreover, neither his substance use therapist nor members of his peer support group spoke Spanish. Near the end of his jail time the substance use therapist expressed concerns that Juan had not taken his treatment seriously. After reporting her concerns to Juan’s probation officer Thomas, he required Juan continue his treatment after leaving jail.

Prior to his arrest, Juan and his father had summer jobs working for a landscaping company. However, Juan was released during the winter and had no prospects for employment. Similarly, his father had not secured employment since the fall. A condition of Juan’s release is that he become employed within 30 days, and that he begin substance use treatment immediately, something he must pay for himself. In addition, he was required to stay in the county for 6 months. Since Juan wasn’t able to secure employment in his home county, he moved to a large city 100 miles away and secured a job at a fast food restaurant. He also began treatment with a

Spanish-speaking therapist at a community mental health center. Despite his success in meeting most of the requirements, he was re-arrested.

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Web resources:

Juvenile Detention Alternatives Initiative (JDAI): <http://www.aecf.org/work/juvenile-justice/jdai/>

Massachusetts Youth Screening Instrument (MAYSI-2): <http://www.nysap.us/MAYSI2.html>

Sentencing Project: <http://www.sentencingproject.org/>