INTEGRATING SOCIAL AND LEGAL SERVICES FOR INDIVIDUALS IN INS DETENTION

PREPARED BY THE FLORENCE IMMIGRANT AND REFUGEE RIGHTS PROJECT
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1. **Introduction and Purpose of Manual**

Congress has made Immigration and Naturalization Service (INS) detention of non-citizens a cornerstone of U.S. immigration policy. Since 1996, the detained population has tripled, from 8,279 to over 24,000 [check numbers] detained at any one time nationwide. It is anticipated that the noncitizen detained population could double again within the foreseeable future. Individuals in INS detention are going through immigration removal proceedings, which occur before a federal administrative law judge and are adversarial and complex in nature. All are charged with not being citizens of the United States and some are charged with violating the conditions of their legal status. None have the right to government-appointed counsel\(^1\) and an estimated ninety percent lack legal representation.\(^2\)

People in INS detention have a wide variety of needs, which extend beyond their legal cases. They come to detention often times as a result of criminal activity; in the process of seeking asylum from their home countries where they have been harmed or fear persecution; or because they have left home to obtain work in the U.S. and do not have the proper documents to

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\(^1\) Section 292 of the Immigration and Nationality Act provides:

> In any removal proceedings before an immigration judge and in any appeal proceedings before the Attorney General from any such removal proceedings, the person concerned shall have the privilege of being represented (at no expense to the Government) by such counsel, authorized to practice in such proceedings, as he shall choose.

\(^2\) At the beginning of 1999, the INS was holding 16,000 non-citizens in custody. William Branigan, *INS Field Offices Face Severe Funding Cuts*, WASHINGTON POST, Jan. 12, 1999. In 1999, 4,607 children under the age of eighteen were detained. James Pinkerton, *Border Patrol Detains More than 9,000 Kids Over Past Two Years*, HOUSTON CHRON., Jan. 31, 2000. On any given day there are 500 children in INS custody. Alisa Solomon, *Despite Public and Political Outcry for One Child, Thousands of Others Face Detention*, VILLAGE VOICE, Jan. 26, 2000. Only 11% of detained minors have lawyers according to Human Rights Watch. *Id.* Regarding reports that 90% of individuals in INS detention lack legal counsel, see Margaret Taylor, *Promoting Legal Representation for Detained Aliens: Litigation and Administrative Reform*, 29 CONN. L. REV. 1647, at 1664 n.60 (Summer 1997). The number of individuals with legal representation drops to approximately 53% in the non-detained context. *Id.; see also* Executive Office for Immigration Review, [http://www.usdoj.gov/eoir/efoia/foiafreq.htm](http://www.usdoj.gov/eoir/efoia/foiafreq.htm), Index of Frequently Requested FOIA - Processed Records, “Immigration Court Completions: Representation
stay. Their legal case is only one aspect of their lives and winning the case will not necessarily resolve the underlying factors that brought them to detention. They face a multitude of challenges in presenting their cases and sustaining themselves in detention and would greatly benefit from a range of social services in addition to legal care.

The Florence Immigrant and Refugee Rights Project (The Florence Project) is a non-profit organization that provides free legal services to men, women and children detained by the Immigration and Naturalization Service (INS) in Arizona. Founded in 1989, the Florence Project currently provides legal assistance to the approximately 1,900 people detained at any one time by the INS in detention facilities in Florence, Eloy, Globe, and Phoenix, Arizona. The Florence Project is nationally known for developing innovative models to serve detained immigrants’ legal needs efficiently and effectively.

In the course of its work, Project staff has seen an increase in individuals with mental health issues ranging from depression, anxiety disorders, schizophrenia, suicidal ideation, and bipolar disorder. Project staff has also seen an increase in other populations detained that have unique psycho-social needs, for example long-term detainees and women seeking protection from abusive spouses. There are limitations on what The Florence Project legal staff can do for the individuals in INS detention, especially those with more demanding psycho-social needs. For the Florence Project to fully implement its legal service model in a truly holistic and client-centered manner, it identified the need to hire a social services coordinator to address its clients’ non-legal needs. A social services coordinator can both support clients’ legal cases by helping clients tell their stories and developing support networks, and provide more holistic, comprehensive services to individuals in detention. This kind of holistic care is critical for

Status” (As of October 5, 1999) (showing that in fiscal year 1999, 114,333 of the immigration cases completed by the immigration courts lacked representation and 101,442 had legal representation).
clients’ successful reintegration into society and reducing the risk of recidivism. Integrating social services can greatly benefit the individuals in INS detention. It can also help the Florence Project leverage its resources, which in turn may streamline the legal process.

The Florence Project, with a one-year grant from the Department of Health and Human Services, hired a full-time social service coordinator to implement a program to coordinate mental health and social services as an integrated part of the Projects’ legal services delivery. The purpose is to create a “continuum of care” model of services to address detained clients’ legal, emotional and psycho-social needs. The model’s holistic care goals are three-fold: 1) to address and alleviate individuals’ psycho-social needs while in detention; 2) to offer services to support their legal cases as they seek release from detention; and 3) to ensure successful reintegration by securing services upon release and helping clients develop realistic goals for future success. An integral part of the grant was to share the model and the process of integration through the development of a manual for distribution to other nonprofits working in detention.

The purpose of this manual is to demonstrate the needs of people detained by the INS and to discuss how social service coordinators, in conjunction with legal services staff, can address those needs. Our goal is to propose a model that other legal service organizations can replicate in order to provide comprehensive, holistic care for detained individuals and their families. In this manual, we describe the types of clients we work with; their needs; the steps taken to incorporate the social service coordinator position into the organization; the process of gaining access to our clients; specific roles and tasks the social service coordinator performs; and an overview of related literature, tools, and other resources.
2. **Needs and Legal Services Provided**

Individuals in INS detention have different cultural and immigration backgrounds, having entered the United States for a variety of reasons. Most come from impoverished countries where they are unable to make enough money to support themselves and their families. They come to the United States to work and send money home to relatives. Some come to escape political turmoil, war, famine, torture, and persecution. Many children come by themselves without their parents or other guardian. They may be orphans, may be escaping parental abuse or neglect, or may be sent by their parents to earn a living for their family. Many are brought by sophisticated smuggling rings for tens of thousands of dollars and face working in sweatshops or prostitution rings to pay off the smuggling debt. For most, the journey to the United States is long, dangerous, expensive, and traumatic.

Many who make it across our border end up immediately in detention after being apprehended by border patrol officers. Many others in INS detention have been in the United States for years, some since infancy, and are either lawful permanent residents (LPRs) who have committed some type of criminal offense or persons who have lived without legal status in the United States for years without coming to INS’ attention. For virtually all in INS detention, being deprived of their liberty is a traumatic experience. Most INS detention sites are in remote rural areas far from people’s families and support systems and far from possible legal counsel. Most in detention are working class or suffering from poverty and cannot afford legal representation. They face complex, adversarial proceedings alone with no advocate and the stakes for them are dramatic. Many face persecution, torture, or death if removed from the United States. Those with many years in the United States face the loss of life as they know it
and exile from their families. Others who have just arrived often spent significant resources to get to the United States. They face having to return to their home countries in debt to smugglers without having an opportunity to work in the United States and being in worse economic condition than when they left. Many children, if returned, fear the smugglers to whom they owe major debt. On top of the anxiety and trauma one might endure by being placed in INS detention and facing removal from the United States without the right to government-appointed counsel, other facets of detention can produce serious psycho-social needs.

Since its inception, the Florence Project has believed that given the organization’s limited resources, legal services were the key services to provide to people in INS detention. The focus has been on getting individuals released from INS detention so that they are able to go through immigration removal proceedings in a non-detained setting where they have a support system, while providing legal assistance to those with meritorious claims for relief who cannot be released. The Florence Project staff developed a model for legal service delivery that strives to reach all individuals in INS detention and provides them with quality legal advice so that people can make informed decisions about whether they are eligible for relief and whether it is worth pursuing any claims they may have to avoid removal from the United States. The legal service model includes live rights presentations to all detained people before their hearings to demystify the court process and explain their rights and remedies against deportation. For those with valid claims of relief from removal, Florence Project staff provide a range of legal services which include: helping clients fill out written applications in English for the applicable form of relief; gathering documents in support of the clients’ claims; researching complex legal issues; preparing clients for their final hearings; and providing actual representation in court or pro bono referrals whenever possible.
However, clients in deportation proceedings also face many other complex issues and problems that may complicate their legal case. Their immigration and legal needs are only one component of their lives and other aspects need to be addressed in order to serve them in a more holistic, comprehensive way. Focusing strictly on legal issues results in a limited solution to the immediate problem while the underlying or related issues are left unresolved. Identifying and assessing individuals’ psycho-social needs while the legal needs are being addressed improves clients’ chances in their case and increases the likelihood that they will be able to avoid subsequent involvement with the justice system.

According to United States immigration policy, INS detention is not intended to be punitive in nature, but rather is a short-term, administrative measure to ensure individuals’ attendance at their removal hearings. In practice, some individuals are detained for months or even years while they pursue legal claims to relief from removal. Others face indefinite detention because they have been ordered removed to their countries of birth but those countries will not accept them back. Under U.S. immigration law, the INS has the right to detain those individuals indefinitely if the INS believes they pose a danger to the community or are not cooperating in obtaining travel documents.

In addition to the length of time that someone may be detained, INS detention sites vary in the quality of treatment people receive and in the conditions of confinement. For instance, the INS Service Processing Center located in Florence, Arizona is known nationally as a model facility where there is a clear ethos that individuals detained should be treated with respect and dignity. Other sites used by INS unfortunately are not as exemplary. With the exception of shelter facilities used to house some children who are detained and some alternative types of detention being used by INS, the vast majority of individuals in INS detention are housed in
prison-like INS detention centers, county jails, or private medium-security prisons that contract with the INS. They are behind barbed wire and have access to little or no rehabilitative or educational programs. They are typically allowed only one hour of outdoor recreational time per day. They are subject to disciplinary rules that typically include “administrative segregation” (solitary confinement) as a form of punishment. Many in INS detention who have committed no crime other than coming to the United States without proper documents are mixed in with individuals charged with criminal offenses who may have come to INS detention following many years in the prison culture.

Though not well researched, there is some initial literature illustrating that detention often aggravates existing psychological and emotional burdens. However, the INS has not been granted the funding or the facilities to adequately address these problems. Mental health problems often go undetected and untreated, rehabilitation and educational programs remain unfunded, and social and pastoral services are minimal. The lack of services contributes to clients’ sense of isolation, depression, and boredom while detained. This desperation can lead to disciplinary and behavioral problems, which are met with punitive responses, such as being placed in segregation, which may exacerbate the client’s feelings of isolation, anger, and depression. People with meritorious claims to relief from deportation may choose to give up and accept deportation rather than spend months or years in detention. They suffer the consequences of never being able to return to the U.S. which in turn causes hardship to their loved ones here.

Many being held by the INS are suffering from pre-existing mental health disorders which may be compounded by confinement and the conditions of detention. Others have fled torture, beatings, rape, or the death of loved ones and may be suffering Posttraumatic Stress Disorder (PTSD). Many women are raped by the people they have paid to smuggle them into
the United States, resulting in pregnancy in some cases. Some left behind children or other family members and cannot get in contact with them. A number have suicidal ideation because of the trauma they have endured or because of mental health problems. While the INS provides on-site medical and psychological services, those services are insufficient to meet the overwhelming psycho-social needs of those in detention. In addition, those needs will most often persist after an individual’s release from detention, either through removal to their home country or their release into U.S. society.

With the integration of social services, the Florence Project seeks to create a comprehensive approach that supports individuals’ legal cases and provides more holistic care. A social service coordinator on staff at a legal services organization such as the Florence Project, dedicated to addressing the psycho-social needs of those in detention, can have a dramatic impact on their mental health, rehabilitative, educational, vocational, and medical needs. Especially in the case of individuals who are detained for long periods of time, the need for non-legal services becomes critical. Attorneys are faced with challenges that they might not have the expertise to deal with. They are well-equipped to navigate the legal system and defend their clients’ rights, but they may not be able to identify other problems—such as mental health issues, substance abuse, domestic violence—that affect the outcome of their clients’ cases and their wellbeing as a whole.

Many detained people, particularly asylum seekers, struggle with PTSD, clinical depression, and suicidal ideation stemming from their persecution experiences. Other detained people with substance abuse and/or criminal offenses can benefit from mental health services, as well as from vocational, educational, and rehabilitative programs. Those who are released from custody can benefit from programs facilitating their reintegration into society. Yet others are
challenged by mental illness or developmental disabilities that require more specialized care. Children in detention are not appointed a guardian and often have acute psycho-social needs. Lawyers are typically not trained in child sociology or psychology and cannot determine what is in a child’s best interests. They can benefit from working with a social service coordinator who may be able to help make that determination.

3. The Social Service Coordinator in a Detention Context

Without exception, being detained is a difficult experience for everyone. All detained individuals need information about what is happening to them and what the court process is like. They face difficult decisions about whether to pursue their cases and can often feel alone in the process. At the same time, individuals in detention represent a wide range of backgrounds, cultures, languages, and needs. They have unique family and community situations, and bring with them diverse experiences and histories. Each person reacts differently to being detained and to the court process.

Our clients fall into different categories based on the forms of legal relief available to them. A social service coordinator can provide significant benefits to each type of client. A social service coordinator can offer emotional support to people detained for long periods of time, helping them maintain their mental and physical health while in detention. The coordinator can also advocate for their release and improved detention conditions. It is crucial that asylum seekers have someone to talk to and receive support from in addition to legal assistance. The social service coordinator can help these individuals find a way to talk about the trauma they have suffered and their fear of returning to their countries; manage their symptoms of re-traumatization that occur when having to tell their story in detail for their case; and connect those
individuals to resources both inside and outside detention. The social service coordinator can identify people with serious substance abuse problems and help those individuals prepare to talk about their problem in court. The coordinator can help people find substance abuse treatment programs in their community upon release from detention which will help them maintain their sobriety and avoid future criminal and/or immigration problems. The social service coordinator can work closely with people with mental health issues which may stem from organic mental illness or brain trauma. These individuals require more time and patience to prepare for their cases. They also may need help contacting family members and explaining to them what is happening in their case. The social service coordinator can also arrange for mental health services outside detention if the individual is released or in the country they are deported to. Children also require more time to go through their whole story to determine what, if any, form of relief they might be eligible for. In addition, a social service coordinator can develop written materials designed to help people with all types of cases to better understand the court process and pursue their cases.

i. **Long Term Detainees (Supervised Release Candidates)**

Some who are in INS detention are not going through court proceedings. They have already been ordered removed from the United States by an Immigration Judge but cannot be returned to their home country. The United States may not have diplomatic ties with the country, the country does not accept deportees, or there is insufficient proof that the individual is a national of that country. These individuals are then subject to indefinite detention. They are entitled to a custody review, pursuant to what is called the Supervised Release process, 90 days after their removal order. In this review, typically conducted by an INS Deportation Officer, the
INS will look for evidence that the person will not be a flight risk or a danger to society if released. If granted Supervised Release, or “INS Parole”, the client will need to check in once a month with INS and let them know where they are living at all times. The person could be taken back into INS custody if he or she does not comply with the conditions of release or commits new offenses. If the person’s country of origin begins to accept deportees any time in the future the INS will then deport him or her.  

The INS’ decision regarding whether to grant Supervised Release is discretionary. To secure release, the client should provide a concrete address where he or she will live, a job offer, evidence of rehabilitation or a plan for rehabilitation if needed, and family and community support. If the client is denied release at this first review, his or her file is sent to INS Headquarters in Washington, D.C. and will be reviewed there. If Headquarters decides to release the person they may impose conditions on their release, such as proof of enrollment in a substance abuse treatment program. If Headquarters denies release, the person’s case will not be reviewed for another year unless there is a “marked change in circumstances” warranting an earlier review.

A social service coordinator can be extremely helpful in custody review cases, especially because the supporting documents the individual needs to show the INS are all related to family and community ties and social services in their communities. Legal services are no longer relevant at this point. A social service coordinator can help make the necessary connections between the client and his or her community networks. If he or she has no available support the coordinator would work to locate new sources of support.

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3 The custody review process has changed slightly since the recent favorable Supreme Court decision stating that indefinite detention is unconstitutional. However, it is still difficult for stateless individuals and those who cannot secure travel documents to be released.
It can be very difficult for clients to collect the necessary documentation and support while detained. Some who face indefinite detention may have been in prison for years and may not be in communication with their families. A social service coordinator can help facilitate that communication. Others will not have had the chance yet to complete their rehabilitation and some have absolutely nowhere to go and need a place to live. A social service coordinator can help the clients locate and secure pre-approval for rehabilitation and residential programs or track down estranged family members. Gaining access to programs can be particularly challenging given the fact that these clients have been stripped of their LPR status and are not eligible for public benefits. This is particularly true when the person suffers from a mental health disorder or is in need of psychological services, which are very difficult to find when the person cannot receive public benefits.

A social service coordinator can help the client compile all of his or her documents in support of the client’s release request. The social service coordinator may also be able to advocate on behalf of the client with the INS Deportation Officer to interview the client personally, which he or she is not required to do. This gives the client an opportunity to present him or herself more fully than the paper file can and may give the client a better chance of being released.

In addition, a social service coordinator can offer support to the client and family while the client goes through the custody review process. Long term detainees may feel “forgotten” in indefinite detention. Since there is little assistance legal staff can offer at this stage, they may no longer receive visitors and do not have future court dates to focus on. The long time periods between reviews mean that little happens from day to day in their case. If they are denied release there is usually little that can be done to improve their chances for the next review, as they are
isolated in detention. Not having a release date to focus on is extremely stressful and can make clients feel hopeless and desperate. Combined with the possible effects of traumatic experiences in the past and separation from family and community, indefinite detention can prove damaging to individuals’ mental and physical health. A social service coordinator can attempt to decrease these effects through visiting clients, providing emotional support, and helping them through the review process. A social service coordinator can help clients work toward self-empowerment by showing them the tools they need to secure their release and by guiding them through the review process. Clients are more empowered when they see that their situation is not hopeless and that there are things they can do to change it.

If an organization does not have the resources to assist each person going through the custody review process, legal and social service staff can produce a self-help manual for the clients to use in getting through the review process successfully. Such a manual is an effective way to stretch resources when working with a high volume of cases and few staff resources. It is also a way to help empower clients by giving them the tools to advocate for their own release and succeed.

**Case example**

The INS contacted the Florence Project social service coordinator to work with a 71-year-old Latvian man who had been in detention in Florence for almost 6 months. He was disabled, in a wheelchair, and his health was deteriorating. He had been ordered deported but could not be sent to Latvia and was therefore facing indefinite detention. He had no contact with family or friends and had nowhere to go. INS did not want to keep him in detention because they are unequipped to provide the kind of medical care he required, but they could not release him if
he had no one to take care of him. Finding services for him was a particular challenge because, although he had come to the U.S. in 1947 as a war orphan and had worked his whole life here, he no longer had lawful permanent resident status and was ineligible for public benefits. The social service coordinator was able, with a great deal of collaboration with the INS, to help him gain admittance to a nursing home. Just before INS released him it was discovered that he was in the late stages of lung cancer and probably had only two months to live. His only wish was not to die in custody. He was released to the nursing home where he is receiving medical care and occupational therapy, which has extended his prognosis.

**ii. Asylum Seekers and Torture Convention Applicants**

Asylum is a form of relief that offers protection in the United States to people who are afraid of harm if they return to their home countries or have suffered harm there in the past. Clients must demonstrate that if returned to their home countries, they will face harm from the government or a person or group that the government cannot or will not control. The harm must be because of the client’s race, religion, nationality, political beliefs, or membership in a particular social group. If granted asylum, the person will receive asylee status, may remain in the United States legally, and is entitled to employment authorization and public benefits. The person can apply for LPR status a year after winning asylum and may apply for United States citizenship five years thereafter.

Withholding of Removal and protection under the United Nations Convention against Torture and Other Cruel, Inhuman or Degrading Punishment (Torture Convention protection) are alternative types of legal protection for those who fear persecution or torture. Some asylum seekers are only eligible for Withholding of Removal if, for example, they committed a crime in
the U.S. Anyone can apply for Torture Convention protection regardless of their criminal convictions, as long as they can prove they will be tortured if returned to their country. Withholding of Removal and Torture Convention protection are similar to asylum, in that they allow one to live and work legally in the United States. But unlike asylees, those who are granted Withholding of Removal or Torture Convention protection cannot become LPRs or U.S. citizens. They are not eligible for any public benefits such as cash assistance programs or public medical insurance.

Individuals seeking any of these forms of protection may have already been persecuted or tortured in their home countries. They may now be suffering from PTSD, anxiety, depression, or physical disorders as a result of emotional stress or past torture. The experience of being detained for long periods of time can be extremely difficult and damaging, especially if incarceration was part of the torture they suffered.

Asylum seekers in INS custody are detained with all other INS detained individuals, some of whom have criminal histories. At times asylum seekers may suffer harassment or abuse in detention. The experience of being confined, mistreated, disrespected, forced to wear clothes and eat food that may not be culturally appropriate, and being isolated from others who speak their language can be extremely traumatic for people who fled their homes to escape persecution. They often do not know where they are, why, or for how long. They do not know what their fate is and fear harm or death in detention. They can feel totally powerless. As one asylum seeker described her situation,

As furious as I was, I kept my mouth shut. That’s what we all did. We kept our mouths shut. We were refugee women from countries where women are taught to be docile and submissive. And since we were in jail we were frightened and
powerless in addition to being docile and submissive. We didn’t complain. We didn’t speak out.4

A social service coordinator on staff can help asylum seekers feel safe and comfortable enough to disclose traumatic experiences and thus, help the attorneys determine if the client has a colorable claim for relief. Individuals applying for asylum or other protection must discuss in asylum interviews and testify in court in specific detail about any past harm they have suffered and their reasons to fear future harm. This process is often re-traumatizing. For instance, one Florence Project client had been raped by government officials. Although this fact was central to his claim for asylum, the client refused to include the event in his application or testify about it in court. The lawyer had to spend a great deal of time encouraging the client to open up. In the end, the client agreed to do so but it was definitely re-traumatizing for him to even think about the rape. The social service coordinator spent time helping him process his memories and deal with the emotional stress they produced. This support allowed him to pursue his lengthy case to the end instead of giving up and being deported.

Another example is a woman who was seeking asylum based on the severe domestic violence she suffered that the government of her country could not or would not control. It was obvious that she was suffering from trauma and fear but at first she refused to admit that she had been abused. The social service coordinator had close contact with her family and found out more about her situation and was able to persuade the woman to talk about the abuse. The coordinator also spoke with the asylum officer who interviewed the woman and was able to explain that denial and shame were common reactions to abuse and helped the officer understand why the woman may have denied the violence even though it was not in her best legal interest. If

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she had continued to deny the abuse she would have had no claim to asylum and would have been deported. Instead, she was released on her own recognizance and pursued her case outside detention with the support of her family.

A social service coordinator can help in such situations by spending time with the clients and helping them deal with the trauma they have endured, which benefits the client’s ability to present his or her case and improves his or her general mental health. The telling of the story also can be therapeutic, and a social service coordinator can be a supportive witness in this process. For those asylum seekers in need of more significant expert psychological care, the social service coordinator can bring those clients to INS’ attention so that INS can seek the proper treatment for the person.

Those who are granted Withholding of Removal or Torture Convention protection have even greater psycho-social needs that do not end when their legal case is over. Unlike asylees, people who are granted Withholding of Removal or Torture Convention protection are not immediately released from detention. They continue to be detained and are subject to the Supervised Release custody review process described in more detail in a previous section. Ninety days after clients in this category win their cases the INS will review their custody status. If the person is not released, they may be detained for several more months or years. Indefinite detention can be incredibly frustrating and stressful for clients, as there is no fixed release date to prepare for and their release depends on the discretion of the INS. A social service coordinator can help clients through the process and help them prove themselves eligible for release.

Those granted Withholding of Removal and Torture Convention protection face particular challenges once released from detention. They are given no legal status other than work authorization and the right to remain in the United States. They are not eligible for any
public benefits or services. This means they can never receive welfare assistance, food stamps, public housing, disability benefits, or Medicaid, among other things. People who are granted these forms of relief have suffered torture or trauma, or are afraid of suffering it in the future. Many have serious mental health problems, such as PTSD, as a result of trauma and may have health complications as well. Finding services outside detention will be difficult, and the social service coordinator can help navigate the system and connect them to agencies that may be able to help.

**Case Example**

One man who was granted Withholding of Removal was in need of substance abuse treatment, job training, and health care. He is HIV positive and had no source of income to pay for the expensive medication he needed. The social service coordinator was able to find substance abuse services through an agency in his community that did not require LPR status of its clients and did not charge people who could not pay, which is rare. They were, in turn, able to coordinate educational and vocational programs to train him to obtain better jobs. The client himself was knew of a clinic that did not charge for HIV treatment. Without this support he would have been overwhelmed by all of the barriers he would face in trying to fulfill all of his probation and medical obligations.

**iii. Cancellation of Removal for Lawful Permanent Residents**

A significant number of the individuals in INS detention are lawful permanent residents (LPRs) of the United States. They are in INS custody because they have violated immigration laws or have committed crimes in the United States. Most criminal offenses, even the most
minor, will result in the INS placing an LPR in detention and charging him or her with removability from the United States. Certain LPRs are eligible for Cancellation of Removal, a type of humanitarian waiver. If the client is granted Cancellation of Removal, he or she can remain in the United States and maintain his or her LPR status.

Many LPRs have been living in the United States for a long time-- some for most of their lives-- and have family, work, property, and businesses here. These individuals may have immigrated with their families at a young age, may have come as refugees, may not speak the language of their country of origin, may have no knowledge of that country and know no one there, and have their entire lives here in the United States. In most cases, to be deported would be devastating for the client and his or her family.

In order to be granted Cancellation of Removal, clients must demonstrate to the Immigration Court that they have strong family and community ties, a solid work history, rehabilitation for their offenses or a plan to rehabilitate themselves, and that their deportation would present great hardship for themselves and their families. Those whose criminal history stems from substance abuse, anger management issues or other treatable problems who have not yet been rehabilitated will need to show a plan for rehabilitation if they win their case. They have a greater chance of winning their case and succeeding in society if they are admitted to a drug, alcohol, or domestic violence treatment program to be attended upon their release. As a result, they will be less likely to commit further offenses and end up in removal proceedings again in the future. The overarching goal of the social service coordinator is to ensure successful reintegration by securing services upon release and developing realistic goals for client success.

Gaining admittance to a program while in detention is almost impossible because of the limited communication with the outside world. Telephones in detention are prohibitively
expensive and detention sites are often in remote, rural areas. A social service coordinator can be instrumental in contacting the appropriate program and helping to advocate for the client’s acceptance. It is very important that the social service coordinator not do all the work for the client but rather act as a resource. The client must be truly dedicated to the rehabilitation plan and to taking responsibility for his or her errors in order to be successful in court and thereafter.

In order to show evidence of family ties and hardship to their families if deported, clients must present letters from family members, photographs of family members, and, in the best scenario, have their family members testify at their final hearings. It is often difficult for detained individuals to contact their families and explain to them the process and what is needed in the way of support letters or attendance at hearings. Some are estranged from family members, perhaps because of whatever problems may have led to their criminal offense or because of their own shame and self-chosen exile. A social service coordinator can be helpful in Cancellation cases in locating family and community members, helping them understand what is happening to the person in detention, helping them prepare appropriate letters of support and encouraging them to come to the client’s hearing.

A social service coordinator can have a particular impact in cases in which the LPR client has possible mental health issues. The attorney or paralegal who first interviews the client may suspect that the client is mentally ill, developmentally disabled, or have some emotional issues that would warrant more attention. These types of cases are labor-intensive and attorneys often lack the requisite time and mental health training to understand and prepare the case. A social service coordinator can spend more time with the client, locate appropriate treatment resources, assist the client in articulating his or her testimony, and offer support in the process. As mentioned previously, the social service coordinator can also identify rehabilitation programs
and help the client obtain pre-approval for the program, which can be crucial in these types of cases.

In the process of preparing for court hearings on Cancellation of Removal, clients are forced to examine their lives in terms of their past actions, upbringing, family history and dynamics, and their future plans and goals. This can be a difficult process and may bring up some painful memories and realizations. Talking with a social service coordinator during this process can help clients make sense of their feelings and what they are going through, prevent feelings of depression, hopelessness, and isolation, and help clarify their choices and goals for the future. A social service coordinator can also provide similar services to the families of those in detention. Having a loved one in detention is difficult for families, who also will have to address possibly painful memories and events and begin to talk about them. A social service coordinator can facilitate this process and offer support throughout.

All of these social service coordinator roles can help LPR clients deal with the experience of being detained and be successful in their immigration cases and upon release. Clients in this category are only eligible for one waiver and will not have another chance to avoid removal if they are arrested again. For this reason, it is especially important that clients establish and utilize a healthy support network of family, friends, and social service agencies in their communities that can help them avoid legal and immigration problems in the future.

Case example

Claudia is a lawful permanent resident who came to the U.S. from Nicaragua as a child and suffered severe physical, emotional, and sexual abuse throughout her childhood in her family. She became involved with an abusive man who introduced her to heroin and forced her
to prostitute herself to support their habit. She had two children who were taken from her by Child Protective Services due to her drug addiction and lifestyle. Claudia came into INS detention as a result of drug convictions and was facing possible deportation to Nicaragua. The social service coordinator worked with Claudia in preparation for her Cancellation of Removal hearing. They talked about her background and family, the choices she had made and abuse she had suffered. She was able to work through difficult memories, realize why she had made some choices and take responsibility for her actions. Claudia was considerably depressed and was initially reluctant to spend the necessary months in detention fighting her case. Meeting with the social service coordinator helped give her a focus and maintain her strength and resolve in order to endure her time in detention. The social service coordinator also worked with her sister who was reliving painful family memories as a result of Claudia’s possible deportation. Claudia reconnected with her sister who came to testify in her hearing. The social service coordinator contacted a drug rehabilitation program in her community and arranged for them to accept Claudia upon her release and write a letter stating this to the judge. Because her past was so painful to talk about, especially in front of the judge, the social service coordinator helped her write an affidavit to submit to the court in place of her verbal testimony. Claudia won her case and left detention with her sister. She then entered an in-patient drug treatment program, left her abusive boyfriend, and is in the process of getting her children back.

iv. Children

Children detained by the INS have very distinct and special needs. Those who remain in detention throughout their removal proceedings typically do not have a parent or other responsible family member to speak on their behalf or help make decisions about their legal
cases. Many came to the United States alone without their families and have suffered trauma and abuse at home or on their journey.

Unaccompanied minors are detained in either INS shelter-care facilities or juvenile correctional centers. Shelter-care sites are similar to group homes, where they have case managers, teachers, and counselors. Children who exhibit behavioral problems are placed in juvenile correctional facilities where they may be housed with children who have criminal convictions and typically do not have access to on-site caseworkers or counselors.

The remedies available to some unaccompanied minors might include asylum or special visas for abandoned, abused, and neglected children, making it necessary for the children to be able to talk about their past histories. To prepare their cases, they may also need to talk about their fears and traumatic experiences. This can be difficult, time-consuming, and may be re-traumatizing for the child, especially in combination with the possible trauma the children endured in coming to the United States or currently suffer as a result of being in detention.

A social service coordinator can assist the lawyer in determining the different aspects and issues in a child’s life that may clarify their claim for asylum or other forms of relief. A social service coordinator experienced in working with children can help them feel safe and comfortable enough to talk about why they left home and what has happened to them. Many children may not want to disclose stories of abuse in their families, but those experiences can form the basis for a claim for a Special Immigrant Juvenile Visa. Often children who have suffered the most severe trauma have difficulty articulating what they want to do with their legal case or in even telling their story. It may even appear that a child is lying or does not have a credible story, when, in fact, he or she is suffering from an emotional disorder, a brain injury, or is developmentally disabled. All of these factors can complicate a child’s legal case and make it
difficult for an attorney to represent him or her. A social service coordinator can perhaps detect some of these issues and bring them to the attention of the attorney and coordinate the appropriate professional evaluations to support their claim. It can take many hours to get to know a child, build rapport and trust, and really understand his or her situation and needs. Legal staff working in a high volume context lack the necessary time and may not have the training to delve into difficult topics with the child.

In addition, often when working with children, lawyers are not certain whether it is better for a child to fight for any available remedies from removal or return to their home countries. Without parents or guardians to speak on the child’s behalf, lawyers who lack a background in social services, can be placed in a difficult position. It is their role to advocate for whatever outcome their client desires. A social service coordinator is concerned, on the other hand, with the larger social system of the child and the child’s overall well-being. A social service coordinator on staff could potentially spend time with the child to help the child make informed decisions about his or her case. The lawyer would then follow the client’s decision rather than getting pulled into the client’s decision-making process. Unless and until Congress provides children in detention with guardians whose only responsibility is to determine the child’s best interests, the social service coordinator could help perform this crucial role.  

v. Clients with no relief who face actual removal from the United States

The Florence Project works with many clients who are facing deportation because either they have lost their cases or are not eligible for any of the forms of relief. Some have special needs or circumstances that will be exacerbated upon removal from the United States. For

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5 The Florence Project social worker did not actually have the opportunity to work with children during the first year of program implementation due to problems in securing INS permission for access.
example, people who are deported to Mexico usually arrive at the border late at night. This can be dangerous for women traveling alone, children, and people suffering from mental illness or physical or developmental disabilities. If clients have no money or contacts in the town or city to which they are removed, they may have few safe options upon arrival. The social service coordinator can help prepare these clients for what they will face, bring any concerns to the attention of INS and the relevant consulate, and request that the INS remove the person during daylight hours. A social service coordinator can also help locate resources in the country where the person will be going.

**Case Example**

The social service coordinator was able to help a mentally ill Mexican man secure support upon his arrival in Mexico. She notified the INS and the Mexican consulate that this man had special needs and should be deported during the daytime instead of late at night. The consulate and the social service coordinator contacted his family and helped arrange for his mother to meet him at the border to give him money and clothing. The coordinator helped the client understand what was happening, gave him the names of churches and shelters on the border that help deportees, and made sure he carried a list of the medications he needed so that he could buy them in Mexico.

**4. Social Service Coordinator Skills**

Because clients in detention come from many different cultures and backgrounds and face a number of challenges, a social service coordinator should have a range of skills and experience in order to be successful. The Florence Project’s social service coordinator has a
Master of Social Work degree, but an MSW is not necessarily required to be effective in this role. The following is a list of skills that we have found to be essential when working with detained immigrants and refugees.

- Experience working with individuals from different cultures, nationalities, religions, and socio-economic backgrounds.
- Fluency in the main language(s) spoken by those detained and knowledge of other languages.
- The ability to recognize signs of trauma or mental illness in clients in order to correctly guide and support them through their cases.
- Basic counseling skills and a background in psychology are preferable, but good interpersonal and listening skills are most important.
- The ability to communicate well with a wide range of people, including detained clients, their families, correctional officers, INS officers and staff, community social service and criminal justice agencies, and other advocacy groups.
- Familiarity with existing resources in the various communities detained clients come from and how to navigate through the system of social services.
- A basic knowledge of immigration law is helpful, but can be learned on the job.
- An understanding of the unique challenges different immigrant and refugee groups face in this country and what they have endured in the past to get here.
- Knowledge and experience in substance abuse counseling is extremely useful, as the majority of clients are dealing with some stage of chemical addiction or abuse.
- Experience facilitating group workshops or support groups.
5. **Social Service Coordinator Roles**

Integrating a social work component into a legal service organization is an exciting, dynamic process. It involves the examination of different staff roles and responsibilities and can bring up challenging ethical discussions. Social service coordinators can contribute new perspectives and expertise to the organization and help make services to clients more holistic and encompassing. The different training and background of legal and social service staff can complement each other and offer clients greater options for empowerment and success.

i. **Direct Service**

There are a number of ways in which a social service coordinator can augment the services of legal staff who are working with detained clients. The two main objectives of a social service coordinator are to support clients’ legal cases and provide more holistic services throughout the detention process. In order to help clients articulate their claims for relief the social service coordinator can perform psycho-social interviews, which can elicit more information from the client than a general legal intake process. With this information the social service coordinator can get a more complete view of the clients, their families, and communities and help the clients and attorneys to better know what direction to take in preparing their immigration cases. A social service coordinator can also assist lawyers by working with families and helping clients obtain letters of support.

The other crucial piece of the social service coordinator’s role is to provide more comprehensive services to detained clients to help support them before, during and after their
legal case. We believe that the more support and information people receive during their cases, the better their chances are of succeeding after leaving detention. Many clients suffer from PTSD or other emotional problems and telling their story can be painful and re-traumatizing. Having someone who is able to be with the client to witness this process and offer support can be comforting and therapeutic. Clients are isolated in detention far from their families and support networks and need to be heard. Often behavioral and disciplinary problems in detention can be avoided if the clients have an outlet for their emotions and confusion. Often the Project’s social service coordinator meets with clients who no longer have a legal case and who have been awaiting deportation for many months. Talking with the social service coordinator may help them manage their feelings of anxiety, depression, and hopelessness while in detention.

Attorneys and legal staff are the first to see individuals in detention and it is up to them to refer cases to the social service coordinator. For this reason it is critical that they be educated and sensitized to the number of issues clients face and how to detect them. When a member of the legal staff meets with someone they suspect has mental health or substance abuse issues, for example, they would then give all relevant information to the social service coordinator. He or she would arrange to visit the individual, perform a psycho-social interview/intake and communicate with the legal staff on their impressions of the person. The social service coordinator should participate in legal case reviews with staff to help identify individuals who may require more support or help with their cases. It is also helpful for the social service coordinator to have regular communication with INS officers so that they can coordinate services.

Torture survivors and individuals with mental or physical disabilities face grave challenges both during and after their immigration cases. They may have claims to a form of
asylum as a result of persecution in the past in their home countries or may face extreme hardship if deported to countries where services are substandard or do not exist for disabled people. The Florence Project social service coordinator works closely with Doctors of the World, a non-profit organization that coordinates professional volunteer medical and psychological evaluations for torture survivors or individuals who fear harm or persecution if returned to their country as a result of mental illness or physical disability. Doctors, psychologists, and psychiatrists evaluate clients seeking asylum, withholding of removal, or Torture Convention protection and prepare affidavits testifying to the physical and psychological sequelae of torture. Due to the high number of people we work with who suffer from mental illness Doctors of the World has recently begun evaluating and testifying on behalf of LPRs who would possibly be mistreated as a result of their mental or physical disability if deported. Psychological expert testimony is also helpful when an individual has had criminal problems as a result of mental health problems or substance abuse. For example, someone who is seriously mentally ill may self-medicate with drugs or alcohol and have a greater chance of contact with the police. A person who relies on psychotropic medication to maintain stability will be adversely affected by being deported to a country where such medication is not readily available or affordable. Doctors of the Worlds’ affidavits have been extremely important in helping individuals articulate their claims to relief and the hardships they would face if removed.

ii. Training Project and INS Staff

Since the legal staff are the first to talk with clients, they can benefit from on-going trainings on substance abuse, mental health, domestic violence, disabilities, cultural forms of healing and coping with stress, and methods in working with trauma and torture survivors. The
Social service coordinators can arrange for outside trainers to come in or facilitate discussions herself if he or she has some expertise in a particular area. Many times, legal staff may be focused solely on the immigration issues and neglect to consider other perspectives. Being aware of different perspectives about different issues and cultures can help enrich the options and services available to a client, make the legal case stronger, and better benefit the client’s family system. For example, the way substance abuse treatment is provided in the U.S. is not usually culturally relevant for people from many Asian cultures. Some people from Asian cultures may turn to Buddhist monasteries for healing and decide to stay for a period of time as a monk. It may not be necessary or even helpful for them to attend mainstream treatment programs. However, Immigration Judges and INS staff might view someone who has not attended formal treatment as not making an effort to rehabilitate themselves. Knowing that these beliefs and alternative options exist can open up new avenues in helping plan for clients’ release and assessing their previous rehabilitative efforts.

Social service coordinators could also potentially provide information and training to INS staff on different issues. Many individuals in detention have suffered some form of trauma in their lives, either in their home countries or in the migration process. Understanding trauma and its effects can help detention staff know how to best deal with clients and meet their individual needs. Knowledge about PTSD, mental illness, substance abuse issues, domestic violence, and child abuse can only lead to improved treatment of individuals in detention. In addition, if INS staff is able to identify special needs of detained individuals, they can then refer them to the social service coordinator for assistance.
iii. Organizational Role

Just as the different roles of legal and social service staff need to be explained for clients, it is important to clarify them within the organization. All staff members must understand what each can and cannot do and how they can work together. In organizations that have been primarily legal in nature, this may be a challenging process. Legal and social service training are drastically different in perspective and content. While the end goal may be identical, methods in reaching that goal differ. Social service coordinators work from a social systems perspective and tend to be process-oriented, while attorneys must focus zealously on advocating for their clients’ best legal interests. However, the two backgrounds can complement each other when attempting to piece together a client’s life story and the facts of his or her criminal history. A deeper understanding of a client’s background, family, culture, and experiences can only strengthen his or her legal case and better prepare the client for his or her release.

Professionals who work closely with people who have suffered trauma and abuse often experience Secondary (or Vicarious) Trauma. Its symptoms are fatigue; depression; not being able to stop thinking about certain cases outside of work; intrusive imagery; distressing emotions; avoidance of unpleasant stories; deterioration of mental and intellectual functioning; and the challenging of assumptions of trust, intimacy, and safety. Those dedicated to serving disadvantaged people are usually overworked, underpaid, and under appreciated. They are passionate about their work and the issues and often neglect themselves in order to accomplish more. In doing this, signs of Secondary Trauma are often ignored and can worsen. Staff working in highly emotional fields need to debrief and process with each other in order to avoid burnout. Burnout causes dedicated and talented professionals to leave the field for less demanding and draining work. This can be prevented by active self-care and insight into the effects of working
with trauma. Having a social service coordinator in the organization can help facilitate debriefing, processing, mutual support, and self care.

iv. **Locating Resources**

Many clients facing immigration proceedings need to secure placement in rehabilitative or residential programs in order to be released. Regional detention centers are often located far from the home communities of the people detained there. For the social service coordinator, locating appropriate resources in other communities can be a challenge. Clients in detention often have language and cultural issues as well as rehabilitative needs and some programs, though available in the client’s community, may not be appropriate. The social service coordinator should try to develop a database of culturally relevant programs if possible. To do this, the social service coordinator can locate the Community Information and Referral Line in a specific city or county that will be able to direct callers to possible resources for a particular need. The United Way is also a valuable contact for resource information, as most social service agencies are affiliated with them. Almost every city has a Salvation Army, which provides shelter, food, substance abuse treatment, and referrals to other social services in the area.

Besides finding out how to contact different resources, it is important for the social service coordinator to learn the procedures for gaining admittance to programs. For example, to be admitted to a drug or alcohol treatment program usually one must first go through a face-to-face or phone intake assessment done by a county substance abuse agency. That agency then makes recommendations and referrals to appropriate programs. Once the procedures are learned it is relatively easy to connect clients with relevant services. It is sometimes possible to use a case manager or detention officer’s phone in the detention facility to complete a phone
assessment, depending on the facility and the relationship between the organization and the facility staff. This would better ensure a client’s acceptance into a program before he or she is released. The social service coordinator should keep files on the admittance procedures for various programs contacted.

If a legal service organization serves detained asylum seekers, it will be helpful for the social service coordinator to make contacts with local refugee resettlement agencies. Those who win asylum are entitled to the same social services benefits as those who enter the United States with refugee status. This entitlement is based on a recent change in immigration policy, and refugee resettlement agencies and other social service organizations may still be learning about it. A social service coordinator may need to educate the local agencies and provide them with copies of the recent policy change. Contacts with resettlement agencies can provide significant benefits to those who win asylum. The resettlement agency can help the asylum winner with housing, obtaining a Social Security card, accessing medical and other public benefits, and obtaining employment. These are extremely valuable services for those who win asylum as these clients often come to the United States with no money or support network in place.

6. Access to INS Detainees

Introducing a social service component into legal work with detained individuals is largely contingent upon gaining access to the clients. Usually only attorneys, law students, and paralegals are allowed daily access to individuals in detention. As the INS has its own case managers and psychiatrists in the facility, they may see the social service coordinator’s role as competing with or duplicating their services. The INS both locally and nationally has stated its
commitment to addressing some of the psycho-social issues that people in detention face. To gain access for the social service coordinator, it is important for the legal service agency to be very specific about the social service coordinator’s role and the tasks he or she will undertake. It is also important for the legal service organization to explain to the INS why it is in its interest to grant access and to listen to all concerns the INS staff may have. Demanding access on principle alone would be futile and would not foster positive relations among all parties.

The Florence Project social service coordinator has become an integral part of the legal services delivery model largely as a result of the Project’s good relationship with the INS. In integrating the social service coordinator role at the Florence Project, the Project director wrote several letters to the INS District Director and local facility directors and met with them to explain the social service coordinator’s position before access was granted. The INS required a very clear outline of what the social service coordinator would and would not do. INS staff expressed that they did not want the Project social service coordinator to engage in counseling or to testify in court as an expert witness. Their stated concern was that testifying could potentially bring up conflict of interest and bias issues. The INS agreed that the social service coordinator may assist the attorney in gathering information about the client and family, work with the families to write letters of support, help connect clients to resources outside detention, and in some cases, advocate on behalf of long-term individuals in detention.

The social service coordinator not only helps the Project staff, but can play a beneficial role for the INS. For example, it is in the INS’ best interest from an economic and practical viewpoint to release long-term detainees who meet the requirements for release. But sometimes this is difficult if the client has special needs. For instance, if the client is disabled, homeless, or

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6 The U.S. Department of Health and Human Services’ Office of Refugee Resettlement (ORR) issued a memo in June, 2000 outlining its decision to allow asylees access to public benefits beginning from the day they are granted
has no family to return to, they cannot typically be released. A social service coordinator can help secure resources and options for the client, facilitating his or her release and saving the unnecessary expense of continued detention. In many cases, the INS in Florence has contacted the social service coordinator for assistance in coordinating resources for long-term detainees, and has then released those clients when the appropriate services were found.

7. Cultural Competency

Working with immigrants and refugees from many different cultures presents challenges that are not necessarily addressed by mainstream treatment models. Being effective in reaching and understanding different populations requires a number of critical skills and a high level of awareness and openness to realities other than one’s own. A social service coordinator can assist a legal service organization in increasing its cultural sensitivity and competency by utilizing available cultural resources and consultants and educating staff on cultural norms and differences.

Culture is defined as “the behaviors, beliefs, customs, habits, skills, technology, arts, values, ideology, history, and religious and political behavior that characterize a group of people” (Barker, 1995). Culture influences all areas of one’s life, just as it plays a major role in an individual’s or group’s mental health. Recognizing the vast differences between cultures, we must also realize that methods of treating and working with people need to be relevant and specific to their culture. The mainstream model of assessment and treatment of individuals with mental health or substance abuse problems that is prevalent in the United States is not effective for every culture.

asylum. (ORR State Letter #00-12, Lavina Limon, June 15, 2000)
Cultural competency requires that social service providers are constantly aware of the culture of our clients and the cultural lens through which we view all situations. In order to be culturally competent we should learn as much as possible about the historical and social backgrounds of the groups of people we work with. For example, we know that refugees who fled Southeast Asia as a result of the Vietnam War suffered numerous pre-migration traumas and hardships during the migration process that put them at risk for PTSD and other mental health disorders. Many Central American refugees have witnessed atrocities, experienced torture, and/or have had to leave their countries to escape severe poverty. These experiences dramatically influence one’s state of being and ability to cope with the stressors of life in a new country. General historical knowledge of clients’ backgrounds can help in assessing their needs in a culturally relevant manner.

While every individual responds differently to stress or mental illness, there are also aspects of culture that shape how people express symptoms of distress. Culture-bound syndromes are sets of symptoms that are more common in some cultures than others. Many people of Asian descent may experience culture-bound syndromes such as neurasthenia, which is characterized by fatigue, weakness, poor concentration, memory loss, irritability, aches and pains, and sleep disturbances. Another culture-bound syndrome for some Asians is known as “hwa-byung”, or “suppressed anger syndrome”, which presents with symptoms such as constriction in the chest, palpitations, flushing, headaches, anxiety, poor concentration, and a general state of feeling unwell or unhappy. Latinos may present with culture-bound syndromes such as “susto” (fright), “nervios” (nerves), “mal de ojo” (evil eye), and “ataque de nervios” (panic attack). Symptoms of an “ataque” may include screaming uncontrollably, crying, trembling, verbal or physical aggression, dissociative experiences, seizure-like or fainting
episodes, and suicidal gestures (U.S. Department of Health and Human Services). Many of these symptoms are similar to those presented by certain mental illnesses and a practitioner may base diagnosis on these, when in fact, there may be a cultural basis for them that needs to considered when prescribing treatment.

However, many clients that we see in INS detention have suffered mental illness for years without ever receiving treatment. They may have never talked about their experiences with anyone for a variety of reasons, including fear of being harassed, cultural or social stigma, shame, or because they do not know there is anything that can be done about them. In the detention setting, it is very important to educate clients about the symptoms and signs of mental illness they may be experiencing and normalize them.

If a mentally ill client is to be released back into his or her community and family, it is crucial that the family also understands the nature of his or her illness. If the client agrees, it may be possible for the social service coordinator to work with the family to help them understand the needs of their family member and connect them with resources in their community. For example, many Asian cultures associate mental illness or substance abuse with shame and family disgrace. Asian families may try to keep a family member’s disorder or addiction a secret within the family to avoid losing face in their community (Ja & Aoki, 1998). This may feed into the cycle of isolation and substance abuse that caused the original problem. People released from detention will have a better chance of success if they and their families are given the tools and encouragement to communicate about their mental health or substance abuse issues and needs.

Since the social service coordinator works with people from a wide range of cultural and ethnic backgrounds and cannot be an expert on all cultures, it is necessary to consult with cultural experts in order to best serve our clients. Refugee resettlement organizations, other
social service agencies that work with immigrant and refugee populations, and immigrant religious and community groups are excellent sources of culturally specific information, insight, and guidance. Specifically, members of the Detention Watch Network, Catholic Social Services, Refugee Immigration Ministry (RIM), Lutheran Immigrant and Refugee Services (LIRS), Jesuit Refugee Services, Center for Victims of Torture, and Catholic Charities, among others, are valuable sources of cultural expertise. Many cultural communities have Mutual Assistance Associations that may be able to direct practitioners to cultural consultants and resources. For example, The Southeast Asia Resource Action Center (SEARAC) has published a directory of such associations for Asian Americans. (Please refer to the Supplemental Literature section for more information.) In addition to consulting with cultural experts it is also necessary for the social service coordinator to attend cultural competency trainings. Local mental health agencies, managed care companies, universities and community colleges, and community groups often offer training sessions on different cultural issues for practitioners.

8. **Ethical Issues**

Integrating social services with legal services when working with detained populations can potentially raise challenging ethical issues. Attorneys at the Project have grappled with the conflict that sometimes occurs between clients’ legal and psycho-social needs. A social service coordinator can help legal staff by bringing a greater perspective than traditional legal services and a broader awareness of clients’ issues.

Because legal and social service staff have sometimes different concerns and considerations, it can be difficult at times to determine the best course of action in a particular case. Legal professionals have very specific parameters regarding who the client is that they are
serving and the restrictions and privileges that govern that relationship. Social service coordinators, on the other hand, usually come from a social systems perspective, where not only the primary client is of concern, but their family and community systems as well. An attempt is made when at all possible to take into consideration the needs of the client’s family. The challenge arises when a client’s best legal interests are contrary to their psycho-social or family needs.

An example of an area where ethical issues may arise is domestic violence. In preparing for Cancellation of Removal hearings, clients typically need to show as many letters of support from family members as possible. If he or she has been charged with domestic violence, the judge will want to see that the victim believes the client will not be a threat to her or him if released. Attorneys may lack the expertise to determine if the victim truly believes the perpetrator no longer poses a danger to him or her. The attorney is in a difficult position because her role is to advocate for the client to remain in the U.S. and developing family support may be key to this claim. However, a social service coordinator must take into account a more holistic perspective, including the needs of all family members.

Focusing solely on winning the legal case so that the client can remain in the U.S. can be problematic. Social service providers have a duty not to advocate for something that they suspect will likely cause harm to another person. This issue is raised in cases where domestic violence or child abuse has occurred. It may not be in the victim’s or child’s best interest for the offender to be released to the home. We cannot control what clients do upon release or where they go, but we can be aware and conscious of the dynamics and refrain from pressuring the victims when they do not want to help the client in their legal case. Social service coordinators and legal staff can both work to find other alternatives for the client that do not involve the victim directly, such
as finding treatment programs or other support networks willing to help the client upon his or her release.

The social service coordinator could also begin to discuss the patterns of abuse and control with clients as they prepare for their legal case. One of the hardest things for domestic violence perpetrators to do is take responsibility for their actions, and it is a major part of what an Immigration Judge will be looking for when considering their case. The social service coordinator can facilitate conversations both individually and in groups around the issues of abuse and violence, acknowledging responsibility, and how to avoid violence in the future. This can help clients not only win their cases but also give them a greater opportunity for successful reintegration into society in the long run and reduce the risk of recidivism.

People who deliver social services are mandated reporters to Child Protective Services (CPS). If they are given any information about child abuse in the past, present, or future, they have a duty to notify CPS. However, attorneys are bound by strict confidentiality and attorney-client privilege. They can only warn of future crimes involving imminent death or grave bodily harm, not necessarily of present or past incidents. Making CPS reports could prove problematic for a client’s immigration case, but not warning of suspected abuse could result in harm to children. In this case it is crucial that the social service coordinator’s roles and responsibilities be extremely clear to the client, the family, and the legal staff.

9. Supervision and Consultation

Because social service and legal training and background are so different, it is important for the social service coordinator to have a supervisor or mentor in the field. If there is no one in the organization with a social service or psychology background to offer consultation and
supervision on clinical and ethical issues, the social service coordinator may feel isolated and off track. Social service staff should try to find someone to discuss ethical and case issues with, perhaps in connections through the board of directors, local social work or psychology programs at colleges and universities, past professors, counselors at other organizations, or training instructors. It is also common for clinical practitioners to consult with their own therapist, when possible, and pay him or her as if it were a regular session.

It is also important for the social service coordinator to maintain and expand his or her areas of knowledge through continuing education. Many social work schools at colleges and universities offer continuing education workshops and trainings. Local mental or behavioral health agencies often offer free or low-cost trainings on a wide variety of topics useful to someone working with the range of issues presented by detained immigrants and refugees. Attending workshops and trainings is also an excellent way to network with other service providers and to become familiar with the kinds of services offered in the community.

10. Tools

Since the focus of social service and legal staff are usually different it is necessary to gather and keep client information that is not typically part of the legal intake process. The Project’s social service coordinator has developed a number of forms with which to organize clients’ files. They are used to elicit and document necessary biographical, psycho-social, and contact information, as well as provide informed consent to exchange information with other social service organizations. When creating forms and tools to use with clients, it is important to consider what kind of statistics your organization might want to gather and for what purposes they may be used, such as future fundraising or advocacy.
• **Social Service Coordinator Referral**

When referring a new client to the social service coordinator it is helpful for the attorney to give basic information regarding the client’s legal status; relief available; brief biographical information; the presenting issues and concerns (why they are referring the client); and the specific focus areas (how the social service coordinator can help in this case).

• **Informed Consent**

When meeting with clients it is crucial that the social service coordinator explain her or his role and how it is different from that of an attorney. An informed consent form that explains the conditions of services and confidentiality should be read and signed by the client during the first visit. For example, all conversations are confidential except in the case of an expressed wish to harm self or others, or when the abuse of a child is reported. This form is written in English and other languages spoken by clients.

• **Social Service Intake**

The intake interview serves as a tool to elicit valuable historical, biographical, cultural, and background information on the client. It covers family background, developmental issues, education, culture, employment, substance abuse, criminal history, future plans and goals, physical and mental health, current mental state, and how to contact clients’ support systems. Special attention should be paid to framing questions in culturally sensitive ways, depending on the culture of the client being interviewed.
• **Record of Contacts**

This is a simple record of the direct service hours and contacts with family and outside resources. It helps keep track of phone calls and correspondence in the client’s case.

• **Release of Information**

The release of information form is critical in getting information from third parties on behalf of the client. It is often necessary to get records of clients’ participation in prior rehabilitation programs, education, probation/parole records, medical and psychiatric records, and employment verification. Most social service and governmental agencies will not share information without a signed release from the client.

• **Summary of Services**

A summary of services is used to record a synopsis of the case after the client has left detention. This can be helpful in compiling statistics in the future.

• **Follow-up Contact**

Often clients are released and the Project doesn’t have the resources for continued follow-up. For both personal interest and future program development it could be useful to contact released clients at regular intervals to record their progress. If clients are released and accomplish the goals they set out for themselves in detention, or do not get into trouble again, this information could be used in the future to illustrate the effectiveness of the Project, the social service component, or alternatives to detention.
11. **Specific Social Service Coordinator Tasks**

In order to both support clients’ legal cases and provide holistic services to them and their families throughout the detention process the social service coordinator may perform the following tasks:

- Offer information and encouragement to empower clients in their legal process
- Help clients articulate their claims and prepare their testimony
- Help clients clarify future goals and options
- Identify mental health issues
- Locate volunteer interpreters and psychologists/psychiatrists to work with clients
- Support long term detainees while in detention
- Locate rehabilitation programs in clients’ communities and obtain acceptance letters
- Contact clients’ former and prospective employers for recommendations and job offers
- Locate housing for clients in preparation for their release
- Provide emotional support to clients and their families
- Communicate with clients’ families in order to collect necessary support documentation
- Help families understand what to include in letters of support
- Assist clients and their families in preparing their personal declarations, affidavits, and testimony
- Help find social service organizations in other countries for people being deported
- Advocate for daytime deportation to Mexico for people with special needs
- Facilitate or co-facilitate workshops in detention centers on domestic violence, substance abuse, anger management, and on self-representation in removal proceedings and the custody review process
- Create instructional manuals for clients to prepare themselves for Cancellation of Removal hearings and Supervised Release custody reviews
• Create a resource database for relevant states where detained clients are from
• Advocate for improved conditions in detention
• Accompany clients to Supervised Release interviews and advocate on their behalf with INS staff when possible
• Facilitate debriefing and discussions about Secondary Trauma within organization
• Facilitate and/or coordinate INS and Project staff trainings

12. Supplemental Literature

Much has been written recently about the new immigration laws and INS detention from legal and human rights perspectives. Unfortunately, there is little existing culturally relevant literature specifically about the psychological impact the new immigration policies are having on immigrants and refugees. Culture plays a large role in determining an individual’s response to trauma, and western models of mental health and treatment typically do not take into account different cultural variables or perspectives. While we know, for example, how solitary confinement affects people from western cultures, we do not know the impact it has on people from different cultures. We can assume that the impact of trauma and detention will be compounded by the stressors related to being a refugee or immigrant in this country, migration experiences, and by different cultural responses. Professionals working with immigrant and refugee populations need to always be conscious of cultural issues and work from a culturally sensitive perspective.

We can gain valuable insight by using the existing literature on mental health issues in immigrant and refugee populations as a lens with which to view the psychological effects of solitary confinement, the experiences of immigrants and refugees in their journey to the United States, and the impact of the treatment and conditions of INS detention on immigrants and
refugees. We have included literature on these topics in the index to use as a starting point for considering the issues involved in incorporating social services with legal services for immigrants and refugees in detention.
INDEX OF SUPPLEMENTAL LITERATURE

1. Refugee and immigrant mental health issues


2. Culture-bound syndromes


3. Culture-specific mental health and substance abuse issues


4. The psychological impact of solitary confinement


5. Working with unaccompanied children in INS detention


6. The impact of INS detention on asylum seekers, women, and children and conditions of detention


7. Trauma experienced by people crossing the Mexico/U.S. border and the conditions that cause many to come to the U.S.


8. Domestic violence information


9. Other useful resources


RESOURCE CONTACT INFORMATION

Catholic Charities Archdiocese of New Orleans
Detainee Reintegration Program, Immigration and Refugee Services
(504) 523-3755 x2607
Contact: Kathleen Harrison  kaharrison@archdiocese-no.org

Catholic Social Services
Phoenix Arizona Survivors of Torture (PAST)
1825 W. Northern Ave.
Phoenix, AZ 85021-5298
(602) 997-6105 x3344
Contact: Patricia Moylan  pmoylan@diocesephoenix.org

The Center for Victims of Torture
717 E. River Rd.
Minneapolis, MN 55455
(612) 626-1400
cvt@maroon.tc.umn.edu

Church World Service Immigration and Refugee Program
475 Riverside Dr., Ste. 700
New York, NY 10115-0050
www.churchworldservice.org

Citizens and Immigrants for Equal Justice (CIEJ)
2604 Towne Centre Dr., #224
Mesquite, TX 75150
Tel/Fax: (972) 329-7080
Contact: Laurie Kozuba  CIEJTX@aol.com

The Detention Watch Network (DWN)
C/0 Lutheran Immigration and Refugee Service
700 Light St.
Baltimore, MD 21230
Contact: Cheryl Skafte  cskafe@lirs.org

Doctors of the World Human Rights Clinic
(602) 672-8704 (Arizona)
(212) 226-9890 (New York)
www.doctorsoftheworld.org
Contact: Dana Chou (Arizona)  choud@dowusa.org
The Florence Immigrant and Refugee Rights Project
PO Box 654
Florence, AZ 85232
(520) 868-0191
Contact: Andrea Black firrp@primenet.com

Jesuit Refugee Service
Contact: Will Coley
(973) 733-3516 x207
www.acf.dhhs.gov/programs/orr

Las Americas Immigrant Advocacy Center
715 Myrtle Ave
El Paso, TX
(915) 544-5126
ecoloca@hotmail.com

Lutheran Immigration and Refugee Service (LIRS)
700 Light St.
Baltimore, MD 21230
(410) 230-2700
www.lirs.org

Lutheran Social Ministry of the Southwest Refugee Resettlement Program
2020 W. Indian School Rd Ste. E26
Phoenix, AZ 85015
(602) 248-4400

Minnesota Advocates for Human Rights
310 Fourth Ave. S., Ste. 1000
Minneapolis, MN 55415-1012
(612) 341-3302
www.mnadvocates.org

Refugee and Immigration Ministries (RIM)
130 E. Washington St.
Indianapolis, IN 46204
1-888-346-2631
http://www.homelandministries.org/MISSIONS/RIM
Southeast Asia Resource Action Center (SEARAC)
1628 16th St., NW
Washington, DC 20009
(202) 667-4690
www.searac.org
searac@searac.org

Survivors International
447 Sutter St., #811
San Francisco, CA 94108
(415) 765-6999
www.survivorsintl.org

Survivors of Torture International (SOTI)
PO Box 151240
San Diego, CA 92175-1240
(619) 278-2400
www.notorture.org
survivors@notorture.org

VIVE, Inc.
50 Wyoming Ave.
Buffalo, NY 14215
(716) 892-4354
www.vivelacasa.org
vive@Buffnet.net