

The Immigrants' Rights Clinic (IRC) at Columbia Law School was founded by Professor Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, in 2014. Students in the Clinic represent immigrants in their defenses against deportation—including asylum, withholding of removal, and U.N. Convention Against Torture claims. The Clinic also works with national and local organizations to protect immigrants' rights. Through the Clinic, hundreds of children and families seeking asylum and other forms of immigration relief have been granted protection in the United States. Based on our recent observations, we are gravely concerned about the safety and well-being of children in federal immigration custody. This report condemns (1) the deplorable conditions for children detained in border patrol facilities, and (2) the ongoing daily separations of children from their family members across the border.

I. BACKGROUND

1. In June 2019, we met with nearly 70 immigrant children detained at the U.S. Customs and Border Protection (CBP) facility in Clint, Texas.¹ The smells, cries, and degradation we witnessed were inhumane. The children at Clint were dirty and distressed, held for days and weeks without access to soap, showers, toothbrushes, clean clothing, adequate nutrition, or adequate sleep. Many of these young children were ripped apart from their family members, leaving them isolated for days, weeks, and months without their parents, grandmothers, aunts, siblings and/or other familial adult caregivers.
2. Since June 2019, the evidence of child abuse in Customs and Border Protection facilities has become indisputable. The Office of the Inspector General for the Department of Homeland Security issued a damning report on July 2, 2019 about the prolonged detention, overcrowding, and mistreatment of children and families in CBP custody, describing the situation as a “ticking time bomb.”² Four days later, the New York Times reported on the Border Patrol's own agents' observations that at Clint, “[o]utbreaks of

¹ During the week of June 17, 2019, a team of independent monitors interviewed children detained at the CBP facility in Clint, Texas, pursuant to Paragraph 32 of the *Flores* Settlement Agreement. Our team of interviewers consisted of Dr. Nancy Ewen Wang, M.D., of Stanford University; Professors Warren Binford of Willamette University, Bill Ong Hing of the University of San Francisco, Elora Mukherjee of Columbia Law School, Kathleen O’Gorman of Illinois Wesleyan University; Nicole Austin-Hillery, Michael Bochenek, and Clara Long of Human Rights Watch; Natasha Quiroga of the Lawyers’ Committee for Civil Rights Under Law; Chapman Noam, who worked for years as a paralegal at the Center for Human Rights and Constitutional Law; and Katherine Hagan, a student pursuing her doctorate in psychology, who served as an interpreter.

² Office of Inspector General, OIG-19-51: *Management Alert – DHS Needs to Address Dangerous Overcrowding and Prolonged Detention of Children and Adults in the Rio Grande Valley*, at 8, Jul. 2, 2019 (available at: https://www.oig.dhs.gov/sites/default/files/assets/2019-07/OIG-19-51-Jul19_.pdf).

scabies, shingles and chickenpox were spreading among the hundreds of children and adults who were being held in cramped cells.”³ On July 9, 2019, NBC News obtained nearly 30 incident reports from the Department of Health and Human Services documenting the abuse, sexual assault, and mistreatment of children detained in CBP custody in Yuma, Arizona.⁴ The following week, ProPublica revealed the journal notes of an agent tasked with overseeing children detained in McAllen, Texas; he described the situation as a “scene from a zombie apocalypse movie” with fellow agents wearing surgical masks and rubber gloves because of “sickness and filth everywhere.”⁵

3. The U.S. government is legally obligated to protect children in federal immigration custody. The 1997 *Flores* Settlement Agreement⁶ requires the government to release children expeditiously to sponsors and hold them in the least restrictive environment if detention is necessary for any period of time. It requires the government to house the children it does detain in facilities that are “safe and sanitary” and provide “access to toilets and sinks, drinking water and food as appropriate, medical assistance if the minor is in need of emergency services, [and] adequate temperature control and ventilation.”⁷ The Agreement also requires that within three to five days of arrest, the federal government either release a child or transfer her to a non-secure licensed facility; “in the event of an emergency or influx of minors into the United States,” that transfer must take place “as expeditiously as possible.”⁸ In August 2019, a federal appellate court interpreting the *Flores* Settlement Agreement ruled: “Assuring that children eat enough edible food, drink clean water, are housed in hygienic facilities with sanitary bathrooms, have soap and toothpaste, and are not sleep-deprived are without doubt essential to the children’s safety.”⁹

³ Simon Romero, Zolan Kanno-Youngs, Manny Fernandez, Daniel Borunda, Aaron Montes and Caitlin Dickerson, *Hungry, Scared and Sick: Inside the Migrant Detention Center in Clint, Tex.*, NY TIMES (July 9, 2019) <https://www.nytimes.com/interactive/2019/07/06/us/migrants-border-patrol-clint.html>.

⁴ Jacob Soboroff and Julia Ainsley, *Migrant kids in overcrowded Arizona border station allege sex assault, retaliation from U.S. agents*, NBC NEWS (July 9, 2019), <https://www.nbcnews.com/politics/immigration/migrant-kids-overcrowded-arizona-border-station-allege-sex-assault-retaliation-n1027886>.

⁵ Ginger Thompson, *A Border Patrol Agent Reveals What It’s Really Like to Guard Migrant Children*, PROPUBLICA (July 16, 2019), <https://www.propublica.org/article/a-border-patrol-agent-reveals-what-its-really-like-to-guard-migrant-children>.

⁶ Stipulated Settlement Agreement, *Flores v. Meese*, 2:85-cv-4544 (C.D. Cal. 1997).

⁷ *Id.* at §12A.

⁸ *Id.* at §§ 6, 12A, 19.

⁹ *Flores v. Meese*, No. 17-56297 (9th Cir. 2019).

4. The government has not and is not complying with the *Flores* standards. We urge the immediate protection of children in federal immigration custody to ensure that they are treated with basic human dignity as required by law.

II. TESTIMONY

a. Lack of Health Care

5. The Universal Declaration of Human Rights¹⁰ and the International Covenant on Civil and Political Rights (ICCPR) establishes a fundamental right for all detained individuals to humane treatment. It specifically states, “[a]ll persons deprived of their liberty shall be treated with humanity and with respect for the inherent dignity of the human person.”¹¹ The United Nations Convention on the Rights of the Child (UNCRC) similarly guarantees a child’s right to healthcare and nutrition, clean water, electrical power, and a safe and stable environment.¹²
6. We are deeply concerned about the mental and physical health of children in CBP custody. The unsanitary conditions in detention centers allow illnesses such as influenza to rapidly spread and children are not provided with adequate health care. Our observations from Clint and testimony from children detained there show how pervasive and troubling these conditions are.
7. During our visit to Clint, we observed that “[c]hildren appeared to be sick. Many had nasal mucus dripping out of their noses. Many were coughing. Given the general absence of tissues in the facility, many children wiped their noses on their clothing, hands, and arms. Some children did not bother to wipe their noses at all, so had nasal mucus dripping down their faces. On June 17, 2019, [our team] met with a two-year old girl and her teenage mom. The two-year-old child appeared listless, without any energy, and simply lay in her mother’s arms and eventually fell asleep. She appeared ill. By the following day, both she and her mother were quarantined.”¹³

¹⁰ Universal Declaration of Human Rights, G.A. Res. 217A, art. 3, 5 (Dec. 10, 1948).

¹¹ International Covenant on Civil and Political Rights art. 10, March 23, 1976, 999 U.N.T.S. 171.

¹² Convention on the Rights of the Child art. 22, 37, September 2, 1990, 1577 U.N.T.S. 3.

¹³ U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration’s Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong., p. 8–9 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School).

8. Similarly, one detained 16-year-old girl recounted her experience of trying to obtain medical care when her one-year-old baby became sick: “She...could not open her eyes and had a fever which got much worse during the day. I asked the guard for help and he told me to ‘just deal with it.’ I asked for help again, and was ignored. The third time I asked, I was crying because she was so much worse I was very worried for her. After two days, they took her to the doctor.”¹⁴
9. Even children subject to quarantine are not provided with adequate medical care. One child testified while in quarantine: “There were 21 other kids in that space with the flu. I had a fever in there and I was shaking. Some of the other kids were vomiting. They all had fevers. No one was taking care of the kids with the flu. . . . We were not allowed to leave the flu cell, ever.”¹⁵
10. Denying detained children access to basic health care can lead to severe illness, further trauma, and avoidable deaths. Over the past year, seven children have died in federal immigration custody or just after being released, following nearly a decade of no reported child deaths. Three of these children—ages 2, 8, and 16—died from the flu.¹⁶ Cramped detention conditions may have facilitated the transmission of infectious diseases that contributed to their deaths. The only reason these children were in custody was because they were undocumented. Their deaths are outcomes we must not tolerate in America.

b. Living Conditions and Treatment by Guards

11. Children detained at border patrol facilities testified about unbearable living conditions and mistreatment by guards. Access to toilets and showers was limited and, at times, denied. Multiple children were not permitted to shower or brush their teeth for days or weeks. Others described the cruelty of the CBP officers who denied hungry children food, required permission to use the bathroom, and used intimidation tactics to scare children in their custody.

¹⁴ U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration’s Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong, p. 11 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School) (citing Decl. of M-I-R-C-, Ex. 30, in support of *Flores* Plaintiffs’ June 2019 TRO.).

¹⁵ *Id.* at 15.

¹⁶ Interview with Dr. Alia Sunderji, MD FRCBC, Pediatric Emergency Physician (Aug. 19, 2019) (detailing her review of the available autopsies of children who died in federal immigration custody).

12. Many children revealed that they had not been allowed to shower since crossing the border. One 17-year-old female stated: “This whole time I have been detained, I have not been allowed a shower, nor has my niece been allowed to shower. I have also not had an opportunity to brush my teeth. I haven’t asked to shower or for a toothbrush because I have heard other people ask for a bathroom or toothbrush but officers get angry.”¹⁷ The 17-year-old also explained that guards taunted her and the other children by saying, “many things, including ‘you’re not in your country,’ and ‘you’re being punished here...’”¹⁸
13. Teen mothers of babies in the detention centers testified about being unable to take care of their children. A 14-year-old mother testified: “I have no place to wash the bottle that my baby uses. Every two or three days I try to beg the officers to give me a new one because I am worried about the cleanliness of the bottle. I have been here without bathing for 21 days.”¹⁹ This same young mother also explained that “[the officers] start yelling at us saying things like ‘You don’t belong here.’ ‘Go back to where you came from.’ ‘You are pigs.’ ‘You came here to ruin my country.’ They try to intimidate us. I have seen officers hit other detainees in the stomach There is another child that is in the same cage with my other nephew, M-, that was also hit by an officer. . . . a special needs child [] was here for more than 16 days In 21 days I have not been given a phone call.”²⁰
14. Many detained children who testified in June 2019 reported feeling extremely fearful of guards who yell and make derogatory comments to children. In some extreme cases, guards have even physically intimidated children. One 14-year-old child detained at Clint shared, “[o]n Saturday, I was trying to leave our cell to go to the bathroom and a guard said, ‘where are you going?’ I said, ‘I’m going to the bathroom.’ He said, ‘you don’t even say thank you.’ Then he pushed me in the chest back into the cell and slammed the door. After that, they locked the door to the cell and we have to ask for permission go to

¹⁷ U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration’s Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong., p. 13 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School) (citing Decl. of E-R-G-E-, Ex. 38, in support of *Flores* Plaintiffs’ June 2019 TRO).

¹⁸ *Id.*

¹⁹ U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration’s Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong., p. 11 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School) (citing Decl. of W-A-C-L-, Ex. 35, in support of *Flores* Plaintiffs’ June 2019 TRO).

²⁰ *Id.*

the bathroom. I don't want to ask to go to the bathroom because I'm afraid they are going to yell at us.”²¹

15. This deeply-entrenched culture of fear is exemplified by a six-year-old child who was so traumatized she could barely speak. She was “alone at Clint without any family members, she just repeated over and over and over, ‘I’m scared. I’m scared. I’m scared.’”²² She could not even say her name or her age.”²³ Professor Elora Mukherjee, who conducted that particular interview, further elaborated that “[i]n [her] more than 12 years of working with immigrants, including traumatized children, [she had] never before met with anyone—adult or child—who could only repeat that they were afraid.”²⁴
16. Children in CBP custody are so desperate for food that they at times sneak it into their cells. When they are able to obtain extra food, they risk retaliation by the guards. A 12-year-old child recounted: “One day the guards demanded to know who had food. ‘Whoever has food will go to prison,’ they yelled. They wanted to know if anyone had snuck in food in the cell. They found one kid who was 15 or 16 years old who had a burrito, pudding, and juice. The officials handcuffed his wrists. My cousin and I were very shocked and scared.”²⁵

c. Family Separation

17. The administration continues to separate children from their families at the border on a daily basis. One group of sisters detained at Clint had been forcibly separated from their grandmother, despite the fact that the grandmother had in her possession a document

²¹ U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration’s Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong., p. 13 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School) (citing Decl. of A-F-T-C-, Ex. 43, in support of *Flores* Plaintiffs’ June 2019 TRO).

²² U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration’s Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong., p. 7 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School).

²³ *Id.*

²⁴ *Id.*

²⁵ U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration’s Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong., p. 14 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School) (citing Decl. of L-G-L-L-, Ex. 8, in support of *Flores* Plaintiffs’ June 2019 TRO).

from the sisters' parents entrusting them into her custody.²⁶ Many children expressed the fear that they might not ever be able to see their family members again.

18. In interviews, children described the experience of being forcibly separated from their families. A 16-year-old mother explained that, “[T]hey came and took our daughter and me out of the cell and separated my fiancé from us. We were all very upset. Our baby was crying. I was crying. My fiancé was crying. We asked the guards why they were taking our family apart and they yelled at us. They were very ugly and mean to us. They yelled at him in front of everyone to sit down and stop asking questions. We have not seen him since.”²⁷
19. Another 16-year-old child testified about how there are multiple young children in CBP custody with no one to care for them. These children must be cared for by unrelated children in custody. The child explained: “There are children who are very young here, only two or three years old, and their mother is not with them. They cry for their mothers all the time. Other children who are older try to take care of the little ones. It is an incredibly sad situation.”²⁸
20. Separating families causes trauma and increases the risk of mental health issues.²⁹ Children who are separated from their families upon crossing the U.S. border are deprived of a “buffer” against the effects of adverse childhood experiences. Removing

²⁶ U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration's Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong., p. 21 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School) (citing Decl. of M-F-M-O, Ex. 9, in support of *Flores* Plaintiffs' June 2019 TRO).

²⁷ U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration's Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong., p. 21 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School) (citing Decl. of J-O-A-M, Ex. 4, in support of *Flores* Plaintiffs' June 2019 TRO).

²⁸ U.S. House of Representatives Committee on Oversight and Reform, *Hearing on The Trump Administration's Child Separation Policy: Substantiated Allegations of Mistreatment*, July 12, 2019, 116th Cong., p. 21 (Statement of Elora Mukherjee, Jerome L. Greene Clinical Professor of Law, Columbia Law School) (citing Decl. of E-Y-F-C, Ex. 49, in support of *Flores* Plaintiffs' June 2019 TRO).

²⁹ Universal Declaration of Human Rights, G.A. Res. 217A, art. 12 (Dec. 10, 1948).

the family “buffer” can result in long-term negative health effects and contribute to “health disparities.”³⁰

21. In September 2019, the U.S. Department of Health and Human Services released a report examining the difficulties mental health providers face in providing adequate and effective care to children in federal immigration custody.³¹ The report found that “separated children exhibited more fear, feelings of abandonment, and post-traumatic stress than did children who were not separated.”³² Further, children who had been separated from their parents, “suffered elevated levels of mental distress,” and mental health issues surrounding the uncertainty “that came with a hectic reunification process.”³³ The increased level of trauma experienced by separated children made it “more difficult” for professionals “to establish therapeutic relationships through which facilities could address children’s mental health needs.”³⁴

III. RECOMMENDATIONS

22. We focus our recommendations on ending the detention of children, improving conditions of child detention should the U.S. insist on continuing to detain children, and ensuring the integrity of family units.
23. According to the American Academy of Pediatrics (AAP), no child should be placed in detention, as detention can stunt child development, cause psychological trauma, and result in long-term mental health risks, including depression and post-traumatic stress disorder.³⁵ Additionally, there is no evidence that children and families seeking asylum are flight risks. In fact, 99% of all families and children who are paired with either a

³⁰ Shruti Simha, MD, MPH, *The Impact of Family Separation on Immigrant and Refugee Families*, 80 NORTH CAROLINA MEDICAL JOURNAL, 95, 95–96 ([accessible at: <http://www.ncmedicaljournal.com/content/80/2/95.full.pdf+html>]).

³¹ U.S. Department of Health and Human Services, OEI-09-18-00431: *Care Provider Facilities Described Challenges Addressing Mental Health Needs of Children in HHS Custody* (September, 2019) [accessible at: <https://oig.hhs.gov/oei/reports/oei-09-18-00431.pdf>].

³² *Id.* at 10.

³³ *Id.* at 10–11.

³⁴ *Id.* at 11.

³⁵ Julie M. Linton Et Al., *Detention of Immigrant Children*, 139 AM. ACAD. OF PEDIATRICS 1 (2017).

social worker or lawyer show up for all of their court hearings.³⁶ We recommend that the United States:

- a. Immediately end detention of children who are seeking asylum and other forms of humanitarian relief.

24. If the United States government insists on detaining children, it must institute policies that recognize the particular vulnerability of children. We recommend that the United States:

- a. Affirm the *Flores* Settlement Agreement.³⁷
- b. Adopt legal and administrative measures to ensure that the United States government is complying with the *Flores* Settlement Agreement at all detention centers for children.
- c. Ensure that children in detention are provided with “safe and sanitary” conditions, including, but not limited to, providing children with soap, toothbrushes, towels, showers, beds, dry clothes, blankets, and ensure that children have access to toilets and sinks, drinking water and edible food, medical assistance if the child is in need of emergency services, and adequate temperature control and ventilation.
- d. Establish an independent monitoring system that allows complete and unannounced inspections of detention facilities to ensure all *Flores* settlement provisions are being met.
- e. Offer vaccines to children in detention facilities.

³⁶ See: *Report: Most Families Attend Immigration Court Hearings*, TRANSACTIONAL RECORDS ACCESS CLEARINGHOUSE (TRAC) (June 18, 2019), <https://trac.syr.edu/immigration/reports/562/> (compiling data from cases for asylum-seeking family units from September 2018 to May 2019); *Family Case Management Program*, WOMEN’S REFUGEE COMMISSION (June 13, 2019), <https://www.womensrefugeecommission.org/rights/resources/1807-the-family-case-management-program-why-case-management-can-and-must-be-part-of-the-us-approach-to-immigration>.

³⁷ On August 23, the Trump administration published a new regulation that seeks to eviscerate the *Flores* Settlement Agreement. The rule would allow the indefinite detention of children; end the requirement that all detention centers for children be licensed by state agencies; and block independent oversight by monitors to ensure that detained children are being treated properly. See, e.g.: *Trump Policy Would Allow Indefinite Detention Of Migrant Families, Children*, NPR MORNING EDITION (August 22, 2019), <https://www.npr.org/2019/08/22/753337537/trump-policy-would-allow-indefinite-detention-of-migrant-families-children>; *Migrant Families Would Face Indefinite Detention Under New Trump Rule, AAFP, Other Groups Strongly Object to New Detention Policy*, AAFP (August 30, 2019), <https://www.aafp.org/news/government-medicine/20190830floresstatement.html>.

25. Deliberately separating families as a method of immigration deterrence³⁸ is a gross abuse of power and failing to implement a system to record which child was separated from which adult³⁹ shows an inhumane indifference to family integrity. Medical and mental health experts have concluded that the forced separation of migrant parents and children who fled violence can have particularly harmful consequences, even if the separation is brief.⁴⁰ Additionally, the administration's so-called "zero-tolerance" policy of separating families does not work.⁴¹ While Trump signed an executive order purporting to ban family separations last summer, more than 900 children have been divided from their parents in the ensuing year.⁴² The United States must immediately protect the integrity of families. We recommend that the United States:
- a. Immediately ban the practice of family separation.
 - b. Reunite all of the previously separated families as quickly as practicable.

³⁸ Philip Bump, Here Are the Administration Officials Who Have Said That Family Separation Is Meant As A Deterrent, WASHINGTON POST (July 19, 2018), <https://www.washingtonpost.com/news/politics/wp/2018/06/19/here-are-the-administration-officials-who-have-said-that-family-separation-is-meant-as-a-deterrent/>.

³⁹ U.S. GOV'T ACCOUNTABILITY OFF., GAO-19-163, UNACCOMPANIED CHILDREN: AGENCY EFFORTS TO REUNIFY CHILDREN SEPARATED FROM PARENTS AT THE BORDER 21 (2018) ("HHS officials told [the GAO] that there were no specific procedures to reunite children with parents from whom they were separated at the border prior to the June 2018 court order.").

⁴⁰ KIND, WOMEN'S REFUGEE COMM'N & LUTHERAN IMMIGRATION SERV., BETRAYING FAMILY VALUES: HOW IMMIGRATION POLICY AT THE UNITED STATES BORDER IS SEPARATING FAMILIES 12 (2017).

⁴¹ Order at 2, *Flores v. Sessions*, No. 2:85-cv-4544, 2018 WL 4945000 (C.D. Cal. July 9, 2018) ("Defendants' [deterrence] reasoning suffers from the logical fallacy of *post hoc, ergo prompter hoc* . . . literally, after this, therefore because of this. Any number of other factors could have caused the increase in illegal border crossings, including civil strife, economic degradation, and fear of death in the migrants' home countries.") (internal quotations and citations omitted); see also TOM K. WONG, *Do Family Separation and Detention Deter Immigration?* at 2, CENTER FOR AMERICAN PROGRESS (July 24, 2018) (citing then White House Chief of Staff John Kelly's March 2017 statement that "in order to deter more movement," the Trump administration was planning a family separation policy and finding that "the administration's family separation policy has not had its intended [deterrent] effect").

⁴² No More Family Separations, Except these 900, NY TIMES (July 30, 2019), <https://www.nytimes.com/2019/07/30/us/migrant-family-separations.html>

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