



Amicus Brief Template

For use in habeas proceedings documenting harms of immigration detention on youth

In the fall of 2025, five leading child advocacy organizations, Children’s Defense Fund, Children’s Rights, EdTrust–New York, the Kairos Center for Religion, Rights, and Social Justice, and the Young Center for Immigrant Children’s Rights, filed an amicus brief in federal court supporting a New York City teen from Ecuador who was being held in a Bronx detention facility by the Office of Refugee Resettlement (ORR) within the U.S. Department of Health and Human Services. Ultimately, the brief was quoted from the bench by the federal judge in making the decision to release the teen. Following our success, and the teen’s release, amici and attorneys at Emery Celli Brinckerhoff Abady Ward & Maazel LLP who represented the child advocacy organizations, created the attached template based on the brief, which we hope can be adapted to the facts of other cases of young people detained in immigration facilities in various jurisdictions.

Interested parties hoping to file similar briefs may adapt the brief to the facts of their case and use as desired on behalf of their own amici. We — the child advocacy organizations who filed the original brief and our counsel in that case — do not require attribution, but we would love to know that you found our template useful (our contact information is below). If a party in a habeas case is interested in having such a brief filed, but does not have capacity to do so, we are happy to consider taking on the matter on a case-by-case basis, contingent on our capacity.

This template is intended for educational and informational purposes only and is not intended as legal advice. Habeas petitions are fact specific and must be tailored to the facts of each individual case. This area of law is rapidly evolving, and this template was drafted in late 2025. Those with questions about the contents of this template or about specific legal issues should consult with a qualified attorney.

Our underlying case, *EJCC v. Joyce*, involved a 16-year-old detained by immigration officers in October 2025 during a scheduled immigration hearing. The youth, an 11th grader who had been granted “Special Immigrant Juvenile” status by U.S. Citizenship and Immigration Services (which provides a path to permanent residency), had been living in the Bronx with extended family following his mother’s decision to self-deport earlier in the year.

The child advocacy organizations’ brief in this case documented the myriad social and educational harms of immigration detention on children and youth, drawing on established research about child welfare congregate settings. The purpose of the brief was to provide

the court with accurate information about the harms suffered by detained children, including those held in ORR facilities. Those harms include, but are not limited to, separation from their communities and schools, and the brief highlights empirical research which shows that such detention is deeply traumatizing and has long-term negative impacts on brain development and on a child's life trajectory.

We hope you find this useful in your advocacy to support of and protect the rights of immigrant youth. As reminder, please contact your own counsel to adapt this brief for your individual needs. If you have any questions, please feel free to contact:

- Children's Defense Fund:
 - Khin Mai Aung, kaung@childrensdefense.org
- EdTrust-NY:
 - Arlen Benjamin-Gomez, abgomez@edtrustny.org
- The Kairos Center for Religions, Rights and Social Justice:
 - Alix Webb, alix@kairoscenter.org
- The Young Center for Immigrant Children's Rights:
 - Jane Liu, jliu@theyoungcenter.org
- Children's Rights:
 - Leecia Welch, lwelch@childrensrights.org
- Emery Celli Brinckerhoff Abady Ward & Maazel LLP:
 - Katie Rosenfeld, krosenfeld@ecbawm.com
 - Nick Bourland, nbourland@ecbawm.com

UNITED STATES DISTRICT COURT

[INSERT DISTRICT]

[CHILD'S NAME], a minor, by and through his
next friend and attorney, [ATTORNEY NAME],

Petitioner-Plaintiff,

v.

[INSERT],

Respondents-Defendants.

**BRIEF OF *AMICI CURIAE* YOUTH DETENTION EXPERTS IN SUPPORT OF
PETITIONER-PLAINTIFF'S PETITION FOR A WRIT OF HABEAS CORPUS**

TABLE OF CONTENTS

	PAGE NO.
I. INTERESTS OF <i>AMICI CURIAE</i>	1
II. SUMMARY OF ARGUMENT	1
III. BACKGROUND	2
IV. DETENTION HARMS CHILDREN’S AND YOUTH’S MENTAL AND PHYSICAL HEALTH	2
A. Detention Causes Lasting Mental Health Harms to Children and Youth	3
B. Adolescents Like [CHILD'S NAME] Are Highly Vulnerable to Harms from Detention Because They Are at a Critical Stage of Brain Development	5
C. Evidence from New York Congregate Placements Demonstrates the Harm of Detention for an Adolescent Like CHILD'S NAME	6
D. Prolonged Detention is Particularly Harmful to Children and Youth	7
V. DETENTION INTERFERES WITH AND DISRUPTS CHILDREN’S AND YOUTH’S EDUCATION	9
CONCLUSION	10

I. INTERESTS OF *AMICI CURIAE*

Amici curiae are organizations sharing the common goal of promoting the welfare and safety of children and youth who are impacted by immigration detention, including protecting them from the serious harm that detention poses to minors, and protecting their educational rights (the “Youth Detention Expert Amici”).

[INSERT AMICI STATEMENT OF INTEREST]

Collectively, Youth Detention Expert Amici have many decades of experience advocating for children and youth who are placed in detention settings. They submit this brief to provide the Court with accurate information concerning the harms suffered by children and youth who are detained, including in ORR congregate care facilities, like where Petitioner **CHILD'S NAME** is presently detained.

II. SUMMARY OF ARGUMENT

Youth Detention Expert Amici submit this brief in support of Petitioner **CHILD'S NAME**'s request to the Court for a writ of habeas corpus to release Petitioner from custody without restraints on his liberty. When children and young people are detained, including in ORR congregate facilities, and separated from their communities and schools, empirical research shows that such detention is deeply traumatizing and has long-term negative impacts on brain development and on that child's trajectory through life including on their mental health, educational attainment, and long-term well-being. As of 2025, children and youth are now being detained in ORR congregate facilities for longer periods of time—now an average of *six months*—which is further exacerbating the lasting negative impacts of detention. Youth Detention Expert Amici respectfully submit that **CHILD'S NAME**'s habeas petition should be granted, and **CHILD'S NAME** should be released to live at liberty, so his mental health,

educational progress, and family connections are not further damaged by the imposition of punitively restrictive, unnecessary detention.

III. BACKGROUND

Petitioner **CHILD'S NAME** is a ***-year-old [BOY/GIRL] who had been residing in *** with family members and attending school since moving to *** in **** from his/her native country of ***.

ADD FACTS FROM PETITION ABOUT CURRENT RESIDENCE, HOME LIFE AND SUPPORTS IN COMMUNITY IF RELEASED, SCHOOL STATUS (ENROLLED), GRADE LEVEL, IMMIGRATION STATUS.

ADD FACTS ABOUT DETENTION INCIDENT.

ADD FACTS ABOUT INTERFERENCE WITH SCHOOL DUE TO DETENTION/CHANGED CONDITIONS FOR SCHOOL DUE TO DETENTION.

IV. DETENTION HARMS CHILDREN’S AND YOUTH’S MENTAL AND PHYSICAL HEALTH

A substantial body of evidence exists demonstrating that children and youth who are detained in facilities such as the ORR facility where **CHILD'S NAME** is currently held experience measurable, lasting negative effects on their mental and physical health. Pediatricians and other health experts agree that “[i]mmigrant children seeking safe haven in the United States should never be placed in [Immigration and Customs Enforcement (“ICE”)] detention facilities” because “[t]here is no evidence that any amount of time in detention is safe for children and detention itself poses a threat to child health.”¹ As the American Academy of Pediatrics and

¹ Letter from medical and mental health clinicians and providers for children and families to President Trump and Kristi Noem, U.S. Dep’t of Homeland Sec’y (Mar. 25, 2025) https://www.acponline.org/sites/default/files/acp-policy-library/letters/joint_letter_to_administration_opposing_family_detention_2025.pdf.

other national medical organizations have concluded, “even short periods of detention can cause psychological trauma and long-term mental health risks” for children.²

Research has shown that: (1) detention causes lasting harm to young people’s mental health; (2) detention is highly damaging to the development of adolescents and emerging adults like **CHILD’S NAME**; (3) detention in a congregate facility like **CHILD’S NAME** ORR facility is deeply traumatizing; and (4) longer periods of detention are particularly harmful.

A. Detention Causes Lasting Mental Health Harms to Children and Youth

Children and youth experience emotional and psychological injuries when they are detained, including developmental delays, post-traumatic stress disorder, anxiety, depression, and suicidal ideation.³ As explained by Stanford University child clinical psychologist Dr. Ryan Matlow, the Director of Community Programs for Stanford Early Life Stress and Resilience Program and Co-Director of Stanford’s Immigrant Child Health Program:

Drawing both from empirical research and from the reports of detained children, we know that children’s experiences in immigration custody are associated with increases in psychological distress and functional impairment. As a field, we have observed increases in depression, anxiety, traumatic stress symptoms, and behavioral difficulties – sometimes leading to thoughts, urges, and acts of self-harm and suicidality – associated with children’s experiences of immigration detention.⁴

With respect to the health impacts of detention in ORR facilities, specifically, Dr. Matlow notes that “[c]hildren in ORR custody are inherently navigating a challenging, disruptive, and distressing transitional experience,” which “becomes ‘traumatic’ when the individual has a

² *Id.*

³ See Julie M. Linton, *et al.*, *Detention of Immigrant Children*, *Pediatrics Journal of the Am Acad. of Pediatrics* (May 1, 2017), <https://doi.org/10.1542/peds.2017-0483>.

⁴ Dr. Ryan Matlow, *et al.*, *The Unraveling of ORR: A Quick and Calculated Undoing of a System Intended to Protect Children*, National Center for Youth Law (September 29, 2025) at 16, https://youthlaw.org/sites/default/files/attachments/2025-09/NCYL_The%20Unraveling%20of%20ORR_Sept2025_FINAL.pdf.

limited sense of agency or control over their circumstances, limited knowledge about what is happening to them or what to expect, limited access to support and coping resources, and a lack of resolution to the threat or fear.”⁵ Unfortunately, ORR custody is “characterized by these exact factors” because children and youth in ORR facilities “are restricted in their autonomy and agency, they have little knowledge or control over requirements or processes for release, they feel helpless in their circumstance, they experience chronic worry about their well-being (or that of their loved ones), and they experience various barriers to engaging with the coping and support resources that have traditionally helped them.”⁶ These experiences, Dr. Matlow concludes, “create the conditions for trauma and a lasting posttraumatic stress response.”⁷

Children and youth in detention also have poor health outcomes that carry on into adulthood. For example, a study published in the journal *Pediatrics* recognized that “[f]or the 1.3 million children and adolescents arrested in the United States each year, incarceration may systematically degrade their healthy development.”⁸ The study empirically demonstrated that youth incarceration of even less than one month “predicted subsequent adult depressive symptoms” in adulthood, while youth incarceration for a year or longer “predicted subsequent adult suicidal thoughts.”⁹ Dr. Matlow’s research at Stanford reached similar conclusions with respect to children who are held in immigration detention, including ORR custody. As Dr. Matlow explains, “[r]esearch has shown that symptoms of depression, anxiety, and PTSD endure well after release from immigration detention, and, for many, the detention experience becomes a

⁵ *Id.* at 17.

⁶ *Id.*

⁷ *Id.*

⁸ Elizabeth S. Barnert, M.D., *et al.*, *How Does Incarcerating Young People Affect their Adult Health Outcomes?*, *Pediatrics Journal of the Am Acad. of Pediatrics* (Feb. 1, 2017), <https://pmc.ncbi.nlm.nih.gov/articles/PMC5260153/>.

⁹ *Id.*

source of traumatic stress, resulting in symptoms of avoidance . . . , intrusive thoughts and memories, and/or hypervigilance.”¹⁰

B. Adolescents Like **CHILD'S NAME Are Highly Vulnerable to Harms from Detention Because They Are at a Critical Stage of Brain Development**

An extensive body of research on brain development during adolescence and emerging adulthood, a critical developmental period neurologically defined as beginning at the start of puberty and extending through a person’s mid-20s, establishes that young people undergo significant cognitive and social changes as they mature during this stage of life, and, as a result, are vulnerable to the negative effects of detention.¹¹ “Young people are malleable during [emerging adulthood] and undergo significant cognitive and social changes as they mature. To experience healthy, normative development, emerging adults need opportunities to explore and learn, with consistent, caring adults to support them.”¹²

Being placed in detention during this critical developmental period poses many risks to youth. Research shows that group and institutional placements generally produce poorer outcomes for youth than family-based settings, including higher rates of delinquency, lower test scores, and lower high school graduation rates.¹³ For example, a breakthrough 2021 study that focused on young people’s direct experiences of group and institutional placement in foster care concluded that these institutional settings often fail to offer consistent, caring relationships and actually prevented children and youth from building the sort of relationships that are necessary

¹⁰ Matlow, *supra* note 6 at 19.

¹¹ See *What is Emerging Adult Justice?*, Annie E. Casey Found. (Feb. 21, 2025), <https://www.aecf.org/blog/what-is-emerging-adult-justice>.

¹² *Id.*

¹³ *How can we end the need for group placements in child welfare?*, Casey Family Programs (Oct. 18, 2023), <https://www.casey.org/ending-group-placements-principles/> (collecting peer-reviewed studies).

for healing, returning to community, and successfully transitioning to adulthood.¹⁴ In the same study, young people frequently described group and institutional placements as punitive, prison-like, and traumatic.¹⁵ Youth living in such settings often miss out on normal, age appropriate activities that are crucial to their social development and sense of normalcy.¹⁶

C. Evidence from New York Congregate Placements Demonstrates the Harm of Detention for an Adolescent Like **CHILD'S NAME**

A recent study published by Children’s Rights documented the experiences of young adults in congregate placements in New York State and analyzed the impacts congregate placements had on participants.¹⁷ The study concluded that “[c]ongregate placements,” such as the facility where **CHILD'S NAME** is currently detained, “inflict deep trauma that causes youth to deteriorate physically, mentally, and emotionally.”¹⁸

The clinical consensus is overwhelming: congregate placements are “inherently harmful to young people.”¹⁹ “[T]hose who are in or have survived the system overwhelmingly experience institutional placements as punitive, carceral, isolating, and dehumanizing.”²⁰ Accounts of congregate placements in New York State demonstrate that these detention settings cause lasting harm, not well-being and safety.²¹ For example, the Children’s Rights study found that the

¹⁴ See Sarah Fathallah & Sarah Sullivan, *Away From Home – Youth Experiences of Institutional Placements in Foster Care*, Think of Us (July 21, 2021), https://assets.website-files.com/60a6942819ce8053cefd0947/60f6b1eba474362514093f96_Away%20From%20Home%20-%20Report.pdf.

¹⁵ See *id.* at 69.

¹⁶ Fathallah & Sullivan, *supra* note 16 at

¹⁷ See *Are You Listening? Youth Accounts of Congregate Placements in New York State*, Children’s Rights (Jan. 2023), https://www.childrensrights.org/wp-content/uploads/2024/07/CR-2023-AreYouListening_report.pdf.

¹⁸ *Id.* at 4.

¹⁹ *Id.*

²⁰ *Id.*

²¹ *Id.* at 7.

study’s participants had described a “carceral and restrictive environment” in New York congregate facilities, where they experienced extreme “limitations to when an individual could make a phone call, eat or use the bathroom, or move throughout the building.”²² Study participants also described punitive and humiliating living conditions in congregate facilities, such as “not being allowed to eat with a fork, having rigid bedtimes, and requiring permission to use the bathroom.”²³

In addition, youth in congregate placements often lack basic necessities, including food, clothing, and medical care, and they frequently experience physical and emotional insecurity, describing congregate placements as “prison-like,” isolating, traumatizing, and unsanitary.²⁴ The “inherently carceral nature of congregate settings,” specifically, “deprive young people of the mental, physical, and developmental milestones that are the foundation of healthy, stable futures.”²⁵

D. Prolonged Detention is Particularly Harmful to Children and Youth

No amount of time in detention is safe for children, but the longer the government detains a child, the more profound the harm.²⁶ As children remain in custody for longer and longer, their mental and physical health deteriorates. The United States Department of Health and Human Services Office of Inspector General has reported that “some children [in ORR custody] who did not initially exhibit mental health or behavioral issues began reacting negatively as their stays grew longer . . . longer stays resulted in higher levels of defiance, hopelessness, and frustration

²² *Id.* at 30.

²³ *Id.*

²⁴ *Id.* at 7.

²⁵ *Id.*

²⁶ *See* Barnert, *supra* note 10.

among children, along with more instances of self-harm and suicidal ideation.”²⁷ Mental health clinicians “described that a child’s mental health often deteriorates as the length of their stay in ORR custody increases.”²⁸

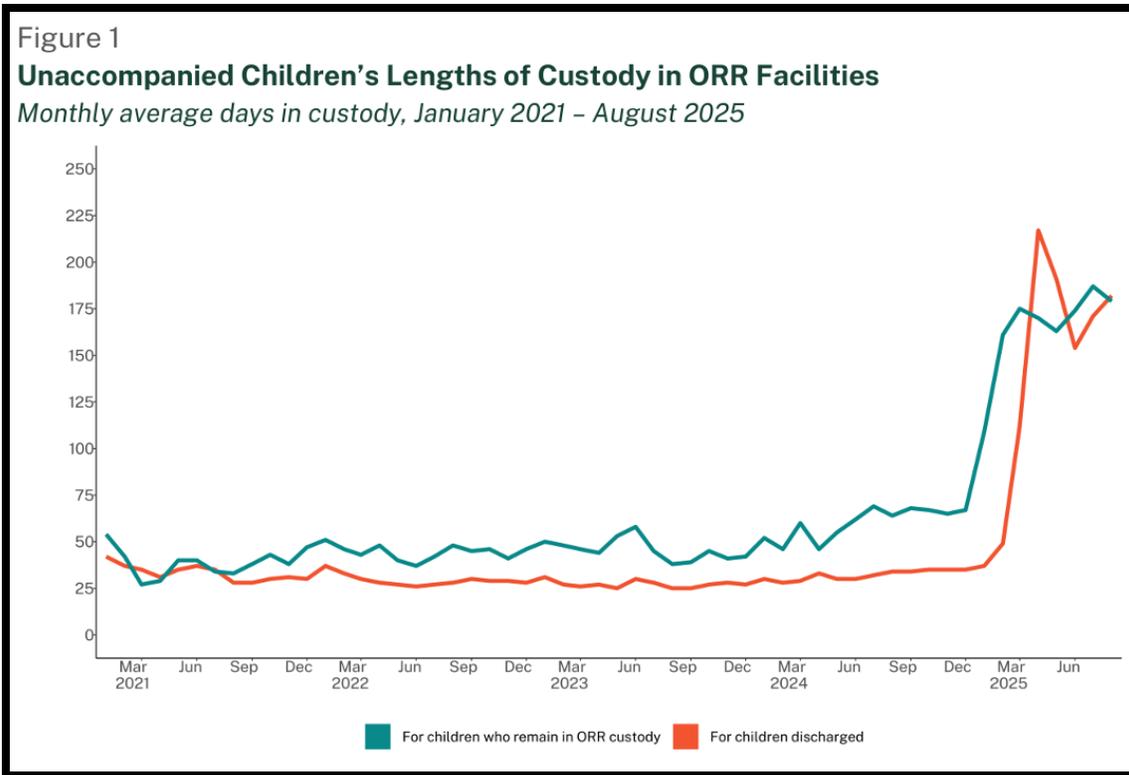
If his habeas petition is not granted, **CHILD'S NAME**’s detention will likely be lengthy, causing further harm. Coming into 2025, the children typically spent “about one month in ORR facilities before their discharge from custody.”²⁹ As the chart below demonstrates, the average duration of terms in ORR custody “soon increased substantially, reaching over *six months* in April 2025. As of the last day of August 2025 – the most recent public data available – the approximately 2,000 children in ORR facilities had been there for an average of *179 days*.”³⁰

²⁷ *Care Provider Facilities Described Challenges Addressing Mental Health Needs of Children in HHS Custody*, U.S. Dep’t of Health and Hum. Servs., Off. of the Inspector Gen., OEI-09-18-00431 (Sept. 4, 2019) at 12, <https://oig.hhs.gov/documents/evaluation/3153/OEI-09-18-00431-Complete%20Report.pdf>.

²⁸ *Id.* at 20.

²⁹ Jonathan Beier, *et al.*, *Dismantling Protections: How ORR Policy Changes Trap Children in Extended Detention*, Acacia Center for Justice (Sept. 29, 2025), <https://youthlaw.org/news/two-new-reports-reveal-harms-prolonged-custody-unaccompanied-children>.

³⁰ *Id.* (emphases added).



Spending six months in detention would have life-long, negative impacts on **CHILD'S NAME**. Prolonged detention would also unnecessarily compound the many harms already experienced by **CHILD'S NAME**, who has already been harmed by **[INSERT FACTS ABOUT HARMS FROM CHILD’S SEPARATION FROM COMMUNITY, FAMILY, AND SCHOOL]**.

V. DETENTION INTERFERES WITH AND DISRUPTS CHILDREN’S AND YOUTH’S EDUCATION

Empirical research also reveals that detention disrupts and negatively impacts children and youth’s educational trajectories. Disrupted education results in missed academic opportunities and decline in performance, and it causes students to become isolated from their peers during a critical developmental phase.

CHILD'S NAME is currently a *** in school, which is a particularly important year for students.

ADD FACTS:

- Is child at grade level?
- How does detention impact school trajectory and ability to stay on track or schedule towards graduation?
- Cite to any declarations in support from teachers, school, or principal.
- Threat of educational derailment due to detention.
- Analysis of whether detention education being provided is appropriate educational placement for child.

Based on Amici’s decades of experience, congregate care settings are disruptive to a child’s educational process. **CHILD'S NAME** is not currently receiving academic credits; he is attending a school setting designed for children with criminal-legal conflicts. **CHILD'S NAME** risks falling significantly behind.

CONCLUSION

Detention in facilities such as the ORR congregate facility where Petitioner is currently confined has lasting, detrimental impacts on children and youth’s mental and physical health, family relationships, and educational outcomes, especially during adolescence and emerging adulthood, when young people are highly vulnerable to the adverse effects of detention. **CHILD'S NAME**’s petition for a writ of habeas corpus should be granted and he should be spared from further ORR detention.

Dated:

INSERT ATTORNEY OR FIRM NAME

/s/

*Attorneys for Amici Curiae Youth
Detention Experts*