

The New Immigration Executive Order's Impact on Children in 200 Words

[Health Equity](#)

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Yesterday, the White House issued a [new executive order](#) that places a 90-day bar on U.S. entry by visa holders from six Muslim-majority nations (Iran, Syria, Sudan, Somalia, Yemen and Libya), suspends the U.S. refugee resettlement program for 120 days and caps FY2017 refugee resettlement at 50,000 people. It also leaves the door open for extending the bar beyond 90 days and including other nations. This action revoked [executive order 13769](#), a “travel ban” previously blocked by [multiple U.S. courts](#).

As I have [previously written](#), these policies harm children. Thousands of refugee children in line for U.S. resettlement are likely to wait a year or longer than anticipated, despite having completed [multi-step, multi-agency vetting](#). The new executive order will have a particularly damaging effect on refugee children in need of lifesaving medical care. It will also impede the recruitment of immigrant pediatricians working in [medically-underserved areas](#) and of [pediatric subspecialists](#) working in fields with ongoing [provider shortages](#). Needlessly delaying the resettlement of refugee children is inconsistent with America's values, and compromising the U.S. pediatric workforce is inconsistent with our commitment to child health.

For the health and safety of refugee children and their families, a different approach is needed.

This post is part of our “_____ in 200 Words” series. In this series, we tackle issues related to children's health policy and explain and connect you to resources to help understand them further, all in 200 words. If you have any suggestions for a topic in this series, please send a note to PolicyLab's Communications Manager [Lauren Walens](#).

Katherine Yun MD, MHS

Faculty Member



Katherine Yun
MD, MHS

Email: YunK@chop.edu