

**IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF CALIFORNIA**

Juan Manuel MONTES BOJORQUEZ,)	
)	
Plaintiff,)	
)	CIVIL ACTION
v.)	
)	NO. 17-CV-780 GPC NLS
UNITED STATES CUSTOMS AND)	
BORDER PROTECTION et al.,)	
)	
Defendants.)	
)	

DECLARATION OF MADELON V. BARANOSKI, Ph.D

I, Madelon Visintainer Baranoski, Ph.D., make this declaration based on my personal knowledge and, if called to testify, I could and would do so competently as follows:

1. I graduated from the University of Maryland and the Walter Reed Army Institute of Nursing in 1969 and served as an Army nurse until 1972. I served in Vietnam from March 1970 through March 1971 and at Fort Lewis, Madigan and at Fort Belvoir. I received an MSN in Pediatric Nursing from Yale University School of Nursing in 1974 and a MA in Psychology from the University of Pennsylvania in 1980. In 1982, I obtained my PhD in Developmental Psychology/Clinical psychology from the University of Pennsylvania. Currently, I am a Professor in the Department of Psychiatry at Yale University’s School of Medicine where I am also the Vice Chair of the Institutional Review Board. Attached as Exhibit A is a true and correct copy of my Curricula Vitae.

2. Traumatic Brain Injury (TBI) occurs when an external force, such as a bump, blow, jolt causes brain dysfunction. Brain injuries can range in scope from mild to severe and result in permanent neurobiological damage that produce life-long deficits to varying degrees.

3. Many children who experience TBI are left with residual impairments as a brain injury can have a negative impact on continued brain maturation and development. For example, early severe childhood TBI can result in cognitive impairments, including deficits in memory, concentration, attention, intellectual function, and difficulties understanding language (receptive aphasia), as well as being understood (expressive aphasia). Individuals who experience TBI as a child are significantly more likely to have symptoms of Attention Deficit Hyperactivity Disorder (ADHD), social and emotional disorders, such as anxiety and depression, and express dependent behaviors. Additionally, after brain injuries, some people think and process information at a slower rate. If something is asked of them, they may need adequate time to process and respond to the information.

4. Individuals with TBI are also more likely to have difficulties coping with stress. When we are under stress, different cognitive functions of the brain help us to recognize the symptoms of stress, identify the causes, formulate a strategy for dealing with the stress, and maintain control of our emotions appropriately. A brain injury, however, can dramatically affect each of these cognitive functions, resulting in an inability to cope. Some people with TBI are more sensitive to depression and anxiety, they may feel lost and overwhelmed when faced with demanding and stressful situations or tasks that require a lot of attention and information-processing, especially if she or he is asked to make decisions.

5. I have not examined Mr. Juan Manuel Montes, the Plaintiff in this action, and I offer no diagnosis. I have , however, reviewed certain medical and

school records pertaining to Mr. Montes, who is a twenty-three-year-old man who suffered a traumatic brain injury when he was a child. Specifically, I reviewed a 10-page Psycho-Educational Evaluation, dated December 2, 2011, from [REDACTED] High School District; a 19-page document from Imperial County Education Local Plan Area (SELPA) Individual Education Program; several medical records prescribing Mr. Montes various medications from 2005 to 2009; the results of an Electroencephalogram (EEG) when Mr. Montes was 14 years old; and documents indicating that Mr. Montes was referred to Imperial County Department of Behavioral Health Services. I also reviewed a copy of the First Amended Complaint filed in this action.

6. [REDACTED]

7. Given Mr. Montes' medical and educational history, I would expect that being stopped, detained, and questioned by Customs and Border Protection (CBP) agents would be a major stressor for someone with Mr. Montes's background. For someone with Mr. Montes', sensitivity to anxiety, which is higher than most people, a typical reaction would be withdrawal, avoidance, escape, or a psychological shut down evidenced by not responding to questions at all or responding to questions impulsively in an effort to try to stop further questioning. His impairments would limit his capacity to process and understand

information given to him, questions asked of him, or be able to respond with complete and/or accurate information. Someone with Mr. Montes' history and deficits would likely have been overwhelmed when confronted by authority and without a familiar support system. Interrogation would represent an overwhelming situation for someone with Mr. Montes' history and deficits. In my opinion, it is likely that under the stress of that situation, someone with Mr. Montes's history and deficits would have had a diminished capacity to engage in an appropriate social exchange, provide information (even that which would have been helpful to him), and deal with his fear and anxiety. He also may have withdrawn, become agitated, uncooperative, and mute.

I declare under penalty of perjury that the above is true and correct to the best of my knowledge.

Signed this 14th of July 2017, in New Haven, Connecticut

A handwritten signature in cursive script, reading "Madelon Visintainer Baranoski". The signature is written in black ink and is positioned above a horizontal line.

Madelon Visintainer Baranoski, Declarant.