



MENTAL HEALTH NEEDS OF UNACCOMPANIED MINORS

Working with UAC Populations

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Learning Objectives

- Recognize the Importance of Cultural Humility and its connection to Trauma
- Understand Immigrant Children's Prior (pre-migration) Trauma Experiences
- Review the migration journey of unaccompanied children: Trauma exposure during migration
- List within US types of traumatic experience
- Describe how the final trauma of separation and rejection impacts a child
- Describe ways of adapting trauma-focused treatments for immigrant youth
- Recognize adaptation guidelines for serving Latino children affected by trauma and separation

Cultural Humility

1. Includes a commitment to self-evaluation and self-critique
2. Recognizes, acknowledges, and changes power imbalances in relationships
3. Develops mutually beneficial partnerships with communities
4. Works towards institutional accountability

Tervalon & Murray-Garcia (1998)
Fortuna, et. al. (2019)



Trauma Lens

“What’s wrong with this child?”

to

“What the child’s perception of what has happened (is happening) to this child?”



Fortuna, et. al. (2019)



Culture & Trauma

Although much is known about trauma and youth generally, there are problems in applying this knowledge broadly to all groups:

- Culture affects:
 - symptom expression
 - help-seeking patterns
 - healing mechanisms
 - meaning ascribed to trauma
 - type of trauma experienced
- Cultural bereavement, cultural trauma, generational trauma
- Acculturation



Orientation to Population

Refugee: A person who is outside his/her country of nationality or habitual residence; has a well-founded fear of persecution because of his/her race, religion, nationality, membership in a particular social group or political opinion; and is unable or unwilling to avail himself/herself of the protection of that country, or to return there, for fear of persecution (*Article 1 of the 1951 U.N. Refugee Convention*).

Immigrant: A person who voluntarily leaves his or her home country for better economic, educational, or other opportunities.

Asylum-Seeker: A person whose request for sanctuary has yet to be processed (*UNHCR, 2017*).

Unaccompanied Refugee Minor(URM)/Unaccompanied Alien Child (UAC)*: A child who is under the age of eighteen, who is separated from both parents and is not being cared for by an adult who by law or custom has responsibility to do so (*UNHCR, 1997*).

Undocumented Immigrant: A person without legal documentation to reside in the US.

Over half of the refugees worldwide are under the age of 18 (UNHCR, 2017)

Top 9 country of origins* most represented
among unaccompanied refugee minors
(URMs) in 2018 served in the U.S.
URM program

1. Guatemala
2. Democratic Republic of Congo
3. Eritrea
4. Honduras
5. Burma (majority of newer arrivals are Rohingya)
6. Afghanistan
7. Mexico
8. Somalia
9. El Salvador

* 53 countries represented overall

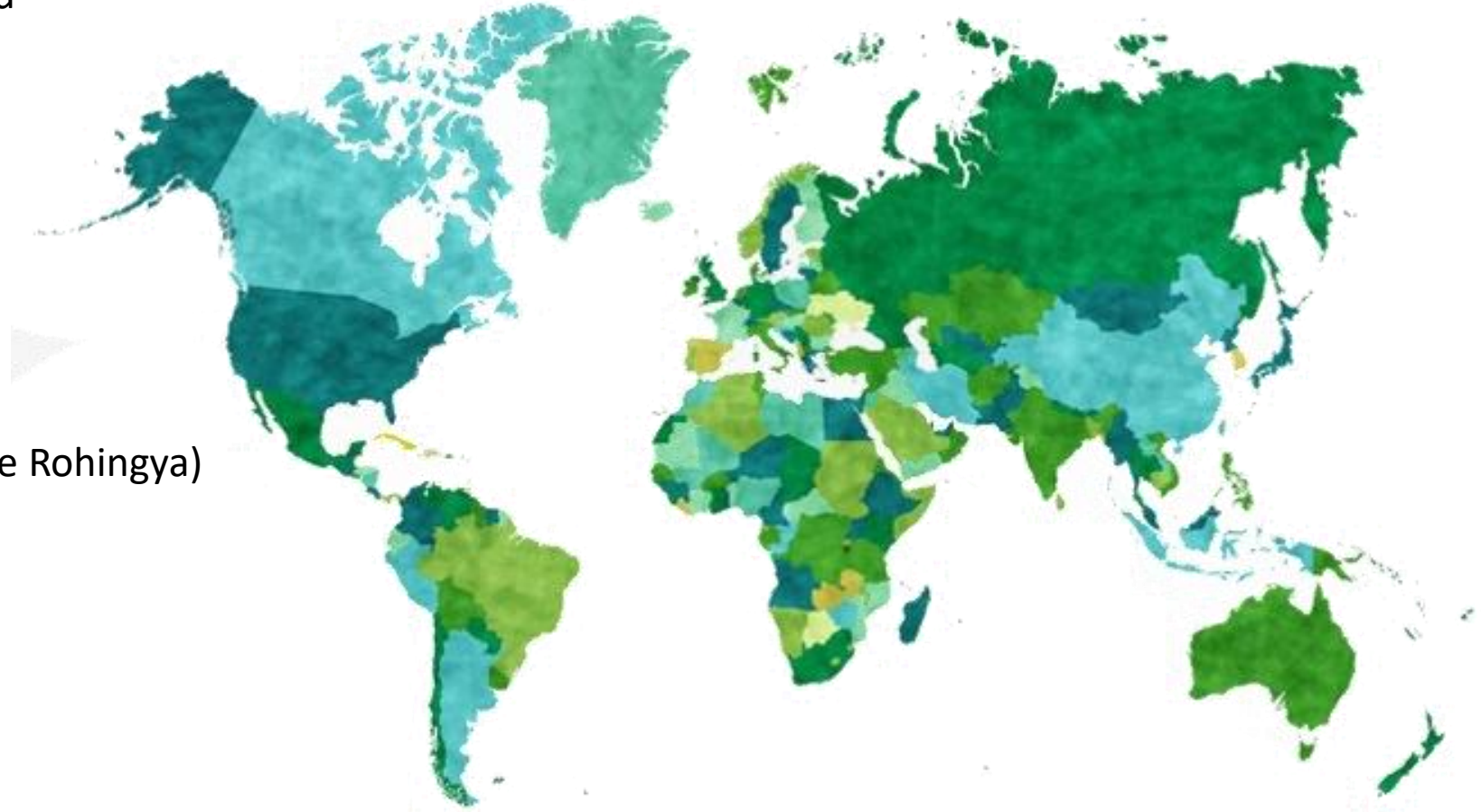


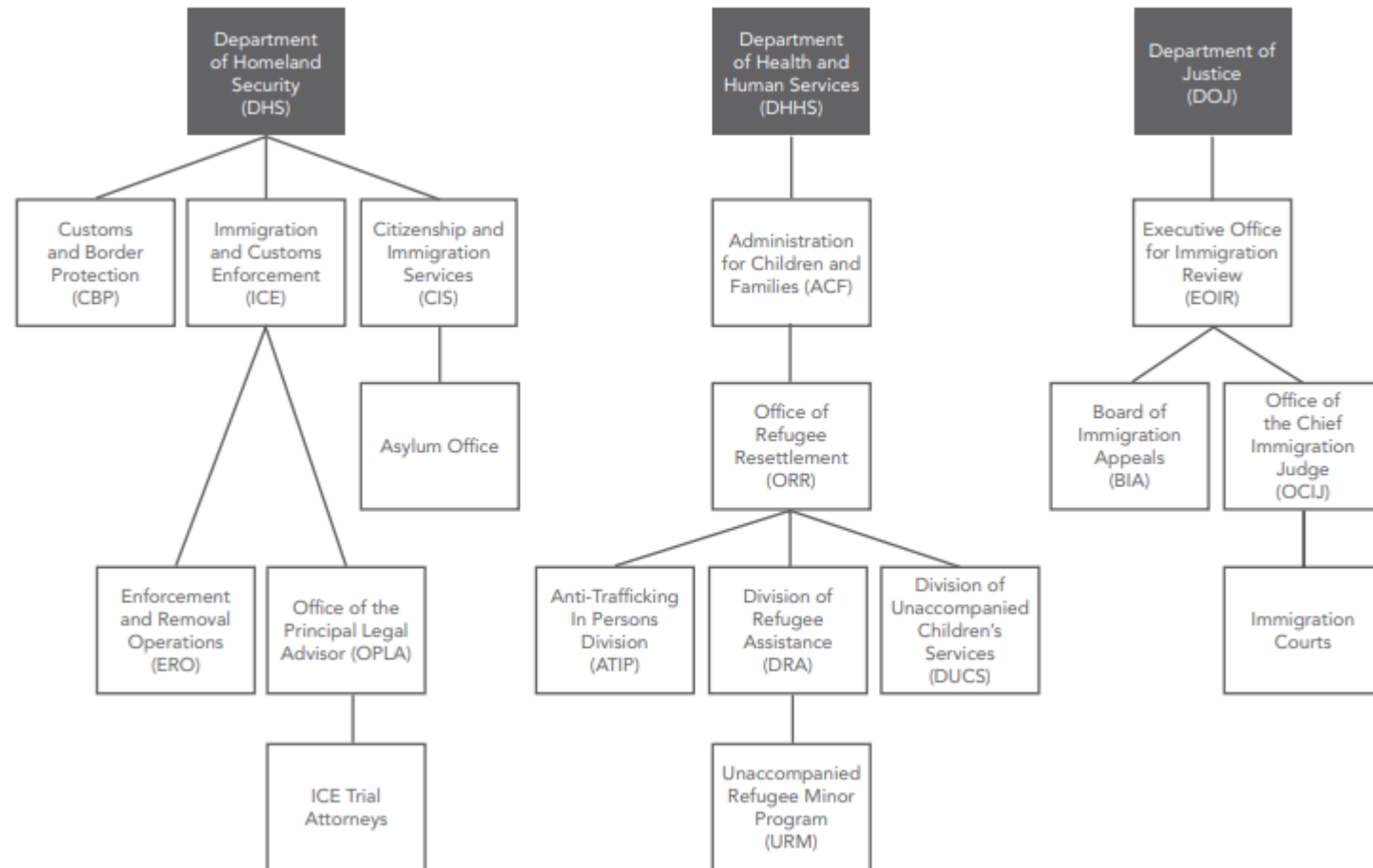
Image taken from: https://png.pngtree.com/element_origin_min_pic/16/09/04/1757cbedb66a8c6.jpg

Northern Triangle



Source: Congressional Research Service (data); Map Resources (map). | GAO-21-104366

Federal Agencies that Interact with UAC



Potentially Traumatic Exposures Across Migration

Pre-
Migration

Post
Migration

During
Migration

Pedro's Story



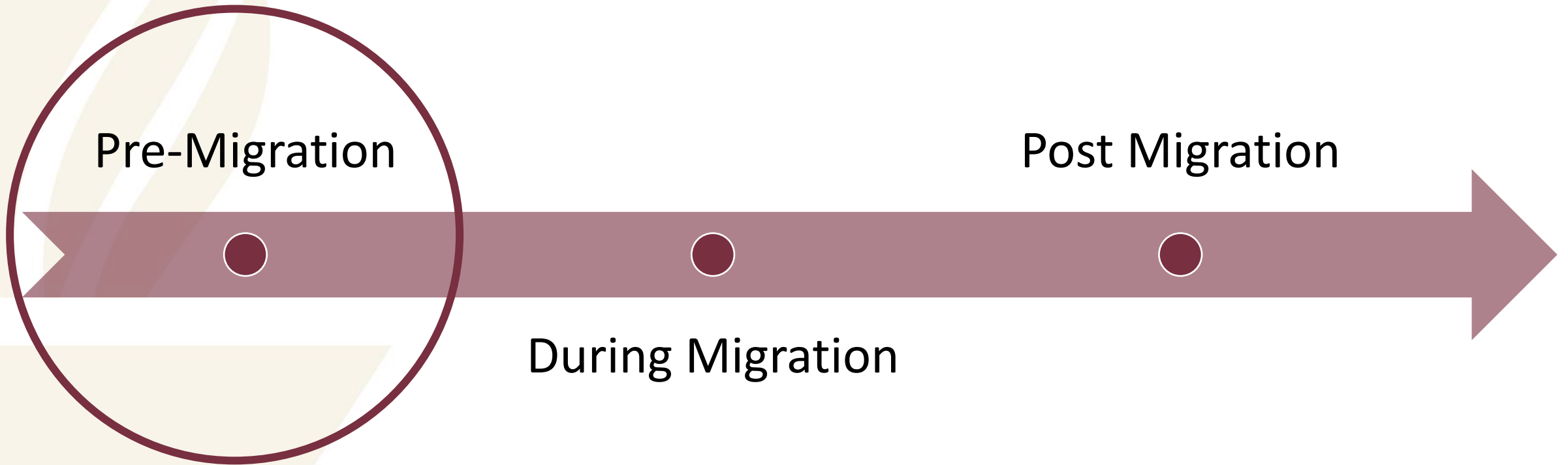
Until Pedro reached the seventh grade in Guatemala, his life was uneventful. Then, he witnessed the assassination of a classmate by a gang member while playing in the courtyard of his school. At first, he was accused of the murder. However, after spending a week in jail, he was exonerated. When the gang found Pedro in another school, they threatened him, and physically assaulted him on at least seven occasions. Pedro was kidnapped while on his way to a nearby village to borrow a book for a school assignment. His parents were asked for a ransom. He was eventually able to escape his kidnappers, but the stranger who helped him flee turned out to be a smuggler. This man forced Pedro to make a choice: come to the U.S. so his family would pay the smuggler or be returned to his kidnappers. Pedro agreed to accompany the man. After they traveled with several other people, they crossed into the U.S. and were detained by immigration officers. Pedro was placed at a detention center for adolescents in Arizona. He was transferred into the care of an agency and placed in a foster home in the State of Washington. When he was able to communicate with his parents, Pedro was informed of the assassinations of several uncles. Their bodies were marked with gang signs to make sure the family knew they were killed because Pedro's ransom had not been paid. Pedro has been told that he will be assassinated if he returns to Guatemala. He continues to be afraid for his life and the lives of his siblings and his parents.

Pedro's Story (Handout)

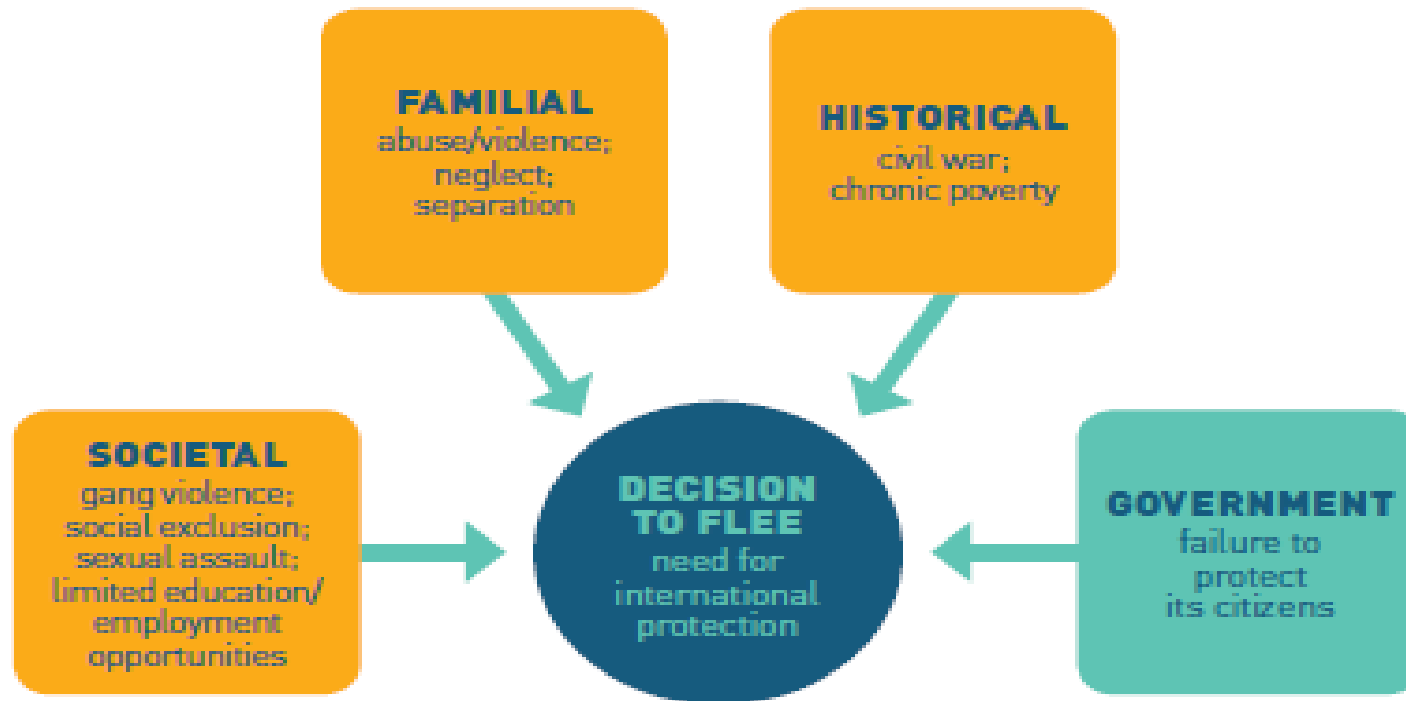


- Pre-migration Challenges
List the different challenges noted in Pedro's story (i.e., context for migration)
- During-migration Challenges
List trauma exposure during migration
- Anticipated Post-migration Challenges
What challenges do you anticipate Pedro will have as he adjusts to life in the US?
- Mental Health Impact
What do you anticipate will be the mental health impact of Pedro's journey (i.e., psychopathology, complex trauma reactions)?

PRE-MIGRATION TRAUMA EXPOSURES



Context for Immigration





Historical Factors: Inter/trans-generational Trauma

- The impact of trauma may be carried from one generation to the next.
- Original research grew out of studies done with survivors of the Holocaust and their children. Researchers offer two perspectives^(Danieli, 1998) :
 - **Resilience perspective:** children of survivors who were able to cope with their traumatic experiences will have increased resilience in the face of future
 - **Vulnerability perspective:** “permanent psychic damage” of trauma leaves children of survivors more vulnerable to future negative impacts of trauma

Historical Factors

Civil Wars & Poverty



- Three distinct Central American Migration Periods

(Orozco & Yansura, 2015)

1970s – 1980s

Political Migration

1990s – 2000

Economic Migration

Recent Influx

Societal Violence

- Political & social unrest

(Sawyer & Marquez, 2016)

- weak economy
- citizen mistrust
- Fragile government
- access to war weapons

% of Population living below poverty line

Honduras



63%

Guatemala



60%

El Salvador



33%

Societal Factors

Gang Violence 

- Escalating violence & persistent threats from MS-13 & M-18 (Council on Foreign Relations, 2018)
- Youth vulnerable to influence of forced recruitment (Seelke, 2016)
- Small business affected by extortion (Dudley & Lohmuller, 2015)
- Intimidation tactics target victims/witnesses of crime (International Crisis Group, 2016)

95%

Crimes go
Unpunished

65%

UAC threatened
with death or injury

60%

UAC witness
murder or injury

Social Factors

Social Exclusion



- Youth deported from U.S. returned with limited skills & unfamiliar language (Paris et al., 2018)
- Disenfranchised generation with limited education/employment opportunities (Salazar-Xirinach, 2012)
- For children who resist gang pressure (particularly girls), fleeing may be only option (Baily, 2017)
- Repression, discrimination & persecution as a result of gender or sexual orientation (Moloney, 2017)

Social Factors

Sexual Assault



- Adolescent girls & family forced to flee due to sexual assault & violence (Lakhani, 2016)

Sexual Exclusion



- Girls/women fall victim to femicide, homicide (United Nations Women, 2017)

14 of 25 countries with the highest rates of femicide in the world are in Latin America:

Honduras



466

El Salvador



371

Guatemala



211

Rates
Per
100,000

Familial Factors

Escape Abusive Household



- **23%** of UAC endorse fleeing physical abuse
(Bailey, 2017; Paris et al., 2018)

No Available Caregiver & Family Reunification



- **54%** of UAC endorsed living in home where one parent had migrated to U.S.
(KIND, 2013)

Overlapping needs of males:

(Ruehs, 2016)



- Opportunity to escape risk for gang recruitment
- Sense of responsibility to provide for family
- Willingness to search for adventure



“Childhood has become synonymous with witnessing or suffering violence; experiencing human rights violations and discrimination on various grounds; suffering from social exclusion; and being deprived of education, employment opportunities, medical services, and even food.”

-University of California Hastings Center for Gender and Refugee Studies

DURING MIGRATION TRAUMA EXPOSURES

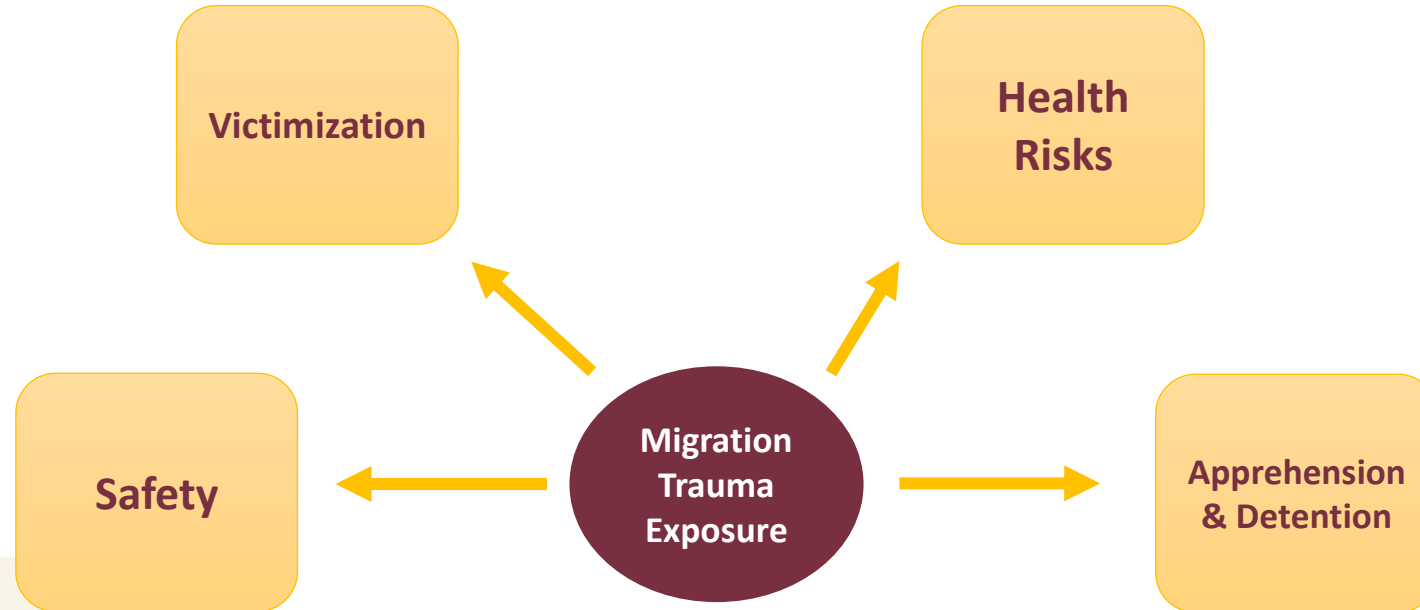
Pre-Migration

Post Migration

A horizontal timeline diagram consisting of a dark red arrow pointing to the right. Three small dark red circles are spaced along the arrow. The middle circle is enclosed within a larger, dark red circular outline. The text "Pre-Migration" is positioned above the first circle, "Post Migration" above the third circle, and "During Migration" below the middle circle.

During Migration

Trauma Exposure During Migration



Safety Issues During Migration

Use of Cayotes



- Families often pay guides & smugglers; gangs often demand fees

(Paris et al., 2018)

Risk of Abandonment



- Some children abandoned by cayotes

(Baily, 2017)

Unsafe Transportation & Lodging



- Transported in crowded, squalid conditions (cars, minibuses, boats)

(Baily, 2017)

Victimization Risks During Migration

Lone Travelers



- Some cannot afford coyote, or children leave home countries unannounced/on their own

(Paris et al., 2018)

Risk of Abuse



- Risk of sexual/physical abuse during journey; susceptible to labor and sexual trafficking

(Women's Refugee Commission, 2012)

Health Risks During Migration

Terrain &
Exposure to
Elements



- Rivers are high & pose threat of drowning
- Children become lost in deserts of North Mexico/South US
- Limited food/water; risk of severe dehydration/death

(Baily, 2017)

Risk & Impact of Apprehension/ Detention During Migration

Terrifying
Apprehension
Experiences



- Some UAC assume will be deported if caught & evade arrest

(Baily, 2017)

Separation



- Once detained, separated from traveling companions, including relatives

(Paris et al., 2018)

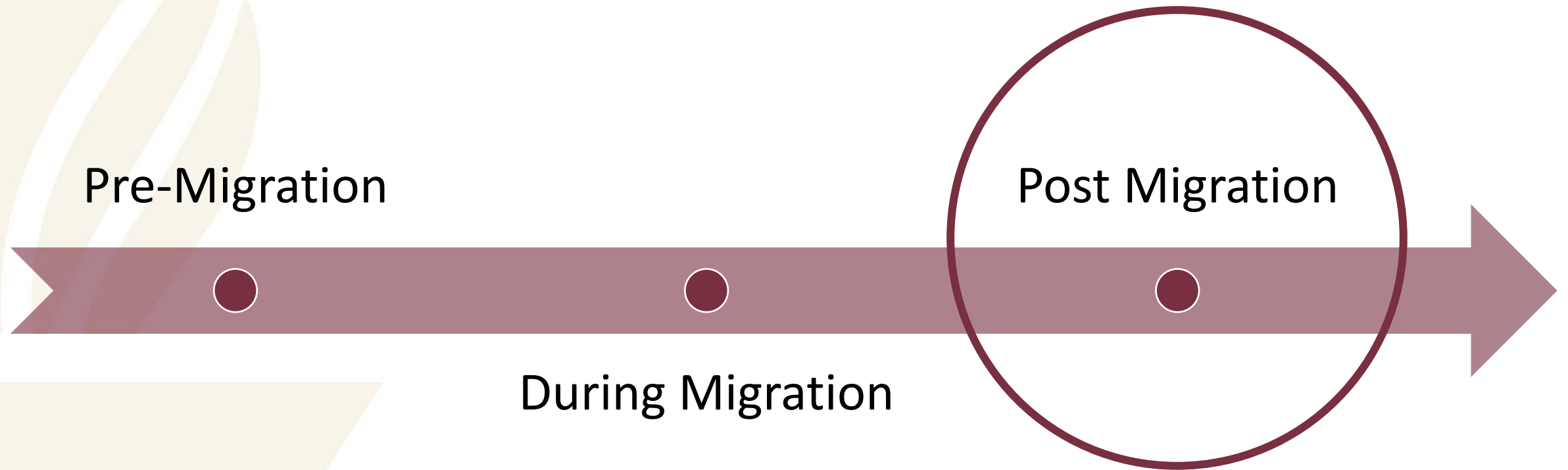
Detention
Facilities



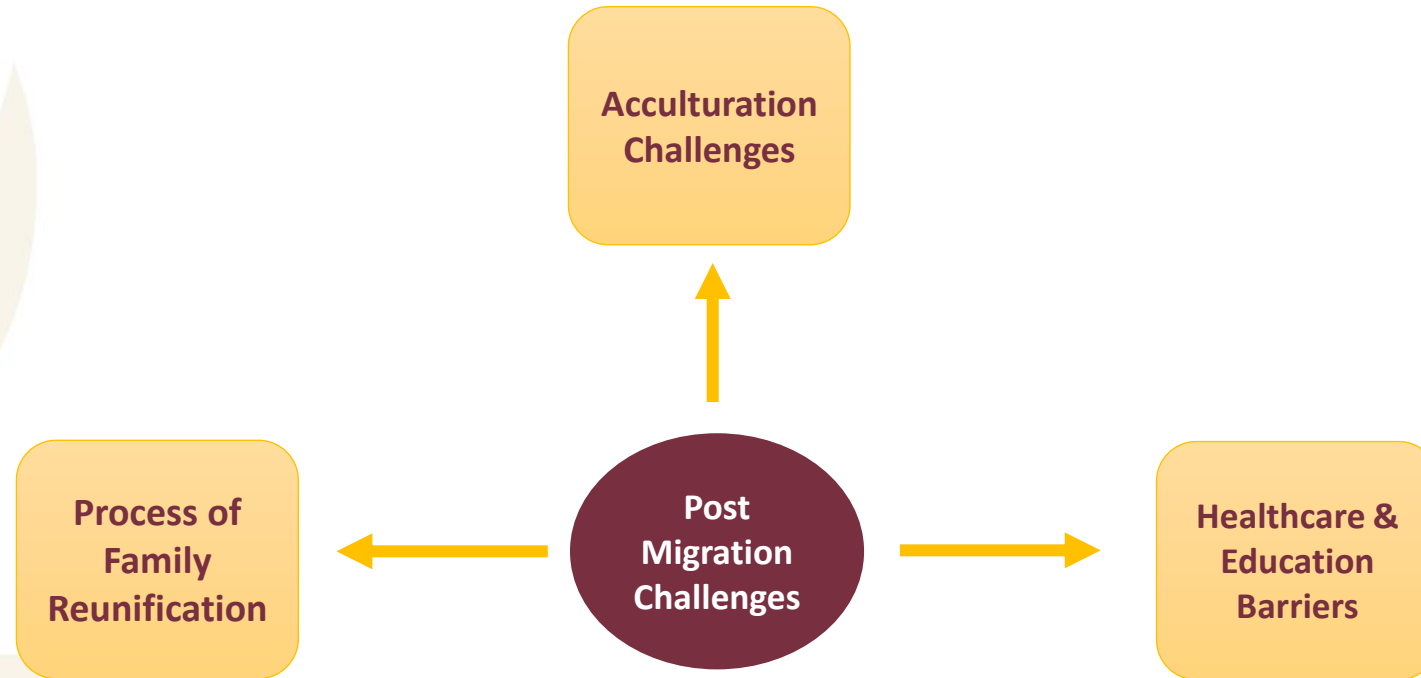
- Limited communication, bright lights, overcrowded, lack of privacy, limited contact with family
- Alleged instances of physical/sexual abuse
- Anxious waiting period to locate family members

(American Civil Liberties Union, 2018)

POST-MIGRATION TRAUMA EXPOSURES



Post-Migration Challenges





Family Reunification Challenges

Challenges to Process of Family Reunification:

- Families are often not intact
- Emotional burden of lengthy separations or lack of prior relationships altogether
- UAC mourning separation from family members in the home countries
- Family may lack access to social supports and benefits due to their own legal status
- Financial fragility that leads to housing and food instability
- Stressful waiting period for deportation proceedings



Acculturation Challenges

Acculturation Challenges:

- Learning English, forging new identity
- Stigmatization, overt & covert discrimination (Vera Institute of Justice, 2015)
 - “minority within minorities” at particular risk (Thomas, 2011)
- Perceived racial-ethnic discrimination:
 - leads UAC to feel threatened and powerless
 - biological stressor increase risk for poor physical and mental health outcomes

(Flores, Tschann, Dimas, Pasch & de Groat, 2010)

Healthcare & Education Challenges

Barriers to
Healthcare



- UAC often live in health professional shortage areas – problem finding quality, linguistically/culturally appropriate care

Barriers to
Education



- Separation from parents predicts poor academic achievement
(Suarez-Orozco, Bang, & Onaga, 2010)
- Academic & social development disrupted by lack of access to school in countries of origin
(Fazel & Stein, 2002)
- UAC are often placed in lower grades & are frequently encouraged to enroll in GED programs



Mental Health Impact

- Children who respond to trauma by **externalizing** are more likely to join gangs vs. those who responded to trauma by **internalizing**, are more likely to become their (gang) targets and leave for a life elsewhere (Baily, Henderson, & Tayler, 2016)
- Many UAC continue to function in key aspects of life – such as going to school, fostering family and social connections
- Estimated prevalence of psychopathology range from **30 to 50%** - matching levels of suffering seen among children in war zones, refugee camps and other challenging humanitarian crisis areas (Baily, 2017)



MENTAL HEALTH SYMPTOMS AND NEEDS OF UNACCOMPANIED MINORS

Prevention, Services & Support





Risk Factors for Mental Health Difficulties

Risk factors for mental health difficulties: factors associated w/post-migration levels and lower functioning: (Bean et al., 2007; Geltman et al., 2005; Jensen et al., 2014; Vervliet et al., 2014)

- Higher frequency of adverse life events or traumatic experiences
- History of personal injury
- Social isolation
- Higher frequency of daily stressors
- Premigration poverty and post migration experiences of discrimination
- Unaccompanied children experience during apprehension and detention (Reijneveld, de Boer, Bean, & Korfker, 2005)

Mental Health Impact

Common Psychopathology

- General internalizing sx
- Anxiety
- Depression
- Suicidal Ideation
- PTSD
- Functional impairments at home
- Low subjectively perceived health

Complex Trauma Reactions

- Attachment difficulties
- Poor attention
- Dissociation
- Emotional & behavioral regulation problems
- Impulse control problems
- Poor self-image



Mental Health Needs of UAC: Belonging

Need for Sense of belonging

- Development of a strong sense of belonging has been identified as critical protective factor in children and adolescents (Suarez-Orozco & Suarez-Orozco, 2001)
- Minors need spaces to connect with each other and share their stories
 - Circle or story telling time – offer validation, support and empathy to one another while sharing stories of survival; realizing commonalities between their stories could serve as powerful tool to normalize their experiences & empower them and instill hope
 - Don't pressure to share info they don't feel comfortable/ready to share



Mental Health Needs of UAC: Experience Positive Emotions

- Recent models of PTSD emphasize the etiological role of the avoidance of negative memories and the role of **positive memories** should not be ignored (Vazquez et al., 2005)
- Common sources of positive emotion:
 - fact of themselves or their family being alive
 - feeling accompanied in the situation



Mental Health Needs of UAC: Conceptualization of Trauma

Finding meaning

- Moral injury and meaning making
 - Being able to make meaning of stressful events particularly important to psychological health of UAC
- Finding personal meaning associated with the experience
- Posttraumatic growth
 - growth in personal skills
 - valuing human relations to a greater extent
 - Existential reflections
 - instrumental learning
 - feeling that experience would prepare them to face their future



UAC: Treatment Approaches

The National Latina/o Psychological Association Published *Guidelines for Mental Health Professionals Working with Unaccompanied Asylum-Seeking Minors*

NLPA recommends a comprehensive treatment approach that combines elements from the following modalities:

- Liberation psychology
- Narrative therapy
- Trauma focused interventions

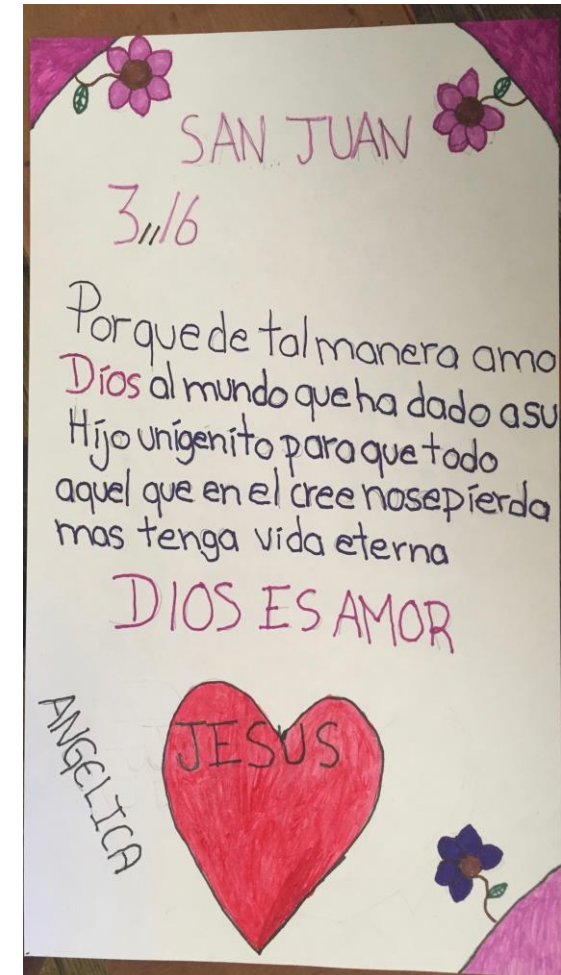


Trauma Focused CBT: Evaluate PTSD

- Exposure to violent events can lead to suffering & impairment in daily functioning
 - Help develop pro-social coping strategies:
 - Feeling identification: UAC need opportunities to draw, paint or talk about their feelings
 - Strategies for emotional regulation (thought stopping, relaxation techniques)
 - Problems solving skills
 - Consider harsh experience/treatment by immigration officials and border patrol (particularly when hand-cuffed)
- Encourage to develop a counter story that will allow them to develop a sense of hope in the future
 - **Miracle Question:** strategy in which child is encouraged to think about how things will be different if their current situation did not exist

Trauma Focused CBT: Special Considerations for PTSD

- Various features go beyond PTSD diagnosis (Brand, 2015)
 - Interpreting symptoms as a result of feeling **traumatically alone**
 - Emphasis on relationship & spirituality



Trauma focused CBT

Grief & Loss

- Complex grief resulting from:
 - Separation from immediate family and for those traveling alone, mixed feelings about leaving loved ones behind
 - Parental separation (in some cases parents already living in US and thus they left their children behind ...)
 - While on journey to US may have been separated from relatives or companions (increasing feelings of fear and isolation)

Guidelines for Addressing Grief/Loss

Bereavement is expected emotional response to loss, but need to be mindful of other emotional reactions that may accompany bereavement:

- shock
- regressive behaviors (thumb sucking, bed wetting)
- impulsive behaviors (behavior outbursts throwing things, fighting)
- helplessness



Help UAC to express/process feelings:

- “Memorial wall”
- Draw a heart & write about all the feelings they are experiencing
- Problems space activity

Additional Interventions:

- Create a safe space for UAC to express & share stories
- Provide time and space to cope (forcing UAC to resume “normal” activities can make matters worst)
- **Offer accurate info and invite them to ask questions**
- Be attentive to how minors are feeling and how coping; emphasize pro social alternatives
- Include religious elements and /or spirituality in treatment



Guidelines for Addressing Depression

- For many UAC depression is associated w/disappointment
- Common Symptoms:
 - loss of appetite, sleep disturbance, extreme crying, loss of interest, low energy
 - in young children: irritability, mood swings, aggression and hyperactivity
- Use of strength based psychoeducational groups:
 - Feeling identification
 - Strategies for emotional regulation
 - Problem solving skills
- Solution focused or CBT techniques
- Use of mindfulness-based interventions



Treatment: Other Considerations

Issues related to documentation:

- Be honest about limits of confidentiality (specifically within shelter/detention center): minors may not understand roles of professionals/adults
- Be honest about types of info included in mental health record (DSM, dx, clinical interview/intake, progress notes, treatment plans)
 - Clarify who has access to records
 - Describe how detailed progress notes will be
 - Info about agencies that have access to data
 - Clear informed consent forms

The 7 Psychological Strengths of UAC

Strengths	<i>Descriptions</i>
Determination	The endless drive and courage to do whatever is necessary to meet one's goals, despite barriers. For instance, the effort and determination it takes an UAC to immigrate to the United States to escape from hardships.
<i>Esperanza</i>	Faith that even during the most difficult situations one can endure these challenges. This strength is captured by the <i>dicho</i> , <i>La esperanze es lo ultimo que muere</i> (Hope is the last thing that dies).
Adaptability	The ability to adapt in a variety of environments. For UAC this can include adapting to different environments during the migration journey and/or subsequent placement.
Strong Work Ethic	Valuing the importance of hard work and taking pride in one's work. For UAC this can be academic or otherwise and is often guided by producing excellence for the betterment of self and family.
Connectedness to Others	Valuing the need to and enjoyment of sharing one's experiences with others – physically, emotionally and spiritually.
Collective Emotional Expression	The ability, need and desire to share strong emotions with others. Emotions are often expressed through music, dance, spiritual rituals, art, and sporting events. UAC may have this desire and will respond positively to therapeutic efforts (affect expression) that aim to teach emotional expression.
Resistance	The will power and courage to stand firmly for one's beliefs, ideals, and practices. This strength is demonstrated in the determination of UAC to defy the odds and limits that are created by oppressive systems.

Pedro's Story



Until Pedro reached the seventh grade in Guatemala, his life was uneventful. Then, he witnessed the assassination of a classmate by a gang member while playing in the courtyard of his school. At first, he was accused of the murder. However, after spending a week in jail, he was exonerated. When the gang found Pedro in another school, they threatened him, and physically assaulted him on at least seven occasions. Pedro was kidnapped while on his way to a nearby village to borrow a book for a school assignment. His parents were asked for a ransom. He was eventually able to escape his kidnappers, but the stranger who helped him flee turned out to be a smuggler. This man forced Pedro to make a choice: come to the U.S. so his family would pay the smuggler or be returned to his kidnappers. Pedro agreed to accompany the man. After they traveled with several other people, they crossed into the U.S. and were detained by immigration officers. Pedro was placed at a detention center for adolescents in Arizona. He was transferred into the care of an agency and placed in a foster home in the State of Washington. When he was able to communicate with his parents, Pedro was informed of the assassinations of several uncles. Their bodies were marked with gang signs to make sure the family knew they were killed because Pedro's ransom had not been paid. Pedro has been told that he will be assassinated if he returns to Guatemala. He continues to be afraid for his life and the lives of his siblings and his parents.

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Questions/Comments

To understand the complexity associated with the task of community integration for unaccompanied children, it is necessary to acknowledge the ambivalence that results from living in a chronic state of uncertainty.



“This painting was made by a woman who had been tortured in Mexico. Her son was with her in the shelter. He was so traumatized he never came out of his room.”



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