How Deportation of Parents Negatively Affects Their Children

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According to Homeland Security's estimate (Baker, 2021), there are 11.4 million undocumented, or illegal, immigrants in the United States. Detention and deportation often weigh on the shoulders of these individuals, causing psychological distress throughout the family (Lovato, 2019). The increased enforcement of more restrictive immigration policies has led to an increase in the number of deportation cases (Lovato, 2019; Lovato, Lopez, Karimli, & Abrams, 2018), affecting over 100,000 individuals and their families each year (U.S. Immigration and Customs Enforcement (ICE), 2021). These policies and forced removal have led to increased mixed-status families and displaced citizen-children, or US-born children of foreign-born individuals (Lovato, 2019; Lovato et al., 2018, Zayas, 2015).

Citizen-children comprise about 20% of the 18 and under population in the U.S. (Rojas-Flores, Clements, Koo, & London, 2017). These children, when left behind in deportation cases, often suffer a wide array of adverse psychosocial effects, including trauma, development of depressive and anxious symptoms, academic difficulties, increased behavioral concerns, and reduced coping capabilities (Allen, Cisneros, & Tellez, 2015; Lovato, 2019; Lovato, Lopez, Karimli, & Abrams, 2018; Rojas-Flores, Clements, Koo, & London, 2017). Understanding how detention and deportation affect displaced children is of the utmost importance when working with this demographic. This paper will present background information on the effects of deportation on citizen-children based on the current literature and a case study to demonstrate how deportation can directly affect the children of deportees.

Literature Review

Since World War Two, numerous observations have shown that children forcibly separated from their parents experience significant distress. Over the past decade, some of the

focus on this topic has been turned toward studying the effect that deportation has on the children of the deportee. This change in the direction of the research pushed an increase of studies supporting the apparent correlation between increased psychological distress and children and having a deported parent.

Early on, we see studies only utilizing unvalidated assessment measures to track behavioral changes in these children (Allen, Cisneros, & Tellez, 2015). In 2015, Allen, Cisneros, and Tellez sought to fill this gap in the literature and empirically examine the claim that the correlation between psychological distress and losing a parent to deportation is strong. Their study found that even with valid assessment measures, children with a deported parent had significantly higher levels of problem internalization and externalization than the other children (Allen, Cisneros, & Tellez, 2015). They suggest that this change is due to the absence of a strong attachment figure and concern for the absent parent (Allen, Cisneros, & Tellez, 2015).

In the same year, Zayas, Aguilar-Gaxiola, Yoon, and Natera Rey (2015) published an article looking specifically at citizen children with detained or deported children. They felt that psychological trauma experienced by citizen children who lose a parent to deportation stems not only from the loss but from living in constant fear that ICE will take their undocumented parent, the typical lower socioeconomic status (SES), discrimination, and other marginalizing social conditions (Zayas, Aguilar-Gaxiola, Yoon, & Natera Rey, 2015). Their study narrowed the research field from all children of undocumented individuals to specifically citizen children. Their results were the same as Allen, Aguilar-Gaxiola, Yoon, & Natera Rey (2015) – children of deported parents report higher levels of depression, anxiety, and sadness.

Rojas-Flores, Clements, Koo, and London (2016) narrowed the field even more by exploring the level of trauma experienced by citizen children of deported parents. They discuss

how potentially traumatic events may lead to posttraumatic stress disorder (PTSD) and link these events with those experienced by families in deportation cases. They also discuss the cumulative effect of living in constant fear of deportation and how it plays into an increased risk for developing PTSD. They compared these children to two other comparison groups: one with undocumented family members and the other with only legal permanent residents. Their results supported the extant literature despite controlling for the lifestyle differences – higher levels of depression and anxiety.

Each of these articles has something else in common beyond their outcome results; a call for a change in immigration policy, taking into consideration their empirical evidence of the detrimental effects of forced separation on the children of these deportees. Other articles, such as the reviews completed by Lovato (2019) and Lovato et al. (2018), agree and further stress that this community is in dire need of psychological help. Fortunately, since the effects are traumabased, they can be treated similarly to those of other types of trauma, grief, and loss using the same evidence-based treatments. The case study presented in this paper seeks to show that outcome results using trauma-focused interventions and schools embracing diversity are positive.

Case Study and Formulation

Case Study

The client is a 13-year-old Latinx female citizen child of an undocumented Venezuelan woman who recently moved away from her immediate family's home in Tennessee to live with her aunt, uncle, and two older male cousins in Indiana after ICE detained her mother and deported her. The client's aunt brought her in for assessment and potential treatment for uncharacteristic withdrawal, sadness, anger outbursts, defiance, and increased anxiety since moving in with them. The client's aunt reported being afraid that the client was not adjusting

well to her new environment and school. Since the client was a minor, her aunt and grandfather were present for the assessment interview. During the interview, the client was encouraged to speak but often deferred to her aunt or grandfather to answer direct questions. However, when she did want to discuss something, she was given the space to do so.

The client stated feeling angry and depressed about this event and proceeded to close up. As reported by her aunt, the client's social history includes being the product of rape and having multiple undocumented family members. Her medical history includes being diagnosed with ADHD, for which she takes 50 mg of Vyvance daily. She stated that she tolerates the medication well and had high compliance. The family denied any other significant medical or mental health history. The family history included depression, anxiety, and ADHD in several family members. The client stated that her current coping strategies were self-isolation, playing video games, listening to music, reading, drawing, and writing. The client's treatment goals were to gain acceptance of her mother's situation, understand her emotional outbursts, gain emotional intelligence, and have someone to talk to who was not involved with her family "stuff."

Case Formulation

The client presents with symptoms synonymous with maladjustment, depression, and anxiety. She reports experiencing sadness, emotional outbursts, fear, and anger. To cope with these emotions, the client will self-isolate and participate in solo activities, such as playing video games, reading, drawing, or writing. Her symptoms seem to directly result from her mother's deportation and her subsequent move, as they started shortly after this event. With the client being an only child with only her mother for company, the client learned that she had to take responsibility for herself and thus developed these coping strategies. The client is also an adolescent and lacks the emotional intelligence to understand and convey her feelings and

therefore avoids the conversation, preferring to self-isolate and calm herself. The initial diagnostic impression is F43.23: Adjustment Disorder with mixed anxiety and depression.

The client's current symptoms are understandable in light of the deportation of her mother and her sudden environmental change. Her self-isolation is a means of protecting herself from having to deal with the sadness and anger she feels when confronted with the fact that her life was turned upside down quite suddenly. Complicating matters is that even being in a different house with a different lifestyle is a constant reminder that her situation has changed and that her mother is not around. She feels angry and alone and is not comfortable thinking about her feelings, let alone talking about them. Fortunately, the client is securely attached to her family, even if she does not like how they treat her or the cultural expectations they place upon her, such as gender roles, behaviors, and beliefs. She started attending school in a unique private system that prizes diversity throughout social and mental health conditions. She and her cousin had an unusual bond where they were almost like twins rather than cousins. Her family was worried about her enough that they brought her to counseling.

The client identifies as a Latin American female but has little interest in that culture. She appears to be highly acculturated with her own beliefs and worldview distinctly different from that of her Venezuelan family. This difference in values causes some distress in the client because she feels they cannot accept her for who she is. This belief could cause some of the isolation we are seeing, as she may think that her family would not understand what she is going through. She correctly attributes her symptoms to the trauma she experienced when her mother was forcibly removed from the country. The main contributors to this case are culturally based. Latinx families are more likely to be affected by deportation than other undocumented races (Lovato, 2019) and the trauma, in this case, was a direct result of deportation.

The client's treatment goals are valid and would significantly increase her ability to cope with her loss. First-order goals are to reduce her depressive and anxious symptoms, increase her coping and interpersonal skills, and lean on the school to help boost her social network so that she does not feel so alone. Other goals will include processing the traumatic experience of suddenly losing access to her mother and increasing her emotional intelligence. The treatment focus is to help the client label, understand, and discuss her feelings and assert herself to her family when she feels misunderstood. The treatment strategy is to support the client as she begins to process this experience and teach her skills to help her along that path. Treatment interventions include grief processing, trauma-focused CBT (TF-CBT), person-centered, attachment-based, mindfulness, and psychoeducation. Specific interventions will be to teach the client three new coping strategies that include others, two new coping and grounding techniques that she can use in the moment of distress to calm down quickly, and assertiveness and interpersonal skills training. Specific TF-CBT activities include affective modulation activities, such as emotion charades, and developing a trauma narrative to explore the experience.

There may be some obstacles and challenges when approaching this client. The client will likely be reluctant to discuss her mother, the deportation, or her feelings, even if she wants to. Her developmental stage makes it difficult to put what is going through her brain into words, so she will need to develop the language as the sessions progress. She appears to be happy to have someone to talk to outside of her family, but engaging her may be difficult because she is overly withdrawn. Finding a common interest would be a beneficial way to engage her. Cultural factors impact this case, so sensitivity around the client's held beliefs regarding the government and world, in general, will be imperative. Assuming that the client can come to a place of

acceptance regarding her situation and process the trauma of her mother's deportation, the prognosis for the client is excellent.

Advocacy and Legal/Ethical Considerations

Advocacy

This case demonstrates the effect deportation has on the child left behind very well. This client is just one of the millions of children who suffer because of the lawful removal of their parent(s). She was one of the lucky ones, too, because she was able to get in to see a counselor. Not all of these children have that luxury. There are multiple levels of involvement a counselor can take when it comes to advocating for these displaced children. The most helpful and currently needed is being on the ground, handling pro bono cases as they come, and learning how to treat concerns like these. Other levels include getting the community involved in system change and advocating directly to Homeland Security for them to pay attention to the evidence presented in the recent literature.

Legal/Ethical Considerations

The primary legal and ethical consideration that came into play during this case was how much to share with a judge regarding the client's mental status while still offering a convincing enough story to accelerate her mother's return to the U.S. At one point, the agency questioned the client's custody arrangements and requested that a copy be sent to them to put in the client's file. A copy of a release of information was also needed for the client's mother's lawyer. Other similar situations would likely require similar considerations.

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