

MOVING BEYOND TRAUMA:

Child Migrants and Refugees in the United States

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OVERVIEW

Immigration has been part of the American story from our beginnings as a nation. Many of our immigrants^a—refugees as well as other international migrants—are children, but their circumstances are often overlooked in the broader political debates. Emerging science concerning trauma and early brain development provides a new lens through which to view the risks, as well as the opportunities, these children face as they attempt to establish new lives in this country. In this report, we bring together demographic data and other research findings on what are often considered distinct groups of immigrant children, in order to focus on their common challenges.

KEY FINDINGS

- In the midst of a worldwide crisis of children fleeing war and other violence, more than 127,000, with or without their parents, will seek refuge in the United States from abroad this year.
- Classified according to a number of legal designations, these children share a common experience of trauma, which often accompanies them on their journey to this country and for months or years after they arrive.
- An estimated 37,500 children arriving in 2016 will be officially designated as refugees or asylees, statuses which grant them eligibility for health care and social services immediately upon arrival, and eligibility for citizenship after 5 years. From late 2014 to late 2015, there was a more than four-fold increase in the number of asylum applications pending for unaccompanied minors who had sought interim assistance under the provisions of the Trafficking Victims Protection Reauthorization Act.
- In contrast, nearly 3 times as many children (about 90,000) will arrive without legal status, first apprehended by the Border Patrol, then subject to a chain of administrative procedures that offers few protections and may include detention for prolonged periods; this presents a great many hazards to their well-being—including re-traumatization.

^a See the accompanying text box for key definitions.

- All of these children have significant needs in the areas of family stability, health, education, and economic security. Separations from parents and other family members often take a double toll on children, since reunifications can also be highly stressful. Serious mental health problems are prevalent among this population, largely as a result of trauma, or anxiety about further separations. Children often bring a history of interrupted schooling, or none at all, and face a number of challenges adapting to our education system. Financial circumstances for their families are typically precarious, and subject to severe shocks when adult earners are suddenly removed.
- Like other countries, the United States faces challenges integrating these young newcomers, but our ability to do so will enhance our human, economic, and cultural capital.

BACKGROUND

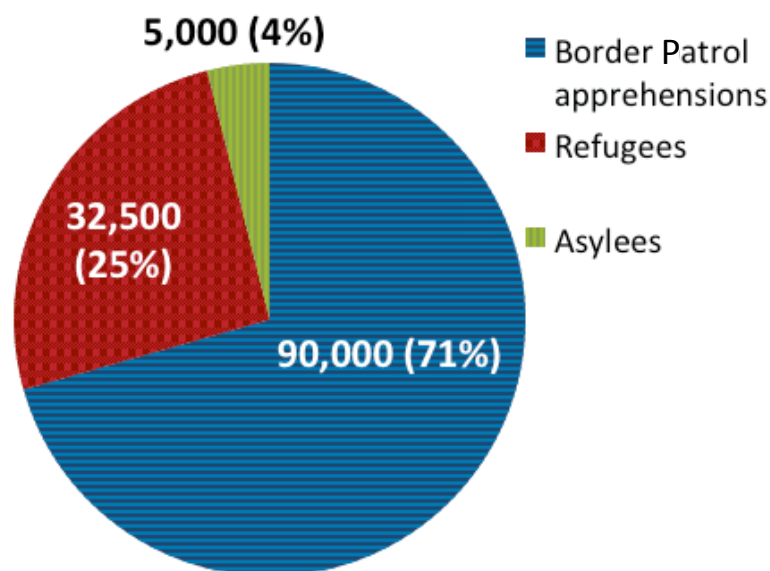
No country these days can ignore the worldwide displacement of individuals and families who are seeking a safe haven from violence that is often indiscriminant in its victims. The U.S. Department of State estimates that, worldwide, 65 million people (of all ages) are displaced either within or outside of their home countries.¹

As of 2015, the number worldwide who are considered refugees^b was 21.3 million—an all-time high. Children make up a majority of refugees (51 percent, as of 2015).² In addition, the United Nations High Commissioner for Refugees estimates that, worldwide, at least 10 million people are stateless—that is, they are not recognized as nationals by any country, and thus may be denied the protections and services afforded to refugees.³

This is a global catastrophe to which many nations, including our own, are struggling to respond. Designated agencies, let alone data systems, are unable keep pace with these fast-moving developments. The issues—economic, political, and cultural—accompanying this global crisis are complex, but, from a humanitarian perspective, the consequences of not attending to them are potentially disastrous.

The focus in this report is on children, fleeing war and other forms of violence, who arrive in the United States from abroad (who, we estimate, will number more than 127,000 in 2016)—sometimes with their families, and sometimes without—and what we know of their circumstances, the resources and challenges that affect their development, and their prospects for becoming vital, contributing members of our society, now and into their adulthood.

Figure 1. International migrant children: Projected 2016 arrivals in the United States



Source: For asylees, U.S. Citizenship and Immigration Services. For refugees, Mossaad, N. (2016). Refugees and asylees: 2014. Annual Flow Report. U.S. Department of Homeland Security, Office of Immigration Statistics. For apprehensions, U.S. Customs and Border Protection, United States Border Patrol Southwest Family Unit Subject and Unaccompanied Alien Children apprehensions Fiscal Year 2016. We estimate conservatively that half of those apprehended in families are children.

^b See the accompanying text box for key definitions.



Definitions

Refugee: A child or adult who, prior to arrival in the United States, is determined to have “a well-founded fear of persecution” in the country of which he or she is a citizen, who meets the additional criteria of being of “special humanitarian concern to the United States,” and who is not considered to present a public health, criminal, or national security risk. There are annual caps, by world region, on the numbers of refugees who may be admitted to the United States.

Asylee: A child or adult who meets the criteria for refugee status, but who is already in the United States or is seeking admission at a port of entry.

Unaccompanied child: A child traveling without a parent or adult guardian, and without legal authorization, who is apprehended by the U.S. Border Patrol.

Family unit member: A child travelling with a parent or guardian, or a parent traveling with one or more children, and without legal authorization, who is apprehended by the U.S. Border Patrol.

Immigrant: A child or adult currently living in the United States, who was born elsewhere (not including those born to U.S.-citizen parents).

Unauthorized immigrant: As used here, a child or parent who is living in the United States without legal authorization. Within the same family, there may be one or more individuals who were legally admitted, and others who are unauthorized.

Migrant: As used here, synonymous with *immigrant*.

Regardless of official designation, children in all these groups share one or more of a number of threats to their well-being: separation from parents and other family members; exposure to violence; uprooting from familiar contexts of language, community, and culture; homelessness and housing instability; prejudice and discrimination on the basis of color, religion, or language; poor physical and mental health; interrupted schooling; economic hardships; lack of access to formal and informal social supports; and anxiety for their future.⁴

While legal-status distinctions are important, the experience common to all the major groups of migrant children considered here is trauma. Many experienced trauma (typically, witnessing or being a victim of violence) in their countries of origin, while some experienced further trauma as part of the journey to this country, and may face the prospect of further trauma after their arrival in the United States. Often, the neighborhoods where they come to live are highly segregated, lacking in important resources, and subject to high levels of violence.⁵

Unless the experience of trauma is buffered by supportive adults, it can lead to toxic stress. Toxic stress harms children’s development.⁶ Its effects reach into the brain’s structure and function, impairing cognitive, social and emotional skills, compromising health, and contributing to risk for disease and early death. Although many experiences can lead to toxic stress, the most significant of these for the children who are the focus here involve separation from parents (loss of ties through death, detention, geographical distance, or dissolution of the parents’ relationship), and the experience of

violence, either as a direct victim, or as a witness.⁷ Numerous studies have shown that, in the absence of supportive adults who can help soften the hard edges of trauma, these experiences can leave lasting traces in children's development.⁸

The experience of trauma may not end with a child's arrival in the United States. Often there are formidable barriers in adjusting to a new country, culture, and language.⁹ For children, in particular, school is likely to be both a source of stability and routine, and a venue where there are many challenges. Children may face racial discrimination and bullying.¹⁰ Tensions may arise within families when children and adults have different responses to the process of acculturation.¹¹ Additional sources of stress are the uncertainty of one's immigration status, and the possibility—or reality—of detention.¹²

The human cost associated with toxic stress in childhood, as well as the cost to society, is staggering.¹³ However, if we respond appropriately to the needs of our newest child arrivals, there are good reasons to believe that they will greatly enrich our society and culture.¹⁴ If we do not, these children will grow up with a great many burdens, the cost of which we are all likely to share.

In what follows, we provide an overview of the several groups of children under consideration here: refugees/asylees, apprehended unaccompanied and accompanied children,^c and children who are unauthorized immigrants or who have one or more parents who are. Next, we describe the circumstances they face—sometimes differing by group, but often shared across groups—in the areas of family stability, health, schooling, and economic security. We include a summary of the eligibility of these children for various public services and benefits programs. Finally, we list selected resources for the families of these children, and the community providers who serve them.

MIGRANT CHILDREN, BY LEGAL DESIGNATION

Refugees and asylees

The *refugee* designation is perhaps the most familiar to most Americans, though refugees are a minority of international migrant children arriving in the United States. Historically, the United States has been at the forefront in welcoming victims of war, poverty, and oppression of various kinds. Our country has been a place where immigrants, even those who have experienced great trauma, can create the opportunities that help them heal, and demonstrate their resilience to adversity.¹⁵

However, both with regard to total numbers admitted, and the countries from which they originate, history shows that geo-political priorities and national security considerations, rather than humanitarian concerns alone, have guided national policy on this issue.

Thus, following the 1959 Cuban revolution, our government granted preferential treatment (continuing to this day) to hundreds of thousands of Cubans fleeing their country.¹⁶ Following the Vietnam War (1961 to 1975), hundreds of thousands of refugees from the former South Vietnam were accorded special immigration status.¹⁷ In 1980, annual admissions of refugees were more than 200,000—a modern-era peak.¹⁸

More-recent conflicts in the former Soviet Union, Yugoslavia, the Middle East, and northern Africa have prompted similar U.S. responses. The current conflict in Syria has produced the world's largest number of internally displaced persons and refugees—including more than 2 million children. The United States has committed to accepting 10,000 Syrian refugees (adults and children) during federal fiscal year 2016.¹⁹ As of early August 2016, about 8,000 had been admitted, according to State Department officials.²⁰

Although it is often used loosely, *refugee* has a specific, international definition. The 1951 United Nations Refugee Convention spells out that a refugee is someone who, "owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality, and is unable to, or owing to such fear, is unwilling to avail himself of the protection of that country."²¹

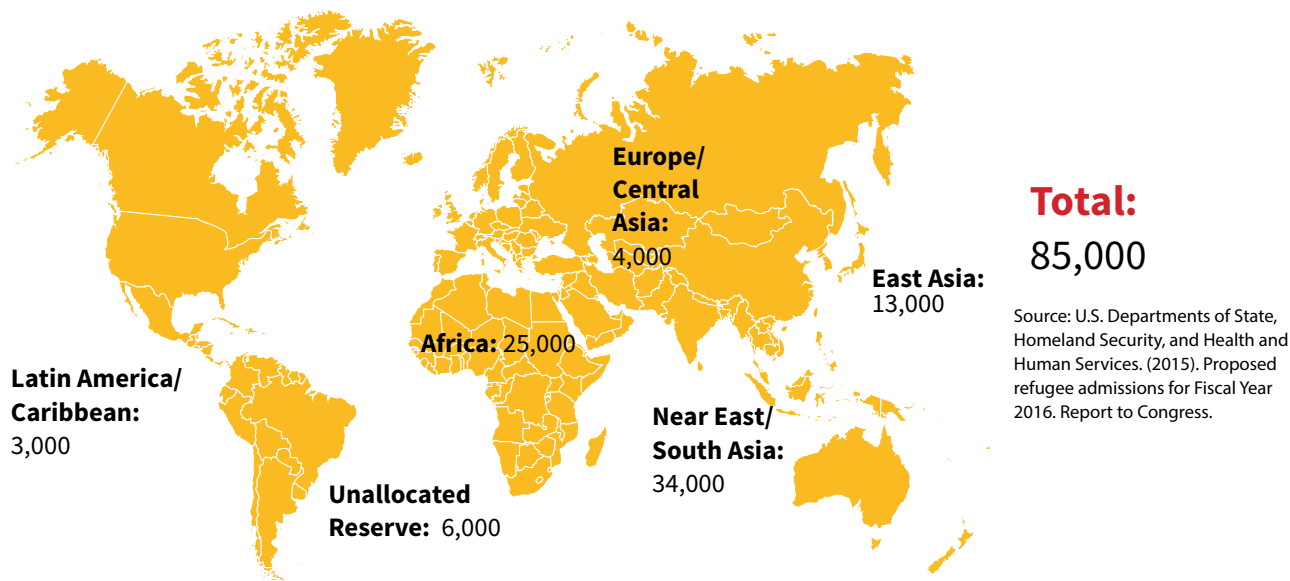
^c The U.S. Border Patrol counts these as *family unit subjects*.



However, according to U.S. statute, the principal applicant for refugee status must also “be of special humanitarian concern to the United States,” and must not be “inadmissible to the United States due to criminal, security, or other grounds.” To obtain *derivative* refugee status, a spouse or child of an admitted refugee need not meet all of these requirements, except they must meet the admissibility criteria.²²

The president, in consultation with Congress, establishes an annual limit to refugees who will be admitted to our country. For the federal fiscal year that began in October 2015, the proposed ceiling is 85,000, up from 70,000 in fiscal year (FY)^d 2015. These figures are further broken down by region (see Table 1); numbers include adults and children.²³ On the basis of recent trends, we can expect that a bit more than one third of these—32,500—will be children.²⁴

Figure 2. Proposed ceilings for refugee admissions, by region: FY 2016

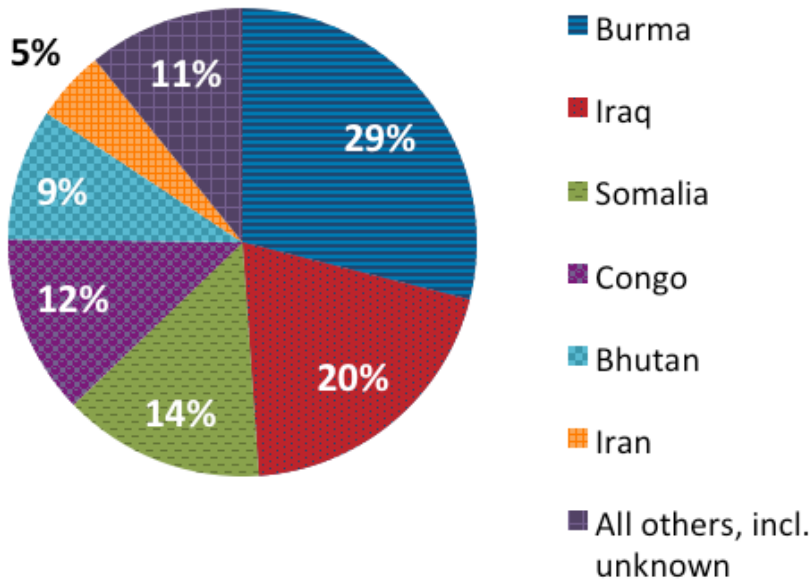


In FY 2014 (the latest year for which these data are available), there were 24,647 refugee arrivals who were younger than 18 (35 percent of the total).²⁵ As of that year, 10 percent of refugee arrivals were younger than 5, and 26 percent were between 5 and 17.²⁶ The states where most child refugees (ages 10 and younger, in this case) have settled in recent years are California, Florida, New York, and Texas—together accounting for nearly half the total.²⁷

After entering the United States, some children (predominantly those who were originally designated as unaccompanied children—see below) are referred, if they are eligible, to the Unaccompanied Refugee Minors (URM) program. These are children eligible for resettlement in the country, but who have no parent or other relative who can reliably provide for their long-term care. Once they arrive in this country, they receive refugee foster care services and benefits. As of 2015, 1,300 children were in care via this program.²⁸

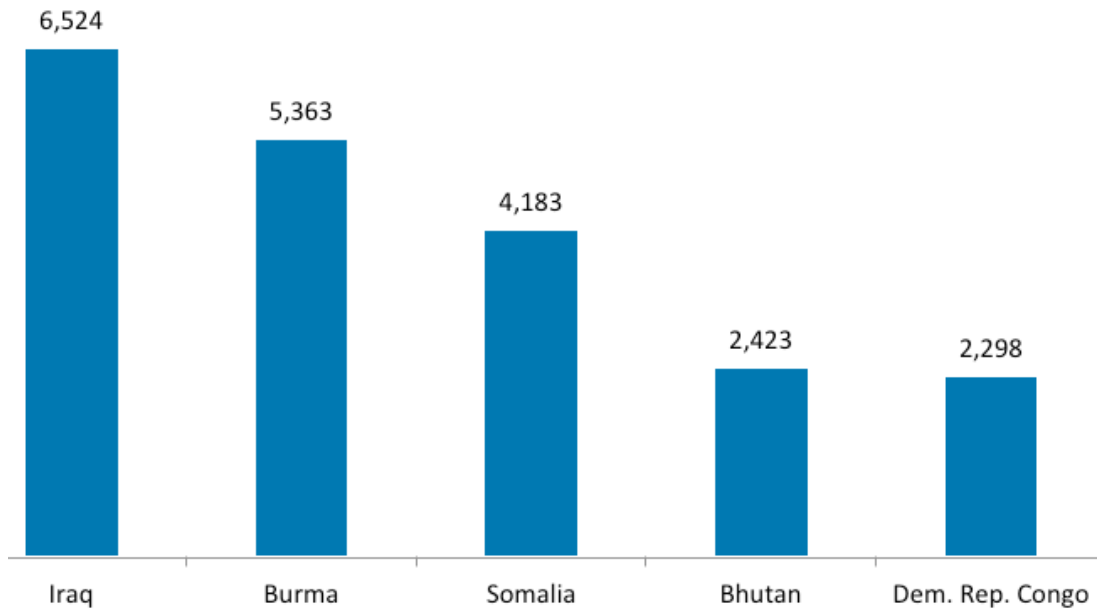
^dThe federal fiscal year runs from October 1st to September 30th.

Figure 3. Refugees (all ages) arriving in the United States, by nationality: 2015



Source: Zong, J. & Batalova. (2015). Refugees and Asylees in the United States. Migration Policy Institute. Total 2015 arrivals: 69,933

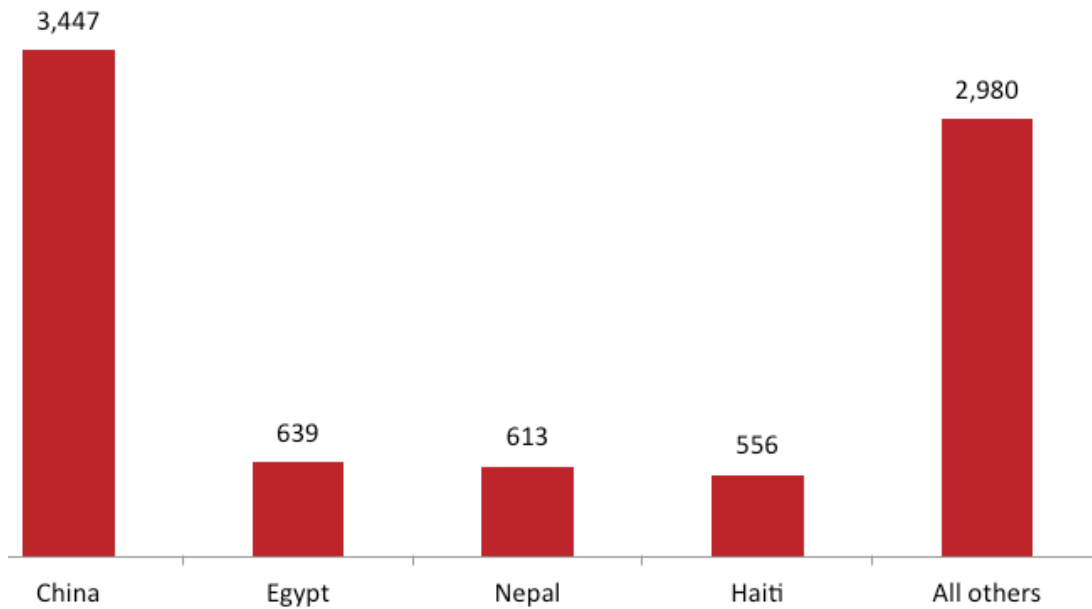
Figure 4. Origin countries with the greatest number of child refugees (<18) arriving in the United States: FY 2014



Source: U.S. Departments of State, Homeland Security, and Health and Human Services. (2015). Proposed refugee admissions for Fiscal Year 2016. Report to Congress.

Asylum may be granted to an undocumented person (and his or her immediate relatives, provided they are admissible) *after* he or she has arrived in the United States, regardless of immigration status, provided he or she meets the criteria for refugee status. Asylum may be granted *affirmatively*—by a U.S. Citizen and Immigration Services asylum officer who determines, through interview, that the applicant meets the definition of refugee, or *defensively*—by an immigration judge presiding over removal proceedings. While their status is being determined, asylum-seekers may be detained. *Follow-to-join* family members are granted derivative asylum following on the asylum applicant’s successful petition.²⁹

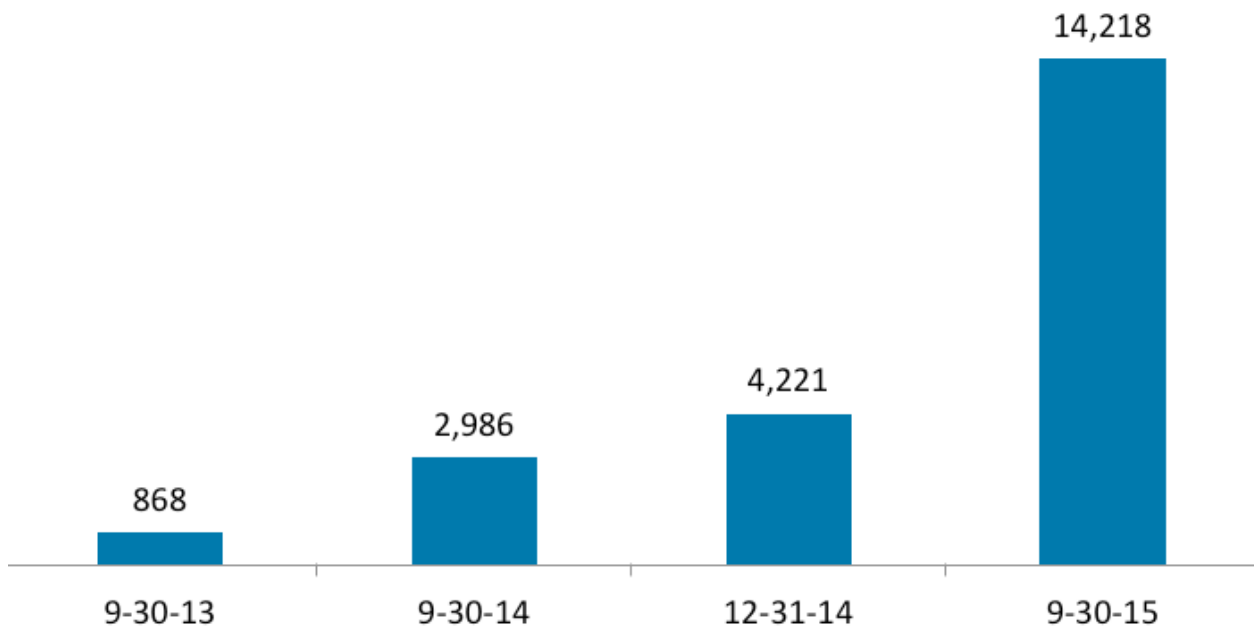
Figure 5. Origin countries with the greatest number of follow-to-join asylees: FY 2012-2014



Source: Mossaad, N. (2016). Refugees and asylees: 2014. U.S. Department of Homeland Security, Office of Immigration Statistics.

There are large processing backlogs when it comes to asylum claims. More than 80,000 asylum cases were pending as of March 2015 (up from 73,000 in December 2014);³⁰ in 2014, 23,533 people were granted asylum status.³¹ In FY 2015, 5,075 children were granted affirmative asylum status.³² Applications pending for asylum by unaccompanied minors who had sought interim assistance under the provisions of the Trafficking Victims Protection Reauthorization Act totaled 14,218 the end of FY 2015; there was a more than four-fold increase in these applications over that year.³³

Figure 6. Asylum applications pending for unaccompanied minors who had sought interim assistance under the provisions of the Trafficking Victims Protection Reauthorization Act: 2013, 2014, and 2015

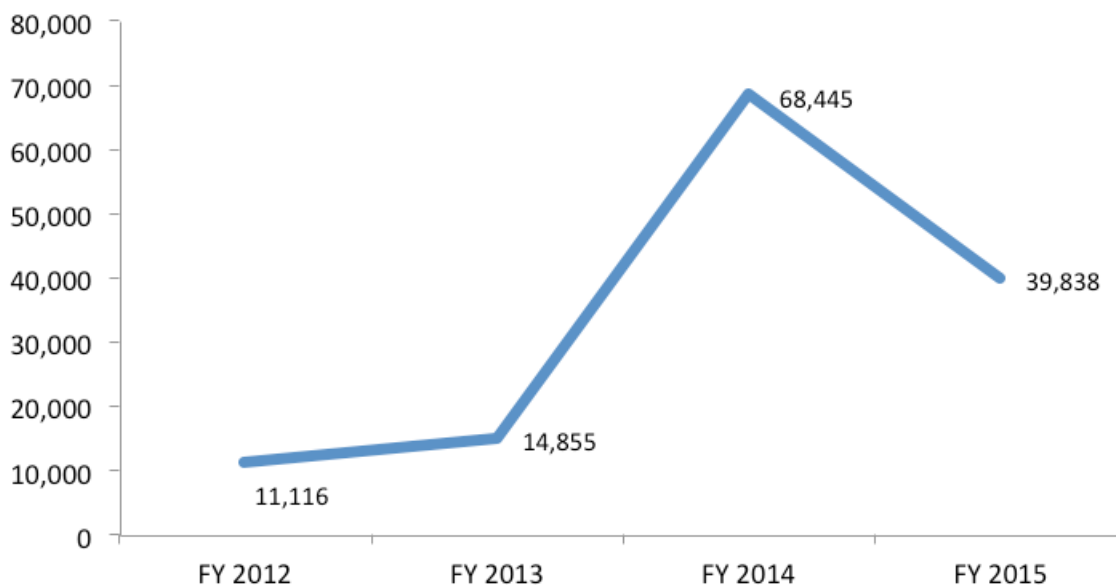


Sources: U.S. Department of Homeland Security, Citizenship and Immigration Services, Ombudsman. (2015) Annual report: 2015; U.S. Department of Homeland Security, Citizenship and Immigration Services, Ombudsman. (2016) Annual report: 2016

Undocumented children apprehended by Border Patrol

Beginning in 2013, there has been a surge in the number of children, either accompanied by a parent or unaccompanied, who are apprehended in the United States after fleeing the countries in the Northern Triangle of Central America: El Salvador, Guatemala, and Honduras. Many children in these countries are under siege by organized crime and gang violence, including homicide and rape. According to many observers, they are de-facto, if not legally acknowledged, refugees.³⁴ Between 2008 and 2014, applications to the United States more than tripled, and increased by a factor of more than 10 to neighboring countries (Belize, Costa Rica, Mexico, Nicaragua, and Panama).³⁵

Figure 7. Family unit subjects apprehended at the Southwest border



Source: U.S. Customs and Border Protection, United States Border Patrol Southwest Family Unit Subject and Unaccompanied Alien Children Apprehensions Fiscal Year 2016.

During the first 6 months of FY 2016, more than 32,000 people in *family units* (children accompanied by a parent or guardian) crossed the U.S.-Mexico border.³⁶ Typically, family units consist of a mother and one or more minor children. Unaccompanied children (see below) represent a phenomenon of nearly equal scale.

Both accompanied and unaccompanied child migrants enter a system where they must endure a convoluted gauntlet of experiences that may re-traumatize them and neglect fundamental tenets of due process. Numerous reports on this group of children, who become the responsibility of one or more government agencies, document disturbing violations of basic principles of our child welfare system^e as well as our commitment to human rights.³⁷

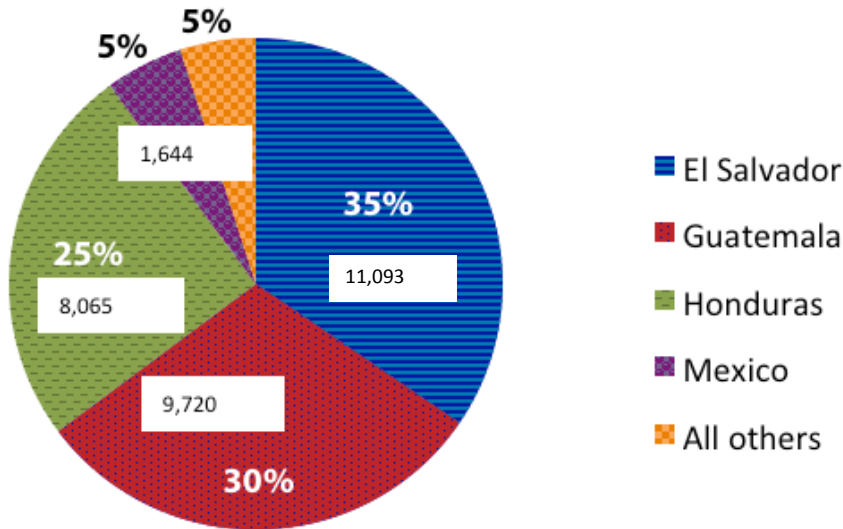


When apprehended at the border, these families may be subject to immigration proceedings, where they can make their case before a judge. They can also be subject to expedited removal, which dispenses with any hearing or review. At any point in the process, any family member can express a credible fear of persecution or torture if they were to return to their home country. By law, such a statement triggers an interview with an asylum officer, who assesses the validity of the claim. If the claim is deemed credible, the individual will be referred to an immigration judge to present a case for asylum. However, critics of the system claim that much of this process is seriously flawed by improper or inconsistent adherence to prescribed procedures, and by inadequate legal representation for these families.³⁸

^e Children without legal immigrant status are not eligible for government-funded child welfare services.

Children and their families are not entitled to government-appointed legal counsel, and the majority do not have such representation.³⁹ This creates the potential for injustice, and in fact, studies have shown that migrants who have an attorney are many times more likely to be granted court relief than those who lack one.⁴⁰

Figure 8. Apprehensions of individuals in family units, by country of origin: FY 2016 (first 6 months)



Source: U.S. Customs and Border Protection, United States Border Patrol Southwest Family Unit Subject and Unaccompanied Alien Children Apprehensions Fiscal Year 2016.

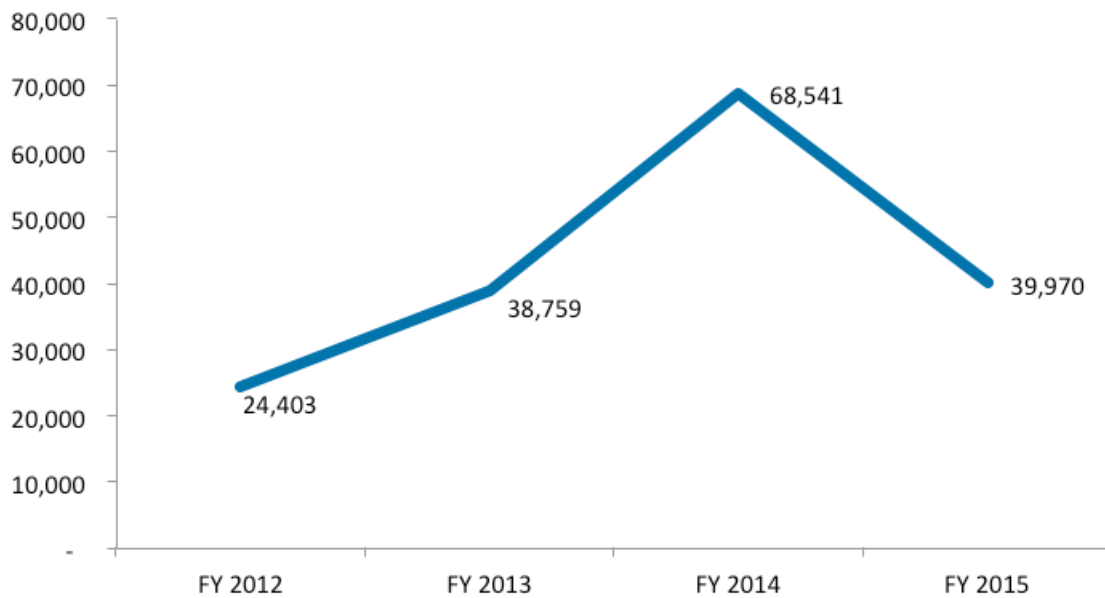
Recently, the U.S. government's response to the influx of entrants from Central America has again included family detention, a practice that had been discontinued in 2009 because of concerns about its impact on family welfare.⁴¹ As of 2015, thousands of (primarily) mothers and children were being held in facilities located in New Mexico, Texas, and Pennsylvania.^f A majority of these children are younger than 6. This raises serious concerns, because conditions in these facilities fall far short of what young children need to thrive, and may contribute to long-term impairments in their physical, mental, academic, and social development.⁴²

Through the first 6 months of FY 2016, 27,754 *unaccompanied* children were apprehended at the southwest border.⁴³ Border Patrol officials predict that in FY 2017, 75,000 will cross the U.S.-Mexico border by themselves.⁴⁴ The most common reason these children have for fleeing their home countries is the fear of violence, particularly by gangs; the second most common reason is to be reunited with parents or other family members.⁴⁵ Thus, there are "push" and "pull" factors related to their migration, both motivated by the need to escape or resolve trauma. Most (68 percent in FY 2015) unaccompanied children are older teens (15 to 17), but one in six (17 percent) is under 13.⁴⁶

The United Nations High Commissioner for Refugees interviewed more than 400 children, ages 12 to 17, from Mexico and the Northern Triangle who arrived during or after October 2011. The researchers found that 58 percent had been forced to migrate because of harms they had suffered or threats they faced. Forty-eight percent had been affected personally by organized violence; 22 percent were victims of domestic abuse; and 11 percent reported experiencing or fearing violence both at home and in society.⁴⁷

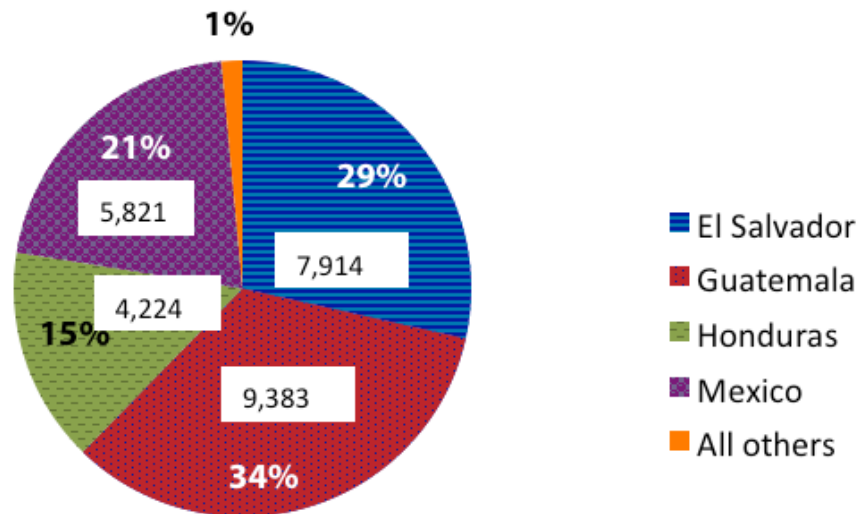
^f The Pennsylvania facility had its license revoked in January 2016, but continues to operate. A federal judge has ruled that the Texas facilities violate the terms of a 1998 court settlement that ruled that detained minors must be housed in facilities licensed to take care of children. See <http://grassrootsleadership.org/sites/default/files/uploads/177%207-24-15%20Flores%20Judge%20Issues%20Rulings%5B2%5D.pdf>

Figure 9. Unaccompanied children apprehended at the U.S. border



Source: U.S. Customs and Border Protection, United States Border Patrol Southwest Family Unit Subject and Unaccompanied Alien Children Apprehensions Fiscal Year 2016.

Figure 10. Unaccompanied children, by country of origin: FY 2016 (first 6 months)



Source: U.S. Customs and Border Protection, United States Border Patrol Southwest Family Unit Subject and Unaccompanied Alien Children Apprehensions Fiscal Year 2016

Unaccompanied alien children are defined as minors (<18 years old) who have no lawful U.S. immigration status, and either no parent or legal guardian in the United States, or no parent or legal guardian in the country who is able to provide physical custody and care. When apprehended by the Border Patrol, they are taken to short-term holding facilities, but within 72 hours are supposed to be released to the temporary custody and care of the U.S. Office of Refugee Resettlement (ORR).⁹

⁹ Children from Mexico, unless determined to be victims of trafficking or having a well-founded fear of persecution, are subject to immediate return to their home country.

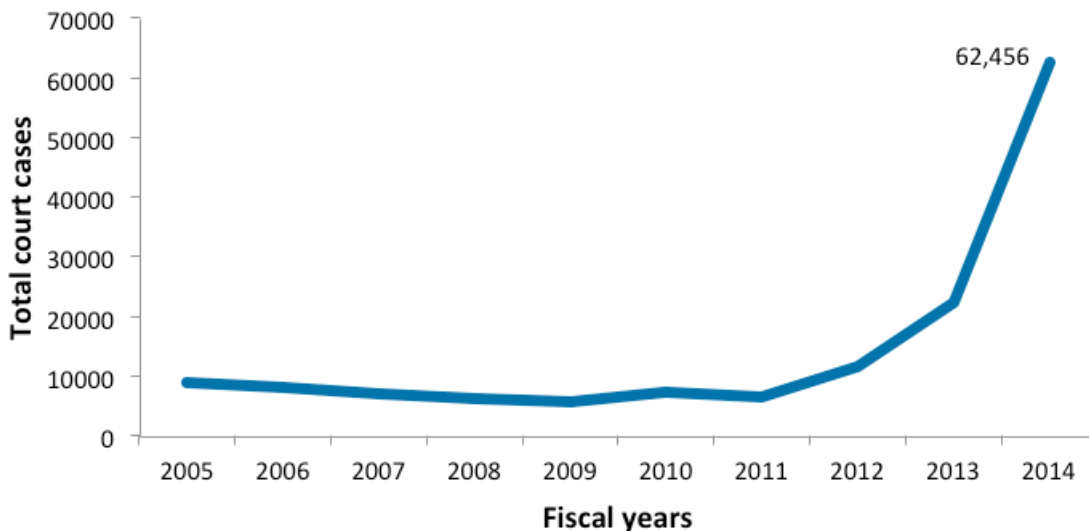
In FY 2014, over 57,496 unaccompanied children were referred to ORR.⁴⁸ Children are housed in ORR-funded shelters (“care providers”),⁴⁹ and then are released to approved sponsors, who are usually family members;⁵⁰ about 10 percent of children are placed in foster care, but some may linger in ORR facilities for many months, if suitable sponsors cannot be found.⁵¹

In FY 2014, there were 53,515 unaccompanied children released to sponsors.⁵² Few sponsors are adequately screened (which generally requires a home study) or receive ongoing monitoring, according to advocates.⁵³ Also, the Border Patrol is supposed to screen children for possible status as trafficking victims; those who screen positive may be referred to the URM program, where they are eligible for child welfare services, and their sponsors must undergo a home study to assess their suitability for a child’s placement. However, there is no third-party review of these decisions regarding placement and eventual release from placement, and neither parents—who may be involved, if living in the country at that point—nor children are likely to have any voice in the placement process.⁵⁴

The cases of these children must be referred within 21 days to an immigration court, which may order removal (deportation), or immigration relief (a legal term for suspended action). However, there is a massive backlog in the system, and the average time from filing to hearing date is nearly 700 days—nearly 3 years.⁵⁵ While ORR is authorized to appoint child advocates to represent a child’s best interests, legal counsel is not guaranteed (unlike in juvenile court), and most children arrive in immigration court without any representation. Moreover, even those children granted relief generally remain unauthorized.⁵⁶

There are inadequate numbers of judges to hear these cases. Frequently, cases are heard remotely, through video connection. Translators are also in short supply. As a result, hearings can fail to provide even a minimum of developmental and cultural sensitivity, or even the ability for the judge and child to clearly understand one another.⁵⁷

Figure 11. Unaccompanied children: Cases brought to immigration court



Source: Pierce, S. (2015). Unaccompanied child migrants in U.S. communities, immigration court, and schools. Migration Policy Institute.

The recent influx of unaccompanied children has overwhelmed an already over-stretched system. Responses from federal government agencies have illustrated how inadequately prepared they are to respond appropriately to the numbers of children in this category. For example, home studies of sponsors are conducted in fewer than 5 percent of cases; follow-up services are also scarce.⁵⁸ Results of this inadequacy have sometimes included subjecting already-traumatized children to further maltreatment and exploitation, including serious abuses by sponsors, as reported recently by the press⁵⁹ and the Government Accountability Office.⁶⁰

The states where the most unaccompanied children were released to sponsors in FY 2015 were California (3,576), Texas (3,209), Florida (2,885), New York (2,615), Maryland (1,784), Virginia (1,676), and New Jersey (1,440)—together accounting for about 1 in 3 of all unaccompanied children who arrived during that time period.⁶¹

Children of unauthorized immigrants

While they are not the primary focus of this report, the 4.1 million children who live in *mixed-status families*—in which the children are U.S.-born citizens, but one or both parents are unauthorized—face some of the same threats to well-being as those not born here.^{1,2}

In addition, there are roughly 1 million immigrant children who are unauthorized themselves, who live with an unauthorized parent.³

Many children of unauthorized immigrants live in fear of having their parents removed from them: in 2013, more than 70,000 parents of U.S. citizen children were deported;⁴ in total, nearly 1 million children in recent years have already experienced a parent's (overwhelmingly, fathers) deportation.⁵

Three quarters of children with unauthorized parents live in families with incomes below 185 percent of the federal poverty level.⁶ When fathers are deported, it is estimated that families may lose up to 75 percent of their income.⁷

A number of the children of deported parents will end up in foster care.⁸ Some of these children experience the trauma of witnessing their parent's arrest; others are aware only that their parent has disappeared; the detention center holding their parent may or not be accessible.⁹

Parents with unauthorized status may be especially likely to experience depression and social isolation, both of which are linked to children's diminished academic achievement and social-emotional development.¹⁰

Moreover, when unauthorized parents lack access to health care and other services, are subject to exploitive employment conditions, and are dealing with the stresses brought on by poverty, their children are affected as well.¹¹ For example, while U.S.-citizen children are eligible for public health insurance, their unauthorized parents are not, which may inhibit them from seeking care, either for their children or for themselves. Parents with untreated illness are unlikely to be able to provide an optimal caregiving environment for their children.

These children may miss out on important early learning experiences that can contribute to later school success. One study found that unauthorized parents were more than 40 percent less likely to enroll their children in Head Start than were authorized parents with similar backgrounds.¹² Children of unauthorized parents also perform less well in reading, writing, and math in elementary school.¹³

Children who have lost parental ties have higher measured anxiety¹⁴ and are more likely to experience food insecurity.¹⁵ For those who experience separation from parents, behavioral problems can increase and school performance may suffer. There are multiple barriers for these families (including poor English proficiency, lack of knowledge, and fear of apprehension) to enrolling in social programs,¹⁶ including SNAP (food stamps), Head Start, preschool, or state-funded pre-K.^{17,18}



The states where most children with unauthorized parents reside are California, Texas, New York, Illinois, and Florida.¹⁹

¹ Yoshikawa, H., Kholoptseva, J., & Suarez-Orozco, C. (2013). The role of public policies and community-based organizations in the developmental consequences of parent undocumented status. *Social Policy Report*, 27(3), 3-17.

² Zong, J. & Batalova, J. (2016). Frequently requested statistics on immigrants and immigration in the United States. Migration Policy Institute. <http://www.migrationpolicy.org/article/frequently-requested-statistics-immigrants-and-immigration-united-states>

³ Capps, R., Fix, M., & Zong, J. (2016). Op. cit.

⁴ Foley, E. Deportation separated thousands of U.S.-born children from parents in 2013. *Huffington Post*. June 26, 2014.

⁵ Ibid. The Migration Policy Institute estimates that about 13 percent of unauthorized immigrants resident in the U.S. have criminal histories that would make them a priority for deportation. Executive actions in 2014, by more narrowly defining priorities for deportation, may reduce the number of parents who are deported. See Rosenblum, M. R. (2015). Understanding the potential impact of executive action on immigration enforcement. Migration Policy Institute. <http://www.migrationpolicy.org/research/understanding-potential-impact-executive-action-immigration-enforcement>

⁶ Yoshikawa & Kholoptseva, op. cit.; Capps, et al. (2016). Op. cit.

⁷ Capps, R., Koball, H., Bachmeier, J. D., Soto, A. G. R., Zong, J., & Gelatt, J. (2016). Deferred action for unauthorized immigrant parents: Analysis of DAPA's potential effects on Families and Children. Migration Policy Institute. <http://www.migrationpolicy.org/research/deferred-action-unauthorized-immigrant-parents-analysis-dapas-potential-effects-families>

⁸ Wessler, S. F. (2011). Shattered families: The perilous intersection of immigration enforcement and the child welfare system. Applied Research Center.

⁹ Koball, H., Capps, R., Perreira, K., Campetella, A., Hooker, S., Pedroza, J. M., Monson, W., & Huerta, S. (2015). Health and social service needs of U.S.-citizen children with detained or deported immigrant parents. Urban Institute and Migration Policy Institute. <http://www.migrationpolicy.org/research/health-and-social-service-needs-us-citizen-children-detained-or-deported-immigrant-parents>

¹⁰ Yoshikawa, H. & Kholoptseva, J. (2013). Unauthorized immigrant parents and their children's development: A summary of the evidence. Migration Policy Institute. <http://www.migrationpolicy.org/research/unauthorized-immigrant-parents-and-their-childrens-development>; Fazel, M., et al., op. cit.

¹¹ Ibid.

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THREATS TO MIGRANT CHILDREN'S WELL-BEING

The experience of international child migrants is likely to have included a number of traumatic events, before, during, and after their journey to the United States. Foremost among these are witnessing and experiencing violence, at the hands of gangs or family members, or in war zones; exploitation and abuse (physical, emotional, and sexual) by human traffickers; separation from family members; and encounters with the U.S. law enforcement and justice systems, including detention.

Below, we describe the potential effects of these experiences.

Family instability

Children who have experienced multiple adversities are particularly in need of the safety and nurture of parental care, which can moderate the negative effects of trauma.⁶² However, migrant children face the risk of being separated from one or both parents at any stage of their journey, as well as after their arrival. If they are re-united, children may face additional stresses related to breaking attachments to their interim caregiver, as well as in re-establishing family relationships that may have become tenuous over time. Many reunified families, particularly those including adolescents, experience conflict and tension as they adjust to new circumstances.⁶³

Studies of immigrants, both authorized and unauthorized, find that large numbers of children (ranging, by sample, from 21 to nearly 85 percent) have undergone separations from one or more parents—often for 2 or more years.⁶⁴ One analysis found that, on average, children living apart from their parents because of immigration had spent 27 percent of their life apart from one or both parents.⁶⁵

Children separated from one or both parents may experience feelings of abandonment, along with despair and detachment. Maintaining emotional intimacy across the separation can be very challenging. Few children have a clear understanding of the reasons for the parent's absence. In general, the longer the separation, the greater the difficulties children experience, although, according to one study, many return to their baseline level of functioning within 5 years.⁶⁶

Aside from the emotional effects, the loss of a primary breadwinner can wreak havoc on families, particularly those whose financial security is already precarious. Newly single parents must often struggle to both care for children and find paid work. Legal fees for appealing deportation or detention of the absent partner are often out of reach, or invite offers of help from unscrupulous agents. Arrests of single parents can lead to family breakup or the placement of children in unstable arrangements.⁶⁷



Health

There is evidence of remarkable resilience among immigrants, particularly if we consider long-term outcomes.⁶⁸ Some researchers have even proposed a “healthy migrant” hypothesis. Essentially, this is the idea that individuals who have the initiative to leave behind their original circumstances, and who successfully meet the challenges of relocation, are likely to be among the healthiest members of a society. They may also have more education than their non-migrating peers, and more material resources to finance their relocation. However, while there are certainly cases that fit this profile, in general the evidence in support of the healthy migrant hypothesis is weak.⁶⁹

Available data show that unaccompanied refugee children have an elevated risk for mental illness and difficulties with concentration and regulation of emotions, and often take on, at an early age, what are commonly seen as adult roles.⁷⁰ Unaccompanied children are particularly at risk for psychological disorders. Post-traumatic stress disorder is common.⁷¹ When it comes to mental health, in particular, the following factors have been identified as frequently protective for this group of children: living with both parents, good parental mental health, perceived safety and sense of connection at school, social support (especially emotional and instrumental—or help getting things done), and caring relationships in child care settings.⁷²

Education

For displaced children, a child care center or school can be both a normalizing safe haven and a source of stress.^{73,74} Many children fleeing violence and other turmoil in their home countries have significant gaps in their education, as a result of being unable to attend school regularly. Some may have had no formal schooling.⁷⁵ Language, forms of instruction, and ability to relate to teachers may differ greatly from their prior experience.⁷⁶

Although all migrant children, regardless of their legal status as immigrants, have a constitutional right to participate in public education, a recent investigation found that, in at least 35 districts across 14 states, unaccompanied children are discouraged from enrolling in schools, or pressured to attend alternative programs where they receive an inferior education.⁷⁷ On the other hand, many school districts go to great lengths to accommodate the special needs of these newcomers.⁷⁸

A recent review of refugee children's academic outcomes identified, as risk factors, past experience of trauma, racism, and bullying, low expectations from teachers and parents, and language difficulties. Conversely, promotive factors included high personal expectations, parental support for and involvement in education, parental education and language proficiency, family cohesion, parents' health, and positive peer relationships.⁷⁹

Economic security

Children depend on parents and other adults in their household for their economic security. Having inadequate family income is associated with numerous health, academic, and social outcomes for children. The financial circumstances of recently-migrated children vary according to their families' legal status, the communities where they live, and other factors, but are likely to be perilous.

How immigrant children and their families fare, at least in the short-term, is greatly influenced by the receptions they receive in their new communities.⁸⁰ There is some evidence that their longer-term economic contributions (as measured by hours worked, earnings, and successful business ventures) may surpass those of their native-born counterparts. Evidence from studies in Jordan and Denmark, as well as Cleveland, Ohio, finds that refugees are particularly likely to be entrepreneurially successful, compared with both native residents, and with economic immigrants.⁸¹



PUBLIC ASSISTANCE AVAILABLE TO INTERNATIONAL CHILD MIGRANTS

In the first 30 to 90 days after arrival in the United States, cash, medical assistance, employment and training programs, and other services are provided to newly arrived refugee families. Adults are immediately eligible for lawful employment. After one year, they must apply for lawful permanent resident (LPR) status.⁸² If LPR status is approved, adults can own property, attend public schools, join some branches of the U.S. armed forces, and apply for U.S. citizenship after 5 more years.⁸³ Refugees face no bar to eligibility for federal, state, or local health and social services benefits.

Asylum, too, confers a number of benefits, including permission to work and to apply for a Social Security card and LPR status, and immigration benefits for spouses and any unmarried children younger than 21. Derivative asylum status may be obtained for spouses and children of asylees.⁸⁴ Asylees are eligible for the same health and social services as refugees, with the exception of initial assistance for resettlement.

In contrast, unaccompanied children, and those arriving as part of undocumented family units, may qualify for few benefit programs. Although eligible for public education, subsidized school meals, the Head Start program, and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) benefits, unaccompanied and other undocumented children are not eligible for the other major federal benefit programs that are based on financial need, including the Supplemental Nutrition Assistance Program (SNAP), the Temporary Assistance for Needy Families program (TANF), Medicaid, the Children's Health Insurance Program (CHIP), child care subsidy (Child Care Development Fund), and early intervention services for children with developmental disabilities.⁸⁵ Further, they are ineligible for health insurance through the Affordable Care Act.

Child care, in particular, is a system that refugee families and other recent arrivals with young children find challenging to navigate.⁸⁶ This has implications both for the success of parents securing employment, and for their children's ability to gain the English-language and other skills important for their successful integration with their school and community.



Table 1. Eligibility of children for various government-funded programs, by migrant status

	Refugees/ asylees	Accompanied/ Unaccompanied alien children	Unauthorized child immigrants (local authorities may provide some services)	U.S.-born children with one or more unauthorized parents
K-12 public education	✓	✓	✓	✓
Free/ reduced-price school meals	✓	✓	✓	✓
WIC	✓	✓	✓	✓
Public health insurance	✓	✗	✗	✓
SNAP	✓	✗	✗	✓
TANF	✓	✗	✗	✓
Child Care Subsidy	✓	✗	*state-determined	✓
Head Start	✓	✓	✓	✓
Foster Care	✓	✓	✗	✓
SSI	✓	✗	✗	✓
Subject to summary detention, removal or separation from parent	✗	✓	✓	✓

✓=eligible ✗=not eligible

Note: Although U.S. citizen children are eligible for benefits that their unauthorized parents are not, they receive lower benefit amounts when benefits are pro-rated by the share of eligible family members (SNAP, TANF).

RECOMMENDATIONS AND RESOURCES

Refugees and other migrant children in the United States are a diverse group, and this is reflected in their needs. Here, we offer some recommendations that have broad applicability to this population:

- All children, regardless of their formal immigration status, should be accorded basic human rights of physical safety and due process, including legal representation during asylum processing and removal hearings.
- Avoid re-traumatizing children. Our government has a special obligation to protect from harm those children for whom it assumes custody, however temporary. In one effort to meet this obligation, in 2015, Tennessee and Texas both enacted legislation that provides for additional training for law enforcement personnel in working with trafficking victims. Similar training should be required for Border Patrol officers.
- The parent-child relationship is fundamental to children's well-being; parents and children should not be separated through legal action, except in the most extreme circumstances. By the same token, two-generation interventions (those that simultaneously address the needs of both parents and their children) are often likely to be most effective in improving family well-being.⁸⁷
- Communities should receive resources to help them adequately prepare for these newcomer children and their families. More than 55 communities nationwide have joined the Welcoming Cities and Counties initiative, which has the aim of creating more inclusive and immigrant-friendly communities, and maximizing opportunities for economic growth.⁸⁸
- All migrant children and their families would benefit from a social services system that is more comprehensive, integrated, and culturally responsive. Evidence shows such improvements can make a positive difference in the positive integration of immigrant families into our society.⁸⁹ Eligibility for the services made available to refugee children and their families should be extended to unaccompanied children and family unit members applying for asylum.
- Policies regarding child migrants should reflect an appreciation for the urgent developmental requirements of children, particularly their need for safe, stable, nurturing relationships, but also for health, education, and economic security. To date, access to basic health services has been the focus of most state-level action. In 17 states and the District of Columbia, prenatal care is available to pregnant women, regardless of their immigration status, though they may be required to meet low-income guidelines. In Illinois, Massachusetts, and New York, as well as two Maryland counties, all children, regardless of their immigration status, can participate in public health insurance programs, if they are otherwise eligible. California recently ruled that all children, regardless of immigration status or income, are eligible for health care coverage.⁹⁰
- National data collection systems should assess the long-term outcomes for child migrants, and for the communities of which they become a part, while prohibiting inquiries into migrants' legal status, in order to encourage accurate and complete reporting.



FOR FURTHER INFORMATION

A number of organizations provide information for researchers, policymakers, advocates, families, and communities who strive to understand and meet the needs of child migrants:

- The Ad Council's Embrace Refugees Campaign: www.embracerefugees.org
- Bridging Refugee Youth & Children's Services: www.brycs.org
- Catholic Charities USA: <https://catholiccharitiesusa.org>
- International Rescue Committee: www.rescue.org/
- Lutheran Immigration & Refugee Service: www.lirs.org
- Migration Policy Institute: www.migrationpolicy.org
- National Immigration Law Center: www.nilc.org
- Office of Refugee Resettlement: www.acf.hhs.gov/programs/orr/
- TRAC Immigration: <http://trac.syr.edu/immigration/>
- U.S. Customs and Border Protection: www.cbp.gov
- U.S. Department of Homeland Security, Office of Immigration Statistics: www.dhs.gov/yearbook-immigration-statistics
- United Nations High Commissioner for Refugees: www.unhcr.org
- Welcoming America: www.welcomingamerica.org/

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ENDNOTES

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