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Psychological Realities and Challenges of Immigrant and Migrant Children

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Some Introductory Thoughts

- When people flee their country to escape violence, the violence impacts youth disproportionately
 - The majority of refugees are fleeing violence
- When people fail to get into the country they want to go to, nearly 90% state that they will try again
- Thus, people are willing to go through difficulty again to achieve their goal

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A Primer on Attachment

- Attachment is important to the healthy development of young children. It is important to the well-being of all human beings.
- It is a construct for explaining the enduring emotional bond between people. In the context of development, it is the process by which children survive, learn self-regulatory functions, identity and internalized coping skills. It facilitates the development of autonomy and independence.

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Theory and History

- Attachment theory first described by John Bowlby in the 1950's.
- His two volumes, "Attachment" and "Loss" are mandatory reading for students of human behavior.
- He noticed the children were more smitten by their mothers (and caregivers) than by milk or the breast.
 - In other words, he noticed that children are smitten by PEOPLE not THINGS, even early on.

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Basic Aspects of Attachment Theory

- Attachment Provides a "Secure Base"
- From this base, the child can find
 - comfort in distress
 - support in exploration
- Bowlby saw the first two to three years of life as a critical period for attachment.
- Bowlby especially warned against "maternal deprivation:"
 - defined as any significant separation from the mother
 - Seen as being as dangerous to a child as a serious illness or injury

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Basic Aspects of Attachment Theory

- It is a developmental concept and model that informs the "best interest of the child"
- It is a focus of understanding of developmentally appropriate parenting plans
- Forensic psychology seeks objective, transparent "data" so there has been attention given to how to assess attachment

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Some Provisos:
 Immigration/Migration is not a homogeneous thing.
 Understanding the experience of the child, the adult, the family requires looking at many variables

- Age of each family member
- Family History
- Prevalence in home location
- Culture
- Motivation for migration
- Political and safety climates
- Welcome or not?
- Socioeconomic status
- Presence of support system in destination
- Food insecurity

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WHAT IS TRAUMA?

Trauma is often the result of an overwhelming amount of stress that exceeds one's ability to cope, or integrate the emotions involved with that experience.

Because trauma impacts brain function, trauma, especially chronic trauma, can change the brain and change brain development in children

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- Children are remarkably resilient
- Nevertheless, the trauma they typically experiences increases their risk for depression, anxiety and behavioral disorders by 2 to 3 times the base rate
- Unaccompanied refugee minors are at risk for mental disorders at nearly 3 times the base rate
- Unaccompanied minors are at 4 times the risk for PTSD than the base rate
- Nearly 1/3 of refugee minors have symptoms of PTSD

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- Nearly 75% of migrant children are separated from parents for a significant period of time
- Children separated from parents have higher levels of anxiety than migrant children who were not separated.
- Fortunately, the effects waned within five years of reunification.

• (Suárez-Orozco, C., Bang, H. J., & Kim, H. Y. (2011). I felt like my heart was staying behind: Psychological implications of family separations & reunifications for immigrant youth. *Journal of Adolescent Research*, 26(2), 222-257.)

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- For children who are separated from parents, there are two disruptions:
 - From the parent(s)
 - From the parental surrogates/caretakers
- After adjusting to parental absence, children often show ambivalence/reluctance to leave their caregivers and anxiety about re-attaining emotional intimacy with parents
- Parents report struggles asserting their authority and feel that their emotional and financial sacrifices are not appreciated

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- There is a known set of issues in families during the reunification phase
 - Resolution of ambivalence
 - Dealing with anger and hurt
 - Disappointment in who the parents/children turn out to be
 - Differences in the sense of place
 - Competition with siblings if one left behind and one not

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- Parent as stranger
- Seeing parent in tears and so emotional can be overwhelming for the child, especially when they are young
- Feeling disoriented
- When there are family members in the new location, there is a coming to terms with the new family members
- When there are now step-parents, there is a coming to term with them

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- With longer separations:
- Adolescents less likely to identify with their parents or be willing to conform to the rules
- Re-establishing parental authority may be complicated by parental guilt
- Parental alliance can decrease especially if parents are also separated from one another
- Family problems are more likely if children in the family are adolescents

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Impact of Delayed Cognitive Development

- Impact on behavior and personality
- Development marches on
- Education and cognitive development may lag
- Emergence of strong emotion as well as move towards more autonomy in adolescence
- More sophisticated cognitive skills help in managing the change
- Educational deficit = decalage in development

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As early as age 2, parental unauthorized status is associated with lower levels of standardized cognitive skills

Parental detention or removal is associated not only with increased economic hardship but also with negative psychological well-being of the child, disruptions in attachment and in education

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- Children separated from mothers 4 years or longer show higher rates of depression and anxiety in year 1 than those separated from fathers
- Children separated from fathers for 1 year or less show lower levels of depression and anxiety in year 1 than those with medium or long term separations
- Children separated from both parents show increased levels of depression and anxiety in year 1 than children separated from only one parent

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After five years, there are no significant effects between groups who were separated from mother, separated from father or separated from both.

Thus, children are resilient, especially if they have a strong support system after migration.

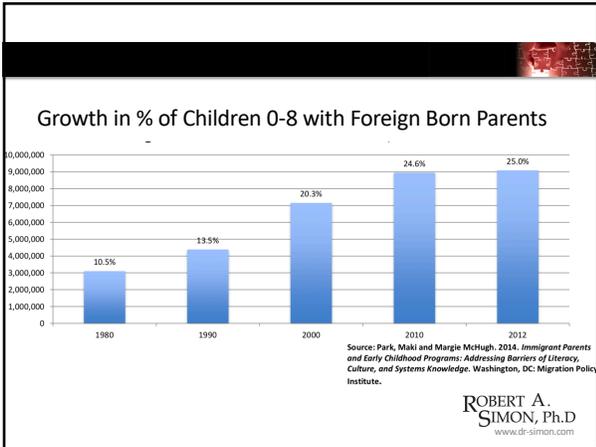
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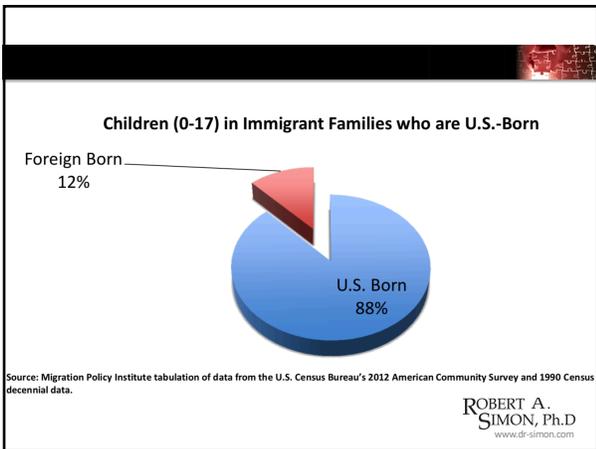
Nearly 9 out of 10 Children of Immigrants are U.S. Citizens

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Best Practices in Assessment

- Examine the extent of cultural and linguistic differences
- Use revised culturally sensitive versions of measures employed
- Recognize the dynamic nature of culture and incorporate cultural values into all areas of assessment
- Use comprehensive assessment procedures
- Incorporate culturally sensitive assessment interviews that incorporate acculturation, language, religion, cultural values
- Recognize conditions and circumstances under which assessment takes place
- Recognize possibility of culture-bound syndromes
- Make generous use of consultation with colleagues

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Principles Clinicians Should Apply in Providing Effective Mental Health Services to Immigrants

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Use An Ecological Framework

Appreciate that human experience is a reciprocal interaction between individuals and their environments. These vary as a function of individuals, his or her contexts and culture and time.

Behavior and symptoms do not develop in a vacuum.

The social climate and receiving environment help shape the experience of the child

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Integrate Evidence-Based Practice with Practice-Based Evidence

Use interventions with demonstrated efficacy (note that EBP assumes individual characteristics and sociocultural factors play important roles in both assessment and intervention)

PBE involves learning from the experience and wisdom of clinicians who've provided direct services to similar communities of clients noting how they may have modified traditional approaches to work with the specific population of clients.

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Provide Culturally Competent Treatment

Cultural competence should be emphasized in all forms of treatment.

Three broad dimensions of cultural competence

- Therapists cultural knowledge
- Therapists own attitudes/beliefs towards culturally different clients
- Therapists' skills and use of culturally appropriate interventions

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Partner with Community-Based Services

Partnering with schools, faith organizations, community centers is critical and particularly helpful

There is evidence that when these services are coupled with effective mental health services that better outcomes are more likely

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Take A Social Justice Perspective

All people have a right to equitable treatment, a fair allocation of societal resources and to participate in decision making.
Challenge systemic inequalities
Clinicals must use the ecological framework to interpret the factors associated with immigrant mental health status.
Treatment must empower rather than disempower

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