

## **Public Health Issues Surrounding Unaccompanied Immigrant Youth**

This paper seeks to highlight the health issues that unaccompanied immigrant youth (UIY)<sup>i</sup> are facing and policy and service-level strategies that California health care agencies and public health departments can adopt to respond.

### **Who are UIY and how did they get here?**

Immigrants have traveled for many years from Central America and Mexico across the US Mexico border to improve their lives through work, education, and contributions to American society. The uptick of UIY began in 2011 and peaked in 2014. According to the U.S. Border Patrol, there was an approximate 269 percent increase in apprehensions of unaccompanied immigrant youth ages 0-17 entering the United States between FY 2010 and FY 2014. The root cause of UIY stem from a series of factors. UIY are fleeing violence, persecution, abuse, trafficking or economic deprivation in their home countries. In recent years, Guatemala, Honduras, and El Salvador have been afflicted with violence, failing governmental and educational infrastructures, and increased corruption among law enforcement. Gang violence is prevalent in Central America and boys as young as six years old are routinely targeted to join gangs or risk being killed. Young girls are targeted for sexual abuse or exploitation. Many UIY have witnessed threats or murder of a loved one. In addition, a desire for family reunification is also a critical factor, where the vast majority of UIY are migrating to the U.S. to join a family member who migrated previously. This has led to an unprecedented growing number of UIY crossing the border to the U.S. without a parent or guardian.<sup>ii</sup> Los Angeles County, Alameda County, and San Mateo County have the largest populations of UIY in California.<sup>iii</sup>

### **What they face.**

As UIY make the dangerous journey across borders to seek refuge from their traumatic experiences, they may be exposed to extortion, rape, violence, robbery, harsh weather conditions, hunger, dehydration, injury, and other dangers (many UIY have made the journey atop moving trains and crossed the desert on foot). The journey can last weeks or months. Thus, many have attempted the journey numerous times before successfully crossing the border. If they are detained while crossing the border, they are held in detention centers where conditions are deplorable and where they have no clear understanding of why they are being detained. For those deported, the conditions in their home countries upon return are often worse than when they left, setting up a cycle of migration, deportation, and reimmigration.

These young people make up a unique and vulnerable population with distinctive health and mental well-being challenges. Displacement, in combination with the challenging processes of acculturation and socio-economic integration, put UIY in situations of social vulnerability with restricted access to care. They also face the growing threats to the safety, health, and well-being of U.S. immigrant communities.

### **The impact.**

Intentionally deciding to make the dangerous trek is an act of resilience. Many youths feel fortunate that they were able to complete the journey, while at the same time, living with higher rates of anxiety, depression, conduct problems and post-traumatic stress disorder (PTSD) than earlier immigrant counterparts.<sup>iv</sup> They are vulnerable to adverse mental health outcomes resulting from stress, trauma, and/or reactivation of PTSD symptoms.

Youth fleeing the dangers of their home countries with their parents are suffering insecurity and imprisonment in detention centers or their parents are being arrested and immediately deported, leaving them alone. Family separation increases fear and stress which harms the developing brain, as well as multiple organ systems, increasing health risks. Fear and stress experienced by children are associated with poorer health outcomes, including mental health issues, and decreased child educational and behavioral outcomes.

### **Our response.**

In October 2017, Governor Jerry Brown signed into law California Senate Bill 54, making California a Sanctuary State in response to recent introduction of federal anti-immigrant policies, such as efforts to repeal the Deferred Action for Childhood Arrivals (DACA), the new no-tolerance policy, and increased family separations. Being home to the largest number of immigrants in the U.S., this bill sought to protect over a quarter of the state's population.

It is our goal to support public health policies and initiatives that enhance UIY linkages to comprehensive services within schools and communities that address their social-emotional and overall wellness needs. The following set of recommendations and talking points can be used to support highlighting these issues with policymakers:

## **1. Expand Access to Health Programs and Services**

### Public Health's Role

- Create or affirm health agency commitments to provide services to all residents regardless of immigration status; provide training to staff about immigration issues.
- Promote education within departments about the specific and unique needs of UIY (high rates of trauma, family separation, interface with the immigration system, etc.).
- Ensure that policies/procedures are in place to protect client UIY information in spaces where health services are provided.
- Monitor changes in enrollment and utilization of health programs and expand outreach to encourage UIY and families to seek services.

- Study impacts of immigration and social determinants of health on health outcomes and monitor impacts to UIY and immigrant communities, when possible, to monitor vulnerabilities and health inequities.
- Provide accurate, unbiased, culturally competent public health messaging that immigrants are welcome, safe, and belong in our communities.
- Collect and share facts and stories about contributions of immigrants to our communities; include information that addresses health and social impacts of shifts in immigration policy.
- Work in collaboration with elected officials, schools, communities and stakeholders to increase education and awareness on the issues facing UIY, including access to health services for immigrant communities, access to housing, safe spaces, recreation, legal services, employment and transportation; leverage available jurisdiction resources to provide wraparound services.

### Challenges

- Reports are emerging that immigrants, including authorized residents and youth, are avoiding or delaying health care and withdrawing from government programs that provide support for basic needs. Federal-level rhetoric regarding immigration and immigrants diverges from the messaging ideally presented at the local level. This rhetoric causes youth to fear coming forward to receive help from local social service and health organizations and government institutions.
- Immigrants have fears regarding data privacy especially in regard to having their data and immigration status captured in government databases.
- Lack of culturally appropriate services in UIY native languages can be a barrier to accessing services.

## **2. Utilize a School-Based Approach and Expand Community Partnerships**

### Health Care Agency/Public Health's Role

- Partner with school districts for early identification of UIY students and families and, utilizing existing care coordination protocols, create an integrated system of care to link them to physical, social-emotional, recreational opportunities and academic supports.
- Establish a mobile care coordination team that can provide trauma-informed mental health and care coordination services to youth and families in the schools.
- Convene a collaborative of stakeholders, such as school districts, legal services providers, churches, and other community organizations, to develop and provide a network of services and advocacy on behalf of UIY.

### Challenges

- Public Health cannot identify UIY students, therefore partnerships with school sites or districts (as all UIY are required to attend school as part of seeking asylum) is crucial for identifying UIY service needs (legal supports, health care, housing, etc.).

- UIY who are minors and are not living with a parent or legal guardian may have challenges accessing health and emergency housing services due to minor consent policies or age requirements.
- UIY may be working long hours after school to pay off debts to a “coyote” (human smuggler), to support themselves, or to provide financial support to family. Some UIYs may be living independently and responsible for paying for their own living expenses.
- Trauma, which can affect behaviors, learning, and relationships with others, can make it difficult for UIY students to focus in class. It can also cause emotional disengagement, irritability, and constant conflict with others.
- UIY may find themselves in unstable or unsafe living situations, which can lead to housing insecurity or even homelessness. There are very few shelters for youth, and these would most likely be located far away from the school. Also, the time limits for staying at a shelter make this an ineffective means of providing stability.

### **3. Increase Access to Legal Services and Provide Education Services**

#### Public Health's Role

- Support policies and funding to increase access to free legal services for asylum cases for UIY and families, such as offering funding for free legal services and creating contracts for free assessments from psychologists, as required by judges to support asylum cases.
- Support policies that separate law enforcement and federal immigration enforcement, ensuring that local resources remain dedicated to community safety.
- Endorse policies that work with local law enforcement to ensure that the reporting of crimes does not lead to deportation.
- Support policies and funding to enable rapid response networks that provide legal and education services for residents impacted by immigration enforcement, and support training for residents, including immigrants, regarding constitutional and civil rights.
- Support policies and actions that protect against racial profiling based on “perceived” immigration status, ethnicity, religion, or national origin.
- Provide training and assistance for families to create plans for their dependents in case of an emergency and/or family separation.

#### Challenges

- Free legal services are especially important to keep unaccompanied minors and children of migrant families in school. The cost of legal services is a barrier and compounds debts that are frequently owed to “coyotes” (human smugglers). UIY often must work long hours to pay debts and meet basic needs, such as housing and medical care. The barriers to being able to access legal resources are even larger.
- Non-profit legal services organizations are often at capacity or have limited services due to funding.
- Judges are now requiring assessments from psychologists to validate UIY claims for asylum status. Free and easy access to these services are critical.

- Fear of deportation increases immigrants' vulnerability to crime and violence and decreases overall public safety as witnesses or victims of crimes are less likely to report them. Increased involvement of police in immigration enforcement leads to a heightened mistrust of law enforcement among both undocumented and U.S.-born Latinos.

#### **4. Increase Policy Development and Advocacy in Support of UIY and Immigrant Families**

##### Public Health's Role

- Create/support local sanctuary or welcoming policies for all residents, regardless of national origin, religious beliefs, or immigration status.
- Support reform of the immigration court system that unfairly treats children as adults and provides no protection or representation.
- Support policies and practices that keep families united.
- Protect and expand access to affordable and quality health care for all.
- Support policies that improve the living and working conditions of vulnerable populations.
- Form multi-sector collaborations between community, advocacy, and government sectors to address health and build power among vulnerable populations, including immigrants.

##### Challenges

- Policies that attempt to isolate immigrants from the broader community are detrimental to individuals, youth, and our broader security. It is essential to consider public health ramifications of policies at all levels of government.
- Family separation policies are cruel and can have damaging and lasting effects throughout a lifetime. Studies on adverse childhood experiences (ACEs) show that children who have faced significant trauma have higher rates of mental health disorders, substance abuse, significant health issues, suicide, and lower academic achievement. Parents who are faced with separation from their children can also face significant adverse health effects.

##### **Additional Resources.**

Please visit the CHEAC website at: <https://cheac.org/immigration/> for additional resources.

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<sup>i</sup> We use the term unaccompanied immigrant youth (UIY) in place of the legal term unaccompanied alien child (UAC) since, in our view, the latter dehumanizes the experiences of these young people.

<sup>ii</sup> Schapiro, N.A., Children and Youth Services Review (2018), <https://doi.org/10.1016/j.childyouth.2018.04.016>

<sup>iii</sup> <https://www.acf.hhs.gov/orr/resource/unaccompanied-children-released-to-sponsors-by-county-fy17>

<sup>iv</sup> <http://www.apa.org/pi/families/resources/newsletter/2016/06/immigrant-minors.aspx>