

Healthy Mind, Healthy Future: Promoting the Mental Health and Wellbeing of Children in Immigrant Families in California

Healthy Mind, Healthy Future
Symposium

March 8, 2019

The California Endowment, Oakland



Speakers



Cynthia Buiza
Executive Director
California Immigrant Policy
Center



David Mermin
Partner
Lake Research Partners



Aracely Navarro
Policy & Government Relations
Manager
The Children's Partnership

Agenda

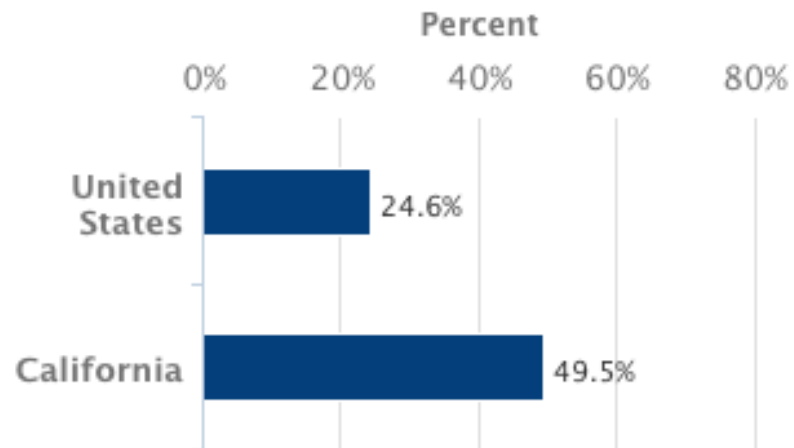
- Welcome and Introductions
 - Background
- Healthy Mind, Healthy Future Research
 - 2017 Health Care Provider Survey
 - 2018 Family Focus Groups and Survey Findings
 - Key Informant Interviews
- Key Policy and Programmatic Recommendations
- Discussion

California's Children



Children Living with One or More Foreign-Born Parent (Regions of 10,000 Residents or More)

Year(s): 2010-2014



Source: Kidsdata.org (Lucile Packard Foundation for Children's Health)

Immigration Enforcement Harms Children

The Effect of Hostile Immigration Policies on Children's Mental Health

The Children's Partnership
CALIFORNIA IMMIGRANT POLICY CENTER

Fatima Avellca, a thirteen year old girl in Los Angeles, can be heard sobbing in the backseat of her car, as she takes a video of her father being pulled over and detained by immigration officials about six blocks away from dropping her younger sister off at school.¹ Unfortunately, Fatima is not alone in her distress. Pediatricians are reporting increased anxiety and panic attacks among children in immigrant families who are fearful that their parents may face deportation or whose parents have already been detained.² Teachers' descriptions of students experiencing stomachaches, or leaving their class in tears because they fear their moms will be taken away from them, are far too common.³ Schools around the nation are gathering emergency contact information from families in case parents are detained or deported.⁴



The Growing Influence of Children in Immigrant Families

- Children in immigrant families are an integral part of the fabric of California and the nation. One in four children in the United States (18 million) live in immigrant families, and the share is growing.⁵ An estimated 5.1 million children live in families where one or more of their parents are undocumented immigrants.⁶
- In California, half of all children (about 4.5 million) live in immigrant families.⁷ In two Assembly Districts in Southern California, four out of five children live in immigrant families.⁸
- Nearly all children in the U.S. are citizens (97 percent), a small amount (2 percent) are lawfully residing immigrants, and very few children (1 percent) are undocumented immigrants.⁹
- The vast majority of children in California are U.S. citizens (98 percent), a small amount (2 percent) are lawfully residing immigrants, and very few children (2 percent) are undocumented immigrants.¹⁰
- About one in six children in California have at least one undocumented immigrant parent.¹¹

In California, the majority of immigrant children's families come from Mexico, Asia and Central America, but California is also home to immigrants from Europe, South America and the Caribbean and Africa.¹² California has also become home to more than 20,000 unaccompanied immigrant youth in the last three years, who are particularly vulnerable as survivors and witnesses of gang violence, domestic abuse and exploitation in their home countries who seek safety in the United States.¹³

Multiple anti-immigrant executive orders, heightened immigration enforcement activities, and uncertainty over the future of the Deferred Action for Childhood Arrivals (DACA) program under the Trump Administration have created a hostile environment for immigrant communities in California and throughout the United States. These actions have put immigrant families on high alert and have forced many immigrants back into shadows. This brief aims to inform advocates and policymakers about the effects of hostile immigration policies on children and the need to continue to work to ensure that children in immigrant families in California are healthy, feel secure, and continue to thrive.

March 2017

The Effect of Hostile Immigration Policies on Children's Mental Health 1

Review of Literature:

- Family separation harms children's mental and physical health
- Children of undocumented parents at risk of behavioral problems
- Having parents taken away undermines family economic security
- Climate of fear further restricts children's access to education, public benefits, and other services

Healthy Mind, Healthy Future



- Fall 2017: Provider Survey
- Fall 2017: Parent and Youth Focus Groups
 - Inland Empire
 - Central Valley
- Winter/Spring 2018: Family Survey
- Winter/Spring 2018: Key Informant Interviews
- 2019: Statewide Symposium
- Ongoing: Policy and Action Agenda





Findings from Focus Groups among Immigrant Parents and Children & 495 Surveys among Immigrant Parents on Immigrant Community Experiences



Washington, DC | Berkeley, CA | New York, NY
LakeResearch.com
202.776.9066

Research Methodology

Phase One: Qualitative: Focus Groups

LRP conducted 6 focus groups among California immigrant parents and children segmented as:

Fresno, CA – October 4 and 5, 2017

- Latino immigrant parents, children under 12
- Latino children ages 12-15
- API immigrant parents, children ages 12-21

Riverside, CA – October 9 and 10, 2017

- Latino immigrant parents, children ages 12-21
- Latino children ages 16-21

Riverside, CA – November 7, 2017

- API immigrant children ages 16-21

Phase Two: Quantitative: Written Surveys

LRP designed this survey in partnership with TCP and CIPC and was conducted using volunteer interviewers from partner organizations. The survey was conducted January – March, 2018. The survey reached a total of 495 immigrants parents across the following regions: Central Valley, Inland Empire, Los Angeles, Orange County, Bay Area, and San Diego, including 457 Latino/Latina parents and 38 Asian/Pacific Islander parents. 18% of the surveys were conducted in English and 81% were conducted in Spanish. Where resources were available, verbal translation for the Asian/Pacific Islander parents was provided. Survey respondents were identified by the partner organizations in health centers, health fairs, and other community events.

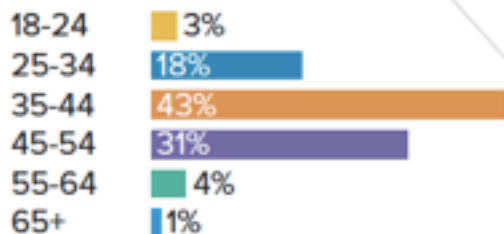
The margin of error for the total sample is +/-4.4%.

Survey respondents were not selected randomly; each person in the pool of possible participants did not have an equal chance to be selected. As a result, the demographic make-up of those surveyed is not representative of the immigrant parent population (e.g. it is predominately female; predominately Latino; and limited areas were polled, etc.).

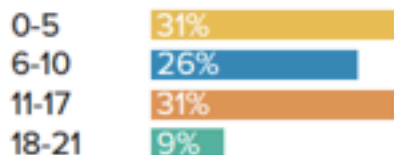
Qualitative Research Statement of Limitations

- In opinion research, qualitative research seeks to develop insight and direction rather than quantitatively precise or absolute measures. Because of the limited number of respondents and the restrictions of recruiting, this research must be considered in a qualitative frame of reference.
- The reader may find that some of the information seems inconsistent in character upon first reading this report. These inconsistencies should be considered as valid data from the participant's point of view. That is, the participant may be misinformed or simply wrong in his or her knowledge or judgment, and we should interpret this as useful information about their level of understanding.
- **This study cannot be considered reliable or valid in the statistical sense.** This type of research is intended to provide knowledge, awareness, attitudes, and opinions about issues and concerns.
- The following limitations are inherent in qualitative research and are stated here to remind the reader that **the qualitative data presented here cannot be projected to any universe of individuals.**
 - Statement 1. Participants who respond to the invitation of a stranger to participate in this research show themselves to be risk takers and may be somewhat more assertive than non-participants.
 - Statement 2. Some participants speak more often and more forcefully in focus group sessions than other participants, so their opinions tend to carry more weight in the findings.
 - Statement 3. Participants “self-select” themselves.
 - Statement 4. Participants were not selected randomly; as a result each person in the pool of possible participants did not have an equal chance to be selected.

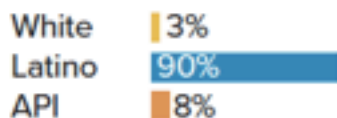
AGE



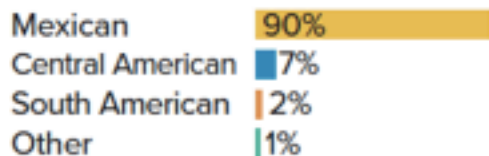
AGE OF YOUNGEST CHILD



RACE/ETHNICITY



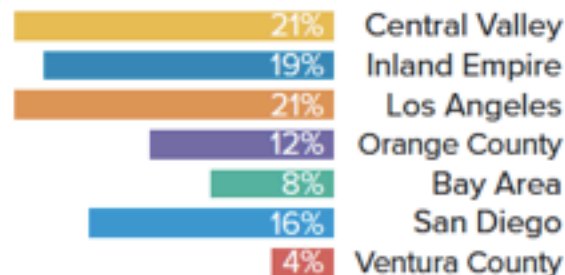
LATINO BACKGROUNDS



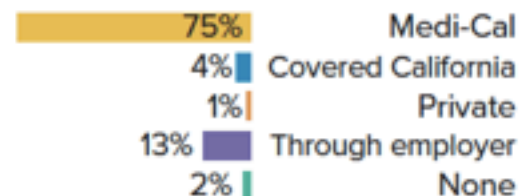
LANGUAGE OF INTERVIEW



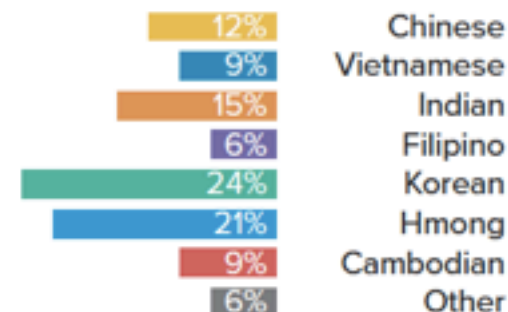
REGION



CHILD'S HEALTH INSURANCE



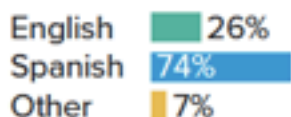
API BACKGROUNDS



GENDER



LANGUAGE IN HOME



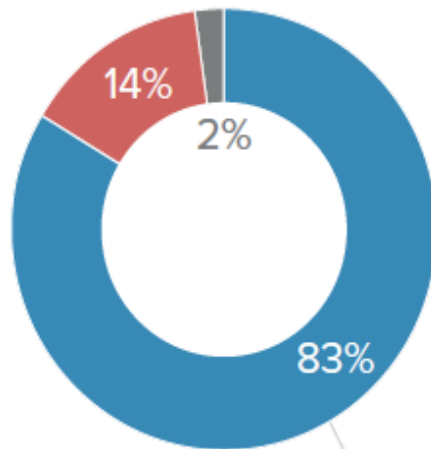
LENGTH OF TIME IN UNITED STATES



Focus Group and Survey Questions

- Use of public programs
- Current state of the United States
- Emotional state of immigrant parents and children
- Parent's dreams and goals for their children
- Changes in children post-2016-election
- Reaching out for help
- Views toward immigration
- DACA and immigration policies
- Trusted resources and safe spaces
- How immigrant parents and children want to be seen by society

PERCENTAGE OF IMMIGRANT PARENTS THAT HAVE APPLIED FOR PUBLIC PROGRAMS LIKE MEDICAL, CALFRESH, OR WIC AND THE BIGGEST REASON FOR NOT APPLYING (N=495)



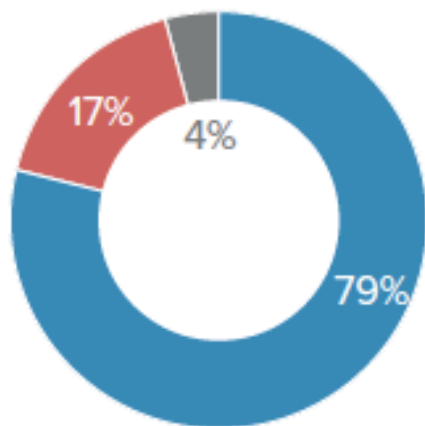
- Yes
- No
- Not sure

Most likely to have applied
 Central Valley (92%)
 25-34 years old (90%)
 San Deigo (86%)
 Women (85%)

[If never applied] Why?

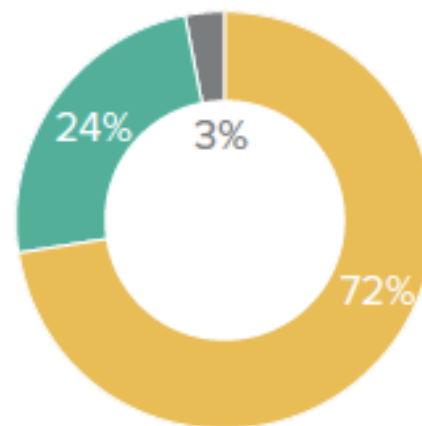
I don't think I qualify	36%
I don't need public benefits	18%
Public benefits aren't meant for people like me and my famliiy	26%
I have been told not to apply	5%
I don't know enough about the programs	5%
I don't feel comfortable applying for the public benefits	3%
I was turned down before	3%
The application process is difficult or complicated	2%
Not applicable	3%
Not sure	11%

CHILDREN'S KNOWLEDGE OF PERSON DETAINED/DEPORTED (N= 495)



- Yes, they knew about the person being detained or deported
- No, they did not know about the person being detained or deported
- Not sure

WHETHER PARENTS TALKED TO THEIR CHILDREN ABOUT THE PERSON DETAINED/DEPORTED (N= 495)



- Yes
- No
- Not sure

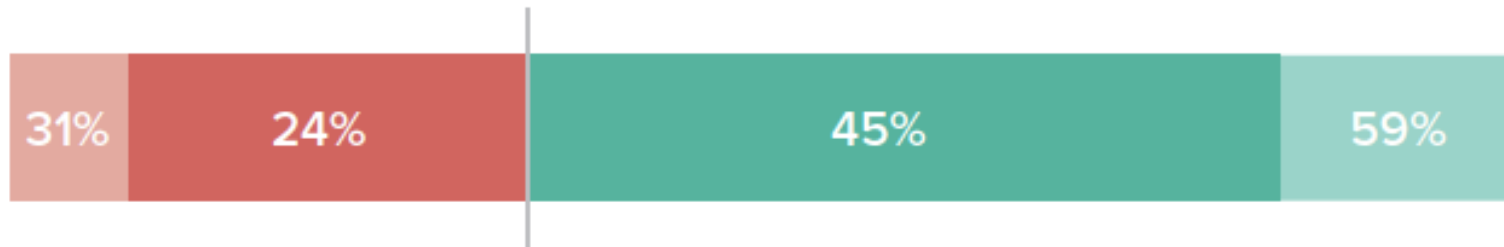
Most likely to have talked to their children

- 45+ (76%)
- Latinos (75%)
- Women (74%)



Dreams, Goals, and Barriers to Success

HOW MUCH IMPACT WILL THE LOSS OF DACA HAVE ON YOUR CHILDREN? (N= 495)



0-4 no impact 0 – no impact at all
0 – very large impact 6-10 no impact

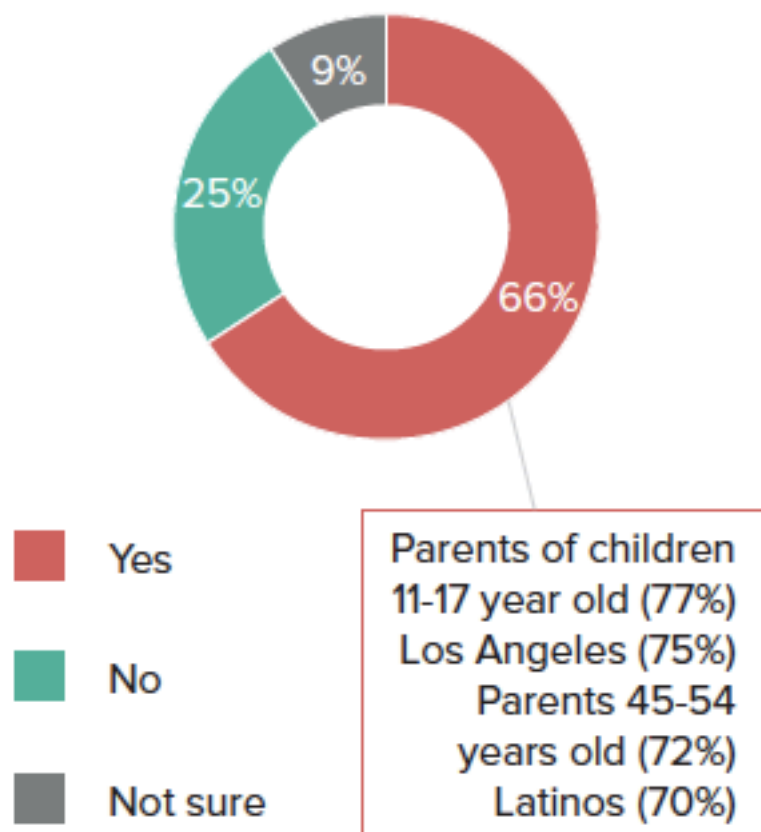
“It’s like hanging from a string that can be cut at any time.”

- Latino youth, age 16-21, Riverside

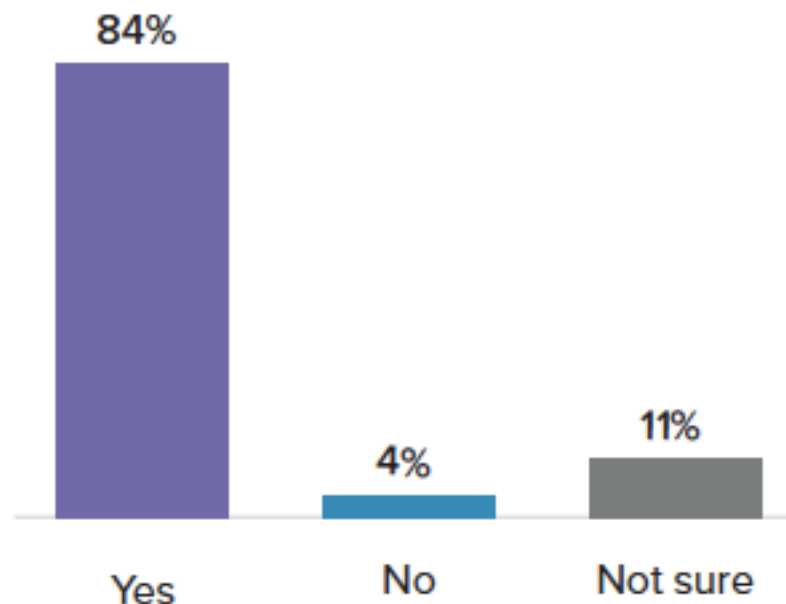
“I just want some government support. I know that is what is bringing all of us down right now. Support like DACA. We never wanted that to end.

- Latino youth, age 16-21, Riverside

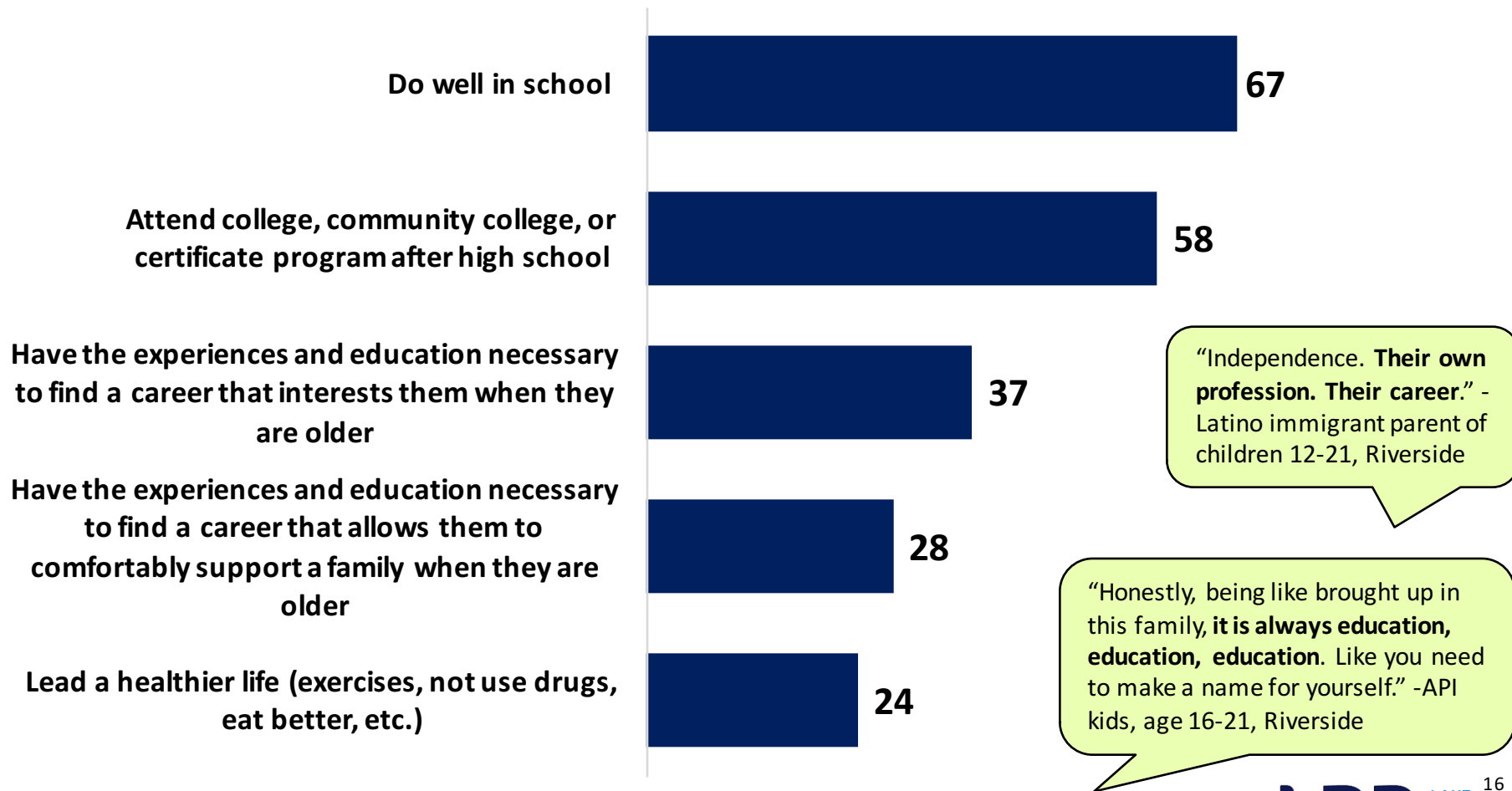
CHILDREN ACTING DIFFERENTLY SINCE THE PRESIDENTIAL ELECTION (N= 495)



CHANGE IS A RESULT OF WHAT THEY HAVE HEARD ABOUT IMMIGRATION FROM PRESIDENT TRUMP (N= 495)

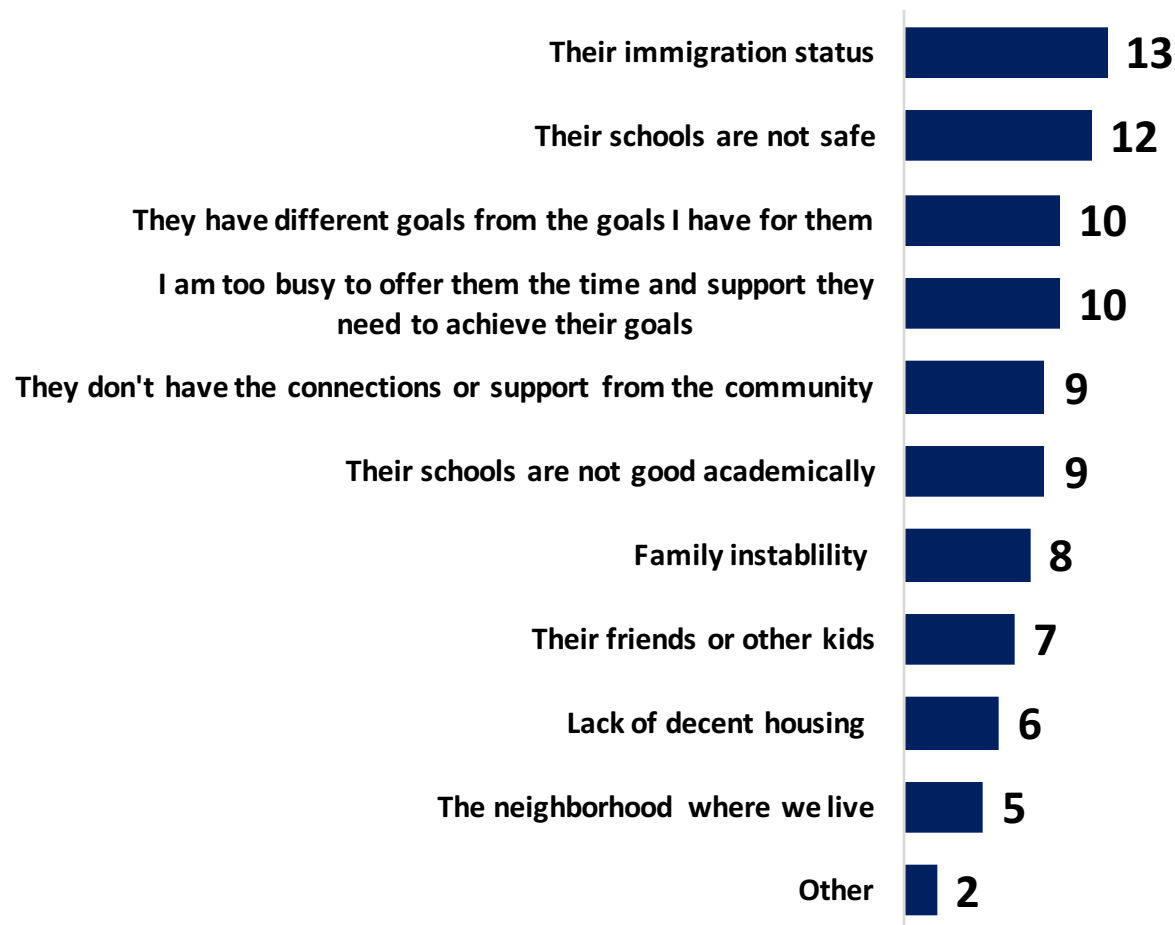


Immigrant parents first and foremost want their children to do well in school. A majority want them to receive an education after high school. They also want them to have the experiences and education necessary to find a career that interests them and allows them to comfortably support a family.



What would you say are your three biggest goals right now for your children?

In a second tier of obstacles parents believe their children face includes their children's immigration status, the safety and academic rigor of their schools, a lack of support from the community and the parents themselves.

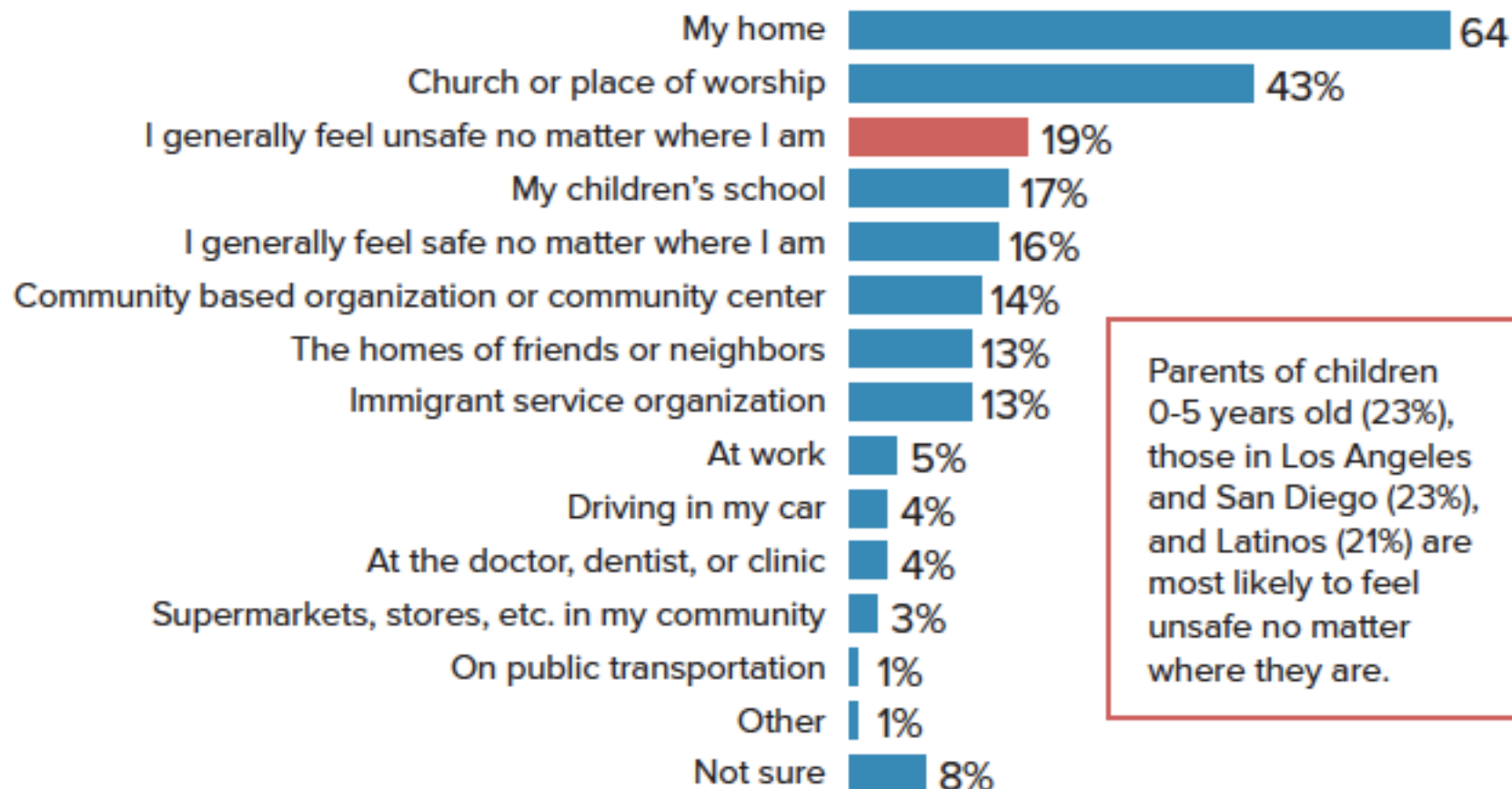


Immigrant parents express mixed emotions about the current direction of the country. Some feel hopeful but most are confused and frustrated under the current administration. The immigrant children focus primarily on their happiness (or unhappiness) with their grades or their peers in school.

- “As a mother, I am worried. It keeps me up at night. **Because of the president, Mr. Donald Trump, the kids are learning how to hate.**” -Latino immigrant parent of children 12-21, Riverside
- “**Stressed.**” -Latino immigrant parent of children under 12, Fresno
- “To me, it is **confusing**. Very confusing.” -API immigrant parent of children 12-21, Fresno
- “**You want the best for your children and we just don’t know what is going to happen in the future. I am confused.**” -Latino immigrant parent of children under 12, Fresno
- “I have frustrations, for my kids. **The future is unsecure.** We are undocumented but I am not thinking about myself I think about my son (respondent is crying) what is going to happen with him.” -Latino immigrant parent of children 12-21, Riverside
- “**Fearful.**” -Latino immigrant parent of children 12-21, Riverside
- “**Terrified. There are political matters that are happening in society today and not knowing what is going to happen tomorrow with my family. They are saying about ICE and all that stuff, getting deported, not knowing what might happen to my little two sisters so I'm kind of terrified of what is going to happen tomorrow.**” -Latino immigrant kids 16-21, Riverside
- “**Confused.** Yes the same thing with the political affairs with immigration. I don't get what is going to happen with why they are trying to take out DACA and how they are going to try to back it up. **What is going to happen to all the dreamers that are trying to study.** I'm trying to understand.” -Latino immigrant kids 16-21, Riverside

Please fill in the blank: I feel _____ about the way things are going in the country today.

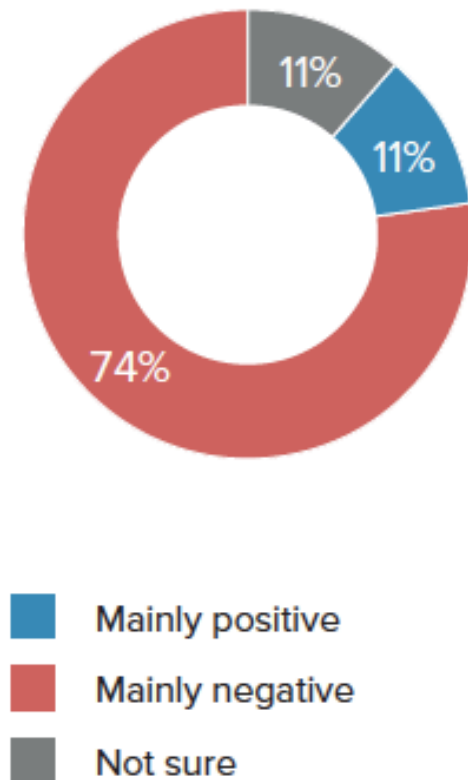
PLACES WHERE IMMIGRANT PARENTS GENERALLY FEEL SAFE FROM IMMIGRATION ENFORCEMENT (N=495)



Parents of children 0-5 years old (23%), those in Los Angeles and San Diego (23%), and Latinos (21%) are most likely to feel unsafe no matter where they are.

**Q1: DO YOU HEAR MAINLY POSITIVE OR MAINLY
NEGATIVE MESSAGES ON MEDIA ABOUT IMMIGRATION?**

**Q2: WHERE DO YOU TEND TO GET YOUR INFORMATION
ON IMMIGRATION ISSUES? (N=495)**



Sources of Information

Spanish language television	78%
Spanish language radio	52%
Family or friends	42%
Facebook	39%
English language television	32%
Church	19%
School	18%
English language radio	13%
Instagram	6%
Twitter	3%
Other	5%

California Children in Immigrant Families: The Health Provider Perspective

- Partners:
 - California Primary Care Association (CPCA)
 - California Program on Access to Care (CPAC)
 - Cecilia Ayón (Associate Professor at the School of Public Policy, UC Riverside)
- Methodology: electronic survey (n=151)
- Focus on access to care, types of services needed, and immigrant family health and wellbeing



Berkeley
UNIVERSITY OF CALIFORNIA

"The children are scared for their parents..."
Health Provider, California

2017: California Provider Survey

*Among Children in Immigrant Families, Health Care Providers Reported:

90%

Increase in anxiety and fear due to detention and deportation



70%

Increase in depressive symptoms including: sadness, sleeplessness, loss or gain of appetite, and loss of interest in daily activities.



"I am seeing an increase in depressive, anxious, and somatic symptoms, as well as recurrent trauma symptoms from the past. People are extremely scared." Health Provider, California

2017: California Provider Survey

*Among Parents:

70%

Increase in anxiety of taking children to school or recreational activities due to fear of immigrant enforcement activities.



67%

Increase in concerns about enrollment in Medi-Cal, WIC, CalFresh and other public programs. While 40% expressed interest in opting out of these programs.



"In meeting with key staff of elementary, middle, and high schools, there are consistent concerns that immigrant parents are too scared to attend school events, resource fairs, and obtain services due to the fear of immigration taking them away from their family. Our families report concerns and fears about going grocery shopping, walking their kids to school, and seeking mental health/dental/vision services using Medi-Cal, as they think it might lead to an INS raid." Health Provider, California

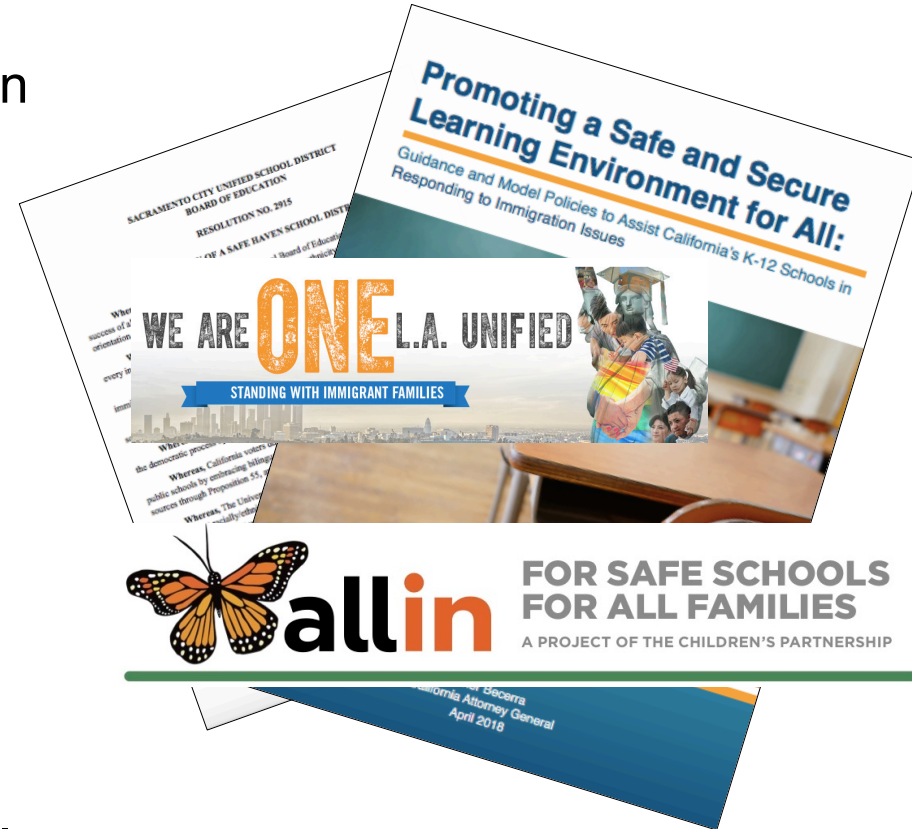
Key Policy and Programmatic Recommendations

1. Strengthen Community Safety to Ensure Children, Youth, and Families Feel Secure and Supported in their Communities
2. Invest in Community-Based Approaches and a Community-Based Workforce to Support Immigrant Families
3. Improve Access, Coordination, and Integration of Services to Reduce Barriers for Immigrant Families
4. Build Capacity of Providers, Educators, and Others Who Interact with Immigrant Families
5. Educate and Engage Communities about Immigrant Rights and Build Public Will to Take Action

Key Policy and Programmatic Recommendations

1. Strengthen Community Safety

- Support codification and expansion of the current national sensitive locations policy particularly at or near places that are critical to children's health and wellbeing.
- State agencies should ensure information will not be shared with federal immigration officials.
- Full implementation of California laws, including SB 54 and AB 699.



Key Policy and Programmatic Recommendations

2. Invest in Community-Based Approaches

- Train existing health navigators, enrollers, and community health workers, and expand the workforce to educate immigrant families about their rights and advocate for policy changes.
- Expand community engagement and partnership programs to reach and empower local residents in innovative ways and support model practices.
- Invest in the identification, strengthening and replication of leadership networks that empower residents to educate their communities.

Key Policy and Programmatic Recommendations

3. Improve Access, Coordination, and Integration of Services

- Stop efforts to discourage immigrant families and children from accessing nutrition, health and other programs and services.
- Grant all adults low income adults, regardless of immigration status, access to health care services.
- Provide better tools and interventions to help make referrals to social, mental health, or legal services.
- Develop a system across the state that identifies mental health care that is culturally competent and contextually aware of their unique needs to support referrals.

Key Policy and Programmatic Recommendations

4. Build Capacity of Providers, Educators and Others Who Interact with Immigrant Families

- Strengthen and train staff on protocols to minimize harm to children if they are present during immigration enforcement actions.
- Include trauma-informed care training as part of Continuing Medical Education, medical school curriculum, teacher and school administrator training, and licenses for social workers and other mental health professionals.
- Adopt a statewide trauma informed care strategy that is adapted to include the unique needs of immigrant families.

Key Policy and Programmatic Recommendations

5. Educate and Engage Communities about Immigrant Rights and Build Public Will to Take Action

- Share accurate, up-to-date information related to the immigrant community and recognize immigrant contributions.
- Highlight the value of immigrants and immigrants' rights in media.
- Include *Know Your Rights* programming on mainstream and ethnic media.
- Individual civic engagement at the neighborhood level.



Questions?



Thank You!

Cynthia Buiza

cbuiza@caimmigrant.org

213.250.0880 ext. 101

<https://caimmigrant.org/>

David Mermin

Washington, DC | Berkeley, CA | New York, NY

202.776.9066

LakeResearch.com

Aracely Navarro

anavarro@childrenspartnership.org

213.341.1222

@KidsPartnership