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Article 80

School Counselors Working With Latino Children and Families Affected by Deportation

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"At night I can't sleep, because I'm afraid someone is going to come and grab me," says 32-year-old Veronica Cumez, who lives with her 14-year-old daughter on a street of orderly homes and lawns just east of Main Street. "Maybe it's nerves," she says, "but I think they're going to come again." (Parker & Ballvé, 2008)

In recent years, working without legal papers in the United States is a serious crime, punishable by incarceration and deportation. Federal immigration authorities have targeted undocumented immigrants in the biggest crackdown in decades (Solis, 2008). "Arrests in worksite cases have jumped from a total of 850 in 2004 to 4,940 last year, including 863 arrests based on criminal charges," according to U.S. Immigration and Customs Enforcement Secretary Chertoff (as quoted in Bacon, 2008). The widespread raids have led to a large percentage of Latinos worrying a lot (40%) or worrying some (17%) that they themselves, a member of their family, or a close friend will be deported (Pew Hispanic Center, 2008). The persecution of immigrants through tighter border controls, employer sanctions, and mass deportations is the reason behind the separation of thousands of families (Human Rights Watch, 2007). In a report released in Mexico City by the Population, Border and Migrant Affairs Commission of the Mexican Congress, for every three adults deported from the United States, one child is abandoned and left behind. Additionally, that report states that in the first seven months of 2008, the United States deported 90,000 children to Mexico alone and without their parents (La Jornada, as cited by Treviño, 2008).

We know that many Latinos entered the United States with either no documentation or unauthorized documentation, or they have stayed in this country in violation of their temporary visas. While some may view the plight of undocumented individuals with little empathy, this paper will shed light on the roles of school

counselors and other mental health providers whose work brings them into direct contact with the pain and suffering of people who live with the fear of deportation or who have already been separated through deportation proceedings (Carbonell, 2005). Families are quite complex and even when a parent or both parents may have undocumented status, the children may very well be American citizens. In fact, 78% of children in immigrant families are citizens (Capps, 2001). School counselors understand the needs of the children and families they serve and can play leadership roles in building bridges between the schools and the communities. Advocacy and leadership roles very much align with the American School Counseling Association's National Model for school counselors (American School Counseling Association, 2003).

In the period between 1970 and 1999, the number of foreign-born U.S. residents originating from Europe dropped from 62% to 16%, while the foreign-born population from Asia increased from 9% to 27%, and the foreign-born population from Latin America rose from 19% to 51% (U.S. Bureau of the Census, 2001). These demographic trends are at the center of the major shift taking place today in this country – a dramatically diverse generation of children that will soon become the numerical majority. Already, the 2000 Census reported that 20% of this ethnically, racially, and culturally diverse group of children is growing up in a family where they or at least one of their parents is an immigrant. Yet, immigrant children face substantial barriers in accessing higher education. According to Richard Fry, a researcher with the Pew Hispanic Center, one in five won't graduate from high school (as cited by Nealy, 2008). Children of U.S.-born, U.S.-educated Latinos complete high school and attend college in larger numbers than children of foreign-born parents. Given the achievement gap between Hispanics and Whites across the PK-12 years and college (National Task Force on Early Childhood Education for Hispanics, 2007), it is imperative that school administrators, counselors, and teachers be informed of the impact that family separations due to deportations are having on the education of Hispanic children. Early intervention is considered to be the best route to help all children succeed in school (American School Counseling Association, 2003).

This paper reviews the literature for ideas on how school counselors can address the effects of immigration-related separations in young Hispanic/Latino children both at the time of the crisis when their parents are deported as well as coping with the longer-term effects of the separation. Understanding the reality of low-income undocumented and documented Latino children and their parents who have been separated due to the United States' government's deportation policies is an issue of high concern among school counselors, according to anecdotal information from counselors in the field as noted by the authors. How does deportation or detention of family members affect the development, education, health and well-being of children from low-income first generation Latino immigrant families? More information is needed at many levels about how children fare when confronted by immigration stress, including forced separations from their parents, a family stressor that occurs unexpectedly under traumatic circumstances, oftentimes with overt use of force by law enforcement officials (Bacon, 2008).

School counselors are informally reporting situations where children are kept home from school by parents who are afraid that immigration will stop them on their way to dropping off their children. Other cases reported are those of children who are unable

to sleep because they are afraid that immigration officers will storm their homes in the middle of the night. These situations and others result in children not being able to focus on their schooling.

School personnel have traditionally found it difficult to understand low-income immigrant Latino parents (Orozco, 2008). For example, teachers have reported having little knowledge about how parents with less than a high school education are involved with their children (Baker, Kessler-Sklar, Piotrkowski, & Parker, 1999). If immigrant children are to succeed in school, educational and counseling personnel must be in touch with the unique needs faced by immigrant children and their families. School counselors are in a privileged position to understand the cultural and familial background of an immigrant child in order to provide needed information to parents and to welcome input from the parents at the same time, thus ensuring a community centered approach that benefits everyone (Van Velsor & Orozco, 2007). For this reason, it is important that school counselors document best practices and strategies implemented in the schools, especially culturally sensitive counseling approaches that may help immigrant children succeed in school despite the negative effects caused by deportations and family separations. School personnel are in a key position to identify children's strengths and challenges, information that could lead to the implementation of specific strategies and guidelines for working with this population.

The purpose here is to discuss two issues: (1) how children's education, health, and well-being are affected when their parents live in fear of being deported or when they are separated from their parents due to deportation or detention; and (2) provide concrete ideas on what school counselors can do to promote the education, health and well-being of the affected children. Counselors in school settings need to be prepared to assess, build trust, and work with immigrant children.

The Psychological Price of Family Separations

Few studies have focused on family separations due to deportations and the effects on the education of children. Immigration-related separations in Latino families and their effects on youth have typically been studied in cases where parents have voluntarily made the decision to immigrate to the United States, leaving behind family members including their children. That literature has documented the effects of mother-child separations, including mothers who suffer from major depression (Miranda, Siddique, Der-Martirosian, & Belin, 2005) and weakened bonding that later disrupts key parenting practices (Mitrani, Santisteban, Muir, 2004).

Other research has found that parent-child separations, which occur for many reasons, disrupt healthy family processes. In one study of 385 adolescents originally from China, Central America, the Dominican Republic, Haiti, and Mexico, researchers (Suárez-Orozco, Todorova, & Louie, 2002) found that children who were separated from their parents were more likely to report depressive symptoms than children who had not experienced separation. Mena, Mitrani, Muir, and Santisteban (2008) found that Hispanic adolescents who had severe drug use problems or other behavioral problems had experienced prolonged separations from their mothers, as a result of the mothers having immigrated to the United States and having left the children in the care of extended family members. Carbonell (2005) worked with undocumented immigrants in her clinical

practice and found that there is a psychological price – insomnia, recurrent nightmares, post-traumatic stress disorder symptoms, paranoia – immigrants pay when they come to the U.S. in search of a better future. The effects of immigration on low-income Mexican-American immigrant children and families may be life-long, characterized by developmental disruptions and ongoing stressors that impact family relationships (Partida, 1996).

In one study of 143 persons, researchers found that Latino immigrants with concerns about deportation are at heightened risk of experiencing negative emotional and health states, stress due to extrafamilial factors, and substandard health status (Cavazos-Rehg, Zayas, & Spitznagel, 2007). Results seemed to suggest that Latino immigrants concerned about being deported may limit their use of healthcare services even when they need to use those resources.

Using data from the 2005 California Health Interview Survey, Ortega et al. (2009) examined parental concerns about development, learning, and behavior of young children as measured by the Parents' Evaluation of Developmental Status. This study utilized bivariate and multivariate analyses to determine associations between developmental risk and family citizenship/documentation status. The researchers found that Mexican children with undocumented parents have greater parent-reported developmental risk than Mexican and White children whose parents are U.S. citizens or are legally documented.

Researchers (Gudino, Lau, & Hough, 2008) found some evidence that immigrant youth exhibiting externalizing mental health problems may be more likely to access mental health services, both specialty and school-based, in comparison to youth who exhibit internalizing mental health problems. In a 2-year longitudinal study consisting of a large sample of Hispanic and Asian Pacific Islander families (youth ages 11 – 18; N = 457), youth from immigrant families appeared to be vulnerable to having internalizing mental health problems go untreated. Externalizing mental health problems lead to higher rates of identification and service utilization.

While there is limited research on the psychological effects of family separations as a result of deportation, the aforementioned studies reveal the impact that separation from a parent has on children in general. Cases of mothers who immigrated to the United States and left their children in the care of extended family members demonstrate how family processes are disrupted and can lead to life-long stressors, including depression, drug use, behavioral problems, post-traumatic stress disorder, and other health issues. In terms of treatment, it appears that youth who externalize mental health problems are more likely to receive treatment, whereas youth who internalize mental health problems may go unnoticed.

The following vignette is that of a youth externalizing a mental health problem that comes from the experience of the second author. It is not intended for generalization, but rather as one example from the field. This brief vignette of an undocumented minor who was referred to mental health services occurred in a large urban school. The name of the child has been changed and specific details of the case have been omitted so as to protect the anonymity of this case.

Case Study: Cindy

Cindy is a 17-year-old female student attending a public high school in California. At age 15, Cindy moved from El Salvador to be with her parents in California. Cindy's mother has been in the United States two years and her father, eight years. Both parents work full-time. Cindy has three siblings: 21-year-old brother Juan who is in El Salvador, 8-year-old sister Maria and 4-year-old brother Jorge. The two younger siblings came to the U.S. with their mother.

Cindy is fluent in Spanish and has difficulty writing and communicating her thoughts in English. Cindy was referred to a therapist by a math teacher for assessment and counseling services. The teacher reported that Cindy gets frustrated when trying to communicate her thoughts and ideas in the classroom. When asked a question in class, Cindy appears tearful and exhibits symptoms of panic attack: palpitations, pounding heart, trembling and sweating. Cindy wrote "I want to die" in Spanish on a math paper.

At the time of assessment, Cindy reported having a history of depression since age ten. She saw a doctor in El Salvador, but never received counseling services. She reported often feeling sad, alone, and low energy. In sessions, Cindy presents as quiet, nervous, and anxious. She misses her family, friends, and school in El Salvador. Her father is a legal resident, but none of the other family members are documented. Since Cindy is coming into the school system at the age of 15, she is behind on high school credits needed for graduation and feels overwhelmed because she does not speak English fluently, which only adds to her anxiety. Cindy has a part-time job which forces her to sometimes work late hours, affecting her ability to complete homework assignments. Cindy reported that she needs to work in order to help the family pay bills.

At time of assessment, Cindy had fleeting suicidal ideation, no history of suicide attempts or hospitalization. Student also reported depressive symptoms: feeling tearful, fatigued, irritable and alone. The counselor focused her intervention on helping Cindy explore reasons for not wanting to live – being far away from home, missing friends and her life back in El Salvador. The clinical goal was to address depressive symptoms through exploring clients coping mechanisms (i.e., talking to friends and family members). The counselor helped Cindy explore whether she was interested in joining student groups that might help her to feel connected to others.

Undoubtedly, the move from El Salvador to the U.S. was traumatic for Cindy. She reported difficulty sleeping and having occasional nightmares. Her nightmares revolved around being separated from her family. Being undocumented, the client expressed fears of being deported. The counseling intervention consisted of exploring the trauma, addressing the nightmares and fears of the client. In sessions, the goal was to explore fears of being deported, validating and acknowledging how difficult this situation must be for the client. By being non-judgmental and respectful, the counselor communicated support to the client. Linking Cindy to legal and community resources was another important way in which the client felt understood by the counselor.

A second important area had to do with Cindy's difficulty articulating her thoughts and feelings in English. Cindy was finding it difficult acculturating to U.S. life and school culture. The language barrier would take some time to overcome. However, it was important to explore acculturation struggles with this client. Helping Cindy understand U.S. teen culture was considered therapeutic and to this end a number of ideas

were generated, such as going online to discuss U.S. music and teen trends. Equally important, the sharing of Salvadoran culture and music with her counselor allowed Cindy to celebrate her cultural heritage and to feel accepted in the counseling environment.

Cindy was missing a semester worth of school credits. This situation along with the aforementioned factors contributed to anxiety and panic attack symptoms. Because the counselor whom Cindy was referred to was from an outside agency working in the schools, it was important to connect Cindy with her designated academic counselor who could provide more direct academic support, referrals to tutoring within the school, and consultation with teachers about Cindy's overall academic progress. Linking Cindy to an academic tutor would provide support and help Cindy increase confidence in her academic abilities. Since the panic attack symptoms appeared to occur at school, it was hoped that the prior measures will reduce the panic attack symptoms and help Cindy manage her anxiety.

In terms of the conflict between school responsibilities and part-time work, Cindy felt that she needed to work to help the family pay their bills. This caused her to feel overwhelmed with trying to balance homework and her part-time job. The counselor helped her to explore time management skills and ways to complete homework before going to her paid job. Discussing scholarships and the availability of some community resources to alleviate financial stress, such as the local food bank and others, opened some options for the family.

Most importantly, the counselor helped Cindy realize that she is resilient and strong. The journey to be reunited with her family in search of a better future, while undoubtedly fraught with trauma, illustrates strong survival skills and strong motivation to succeed. Now in the U.S., the client is hard working, friendly, striving to do well in school, all of which will work in her favor in the long run. Furthermore, the client's motivation for treatment has led to tangible results: a better understanding of the new culture, a renewed sense of pride in herself as a young Salvadoran woman, and a supportive counseling relationship that affirms her trust in people.

Counseling Considerations for Working with Undocumented Children in the Schools

These recommendations emerge from the body of research that has looked at the needs of immigrant families as well as from the practice of school counselors in the field. While this is not intended to be an exhaustive list, the following points are one place to start. We begin with school-wide interventions and then look at more individualized interventions.

Create a welcoming climate. Provide a welcoming school climate for undocumented children and their parents. All parents have much to offer to the education of their children. When school personnel abandon preconceived notions about certain groups of parents and embrace the rich cultural backgrounds of all their students, including their histories, languages, countries of origin, traditions, family customs, etc., that school is transformed into a welcoming institution. When the school culture is one that models acceptance of children, regardless of class, ethnicity, gender, race, ability or disability, sexual or religious orientation, children and parents alike also learn to value

diversity. Inclusivity of the various student dimensions represented in a school forms the basis of a climate that welcomes and calls all parents to be involved in their children's schools. Involvement is a two-way process where parents are knowledgeable about what is taking place with their children's education, and educators understand, embrace, and seek input from the communities and families of the children (Van Velsor & Orozco, 2007).

Encourage mainstream students to learn from immigrant children. Create a school environment in which mainstream students learn from immigrant children. Too often, schools focus all their efforts on acculturating immigrant students to the new school culture. While this continues to be extremely valuable, it can also send the message that the only system that is valued is that of the mainstream culture. It is important to also send the message that the language, culture, and worldviews of immigrant children are valued. One of the ways in which school environments demonstrate their appreciation of diversity is by helping mainstream students learn from those whose cultural and linguistic knowledge is different from their own (Schwallie-Giddis, 2004). As demographic changes continue to transform the United States into a multiracial and multiethnic nation, counselors must set aside patronizing ethnocentric perspectives in order to more thoughtfully meet the needs of clients from diverse backgrounds and cultures (Nikelly, 1997).

Provide a safe place for children to share their fears and stories. While this appears to be a basic statement for helping professionals, its importance cannot be understated in the case of undocumented immigrants who on a daily basis experience feelings of vulnerability to being discovered by law enforcement officials. Individuals in positions of power are not to be trusted. Children of immigrants, even when they are U.S. citizens, worry about what may happen to their families if one of their members is deported. Children who are themselves undocumented live in fear of being deported, according to clients seen by the authors of this article. In individual counseling, going over issues of confidentiality and developing a trusting relationship with a client who may potentially be undocumented are critical. Children affected by issues related to deportation may not necessarily exhibit acting-out behaviors, yet they may be struggling internally. A safe counseling environment in addition to creating organizations with spaces for children with similar needs like Newcomer Clubs, "lunch buddies", small group counseling, sports groups, and after school programs may provide places where children can feel supported.

Identify/examine client's personal issues (poverty, poor housing, fear of deportation). Undocumented parents, even when they have children who are U.S. citizens, may opt for not applying for any type of social service such as Medi-Cal or Healthy Families Insurance because they are afraid to jeopardize their stay or do not want to be considered a burden to the government. In one study, 39% of immigrants did not visit social or government agencies for fear of deportation (Cavazos-Rehg et al., 2007). Although undocumented individuals are ineligible for food stamps, they can receive

emergency medical care and other programs. U.S.-born children of undocumented parents are citizens and therefore eligible for full educational and public assistance (Smart & Smart, 1995).

Assess the level of acculturation. Paniagua (2005) recommends assessing a client's level of acculturation in the first session. For example, traditional Latino parents who have recently come to the U.S. might be more apt to value *machismo* and *marianismo* (Gil & Vasquez, 1996), but children as they acculturate may place less emphasis on those same values. Parental roles too may change in the U.S. for women who previously had not worked outside the home. Assessing the level of acculturation will be important in determining whether an adolescent is having difficulty negotiating the values of the new culture with the values of the home culture.

Consider identity issues. Adolescent clients whose parents immigrated to the U.S. may face identity conflict issues that include negotiating differences in language, family structures, and cultural values. Since these adolescents may enter counseling with little awareness that they are struggling with identity issues, the counselor's expertise will be important in identifying this as a problem area. For example, many Latino adolescents must try to reconcile the culture of their families with the mainstream Euro-American culture. These adolescents recognize the importance of learning to speak English, but there is also an allegiance to their primary language because it forms such a core part of their identity. In addition to identity and cultural value issues, adolescents may be affected by negative stereotypes, racism and discrimination, and the struggle between individual advancements and family commitments (Baruth & Manning, 2003). Discuss client experiences with discrimination and governmental agencies. Certain groups have more privileges and entitlements than others. Ruiz (1981) recommends first exploring the effects of broader social problems on the client, among them fears of deportation, poverty, poor housing, lack of English language fluency, difficulties with governmental agencies, etc.

Discuss multicultural differences between client and counselor. The American Counseling Association (Arredondo et al., 1996) and the American Psychological Association (2002) created guidelines of multicultural competence that direct counselors on how to provide culturally sensitive counseling. Ivey, Ivey, and Zalaquett (2010) state that "the very act of helping has power implications" (p. 39) with the client being in a position of less power than the counselor. Discussing the power differentials that go with skin color, gender, sexual orientation, ability, class, and other dimensions will help create a more egalitarian relationship between counselor and client. A multiculturally competent counselor treats all clients with dignity and respect, does not discriminate, and seeks to develop increasing awareness of his/her own multicultural background (Ivey et al., 2010). The urgency for teachers and school counselors to be trained to work with diverse children has been identified for many years. Schools need teachers, counselors, administrators, community liaisons, and other personnel who are multilingual, multicultural, sensitive, and responsive to the needs of their communities.

To conclude, the mental health and well-being of many Latino children in the U.S. is being affected due to the climate of persecution, mass deportations, and forced family separations of recent years. While the psychological price for children, the majority of whom are U.S. citizens, is largely unknown, through practice and a review of the literature, we know that these types of circumstances may result in developmental disruptions, ongoing stressors, insomnia, nightmares, post-traumatic stress disorder symptoms, paranoia, substance abuse, behavioral problems, and other life-long ills. School counselors, in their roles as advocates, leaders, collaborators, and consultants, can be instrumental in identifying youth in need of mental health services and in reaching out to immigrant and minority communities to increase awareness and detection of the mental health needs of children.

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