

Immigration & Trauma: Before, During & After

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Objectives

- To become familiar with a framework that provides an integrated analysis of experiences of trauma for immigrant communities in three different stages of the immigration process: before, during and after immigration.
- To expand knowledge regarding how to best serve one of the most vulnerable immigrant communities – undocumented immigrants exposed to trauma

Presentation Outline

- ▶ Introduction
 - Global & Local Context - Why Immigration & Trauma?
- ▶ Overview of Basic Concepts
 - Trauma: Overview of Basic Concept
 - Provider's Cultural Counter-Transference
 - Cultural Competence & Cultural Humility
- ▶ Considerations about Trauma & Immigration
 - Before, During & After immigration
- ▶ Recommendations
- ▶ Resources
- ▶ Q&A

Introduction - Global Context



- 65.3 million people forcibly displaced
- 42 million people are seeking refuge globally
- 25 million more expected by 2050 due to climate change
- 21.5 million refugees
 - Over half of whom are **under the age of 18**
- Exponential increase on number of people displaced forcefully by poverty, violence and environmental crisis

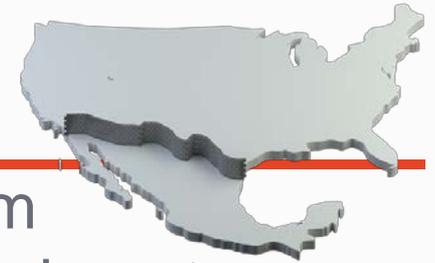
The internalization/globalization of social problems

UNHCR – The UN Refugee Agency

- <http://www.unhcr.org/en-us/figures-at-a-glance.html>

Introduction

Why Immigration & Trauma?



- Undocumented immigrants (refugees/asylum seekers) treated as criminals, unwanted immigrants and easy targets for exploitation
- Immigration = higher prevalence of anxiety, depression, posttraumatic stress disorder (PTSD) and substance abuse
- Violated human rights / unmet basic needs (food, shelter, health, education...)
- Exponential increase in the last decade of one of the most vulnerable populations: Undocumented women and children immigrant from Latin America

Overview of Basic Concepts - Trauma

Trauma

- Potentially Traumatic Event (PTE)
- Vicarious Trauma
- Complex Trauma
- “Maternal Buffer”



Provider's Cultural Counter-Transference

- Culture, class and race are significantly different/similar
 - Unspoken but perceived by the client
 - Ethnic minority groups have the highest premature termination
- The provider as the representative of institutional power - the “objective reality”
- Diversity challenges generalizability of theories
- Assumptions about healthy competent behavior
- American clinical training
- American life values

Cultural counter-transference regarding response to Potentially Traumatic Event and symptomatology

Provider's Cultural Counter-Transference

- Cultural counter-transference - Cognitive and affective implications
 - Academically informed theoretical beliefs and practice orientation
 - Diagnostic and clinical lenses that informs practice approach
 - Personally driven idealizations and prejudices toward ethnic group
 - Supposed ease & openness – that we don't have cultural and social biases / free of ethnic prejudices
- Personally driven biases about their own ethnic group
 - Vigilant of using clinical situations to enact personally driven, culture-laden personal conflicts. Reverse power.
 - Willingness to question ethnocentric Euro-American ideas
 - Differences, similarities and the impact in the relationship

Overview of Basic Concepts

Cultural Competence

Awareness of one's own cultural identity and views about difference, and the ability to learn and build on the varying cultural and community norms. Enabling providers to interact effectively with people of different cultures.

It requires to be respectful and responsive to the health beliefs and practices including the cultural and linguistic needs of diverse population groups

Cultural Humility

Refers to the ability to maintain an interpersonal stance that is other-oriented (or open to the other) in relation to aspects of cultural identity that are most important to the person

Hook, Davis, Owen, Worthington and Utsey (2013)

Immigration - Before

Events experienced prior to immigration



- ▶ Pushing Factors
 - Hunger, violence, extreme poverty... = Violations to Human Rights
 - Geopolitical and environmental crisis
 - Chronic Exposure to Potentially Traumatic Events (PTEs)
 - Biopsychosocial assessment of life in country of origin
- ▶ Pulling Factors
 - Employment, health, safety... and to cover other basic human needs

Immigration - Before

Pre-departure context

- ▶ **Chief determinants of relocation**
- ▶ **Precipitants**
- ▶ **Plan**
 - Resources, stressors, when, why, how, where, with whom...



Immigration - During

Physical, emotional, financial and other stressors

- Extreme conditions (days, weeks and even months without food or minimal needs covered)
- PTEs such as:
 - Extortion, forced labor, overcrowding conditions, dehydration/starvation, mugging, amputations, sexual and physical violence, police and other authorities abuse...
- Unattended physical and mental illness
- Distance from/loss of support networks, community and physical environment
 - Ambiguous loss
 - Disenfranchised grief



Immigration - After



Resettlement and adjustment

Complex process marked by gains, losses and implications particular to the person

- Changes in social location / power & privilege
- Fear of repatriation
- Isolation - rebuilding support networks
- Downturn in socio-economic status vs. The American Dream

Immigration - After



- ▶ Substandard living conditions
- ▶ Lack of fluency in English
- ▶ Dystonic ethnic traditions
- ▶ Development of support networks
 - Avoidance due to trauma
- ▶ Asylum-seeking or any other path to lawful immigrant status
- ▶ Provision of services by host-country institutions that are foreign to their language and unique cultural idioms of distress
- ▶ Impact on life of undocumented status
- ▶ Possible resolutions to undocumented status
 - Expert advice – Reliable immigration attorney

Trauma exposure can remain predictive of psychological distress five years or more after migration

Recommendations

Assessment

Evaluate basic needs and client's priorities

- Culturally competent agency/provider
 - Services in client's native language
 - Culture and language shape the expression of psychological distress
- Intentional use of languages - primary/native and secondary
- Second language: Anxiety and Symptom Expression
- Impact of trauma on assessment process

Recommendations

Assessment

- Assess level of bilingualism and intervene to decrease anxiety associated to lack of fluency in English
- Life narrative as starting place to understand the context where the person is coming from
- History of experiences of oppression and privileges in country of origin
- Race, ethnicity, gender, sexual orientation, religious/spiritual beliefs, class, political affiliation...
 - At a micro, mezzo and macro level

Assess for resilience, strengths, protective factors and coping mechanisms before immigration

Recommendations

Assessment

- Assess what is valued or not from culture of origin
- Connections and disconnections with community in hosting country
- DSM 5 - Cultural Formulation Interview
 - Cultural Definition of The Problem; Cultural Perception of the Causes, Context and Support; Cultural Factor Affecting Self-Coping and Past Help Seeking; and Cultural Factor Affecting Current Help Seeking
- DSM 5 - Cultural Concepts of Distress
 - Culturally syntonc behaviors, affects and belief systems can be misunderstood as pathological

Recommendations

Theoretical & Intervention Models

- Case Management/mix model
- Narrative Therapy
- Strength-Based Perspective
- Resiliency
- Empowerment

Treatment

- Interdisciplinary team (case manager, mental health provider, PCP, attorney...)

Interventions at a Meso & Macro Levels

- Community Organizing
- Advocacy

Resources

- ▶ The Beast (2010). Documentary by Pedro Ultreras
 - <https://www.youtube.com/watch?v=JOw5YEIlg-t4>
- ▶ Nazario, Sonia. (2006) Enrique's Journey: The story of a boy's dangerous odyssey to Reunite with his Mother. NY: Random House. ISBN 978-0-8129-7178-7
 - <http://www.enriquesjourney.com/>
- ▶ PTSD Check List and Scoring (2003) U.S. Department of Veteran Affairs.
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- ▶ TF CBT Web (2005). Trauma-Focused Cognitive Behavioral Therapy. Medical University of South Carolina
 - <https://tfcbt.musc.edu/>
- ▶ The DSM 5 and the Cultural Formulation Interview: What It Is and How to Implement It (2017). The Community Technical Assistance Center of New York (CTAC).
 - <http://www.ctacny.org/training/dsm-5-and-cultural-formulation-interview-what-it-and-how-implement-it>

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- UNHCR – The UN Refugee Agency
 - <http://www.unhcr.org/en-us/figures-at-a-glance.html>
- U.S. Census Bureau, The Foreign-Born Population
 - <https://www.census.gov/topics/population/foreign-born.html>

Q&A



Next Webinar...

Tomorrow in Spanish!!

Inmigración y Trauma: Antes, Durante y Después

June 22, 2017 | 12–1pm

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