

Promoting Mental Health in Immigrant Children



**DC CHAPTER OF THE
AMERICAN ACADEMY OF PEDIATRICS,
IMMIGRANT CHILD HEALTH COMMITTEE**

**IN PARTNERSHIP WITH THE DC MENTAL
HEALTH ACCESS IN PEDIATRICS PROGRAM**

MAY 16, 2017



American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™

DISTRICT OF COLUMBIA CHAPTER

“These children have crossed the U.S. border,
but their journey is far from over.”



Sections 

The Washington Post

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DEPARTURES



Clockwise from top left: Abner Dionisio, 10; Mynor Cerros, 18; Humberto Vasillo, 8; Daniel, 6; Brandon Terriquez, 15; Tania Latin, 13.



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CHAPTER INITIATIVES

Immigrant Health



Children of immigrants are the fastest growing population of children in the United States and have contributed to the entire growth in the nation's child population over the past decade, in particular here in DC. More recently, there has been an increase in children themselves immigrating to the United States. Immigrant families are racially and ethnically diverse, and immigrate for a variety of reasons that may include seeking economic opportunity, reuniting with family, fleeing war or violence. Caring for immigrant children and families comes with its own set of challenges, and pediatricians can play a special role in supporting their health and well-being. The newly created DC AAP Immigrant Health Committee is a group of providers with a common interest in caring for these children and their families. Our goal is to provide support for one another, share resources, advocate for immigrant children, and educate ourselves and

Healthcare
Providers

Mental Health
Professionals



Community and
Governmental
Representatives

School
Personnel



- Saara Amri, LPC
- Dr. Matthew Biel
- Ms. Wanda Flowers
- Dr. Heidi Schumacher
- Ms. Hollie Storie
- Ms. Tysus Jackson
- Children's National WebEx team
- DC AAP Planning Committee





<https://www.youtube.com/watch?v=QsAdHLki9Iw&feature=youtu.be>

Goals



- **Distinguish the root causes of mental health illness in local immigrant children and learn how common mental health concerns can manifest themselves.**
- **Create connections between school personnel and healthcare providers regarding a student's/patient's mental health.**
- **Come away with next steps in developing collaborations and with at least 1 mental health resource in each of our workplace communities.**

Common Themes



- **Needing greater access to language and culturally-appropriate mental health services**
- **Distinguishing adjustment behaviors from learning difficulties from psychiatric illnesses**
- **Being bullied or labelled as gang member because of country of origin**
- **Creating relationships and spaces that encourage children and families to share their experiences**
- **Finding ways to collaborate and share information to provide more comprehensive care**

Keynote Speaker



IMMIGRANT YOUTH WELLBEING: IDENTIFYING AND ADDRESSING MENTAL HEALTH NEEDS

SAARA AMRI, LPC

Group Engagement Activity





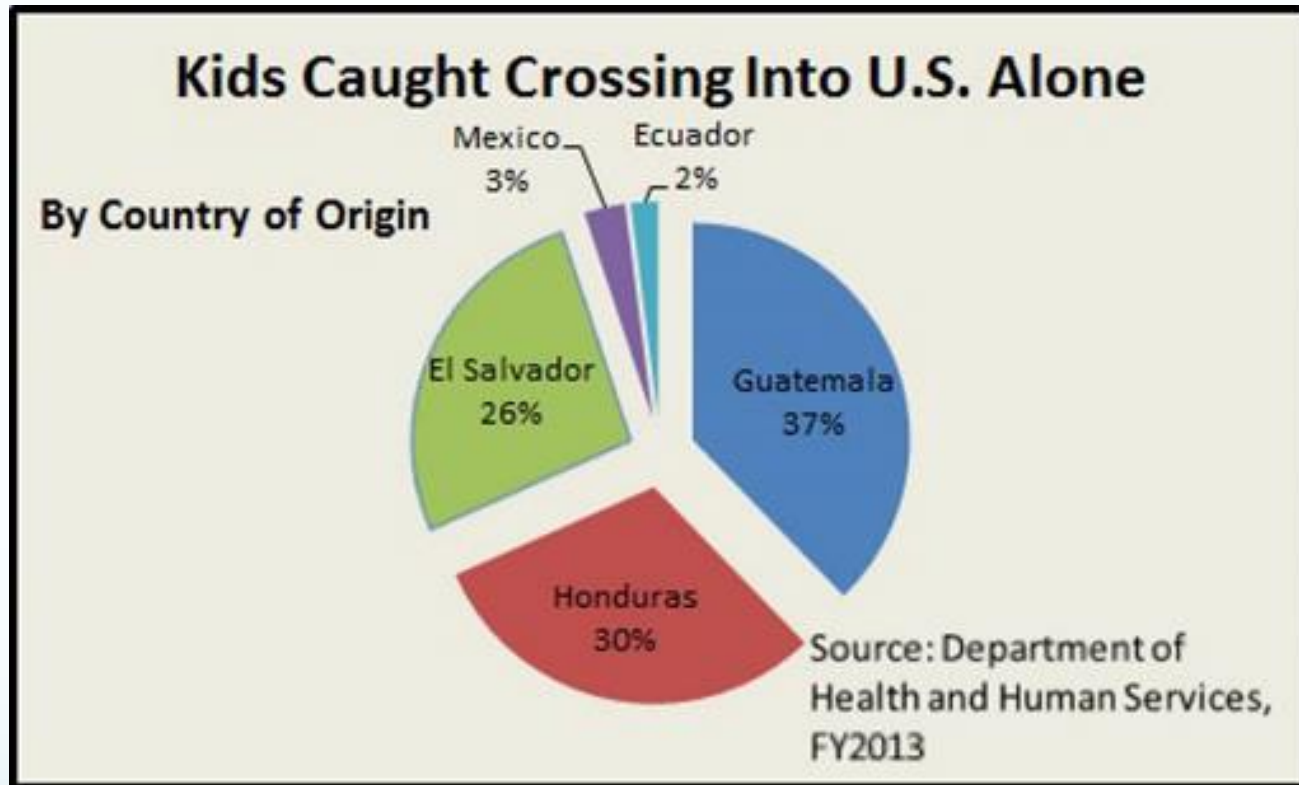
Northern Virginia
Family Service

Immigrant Youth Wellbeing: Identifying and Addressing Mental Health Needs

Saara Amri, LPC
Northern Virginia Family Service

In FY 2016, 5,250 unaccompanied immigrant minors were placed with a legal guardian in the DC Metro Area (DC, Northern Virginia and Maryland).

Who are unaccompanied youth in America?



Average age at arrival is 15-17 but some have entered as young as 3 years old. Three quarters are male.

Reasons for Migration

- War
- Poverty
- Lack of consistent caregiver
- Gang or community violence
- Family reunification
- Human trafficking

Sociopolitical Stressors

Pre-Migration

- Witnessing and/or experiencing violence
- Death threats
- Sexual and/or physical abuse
- Limited or disrupted education
- Separation from one or both parents

Migration

- Exploitation
- Abuse
- Climate/environmental dangers
- Witnessing violence
- Separation from loved ones
- Detention at the U.S. border

Post-Migration

- Physical and mental health issues
- Interrupted education
- Cultural and language barriers
- Family reunification
- Physical safety issues
- Discrimination/marginalization

Mental Health Struggles

- Trauma
 - Disturbed sleep/nightmares
 - Fears and worries
 - Intrusive thoughts and memories
 - Dissociation
 - Mistrust of others
- Anxiety
 - Excessive worries and concerns
 - Intrusive thoughts
 - Difficulty sleeping
 - Difficulty with concentration

Mental Health Struggles Cont.

- Attachment
 - Difficulty forming healthy attachments with others
 - Forming unhealthy or damaging attachments/relationships
- Depression
 - Isolation/withdrawal
 - Lack of appetite
 - Disturbed sleep
 - Anger
 - Truancy
 - Suicidal ideation/Self-injury

Acculturative Stress vs. Diagnostically Significant Struggles

- Not all unaccompanied youth experience trauma or have mental health struggles.
- It is **normal** and expected to have an adjustment period or a culture shock
- It is also **normal**, given what many of these youth experience, to have trauma, depression or anxiety.
- What is cause for concern is when daily functioning is impacted (social, academic, emotional).

True Grit

- Unaccompanied immigrant youth possess resilience and perseverance.
- Unaccompanied immigrant youth are survivors.
- Unaccompanied immigrant youth have hopes and dreams.



Prevention and Intervention

Multidisciplinary approach: Doctors, social workers, teachers, school counselors, mentors, immigration attorneys, law enforcement.

- Prevention
 - Parenting education
 - Education on acculturative stress
 - Linguistically sensitive services
 - Advocacy with the education system
 - Engagement in extracurricular activity
 - Safety and stability
- Intervention
 - Support groups
 - Individual and family counseling
 - Systemic advocacy

Questions

Saara Amri, LPC

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Conclusion & Resources



- DC AAP Immigrant Health Toolkit
aapdc.org/toolkit/immigranthealth
- Resources in folder
 - DC MAP & BHIPP
 - Fairfax Reunification Program
- Please check your email and complete the post-survey; limited paper available
- CME credit details will be sent via email
- Next steps – DC AAP will follow up with participant groups

Questions?



**DANIEL NEWMAN, MD
CO-CHAIR**

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