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# The Children Left Behind: The Impact of Parental Deportation on Mental Health

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**Abstract** The current report describes the results of the first known study examining the impact of parental deportation on the mental health of children using psychometrically reliable and valid assessment instruments. Participants reported on the current internalizing and externalizing problems of children under their care using the Spanish language version of the Child Behavior Checklist and completed a trauma history and demographic questionnaire that asked specifically about parental deportation status. Children with a deported parent ( $n = 23$ ) were significantly more likely to display externalizing and internalizing problems than children whose parents were not deported or in the process of deportation ( $n = 52$ ). Associated demographic characteristics and trauma history were controlled in these analyses. The results are discussed in the context of evolving immigration policy in the United States.

**Keywords** Child mental health · Deportation · Spanish language · Cultural issues · Parenting

## Introduction

Immigration policy in the United States remains a contentious issue at the forefront of political and social

discussions. Oftentimes this debate centers on how best to respond when the individual at risk for deportation is the parent of a child with legal status to remain in the U.S. Deportation of the individual may necessitate the child's separation from the parent; allowing the individual to stay in the U.S. grants an exception to immigration policy that many suggest may encourage other undocumented immigrants to attempt to give birth to children in the U.S. (e.g., North 2011).

In 2011, nearly 400,000 individuals were deported from the United States (Immigration and Customs Enforcement 2011). Baum et al. (2010) estimate that over 100,000 children, the vast majority of whom were American citizens, had a parent deported between 1997 and 2007. Other estimates suggest the number of children with a deported parent in recent years may be much higher (Wessler 2011).

Observations in the clinical literature that children experience significant distress when separated from their parents can be traced to before World War II (Hoffman 1934) and clinicians have provided significant theoretical treatises on the topic (e.g., Bowlby 1973). Attachment research demonstrates the critical role that parent-child relationships play in the development of social skills (Belskey and Fearon 2002), emotion regulation (Contreras et al. 2000) and self-concept (Goodvin et al. 2008). Not surprisingly, research examining other types of parental separation, incarcerated parents (Murray et al. 2012) or parents deployed for military service (Lester et al. 2010) for instance, have concluded that children are at increased risk for emotional and behavioral problems.

Although immigration policy and the appropriateness of deportation is a prominent political issue, empirical examination of the impact of parental deportation is rare. The studies that do exist tend to point to the same conclusion: parental deportation causes increased emotional

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and behavioral distress among children, including sleep problems, depression, anxiety, and poorer grades (Baum et al. 2010; Brabeck and Xu 2010; Dreby 2012). Although informative, these studies are limited by the fact that they typically utilize unvalidated interview or study-specific survey methods, opening the validity of the results to questions about the method of data collection and the structure of the interview or survey. In addition, these studies do not typically examine the impact of other negative or traumatic events that may be prevalent in the lives of these children while their family is attempting to live outside of governmental awareness.

Absent from the current literature is an empirical examination of the impact of parental deportation on children using standardized, psychometrically defensible measures that recognizes the potential contribution of other untoward events on mental health outcomes. The current paper provides such an analysis. Based on related findings and theoretical propositions, the primary hypothesis for the current study is that children who currently are separated from a parent as a result of deportation will demonstrate more significant externalizing (e.g., aggression, conduct problems) and internalizing (e.g., anxiety, depression) problems than children with parents of legal status.

## Method

### Participants

Participants were individuals in the state of Texas attending free legal consultations focused on immigration issues offered by a nonprofit organization. These sessions provided overview information about the immigration system and policy in the United States, followed by one-on-one consultations with lawyers specializing in immigration law. Individuals attended to seek legal assistance for themselves, family members, and/or friends. Estimates were that approximately 100 individuals attended each of the 8 sessions attended by researchers for the purposes of data collection.

Although it is estimated that over 800 individuals attended the sessions in which participation in the study was offered, caregiver reports for only 95 children were included in the current analysis. Of the children for whom data were obtained, 54.7 % were male, the mean age was approximately 9 years, and 87 % of the children were born in the United States. Seventy-nine percent (79 %) of those providing the information were mothers of the children. The majority of children had at least one parent whose country of origin was Mexico; however, other countries of origin included Guatemala, El Salvador, Colombia, and Nicaragua, among others. Complete demographics of the

sample are provided in Table 1. It should be observed that the skepticism and refusal of a large portion of caregivers introduces a source of sampling bias whose effect cannot be estimated.

### Procedure

Prior to the commencement of each immigration consultation session an announcement was made by research personnel describing the study as an examination of the impact of documented and undocumented immigration on children. The announcement was made in Spanish as practically all of the attendees were from Spanish-speaking countries and spoke Spanish as their first language. Participants were told that volunteers were required to currently be caring for children between the ages of 6 and 12, regardless of the immigration status of the child's parent(s), and be able to read in Spanish. Those who wished to volunteer were instructed to approach the researchers set up at a table in the room as they waited their turn for the individual legal consultations. Numerous potential participant caregivers approached the researchers to ascertain how the data might be used. Despite assurances that the data were collected anonymously, the requirement of signing the consent form was often sufficient grounds to decline participation. Many potential participants appeared concerned regarding who would have access to their individual forms and if they could be used to identify them or against them in any potential legal proceedings. Because of the nature of the data collection process, it was not possible to collect data on the demographic characteristics of those who declined participation after showing initial interest or those individuals who did not approach the researchers. Data for this project were collected between August and December of 2011.

Participants volunteering for the study were asked to read the informed consent form and a Spanish-speaking individual involved with the project ensured that they understood all pieces before proceeding. While reviewing the informed consent form, the research staff conducted an informal assessment to screen out individuals who appeared to have difficulty reading the Spanish language. No participants were removed from participation due to reading ability. Participants signed the informed consent forms, which were then placed in a separate folder to insure that the names of individuals were separated from the data they provided, so as to assure anonymity of their responses. After informed consent was obtained, participants were provided with an envelope that included all of the measures included in the current study. Once participants completed the forms they were asked to return all materials to the original envelope and deposit the envelope in a box. Spanish-speaking members of the research team were

**Table 1** Demographic and descriptive statistics

Variable	Control ( <i>n</i> = 52)	Parent fighting deportation ( <i>n</i> = 20)	Parent deported ( <i>n</i> = 23)
Sex			
Male: <i>n</i>	29	10	13
Female: <i>n</i>	23	10	10
Age			
<i>M</i> ( <i>SD</i> )	8.4 (2.0)	9.8 (1.9)	9.3 (1.7)
Family income			
<\$30,000 ( <i>n</i> )	43	18	17
More than \$30,000 ( <i>n</i> )	9	1	3
Not reported	0	1	3
Parents' marital status			
Married ( <i>n</i> )	18	14	6
Never married ( <i>n</i> )	16	5	7
Other ( <i>n</i> )	17	1	10
Not reported	1	0	0
Child's nation of birth			
United States ( <i>n</i> )	45	17	21
Other ( <i>n</i> )	7	3	2
Mother's nation of birth			
Mexico ( <i>n</i> )	33	15	13
Other ( <i>n</i> )	18	5	9
Not reported ( <i>n</i> )	1	0	1
Father's nation of birth			
Mexico ( <i>n</i> )	30	15	15
Other ( <i>n</i> )	22	5	8
Parent fighting or deported <sup>a</sup>			
Mother ( <i>n</i> )	N/A	9	5
Father ( <i>n</i> )	N/A	22	16
Both ( <i>n</i> )	N/A	5	2
Child witness parental arrest			
Yes ( <i>n</i> )	N/A	2	3
No ( <i>n</i> )	N/A	16	19
Not reported	N/A	2	1
Trauma history			
Yes ( <i>n</i> )	25	8	8
No ( <i>n</i> )	27	12	15
Reporter's relationship to child			
Mother ( <i>n</i> )	46	14	15
Father ( <i>n</i> )	6	6	2
Other ( <i>n</i> )	0	0	6
Child Behavior Checklist <sup>b</sup>			
Internalizing			
<i>M</i> ( <i>SD</i> ; 95 % <i>CI</i> )	52.6 (14.0; 48.7–56.5)	57.2 (13.3; 50.9–63.4)	61.0 (15.8; 54.2–67.9)

**Table 1** continued

Variable	Control ( <i>n</i> = 52)	Parent fighting deportation ( <i>n</i> = 20)	Parent deported ( <i>n</i> = 23)
Externalizing			
<i>M</i> ( <i>SD</i> ; 95 % <i>CI</i> )	49.7 (12.1; 46.3–53.1)	48.5 (11.6; 43.0–53.9)	58.1 (14.5; 51.8–64.4)

*PTS* posttraumatic stress

<sup>a</sup> A number of children had a parent deported and the other parent fighting deportation. These children are included in both columns in this category

<sup>b</sup> Child Behavior Checklist scores are reported in T-scores (*M* = 50, *SD* = 10)

available to help explain individual items to the participants, but the forms were not administered in an interview format. Debriefing information, including a list of mental health resources that were sensitive to the needs of undocumented immigrants, was provided to participants after completing the forms. This project was approved by a university Institutional Review Board.

## Measures

*Demographic Form*

A demographic form was completed by all caregivers that asked specifically about the deportation history of each biological parent. Participants were required to identify whether each parent was currently deported, fighting a deportation order through legal proceedings, or neither. In addition, participants were asked to identify the child's country of birth, the country of birth of each parent, and other details related to immigration and deportation history, as well as standard demographic questions pertaining to socioeconomic status, marital status, sex, and other demographic variables. The demographic form was composed in English and translated into Spanish by a native Spanish-speaking individual. Back-translation of this instrument was completed by a separate native Spanish-speaking individual and discrepancies were discussed and resolved to yield the final instrument.

*Child Behavior Checklist (CBCL; Achenbach and Rescorla 2001)*

The CBCL is a broad-band measure of child emotional and behavioral problems. The parent-rating form used in this

study has 113 items and asks the parent or primary caregiver to rate the frequency with which their child experiences a variety of symptoms on a 3-point Likert-type scale (0 = not true; 1 = somewhat or sometimes true; 2 = very true or often true). The current study utilized the Externalizing (e.g., aggression, conduct problems) and Internalizing (e.g., depression, anxiety) composite scores. To account for possible language barriers among the participants, the Spanish version of the CBCL was used. The CBCL is one of the most widely-used measures of childhood emotional and behavioral problems and is considered one of the most used internationalized instruments (Albores-Gallo et al. 2007). Initial internal reliability (Cronbach alpha) studies of the Spanish-version yielded estimates between .89 and .94 for the internalizing and externalizing scales among a group of Puerto Rican children (Rubio-Stipec 1990). A more recent study reported similar reliability findings (Cronbach alpha coefficients between .90 and .97) among a group of Mexican children (Albores-Gallo et al. 2007). In addition, the Spanish version of the CBCL demonstrated sufficient validity with the samples in these studies.

#### *UCLA PTSD Reaction Index (UCLA-PTSD-RI) Trauma History Checklist (Steinberg et al. 2004)*

The UCLA-PTSD-RI is a caregiver-report measure of posttraumatic stress in children and adolescents. The first part of the instrument is a trauma history checklist that asks caregivers to identify whether the child has experienced each of 13 types of traumatic events in a yes/no format. The UCLA-PTSD-RI was selected for this study because of the availability of a Spanish language version of the measure. Although the UCLA-PTSD-RI includes a scale measuring posttraumatic stress, caregivers only complete these items if they identified a history of traumatic events. As such, only the trauma history checklist was used in this study to assess the experience of traumatic events not directly related to parental deportation, and participants were coded as either having experienced or not having experienced traumatic events.

#### Analysis Plan

The method of the current project yielded 3 separate and exclusive groups of children: Parent Deported (either parent is currently deported from the U.S.,  $n = 23$ ), Parent Fighting Deportation (either parent is currently fighting deportation from the U.S., but neither parent is currently deported,  $n = 20$ ), and Control (neither parent is currently deported or fighting deportation from the U.S.,  $n = 52$ ). The nature of these groups allows for examination of the impact of parental deportation, as well as the impact of stress incurred as a result of a parent fighting possible

deportation through legal proceedings. Two hierarchical regression analyses were performed; one analysis for externalizing problems and one analysis for internalizing problems. Demographic variables (e.g., sex, family income, trauma history) identified as possibly related to the outcome variables during initial analyses were entered in the first step of each hierarchical regression analysis. In the second step, the three deportation groups were entered as dummy-coded variables, with the control group serving as the referential group (Dummy 1: “parent fighting deportation” group, Dummy 2: “parent deported” group).

## Results

### Demographic Analyses

Initial analyses were completed to determine the potential impact of demographic variables on mental health outcomes. Analyses of demographic differences between the groups found no significant differences for sex ( $\chi^2 = .23$ ,  $ns$ ), family income ( $\chi^2 = 1.66$ ,  $ns$ ), child’s nation of birth ( $\chi^2 = .46$ ,  $ns$ ), mother’s nation of birth ( $\chi^2 = 1.21$ ,  $ns$ ), father’s nation of birth ( $\chi^2 = 1.92$ ,  $ns$ ) or experience of traumatic events ( $\chi^2 = 1.25$ ,  $ns$ ). However, a significant difference was observed for age [ $F(2, 92) = 4.4$ ,  $p = .015$ ], with post hoc LSD analyses showing that the control group was significantly younger than the “parent fighting deportation” group ( $p = .008$ ). In addition, significant results were obtained for the marital status variable ( $\chi^2 = 11.82$ ,  $p = .019$ ), with the Parent Deported group showing a greater likelihood of parental divorce, separation, and/or widowhood than the other two groups. The demographic compositions of the individual groups are presented in Table 1.

Although the three groups appear fairly similar on most demographic variables, the relatively small sample sizes of the “parent deported” and “parent fighting deportation” groups may result in minor differences in group demographic compositions prompting significant differences in mental health outcomes. As such, the relationships between demographic variables and mental health outcomes were examined and any demographic variable found to significantly relate to the internalizing or externalizing problems is controlled in later analyses examining the impact of parental deportation status.

First, sex differences were observed for both of the mental health outcomes: internalizing problems [ $t(93) = 2.33$ ,  $p = .022$ ] and externalizing problems [ $t(93) = 2.47$ ,  $p = .015$ ]. In each instance boys received more elevated scores than girls. Second, age was only significantly correlated with internalizing problems ( $r = .23$ ,  $p = .028$ ). Lastly, the experience of traumatic events was related to

**Table 2** Regression analyses examining mental health outcomes

Variable	Internalizing problems	Externalizing problems
Step 1: (standardized $\beta$ )		
Sex	-.24*	-.25*
Age	.24*	–
Trauma history	.26**	–
Model $R^2$	.19	.06
Model $F$	7.05***	6.08*
Step 2: (standardized $\beta$ )		
D1: parent fighting deportation	.11	-.03
D2: parent deported	.25*	.28**
Model $R^2$	.24	.14
Model $F$	5.66***	5.05**
$\Delta R^2$	.05	.08
$\Delta F$	3.09*	4.31**

\*  $p < .05$ ; \*\*  $p < .01$ ; \*\*\*  $p < .001$ 

internalizing problems only [ $t(93) = -3.08, p = .003$ ]. Other demographic variables were not related to mental health outcomes.

### Regression Analyses

The first hierarchical regression analysis examined the impact of parental deportation status on internalizing problems. The first step of the analysis found that sex, age, and trauma history accounted for 19 % of the variance (see Table 2). The addition of parental deportation status in the second step accounted for an additional 5 % of variance, a statistically significant improvement over the first model ( $\Delta F = 3.09, p = .05$ ). Children in the “parent deported” group displayed significantly higher levels of internalizing symptoms than children in the control group ( $\beta = .25, t = 2.47, p = .015$ ).

The second hierarchical regression analysis examined externalizing problems. Sex was the only demographic variable entered in the first step (see Table 2). The addition of parental deportation status significantly increased the amount of variance accounted for, from 6 % in the first step to 14 % in the second step ( $\Delta F = 4.31, p = .016$ ). As before, having a parent deported emerged as the most influential factor ( $\beta = .28, t = 2.72, p = .008$ ).

### Discussion

The issue of parental deportation will likely remain a heatedly debated topic. The current study can inform that debate by providing data describing the relationship of

parental deportation and child emotional and behavioral concerns as measured by a standardized, objective, and psychometrically defensible assessment measure. The hypotheses of the current study were supported: children with a deported parent were more likely to demonstrate elevated levels of internalizing and externalizing problems than children without a deported parent. Especially relevant is that these analyses controlled for the impact of associated demographic variables and trauma history.

Although unfortunate, the results of the current study are not altogether surprising. Indeed, prior studies have suggested that parental deportation exerts a detrimental impact on the emotional and behavioral functioning of children (Baum et al. 2010; Brabeck and Xu 2010; Dreby 2012). Placed within the larger developmental context, the importance of a supportive primary caregiver for the adaptive development of social and emotional capabilities is well established (Sroufe et al. 2005; Thompson et al. 2006). Removing that caregiver from the child may result in aberrant development, increased stress as a result of losing a primary social support, and concern about the well-being of the parent.

Although the current study cannot make specific public policy recommendations, it should raise awareness of the potential impact of parental deportation on social and public health systems. From a prevention perspective, it appears imperative that attempts are made to preserve the parent–child relationship during instances when undocumented immigrants are identified by governmental agencies. In situations when the relationship is not preserved as a result of deportation, the remaining children may face a multitude of barriers in accessing medical and mental health care (Henderson and Baily 2013). For instance, Hispanic youth, including immigrants, utilize mental health services at significantly lower rates than other populations (Kataoka et al. 2002) and the causes appear complex (Bridges et al. 2010). However, untreated child mental health problems may persist or exacerbate and eventually burden residential treatment facilities, psychiatric hospitals, and the criminal justice system. A comprehensive public health policy that addresses identifiable barriers to accessing evidence-based treatment services for the children of deported parents should be a priority.

It is important to recognize the limitations of the current study. Most notable is the relatively small sample size. The “parent deported” group had only 23 children, while the “parent fighting deportation group” had only 20 children. It is interesting to note that the effect sizes were of such magnitude that even with the small sample sizes, statistical significance was achieved. However, studies with larger sample sizes would yield greater confidence in generalizing these findings. There also is an obvious selection bias in the sample. As mentioned previously, a large number of

potential participants declined participation, some after showing initial interest. It is possible that a specific qualitative difference exists between those who chose to participate and those who did not, and that this difference may impact the obtained results. In addition, the cross-sectional nature of this study prevents implying causal pathways. Lastly, it was not possible to obtain child self-report measures, and it might be expected that the children would provide differing results than their caregivers (Canavera et al. 2009; Hartley et al. 2011).

As discussed throughout this report, numerous difficulties were encountered; foremost among these factors were the significant distrust of researchers by potential participants and the near uniform refusal of the caregivers to allow access to the children of interest. Recent deportation suspensions by the federal government may offer an opportunity to address some of these concerns. However, given the often temporary nature of political policy shifts, the window available for researchers to take advantage of this occasion may be limited. Future research should attempt to remedy the shortcomings of the current study and do so within the current political atmosphere.

Despite the limitations of the current study, the data obtained suggests potentially significant emotional and behavioral consequences to the child when a parent is deported and the child stays in the country. There are an estimated 5.5 million children in the United States with undocumented parents, and 75 % of these children are natural born U.S. citizens (Chaudry et al. 2010). These numbers suggest that millions of children in the United States are at risk for experiencing the impact of parental deportation, and the current study suggests that children of deported parents are at increased risk for a multitude of emotional and behavioral problems. It is vital that U.S. immigration policy provides a coherent and effective approach for attending to the emotional and behavioral needs of children whose parents are undocumented immigrants.

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