Psychosocial Protection of Unaccompanied and Separated Minors

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Psychosocial challenges from an Asian cultural perspective

Psychosocial perspective considers social and psychological and the environment. Critical factors to consider include: Culture; Child rearing socialization and psychosocial effect.

For victims of trafficking and sexual exploitation in Asia cultural factors considered are traditional Asian obligation to family and cultural stigma associated with rape.

Consequences of trauma experienced by Asian children include loss of cultural identity, intergenerational relationships, mistrust, fear and trans-generational trauma.

Treatment in the Asian and other cultural contexts should include cultural knowledge and avoiding over pathologizing the child’s behavior.

People who work with children should be careful not to mistake normal reactions to trauma as pathological responses.

Listening to the child and letting the child have their own voice and tell their story is important. Incorporating traditional healing such as Monks conducting a cleansing ceremony for rape victims can help destigmatize the child.

Engaging the community is also key.

Creating surrogate families or communities as a support system can help children work through trauma and rebuild lives without stigmatizing the child.

Other useful interventions included: building upon children’s current coping mechanisms, group counseling, humor and advocacy.

Biology of Trauma

Understanding the biology of trauma is helpful with developing treatment programs. Trauma is a stressor that overwhelms and individual’s capacity to cope. The brain adapts to survive after trauma in different ways, some of which the individual is not cognizant. An individual who experiences trauma loses the ability to discriminate between varied degrees of stimulus, which obstructs ability to regulate, and dysfunctional or abnormal behavior may result.

In the DUICS Treatment program a trauma framework seeks to help in improving a child’s capacity to regulate themselves; work with staff to help children play and feel joy and remind and allow service providers to they need to take care of themselves. If a person is grounded they can be a better listener and it makes them more effective in their work. It also helps to avoid burnout and minimizes boundary violations.
Specific Issues for Unaccompanied and Separated Children include: loss of security; need for guidance; no cultural or family roots; maybe anger and deep sadness; no longer term families ties or bonds.

Direct application of Western child development theories are not useful in dealing with children in from different cultures

Numerous associated problems including: sexual and physical abuse; drugs; alcohol; health problems; pregnancy; STDs; education-preparation key; longer term problems and society.

Mental Health Assumptions

Unaccompanied and Separated Children are At higher risk for mental health problems

Western based models or therapies are not applicable

Treatment requires creative counseling

Linkages with human rights is key

Allowing for child to talk

Multi level model Psychotherapy and Social Justice (MLM)

Level I –Mental Health Education-Inform the child about the process and what to expect

Level II-Treatment Psychotherapy and counseling-including child and culturally appropriate activities including storytelling, projective drawing, imagery and psychodrama, and informal counseling (while driving in the car).

Level III- Cultural Empowerment – help children master their environment.

Level IV-Integration of Western and Indigenous Healing methodologies.

Level V Social Justice and Human Rights

What is Psycho social? Audience Answer

Culturally sensitive and embedded in the community

Sense of self and relationship

Psychological approach to build and reinforce society.

Where is the place for Social Justice and Human Rights in Healing?

Part of healing is social justice and giving the child a voice.

From the biological perspective child victims have limited access to justice and human rights because they are disregulated. Helping them with the trauma can assist with the access.

When the culture conflicts with ability to advocate-focus on how the child is doing in the context of where they are.

Two ah ha moments

Service providers need to take care of themselves to be effective

Service provider shouldn’t force western models in different cultural contexts