Healthy Mind, Healthy Future
Promoting the Mental Health and Wellbeing of Children in Immigrant Families in California
Foreword

Across the globe and the political spectrum, children should be universally valued and protected, yet the Trump Administration’s cruel and inhumane immigration policies, especially family separation, bring back memories of the darkest times in United States history. During several periods in our past, government officials sanctioned the separation of children from their parents – during slavery, when Native American children were sent to boarding schools, the internment of Japanese-American parents, and the criminalization of black parents.

Today, a blatant disregard for the health and wellbeing of children, particularly those in immigrant families, is traumatizing a population of children across California and the country. It is sending a cold, calculated message of cruelty that defaces this country’s long-held values of due process and inclusion.

We, like many in California, are inextricably linked to the challenges confronting immigrant families today – one of us is the daughter of Mexican immigrants and the other an immigrant from the Philippines. We are also leaders of two nonprofit organizations advocating for families in the state and across the nation – one through advocacy for children and the other through advocacy for immigrants.

The communities we serve are diverse, yet they also have many things in common. Half of children in California are from immigrant families; more than one and half million have an undocumented parent; and 285,000 are undocumented themselves. In California, the advancement of critical policy initiatives and programs that support immigrant integration and help families feel safe in their communities has only been possible because of a strong and diverse coalition that unites a number of different issues and experiences.

The Children’s Partnership is a nonprofit, advocacy organization that works to improve the lives of children where they live, learn, and play. Since 1993, we have worked to advance the health and well-being of underserved children in California and in the country through meaningful community partnerships, forward-thinking research, and community-informed policy.

The California Immigrant Policy Center was founded in 1996 to advocate for policies that uphold the humanity of immigrants and refugees while advancing racial, social, and economic justice. CIPC works with coalitions throughout the state to further our shared policy goals.
Executive Summary

The current Federal Administration’s aggressive immigration enforcement policies and inflammatory rhetoric toward immigrant communities have negatively impacted the mental health and wellbeing of children in immigrant families. As California continues to serve as a beacon of hope for our nation and immigrant communities, The Children’s Partnership and the California Immigrant Policy Center launched Healthy Mind, Healthy Future, a research and policy project focused on better understanding the impact of immigration enforcement on the mental health and wellbeing of children in immigrant families. In doing so, The Children’s Partnership and the California Immigrant Policy Center sought to identify what California can do today to further support children in immigrant families through the development of a policy agenda to ensure all children, regardless of immigration status, remain healthy, feel secure, and continue to thrive.

This report documents the Healthy Mind, Healthy Future research project, including results from focus groups and surveys among immigrant families, surveys among health care providers, and key informant interviews among a variety of stakeholders throughout California. The report also identifies promising programs and practices in California that demonstrate how many communities in California are taking matters into their own hands to help mitigate the increased fear and anxiety among immigrant families and provide a supportive environment for them and their children.

It is from this place of connection and commitment that The Children’s Partnership and the California Immigrant Policy Center join efforts to identify how California can do better to ensure that children in immigrant families are healthy, secure and continue to thrive, even as federal policies make achieving this goal more difficult.

By defining issues from a children’s perspective, we recognize the opportunity to deploy a more humane approach to policymaking. Immigration is a politically charged issue, but as the decades-long journey of California demonstrates, from anti-immigrant laws to today’s position of inclusion, the path forward may be challenging, but it is possible.

The following pages provide critical insight into what California can do to further support the wellbeing of children in immigrant families. It calls on each of us to take responsibility in building a better California and a better country. The history of our state and our nation are evidence that we have been here before and can therefore change the course of history once again. The shifting demographics and the attendant political power it brings provides an opportunity to rewrite history - to not only fight against policies and initiatives that take us backward, but also to realize a stronger, more inclusive agenda for children and families. We remain hopeful in our shared commitment to working together and with you to ensure a bright future for our children and for all of us.

In Solidarity,

Mayra Alvarez
President, The Children’s Partnership

Cynthia Buiza
Executive Director, California Immigrant Policy Center

In Solidarity,
Research Findings

The current hostile environment contributes to heightened stress, fear, anxiety, and depression that, combined with a pre-existing reluctance to access health care services and participate in programs and activities that promote wellbeing, often results in distractions in school and struggles at home. These events can derail an otherwise loved, vibrant, healthy, and capable child’s path to success. However, despite the current stress and fear that immigrant families face, our research uncovered the resilience of these families, as well as many promising practices that local community leaders have implemented to help families feel supported. Research findings focus on the following:

- Current political climate of the United States
- What immigrant parents want for their children
- Immigration status: a barrier to parents’ dreams and goals
- An anti-immigrant climate impedes success at school
- How immigrant parents and children are feeling

California can continue to build on the progress made at the state level in the last two decades by advancing an inclusive and progressive agenda reflecting the diverse communities that make up the state. Based on our research findings and subsequent conversations with key partners and stakeholders, the policy and programmatic recommendations included in this report offer a path forward to support the healthy development of children in immigrant families and create a more inclusive environment where all families can thrive.

Policy and Programmatic Recommendations for a Brighter Future for Children in Immigrant Families

Policy and practice recommendations that were generated as a result of research activities include:

1. STRENGTHEN COMMUNITY SAFETY TO ENSURE THAT CHILDREN, YOUTH, AND FAMILIES FEEL SECURE AND SUPPORTED IN THEIR COMMUNITIES

- Federal policymakers should pass legislation supporting codification and expansion of the current national sensitive locations policy, particularly at or near places that are critical to children’s health and wellbeing. Schools are considered safe spaces in ICE memos, but a law would codify limits on immigration enforcement actions at or near sensitive locations, such as a private playground of a child care center or school.
- State agencies should carefully follow federal law and guidance to ensure information will not be shared with federal immigration officials.
- State agency staff and administration officials should support the full implementation of California laws, including the California Values Act (SB 54) and the Education Equity Act (AB 699), that protect immigrants and their families in their communities. Activities may include: a thorough assessment to identify what steps individual health clinics or the state is taking to support community needs and the gaps that still exist.
- State associations representing educators, health and social service providers, and businesses should support implementation of SB 54 through member education, public awareness, and adoption of safe spaces policies in health care and social service settings.
- California schools should implement AB 699 and provide safe spaces for parents and family members to express concern and learn about immigration policy, including programs that educate families about their rights.
- The California Department of Education should encourage Local Educational Agencies to address School Climate (Priority 6) in their Local Control and Accountability Plan, directly linking opportunities to create welcoming environments, particularly for students in immigrant families.

2. INVEST IN COMMUNITY-BASED APPROACHES AND A COMMUNITY-BASED WORKFORCE TO SUPPORT IMMIGRANT FAMILIES

- Local government and philanthropic organizations should support legal services and advocacy organizations in training existing health navigators, enrollees, and community health workers, and by expanding the workforce to educate immigrant families about their rights and advocate for policy changes.
- State and local government should distribute information and resources, train staff, and expand community engagement and partnership programs for local residents in innovative ways and support model practices.
- California state agencies and philanthropic organizations should provide incentives for schools to become forums for educating families about their rights and to create programs to support them, expanding upon and developing other school-based campaigns that provide information to immigrant families across the state.
- Philanthropic organizations should invest in the identification, strengthening, and replication of leadership networks that empower residents to educate their communities.
- Researchers should partner with community members to identify, evaluate, and expand upon community-based therapy models that work, including alternative or non-traditional methods of care.

3. IMPROVE ACCESS, COORDINATION, AND INTEGRATION OF SERVICES TO REDUCE BARRIERS FOR IMMIGRANT FAMILIES

- Federal policymakers should stop efforts to discourage immigrant families and children from accessing nutrition, health and other programs and services.
- State policymakers should grant all low-income adults, regardless of immigration status, access to health care services that would allow them to live healthier lives and prevent the onset of illness to better care for their children.
- Local policymakers should adopt or expand upon county programs to provide health care services to their residents and build momentum for statewide coverage solutions.
- State and local policymakers should provide more stable and flexible funding sources that create incentives for integration and collaboration between health clinics, community-based organizations, schools, legal services, and more.
- State and local policymakers should provide stable and flexible funding sources to create incentives that identify and chip away at the social determinants of health.
- State agencies should develop a system across the state that identifies mental health care that is culturally competent and contextually aware of immigrant families’ unique needs to support referrals.
- Community organizations should offer safe spaces for their community members to share mental health impacts.
- Philanthropic organizations should support researchers to evaluate existing and new integrated service delivery models in order to refine and expand what works.
- Philanthropic organizations should also support and evaluate options that build on the skills and social capital of volunteers to provide support to immigrant families needing multiple services.
Introduction and Background

4. BUILD CAPACITY OF PROVIDERS, EDUCATORS AND OTHERS WHO INTERACT WITH IMMIGRANT FAMILIES

- Department of Homeland Security should strengthen and train staff on protocols to minimize harm to children if they are present during immigration enforcement actions. They should also ensure that detained or deported parents are able to make decisions about their child’s care.
- State agencies should include trauma-informed care training as part of Continuing Medical Education, medical school curriculum, teacher and school administrator training, and licenses for social workers and other mental health professionals.
- California should adopt a statewide trauma-informed care strategy for child-serving programs and initiatives that is adapted to include the unique needs of immigrant families.
- Health plans, hospitals, and clinics should conduct education and outreach policy in newsletters and trainings to their frontline staff, providers, and executives regarding the impacts of immigration enforcement.
- Philanthropic organizations should support dissemination of Know Your Rights training to a wide array of sectors working with immigrant families.

5. EDUCATE AND ENGAGE COMMUNITIES ABOUT IMMIGRANT RIGHTS AND BUILD PUBLIC WILL TO TAKE ACTION

- Advocacy groups and philanthropic organizations should continue to share accurate information related to the immigrant community and recognize immigrant contributions.
- Policymakers and agency leaders, at the state and local level, should more frequently highlight the value of immigrants and immigrants’ rights publicly with mainstream and ethnic media. They should also use their platform to partner with community-based organizations to spread clear messages that educate immigrant families on immigration policy and their rights.
- Philanthropic and advocacy groups should create partnerships with ethnic and mainstream media to provide Know Your Rights information, programs where people can ask questions, and other helpful educational programs, rather than perpetuating terrifying stories about immigrants.
- Advocacy groups should mobilize and organize as a way to build on families’ resiliency.
- State voter engagement efforts should strategize at the neighborhood level and take on the role of advocating on behalf of their local communities, including immigrant families.
- Philanthropic organizations, advocacy groups, and researchers should raise awareness among the public and policymakers about the importance of children of immigrants to California’s future.

Where We Go From Here

We join efforts to ensure we work together to do more to protect and defend the wellbeing of children in immigrant families. California has served as a leader in advocating for policies of inclusion for immigrant families, but as growing rifts between local and state policies emerge, the welcoming climate so many in California have worked hard to create is being chipped away. By prioritizing the wellbeing of children in immigrant families, we help push California to invest in the structures that protect and raise all children—strong families, nurturing institutions, and supportive communities. In doing so, we advance solutions in the best interests of our children and all of us.

The future of California will depend on an increasingly diverse population of children.

Roughly half of California’s 9 million children live in a family with at least one parent who is foreign-born.14 While the majority of immigrant children’s families come from Mexico, Asia, and Central America, California is also home to immigrants from Europe, South America, the Caribbean, and Africa.15 The vast majority of children in California are United States citizens (96%), a small amount (2%) are lawfully residing immigrants, or are undocumented immigrants (2%).15 There are implications to health that are inextricably tied to immigration status. In order to ensure the best for California, attending to the health of children in immigrant families is critical.

Since the November 2016 national election, an increase in anti-immigrant policies, practices and rhetoric has challenged California’s inclusive agenda and adversely affected the health of children in immigrant families. These actions have put immigrant families on high alert and have forced many immigrants back into the shadows, resulting in social isolation, fear, and limiting children’s access to the health, nutrition and the social support they need to thrive.

As California continues to serve as a beacon of hope for our nation and immigrant communities, The Children’s Partnership and the California Immigrant Policy Center launched Healthy Mind, Healthy Future, a research and policy project focused on better understanding the impact of immigration enforcement on the mental health and wellbeing of children in immigrant families. In doing so, the Children’s Partnership and the California Immigrant Policy Center sought to identify what California can do today to further support children in immigrant families through the development of a policy agenda to ensure all children, regardless of immigration status, remain healthy, feel secure and continue to thrive. In many respects, California offers a blueprint for the nation—with insights about the challenges that can be overcome and the opportunities that are available when American values of equality and inclusion are embraced.

This report provides a comprehensive overview of a six-month research effort exploring the impacts of immigration enforcement on the mental health and wellbeing of California’s children. For advocates, policymakers, and members of the public, this report offers:

- Valuable data from immigrant families and those who provide them services.
- A spotlight on promising programs and practices that support children of immigrants and their families.
- Recommendations to inform policy, advocacy, and service delivery to better support children in immigrant families.

The findings identify policy priorities that the public can encourage their elected officials to support in order to protect the mental health and wellbeing of children in immigrant families. In doing so, California will invest in its future workforce, continue to build its economy, and further the fundamental promise of our nation to provide opportunity for all families.
A snapshot of immigrants in the United States and California today:

- The United States has a larger immigrant population than any other country in the world.\(^{41}\)
- As of 2016, more than 43.7 million immigrants resided in the United States, accounting for 13.5 percent of the total United States population.\(^{14}\)
- While California’s immigrant population has traditionally come from Latin America, since 2011, the majority of immigrants have arrived from Asia.\(^{16}\)
- California has 27 percent of immigrants in the United States, the largest share of immigrants compared to all other states.\(^{16}\)
- Of the roughly 10.3 million immigrants in California, nearly three out of four (7.4 million or 72 percent) are lawfully present, and about one in four (2.9 million or 28 percent) are undocumented.\(^{4}\)
- Nearly half of children in California have a parent who is foreign born.\(^{10}\) Sixteen percent of children in California have at least one undocumented parent.\(^{44}\)

Who are children in immigrant families?

For purposes of this report, we refer to children in immigrant families with a broad scope, including multiple child, parental immigration status, and countries of origin. This includes children who have at least one parent who was not born in the United States, even if the parent has become a naturalized United States citizen. The parent(s) may be undocumented; have temporary protected status; have legal permanent residency; or are naturalized. We recognize the additional terms used in research and policy to refer to children in immigrant families, including:

- **Immigrant children:** children who were born outside the United States.
- **Deferred Action for Childhood Arrivals (DACA) Recipients:** certain immigrants who came to United States as children and have applied for and been granted administrative protection from deportation and a work permit for a period of two years. There are many guidelines and requirements to be eligible for DACA.\(^{49}\) California includes nearly 200,000 DACA recipients.\(^{49}\)
- **Border Children:** children who live within 100 kilometers of the United States-Mexico border. Many border children are of Mexican origin, and a significant number are United States citizens.\(^{49}\)
- **Special Immigrant Juveniles Status (SIJS):** an immigration status given to children and youth who have been victims of abuse, neglect, or abandonment by a parent.\(^{49}\)
- **Unaccompanied Minors:** children below the age of 18 who arrive to the United States unaccompanied by a legally responsible adult. Current practice is that they are apprehended by immigration officials and then transferred to the care and custody of the Office of Refugee Resettlement.\(^{49}\)
- **Children Separated at the Border:** children in families that are separated at the border, many while seeking asylum, due to the current Administration’s "zero tolerance policy toward border crossers."\(^{49}\)
- **Migrant Children:** children who move frequently because of changes in their parents' employment. Migrant children may work in the industries in which their family members are employed. Migrant children can be both citizen and non-citizen children.\(^{49}\)
California Immigrants and the Past Potential Environment

Long before the recent attacks by the Trump Administration, immigrant families, especially undocumented or mixed-status families, have historically faced a myriad of challenges while living in California, whether as a result of anti-immigrant sentiment or the anti-immigrant policies in place. The experience of immigrants and their children as an electorate. The successful passage of previous anti-immigrant Proposition 63 in 1986, Proposition 187, also known as the Save Our State Initiative in 1994, established a state-run citizenship screening system and prohibited undocumented immigrants from accessing public education and other social services. Proposition 227, the English in Public Schools Initiative in 1998, had the effect of eliminating "bilingual" classes in most cases. It sought to educate Limited English Proficiency students in a one-year program in special classes that are taught nearly all in English.

The connection between demographic changes and political shifts is critical to the progress seen in California and will continue to influence policy. The successful passage of previous anti-immigrant Propositions was partly due to the disenfranchisement of immigrants and their children as an electorate. As the demographics of California shifted in the early 2000s, so did the state's elected officials, with a critical transformation in leadership in Sacramento and other local governments around the state. As more immigrants naturalize and become United States citizens, and as citizen-born children in immigrant families reach voting age, they can more effectively seek to end barriers to essential resources like education and health care for themselves and their children.

This transformation has catalyzed more pro-immigrant policies in California. From 2013 to 2017, Governor Brown signed a number of laws that allow immigrant families to fully participate in California's school systems. These laws include access to driver's licenses, increased worker protections, access to health care for children, access to immigration legal services, and many other civil rights advances for all residents of California, regardless of immigration status.

The Driver's Licenses Eligibility Act (2013) allows undocumented immigrants to obtain a driver's license. The TRUST Act (2014) limits cruel and costly immigration holds in local jails, which allows immigrant crime victims and witnesses to cooperate with police without fear of deportation. The Health4All Kids Act (2015) allows all income-eligible California children to receive full-scope Medi-Cal regardless of their immigration status. The California Values Act (2017) disentangles state and local law enforcement from federal immigration enforcement and prohibits immigration enforcement at sensitive locations such as schools, public health care facilities, and courthouses.

The Educational Equity Act (2017) requires that all local educational agencies in California implement additional protections to ensure that all students, regardless of immigration status or country of birth, have the opportunity to pursue their education without undue fear or risk. Immigrants and Today’s Anti-Immigrant Climate Despite the progress made in California, immigrant communities continue to experience fear and anxiety regarding their safety and wellbeing. Children in immigrant families are subject to harmful impacts on their development that can last a lifetime. From the inflammatory anti-immigrant statements that then-candidate Donald Trump made during the 2016 presidential election, to his executive actions and policies as the current President, it is evident that the current Administration has made it a priority to significantly restrict both legal and unauthorized immigration to the United States and to make immigrants feel generally unwelcome. Furthermore, it is not just children with undocumented parents who are suffering under the current climate. Children whose parents have temporary protected status, visas, and even green cards are afraid because of the changes in immigration policy and the news media coverage around immigration.

In addition to recent anti-immigrant federal policies, immigrants have also faced discrimination and harassment. According to an FBI report, the number of hate crimes reached a five-year high in 2016, including a notable increase shortly after Trump's victory. The Southern Poverty Law Center also collected data on hate crimes and incidents on their #ReportHate page, and out of the 867 hate incidents collected in the ten days following the election, 32% were “motivated by anti-immigrant sentiment.” These incidents affected all types of immigrant groups, including Latino, Black, Asian, and Muslim immigrants, as well as people of color misidentified as immigrants. It is an understatement to say these actions have put immigrant families on high alert, and forced many, even those with lawful immigration statuses, back into the shadows. As a result, many immigrant families are deterred from accessing important health and social services.

Progress Amidst Some Setbacks California continued to see progress, and some setbacks, in its work to create a more inclusive environment for immigrants and their families. The past three state budgets have included meaningful investments in legal services for immigrants that allow them to become naturalized United States citizens or defend against deportation and detention. However, the Trump Administration has challenged in court the state’s efforts to enact laws to protect immigrants from being turned over to federal officials. The District Court upheld laws that limit immigration officers’ access to information about non-citizens in local custody and allow the state to inspect private jails that contract with the federal government to hold undocumented immigrants, however...
Healthy Mind, Healthy Future Report

Impact of an Anti-Immigrant Climate

Prior research suggests that even the threat of a parent being detained or deported negatively impacts the social and emotional development of children. Witnessing the detention or deportation of a parent is associated with mental health conditions such as depression, anxiety, and psychological distress. Even if family members are not detained or deported, many immigrant families live in constant fear of being separated from loved ones, which keeps them from fully participating in American society. A study in California showed that children of undocumented parents showed significantly higher risks of internalizing behavioral problems like anxiety, depression, low self-esteem, withdrawal, or a need for attention, as well as externalizing behavioral problems such as rule-breaking and displays of irritability and aggression. Both types of behavioral problems are linked to adverse outcomes such as poor school performance and high dropout rates. Family members have reported that witnessing the apprehension of a parent at home is particularly traumatic for children. A parent’s arrest, detention, or deportation increases likelihood of depression, anxiety, and psychological distress, which interrupts a child’s healthy development.

Promising Programs and Practices in California

Despite the current stress and fear that immigrant families face, hope for the future and resilience has helped immigrant parents and their children prevail. Throughout many conversations with our key informants for this project, we learned that many communities in California are taking matters into their own hands to help mitigate the increased fear and anxiety and to provide a supportive environment for immigrant families and their children.

Throughout the report, we will highlight promising approaches identified in our research. These include a community health workforce; community education and advocacy programs; integrated service delivery and training models; different types of therapies and self-healing methods; and trauma-informed approaches for supporting immigrant families.

Implications for States, Child-Serving Systems, and Philanthropy

An anti-immigrant climate is not only detrimental to the health and development of children in immigrant families. It also has potential to wreak havoc on health, mental, and child welfare systems, as well as on early childhood programs and schools. Health care providers have reported an increase in toxic stress among children in immigrant families due to fear that a family member will be detained or deported. Children can become hypervigilant and fearful that their parents will be detained or deported and may experience other long-term mental health conditions such as anxiety or depression. The Kaiser Family Foundation recently conducted focus groups with parents and interviews with pediatricians across the United States and released a report on how the current environment is affecting immigrant families with children. Their findings show that immigrant families from various backgrounds are feeling “increased levels of fear and uncertainty amid the current climate.”

This fear, specifically among children, is manifesting in behavioral and mental health issues, and is negatively affecting some children’s performance in school. Moreover, pediatricians expressed that the current environment is “creating toxic stress for children and that this stress will result in physiological changes that contribute to increased rates of chronic disease and mental health disorders through adulthood.” Teachers and early childhood providers have also noted the negative impact of anti-immigrant policies. A survey conducted by the Civil Rights Project at UCLA found that a majority of educators reported that immigrant students had expressed concerns about immigration enforcement while at school, such as fear of their parents being taken away. Nearly 90 percent of school administrators observed immigrant students experiencing behavioral or emotional problems related to fear and anxiety. Also, two-thirds of educators said their students were “indirectly affected by immigration enforcement, due to concern for classmates whose families are targeted by enforcement actions, which affected the overall learning environment.”

Heightened immigration enforcement, executive orders, and anti-immigration sentiment also have implications for the already overburdened child welfare system. Family separation due to parental absence, inability to access public benefits, housing and food insecurity, medical neglect, and school absenteeism lead to the marginalization of immigrant children and families in the child welfare system. Disproportionate and overrepresentation of immigrant children and families within these systems, due to a lack of understanding or familiarity with issues affecting immigrant families, results in increased contact with child protective services, higher rates of out-of-home placement for children, lack of culturally appropriate foster homes, and decline of placement with relative caregivers due to fear and risk. Furthermore, increased contact with the child welfare system results in detrimental effects including increased risk of re-traumatization and exposure to toxic stress.
Healthy Mind, Healthy Future
A Joint Research Effort

Research Methods

Immigrant Family Qualitative Research: Focus Groups
During the fall of 2017, focus groups were conducted in Fresno and Riverside among Latino and Asian Pacific Islander (API) families to learn about their experiences and to inform the development of a survey for immigrant parents. Our team invited immigrant parents and their children to participate and offered gift card incentives as compensation for their time. Twenty-six parents and seventeen children from Fresno and Riverside participated in the focus groups overall.

- API youth in Riverside, between the ages of sixteen and twenty-one with at least one immigrant parent
- Latino immigrant parents of children between the ages of twelve and twenty-one
- Latino youth between the ages of sixteen and twenty-one with at least one immigrant parent

Immigrant Family Qualitative Research: Written Surveys
Based on themes that emerged in the focus groups, a thirty-two-item survey was developed to further identify the mental health needs of children in immigrant families in California, the barriers to accessing care, and what types of services families receive and benefit from in order to address mental health needs. The survey asked immigrant parents about their children’s mental health status as well as their own, especially as a result of the current Administration’s rhetoric and actions. It asked questions related to goals and dreams, and recent potential changes in feelings, emotions, and family behaviors.

Due to a low response rate, this focus group was a dyad.

Below is a summary of the demographic breakdown of the survey respondents.

Health Care Provider Research
During the summer of 2017, a twenty-seven-item survey was distributed to health care providers across California. The survey asked providers about their observations regarding changes in children’s and families’ access to health services and overall health and wellbeing since the November 2016 election. The survey also asked providers to identify any gaps in resources and training that would allow them to serve immigrant families and their children more effectively.

The survey was distributed to health care providers through multiple venues. The California Primary Care Association, the California Mental Health Planning Council, and the California Association of Marriage and Family Therapists distributed the survey information via email. Mental Health America of California and the California Association of Social Rehabilitation Agencies announced the survey through their member newsletters. One hundred and fifty-one individuals who provide care to API families in California, current barriers to accessing care, and recommended policy and practice changes.

Key Informant Interviews
TCP and CIPC engaged twenty-three stakeholders, including community members, promoters (Latino community members who receive specialized training to provide health education in the community without being a professional health worker), immigrant rights leaders, immigration attorneys, health advocates, mental health experts, school leaders, and more. The insights gathered from these interviews allowed the research team to learn more about the health needs of children in immigrant families in California, current barriers to accessing care, and recommended policy and practice changes.

A Joint Research Effort

The Children’s Partnership (TCP) and the California Immigrant Policy Center (CIPC) initiated the Healthy Mind, Healthy Future research project in mid-2017 to identify the mental health needs of children in immigrant families in California, the barriers to accessing care, model programs that already exist, and policy and practice ideas to help improve the mental health and wellbeing of children in immigrant families. TCP and CIPC conducted focus groups, surveys and interviews with immigrant families, health care providers, and key informants throughout California. The timeliness of the research and its concentration in California provide a unique value to the existing body of knowledge on this topic and the collective advocacy efforts moving forward.
Healthy Mind, Healthy Future Report

**Findings**

**Immigrants and their families in the United States face a challenging political climate.**

United States immigration policy and public discourse on this topic has become increasingly polarized since the 2016 presidential election and the inauguration of President Trump. For this reason, immigrant parents and youth in the focus groups expressed mixed emotions about the current direction of the country, with some feeling hopeful and lucky to be an immigrant today rather than in years past, but most expressing fear, confusion, and frustration about how things are going in the country under the current administration. Youth in the 16-21 age groups expressed fear and confusion about the current state of the country. Those who were more directly impacted by immigration threats also expressed that anti-immigrant sentiment affects them at school. Immigration is not as much of a concern in the daily lives of most of the younger children, who were born here. They are saying about ICE and all that stuff, getting deported, not knowing what might happen to my little two sisters so I’m kind of terrified of what is going to happen tomorrow.” - Latino youth, age 16-21, Riverside

**Immigrant parents want to build a better life for their children.**

Immigrant parents that participated in our study have many goals for their families, including a solid education and career for their children that allows them to support a family, stay healthy, and live safely. In the focus groups, immigrant parents overwhelmingly expressed that building a better life for their children is their top priority. Parents also discussed the desire to continue their personal education to better provide for their families, and to become more proficient in English. In the focus groups and the survey, parents expressed a desire for their children to do well in school and attain an education after high school. When asked, “What would you say are your three biggest goals right now for your children?” immigrant parents expressed that, first and foremost, they want their children to do well in school (67%); they want them to have the experiences and education necessary to find a career that allows them to comfortably support a family when they are older (28%); and they want them lead a healthier life (24%). Beyond education and career-focused goals, parents want their children to be safe (19%) and to learn or improve a language (16%). They also want their children to be able to change their immigration status (15%) and to make changes in their social life such as make more/different friends or have more confidence (15%).

Immigrant parents see their own immigration status as a barrier to the dreams and goals they have for their children.

While most parents have similar hopes and dreams for their children, immigrant families often face additional barriers to achieving them. Our survey asked parents about their personal goals and what their barriers are to meeting those goals.

A plurality of parents reported that their immigration status (43%) and President Trump (43%) are the biggest barriers keeping them from meeting their personal goals. Money (35%), racism (35%), and language barriers (31%) fell into a second tier of obstacles. Those most likely to cite their immigration status as the biggest obstacle they face were under 45 years of age (especially those 25-34) and Latino. President Trump was cited as the biggest obstacle by a majority of parents in Los Angeles, the Central Valley region, and those 45-54 years old. Lack of financial resources appeared to impact those in Orange County and English speakers more than others.

**PARENTS’ GOALS FOR THEIR CHILDREN (N=495)**

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<thead>
<tr>
<th>Goal</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Do well in school</td>
<td>67%</td>
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<tr>
<td>Attend college, community college, or certificate program after high school</td>
<td>58%</td>
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<tr>
<td>Have the experiences and education necessary to find a career that allows them to comfortably support a family</td>
<td>37%</td>
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<tr>
<td>Have the experiences and education necessary to find a career that interests them when they are older</td>
<td>28%</td>
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<tr>
<td>Lead a healthier life (exercises, not use drugs, eat better, etc)</td>
<td>24%</td>
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<tr>
<td>Be safe</td>
<td>19%</td>
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<tr>
<td>Learn or improve a language (English or your native language)</td>
<td>16%</td>
</tr>
<tr>
<td>Change in immigration status</td>
<td>15%</td>
</tr>
<tr>
<td>Make changes in their social life (make more/different friends, have more confidence, etc)</td>
<td>15%</td>
</tr>
<tr>
<td>Have a better self-image, self-esteem</td>
<td>11%</td>
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(Respondents were asked to choose up to three responses)

**IMMIGRANT PARENTS’ BIGGEST OBSTACLES TO MEETING THEIR PERSONAL GOALS (N=495)**

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<thead>
<tr>
<th>Obstacle</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>My immigration status</td>
<td>43%</td>
</tr>
<tr>
<td>President Trump</td>
<td>43%</td>
</tr>
<tr>
<td>I do not have the money to reach my goals</td>
<td>35%</td>
</tr>
<tr>
<td>Racism or the fact that some people are biased against people like me</td>
<td>35%</td>
</tr>
<tr>
<td>Not speaking English</td>
<td>31%</td>
</tr>
<tr>
<td>Jobs don’t pay enough</td>
<td>26%</td>
</tr>
<tr>
<td>I don’t have enough time to reach my goals</td>
<td>11%</td>
</tr>
<tr>
<td>I just don’t feel motivated right now</td>
<td>10%</td>
</tr>
<tr>
<td>Lack of access to health care</td>
<td>9%</td>
</tr>
<tr>
<td>I do not have the emotional support at work toward my goals</td>
<td>8%</td>
</tr>
<tr>
<td>There is often some crisis in my family or life</td>
<td>6%</td>
</tr>
<tr>
<td>Local elected officials</td>
<td>2%</td>
</tr>
</tbody>
</table>

(Respondents were asked to choose up to three responses)

**“As a mother, I am worried. It keeps me up at night. Because of the president, Mr. Donald Trump, the kids are learning how to hate.”** - Latino immigrant parent of children 12-21, Riverside

**“Honestly, being like brought up in this family, it is always education, education, education. You need to make a name for yourself”** - API youth, age 16-21, Riverside
When asked to think about the biggest obstacles to their children reaching their goals, parents identified family deportation or separation (35%), President Trump (33%), and their immigration status (30%) as the biggest obstacles. Younger parents were more likely than others to cite family deportation/separation and their immigration status, while those in Los Angeles were more likely to cite President Trump. Those in the 45-54 years age bracket and those in the Inland Empire were more likely than others to cite lack of money and racism. A second tier of obstacles, that parents believe their children face include their immigration status (13%) and the safety and academic rigor of their schools (12%).

### Promising Programs and Practices in California: Community Education and Advocacy

The engagement and empowerment of family members as advocates provides valuable information to ensure communities are best served, but also strengthens advocacy efforts with the addition of a compelling voice.

- **Promesa Boyle Heights (PBH)** is a collective of residents, youth, schools, and community organizations united in lifting community voices and working together to transform community for opportunities for students and families. PBH works closely with the Comite de Lideres (resident leaders), which is a committee of residents that represent the community and is connected to the collaborative's core partner organizations and schools.

- **The Office of Diversity and Equity (ODE)** under the County of San Mateo Health System advances health equity in behavioral health outcomes of marginalized communities through community empowerment, workforce development, and policy and system change. There are many community education courses made available to the public through the Mental Health Services Act (Prop 63) and Measure K, one of which is the Parent Project, a free 12-week course in which parents/caregivers learn parenting skills and get information about resources and other support available in their communities. This program is not only an educational opportunity, it is also a form of group therapy, where immigrant families have been able to express the challenges they face under the current hostile political climate. During this program, and other community event spaces, families are able to voice their concerns, and express conflicts they face and what changes they hope to see. In some cases, families come together to support one another outside of the sessions exemplifying group/social cohesion, and fostering community empowerment. Furthermore, ODE recognizes the importance of community solidarity as a way to help meet the mental and behavioral health needs for marginalized populations in San Mateo.

### Biggest Obstacles to Parents’ Children Meeting Their Personal Goals (N=495)

<table>
<thead>
<tr>
<th>Family deportation or separation</th>
<th>Most likely to name</th>
<th>Health, Education, Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>President Trump</td>
<td>35% (Under 45)</td>
</tr>
<tr>
<td></td>
<td>Los Angeles HSD</td>
<td>29% (35-44)</td>
</tr>
<tr>
<td></td>
<td>Central Valley</td>
<td>24% (45-54)</td>
</tr>
<tr>
<td></td>
<td>San Jose Ed.</td>
<td>16% (45-54)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>President Trump</th>
<th>Most likely to name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>25-34 years old</td>
</tr>
<tr>
<td></td>
<td>Under 24</td>
</tr>
<tr>
<td>My immigration status</td>
<td>Most likely to name</td>
</tr>
<tr>
<td></td>
<td>Immigration status</td>
</tr>
<tr>
<td></td>
<td>Over 65</td>
</tr>
<tr>
<td></td>
<td>Central Valley</td>
</tr>
<tr>
<td></td>
<td>San Jose Ed.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>We currently do not have the money to help them achieve their goals</th>
<th>Most likely to name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lack of money</td>
</tr>
<tr>
<td></td>
<td>Inland Empire (34%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Racism or the fact that some people are biased against people like them</th>
<th>Most likely to name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Racism</td>
</tr>
<tr>
<td></td>
<td>Central Valley (31%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>They lack the motivation to achieve their goals</th>
<th>Most likely to name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Know Your Rights</td>
</tr>
<tr>
<td></td>
<td>Inland Empire (26%)</td>
</tr>
</tbody>
</table>

### Children and School Officials Allege Feel that the Anti-immigrant Climate Impedes Success at School.

Children and youth, along with key informants, identified growing anti-immigrant sentiment and incidents after the 2016 presidential election as a barrier to children’s success. During the focus groups, some students stated that they have seen changes within their classroom since the election. The youth in the 16-21 years age bracket acknowledged that bullying and anti-immigrant sentiments have impacted their daily lives at school. They also shared that many of the incidents that are happening are not new, and that there has always been a racial divide between students. For instance, older Latino youth recalled incidents both before and after the election where their classmates made racist remarks.

Several key informants also expressed that the general public seems more emboldened to make racist or discriminatory comments to immigrants since the 2016 election and that bullying in schools has increased as well. One school social worker describes in the quote on the following page:

“Children and youth, along with key informants, identified growing anti-immigrant sentiment and incidents after the 2016 presidential election as a barrier to children’s success. When asked about how parents think their children have been feeling since the 2016 election, the responses mirrored their own. Since the 2016 election, the majority of immigrant parents said their children have felt uncertain about the future (59%), stress (54%), fear (54%), frustration (55%), anxiety (51%), and sadness (48%) more than they did before the election. In addition, immigrant parents reported that they have felt hopeful (38%) and happiness (37%) less often since the 2016 election.

### Immigrant Parents and Children Feel Scared and Anxious. Health Care Providers have observed an increase in somatic illnesses like insomnia and headaches due to fear and anxiety of immigration enforcement.

Many immigrant families are feeling increased fear and uncertainty amid the current climate. Immigrant parents that participated in our study have experienced increased uncertainty, stress, fear, frustration, anxiety and sadness since the 2016 election and have observed similar feelings among their children.

Our survey asked about how parents think their children have been feeling since the 2016 election. Parents had the option to choose up to three emotions from a list of twelve. Since the 2016 election, the majority of immigrant parents said they have felt uncertain about the future (62%), stress (61%), fear (59%), frustration (55%), anxiety (51%), and sadness (48%) more than they did before the election. In addition, immigrant parents reported that they have felt hopeful (38%) and happiness (37%) less often since the 2016 election.
before the election. In addition, parents reported that their children have felt hopeful (34%) and happiness (37%) less often since the election.

Furthermore, given that almost 75% of parents hear mainly negative messages on the media about immigration, the media may contribute to these fears and concerns. Accordingly, in the past year (March 2017–March 2018), the majority of surveyed immigrant parents have noticed a change in their children’s behavior such as worrying about safety, stressing about family wellbeing, and increased fear and anxiety. Of the parents who have noticed a difference (66%), the majority noted that their children are worried about their safety (63%), stressed about the wellbeing of their family (61%), and exhibit increased fear and anxiety (51%). Difficulty focusing in school (35%), decreased self-esteem (25%), and being less likely to go outside (20%) fall into a second tier of changes in behavior. In addition, the majority of those who have noticed a change in their children’s behavior believed it was a result of what their children have heard about immigration from President Trump (84%).

Providers have also noticed increased fear and anxiety among their immigrant patients, along with an increase in somatic illnesses. Nearly all providers stated that children in immigrant families experienced increased anxiety and fear due to detention and deportation (87%). A majority reported an increase in children experiencing symptoms of depression, such as feelings of sadness, sleeping problems, loss or gain of appetite, and loss of interest in activities they used to enjoy (70%). Nearly two-thirds of providers reported increased difficulty focusing in school or fear of going to school among children (63%). Additionally, almost half of respondents stated that immigrant children are increasingly being diagnosed with mental health conditions such as anxiety and depression, and almost a quarter said that parents are increasingly seeking mental health care for their children (23%). A majority of providers indicated that immigrant parents were increasingly likely to need treatment for a mental health condition themselves (69%).

Key informants overwhelmingly echoed these concerns, and some shared their perspectives on why families are increasingly feeling uncertain and stressed about the future.

“Bullying is one of the roughest experiences for a lot of students who are newly arrived immigrants. Even just hearing all these negative things, like a student saying “el muro” which is the wall that Trump has been talking about, or being made fun of because you’re not from here or being told “go back to your country,” or “learn English,” these are the things that they really experience which I think would be connected to why they’re absent a lot. Being put in classrooms where there is not a lot of support and not knowing the language, and having to deal with being made fun of because they don’t speak right—that’s something that I would say I have heard a lot recently.”

- Key Informant

“I’m seeing an increase in depressive, anxious, and somatic symptoms, as well as recurrent trauma symptoms from the past. People are extremely scared.”

- Health Provider, California

“It’s like hanging from a string that can be cut at any time.”

- Latino youth, age 16-21, Riverside

“I’ve known this family for more than 15 years, and the two parents have no documents. When the president won, the children began to feel that anguish for their parents; they suffered. Last year, the child that was doing very well in school suddenly wanted to kill himself; he was suicidal.”

- Key Informant

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### FEELINGS AND EMOTIONS EXPERIENCED AMONG IMMIGRANT PARENTS SINCE THE 2016 PRESIDENTIAL ELECTION (N=495)

<table>
<thead>
<tr>
<th>FEELING / Symptom</th>
<th>Less since election</th>
<th>More since election</th>
<th>Same amount before and after election</th>
<th>Not sure/Refused</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uncertain about the future</td>
<td>15</td>
<td>20</td>
<td>22</td>
<td>25</td>
</tr>
<tr>
<td>Stress</td>
<td>32</td>
<td>5</td>
<td>8</td>
<td>15</td>
</tr>
<tr>
<td>Fear</td>
<td>31</td>
<td>7</td>
<td>10</td>
<td>16</td>
</tr>
<tr>
<td>Frustration</td>
<td>29</td>
<td>11</td>
<td>9</td>
<td>20</td>
</tr>
<tr>
<td>Anxiety</td>
<td>28</td>
<td>10</td>
<td>13</td>
<td>17</td>
</tr>
<tr>
<td>Sadness</td>
<td>27</td>
<td>8</td>
<td>11</td>
<td>20</td>
</tr>
<tr>
<td>Desperate</td>
<td>26</td>
<td>10</td>
<td>12</td>
<td>18</td>
</tr>
<tr>
<td>Terror</td>
<td>25</td>
<td>8</td>
<td>11</td>
<td>19</td>
</tr>
<tr>
<td>Anger</td>
<td>24</td>
<td>10</td>
<td>12</td>
<td>18</td>
</tr>
<tr>
<td>Loneliness</td>
<td>23</td>
<td>10</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>Hopelessness</td>
<td>22</td>
<td>9</td>
<td>12</td>
<td>15</td>
</tr>
<tr>
<td>Happiness</td>
<td>21</td>
<td>10</td>
<td>11</td>
<td>19</td>
</tr>
</tbody>
</table>

### FEELINGS AND EMOTIONS EXPERIENCED AMONG IMMIGRANT PARENTS’ CHILDREN SINCE THE 2016 PRESIDENTIAL ELECTION (N=495)

<table>
<thead>
<tr>
<th>FEELING / Symptom</th>
<th>Less since election</th>
<th>More since election</th>
<th>Same amount before and after election</th>
<th>Not sure/Refused</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uncertain about the future</td>
<td>15</td>
<td>20</td>
<td>22</td>
<td>25</td>
</tr>
<tr>
<td>Stress</td>
<td>32</td>
<td>5</td>
<td>8</td>
<td>15</td>
</tr>
<tr>
<td>Fear</td>
<td>31</td>
<td>7</td>
<td>10</td>
<td>16</td>
</tr>
<tr>
<td>Frustration</td>
<td>29</td>
<td>11</td>
<td>9</td>
<td>20</td>
</tr>
<tr>
<td>Anxiety</td>
<td>28</td>
<td>10</td>
<td>13</td>
<td>17</td>
</tr>
<tr>
<td>Sadness</td>
<td>27</td>
<td>8</td>
<td>11</td>
<td>20</td>
</tr>
<tr>
<td>Desperate</td>
<td>26</td>
<td>10</td>
<td>12</td>
<td>18</td>
</tr>
<tr>
<td>Terror</td>
<td>25</td>
<td>8</td>
<td>11</td>
<td>19</td>
</tr>
<tr>
<td>Anger</td>
<td>24</td>
<td>10</td>
<td>12</td>
<td>18</td>
</tr>
<tr>
<td>Loneliness</td>
<td>23</td>
<td>10</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>Hopelessness</td>
<td>22</td>
<td>9</td>
<td>12</td>
<td>15</td>
</tr>
<tr>
<td>Happiness</td>
<td>21</td>
<td>10</td>
<td>11</td>
<td>19</td>
</tr>
</tbody>
</table>
Promising Programs and Practices in California: Trauma-Informed Approaches

The experience of immigration and its direct and indirect consequences can inflict any number of traumatic experiences on parents and their children as conveyed in the research above. In response, communities may offer specific support to children and their immigrant families, including physical safety, training, and informational resources to help families stay informed and prepared.

- Robin Griswold, a principal at Bowman High School, a continuation school in the Santa Clarita Valley, recognizes the significance of trauma-based training. All of the school staff has been trained in trauma-based education and are poised to recognize when students are under a significant amount of psychological pressure.

“…the experience of immigration and its direct and indirect consequences can inflict any number of traumatic experiences…”.  The approach is always with compassion and an understanding that there is a reason why students may be exhibiting behavioral issues. At Bowman High School, many of the students have suffered more than the fear and the uncertainty of their immigration status, they have also suffered from violence in the home and domestic violence. Robin explains, “if you work with kids who are at risk like this, and if you’re not trained, and you’re not able to search what is it that they need, you’re not going to be able to help them.”

- The ALL IN For Safe Schools Coalition, with partners including The Children’s Partnership, Californians Together, the California Association for Bilingual Educators, and The California Endowment, works with the California Department of Education to further support children in immigrant families on school campuses. By recognizing immigration as trauma, schools can better respond to the needs of students and foster a positive learning environment. The Coalition works to support schools in establishing safe environments for children in immigrant families and create resources to help schools educate families in relevant immigration policy changes, and health and social services. This includes the distribution of informational materials, the hosting of community conversations, and training to ensure a trauma-informed curriculum is available to support implementation of state legislation.

- Another example is the UndocuHealing Project, which offers enrichment programs and resources on healing to individuals that work with the immigrant community. It also offers community support through community gatherings and healing workshops throughout California. This project helps to bridge non-traditional methods of holistic care—spiritual, mental, physical care—that do not necessarily fall within Western medicine. The leaders of UndocuHealing are not advocating for a specific linear line for each individual, but rather “emphasizing cultural care and practices that we hold and adopt here.” UndocuHealing aims to utilize healing practices within organizing spaces, where burnout is very prevalent. Many organizing communities and non-profit organizations often place the needs of community before the needs of the organizer. To ensure organizations are supported, the interventions of UndocuHealing help prevent burnout in order to sustain the long-term capacity of the movement.

The majority of surveyed immigrant parents believe their children are worried about their family or someone they know being separated due to being detained or deported and had talked to their children about this situation, even though the majority of parents do not know someone who has been detained or deported.

The majority of parents do not know anyone who has been detained or deported, one third do know someone (30%). Of those who know someone who was detained or deported, parents reported that their children also knew about the person being detained or deported (79%). A majority of parents stated that they talked to their children about the situation (72%). Women (61%), Latinos (63%), those over 45 (62%), parents of older children (68%), and those in Los Angeles (66%), and those in the Central Valley (65%) were most likely to have had this conversation.

When children are told about the possible deportation of a family member, parents in the focus groups said it as a precaution and not necessarily something that is normal. Of the parents who chose not to discuss the possibility of detention or deportation with their children, extra fear or stress on their children was cited as a factor. Some do not want to worry their children about something that does not directly impact them, while others do not want to worry their children about the fact that they are undocumented. Oth...
Immigrant parents believe that the termination of the DACA program impacts their children.

Of surveyed immigrant parents, 59% believe that the loss of DACA will have an impact on their children, including 45% who believe it will have a very large impact. Parents in the 25-34 age bracket (52%), women under 45 years of age (50%), those in the Central Valley (54%) and Inland Empire (51%), and Latino women (50%) were most likely to believe that the loss of DACA will have a very large impact on their children. Although the majority of parents have noticed a change in their child’s behavior, nearly half reported that neither they nor their child has reached out to talk to someone about what they are experiencing (48%). Out of those who have reached out to someone, the majority said they have reached out to a close family member or friend (58%), followed by school counselors or teachers (40%), church or spiritual leaders (26%), and then a family therapist (18%) or a psychologist (14%). In the focus groups among Latino youth, participants shared that they reach out to their friends and family when they are afraid. However, the youth in the 12-15 age bracket expressed that they do not always know whether or not they can trust their friends. Some also chose not to talk to anyone, hoping they can laugh it off or wait for the fear or sadness to pass.

I don’t really talk to anybody. Because you never know if people are going to like turn on you.”
- Latino youth, age 12-15, Fresno

I just try to laugh.”
- Latino youth, age 12-15, Fresno

I just talk to myself in my mind, like I just calm myself down.”
- Latino youth, age 12-15, Fresno

I talk to my sister.”
- Latino youth, age 12-15, Fresno

My daughter sees a counselor but I have noticed that she is a bit more nervous; she cries over anything. She says that her fear stems from something else but she hears the name Trump and she gets scared.”
- Latino immigrant parent of children under 12, Fresno

The climate of fear has not only impacted families’ emotional wellbeing, but also their willingness to seek services that support their health and that of their children. Although the majority of parents have noticed a change in their child’s behavior, nearly half reported that neither they nor their child has reached out to talk to someone about what they are experiencing (48%). Out of those who have reached out to someone, the majority said they have reached out to a close family member or friend (58%), followed by school counselors or teachers (40%), church or spiritual leaders (26%), and then a family therapist (18%) or a psychologist (14%). In the focus groups among Latino youth, participants shared that they reach out to their friends and family when they are afraid. However, the youth in the 12-15 age bracket expressed that they do not always know whether or not they can trust their friends. Some also chose not to talk to anyone, hoping they can laugh it off or wait for the fear or sadness to pass.

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- Latino immigrant parent of children under 12, Fresno

With regards to health access, providers have observed that immigrant families are more likely to skip scheduled health care appointments, change routines to limit children’s outdoor and recreational activities, and limit participation in public programs.

A majority of providers reported that children in immigrant families were increasingly skipping scheduled health care appointments (42%), and others stated that immigrant families were increasingly abstaining from scheduling routine prevention or primary care appointments for their children (38%). Almost one-third of providers said that immigrant families have increasingly shifted how they access care for their children (e.g. increase in walk-ins, scheduling appointments for all children in one day, or telephone consultations).

Additional, a majority of providers reported that immigrant families were increasingly expressing fear in bringing their children to school, the park, or recreational activities due to fear of immigrant enforcement activities (70%). A majority of providers have also observed that immigrant parents were increasingly discussing contingency planning or how to prepare for detention or deportation (60%).
Healthy Mind, Healthy Future Report

Connecting families with a continuum of services through trusted community partners is a necessary shift in the infrastructure of public program delivery. During this challenging time, health centers are leading efforts to help ensure a safe environment for their immigrant patients and staff.

- Asian Health Services (AHS), located in the Bay Area, serves as a model to engage the community in all aspects of their work. The mission of AHS is to provide health, social, and advocacy services for all, including the immigrant and refugee Asian community, regardless of income, insurance status, immigration status, language, or culture. AHS understands that social and economic conditions profoundly impact the health of our patients and community, and strives to ensure that the Alameda and Oakland area community members have opportunities that give the community a voice in their own health. The community and advocacy programs are driven by the needs of the community and some programs incorporate community-based participatory research (CBPR) - a partnership approach to research that equitably involves, for example, community members, organizational representatives, and researchers in all aspects of the research process and in which all partners contribute expertise and share decision making and ownership. AHS engages in CBPR work to allow the community to drive more of the organization’s research, and take ownership of the valuable data and how it is utilized. AHS’s many community-based programs and research initiatives contribute to the health of youth, families, and overall community, and these programs are strengthened by community input.

- St. John’s Well Child and Family Center, located in south Los Angeles, has also taken steps to ensure that the services and programs that are offered are in safe spaces where immigrant families feel welcome. Recently, St. John’s has incorporated What To Do If ICE Comes into staff trainings for all of the staff. St. John’s is the largest provider of care for undocumented individuals and they ensure that their patients understand that their lobbies are safe spaces, and that no officer can enter without a warrant. St. John’s has also incorporated a Know Your Rights presentation for their Unaccompanied Minors program. They have a partnership with CARECEN and Neighborhood Legal Services LA; attorneys from these organizations help to inform patients about their rights and are available at their clinics on a weekly basis to provide various legal services. St. John’s also collaborated with Promesa Boyle Heights to establish a community wellness center at Mendes High School to address an increase in mental health needs among their school community.

Many immigrant parents said they had applied for health and nutrition programs for their children in the past, but the majority of health care providers observed an increase in concerns about participating in these programs.

- My husband always worked and you just feel belittled. We are not asking for a handout. I feel that we as immigrants come to this country to work, not to ask for handouts. We come here to work and have a better life for our children and our children, at least mine, they have never been to Mexico.”
  - Latino immigrant parent of children under 12, Fresno

It is important for all families to participate in public programs such as Medi-Cal, CalFresh, or WIC and receive the support they need to stay healthy and thrive. At the time our survey was administered (January-March 2017), the majority of immigrant parents reported that they had applied for such public programs (83%). Those between 25-34 years old, women, and those living in San Diego and the Central Valley, were most likely to have applied. A plurality of those who have never applied say it is because they believe they do not qualify for the programs (36%). In the focus groups, parents identified language or financial barriers as obstacles to enrollment in public programs. Perceived racial stereotypes from others also played a factor in feeling uncomfortable or as barriers to information about health care.

While the majority of surveyed immigrant parents have applied for programs, two-thirds of providers reported an increase in concerns about enrolling in Medi-Cal, WIC, CalFresh or other public programs and have expressed interest in disenrolling in public programs. Many key informants also shared similar experiences regarding the reluctance and fear to participate in public programs among immigrant families due to a fear of immigration enforcement. These behavioral changes lead to a cycle of stress and place limits on access to activities that support and promote the wellbeing of immigrant families.

- Attorneys have mentioned to us that families who have children participating in the free or reduced lunch program are afraid to fill out that form again. Mothers who may qualify for WIC are afraid to sign up because they fear there may be a backlash for them. It’s just a larger fear that our local communities are facing. It is threatening the dignity to live a normal life.”
  - Key Informant

In meeting with key staff of elementary, middle, and high schools, there are consistent concerns that immigrant parents are too scared to attend school events, resource fairs, and obtain services due to the fear of immigration taking them away from their family. Our families report concerns and fears about going grocery shopping, walking their kids to school, and seeking mental health/dental/ vision services using Medi-Cal, as they think it might lead to an INS raid.”

- Health Provider, California

### PERCENTAGE OF IMMIGRANT PARENTS THAT HAVE APPLIED FOR PUBLIC PROGRAMS LIKE MEDICAL, CALFRESH, OR WIC AND THE BIGGEST REASON FOR NOT APPLYING (N=495)

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>I don’t think I qualify</td>
<td>36%</td>
</tr>
<tr>
<td>I don’t need public benefits</td>
<td>18%</td>
</tr>
<tr>
<td>Public benefits aren’t meant for people like me and my family</td>
<td>26%</td>
</tr>
<tr>
<td>I have been told not to apply</td>
<td>5%</td>
</tr>
<tr>
<td>I don’t know enough about the programs</td>
<td>5%</td>
</tr>
<tr>
<td>I don’t feel comfortable applying for the public benefits</td>
<td>3%</td>
</tr>
<tr>
<td>I was turned down before</td>
<td>3%</td>
</tr>
<tr>
<td>The application process is difficult or complicated</td>
<td>2%</td>
</tr>
<tr>
<td>Not applicable</td>
<td>3%</td>
</tr>
<tr>
<td>Not sure</td>
<td>11%</td>
</tr>
</tbody>
</table>

### My husband always worked and you just feel belittled. We are not asking for a handout. I feel that we as immigrants come to this country to work, not to ask for handouts. We come here to work and have a better life for our children and our children, at least mine, they have never been to Mexico.”

- Latino immigrant parent of children under 12, Fresno

### Increase in concerns about enrollment in Medi-Cal, WIC, CalFresh and other public programs

- Increase 67%
Immigrant families and their children no longer feel safe in certain places and don’t have resources they can trust.

Given the heightened immigration enforcement that has taken place under this Administration, many immigrant families no longer feel safe or welcome in certain spaces.

When asked where immigrant parents generally felt safe from immigration enforcement in their community, parents stated that they feel most safe in their homes (64%). Their church or place of worship also rose to the top as a location where they feel safe from immigration enforcement (43%). However, nearly one in five (19%) reported that they feel unsafe no matter where they are in the community, including parents of children 0-5 years old (23%), those in Los Angeles and San Diego (23%), and Latinos (21%). Similar to immigrant parents overall, youth in the focus groups shared that they feel safe at home, in school, and with their parents. Youth in the 16-21 age bracket included feeling safe in their larger community as a whole due to some of its progressive policies on immigration. Parents in the focus groups also discussed some of the places that they do not feel safe, such as certain stores, on their way to work, and, for one participant, everywhere.

Almost all immigrant parents have someone in their network to turn to when they are faced with a difficult decision or problem. While most generally rely on their spouse or partner (68%), families (65%), and their children (42%), some rely on their church or minister (19%) and immigrant service organizations (12%) when they need to make a difficult decision. Other participants in the survey and focus groups shared that they do not know whom to turn to specifically when it involves immigration.

In the focus groups, immigrant parents expressed that having a community to turn to is important to feel more supported and less anxious. API parents in particular expressed feeling that they have fewer resources to turn to when they need help, especially within the immigrant community.

In a time of fear and uncertainty for immigrant families, it is particularly valuable for trusted field partners, including community health workers, certified enrollment counselors, and promotoras, to continue engaging and informing families about available services and supports, and, where possible, policy developments and changes.

- The "Promotores de Salud Mental" Project was created in 2010 to address disparities in access to services in Service Planning Area 7, a Latino community in Los Angeles County, due to language barriers and a stigma against seeking mental health services. The use of Promotores as mental health educators in this community was intended to lessen the disparities. Promotores are trusted by the Latino community because they are of the community, speak the languages of the community, and are perceived as peers. Therefore, they are uniquely poised to lessen the stigma associated with mental health. These promotores were trained on mental health topics, which they would then deliver as community presentations to adults, parents, and families who may be affected by mental illness. According to the Service Area 7 District Chief, there are more than a thousand presentations conducted every year. The Promotores are able to integrate vital information about mental health issues and mental health care systems into the community’s culture, language, and value system, thus reducing the stigma and the barriers associated with mental health.

- Vision y Compromiso (VyC) is a national organization that also utilizes the Promotores approach. VyC strives to create and sustain a consumer-driven approach to promoting the health and well-being of underserved communities by supporting Promotores, leaders, community health workers, and others who serve the community. VyC has many different health initiatives that are informed by community, including Bailoterapia (or dance therapy), a physical activity program promoting the mental, spiritual, and social health of the community. The exercise helps to control chronic diseases, reduce stress, and promote a healthy lifestyle. Also, given that this activity is carried out in a group, it supports social relationships. Some participants have formed friendships and regularly meet outside of class.

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In the focus groups, immigrant parents expressed that having a community to turn to is important to feel more supported and less anxious. API parents in particular expressed feeling that they have fewer resources to turn to when they need help, especially within the immigrant community.
Our survey also asked parents where they tend to learn about immigration-related news. The majority of surveyed immigrant parents tend to get their information from Spanish language television (78%) and radio (52%). They also get information from family or friends (42%), Facebook (39%), and English language television (32%). Nearly three-quarters hear mainly negative messages on media about immigration (74%). Older immigrant parents, those in Los Angeles, and Latinos were most likely to get their information on immigration issues from Spanish language television and radio. Younger immigrant parents and those in the Central Valleys were more likely than others to get their information from Facebook and family and friends. Those in Orange County were much more likely than others to get their information from English language television.

In the focus groups, youth shared that they hear about immigration news in the newspapers, and on social media.

**Healthy Mind, Healthy Future Report**

**Immigrant parents and children are resilient and share values of respect and human dignity with parents of every background.**

The immigrant parents who were surveyed want every other American, particularly those who stand against them, to realize that they are human and deserve respect. Immigrant parents seek to ensure others understand that immigrants come to the United States to work hard and contribute to their communities. There is a desire to have people believe that not all immigrants are bad, and immigrant parents want to have the opportunity to come out of the shadows and live freely in the United States.

Similarly, immigrant youth want people to know that they and their families have feelings and want to be treated with respect. Families want support from their government, but want people to realize immigrants are hard workers. Immigrant parents want the public to look beyond the stereotypes and see them as human. Furthermore, both parents and youth expressed that if they could have a hand in immigration policy, deportation would only occur for serious, violent crimes; a clear and easier path to citizenship would be in place; people’s rights would be protected; and families would not be separated.

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Q1: **DO YOU HEAR MAINLY POSITIVE OR MAINLY NEGATIVE MESSAGES ON MEDIA ABOUT IMMIGRATION?**

Q2: **WHERE DO YOU TEND TO GET YOUR INFORMATION ON IMMIGRATION ISSUES? (N=495)**

<table>
<thead>
<tr>
<th>Sources of Information</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spanish language television</td>
<td>78%</td>
</tr>
<tr>
<td>Spanish language radio</td>
<td>52%</td>
</tr>
<tr>
<td>Family or friends</td>
<td>42%</td>
</tr>
<tr>
<td>Facebook</td>
<td>39%</td>
</tr>
<tr>
<td>English language television</td>
<td>32%</td>
</tr>
<tr>
<td>Church</td>
<td>19%</td>
</tr>
<tr>
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<td>18%</td>
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<tr>
<td>English language radio</td>
<td>13%</td>
</tr>
<tr>
<td>Instagram</td>
<td>6%</td>
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<tr>
<td>Twitter</td>
<td>3%</td>
</tr>
<tr>
<td>Other</td>
<td>5%</td>
</tr>
</tbody>
</table>

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We come not just for no reason. We came because there were wars and there is struggle and I am sure the majority of immigrants come to this country for those reasons, but everybody has different reasons, but because of the struggle where we were, that’s why we come here to have a better life. And we do work hard. We are hard-working people.”

- API immigrant parents of children 12-21, Fresno

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Promising Programs and Practices in California: Therapies and Self-Healing

Various forms of therapy emerged as promising practices to support families. Talk Therapy / Help Groups / Group Therapy / charlas (chats) are all approaches that help people cope with the environment. In addition, several key informants discussed spirituality as a therapeutic tool and type of healing service, especially for families that may not have access to mental health services. Some faith-based agencies recognize their reach in the community and have held advocacy-training workshops, or handed out basic needs supplies to support immigrant families.

- Guillermo Da Silva-Montemayor is a Marriage & Family Therapist based in Newport Beach who practices at Hoag Hospital and is a Clinical Supervisor at Pathways Community Services. Guillermo is a bilingual and bicultural clinician that strives to achieve a holistic understanding of his patients, including the family dynamic and cultural and political context of a patient, before assessing, diagnosing, creating a plan of action, and monitoring the progress of his patients.

- The Interfaith Movement for Human Integrity (IM4HI) is an organization that combines faith-based organizing, arts and cultural work, and strategic campaigns to help take down the barriers between neighbors and connect immigrant and native-born United States citizens to a global perspective on human rights. The staff mobilizes inter-religious communities for concrete social change campaigns, including immigrant rights and integration, economic justice, health care/community wellness, and leadership formation.

- The James Moreno House Project (JMP) works to create positive change in the El Cerrito High School community through health services, counseling, youth development, and school-wide initiatives. The JMP health staff work with teachers and administrators to minimize learning disruptions, successfully creating flexible schedules that balance students’ academic, health, and mental health needs.

- Health centers also incorporate different therapies to support patients who are part of immigrant families. St. John’s prefers to use the term charlas over mental health groups to minimize the stigma associated with mental health treatment. The Director of Behavioral Health explained, “When we talk about mental health, I don’t say salud mental (mental health). I very much approach it from the point, “Sabes que, a todos nos puede pasar esto. Todos tenemos ansiedad, todos tenemos tristeza,” and I include myself in that because I think it’s important not to come from the top-down model or alienate myself as the other, but really join them in understanding that mental health happens to all of us. It is how we function and how we interpret it and how we reframe that cognition that will allow us to function better.”

- Clinica Monument Oscar Romero, based in Los Angeles, also offers therapy sessions, including group therapy, individual therapy, and group counseling. Shortly after the termination of DACA, Clinica Romero offered support groups to the undocumented immigrant community. The Policy and Community Engagement Specialist at Clinica Romero explained, “just talking about it is so important. While it doesn’t necessarily take that fear away, knowing that you have support is helpful and having these options for families, for individuals who are undocumented in our communities, is so important.”

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I think it is very important that all of those people who are residents be able to become citizens and vote.”

- Latino immigrant parent of children under 12, Fresno

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*Do you know what, this can happen to any of us. We all experience anxiety, we all experience sadness.*

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**Healthy Mind, Healthy Future Report**
In today’s political environment, it has become inevitable for leaders and social justice advocates who care about immigrant families to spend most of their time playing defense. It is simply not enough. California must continue to build on all the progress made at the state level in the last two decades by advancing an inclusive and progressive agenda reflective of the diverse communities that make up the state. Advocates must drive public policy and policymakers by identifying the work needed to sustain this momentum and work toward sustained progress. The health care advocacy community is committed to advancing policies that provide affordable health care coverage for all immigrants, regardless of immigration status.

Additionally, those who care about the health and wellbeing of California families must also lend support in finding solutions to the new and emerging problems that immigrant families face. Reframing children’s issues in this manner—for instance, linking experiences such like schools, it does not apply to all immigrant families. It is only so much government can do. County welfare departments are committed to advancing policies that provide affordable health care coverage for all immigrants, regardless of immigration status.

Our research clearly identified a negative and harmful environment for children in immigrant families. Children in immigrant families are clearly under duress – increasingly anxious and afraid, suffering from somatic illnesses like insomnia and headaches, with increased difficulty focusing in school, and even with fear of attending school. Families are withdrawing from everyday activities like going to parks and playgrounds. Children are at risk of not getting medical care or nutrition assistance.

In our study, we found that children and parents living in immigrant families do not feel safe, even in school settings. Fear, stress and related somatic illness have an impact on children’s ability to concentrate, succeed at, and even attend school. With half of California’s children living in immigrant families, their needs cannot be ignored and it is critical for schools to foster a positive and inclusive environment. Efforts are needed to promote the mental health and wellbeing of children by eliminating or reducing threats in their school environment, specifically related to enforcement strategies, and also to remove anti-immigrant bullying within schools.

Although federal policy provides protection from federal immigration enforcement in certain sensitive locations like schools, it does not apply to all child-safe spaces, such as areas right outside of schools. Furthermore, it is unclear whether the sensitive locations policy is consistently followed by the Department of Homeland Security or Immigration and Customs Enforcement (ICE). Laws such as the California Values Act (SB 54) and Safe Schools for Immigrant Students (AB 699) support the healthy development of children in immigrant families and will create a more inclusive environment where all families can succeed and contribute to the greater good.

**Strengthen Community Safety to Ensure Children, Youth, and Families Feel Secure and Supported in Their Communities**

Our research confirms that children and parents living in immigrant families do not feel safe, even in school settings. Fear, stress and related somatic illness have an impact on children’s ability to concentrate, succeed at, and even attend school. With half of California’s children living in immigrant families, their needs cannot be ignored and it is critical for schools to foster a positive and inclusive environment. Efforts are needed to promote the mental health and wellbeing of children by eliminating or reducing threats in their school environment, specifically related to enforcement strategies, and also to remove anti-immigrant bullying within schools.

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**Invest in Community-Based Approaches and a Community-Based Workforce to Support Immigrant Families**

As concerns for safety continue, identifying innovative methods of reaching immigrant families is paramount to supporting the wellbeing of California’s children. As we noted above, working with trusted community partners that already interact with children and families (like schools, faith-based organizations, and immigrant service organizations) is an effective strategy because it builds on trusted relationships and often depends on a community-based workforce. As noted in our research, while the majority of surveyed parents had applied for public programs like Medicaid and CalFresh and WIC, two-thirds of health providers and the majority of key informants observed an increase in families’ concerns about participating in these programs due to fear of immigration enforcement. Our research also found that immigrant parents mainly speak with family members and friends for advice, not necessarily with authority figures trained on immigration policies. These findings indicate that some families are disengaging in health programs, limiting visits to health care providers, and avoiding public spaces without having all the facts, and at a time when children need more—and not less—of these activities and services for their healthy development. Families need better information from trusted sources about their rights and protections so they can make more informed decisions.

State and local government generally educate families about programs and services that can help them navigate the system. However, there is only so much government can do. County welfare departments are not permitted to provide advice to Medi-Cal applicants or beneficiaries on matters relating to federal immigration policies, and families may not trust government entities regardless.9 There are also gaps and capacity limitations in the existing health and social services and legal
services workforce that can provide this assistance. The continued investment and integration of a community workforce — like community health workers, certified enrollment counselors, and promotores — will help advocates continue to engage and relay accurate information to their retain, and increase utilization of health and social services. Health navigators and enrollers are trained to remind applicants and family members that information will be kept safe and only used for health purposes. In addition, community-based organizations can address needs by providing culturally-rooted leadership opportunities and healing activities.

**RECOMMENDATIONS**

- Local government and philanthropic organizations should support legal services and advocacy organizations in training existing health navigators, enrollers, and community health workers, and by expanding the workforce to educate immigrant families about their rights and advocate for policy changes.

- State and local government should distribute information, train staff, and expand community engagement and partnership programs for local residents in innovative ways and support model practices, such as the Office of Diversity and Equity in San Mateo (see page 18).

- California state agencies and philanthropic organizations should provide incentives for schools to be a forum for discussing cultural and social needs and offer or continue to offer safe spaces for their community members to discuss how the hostile immigration has been impacting them.

- State and local policymakers should provide stable and flexible funding sources that create incentives for integration and collaboration between health clinics, community-based organizations, schools, legal services, and more.

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- Federal policymakers should stop efforts to discourage immigrant families and children from accessing nutrition, health, and other programs and services.

- State policymakers should grant all low-income adults, regardless of immigration status, access to health care services that would allow them to live healthier lives and prevent the onset of illness to better care for their children. What kids have health coverage and access to health care, it also supports the health and wellbeing of kids.

- Local policymakers should adopt or expand upon county programs to provide health care services to their residents and build momentum for statewide coverage solutions.

- State and local policymakers should provide more stable and flexible funding sources that create incentives for integration and collaboration between health clinics, community-based organizations, schools, legal services, and more.

In our research, providers identified several gaps in resources and training that would allow them to serve immigrant families and their children more effectively. These included educational resources for the providers and families, as well as referrals and other community connections, as stated above. Provider uncertainty about the country’s highly politicized immigration policy also limits their ability to answer families’ questions about their safety and makes clear the need to better inform providers.

Similarly, key informants shared the importance of identifying and meeting the unique needs of immigrant families in existing models of trauma-informed education and care. A recent report by the Center for Law and Social Policy highlighted the National Child Traumatic Stress Network’s key components of trauma-informed programs to better support children in immigrant families. This includes routine screening for trauma exposure and symptoms, use of evidence-based, culturally responsive assessment and treatment, and a focus on continuity of care and collaboration across systems. Such programs also address the physical health needs of immigrant-serving staff and make resources available to children, families, and providers.26 Greater coordination and collaboration between health, education, and immigrant-serving organizations can help ensure families receive accurate information on immigration policy, immigrant rights, immigrant eligibility for public benefits, and the optimal delivery of care and services.
Healthy Mind, Healthy Future Report

Department of Homeland Security should strengthen and train staff on protocols to minimize harm to children if they are present during immigration enforcement actions. They should also ensure that detained or deported parents are able to make decisions about their child’s care.

State agencies should include trauma-informed care training as part of Continuing Medical Education, medical school curriculum, teacher and school administrator training, and licenses for social workers and other mental health professionals.

California should adopt a statewide trauma-informed care strategy for child-serving programs and initiatives that are adapted to include the unique needs of immigrant families.

Philanthropic organizations should support dissemination of Know Your Rights training to a wide array of sectors who work with immigrant families.

RECOMMENDATIONS

Educate and Engage Communities about Immigrant Rights and Build Public Will to Take Action

California is a leading example of progress toward immigrant integration made possible by a strong and diverse coalition that unites a number of different issues and experiences. This progress would not have been possible without immigrants and non-immigrants working together to foster a new and more inclusive California. The national anti-immigrant policies of today present a new opportunity for all Californians to unite and build on such progress.

Despite the negative political climate, our research found that immigrant families remain strong, hopeful, and resilient. State and community leaders, as well as media, can foster this resilience by recognizing the importance of education and awareness in building public will to support immigrant communities and their children, and better prepare themselves to respond to trauma related to immigration enforcement.

A continued focus on improving education and raising accurate awareness of immigration policy is necessary to support the wellbeing of children in immigrant families. Immigrant parents that were surveyed are primarily consuming news from Spanish language television and radio and observing mostly negative messages about immigrants. They also perceive that policy changes will harm them or their family, even when the specific policy change does not apply to them. Youth are also tuning into immigration-related news on television, listening to their families discuss it, or reading newspapers or social media posts. With greater knowledge about their rights, parents, regardless of immigration status are able to separate facts from fear mongering and better advocate for their children.

Half of the key informants raised civic engagement and mobilization as a long-term strategy to better protect and support immigrant communities. Although some immigrants in California are not able to vote due to their immigration status, they can effectively seek to end barriers to essential resources like education and health care for themselves and their children through advocacy. Some key informants shared that it helps to see elected officials and authority figures, such as Governor Brown or Attorney General Becerra, talk about protections and rights publicly and denounce the federal attack on immigrant communities. Everyone in our communities has the agency to call for such statements, regardless of immigration status. Lastly, work with immigrant communities must include holding candidates accountable to the values of inclusion that embrace and protect immigrant families and position our communities, state, and country for a more inclusive future.

Advocacy groups and philanthropic organizations must continue to share accurate information related to the immigrant community and recognize immigrant contributions.

Policymakers and agency leaders, at the state and local level, should more frequently highlight the value of immigrants and promote immigrant rights publicly and with mainstream and ethnic media. They should also use their platform to partner with community-based organizations to spread clear messages that educate immigrant families on the facts about immigration policy and their rights.

Philanthropic and advocacy groups should create partnerships with ethnic and mainstream media to provide Know Your Rights information, programs where people can ask questions, and other helpful educational programming, rather than perpetuating terrifying stories about immigrants. This will help set a positive tone and conversation around immigration issues.

Advocacy groups should build power through mobilization and organizing as a way to build on the resilience of families.

State voter engagement efforts should target strategies at the neighborhood level to support and take on the role of advocating on behalf of their local communities, including immigrant families.

Philanthropic organizations, advocacy groups, and researchers should raise awareness among the public and policymakers about the importance of children of immigrants to California’s future.
Healthy Mind, Healthy Future Team

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Photo Credit: Theo Rigby Photography

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Our Advisory Group oversaw the development of the family research instruments and provided feedback on the policy and programmatic recommendations.

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Katelyn Ogawa, Asian Americans Advancing Justice – Orange County
Imelda Pascencia, Latino Coalition for a Healthy California
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Pao Yang, Fresno Center for New Americans

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Elizabeth Oseguera, California Health+ Advocates

We would like to thank our surveyors and key informant interviewees representing community-based organizations, school communities, and clinics that primarily serve immigrant families for their partnership in this work.

Special thanks to our national partners for their thoughtful partnership throughout the project, particularly the National Immigration Law Center, the Center for Law and Social Policy, and members of the Protecting Immigrant Families campaign.
Appendix

List of Partner Organizations that Disseminated Immigrant Parent Survey

- Asian Americans Advancing Justice
- Casa Familiar
- Central Valley Immigrant Integration Collaborative
- Casa Publica Health Consulting
- Dignity Health
- El Sol Neighborhood Educational Center
- Espacio Migrante
- Fresno Center for New Americans
- Life-Long Medical
- Mixteco Indigena Community Organizing Project/ El Proyecto Mixteco / Indigena Organización Comunitaria (MICOP)
- Roots Community Health Center
- SIREN - Services, Immigrant Rights, and Education Network
- Visión y Compromiso
- Vista Community Clinic

List of Key Informants and Organization Affiliation

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Organization</th>
<th>Region</th>
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<tbody>
<tr>
<td>Jei Africa</td>
<td>Director, Office of Diversity and Equity</td>
<td>County of San Mateo Health System</td>
<td>Bay Area</td>
</tr>
<tr>
<td>Camila Alvarez</td>
<td>Managing Attorney</td>
<td>CARECEN (Central American Resource Center)</td>
<td>Los Angeles</td>
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<tr>
<td>Veronica Camacho</td>
<td>Projects Coordinator</td>
<td>Vision y Compromiso</td>
<td>Los Angeles</td>
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<tr>
<td>Iván Carrillo</td>
<td>Legislative Advocate</td>
<td>Association of CA School Administrators</td>
<td>Sacramento</td>
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<tr>
<td>Mario Chavez</td>
<td>Director of Government Affairs</td>
<td>St John’s Well Child and Family Center, Nuestra Promesa</td>
<td>Los Angeles</td>
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<tr>
<td>Hilda Cruz</td>
<td>Faith Organizer</td>
<td>Interfaith Movement for Human Integrity</td>
<td>Inland Empire</td>
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<tr>
<td>Lucero Garcia, MSW</td>
<td>Social Worker at El Cerrito High School</td>
<td>James Morehouse Project</td>
<td>Bay Area, El Cerrito</td>
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<tr>
<td>Robin Geisler</td>
<td>[Former] Principal</td>
<td>Bowman High School, a California Model Continuation High School</td>
<td>Santa Clarita</td>
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<td>Melanie Gleason</td>
<td>Licensed Pro Bono Attorney</td>
<td>Attorney on the Move</td>
<td>Southern Border</td>
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<tr>
<td>Arucena 'Susy' Hernandez, Isabel Martinez</td>
<td>Community Organizer Resident Leader</td>
<td>Promesa Boyle Heights</td>
<td>Los Angeles, Boyle Heights</td>
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<td>Mayra James</td>
<td>Co-Director</td>
<td>UndocuHealing</td>
<td>Bay Area</td>
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<td>Isabel Kang</td>
<td>Outreach and Services Manager</td>
<td>Korean Resource Center</td>
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<td>Dr. Kristina Lovato</td>
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<td>California State University, Long Beach</td>
<td>Long Beach</td>
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<tr>
<td>Katelyn Ogawa</td>
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<td>Asian Americans Advancing Justice - Orange County</td>
<td>Orange County</td>
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<tr>
<td>Mitzie Perez</td>
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<td>Inland Empire Immigrant Youth Collective (IEYVC)</td>
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<tr>
<td>Luzita Pineda</td>
<td>Policy and Community Engagement Specialist</td>
<td>Clinica Monseñor Oscar A. Romero</td>
<td>Los Angeles</td>
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<td>Imelda Plascencia</td>
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<td>The Latino Coalition for a Healthy California</td>
<td>Los Angeles / Statewide</td>
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<tr>
<td>Thu Quach</td>
<td>Director, Community Health &amp; Research</td>
<td>Asian Health Services</td>
<td>Oakland</td>
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<td>Julio Rodriguez</td>
<td>Imperial County Children and Families First 5 Commission</td>
<td>Executive Director</td>
<td>San Diego</td>
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<td>Guillermo Da Silva-Montemayor</td>
<td>Marriage &amp; Family Therapist</td>
<td>The Institute for the Mind &amp; Emotional Growth</td>
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<td>Ana Suarez</td>
<td>Service Area VII-District Chief</td>
<td>Los Angeles County Department of Mental Health</td>
<td>Los Angeles</td>
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