

Unaccompanied Refugee Minors From Central America: Understanding Their Journey and Implications for Counselors



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The United States has recently seen a significant increase in the number of unaccompanied minors from the Northern Triangle of Central America (i.e., El Salvador, Honduras, and Guatemala). These children and youth are refugees fleeing extreme poverty and gang violence. This study examined the narratives of 16 refugees from the Northern Triangle who arrived in the United States as unaccompanied minors. In particular, the purpose of this study was to gain awareness of the journey experienced by unaccompanied refugee minors from their countries of origin to the United States. Thematic analysis was used to analyze the participants' narratives, and three primary themes emerged: (a) reasons for leaving Central America, (b) journey to the United States, and (c) life in the United States. Implications for counselors and areas for future research are discussed.

Keywords: unaccompanied minors, refugees, Central America, Northern Triangle, mental health

Displaced refugees are a worldwide crisis. The United Nations High Commissioner for Refugees (2015) reported there are 21.3 million refugees worldwide, and half are under the age of 18. Although much attention is given to the refugee crisis in Europe and the Middle East, the United States has recently seen a significant increase in unaccompanied refugee minors from the Northern Triangle of Central America (Sawyer & Márquez, 2017). These are children and youth from Honduras, Guatemala, and El Salvador who are traveling alone and crossing the Mexican border into the United States without legal authorization (Chen & Gill, 2015; Sawyer & Márquez, 2017; Stinchcomb & Hershberg, 2014).

Unaccompanied minors who are apprehended by immigration officials from the Department of Homeland Security (DHS) are transferred to the Office of Refugee Resettlement (ORR) for care (ORR, 2016). ORR (2016) reported that in their first nine years, they annually served an average of 7,000 to 8,000 unaccompanied minors. In 2012, ORR observed their first increase in numbers; services were provided to 13,625 unaccompanied children and youth (ORR, 2016). By 2014, there was a drastic increase in the number of unaccompanied minors arriving to the United States (Androff, 2016; DHS, 2016; ORR, 2016). DHS reported that 68,541 unaccompanied children and youth from Central America were apprehended at the southern border (DHS, 2016). There also was a 117% increase in the number of unaccompanied children under the age of 12 (Krogstad, Gonzalez-Barrera, & Lopez, 2014).

Although there has been a decrease in the number of unaccompanied minors entering the United States in the last few years, the numbers are still quite large. In 2016, 59,692 unaccompanied children and youth were apprehended, and 33% were female (ORR, 2016). Furthermore, the highest percentage of children were from Guatemala at 40%, followed by El Salvador and Honduras with 34% and 21%, respectively (ORR, 2016).

Unfortunately, because of recent anti-immigration rhetoric in the United States, the general public is often misinformed of the experiences of unaccompanied minors (Androff, 2016). In 2014, at the height

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of the surge of unaccompanied minors, various anti-immigration protests occurred in the United States against children and youth from Central America (Androff, 2016; Knake, 2014). In a protest organized in Michigan by the Michiganders for Immigration Control and Enforcement, some protesters carried rifles and handguns along with signs that read “seal the border,” “it’s law—deport,” and “no illegals” (Knake, 2014, para. 12). A major misconception is that unaccompanied minors are immigrants. However, the unaccompanied children and youth from the Northern Triangle of Central America are refugees fleeing impoverished living conditions, extreme violence from gangs and organized crime, and political instability (Androff, 2016; Chishti & Hipsman, 2015; Jani, Underwood, & Ranweiler, 2016; Sawyer & Márquez, 2017). DHS Secretary Jeh Johnson reported that over the last 15 years “far fewer Mexicans and single adults are attempting to cross the border without authorization, but more families and unaccompanied children are fleeing poverty and violence in Central America” (DHS, 2016, para. 1).

Reasons for the Increase of Unaccompanied Minors

The poverty and violence experienced by those living in the Northern Triangle of Central America have been well documented (Chishti & Hipsman, 2015; Gonzalez-Barrera et al., 2014; Jani et al., 2016; Sawyer & Márquez, 2017; Women’s Refugee Commission, 2012). Impoverished living conditions and gang violence are the major factors leading unaccompanied minors to leave Central America. Even though the journey to the United States is filled with grave danger, children are fleeing Central America because of their dire living situations.

Poverty and the Lack of Economic Opportunities

Societal inequalities and natural disasters have negatively impacted this region (International Organization for Migration [IOM], 2016; Seelke, 2016). These inequalities have led those living in the Northern Triangle to experience high rates of poverty and limited economic opportunities. Since 2012, El Salvador, Guatemala, and Honduras have been impacted by prolonged drought (IOM, 2016). This has caused immense food insecurity and has negatively affected agricultural labor. For instance, nearly 50% of the Guatemalan population has experienced chronic undernutrition (IOM, 2016). Furthermore, over half of the population in Honduras and Guatemala live in poverty: 63% and 59%, respectively (Seelke, 2016), and 40% in El Salvador (Padgett, 2014). The Northern Triangle also has high rates of youth unemployment. In El Salvador and Honduras, over 25% of youth ages 15–24 have never worked or studied (De Hoyos, Rogers, & Székely, 2016).

Violence by Gangs and Organized Crime

According to the Council on Foreign Relations, “El Salvador, Guatemala, and Honduras consistently rank among the most violent countries in the world” (Renwick, 2016, para. 4). In 2015, El Salvador’s homicide rate was the highest in the world, with 105 murders per 100,000 inhabitants (Watts, 2015). Moreover, this makes El Salvador almost 20 times more deadly than the United States (Watts, 2015). It is important to note that from 2011 to 2015, San Pedro Sula, Honduras, was identified as the most violent city in the world outside a war zone (O’Connor, 2012). From 2005 to 2010, the murder rate in Honduras more than doubled (United Nations Office on Drugs and Crime, 2011). Guatemala City also has consistently ranked as one of the most violent cities. The U.S. Department of State’s Overseas Security Advisory Council (2016) stated that “Guatemala’s homicide rate is one of the highest in the Western Hemisphere,” with 91 murders per week in 2015 (para. 2).

The high murder rates in the Northern Triangle of Central America are attributed to the *maras*, or gangs, in that region (Chishti & Hipsman, 2015; Jani et al., 2016; Sawyer & Márquez, 2017; Watts, 2015). The violence and murders are because of the rivalry of two prominent gangs: the Mara Salvatrucha, also known as MS-13, and Barrio 18 (Sawyer & Márquez, 2017; Seelke, 2016; Watts, 2015).

These gangs were able to flourish in the Northern Triangle because of weak government and political instability in the region (Sawyer & Márquez, 2017). From the 1980s into the early 1990s, there was a deadly civil war in El Salvador between the government and the Martí National Liberation Front, a Salvadorian political party (Sawyer & Márquez, 2017). From 1960 to 1996, Guatemala suffered from a 36-year civil war between civilian farmers who lost land and voting rights and government military forces (Sawyer & Márquez, 2017). Furthermore, Honduras experienced a military coup in 2009, which led the government to suspend freedom of assembly and the press and authorize excessive force to silence opposition (Sawyer & Márquez, 2017). As the countries began to rebuild after these periods of political unrest, gangs in this region were able to go unchecked.

Gangs in Central America were able to gain control in part because of the drug demands of the United States. These gangs assist in the transportation of cocaine and marijuana moving from South America into Mexico, and eventually the United States (Sawyer & Márquez, 2017; Seelke, 2016; Watts, 2015). However, the Central American gangs are not the major narco-cartel suppliers, so they have relied on robbery, extortion, kidnapping, human trafficking, and weapons smuggling for additional sources of income (Seelke, 2016; Watts, 2015). The extortions have impacted residents, bus and taxi drivers, and general business owners (Seelke, 2016; Watts, 2015). For instance, in the El Salvadorian city of San Salvador, gangs demand residents pay “war taxes,” and those that do not pay face harassment and violence (Ribando, 2007, p. 4).

The gangs actively target children and youth as young as 7 or 8 years old for recruitment (Sawyer & Márquez, 2017). Moreover, the gangs use coercive and violent means, such as kidnapping, extortion, and murder, to force families to “give up their children” (Jani et al., 2016, p. 1196). In El Salvador, gangs have even targeted children at schools, resulting in low school attendance rates (Women’s Refugee Commission, 2012). On the other end, some youth become susceptible to gang recruitment because of high unemployment and absence of family influences (Farah, 2016). Nevertheless, the violence and intimidation perpetuated by gangs are major push factors leading children and youth to flee Central America. The exposure to violence also can have an impact on the mental health of unaccompanied minors.

Mental Health Needs of Unaccompanied Refugees

Although there is a limited understanding of the mental health needs of unaccompanied minors from the Northern Triangle of Central America, researchers have documented the common mental health needs of refugees. Because many refugees have been exposed to traumatic events and violence in their countries of origin, they experience higher rates of mental health issues, such as post-traumatic stress disorder (PTSD), depression, and emotional and behavioral problems (Bronstein & Montgomery, 2011; Karaman & Ricard, 2016; Kirmayer et al., 2011). Mental health needs do not solely stem from the trauma exposure experienced by refugees pre-migration. Many refugees also experience trauma and uncertainties during their migration and post-migration resettlement that negatively impact their mental health (Bronstein & Montgomery, 2011; Karaman & Ricard, 2016; Kirmayer et al., 2011).

According to a recent study conducted by Keller, Joscelyne, Granski, and Rosenfeld (2017), Central American refugees from El Salvador, Honduras, and Guatemala have “significant mental health symptoms” because of the violence they experienced (p. 1). Of their sample of 234 participants, 204 experienced trauma in their countries of origin, 182 fled because of violence concerns, and 166 were afraid to return home. Moreover, rates of depression and PTSD were high among those from the Northern Triangle: 32% reported clinically significant PTSD symptoms and 24% had major depressive disorder symptoms (Keller et al., 2017). Similar findings were echoed in a study that examined the

mental health needs of Guatemalan refugees living in Mexico (Sabin, Lopes Cardozo, Nackerud, Kaiser, & Varese, 2003). The researchers surveyed 170 participants, and all reported at least one traumatic event, with a total of 1,230 reported traumatic events (e.g., being close to death, friend or family member massacred, witnessing the disappearance of others; Sabin et al., 2003). From these participants, 11.8% met symptom criteria for PTSD, 54.4% had anxiety symptoms, and 38.8% revealed depression symptoms (Sabin et al., 2003).

Further research is needed on the mental health needs of unaccompanied minors from the Northern Triangle of Central America. The purpose of this study was to gain awareness of the journey experienced by unaccompanied minors from their countries of origin to the United States and to provide implications for counselors. Therefore, the following research question guided the study: What are the experiences of unaccompanied refugee minors from the Northern Triangle of Central America?

Method

Thematic analysis, a qualitative methodological approach, was utilized because the researchers were analyzing written narratives. Thematic analysis, unlike content analysis, provides a rich and detailed description of the data (Vaismoradi, Turunen, & Bondas, 2013). This research study was approved by the researchers' institutional review board.

Participants

The researchers analyzed the narratives of 16 participants. All the participants entered the United States as unaccompanied minors from the Northern Triangle of Central America (i.e., El Salvador, Honduras, and Guatemala) and were receiving assistance through a shelter in the Southern region of the United States. Part of the assistance included counseling services offered by a counseling graduate program affiliated with the researchers. After gaining signed consent forms, the participants and their appointed legal guardians received individual counseling sessions in Spanish with bilingual counselors-in-training (CITs). Three of the participants were female, and 13 were male. Ten of the participants were from Honduras, three were from Guatemala, and three were from El Salvador. Participants' ages ranged from 10 to 23. Although some of the participants were over 18 years of age at the time of the study, they arrived in the United States as unaccompanied minors.

Data Collection

The data was collected during the counseling process. The CITs involved had at least one semester of supervised counseling experience. They also had completed all foundational counseling courses in their degree plan, including counseling theories, multicultural counseling, assessment, diagnosis, human growth and development, crisis intervention, counseling skills, and group counseling. At the time of the study, the CITs were enrolled in a bilingual counseling course and received information on the counseling needs of unaccompanied refugee minors.

Each CIT was assigned a participant and completed three to 18 hours of individual counseling sessions. The hours varied depending on the participants' availability. Because the participants were exposed to violence in their countries of origin and the journey to the United States, CITs utilized basic relaxation skills, trauma-focused cognitive behavioral therapy (TF-CBT), and expressive counseling techniques to help the participants process their experiences. Upon conclusion of the counseling sessions, each participant organized a digital storybook that illustrated and discussed their journey to the United States. The storybooks were created on iPads using Microsoft PowerPoint. The participants received assistance from their CITs on utilizing the iPad and writing the content for each page of their book. The books ranged from five to 26 pages. After eliminating all identifying

information, the content of the books was provided to the researchers by the CITs. The content was then translated from Spanish to English, and two external auditors provided language translation verification.

Data Analysis

The data were analyzed using the thematic analysis approach outlined by Braun and Clarke (2006). First, the researchers familiarized themselves with the data by reading and re-reading each participant's book content. Key ideas were documented during this time. Next, a systematic approach was taken in reviewing the data and identifying codes. In particular, a "data-driven" approach was used to code instead of a "theory-driven" approach (Braun & Clarke, 2006, p. 88). These codes were then grouped into potential themes based on shared meanings. The researchers also reviewed and discussed the themes to ensure they represented the data. This process allowed for the refining of each specific theme. External auditors then reviewed the themes and reported that the themes reflected the participants' experiences. The participants discussed their journey from their countries of origin to the United States. Therefore, the themes reflect what occurred on their journey. Based on these themes, the researchers provide implications for counselors and discuss mental health issues.

Results

Based on the analysis of the participants' narratives, the researchers identified three primary themes and 11 subthemes. The primary themes were: (a) reasons for leaving Central America, (b) journey to the United States, and (c) life in the United States. Each theme is described in the following section. Pseudonyms were selected for each participant to protect their privacy.

Reasons for Leaving Central America

All the participants discussed factors that contributed to them fleeing their countries of origin. Three subthemes fell under the primary theme of what led the participants to leave Central America: (a) to financially help family, (b) to escape gang violence and death, and (c) powerlessness. It is important to note that these subthemes are closely related. The gangs in the Northern Triangle of Central America were a result of the extreme poverty in that region, and they also contributed to the poverty experienced by the participants.

Financially help family. Many of the participants experienced extreme poverty in their home countries. Enrique shared how he grew up in a "house made out of sticks, mud, and rocks" and how his family "melted fat in order to eat." When he was 10 years old, his father was killed by a gang, and he stopped attending school to provide for his family. He left for the United States with the support of his mother because it was difficult to find a job and the country's economy was unstable because of the gangs. Many of the participants echoed these sentiments. For instance, Federico also shared that "poverty, delinquency, and lack of work opportunities" led him to leave his native country for "a more promising future for myself and my family."

Escape violence and death. All the participants fled their home countries in order to escape violence and death. Federico provided a detailed account of how the *maras*, or gangs, in his native country recruited children as new members. If someone did not join, the gang members would kidnap, rape, or kill his or her family members. This led Federico and many of the participants to flee their countries; they felt there was no other option to escape the violence.

Some participants left their native countries because gang members threatened to kill them.

Brenda lost her parents because of gang violence and was living with her aunt and uncle. Brenda fled to the United States shortly after this incident: “My aunt received a phone call from somebody who said that my sister and I were easy targets. . . . And if they were not paid a certain amount, we [participant and her sister] would be hurt.”

Powerlessness. Another subtheme that emerged was powerlessness. Some of the participants were homeless because of the extreme poverty and violence. Additionally, they felt alone and had no family ties left in their home countries. These participants felt powerlessness regarding what occurred in their lives and fled to the United States to gain a sense of control. Armando shared feeling powerless after his mother died from a heart attack when he was 14 years old. Afterward, he lived with his brothers for 2 years, but they did not support him. Armando’s friend then encouraged him to flee to the United States because he was on his own.

Journey to the United States

In their narrative books, the participants discussed what occurred on their journeys to the United States. The subthemes that fell under this primary theme were: (a) mode of journey, (b) physical pain, (c) emotional pain, and (d) help from others.

Mode of journey. Participants either arrived by riding above trains or through the assistance of a smuggler, also known as a *coyote*. Carlos tried multiple times to come to the United States and primarily used the train. His first attempt was at 6 years old, but he was unable to complete the journey. The second time Carlos fled Central America, he “came aboard the train of death.” The train was often referred to by participants as *la bestia*, or the beast. Several participants shared these experiences. For instance, Enrique made three attempts to leave Central America starting at 11 years old. His journey took him 8 months to arrive in the United States. Other participants arrived in the United States through smugglers. Cristobal described how his parents saved money so they could pay a *coyote* to bring him to the United States.

Physical pain. The participants provided various accounts of physical and emotional trauma experienced on their journey to the United States. Several of the participants reported being beaten and robbed in Mexico when their trains would stop at various points. To find food, the refugees had to get off the train. Federico discussed how traveling alone led one to be vulnerable to “food, water, and clothes predators.”

Some participants described not knowing what to expect on their path to the United States; they were not prepared for what lay ahead while on the train or by foot. Federico wrote: “We knew nothing about the journey, knew no landmarks, and knew nothing about the path that could help us plan ahead.” Damian wrote about the freezing temperatures he was not prepared for when the train reached mountainous terrain. He was traveling with two other boys, and they were only wearing t-shirts and pants. He described how he felt immense pain from the freezing weather and worried that he was “dying from the cold.” Damian felt fortunate that he was traveling with someone who told him they needed to take off their clothes and use their body heat to keep warm.

Other participants provided accounts of being physically injured on their journey because of days of walking in desert terrain. Brenda recalled the injuries and pain caused to her feet: “It took us 8 days to get to our stopping point. I remember that my shoes had peeled the soles of my feet, and my toenails had fallen off.” Feet being severely damaged from walking was a common experience shared by the participants.

Fernando began his journey at 10 years old and recounted the injuries he received from the train and walking nonstop for 2 days as he approached the Mexico–United States border: “My arms were bandaged from having been hurt on the train. . . . I saw the body of a man floating in the river. I wondered if it was the body of my father.” Fernando’s accounts illustrate the nature of the physical and emotional pain the participants experienced. Not only was Fernando physically hurt on his journey, but he also carried the emotional or psychological wounds of witnessing death at a young age. In his book, Fernando also wrote about seeing a man’s body being dismembered after accidentally falling from the train.

Emotional pain. All the participants were exposed to and witnessed trauma on their journey to the United States. They were exposed to physical and sexual assaults and death. For instance, riding above the train was very dangerous. Participants provided accounts of people being sucked under the train as they tried to jump on. Enrique wrote about seeing a girl die trying to get on the train. Federico stated that the following events impacted him the most on his journey: “(I) witnessed a person being shot to death, the raping of women while family members were forced to witness this, witnessing a person being cut to pieces by the train, and seeing pieces of human bodies alongside the railroads.” These were not isolated events; all the participants reported at least one such traumatic situation.

Damian wrote how he “felt frustrated and powerless” after seeing a girl being raped by a gang of three or four men; the girl’s brother was forced to watch the sexual assault. He met the girl and her brother a few days before the sexual assault occurred. Damian was told by his cousin not to intervene or confront the rapists because he would most likely be killed or severely assaulted by the gang. Many of the participants, like Damian, noted that these memories were reoccurring, and how they often think about those whom they saw injured and sexually assaulted. Damian wrote how he wants to find the girl who was raped and explain to her why he did not intervene and that he wants to apologize. In his book, Damian listed her name and the city she was planning to arrive to in the United States.

Help from others. The last subtheme that emerged from the participants’ narratives was receiving help from others. Even though the participants experienced physical and emotional trauma on their journey to the United States, they met individuals along the way that provided assistance. Many of the participants reported struggling to find food. Ismael wrote: “I also remember good people throwing food at us because they knew we were hungry.” Damian shared how he met a “good-hearted lady” that gave him advice on evading possible harm. She told Damian to be careful about motorcycles because they were involved with “kidnapping migrants and asking their families for ransom.” Although this information caused “more real fear” in Damian, it helped him on his journey. There were several accounts of priests in Mexico helping refugees find local shelter. Enrique shared that he received help from a priest who took him to a “house of immigrants” to receive food, clothes, and shelter. These instances of support helped the refugee children and youth continue on their journey.

Life in the United States

The last primary theme related to the participants’ life in the United States. Four subthemes emerged from the participants’ narratives: (a) faith, (b) worries about the future, (c) help from others, and (d) view of self after the journey.

Faith. Some of the participants discussed how they felt God “guided” them on their journey to the United States. When they faced obstacles and harm, God protected them and provided guidance. As a result, they felt God would be present in their life in the United States. Even though they are

continuing to face challenges in the United States (e.g., court hearings, financial instability), they believed God would continue to provide support. In her book, Delmy wrote that “although there might be darkness in life, there is light that always breaks through the darkness.” She then stated that her faith provides her the “light” to keep moving forward in the United States.

Worries about the future. The refugee children and young adults in the study described various worries about their future. Some participants shared worries about providing for their family. Robert echoed these sentiments; he had two jobs to help his family back home. Other participants were worried about their family’s safety in Central America. Damian described how he is worried because his “mother is sad.” She even told him that “she doesn’t want to live anymore” because of the dire situation in Central America. Damian also was worried about the safety of his younger sister.

There were worries expressed about the participants’ safety in the United States. Delmy expressed feeling alone at the detention center and “fears” that people want to harm her. Moreover, several participants expressed worries about their immigration status in the United States and being judged by American society. Jesus stated: “I hope that one day I can be accepted by the American society. I can only pray that I am not judged too harshly. I plan on continuing to help my family to have a better life.” Tomas, like many of the participants, was waiting on his court hearing. He described the uncertainty and worries of his future: “My future is uncertain. . . . I will either be deported back to my country where there is a high possibility that I can be killed, or my immigration status will become legalized in the near future.” For those that fled gang violence, being sent back to their countries of origin could be a death sentence. For Carlos, who recently gained legal status, there was worry about discrimination he might face in the United States: “Some people judge me without knowing me, even more so in this country where there is so much discrimination against immigrants. And even though I am legal, it does not mean that other people will not judge me.”

Help from others. Participants noted receiving help from individuals in the United States. The help they received provided them with hope and guidance to keep moving forward in a positive direction. In his book, Armando expressed how he allowed himself to be picked up by immigration authorities. He felt alone and did not know how he was going to survive in the United States. Armando shared that once he was detained, he received help from his assigned lawyer. She gave Armando hope that he could stay in the United States, attend school, and have a positive future. Now, Armando wants to give back to his community and help other unaccompanied minors from Central America. Damian expressed similar sentiments; he wants to help others because of the support he received from the director of a children’s shelter. The director has become a father figure to Damian and has helped him realize that he has a future.

View of self after the journey. The participants’ views of themselves after their journey was another subtheme that emerged from the participants’ narratives. For some participants, they felt their life was going nowhere—there was no hope. Tomas expressed these sentiments: “My American dream has become my nightmare. My journey here was not pleasant plus I feel helpless here because I cannot help my family in Central America. . . . I feel my life has no meaning.” Not only was Tomas’s journey filled with trauma and pain, his life in the United States was uncertain. Furthermore, he was separated from his family and unable to help them financially or provide for their safety. Other participants viewed themselves as “survivors.” Carlos finished his book with the following: “This book does not show all the pain and sacrifice that I have endured, but it is a reminder that I am a survivor.”

Discussion

This study examined the narratives of 16 refugees from El Salvador, Honduras, and Guatemala who arrived to the United States as unaccompanied minors. The data set was gathered to answer the research question: What are the experiences of unaccompanied refugee minors from the Northern Triangle of Central America? From the participants' narratives, three primary themes emerged: (a) reasons for leaving Central America, (b) journey to the United States, and (c) life in the United States.

There were three prominent reasons that led participants to flee their home countries in Central America. Some participants described living in poverty and leaving for the United States to financially help the family. Also, all participants discussed fleeing to escape gang violence and death. Previous literature on unaccompanied refugees from the Northern Triangle has discussed how poverty (Gonzalez-Barrera et al., 2014; IOM, 2016) and gang violence (Jani et al., 2016; Sawyer & Márquez, 2017; Seelke, 2016) are major push factors. However, participants in this study also reported feelings of powerlessness that led them to leave their home countries. Participants described feeling they did not have control of what was occurring in their lives and fleeing to the United States was a way to take hold of their future. These pre-migration worries and stressors could impact the mental health of the participants. Unaccompanied refugee minors have more traumatic stress reactions than accompanied children and non-immigrants (Bean, Derluyn, Eurelings-Bontekoe, Broekaert, & Spinhoven, 2007).

This study also provided some insight into the experiences of unaccompanied refugee minors on their journey to the United States. The participants described their mode of journey, which fell into two categories: using a *coyote*, or smuggler, and riding above trains. These findings were consistent with what has been documented in the literature (Sawyer & Márquez, 2017; Uehling, 2008) regarding unaccompanied refugees from Central America. Previous literature (Keller et al., 2017; Sawyer & Márquez, 2017) has focused on the living conditions of refugee minors in their home countries, which represent the push factor present in their lives in El Salvador, Honduras, and Guatemala. The participants in this research study shared the physical and emotional pain that was part of the journey to the United States. They provided detailed accounts of how they were physically assaulted, faced various injuries to their bodies because of long days of walking, and lacked the proper clothing to endure the various terrains they encountered. Furthermore, the participants also shared the emotional pain they experienced on their journey: reoccurring images from witnessing physical and sexual assaults and seeing dead bodies. These types of physical and emotional pain place unaccompanied refugee minors at greater risk of mental health problems. The exposure to trauma and stressors can lead refugees to develop depressive and anxiety disorders including PTSD (Keller et al., 2017; Sabin et al., 2003; Vervliet et al., 2014). For minors, mental health issues can significantly impair their functioning (e.g., academics; Fox, Burns, Popovich, Belknap, & Frank-Stromborg, 2004).

In the literature on unaccompanied refugees from the Northern Triangle, there was limited understanding of their experience once they arrived in the United States. The participants in this study provided some insight into these experiences. Faith was a prominent theme that emerged and has not been discussed in the literature. For many of the participants, their faith and religious views were sources of strength as they transitioned to life in the United States. Participants also gained a sense of empowerment from the help they received from various sources in the United States. Emotional support from lawyers or mentors in the community gave the participants hope to continue moving forward in a positive direction. However, many of the participants shared worries about their future. These worries were about their family members who were left back at home, their safety in the United States, and the uncertainty of their legal status. Many of the participants also were aware of the discrimination they would face in the United States.

Discrimination and prejudice have been documented as post-migration stressors for immigrants in the United States (Pumariiega, Rothe, & Pumariiega, 2005). Discrimination can have a negative impact on the mental health of refugees (Montgomery & Foldspang, 2008). Those who experience discrimination may exhibit stress and depressive symptoms (Stuber, Galea, Ahern, Blaney, & Fuller, 2003). The participants wondered whether discrimination would impact their ability to stay in the United States or cause them to be deported. For these participants, deportation meant being sent back to a death sentence. All of these worries and uncertainties about their future led some participants to feel they had no hope for their futures.

Along with the exposure to trauma experienced by unaccompanied minors pre-migration, they experience additional stressors post-migration in the United States. In a study conducted with unaccompanied refugee minors in Europe, there were high rates of anxiety, depression, and PTSD symptoms (Vervliet et al., 2014). In particular, high scores were rated (self-report measures: Hopkins Symptoms Checklist-37A, Stressful Life Events, Reactions of Adolescents to Traumatic Stress, and Harvard Trauma Questionnaire) for these symptoms shortly after the unaccompanied minors arrived at their host countries (Vervliet et al., 2014). Their findings dispute previous research that suggests that there is a “honeymoon” phase experienced after arrival in the host country (Tousignant, 1992; Ward, Okura, Kennedy, & Kojima, 1998). This study helps shed some light into the additional stressors experienced by unaccompanied refugee minors post-migration: worries about their future such as safety, immigration status, and being judged. Constant uncertainty about their future, coupled with the exposure of trauma in their past, might increase the anxiety, depression, and PTSD symptoms experienced by unaccompanied refugees. Obviously, counselors can play an important role in addressing the mental health needs of unaccompanied refugee minors.

Implications for Counselors

Unaccompanied refugees from Central America experience various forms of trauma in their countries of origin and on the journey to the United States (Keller et al., 2017; Sawyer & Márquez, 2017). As a result, these children and adolescents are at risk of developing PTSD and major depressive disorder symptoms (Keller et al., 2017; Sawyer & Márquez, 2017). Therefore, it is crucial that counselors working with unaccompanied refugees be informed of trauma counseling theories and interventions such as trauma-informed care (Substance Abuse and Mental Health Services Administration, 2014).

Additionally, counselors must practice multiculturally competent counseling services with this population and create a safe space for clients to process their trauma (Sawyer & Márquez, 2017). Building rapport is crucial when counseling refugees. Clients might be anxious about sharing personal information because of past experiences of mistrust (Tribe, 2002). Moreover, unaccompanied refugee minors might have culture-bound expressions of mental health symptoms (Pumariiega et al., 2005). This means counselors must have an awareness of their client’s cultural upbringing. Counselors can work with “cultural consultants” who have connections with refugee communities and can assist in facilitating accurate mental health assessments (Pumariiega et al., 2005, p. 591). Culturally competent counselors also need to be aware of factors that can affect the therapeutic relationship such as stigma, location, language barriers, and documentation (Pumariiega et al., 2005).

Incorporating the client’s cultural values in session can assist refugees in “maintaining their equilibrium” (Tribe, 2002, p. 243). For many refugees, their sense of identity may have been threatened in their countries of origin (Tribe, 2002). For the participants in this study, arriving in the United States also meant encountering additional stressors to their sense of identity. For instance, many of the participants worried about their safety in the United States, immigration status, and

judgments and discrimination from others. This study provides insight into cultural values that counselors can incorporate to help unaccompanied minors find some personal balance in the United States. Some participants shared how their faith and helping others brought personal meaning and hope for the future. Other participants held to the notion that they were survivors and that they have the skills to face struggles they will encounter in the future.

It is important for counselors working with unaccompanied refugees to understand the impact of vicarious trauma and the importance of self-care. The process of listening to the stories of refugees who have experienced trauma can in itself be very painful and cause the counselor to experience vicarious trauma. Before a counselor can begin to help a refugee client to open up about painful experiences, the counselor must consider: “Do I have the skills needed to help the client contend with the intense emotions that arise in the counseling process? Do I have the debriefing resources necessary to help myself contend with conflicting emotions?”

Although the CITs in this project had considerable experience working with refugee children as teachers and were intensely prepped for the possibility of hearing their clients discuss graphic content, they still related that the counseling process was emotionally stressful and draining. In order to help the CITs address any vicarious trauma they may have experienced from counseling unaccompanied refugees, they were debriefed after every session by their site supervisors. Many of the CITs involved in this process reported that by discussing their sessions with supervisors and with one another, they felt better able to deal with what they heard. Therefore, counselors providing services to unaccompanied refugees should regularly meet for individual or group supervision to debrief. It is important for counselors to understand the characteristics of vicarious trauma, such as cognitive distortions and changes in core beliefs (Bell, Kulkarni, & Dalton, 2003), intrusive thoughts or nightmares (Hernandez-Wolfe, Killian, Engstrom, & Gangsei, 2015), and decreased self-efficacy (Sartor, 2016). Clinical supervisors can play an important role in helping counselors to recognize and decrease symptoms of vicarious trauma (Lonn & Haiyasoso, 2016).

Engaging in self-care activities can help counselors who are providing services to clients who have experienced trauma (Lonn & Haiyasoso, 2016; Williams, Helm, & Clemens, 2012). Counselors can develop a wellness plan to help maintain self-care (Williams et al., 2012), such as participating in “spiritual or religious renewal” (e.g., prayer, meditation, yoga) or spending time in nature (e.g., camping, walking, hiking; Lonn & Haiyasoso, 2016, p. 4). Self-care activities also can include connecting with other counselors who provide services to unaccompanied refugees.

Limitations and Future Research

There were four limitations in this study. First, the study was comprised of more male than female participants. However, the sample is reflective of the population of unaccompanied minors who enter the United States in that males are more likely to enter the United States unauthorized than females (ORR, 2016). Second, the participants were asked to document their experiences in a digital storybook with the assistance of their CIT. The structure of the books could have limited what the participants shared about their experiences. Third, the digital storybooks were created after participants completed counseling. Participant reports could have been impacted by counseling. Lastly, as a result of the researchers utilizing a qualitative methodology, the findings have limited generalizability. Nevertheless, there were participants representing all three countries (i.e., El Salvador, Honduras, and Guatemala), which helps support limited transferability of the findings (Yardley, 2008).

The findings and limitations of this study provide areas for future research. The qualitative nature of the study and the findings around the emotional pain experienced by the participants opens up

opportunities for conducting quantitative studies. This includes assessing if there are trauma-related diagnoses or depression and the degree to which it is experienced by unaccompanied refugees from the Northern Triangle. Moreover, the effectiveness of particular trauma-focused therapies with this population is an area that needs further exploration. For instance, TF-CBT is considered an evidence-based treatment approach with children and adolescents who have experienced trauma (Scheeringa, Weems, Cohen, Amaya-Jackson, & Guthrie, 2011; Silverman et al., 2008). However, there is limited understanding of TF-CBT's effectiveness with unaccompanied refugees from Central America. Also, examining culturally competent strategies of implementing TF-CBT with this population is warranted.

Conclusion

The treacherous journey unaccompanied minors must undertake to arrive in the United States is not a deterring factor. Secretary Jeh Johnson from the United States DHS reported: "Border security alone cannot overcome the powerful push factors of poverty and violence that exist in Central America. Walls alone cannot prevent illegal migration" (DHS, 2016, para. 4). Even though these children and adolescents walk thousands of miles and face hostile situations on their journey to the United States, they choose this path instead of the alternative, which for many, if they stay in their home country, is certain death (United Nations Children's Fund, 2016; Women's Refugee Commission, 2012). Ultimately, counselors and other helping professionals must consider the instinctive nature of self-preservation, especially in children. Child and adolescent refugees will continue to come to the United States seeking food, shelter, and asylum until their home situation becomes bearable. Until then, counselors and those supporting unaccompanied minors must understand the strengths, stresses, and struggles of refugees to develop effective practices for helping these children to be successful in their receiving country.

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