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Adverse Childhood Experiences and Trauma- Informed Care for Migrant Populations and Displaced Peoples

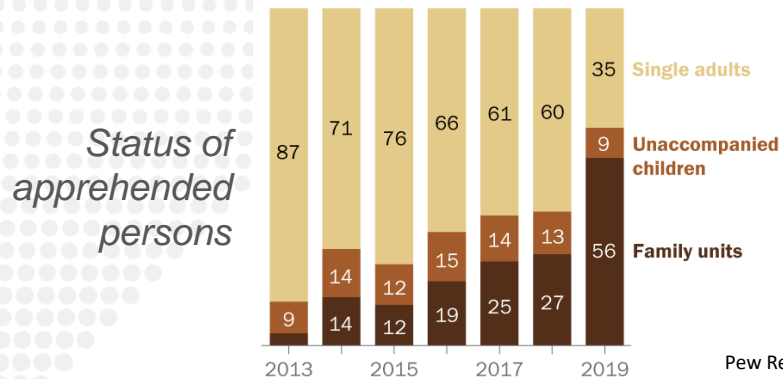
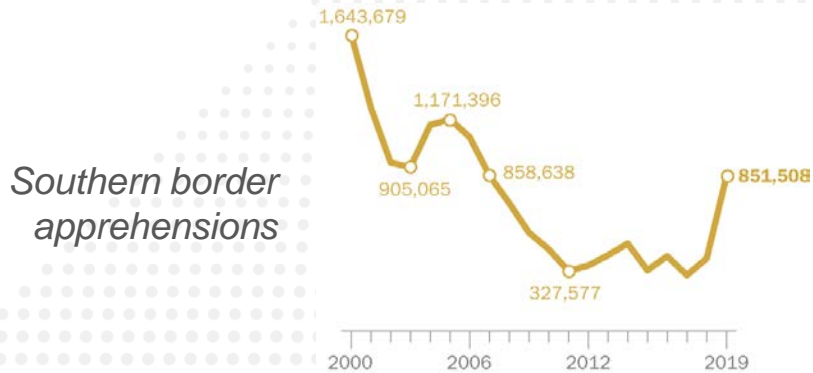
Presented by the MSS Committee on Global and Public Health
November 15, 2019

Session objectives

1. Describe the trauma and adverse childhood experiences (ACEs) experienced by migrant and displaced peoples
2. Recognize the immediate and long-term impacts of trauma and ACEs on health
3. Identify the ways trauma is likely to manifest in migrant children and adults who travel to the US

Migrant populations in the U.S. are large, varied, and growing

- Nearly 45 million people currently living in the U.S. were born elsewhere
- The U.S. accepts 20,000-80,000 refugees yearly
- Apprehensions at the U.S. southern border are increasing; most of those apprehended have been parents and their children



Pew Research Center

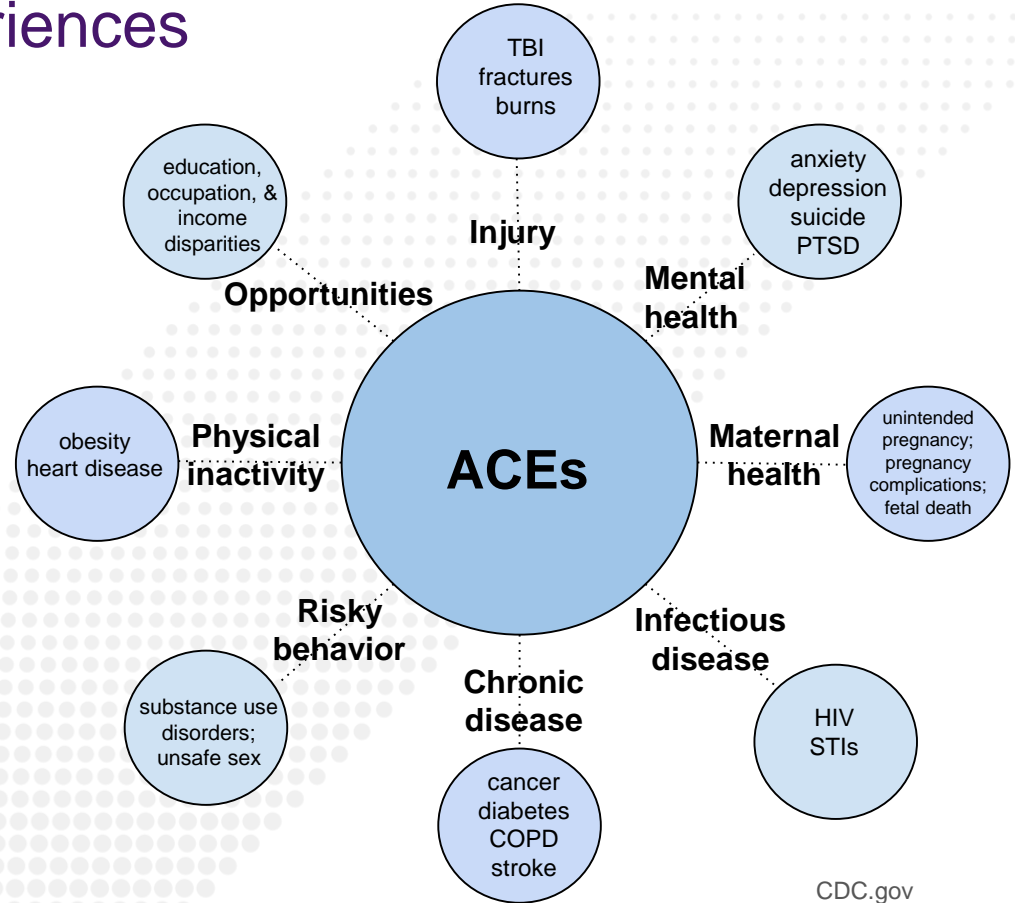
Migration causes trauma in multiple ways

- **Pre-migration:** Stressors may include events that directly precipitate displacement including war, torture, separations, extreme poverty, exposure to violence, natural disasters, forced labor, starvation, or forced combat.
- **Migration:** Stressors include family separations, loss of loved ones, loss of possessions, fear, and lack of food.
- **Resettlement:** Stressors include those related to acculturation such as discrimination, racism, loss of cultural connection and identity, loss of community, social isolation, language barriers, poverty, substandard living conditions, and homelessness.

Adverse childhood experiences (ACEs)

ACEs include:

- **Abuse** (*physical, emotional, sexual*)
- **Neglect** (*physical, emotional*)
- **Household dysfunction** (*mental illness, mother treated violently, incarcerated relative, substance use disorder, divorce, witnessing violence*)



CDC.gov

Migrant children experience numerous repeated ACEs

“They told us that they were hungry. They told us that some of them had not showered...the children told us that nobody’s taking care of them...”

“I need my dad and mommy. My dad didn’t do anything, he’s not a criminal.”



<https://www.vox.com/2019/3/6/18253444/border-statistics-illegal-immigration-trump>

Trauma-informed care (TIC)

Principles of TIC:

1. Understanding trauma and its impact
2. Promoting safety
3. Supporting control, choice, and autonomy
4. Sharing power and governance
5. Ensuring cultural humility
6. Integrating care at all levels
7. Healing happens in relationships
8. Recovery is possible

The principles of TIC support empowerment and recovery.

TIC can and should be given to migrants

Non-English speaking migrants are at highest risk of social isolation and lower integration into their new society, making them high risk for continued trauma and aftereffects of trauma.

For displaced individuals and families, **natural support systems are disrupted,** leaving people with nowhere to turn.

People can and do recover from trauma. Strong social support networks are protective and enhance individual and family resiliency and housing stability.
Physicians can help provide some of that safety and support.

Panelists

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