

Immigrant Families Across the Life Course: Policy Impacts on Physical and Mental Health

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ABSTRACT

Recent immigration policies related to family separation and deportation may have negative mental and physical health implications for immigrant families across the life course. This includes mental health (e.g., stress, trauma) and physical health (e.g., nutrition, chronic conditions) impacts of policies focused on immigrants and immigration. We recommend dismantling policies that are harmful to immigrant families—zero tolerance, the proposed public-charge rule, changes to Deferred Action for Childhood Arrivals (DACA), and Temporary Protected Status (TPS)—and the (re)building of policies to bolster health and well-being among immigrant families across their lives.

Impact of U.S. Policy Changes on Immigrant Families

Characterized by increased enforcement, greater restrictions on immigration, and the criminalization of immigrants, these changes during the last two years reflect a turning point in immigration. Immigrant families are now experiencing uncertainties about family separation and deportation, which can negatively contribute to the mental and physical health of families.^{1,2,3}

- Tightening Borders, Family Reunification, and Indefinite Family Detention. Policy shifts including federal agencies' changes to rules and practices have profound family health impacts for immigrant families with young children.^{12,13} Currently, the experiences of immigrant families with young children are characterized by fear of family separation and uncertainty regarding deportation and status.⁶ These fears and uncertainties

contribute to mental health issues (e.g., toxic stress, trauma, depression, anxiety) and physical health challenges (e.g., access to affordable health care, housing, and nutrition programs) that are detrimental to children's developmental outcomes and family functioning.^{2,3,7}

- Zero-tolerance policy: Impacts on mental health. Separating family members from one another, including children from their parents, may result in negative health outcomes for immigrant families, including irregular sleep patterns, which can contribute to lower academic achievement among children; toxic stress, or persistent stress, which is associated with detrimental effects on brain development and cognitive impairment; symptoms of post-traumatic stress disorder (PTSD), and limited access to good nutrition and health care.²
- Changes to the proposed public-charge rule for immigrants: Impacts on physical

health. The new rule proposes additional scrutiny for immigrants who apply for visas and green cards. If approved, it could mean a decrease in immigrant children receiving nutrition assistance, making them vulnerable to poor health and development outcomes;² a decline in access to medical care, meaning less pre- and postnatal care, and the forgoing of routine wellness checkups and vaccinations;⁴ and a lack of access to housing support, keeping millions of children and families in poverty.⁴ These proposed public-charge limitations also include programs that help older adults and their families meet basic needs. Given recent proposals, elders' immigration status would be at risk if they were to try to access services that support health and economic stability (e.g., nonemergency Medicaid, Medicare Part D, subsidized long-term care, SNAP, subsidized housing, state and local cash-assistance programs).⁴⁰

TALKING POINTS

- Recent changes to immigration policy, with a focus on enforcement and reducing immigration to the United States, have important health impacts for immigrant families across the life course.
- Shifting policy back to a focus on keeping immigrant families together through family reunification, DACA, TPS, and other anti-separation policies is important to immigrant children and families' mental and physical health.
- Policies such as the "travel ban" (Executive Order 13780) breed fear in certain immigrant groups, which is detrimental to the mental health of immigrant youth.
- Adjusting policies and rules to challenge or contest immigrants' access to the social safety net contributes to negative physical and mental health outcomes for immigrants across the life course.

- The travel ban: Impacts on youths' mental health through identity development. Empirical evidence suggests that this policy may exacerbate Islamophobia in the United States and increase risks of poor mental health (e.g., anxiety, depression) among Muslim populations in the United States.²¹ ²⁶ Anti-Islamic and Islamophobic rhetoric not only forces the adultification of youth by exposing them to negative social stigma and hate crimes—as well as knowledge of hate crimes nationwide—but also impedes the healthy identity development of youth and young adults.²¹ Islamophobia imposes feelings of shame, which when internalized, provokes disidentification as a means to cope with the social stigma attached to Muslim identity.²⁶ By providing support for Muslim immigrant youth to develop a healthy sense of identity, focusing on strengths and resilience, allies and affected youth can learn effective coping strategies to navigate undue burdens and psychosocial risks attached to the travel ban policy.
- Rescinding DACA: Jeopardizing immigrant youths' career trajectories and impeding U.S. economic growth. Study results revealed that 96% of DACA recipients were employed or enrolled in school. After receiving DACA, recipients earned higher wages and moved to jobs with better working conditions and health insurance benefits, which resulted in greater financial independence. Reinstating the benefits of the DACA program would allow for the productivity, safety, and continued growth of the U.S. economy and the employability of youth who lack documentation. A majority of DACA recipients report daily stress from fear of deportation and family separation.²⁸
- Social Security. Older immigrant adults' access to Social Security is limited by fewer years in the U.S. workforce and less time to accumulate Social Security credits.³⁰ The situation is particularly troublesome for immigrants without legal authorization, who frequently pay into Social Security but are not eligible for these senior benefits.³⁶ Lifelong impoverishment and lack of economic security in old age can negatively affect health and quality of life for immigrant elders and their families.³⁷
- Health care. The Affordable Care Act (ACA) offers some relief for access to health care by allowing immigrants with legal status to obtain individual health insurance;³⁸ however, there are restrictions on eligibility for Medicaid and Medicare. Furthermore, individuals without legal status are not eligible for Medicare or ACA exchanges, or for federal means-tested benefits, including Medicaid, SSI, or SNAP.³⁹ Even though eligibility for health insurance programs improves access to preventive care, elder immigrants cannot access care for chronic issues or afford to pay out of pocket for care, forcing them to postpone needed treatment.³⁸ This inadequate medical safety net promotes hardship that is preventable and will ultimately increase health-care costs through emergency care.³⁸
- Family reunification and older adults. Family-based immigration is one of the primary ways that late-life immigrants join their families in the United States.⁴¹ Elders perform a key supportive role for adult children and grandchildren.⁴² They help with childcare and decision making, serve as role models,⁴³ and provide a sense of "tradition and belonging."⁴⁴

RECOMMENDATIONS FOR POLICYMAKERS

- Build policies focused on keeping families together, especially as they await immigration hearings or other legal processes.
- Create policies that support immigrant children and families' critical health and care needs by ensuring that immigrants have access to and will not be penalized for using government supports necessary for children and families' healthy development.
- Provide support for youth to cope with psychosocial risks attached to the travel-ban policy.
- Reinstating the DACA program: Providing immigrant youth with safe opportunities for engagement will allow for the productivity and continued growth of the U.S. economy and its inhabitants.
- Change public-charge determinations and eligibility restrictions for health insurance and economic benefit programs so immigrants' needs—housing, food security, economic security—across the life course are addressed.
- Maintain family-based immigration, which supports elder immigrants and their families.
- Provide a permanent solution to immigrants with TPS status, who contribute greatly to the U.S. economy and elder care in particular.

Please see the full brief for a complete list of references. References also are available upon request.

Author Bios

Colleen K. Vesely, Ph.D., CFLE, is an Associate Professor of Human Development and Family Science and Early Childhood Education at George Mason University. Dr. Vesely uses a community-based participatory research approach to understand the experiences of Central American immigrant families as they raise their young children in the United States.

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