

Children of undocumented parents may be at higher developmental risk

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Undocumented people live in a shadowy world of high fear and stress -- fear of deportation and stress brought on lack of economic, linguistic and educational resources.

And of course if they are parents their worries trickle down to their children. A new study from UCLA examines parents' concerns about development, learning and behavior for young children of Mexican origin and identifies whether these concerns differ by the families' citizenship or documentation status.

The study appears in the July-August issue of the journal *Academic Pediatrics*. It shows that, as reported by the parent, Mexican children with an undocumented parent have greater developmental risk than do Latino and white children whose parents are documented or who are U.S. citizens.

"In the United States, nearly 4.9 million or 25 percent of children younger than five years old are Latino, which makes them the largest group of young minority children," said Alexander Ortega, a professor of public health and a professor of psychiatry at the UCLA Semel Institute for Neuroscience and Human Behavior. "That's huge. With [Mexicans](#) as the vast majority of Latino children — 64 percent — understanding their health, well-being and the development of Mexican children is critical, given future U.S. demographic changes."

He added that the concern "is there are a significant number of children

with an undocumented parent whose developmental risks may be missed by the health care sector."

What's less clear, say the authors, is what's causing the concern. Few studies have examined the impact of immigration on children's development and behavior. Studies have identified that [immigrant children](#) tend to have more behavioral problems and learning difficulties in school, which may be attributable to immigration stress. Another study found that a majority of Mexican immigrant mothers perceived their children as having significant delays in language skills. These studies suggest that children who have immigrated, as well as U.S.-born children whose parents have immigrated, may have greater risk in early childhood, but until now little data have been available on how parent perceptions of developmental risk vary with immigration status.

The authors employed the California Health Interview Survey a population-based study of households drawn from every county in California that included Latino children and families, and information on the documentation status of the parents. The survey also included the Parents' Evaluation of Developmental Status (PEDES), which provides information on parents' perceptions of their children's development. Combined, the two reporting tools allowed the authors to examine the associations of family documentation and citizenship status on parents' reports of their children's development.

The sample included 5,856 children under the age of six; of that number, 1,786 had Mexican ancestry. The data were collected in English and Spanish. The response rate was 25 percent, which is consistent with those of general telephone surveys and similar to other recent major telephone health surveys nationwide.

The researchers found that Mexican children with an undocumented parent have higher odds of parent-reported developmental risk compared

to white children or to Mexican children with parents who are citizens or otherwise legally authorized. Interestingly, said Ortega, it didn't appear that characteristics commonly associated with parent-reported developmental risk — household income, parent education and household language — fully explain the association between documentation status and developmental risk for Mexican children in the survey sample.

"From the survey, it's difficult to know the extent to which elevated reports of developmental problems for children with undocumented parents are due to actual differences in development versus an unmet need of parents," said Ortega. "In general, parents need reassurance from pediatric care providers about the typical development of their children. We know the undocumented have significant problems for access to healthcare, so parents may have certain expectations of development that are shaping their concerns," he said.

Timely access to primary care for young children can ameliorate parental worries or provide guidance on development-promoting activities. "The process of listening and responding to parent concerns is a major component of prevention within pediatrics," noted Ortega. Parents who are not receiving this regular reassurance may have more concerns about their kids' development, he said.

Further research is needed to understand which factors are contributing to the observations of the parents, he said. "Unmet physical and mental health needs among the undocumented parents themselves may shape their perceptions of concerns in their [children](#)," Ortega noted.

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