

Expert discusses how border separations can traumatize children

June 22 2018, by Erin Digitale

Unplanned separation from parents is among the most damaging events a young child can experience, according to trauma research. A Stanford expert explains how it can hurt kids' development.

In the last several weeks, thousands of migrant [children](#) have been separated from their [parents](#) as families attempt to cross the southern border into the United States. These separations hurt children's well-being and have negative effects on their developing brains, according to Stanford Children's Health psychiatrist Victor Carrion, MD.

On June 20, President Trump signed an executive order to end his administration's policy of separating families at the border. Still, the effects for children who have already been taken from their parents will last long after border separations are discontinued, Carrion said. Furthermore, the order doesn't address what will become of the roughly 2,300 children who already have been separated from their parents, nor does it guarantee that children arriving now won't be detained for long periods with their families as they await court proceedings.

A professor of psychiatry and behavioral sciences at the School of Medicine, Carrion directs the Early Life Stress and Pediatric Anxiety Program, conducting research on the psychological and neurological effects of [childhood trauma](#). He has worked extensively with children who have experienced interpersonal violence, physical and sexual abuse, loss of loved ones and natural disasters, such as Hurricane Maria in Puerto Rico and the October 2017 wildfires in Santa Rosa, California.

Recently, science writer Erin Digitale asked Carrion to discuss how being separated from their families could affect migrant children.

Q: From your perspective as an expert in childhood trauma, what are the problems with separating members of migrant families at the border?

Carrion: There are many; it's hard to know where to start. Any time there is separation that is not planned by the family, it's perceived by the child as a traumatic event. For children younger than 7 or 8, separation from parents is even worse than the concept of death. At young ages, children see death as something that can be reversible and is not universal, that may not happen to their family.

So the worst thing that can happen to a young child is being taken away from their parents or caretakers. As a child gets older, separation from their family could be the second-worst thing. At moments of high stress, children need even more of the support, care and the feeling of safety and security that they get from their parents. When you take their parents away, all those feelings are taken away: safety, security, confidence, coping skills.

If this happens in an environment that children are not familiar with, it's even more traumatizing, and in a situation where they perceive threats, still more traumatizing. We have good reason to believe that what migrant children are experiencing at the border—where there are guards, where nothing is familiar—is one of the most traumatic experiences possible.

I'm also very concerned about what we call the allostatic load, a term for cumulative stress. We are all responding to all of our experiences in life, not only the most recent. Many of these children may already have a

history of trauma. When you add a new trauma of this magnitude to their backpack, they may buckle under its weight.

Q: What does the latest brain science tell us about how children's development is affected by trauma?

Carrion: There is a popular misconception about resilience in which people think children will overcome things simply because they are children. But nothing in the scientific literature supports this. In fact, what our research shows is the opposite: Having a young, vulnerable brain that is still developing puts you at a disadvantage when something traumatic occurs. The hormones secreted in response to stress alter brain structure and brain function.

When we are under stress, we secrete a hormone called cortisol. When a stressor persists for a long period, high cortisol can become toxic to developing brain cells. It particularly affects cells with more glucocorticoid receptors. The areas of the brain that are strongly affected include the prefrontal cortex, the limbic system and the frontal-limbic connections that attach emotional to cognitive life. These brain regions are where you store memories, where memories get retrieved. We believe brain changes in response to high cortisol are responsible for the anxiety, depression and [post-traumatic stress disorder](#) that we see in survivors of abuse and trauma. We also know that the genetic makeup of an individual, the expression of their genes, can be altered by the experience of stress. Stress can increase the methylation of some genes, causing the genes to behave differently, and not in a positive way.

Q: You've written that "harmful measures that cause prolonged, intense fear in the absence of known caretakers are experienced by children as terror."

Can you elaborate on that?

Carrion: I want to make sure people understand what traumatic [stress](#) is. I think a good way to describe it is as terror. If you are causing harm for prolonged periods to vulnerable individuals, and they are experiencing intense fear, that is terror.

Q: What determines how children taken from their parents will fare in the long run?

Carrion: Several factors are important. One is the support system these children have available to them. Right now they don't have any. Our authorities are supposed to be trying to connect children with family members here in the U.S., but it's hard to know if those efforts are adequate.

I'm especially concerned about kids who don't have families here. How long are they going to be detained? Their long-term response depends on their allostatic load, as well as their age, the duration of this traumatic experience and the amount (or lack) of support they get during this experience.

And although the practice of [family](#) separations is being stopped by an executive order, I am worried about the ability of the system to reunite thousands of families who are already apart. The trauma won't end until all children are returned to their parents.

The resources needed to process what transpired may not be available to many of these families in need. We now have an obligation to repair the children's experience of fear and vulnerability.

Q: Among children who experience trauma, how

many develop PTSD or other similar problems? Can you estimate what proportion of kids separated from their families at the border might be so affected in the long run?

Carrion: Among kids that experience community violence, such as gang violence in their neighborhood, approximately 35 percent develop symptoms of PTSD. When the [trauma](#) comes closer, things like sexual abuse for example, it's more like 50 percent. And among children who survive things like torture and kidnapping, it's 99 percent.

Provided by Stanford University Medical Center

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