

Researchers study the health of children whose parents migrate for work

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Leaving your children behind to migrate for work is not an easy choice but is very often the case for families living in low- and middle-income countries. Researchers have found that although there may be financial benefits for families of migrant workers, the time spent away is potentially detrimental to their children's health, especially their mental health.



Dr. Kelly Rose-Clarke, Lecturer in Global Mental Health at King's, Dr. Gracia Fellmeth at the University of Oxford, and their colleagues studied the health of children and adolescents (aged 0–19) of <u>migrant workers</u> from low- and middle-income countries.

Although they initially found evidence of negative health outcomes for "left-behind children," follow-up research has helped to identify ways to mitigate <u>poor health</u> and build resilience.

Negative health outcomes for children

Research undertaken in 2018 showed that, compared to children of non-migrants, left-behind children and adolescents had worse overall mental health.

This included having higher rates of depression, anxiety, suicidal thoughts, conduct disorder and substance use. The researchers also found that left-behind children and adolescents were more likely to be acutely and chronically malnourished compared to children of non-migrant parents.

"Childhood and adolescence are critical times for lifelong health and development, but there is very little research on the long-term consequences of parental migration for left-behind children. Our work suggests migration away from children may have negative consequences for their physical and mental health," says Dr. Kelly Rose-Clarke.

How can we help these children?

Dr. Rose-Clarke led subsequent research, published in 2021, which explored how left-behind adolescents in Thailand build resilience when their parents migrate.



As part of the research, adolescents, as well as their caregivers, migrant parents and community leaders were interviewed. The research suggests that adolescents need access to three "resources" to be resilient; warmth (love and understanding), financial support and guidance.

Adolescents who had their own caring responsibilities or had an insecure relationship with their parents or caregivers, struggled to build the resilience they needed to protect their health and well-being in the long-term.

"Interventions need to be developed that address mental health and nutritional needs of children who may not have access to parental support. Policy makers and governments need to place more emphasis on supporting families separated by migration, and enable migrants to visit and communicate regularly with their families. This could help to mitigate future health, social and economic costs, and to support a growing number of vulnerable children," says Rose-Clark.

The study is published in Sociology of Health & Illness.

More information: Kelly Rose-Clarke et al, Psychosocial resilience among left-behind adolescents in rural Thailand: A qualitative exploration, *Sociology of Health & Illness* (2021). DOI: 10.1111/1467-9566.13402

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