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Contextual vulnerabilities, Service Dilemmas and Effective Practice: Case Examples from Immigrant Families Undergoing Family Violence

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Abstract

This paper looks at the implications of child welfare service dilemmas related to immigrant families. Immigrant families face intersectional barriers that create service barriers and needs. The paper addresses some of the unique contextual vulnerabilities experienced by immigrant families. Multiple case examples from the field are presented to help child welfare workers understand complexities involved and to what factors to consider when assisting immigrant families and the need to cultural, trauma informed and intersectional focus in service delivery.

Key words: Immigrant Families, Family Violence, Child Welfare, Cultural Competence, Contextual vulnerabilities

The main goal of child welfare in the US is relatively simple: protect children who are at risk for future harm and victimization. However, the implementation of child welfare is anything but simple. There are multiple factors that make these cases very complicated legally, socially, and psychologically. Earlier research examined the impact of race and ethnicity in child welfare cases and found that racial and ethnic minorities are noticeably overrepresented in the child welfare and family court systems (Hughes, 2006) and receiving fewer services and experiencing poorer outcomes (Drake, Jolley, Lanier, Fluke, Barth, & Jonson-Reid, 2011; Courtney, Barth, Berrick, & Brooks, 1996). Complicating this early research on race and ethnicity is whether these individuals are immigrants and/or refugees. These complex situations can be exacerbated by an incompatibility between communities with unique culture and social environments and the available child welfare resources, leading to emotionally charged situations where it feels like everyone involved loses.

Immigrant and refugee families experiencing family violence constitute an underserved population. It is important to recognize that families that migrate to another country is significantly impacted by their culture, environment, family, language, climate friends, social system, legal status, and behavioral norms.

They can experience a duality of cultures and are expected to function within the norms and expectations of both. This can lead to significant internal stress and conflict (Segal, & Mayadas, 2005). Studies identify a multitude of factors common with immigrant families that increase the vulnerability to experiencing abuse. Some common factors include social isolation, external social stressors such as immigration factors, socio economic status, social attitudes about physical punishment and violence, and the impact of extended families on mothers and children. Additionally, these studies identified that presence of multiple risk factors can dramatically increase child vulnerability to abuse and neglect (Institute of Medicine, 2013).

For example, when culture, traditions, legal status, socioeconomic status and religion intersect, the dynamics of family violence are further complicated, further trapping survivors.

Consequently, some immigrant parents that are accused of neglect are not intending to abuse, rather, they come from cultures where child-rearing patterns are different. Furthermore, immigrant children often face multiple forms of trauma beyond family abuse. This is particularly challenging when immigrant children being reared in the US have a culture gap with their parents who were raised in a distinctly different culture. These children are either born in the US or they adapt to the US culture far faster than their parents. Often, these children are also struggling between two opposing cultures and do not feel that their classmates, teachers or even school counselors understand what they are going through.

These intersectional contexts create unique vulnerabilities requiring deeper understanding for service delivery. A cookie cutter approach to services may be detrimental to families. To further illustrate this, a series of case studies will be presented. These case studies come from different agencies, in different communities across the United States. They are designed to help the reader understand how some child welfare situations are unique beyond mainstream approaches and contextualized unique needs and barriers must be understood to be able to effectively advocate.

Disproportionately, minority and immigrant children are placed in the child welfare system. Contextual factors that lead to families being places in the child welfare as well as how families should be served need to be studied. Yet, given the amount of disproportionate representation of minority families being caught in the child welfare system not sufficient research has addressed the contextual elements involved in minority families (Garcia, Aisenberg, & Harachi, 2012), especially immigrant families. When we work with immigrant families, myriad factors need to be taken into account to, among them, we need to identify host country contexts, the culture and rules and practices of host country they came from, and immigration process, how was the circumstances that lead them to leave their country, what was the routes and process of coming to the United States, what immigration policies are in the US are impacting them and in what ways, how are they adjusting in the United States, what is their level of acculturation, what are their needs, what are some cultural considerations that may need to be considered when assessing their parenting practices.

Recent literature in trauma informed care perspective is highlighting the importance of assessing for lifetime trauma (Jayasundara, El-Jarrah, Dabby, & Ahmed, 2020). Many immigrants who come to a host country such as the US, whether through legal or non-legal routes, may have gone through multitude of traumas prior, during, or after their process of migration (Perreira, & Ornelas, 2013). For example many refugee families directly or indirectly may have witnessed severe community violence and/or may have been directly targeted by their own government officials even (Amnesty International, 2020; United Nations High Commissioner for Refugees, 2015), this may lead to many distrusting any government officials, couple this with different parenting styles, different communication styles, and/or language barriers, and varied discrimination experiences they may have had within the US, may make them hesitant and afraid to interact with child welfare officials. On the surface it seem like some families are uncooperative, or do not love their families enough. Yet, the reality may be far from it.

The impact of immigration policies have on minorities have been studied for many years. In the US, the negative impacts on mental health and physical health have been demonstrated with a reliance on a shadow medical system (Kline, 2019). Mental health concerns have been associated with discrimination and may be exacerbated by immigration status (Saadi & Ponce, 2020). More recently, new studies are emerging on how immigration and minority status impact families. Post 9/11 policies such as Patriotic Act, and more recently, Muslim Ban by Trump administration had devastating impacts on some targeted minorities, such as Muslim families who come from certain countries (Eaner, 2007; Paduranga, 2019; Wong, 2006).).

US also has series of policies that enables deportation of noncitizens that impact families (Hagan, Eschbach, & Rodriguez, 2008). One population that is constantly targeted by these immigration policies is undocumented immigrants. While it is safe to say that all undocumented immigrants live in fear of getting caught and deported, given the more targeted nature of immigration enforcement, Hispanic families, coming especially from Mexico and Central and South American countries may live in greater fear (Dreby, 2012).

Past studies have found that a deportation of a family members means they lose touch with that family members, they may not receive the supports, and it might leave many long term mental health consequences (Dreby, 2012; Hidalgo, 2013). If the children are US citizens, this contexts can lead to parents losing their child even permanently (Hidalgo, 2013). Some more newer zero tolerance policies that separate children and parents and increased expedited removal have been examined less because their implementation is newer (Miller, Ripepi, Ernstes, & Peguero, 2020). Implications of these can be expected to be detrimental for generations to come (Capps, Kiball, Campetella, Perreira, Hooker, & Pedroza, 2015).

Child welfare policies impacting immigrant families

Immigrant and undocumented families going through domestic violence is in even further jeopardy. Immigration policies are not the only policies that negatively impact families. A Child Welfare Policy that is especially detrimental to domestic violence survivors and their children is the Failure to Protect policy of Child Welfare System. This law makes domestic violence victims, liable to being charged as perpetrators for the mere fact that were victims, by charging them for not doing enough to shield their children from the abuse, or witnessing abuse (Brico, 2019; Rogerson, 2012). This law is intended to target the non-offending parent in an abusive relationship. Some form of this law is law is pursued by every state of the US, while many states pursue these charges even if they have been or even are likely to experience psychological damage due to witnessing. Some states pursue criminal charges and some states such as Texas pursue life sentences against the non-offending parents (Brico, 2019).

This policy is detrimental to survivors of domestic violence in general, as it is placing undue responsibility on adult survivors. The reality is when someone is undergoing domestic violence the burden cannot be placed on the victims themselves, the responsibility has to lie in the perpetrators, and the larger social systems. This policy design does not take into account the survivor realities (Rogerson, 2012). This also has further ramifications to immigrant families, it is well documented that many perpetrators create dependencies, by jeopardizing people's jobs, credit history, isolating them from support systems etc. But, immigrant families, usually leave their support systems behind and is trying to get acquainted with a new country, depending the length and acculturation, they may not know the laws, may not speak the language, may not be eligible to work legally, may not have any credit history, may not drive, and depending on visa status may not be eligible to any social benefits, may feel they get shunned from the community if they leave, or may be pressured by the community to stay with the spouse, and protect the family at any cost. In some cultures, family honor means, they may face consequences from not only their partners, but, even from their own extended family for even speaking out, and may also be in a position that they are tied to their spouse for immigration status (they may not be aware of legal remedies such as VAWA petitions, U-Visa, T-visa options available to them). Deeper dependencies on their partners, and lack of knowledge of rules and consequences of breaking them, such as violation of no-contact protective orders may implicate immigrant families. Additionally, immigrant families depending on the past individual, cultural, and societal experiences and contexts may minimize seeing domestic violence as a sever crime that harms their families, as oppose to harm caused by loss of their father for example (Amanor-Boadu, Messing, Stith, Anderson, O'Sullivan, & Campbell, 2012; Jayasundara & Nedegaard, 2015; Kelly, 2009; Kulwicki, Aswad, Carmona, & Ballout, 2010). This law does not take into account these factors.

But, the most detrimental consequences may be faced by undocumented survivors, where, their own victimizations, not only leads to potential loss of their child custody, but, potentially getting charged criminally for failure to protect. With criminal proceedings, they will not be eligible for many of the legal remedies available to them to stay as a victim of a crime. Now, they are themselves categorized as perpetrators and this may mean they may get deported (Rogerson, 2012). As mentioned previously deportation of parents have been negatively associated with child well-being (Capps, et al., 2015).

It is very difficult for non-American parents to fight to unite with their American citizen children, by bringing them to their own countries, or coming back to the US. Many times these children end up in the foster care systems, and if their immediate family who is willing to take them on are also considered high risk, for example, living undocumented, and/or high poverty conditions, they may not get custody of these children. Adopting out means the children lose everything they know, including their families, their friends, their culture and customs even (Capps, et al., 2015; Chaudry, Capps, Pedroza, Castaneda, Santos, & Scott, 2010). From a child perspective they may feel they are punished, discarded for no reasons, and may feel that they are powerless to advocate for their wishes. The trauma of losing everything they know may lead to many long term psychological consequences (Capps, et al., 2015; Chaudry, et al., 2010; Dreby, 2012).

An additional policy that may adversely impact immigrant families is, how child abuse and neglect is defined in the US, which is more congruent to middle class mainstream family values. Corporal punishment in some states automatically falls under abuse (Coleman, Dodge, & Campbell, 2010). But, for many immigrant families coming from different cultures, corporal punishment of a child to discipline them may be the only approach they know (Fontes, 2017). The children nor the parents may consider it some acts or forms of punishments as child neglect or abuse. In some cultures a child of a certain age is given more responsibility, and parents may deem it is appropriate to leave them alone to take care of younger children based on their own cultural and family upbringing (Fontes, 2005). But, in many states leaving children under 11 years old alone to take care of younger children automatically falls under neglect (Administration of Children and Families (2018). On the other hand many immigrant families may have lost their informal support systems as they migrated to the Unites States and may not have readily available people to provide daycare, or may not have the money to afford paid daycare (Jayasundara & Nedegaard, 2015). It may fall on the oldest child to take care of the younger children (Fontes, 2005). While, this may not be an ideal context, when child welfare institutions intervene with immigrant families, assessments must take into account these larger realities. This situation is further compounded by the fact that many immigrant families are not aware of CPS laws within the US (Garcia, Aisenberg, & Harachi, 2012). It is even further complicated by child welfare worker lack of cultural competence of immigrant family backgrounds (Ayon, 2009; Hidalgo, 2013).

Study by Garcia, Aisenberg, & Harachi (2012) also found that children of immigrant families, acculturate to host countries customs and rules faster than their parents, such as learning the language. Their study found that sometimes this acculturation gaps creates dilemmas of power struggle in relation to blending into the host country values vs maintaining traditional values and their customs. While this power struggle itself may not create CPS involvement, it create parenting dilemmas for immigrant parents and at times it was found that children pay threaten to call the CPS or INS on their parents as a threat against parental discipline methods, these as well as lack of knowledge of the system itself can create dilemmas for immigrant parent child raising and discipline effectively.

Child welfare system is design in a way that when parents lose their children they have to do a series of activities to prove that they are ready to have the children back (Ayon, 2009). These are legally mandated requirements. These sometimes include attending parenting classes, obtaining housing, getting a job, leaving the abusive spouse, mental health assessment and treatment, anger management classes, and regularly attending reunification meetings etc (Ayon, 2009; Eaner, 2007).

Just mandating them to get certain services can be in reality punitive and may further bar their efforts to work towards reunification or holding their families together. Many immigrant parents due to many reasons may not be able to complete these requirements (Avon, 2009; Capps, et al., 2015; Garcia, Aisenberg, & Harachi, 2012). Sometimes these systems do not provide culturally sensitive or appropriate services (Garcia, Aisenberg, & Harachi, 2012). For example, if the required classes are only offered in English and they don't speak English, they may not be able to complete, or if they are required to pay for services they may not have the money or the transportation capacity to do so, and may not be able to complete requirements. Or if they are required to get a job, or housing, but, their legal status does not allow them to work legally, or lack of credit history, or legal status means they can't get housing, etc. The factors lead to unequitable outcomes for immigrant families (Capps, et al.,2015; eaner, 2007; Garcia, Aisenberg, & Harachi, 2012).

It is important to know they may not qualify for many services due to their status. This is especially true with undocumented immigrants.

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) 1996 for example, restricts undocumented immigrants access to many free social services available to others, this law also restricts many newly documented immigrants also access to certain services till a certain time period (Ayon, 2009).

Additionally, many undocumented immigrants and sometimes low wage earning immigrants are in jobs where they cannot negotiate their job hours (Capps, et al.,2015; Yoshikawa, 2011). They may be forced to choose between making a living to keep the family fed or attend mandated classes, they may not be in positions to do both. Especially, if due to entering the child welfare means the removal of one parent from the picture, they have now an additional financial burden placed on the family (Capps, et al, 2015). It is safe to assume undocumented status means, in general the families may have to live in higher level of poverty due to their lack of access to formal economic markets (Capps, et al, 2015). Sometimes you may find multiple families living in one small apartment, and they may not fall within the child privacy requirements of CPS guidelines. But, this may be due to immigration status and inability to rent an apartment on their name or combined with higher level of poverty, adding to the inability to afford housing on their own. This is not a reflection of their parenting styles. Families cannot be targeted because of immigration status, or poverty, standards we impose on families need to reflect the realities of families, and cannot assume that separation from family because of harsh family conditions of poverty and legal status is the best thing for the child. It presumes only certain social class, and certain type of family is the best for children.

Adding to service barrier is the policies such as Adoption of Safe Families Act (ASFA) 1997, which shortened length of the adoption process timeframe after children living away from their parents. This law mandates that families work expeditiously towards their family reunification plan (Ayon, 2009). However, due to reasons stated above many immigrant families may be unable to complete or even start mandated service requirements within this time frame, which may lead to immigrant families, especially poor, less acculturated immigrant families who face multiple barriers from losing their children (Ayon, 2009; Garcia, Aisenberg, & Harachi, 2012).

While child welfare system may require more mandated requirements to reunify with their children, past studies have found these families have higher need for support based social services, such as cultural broking, transportation assistance, job seeking etc (Ayon, 2009; Eaner, 2007; Garcia, Aisenberg, & Harachi, 2012).

Services needs and Services Barriers of Immigrants Families

Beyond these service needs, Jayasundara and Nedegaard (2015) worked with cultural and immigrant agencies to identify several barriers for immigrant and refugee families that come for family violence and child welfare services. These include:

- 1) Many service providers are unable to effectively connect with the families to identify their distinctive needs. Families often feel that service providers do not attempt to understand their needs and feel they could not trust service providers to effectively support them. Several studies have identified building trust and rapport is extremely important to the effectiveness of a therapeutic relationship.
- 2) Cultural factors are not taken into consideration by mainstream agencies. Many families have reported the services they received felt basic, and they were unable to express their cultural needs. Families stated workers did not adequately ask about or consider factors important to them. For example, workers not understanding their religion and what it dictates for their clients. This often led to families feeling that services were right not for them.
- 3) Linguistic needs not being met. In this same light, families can express concerns that interpreters who understand their dialects were not provided, and they were either not able to express what they needed or understand what service providers needed from them.
- 4) Services were not trauma informed. Some families have talked about how the workers only assessed for immediate abuse and did not take into account additional barriers they were undergoing that were contributing to their current context, such as children getting bullied for their immigrant status at school, and parents facing discrimination at work.
- 5) No knowledge of immigration and of related legal and financial issues. Some clients expressed that some agencies, while being respectful of them, were unable to help them with their complicated immigration issues that can have an enormous impact on their functioning.

- 6) Lack of qualified staff to effectively serve culturally unique clientele. Community services often lack qualified professional staff who were able to provide counseling in a culturally competent and effective manner to diverse immigrant survivors. Rather, some workers resort to giving advice and telling families what to do.
- 7) Immigrant families with more intersectional barriers require more attention and time for family reunification and empowerment. Immigrant families that are less acculturated to the western system, especially if they encounter more intersection barriers, such language, immigration status, poverty, lack of transportation, lack of education etc, require more time to connecting and ensuring they are receiving the services they need, and services need to be contextually individualized and usually require more length than average American family with less intersectional barriers.
- 8) Lack of sufficiently trained foster care families to foster immigrant minority families. Many immigrant communities depending on size of the immigrant community, and knowledge of foster care, does not have sufficient families trained to be foster parents. This can create a dilemma when there is no immediate family to place the children with within a child's own cultural background. This itself can have a negative impact of child's well-being, being placed out of one's culture and then depending on the length reintegrating back with their own family. This can even lead to the child rejecting their own family and customs and values as inferior.

Despite mounting evidence that points to the importance of ethnic agencies serving as cultural brokers (e.g., Abe-Kim, Takeuchi, & Hwang, 2002; de Arellano Ko, Danielson, & Sprague, 2008), few agencies have the capacity to provide specialized services to immigrant and refugee communities. Some argue that current models of practice are inadequate to address family violence effectively in their communities, and that neither the culturally unique communities nor the mainstream service providers are ready or have frameworks to guide them (Jayasundara & Nedegaard, 2015). A study that looked at how helpful immigrant families felt of their involvement with the child welfare system found that immigrant parents did not see their experience with the child welfare system as positive or helpful to them or their families (Eaner, 2007). In the meantime very few educational programs are ready to effectively train students engage with immigrant minority families involved in the child welfare system (Jayasundara & Nedegaard, 2015).

Case Study Examples

Following case studies are presented as examples of complications involved with working with immigrant and refugee communities, and as examples of how agencies successfully assisted as a way of presenting what factors to consider and how child welfare workers can consider assisting going beyond the cookie cutter model of service delivery.

Case Study Illustrations

Case study 1: An immigrant family's six children were taken away due to domestic violence. The mother, who is also a victim of her husband's abuse, was neither fluent in English nor did she have a good understanding of US culture and rules. When her children were taken away, she reached out to the local religious leaders whose lack of knowledge of the child welfare system lead to providing her inaccurate advice. From the child welfare perspective, the mother's behavior suggested that she was resistant and non-compliant. Her case was being drawn out, and the immigrant community was also forming a negative view that child protective services (CPS) was biased against them.

Fortunately, a culturally specific agency intervened in several ways, first intervening on behalf of the mother. It was discovered that her apparent lack of non-compliance was due to her lack of understanding of what was being asked of her and also due to poor advice given by the community. She needed translation services beyond what had been provided. She was required to complete parenting classes, but none of the agencies in the community provided parenting classes in her native language. Thus, she could not complete this requirement. The culturally specific agency also intervened to provide the culturally and linguistically appropriate parenting education. She also needed additional case management and counseling services. As a mother of six, she needed crisis shelter services and long-term housing for herself and the children, and financial assistance. The mother was afraid to leave her husband as she had not worked before and was not eligible for welfare services due to her immigrant visa status. She needed transportation services and daycare services among others. She was not aware of how to care for the family financially. This mother was able to obtain services through a partnership with local community social service providers who worked towards getting her necessary legal and immigration help.

The CPS case workers benefited from education about the unique context based dynamics of abuse and were able to be of greater assistance to the children by providing them case management and culturally appropriate counseling.

Case study 2: A local ethnic immigrant agency learned through a community member that certain immigrant children were placed in a foster home by a child protection agency. These children were asked to practice a religion that was different than their own. The children, especially the older child, was very conflicted and traumatized by this event. A representative from the local ethnic agency reached out to CPS and set up a meeting to talk about the concerns that were brought forward. That discussion lead to both agencies identifying needs and gaps. For example, it was identified that there were no foster families from certain immigrant communities. In partnership and support from CPS, the ethnic agency set up several community events to talk about the importance of recruiting new immigrant foster families. Several immigrant families were identified and eventually certified as foster parents. It was also identified that many of the CPS trainings lacked deeper cultural understanding. The agency volunteered to do a series of free on-going trainings for the local CPS workers. These also emphasized the importance of culture and trauma informed care principles to prevent re-traumatization through service delivery. These trainings were designed to develop a deeper appreciation of the immigration experience, hone their ability to establish rapport, and to recognize the unique experiences of these populations. The agency also volunteered to serve as free consultants or reference points if the child welfare system encountered any contexts that needed cultural guidance.

Case study 3. It came to the attention that a mother without legal papers was experiencing domestic violence. She was unwilling to go the shelter and apply for Medicaid and food stamps for her child, who was a US citizen and was eligible. She would only call the crisis hotline. Child welfare workers felt that she was on the move and it was clear that her child was not attending school. On the surface, workers felt like she might just be acting "paranoid" and putting her child at risk. However, shelter hotline staff used a legal empowerment paradigm where they would listen, build rapport, and help improve the negotiating position of individuals in this circumstance. They were able to engage the mother with empathic listening, reinforcing the message that the agency is not there to take children away and were only there to assist families such as theirs. The mother revealed that her partner had threatened to report her to the authorities and was concerned that if she filed for benefits for her child, he would help the authorities find and deport her. Additionally, she had heard that with changing laws now Immigration and Customs Control (ICE) could conduct raids at shelters. Her child had also experienced bullying by other children at school, telling him that the authorities were coming to get him and his mother. Such a situation would be even more complicated in rural contexts, as poor immigrant farmers, sometimes without proper documents often face greater obstacles to economic advancement and stronger resistance to their presence from long-time residents (Fluharty, 2002; Neal & Bohon, 2003). The agency engaged with the mother for a realistic discussion, addressing her concerns but also discussing what her options are. They were able to inform her that she had an opportunity to file a VAWA self-petition and the U-visa process. The mother was also made aware that while a possibility of an ICE raid of the shelter existed, it was extremely unlikely and that she was much safer there at a shelter. She was informed that there was benefit to her legally to be at the shelter rather than be on the run, as being on the run led her to charges of kidnapping or child neglect. In the end, this mother was not only able to successfully apply for a U-visa, return her child to school, and apply for Medicaid for her child, but she was able to stay in the shelter until she found long term housing.

Case study 4: An immigrant agency wanted to do outreach on dating violence and family violence with middle and high schoolers as an after-school program at the local school. In their outreach efforts, they identified that many of the immigrant children, especially Middle-Eastern children, were increasingly experiencing bullied due to the current US climate of xenophobia and Islamophobia. They also identified these children did not have many people they could reach out to or talk about their experiences with. Children who participated in the training had experienced family violence and many had CPS involvement. Children talked about their parents not understanding what they are going through, and that even if they knew, they did not have confidence in their parents to effectively advocate for them. Because of this experience, the immigrant program decided that bullying needed to be an explicit part of their outreach program. The students needed outlets to vent and identify ways of safety planning both at school and at home. It also led to identifying that teachers were not fully aware or fully equipped to address what these students were experiencing. This led to the immigrant agency reaching out to the school administrators, ultimately leading to teacher trainings on the experiences of immigrant and Muslim youth and how to effectively engage them.

Case study 5: A 10-year-old boy from a refugee family living in a rural community was taken away while he was at school due to a teacher's report to CPS. The teacher had found some belt marks on the boy's thighs. The mother spoke no English, the father spoke very limited English, and the family was very isolated in a small town with a few friends who shared the same immigrant Asian culture. The US culture was totally alien to this family, and when their only son was not showing up at home the day he was taken away, the mother was extremely emotional, and this was interpreted as "unstable". The CPS team considered it unsafe to return the child home while conducting an investigation. All cases were supposed to be heard in court within 48 hours of the child removal, but this case was delayed to ten days since it took the court a long time to locate a licensed interpreter of that particular Asian dialect. The boy was placed with an American middle-class family. The family perceived the attitude of the initial CPS intake worker to be very hostile and blaming, because they were not told when they could see their child or where he was staying. When the mother finally saw her son in the courtroom, she could not control her emotion and was screaming and crying loudly for her son's return. From the CPS perspective, this appeared to be a clear case of child abuse as the boy talked about a beating from his father while the mother witnessed this and did nothing about it.

The family was fortunate because they were assigned a guardian-ad-litem (GAL) who shared some of their culture and traditions. The GAL carried out independent investigations and talked to all parties in order to best inform the judge and maintain the best interests of the child. The GAL understood that some Asian cultures still believed that physical punishment is an acceptable form of parental discipline. The father had high ambitions for his son and would physically discipline the son when he refused to study as he was told. The father had no other parenting methods to draw upon in order to get his son to study, and he felt that his son was more willing to listen to him and comply after he was beaten. The father held the belief that it was his duty to physically discipline the child for child's eventual benefit. The mother also subscribed to her cultural belief that the father was the head of the household and she should not go against him. However, both stated that they loved the child and that physical discipline was only used where studies were concerned. The child confirmed this. The GAL found the mother and son to be severely traumatized by the removal process. The child was very attached to the mother and had never spent a night without his mother. This experience added yet another layer of complexity to this case.

It was clear that the family needed to made aware of US laws and learn more effective better methods to discipline their son that are culturally appropriate. Due to the advocacy from the GAL, the judge ordered culturally competent services for the family. First, a family-based worker was assigned to work with this family for legal, effective, and culturally appropriate parenting skills with the help of an interpreter. Second, family therapy was ordered to help improve the communication skills between the parents and the child. The culturally appropriate counselling was helpful in rebuilding the relationship and addressing the trauma they experienced.

Case Study 6: Hmong survivor was brought to a local culturally sensitive DV agency after the perpetrator tried to choke her. She had 3 of her four children with her. She had been unable to find her eldest son when she escaped. The survivor came from a very tightly knit Hmong community which spoke a little known dialect - it was a community within a community, and was extremely insular. Anyone not living there was an outsider, and not trusted. The perpetrator held a position of power within the community and was held in high regard. When the survivor met with the attorney, she was advised to file criminal charges against the perpetrator, and then pursue custody and divorce. Child welfare services were involved, and tried to investigate the perpetrator for allegedly beating the children with metal chains, and displaying a ceremonial sword in the living room as a deterrent to "bad behavior". The police and child welfare services met with resistance from the whole community and they closed ranks against them. Even the child left behind refused to cooperate and told them he had never been abused or threatened.

The case worker from the DV shelter, who spoke a similar Hmong dialect and understood the dynamics of the community, met with the child, along with a child welfare worker, at school. They took their time to build rapport and trust. It took them almost a year of meetings before the young boy gave them any information. The case workers also developed relationships painstakingly with some members of the community who were sympathetic to the survivor. A change of attorney at the DV agency further complicated matters. It was after almost 2 years that the survivor was finally able to gain custody of her son - which the perpetrator agreed to after she dropped criminal charges against him.

In this case, language seemed an insurmountable barrier, as well as the social dynamics of the closed, tight community. If the case workers - DV and child welfare, had not taken the time with the child and community members to build relationships of trust, this outcome would never have taken place. The survivor's persistence paid off, but only with help. Her life was threatened multiple times not just by the perpetrator, but also by other members of her community who considered her a "traitor" for going to the authorities.

Case Study 7: The survivor divorced her perpetrator and obtained joint custody of her 8 year old daughter - the perpetrator had alternate weekends of visitation. He remarried. After a few visitations, the survivor noticed some sexual acting out by the child which alarmed her. She spoke to the counselor at the DV agency that had helped her and explained her concerns. The counselor started working with the child to find out what was going on. During play therapy, the child indicated that the father was indulging in sexual activity in full view of the child.

When child welfare services were involved they were initially very dismissive of the mother due to her religious and cultural background. The survivor was a devout Muslim, and dressed accordingly in long robes and a hijab. She was viewed as being "too conservative". It took a lot of advocacy by the agency - the counselor and the case worker, before the survivor's concerns were taken seriously. The counselor explained what had happened during sessions and what the child had done during play therapy. The case worker at the agency engaged with the child welfare case worker to explain that religion and culture were not part of the complaint, they were not playing a role here.

Case 8: With immigration cases, there are almost certainly instances of family separation, primarily when crossing the border or when raided by Immigration Customs Enforcement (ICE) Agencies. Under the Presidency of Donald Trump, it was clear that certain policy implementations and actions ruled unfavorable upon immigrant communities given his stern willfulness in operating inadequate detention centers and implementing family separations at the border through his Zero Tolerance Policy in 2018. The effects of this policy have caused an array of damage; both mentally, spiritually, emotionally, and psychologically that have affected children and parents. In efforts of family reunification, the U.S. has utilized the American common practice for family reunifications under the utilization of Child Protective Services.

Seeing as to how some immigrant children were taken into the foster care system through the implementation of Trump's Zero Tolerance Policy, the same applies for some children who enter the country as minors and cross alone, which is how Fernando's story unfolds. (Names have been altered for security purposes but the incidents that occurred are true events).

Fernando or "Nando" and his friend Enrique known as "Quique", were born in Honduras, a country that unlike the U.S. provides little opportunity for stable finances, food accessibility, shelter, and protection from violence, as well as an opportunity to obtain a quality education. Both Nando and Quique made their journey to the U.S. by utilizing the freight trains that travel through Honduras and would sit at the top of the train until they reached the frontiers of the U.S.

Nando of 14 years and Quique of 11 years faced many dangers and traumas on the train, and could easily die from starvation, dehydration, and violence from gang members who would seek to possess other individuals' goods. Nando and Quique had planned to travel to the U.S. in search of Nando's mom Fernanda had fled the country of Honduras to live in Texas in hopes of making a better living to provide for her son. Though however, upon arrival into the U.S, borders the minors were caught by ICE officials and detained in immigration detention centers in McCallen Texas. Upon detention of 6 months, the boys were then transferred over to Child Protective Services, and Nando's case seen as a family reunification issue due to Nando's mom being physically present in Texas. However, the family reunification efforts were minimal and the boys were placed into the foster care system instead. Both boys were placed into adoptions and were adopted by a woman who spoke minimal Spanish and held strong American customs and beliefs. She had adopted them in order to help them obtain a better life, and teach them the life skills necessary to be successful in the U.S. such as basic working skills and basic English. The boys' hopes were to work in the U.S. to be able to make a decent living, but did not have the permission to do so as they did not have the proper documentation. They were then enrolled in school, and still have some difficulty with the concepts due to their limited understanding of the English language. There are many other cases such as these, where minors are placed into the hands of Child Protective Services with hopes of family reunification, but ultimately end up in adoptions.

The case was referred at this stage to a cultural immigrant support agency. They clearly understood the barriers that many immigrants and immigrant minors face upon arrival to the U.S. language barriers, the adjustment to transitioning to a new culture and way of life, and the ideologies perceived by immigrants of how life upon arrival within the U.S. would be like. They understood the reality is that many immigrants are taken advantage of such that they do not understand the language of this country, they also are restricted to accessible needs others may take for granted such as affordable health care/dental/ mental health care and emergency room visits, the ability to work, the ability to obtain a drivers license, and often live with the constant fear of being deported which is why many do not turn to receive services.

The social worker assigned to this case through cultural agency, educated Nando and Quique on the rights they do have and helped them understand what services they are eligible to receive without the fear of deportation. They were connected to immigration agencies that advocates for the rights of immigrants, advocated and educated child protective services about child needs and concerns, assisted with legal aid processes to provide legal help, provide English as a Second Language Courses, and connects them with the appropriate resources they are eligible for in relation to dental, medical and mental health care, as well as assist with finances related to rent expenses, utilities, and school-related expenses through scholarships. By supporting immigrants with services such as these, it would ease their adjustment process and provide a sense of relief to their stay in the United States as well as enhance their overall mental health an issue that is overlooked upon many of the immigrant populations.

Sometimes perceptions can hinder a case and negative biases can block a legitimate complaint. Just because a survivor comes from a certain culture or religion, that does not invalidate what she is saying. What this survivor was concerned about is considered wrong in Western culture too. She had trouble making herself heard because she came from a certain religion - which is perceived as being not "Western" enough.

Discussion and Conclusion

This paper provided case examples of how immigrants had improved services and outcomes because child welfare agencies and workers were willing to partner with cultural experts to help improve their practice. Due to the complexity of these cases, multiculturalism, intersectionality, trauma informed care, knowledge of immigration and other policies how they impact immigrant families, are all needed in order to produce effective child welfare work that promotes child-wellbeing and safe living environments (Jayasundara, et al., 2020; Korbin, 2002; Kossak, 2005; Sengupta, 2006; Velazquez, McPhatter, & Yang, 2003). Every child welfare incident involving diverse populations, such as immigrants, need to be assessed contextually in case-by case scenarios with cultural humility. We cannot afford to inadvertently reinforce additional barriers to child welfare services such as a caseworker's lack of knowledge about immigration status, cultural misunderstanding, and language access issues (Earner, 2007).

The uniqueness of the needs stories presented in this paper, speaks to some of the complications involved in the refugee and immigrant families involved with the child welfare system. Child welfare specialists are often challenged by extraordinarily complex situations and much is required of them. Being attuned to the unique contextual aspects of their clientele helps maximize their chances of success with these challenging client situations.

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