

# CENTRAL AMERICAN MINORS

**T**he *Central American Minors (CAM)* program was established in December 2014 in response to the arrival of unprecedented numbers of unaccompanied minors from Central America on the southern border of the United States. Administered by the United States Department of State, Bureau of Population, Refugees, and Migration, the CAM program, as it is commonly known, provides qualifying parents from Central America who live in the United States with a safe and legal means of reuniting with qualifying children still residing in their home countries of El Salvador, Guatemala, and Honduras.

With concern for the safety and well-being of these children, the program is part of a regional humanitarian strategy intended to deter children from attempting the perilous, unaccompanied journey to the United States through Mexico. Grounded in U.S. policy, which prioritizes the reunification of families, and in keeping with international standards for human rights and the rights of the child, the program seeks to protect children who were persecuted or fear persecution due to race, religion, nationality, political opinion, or membership in a particular social group.<sup>1</sup> The program allows for the orderly arrival and transition of Central American Minors into U.S. communities. The relationship of eligible children to qualifying parents in the U.S. will be confirmed through DNA testing.

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## RESOURCES

For more information about the CAM Program, see the **CAM Fact Sheet** available in English and Spanish on the U.S. Department of State website ([www.state.gov](http://www.state.gov)) or ***In-Country Refugee/ Parole Processing for Minors in Honduras, El Salvador and Guatemala*** on the U.S. Citizenship and Immigration Services website ([www.uscis.gov](http://www.uscis.gov)).

Additional bilingual information on **the CAM Program** is available on the website for the Refugee Processing Center ([www.wrapsnet.org](http://www.wrapsnet.org)) which administers a global, standardized case management system for the U.S. Refugee Admissions Program.

## The Northern Triangle— Push and Pull Factors in the Migration of Minor

Currently, unrelenting poverty and persistent social and political malaise have brought the countries collectively known as the Northern Triangle close to collapse. The region's problems have been exacerbated by the expansion of criminal activity from Mexico and the inability of the governments of El Salvador, Guatemala, and Honduras to assert any real authority over well-financed and heavily armed local and transnational gangs. Drug trafficking, kidnapping, sexual and physical assault, extortion, and murder are commonly met with impunity. The region consistently records some of the worst crime and highest murder rates in the world.<sup>2</sup>

Minors are increasingly targeted by these gangs. Schools are prime sites for recruitment resulting in high dropout rates, as parents or caretakers try to protect school-age children by keeping them at home. Churches have also reportedly become sites of gang recruitment. Children of parents who have immigrated and are providing remittances are especially vulnerable not only for recruitment but for extortion and kidnapping as well.

Endemic insecurity in society at large is compounded by increasing violence in the home as adults living under growing economic pressure fear for their lives. Physical and sexual abuse of children, including incest, have been consistently reported as root causes for flight in studies of unaccompanied minors from Central America.<sup>3</sup> Widespread gender-based violence is also on the rise and is reflected in the growing number of young girls migrating alone or seeking protection.

Disenfranchised youth in the Northern Triangle thus face discrimination as well as social and political exclusion and are deprived of education, employment, health services, and even adequate nutrition. These challenges have gradually accumulated into a recognized humanitarian crisis which the CAMs program seeks, in part, to address.

## PURPOSE OF THIS BACKGROUNDER

Unaccompanied minors arriving from El Salvador, Guatemala, and Honduras through the CAM program will be assisted by resettlement agencies located throughout the United States. This backgrounder has been produced to support resettlement agency staff who receive and welcome these children, and to aid others in the host communities—educators, health professionals, social workers, government officials, and members of the general public—who may be engaged to help Central American Minor refugees adjust to life in the United States.

This backgrounder contains historical, political, and cultural information intended to cultivate a rich understanding of the diversity of these countries and peoples. In addition, it contains information on the health, education, and family life of these children that will aid service providers in tailoring care to each child's specific needs. Although many, if not most, of these children will have experienced, witnessed, and survived impoverished conditions, widespread violence, and political or social oppression, they also possess strengths and resources that can be drawn upon to nurture the innate resiliency of youth and enhance their future as U.S. citizens.

## REGIONAL PROFILE

### HISTORY

El Salvador, Guatemala, and Honduras are the northernmost countries of Central America, located south of Mexico on the isthmus between North and South America. With the rest of Mesoamerica, they share a common pre-Columbian history in which the Lenca, Olmec, and Maya civilizations flourished. These sophisticated indigenous cultures left a rich legacy of art, architecture, and culture that is still evident in the region today.

First contact with the Spanish in the early 1500s ushered in three centuries of colonial rule which ended in 1821 with a collective battle for independence. When the short-lived Federal Republic of Central America dissolved in 1838, the distinct countries now known as El Salvador, Guatemala, and Honduras were formed. Post-colonial instability in the

region continued into the 20th century, bringing shifting civil and military rule, uneven economic development, social unrest, and war. Natural disasters have also taken a toll on the region which is vulnerable to hurricanes, active volcanoes, and earthquakes.

### PEOPLE

The people of El Salvador, Guatemala, and Honduras have common ethnic characteristics related to their shared past. Most people in the region are mestizo, having a mixture of European and indigenous ancestry. To this day, small populations with African heritage from slaves brought to the region by Spanish traders still exist. There are also distinct groups of Europeans living in Central America of Spanish, German, Belgian, Dutch, and other descent. More recently, new immigrant communities from China and other Asian countries have appeared, primarily in large cities.



The Salvadoran economy has fared somewhat better than its neighbors', but the growth rate has slowed and the national debt has increased in recent years. It exports coffee, sugar, textiles, and apparel. Migration from El Salvador has been high in the past half-century and some 20% of Salvadorans live overseas. Approximately a third of all households receive remittances from family members living abroad.

**GUATEMALA**



Some indigenous communities survived the colonial period intact, though they have not flourished and have been subjected to widespread discrimination and political oppression. In El Salvador and Honduras, indigenous tribes are small and few, whereas in Guatemala indigenous people make up about 40% of the population. While Spanish

is the official language in all three countries, more than 21 indigenous languages are still spoken in Guatemala. Similarly, Roman Catholic, Protestant, and indigenous religious beliefs are practiced in all three countries.

**EL SALVADOR**



Photo: The World's Inhabitants (1888)

El Salvador is the smallest Central American country (slightly smaller than Massachusetts) and has a population of 6.1 million. The capitol, San Salvador, is home to roughly one million people and more than 66% of Salvadorans live in cities. The country is mountainous with a central plateau and a narrow shoreline along the Pacific coast. It is known as the Land of Volcanoes, and earthquakes, volcanic eruptions, and hurricanes are frequent and often destructive. It borders Guatemala and Honduras.

Guatemala is a little smaller than Pennsylvania and has a population of 14.6 million, the highest in Central America. The capitol, Guatemala City, is home to almost three million people. About half the population still live in rural areas, though migration to urban centers is growing. A mountainous country with coastal plains and a rolling central plateau, the climate is hot and humid except in the high terrain. It is susceptible to frequent and sometimes hazardous earthquakes and volcanic activity and vulnerable to hurricanes from

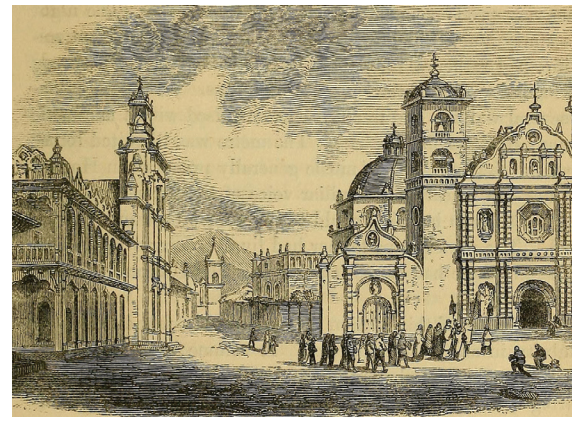


Photo: Explorations and Adventures in Honduras (1857)

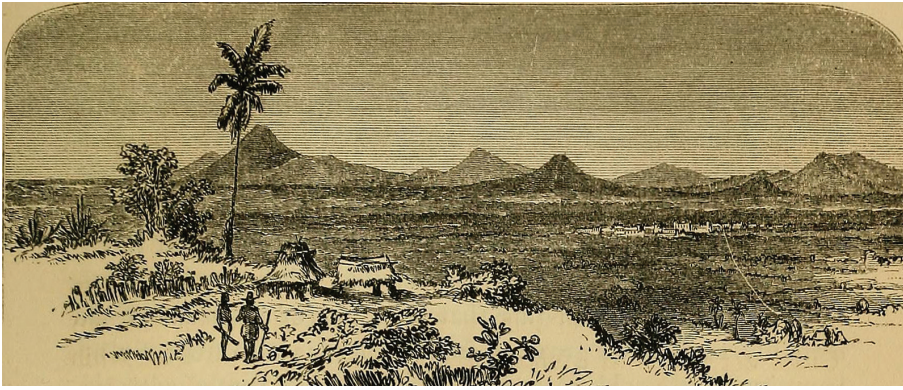


Photo: Explorations and adventures in Honduras (1857)

the Caribbean Sea. It borders Mexico, Belize, Honduras, and El Salvador.

Guatemala is both a very young and a very poor country. Over 58% of the population is under 24 years of age and about half of the children under five suffer

from chronic malnutrition. It has the highest fertility rate in Latin America. It exports coffee, sugar, and vegetables, but its proximity to Mexico creates the potential for spillover of some of Mexico's drug trafficking, money laundering, and corruption. Income inequality is a serious problem with over half

the population living below the poverty line. The discrimination against Guatemala's large indigenous population—more than 40%—is reflected in its poverty statistics: 73% of indigenous people in Guatemala live below the poverty line and 22% live in extreme poverty.

## HONDURAS



Honduras is a country of roughly 8.6 million people and is a little larger than Tennessee. The capitol is Tegucigalpa and 54% of the population lives there or in other growing urban areas. About 65% of the population lives in poverty, and income inequality in the country is high, as is unemployment. The education system is weak with a high drop-out rate and low accountability, making it difficult to break the cycle of poverty. Main exports have traditionally been coffee and bananas with some growth in recent years in apparel and automobile parts.

The country is subtropical and mountainous in the interior, with narrow plains along the coasts. It shares the Gulf of Fonseca on the west with El Salvador and Nicaragua and has a longer shoreline along the Caribbean Sea to the east. It borders Guatemala to the northwest, El Salvador to the southwest, and Nicaragua to the southeast. It is vulnerable to hurricanes and in 1998 Hurricane Mitch did extensive and long-lasting damage.

### SUMMARY ETHNIC, RELIGIOUS, AND LINGUISTIC GROUPS IN EL SALVADOR, GUATEMALA, AND HONDURAS\*

	EL SALVADOR	GUATEMALA	HONDURAS
<b>Total Population</b>	6.1 million	14.6 million	8.6 million
<b>Ethnicity</b>			
Mestizo	86.3%	59.4%	90.0%
White	12.7%		1.0%
Black			2.0%
Amerindian	1.0%	40.5%	7.0%
Other		0.1%	
<b>Religion</b>			
Roman Catholic	57.1%	68.0%**	97.0%
Protestant	21.2%	25.0%**	3.0%
Other	4.9%		
None	16.8%		
<b>Literacy</b>			
Population below poverty line	36.5%	54.0%	60.0%

\* Source: CIA World Factbook

\*\* Source: International Religious Freedom Report 2007, Guatemala, Bureau of Democracy, Human Rights, and Labor<sup>4</sup>

## REFUGEE POPULATION PROFILE

The United States has a large, well-established Latino population as well as many recent immigrants from Latin America. The CAM refugee population shares many historical and cultural characteristics with the Central American subset of these Latino groups. However, they will be most similar in age and experience to the unaccompanied minors who have recently sought asylum on the southern U.S. borders, many of whom have been served by the Department of Health and Human Services' Office of Refugee Resettlement (HHS/ORR). The following observations have been based, as much as possible, on information gathered from case workers and service providers responding to the needs of these unaccompanied children and their families, as well as upon reports compiled by international agencies working with CAM refugees overseas.

## STRENGTHS AND RESOURCES

The poverty, gang violence, and persecution pushing Central American Minors to flee their home countries are significant factors that have destroyed childhoods, interrupted education, and disrupted the fabric of social life. Nevertheless, this population is equipped with resources that can be harnessed to maximize their success in transitioning to life in the United States.

### Family and Community

Family reunification is a central component of the in-country CAM program. In most cases, parents have been supporting children and other family members left behind with remittances eked out of limited wages earned from stateside jobs. Parental love and concern for the safety of their children is evidence of a commitment to family that has persisted in spite of years apart and the distance of miles. Extended families are also close and though fragmented by migration, surrogate family

## Food and Culture



Photo: © Edgar Escobar

*Elotes, pupusa, chicharrón, curtido, empanadas, and tres leches cake!* There's a lot more variety to Central American food than tamales and tortillas. While rice, beans, and corn are staples, food in El Salvador, Guatemala, and Honduras is a unique cultural experience inextricably connected to family, friends, and festivals. A Salvadoran specialty is *sopa de pata* which includes tripe, plantains, corn, and other vegetables; Guatemalans prepare an elaborate salad called *fiambres* on the Day of the Dead, the sharing of which is part of the holiday rituals; Hondurans, especially from the coast, are apt to use coconut milk in dishes featuring seafood. Sweet pastries and hot chocolate are a special treat for children. Refugees in the Central American Minors program may have experienced malnutrition and impoverished circumstances, so reconnecting to traditional cuisine will be a source of comfort and support as they adjust to life in the United States.

Music, dance, and sports also enliven festivals and bring families together. Influenced by Caribbean and African rhythms and mixed with indigenous percussive instruments like the marimba, Central Americans enjoy a rich tradition of song and dance. Soccer, or *fútbol*, is a favorite pastime, but baseball also has its fans.

### OVEN BAKED SWEET PLANTAINS (plantanos fritos)

Fried plantains are commonly eaten as a side dish or as dessert. To make this dish the plantains need to be very ripe, almost black. This recipe is a low-fat version of this Central American dish, which is traditionally fried in oil or lard. If serving for dessert, you may want to sprinkle the plantains with cinnamon before baking for a special treat!

4 very ripe plantains  
canola oil or cooking spray  
cinnamon (optional)

Preheat oven to 450°F. Lightly coat a nonstick cookie sheet with canola oil or cooking spray.

Cut each plantain diagonally into 1/2 inch slices. Arrange on the sheet in a single layer, lightly brush plantain slices with canola oil or cooking spray. Sprinkle with cinnamon (optional). Bake for 10-15 minutes, flipping plantains once mid cook-time, until golden brown and very tender. <sup>5</sup>

Photo: © Franz Conde

relationships and a strong connection to the immigrant community can be a source of comfort, support, and wisdom. The Latino community in the United States is also active and institutionalized through many local churches and non-profit organizations. They can and should be viewed as a strong source of support and be engaged to support CAMs and their families.

### Faith and Forgiveness

Catholicism, other forms of Christianity, as well as indigenous faith traditions are all found among communities from Central America. Religious practices aid stress management, personal moral development, family cohesion, connections to the community, and more. The celebration of religious holidays and festivals is also an important part of maintaining cultural traditions that can help create a coherent narrative of refugee transition. The powerful practice of forgiveness promoted in faith traditions has been identified as particularly helpful in the family reunification process.<sup>6</sup>



Photo: © Los Angeles County Museum of Art

**Traditional Values** Though threatened by the many maladies of modern development and disrupted by the transition to fast-paced urban life in the United States, the rural, agrarian life is an immediate memory for most Central Americans. Associated with a natural order, this worldview assumes a harmonious human place in the world connecting current and future generations to ancestors. These traditional values promote honor, dignity, and respect for elders which can benefit Central American families and teens struggling to find a foothold in a new culture and to assert an adult identity.

**Education and Work** The opportunity to obtain a better education and find gainful employment has led immigrants and refugees to the United States for decades. Targeted by gangs for recruitment, many children in the CAM program dream of a safe learning environment that can lead to a college education and a secure job. Work and wages are also associated with self-respect especially for boys and men. If the path to attainment of these goals is well-supported, they can be highly motivating factors in resettlement.

**Youth and Resilience** Lastly, though no strangers to trauma and hardship, CAM refugees are, by definition, young and potentially able



Photo: Everystockphoto © Lee Shaver

to recover both physically and mentally if given the right conditions. Many have already demonstrated resourcefulness, strength, and determination in navigating and surviving abject circumstances. The ability to flourish in adult life, sometimes even benefiting from the difficulties of childhood, has been well documented.<sup>7</sup> Enhancing their resilience with security, confidence, and multi-faceted support may be all that these children need to grow and thrive.

### CHALLENGES

The unique circumstances prompting young Central Americans to flee their countries will set them apart not only from the wider community in the United States, but also from previously settled Latinos, and even from their own families, who may not know firsthand the full extent of the challenges they have been facing. An awareness of these challenges will help service providers know what to watch for and how to offer the care these children need.

**Physical Health** Infectious diseases such as malaria, dengue fever, hepatitis A, and typhoid fever are common in Central America. Children may have suffered from one or more

of these illnesses as well as from bacterial diarrhea. They may also appear underweight and small for their age due to chronic malnutrition.

Sexual and physical abuse has reportedly increased in recent years in Central America due to growing economic hardship and social turbulence. Children separated from parents who have migrated are especially vulnerable to abuse both from relatives within the home and from gangs in the local environment.

Pre-departure medical screenings are primarily intended as a tool to identify public health risks and determine fitness to travel. While not a comprehensive physical exam, the medical screening may identify immediate health concerns and indicate if follow-up medical care is necessary. Vaccinations will include polio, tetanus and diphtheria, measles, mumps and rubella, and Hepatitis B. Additional vaccinations may be required prior to registration in local schools.

Parents of CAMs may not know how to access health care and may have little experience navigating the U.S. health care system even for basic preventive care. They should be supported to better understand their rights and responsibilities in regards to attaining health services for their child.

**Reproductive Health and Gender** Sexual initiation often occurs early in Central America and, even when consensual, can lead to pregnancy and sexually transmitted diseases, including HIV. Knowledge of and access to birth control methods are low. Minor refugees with children of



Photo: © Peace Corps

their own can be expected. Due to years of separation between CAMs and their parents, as well as to the complexities of shifting family dynamics (see below), case workers and health care providers may encounter considerable reluctance from CAMs in discussing reproductive health issues in front of their parents and may need to approach the subject with increased sensitivity.

Because many Central American immigrants originated from rural areas, an agrarian ideology that promotes patriarchy and machismo may create increased barriers for CAMs who are girls or young women. Sexual abuse and incest have been reported and require vigilance. Risky sexual behavior and sexual trafficking may be exacerbated by family conflicts and even pressure to contribute to family income. CAM refugees identifying as LGBT may have little social support and may require protection.

**Mental Health** The CAMs program is designed to protect children fleeing violence in their home countries from additional harm on the journey through Mexico as they attempt to reunite with family in the United States. However, recent reports of the

## Maya Health

The Guatemalan population in the United States has grown from roughly 268,000 to over one million in the past 20 years and continues to grow. At least half are indigenous people who speak Spanish as a second language or not at all.

In addition to addressing their unique language needs, health service providers should consider a culturally sensitive approach to health care. Traditional healing practices, herbal medicine, and spirituality are all integrated into Maya attitudes and practices towards health. Illness is often considered to have a spiritual cause which they feel must be addressed to effect a complete cure. Respecting and integrating these attitudes and practices into medical treatment and care may build trust with Guatemalan patients and result in better health outcomes.

As a largely rural population, access to essential medicine and critical modern health services in Guatemala is low, so reliance on midwives and traditional healers is common. Higher rates of malnutrition and increased cases of malaria, typhus, dysentery, and measles may be observed in refugee minors from Guatemala.

### RESOURCE

An excellent resource for case workers and health service providers is the **Maya Health Toolkit for Medical Providers** developed by Bridging Refugee Youth and Children's Services (BRYCS). For more information, see: [www.brycs.org](http://www.brycs.org).

root causes of the unprecedented flight of minors from Central America document widespread violent crime, intentional terror tactics, and physical, sexual and psychological abuse as a part of everyday life in Central America<sup>8</sup> (see The Northern Triangle sidebar on page 2). Consequently, post-traumatic stress disorder (PTSD) has been reported among CAMs who have experienced or witnessed violent crimes, abuse, and even torture. Refugee minors also suffer high rates of depression.<sup>9</sup> Additionally, practitioners may observe attachment issues related to many childhood years of unmet physical and psycho-social needs. CAM teens are at risk for drug and alcohol abuse if mental health needs go unmet.

Stigma around mental illness is strong in Latino communities. Parents of CAM refugees may themselves suffer from PTSD and depression related to their own experiences in Central America and flight from it. Rather than



Photo: © Margaret W. Neer, <https://www.flickr.com/photos/breadfortheworld/3964082638/>

talk about haunting memories of war, brutality, and torture or share unexpressed grief for family members who died or “disappeared,” many Central Americans in the United States will attempt to leave the past behind and suffer in silence.

**Family Dynamics** One of the biggest challenges faced in working with this refugee population is reuniting children with parents after long separations. Many CAMs report an intense desire to reconnect with parents but may have unrealistic expectations based on hazy childhood memories, infrequent communication, and distorted impressions of life in America. They may also find themselves missing grandparents or other caregivers with whom they grew up and have now left behind. They may have lived with multiple caregivers and experienced neglect or sporadic, sometimes abusive, attention from adults. Discipline may have been lax, and they may have been allowed considerable independence of movement. It may be difficult for them to adjust to and accept the authority of parents they barely know.

“ When family members become aware that life is more difficult in the United States than they had expected and that language, cultural beliefs, lifestyles, and even personal goals are different, family conflicts develop. This often causes negative coalitions between parents and children. ”

– Miguel Hernandez, *Central American Families in Ethnicity and Family Therapy*<sup>10</sup>

In some cases, minors may learn for the first time that their parents have remarried. Unexpectedly living with step-parents may further complicate the relationship between the minors and their biological parents. They may also encounter younger siblings, or half-siblings, born in the United States after the parents migrated which may generate mixed feelings of strong affection and hostile jealousy.

Parents, on the other hand, may also wrestle with contradictory feelings of love, guilt, and extreme apprehension. Parents may shield home-country relatives, especially children, from the economic realities and hardships of life in the United States, unwittingly setting themselves up for failure in meeting their children’s expectations. Their own linguistic and educational limitations may also be a serious disadvantage which puts them under severe financial strain. Under such conditions, many parents may be surprised to face considerable difficulty in meeting the emotional and physical needs of newly arrived teenage children.





Photo: © Peace Corps

**Education** The public education systems in El Salvador, Guatemala, and Honduras are under-resourced and weak with low teacher standards and little accountability. While Spanish is the language of instruction, many indigenous children never develop Spanish fluency and few CAMs will be fluent in English. Literacy levels will be inconsistent and illiteracy may be common. Due to increased gang violence and recruitment at schools in their home countries, many CAMs are reported to have dropped out of school altogether.

Students with interrupted formal education (SIFEs) present an instructional challenge for high school classrooms in the United States. Because instruction is content-oriented and assumes basic literacy and numeracy skills, there is little opportunity to accommodate late-arriving students with special catch-up needs. ESOL classes also assume a more robust first-language education than many CAMs may have received.

Additionally, CAMs are likely to lack basic study skills and be unfamiliar with the unspoken

rules of classroom behavior. They may be unaware of the materials they will be expected to obtain (notebooks, backpacks, etc.) and have trouble navigating large school campuses. Parents of CAMs may be able to provide little support due to their own lack of education and unfamiliarity with the U.S. school system.

As much as possible, proactively preparing local school officials to address the needs of incoming CAMs (with afterschool programs, peer mentoring programs, psychological support, interpretation services, expanded ESOL classes, etc.) may allow schools to anticipate the associated costs of services for CAMs.

**Acculturation** Many Central Americans in the United States are unfamiliar with social services mechanisms that CAM refugees will need to access. Parents may have trouble obtaining and understanding correct legal information from the largely word-of-mouth network of friends and acquaintances.

More importantly, due to the high level of corruption and violence in Central America, CAMs and their parents may have a deep distrust of government officials, security personnel, and courts of law. They may not be aware of their rights and may not know how or when to seek assistance in protecting them. Even the right to health and education may be unfamiliar to them, combined with a deep fear that public spaces are dangerous and dominated by gangs and criminals. Outreach from the established Latino community may help build the necessary trust to overcome this challenge.

## Social Media



Photo: © Esther Vargas

In spite of low levels of literacy and interrupted education, Central American Minors are active and savvy users of social media. Such social media awareness is associated with many benefits and opportunities, but it may carry serious dangers related to gang recruitment, trafficking, etc. There are reports of CAMs who have received violent threats via Facebook, so service providers should pay attention to CAM social media activity and inform parents of the risks and benefits.

## RESOURCES

For social media guidelines for parents (with audio for low literacy parents), see **Teaching Kids to Be Smart about Social Media** at [www.kidshealth.org](http://www.kidshealth.org). The information is also available **in Spanish**.

## IMPLICATIONS FOR RESETTLEMENT

### GENERAL CONSIDERATIONS

The multiplicities of challenges in providing resettlement services to Central American Minors and their parents may be best approached by integrating legal, health, and education programs as much as possible and promoting robust interagency cooperation at the local and regional levels. Communication between resettlement agencies, their affiliates, and state and local agencies will prevent duplication of efforts and help identify services and funding streams that may ease the local impact. Proactive, joint decision-making has proven successful in meeting the needs of unaccompanied children served in 2014 by the Office of Refugee Resettlement (ORR) (see Promising Practices section below). Tapping into the many resources available in the Latino community through churches and nonprofit organizations is also essential.

### CULTURAL ORIENTATION FOR CAM REFUGEES

Cultural orientation will be important to the children as well as their parents. Even though parents may have resided in the United States for some time, they are likely to be unfamiliar with the full range of services their child is eligible for as a refugee. For example, orientation on school norms and expectations as well as on enrollment requirements, schedules, and campus navigation will benefit both children and parents, and build community among participants. To stress the importance of education in relation to future employment,

CO providers may want to clearly communicate the differences between jobs with benefits (that require completing high school, getting a GED, or more advanced education) and minimum wage jobs with no or few benefits.

Cultural orientation also offers an opportunity to build a stronger understanding of citizen responsibilities and rights. Advanced exposure to gang activity in their home countries may increase CAM refugees' vulnerability to gang recruitment in U.S. communities. CO that emphasizes resistance to bullying or peer pressure and how criminal activity of any kind may hinder their pathway to citizenship may increase motivation to resist pressure to join gangs or participate in adolescent mischief. As much as possible, CO should be taught in Spanish and take into consideration the literacy challenges of both adults and children.

### LEGAL ASSISTANCE

The legal status of CAM refugees and the benefits they are entitled to do not differ from other refugee populations. However, because they are rejoining parents who are not refugees, resettlement staff may encounter complex benefits situations and questions that are specific to individuals as well as being changeable over a relatively short timeframe. For that reason, it is important to identify and contact, in advance if possible, legal or benefits experts within the resettlement agency or in the community who are willing to act as a resource for the resettlement agencies and their clients.

**AOR Applications** Affidavits of Relationship (AORs) must be filed through resettlement agencies. In addition to the information on the process communicated to lawfully present parents, staff should also be sure to inform parents of the expected time and cost incurred during in-country processing. The Resettlement Support Center operated by the International Organization of Migration in Quito, Ecuador processes case files and prepares the minors for departure. Processing interviews occur in major cities in El Salvador, Guatemala, and Honduras. Children will be expected to make five or more trips to processing locations in their country, paying for their own transportation and accommodations each time. For children living in rural areas, round-trip travel may be time-consuming, expensive, and dangerous. The in-country parent or guardian of all children under the age of 18 will be required to sign certain documents and will need to accompany the child to each interview. Parents should be encouraged to explore options for addressing these responsibilities.

### RESOURCE

For more information on the **AOR filing process**, see the CAM Program section on the Refugee Processing Center website at [www.wrapsnet.org](http://www.wrapsnet.org).

**Parole Status** If children with qualifying parents do not qualify for refugee status, they may then be eligible for parole status. Parolees are responsible for their own associated medical and travel costs and do not receive the same benefits as refugees.

## RESOURCE

For more **information on parolees**, see the U.S. Citizenship and Immigration Services website at [www.uscis.gov](http://www.uscis.gov).

**Child Protection** Resettlement agency child protection policies should be reviewed and updated. Staff and volunteers should be well-informed and trained on child protection procedures, protocols, and mechanisms. If possible, resettlement agencies should have trauma-informed, child protection specialists on staff or develop such resources in the community. As usual with unaccompanied minors, resettlement supervisors will need to closely monitor the progress of the child during the resettlement process.

## RESOURCE

For a summary of state laws on the best interest of the child, see: **Determining the Best Interests of the Child** on the Child Welfare Information Gateway website at [www.childwelfare.gov](http://www.childwelfare.gov).



Photo: Photo by R. Bruce Montgomery, used by permission

## COMMUNITY PARTNERSHIPS

CAM resettlement destinations are determined by the location of the applicant parent(s). Engaging and collaborating with established Latino communities through churches, schools, businesses, and nonprofit organizations can assist resettlement agencies and enhance the welcoming environment for CAM refugees.

## Languages and Interpretive Services

Recruiting Spanish-speaking staff, volunteers, and interns will be essential in order to provide quality services to CAM refugees and their families. If the number of CAM refugees from Guatemala grows, it will also be necessary to identify native speakers and interpretive services for a variety of Mayan languages. Indigenous refugees from all three countries may speak Spanish poorly or not at all. Assessing a community's linguistic capabilities is important preparation for smooth service delivery.

## Social and Mental Health Services

Identifying or developing social services that can aid in the family reunification process will quickly become apparent in resettling CAM refugees. In most communities, mental and family health

services are already stretched thin. Linguistically-appropriate and culturally-sensitive services will be difficult to find and fund. Proactively working with the local mental health community to prepare for and address these needs is recommended.

## Education and Health Services

Most public school systems have ESOL staff and some also have programs to assist international students, especially in large metropolitan areas. Schools also have public health nurses and connections to state and local health programs. With advance coordination, resettlement agencies may be able to encourage school systems to support existing staff to provide services to CAM refugees and possibly allocate additional funding to meet their needs. (See Promising Practices section on page 12.)



Photo: © Charles Watkins

## PROMISING PRACTICES

The highly publicized spike in unaccompanied minors crossing the border from Mexico into the United States precipitated a multi-pronged, multi-government response. In addition to the in-country CAM program managed by PRM which is the focus of this background, the U.S. Department of Health and Human Services' Office of Refugee Resettlement (HHS/ORR) has also responded by releasing qualifying unaccompanied Central American children from detention centers along the southern border to family in the United States. These children, some of whom may apply for asylum, have a designation and legal status that is different from the Central American Minors coming to the United States through the CAM program as refugees. However, the populations are fundamentally the same and much can be learned from various local responses of the past year (2014-2015).

### RESOURCE

For more information on ORR's **Unaccompanied Children Services**, please see the Office of Refugee Resettlement website at [www.acf.hhs.gov/programs/orr](http://www.acf.hhs.gov/programs/orr).

## REGIONAL PARTNERSHIPS: THE DC-MD-VA COALITION IN SUPPORT OF CHILDREN FLEEING VIOLENCE IN CENTRAL AMERICA

The greater Washington, DC metropolitan area, including parts of Northern Virginia and Maryland, has a large Central American population. Consequently, ORR served approximately 7,000 unaccompanied Central American children and their families living in the area in 2014. Though proportionally small in relation to the general population, the impact of this influx of unaccompanied children on schools and other social services in the DC area was significant enough to demand an urgent and coordinated response. State and local governments, schools, service providers, and non-profit organizations came together to form the DC-MD-VA Coalition in Support of Children Fleeing Violence in Central America to identify problems and share promising practices. In January, 2015, the coalition hosted the Summit on Central American Children Seeking Refuge at the University of the District of Columbia. At the summit, presentations were made by experts in education, health, mental health, youth programming, legal services, and

### RESOURCE

The **Summit Report** is available on the Carecen Latino Resource and Justice Center website at [www.carecencdc.org](http://www.carecencdc.org).

social services. Representatives from almost 70 government, academic, and grassroots organizations came together to network, identify common challenges and solutions, and make joint recommendations for follow-up in the region and in local communities, including promising practices that can be replicated in other communities.

## LOCAL PARTNERSHIPS: THE MONTGOMERY COUNTY CHILDREN FLEEING VIOLENCE WORKGROUP

The people of Montgomery County, Maryland have historically welcomed immigrant families by creating zoning for housing and schools that encourage racial and economic integration. The County Executive further supports this initiative through the Office of Community Partnerships which pursues a mission of empowering ethnic communities while building strong partnerships between the government, non-profit organizations, and faith communities. This office took a leading role in coordinating the county's response to the unaccompanied children from Central America who were served by ORR in 2014. They convened and continue to host the Montgomery County Children Fleeing Violence Workgroup, which meets monthly to brainstorm on and address issues related to unaccompanied children from Central America. Accomplishments of the Workgroup include:

- Public schools, departments of public health, the department of children and youth, police and other agencies came together to network around activities and funding streams;

## RESOURCE

For more information on the **Montgomery County Executive's Office of Community Partnerships**, see the Montgomery County website at [www.montgomerycountymd.gov](http://www.montgomerycountymd.gov).

- Schools adapted their registration processes to accommodate the needs of unaccompanied Central American children and their parents;
- Health departments established satellite sites in affected schools to provide onsite immunization services;
- The Maryland Governor's office organized an event to encourage local legal professionals to donate their time to represent the minors, and the Maryland Immigrant Rights Coalition conducted workshops to educate families on legal issues;
- Nonprofit organizations connected families to reunification services, teen mentoring programs, and bilingual (or culturally competent) mental health providers.



Photo: ©Margaret W.Nea; <https://www.flickr.com/photos/breadfortheworld/3964082638/>

## IMMIGRANT FAMILY REUNIFICATION PROGRAM

As part of their Communications and Community Outreach Department, the Fairfax County Public Schools in Virginia supports the Immigrant Family Reunification Program. The program developed the *Families Reunite* curriculum, a free six-hour class for parents who are reuniting with children after a long separation. The program also offers professional development workshops for educators entitled *Immigrant Family Reunification: Promoting Student Academic Engagement*. The professional development workshops have been offered at school systems throughout the area and will soon be available online.



## RESOURCE

For more information on the **Families Reunite Curriculum**, see the Immigrant Family Reunification Program on the Fairfax County Public School website at [www.fcps.edu](http://www.fcps.edu). Resources for parents and educators are available in English and Spanish.

## ENDNOTES

- 1 Refugees. Retrieved July 20, 2015, from <http://www.uscis.gov/humanitarian/refugees-asylum/refugees>
- 2 Bel, C., & Ingram, M. (2015). *Crime and violence in Central America's northern triangle: How U.S. policy responses are helping, hurting, and can be improved*. Washington, D.C.: Woodrow Wilson International Center for Scholars. Retrieved from: [http://www.wilsoncenter.org/publication/Crime-and-Violence-in-Central-Americas-Northern-Triangle\\_CARSI\\_Dec-2014](http://www.wilsoncenter.org/publication/Crime-and-Violence-in-Central-Americas-Northern-Triangle_CARSI_Dec-2014)
- 3 Childhood and Migration in Central and North America: Causes, Policies, Practices and Challenges. (2015, February 12). Retrieved July 20, 2015, from <https://supportkind.org/resources/childhood-and-migration-in-central-and-north-america/>  
  
Mission to Central America: The Flight of Unaccompanied Children to the United States. (2013). Retrieved July 20, 2015. Available at: <http://www.usccb.org/about/migration-policy/upload/Mission-To-Central-America-FINAL-2.pdf>
- 4 International Religious Freedom Report for 2013. Retrieved July 20, 2015, from <http://www.state.gov/j/drl/rls/irf/religiousfreedom/index.htm#wrapper>
- 5 Adoption Nutrition: Guatemala. Retrieved July 20, 2015, from <http://adoptionnutrition.org/nutrition-by-country/guatemala/>
- 6 Hernandez, M. (2005). *Central American Families. In Ethnicity and Family Therapy (3rd ed.)*. New York: Guilford Press. Retrieved July 20, 2015, from <http://www.socsci.uci.edu/~castellj/clfm/webdocs/Week%202/Required/Central%20American%20Families.pdf>
- 7 Masten, A. (2014). *Ordinary magic: Resilience in development*. New York: Guilford Press.
- 8 Mission to Central America: The Flight of Unaccompanied Children to the United States. (2013). Retrieved July 20, 2015. Available at: <http://www.usccb.org/about/migration-policy/upload/Mission-To-Central-America-FINAL-2.pdf>
- 9 IRCField Visit to Texas and Arizona: Key findings & recommendations to policy makers. (2014). Retrieved July 20, 2015, from <http://www.rescue.org/sites/default/files/resource-file/Unaccompanied%20children%20in%20the%20U.S.%20IRC%20report.pdf>  
  
Childhood and Migration in Central and North America: Causes, Policies, Practices and Challenges. (2015, February 12). Retrieved July 20, 2015, from <https://supportkind.org/resources/childhood-and-migration-in-central-and-north-america/>
- 9 Refugee Health TA. Mental Health. Retrieved July 20, 2015, from <http://refugeehealthta.org/physical-mental-health/mental-health/>
- 10 Hernandez, M. (2005). *Central American Families. In Ethnicity and Family Therapy (3rd ed.)*. New York: Guilford Press. Retrieved July 20, 2015, from <http://www.socsci.uci.edu/~castellj/clfm/webdocs/Week%202/Required/Central%20American%20Families.pdf>

## NOTES

## RESOURCES AND TOOLKITS

**CORE RESOURCES** *On Their Way: An Orientation Curriculum for Unaccompanied Refugee Minors (URMs)* is a 313-page curriculum designed for use with refugee youth overseas. **The Story of Me** is a 42-page workbook comprised of activities which refugee youth can complete during and after CO. Both can be adapted for working with CAM refugees in the U.S. **A New Day** is a 24-minute video that shows refugee families and youth discussing their new lives in the US. **Be Who You Are** is a shorter 9-minute version that focuses only on youth. Topics include goals, changing roles and responsibilities, discipline, and the importance of learning to speak English. All CO resources available on the CORE website ([www.coresourceexchange.org](http://www.coresourceexchange.org)) are free to access, download, and use.

**EDUCATION ON CENTRAL AMERICA** **Put Central America on the Map in Schools** is a campaign started by Teaching for Change ([www.teachingforchange.org](http://www.teachingforchange.org)). It provides ample teacher resources on Central America including lesson plans, activities and readings, as well as child- and family-friendly lists of books, films, poetry and websites on people from Central

America. The campaign is designed to support and encourage the creation of a more welcoming and informed community for incoming Central American children and their families.

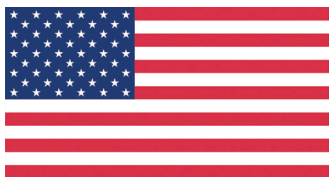
**FAMILY REUNIFICATION** The Immigrant Family Reunification Program (IFRP) at the Fairfax County Public Schools in Virginia has developed **Families Reunite**, a 6-hour parenting class, which is offered to parents who are reuniting with their children. IFRP has also developed a workshop for facilitators called Immigrant Family Reunification: Promoting Student Academic Engagement. More information including contact information and downloadable resources in English and Spanish are available at [www.fcps.edu](http://www.fcps.edu).

**MAYA HEALTH TOOLKIT** An excellent resource for case workers and health service providers is the **Maya Health Toolkit for Medical Providers** developed by Bridging Refugee Youth and Children's Services (BRYCS). For more information, see: [www.brycs.org](http://www.brycs.org).

**MAYAN LANGUAGE SERVICES** For assistance in locating Maya interpreters, contact the National Maya Interpreters Network at [www.mayanetwork.org](http://www.mayanetwork.org).

**PROMISING PRACTICES DATABASE** Bridging Refugee Youth and Child Services (BRYCS) is a project of USCCB's Migration of Refugee Services. BRYCS' searchable database offers summaries of successful programs that serve refugee children around the country. Topics include: child care, child welfare, early childhood, education, family strengthening, health/mental health, refugee school impact grant, and youth development. Contact information is also provided at [www.brycs.org/promisingPractices](http://www.brycs.org/promisingPractices).

**SUMMIT ON CENTRAL AMERICAN CHILDREN SEEKING REFUGE** Although focused on the Washington, DC-Maryland-Virginia metropolitan region's response to the 2014 influx of unaccompanied children from Central America, the **Summit Report** offers not only relevant policy recommendations and service provider best practices, but also models a successful regional and sector-wide collaborative response that can be recreated elsewhere to promote effective and integrated services. It is available on the Carecen Latino Resource and Justice Center website at [www.carecencd.org](http://www.carecencd.org).



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