Somali Youth in the U.S.: From Alienation to Acceptance

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Somali youth in the U.S.: From alienation to acceptance

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Egal
Why does he act the way he does?
What is at stake if we ignore him?
What can we do to help?
Overview

• Background
• Trauma
• Social Connection
• Project SHIFA: Somali youth program in Boston
Definition of Refugee

A person who is outside his/her country of nationality or habitual residence; has a well-founded fear of persecution because of his/her race, religion, nationality, membership in a particular social group or political opinion; and is unable or unwilling to avail himself/herself of the protection of that country, or to return there, for fear of persecution.

-- Article 1 of the 1951 U.N. Refugee Convention
Somalia

- Nomadic, oral culture
- 1991 Civil war erupted
- Prolonged brutal fighting, disruption of basic food production and services
Somali refugees in U.S.

- Percent of refugees arriving in US who were Somali:
  - 19.4 % in 2005
  - 25.2 % in 2006
  - 14.5 % in 2007
- 38 % of refugees were under 18 years.

Somali refugees in U.S.

Large populations in:
- Minneapolis
- Columbus
- San Diego
- Boston
- Seattle
- Portland ME
- Atlanta
Somali Youth Experience Project

National Institute of Mental Health (NIMH) and NIH Fogarty International Center grant 1 R21 MH70261-01, PI Ellis: Stigma and PTSD in refugee adolescents
Somali Youth Experience Project

- N = 144
- Ages 11-19, living in U.S. at least 1 year
- Community sample

Locations:
- Boston
- Lewiston
- Portland
Trauma exposure

- Average 7 traumatic events (range 0-22)
Trauma Exposure

Witnessed violence (killing, armed combat) 70%
Assaulted/injured 47%
Believed you would be killed 34%
Loved one killed 43%
Prolonged separations from loved ones 50%
Extreme deprivation 33%
Posttraumatic Stress Disorder (PTSD)

- Nearly 2/3 of youth reported significant PTSD symptoms, and 1/3 screened positive for Full PTSD

![Pie chart showing percentages of Full PTSD, Partial PTSD, and No PTSD]
Why does he act the way he does?
Survival-in-the-moment

The amygdala leads a hostile takeover of consciousness by emotion (Joseph LeDoux)
Safety and the Social Environment

Safety and play


Amount of Play over 10 days

Day

Amount of Play

A lot

Some

A little

None

Cat hair introduced

Cat hair removed
Refugees, safety and social connection

- Trauma
- Intergenerational trauma, loss, acculturation
- Peer acceptance, acculturative stress, school readiness
- Discrimination
“One of my cousins got teased for wearing a garment on an MBTA”

“Some guy was like ‘go back to your country; we don’t want your people here, your type of people’.

“. . .and people started treating them, Somalis or Arabic people, differently. Like they’re bad people because they’re Muslim”.

“People don’t know the difference between who bombed them and who’s Muslim. They just treat you the same: all of you are bad”.

Excerpts from qualitative interviews 2003-2005
Discrimination

Treating people differently through prejudice: unfair treatment of one person or group, usually because of prejudice about race, ethnicity, age, religion, or gender

--Encarta on-line dictionary
<table>
<thead>
<tr>
<th><strong>Target of discrimination</strong></th>
<th><strong>Refugee</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• A person who . . . is treated unfairly because of prejudice about race, ethnicity, age, religion, or gender</td>
<td>• A person who . . . reasonably fears persecution because of his/her race, religion, nationality, membership in a particular social group or political opinion</td>
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What is at stake if we ignore him?
Trauma and adjustment

Proximal aftermath: Ongoing war stress

Distal aftermath: Ongoing resettlement stress
Trauma, alienation, and adjustment

Proximal aftermath: Ongoing war stress

Distal aftermath: Ongoing resettlement stress

Trauma

Social Support at home

Family Acculturative stress

Discrimination

PTSD
Trauma, alienation, and adjustment

Proximal aftermath: Ongoing war stress

Distal aftermath: Ongoing resettlement stress

- Trauma
- Discrimination
- School Belonging
- Social Support at home

Depression
Trauma, alienation, and adjustment

Proximal aftermath: Ongoing war stress

Distal aftermath: Ongoing resettlement stress

Trauma

Alienation:
- Family
- School
- Community

Adjustment
Consequences of traumatic stress

- Social
  - Drug abuse
  - School failure
  - Anti-social behavior
  - Isolation/withdrawal

- Psychological
  - Posttraumatic Stress Disorder
    - Reexperiencing, Avoidance, Hyperarousal
  - Depression
  - Conduct disorder
  - Emotion Regulation
How can we help?
From alienation to acceptance: Promoting positive adjustment
Project SHIFA:
Supporting the Health of Immigrant Families and Adolescents

Funding provided by the Robert Wood Johnson Foundation Caring across Communities initiative
Project SHIFA: Goal

Mental health promotion for refugee children
Project SHIFA: Partnerships

Mental health promotion for refugee children

Providers

Family

School

Community
Partnership:

• **Mental Health Providers** (Children’s Hospital Boston, Boston University School of Social Work, Home for Little Wanderers)

• **Somali community agencies** (Refugee and Immigrant Assistance Center, Somali Development Center)

• **School** (Boston Public Schools, Lilla G. Frederick Middle Schools, Alliance for Inclusion and Prevention)

• **Families** (Family advisory board, parents)
Continuum of care

- Child
- School
- Community

Partnership
Continuum of care

Child

School

Community

Intensive Intervention

Early Intervention

Prevention
Community

Approach: Parent outreach lead by Community-based organization

Goals: Engage parents as partners in advocating for children
       Connect with parents before problems emerge
       Connect parents with school and beyond
School

**Approach:**
- School-based youth groups
- Teacher consultation

**Goals:**
- Connect with youth in non-stigmatized setting
- Connect *before* problems emerge
- Address core risk factors of alienation, discrimination
Child

**Approach:** Trauma Systems Therapy: Evidence-based mental health intervention addressing key stressors in the social environment and related emotional dysregulation

**Goals:**
- Engage child and family
- Decrease child traumatic stress symptoms
- Prevent long-term negative outcomes
School and peers
Community
Family
Child
Outcomes

• Community
  Family advisory board
  100% engagement in treatment
  Families and youth self-referring

• Family
  Decrease in acculturative stress in family

• School
  Increase in sense of belonging, decrease in rejection
  Decrease in experiences of discrimination

• Child
  Decrease in PTSD symptoms
  Decrease in Depression symptoms
Why does he act the way he does?

Trauma places youth at risk for mental health problems

Alienation from family, school and community compounds this risk
What is at stake if we ignore him?

Longterm negative social and psychological outcomes

Trauma → Alienation → Psychological Maladjustment → Vulnerability to recruitment?
What can we do to help?

*Prevention through partnerships*

*Connect youth to families, schools, and communities*
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