

Forced return of long residing migrant children: developmental risks

In the Netherlands, several hundreds of children who applied for a residence permit more than five years ago run the immediate risk of being forcibly returned.¹ These children face numerous risk factors that can cause (further) harm to their mental and physical health. Both the long-term threats of forced return as well as the actual deportation itself seriously increase the risk of developmental harm for these children. Therefore, according to scientific insights, the development of these children must be protected by providing them with secure and positive future perspective. This paper describes multidisciplinary scientific evidence for the expected developmental harm done to migrant children when they are threatened with forced return after they resided for many years in the host country.

Healthy development

In order to be able to assess developmental risks for children who are threatened with forced return, it is important to start with what children need for a healthy development. It is essential that the environment in which a child is raised is of high quality, in which children experience continuity in upbringing and care.² For a healthy development, children need loving parents who are emotionally available, respond in a responsive and sensitive manner, and who take the lead and provide structure in their parenting. In addition to the availability of parents, other conditions for a healthy development are, for example, safety, provisions in basic life necessities, contact with friends, a social network, and a suitable education.

Mental health of long-term residing children with an uncertain residence status

Migrant children residing for a long period in the host country and who are threatened with forced return have an increased risk of developing social and emotional problems.³ Upon arrival in the host country, they are often already suffering from mental health problems such as depression, anxiety, and trauma-related stress complaints.⁴ The (long) duration of their stay in reception centres without residence status poses a cumulative risk for the child's health and well-being.⁵

Just like for children living in residential youth care or foster care, constant relocation has a large impact for children living in reception centres, as it affects their sense of safety, self-respect, and their cognitive and social-emotional development.⁶ The psychological health of the children declines as they experience more relocations during the legal migration procedures.⁷

The extent to which refugee or migrant parents are able to protect the development of their children is under great pressure.⁸ Many parents suffer from stress and psychological complaints, and as a result, they are emotionally less available for their children.⁹ The psychological health of parents influences their children's health. Fear and depression among refugee or migrant parents are predictive for the extent to which their children will suffer from emotional or behavioural problems later in life.¹⁰

Children who reside in the host country for a long time and are threatened with forced return lack stability and a secure future perspective. They are exposed to chronic stress: pre-flight stress, stress during the flight, and stress during their stay in the host country.¹¹

Serious consequences of chronic stress on brain development and memory

Even though the brains of children are still in full development, children suffering from chronic stress have an increased risk of gray matter (the brain areas) and white matter (the connections) loss, which in turn has a harmful effect on the social, emotional, and cognitive development of children.¹² Children with chronic stress have a higher level of cortisol (stress hormone). Long-term elevated cortisol levels harm a number of essential brain structures such as the prefrontal cortex and the hippocampus.¹³ These are 'fronto-limbic networks' responsible for controlling negative emotions and impulsive behaviour, as well as the development of social cognition, including empathy. They also play a crucial role in learning and memory, and in executive functions such as planning, giving structure to daily life, attention and concentration, working memory, making decisions, and cognitive flexibility.¹⁴

One area that plays an extremely important role in memory is the hippocampus. The hippocampus is connected to other areas which have an activating effect on the functioning of the hippocampus by releasing neurotransmitters such as dopamine. The strength of such connections is therefore essential for the quality of memory capacity. In children who are subject to constant stress and anxiety, these connections are weakened.¹⁵ As a result, the negative memories, which are associated with anxiety, are maintained because there are far fewer opportunities to store new and more positive memories in the brain. In other words, old, fearful memories have little or no chance of being 'overwritten' by positive memories.

Risk factors forced return

Previous behavioural research by Kalverboer and Zijlstra (2006) has resulted in an inventory of risk factors that should be taken into account when deciding whether long residing migrant children can be deported without causing harm to their development. Children who have a longer duration of stay in the host country, who are older, who have experienced more cultural changes, who have a poorer physical and mental health condition, who have parents with poorer conditions, and who have poorer living conditions in the country of origin, are at a higher risk of developmental harm after forced return. After five years of residence of children in the host country, the chance of developmental harm after forced return is unacceptably high. This time period is not the same for every child and is related to the age, resilience, and vulnerability of the child.¹⁶ Five years is already exceptionally long, when we compare this with time periods that are generally regarded as 'acceptable' within the child protection system, for example in the case of out-of-home placements.¹⁷ After a year, foster parents already have certain rights with regard to ensuring continuity in the living environment of foster children.¹⁸ Likewise, in the case of international child abduction, a one-year turnaround period applies when it comes to the child's best interests in the context of continuity. After a year, a child can be so strongly embedded in the new environment that 'return guidance' to the country of origin is no longer considered to be in the child's best interests. Social ties of the child outside the family, such as friends, school, and sports are taken into account in this decision.¹⁹

Understanding of risk factors for the development of long residing children in the host country can also be derived from research on the living conditions and well-being of children after forced return. The scarce scientific research that focuses on this subject shows a clear and worrisome picture: these children suffer from serious social emotional problems, and environmental conditions to protect the development of children are insufficiently fulfilled.²⁰ For example, a study among returned Kosovar adolescents with severe mental health complaints shows that these problems are triggered by their return. Their well-being seem to be related to feelings of loss, continuous social isolation, economic problems, concerns regarding the ability to provide for primary needs, and discrimination.²¹ A study of children returning to the Balkans shows that children experience more socio-emotional problems if the quality of the upbringing environment is lower upon return. This effect is reinforced by long-term uncertainty about the residence status in the host country.²²

Adaptation problems forcibly returned children

Forced return imposes huge demands on the children's adaptability. Adaptation to an unwanted change, but also adaptation to a decline in the quality of the living environment. Forced return of long residing children in a Western host country usually means that children go from a (psychologically) 'enriched' environment to an 'impoverished' environment, in which much uncertainty exists about the care and the social and cognitive stimulation of the children. It is this extreme transition that poses a serious risk of developmental harm for these children.

The transition from an 'enriched' environment to an 'impoverished' environment is extra traumatic for these children because they grew up and have lived in the host country for years. They speak and write the new language fluently, go to school in the Netherlands, and have a social network in the host country. They have developed an identity that is connected to host society. In view of the chronic stress which they suffer from, continuity in this social (school) environment is essential for the development of their executive functions.²³

Expat children are frequently mentioned as a comparison group, who, just like forced returned children, face adjustment problems, and have a higher risk of attachment and other emotional issues as a result of the continuous feeling of being uprooted. The difference is that expat children may occasionally move to a poor country, but not to an 'impoverished' environment.²⁴ They usually grow up in sufficient physical, social, and economic circumstances, with parents who have a better physical and mental health condition. In addition, they live in an international community and attend private international schools which are appropriate for their level of development, and with a common language (English). Moreover, the decision of the actual 'move' is a decision of the family, which is prepared and planned.

Adjustment after forced return from a neurological perspective

Going back to the country of origin can be seen as a serious socio-economical setback for many of these children. Migration is perceived as one of the risk factors for the development of psychopathology, such as depression, schizophrenia, and anxiety disorders, because it increases the risk of social isolation and stress. In social regard, the child has to start all over again ('social defeat'). This unwanted situation can have a negative effect on important areas of the brain, such as the prefrontal cortex (reduced volume).²⁵

Executive brain functions are necessary in order for children to be able to adapt to a new environment after being deported. The ability to adjust requires flexibility in thinking, ability to shift from one thought to another (mental shift), and creativity. In children without chronic stress, the executive functions are still in development until the age of 25 to 30.²⁶ This is why it can be very difficult even for children who live without chronic stress to adapt to a new environment, especially if, for certain reasons, this environment changes constantly. With long-term residing migrant children who are threatened with forced return and who live under chronic stress, these executive brain functions have been affected.²⁷ This is why, in their current state of health, it is extremely difficult for them to adapt to a 'new' environment after forced return.

Moreover, the transition from an 'enriched' environment to an 'impoverished' environment, in which many uncertainties exist about the care and the social and cognitive stimulation of the children, is damaging to the executive, prefrontal brain functions. These latter functions must ensure the autonomous functioning of the child in later life.²⁸ For example, the neurological consequences of a transition from an 'enriched' to an 'impoverished' environment was investigated in a pilot study in detainees awaiting their trial. The transition to the 'impoverished' and stressful prison environment already negatively impacted their executive brain functions after three months, especially with regard to self-control.²⁹ This effect appears to be similar to the neurological impact of socio-emotional deprivation, for example in children who are victims of child abuse.³⁰

The impact of forced return from an 'enriched' to an 'impoverished' environment is comparable for children with social-emotional deprivation (neglect). Deprived children have a strongly weakened fasciculus uncinatus, a connection in the brain that plays an essential role in, among others, the suppression of impulses, fears, and related negative emotions such as depression. In fact, this connection plays an essential role in the development of the child's personality. Deprived children are 'at risk' for emotional disorders such as anxiety and depression.³¹ The reason is that these children are far less capable of controlling their negative impulses. The fasciculus uncinatus is also involved in the development of empathic ability, in a broader sense: 'social cognition'.³²

Conclusion

Children who are threatened with forced return after years of living in a Western host country are extremely vulnerable because of continuous stress and lack of stability. The long-term fear of forced return severely threatens their development, which has major consequences for both their current and their future functioning. The chronic stress to which children are exposed may have impaired their brain functions in such a way that the chance that they recover from this harm and adapt to the living conditions in the country of origin is extremely small. According to current scientific insights, all together this makes the forced return of these long-term residing migrant children irresponsible.

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