

## APA Official Actions

# Position Statement on the Mental Health Needs of Immigrants and People Affected by Forced Displacement

Approved by the Board of Trustees, July 2022

Approved by the Assembly, May 2022

“Policy documents are approved by the APA Assembly and Board of Trustees. . . These are . . . position statements that define APA official policy on specific subjects. . .” – *APA Operations Manual*

### **Issue:**

Currently, 79.5 million persons worldwide have been forcibly displaced by war, food insecurity, natural disasters, human rights violations, and other catastrophes. In 2019, two million asylum claims were submitted worldwide, 310,000 of which were received by the United States. The confluence of climate change, armed conflicts, economic hardship, and sociopolitical instability have led to an unprecedented level of migration within and across international borders. Reflecting this increase in migration, 13 percent of the United States population is foreign-born. This includes 10.5 million undocumented immigrants and 317,000 foreign nationals in the temporary protected status (TPS) program who cannot safely return to their home country due to catastrophic circumstances. On top of all this, recent restrictions and limits on refugee resettlement and asylum applications have contributed to a humanitarian crisis at the U.S.-Mexico border.

### The Unique Mental Health Needs of Immigrants

In addition to the psychological stress and distress which may be inherent in immigration, undocumented immigrants, refugees, asylum seekers, and people in the TPS program face numerous migration-related and post-migration stressors that can adversely impact their medical, psychological, social, and spiritual well-being. Those forcibly displaced have often experienced trauma in their country of origin, trauma during the migratory journey, and trauma during the resettlement process. Each immigrant has their own unique story linked to their country of origin, the reasons for their journey, and the means of arrival in the United States. Some immigrants face multiple displacements with travel through several countries, and thus their traumas may be compounded. Even upon arrival in the United States, immigrants face additional traumas of detention and family separation. Cultural conflict adds another layer of stress to the already existing emotional and psychological trauma these children and families face.

### Immigrants’ Needs for Medical and Mental Health Care

From the moment of their arrival in the United States, immigrants have medical needs, including mental health needs, whether due to pre-existing conditions or newly developing conditions. Their access to quality assessment and care are likely to be limited by their unsettled status, legal and financial barriers, and often by discrimination. All of these can contribute to poorer mental health outcomes such as increased risk of suicidal behavior, posttraumatic stress disorder, anxiety, depression, and other psychiatric symptoms.

American psychiatrists have broad skill sets for care and relieving suffering experienced by immigrants and refugees by displacement from and within their home countries and can provide direct psychiatric, psychotherapeutic and psychosocial interventions, as well as programmatic leadership, for the care of persons with any mental disorders, including posttraumatic symptoms or disorders and other migration-related syndromes of distress.

**APA Position:**

**Immigrants, asylum seekers, refugees, persons in the temporary protected status program, and persons in immigration custody should be treated with dignity and respect during all phases of migration, including access to timely, affordable, trauma-informed, culturally accessible quality health care, encompassing mental health care and substance use treatment. To this end, the APA supports:**

- 1. Partnerships with government agencies, healthcare agencies, and other community groups to identify and address gaps in care of immigrants;**
- 2. Research on the mental health conditions, treatments, and health outcomes of members of all immigrant groups; and**
- 3. Clinical education and training to enhance the quality of care for immigrants.**

**The APA opposes laws, policies, and practices that erode the dignity of and respect for these members of immigrant groups, including:**

- 1. Prolonged detention, inhumane detention conditions, or separation of families;**
- 2. Obstruction of access to legal services or needed health care;**
- 3. The for-profit detention of migrants, which creates a financial incentive for centers to maximize occupancy and minimize costs, quality, safety, and resources;**
- 4. The use of medical records or clinical notes against an individual's interest during any phase of migration.**

**Collaborators:** Council on Children, Adolescents, and Their Families; Council on Quality Care; Council on Minority Mental Health and Health Disparities