Family Separation and Reunification of Newcomers in Toronto

What does the literature say?

Reunification and Adaptation Program (RAP) - Toronto Public Health

Prepared by Ellen Tate, Program Evaluator, Toronto Public Health

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Overview - What is family separation and reunification?

Historically, when immigrating to Canada, one family member often came first to assess opportunities, find a job, and establish a foundation, all the while sending remittances back home. After this initial period, other family members followed from the country of origin. In contemporary Canada, the forms of these family separations and reunifications (FSR) are more varied and prolonged than they have been in the past (Bernhard et al., 2008). Indeed, FSR is becoming a new normal for newcomers to Canada, a country with a high immigration rate.

However, the process is not a smooth one. Simply being eligible to enter Canada with family members is not sufficient for processing the application. Eligibility is constrained in certain immigrant categories (live-in caregivers, low-skilled temporary foreign workers) (CIC, 2011), and eligibility to sponsor family members is further limited by the definitions of who qualifies as an eligible family member and of the financial capacity to support applicants. In addition, a quota system used by CIC sets a ceiling on how many people can be admitted under the "family reunification" category each year.

Rather than being linear and finite, with reunification as the end point, FSR is now commonly marked by long separations, aggravated by a globalized economy with widely dispersed employment opportunities. At the same time, technology enables more frequent and varied forms of contact over great geographical distances (e.g., telephone, email, occasional visits, etc.). Some families have become "transnational", retaining intense social and economic relationships while being spatially dispersed across nation states on an on-going basis, sometimes permanently (Bernhard et al., 2005).

Family separation is therefore a structural outcome of globalizing forces and immigration policies (Bernhard et al., 2008). This new reality may profoundly affect families' and individuals' mental health and well-being, yet these issues are largely invisible in the research, policy and services landscapes. Understanding the mental health impact of FSR is challenging because it involves processes that intersect in complex and dynamic ways, with multiple factors that define each child's or youth's experience (e.g., individual and family characteristics, pre-migration context, cultural aspects, post-migration circumstances, local context in Canada, etc.). In this paper, we briefly review the literature and what is known about
the phenomenon in Canada. Particular attention is paid to how family relationships, changed by separation and reunification, affect children's and youth's mental health\(^1\) and the potential for mental health promotion.

**Parameters of the current literature**

The literature on FSR can be grouped along three different dimensions: U.S. versus Canadian, ethnocultural focus, and type of research, whether qualitative or survey based.

Most of the research is U.S. based, qualitative in nature and focused on the experiences of Latino immigrants and their children (Suarez-Orozco et al., 2010; Dreby, 2010; Foner, 2009; Bernhard et al., 2008). Dreby, 2009, for example, provides detailed descriptive accounts of the emotional and social pressures, legal hurdles, and resource issues families face during FSR, drawing on accounts from parents, children and extended family caregivers in the U.S. and Latin American immigrant source countries. Factors associated with immigrant status, specifically being undocumented, are central to this body of research.

In Canada, a significant research article by Bernhard et al., 2008, reported findings from structured interviews with 40 Latina women living in Toronto. Their FSR experiences highlight the care and emotional work done by women to maintain transnational family ties, and the challenges women face in terms of a lack of social networks, normative frameworks and institutional resources for coping.

There is an emerging literature base in Canada, mainly from Toronto and Montreal, that gives some insight into Canadian experiences for people of different ethnocultural backgrounds. The main areas of research related to FSR in Canada are:

- live-in caregivers and their families (Philippino and Caribbean) (Cohen, 2000; De Leon, 2009; Campbell and Flaman, 2009; Glasgow, 1995; Koc-Arat, 2001; Lashley, 2000; Pratt, 2009; Rousseau et al., 2009);
- Latina women in Toronto (Bernhard et al., 2005, 2008, 2009);
- infants and young children sent from Canada to China for care by relatives (Bohr and Tse, 2009);
- "astronaut" households – those split across the Pacific Ocean as the male head pursues his career in China or Taiwan, while his wife and children are relocated in Canada (Waters, 2002);
- unaccompanied youth (Denov and Bryan, 2010); and
- refugees (Rousseau et al., 2004).

An examination of this list indicates that, for some ethnocultural groups, certain forms of FSR are more predominantly studied, which may reflect more common arrangements within those communities. For example, studies on Chinese experiences have mainly focused on family separation where young children are returned by parents living in North America to the care of grandparents or relatives in China. In research about Filipino and Caribbean experiences, the focus has been on a typical scenario in which mothers, arrive first and later send for their children (and sometimes their spouse) once their economic and legal circumstances permit. For African newcomers/immigrants, FSR studies have focused on refugee situations. (Rousseau et al, 2004).

In a rare, transcultural comparison study, Rousseau et al. (2009) used surveys and focus groups to examine the effects of FSR on family cohesion and conflict with regard to

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\(^1\) While the focus of the paper is on the mental well-being of children and youth, it is assumed that the impact of FSR on parental health and the family dynamic is inevitably and systemically linked in direct and indirect ways.
Caribbean and Filipino adolescents and their families living in Montreal. Although the study had some limitations related to recruitment, its findings indicated, surprisingly, that FSR did not significantly influence family conflict and cohesion (Rousseau et al., 2009). Rather, results suggested that post-migration reorganization of the family in the host country and interaction with the host society may have a greater impact on young people's success or difficulty in adjusting than FSR. Additionally, cultural contextual factors, such as the role of alternate caregivers and the value attached to them by the family and community and the collective meanings associated with family separation, were found to be important in adolescent adaptation.

**Prevalence**
Methodological difficulties, combined with a lack of attention to the FSR phenomenon, mean that survey research about prevalence rates is lacking. However, one study in the U.S. based on a survey of newcomer adolescents found that nearly three quarters of the participants had been separated from one or both parents for extended periods (Suarez-Orozco et al., 2002), suggesting that the prevalence is in a high range. In terms of length of separation, a Canadian study of Central American and African refugees found that the average time of separation was greater than three years for both parents and children (Moreau, Rousseau, and Mekki-Berrada, 1999).

**Definition of Family**
It is important to recognize that the subjective experience of FSR may vary between populations. While the Western definition of "family" centres on the nuclear family, many immigrants to Canada today define family more broadly to include extended family (Falicov, 2007; Simich et al., 2005). Whereas Western based attachment theory predicts that separation will cause distress for a child (Bowlby, 1982), this may not fully apply to the FSR experience of largely non-European immigrants in contemporary Canada.

Family networks exist with cultural norms, roles, practices and relationships, where it may be culturally accepted to, for example, share child rearing and responsibility across family members and space. In other words, "family separation" may be an accepted practice that may be culturally valued and a means to reinforce relationships and maintain bonding and supports beyond the nuclear family. As Bohr (2010) notes, however, with transnational family separations involving vast geographic distances and different social, economic, political and cultural environments, the separation takes on new dimensions. Adjustments are required as adaptation ensues with settlement in a culturally different immigrant receiving country. This change of geographic and cultural location tests old cultural practices, norms and adaptations in ways which require the construction of new cultural interpretations, practices and strategies to maintain family ties and coherence. Bohr presents a model to represent this perspective.

**Transformation of Family**
Like any family disruption, prolonged separation and reunification due to migration necessitates the adaptation of family members to new circumstances and precipitates the transformation of family relationships, roles and strategies (Falicov, 2007). A family's particular experience is further shaped by the its resources and response to the demands of the new environments (e.g., openness to accessing services) (Stewart et al, 2008). The resources and capacities of service networks to identify and respond to FSR issues are not well-developed. Various emotions, attachment issues, perceptions, expectations, and meanings may evolve and be generated at different stages by individual members of the family, often associated with gender and
intergenerational role definitions and transformations. The ways individual family members adapt and develop while living apart may affect their compatibility, contributing either to a level of conflict or tension or the successful transformation of the family upon reunification (Rousseau et al., 2004). Both separation and reunification may be associated with higher rates of divorce and other forms of disruption, adding another layer of adjustment for family members. Family counselling and therapy models may also be maladapted to addressing FSR issues (Falicov, 2007). Other services and programs are generally not attuned to FSR nor the specific needs that are created.

Other Factors

"...separation is typically a painful decision incurring high emotional costs for both the mover and those left behind." (UNDP, 2009)

Research establishing the impacts of FSR on child and youth developmental outcomes is still in its infancy, with much of it being anecdotal and qualitative. This research base suggests that children and youth can experience significant challenges in integrating with family, peers and the community, and in their overall mental health and well-being due to FSR. These challenges - psychosocial (e.g., identity, self-esteem, self-efficacy, belonging), emotional (e.g., resentment, anger, sadness, depression), behavioural (e.g., withdrawal, risk-taking behaviours) and educational - are compounded by other settlement demands and developmental issues.

Research suggests that the degree of adjustment and/or challenges is mediated by such factors as:

- degree of choice or control in the timing of the separation/reunification; for example, children often have little influence with regards to when separation and reunification happen (Lashley, 2000; Dreby, 2010) (less control is associated with greater stress);
- which parent(s)/caregivers are absent, whether mother or father or both, and the cultural role of each;
- characteristics of their relationship with and attachment to a substitute caregiver (Glasgow and Gouse-Sheese, 1995);
- type, quality and frequency of contact while separated (Campbell and Flaman, 2009);
- length of separation/reunification (i.e., immigration status/policy, refugee status, financial obstacles, and associated interpretations/attributions of delays in reunification by those waiting in the country of origin etc.) (Glasgow and Gouse-Sheese, 1995);
- age and developmental stage and vulnerabilities at the time of separation and at reunification (e.g., attachment, identity development, stage of cognitive development, emotional coping skills) (Bohr and Tse, 2009);
- cultural acceptance/norm of practice of separation; for example, in the Philippines, Latin America, and Jamaica, there is a history of family members leaving to work transnationally to remit to the family (e.g., Cohen, 2000; Dreby, 2010; Glasgow and Gouse-Sheese, 1995; Campbell and Flaman, 2009);
- settlement issues (Simich et al., 2005; Stewart et al., 2008), such as:
  - the social determinants of health (i.e., material resources, employment and employment status, whether precarious, underemployment,
de-skilling, gender, social supports, health access, etc.),
  o ethnocultural and linguistic challenges
  o discrimination
  o legal status
• pre-migration experiences (Glasgow and Gouse-Sheese, 1995; Rousseau et al, 2001);
• quality and forms of family relationships (e.g., attachment issues, trust, conflict, abuse, divorce, blended families, geographic separation of family members in Canada, roles and expectations, sibling relationships) (Cohen, 2000; Lashley, 2000; Baptitste, Hardy and Lewis, 1997; Dreby, 2010);
• gender, intergenerational and family role changes and responsibilities;
• protective factors (e.g., help/advice seeking behaviours, sense of belonging, life skills, etc.);
• perceptions, meaning and understanding of rationale for separation and management of ambiguity (in terms of how parents frame the separation as temporary, necessary or for the good of the family and how the child makes meaning out of separation, expectations about length of separation and reunification, expectations about life in Canada) (Glasgow and Gouse-Sheese, 1995);
• coping skills; and
• availability and access of social supports, defined as "...interactions with family members, friends, peers and...professionals that communicate information, esteem, practical or emotional help" (Simich et al., 2005; Bernhard, 2008).

Conceptualizing Emotional and Support Issues Associated with FSR
Several concepts from the literature have been used to describe issues associated with FSR.

Ambiguous Loss
“For people who move, the journey almost always entails sacrifices and uncertainty.” (UNDP, 2009)

Some researchers have used the theoretical construct of “ambiguous loss” as a framework for understanding the FSR experience (Luster et al., 2008). Ambiguous loss is defined as when a family member (or members) is psychologically or physically absent (Boss, 2000). It invokes stress because situations associated with FSR create ambiguity about the status of people in the family and because generally, closure is not obtainable. FSR interrupts daily routines and interactions that previously defined the boundaries of the family. These relationships are in limbo until the family can re-establish certain boundaries – which, in reality, may never happen due to the substantial changes in psychological or physical presence even upon reunification. The sense of ambiguous loss can lead to psychological and emotional issues such as depression, detachment, guilt, anxiety and/or immobilizing feelings of powerlessness.

Attribution of Emotions
A normative framework provides ways of defining, assessing and understanding experiences relative to a standard or what might be expected. However, FSR migrants lack such reference points for interpretation, due in part to the complexity of the issues but also because of the lack of visibility and acknowledgement of “FSR” as a potentially significant stressor. The absence of a normative framework to interpret and make sense of how separation and reunification affect emotions, isolation and tension may block responsive and adaptive coping strategies (Bernhard et al., 2008).

Khanlou et al., 2009, note that those who have "migrated to Canada as the only economic hope for a larger family in the country of origin bear a tremendous burden to be economically successful" (citing
preliminary findings, Khanlou, Shakya, and Muntaner, CHEO, 2007-2009; Eidem, 2008). This exacerbates mental health risk factors.

**Lack of Social Networks**

Relationships through social networks can serve as buffers to the stress experienced through FSR. Friends, neighbours, co-workers, faith leaders and/or community members, among others, can support people through difficult periods. Generally, these networks need to be sufficiently developed to accommodate peoples' need for trust, a sense of belonging and confidence. However, newcomers experiencing the stress and challenges of FSR may not have well-developed social networks due to the absence of family networks, their recent arrival and the demands of settlement, as well as responsibilities to family in the country of origin (Stewart et al, 2008). According to a report by Hansson et al, for the Mental Health Commission of Canada and the Centre for Addiction and Mental Health, newcomers are easily isolated at a time of great vulnerability due to a stressful life transition. Additionally, it is not uncommon for people to be reluctant to seek help or support due to perceived stigma and shame at revealing any inabilities to meet cultural and/or gender based expectations. Other barriers to help-seeking could be associated with precarious legal status, lack of awareness or attribution of stress to FSR, lack of knowledge of the system, language issues, lack of trust, etc. (Hansson et al., 2009).

**Ways to Support Children, Youth and their Families**

The research base provides limited, very basic, general reference to the need for mental health support to people experiencing FSR. For example, Simich, Mawani, Wu and Noor, (2004), call for "emotional support" for those experiencing family separation and argue that "affirmational support" from other immigrants "is critical for giving guidance, sharing experiences, and empowering newcomers to meet challenges" (p.8). Other non-FSR research speaks generally about newcomer needs for social support and the variable nature of what, how and when social supports could be beneficial (Simich et al., 2005, Stewart et al., 2008).

A more detailed prescription is provided by Falicov (2007), who suggests, "Interventions for reunited families need to target making meaning out of the separation, restoring narrative coherence, and making family identity more clear, because all these are likely to have become blurred over the time of separation" (p.163). Falicov also states that, "One of the constitutive features of family life is the redundancy of the interactions and the ritualized practices of everyday life – such as habits of personal hygiene, food preferences, and bedtime rituals – because these provide the material from which intimate emotional ties are made" (p. 159). She ponders whether, without living together every day, families can maintain "a sense of narrative coherence and a shared story" and feelings of continuity of past, present and future during separation (p.159). For those separated, she suggests that nurturing memory of relationships offers a key to "increase chances for continuity of psychological presence" (p.160).

More generally, Bernhard et al., 2008, advocate a range of options in support of women affected by FSR directed at policymakers, educators, service providers and the members of transnational, multi-local families themselves.

The Canadian Council for Refugees (CCR) has also published a manifesto and some papers advocating changes in immigration policy to enable more expedient reunification of families eligible as refugees (e.g. CCR, 2004; CCR, 2006; CCR, 2007). While there are many settlement agencies and other groups working to support newcomers and immigrants on settlement
related issues, on the service front, there are or have been just a handful of programs explicitly supporting people that have experienced or are anticipating FSR:


2. Toronto Public Health: *Reunification and Adaptation Program*. For people experiencing family separation and reunification issues. This predecessor operated from 2003-2004 on temporary funding (Ontario Works).

3. Yorktown Child and Family Centre: *Reconnecting Program*. A 10 session program for youth who have experienced separation and reunification with a parent due to immigration. Reconnecting was a theme-based curriculum, addressing such issues as isolation, separation, issues of loss, reunification with family and immigration issues. This program lost its base funding in 2008 and transformed into a modified 2 week summer program for youth.

4. Aisling Discoveries Child and Family Centre, in conjunction with Prof. Yvonne Bohr (York University): Provides support to families considering or experienced in FSR with children sent abroad as infants.

**Summary**
The research base on FSR is not very developed, with gaps in knowledge about prevalence and the forms and patterns of FSR in the current context of globalization and how these factors vary between ethnocultural groups and countries of origin. Also, there is little information in the literature about the impacts of FSR on children and families and on effective coping strategies to build resilience. Policy and service research about effective measures to address needs arising from FSR is also lacking. Further, little is known about how many newcomers give up and leave Canada through hopelessness and the impacts of this on their mental health (i.e., feelings of failure, shame, etc., and the impact on reunification). Finally, there are very few studies that focus on the experiences of those left behind in the country of origin or about country of origin policy and practice regarding families that are separated.

FSR is a significant family event/situation which the existing research suggests is not time-limited in its impact but involves much adaptation and adjustment to family roles (gender and intergenerational), expectations and material circumstances.

**Implications**
More Canadian-based research that focuses on FSR is needed to better understand the impact of FSR on children/youth and the ways that their resiliency can be enhanced. More research about the pervasiveness of FSR through prevalence research would be a helpful first step in this understanding. Raising awareness of the phenomenon of FSR so that it is considered and integrated into mental health/youth/child and newcomer research, policy and services would also be advised, since it has received only passing mention in key research studies and policy documents. Unexamined by policy makers, individuals, families, children and youth are left to their personal strengths and coping strategies rather than being supported through a more balanced and effective approach.
References


