

Mothering, Migrating and Seeking Asylum: The Transbordering Experiences, Maternal Practices and Well-Being of Central American Mothers Traveling with their Children

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BOSTON COLLEGE
School of Social Work

MOTHERING, MIGRATING AND SEEKING ASYLUM:
The Transbordering Experiences, Maternal Practices and Well-Being of Central American
Mothers Traveling with their Children

A dissertation
by

MARIA EMILIA BIANCO

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of the requirements for a degree of
Doctor of Philosophy

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MOTHERING, MIGRATING AND SEEKING ASYLUM

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Dissertation Committee

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Abstract

The present study is situated at the intersection of the topics of migration and mothering; it seeks to examine the complexities around mothering in conditions of violence, precariousness, institutional neglect and mobility across borders. In particular, it documents the pre-migration, transit and post-migration experiences of 17 Central American mothers who have crossed the US-Mexico border with their children since 2014, and are resettling in the Boston area while they await resolution of their asylum claims. By analyzing participants' narratives, collected through in depth semi-structured interviews, the study explores (a) mothers' exposure to traumatic events and human rights abuses transnationally; (b) mothers' practices to survive and support their children under difficult conditions; (c) and the association of maternal experiences and practices with maternal mental health. The study documents how the unjust conditions in which these mothers parent their children—violence, precariousness and institutional neglect—

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contribute to difficult maternal practices—such as decisions to leave children behind or to risk taking children across borders—and unjust mental health outcomes for mothers. Some mothers in the study reported high levels of anxiety, depression and PTSD, related to contextual experiences and challenging maternal practices. Based on these findings and feminist theories, the study presents a gender sensitive theoretical framework to guide scholarship and practice with asylum-seeking mothers traveling with some of their children across borders.

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DEDICATION

This dissertation is dedicated to my parents, for believing in me;
to my children, for bringing me joy and giving me strength;
and to my husband, for his patience, kindness and unconditional support.

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MOTHERING, MIGRATING AND SEEKING ASYLUM:

The Transbordering¹ Experiences, Maternal Practices and Well-Being of Central American

Mothers Traveling with their Children

“I feel that wherever we are, whatever conditions we are enduring, the love of a mother for her children, and from the children to the mother, will always be there, despite what we are facing. I always liked to give lots of love to my children.”

(Marcela, Guatemala)

Chapter I: Introduction

This qualitative research study is situated at the intersection of migration and mothering, both intense human experiences, which present challenges, constraints as well as possibilities for agency and empowerment (Christou, Giorgio & Rye, 2012). Specifically, this study documents the migratory experiences and maternal practices of 17 Central American mothers who have crossed the U.S.-Mexico border with their children and have resettled in the Boston area since 2014, while they await resolution of their asylum claims².

¹ The term “transbordering” is utilized in Lykes, M. B., *Távora, G., Sibley, E. & Ferreira van Leer, K. (2020, in press) on a study that describes the intergenerational migration of Maya K’iche families within and across borders. The term “transborder” is also used by Cheng (2007) to discuss the rights to mothering in a globalized world.

² This study is focused on the years 2014 to 2018, which is the period of time in which study participants arrived in the United States. All participants arrived before the enactment of the controversial 2018 “Zero tolerance policy”, where parents were systematically separated from their children in detention. However, 6 participants were separated from their children.

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The study relies on asylum-seeking mothers' narratives on their pre-migration, transit and post-migration experiences collected through in depth semi-structured interviews. Through qualitative analysis of those narratives, the study sought to understand the contextual conditions in which these mothers have lived and mothered their children. These contextual conditions included multiple forms of violence, precariousness and institutional neglect that transcended international borders, and exposed mothers to traumatic events and human rights abuses.

This study also observed the agency these women displayed to survive and sustain themselves and their children under those conditions. This study is inspired by feminist scholarship on mothering in difficult contexts. In particular, it reformulates Nancy Scheper-Hughes (1989, 1992) question on the meaning of maternal love in the inhospitable context of Brazilian shantytowns (p.14), by asking: What does maternal love mean in the contexts of violence, precariousness, institutional neglect and transnational mobility in which these migrant mothers live? Similarly, following Ruddick (1989), the study addresses the question: What are the specific practices this group of migrant mothers enact to perform their maternal roles of "preservation", "nurturance" and social "training" under such difficult contextual conditions? The study observed that in these contexts, maternal practices were mostly focused on the preservation of the life of children, and that many of these practices were experienced as very difficult for mothers and children. Maternal practices included leaving some of their children behind, risking the welfare of young children across dangerous borders, or extreme maternal sacrifices, all emerging from the absence of adequate institutional protections from violence and precariousness. Finally, the study also assessed mothers' mental health using standardized

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measures of depression, anxiety and PTSD³, in order to observe the impacts of mothering, in such unfavorable contexts.

According to Tan, (2012) “thinking about motherhood can also be a means of contesting social conditions that necessitate and give rise to unjust mothering practices” (p.115). In this study, the concept of “unjust mothering practices” does not mean that the mothers treat the children poorly or unfairly. It refers to an unjust social context that pushes these marginalized mothers to make decisions that can hurt their children or hurt themselves—such as risking young children across borders to save their lives. These are decisions that mothers in other less threatened geographical and social locations would probably never have to make. This study not only observed the difficult conditions migrant mothers endure, and the difficult mothering practices arising from these conditions, but also the mental health outcomes resulting from both conditions and practices. Unjust mental health outcomes were represented by the prevalence of significantly high levels of depression, anxiety and PTSD and in mothers’ narratives of “*unending suffering*” (Lusk & Chaparro, 2018, p.10). At the same time, several mothers also expressed feelings of growth and empowerment, related to overcoming adversity and, through migration, being able to provide safer spaces to raise their children.

Ultimately, this study aims to push the voices of asylum-seeking mothers from the

³ Depression and anxiety were assessed using the Harvard Program in Refugee Trauma’s versions of the Hopkins Symptom Checklist (HSCL-25)—originally created by Mollica, Wyshak, de Marneffe, Khuon, & Lavelle, 1987— (Mollica, McDonald, Massagli & Silove, 2004). PTSD was assessed using 16 items from the Harvard Program in Refugee Trauma’s version of the Harvard Trauma Questionnaire—originally created by Mollica, Caspi-Yavin, Bollini, Truong, Tor, & Lavelle, 1992—(Mollica et al., 2004). These instruments are relevant to this study as they have been used in similar refugee-like populations to assess the mental health impact of traumatic events. Harvard Program in Refugee Trauma granted the PI access and permission to use these scales.

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margins to the centers of discussions, questioning the unjust conditions in which these mothers live, and making visible their extreme efforts to perform their maternal roles.

There are many ways in which marginalization of mothers occurs. One way is in relationship to other mothers, those at the center tend to be mothers with economic resources, social and community support, and a view of themselves and mothering that fits the dominant ideology. Mothers who are compromised in their ability to access social resources are blamed, mis-seen, or vilified, such as welfare mothers, mothers in prison, mothers who are homeless, or poor immigrant mothers. (Weingarten, Surrey, Garcia Coll & Waltnkins, 1998, p.9)

By understanding the particular suffering of these immigrant mothers, and the “exceptional” (Greenspan, 1998, p.37) ways in which they enact their maternal love in extreme conditions, the study aims to contribute to a more compassionate view of them and to the development of more just social systems across borders. Centering the personal narratives of these mothers can contribute to counter dominant discourses that frame migration as a threat and migrants as criminals (Lusk & Chaparro, 2018).

As mentioned, this paper uses feminist theories to analyze migrant mothers’ agency in response to the structural constraints surrounding them (Wright, 1995; Stock, 2012). Feminist theories on mothering (Scheper-Hughes, 1989; Ruddick, 1989) and specifically on mothering from the margins (Collins, 1994; García Coll, Surrey & Weingarten, 1998) are used as a framework to guide analysis. This study also relies on human rights-based approaches to social work (Ife, 2008; IASSW & IFSW, 2012) to analyze the human rights abuses or lack of fulfillment of rights underlying women’s narratives.

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This study includes a sample of asylum-seeking mothers who were referred by community organizations working with immigrants and low-income populations in the Boston area. Mothers' narratives were collected through individual semi-structured interviews conducted by the author, and they were analyzed using "thematic narrative analysis" methods (Riessman, 2008; Chase, 2005). Analysis was both deductive and inductive; it involved a dialogue between conceptual models developed a priori using theories and literature and the new themes identified from the data. Content analysis was also performed to transform qualitative data on traumatic events into quantifiable constructs. The list of events detailed on the Harvard Trauma Questionnaire (HTQ) (Mollica, McDonald, Massagli & Silove, 2004) were used as reference to create those constructs. The events on the HTQ are related to experiences of material deprivation, war like conditions, injuries to the head or body, forced confinement and coercion, being forced to harm others, witnessing violence, disappearances, death or injury of loved ones (Mollica et al., 2004).

This research project evolved from an academic-community engagement project between the author of this dissertation and several community organizations working with immigrants in the Boston area. Since 2016, the author has been involved in a humanitarian initiative that started from the grassroots—and was then coordinated by community organizations—to support asylum-seeking mothers from Central America resettling in the Boston area with their children. The author's observations as a participant and her interactions with other members of this initiative have helped inform the focus and design of this study; these observations were also used to contextualize the findings from the interviews with the migrant mothers. The study received feedback, approval and support from De Novo, the organization who at the time of writing this dissertation was leading this initiative, from the Irish International Immigrant Center

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(IIIC), from The Needham Immigration Task Force, from Boston College (BC) School of Social Work and from the BC Center for Human Rights and International Justice. The presentation of data, the interpretations and the conclusions drawn here are the sole responsibility of the author.

Significance of the Study

This study is significant because of (a) the global and regional contexts in which there is an increasing trend of women crossing borders with their children; (b) the high risk of exposure of these women and children to traumatic events and human rights abuses before, during and after migration; (c) the impacts of both difficult events and difficult maternal practices on migrant mothers' mental health; (d) the inadequacy of services and protections to assist them and guarantee their human rights; and, (e) the need for more research on mothering and migration to inform social work interventions and advocacy efforts to promote the rights of these populations worldwide.

The increasing trend of women and children crossing international borders. This project is significant as it is embedded in a historical moment with record numbers of forced migrants in the world, and increasing numbers of women and children crossing borders fleeing poverty and violence (IOM, 2015; United Nations High Commissioner for Refugees, UNHCR, 2018). Indeed, worldwide, the number of people forced to flee their home countries due to war, persecution and human rights abuses is increasing (Akinsulure-Smith, Ghiglione & Wollmershauser, 2008). According to one 2015 report from the International Organization for Migration (IOM), by the end of 2015, 65.3 million individuals were forcibly displaced due to persecution, conflict, violence or human rights violations, which represented an increase in absolute numbers of 5.8 million people over 2014, and the greatest level of forced displacement ever recorded up to that date (IOM, 2015). The spike in the global numbers of refugees between

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2012 and 2015 was explained mostly by conflicts in Syria, Iraq and Yemen, as well as in sub-Saharan African countries (UNHCR, 2017). However, there were other conflicts or “crises of protection” (UNHCR, 2015, p.2) such as the crisis in Central America that spiked the numbers of forced migrants seeking asylum, particularly in the United States. Migrants from this region flee due to high levels of criminal violence, poverty and the failure of local institutions to secure peace and prosperity (Cruz, 2015; Lusk & Chaparro, 2018).

The Global Trends annual study published by UNHCR in 2017 reported that by the end of 2016, 65.6 million people were forcibly displaced worldwide, 300,000 more than in the previous year. Among those, 2.8 million were asylum-seekers, who are defined as people who are seeking international protection but whose refugee status has not yet been determined⁴ (UNHCR, 2017). These numbers continued to rise in 2017 marking a new record with 68.5 million forcibly displaced worldwide (UNHCR, 2018).

By the end of 2017, about 3.1 million were asylum-seekers (UNHCR, 2018) a slight increase from 2016 (UNHCR, 2017). In 2017, with 331,700 new asylum claims, the United States was the world largest recipient of new individual asylum applications, followed by Germany, Italy and Turkey (UNHCR, 2018). According to the UNHCR (2018) report, this number of new asylum applications in the United States represented a 27% increase from 2016 (262,000), and nearly doubled from 2015 (172,700) (UNHCR, 2018).

Since 2013, there has been a trend of increasing numbers of refugees and asylum-seekers coming to the United States from Central America. In 2017, 43% of all asylum applications came from the North of Central America. Salvadorans represented the largest group, with 49,500

⁴ In this report, the term referred to individuals whose applications were pending at the end of 2016, regardless of when the asylum claims have been filed.

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applications (up from the 33,600 claims on previous year), seconded by Guatemalans with 35,300 claims; and Hondurans with 28,800. “Overall the number of people fleeing violence in Central America increased to levels not seen since the armed conflicts of the 1980s” (UNHCR, 2017, p.40).

While it is difficult to collect worldwide disaggregated data on forced migrants (UNHCR, 2017), it is estimated that women and girls comprise about 50% of any refugee, internally displaced or stateless populations (IOM, 2015; UNHCR, 2017). This percentage has remained relatively stable over the last years (UNHCR, 2018), however a slight increase has occurred since 2015. UNHCR (2017) documented that globally in 2016, 49% of refugees were women, an increase from 47% in 2015. In 2017, the percentage was estimated at 50% (UNHCR, 2018). Children, who represent 31% of the total world population, are disproportionally represented within the global refugee population (UNHCR, 2017). From 2014 to 2016 the proportion of children under 18 remained at 51%. In 2017, this number rose to 52% (UNHCR, 2018).

In the United States, typically more men than women have attempted to cross the U.S.-Mexico border and have been apprehended by the U.S. Border Patrol in the recent years (see Table 1). The percentage of women crossing has increased by about 5%, from 21.4% in 2015 to 26.3% in 2017; up from 14% in fiscal year 2012 (Hallock, Ruiz Soto & Fix, 2018). The percentage of juveniles (0 to 17 years old) from the total population of migrants apprehended has been increasing slightly as well. In 2014, they represented 22% of the total, in 2015 they dropped to 18.4%, but in 2016 and 2017 they increased to 24.6% and 26.7% respectively. The percentage of those children who travelled accompanied by a parent or legal guardian increased from 36% in 2014 to almost 50% in 2017. From 2014 to 2016 the numbers of unaccompanied minors have been considerably higher than the number of accompanied minors; however, in 2017 about half

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of the minors were accompanied. This could represent a trend of more children traveling with their parents or legal guardians rather than alone as they did before. The absolute numbers of family units have considerably increased across the years as well; there was a 36% increase from 2014 to 2018. This could also indicate that “parents are no longer willing to leave children-behind in their country of origin” (Hallock et al., 2018, para.13).

Table 1 Total Border Apprehensions Nationwide per Fiscal Years (Oct 1st through Sept 30th)

	FY 2014	FY 2015	FY2016	FY2017	FY2018
Total Apprehensions	486,651	337,117	415,816	310,531	404,142
Male	366,022	264,824	314,398	228,845	--
Female Total	120,629	72,293	101,418	81,686	--
Females (%)	24.8	21.4	24.4	26.3	
Family Units ^a	68,684	40,053	77,857	75,802	107,490
Total Juveniles ^b	107,613	62,167	102,264	82,769	--
Juveniles (%)	22.1	18.4	24.6	26.7	
Unaccompanied	68,631	40,035	59,757	41,546	--
Accompanied Total	38,982	22,132	42,507	41,223	--
Accompanied (%)	36.2	35.6	41.6	49.8	

Note: This table was created by the author compiling data published by the U.S. Border Patrol on the total apprehensions nationwide: <https://www.cbp.gov/newsroom/media-resources/stats?title=Border+Patrol> [Accessed on March 20th, 2019]

^a The number of individuals (either a child under 18 years old, parent or legal guardian) apprehended with a family member by the U.S Border Patrol)

^b Juvenile (0-17 years old)

A 2016 report from the U.S. Customs and Border Protection (CBP) reported that during the last 15 years “far fewer Mexicans nationals and single adults are attempting to cross the Mexico-U.S. border without authorization while far more families and unaccompanied children are fleeing poverty and violence in Central America” (CBP Border Security Report, December 30, 2016). These families—as defined by the U.S. CBP—are typically composed of a mother with her children (Chishti & Hipsman, 2016). This agency acknowledges that these women and

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children have fled situations of extreme violence and poverty and are surrendering to U.S. border patrol officers seeking humanitarian protection (CBP Border Security report, December 30, 2016).

As observed, there is recognition of the increased numbers of women, children and families crossing U.S. borders. While the U.S. government collects disaggregated data by sex, age, family units, and distinguishes between accompanied and unaccompanied children, there is a need for disaggregated data on the composition of those family units, especially to detect those cases of children traveling only with their mothers. This is important as women travelling alone with children could be at risk of gender-based violence on the road (Falcón, 2006; Vanderpool, 2008; UNHCR, 2015). Violence could affect women's mental and physical health, and for mothers, their capacities to preserve and nurture their children along the journey. With increasing trends of mothers and children crossing borders, more studies are needed to inform transit and host destinations on the numbers, special situations and needs of family units composed by mothers and children.

The risk of exposure to violence and human rights abuses. This study is also significant in terms of identifying the risks of human rights abuses and possibly traumatic experiences asylum-seeking women and children are exposed to before, during and after migration. Worldwide, “asylum-seekers include some of the most vulnerable members of society [including] children, single mothers, victims of domestic violence or torture, and other individuals who have suffered persecution and trauma” (American Immigration Council—AIC—, 2016, p.4). Women and children are especially at risk in the settings of violence wherein, “the breakdown of social and political order created by conflict often leads to violation of human rights and gender-based violence” (Akinsulure-Smith et al., 2008, p. 106).

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“Women and children have proved to be particularly vulnerable to emergent forms of violence and political stability in the Northern Triangle” (Hallock et al., 2018, para. 2). Honduras, El Salvador, and Guatemala have the highest murder rates in the world; and violence is frequently targeted at women and children (Rosenblum & Ball, 2016, p.3). These regions also present the highest violent death rates for women in the world (Small Arms Survey, 2016; CEPAL, n.d.). Violence is perpetuated by drug trafficking and organized criminal gangs who have been pushing for territorial control in this region, confronting the local police and security forces who are unable to sustain peace (Hallock et al., 2018, Cruz, 2015). Domestic violence is also prevalent and despite existing laws, women do not find protection in the justice systems in their countries of origin (Menjívar & Walsh, 2018).

As a result of this violence and the inefficient institutional protections (Cruz, 2015), many of the women and children from these countries have endured human rights abuses that had influenced their decisions to migrate; including in some cases torture, kidnapping, rapes and assaults (Bridgen, 2013). In the case of girls and women, the high prevalence of gender-based violence paired with the low levels of justice for gender-based crimes have fueled women’s decisions to migrate (Hallock et al., 2018).

Asylum-seeking women and children are also at risk of further human rights abuses along their journeys. The UNHCR (2015) report documents that many women are beaten, raped or killed by coyotes, the people they pay high fees to help them cross the border. Women endure many hardships on the road including the lack of food and water, health issues, suffering the heat of the desert, going through frightening situations, and experiencing fear of assault by coyotes or others (Paris, 2008).

It has been documented that asylum-seeking women can face new abuses in the United States. Once apprehended by border patrols, mothers can be detained and separated from their

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children, both experiences that add new layers of trauma (De las Fuentes et al., 2013; Bernd, 2017, March 29th; Dinan, 2017, March 6th; Schmit, 2017, March 7th, Mejivar & Walsh, 2018). It has been reported that at the host destination migrant women are at risk of physical, sexual or emotional abuse by partners or employers who exert power over them due to their unauthorized status (Hallock, 2018).

Even though the media and academia have focused on the experiences of unaccompanied children, less attention has been placed on the “gendered experiences of women and girls forced to leave the region” (Hallock, 2018, para. 3), and even less attention on the particular types of human rights abuses mothers endure across borders. Deepening the understandings of risks of abuse mothers are exposed to appears critical to be able to design programs to meet the needs and guarantee the rights of this population. Research is also crucial to advocate against institutional neglects and abuses to this population.

The impact on migrant mothers’ mental health. There is evidence suggesting that the difficult events endured by migrant populations across borders have emotional and psychological costs for them. For both male and female asylum seekers and refugees, the outcomes of traumatic experiences include “psychological adjustment disorders, anxiety, depression, hopelessness, and terrifying episodes in which trauma is re-experienced” (May & Quinteros, 2012, p.98). Resettlement does not necessarily bring relief, as refugees can experience symptoms of post-traumatic stress and depression (Lacroix & Sabbah, 2011; Renner, Lairitier & Maier, 2012). Keller and associates (2017) studied the relationship between the exposure to traumatic events and the mental health of migrant families from El Salvador, Honduras, and Guatemala shortly after arriving to the U.S.-Mexico border. The study found that exposure to extreme events was very common among their sample of 234 adults; rates of depression and PTSD were

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present among participants completing the HTQ and the Patient Health Questionnaire-9, with 32% (51 out of 157 respondents) reporting symptoms of PTSD and 24% (36 of 148 respondents) of major depression (Keller, et al., 2017, para. 18)

Extreme events can have serious negative effects on the health and mental health of those who endure them; however, women seem to suffer more than men (Kellezi & Reicher, 2014, p. 491). It has been found that for those women who are mothers, negative mental health outcomes derived from traumatic experiences can negatively influence their parenting styles, leading in some cases to inhibited development of their children (Foroughe & Muller, 2012; May & Quinteros, 2012; Van EE, Kleber & Mooren, 2012). Some difficult maternal practices in response to difficult contexts, like leaving children behind in their countries of origin to run away from violence, also bring emotional costs for migrant mothers (Paris, 2008; UNHCR, 2015)

Understanding the impacts of extreme events and difficult maternal practices on maternal mental health appears critical to inform mental health services for asylum seeking mothers. Challenging the negative impacts of unjust situations on maternal practices and on mothers' mental health is also relevant from a social justice standpoint.

The inadequacy of services and protections. “Many Central American migrants now arrive in the United States without access to appropriate social and psychological support for refugees or survivors of war” (Bridgen, 2013, para. 16). Despite fleeing violence, and despite their universal human right to seek asylum, Central Americans represent a small percentage of asylum cases granted in the United States. In 2014, migrants from Honduras, Guatemala, and El Salvador only represented 5% of the total number of people granted asylum by the United States (AIC, 2016). In contrast, in fiscal years 2014 and 2015, 26% of the families arriving at the borders have been issued removal orders and only 1% of the families obtained immigration relief (Chishti & Hipsman, 2016). In January 2016, 69% of the cases involving mothers and children

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were pending resolution (Chishti & Hipsman, 2016). On average around 80% of asylum applications from Mexico and Central America are denied (Lusk & Chaparro, 2018). Some asylum-seekers are allowed to stay in the United States waiting for their cases to be resolved, however the services to this population are limited (AIC, 2016; Bridgen, 2013). Because they are not considered refugees, they do not receive the economic, health and mental health benefits and services provided by U.S. refugee programs. Some asylum seekers can obtain a work authorization after applying for asylum, however; “the uncertainty of their future impedes employment, education, and trauma recovery opportunities” (AIC, 2016, p. 4).

The successive Republican and Democratic administrations of the United States have failed to develop a comprehensive and humane response to protect and guarantee the human rights of asylum seekers from Central America. President Trump’s administration’s restrictive immigration policies and anti-immigration rhetoric do not provide much hope for the development of such responses. In contrast, this administration has focused on reducing refugee quotas, and on keeping asylum-seekers out of the U.S. territory through sending active military troops to the borders, through planning the construction of a border wall across the U.S.-Mexico border, through increased control over immigrant communities and deportations, and through implementing controversial deterrence strategies, which have further traumatized immigrant families (Connor & Krogstad, 2017; Korte, 2017; Schriro, 2017; Johnson, 2018; Sands, 2018; Shear & Gibbons, 2018; American Immigration Council—AIC—, 2019; Hong, 2019; Jordan, 2019). Many of these policies violate treaties and international humanitarian laws, failing to meet the needs and to guarantee the rights of asylum-seekers.

Given this context, there is a need of research documenting institutional neglects and violations, and the psychological impacts on asylum seekers and refugees, including specifically

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the violations and impacts on mothers and children. This research is designed to help develop best practices in the field of international human rights with special protections for this group, and can support advocacy against violations.

The need for more research to inform interventions and advocacy efforts. “In light of the magnitude of human rights abuses endured by forced migrants from Central America, scholars are calling for more research exploring their health and mental health, in order to inform policy and interventions (Keller, et al., 2017; Paris, 2008). Very few studies have been conducted with asylum-seekers in the U.S. (May & Quinteros, 2012, p.98), and very few studies have explored the medical and mental health of migrants from Central America (Keller et al., 2017).

There has been a paucity of research undertaken on women’s experiences of migration (Yakushko & Morgan-Consoli, 2014). Prior to 1970, women were invisible in studies of international migration (De Souza, 2004). Research on the particular experiences of women crossing borders and seeking asylum is extant: “All asylum seekers are subject to the same policies but the experiences of women asylum seekers are frequently submerged within the category of asylum seeker, thus often obscuring some specific issues faced by them” (Chantler, 2012, p. 319).

Information on best practices supporting asylum-seeking women once in the host countries is specifically scarce (Akinsulure-Smith, 2008). “Given the reality that many refugees and asylum seekers are women, it is striking that there has been limited discussion of culturally relevant interventions to address specific psychological needs of these women (Akinsulure-Smith 2008, p.106). Studies that bring asylum-seeking women’s voices to the center of discussion on their needs and challenges appear relevant to create appropriate interventions (Carroll, Epstein,

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Fiscella, Gipson, Volpe & Jean-Pierre, 2007; Nicholson & Kay, 1999; Akinsulure-Smith 2008; Paris, 2008).

Listening to the narratives of Latina immigrant clients shows us the importance of understanding migration histories and current fears or uncertainties, in order to assess the potential impact of loss and trauma on women, children and families. Asking about and being willing to hear stories that include the adaptation process is crucial to the optimal provision of services. (Paris, 2008, p.149)

This increasing global trend of women migrating with their children, the risk of exposure to traumatic events and human rights abuses affecting their mental health, the inadequate response of some host nations to meet the needs of the population, and the insufficient data and information, calls for multiple actions. These include the advancement of social work research that can both inform programming and policy making to promote and defend the human rights of these women and children. This study aims to contribute to that goal.

Specific Aims of this Study

Ultimately, this study aimed to:

- Contribute to the scarce literature on the particular experiences of asylum-seeking mothers migrating with children.
- Describe the transnational contexts in which asylum-seeking mothers live and mother, and document how these contexts produced traumatic events and human rights abuses to this particular population.
- Contribute to the literature on mothering and migration, through the observation of maternal practices that emerged in contexts of violence, precariousness and institutional neglect.
- Document the mental health impacts of living and mothering in such contexts.

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- Bring asylum-seeking mothers voices to the center of discussions on theory, policy and practice with asylum-seekers.

Research Questions

- What are the contexts like in which Central American mothers have lived and mothered before, during and after migration? What difficult or traumatic events and human rights abuses arise from these contexts affecting this particular population?
- What are mothers' practices to survive and support themselves and their children in these contexts?
- What are the impacts of these experiences and maternal practices on mothers' health and mental health?

Chapter II: Contextual Analysis of the Countries in which Participants have Lived and Mothered

This chapter presents a contextual analysis of the countries in which the participants of this study—and other asylum-seeking mothers—have lived and mothered. It serves to frame the first research question by presenting literature that describes the contexts before, during and after migration that shaped the experiences, influenced the maternal practices and the mental health of study participants. This chapter also aims to contribute to an understanding of participants' narratives not as isolated or disconnected stories, but as stories that are a complex combination of their protagonism and a particular socio-economic, political, historical, and geographical context.

Migratory processes are intensively influenced by sociopolitical, cultural, and historical factors (Hershberg, 2012). Indeed, different groups of immigrants experience different push factors as well as different stories and different needs that trigger their migration (Hershberg, 2012). Several scholars have highlighted the importance of adopting social-ecological frameworks to observe the impact of broader societal contexts on individual trajectories, and have proposed more structural explanations that emphasize the many social inequalities shaping the experiences of immigrants (Brabeck et al., 2016, p. 4). This approach is particularly important in studies like this one that observe the mental health of individuals who have been affected by societies historically permeated by violence and a lack of institutional protections. “In contexts like this, the concept of trauma takes on a social and historical dimension” (Hernandez, 2002), and is often referred to as “psychosocial trauma” (Martín-Baró, 1989). The latter refers to injuries that “have been produced socially —i.e. its roots are not found in the individual but in society— and by its very nature is nourished and maintained in the relationship between the individual and society, through various mediations by institutions, groups and even

individuals” (Martín-Baró, 1989, p.14). This contextual approach will facilitate an understanding of how social and political systems across borders have shaped the experiences, the migratory decisions and the maternal practices of Central American asylum-seeking mothers, and how these systems also produced trauma in this particular population of immigrants.

Local Contexts: El Salvador, Guatemala, and Honduras

Poverty and inequality. One of the factors triggering migration from the North of Central America to the United States has been the high level of poverty and the intense inequality in these countries, as compared to the economic development of the United States. Guatemala, El Salvador and Honduras are among the poorest countries in Latin America and the Caribbean (IOM & WFP, 2016) with a Gross Domestic Product (GDP) in 2017 of 4,471; 3,889 and 2,480 U.S. dollars respectively (World Bank, 2019). In contrast, the United States GDP’s in 2017 was \$59,531 (The World Bank, 2019), more than 13 times higher than the GDP of Guatemala and 24 times higher than the GDP of Honduras. Women, Indigenous, and rural populations have been the most affected by poverty in these countries (Medeiros & Costa, 2008; FAO, 2017; CIA, 2019).

Honduras is the second poorest country in Central American—after Haiti—with nearly 65% of the population below poverty, one third of the population underemployed (CIA, 2019). About sixty percent (59.3%) of the population in Guatemala lived below the national poverty line, and 23% lived in extreme poverty in 2014 (CIA, 2019). In 2016, the percentage of the population living under the national poverty line in El Salvador was 32.7% (CIA, 2019), which represents a significant reduction from a previous poverty rate of 39% in 2006 (The World Bank, 2018). This reduction is explained by an increase in the salaries of low skilled workers, a small economic growth and the high level of remittances (The World Bank, 2018).

Honduras, El Salvador, and Guatemala are also among the most food insecure countries in Latin America and the Caribbean (IOM & WFP, 2016). Notably, Guatemala has the highest rate of chronic malnutrition in Latin America and the Caribbean, nearly 50% nationally (IOM & WFP, 2016). Environmental degradation and climate change in Central America are contributing to the high levels of food insecurity, the loss of livelihoods, and the decreased labor opportunities, all of which trigger migration (Mahler & Ugrina, 2006; ECLAC, 2015; IOM & WFP, 2016; Sînziana Puscas & Escribano, 2018). These countries are considered among the most vulnerable countries to the effects of climate change (ECLAC, 2015). Climate change is “exacerbating economic vulnerabilities” and “will increasingly affect the economic progress of the region” (ECLAC, 2015, p.16).

These countries have historically presented high levels of income inequality within their own borders. In 2012, Honduras and Guatemala had the highest levels of income inequality in Latin America, with a GINI coefficient⁵ between 0.55 and 0.60 respectively (Amarante, Galván & Mancero, 2016). Most countries in the region have been reducing their levels of inequality due to economic growth and popular demands for equality and social inclusion (Amarante et al., 2016), however, the distribution of income remains highly unequal (CIA, 2019). Economic inequality in the region has historic causes, some of which date from colonization and others subsequent to independence in the 1800s. Since these countries declared independence from Spain:

⁵ The GINI Index measures the deviation of the distribution of income among individuals or households within a country from a perfectly equal distribution. A value of 0 represents absolute equality, a value of 100 absolute inequality. (<https://www.indexmundi.com/facts/indicators/SI.POV.GINI/rankings>).

Liberal reforms at that time privatized communal lands (dedicated to export over subsistence crops), displacing thousands of peasants and initiating a pattern that endures to these days—an oligarchy in control of both the land and the armed forces, and a majority of the population battling perpetual poverty. (Mahler & Ugrina, 2006)

With the advent of democracy in the 1990 after years of civil war, these countries followed liberalization policies—including liberalizing trade and flexibility in labor laws—that while they produced some economic growth, negatively affected the poorest sectors of the populations, pushing them into the informal sectors and low paying jobs (Cruz, 2015). By that time, these countries had also reduced governmental expenditures in social programs that had been targeted to improve the living conditions of the most underprivileged sectors (Cruz, 2015).

The feminization of poverty. Although there has been progress in closing gender gaps in these countries, poverty still disproportionately affects women. According to FAO (2017) despite the fact that overall poverty has been reduced in Latin America and the Caribbean, women's poverty has increased in this region. The femininity index in poor households estimates the rate of poor (indigent) women to men among populations 20 to 59 years old (UN, Gender Equality Observer for Latin America and the Caribbean, n.d. —UNGEOLAC). In 2014, for every 100 poor men, there were 106.6 poor women in Honduras, 106.3 in El Salvador and 104.4 in Guatemala. In general, the situation for women is more exacerbated in households with a greater number of children (UNGEOLAC, n.d.), especially if fathers do not contribute economically. Women in ages of high reproductive and productive demands are highly represented among the poor (UNGEOLAC, n.d.).

Some scholars have defined this increase in impoverished women as the feminization of poverty (see Medeiros & Costa, 2008). M. Lombe referred to this phenomenon as the

“povertization of women” instead, acknowledging the many structural factors that push women into poverty (personal communication, April 25th, 2019). Indeed, according to FAO (2017), 40% of rural women in Latin America and the Caribbean tend to work unpaid, and still have considerably less access to land ownership, credit, productive inputs and education than men. Moreover, women in this region are significantly represented in low-productivity sectors including agriculture, commerce, and human services such as domestic work, and have less access to higher productive sectors (UNGEOLAC, n.d.). Workers in low productive sectors have lower incomes, less education, more instability, limited social security benefits, and an absence of work contracts (UNGEOLAC, n.d.). In Honduras, 75.7% of women (vs. 69% of men) work in the low productive sectors; in El Salvador, 76.6 % (vs. 62.7% of men); and, in Guatemala, it is 78.4% women (vs. 69% of men). There are indicators that in Honduras, Guatemala and El Salvador that women face inequality in terms of access to economic resources, at higher rates than in other countries in the region. For example, while the percentage of female business owners is 32.2% in Mexico and 29.7% in Paraguay, it is only 14% in Honduras (FAO, 2017). While in Chile and Jamaica, 30% of farms are managed or headed by women, only 8% of farms in Guatemala are female-led (FAO, 2017). Even though agriculture represents 13% of Guatemala’s GDP, women have insignificant land ownership. Moreover, “female-headed farms are smaller and on lower-quality land” (FAO, 2017). All this results in difficulties for mothers to economically support their children; triggering Latina mothers’ decisions to migrate to the United States (Paris, 2008)

Local gender ideologies. Machismo, a local patriarchal ideology, is one root of women’s economic inequality and violence against them. In patriarchal societies, most positions of power

belong to men; patriarchal societies are “male-dominated”, “male-centered” and “male-identified”, and that implies the oppression of women (Johnson, 2007, p.160).

Patriarchy is understood as a system in which men hold the power and women are subordinate, and machismo, a particularly aggressive manifestation of patriarchy characterized by hypermasculinity [...] Patriarchy and machismo underpin men’s belief that they have the prerogative to regard women as property and to use violence against them as they see fit. (Musalo, 2018, p.11)

A main difference between patriarchy and machismo is “the tendency of males to abandon their children” (Musalo, 2018, p.12). Some (Sara-Lafosse, 1998; Musalo, 2018) argue that this ideology has its roots in Spanish colonizers’ rape of or unions with Indigenous women, and their failure to recognize the children resulting from those relationships or refusal to assume paternal responsibilities. Machismo results in high numbers of illegitimate births, abandoned spouses and children, extramarital relationships, single mothering and high prevalence of women headed households, which are associated with higher poverty (Sara-Lafosse, 1998). Machismo could be an explanation of the high numbers of mothers migrating alone with their children due to economic difficulties and violence.

Criminal violence. Honduras, Guatemala, and El Salvador are not only poor, “but they are also besieged by the highest levels of criminal violence in the world” (Cruz, 2015, p.43). These countries have consistently been ranked as the most violent countries in the world due to their high levels of homicides. In 2015, El Salvador has been ranked as the most violent country not at war (Labrador & Renwick, 2018), with a rate that year of 105 intentional homicide victims per 100,000 citizens (UNODC, 2016).

Violence is attributed mainly to transnational criminal groups—gangs, pandillas or *maras*—such as Mara Salvatrucha (MS-13) or Eighteenth Street Gang (M-18). In many cases these groups hold associations with Mexican drug-trafficking organizations (Labrador & Renwick, 2018). These groups make profits out of extortion, kidnapping for ransom, human trafficking, and smuggling (Labrador & Renwick, 2018). Gangs exert brutal forms of violence to control their territories in El Salvador, Guatemala and Honduras. They dominate urban areas, and in the last years, have increased their presence in rural and semi-urban areas (Dotson & Frydman, 2017). With approximately 85,000 members in total, MS-13 and M-18 are the region's largest criminal groups (Labrador & Renwick, 2018). Both originated in Los Angeles. M-18 was created in 1960 by Mexican groups, and MS-13, in 1980 by Salvadorans who fled the country's civil war (Mahler & Ugrina, 2006; Labrador & Renwick, 2018). In the 1990s, the US government deported a large number of undocumented immigrants with criminal records, which contributed to the growth of these groups in Central America (Mahler & Ugrina, 2006; Labrador & Renwick, 2018; Lusk & Chaparro, 2018). Many of these deportees continued their criminal activities in the region while maintaining transnational ties with the United States; it is estimated that there are 10,000 MS-13 members in the United States (Labrador & Renwick, 2018).

Other criminal groups affecting the region include drug traffickers who sometimes partner with these *maras* for the transport and distribution of drugs (Labrador & Renwick, 2018). Central America is not a high consumer or producer of narcotics; however, the region is situated between the largest producers of cocaine in South America and its major consumer, the United States (Shifter, 2012). A large percentage of narcotics consumed in the United States are trafficked through Central America, notably 90 % of the cocaine (Labrador & Renwick, 2018). U.S.'s efforts to control drugs in Colombia have unintentionally caused drug routes to move

towards Central America (Labrador & Renwick, 2018). Thus, U.S. policies and increasing demand for narcotics have had an effect on violence in the region. Several U.S. administrations have acknowledged this responsibility and have made efforts to control drug demand, prevention, and treatment (Meyer, 2019).

In this context of violence, residents from these countries endure multiple traumatic events and human rights violations that trigger their decision to flee (Bridgen, 2013; UNHCR, 2015; Keller et al., 2017). Keller and associates (2017) studied the pre-migration exposure to extreme events of migrant families from El Salvador, Honduras, and Guatemala shortly after arriving to the U.S.-Mexico border. The study found that exposure to extreme events was common among their sample of 234 adults: 32.2% reported a family member being murdered; 45% reported death threats towards themselves and 51.9%, towards their family; 57.8% reported threats of violence—other than death—to themselves and 66.2%, towards their family. Thirty three percent reported experiencing extortions and 29% domestic violence. Sixty percent of individuals reported that gang violence was the reason for leaving their countries, 7% cited domestic violence (mostly women). Most participants did not denounce the event to local authorities due to fears of gang retaliation and concerns about police corruption and inefficiency. Those who did report the abuse noted that the response from the police was either ineffective or detrimental. Other studies with Central Americans have documented this distrust in institutions (UNHCR, 2015; Dotson & Frydman, 2017; Hallock et al., 2018; Mejívar & Walsh, 2018).

Gender-based violence. Honduras, El Salvador, and Guatemala have the highest rates of violent deaths for both men and women in the world, but also the highest violent death rates for women in the world (Small Arms Survey, 2016). In 2016, El Salvador presented a rate of 11.2

feminicides ⁶ per 100,000 women; the rate for Honduras was 10.2, and for Guatemala, 2.5 (CEPAL, GEOLAC, n.d.). In 2017, El Salvador, Honduras, Trinidad y Tobago and Guatemala were the countries with the highest feminicides rates in Latin America and the Caribbean (CEPAL, n.d.). Even though these numbers remained high in comparison to the region, in 2017 there was some improvement in El Salvador, and, more so, in Honduras. The femicide rate for El Salvador decreased one point from 2016 to 2017, to 10.2 violent death of women per 100.000 women. The rate for Honduras was reduced in half, from 10.2 in 2016 to 5.1 in 2017. In contrast, the rate for Guatemala increased slightly from 2.5 to 2.6 (CEPAL, n.d.). These rates are still higher than other countries in the region, and they have been increasing during the last decades (Menjívar & Walsh, 2019; Dotson & Frydman, 2017). Gendered violence is manifested not only in the high rates of feminicides reported above, but also on the prevalence of rape and sexual assault, domestic violence, human trafficking, sexual exploitation, violence against LGBTI people, and sexual abuse of children (Dotson & Frydman, 2017). Sexual and gender-based violence disproportionately affect women and children (Dotson & Frydman, 2017).

Gangs are responsible for the recent intensification of these types of violence, as they use gendered and sexual violence as tactics to gain control of the territories they want to dominate, to suppress resistance, and to obtain free labor and services from vulnerable populations (Dotson & Frydman, 2017; Hallock et al., 2018). These tactics have been observed in other settings of armed conflict (Dotson & Frydman, 2017; Kellezi & Reicher, 2014) According to Hernandez

⁶ Femicide in this case is synonymous of femicide or aggravated homicide due to gender. These numbers correspond to the quantification of homicides of women 15 years of age and over, killed by gender violence (CEPAL, Gender Equality Observatory for Latin America and the Caribbean. n.d.). However, other scholars define femicide as the death of women that result from a confluence of state, institutional, every day and intimate violence against them (Menjívar & Walsh, 2018).

Cruz, director of Fundacion Sobreviviente (Survivor's Foundation) in Guatemala, "when a gang says this is my territory, they are talking about everything, the houses, the businesses, the people, especially women and girls" (Dotson & Frydman, 2017, p.3). The bodies of women and girls are considered to belong to the gangs, and gang members can exert sexual violence with complete impunity (Dotson & Frydman, 2017). Women living alone are also at risk of violence, "women alone, without the protection of her husband or father, are increasingly perceived by other men as potential for victimization" (Eisold, 2016, p.253). Machismo, which justifies violence against women, shapes the culture of the gangs (Dotson & Frydman, 2017).

In the majority of cases, sexual and gendered violence is not reported to authorities and remains unpunished (Dotson & Frydman, 2017). In part, this is because gender-based violence is internalized and normalized in communities (Menjívar & Walsh, 2019; Dotson & Frydman, 2017). However, the main reason that victims, especially in gang-controlled areas, do not report violence is they don't trust local institutions and they fear retaliation from gang members (Dotson & Frydman, 2017). Domestic violence also tends to go unreported; when women have abusive partners, the police will most likely side with the men (Eisold, 2016). Even though there are laws in these countries designed to protect women from sexual and gendered violence, "the legal system systematically fails to protect them" (Menjívar & Walsh, 2019, p.14). Institutions fail to investigate and prosecute crimes due to lack of training, resources or "intentional mishandling" (Dotson & Frydman, 2017, p.8). Menjivar & Walsh (2019) stated:

The same violence structures and practices that produce violence in the women's lives also shape how institutions and the justice system respond to women's plight and control government official's interpretations of those laws. (p.13)

Sexual and gender-based violence in its multiple forms, and the lack of governmental protection, is one of the drivers of the recent migration of women (Menjivar & Walsh, 2018;

Dotson & Frydman, 2017). “Two main reasons for migration for women are threats and violence suffered from their male partners (e.g., gender-based violence) and extortion and death threats from delinquent groups (e.g., gang violence)” (Menjívar & Walsh, 2019, p.12). Women endure many human rights violations triggering their decision of leaving their homes and seeking asylum in the US. In 2015, the UN High Commission for Refugees interviewed 160 women from Guatemala, El Salvador, Honduras, and Mexico who had entered the United States on or after October 1st 2013 and who had passed the credible fear interview or had been granted some protection such as asylum. According to this study:

The 160 women interviewed for this report talked about being raped, assaulted, extorted, and threatened by members of heavily-armed, transnational criminal groups. They spoke about their families having to contend with gunfights, disappearances, and death threats.

They described seeing family members murdered or abducted and watching their children being forcibly recruited by those groups. (UNHCR, 2015, p.2)

Historical violence. Organized crime is one of the “legacies” of the decades of civil war within the region (Shifter, 2012, p.5). Civil wars in El Salvador between military forces supported by paramilitary units and intelligence services (Shifter, 2012), and leftist guerilla groups lasted between 1979 and 1992 and left a toll of 75,000 deaths (Labrador & Renwick, 2018). Guatemala’s internal conflict also involved a conflict between leftist guerilla groups and military governments supported by paramilitary units and intelligence services (Shifter, 2012). It lasted almost 4 decades from 1960 to 1996 and killed about 200,000 civilians (Labrador & Renwick, 2018). The United States supported conservative military governments as part of their anti-communist actions (Mahler & Ugrina, 2006), governments who were responsible for multiple gross human rights violations. During these years, Honduras didn’t experience a civil war like these other two countries, but experienced the effects of conflicts occurring in the

neighboring countries; and “served as a staging ground for the US-backed Contras, a right-wing rebel group fighting Nicaragua’s Sandinista government during the 1980s” (Labrador & Renwick, 2018).

By the end of these wars, “subsequent efforts to build solid democratic institutions failed to dismantle these structures, which have turned to a host of illicit enterprises, including drug smuggling, human trafficking, illegal adoptions, arms smuggling, and movement of other contraband” (Shifter, 2012, p.5). A large number of “demobilized and unemployed men with easy access to weapons morphed into organized criminal groups” (Labrador & Renwick, 2018,). Impunity contributed further to widespread violence (Musalo, 2019).

Civil wars killed thousands of inhabitants, displaced millions, and also institutionalized a pattern of migration to the United States that had been minor before the wars (Mahler & Ugrina, 2006). “Between the 1970 and 1980, the number of foreign-born Central Americans living in the United States tripled and then nearly tripled again during the 1980s because of the ongoing conflicts in the region”; the numbers might have been higher as the census did not count unauthorized migrants (Mahler & Ugrina, 2006).

These decades of violence had an unequal toll on Indigenous populations and women, and consolidated a legacy of violence against women, as rapes and killings of women were used as tactics of war (Donovan & Asquith, 2019). According to a UN Commission for Historical Clarification (CEH), 93% of gross violations of human rights during the armed conflict in Guatemala, including more than 620 massacres and 200,000 disappearances, were linked to the Guatemalan government; and 83% of the victims were classified as Mayan, who were considered sub-human (CEH, 1999; Lykes & Hershberg, 2015). In Guatemala’s civil war, violence was both racialized and gendered, with Mayan women being particularly targeted by military and

paramilitary groups, enduring gross human rights violations (Lykes & Crosby, 2015). Similarly, during El Salvador's civil war, sexual violence was used as a weapon of war (Human Rights Watch, 2019).

The civil wars in these countries are recent and have directly or indirectly impacted the lives of the current migrant women. Whether spoken or unspoken, the stories and sequelae of gender-based violence crosses generations, affecting grandmothers, mothers, daughters, friends or relatives of current asylum-seeking women. These familiar and collective memories are background to asylum-seeking women's disillusion with their countries of origin and their decisions to migrate in search of protection for themselves and their children.

The role of local governments. According to Cruz (2015) the root causes of poverty, violence, and emigration can be found in local democratic institutions' failures to achieve peace and prosperity and to promote the rights of citizens. At the end of the civil wars, these countries became "electoral democracies and reformed their criminal justice institutions to ensure the rule of law and the protection of human rights" (Cruz, 2015, p.43). However, even though they were created with great expectations, democratic institutions have failed to develop the peaceful and prosperous societies they promised (Cruz, 2015). The implementation of neoliberal policies complicated these processes by restricting the funding to governmental expenditures (Cruz, 2015). Institutions in these countries are weak not only due to these low levels of funding, but also to their high levels of corruption (Labrador & Renewick, 2018; Hallock, 2018; Transparency International, 2018). Weak institutions have not been capable of addressing gang violence, protecting citizens' rights, and implementing legal mechanisms to protect women from gender-based violence.

Failures in legislative efforts to protect women. After the creation of the new democratic governments, Guatemala, El Salvador, and Honduras enacted legal frameworks to protect women from gender-based violence. Most notably, in 2000, Guatemala signed the international Optional Protocol to the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW); it was ratified in 2002 (UN Gender Equality Observer, n.d.). This protocol was adopted by the UN General Assembly in 1999, and recognizes the role of the Committee on the Elimination of Discrimination Against Women to receive complaints by individuals or organizations of the civil society (UN Gender Equality Observer, n.d.). It establishes mechanisms to increase the accountability of states in issues of discrimination against women. In 1995 local women's rights movements had pressured the Guatemalan government to ratify the Inter-American Convention on the Prevention, Punishment, and Eradication of Violence Against Women —Convention “Belem do Pará” — (Menjívar & Walsh, 2016). These movements have also advocated for the creation of new national special laws against gender-based violence, which were included in the Guatemalan Civil and Penal Codes (Menjívar & Walsh, 2016). Some of these laws include: the 1996 Intrafamilial Law to Prevent, Punish, and Eradicate Intrafamilial Violence; the 2008 Law against Femicide and other Forms of Violence Against Women, and the Law against Sexual Violence, Exploitation, and Human Trafficking (Menjívar & Walsh, 2016). Despite the efforts of women's rights movements, Guatemala has failed to comply with international, regional, and national laws. “Guatemala, with one of the highest levels of killings of women, has a paltry 1-2 percent conviction rate” (Menjívar & Walsh, 2019, p.13). The application of the laws by the police, prosecutors, and judges has been problematic and has contributed to this impunity (Menjívar & Walsh, 2016). Problems have included:

(1) persistent victim blaming in a social context that impacts the interpretations of justice system officers, (2) utilizing adjacent laws and principles in the civil code, which already disfavor women, (3) privileging competing discriminatory legal norms in the civil code that persist in family, marriage, divorce, alimony, and property laws.

(Menjívar & Walsh, 2016, p.13)

El Salvador presents a similar situation as Guatemala. It also signed the Optional Protocol of CEDAW in 2001; however, it has not ratified it up to this date (UN Gender Equality Observer, n.d.). It has also signed the Inter-American Convention “Belem do Pará” to address domestic violence (Musalo, 2019). There are also five national laws protecting women from violence and discrimination in El Salvador: the 1996 Law against Intrafamilial Violence; the 1998 amendment to the article 200 on the Penal Code on domestic violence; the 2010 Special integral law for a life free of violence for women; the 2011 Law of Equality, Equity and Eradication of Discrimination against Women; and the Decree 286 for the creation of specialized tribunals for a life free of violence and discrimination against women (Musalo, 2019). Similar to the case of Guatemala, these laws have not contributed to reducing the levels of gender-based violence and the levels of impunity of perpetrators; moreover, in recent years several forms of violence have increased (Musalo, 2019). Conviction rates for intra-familial violence were only 1.5% in 2012; this means that 98.5% of the cases presented were left without conviction (Menjívar & Walsh, 2019). Reasons for the failures of these legal frameworks include: biased judges resistant to and not interested in gender matters, institutional weaknesses resulting in a lack of coordination between the courts and the police, patriarchal ideologies influencing institutions, flaws and contradictions in the design of the laws, lack of political will and of

adequate funding, delays in implementation, lack of transparency, and failure to report statistics, among others (Musalo, 2019).

Similar to the cases of Guatemala and El Salvador, women's rights movements in Honduras, supported by international organizations, pressured for a series of laws to protect women from discrimination and violence (Menjívar & Walsh, 2017). These laws were enacted by the pre-coup government⁷, and included the 1997 Law Against Domestic Violence, and the 2000 Law for Equal Opportunities for Women (Menjívar & Walsh, 2017). In 2004, Honduras ratified CEDAW; and in 2005, Honduras ratified the Inter-American Convention Belém do Pará,” (Menjívar & Walsh, 2017). In 2013 the post-coup de facto government passed the Femicide Law, which established femicide as a crime punished with 30 to 40 years of imprisonment (Menjívar & Walsh, 2017). Again, despite these laws designed to protect women, their implementation has been problematic and violence against women has continued to rise (Menjívar & Walsh, 2017). The situation became worse post-coup, when the implementation of these legislative initiatives declined (Menjívar & Walsh, 2017). Governmental “acts of omission and commission” are responsible for creating the conditions for feminicide and impunity in Honduras (Menjívar & Walsh, 2017). State actors have not only engaged in acts of omission by neither implementing the laws nor taking the necessary measures to protect women; they have also committed direct actions sexually assaulting and persecuting women political leaders

⁷ In 2009, a coup overthrew the democratically elected president Manuel Zelaya. This event exacerbated a security crisis, worsened the economic situation and increased violence in Honduras, with impacts in Guatemala and El Salvador. Multiple human rights violations have been denounced, including the repression of protestors using excessive force, an increase in arbitrary detentions, a militarization of the national territory, an increase in violations of women's rights and racial discrimination. Political violence is now difficult to distinguish from common crime (Menjívar & Drysdale, 2007).

(Menjívar & Walsh, 2017). “Normalized views and structures that devalue women’s lives and sustain violence against them existed before the coup, but state actions after the coup have amplified these conditions and deepened inequalities” (Menjívar & Walsh, 2017, p.227).

Menjívar and Walsh (2016) argue that it is the “gender discriminatory social context” and a “discriminatory structure” that condition the application of laws to protect women contributing to impunity. Even in cases in which laws exist, laws are still ineffective in a context that discriminates against women (Menjívar & Walsh, 2016) and in which the devaluation of women and violence against them is normalized (Menjívar & Walsh, 2017). With “unresponsive governments, ineffective justice systems, and weak institutions” women who “experience different forms of violence have no other option than to flee” (Menjívar & Walsh, 2019, p.12).

The Context of Transition

Central American asylum-seekers leave their countries fleeing poverty, violence, and institutions that fail to protect their basic human rights. However, the roads to seeking humanitarian protections present them with new conditions of precariousness, violence, and institutional neglect. Asylum-seekers from this region typically do not access safe ways of seeking refugee protections; they travel dangerous routes through Central America and Mexico to request asylum defensively at the U.S. border.

Ramji-Nogales (2019), among others, calls attention to the increasing trends of people moving across borders seeking asylum, the vulnerability of these populations, and the failure of international laws to protect them in their transit, eschewing an orderly and safe migration flow. Instead, international laws drafted by sovereign nations, have focused more on controlling their borders. This scholar states that with incredible advances in the safety and efficiency of global public transportation, asylum-seekers could avoid travelling in such dangerous conditions if there

was a political will to protect them. While money and goods travel safely protected by different international laws; international human rights laws do not include provisions for the safe transit of asylum-seekers; which leads to further harm to these populations (Ramji-Nogales, 2019).

Asylum-seeking women and children are especially vulnerable to human rights abuses during the migratory journey. Many women are beaten or killed by smugglers or those who they pay to assure their safe transit, typically called coyotes (UNHCR, 2015). Rape is common along the journey and women tend to take contraceptives to prevent pregnancies (May & Quinteros, 2012; De las Fuentes, Ramos Duffer & Vasquez, 2013; UNHCR, 2015; Ramji-Nogales, 2019). Indeed, rape is considered the “price for admission” for women crossing the U.S.-Mexico border; sexual assault is perpetrated by coyotes and immigration and border patrol agents (Falcón, 2006; Vanderpool, 2008). Among other hardships women endure while crossing the borders are included difficulties such as lack of food and water, travelling while being sick, suffering the heat of the desert, going through frightening situations and experiencing fear of assault by coyotes and/or other similar groups (Paris, 2008).

The United States’ Context

Given its geographical proximity, the United States has maintained close connections with Central American countries and has played a role in the political and economic development of the region (Meyer, 2019). At the same time, the United States has been affected historically by the instability of this region, notably, in receiving large influxes of immigrants from these countries fleeing poverty and violence or seeking to reunify with family already in the United States. There is, indeed, a long history of Central American nationals migrating to the United States, especially Guatemalans and Salvadorans and, most recently, Hondurans (IOM & WFP, 2016). As a result, the vast majority of immigrants from these three countries live in the

United States (OIM & WFP, 2016). Census data estimated that in 2016, 3.2 million individuals born in Central America were living in the United States, including 1.3 million Salvadorans, 903,000 Guatemalans, and 575,000 Hondurans (Meyer, 2019). While historically the majority of migrants were men, as described above, in the recent years there has been a significant increase in the numbers of women, children, and family units (generally a mother with her children) crossing the U.S.-Mexico border and seeking asylum. This new trend responds to the increasing violence in the region, and to forms of violence specifically targeting women and children.

During the last decades, the United States has responded with different policies to authorize or restrict migration, with the development of more restrictive policies during Trump's administration. This section presents an overview of asylum policies in the United States and discusses their implications for immigrants from Central America, especially asylum-seeking women.

Refugee and asylum laws in the United States. In 1968, the United States signed the UN 1951 Convention and the 1967 Protocols, related to the status of refugees (Kniffin, 2011; AIC, 2018). In 1980, the United States passed the Refugee Act, which incorporated the UN Convention's provisions and definitions into U.S. law, and set the bases for the U.S. Refugee Admission Program (AIC, 2018). Based on the United Nation's definitions, the United States defines a refugee as a person who is unable or unwilling to return to his or her home country because of a well-founded fear of persecution due to race, membership in a particular social group, political opinion, religion, or national origin (Kniffin, 2011; AIC, 2018). By signing the 1967 Protocol and by creating these refugee laws, "the US has legal obligations to provide protection and certain rights to those who qualify as refugees" (AIC, 2016).

Those granted refugee status are allowed to live and work in the United States, to leave and return to their countries of origin, to apply for a Social Security Card and a driver's license, to apply to become lawful permanent residents and U.S. citizens, and to request asylum for spouses or unmarried children (U.S. Citizenship and Immigration Services –USCIS– 2019). Refugees are eligible to receive resettlement and medical assistance through the Department of Health and Human Services Administration for Children and Families Office of Refugee Resettlement (ORR) (USCIS, 2019). ORR administers programs for refugees including: cash and medical assistance, employment preparation, job placement, and English language training (USCIS, 2019).

Asylum is another protection from persecution for those who meet the international definition of a refugee, however, there are differences in the ways of applying for this protection. While refugee status needs to be requested from outside the United States, asylum status can be granted to people already residing in the United States, or to those who present themselves at the borders claiming fear of persecution (AIC, 2016). However, those who present themselves at the U.S. border—or are encountered by U.S. border patrols or handed over to them by others who work collaboratively with them—are automatically subject to expedited removals and thus need to apply for asylum defensively⁸. After being detained and placed in expedited removal procedures, individuals who say they fear persecution or torture if deported, can be granted a credible fear interview with an USCIS asylum officer. If this officer believes that this immigrant has credible fear of persecution or torture, and could meet the definition of refugee, the person is

⁸ Expedited removal is a fast process that allows the customs and border patrol to quickly deport certain people. The defensive asylum process is a difficult process in which the asylum-seeker has to file an application against removal from the United States with an immigration judge; and unlike the criminal justice system, the United States does not guarantee lawyers for individuals in immigration courts (AIC, 2016).

considered eligible for asylum and is referred to immigration courts to start their defensive asylum process. These individuals have a one-year deadline from the date they were detained, to file their asylum application. They are allowed to stay in the US while their applications are processed. If credible fear is not established, then the individual is placed back in removal procedures (AIC, 2016). These decisions may be appealed through an immigration judge, or by requesting reconsideration to the asylum officer (AIC, 2016).

The asylum processes can take years to conclude. In the case of defensive applications, the wait times can be three or even six years depending, on the state (AIC, 2016). “Asylum-seekers and their families waiting to reunify them are left in limbo while their cases are pending” (AIC, 2016, p.4). In some cases, asylum-seekers can obtain work permits, however this can take time and they are not entitled to the other benefits received by those already granted refugee or asylee status. Single mothers with children can experience hardship while in these limbos. Until they obtain a work authorization, they need to make decisions of whether or not to work without proper authorization or to depend on others to economically support them and their children, or to go without satisfying their basic needs. Having young children to care for complicates work options. Limited job opportunities, or low paying jobs with long hours are other difficult challenges asylum-seeking mothers face in the United States, especially if those mothers have to make child care arrangements for their children in the US and send money for those left behind in their countries (Hallock, 2018).

Once asylum-seekers are granted asylum they are considered asylees and can be allowed to work in the United States, may obtain social security, may be authorized to travel abroad and to petition family members, can be eligible for Federal or ORR (AIC, 2016). They can apply for lawful permanent resident status, such as a Green card, one year from obtaining asylum status.

They can also apply for citizenship four years after obtaining their permanent resident status (AIC, 2016).

Immigration detention. Some asylum-seekers are released in the US territory shortly after they are detained at the border, and remain in communities across the United States, while their asylum application is processed (AIC, 2016). Typically, sponsors, who are family members or friends already residing in the US, receive and support these asylum-seekers. ICE controls the location of many of them with GPS monitors that asylum-seekers have to wear permanently on their ankles; they also mandate that they report on a regular basis, typically weekly. Despite the problems reported with this type of control (headaches with the use of the GPS monitor, difficulties of reporting to ICE while working, for example), mothers and children can remain in communities and have some freedom of movement. Other asylum-seekers—including children and families—remain in detention centers at the border throughout the asylum process (AIC, 2016, p.4). The duration of detention is frequently arbitrary and varies at least in part because “there are no statutory limits to the amount of time a non-citizen may be held in detention. Some asylum applicants may be kept in detention for several months or even years” (AIC, 2016, p.4).

Over the past decades, scholars and immigrant rights advocates have questioned multiple aspects of the US’s system of immigrant detention, including (a) the use of private contractors who lack adequate oversight of detainees’ treatment; (b) the grouping of violent criminals with non-violent undocumented immigrants—including women and children—in common cells; (c) the lack of adequate sanitary conditions; (d) the neglect in health and mental health attention to detainees (Villalobos, 2011); (e) the harsh treatment and abuse of migrants by government officials (Lusk & Galindo, 2017); (f) the detention of children and the separation of families and the illegality of indefinite detention (Amnesty International, 2018a); (g) the abusive conditions

for women and children (Human Rights Watch, 2018). Scholars have observed how the imprisonment of undocumented migrants responds to militarization and criminalization strategies (Villalobos, 2011), rather than responding to the original humanitarian drives included in international conventions designed to protect the rights of those fleeing persecution.

According to Amnesty International America's director, Guevara Rosa, the detention of children and their separation from their parents "is a flagrant violation of the human rights of these parents and children and is also a violation of US obligations under refugee law" (Amnesty International, 2018)

Children and families who are detained are at risk of suffering mental and physical health problems including depression and PTSD, as well as several infections (AIC, 2016). At the same time, detainees face hardships in obtaining legal advocacy and are less likely than those with counsel of being successful in their asylum applications (Villalobos, 2011; AIC, 2016). Women face particular risks. There have been cases of women being sexually assaulted by other inmates or by detention centers' guards and staff members (Villalobos, 2011). As noted throughout this chapter, many asylum-seeking women have been victims of violence in their countries of origin and they arrive at the US border with medical and mental health needs. However, the immigration detention system fails to adequately address these needs, by denying them appropriate referrals to outside services, and failing to provide appropriate cultural and linguistic services (Villalobo, 2011). Pregnant, post-natal and nursing women have reported problems in accessing appropriate services (Villalobo, 2011). "Many women who immigrate to the United States come with their families and are their families' primary caregivers. When mothers are detained, entire families suffer" (Villalobo, 2011).

Political resistance to asylum and refugee laws. Scholars note current and past governmental administrations' "resistance" to asylum or refugee laws (Musalo, 2019; Hong, 2019; Suarez Orozco, 2019). Musalo (2019) relates asylum to US political interests, arguing that during the Cold War the US favored refugees from communist' countries that they saw as proof of the discrimination faced by individuals in these regimes and their refuge in the US as a validation of its democratic system. After the Cold War the faces of refugees changed and the US has been gradually retreating from these protections (Musalo, 2019). Hong (2019) refers to a direct "attack to asylum" during the administrations of Clinton, Bush, Obama, and Trump and describes the multiple practices these governments have implemented to restrict asylum protections and to deter immigrants to seek asylum. These have included (a) the creation of the expedite removal process to quickly return individuals at the border without a hearing and without a lawyer (Hong, 2019); (b) the expansion of categories of persons subjected to mandatory detention, adversely affecting migrant families (Schriro, 2017; Hong, 2019); (c) the restriction of automatic work permits (Hong, 2019); d) the reduction in the deadline to apply for asylum to one year (Hong, 2019); (e) the creation and expansion of facilities designed to detain families (Schriro, 2017) run by for-profit private contractors (Reyes, 2019); (f) the practice of separating families in detention (Schriro, 2017; Amnesty International, 2018); (g) the inhumane and harsh treatment of detainees (Villalobo, 2011; Schriro, 2017; Reyes, 2019; Lusk & Galindo, 2017). Neither Democrat nor Republican governments have been able to develop a humane and comprehensive response to asylum-seekers from Central America, and the most recent responses from the Trump administration have aimed to criminalize those running away from criminality.

The first years of the Obama administration (2008- 2012) reflected their intention towards improving the situation of immigrants in detention; notably, this administration

commissioned a comprehensive evaluation of detention centers with several recommendations, including those improving the treatment of detainees, especially families (Schriro, 2017).

However, despite the initial intentions, many of the proposed changes failed to be implemented (Villalobo, 2011; Schiro, 2017). It was during the second Obama administration, in 2014, that the numbers of Central American asylum-seekers, including unaccompanied children, spiked due to the crisis in the region. The Obama Administration's responses to this humanitarian crisis were "conflicted" and "confusing" (Schriro, 2017, p. 461). While trying to stop immigration, Obama also requested \$4 million emergency funds to increase immigration court's capacities to process asylum claims and to expand ICE's capacities of detention and supervision; however, these funds were not granted (Schriro, 2017). In 2014 the percentages of Central Americans granted asylum status were very low considering the crisis in the region and the historical ties between these countries and the United States (Honduras received only 1% of total asylum grants the US granted, El Salvador 2% and Guatemala 2% compared to 34% China and 12% Egypt) (AIC, 2016). Obama's Administration continued to implement deportation policies within established immigrant communities; immigrants involved in crime were sent to immigration authorities for potential deportation (Villalobo, 2011).

The Trump Administration took a more dramatic approach and exacerbated the rhetoric against refugees and asylum-seekers. In September 2017, he signed an order to reduce the number of refugees to a cap of 45,000, which meant a 59% reduction from the previous year (Korte, 2017) and an historical low since 2002, in the numbers of refugees allowed into the country (Connor & Krogstad, 2017). In 2019, the new refugee admission ceiling was set even lower with a quota of 30,000 (AIC, 2019).

Until recently, the United States offered refuge each year to more people than all other nations combined [...] In 2017, for the first time in modern history, the United States settled fewer refugees than the rest of the world. (AIC, 2019, p.1)

In FY2018, only 4.2% (or 955) of all refugee arrivals in the United States came from Central America, 385 less than in FY2016 (AIC, 2019, p.3). Trump also sought to cut the number of asylees (Hong, 2019), which would directly impact nationals from El Salvador, Guatemala, and Honduras, as they are largely represented among those seeking-asylum. Indeed, in 2017, 43% of all asylum applications in the US came from the North of Central America (UNHCR, 2017). At the same time, Trump's administration has been pushing for stricter screenings of asylum-seekers (Arya, 2016), alluding to 'rising levels of fraud that plagues our system' (Long-Garcia, 2018). Moreover, as Hong stated at the BC Global Migration Conference: "Trump is scaling back procedural protections to asylum-seekers and calling asylum-seekers burdens and terrorists and those that help them dirty lawyers" (Hong, 2019).

Building on this negative rhetoric against immigration, another approach taken by Trump's administration has been the militarization of the border (Hong, 2019). By the end of October 2018, the administration sent 5,000 armed military troops to the southern border to block the entrance of a migrant caravan coming from Central America, after Trump has labeled this caravan as "an invasion of our country" and the situation a "national emergency" (Shear & Gibbons, 2018). Based on this declaration of a national emergency, President Trump requested the Congressional funding to construct a wall across the US Southern border. The Congress disapproved this use of funds, however, the President obtained money from military sources (Browne, 2019).

The Trump administration has used the separation of immigrant parents and children in detention as a deterrence strategy with the enactment of the “zero tolerance” immigration policy in 2018. “Under that controversial policy, more than 2,000 children were separated from their parents at the border from April 19 to May 31 (Sands, 2018). On June of 2018, after public rejection and a lawsuit from the Federal Court filed against the government, President Trump signed an executive order to reverse the policy. However, although not at the levels of the previous months, the border patrol continued separating families after the policy was removed (Sands, 2018; Jordan, 2019) and many families previously separated were not reunified due to inadequate tracking systems (The Lancet, 2019). Family separations occurred in the past during the Obama administration (Schriro, 2017; Sands, 2018), however, “it’s unclear what the prior levels of family separation were before fiscal year 2017, DHS says, because records of family separations were not tracked” (Sands, 2018). The differences between these two administrations appear to be on the rhetoric around this practice; during the Trump administration these practices seemed to be “celebrated” (Suarez-Orozco, 2019).

Deportations have been on the rise during Trump’s years. “ICE expanded and expedited the removal of persons whose conduct could result in charges or convictions as well as those with criminal charges or convictions, resulting in a 38 percent increase in arrests by ICE agents within the first 100 days of the Trump administration” (Schriro, 2017, p.452). Arrests of undocumented migrants in Boston were up to 50% in the last fiscal year; the increase was largely due to a surge in “noncriminal” arrests (Johnson, 2018). These detentions generate fear and stress on immigrant communities, including asylum-seekers whose claims have not yet been resolved and sponsor families of asylum-seekers facing legal vulnerability.

According to Amnesty International (2018a) several policies and practices of the Trump administration violate both US and international laws that protect asylum-seekers and refugees⁹.

Those policies and practices have included, among others: (1) mass illegal pushbacks of asylum-seekers at the US–Mexico border; (2) thousands of illegal family separations, through which the Trump administration has deliberately and purposefully inflicted extreme suffering on families, ill-treatment which rose to the level of torture in some cases; and (3) increasingly arbitrary and indefinite detention of asylum-seekers, without parole, constituting cruel, inhuman or degrading treatment or punishment (ill-treatment) which is absolutely prohibited in international law. (p.4)

Turning asylum seekers back at the borders violate the right to seek asylum from persecution and the principle of *refoulement* in international refugee laws (forcing people to return to places where they might be at risk of human rights violations) (Amnesty International, 2018a¹⁰). According to Amnesty International, separations of children from their parents meet the definition of torture under international laws, and violates multiple human rights: the right to family unit, the right to liberty, and the right to freedom from torture and other ill treatment, violating US obligations under international refugee laws (Amnesty International, 2018a). The

⁹ “An asylum-seeker is someone who has left their country seeking protection but has yet to be recognized as a refugee. During the time that their asylum claim is being examined, the asylum-seeker must not be forced to return to their country of origin. Under international law, being a refugee is a fact-based status, and arises before the official, legal granting of asylum” (Amnesty International, 2018, p.3). Under this interpretation, asylum-seekers rights deserve to be respected and protected under refugee laws.

¹⁰ Amnesty International is an international non-governmental organization that focuses on human rights, by investigating human rights abuses, lobbying and campaigning for the respect of international human rights laws (amnesty.org).

practice of indefinite detention without criminal charge also constitutes a violation of the United Nations Convention Against Torture, which the US ratified (Amnesty International, 2018a).

Changes to asylum policies and practices affect the entire population of asylum-seekers coming from Central America, but some policies particularly affect women. In June 2018, the Attorney General Jeff Sessions issued a decision “that overturned a legal precedent affirming the right of domestic and gang violence survivors to seek protection in the United States” (Menjívar & Walsh, 2018)¹¹. This decision known as “Matter of A-B”, denied asylum for a Salvadoran woman, Ms. A.B, who was seeking protection due to having endured 15 years of abuse by her ex-husband and receiving no protection from her country’s authorities.

The Attorney General’s decision not only attempts to eliminate domestic violence as harm connected to a nexus that qualifies for asylum, but also tries to foreclose gang violence as a basis for asylum. The decision opines that both domestic violence and gang violence are merely examples of “private violence” against groups that “are often not exposed to more violence or human rights violations than other segments of society”. (Immigrant Legal Resource Center, 2018, p.3)

This decision can have detrimental consequences on asylum-seeking women as domestic and gang violence are two main reasons they flee their countries (Menjívar & Walsh, 2018). The change affects those women who are already in the process of applying for asylum in the US; it also prevents other women from seeking asylum at the border, as these new provisions are used

¹¹ “Matter of A-B- overruled Matter of A-R-C-G-, a 2014 precedential BIA decision that officially recognized domestic violence as a basis for asylum. In Matter of A-R-C-G-, the BIA found that “married women in Guatemala who are unable to leave their relationship” was a viable particular social group” (Immigrant Legal Resource Center, 2018)

to screen applicants during the credible fear interviews (Menjívar & Walsh, 2019). For these women, “following the law and reaching out for protection in the United States now results in their swift removal back to the life-threatening conditions they fled” (Menjívar & Walsh, 2019, p.12). However, Matter A-B has been challenged in several courts¹², and “asylum matters involving domestic violence and/or gang-based claims remain winnable with proper case preparation and adept lawyering” (National Immigrant Justice Center, 2019, p.1).

Despite these increased difficulties in the asylum processes, the numbers of families crossing the southwest border continued to increase and it was at a high in February 2019. Deterrence policies were not able to curb the numbers of people fleeing poverty and violence in El Salvador, Guatemala and Honduras (Dickerson, 2019).

Multiple Violations across Borders, and its Impacts on Mental Health

The contextual analysis presented in this section highlighted the multiple human rights violations—or denials of basic human rights—historically endured by citizens from Honduras, El Salvador, and Guatemala in their countries of origin. Structural and historical conditions of poverty and violence have consistently denied citizens’ rights to life, to live without fear, to a healthy environment, to food security, “to a place to live and a job in which one can fulfill oneself as a human being” (Martín-Baró, 1989, p.6). Environmental degradation and climate change worsen conditions of poverty; and they might also contribute to the conditions of

¹² “The most in-depth analysis of the A-B- decision thus far can be found in the decision of the D.C. District Court in *Grace v. Whitaker*, No. 18-cv-01853 (D.D.C., Dec. 19, 2018). Grace involved a challenge to the application of Matter of A-B- and the ensuing implementing USCIS Policy Memorandum to credible fear interviews” (National Immigrant Justice Center, 2019, p.15).

generalized violence affecting individuals from these countries. As documented, women are particularly affected by poverty and violence; however, to the author's knowledge, studies on how women who are mothers are particularly affected are scarce. Local institutions have historically failed to protect their citizens and promote basic human rights, and, on occasion, have committed further human rights abuses, all of which generate mistrust in these communities and damage social relations (Martín-Baró, 1989). As noted, despite the advancement of legislation protecting women's rights in these countries, violence against women is still rampant. Studies on how the inadequate institutional protections affect the lives and the decisions of women who are mothers, are lacking.

As observed, these multiple, cumulative, historical violations have historically triggered migration from this region to the United States. They have also led to poor health and mental health outcomes for many who experienced those violations. Coming from these contexts, many Central American immigrants arriving in the United States have experienced or witnessed different types of violent events. Some scholars have noted that the exposure to these pre-migration events can contribute to mental health disorders, such as post-traumatic stress, anxiety, and depression in immigrants from the North of Central America (Martín-Baró, 1989; Keller et al., 2017). In particular, Keller and associates (2017) concluded that a sample of 234 adults in migrant families coming from El Salvador, Honduras, and Guatemala had high levels of PTSD and major depression when assessed by them shortly after arriving to the U.S.-Mexico border. As noted before, many of these families have been exposed to several extreme events of generalized and domestic violence prior to migration. Keller et al. (2017) assessed participants' mental health using the HTQ and the Patient Health Questionnaire-9 and found that thirty two percent (32%) of respondents reported symptoms of PTSD (51 out of 157), and 24% of

respondents were found to have major depression (36 out of 148). Previously, other scholars have established an association between political violence in Central America¹³ and psychological distress, such as depression, anxiety, and PTSD, and poor physical health outcomes for Central American immigrants (Martín-Baró, 1989; Fortuna, Porche, & Alegria, 2008). Eisenman, Gelberg, Honghu & Shapiro (2003) conducted a study of 638 Latinx immigrant adults and found that 36% of those exposed to political violence¹⁴ in their home countries had symptoms of depression and 18% had symptoms of PTSD. Those exposed to political violence reported more chronic pain and role limitations due to physical problems and lower perception of general health, than those who were not exposed to political violence (Eisenman et al., 2003). Even though the term “political violence” has mostly been applied to civil war contexts or to abusive political regimes, much of the current criminal violence is also motivated by power claims to control communities, and continues to inflict physical and psychological damage on victims and witnesses.

These contexts have particularly affected women. As mentioned before, Central American immigrant women in the United States have been exposed to several traumatic events related to the high rates of generalized and gender-based violence in the region (Kaltman, Hurtado de Mendoza, Gonzales, Serrano & Guarnaccia, 2010; UNHCR, 2015; Eisold, 2016; Dotson & Frydman, 2017; Menjívar & Walsh, 2019). Being exposed to political violence, sexual

¹³ Political violence is defined as “violence perpetuated by individuals, institutions or the state which is motivated by political and/or power claims and which frequently leads into physical and psychological damage inflicted on persons and communities who experience or witness that violence” (Fortuna et al., 2008)

¹⁴ In this study political violence was measured as experiencing torture, witnessing violence against family members, forced disappearance of family members, witnessed mass violence, and feeling their life was endangered by attacks with bombs or heavy weapons.

trauma and witnessing violence are common stressors among Latina asylum-seeking women (Kaltman et al., 2011; May & Quinteros, 2012). Extreme events tend to have dire impacts on the mental health of those who endure them, but women seem to fare worse than men (Kellezi & Reicher, 2014). It has been noted that in the case of women who are mothers, traumatic events not only affect the women who experience them, but are also evident in less effective parenting styles leading to inhibited development of their children (Foroghe & Muller, 2012; May & Quinteros, 2012; Van, E., Kleber & Mooren, 2012).

It is important to acknowledge that multiple studies with Central American immigrant families in the United States have also found “extraordinary resiliency and strengths in the contexts of multiple adversities” (Brabeck, Sibley & Lykes, 2016, p. 25; Lusk & Galindo, 2017; Lusk & Chaparro, 2018) and most in these samples do not report or express negative mental health symptoms (Perreira & Ornelas, 2013; Brabeck et al., 2016). Severe trauma is not necessarily the experience of all Latina immigrant women in the United States (May & Quinteros, 2012). In some cases, the suffering of war-like situations can even contribute to experiences of growth in humanity (Martín-Baró, 1989).

This section has also highlighted that the denial of human rights has continued across borders for Central Americans, as the United States fails to implement asylum and other humanitarian policies and practices that could protect these populations. Studies have documented how restrictive immigration policies aiming at curtailing the influx of asylum seekers can negatively affect the mental health of those seeking asylum (Steel, Momartin, Silove, Coello, Aroche & Tay, 2011). There is evidence that post-migration stress related to harsh deterrence immigration policies adds to the effects of previous trauma, creating the risk of PTSD and other psychiatric disorders (Silove, Steel & Watters, 2000). Most notably, the policies of

family detention and separation in the United States have negative impacts on mothers' and children's health and mental health, and mothers who are separated from their children are likely to give up on their asylum claims (Villalobo, 2011; AIC, 2016). It is acknowledged that separation from parents can have "catastrophic" and irreversible impact on the health and mental health of children (Wan, 2018); children express negative mental health outcomes related to separation of loved ones during apprehension (Barrick, 2016). Prolonged detention is correlated with higher risk of depression, PTSD and other disorders in children and adults (Keller, Joscelyne, Granski & Rosenfeld, 2017). It has also been documented that women have been sexually abused and mistreated in U.S. detention centers (Villalobos, 2011), experiences that can lead to negative mental health outcomes for those who suffer them. Other current restrictive immigration policies can generate greater vulnerability increasing poverty, fear and distrust, and limited access to services, all of which increase the risk of poor mental health outcomes and might exacerbate the consequences of prior exposure to violence in the countries of origin and in transit to the United States (Torres, Santiago, Walts & Richards, 2018). Indeed, the difficulties for asylum seekers to find and afford immigration lawyers to represent them, and the delays or denials of work permits, can all contribute to exacerbating conditions of poverty and dependency on sponsors (Hallock, 2018). Financial difficulties have been associated with depression in populations of asylum-seekers (Silove et al., 2000). Delays in the resolution of asylum applications, conflicts with immigration officials, and unemployment are other stressors associated with PTSD and other psychological distress symptoms in asylum-seeking populations (Silove et al., 2000). Legal vulnerability can generate anxiety and fear over the possibility of being deported (Silove et al., 2000; Torres et al., 2018). Recent changes in asylum laws retracting protections for asylum-seekers running away from domestic and gang violence will

leave many asylum-seeking women legally vulnerable to deportation generating greater anxiety over returning to the conditions of violence and poverty that they fled. Legal vulnerability could also increase women's risks of being abused and exploited in the host countries, as the fear of deportation typically restrain them from denouncing abusers (Yakushko & Morgan-Consoli, 2014; Hallock, 2018; Esposito, Ornellas, Arcidiacono & Sirocchi, 2019). These stressors add to others stressors endured by migrant women, such as not speaking the language, not understanding school systems for their children, conflicts with sponsors or partners, and experiences of discrimination and racism affecting women's wellbeing (Yakushko & Morgan-Consoli, 2014).

As seen, mothers and children coming from Central America may have experienced three layers of trauma: traumatic events in their countries of origin, new trauma due to violence in the migratory journey, and new "state-sponsored trauma", trauma generated through U.S. national policies of family detention and separation (Bernd, 2017). A few studies have observed the cumulative effect of traumatic events across borders (see Kaltman et al., 2010; Lykes & Hershberg, 2011; Esposito et al., 2017; Torres et al., 2018). However, studies on trauma across borders have focus on other populations of migrants, refugees and asylum-seekers (See for example Silove, Steel, McGorry & Mohan, 1998; Alayarian, 2007; Perreira & Ornella, 2013). Studies providing empirical evidence on the experiences and impacts on mental health of asylum-seeking mothers that bring children with them are still needed, given the increasing trend of mothers and children crossing borders.

The analysis provided in this chapter highlights not only the continuity of experiences of violence and poverty across borders, but also the continuity of experiences of institutional failures to protect women from this region. Legislation to protect women in Honduras, El

Salvador, and Guatemala exist, but laws are not implemented or are resisted due to entrenched gendered ideologies, corruption, and institutional inefficiencies. Legislation to protect asylum-seeking and refugee women in the United States exist, however they are also resisted and attacked due to anti-immigration sentiments. In practical terms, women fleeing violence in Central America and their children are currently a kind of stateless population. None of the nation states in which these women live, mother, and seek refuge take serious responsibility in protecting their basic human rights, and in many cases commit further abuses. The right to mental health of these populations is particularly affected in these contexts; in transnational contexts “psychosocial trauma” (Martín-Baró, 1989) can be exacerbated across national borders by legislations and institutions that not only fail to protect but can also produce further harm. While this chapter sought to explore the literature contextual conditions in which Central American asylum-seeking mothers live and mother and the impacts of this context on their mental health, the following chapter explores theories and literature on mothering in such difficult contexts.

Chapter III: Mothering in Difficult Contexts: Perspectives from Feminist Theories and Studies on Motherhood and Mothering

The previous chapter explored the harsh contextual conditions in which Northern Triangle asylum-seeking mothers have lived and mothered. This was included as context, because this study is guided by feminist theories that emphasize that motherhood – as well as migration- occurs in specific social and historical contexts (Ruddick, 1989; Scheper-Hughes, 1992; Collins, 1994; García Coll, Surrey & Weingarten, 1998; Liamputtong, 2011; Naidu, 2013). Motherhood and mothering practices depend on “the particular conditions – social, cultural, political and economic – in which individual women give birth and rear their children” (Richardson, 1993, p. 144). According to feminist scholars, many women in marginalized places, including Third World women and migrant mothers throughout the world, “have to give birth and nurture children under ecological conditions and social arrangements hostile to child survival, as well as to their own well-being” (Scheper-Hughes, 1989, p.14). These conditions tend to be defined by unequal power relationships related to gender, class, and race (Collins, 1994; Liamputtong, 2011; Naidu, 2013), and “severe social and institutional neglect” (Scheper-Hughes, 1989, p.14).

This section presents a review of feminist theories and studies focusing on the experiences and practices of marginalized mothers (Garcia Coll, et al., 1998), those “who mother on the margins” of society (Craig & O’Dell, 2011). While some literature is available, scholars have observed the need for more empirical and theoretical studies on different groups of marginalized mothers, including migrant mothers (Collins, 1994; García Coll, et al., 1998; O’Reilly, 2007).

Besides highlighting the importance of the context in which mothers mother, feminist theorists have focused on the following themes that relate to—and guide—the current research study (a) the importance of shifting the center of existing theory and research towards focusing on the experiences of those who mother from the margins; (b) the experiences of motherhood and mothering in a world organized on the basis of “racial states” (Lentin, 2004); (c) the “right to mother” in a globalized world (Cheng, 2007); d) maternal agency within different contexts; and, (e) maternal wellbeing.

Shifting the Center

Feminist scholar Patricia Hill Collins (1994) has observed that previous theorizing on motherhood has been informed by the experiences and concerns of White middle-class women and has failed to represent the experiences of women of color. She has called to “shift the center” to include those women’s experiences:

Shifting the center to accommodate this diversity promises to recontextualize motherhood and point us toward feminist theorizing that embraces difference as an essential part of commonality. (Collins, 1994, p.62)

Western feminist themes on motherhood including the unequal division of roles between mothers and fathers, the dichotomies of public-private spaces for men and women, and women’s struggles for personal autonomy are not representative and cannot be generalized to women who mother in other social, racial/ethnic and global locations (Collins, 1994; Cheng, 2007). For marginalized mothers, maternal concerns are related to the struggles to guarantee the survival of their children in harsh contexts (Collins, 1994) or, in the case of women working many shifts or transnational migrant mothers, to their ability to live with or to be present to their children (Collins, 1994; Cheng, 2007). Cheng (2007) has specially called to center the experiences of

Third World women and to challenge “the dominant feminist theorizing in motherhood” based on the experiences of “Western, white, middle-class women” (Cheng, 2007, p.642). In a similar way, García Coll et al. (1998) have stated the importance of making marginalized mothers visible by writing about their mothering practices and about the contexts in which they mother.

When marginalization occurs, the experiences of some is subjugated to the experience of others and rendered less visible and less heard [...] Value is placed on the experiences of those at the center, and less value, no value or negative value is placed on those pushed to the margins. (García Coll et al., 1998)

Motherhood, Race and the Racial State

Collins (1994) has called for a deeper understanding of the role of racism and state policies conditioning the experiences of marginalized mothers within the United States. She analyzed how Native American, Asian, Black, and Hispanic mothers have been systematically marginalized and disempowered in their maternal roles, and pointed to a legacy of institutional practices of separating these mothers from their children. Native Americans mothers in reservations have confronted historical “intrusive government institutions such as the Bureau of Indian affairs in deciding the fate of their children” [...] “black children could be sold at will, shipped or even killed without any recourse by their mothers”. According to Collins (1994): “Physical and/or psychological separation of mother and children designed to disempower individuals forms the basis of systematic effort to disempower racial ethnic communities” (p. 53). The practice of separating Central American mothers and their children at the US-Mexico border to deter their migration could have roots in this legacy.

More recently, other scholars have picked up on these notions of race, national policies and motherhood, and applied them to a transnational level. Following Goldberg (2002), feminist

scholar Ronit Lentin (2004) has described modern states as “racial states.” In these states “race and nation are defined in terms of each other to produce a coherent picture of its population in the face of a divisive heterogeneity, which in some cases, may be defined as standing outside the state, while in others, is about the containment of the other within” (Lentin, 2004, p.304). These states have the power to include or exclude based on a racial order; and power is asserted through policies (including asylum policies), practices, governmental technologies, and bureaucracies (Lentin, 2004). In racial states mothers and motherhood become contested political notions. “Racial states prescribe which women are entitled to give birth to the citizens of ‘the nation’” (Lentin, 2004, p.305). In the case of the Republic of Ireland, Irish mothers are viewed as symbolic representation of the nation, and as the legitimate bearers of future Irish citizens entitled to live in this nation (Lentin, 2004); “non-national m/others, on the other hand, are generally viewed as subverting the next generations of Irish citizens” (Lentin, 2004, p. 307). Racial states construct these “m/others” as “undesirable reproductive bodies” (Lentin, 2004) and as “despicable diasporics” (Christou, Giorgio & Rye, 2015, p.50).

The Right to Mothering in a Globalized World

Several feminist scholars have discussed motherhood using human rights frameworks. Many have written about “the right to resist mothering”, the freedom “to not mother” (Trebilcot, 1983), or the choice to mother and reproductive rights (Richardson, 1993). Scholars that have focused on mothering from the margins have built on these discussions, pointing out other rights of concern to transnational mothers in a global context or to marginalized mothers within national borders.

Cheng (2007) refers to “the right to mothering” and discusses how the main concern for those mothers that have to migrate to other countries for work leaving their children behind is

“the deprivation of their right to motherhood”. The deprivation of this right is institutionalized by national policies that do not allow migrant women to bring their children with them or to travel back to visit them, policies that are legitimized by state rhetoric (Cheng, 2007, p.641):

The construction of immigrant women as welfare cheats and brood mares results in the creation of several anti-immigrant initiatives and the deprivation of their citizenship right.

This results in situations of exploitation, where host nations like the US benefit from immigrant’s labor minimizing or eliminating any obligations towards them. (Cheng, 2007, p.643).

Migrant mothers’ reproductive and maternal practices are specifically affected in these global contexts organized under nation/racial/states. Cheng (2007) expresses the: “urgency of collaborative local and global feminist interventions in the pursuit of motherhood as a transborder concern. From the perspective of migrant women, it is not the choice of motherhood but the right to motherhood/mothering that is in jeopardy in the transnational era” (Cheng, 2007, p. 647).

Collins (1994) stated that marginalized mothers’ main concerns relate to the “right of their children to exist” and to “survive” in harsh environments. The right to mothering is also affected in contexts in which children’s lives are in constant danger due to poverty or violence, and in which mothers make extreme sacrifices—including migrating or working long days—that prevent them from being present to their children.

Mother’s Agency within Contexts

While feminist theorists acknowledge contextual conditions shaping and oppressing the lives of individual women and those who are mothers, they also highlight the individual woman’s agency to adjust or resist these conditions (García Coll et al., 1998). They observe how

women understand and make meaning of their lives (Riessman, 2005), and they write about them as “social actors” (Riessman, 2005) or “protagonists” of their lives in their particular contexts (Lykes & Crosby, 2015). In this line of thinking, feminist maternal theorists have distinguished between the terms, “motherhood” and “mothering.” Motherhood refers to the social institution of motherhood, which is considered to be patriarchal and male defined, controlling and oppressive towards women (Rich, 1976; O’Reilly, 2017). “The term mothering, however, refers to women’s experiences of mothering and is female defined and centered, and potentially empowering for women” (O’Reilly, 2017, p.728). The term “mothering” could be understood as the different ways and practices in which mothers exert their individual maternal agency. Mothering for women can be a source of empowerment, creativity, and fulfillment (Liamputtong, 2011).

It is important to acknowledge that feminist scholars have long recognized that “mothering” is not exclusively the responsibility or the work of the woman who goes through pregnancy and birth, that there are other ways of mothering, and other individuals who can mother (Ruddick, 1989; Richardson, 1993). These scholars state that women can mother children that “are not their own biologically speaking”, like in the cases of adoption or foster care, or lesbian couples or women who take care of their partner’s biological children, or cases of collective households (Richardson, 1993, p.16). In the case of transnational families where the biological mother migrates, grandparents, friends, nannies or even older siblings can sometimes perform maternal work with the children that remain in the home countries. Ruddick (1989) recognizes that men or other responsible adults can also mother, in the sense that they can provide childcare as a significant part of their working life; however, this scholar states that throughout the world “women have disproportionally cared for children” (p.40).

Feminist scholars have noticed that maternal agency is performed in contexts that present differential opportunities and constraints for women according to their social locations including race, class, and individual upbringing (Liamputtong, 2011). Indeed, “women are compelled by personal circumstances and resources to selectively adapt their methods of mothering within the situational realities and challenging environments of where they found themselves (Naidu, 2013, citing Maria Yax-Fraser). Feminist scholars have studied how Third World women living in conditions of poverty are compelled to “become mobile” across international borders (Naidu, 2013); these women leave their children back home and migrate to wealthier countries in order to find jobs to provide for their families. There is indeed a vast body of literature on “transnational mothering” or “mothering from the distance” (See Hondagneu-Sotello & Avila, 1997; Parreñas, 2001, 2002, 2005, 2010, 2011, 2012; Cheng, 2007; Dreby, 2010; Hershberg, 2012; Naidu, 2013; Oliveira, 2018). This research has well-documented and problematized migrant mothers’ maternal practices related to keeping economic and emotional ties with their children who are often living in different nation states from their own and from each other. It has also documented how the survival and education of the “left-behind children”, relies on the maternal act of migrating and sending remittances to their children back in their countries; and how the physical separation from their children is experienced by mothers as a loss but also as a necessary maternal sacrifice towards children’s wellbeing (Hondagneu-Sotello & Avila, 1997). As such, the notion of “left-behind children” has been criticized by scholars and migrant mothers for its negative connotation related to abandonment of children (Oliveira, 2018); migrant mothers do not abandon their children but continue providing them with emotional and economic support (Hondagneu-Sotello & Avila, 1997; Hershberg, 2012; Oliveira, 2018).

Ruddick (1989) has theorized that maternal practices respond to three main demands originating in the biological needs of children for survival and the social expectations of communities on mothers. “The demands for preservation, growth and social acceptability constitute maternal work: to be a mother is to be committed to meeting these demands by work of preservative love, nurturance and training” (Ruddick, 1989, p.17). Preserving the lives of children is the “central constitutive, invariant aim of maternal practice; the commitment to achieving that aim is the constitutive maternal act” (Ruddick, 1989, p.17). The second demand is related to the nurturance of children’s emotional, spiritual, and intellectual growth; mothers are the ones that nurture for growth and also assure conditions for growth to occur (Ruddick, 1989). The third demand is related to the social acceptability of their children, and includes mothers’ practices to train children to develop into “socially correct ways” (Ruddick, 1989, p.21). The criteria for acceptability depend on the values of the social group the mother feels has to please (Ruddick, 1989). Although maternal practices are highly influenced by social and biological conditions, mothers have some leeway on how to interpret, respond or even turn away from these demands; responses to the different demands vary enormously (Ruddick, 1989).

Collins (1994) has highlighted that for women in marginalized positions, their main maternal practice is much related to the demand of preserving the lives of their children in harsh environments related to violence, poverty and pollution:

Struggles to foster the survival of Native American, Hispanic, Asian American and African-American families and communities by ensuring the survival of children compromise a fundamental dimension of racial ethnic women’s motherwork. (Collins, 1994, p.45)

According to this scholar, White middle-class mothers in the United States can focus more on the psychic and emotional wellbeing of their children, and their own, because “physical survival is assumed for children who are white and middle class” (Collins, 2007, p.45). Indeed, mothering from marginalized positions can mean that maternal work is mostly related to assuring the survival of children.

In conditions of extreme poverty, however, scholars have noted that these preservative maternal practices can appear contradictor; as mothers with minimum resources have to decide which children will be preserved or cared for according to their likelihood of survival. Anthropologist Scheper-Hughes (1989, 1992) has explored maternal practices in the Brazilian shantytown, Alto do Cruzeiro, where conditions of high poverty, high fertility and high infant mortality, paired with institutional neglect, led marginalized mothers to make selective decisions on which infants to feed and which ones to let die. Scheper-Hughes (1989, 1992) also analyzed maternal feelings related to these decisions, which will be described in the following section. Scheper-Hughes (1992) used the term “triage” to define these practices of assessing the likelihood of survival of infants and selectively neglect those with poor chances of survival, while ‘diverting attention and resources to the most deserving cases’” (p.100). These maternal practices are considered “active survival strategies” and have been seen throughout human history and in poor nations of the Third World (Scheper-Hughes, 1989, p. 14). Indeed, in societies with these marginalized conditions “cultural practices of infants and childcare tend to be organized primarily around survival goals” (Scheper-Hughes, 1989, p.14). Scheper-Hughes observed: “In other times and places—and the Alto Cruzeiro is one example—where the threat of hunger, scarcity, and unmet needs is constant and chronic, traditional patterns of triage may determine the allocation of scarce resources within the household” (p.135).

Another theme within this body of literature is the topic of women and mothers' resistance, as a form of agency (García Coll et al., 1998). For women, resistance does not necessarily involve involvement in political movements against power and towards social justice; for many women "resistance is about creating the conditions necessary for life and it is about women expanding the limits of restrictions imposed upon them by misogynist, homophobic, racist, religious and class boundaries" (Aptheker, 1998, p. 169). Sometimes resistance means: "enduring on-going hardship while refusing to give up one's belief or life", while other times it means resisting oppressive conditions affecting one's life (Stacey, 1997 cited by García Coll et al., 1998, p. 11). For immigrant and asylum-seeking women travelling with children, migration itself can be "an outcome of the women's struggle against the oppressive nature of their countries of origin" (Esposito, et al., 2019) or a strategy for survival (Marsiglia & Menjivar, 2004; Paris, 2008). Resistance for marginalized mothers could mean enduring hardships of oppressive conditions themselves, but creating stability and spaces where their children can conceive a different future (Collins, 1994). Resistance, mothering and survival are related terms. "Women's resistance is informed by the logic of survival. For women, survival has meant both physical sustenance and emotional connection for themselves and their children (Aptheker, 1998, p.174).

Maternal Feelings and Wellbeing

Feminist theorists on motherhood have described maternal wellbeing and mental health tangentially. There are scholars that describe positive feelings for women related to their motherhood roles. Ruddick (1989), for example, stated that mothers' wellbeing was related to seeing their "children flourish" (p. 30). Liamputtong (2011)'s study has found that motherhood has given many Thai migrant mothers "happiness in their inner self and this has helped them to

survive in difficult times” in their host countries (p. 199). Liamputtong (2011) also acknowledged that other immigrant mothers in her study were not in a privileged position “to enjoy motherhood while trying to survive in their new country” (p. 199). Collins (1994) presented the testimony of June Jordan, an African-American feminist who described her hard-working mother, as sad and doing hard work for the survival of their children, a work that never allowed her to “dance”, “shout” or “laugh” (Collins, 1994, p. 52).

In relation to maternal feelings related to the practices of “triage” and “selective neglect”, Scheper-Hughes (1989, 1992) writes about being perplexed by the “emotional detachment”, “indifference”, “no hint of guilt”, and “no tears shed” by those marginalized mothers who allowed their infants to die (Scheper-Hughes, 1989). She wrote:

What then can be said of these women? What emotions what sentiments motivate them? How are they able to do what in fact must be done? What does mother love mean in this inhospitable context? Are grief and melancholia present, although deeply repressed? If so, where shall we look for them? And how should we understand their moral visions and moral sensibilities that guide their actions?

What does mother love mean to women whose scarcity, loss, sickness and deprivation have made that love frantic and robbed them of their fire, seeming to turn their hearts to stone?” (Scheper-Hughes, 1989, p.14)

Scheper-Hughes (1989, 1992) observes how maternal sentiments in relation to infants’ death—and in relation to their own maternal practices of selective neglect—respond to specific historical and contextual conditions. This particular maternal thinking and these sentiments—non-attachment to young infants and the absence of grief, sorrow or weeping for those infants who die—is a reasonable response to a specific context of high poverty, high fertility and high

mortality rates of infants (Scheper-Hughes, 1992, p.400). These responses are also culturally appropriate; community members coach mothers in “the art of resignation” and “holy indifference” (Scheper-Hughes, 1992, p.429). Scheper-Hughes (1992) did observe feelings of sorrow or grief with the death of older infants or children that had been expected to live and the mother had “dared to trust... and to love” (p.441).

As observed, feminist theorists on mothering from the margins have explored how maternal practices arising from hostile environments can affect the sentiments and wellbeing of mothers. Similarly, some existing empirical literature on asylum seeking mothers (not necessarily feminist literature) has also observed the emotional suffering of women who are involved in another difficult maternal practice, which is the one of leaving some children behind in their countries of origin, and in cases bringing others with them. Some scholars found that mothers typically expressed feelings of sadness or sorrow. A Latina migrant woman in the Paris (2008) study stated:

“The hardest thing about the trip was what I left behind...that I left my daughter behind...It would hurt when I would remember that one step forward mean that I couldn’t take steps back” (145).

Paris’ (2008) found that depression and sadness were prevalent in the group of immigrant mothers in her study; 10 out of 14 reported feeling depressed. Mothers who had to migrate without their children expressed the pain of not being physically present to their children; a mother said that with them far away, she didn’t have any “will to live” (Paris, 2008). Similarly to the Paris (2008) study, UNHCR (2015) report “Women on the Run” found that more than 60% of the women in their study left some of their kids behind while fleeing their countries, and cited that this separation was one of the most difficult parts of the journey (UNHCR, 2015, p.43).

Studies have documented feelings of loss, grief, depression and remorse in mothers that make another difficult choice: relinquishing their children for adoption; although some birthmothers had better outcomes depending on the adoption arrangement (Christian, McRoy, Grotevant, & Bryant, 1997; Henney Ayers-Lopez & McRoy, 2007). More studies on maternal practices, and sentiments in contexts of poverty, violence and institutional neglect are still needed.

Feminist Maternal Theories as Applicable to Asylum-seeking Mothers

Research on the experiences, practices and maternal mental health of asylum-seeking mothers crossing borders with their children is scant, even within this body of feminist research on motherhood. As observed, even though there is theoretical and empirical research on “transnational mothering”, this research has mostly focused on mothers who have migrated to provide economically for their children who remain in their countries of origin. While transnational mothers depicted in the literature typically “leave” their children to “provide” for them economically in contexts of poverty, asylum-seeking mothers like the ones in this study typically “run” with at least some of their children to “protect” them from violence. This represents a different trend in maternal practices of immigrant women, in a context of increasing violence.

Maternal feminist notions described in this chapter offer a framework for understanding the experiences, practices and sentiments of asylum-seeking mothers as experiences of mothering from the margins. These theories also help to understand the complexities of mothering in a globalized world organized in racial nation states. In this world organization, the rights of sovereignty and the assumption of state-based racial homogeneity take precedence over the international rights to seek and obtain humanitarian protection from violence. The concepts related to maternal agency and mothering practices in difficult contexts provide a framework to

analyze asylum seeking mothers' practices to preserve, nurture and socialize or train their children across borders.

The present study aims to contribute to existing feminist research and theorizing on mothering from the margins, by visualizing the particular experiences, practices and mental health outcomes of asylum-seeking mothers from Central America crossing borders with their children. The stories of these mothers need to be listened to and centered in debates on international human rights, in order to develop human rights frameworks that can protect the right to mothering in transnational contexts.

Chapter IV: Theoretical Framework

This study is grounded in feminist research and in human rights approaches to social work. These theoretical frameworks have guided this project since its inception, and continued to guide the analysis and interpretation of the interviews. The dialogue between feminist theory and human rights frameworks is especially important as it can contribute towards the development of the field of international human rights for the protection of asylum-seeking mothers and children in an increasingly globalized world. At the same time, this dialogue can also guide global and local social work practice on how to better support asylum-seeking mothers and their children. This section provides an overview of feminist research and human-rights approaches to social work and proposes a conceptual model to organize the findings. The model also acknowledges the literature and theories reviewed in the previous chapters, including the characteristics of the contexts in which Central American mothers live described in Chapter II and, and some notions of the feminist theories on mothering presented in Chapter III.

Feminist Research

Feminist research has informed the focus of this study, as this approach “privileges women’s issues, voices and lived experiences” (Hesse-Biber, 2014, p. 3). The purposes of this study also aligned with feminist research, by aiming to contribute knowledge on the many inequities that affect the lives of this particular group of asylum-seeking mothers and inform policy and programs to support “social justice and transformation” (Hesse-Biber, 2014, p. 3). As observed earlier (in Chapter III), motherhood has been a subject of feminist thinking from the late century (Liamputtong, 2001), including motherhood in contexts of violence, poverty, racism, and migration (see Scheper-Hughes, 1989, Collins, 1994, Hondagneu-Sotello & Avila, 1997,

Liamputtong, 2001, Cheng, 2007, Parreñas, 2001, 2002, 2005, 2010, 2011, 2012, Dreby, 2010, Hershberg, 2012, Naidu, 2013, Oliveira, 2018).

Besides influencing the focus of the study, feminist research has also guided the data collection and the analysis design. Observing women's personal narratives has been an interest among feminist researchers; by listening to previously silenced voices, feminist researchers challenge social science knowledge and production (Belenky, Clinchy, Goldberg & Tarule, 1986; Riessman, 2005). This study is an attempt to visualize and center otherwise marginalized mothers' stories. In depth semi-structured interviews allowed study participants to share their narratives with the author thus affording them the opportunity to construct and offer personal interpretations of their lives.

Feminist researchers also consider their own subjectivity and the role of their social position in the research relationship and in the construction of knowledge (Riessman, 2005). In the next chapter, the author reflects on her social positions as a migrant mother herself from South America, but with the privilege of having accessed higher education and a legal permanent residency in the United States. Her social position and experiences have created proximities and distances with the mothers in this study and have affected the way knowledge was constructed.

Feminist researchers acknowledge that patriarchal ideologies are the basis of gender inequalities and violence against women. Patriarchal ideologies can manifest differently across the world, presenting women with different constraints and possibilities of agency and resistance (Kandiyoti, 1988). As observed in Chapter II, Machismo is considered the local form of patriarchy prevalent in Latin American cultures (Farah Quijano, 2009, Pardo, Weisfeld, Hill & Slatcher, 2013; Eisold, 2016; Musalo, 2019). Machismo promotes "male power over women, masculine strengths and sexuality, and male violence" (Diekman, et al., 2005, p.212). Eisold

(2016) describes “machismo” as a “trauma-creating custom” oppressing women through gender-based violence and discrimination before, during and after migration. Chapter II explained how machismo is at the basis of the violence against women, women’s poverty, and institutional neglect of women in Central America.

Feminist research acknowledges how gender can intersect with other systems of power such as race, ethnicity, sexual orientation, class, age, ability, nationality, and citizenship status, differentiating the experiences of oppression of each particular women (Crenshaw, 1991; Collins & Chepp, 2013; Hesse-Bieber, 2014, Esposito et al., 2019), and each particular mother (Collins, 1994; Cheng, 2007). The theoretical perspective on intersectionalities understands that “socially constructed categories of difference and inequality interact—simultaneously—with other systems of power” (Collins, 1993; Collins & Chepp, 2013, p.11). The intersection of these “systems of power” produces “unequal material realities and distinctive social experiences for individuals and groups positioned within them” (Collins & Chepp, 2013, p.3). For example, the intersection of gender and race makes the experiences of gender-based violence of women of color different from those of white women; and as both women, and of color, they tend to be marginalized within feminist and antiracism discourses and interventions that fail to represent them and meet their needs (Crenshaw, 1991).

As observed earlier (in Chapter III), feminist theorists observe how structural conditions of inequalities and violence in societies affect women’s lives, but at the same time they are interested in women’s agency, meaning making and protagonism (Riessman, 2005; Lykes & Crosby, 2014; Bianco, Lombe & Bolis, 2017). The notion of agency provides a framework to understand the different strategies and maternal practices that the mothers in this study displayed throughout their migratory journey.

Human Rights Framework

A human rights framework was used throughout this study as a context to understand the experiences of asylum-seeking women and their children as they relate to violations of basic human rights and international human right treaties. According to the Statement of Principles of the International Association of Schools of Social Work (IASSW) and the International Federation of Social Workers (IFSW): “Principles of human rights and social justice are fundamental to social work” (2012). Social work practice should be guided by the principle of inherent worth and dignity of all individuals and should work to promote the rights deriving from this principle. At the same time, social workers have the responsibility to work at the societal level, promoting social justice by working in solidarity with those who are vulnerable to human rights abuses, and challenging unjust policies and practices (IASSW & IFSW, 2012). This focus on both the individual and the context is inherent to the social work discipline.

Social work scholar Jim Ife (2008) proposed that social workers engage in an inductive practice of questioning what human rights are behind the human needs they observe in their everyday practice (p.156). Ife (2008) proposes an understanding of human needs as means to realize a human right and a shift in the language of satisfying needs to the language of fulfilling human rights. “When social workers make statements of needs, the desired end state can be described in terms of the meeting of a claimed right” (Ife, 2008, p. 93). The present study frames the findings on mothers’ and children’s needs through this human rights lens and seeks to inform advocacy efforts to defend and protect the rights of this particular population across international borders.

The Universal Declaration of Human Rights (United Nations, 1948) establishes several universal human rights including the rights to life, liberty and security of person, and the rights to

seek and to enjoy in other countries asylum from persecution. This declaration also states that motherhood and childhood are entitled to special care and assistance. As observed earlier (in Chapter II), the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) establishes “equal rights for men and women to enjoy all economic, social, cultural, civil and political rights” (United Nations General Assembly, 1979). CEDAW also states the “social significance of maternity”, and “the role of both parents in upbringing their children” which requires “a sharing of responsibility between men and women and society as a whole” and an understanding that “the best interest of the child is the primordial consideration in all cases” (United Nations General Assembly, 1979, p.3). It also states the need of developing special protections for maternity, assuring that “protecting maternity shall not be considered discriminatory” (United Nations General Assembly, 1979, p.3)¹⁵.

The human rights framework establishes rights-holders and duty-bearers (United Nations Population Fund, UNDP, 2008). Rights holders are individuals entitled to their rights; they are recognized as actors rather than passive recipients of services. Duty bearers are typically

¹⁵ Guatemala has signed and ratified CEDAW, however, the United States, Honduras and El Salvador have signed but not ratified it. According to UN’s official information:

Where the signature is subject to ratification, acceptance or approval, the signature does not establish the consent to be bound. However, it is a means of authentication and expresses the willingness of the signatory state to continue the treaty-making process. The signature qualifies the signatory state to proceed to ratification, acceptance or approval. It also creates an obligation to refrain, in good faith, from acts that would defeat the object and the purpose of the treaty. Ratification defines the international act whereby a state indicates its consent to be bound to a treaty if the parties intended to show their consent by such an act. (United Nations, April 2018, ask.un.org).

governments who have the obligation of respecting, protecting and fulfilling every right (UNDP, 2008).

Despite advancements in their legislations incorporating these international human rights frameworks, governments in Central America are failing to protect the basic human rights of its citizens, especially women and children, triggering their migration. Moreover, despite signing international conventions to protect the rights of refugees and asylum seekers, host countries around the world, including the US, do not embrace their duties of protection fully. Eisold (2016) denounces how Central American asylum-seekers are sent back home to conditions where their lives are at risk, violating the principle of “non-refoulment”¹⁶ on the Geneva Conventions to which the United States ascribed, and how the United States does not respect the minimum standards for the treatment of refugees which include access to courts, primary education and work.

In the US and in parts of Europe too, we are not abiding very well by the Geneva conventions. The human rights of refugees are not being respected. We are doing this by breaking the law in the US by putting some women refugees from Central America with their children into prison. (Eisold, 2016, p.256)

¹⁶ The principle of non-refoulment is present in international treaties for the protection of refugees, it means that refugees cannot be returned to places where their life is threatened. According to UNHCR, “the most essential component of refugee status and of asylum is protection against return to a country where a person has reason to fear persecution. This protection has found expression in the principle of non-refoulement which [...] is widely accepted by States. The 1951 United Nations Convention relating to the Status of refugees [...] in Article 33(1), provides that: “No Contracting State shall expel or return (“refouler”) a refugee in any manner whatsoever to the frontiers of territories where his life or freedom would be threatened on account of his race, religion, nationality, membership of a particular social group or political opinion.” (UNHCR, 1977)

Similarly, human rights organizations have declared:

There are more than 20 million refugees in the world today. But this crisis isn't just a matter of numbers. It is also a crisis of governance: the widespread failure of nations to live up to their legal obligations to respect the human rights of refugees and to share the responsibility of assisting and hosting them. (Human Rights First, 2016, p.2)

This approach recognizes that the assertion of rights depends not only on the compliance of governments, but in “rights holders” claiming for their rights. “Examining how vulnerable populations come to see their difficulties as human rights violations is a fundamental question for human rights activists” (Engle Merry, 2003, p.344). This study remained attentive to women’s narratives to see the extent to which they speak the language of human rights and take actions to assert them.

As observed in Chapter III, human rights frameworks and human rights language have been used by feminist scholars to describe the reality of mothering from the margins of society and in transnational contexts (see Collins, 1994; Cheng, 2007). Many feminist scholars have discussed the rights related to reproduction, the right to mother or not to mother (Trebilcot, 1983; Richardson, 1993). Other feminist scholars have studied gender-based violence in contexts of peace and armed conflict using international human rights framework (see Engle Merry, 2003, 2006; Brunch, 2003; Lykes, 2010; Lykes & Hershberg, 2015). In particular, Engle Merry has studied the tensions between international human rights frameworks protecting women—including CEDAW—and the implementation of those legal frameworks locally; she observed how these laws are resisted in local communities as a consequence of gender-based violence being deeply rooted in cultural and religious beliefs (Engle Merry, 2006). Notably, human rights feminists have advocated for the right to asylum in relation to domestic violence, making

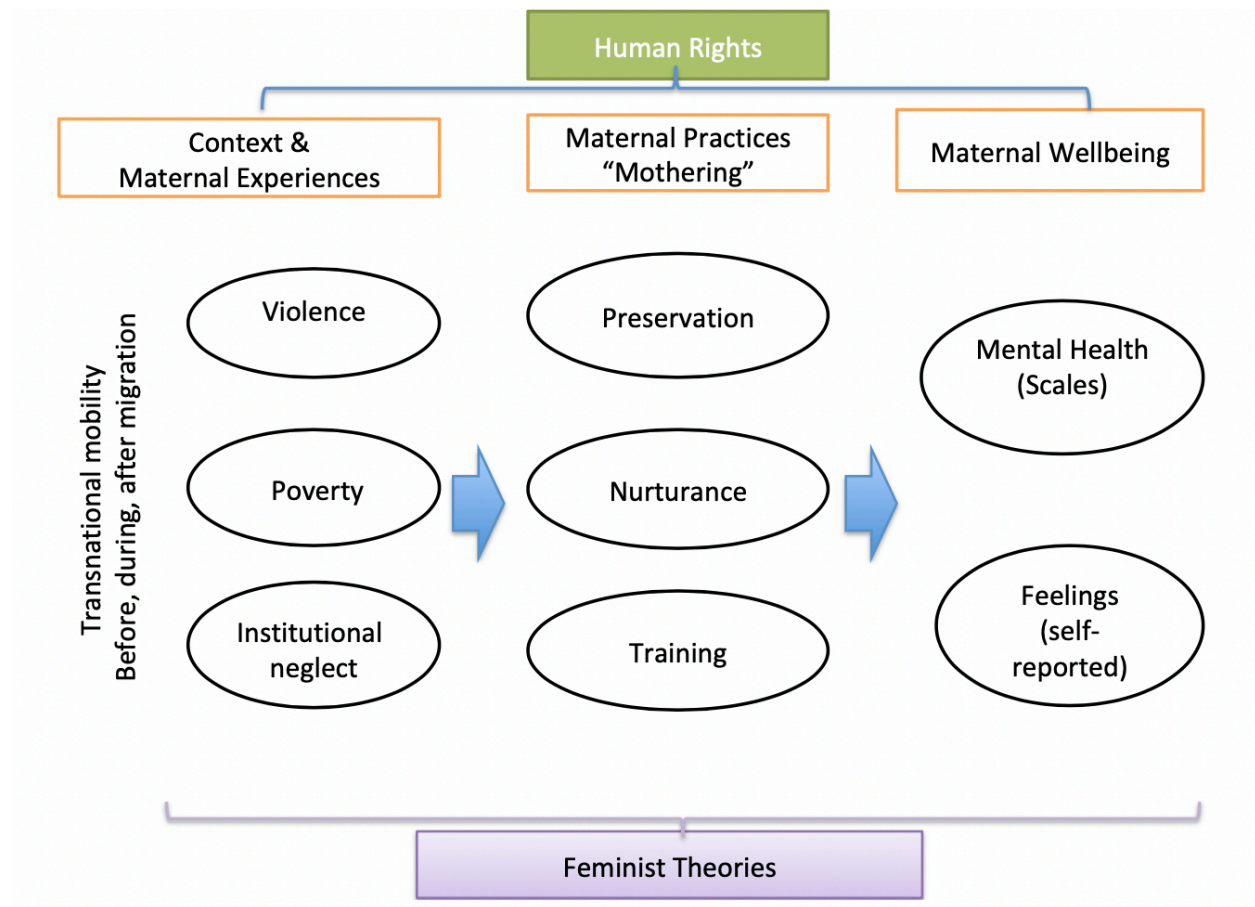
arguments that “private acts of violence” were of public concern and of human-rights concern, or were human rights violations” (Anker & Ahmed, 2019).

This study is designed to contribute to existing feminist scholarship and human rights discussions on women and mothers’ rights in transnational contexts. According to IFE (2008) human rights frameworks are discourses and as such “they are constantly being constructed, challenged and reconstructed” (Ife, 2008, p.151). In dialogue with asylum-seeking women, the PI hopes to contribute to the re-construction of these discourses in ways that they can fully protect the human rights of mothers and children, including the rights related to mothering in a globalized context (Cheng, 2007).

Conceptual model

Based on the literature reviewed and using the theoretical frameworks of feminist research and human rights as lenses, the following conceptual model was created to organize the findings and advance the subsequent discussion (see Figure 1). This conceptual model organizes the research questions as follows: (a) the context in which asylum-seeking women from Central America live and mother (left) which—according to the literature reviewed—is defined by mobility, violence, poverty and institutional neglect, conditions that manifest differently across transnational borders, (b) the classic maternal practices of preservation, nurturance and training as manifest in these contexts (c) and their maternal wellbeing in terms of their mental health as assessed by mental health scales, and their self-reported feelings (right).

Figure 1: Conceptual Model



The model includes human rights and feminist theories as overarching frameworks which guide the analysis of the three questions and advance the discussion of the findings (see boxes above and below). Indeed, the combination of concepts from human rights and feminist frameworks allow for a more nuanced discussion on issues such as:

- How do gender and racialized systems of oppression within and across borders affect the rights of mothers to live, to seek protection from violence, and to mother their children transnationally?
- How do governments of nation/racial states (Lentin, 2004) systematically fail as duty bearers in the protection of mothers from other nation/racialized states?

- What maternal practices do mothers develop when governments fail to protect the lives of women and their children?
- What are the implications of oppression, institutional neglect, and difficult maternal practices on mobile mothers' rights to mental health?

Chapter V: Methods

This study was designed to document the experiences of Salvadoran, Guatemalan, and Honduran mothers who have crossed the U.S.-Mexico border with their children between 2014 and 2018 and have resettled in the Boston area, while they await the resolution of their asylum claims. Through analyzing mothers' narratives about their experiences, this study aimed to learn about (a) mothers' experiences in contexts before, during, and after migration; (b) mothers' practices to survive and support their children under the difficult conditions imposed by these contexts; and, (c) the possible impacts of maternal experiences and practices on maternal mental health. This chapter explains how the study was designed to address these research questions.

Engagement with Community and Community Organizations

As described above in the introduction, before initiating this research project, the PI participated as a volunteer supporting community organizations and working with asylum-seeking mothers relocating to the Boston area. This volunteer work informed her sensitivity, her research questions and approach, and allowed her to establish relationships of sufficient trust with community organizations and volunteers to proceed with the study.

During the summer of 2016, she contributed to the design of a humanitarian initiative that started from the grassroots, and was then coordinated by community organizations to support these asylum-seeking mothers. This initiative was a response to a request from an organization working with asylum-seekers in Texas assisting mothers who planned to move to the greater Boston community. The organization in Texas knew about a number of mothers and children coming to Boston after passing the "credible fear interview" at the border, and wanted to make sure that there was a network to welcome them and support them with their needs. Based on this request, a grassroots initiative coordinated by the Needham Area Immigration Task Force started

raising money through crowd funding and a concert in order to hire a case manager to assist the migrant mothers. The Needham Area Immigration Task Force is a group of volunteers in Needham who welcome immigrants to their community, and advocate for immigrants' rights at the local, state, and national levels. At the same time funding was being secured, volunteers worked to establish a legal network that could provide mothers' access to lawyers who would initiate or take their appeals for asylum. Another group of volunteers coordinated a network to provide mothers with their basic needs, such as clothing and furniture.

The initiative became more formalized when the case manager was hired; the position was hosted by the Irish International Immigration Center (IIIC). The case manager received supervision and support from IIIC, an organization based in Boston with a mission of assisting immigrant families with legal, educational, and wellness services. The case manager contacted and assisted a number of these mothers and coordinated networks of volunteers. Throughout this time, the PI volunteered in fundraising initiatives and in assisting the case manager in the design of her work; she also collaborated in calling mothers to assess their needs, in order to inform the case manager. Once the initiative appeared to be settled, the PI requested and received formal approval from IIIC to pursue this research.

In 2017, the case manager suddenly resigned for personal reasons and the project migrated unexpectedly to De Novo, an organization with whom IIIC had been collaborating for the legal intakes of these mothers. De Novo, previously Community Legal Services and Counseling Center (CLSACC), is an organization based in Cambridge, MA, that provides legal and counseling services for low income people and has asylum attorneys among their staff. When the project migrated to De Novo, it focused more on providing legal services for asylum-seeking mothers. For all those involved in the previous initiative, legal services were considered

the most important and most urgent piece of the work. After the migration of the project was finally settled, the PI requested and received approval to continue her research in this new organizational context. While at De Novo, the interview process with mother participants started, and the PI stopped all volunteer work to minimize the risk of confusion and coercion (this is explained further).

De Novo supported this research in many ways. The Executive Director, Legal Service Director, and Counseling Director reviewed the informed consent documents, the proposed interview protocol, and the recruitment strategies and materials several times, providing invaluable insights and expertise. This organization has clinical experience working with clients who have endured trauma, some of whom are asylum-seekers and refugees. Their clinical staff provided feedback on ways to maximize protections to study participants who might have endured trauma, and they were also available for referrals after the interviews. Their legal staff contributed ideas on how to minimize coercion, especially acknowledging the dire need of legal services for these women. While supporting this research, De Novo was very conscientious about their responsibility to protect their clients and their organization and attentively reviewed all research processes. The following sections will provide more details on the collaboration, when appropriate. As stated before, despite receiving De Novo's support, the author is solely responsible for the research process, interpretations of findings, and conclusions.

Institutional Review Board Approval

After incorporating De Novo's feedback on the informed consents, recruitment strategy, and interview protocol, these documents were submitted to the Boston College Institutional Review Board (IRB) who revised the project to make sure it met ethical considerations for research with human subjects. All documents were created simultaneously in Spanish and

English for the revision and approval processes. However, only the Spanish versions were used in the study, as this is the language that mothers spoke. The Boston College IRB approved that the research study met ethical considerations on April 12th, 2018; and approved the two subsequent amendments presented by the PI on July 3rd and September 14th, 2018¹⁷. The amendments were done to allow for more flexibility in the recruitment process given the constraints to participation expressed by the first women contacted, for example, changes included the option of conducting interviews on the phone to those women who had limited mobility due to childcare responsibilities. The amendments also included a question on the possibility of contacting the interviewee again either for member check-in, follow up, or to check on their access to referrals after the interview. The English versions of the recruitment materials, the informed consent, and the interview protocol are included in the Appendixes (pp. 231 to 259).

Sampling

The study sought to interview adult women, who were at least eighteen years old, who had migrated from El Salvador, Guatemala or Honduras with one or more of their children, and who had arrived in the United States between 2014 and 2018. These were women that had been detained at the U.S.-Mexico border, who passed the credible fear interview, and were released to sponsors in the United States, while they filed for their asylum.

A sample of 17 women participated in in-depth interviews (the characteristics of this sample are explained in the following chapter). Initially, the PI set up to interview between 15 and 20 women, which is considered acceptable for an in-depth qualitative research that does not

¹⁷ IRB assigned the following protocol number for this study: 18.239.01 for the initial review, 18.239.01-01 for the first amendment, and 18.239.01-02 for the second one.

follow a positivistic approach (Boddy, 2016). It is common in qualitative research to not have a definite sample size a priori, and that the final sample size is determined based on the information collected during the interview process (Boddy, 2016). The PI had planned that the final sample was going to be determined by the principle of saturation (Mason, 2012; Boddy, 2016; Trotter II, 2012) or redundancy (Boddy, 2016), which is the point at which all research questions “have been thoroughly explored in detail, and no new themes emerge in subsequent interviews” (Trotter II, 2012, p.399). The final number was also going to be determined by context (Boddy, 2016); acknowledging the principal investigator’s likelihood and challenges of accessing more women to interview, within the timelines stipulated for this study, and considering that this is a hard to reach population due to the current anti-immigration climate and women’s jobs and childcare responsibilities. The PI and her dissertation committee considered a final sample of 17 interviews appropriate in terms of saturation of themes and acknowledging the context of the study.

This study focuses on women who are mothers, as it aims to document and elaborate on the special experiences of mothers and their maternal practices. Even though there are younger women who are mothers, only women who were at least 18 years old were recruited because of their expected developmental maturity to reflect on their stories. Not speaking Spanish was a criterion for exclusion, in case the PI couldn’t find an interpreter of Indigenous languages. However, all female participants spoke fluent Spanish. Central American asylum-seeking mothers who came from countries other than Guatemala, Honduras, and El Salvador were excluded, as this study focused on the recent migration trends of mothers and children triggered by historic and recent crises in these three countries.

Recruitment Strategy

Study participants were purposively selected (Creswell, 2009). The PI worked closely with the legal team at De Novo to coordinate referrals of possible study participants and to decide the best strategies to approach them. The legal team at De Novo provided the PI an original list of 20 names of women that the PI could call to invite to participate in the study. The legal team and the PI decided that only women who had seen a lawyer at least once for their initial asylum applications could participate in the interviews. This decision was made to minimize the risk of confusion and coercion, by the women believing that the interview for this study was a requirement to obtain an interview with a lawyer. In most cases, women were referred in person to the study by one of the lawyers at De Novo without the PI calling them first. Two women were referred to the study by volunteers working in other organizations. These two women had already seen other lawyers who had agreed to file their initial asylum applications.

During the phone calls to potential participants, the PI followed a script in which she explained the purpose of the research and the main principles of the informed consent. She made sure potential study participants understood that their participation would not mean that they would receive additional legal representation or advice, or any other social services from De Novo or any other organization. She emphasized that this research was independent of De Novo. If the mother already received services, the PI made sure she understood that if they refused to participate, this wouldn't affect the provision of these services. In the cases of personal referrals, the lawyers at De Novo used a script provided by the PI with the same principles explained (See Appendix 1, p. 231). When potential participants agreed to participate, a date and site for the interview was decided.

The scripts for referrals and invitations were prepared in Spanish for a 5th grade readability level. The PI created and delivered a poster to support the recruitment strategy, explaining the purpose of the research, the main principles on the informed consent, and the ways of contacting the PI. As stated above, all recruitment strategies, messages, and materials were revised and approved by De Novo's Executive Director, the Director of Legal Services, and the Director of Counseling Services. The PI maintained prolonged conversations with them to make decisions on how to minimize coercion and how to maximize protections for study participants who all assumed could be in situations of vulnerability. After incorporating De Novo's feedback, the recruitment strategy and materials were submitted and approved by the Boston College IRB for approval, as previously mentioned.

Data Collection

Data were collected through individual in-depth semi-structured interviews with 17 asylum-seeking mothers from El Salvador, Honduras and Guatemala. The PI, who is a native Latina Spanish speaker, conducted all of the interviews. The PI met with the mothers in a private office at De Novo, an office that was in the same building, but separate from the legal offices, to show that the study was not related to legal services. Public spaces were also offered as a possibility in the cases that women could not commute to De Novo's offices in Cambridge, MA. One interview was conducted at a public library in Malden, MA and another in a room provided by Clark University in Worcester, MA. De Novo requested that the PI not conduct interviews at participants' houses, due to safety concerns. All of the interviews were conducted between June and November 2018. A second interview was conducted with 4 of the study participants for member check-in, so the total number of interviews was 21. Member check-in will be discussed later.

Informed consent. Once at the site of the interview, the PI provided the participant an informed consent in Spanish and they read it aloud together, or the participant read it by herself and the PI checked for the understanding of each of the sections. As detailed above, the main principles of the informed consent were also explained during recruitment. The Spanish version of the informed consent had been written at a 5th grade level. This level was estimated using appropriate tools to assess comprehension of Spanish tests. The Flesch-Szigriszt index assessed the text as Quite easy (*Bastante fácil*) and suitable for a 5th grade level. The Fernandez-Huerta index considered it easy (*Fácil*) comprehensible for a 5th grade level. An English version of the informed consent was also created, as a reference for English speaking professors at BC, De Novo's staff, and BC IRB staff. This English version had a readability score of 6.4 according to <https://readable.io/>.

Throughout the administration of the informed consent, participants were encouraged to ask questions and at the end they decided whether they wanted to continue with the interview or to leave. The informed consent process took between 10 and 15 minutes. Most participants accepted to continue at this point, however, two participants decided to leave after the consent explanatory process, and agreeing to participate in the study and to come back for the rest of the interview on another day. In those cases, the informed consent was quickly read again before the actual interview.

After the informed consent was administered and signed, the conversations lasted an average of 53 minutes, with the shortest interview taking 35 minutes and the longest 100 minutes. Before starting data collection, the PI piloted the informed consent and the interview protocol with a Salvadoran migrant mother; the timing of the pilot was very similar to the average timing of the informed consents and interviews in the study (15 minutes for the informed

consent, 60 minutes for the interview).

Interview protocol. As described above, the interview protocols were designed and conducted in Spanish. All study participants spoke Spanish, so no interpreter of Indigenous languages was needed. The interview protocol (See Appendix 3, p.241) began by asking some demographic and family questions to help the PI understand contextual aspects of the participant's stories and to later describe the sample. After this initial section, similar to other studies with populations enduring difficult life events (Kellezi & Reicher, 2014; Paris, 2008; Esposito et al., 2019), the interview protocol followed a chronological order. The questionnaire explored first the pre-migration experiences (see sections II and III of the interview protocol on Appendix 3, p.241), then the experiences on the migratory journey (see Sections IV and V of the interview protocol on Appendix 3), and finally the experiences and well-being post-migration (see sections VI, VII, VIII and IX of the interview protocol on Appendix 3).

Most of the sections of the interview protocol were based on open-ended questions. These questions aimed to elicit personal stories or stories of other women with some relation to the participant. Through listening to participant's narratives, the PI hoped to learn about participants' experiences, meaning making, maternal practices, feelings, and sources of strengths. After these open-ended questions, the PI tried not to redirect the narrative until it reached what seemed to be its natural ending point (Cain, 1991; Riessman, 2008). Only when the participant seemed to have concluded her answer, did the PI ask sub-questions for more details or clarifications, if appropriate. Unlike the Harvard Trauma Questionnaire (Mollica et al., 2004), which directly asks about specific traumatic experiences, these open-ended questions were designed to give participants more control to decide what experiences to disclose, according to their level of comfort.

The second part of section III and all of section IV of the questionnaire, explored the experiences of crossing the physical country borders for mothers with children. Because the experiences on this journey tend to be very traumatic for migrants, to be extra careful, the questionnaire did not ask directly about personal stories on the journey. Instead, it included a photo elicitation activity with pictures from the media with other women migrating with their children. Section V also presented an activity in which women had to write letters giving advice to other hypothetical women on the pictures shown—who were on the journey already, or were about to leave their homes. These activities were designed to get some understanding of these women's experiences in the journey, without asking directly about their own personal ones. Writing a letter to others could also elicit feelings of solidarity in the participants, which could bring some positive emotions for them. This is a technique used by Oxfam International and UN Women with refugee women to document their experiences of crossing international borders (Oxfam International, Medium, 2016, September 15th).

Section VII on the questionnaire explored women's feelings and mental health post-migration. This section differed from the rest of the interview protocol, as it included mental health assessment instruments. Even though the section started with an open-ended question asking about how the participant was feeling, it also included three scales from the HTQ (Mollica, et.al, 2004) to assess anxiety, depression and PTSD. All participants were reminded of the voluntariness to complete these scales. All but one of them completed the scales. The missing case was because the participant had to leave the interview earlier due to childcare responsibilities and follow up was not possible.

The HTQ (Mollica, et al., 2004) was chosen because it is a widely used instrument to assess traumatic experiences and its impact on mental health for refugee populations across the

world. It has a validated Spanish version produced by Harvard, and the PI obtained Harvard's permission to use it in this study. The study used the Peruvian version because it was the only version for a Latin American country. The interview protocol did not include the section of the HTQ that asks directly about specific traumatic experiences. The experiences mentioned in the HTQ were observed and quantified while analyzing the narratives, as will be explained in the following section on data analysis. The interview protocol included the scale that measures anxiety and depression on the Harvard Program in Refugee Trauma's Versions of The Hopkins Symptom Checklist-25 (HSCL-25). The first 10 items on the HSCL-25 measure anxiety, and the last 15, measure depression. PTSD was measured using sixteen items, which were derived from the Diagnostic and Statistical Manual, Fourth Edition (DSM-IV) criteria for PTSD, included on the Harvard Program in Refugee Trauma's Versions of the HTQ (Mollica et al., 2004)¹⁸. The Harvard Program in Refugee Trauma uses these instruments to assess the mental health of refugees and trauma survivors. Standardized measures of mental health allowed this study to compare findings with current or future studies with refugee and asylum-seeking women, or other populations enduring trauma. Even though this is not a quantitative study, the limited evidence gathered can contribute to existing scholarship, policy and practice related to the mental health of asylum-seekers.

Section VIII on the interview protocol included open-ended questions on growth and meaning. This section aimed to facilitate a conversation on growth and resilience and to connect to more positive emotions by the end of the interview. The ending part of the questionnaire was designed to be easier to answer, as it included closed ended questions asking participants about

¹⁸ The HSCL-25 was originally created by Mollica, Wyshak, de Marneffe, Khuon, & Lavelle in 1987. The HTQ was originally created by Mollica, Caspi-Yavin, Bollini, Truong, Tor, & Lavelle in 1992.

their access or not to services and supports, and some final demographic questions to allow for a better description of the sample. These questions were placed at the end of the protocol anticipating that study participants who completed the whole protocol could be more tired at this point.

Women participants' narratives were pursued throughout the interview, and the generation of these narratives was the main priority, even if the narratives arose when the participants answered the demographic questions or completed the scales. The initial pilot interview, mentioned above, sought not only to assess the length of the interview, but also to evaluate the capacity of the protocol's questions to encourage or discourage women's narratives (Riessman, 2005). The pilot interview showed that the questionnaire had potential to elicit rich stories from study participants. While prioritizing women's narratives was the main objective, it was acknowledged that those narratives would be co-constructed in conversations with the principal investigator who had research questions to explore. This study is grounded in an understanding that all narratives are co-constructions between the narrator and the interviewer (Riessman, 2008). A conversational style was pursued; in order to maintain this style throughout the interviews, the PI memorized the questions so that she didn't have to look at the questionnaire, continuously affecting the flow of the interaction.

As mentioned above, the interview protocol followed a chronological order, however the PI remained open to the different communication styles of study participants. She expected that some participants would briefly and orderly answer the questions and would tell stories only if invited to do so (Chase, 2005). She also expected that other participants would try to break through the structure of the interview protocol and tell the stories that were meaningful to them and in a different order (Chase, 2005). The PI used the protocol with flexibility allowing

participants to tell their narratives first, and then going back to them to make sure the main research questions had been covered. The final interviews were the result of dialogic conversations in which some themes were initiated by the researcher, and that some others were presented by participants.

Confidentiality. Data were collected without identifiers for greater protections of participants. Female participant's names only appeared on the printed, signed copies of the informed consent, but these were kept separately from the interview data. The interviews were audio recorded with permission of participants; these audio files didn't have participants' names on them, but a numerical code. Audio files were transcribed and these transcripts remained de-identified as well. Digital files are on a Boston College secure server to which only the PI and one of her supervisors had access. All interview notes were scanned and stored on this server, and print copies were placed in a locked cabinet in a private location. Only the PI, and a member of her dissertation committee, had access to the complete data. A research assistant accessed some of the de-identified interview audiotapes to help with some of the transcriptions. Another research assistant accessed some of the de-identified interview transcripts to provide support in data analysis, and in the estimation of inter-rater reliability. All these processes were approved by Boston College IRB. The PI also accessed data for recruitment that belonged to De Novo and maintained correspondence with De Novo's staff. She signed confidentiality agreements with this agency and followed all of the agency's procedures.

Ethical Considerations for Working with Populations Exposed to Trauma

Based on previous research and personal interactions the PI had with mothers who have crossed the U.S.-Mexico border, she anticipated that some of the women who participated could have endured traumatic experiences. She anticipated as well that this study could remind those

women of these experiences and could cause them discomfort or “re-traumatization.” Indeed, some research suggests: “recounting stories of trauma in an insensitive setting can be re-traumatizing to the individual” (May & Quinteros, 2012, p. 98). The PI had been sensitive to this risk from the very beginning and designed the research with this consideration at the center.

According to May & Quinteros (2012) “to avoid traumatizing research participants, researchers should continue to educate themselves on this issue and seek out training on how to appropriately confront disclosure of traumatic experiences if they arise” (p. 98). The PI has a master’s in social work from Boston College and has learned about the impacts of trauma and on trauma informed care through attending Clinical Social Work courses at Boston College and several trauma courses offered online by The National Institute for the Clinical Application of Behavioral Medicine. She has also been reviewing the literature and consulting professionals who maintain clinical practices with clients who endured trauma, as well as receiving training in meditation and breathing practices to comfort participants.

The collaborative nature of this project allowed the PI to consult frequently and methodically with De Novo’s Directors and Clinical Counselors throughout the design and implementation of the research. Plans were especially designed for cases in which disclosure during the interviews generated some discomfort in study participants. The interviews were mostly conducted at De Novo’s offices, in part because there were clinicians available in cases the PI needed to provide an immediate referral. Clinicians at De Novo also instructed the PI on how to bear witness to the suffering of study participants, and in common practices of self-care in the field of social work. While maintaining the anonymity of the study participants, the PI and clinicians at De Novo worked collaboratively about deciding referrals in several cases.

Another recommendation to avoid or to minimize re-traumatization is not putting “undue stress on research participants” (May & Quinteros, 2012, p. 98). The PI made sure participants understood that it was voluntary to participate and to answer each of the questions. Participants were reminded of the principles of voluntariness during recruitment, during the administration of the informed consent, and at different parts of the interview process. At several points, the interview protocol offered women participants alternatives to tell their narratives, so that they could choose what they perceived to be more comfortable for them. These alternatives included: talking about the stories of other women instead of about themselves, skipping questions, or making a drawing instead of answering the mental health scales. It has been noted in the research that participants who endure traumatic experiences could feel more comfortable talking about others (Kellezi & Reicher, 2014); a photo elicitation and a letter activity were provided as spaces where women could talk about others, if they preferred.

More importantly, the PI remained sensitive to participants’ expressions, and listened “in an emotionally attentive and engaged way” (Riessman, 2005, p. 26). The PI made sure to treat participants with warmth and kindness, since the very beginning of the interactions, creating a climate where the interviewee could feel comfortable. The PI recommended taking breaks or stopping the interview if she saw the participants were not feeling well. In the cases when the participants did not feel well, it was planned that the PI would stay by her side until she felt better or would provide a referral to De Novo’s clinicians. Participants were informed during the informed consent that they would receive the full compensation and transportation costs, even if they left the study early, for any reason.

The informed consent highlighted women’s rights to retain information that was not comfortable for them to share in this interview. The questionnaire did not ask directly about

traumatic events, as other studies with asylum-seekers and refugees tend to do. In the present study, women were asked open-ended questions to elicit stories about their lives or the lives of other women; in this way, women had more control to choose the stories they felt more comfortable sharing. Based on previous research and in her personal experience working with Latin American women, the PI believed that most women would decide not to disclose the most traumatic experiences such as rape, abuse, assault or torture. This was in line with what others have noticed, "traumatic exposure is often not disclosed to a researcher, even in a study where this is the focus" (Kaltman et al., 2011). However, during the interview, many of the participants did mention traumatic events endured by themselves or their children.

Scholars acknowledge that despite the possibility that re-traumatization exists in these interviews, there is also a possibility of women participants experiencing positive feelings through retelling their stories to a compassionate listener. According to the Harvard Program for Refugee Trauma:

Concerns have been raised that explicit exploration of particular traumas, such as torture or sexual abuse, may "retraumatize" the patient meaning that the process of inquiry will itself provoke memories which will lead to symptomatic deterioration in the patient. Clinical impressions suggest, however, that trauma survivors appreciate the opportunity to relate their trauma stories and that in a safe and empathic environment most survivors welcome the opportunity to bear testimony to their own experiences and the suffering of their family and community. For many individuals, it is the first time they have been in a setting in which they feel secure enough to unburden themselves of their memories, a process that can overcome a sense of isolation and foster feelings of relief and comfort. (Mollica et al., 2004, p.5)

Some of the questions on the interview protocol were framed in a positive way and aimed to elicit positive emotions of strengths, growth and solidarity. It was expected that through sharing their stories and through answering these questions some participants might be able to explore their own resilience, connect to positive emotions and a sense of dignity. Questions designed to elicit stories around positive feelings related to growth, meaning and hope, were placed at the end of the questionnaire, so that study participants could leave the interview in a more positive tone.

Data analysis

Transcriptions and translation. Transcriptions were done verbatim. Interventions by the interviewer were also recorded as these are part of the “interactional context” (Chase, 2005, p. 650) in which the narratives were constructed. The transcripts also noted emotions and expressions such as sobbing, crying, lowering or raising the voice, pauses or interruptions. Data was transcribed and analyzed in its original language, which was Spanish. A research assistant helped in transcribing some of the interviews; the PI transcribed the rest and revised the transcriptions done by the research assistant. The interviews yielded a total of 1,004 minutes—about 17 hours—of audio, transcribed onto 500 double-spaced typed pages. The PI translated some of the narratives of study participants from Spanish to English to include in different reports of findings.

Analysis. This study primarily involved qualitative data; these included narratives derived from the open-ended questions and from the photo-elicitation and letter writing activities. Some narratives also emerged from factual and demographic questions that participants decided to answer at length (Riessman, 2008, p. 28). Some narratives emerged

during or after the women completed the mental health scales as some women explained the stories that gave rise to the feelings included on these scales.

Narrative thematic analysis was used as the principal method to interpret this qualitative data (Riessman, 2008). Narrative analysis has been used in other studies on mothering and migration (see, for example, Naidu, 2013) and women's experiences in immigration detention (Esposito et al., 2019). "Thematic analysis can be applied to stories that develop in interview conversations and group meetings and those found in written documents" (Riessman, 2008, p. 54). In narrative thematic analysis, "data are interpreted in light of thematic developed by the investigator (influenced by prior and emergent theory, the concrete purpose of an investigation, the data themselves, political commitments and other factors)" (Riessman, 2008, p.54).

The units for this thematic analysis were short stories, understood as brief and bounded narrative segments. The concept of "story" was defined as "a brief, grounded segment of interview text, rather than an extended biographical account"; although it is acknowledged that it could be difficult in cases to decide the end of each narrative (Riessman, 2008). The content of the narrative was the main focus for this present study.

The primary interest of thematic narrative analysis is generating categories across these different individual brief stories (Riessman, 2008, p. 62). Some of these categories were informed by the literature and the theories guiding this research. Some of these were already implicit in the interview questions or sub-questions, such as questions on experiences before, during and after migration and questions on maternal roles and identities. Some other themes emerged inductively while listening to women's voices and writing memos at the ends of the interviews, and by reading the complete transcripts multiple times. To detect emerging themes, a nominal level of analysis was conducted first highlighting words and phrases that captured the

researcher's attention (Riessman, 2008). These emerging themes were interrogated using the theories and literature originally used to inform this project; and with new theories and literature that were not initially considered. For example, the PI was moved by the difficult maternal practices these women shared with her, such as leaving children behind or sending children with others across borders. She also noticed that women became emotional when retelling these practices. With these emerging themes, she went back to the literature to consult theories on maternal practices in marginalized contexts. Indeed, the study started with a different conceptual model to the one presented in Chapter IV. The initial model was shifted to include new emerging themes and new theories that appeared more relevant to contextualize the data that was being collected. At the same time, some initial concepts contemplated before the data was collected were not considered as relevant in describing the stories arising from the interviews; thus, they were dropped. It is common in thematic narrative analysis that the pre-conceived themes in initial conceptual models be questioned and contrasted with the new emerging ones (Riessman, 2008). For example, the initial model crafted by the PI before conducting the study had a greater focus on maternal resiliency. However, after listening to women's stories the PI considered that all of them were resilient in one way or another: they were alive and had managed to keep their children relatively safe despite the difficulties they encountered. The themes related to maternal agency to sort all difficulties emerged more strongly and were more interesting. New theories within feminist research were considered to frame these findings on maternal agency in hostile environments.

As observed, the analysis was both deductive and inductive. An initial conceptual model based on literature and theories was re-worked to include emerging themes and also new theories framing these new themes. The theoretical model presented in Chapter IV is the result of these

dialectics. In this type of analytic approach, prior theory guides the inquiry, but at the same time researchers search for new theoretical insights emerging from the data (Riessman, 2008, p.74).

Emerging themes are at the same time, contrasted with existing literature and other materials:

Classifying interview data into thematic categories constructed a priori is theory-saturated from the very beginning, differentiating this study from grounded theory approaches [...]

The investigator will go backwards and forward between primary data and the scholarship of others, checking what she is seeing in the self-writings against what others have elaborated. A theme might emerge from reading a primary source, but it needs to be supported by other historical materials. (Riessman, 2008, p. 66)

This analysis was facilitated by NVivo software for qualitative research. Transcripts and memos were uploaded into Nvivo. This software allowed the PI to create nodes with the thematic categories and to update the list of nodes with new emerging ones. The PI analyzed the transcripts using NVivo and organized the short stories under the corresponding nodes. In some cases, the same segment was classified under different nodes. NVivo also facilitated the memo creation process, allowing the PI to guide the analysis by linking memos to interviews and thematic categories. Having the narratives on each of these thematic categories facilitated the analysis and reporting of the findings.

Although this is mainly a qualitative study, some quantitative data was also collected. The mental health scales provided a quantitative measure of the psychological wellbeing of participants. Narratives of traumatic experiences were content coded, classifying them and quantifying them using the list of traumatic events provided by the HTQ. Some difficult events emerging from the interviews that were not included on the HTQ were also added and quantified. Data from the answers to the “closed-ended” or “short-answer” questions (Chase, 2005) on

women's access to critical resources and services post-migration was also coded quantitatively. Demographic data was also content coded to describe the sample. All these quantitative data were uploaded to NVivo and Excel transforming it into categorical or binomial variables. The limited sample size did not allow for a statistical analysis; however, this basic quantitative analysis showed some trends that could inform future studies. NVivo and Excel were used to perform and visualize the findings of these quantitative analyses.

Procedures to Address Trustworthiness and Credibility of the Research

The study includes standards and procedures, that strengthen the trustworthiness and credibility of qualitative research (Marshall & Rossman, 2011).

Prolonged engagement in the field. Qualitative researchers are encouraged to be in the field for a long period of time. "In this way, the researcher develops an in-depth understanding of the phenomenon under study [...] the more experience that a researcher has with participants in their actual setting, the more accurate or valid will be the findings" (Creswell, 2009, p.192). As described before, since August 2016 the PI has been part of a grassroots humanitarian initiative to support asylum-seeking mothers from Central America. Through performing different roles within this initiative, the PI was able to practice "participant observation" (Denzin, 1970) learning about the experiences and situations of these mothers before starting the research. Not only was she able to observe the reality of these mothers, but also to "walk in their company" or "accompany" them in their struggles post-migration (Fanon, 2004; Watkins, 2015; Lusk & Chaparro, 2018). By working with and "accompanying" humanitarian workers, the PI also learned about the challenges and failures in the asylum systems and the complexities of designing humanitarian interventions to assist this population. The insights gathered throughout this work informed the research questions and the research design. This prolonged engagement

also allowed the PI to establish connections with experts working in the field, who provided feedback throughout the research design and implementation phases, and answered several of the PI's questions related to legal and other social issues around asylum.

Multiple observers. Having multiple observers look at the same piece of data “insures a greater reliability of the observations” (Denzin, 1970, p.303). The PI made sure to have multiple observers of the data in different ways. For the qualitative piece of the data, the PI discussed her interpretations of the findings with all three members of her dissertation committee. One of the members of her dissertation committee, Dr. M. Brinton Lykes, is fluent in Spanish and was able to access the data. Dr. Lykes initially read three of the interviews separately and she and the PI discussed their interpretations. Dr. Lykes provided feedback on theories to contextualize emerging themes.

The PI pursued member check-in, which meant bringing back the analysis and interpretation of the findings to study participants (Riessman, 2008; Marshall & Rossman, 2011). Showing the work and bringing the results back to study participants could be considered a way of “being accountable to the powerless” (Richie, 2000; Smith, 2004). During the first interview, some participants agreed to be contacted again or expressed interest in knowing the findings of the study; among those participants five were contacted again for member check-in. Two of these participants were selected because the PI had established other communications after the first interview and the PI thought they might agree to participate; the other three were selected randomly. The five research participants contacted agreed to meet again with the PI, however, one of them— a woman from Guatemala—canceled the meeting. Finally, four member-check-in interviews were conducted. One of the interviews was scheduled in January (because this woman was moving out of state), and three in June of 2019. Two of the participants were Salvadoran,

and two were Honduran. The interviews lasted 30 to 60 minutes and were conducted in public spaces convenient to study participants. The PI read an informed consent before starting and participants agreed to be recorded. The interviews were mostly conversational, focusing on how the participants had been doing since the first interview. The PI also brought a poster with a summary of the main findings organized under the three research questions; she described the findings and asked participants what they thought about them and if they would like to add something else orally or through writing on the poster, noting that she was also interested in any disagreements with the presentation that they might have. She also used time to ask for clarifications from the previous interview that she needed.

The PI also engaged in “peer debriefing”, which is considered a process to enhance the accuracy of the qualitative analysis (Creswell, 2009). This process involved discussing findings and requesting feedback from others who know about the topic (Marshall & Rossman, 2011). The PI discussed preliminary findings with different staff members at De Novo throughout the data collection process. She had frequent formal and informal meetings with social workers and lawyers where she shared anonymous findings, and consulted other people’s perspectives. After consolidating all the findings, she also met individually with De Novo’s director, Mojdeh Rohani, to debrief the main findings and to seek her interpretations as an expert in the field of refugee trauma. Her observations are cited in the findings and discussion sections.

For the quantitative analysis, inter-rater reliability was pursued having two observers code a piece of the same data and estimate their level of agreement. “Inter-rater reliability can be defined as the level of agreement between raters. If everyone agrees, IRR is 1 (or 100%) and if everyone disagrees, IRR is 0 (0%)” (Statistics How To, n.d.). There are many methods to calculate this; this study used percentage of agreement. A Latina migrant student in sociology

was hired as a research assistant to support this process after receiving NIH training on research with human subjects. The PI and the research assistant analyzed two randomly selected interviews independently. Both researchers read the transcripts and looked for the presence of traumatic events detailed on the HTQ and other difficult events previously detected by the PI. Both researchers read the same transcripts, but separately, recording annotations on an Excel list—each of them having a copy of the same Excel sheet—. The Excel sheet had a column detailing all the events on the HTQ plus the other difficult events added by the PI based on emerging themes. When the co-researchers found the traumatic events mentioned in participants' narratives, they placed a number 1 on the appropriate cell corresponding to each event. The researchers also looked at participant's narratives for information on accessing social support, legal services, and health and mental health services for the mother and her children. When the participant responded accessing these types of support, the researchers wrote a 1 in the appropriate cell. At the end of these processes, both researchers sat together to quantify the number of times they agreed on each of the items observed. The total number of ratings in agreement was added and then divided by the total number of items observed (which were 77) (Statistics How To, n.d.). For one interview, the percentage of agreement was 82% and for the second one it was 86%, average 84%. Percentages above 75% are typically considered acceptable (Statistics How To, n.d.). After estimating these percentages, discrepancies were discussed and new categories were created. The co-researcher continued content coding two more interviews, and the PI revised these interviews and coded the rest.

Discrepant information. The analysis searched for negative or discrepant information, “discussing contrary information adds to the credibility of an account” (Creswell, 2009, p.192). Similarities and differences between participant's accounts were sought, as well as contradictory

evidence (Creswell, 2009; Marshall & Rossman, 2011). While this study observed experiences of violence, precariousness and neglect of certain women of color as a group, it remained attentive to intragroup differences and made efforts to avoid homogenizing their voices (Crenshaw, 1991; Grewal & Kaplan, 2006).

Reflexivity. Finally, engaging in the practice of reflexivity is considered to strengthen the credibility and quality of the research (Creswell, 2009; Marshall & Rossman, 2011). “Good qualitative research contains comments by the researcher about how their interpretation of the findings is shaped by their background, such as their gender, culture, history and socioeconomic origin” (Creswell, 2009, p.192). It is integral to feminist research and to narrative types of inquiries to reflect on how the researchers’ interests and social location play a role in the research relationships and in the content and ways the stories are elicited (Chase, 2005). This is because research is “inseparable from the particular investigator, her observations, her engagement with the data, and the interpretation of them” (Riesman 2015, p.225). In this section, I, the researcher, “appear” in the manuscript by using the first person to reflect on how my identities influenced the construction of the knowledge presented. By doing so, I depart from social work scholarship writing that privileges narratives in the third person. I cite myself as I cited other research participant’s words.

This particular research project is indeed inseparable from who I am, from my family history and from my experiences in the world. My personal identities as a Latina, a mother, and an immigrant in the United States certainly made me sensitive to the difficult experiences endured by these group of asylum-seeking mothers. My family history of grandparents who were immigrants fleeing violence and poverty in Italy and seeking refuge in Argentina also makes me sensitive to participants’ life stories, dreams and

struggles to raise up families in foreign lands. These shared identities not only influenced my sensitivity, but also the profound ways in which these mothers and I connected during the interview process. They created proximity among us, and a sense of “common humanity” (Riesman, 2015) based mostly on the common experience of mothering, and on the particular experience of doing it while in exile. These shared identities—and the Spanish language—helped create an interactional context of intimacy that in most cases facilitated the emergence of rich and emotional stories, like those arising in conversations between sisters or friends. Mothers said phrases to me such as: “You, as a mother, understand what I say”, many reached out to me later for advice with issues that arouse with them and their children, and many also wanted to know about my own story. The identities we shared were crucial tools in this research; they helped in establishing trust, empathy and connection; all essential for the interview process especially working with populations who endured trauma and experience the fear of being deported.

While the process of data collection was built on these proximities, it was the distances given by the different social locations between me and these “other” mothers that influenced my ways of analyzing and interpreting their stories. Indeed, this dialectic between proximity and distance created much of the knowledge presented in this manuscript. My position as a middle class, cisgender woman, who accessed a masters level education in my country of origin, whose skin color and her family’s are lighter, who entered the United States in the so-called “legal way” as a doctoral student, certainly made my experiences across borders different, and privileged. While I went through many difficulties in life, I—or my children—haven’t been subjected before, during and

after my immigration to the kind of hardships and human rights abuses these women endured.

I state that in this research, knowledge was created at the margins in which similarities met the distances because at those borders, contrast and injustice revealed more clearly and cruelly. These were represented by intense moments during the interviews, in which interviewees talked about performing normal mothering practices—such as the ones I perform with my own children—in situations that were abnormally difficult (See the concept “the normal abnormality”, Ignacio Martín-Baró, 1994).

The next chapter describes the experience of Alba and her two-year old boy at the moment of being detained at the U.S. border in which immigration officers stripped away the green hat and the milk bottle the child carried close to him throughout the journey. This story affected me especially because I also traveled to the United States alone with my two-year old daughter. I also brought two comfort objects, her beloved bottle with drawing of hippos and a little Muppet backpack, because I knew how important these are for toddlers going through a transition. However, at the point of entry, nobody confiscated her little possessions and no adult made her—or me—cry with their immigration control practices. Why did we receive such different treatments? Why did Alba and her son, who had stories of previous traumas, receive such traumatic treatment? How can asylum systems be fairer and more humane to those who are in most need? I was also moved by the story of Isabel running away from violence in El Salvador with her children. She described how they arrived from school, unpacked the school supplies from their backpacks, and quickly packed them up again with clothes to immediately run away from the country. Here in the United States when my children arrive from school,

they unpack their backpacks, we talk about the day and they go to play. I constantly think of how different our children are growing up, and I wonder how would these different experiences affect their lives in the future. The juxtapositions of similarity and difference are moving to me emotionally and intellectually as they clearly uncover the injustices of mothering from different social locations, and drive my thinking of ways of redressing it.

The following chapter presents the main findings from the interviews on (1) the difficult contexts in which participants live and mother, (2) their several maternal practices to protect, nurture and train their children in such contexts and (3) on the impacts these hard contexts and practices have on their mental health.

Chapter VI: Findings

This chapter includes a description of the sample, and the findings related to each of the three research questions, following the conceptual model presented on Chapter V (See Figure 1, p. 74). Pseudonyms are used for study participants, to protect their identity.

Sample Description

The final sample consisted of 17 women including 8 from El Salvador (47%), 5 from Honduras (29%) and 4 (24%) from Guatemala. Table 2 below provides a description of the sample's demographics. Ages ranged from 21 to 40 years old, with the median between 25 and 29 years old. All participants crossed the border between 2014 and 2018, one participant crossed in 2014, one in 2015, four in 2016, nine in 2017 and two in 2018. One crossed the border twice during the same year; she was deported the first time and tried again immediately thereafter. Seventy percent of the study participants were single mothers with children—including one widow—at the time of crossing the border. Each crossed with one or more of their children.

Table 2 Sample Demographics

	Total	Percentage ^a
Country of Origin		
El Salvador	8	47%
Honduras	5	29%
Guatemala	4	24%
Ages (range) ^b		
20-24	4	24%
25-29	5	29%
30-34	3	18%
35-39	3	18%
40-44	1	6%
Year of Arrival to the United States		
2014	1	6%
2015	1	6%
2016	4	24%
2017	9	52%
2018	2	12%
Location in Country of Origin		
Rural	9	53%
Small village	6	35%
Urban	2	12%
Overall number of Children ^d		
1	7	41%
2	5	29%
3	4	24%
4	1	6%
Highest Level of Education Achieved		
Some years of elementary school	2	56% had at least 8 years of education
Elementary finished	1	
Some years of Middle school	2	
Middle school finished	3	
Some years of High school	-	50% have completed High school
High school finished	4	
Some years of University/Tertiary	2	
University/Tertiary finished	2	
Unknown	1	

Note.

^a The highest percentage is displayed in bold.

^b One of the participants did not report her age.

^c In the case of highest education achieved, percentages are based out of a total of 16 women that answered that question. There was one missing case.

^d This is the overall number of children women had, not the number of children with whom they migrated. Fourteen women (82%) of the sample, crossed with only one child.

All participants had been held at detention facilities at the U.S.-Mexico border, however their time in detention varied between one and 30 days¹⁹. Most mothers talked about being held at *hieleras*—ice cubes—, then at *perreras* —dog kennels— generally for one to four days, and then moved to longer-term centers like Karnes or other shelters, which they called “*asilos*”, “*albergues*”, “*casa hogar*” or detention centers. Many said they received better treatment at these longer-term facilities, however, some explained that they still didn’t have freedom there. It was common that participants didn’t remember the name and location of these facilities, so this study is limited in its capacity to describe the nature of those centers. A woman said the name of the “albergue” was Karnes, two other women talked about an “albergue” in San Antonio, Texas.

All the women had passed the “credible fear” interview at the border and were then released to their sponsors. All but one of the participants—Alba—had had a first formal meeting with a lawyer after being released from detention but before participating in this study. This exception was due to the lawyer cancelling and rescheduling her appointments at the last minute, that is, after she was already at De Novo’s office. However, the lawyer talked to her before referring her to this study and scheduled the legal appointment for the following week. At the time of this study, despite all participants having seen a lawyer at least once formally or informally, only four had full legal representation from De Novo’s attorneys. Two were represented by other attorneys. The rest, 11 women, representing 65% of the sample, faced uncertainty. Uncertainty meant that even though their initial asylum application forms had been presented to the immigration courts, they did not have a lawyer to continue to support their

¹⁹ There is one exception. One of the study participants, Luz, crossed the US-Mexico border twice in the same year. The first time, she left her daughter in Honduras with her mother. She was detained for 4 months in adult detention centers and then deported. She crossed again with her daughter, and was detained for one month.

asylum claims. One of the participants, Andrea, who arrived in 2018 had not yet presented her initial asylum application; however, the lawyers at De Novo were in the process of submitting it at the time of her participation in this study.

All but three women (82% of the sample) defined themselves as Mestizas, Hispanic or Ladinás. Two women from Honduras said they descended from the Lencas, whereas another woman from Honduras described herself as Garífuna. None of the women reported speaking a language other than Spanish. None of the participants reported being fluent in English; all of them reported either not speaking English or speaking very little. Nine participants (53%) reported living in rural areas in their countries of origin, two in urban areas (12%), and six in small towns or villages ("*pueblo*" or "*caserío*") (35%). The question about their location of origin was difficult to answer, because some of the women had relocated within their countries before migrating to the United States.

Eleven study participants (56% out of the 16 that answered the question on education) had at least 8 years of education, having at least completed middle school. Four of these women had reached university or tertiary education; with two of them accomplishing their tertiary or university degrees. One became a nurse and the other a Spanish teacher. Only two of the participants responding to the question on education reported that they had not completed elementary school, having only had three years of formal education.

Four participants (24%) mentioned running their own small businesses in their countries of origin. These businesses were related to selling food or clothes, or to cleaning services. These four women were single mothers providing for their children at that time. Two other women were the wives of men who had a business but these men had to leave the country due to extortions. All participants mentioned working in their countries of origin before coming to the

United States, with the exception of one who was studying and one who stayed home with her children. Four were domestic workers, four prepared and sold food, two worked as waitresses or selling food at restaurants that did not belong to them, one sold clothes at a store, one was an employee of a bank doing customer services, one was a nurse working at a public hospital, one was an elementary rural school teacher and one was a rural worker. As observed, there was variety in the levels of education and in the occupation of these mothers before migrating.

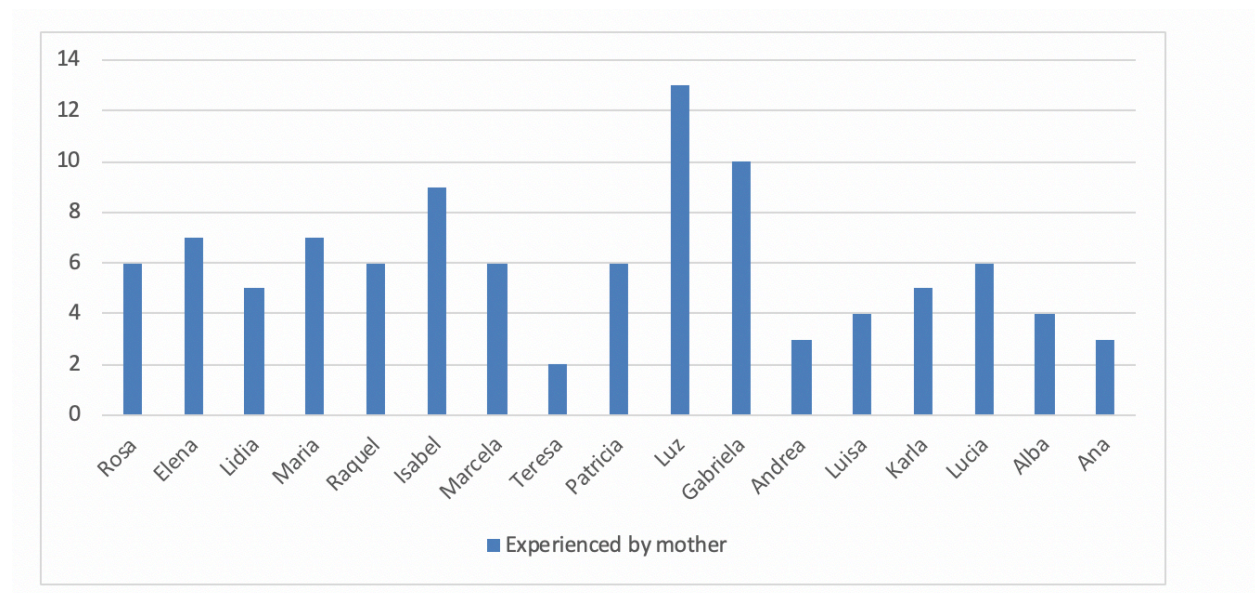
Research Question One: Maternal Experiences Across Borders

This section presents findings related to the first research question, including observations about the contextual conditions of violence, poverty and institutional neglect presented in the theoretical model. It analyzes how these conditions manifested before, during and after migration particularly affecting the lives of women who are mothers.

The study uses the Harvard Trauma Questionnaire (HTQ) as a reference to report traumatic events and difficult experiences produced by these contextual conditions. Figures are used to illustrate the prevalence of these traumatic experiences. Figures 2 and 3 summarize participants' mentions of having endured traumatic events listed on the HTQ. Figures 4 to 6 also include other difficult events are not listed on the HTQ, but that mothers reported as traumatic or suffering inducing.

Figure 2 below displays the total number of traumatic events—as detailed on the HTQ—mothers disclosed during their first interviews (follow up and member check-in interviews were excluded as these second interviews were conducted with only 4 of the mothers). As observed, all mothers reported enduring events considered traumatic by the HTQ. While there is variability in the number of events reported, 53% reported enduring at least six traumatic events on the HTQ before, during or after migration.

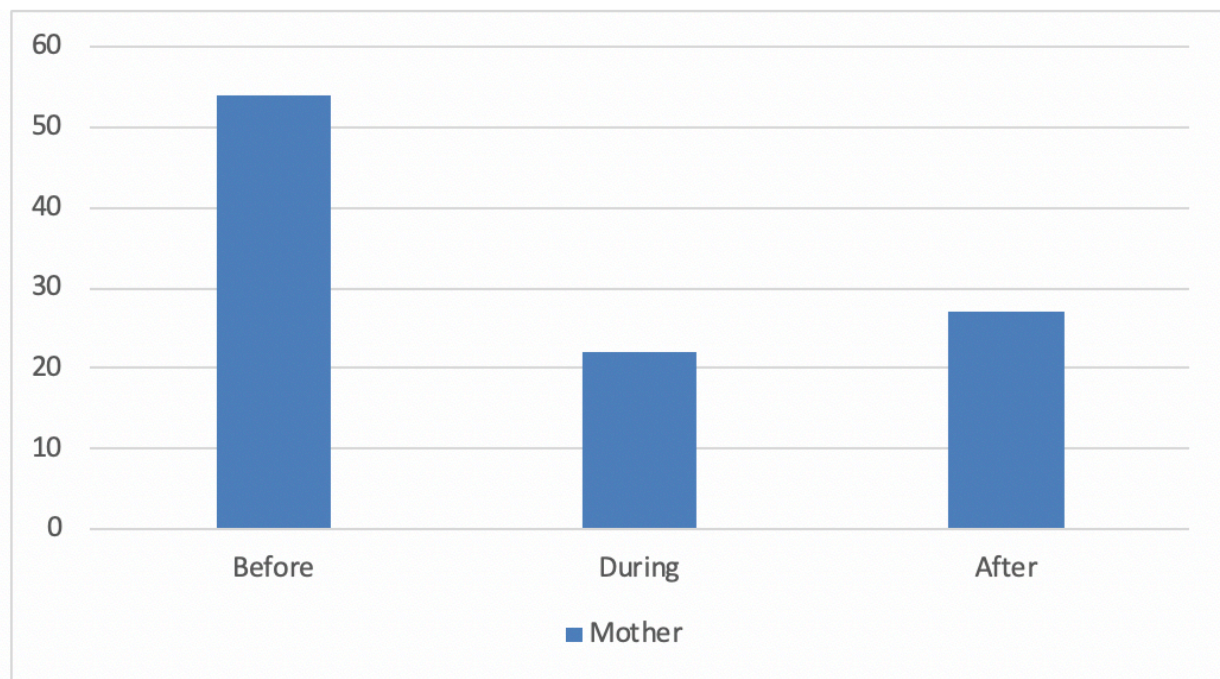
Figure 2 Number of traumatic events on HTQ endured by mother participant



Note: The table displays absolute numbers, not percentages. Ana and Luz reported other traumatic events (rape by father and extortion) in a second interview; these were not included on the figure.

Figure 3 below shows that the majority of these traumatic events were experienced in women's countries of origin— before migration—. Indeed, many of these events were the ones triggering mother's decisions to leave their countries. Fewer traumatic events occurred during the migratory journey, contrary to what the PI expected based on the literature on the prevalence of gender-based violence on the road (UNHCR, 2015; Lusk & Galindo, 2017). Exposure to trauma did not end for these participants after crossing the U.S. border, as 27 traumatic events reported occurred in the U.S. territory.

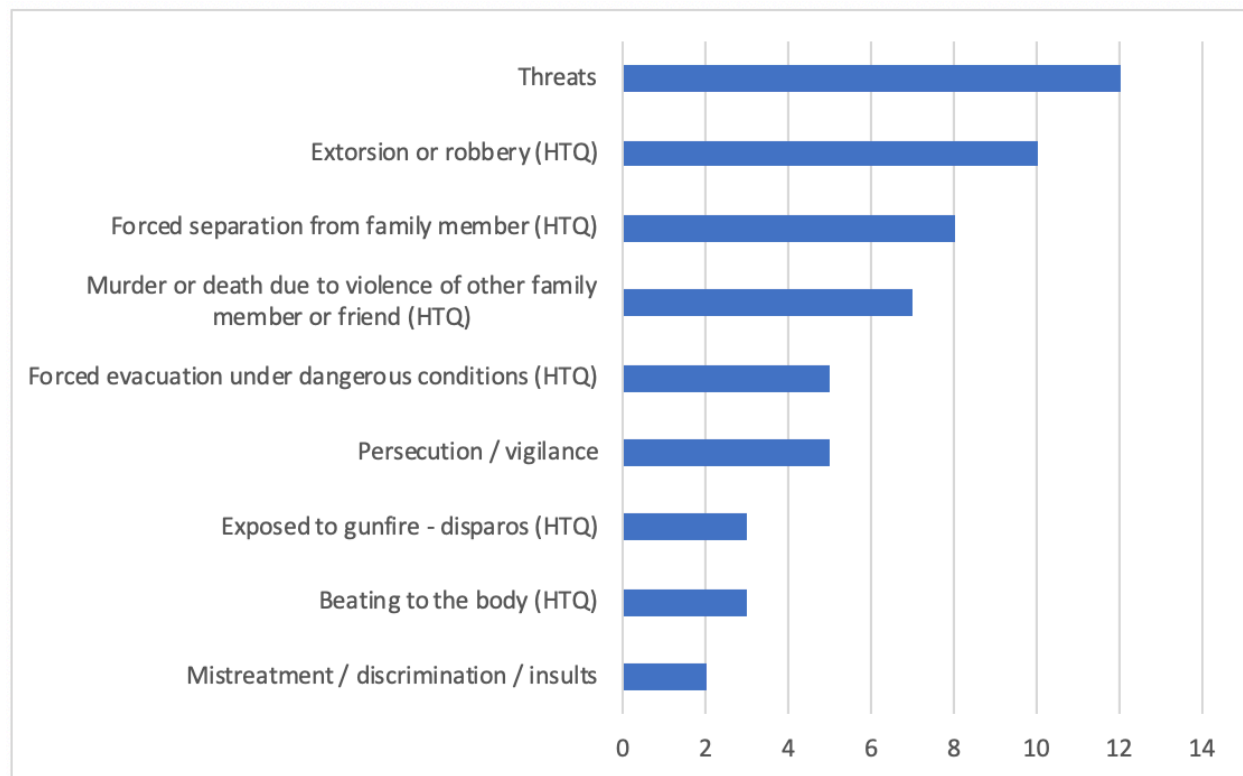
Figure 3: Number of traumatic events on HTQ endured before, during and after migration.



Note: The figure shows total absolute numbers, not percentages. Only events reported in the first interview were included.

Figure 4 below shows the most prevalent traumatic events that participants reported enduring before migration. As observed, the most prevalent events were threats (experienced by 70% of the sample), extortion or robbery (experienced by 59% of the sample) and forced separation from family members (experienced by 48%). Threats; persecution and vigilance from criminal groups; mistreatment, discrimination and insults are not included on the HTQ but were events that produced suffering to many study participants. All other events on the figure—including forced separation of family members—are part of the HTQ.

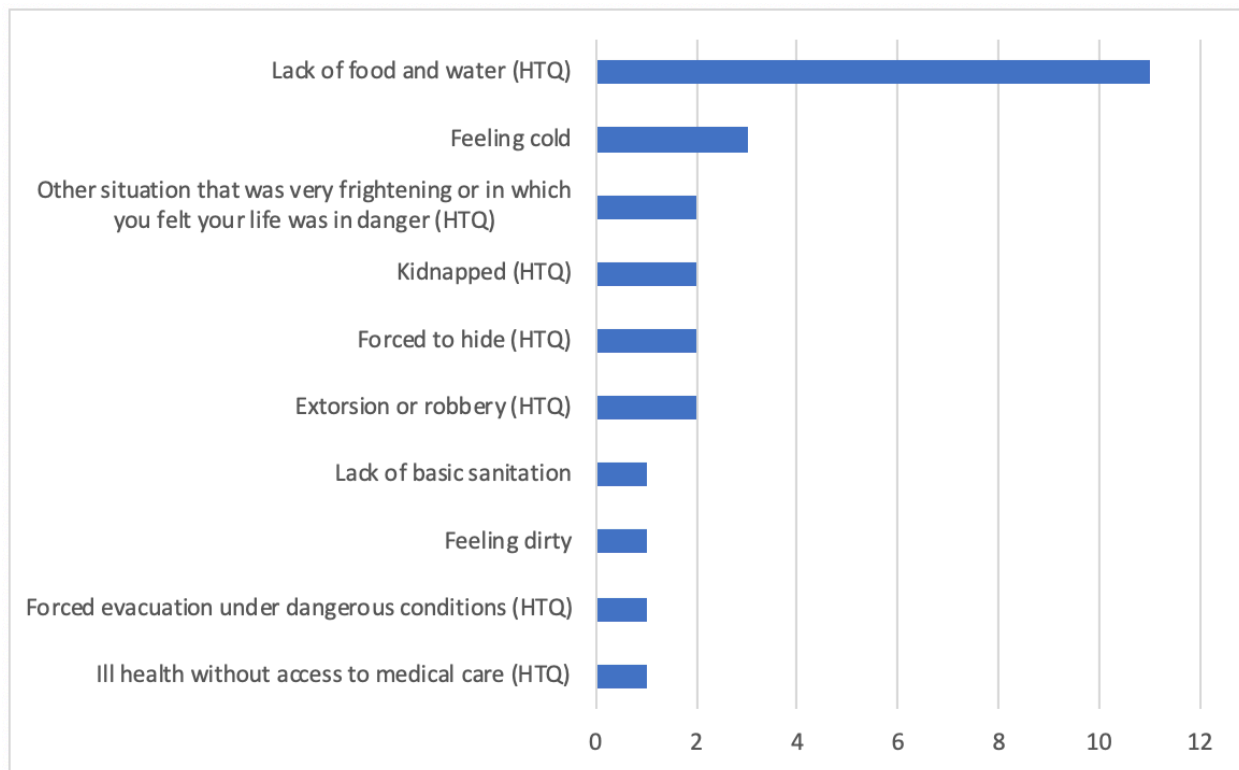
Figure 4 Most prevalent traumatic events (HTQ + others) endured by mothers before migration



Note: The figure displays absolute numbers, not percentages. Only events reported in the first interview were included. Events included on the Harvard Trauma Questionnaire state “(HTQ)” at the end of the phrase.

Figure 5 below shows that the most reported traumatic event during the journey was the lack of food and water (endured by 64% of the sample), this is an event listed as traumatic on the HTQ. The category “Other frightening situations in which you felt your life was in danger captured a variety of experiences such as the case in which a participant, Luz, encountered on the migratory journey the person who killed her uncle and threatened to kill her, or the case of Raquel who was detained by the criminal group Zetas in Mexico. Feeling cold, feeling dirty and lack of sanitation were not events included on the HTQ but were events that participants defined as very difficult. All other events are listed on the HTQ.

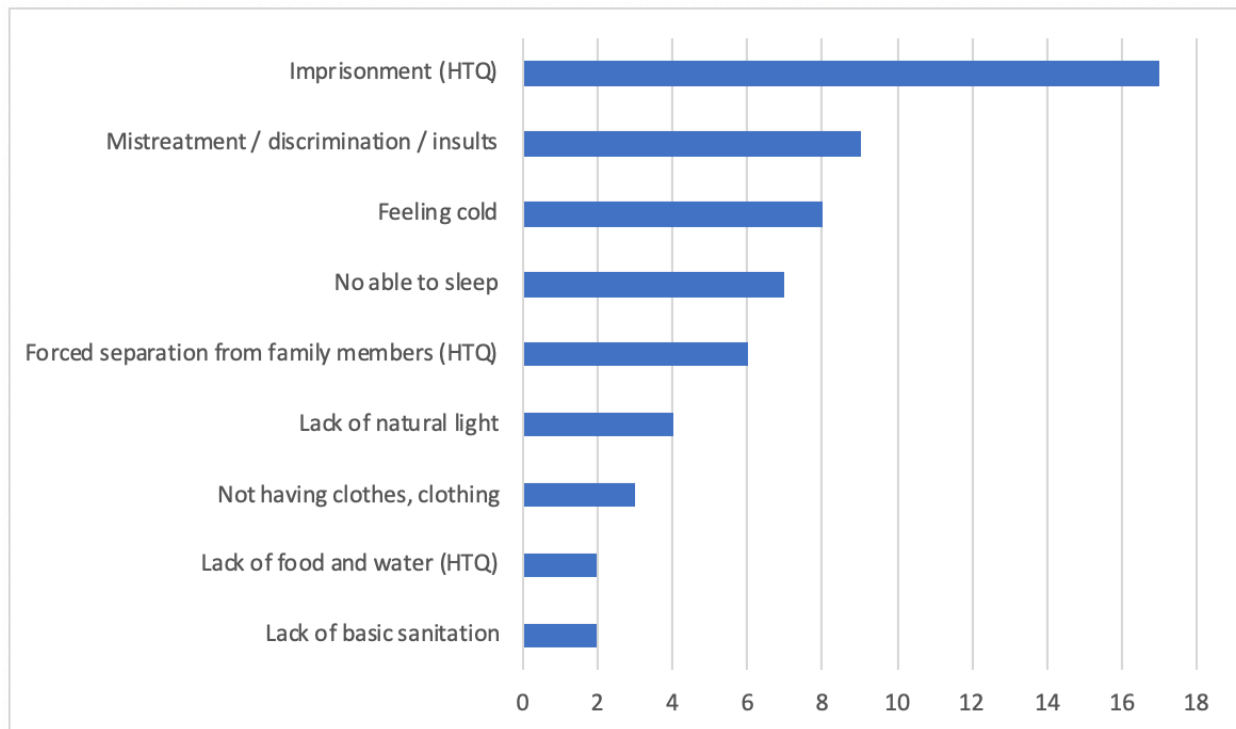
Figure 5: Most prevalent traumatic events (HTQ + others) endured during the journey



Note: The figure displays absolute numbers, not percentages. Only events reported in the first interview were included.

Figure 6 below shows that the most traumatic event reported after migration was imprisonment, which is included on the HTQ. All participants were held in detention centers. Thirty five percent of the sample endured family separation in detention; family separation is listed on the HTQ. Fifty three percent of the sample reported enduring mistreatment, discrimination and insults many of which occurred in detention. Mistreatment/ discrimination/insults, not being able to sleep, not accessing natural light, not having clothes and feeling dirty, were not events on the HTQ but events that produced suffering to participants.

Figure 6: Most prevalent traumatic events endured by mothers in the United States (HTQ + others)



The following sections explore more details on the experience of mothering in contexts of violence, precariousness and institutional neglect across borders, based on female participant's narratives.

Mothering in conditions of violence. The study found that female participants have lived and mothered in contexts with high levels of violence. While other feminist studies have focused on contexts of poverty and institutional neglect (Scheper-Hughes, 1989; Hill Collins, 1994), this study reports mothering in conditions of extreme violence, including both generalized and gender-based violence.

Violence before migration. Violence appeared to be more pronounced in women's countries of origin. Participants described living in a context of generalized violence in their countries of origin:

There is a lot of evil there. A lot of death, a lot of robberies, gangs...we cannot get out of our houses much because it is dangerous. (Rosa, Honduras)

It is too dangerous. I was not feeling safe because children went to school, we got out to school and we didn't know if we were going to be back home, or if somebody would hurt the children. (Patricia, El Salvador)

All 17 women in the study reported experiencing direct violence against themselves, their children and other family members, as the main reason for fleeing their countries. They adduced different forms of violence triggering this decision: 12 women (70%) mentioned gang violence; 3 (18%) intimate partner violence; 1 (5%) political violence; and 1 (5%), sexual violence against her daughter. The daughters of at least four mothers (24% of the mothers) have endured some form of abuse—sexual, psychological or intent of sexual abuse—by family members, neighbors, or gang members; these mothers weighed the protection of their daughters in their decisions to migrate.

During the interviews, women participants reported enduring different types of violent events; events that are listed on the HTQ because they are considered to potentially produce trauma in refugee populations. As shown previously in Figure 2, all participants reported enduring events that are considered traumatic, with variability in the number of events endured. Mothers endured between 2 and 15 HTQ listed traumatic events, with an average of 6 traumatic events each. Figure 3 illustrated that the majority of those events occurred in the countries of origin. As noted before on Figure 4, the most prevalent traumatic events endured before migration for these mothers were forced separation from family members—typically children or parents—and extortion—generally from gangs—, followed by murder or death of family members or friends.

Women participants also reported enduring other violent events in their countries that were not listed on the HTQ, but that contribute to their suffering. These included death threats to self and children, being subject to the surveillance of criminal or political groups, assaults with intent of sexual abuse and murder; intimate or ex-partner violence; and abuse of daughters. Figure 4 shows how prevalent threats and vigilance were in the sample, with 70% of women receiving death threats and 29% of them experiencing vigilance. Five mothers in the study reported that violent groups used cellphones to take pictures of them and/or their children and to send them as text messages to show that they were constantly watching them. Phone calls and text messages were used to send death threats, instill fear and facilitate extortions. These findings suggest that in these particular violent contexts, women tend to mother children under the vigilance and control of criminal groups or individuals.

Mothers' love and desire to protect their children makes them an easy target for criminal groups, who often know how mothers typically care for children and use this to extort them. Women's narratives showed how violent groups and individuals purposely target women who are mothers by hurting or threatening to hurt their children. Women reported that gang members extorted them into giving money or contributing with their criminal activities by threatening to kill their children, to recruit their sons into the gangs, and/or to abuse their daughters. Lucía explained:

So, then they told me that if I didn't give them more money, they would hit me where it would most hurt me: my son, the one that I carry with me here. (Lucía, El Salvador)

Interestingly, some of the narratives show that current intimate partners or ex-partners also use similar techniques. Indeed, three mothers talked about their violent ex-partners hurting them by taking or threatening to take their children away from them. The narratives of these

women suggest that mothering in these contexts permeated by *machismo* and violence involves facing the constant risk of being forcefully separated from their children by violent groups or violent individuals.

The findings also suggest that women who are the sole providers of their children—including single mothers, widows, and separated women—seemed to be particularly visible and vulnerable to gang violence. Women who run small businesses to sustain their children on their own, or those women who receive remittances from relatives in the United States to support children in their countries, were also at risk of extortions and assaults.

What led me to the decision to come was related to my business. I created a business and they started to extort me, the extortions became bigger and bigger, the threats that they made me. They left me a phone and called me. I didn't answer. [...] Then they took the phone and took the phone of one of my girls. They said they knew where my girls were, where they studied. They took pictures of my girls and sent them to me. They told me how they were going to kill each of my girls. Then they started coming not only to my business but to my house, and I said, how can an extortion be that big, right? Then they told me that if I didn't do what they told me they were going to kill me as they killed my husband. (Elena, Guatemala)

Women's narratives also suggested that in these contexts, violence overwhelms and disrupts the otherwise normal maternal experiences, including, for example, receiving children returning from school and unpacking school backpacks. Isabel, a separated mother who used to run her own business in El Salvador, was being confined in her house by gang members. What most troubled her was that this episode occurred at the time her children were coming from school. She recalled:

They were watching everything. They asked me at 1 pm that if I had thought about collaborating with them or not [contributing to gang's criminal activities] So, I said no, I couldn't do that because I had children. 'So then, get out of your house'. They asked me to go out on the street. I said I couldn't. And my children were at school and it was already time to pick them up [she starts crying for the first time in the interview]. So, I asked a woman if she could please do me the favor of picking them up [she cries]. When the children arrived, they saw that I was receiving those calls [...] so the children started taking their notebooks out of their backpacks and packing their clothes in them. They said: 'mami, let's go' they said to me" [she speaks while crying]. (Isabel, El Salvador)

Having their own children witness violence was a common experience for mothers in this sample. Luz recalled the moment she was shot in front of her daughter:

I was standing there when bam! A black car passes by and shoots at me. I stood by the wall. I just asked my mom: "Take my girl!" My girl was there [...] and she had that trauma. If you asked her what happened she will recall that her mother was shot. (Luz, Honduras)

In moments in which their own lives were under threat, mothers still prioritized taking care of their children and many reported being able to protect them. However, they were unable to prevent them from witnessing violence, and the probable resulting trauma.

As noted in Elena's testimony, violence appeared to be generalized and targeted at adult men as well. Several study participants talked about men in their families being assaulted or murdered. However, the study suggests that some forms or tactics of violence were purposely directed at women who were mothers, and at children, especially girls. Several mothers said they were extorted with threats involving their children: 24 % of the women in the sample reported

that their daughters had experienced sexual abuse (none talked about sons being abused), and 24% of the sample was running away from intimate partner violence, which typically affects more women than men (Menjívar & Walsh, 2016).

Violence during the journey. Stories on the journey varied; not all participants expressed encountering violence, and the violent events they experienced on the journey north appeared to be less serious than those experienced in their countries of origin. Figure 3 shows that the traumatic events were less frequent during the journey than before and after migration. This is contrary to what the PI hypothesized, that most violence would occur on the journey. Marcela recalls:

Thank God that on the road, the people with whom we came take good care of us and we didn't suffer much getting to the border. We suffered the most when we found ICE because we were separated and mistreated, and we witnessed many things there. That was hard, but the road was not ...nothing bad happened to us. (Marcela, Guatemala)

Marcela later explained that she researched very well before deciding whom to hire as a coyote, because she would be carrying young children with her:

Before taking the risk of crossing, we did good research on people that were suitable to bring us safely, right? Because I had my children who were very little... so they were nice to us, they took a lot of care of us.

Ana provided another explanation also related to carrying children:

Thanks God, the girl and I did not suffer on the journey like other people talk about, like going hungry, or being mistreated or other things, thank God we didn't suffer [...] I think that this is because I came with a child. People that travel without children have worse

experiences. Maybe when you come with children like they give you more [...] privileges, for the kids. (Ana, El Salvador)

None of the participants reported that they themselves or their daughters were raped or sexually abused on the journey north, although some said they heard stories about this. Given the existing literature on the high numbers of rapes on the journey, it is possible that rape did happen for some but that they did not want to talk about it. The PI discussed the findings with De Novo director, Mojdeh Rohani, who works directly with refugees providing mental health counseling. In relation to this finding, she has observed that the underreporting of rape is common due to shame and stigma. She thought that if their smugglers raped women, women would probably not disclose this due to fear. Smugglers travel across borders, and they could take revenge against them or their family members left in their countries of origin. She also thought that it was extremely traumatic for women to encounter more violence in their journeys after having to run away from violence, and that recent traumatic experiences can also be more difficult to disclose (personal communication, October 16th, 2019). Some of the women participants did report rape or abuse to themselves or their daughters occurring before migration—in their countries of origin—or in the United States.

It could also be possible that these mothers have fewer risks of being abused because they are treated differently for traveling with children, that is, that their girls traveled under the protection of their mothers. Further, these mothers might be older and more experienced and therefore more able to see danger than younger girls traveling unaccompanied. Some stories suggest this line of interpretation. Teresa told a story of being at risk of being sexually abused, however, she was able to defend herself and protect her daughter:

I think that you have to remain vigilant all the time, because there are people that are always trying to find the way to hurt you. They take advantage of the situation in which we are. So, you have to be alert, at all times, seeing that they won't hurt your children or even yourself. Because many people tell you things, and if you give them the opportunity, they will act. If you try to protect yourself or your children, well then, they retreat. [...] Sometimes there are even sexual abuses. We arrived at a house where a man told me that if I wanted to be with him, he would help me, and all that. Many things. I told him no, I am sorry for this expression but I didn't come to look for a partner or for a husband. I came to help my daughter move forward. And that is what I want to do. I didn't come here for...he didn't tell me anything more after that, and we only stayed there for a short period of time [...] you have to use your head to think where danger will come from. (Teresa, Honduras)

Despite the neutral or positive experiences of some, other study participants mentioned suffering in their journey to the United States. The findings also showed that extortion, common in the countries of origin, was practiced during the journey by some of the smugglers. Two mothers reported being extorted by their coyotes, who asked them for more money under the threat of leaving them on the road or withholding food from them. María commented:

The guy that brought us, at the beginning he treated us well. But then he started mistreating us. I sometimes started crying. We suffered so much hunger. I felt sorry for my child because he said to me: 'mommy, I am hungry'. Sometimes that man didn't give us food. He scolded us for everything. I started crying. He asked my sister for more money [the sister in the United States paid for the trip]. She said 'no, that was the agreement, I gave you all my money' [...] I started crying so my sister said ok, she was

going to try to find the money but he shouldn't leave us there. I felt scared for him [her four years old son]. I realized then how dangerous it was to be there. I said what are we going to do here on our own? What blame does my child have for all of this? [she cries]. (María, El Salvador)

As noted, while some coyotes took good care of these mothers and their children along the journey, others mistreated them and extorted them for more money, regardless of their having children. Women also reported other frightening situations along the journey related to the presence of thieves who wanted to take advantage of migrants, or organized criminal groups like the Zetas in Mexico who controlled parts of the territory:

We had to go through the territories of the Zetas, they are a drug cartel. We went through that, you know, it was horrible. They made us get out of the car [in which] we were travelling and they took us to a house. There, they checked our backpacks, like if they were the police. They checked our backpacks, they asked for our identifications, and they were heavily armed. It was very scary. It is ugly to go through that place. (Raquel, El Salvador)

Luz reported finding on her migratory journey the person that tried to kill her, and that also had previously murdered her uncle.

When I was crossing, I ran into him. I stayed like... death is following me [...] because it is not that all the time you are walking with good people. On the road also come people that have been rapists or murderers. In this country it is not that all people have good sentiments. Not only good people cross. There are people that are running not only from danger, they run away because they are dangerous, they have hurt others [...] They cross

but they do not turn themselves into immigration officials, they cross through other places. (Luz, Honduras)

These experiences show how dangerous the journey north can be for asylum-seeking mothers and children. Even though they have run away from criminal violence, criminal activity continues along the journey. Organized criminal groups control some migratory routes, and also some criminal individuals travel the same roads with those running away from them. Death follows women and children who are fleeing for their lives, throughout dangerous and precarious informal routes.

Violence and safety upon arrival at host destination. Several mothers told stories of positive experiences upon arrival at their host destination in the United States. Eight (40%) reported feeling safe and compared this feeling to the fear they experienced due to violence in their home countries:

I would say that what is easy here is that you can walk without fear, at any time of the day, without worrying about being followed, watched over. That is one of the advantages of living here, that we can walk safely, that the girls can go out and play without us controlling them not to go outside of the house [...] that they go to school safely.
(Andrea, Honduras)

However, the United States was not always a safe haven for all asylum seekers running away from violence in their countries. Women told stories of violence, mistreatment and other sufferings while in immigration detention centers at the border, in the transit from detention to their sponsors, and in some cases, at the houses of their sponsors.

All participants and their children were detained at immigration detention centers. Imprisonment is listed on the HTQ as possibly traumatic to refugee populations and is

considered a violation of children's rights (Amnesty International, 2018; Monico, Rotabi, Vissing & Lee, 2019). Time in detention varied for the different study participants. Several women reported not understanding why some mothers were released before others. As mentioned before, participants were typically held in what they called "hieleras" and then at the "perreras" and subsequently at other longer-term detention centers or shelters. It was common that they didn't recall the places in which they were detained, so the PI does not know the exact nature of these longer-term detention centers. Some mentioned Dilley²⁰, others talked about centers where prisoners were held. Participants' and their children's length of detention in some type of facility or shelter ranged from 1 day to one month. One of the participants, Luz, spent four months the first time she crossed without her daughter, and one additional month the second time she crossed with her daughter. She was the only participant that reported crossing twice.

Six women (35% of the sample) were forcefully separated from their children—or from younger siblings they cared for—while in detention. Forced separation from family members is a traumatic event listed on the HTQ. It has been noted that the separation of children from their mothers or care-takers violates children's rights and has extremely harmful effects on the health and mental health of children and families (Amnesty International, 2018; Miller, Hess, Bybee & Goodkind, 2017; Wood, 2018; Monico et al., 2019). These separations occurred in 2014 (n=1), in 2016 (n=1), in 2017 (n=3) and in 2018 (n=1); all of them occurred before the enactment of the "zero-tolerance" policy. The separation in 2014 and one of the separations in 2017 were from younger siblings' participants cared for in her country of origin and on the journey. These were

²⁰ Dilley refers to The South Texas Family Residential Center, which is one of the largest immigrant detention centers in the United States located in Dilley, Texas. It was opened in 2014 and has a capacity of 2,400 beds. It is intended to detain mainly women and children. This center is operated by the for-profit corrections company CoreCivic, for ICE.

participants whose mothers had been either murdered or had previously migrated to the United States leaving children in their countries. Marcela, who took care of her younger brother since he was a baby, explained:

When we got to immigration, it was, it was something very sad. We suffered there. When we got to what they call 'hieleras', they asked for our personal information and they said that I was not his mother, that he was my brother, and then they took him away from me. I didn't know that was going to happen. I thought they would let me stay with him. I suffered so much, because I cared for him all my life. He was like a son for me because I cared for him since he was very little, and when they took him away from me, I didn't know what was going on. They didn't tell me anything and when I asked, they said: "shut up, you don't have to know anything. You decided to come in this way. You took the risk, not me [...]" There are officers that treat you really bad. Not all of them, some of them are good, but others don't like people that come like I came, but yes, many of them were mean. (Marcela, Guatemala)

Participants were forcefully separated from these children while being mistreated verbally, which could be related to racism and discriminatory attitudes held by immigration officers. In the case of Marcela, she was blamed for the suffering produced by the practice of family separation. Similarly, Elena said that when she was forcefully separated from her daughter, while being mistreated. She recalled:

When we arrived to the 'perrera' and we were separated. I was all wet because we were crossing the river. I was always protecting her, and I fall there on the mud. When we arrived at the 'perrera' my daughter was received perfectly. I was mistreated. They offended, they shouted. They make fun of oneself. They take our children away. [...]

When they took my daughter, I started crying because it was something new for me.

Where are they going to take her? Are they going to take her away from me? [...] They put them in a different place, nearby, all by themselves. They bathe them, they give them pants... For us, they leave us all wet. [...] So, we looked behind the bars with my daughter. We both cried to see how far we were from each other. (Elena, Guatemala)

Three of the mothers who were separated from their children in detention, had already experienced a separation from other children by leaving them behind in their countries of origin. Mothering in detention meant a new separation from the only children that remained proximate to them and whose protection these mothers had prioritized in the decision to bring them north. It also meant mothering while being mistreated; seven participants reported being mistreated while in detention and in front of their children. The des-authorization, vilification and devaluation of marginalized mothers in front of children can harm mothers' mental health and mother-child relationships. Lidia recalled the story of how one of the guards treated her at the moment they found her and her two children at the border:

“Are you feeling cold?” the officer asked me. I said “yes”. “Ah, I don’t feel cold”, he replied. I said: “how are you going to feel cold if you are dry and I am all wet?” I said and asked him “do you have anything dry for my child, he is dying of the cold” My son was blue due to the cold. The officer responded to me “Yes, I do have, but it is mine”.
(Lidia, Guatemala)

While referring to detention, Lucia said: “you are treated like an animal in those places”. Ana explained how they were moved from one place to another without providing information, and how she considered this abusive:

They take you from one place to another place, nobody tells you where you are going. They could be taking you to murder you... and you just don't know. They don't explain anything. Besides that, the majority of them are heavy [meaning harsh] in the way they treat us. They don't tell us things in a good manner, they shout at us. It is rare if one of them does not do it; the majority of them treat us this way. [...] For the reason that they do not explain, that they don't tell you 'look, this is what is going to happen', there is no one to translate, only with those things you feel bad. Because you don't understand what they are saying, and they don't say it nicely, they are annoyed, because of this, I feel they mistreat you, they abuse you, they abuse us because we don't understand. (Ana, El Salvador).

Mothers also shared stories about their resettlement with sponsors after being released from detention. Some of them shared the joy of reunifying with family members in the United States, children or parents, after long periods of separation. Many sponsors—family members or friends—showed great generosity with these mothers, providing them with every need they had, including cell-phones, transportation, housing, money, and help in searching for jobs and accessing resources.

However, not all experiences were positive. In some cases, participants and/or their children encountered violent and abusive sponsors. Luisa, for example, reunited with her mother after several years of separation, however, her mother and her new partner mistreated her and her daughter, and they were finally asked to leave the house:

She told me very mean things, she said that they were better before I arrived, that I arrived only to ruin their lives. (Luisa, El Salvador)

The daughter of another of the study participants was sexually abused by her sponsor—her father—and forced to do house work for him and his wife, who mistreated her and restricted her food, communications and mobility. Other women shared similar experiences of being asked to leave the houses of the sponsors and one of them, Lidia, had to sleep on the street for some days with her two children.

Mothers also shared stories of discrimination, racism and experiences of being “othered” in the United States, which seemed to affect them deeply. Gabriela explained how she felt when she faced discrimination:

I feel like I want to die...it looks like people who have valid [citizenship or residence] papers in this country make us feel that we have no value [she cries]. And sometimes I said, I would have better stayed home, not come, when they mistreat me or discriminate against me. But if I didn't come, another trauma is in my head, if I hadn't come, I would have buried my children and I would have died as well. (Gabriela, El Salvador)

Because I say, what have I done coming to this country? [cries] Everybody looks at us with other eyes. Just one more immigrant, people look at us like we are criminals. (Lidia, Guatemala)

What is difficult for me is to find people that look at me like we are strangers [...] sometimes you go to work and people at work that have their papers want to discriminate against us [...] The same Hispanics. Sometimes you go to stores, and you are looked at weirdly. Like we are Hispanics and they are American. (Lucía, El Salvador)

Mothers also talked about experiences in the United States school system. These were mostly positive; indeed 11 women (65% of the sample) reported successful experiences including being able to quickly enroll their children in public schools, having afterschool care

and school bus services, having supportive teachers or children striving academically and socially in schools. However, some children experienced schools as new hostile environments, and these mothers suffered seeing this. For example, Isabel's and Lucía's boys were sent to criminal juvenile justice for incidents that occurred in their schools, and both mothers felt these incidents were related to racist attitudes from classmates, teachers or other school administrators. Both mothers expressed feeling helpless in navigating the school systems to protect their children from these perceived aggressions.²¹

Mothering in conditions of poverty and precariousness. Together with stories of violence, some participants told stories of poverty, deprivation and precariousness that transcended borders. Indeed, 15 study participants (88% of the sample) told stories of experiencing poverty and deprivation at some point in their narratives. This section presents the stories of moments in which participants had trouble in providing for themselves and their children, were deprived of—or had difficulties satisfying—basic needs such as housing or shelter, food, water, clothing, and access to medicines and medical treatment. In some cases, poverty and deprivation created precarious conditions that threatened the health of participants and their children.

Poverty and precariousness before migration. While all participants cited violence as their main reason for leaving their countries of origin, some of them also weighed material hardships while deciding to leave. Ana was a single mother who worked as a nurse at a public hospital. She explained:

²¹ Lucía's child's incident was in the Boston public schools; Isabel's was at a school in Texas. The family of Isabel was split, the child who had problems in the schools was living with his brother, father and his aunt in Texas; while the mother was living in Boston with her daughter.

I worked for the government. Thank God I had a job. It was difficult to secure that governmental job, because those are stable jobs, you have them generally until you retire, but the salaries are low [...] There in El Salvador, to achieve something material, a house or something else, it is very difficult, it takes a long time, and sometimes you don't achieve it. (Ana, El Salvador)

The need—and the dream—of having a house to raise their children was present in other women's narratives:

Because sometimes there, you don't have anything [...] plus all the problems you have [related to domestic violence]. There, even if you work a lot, you cannot buy anything, only food sometimes. It is difficult, and it is complicated, and it would be nice to have a house of my own, where my children can live when I no longer live. (Rosa, Honduras)

Poverty and economic difficulties were deepened due to conditions of single mothering, and a context in which women are more affected by poverty and have to provide for their children. Single mothering was prevalent in this sample with 12 participants (70% of the sample) reporting being single—due to abandonment, separation, and in one case becoming a widow—at the time of crossing the United States border. Luz explained that the experience of single mothering can push mothers to cross borders even with infants, which she considered very risky:

Our husbands, the father of our children abandoned us. In our country, taking care of babies is very hard. Everything is expensive; the minimum wage is very low. They pay 5 or 6USD a day [...] and with that one only can buy a pound of beans, a pound of rice. Sometimes grandmothers stay with the babies, but when they don't, the mother carries her baby and goes to work, she cannot do that in any job, maybe if she works as a cook... But for that, she has to migrate to the city. In the city you become a slave, you work with

people who have money and if they give you a place to live, you have to pay them rent, if you carry your child, they will pay you less [...] You end up earning nothing, and you have no choice but to migrate. (Luz, Honduras)

Despite economic hardship and differences in economic positions within the sample, only one of the study participants reported being at risk of survival due to food insecurity. The educational level of these women is relatively high, allowing them to access job opportunities and businesses (as noted 50% had finished high school and 24% had accessed university or tertiary education). All study participants mentioned accessing some level of income in their countries of origin. As described before in the Description of the Sample (p. 104), some women worked as employees, and others had their own business or worked at the business of their mothers or partners. While these businesses were in typically low productive sectors, women running these businesses did not report experiencing poverty due to lack of income. For them, poverty was violently enforced by criminal groups who took their income through extortions and took control of their houses and other assets. Gabriela had to close her business in El Salvador due to extortion involving the kidnapping of her son:

So, when I arrived full of anguish, desperate, my sister-in-law told me: let's find the money, it doesn't matter how much we have to sell. [...] They made me close my business, they requested USD 2.000, then they gave [my son] to me. They left him in front of my business, all covered, it was getting dark, they told me look, wait, a package will arrive. The package was my child. They gave him to me alive because I paid. They forced me to close my business, to leave my house. Because I had a house, where my brother was killed, I lived up there. So, when I looked at that house, they are all around, in possession of our house.

As observed, gangs typically confiscated income and also personal property. Other women reported selling their property in order to pay the coyotes for the trip north:

I paid 8.400 USD for the two of us. I didn't borrow money. I had a small lot of land that I had inherited. I sold that lot and with that money I paid. (Ana, El Salvador)

Some women were still paying their debts at the time of the interview. This made it difficult for them to provide for their children and pay for lawyers in the United States.

Precariousness of the journey. Experiences of deprivation in the journey were more dangerous to survival than the ones reported in countries of origin. Notably eleven mothers (64% of the sample) reported suffering from lack of food and water for some days during the journey. The lack of food and water is considered a traumatic event, common to refugee populations and listed on the HTQ. Ten participants mentioned lack of food and water during the journey, due to diverse factors. Sometimes coyotes didn't provide food, failing to fulfill their contracts. Sometimes mothers didn't have money to purchase food or on some occasions they had money but they were afraid of stepping out of the buses and being caught. Elena explained:

Because my girl and I, we didn't eat on the journey, for the same reason we didn't want to talk, because if we talked or stopped at a bus station, we would be quickly found, they would realize we were not one of them. So, it was very hard, we only ate yogurt and water; we did bring some money but we couldn't get off the bus. (Elena, Guatemala)

Some mothers relied on the generosity of people that provided food along the journey; however, there were sections of the road where there was no one doing this. Notably, people along the road showed special compassion to mothers and their children:

Sometimes there were people that see how we suffered, so at least for the children they gave me an apple or sometimes water, things like that, because sometimes there was not

water to drink. Without money it is difficult, so at least this way I had some water at least for him. (Rosa, Honduras)

Three mothers reported that their children became sick due to the conditions on the journey and that they were not able to access health care, medicines or shelters to protect them from the extreme heat and cold of the desert.

Poverty, deprivation and precariousness in the United States. Mother participants also told stories about material hardship during detention and upon arrival at their final destination in the United States. Some of these stories were related to the inadequate protections of these families, or policies that enforced material hardships.

Several participants said that as soon as they were detained at the U.S. border, immigration officers confiscated the few material belongings they had carried with them. In some cases, these belongings were clothes that protected them from the cold, or objects that their young children had been attached to before or during the journey:

The child brought a hat, they took the hat away from him, he had to put it inside a bag [that belonged to ICE]. I brought a sweater; I had to put it in the bag too. My shoelaces, my hair band, the necklace or the bracelet. Everything. We could only stay with our papers, birth certificate, an ID, a phone number. [...] and the clothes we had on. There the cutest thing was that when my son is taken his hat away, they gave us a bag to place our things and left it on the ground. What did the child do? He took his hat from the bag and put it on again [the mother starts crying for the first time in the interview] And the officer said we needed to put it back on the bag [...] And it was freezing because it was during the night. (Alba, Honduras)

Even though immigration officers might be considering security concerns when performing these practices, confiscation of personal belongings is considered a traumatic event on the HTQ; for children this can be especially traumatic if they are separated from toys, clothes or bottles to which they are attached and which might have been elements of support in the difficult experiences of leaving their homes. Alba's child was also separated from his bottle and the mother was preoccupied with this. Having their few belongings ripped away from them, was experienced as violent or harsh, although some said that these belongings were returned to them when they were released from detention. Lidia recalled her encounter with immigration officers:

"Take out your shoelaces [...] take your pony tail and hair band, take it out of your girl, take out your girl's earrings, throw them in this bag, quickly! [...] Take off your bra, take off your shoes, put them in this bag and go barefoot" [...] "Ok", I said. I went barefoot. They threw everything in one bag. I went in the car and that is how they took me to immigration where the icebox was, the famous icebox, where the bars are. And that extremely cold room! I was all wet and covered in mud, because mud got up to here [she shows her body]. And I was barefoot. (Lidia, Guatemala)

As noted, participants reported that they and their children were affected by experiencing extremely cold temperatures especially at *hieleras*. Nine participants (53% of the sample) complained about feeling cold at *hieleras* or at *perreras*; they also complained that clothes and shoes that could have protected them from this cold had been taken from them.

...then they caught us. They threw away all our clothes, everything that I had brought for my girl. And my baby felt cold at the *hieleras*. (Luz, Honduras)

Beside the cold temperatures, women described suffering from other precarious conditions in detention. Marcela described:

It was a very difficult situation the one I endured during those 8 days in detention. I spent the 8 days crying in there, for not having food, for not having where to sleep because there was no place to sleep, for being [forced to] stand up for so long, I was standing up for five days. There was no way I could sleep there, because there were many, many children, and many women, there was nowhere to sleep. [...] they didn't give us anything to sleep, no sheets, anything. It was very hard. The bathrooms were filthy. I was breastfeeding my child, but I saw many mothers that gave the bottles to the children without washing them. That is how they gave them the milk. And then the children started with diarrhea and vomiting. It was a pestilence where we were. (Marcela, Guatemala)

Several mothers said that their children didn't eat because they didn't like the food they were given in detention. Other mothers also told stories of not receiving enough food in detention.

They only gave us apples and bottles with water. [...] and I was breastfeeding, and I gave the apple to my daughter so she didn't feel hungry. [...] They only gave cookies to her, once a day they gave her cookies like these ones [cookies on the table in the interview room], and the apple and water. (Marcela, Guatemala)

Upon arrival to their host destinations in the United States, some participants were capable of successfully providing for their basic needs and those of their children. These were mostly the cases of women that reunified with their partners, with supportive family members or friends, or who were able to establish new love relationships. Five women reported finding a new love—or reuniting with ex-loves—in the United States. In those cases, that person helped them and their children with housing, toys, transportation costs and other goods. The stories of

finding new love for women who endured conflictive relationships at home seemed to bring happiness to them. However, not being able to work and provide for themselves and their children could also place them in situations of dependency on that new love relationship. While discussing these findings, De Novo's director, Mojdeh Rohani, commented on how these relationships can turn abusive as women do not have other places to go or to seek for help (personal communication, October 16, 2019).

As observed in previous sections, not all women had supportive sponsors upon arrival. Sometimes these relationships were difficult and conflictive, or just not possible in the long term. Several women talked about being kicked out of the houses by their sponsors, or facing or being at risk of homelessness.

My friend helped me to come here and I reunited with her when I came. However, after 8 days of having me, she kicked me out. So, I have been practically on my own since then. At the eight day of being here, she told me 'I am sorry, but you cannot stay. You have two children, and your children are already old and mine are little. And immigration is going to visit you, and I don't want any problem. So, look for another place to live, 'I don't know about other places, I am by myself' I said 'I don't know anything here. I came here because you told me that you were going to help me and you would give me the job of taking care of your children so you could work' 'yes, I did, but no, I can't. You have two children, and it is more expenses and here we have to pay the rent. (Lidia, Guatemala)

This sponsor was scared of ICE so it is probable that she didn't have a stable immigration status; at the same time, she might have struggled with economic hardship as well living by herself with two young children. Lidia found another family that hosted them searching through

Facebook, however, she was kicked out again and ended up sleeping on the street with her two children for several nights and faced food insecurity. At the time of the interview she had been able to secure a job and a room for herself and her children; however, they were sleeping on the floor and couldn't afford mattresses.

As noted, sponsor families are generally immigrant families struggling themselves with economic hardship and in some cases, with legal vulnerability. Alba was hosted by her friends' family, who lived in overcrowded conditions, with 12 people in a two-bedroom apartment, mostly single women with one or two young children:

When I came here, they gave me a place to stay. But when you arrive...everybody likes you, but at the end it is like they don't like you anymore. Because they pay for the rent, they have to pay for the rent, gas, electricity and they don't look well [on the fact] that you don't contribute with any of that. I helped them clean the apartment and everything but I feel bad [...] I have to pay the rent, but I cannot work because they told me I need to get a work permit in order to work. (Alba, Honduras)

Accessing stable housing was problematic indeed for several study participants, due to problems with sponsors but also due to the high costs of renting houses in the Boston area. This resulted in multiple families living in precarious housing conditions in the cold winter of Massachusetts:

They charged us USD 600 for the room in Chelsea (Boston) and then he wanted to raise it to 700 [it was a three-season porch, turned into a room] And the room freezes in such a way! You don't have any idea. So, I told him 'but this is freezing' and he said: if you want to live here, I am the one that sets the conditions. But I told him, there is no heating here for the cold. And we had practically nothing. I had some blankets that my cousin

gave [...] and another woman that gave me two beds, that here if you don't check them, they had those bugs that bite you. So as I have a delicate skin, I got all... [...] But I stayed there, I couldn't leave that place, because I couldn't find where to go. (Gabriela, El Salvador)

The general costs of living in the Boston area were also experienced as very high. Luz commented:

One thinks that coming to this country is like coming to heaven. No. We have to go through hell. It is not easy. There are people that die on the road or lose their children, or their own lives. Many compatriots have died trying to cross, maybe trying to achieve a better life. But it is all a lie. Here you work only to pay for your expenses, only to live, because everything is very expensive. I work, but at the end of the month, very little is left. (Luz, Honduras)

Accessing jobs to confront these costs of living was especially difficult for mothers who had young children:

Because when I was in Guatemala, people said: 'here is like this and that...' but when you come here, you realize that nothing is easy [...] If I go to work those three days, I have to see who stays with my son when I am at work if he is not at school. They charge me USD 25 a day, and if I wanted to work at night, they charged me more. So, no, I can't pay that much. (Alba, Honduras)

Only five participants (29% of the sample) had a work permit at the time of the first interview, despite 16 (94%) of them having presented their initial asylum application. Without work permits, it was more difficult to access jobs. Several employees requested permits; in other cases, women were afraid to search for jobs without having authorization. The lack of work

permits forced women into poverty and dependency on sponsors or to work in informal jobs for limited hours, for example, in cleaning or food preparation.

Accessing lawyers was problematic for some of the participants due to the high fees charged to cover legal expenses given their reduced income. Cases of fraud and abuse by false attorneys are also common in this population (Rohani, personal communication, October 16th, 2019). The U.S. government does not provide lawyers to asylum seekers, and it is up to asylum-seekers to find lawyers that could assist them with their asylum appeals. Pro-bono lawyers including those working at De Novo are typically scarce and overwhelmed by the number of asylum and immigration cases. Lidia was finally able to secure a pro-bono lawyer; she explains how she felt before that:

I was scared and prayed to God telling him “I won’t find a lawyer, a pro-bono lawyer, I have to pay, where will I get that money? I am still paying my trip. I pay my rent. Where will I get a lawyer for free? The lawyer will charge so much”. I went to ICE and the social worker gave me some lists and asked me: have you contacted your lawyer? Do you have a lawyer? No, I said. So, what are you waiting for? You have a court day soon. And I cried and said to God: “What is going to happen with my children and me? I don’t have money to pay that lawyer”. (Lidia, Guatemala)

In contrast, the stories of accessing health care in the Boston area were mostly positive. Twelve women (70% of the sample) reported being able to access medical treatment for themselves and/or their children when needed. The rest didn’t tell stories of feeling sick and needing to access health services. Fifteen mothers (88% of the sample) reported having health insurance coverage, although in cases it was limited in the services it covered. No stories of violence, discrimination or denial of treatment were reported in medical settings; stories were

more of support, reflecting solidarity. For example, three days after arriving to Boston, Isabel's daughter received emergency surgery for a bleeding problem that had been going on for a full year without treatment. She narrated:

I didn't have health insurance, so I was very worried because I was receiving lots of bills, and I didn't have insurance for my child. But there they told me I shouldn't worry for that, that they were processing my insurance, and then they told me I did not have to pay anything. (Isabel, El Salvador)

Mothering in a context of inadequate institutional protections. Mothers' narratives reveal many instances in which they or their children were not adequately protected by different governmental institutions across borders. The role of governmental institutions is important to this study as it follows a human rights-based approach, in which state governments are considered duty-bearers in the protection, respect and fulfillment of human rights (UNDP, 2008), and in which motherhood and children are entitled to special care and assistance (UN Universal Declaration of Human Rights, 1948, CEDAW, 1979). CEDAW (1979) also establishes that "the upbringing of children requires a sharing of responsibility between men and women and society as a whole" (CEDAW, 1979).

Institutional responses before migration. Mothers told stories related to the inadequate response from the local police and the criminal justice system to protect them from violence and abuse. Mothers explained that the inadequate response was not due to the lack of police, attorneys or legislation that could protect their human rights. Rather, they described the police as well as the politicians as being corrupt, inefficient and working in agreement with gang members in their countries of origin.

[After her brother was murdered] At the following day I started to prepare everything. I told my children stay here, and they stayed there with my mom. I went to the house by myself [where her brother was murdered], because you cannot involve the authorities. The police cannot do anything because they are mixed with them [the gangs]. There are people, it hurts to say this... but the same police is sold. It is sold to them. They are purchased, because there are attorneys, there is everything, but they are scared to be killed. So, they do not do anything. The day my brother was murdered, there were policemen around the house; they say the gunfire, but they didn't come. [...] They didn't come close because they agree with the maras [...] [The president from El Salvador] He cannot do anything, far from that; people ask how is he going to control the gangs, if he seems to be the chief of those gangs. (Gabriela, El Salvador)

Gabriela shared the story of how her eldest son was extorted by gang members in El Salvador who collaborated with the police:

They made an agreement with the police so that they could catch my son at the moment [he was doing something the gangs asked him to do, carrying some money]. And there were two policemen that they said they saw that my son's hands were trembling, but still they didn't do anything, and the lawyer was also in agreement with the police [...] My son's hands were trembling, he was pale, but he had to do it because my life and that of his siblings were at risk.

Others talk about inefficiency of the police force and suggest some complicity with the criminal groups:

[The PI asked "does the police protect you?"] The police. [she laughs]. What does the police do when something happens? If you have an emergency and the police come, they

arrive half hour or an hour late, when things have already happened. They come with their sirens on, so with that they alert they are coming, when they arrive, nothing is there.

(Raquel, El Salvador)

Some mothers showed awareness of their rights and tried to seek justice by reporting crimes; however, they felt that there was no justice and that the crimes they denounced went unpunished. Without trust in the criminal justice system, mothers feel dis-protected locally and decide to migrate seeking international protection:

I presented the claim [domestic violence] but they didn't do anything, there they don't do anything until things have already happened. (Karla, Guatemala)

[PI asked what did your mother say about your decision to leave] She was sad, and she said that our lives were at risk. They had already killed my husband, then my brother died, he was murdered, so she told me 'no, they are not playing' and she said 'I prefer to see you far away than having to bury you or something else happens to you. Because here you denounce what happened and they ask you for proof and more proof, and you kill yourself trying to present proof, and nothing happens. Nothing. They don't make justice [she cries]. (Elena, Guatemala)

Isabel told stories of the police trying to protect her and her community. Unfortunately, policing activities were traumatizing for her children and not effective. While in Boston, her daughter was scared every time she saw the police or heard sirens.

While some mothers denounced violence and sought help from the police, others did not because they did not believe in the capacity of the police and the criminal justice system to successfully combat criminal activities, and/or due to fear. As a consequence, many crimes might also go unpunished due to not being reported. Patricia from El Salvador explained that when they

were facing extortions, they didn't go to the police and decided to migrate instead because they thought the authorities could not do anything. Teresa from Honduras said that she didn't denounce the neighbor who abused her daughter:

The situation is very difficult there. I don't know why, I don't want to blame anyone, but you can go and make the denunciation one day, and maybe two or three days later the person is back on the streets free again. Even in cases of murder and all that [...] I was scared, I felt that if I denounced him, he would take revenge against us. (Teresa, Honduras)

Karla explained that machismo and the agreement between male gang members and police officers was behind some of this neglect towards women's claims. Her testimony exemplifies how a "gender discriminatory social context" (Menjívar & Walsh, 2016) operates in a context of violence and corruption, in which male gang members are protected by male friends in the police force.

In issues of violence, you go and tell them and make denounce what happened, but no, there, no... It is like they don't believe you because there is a lot of machismo. Yes, there is a lot of machismo, and women are very excluded. So if you get along with, if you have some friend there, in that institution or something like that, that that person is your friend, so then he will do something for you...but if you are nothing to him, he doesn't know you, he won't do anything for you [...] I didn't have a friend there, but he did [her ex-partner and father of the child who was a gang member and violent to her] [...] When I tell them something, they say it is a lie. [...] What they do is protecting the person who hurts us and not the victim. They don't believe us; they believe more the person that hurts

us. You cannot live like this. And we can never win anything, because they will always protect them because they have bought them. (Karla, Guatemala)

As a consequence of the lack of institutional support to preserve the lives of mothers and their children, and a lack of parental support due to fathers not taking responsibility for their children, many mothers end up being the only ones responsible for assuring the survival of their children in conditions of extreme violence. In such a difficult situation, many mothers feel that they have no options other than to flee for their lives and for those of their children.

Institutional neglect on the journey. Women and children crossed through other countries including Guatemala and Mexico before arriving to the United States. However, there was minimum mention in women's narratives of the state authorities in those countries. This minimum presence in the narratives may represent the minimal involvement of the governments of those countries in supporting, protecting or regulating migrants.

Some women did talk about policemen or immigration officials in Guatemala or Mexico asking them to present their passports. Agents in these countries extorted mothers, demanding money in exchange for being allowed to continue with the journey:

Some officers from...federal officers from Mexico told us to step off the bus. And that lady [someone who had helped her before] was kind to us, she had given me some Mexican money, she had given it to me and told me to carry it in a bag. So, they told me to lower my pants, I was wearing my pants, they asked me 'lower your pants, what are you carrying? what are you carrying there?' I told him that I had... I don't remember how much money this woman had given me, and I told him 'I only carry this much', so he told me "if you don't pay us, we won't let you pass. You don't pass, bye". (Gabriela, El Salvador)

Other women talked about corruption by immigration officers at the border between Mexico and Guatemala, and how coyotes negotiated with them:

[In Guatemala] So I had to pass through customs, and my child was taken by another person because I didn't have a permit to pass him. They passed the child through bushes [...] with other women and men, other people. There I got a big scare because I also couldn't pass because I was only 19, I needed to be 21 to leave the country, I needed the authorization of my parents [...] So the coyote came and told another person: I give you money if you can pass her, pass her as your girlfriend on your bike. He said no, we will be in trouble, it will be better that you pay the 300 quetzales, he said, they won't take 100, it is 300 quetzales' [39 USD] [...] the 300 quetzales were to pay the customs in Guatemala to let me pass. (Alba, Honduras)

Some women talked about hiding from policemen and immigration officers in these countries in order to prevent being detained before arriving in the United States. Women hid and did not want to claim their right to asylum to these countries, probably because they felt they wouldn't be protected as well as in the United States. Lucía said:

We suffered from thirst during the trip because there were places that we couldn't get out due to fear, it was between Guatemala and Mexico, fear that we would be detained before arriving to the real ones [immigration agents], the ones of the United States. (Lucía, Guatemala)

One of the study participants, Isabel, did stay in Mexico for one year because she was not allowed to cross to the United States. She told stories about extreme poverty and inadequate access to health care for her daughter while in Mexico; her daughter could receive the surgery she needed only after she had arrived in the United States.

Women did not mention any story in which governmental officials or policemen from the countries through which they were transiting asked about their situations or offered them any protection or support. Basic needs were provided randomly along the journey by the generosity of people who took pity on mothers and their children, as well as other migrants; however, there were no stories of government authorities providing basic needs. The lack of stories of state protection for these women is coherent with what others have said about the inadequate human rights frameworks of protections for asylum-seekers in transit (Ramji Nogales, 2019). Women traveling alone with children did call the attention of others in the routes, like volunteers that offered them food and housing, or even criminal groups like the Zetas that captured them and requested their identification. However, despite the well-known high prevalence of human rights abuses and gender-based violence occurring in transit, government authorities do not appear in these stories as taking much interest on these women and their children. It could be possible, though, that these mothers are able to successfully hide from these authorities to avoid being detained in transit to the United States, because they did not want to claim their rights to asylum protections to these countries but in the United States.

Institutional response in the United States. All participants in this study passed the credible fear interview upon entry and were thereby granted the right to seek asylum. Indeed, all participants in this study had been granted the possibility of having an interview at the U.S. border to determine that their fear of returning to their home countries was credible, and all have been released to U.S. territories where they can remain until their asylum cases are adjudicated by an asylum judge (there was an exception, Luz, who was previously deported despite having passed the credible fear interview, however, she reentered, passed the interview again and was released to U.S. territory; this case will be analyzed further). Participants mentioned having

access to immigration courts and, they also mentioned, that the courts gave them lists with names of lawyers they could call to potentially take their cases—at their own expense. The United States was not neglectful in these ways, and as mentioned before, several study participants did express feeling safer in this country, and in accessing the education and health care systems. However, findings from this study suggest that the processes in which the right to seek asylum is exercised include instances of negligence, constraint and sometimes violence, situations that bring new suffering to asylum seekers, and that also make the realization of their right to asylum very difficult. For mothers traveling alone with their children, constraints were sometimes harder. This section presents women's comments on these issues.

The first encounter with the U.S. system asylum-seeking mothers in this sample had was during the process of detention at the border. Some mothers spoke about immigration officers denying or not acknowledging their international right to seek asylum. Alba said about the moment in which she was detained:

They told me that I was going to be deported due to the crime of crossing the river. I asked to talk. They didn't let me talk. I asked to phone someone, they didn't let me phone. (Alba, Honduras)

Luz told a story about being detained and sent to several prisons for criminals. She said she was then deported despite having passed the credible fear interview:

I entered in April 2015; I was detained for four months in three different prisons. These were prisons, because these were prisons where they take those who have been condemned for committing crimes within the United States. [...] We had many problems because they already had their sentence, and were there waiting, and it was dangerous at the same time, because they fought and everything. Some of them were there because they

had killed someone. It was scary, very scary. We went to recess and we had to meet with them, their uniforms everything was really scary [...] they had committed crimes, they have beaten someone, they had killed, all of them were there together, and we were there, we were 300 immigrant women. Then the 300 of us, we were deported. Only one woman and one girl were able to stay. The girl had to pay USD \$8,000 to leave, and the other woman, also, her relatives paid for her. [...] The rest of us couldn't pay because we didn't have money to do so. They told us that we didn't have the right to a lawyer and that we didn't have the right to anything, that we were not born here and that we should not be here because we were a danger. A danger. The judge was very racist. No, he didn't like us, so there was a woman that told him that he was very racist, this woman was from Guatemala, and he punished her with one more month in detention and then he deported her. (Luz, Honduras)

This participant was politically persecuted in Honduras and was running away from her country after two attempts to murder her. Her right to seek asylum was not respected as the judge deported her even after passing the credible fear interview at the border. She was considered “a danger” and sent to prisons with criminals. She was not treated as what she was: someone running away from criminal violence, who had the right to seek asylum. This criminality approach can hurt asylum-seekers; for those who have been experiencing attempts on their lives, being placed with murderers can be re-traumatizing.

As noted in previous sections in this chapter, participants described the conditions in immigration detention facilities as very harsh. Some participants believed that the harsh conditions in detention were intentionally inflicted on them to make other immigrants decide to

stay in or to go back to their countries. As such, these practices could be considered practices of institutional violence to persuade migrants to return to their countries of origin.

When you entered the ‘hieleras’ [ice-boxes], they take out all your sweaters, they don’t allow you to have any coats. The least clothing possible. I imagine they do this so people can feel cold and get desperate. Because many people do not tolerate this cold, they are not used to this cold, nobody is used to this because we come from countries that are different. I imagine there might be people that say: I can’t tolerate this anymore, ‘send me back home, I will die here’. Many children get sick, and they get upset when children get sick. Children get sick because they are not used to these temperatures.
(Ana, El Salvador)

As documented in previous sections, mothers and their children’s basic needs were neglected—meaning that they were not cared for properly, given little attention and not respected—during detention. Basic human needs were not fully satisfied. Mothers described not being able to sleep due to overcrowding and lack of beds, having to stay standing up for days, not being able to eat properly even when breastfeeding babies. Food was reported to be scarce, of bad quality, and typically not liked by children. Some children either did not eat or ate their mothers’ food, leaving their mothers hungry. Mothers reported unsanitary conditions, cold temperatures and lack of appropriate clothing, all of which made children sick. As such, negligence in detention—either intentional or due to overcrowding—enforces new conditions of precariousness on mothers and children. Mothers reported not receiving enough information, not receiving explanations about where they were being sent when they were moved from place to place, nor knowing what was going to happen to them and their children. In the cases in which mothers were separated from their children, mothers reported being mistreated and not receiving

enough information. These practices failed to respect mothers' rights and their authority over their children, and ignored the feelings of mothers and children who had already endured much suffering before arriving at detention, including the constant fear of losing their children to violent groups.

Immigration officers played an important role in perpetuating these practices, or in contesting them. Some women reported stories in which officers treated them well. A woman said:

When they received us, they told me 'seat down, don't worry, you will be fine here' and the same with my son. They treated us well. Some people say that when you enter immigration detention, they take you to cold rooms and you suffer there. However, they didn't do that to us. That didn't happen to us. They took us to a room that was not cold. They took my son so he could take a shower and get changed. They gave us some warm blankets to lie down, we remained together; they didn't separate us. They told us to stay there and not to worry [...] they gave us clothes, shoes, they took us to eat. And by noon they said we were free. (Gabriela, El Salvador)

Ana told a story of an officer in a detention center who wore a Santa Claus' hat for Christmas and delivered candy to the children. She said he was hiding from other officers in order to be able to do this. Some women also talked about the shelters or some family detention centers as places that treated them better than the "*hieleras*" and "*perreras*". Raquel explained that even though they felt imprisoned in the shelters, they had everything they needed there:

There was food, you had a bed, you could take a shower. Clothes, shoes... everything is fine, although, this is not what you expect, what you are looking for, because it is still being imprisoned always. (Raquel, El Salvador)

When women were released from detention and sent to their final destinations, they had to find immigration attorneys to (a) file their asylum cases, that is, present an initial application at the local immigration court; (b) help them secure a work permit; and (c) continue representing them until they successfully proved their asylum claim. As explained in Chapter II, asylum-seekers in the United States do not have the right to a free lawyer to represent them in courts. Finding a lawyer was cited as difficult for some study participants:

Last time I went to the court and they told me I should bring a lawyer and that I should file the application within the first year of arrival. I haven't been able to do so because I don't have money to pay for a lawyer. (Karla, Guatemala)

However, participants in this sample were able to access lawyers, either pro-bono or paid, who allowed them to pay them in installments or were low cost. Nine study participants (53% of the sample) had been able to access such lawyers and to present their initial asylum applications at the time of the interview. Even if nine women made their initial application, only six (35%) had lawyers to follow through on the next steps for their cases. The rest faced uncertainty and the possibility of deportation. These percentages are high if compared to the total population of asylum seekers in the United States, in part because Boston has better legal resources than many areas of the country. Moreover, most participants from this study were referred by pro bono attorneys at De Novo or by volunteers who helped them access low cost immigration lawyers. Only five participants had been able to obtain work permits at the time of the interview. As observed in previous sections, the lack of work permits constrained their access to money to cover basic needs for themselves and their children, and also to pay lawyers who had initiated their cases and paradoxically, to obtain work permits.

Where will I find money to pay the lawyer? Without a work permit I cannot work every day. [...] I don't have money for a lawyer [...] I used all the money I brought for the trip here. (Alba, Honduras)

Mothers in the study mentioned that they were able to access cleaning jobs without work permits, but not more stable full-time jobs that could help them provide for their family:

It is complicated not having a work permit, it is very difficult to find a job without it because in almost every place they ask for a work permit. And if you don't have it, you feel badly, it is like they don't take you into account [...] so they need people with their work permits or with experience with the language. So, I felt bad when they told me there is job opportunity in some place, and when I arrived there, it was not for me because I didn't have it [the work permit]. (Patricia, El Salvador)

During a second interview that was organized to share preliminary findings, Luz told the PI that she believed it would be better if the initial asylum application and work permit were issued at the moment they are released from detention, and not having to do everything again in the final destination. She said that when she was released from detention, she didn't understand she had to do all this work again. She said she only did it because a volunteer informed her about it and connected her with a lawyer. She said many women might not have work permits because they just do not know how to obtain them. Based on this testimony, it is likely that many do not have access to understandable information about the asylum processes, that they received too little, or too much information all at the time of detention so that they cannot remember later.

These findings show that without bringing or accessing money, without appropriate information, and without access to the limited number of pro-bono lawyers, accessing asylum is very difficult, regardless of the validity of the claims. Immigration policies and practices—or the

lack of those—place restrictions on asylum seekers, enforcing economic hardship, and making the right to asylum difficult to be realized, especially for those who are impoverished. Single mothers of small children also face greater constraints due to difficulties in juggling work and child care duties.

Even though asylum-seekers in this study come from similar violent contexts as other refugees, the responses the United States gives them upon resettlement are very different. As noted in Chapter II, refugees are granted a legal permanent residency, are allowed to work in the United States, and have access to many benefits such as cash, housing, educational, language, vocational services as well as health and mental health and case management services. Only those who prove their asylum claims and become asylees can access these services. However, women participants' narratives showed that the road to asylum could be very complicated.

Research Question Two: Maternal Practices

As observed, the contexts in which mothers in this study parent are hostile to their wellbeing and that of their children, in the sense that they are confronted with conditions of violence and precariousness, while being provided with limited institutional protections and supports. The findings from the study also suggested that these harsh contextual conditions forced women participants to engage in difficult maternal practices to guarantee the survival and development of their children.

Becoming mobile, with children. For mothers in this study, *becoming “mobile”* (Naidu, 2013), meaning migrating, appeared to be the best—and sometimes the only—option to preserve their lives and those of their children. While all mothers became mobile across international borders, mothers also reported other sorts of mobilities: within their countries of origin, across different states in the United States, and within cities and placements in the United States. For

some, internal migration preceded international migration; due to threats and extortions from criminals, some participants reported leaving their houses and moving temporarily to the houses of friends or relatives in their town or other towns within their countries. Only when these arrangements were no longer safe or sustainable did these mothers decide to migrate internationally. As noted before, several mothers continued moving after arriving at their intended destinations within the United States due to problems with sponsors, or difficulties in finding adequate and affordable places to live. Mobility has not ended for some of the women participants. Gabriela, for example, became mobile six times after entering the United States; her living situation is not yet settled and she and her two children are facing the risk of homelessness. While the importance of guaranteeing a stable environment for children is widely addressed in the literature, these mothers are forced to live nomadic existences with recurrent journeys. As mobility becomes a permanent state of life, it can also be considered another difficult contextual condition affecting this population. As noted before, in moments of transition mothers and children lack protections, access to basic needs including education for their children, and are at risk of homelessness or suffering abuses from sponsors.

Unlike migrant mothers studied in the transnational mothering literature (Hondagneu-Sotello & Avila, 1997; Parreñas, 2002, 2005, 2010, 2011, 2012; Cheng, 2007; Dreby, 2010; Hershberg, 2012; Naidu, 2013; Oliveira, 2018) who typically migrate to provide for their children who remain in their countries of origin, mothers in this study *became mobile with*—at least some of—*their children* in order to protect them. The decision of bringing children across dangerous borders was generally explained by the increased levels of violence in Central America threatening the lives of the children they were bringing. Ana explained why she migrated with her only daughter:

The reason why I am leaving is insecurity: will I be safe here but the girl unsafe there? It didn't make any sense. (Ana, El Salvador)

Taking risks and risking children's lives across borders. In order to protect their children from danger, mothers had to expose their children to danger. *Risking children* to the dangers of the migratory journey is a maternal practice that emerges from violent conditions and inadequate institutional protections in their countries of origin, and by the inaccessibility to safer ways to seek international refuge. Mothers in this study expressed awareness of exposing themselves and their children to the dangers of the route:

On that journey you risk yourself and you risk children. Because it is hard, it is not easy.
(Raquel, El Salvador)

You don't know. Some have good luck, others bad luck. Coming here and something happening to you or your son, it would be horrible to see that, to think that your child will suffer, that something could happen to you and then you leave your child alone there.

This is the fear that you experience when you travel here. But we have to take the risk.
(María, El Salvador)

As observed, some mothers expressed negative feelings related to risking themselves and their children across borders; however, some felt they didn't have any choice other than that of taking those risks:

I made a decision, I would tell you, how I see it now, a crazy decision. Yes, imagine all the risks they faced in the journey from there to here, and I didn't know if I was going to come out alive, or if something would happen to them. And I didn't know that, but the truth is that at that moment I was desperate. (Lidia, Guatemala)

Nobody wants to expose their children to suffer like this [...] One sees the suffering of children on the road, and at some moments one feels weak, and says how did I bring my child to suffer from all this? But sometimes it is the circumstance that force us to do things one does not want to do. (Teresa, Honduras)

In these conditions of violence, mothers compare the risks of staying vs. the risks of leaving:

Coming here is risky, and it is risky because not all of us will get to be with good people [...] you feel fear, but it is the fear to stay or the fear to come. (Marcela, Guatemala)

Some mothers in the study decided to risk the lives of their children by bringing them with them because they felt that nobody could protect them better than they would. Leaving them in the care of others in their home countries was perceived as riskier than bringing the children on the routes. This was because on the routes at least children would have maternal protection. Luisa, who migrated with her only daughter, commented on one of the pictures of the photo elicitation activity showing a mother crossing the border with her child:

I think she is a good mother because she brings her children with her. Well, one thinks that children will always be better with us, under any circumstance, than with other people. [...] I think, where I am, my daughter has to be with me, because I am her mother and no one will take care or will look for the best for her, than me. (Luisa, El Salvador)

Some women's narratives suggested that some mothers bring children with them instead of leaving them behind, not only to preserve them from generalized criminal violence, but also from possible intra familial violence and abuse. Several participants reported having been abused as children by their own relatives. These participants used their knowledge to make decisions on how to protect their daughters. Marcela's mother had migrated to the United States when she was

young leaving her in the care of relatives. She experienced an abusive situation with her uncle, which she felt was due to lack of maternal protection:

They told me many times to leave my children, but I wouldn't be doing anything because I wanted a future for them, a better future. And if I left them, I would be scared that the same relatives they stayed with could do something to them. So many things can happen, that you cannot trust anymore. My girl was already 5, the fear that something happened to her, and the responsibility, the blame would be mine for having left her. So, I didn't want to do it that way. It was going to be with them, not without them. I didn't want to leave them [...] because I know of many cases of friends or relatives that leave their children and then the children are raped or mistreated. And we do not want that for our children [...] When they stay with grandparents maybe they are safer, but if they stay with uncles or cousins, no, it is not safe [...] because I experienced a similar situation with the siblings of my mother that I never told her, and why didn't I tell her? Because [...] before nobody believed you, that was the ignorance of parents or grandparents, but maybe now, young mothers like me, that we have our daughter and had passed through the same, we know. Because I experienced a similar situation, I don't want to expose my daughter to that. (Marcela, El Salvador)

Teresa and Luz, who were also mothers of daughters, told similar stories about abuses they endured in the past influencing their decisions to bring their daughters with them.

Participants who were left behind when their mothers migrated to the United States to provide economically for them, had also suffered emotionally from this separation and did not want their children to suffer in the same way.

We never had the attention of a father or a mother, we remained there raising ourselves alone. So, when I had my children, I always promised not to do the same, and to be with them, and to provide them love, I promised that they would never suffer from lack of love and time. (Marcela, Guatemala)

Triaging and splitting up children. Some mothers in this study did separate from some of their children, by leaving some in their countries of origin and carrying others with them. As Scheper-Hughes's (1992) mothers triage what children to feed, and which ones to let die, mothers in this study also *triaged* or made selective decisions on which children to bring and which ones to leave according to survival goals. Women's narratives show that these decisions were based on different motives related to the children's possibilities of survival; these include who is the child the mother perceives would be most vulnerable if left, considering their age and the threats of violence the child had received. Raquel brought her youngest son with her and left her two oldest ones, a boy and a girl, by themselves in El Salvador to care for her small business:

He [the youngest one] was the one that was in the most danger. He was receiving threats from the maras. Because where we live, there are many gangs. So, they were threatening him, they wanted him to integrate into the gangs and I as a mother, couldn't allow that to happen [...] he is young and he has a future ahead of him. The children that enter the maras, end up in jail or death. I didn't want that for my boy. (Raquel, El Salvador)

Elena said she couldn't bring her two daughters with her; she brought her youngest daughter and left her older one with her mother in Guatemala:

One day early at dawn, I took my mother and my older daughter and I left them in a place with another family. I only took one of my daughters with me, and we ventured to cross the border [PI asked: Why did you bring this girl and leave the other one?] Because this

girl was younger. She was also the one that was receiving the most threats [she cries].

(Elena, Guatemala)

Some mothers leave behind the children that are more likely to survive in these contexts. For example, Rosa left her two-year-old daughter with her mother in Honduras and brought her four-year-old son. She explained:

Because there I had a partner, the father of my children. We lived four years together but we never understood each other. He started beating me and I couldn't be with him any longer. That is why I decided to leave. [PI asked: Why did you decide to leave with your son?] Because I had the couple, the boy and the girl, but he liked boys more than girls, so he wanted to take my male son from me, that is why I decided to bring my boy and leave my girl with my mother. He didn't like girls very much, that is why I brought the boy.

(Rosa, Honduras)

Mothers *split up* their families in other different ways according to the threats each child was facing, their possibilities of protecting them, and the opportunities they saw to find safe placements for each of their children. For example, Gabriela had four children in El Salvador with two different partners. Her first partner, the father of three of her children was living in the United States, so when her daughter started being persecuted by the gangs, she called him, and they decided to send her across borders to live with him. In order for the girl to travel safely, Gabriela gave her up in adoption to the father and his new wife in the United States. Due to economic hardship and threats, she gave her younger son to his father—her second partner—, who after himself experiencing gang threats as well, crossed the U.S. border with this child and resettled in Boston. Her two other boys also received threats, extortions and physical attacks by gang members who wanted to extort the mother for money. She fled the country with her third

son, and had to leave her oldest child, who she said was set up by the gangs, in prison in El Salvador, later arranging for a lawyer to help him out. In this case, this mother sent a child, left a child, gave a child to his father, and brought a child with her. Leaving or sending children didn't mean abandoning them; every mother in the study who had to do this, reported "keeping ties" (Hershberg, 2012) despite these separations.

Andrea and her husband were forced to split up the family because the gangs were persecuting her husband in Honduras. They had physically assaulted him in the past causing him to be hospitalized for the severity of the harm. Threats continued after his rehabilitation and his return to work, so her husband decided to cross with one child, and Andrea said she had to allow this:

So, they then sent as another note saying that he had to pay the money because if not it won't be only an accident but they would murder him. So, [she starts crying] then it is when he decides to come to this country seeking help, seeking asylum, because we had always heard that in this country there is protection, that they won't persecute you for what you have...there we worked to survive. So, he decided to come. So I stayed with the youngest daughter in Honduras [cries loudly] and it was when he decided [cries loudly] to bring the oldest girl [cries] to be able to cross here, because of her, because of that policy that they were given to parents with children. So, I aloud [cries] I allowed the oldest girl to come with him.... (Andrea, Honduras)

This family perceived that bringing a child would make it easier for the father to gain asylum protection and save his life. Ana explained:

There were rumors that when you crossed with children, they would let you in. you won't be returned to your country. (Ana, El Salvador)

Given the lack of protections from violence in the home countries, and the known difficulties of obtaining international refugee safely, some parents make decisions of bringing children with them, assuming that it would facilitate their entrance to the United States. Andrea experienced this decision as extremely difficult, she regretted it, and she said it triggered her epilepsy symptoms. She and her youngest daughter migrated a year later due to new threats from the gangs, and the family finally reunited in Boston.

Sacrificing for children. Several mothers in this study reported making *sacrifices* to keep their children alive in the precarious conditions imposed by the migratory journey, in detention, and even after arriving to their destinations in the United States. While most parents do sacrifice for their children, the sacrifices these mothers reported appear to be extreme given the precarious conditions of their lives. Typically, mothers reported suffering hunger during the journey due to giving the scarce food and water they had to their children:

So, what I did was save the food, endure hunger, but give the food to my son on the next day. Yes, I endured a lot of hunger. (Rosa, Honduras)

I tried to keep my children hydrated, give them lots of water, even if I didn't drink water. But I knew I could endure more than they could. (Patricia, El Salvador)

As noted before, mothers reported that food in detention centers was scarce, of bad quality and typically not liked by children. This resulted in mothers experiencing hunger as they gave their food to their children:

The days I was detained I almost didn't eat. They gave her food and they gave me food, but she was not full after eating her food. So, I gave her mine or I saved her mine for when she was hungry again. They gave us burritos to the adults and mac and cheese for

her, but she didn't like them. She liked the burritos adults were given, so she ate mine.

(Teresa, Honduras)

Marcela was breastfeeding while in detention; however, she also sacrificed her food to give it to her five-year-old daughter who was hungry:

[My daughter] told me she wanted to eat. They only gave us an apple and water. I only had one apple for myself. I gave it to her. I kneeled down, I hugged her and did this [she points to a picture in which a mother touches noses with her child as an act of love]. I told her, don't worry my love, eat mine, when we arrive we will have plenty of food. I promised this was the first and only time she will go through this. I asked her to forgive me, because I felt bad for putting her in that situation suffering hunger, not being able to sleep... that is not a place for children, I regret it at that time, why did I expose my children like this? (Marcela, Guatemala)

Marcela described arriving to their host destination in the United States extremely weak due to days of not eating, carrying her baby on her arms and almost not able to walk anymore.

Some mothers endured discrimination, poverty and food insecurity in their final destinations in the United States, but they said they would endure that hardship as a sacrifice to provide safety and opportunities for their children:

There was a moment in which I wished I died here in the United States. It was when they left me out in the streets. I slept one night on the street with my children [she cries] Here I was able to find food for my children, even if I do not eat...I came chubbier and now I am slimmer. But I tell them, it doesn't matter how I am, as long as you have what you need and you live happy here [she cries]. You have to study, because here they gave them the opportunity of studying. And I am proud but at the same time I am sad, what have I

come for to this country?” When everyone looks at me with other eyes, just one more immigrant, especially with all that is happening that people look at us if we were criminals. But that is how life is [...] I never asked for food while in Guatemala. Why? Why here? But one has to fight and move forward. If my children are fine, and nobody hurts them, I am happy. That is more than enough. If they are fine and happy, I am happy [...] I see them happy and I will fight for them [she cries]. (Lidia, Guatemala)

Indeed, mothers understood maternal love as sacrificial love for their children:

Mothers have to do everything for their children. You only understand this when you become a mother. Because a mother is always ready to defend their children from everything. You only understand this when you have your own children, that you can give your whole life for them. You understand that when you have the role of a mother. (María, El Salvador)

All mothers give their lives to their children, like I do, I have given my life to my children and I will continue doing it. (Lidia, Guatemala)

Making promises, creating meaning for children. Several mothers talked about making promises to their children during times of hardship to keep them animated. Some of these promises were unlikely or difficult to be fulfilled but served the purpose of supporting children’s survival or psychological wellbeing through difficult conditions, creating a meaning to the hardships endured. The testimony of Marcela in detention shows how this mother promised her daughter who was hungry in detention she will have “*plenty of food*” when they arrived. María brought her son under the promise of giving him a dragon when he arrived in the United States:

He asked me “where are we going?” I said “to Esperanza’s house”, because he loves my sister very much. “Really?” “Yes” “and my dragon?” “we will arrive soon” “I want my dragon”. “Wait”. So he didn’t bother me at all during the journey because he came for his dragon. He was excited along the journey, he came like “mammy, are we there yet? I want my dragon”. “Wait”, I said. He came for his dragon. (María, El Salvador)

Mothers have the ability of knowing what will keep their children animated, and what would protect them from suffering. This mother made the trip meaningful to the child in a child appropriate way. These stories suggest that when children are separated from their parents in detention, they not only lose physical proximity with them, but also parental resources to protect children psychologically from the hardships they are enduring. While María was able to give a toy dragon to her child, other mothers unfortunately, were not able to fulfill their promises due to poverty and material hardship in the United States, turning those promises into lies:

I promised everything to him for when we arrived here. And maybe that is what kept him animated. And now he tells me ‘mommy, you are a liar’ [...] When we were at the shelter, there were play station games, I promised him ‘when we arrive there and I work, I will buy that to you. To this day, I haven’t been able to buy anything for him [...]. Be patient, my love, I told him. Someday I will be able to buy that for you [...] He tells me, you are a liar, you will never buy it for me. (Raquel, El Salvador)

Gabriela also made promises to her child during the journey that have been difficult to achieve:

Be calm, we are almost there. We are not going to be moving from one place to another anymore. (Gabriela, El Salvador)

This family has moved six times in the United States, and this promise was unfulfilled the last time the PI met with her. Gabriela told the PI in subsequent conversations that her child begged her not to move again, something over which she had no control, despite her promises. Similarly, Elena told her daughter in Guatemala that she would soon bring her to the United States; a promise that would be difficult to fulfill in the current immigration context. Several mothers promised the children they brought that they would have a better future in the United States through accessing education and opportunities.

Among all of the things that I told her, I said ‘we are going to be better there, you will be able to study there, you are going to be able to do many things that in our country you couldn’t do. That motivated her, and she stopped crying. (Teresa, Honduras)

For some, like Teresa’s and Patricia’s children these promises were fulfilled as they succeeded in the school system receiving recognitions for their intellectual progress.

Nurturing despite difficulties and with little resources. While mothers displayed emotional resources to keep their children animated throughout the journeys, nurturing children emotionally in conditions of violence, precariousness and inadequate support was challenging for these mothers. First, mothers and children in the study had endured difficult and traumatic events, and mothers struggled to support their children to overcome trauma without access to specialized counseling services and resources, and while dealing with their own traumas:

With her, it is with whom I struggle more. Because she brings the trauma from California, I sometimes do not know what to do. Today I was laying down in bed, sick, I couldn’t lift from bed, and I said, daughter, you have to eat. [...] and she says, I have already eaten. When I ask her, what were you doing in the bathroom she says, nothing mom. But she has tears in her eyes. And my son, the one that is 16 tells me, I have to tell

you something mom, she was putting her fingers in her mouth. She throws up everything she eats. I come close to her and tell her, daughter, I hug her, what is going on? I try to bring her spirits up, and she says, mom, don't try to support me, because I do not support you. You have your own trauma and nobody helps you. (Gabriela, El Salvador)

Most mothers in the study provided emotional support to their children they brought to the United States, and to the ones they had to leave in their countries of origin. Mothers talk about supporting their children emotionally while separated in different cages in detention using signs with their hands:

Because they separated, and we couldn't be together. I did this to my girl [sign with her hands related to sleep] Sleep, I told her. And she told me sleep you too. I will take care of you she told me. Sleep. From a distance, only with signs we spoke to each other. I told her my heart beats for you [sign with the hands creating a heart]. And she signed to me and I did this to her [the sign of the heart]. (Lidia, Guatemala)

Mothers were able to express love and affection in difficult circumstances:

Because I feel that wherever we are, whatever conditions we are enduring, the love of a mother for her children, and from the children to the mother, will always be there, despite what we are facing. I always liked to give lots of love to my children. (Marcela, Guatemala)

Maternal nurturance is also related to fostering the intellectual growth of children. Several mothers in the study expressed interest in the intellectual growth of their children, however, they explained that good public education was not a resource available in the countries of origin. Providing a good education for their children was difficult due to violence permeating public schools, and their inability to afford private education. Enrolling children in U.S. public

schools shortly after arriving in the United States was the first thing many mothers did. For many of these mothers, migration to the United States also represented an act of nurturance towards the intellectual development of their children.

Journeys as re-writing of stories. Another maternal practice observed in this study is the *re-writing* of mother's past stories of violence or material hardship through the writing of new, different stories through their children. Migrating to a new context meant for some of these women starting a new page in life, where they could provide their children with a safer and prosperous future, different from what they had experienced in their pasts:

Because my life has been destroyed since I was a child. But I haven't allowed myself to fall [she cries] I have to fight. I have my daughter, she can't... she can't see my suffering. She cannot pay... or my story should not repeat in her because I can avoid it. I can avoid it, and I have always, always told God that the best will be for her. He gave me a daughter to clean [limpiar] my story. I will clean my story and she will be a good girl [niña de bien]. (Luz, Honduras)

For this mother who had been raped as a child, protecting her girl from similar events by migrating to a different context, meant "cleaning" her perceived dirty past. The personal history and trauma of several of these mothers was still present, giving meaning and influencing their recent migratory decisions. Mothers who were abandoned or left behind by their own mothers, also re-wrote a different script on motherhood through migrating with their children to remain proximate to them:

[Alba's mother] came here to work, to give the best to us. Sometimes I told her... I had several problems with her for the family. I personally was not going to leave my child, or to be separated from him, because I don't want my child to suffer what I suffered. Grow

up without mother, without a father, without any of them. I sometimes I asked my mom, ‘why?’ [she cries] I would have rather not have anything but be with her because for me the most important thing is love. (Alba, Honduras)

As these narratives suggest, mothers who were left behind by their own mothers redefined mothers’ love as proximity to their children. Mothers who were left behind by their own mothers brought all their children with them; for them migrating with their children represented a statement on the different type of mothers they were. Bringing children with them and remaining close to them, was for many mothers an act of love.

Training, or socializing, for integrity. Related to this practice of re-writing one’s life story, mothers also mentioned socializing their children to become good people and to contribute to a better world; different from the one they lived in. Many stories were filled with moral values. Mothers talked about wanting their children to become good human beings and to embrace moral values. When asked about their dreams for the children they brought to the US, mothers responded:

I wish my child becomes a good person, that he studies, that he is educated, that he is not involved in bad things when he grows up. That is what I want for my children. (Rosa, Honduras)

I want to see him grow up and become a good man. I want him to study, and when he grows up become a good man. I tell him: ‘look, when you grow up, I want you to be a policeman’, because he likes it when he sees men defending people in the movies. He tells me, ‘I want to do what they do, because they save lives, I want to save lives. He likes Spiderman because he rescues people, so I tell him, when you grow up you have to become a policeman, because they save lives [...] I also talk to him and tell him that

when he grows up he has to be good, and when he has a girlfriend, he has to respect her [...] because I suffered as a woman and I don't want him to make other women suffer.

(María, El Salvador)

Women had these moral values in their countries of origin and were afraid of not being able to realize them due to the high levels of delinquency and gender-based violence. They hoped that in the United States, children would have a safer environment away from the bad influence of delinquency in their countries and could embrace mothers' moral values. They also hoped their children could contribute to a better world, different from their world of generalized violence and violence against women they lived with, by saving lives and respectfully treating women. Migration to the United States was to these women a strategy not only to guarantee the survival of their children, but also their moral integrity.

Maternal resistance and empowerment. As mentioned in the theories of mothering from the margins, resistance is another form of maternal agency. Through migration, mothers in the study resisted—meaning refused to accept—oppressive conditions in their home countries and a “bad future” for themselves and their children. As one participating mother said:

I am here to protect him; he was not going to have a good future there. I came to run away from a bad future. (Alba, Honduras)

Another noted:

I came here because I want to move my life forward. So, I say, I hope God helps me improve myself. Because I think of my son, my son can have a better future here than there [...] I want my son to have a better future. (Lidia, Guatemala)

In these contexts of violence and poverty, and inadequate institutional protections looking out for the lives of women and children, mothers were many times alone in the responsibility of

guaranteeing the survival and growth of their children. The internalization of these maternal roles motivated these mothers and gave them strength as well as a feeling of legitimacy in contesting local conditions and also national borders, requesting asylum protections for themselves and their children. Since most of the women cited the protection of their children from violence as a reason to migrate, seeking asylum involved accomplishing not only a human right for themselves and their children but also enacting a legitimate maternal role.

Maternal migration involved resisting oppression and limits, in order to create the spaces and conditions necessary for life. Many women talked about migrating to provide better conditions for their children to grow up, conditions of safety, stability, opportunities for education and material achievements, and better moral values. Resistance also means enduring hardships to create these spaces of stability where children can have a better future (Hill Collins, 1994). Mothers reported that the idea of providing their children a better and safer future gave them strength to endure sacrifices and resist the hardships they encountered in the journey and upon resettlement.

My children give me the strengths and the motives. (Lidia, Guatemala)

[I found strength] in looking at my children. In seeing a future, that here would be maybe better for them. (Marcela, Guatemala)

What give us, mothers, the strengths of moving forward are our children. For a child, we can do anything. Because they are the engines that push us forward. Because, before all, we need to protect them. (Karla, Guatemala)

In the sense that maternal roles gave strengths to these women to resist and challenge difficult conditions across borders, it could be said that mothering and migration had an

empowering potential. For some women, their maternal role of preserving children through migration made them grow, move forward and even overcome difficult past experiences:

He is the one that motivates me to do everything. If I didn't have him, I don't know how I would have ended up being, because I want the best for him [...] I feel I have given a big step by coming here, if I had stayed there I wouldn't have achieved anything, I would have laid down into disappointment, I have done a big step, and I did it for him. (María, El Salvador)

Mothering and migrating were both not only difficult but also empowering practices. Indeed, several women reported feelings of growth related to their act of migrating with and for their children.

Research Question Three: Impacts on Maternal Mental Health

As mentioned before, the study collected data using the Harvard Program in Refugee Trauma versions of the Hopkins Symptom Checklist-25 and the Harvard Trauma Questionnaire (Mollica et.al, 2004) to assess depression, anxiety and PTSD, in order to observe some of the possible mental health impacts of living and mothering in such unfavorable contexts. The PI obtained permission from the Harvard Program in Refugee Trauma to access and utilize these screening tools. These tools assessed mental health at the time of the interview, when participants were already in the United States. Sixteen women participants completed the scales; one didn't because she had to leave the interview earlier and follow up was not possible. The interview protocol also used open-ended questions to ask mothers how they were feeling at the moment of the interview, or how they felt in the different situations they narrated during the interviews. The narratives including feelings allowed some understanding on the particular sources of distress for study participants.

Figure 7: Results from Mental Health Scales on the HSCL-25 and HTQ. Prevalence of anxiety, depression and PTSD in the sample of mothers

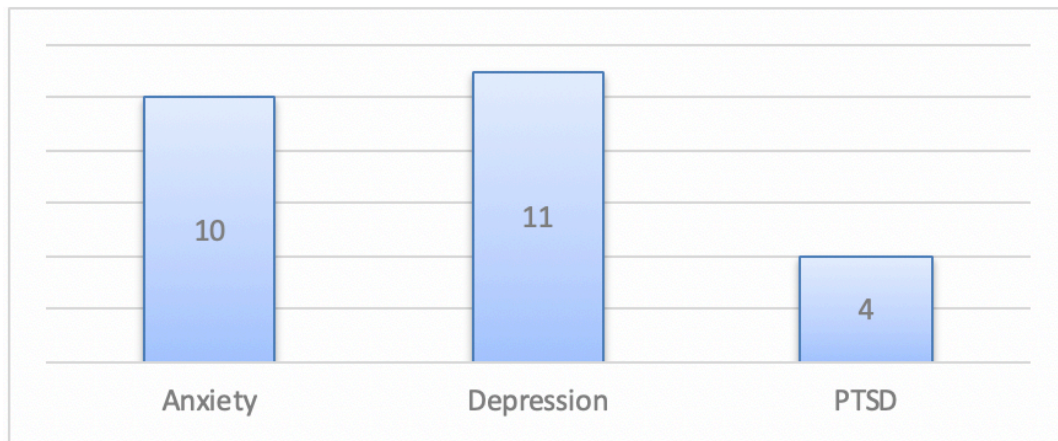
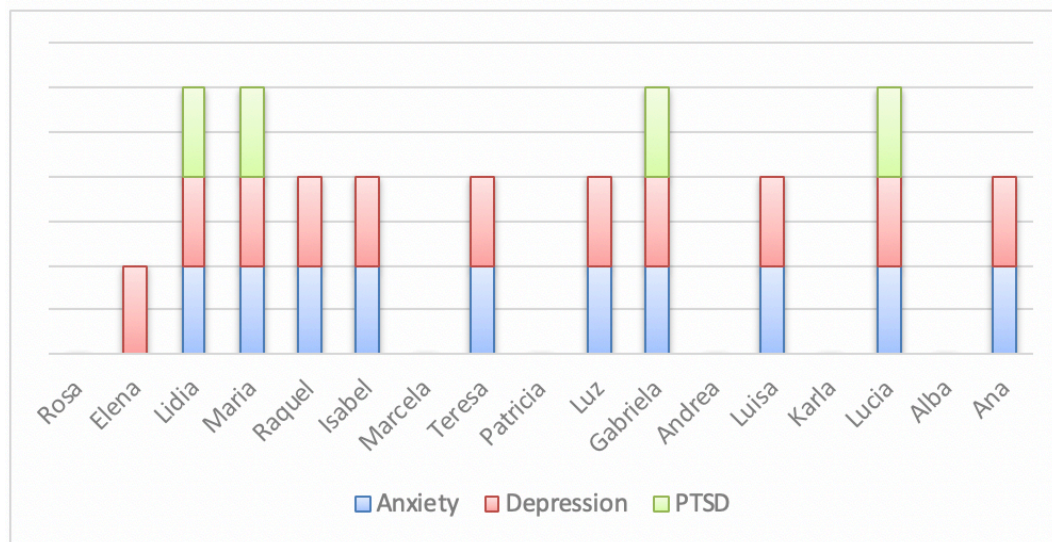


Figure 8: Mental health problems per study participant



Note: Andrea didn't complete the scales, but said she was diagnosed with depression, and reported symptoms of anxiety for which she had to be sedated. It is possible that she had PTSD. Rosa, Marcela, Patricia, Karla and Alba didn't score for any of the mental health problems assessed.

As presented on Figure 7, 11 out of the 16 women who completed the scales showed evidence of depression (about 70% of the sample), 10 had anxiety (about 60%) and 4 (25%) had PTSD. The prevalence of depression is considerably higher in comparison to Keller et al (2017) findings, where only 24% (36 of 148 that completed the PHQ-9) reported symptoms of depression. This study also used a different instrument to assess depression, and this could explain some of the difference. Also, Keller et al. (2017)'s sample, included some men and the questionnaires were administered in shelters at the border, and not upon resettlement²². Women tend to be more sensitive to traumatic experiences (Kellezi & Reicher, 2014) and both men and women could feel more symptoms of depression when they find how difficult it is to resettle in the United States; which as seen in this study could be even more difficult for women who are single mothers. The prevalence of PTSD was slightly lower in this sample in comparison with Keller et al (2017)'s study, in which 32% of participants reported PTSD (51 out of the 157 that completed the HTQ). This could also be due to the different moments the questionnaires were administered. Notably, the prevalence of PTSD in this sample and in Keller et al (2017)'s study was higher than the prevalence of combat-related PTSD in U.S. military veterans since the Vietnam War, which ranged from about 2 to 17% in different articles reviewed on the topic (Richardson, Frueh, & Acierono, 2010). The prevalence of men in military veterans could play a role on these differences, considering that women can be more sensitive to trauma.

As illustrated on Figure 8, four (29%) participants showed evidence of depression, anxiety and PTSD; and six (37%) showed evidence of depression and anxiety. Scores on five participants out of the 16 who responded (about 30% of the sample) revealed that they did not have any of these mental health problems, despite all of them having endured at least four of the

traumatic experiences listed on the HTQ. The participant that did not complete the scales still reported feelings of depression, symptoms of epilepsy, and having to be “sedated” with medicine, which she related to her separation from her oldest daughter due to migration. These could be symptoms of anxiety, depression and PTSD.

Despite the prevalence of mental health issues, only one of the study participants reported accessing counseling or other mental health services. Some participants were treated for anxiety or neurological problems by emergency rooms physicians or primary care doctors.

All participants in the study reported enduring at least some of the traumatic events listed on the HTQ, as shown on figures 2 to 6. All women reported running away from conditions of violence, and violence was directed at them, their children or direct members of their families. They also reported many hardships during the journey to the United States and upon resettlement, reporting conditions of precariousness threatening their physical integrity and that of their children, situations of abuse or mistreatment, and uncertainty over the resolution of their asylum claims. All these events were sources of distress for these mothers and could explain the prevalence of mental health problems.

The impact of traumatic events accumulated across borders. Luisa explained:

One gets out of there and from the trip to there, completely traumatized. One feels it is a nightmare, and you don't realize you have arrived. [The nightmare] was the entire journey, everything that we had to endure [the PI asked about her feelings of reunifying with her mother in the United States] Well, in that moment I didn't even know what I was feeling. As I told you, I was so...I was left like this, like am I here or am I not? I don't know. I didn't feel emotions. I didn't feel anything, absolutely nothing. I felt like...I don't know, like a zombie. (Luisa, El Salvador)

It is likely that refugees or asylum seekers have personally experienced traumatic events that can lead to negative mental health outcomes. This study suggests that for refugees and asylum seekers who are mothers or take care of children, it could be even more difficult as they are affected by the events they endure, but also by the events their children endure. This adds a second layer of accumulation of trauma for refugees who mother: the one experienced personally plus the one experienced by their children. Gabriela reported that the most distressful event for her was that her son was unfairly imprisoned in El Salvador because the gangs used death threats to push him into participating in their criminal activities. She also reported as very difficult the sexual abuse endured by her daughter, and the kidnapping of her son by the gangs. While kidnapping of children is included as a traumatic event on the HTQ, imprisonment or abuse of children are not listed on this scale. Gabriela said:

When I arrived, I had the trauma of my son [the one imprisoned after being extorted by the gangs,] the trauma related to what happened to me, and I knew how much my daughter was suffering [she was living with her abusive father and stepmother]. With a lawyer, I was able to get my daughter back, but I cannot really get her back. Because her father when he saw her, he tried to sexually abuse her [her stepmother forced her to work for them] after feeling treated like dirt she got traumatized. And I cannot lift her up.

(Gabriela, El Salvador)

As observed, there are particularities in how asylum seekers and refugees who mother endure trauma, particularities that are not completely captured in generic instruments like the HTQ. Protecting children from violence and further traumatization was the main reason to seek refuge for these asylum-seeking mothers. Luisa expressed:

[I came here] mainly because of the father of my daughter. I was separated from him, however he still came and looked for me, and he got my family in trouble. He drank a lot. He took my girl, she was little, 3 or 4 years old, she took her away several times during mid night, while being very drunk. The girl was sick of her nerves. She cried all the time. So, many things like this happened, that was what motivated me to come here. (Luisa, El Salvador)

As noted in the previous section, another particularity of refugees who are mothers is that they struggle to support their children to overcome trauma, while dealing with their own traumas, without access to mental health services. This brought distress to some of these mothers, as maternal love alone does not cure the wounds traumatic experiences leave in children.

The findings from this study also suggest that negative mental health outcomes or negative feelings were also related to difficult maternal practices, such as leaving children in their countries of origin, sending children across borders with others, lying to children, or risking children to suffer during the migratory journey. While acknowledging the difficult circumstances that led into these practices, mothers expressed feelings of regret or guilt by blaming themselves for the suffering of children. Elena commented:

In theory we hurt our children bringing them here as we bring them, suffering from hunger, from everything that happens [...] When I saw my daughter behind bars [in detention] I said to myself: ‘What have I done?’”. (Elena, Guatemala)

Rosa crossed with her son and left her daughter at the care of her mother:

“Thinking of my daughter, I say to myself: how could I have left her? Guilt, guilt is something that one feels.... (Rosa, Honduras)

Gabriela also felt some guilt for sending her daughter to live with her abusive father in the United States, although she acknowledges the difficult circumstances she was in:

Could it be that I am guilty for having sent her? But I was forced to do it, because of what was happening. Could it be my fault and that is why she is not eating? Because I sent her and she came here to suffer a great deal with her stepmother and her father. Maybe that is why she doesn't eat [...] What would have happened if she stayed in El Salvador? If she stayed there, they would have kidnapped her from me, maybe she would have been raped, or maybe they would have murder her, without me being able to denounce it [...] When I see my daughter shut down, without wanting to eat, depressed, I feel worse because I feel guilty. (Gabriela, El Salvador)

Andrea also reported negative health and mental health problems, which she related to allowing her older daughter to cross the U.S. border with her husband:

I was not so scared of the threatening notes the Maras left me, it was that my eldest daughter started crying, the one that was here, because she didn't want to be here without me, so [she starts crying] I suffer from epilepsy.[...] The neurologist told me it was because of this. I suffered a lot of stress, so that is why I got this so often. So, I told the neurologist that I couldn't get that weight out of me. My little one had come here! [she cries]. Because at one moment I fell into stress, because there was a moment when I said why had I allowed my daughter to come, my eldest daughter to leave my country. When I looked at the news on how horrible it was to cross the border, I started to feel bad about myself, I said why have I accepted this [she cries]. There were many times I blamed myself for this. [...] I fell into a depression. The doctor had to keep me sedated so I didn't feel. (Andrea, Honduras)

The PI also perceived a tone of apparent detachment from one of the mothers who left her young daughter in her country at the care of her mother. Similar to Scheper-Hughes (1989) observations, this mother seemed to tell the story of this separation without any feeling. However, she did say later on in the interview that she felt guilty about this decision, and she also said she had plans to build a house for that daughter in her country of origin. Maternal detachment or apparent detachment can be symptomatic of trauma, commonly seen in clinical practice with refugee women, according to De Novo's director, M. Rohani (personal communication, October 16, 2019). The practice of separating from their children appeared to be a big source of suffering for these mothers. As observed in previous sections, the practice of forceful separations in detention and the mistreatment and blaming involved in this practice also inflicted pain on mothers.

Life in the United States presented participants with new hardships, such as not having a stable and safe place to relocate with their children. Seeing children suffering from precarious conditions and instability also triggered feelings of sadness:

Without knowing anyone I arrived. His family, I don't know who it was, his niece, they gave us a room where to stay. I didn't have anything more than my clothes; I didn't have any place to sleep. Nothing. Nothing. Nothing. They allowed me to stay there for some days. I stayed there with my girl. They gave me something like a sofa to stay with my girl. They had it there. It was ugly, very ugly. I didn't know anyone. And I was far away from my family, without the support of anyone. And the worse was that I was with a child, that doesn't have to go through all this. (Luisa, El Salvador)

Sometimes seeing children's sufferings moved mothers to continue fighting:

Let me share something with you, when I came home yesterday, my son was kneeling on the empty room praying to God [they were about to become homeless after several relocations]. I felt I wanted to die before seeing him doing this, but I need to continue fighting, for him. (Gabriela, El Salvador)

For some women, negative feelings co-existed with positive feelings of relief and happiness related to experiencing greater safety in the United States:

[I feel different here] maybe because I am far away from all the things that hurt me. I feel calmer, I know I will go to sleep and I will sleep well, things like that. I feel tranquility by being here. [...] I feel safe being with my daughter, knowing that I can do my life, go out with her, do things, share things with her and no one will come to take her away from me or to do things to me....(Luisa, El Salvador)

Despite this feeling of safety, Luisa also reported feeling anxious over the possibility of not securing asylum and being deported to the situations from which they were running. For many, feelings of anxiety were also related to inability to secure stability, access adequate jobs to provide for their children, and find adequate housing for shelter.

Children's success in schools made mothers feel good and also proud. Children's happiness and educational achievements gave meaning to all the hardships mothers had endured in the journey and in the United States. Participants shared the joy of seeing their children make friends, speak English, and receive school awards or recognitions. Moreover, some mothers experienced growth related to both the practices of migrating and mothering:

Sometimes I didn't go out to the street, for that fear that I had [after the murder of her mother]. People told me: 'go out', 'No, I am scared' [...] I asked God to please take that fear out of me [...] And when I decided to leave, I came without even thinking about it. I

admired myself. 'How did I have that courage?' I said to myself. I admired myself! [...] I feel I had gained courage and independence [...] to come here and to fight for him [her son]. (María, El Salvador)

I have the strengths, the courage to do things. Yes, sometimes the things that you go through can make you stronger. Especially when you have children, I think that you, as a mother, will understand this [...] Now I have seen that despite the circumstances, I was able to move my daughter forward all by myself [...] I have demonstrated myself that I am capable. (Teresa, Honduras)

Imagine, leaving the country by myself, with my child, that takes a lot of courage. I realized I am braver than what I thought I was. (Alba, Guatemala)

The empowering potential of mothering and migration was represented in these narratives of growth. Mothers draw resiliency and strengths not only from their children, but also from their faith. Mothers felt that God guided them and protected them on their journeys and maternal roles. Lidia said:

We praised God throughout the journey, wherever we were with my children, and we prayed to God for many things. God protected us that we were not bitten by any animal, that nothing happened to my children and me. God protected us. We did suffer from hunger and thirst, I don't deny that, but we didn't suffer from any thing worse. The roads are dangerous, everything can happen, but God is the only one, he got us here. Now, I have to continue fighting [...] I have God is big and God always have that caress. (Lidia, Guatemala)

The PI discussed this finding on spirituality with Gabriela from El Salvador during the member check-in interview. She explained that God protects mothers because they are the ones

that protect God's children, and she cited several moments in which she felt God gave her strengths or saved her and her children from danger.

This section has presented the findings on the three research questions. It has explored women's descriptions of the contexts in which they have lived and transited, and their maternal practices to sustain their children in the difficult conditions imposed by these contexts. This section has also presented the results of the mental health scales, assessing maternal mental health at the moment of the interview. At the same time, it has presented women's stories describing their sources of distress, as well as their sources of resiliency, strengths and empowerment. The next section includes a discussion of these findings in relation to existing literature, and proposes implications for policy, Social Work practice and scholarship.

Chapter VII: Discussion

This study was designed to explore the contexts in which 17 Central American women seeking asylum in the United States. have lived and mothered, as well as the maternal practices that arise from these contexts. It has contributed to the literature by making this group of marginalized mothers visible, by bringing their voices, acknowledging the hardship of their contexts and valuing their difficult and exceptional maternal practices (García Coll et al., 1998). Findings show that these contexts were defined by a continuity of different forms of violence, precariousness and institutional neglect that transcended international borders; and that their maternal practices were mostly focused on preserving their children's survival and wellbeing. Both experiences and practices arising from these contexts impacted the resistance and self-empowerment as well as the mental health of mothers.

To the author's knowledge, there is a scarcity of research that explores the interplay of context, maternal practices and maternal mental health for marginalized immigrant women, using human rights and feminist frameworks. Moreover, while there is a vast body of literature on transnational mothers, mothers who migrate "to provide" economically for their children who stay in their countries of origin at the care of others (see Hondagneu-Sotello & Avila, 1997; Parreñas, 2003, 2005, 2010, 2011, 2012; Cheng, 2007; Dreby, 2010; Hershberg, 2012, Naidu, 2013; Oliveira, 2018, among others); very few studies (see UNHCR, 2015) have investigated the realities of migrant mothers that decide to "run away with children" in order "to protect" them from violence. This study contributes to a deeper understanding of the recent increasing trend of more Central American women crossing international borders with their children, as a response to increased levels of violence in the countries of origin (IOM, 2015; UNHCR, 2018; Hallock et al., 2018).

Ultimately, this study contributes to feminist research by describing the differential experiences of immigrant mothers of color. From an intersectionality theory perspective, these women were oppressed by different systems of power (Crenshaw, 1991; Collins & Chepp, 2013; Hesse-Bieber, 2014; Esposito et al., 2019). These systems operated along both sides of the border. What appeared more clearly was that these immigrant mothers of color were oppressed by gender ideologies in their countries of origin, and by nationalist and racial ideologies after crossing borders. However, there were differences within the sample. The findings suggest that racial ideologies were also present in the countries of origin affecting the experiences of Indigenous women; the mother who identified herself as Garífuna, Teresa, for example, described experiences of racial discrimination in Honduras. Socioeconomic status also affected the experiences of poor mothers in their countries of origin; Lidia, for example, reported being discriminated in Guatemala because of her job as a domestic. At the same time, gender ideologies, gender violence and gender discrimination also affect immigrant women in the United States (Yakushko & Morgan-Consoli, 2014); as observed, Gabriela's teenage daughter was sexually abused in the United States. These systems of oppression at both sides of the border had shaped in different ways each woman's social experiences and material realities (Collins & Chepp, 2013), their mothering practices, and their wellbeing. Despite their differences in race, socioeconomic status and educational levels, all mothers in the study experienced violence, and all but one experienced precariousness or deprivation at different moments before, during or after migration.

A Context of Violence across Borders

Stories of violence and gross human right's violations were prevalent in the narratives of these mothers. All participants cited violence as the main reason to leave their countries;

however, similarly to Lykes & Hershberg's (2015) study with Mayan migrants, violence continued across borders "producing ongoing and seemingly ever-present suffering" for them (p.250). Few studies have observed the accumulation of violations across borders and their impacts on immigrant's mental health (Lykes & Hershberg, 2015; Esposito et al., 2019; Lusk & Galindo, 2017; Lusk & Chaparro, 2018).

This study showed that violence disrupted the everydayness of the lives of mothers and children, notably in their countries of origin. Indeed, the majority of the traumatic events reported occurred in the countries of origin, signaling the severity of those local crises, as already denounced by the UN and others (UNHCR, 2015; UNHCR, 2017; Amnesty International, October 2018; Lusk & Chaparro, 2018). The findings for this study confirmed what others have found in terms of the type of traumatic events endured by Central Americans triggering their decisions to flee (UNHCR, 2015; Keller et al., 2017; Labrador & Renwick, 2018; Dotson & Frydman, 2017; Lusk & Galindo, 2017; Lusk & Chaparro, 2018; Amnesty International, October 2018). The study adds to the existing evidence on women and children's high risk of human rights abuses and trauma in settings of conflict (Akinsulure-Smith et al., 2008, Bridgen, 2013; Rosenblum & Ball, 2016; Hallock et al., 2018), and contributes to this literature by illustrating how human rights abuses and trauma are experienced in particular by women who mother. It also contributes to the literature on forms of violence against women of color and human rights across borders (Smith, 2004).

Among all the violent events mothers in this study reported, one stands out: mothers experience the constant threat of being ripped away from their children, or having their children hurt physically or psychologically. Mother's love and protective stance toward their children make them easy targets for criminal groups or violent individuals. Gang members threaten or

attack children in order to extort mothers for money; violent partners or ex-partners threaten mothers with taking away their children in order to punish mothers or control their behaviors. While most studies document rape and sexual violence as the prevalent forms of gender-based violence (UNHCR, 2015; Lusk & Galindo, 2017; Lusk & Galindo, 2018) the tactics documented in this study also constitute prevalent forms of gender-based violence specifically targeted to mothers.

As observed, mothering in contexts of violence involves mothering with the fear of or the realized threat of losing children due to death or forced separation. It also involves the concern of raising children in environments that lack respect for human rights and morality, and fearing that their children would be negatively influenced if they stayed in those contexts. Mothers in this study felt that local institutions failed to protect women and children from these threats and to guarantee peaceful and prosperous societies (Cruz, 2015). Central American asylum-seekers' distrust of public institutions was also observed in other studies (Keller et al., 2017; Amnesty International, October 2018). As a consequence, migration to seek asylum in the United States arises as the only maternal practice that can assure the survival, and also the moral integrity of children.

Despite running away from violence, violence continued while migrating, even though mothers reported decreases and different manifestations. Similar to the Paris (2008) study, women endured frightening situations and experienced fear of assault by coyotes or others. However, unlike many studies on the experiences of migrant women (Falcón, 2006; Vanderpool, 2008; May & Quinteros, 2012; De las Fuentes et al, 2013; UNHCR, 2015; Ramji-Nogales, 2019), none of the women participants reported being sexually assaulted during the journey. Possible reasons for this discrepancy were discussed in the findings section; some mothers cited

their wisdom to perceive dangerous situations and the carefulness with which they selected the smugglers they would hire given that they were traveling with children.

This study also found that for mothers, the threat of their children being ripped from them continued across borders. Women talked about the fear of strangers kidnapping children on the road. Upon arrival in the United States, six women were actually separated from their own children—or younger siblings they cared for—while in detention. The study adds evidence on the practice of family separation and its negative effects on families (Schriro, 2017; Wood, 2018; Amnesty International, 2018; Monico, Rotabi, Vissing, Lee & Justin, 2019), specifically focusing on maternal mental health. The findings highlight that the threat and the practice of separation of mothers and children is both used by violent non-state actors in their countries of origin and transit, and by state actors in the United States. In all cases across borders, these practices appear to be used to control the behavior of mothers either to do or not to do something: to give money or other favors to violent groups, to deter them from seeking refuge with proper authorization in the United States. Separation from their children—or children they cared for—was described as one of the most painful experiences for mothers. As such, this practice can be considered a particular case of gender-based violence against this group of mothers, a practice that reproduces itself along and across borders. Some scholars and advocates have considered this practice as torturous (Amnesty International, 2018b; Ramos, 2018; Metha, Miller & Reisch, 2019)²³.

Women's narratives suggest that violence typically decreased upon arrival to their host

²³ Amnesty International Americas Director, Erika Guevara-Rosas had stated: "This is nothing short of torture. The severe mental suffering that officials have intentionally inflicted on these families for coercive purposes, means that these acts, meet the definitions of torture under both US and international law" (Amnesty International, 2018b).

destinations in Massachusetts, and most women appreciated the safety of the United States. However, similarly to Yakushko & Morgan-Consoli (2014) study with immigrant women, instances of discrimination made mothers feel uncomfortable. Given the absence of more formal institutional structures to host and support asylum seekers, these mothers were forced to draw on “informal networks” (Lusk & Galindo, 2017) for refuge upon resettlement. This study has found variability in terms of the treatment received by participants from their sponsors and informal networks. Some sponsors were generous and provided for the needs of asylum-seeking mothers and their children. Some others failed to provide the necessary and continued support, and some perpetuated further abuses similar to what Yakushko & Morgan-Consoli (2014) and Hollock (2018) studies found. As a consequence of informality, resettlement experiences varied, with some mothers and children who had their human rights fulfilled and others were once again violated.

Poverty and Precariousness

Poverty and precariousness were other difficult conditions of these contexts. Lykes & Hersberg’s (2015) and Esposito et al. (2019), studies showed how these conditions continue across borders adding extra layers of suffering to immigrants from this region. This study has contributed to this literature by showing how poverty and precariousness can affect the lives of asylum-seeking mothers and their children.

As described on Chapter II, mothers from this study come from countries that are ranked among the poorest in Latin America and the Caribbean (IOM & WFP, 2016). These are countries in which poverty also disproportionately affects women (Medeiros & Costa, 2008; FAO, 2017; CIA, 2019; UNGEOLAC, n.d.). Single mothering and female-headed households—associated with higher levels of poverty—are common in these countries as a result of machismo where

fathers tend to abandon their children (Sara-Lafosse, 1998; Musalo, 2018). This study reflects the prevalence of single mothering, with 70% of the mothers being single at the time of crossing the border due to abandonment, separation, or becoming a widow. Similar to Paris (2008), some of them experienced economic difficulties in supporting their children, and this was another factor that influenced their migratory decision. However, all mothers cited violence as their main reason to flee and specific violent events as the triggers of their final decision to leave. As such, they could be considered forced migrants that escape violence, and not economic migrants who only seek economic opportunities (Lusk & Galindo, 2017).

This study found that in the countries of origin, precariousness was inflicted not only by the structural conditions of poverty and inequality, but also by criminal groups who extorted mothers for money, forcing them to close their businesses and taking control of their properties. Through extortions and threats, gangs deplete mothers from the livelihoods they have to support their children. These findings provide evidence on the relationship between violence, poverty and migration (IOM & WFP, 2016), shedding light, in particular, on the links between gender-based violence, the “povertization of women” (Lombe, personal conversations, April, 2019) and the migration of mothers.

Precariousness continued along the migratory journey. Basic needs such as food and water, medicine, and shelter from the weather were not fulfilled for many in this group of asylum-seekers who did not have safe and formal routes through which to seek refuge. Similar precarious journey conditions were reported in other studies with migrants from Central America (Paris, 2008; Lusk & Galindo, 2017; Lusk & Chaparro, 2018). These conditions can be detrimental for children, or for mothers due to their extreme sacrifices of going hungry and thirsty for giving the scarce food and water they had to their children. Mothers who were

breastfeeding and carrying infants also reported sacrificing their food for their children. If the mothers get sick or die on the road, infants and children's lives would be at greater risk.

The moment of detention implied the confiscation of the few personal possessions these mothers carried with them. The confiscation of their clothes and those of their children before entering the cold iceboxes kept at below normal and unfamiliar temperatures left them in conditions that threatened their health. Cruelty and mistreatment were present in some of these acts that also inflicted precariousness; including the ripping away of children's comfort objects. Some mothers thought these acts were done on purpose to make them suffer and want to return to their countries of origin. Conditions in detention were precarious—and inhumane—in relation to the inadequate supply of food, the overcrowding and the lack of basic sanitation described by the women, and documented in the literature (Villalobos, 2011; Schriro, 2017; Franco, 2018).

Upon arrival to host destinations, asylum policies that do not guarantee lawyers to advocate for the women and their children's asylum, the delay in the acquisition of work permits, and the absence of supports—that are granted to those formally considered refugees—contributed to creating new conditions of precariousness for these families. This is similar in other host countries in the world, where “enforced poverty is a central feature of the asylum policy together with poor housing and a reduced level of welfare benefits” (Chantler, 2011, p.323). In this study, several mothers faced inadequate access to housing, decent livelihoods, and, in some cases, heating, furniture, clothes and food. Single mothers with young children who were restrained from work due to childcare responsibilities, as well as those who couldn't find supportive sponsors were specifically affected. The hardships immigrant women who are single mothers face upon resettlement have also been described by Yakushko and Morgan-Consoli (2014). While enforced poverty appears to affect all populations of asylum-seekers, it is more

concerning for mothers and children who are considered more vulnerable and in need of special protections (UN Universal Declaration of Human Rights, 1948, CEDAW, 1979). Especially critical is the inadequate access to appropriate heated shelter, and clothes in the cold weather of Massachusetts, and the cases of food insecurity reported by some mothers who did not have information on food banks or could not access them.

In Massachusetts, however, access to health services through Mass Health²⁴ and to public schools was guaranteed. In the Boston area, there is support for immigrants, because despite the difficulties, with time, several women were capable of finding jobs that, although humble, allowed them to cover their basic needs. During the migratory journey, in detention and upon arrival women narrate stories of what they called “angels” who were volunteers along the road, kind immigration officers, generous sponsors, or staff—including lawyers—and volunteers from community organizations who took compassion on them and their children and offered them food, water, clothing, words of relief, services and supports. Other studies have also documented cases of asylum-seeking mothers being helped by neighbors in the communities they transited through (Lusk & Galindo, 2017; Lusk & Chaparro, 2018). Lusk & Chaparro (2018) documented that the hardships encountered by migrants from Central America on the migratory journey “were surprisingly balanced by the *kindness of strangers* and *informal networks* of fellow travelers who helped along the way” (p.11). These stories of “angels” speak to a prevalent sensitivity to the special situation and needs of asylum-seeking mothers and their children, despite the anti-immigration rhetoric promoted by the current U.S. administration. These stories also show how the global humanitarian crisis of asylees and refugees is responded to by local

²⁴ Mass Health offers affordable insurance for low-income populations in Massachusetts.

communities, as asylees are integrated into and do receive some protections in these communities. As Wells (2004) points out:

Despite the increasing constriction of migrants' rights at the federal level, local responses have been much more varied, countering, compensating for, even transforming policies originating from the national core. The result has been a reaffirmation and protection of immigrant rights at the local level. (p.1)

A Context of Institutional Neglect

In international laws, national governments are considered duty-bearers in the protection, respect and fulfillment of human rights (UNDP, 2008), and through which mothers and children are entitled to special protections and assistance (UN Universal Declaration of Human Rights, 1948, CEDAW, 1979). However, as observed, women's narratives describe a failure of national and state institutions in the countries in which they lived and through which they transited to protect many of these rights. As proposed in Chapter II, these mothers can be considered a *stateless population*, as none of the nation states in which they live, mother and seek refuge assume a serious responsibility of protecting their rights and those of their children, and in cases produce further harm.

The fact that mothers and children have to flee their countries in order to survive, speaks to the institutional failures in their countries of origin to protect basic rights of their citizens, and about their neglect to implement legislation that specifically protects women and children. In these local contexts fueled by corruption and machismo, mothers are often the sole protectors and promoters of the right to life of their children. Similar to other studies with immigrants from Central America (Keller et al. 2017; Dotson & Frydman, 2017; Lusk & Galindo, 2017; Menjívar & Walsh, 2019), women in this study did not trust local institutions due to their inefficiency,

corruption or *machismo*. They reported that migration was for them the only way to protect themselves and their children.

The fact that in order to seek protection, mothers have to expose themselves to dangerous routes and risk their children's lives, also speaks to failures in international agreements between countries to provide safer ways of seeking asylum for this group of migrants fleeing violence, as pointed out by Ramji-Nogales (2019). The reports on lack of food, water, shelter, medicines and other basic needs, talk about a failure of institutions to protect rights along the migratory journey. The basic rights to food, water and shelter are essential to fulfill the right to life while migrating.

All women in the sample were allowed to stay in the United States temporarily until they could prove their asylum claims. In this sense, part of their human right to seek asylum was fulfilled; many of them felt safer in the United States, away from the violence experienced in their home countries. Nevertheless, due to difficulties in the processes of seeking asylum, the right to finally obtain asylum might not be realized by these women regardless of how valid their claims could be. Mothers who were poor or have been impoverished due to violence in their home countries, and high fees paid to coyotes, find it extremely difficult to pay immigration attorneys to help them with their asylum applications and with the acquisition of work permits. Thus, their right to asylum and their right to work—though inherent and recognized—are not easily exercised given their financial difficulties and the insufficient number of pro bono attorneys.

Rights are related, and the rights to food and to appropriate shelter cannot be exercised without having the right to work, or without the right to receive institutional supports for refugees. If asylum were to be secured, these participants would be considered refugees and would receive permits and services. However, the difficulties in proving asylum and the waiting

procedure times leave them in situations of legal precariousness (Paret & Gleeson, 2016). The U.S. government is incurring institutional neglect by not acknowledging the constraints and facilitating the processes to obtain asylum to populations with valid claims.

Some other practices from the United States towards asylum seekers described in this study speak more of institutional violence than institutional neglect. These institutional practices appeared to be more focused on the punishment of those labeled as “illegal”, or on the deterrence of the unwanted other, than in the reception, evaluation of claims and protection of human beings exerting their right to asylum. Several mothers in this study were attacked and mistreated in detention; they were forcefully separated from children while being blamed for bringing children with them. Several mothers suggested that racism was behind these practices. The separation from children and the mistreatment mothers received vilified them, disrespected maternal authority and devalued mothers in front of their children. This could be considered as a form of disempowerment of these mothers, and “as systematic effort to disempower racial ethnic communities” (Collins, 1994, p. 53). The mistreatment of asylum-seeking mothers at the border, and the attack on asylum policies especially affecting women from Central America (Mejivar & Drysdale Walsh, 2018) could relate to the conceptualization of migrant mothers of color as strangers, “undesirable reproductive bodies”, and a threat to a racial-state (Lentin, 2004). This suggests that international humanitarian policies and international rights to asylum for mothers and children fleeing violence can enter in tension with the needs of protection of the nation/racial states, producing contradictory, inadequate and sometimes violent institutional responses. In the same way that there are tensions between the implementation of international human rights frameworks to protect women in developing nations, and cultural and religious beliefs (Engle Merry, 2006), there are also tensions in developed nations between international asylum laws

and national ideologies. This also calls for the problematizing of the role of governments from nation/racial states as appropriate duty bearers in the protection of mothers and children from other nation/racial states.

Wilkström (2014) points out to other contradictions some global powerful nations incur in their response to the crises of forced migrants. “Human rights-based arguments used extensively to condemn barbaric or primitive practices occurring in non-western countries but not to protect victims of such practices who are seeking refugee” (p. 2010).

This study has provided evidence of the multiple cumulative human rights violations—and neglect of rights—mothers and children from Central America have endured, producing a “seemingly unending suffering” (Lusk & Chaparro, 2018, p.10) and making mothering both difficult and “exceptional” (Greenspan, 1998, p.37).

Maternal Practices

This study aligns with feminist research on mothering from the margins, and has analyzed how mothering unfolded and was affected by a specific socio, historical and geographical context (Scheper-Hughes, 1992; Richardson, 1993; Collins, 1994; Garcia Coll et al., 1998; Liamputtong, 2011; Naidu, 2013). The findings have contributed to the call for more literature on marginalized mothers, including immigrant mothers (Collins, 1994; Garcia Coll, 1998; O’Reilly, 2007; Yakushko & Morgan-Consoli, 2014), specifically focusing on asylum-seeking mothers from Central America. It has documented the difficult maternal practices these mothers embraced to assure the survival, and the right to life, of their children.

Ruddick (1989) has stated that maternal work was targeted towards the preservation, the emotional and intellectual nurturance, and the social acceptability of children (Ruddick, 1989). This study has found that due to the conditions in the contexts, the energy of these mothers was

more focused on the preservation of children's lives. This supports Collins (1994) who has highlighted, that maternal practices for women in marginalized positions are much more related to keeping children alive in harsh environments—in comparison to more privileged white middle class women whose children's physical survival is generally guaranteed. Mother's stories show evidence on the extreme maternal sacrifices and the extreme decisions mothers make to preserve their children's lives and to provide safer spaces for them to develop. Maternal sacrifices have been documented in other studies (Lusk & Galindo, 2017; Lusk & Chaparro, 2018).

Some of the difficult maternal practices towards the preservation of children have been described in the literature. These include “becoming mobile” across borders (Naidu, 2013) and leaving children behind (Paris, 2008, UNHCR, 2015; Lusk & Galindo, 2017; Lusk & Chaparro, 2018). Practices of triaging (Scheper-Hughes, 1989, 1992) were also present in this study, in this case, mothers decided which of their children to leave and which ones to bring according to the risks each child was facing or could face in their countries. This study also described practices of “splitting up” siblings by relocating them with different caregivers, and practices of consciously risking children and infants along the treacherous journey. This study documented how mothers worked not only for the physical preservation of children, but also for their psychological preservation. Through migration, mothers removed children from traumatizing situations and abusive family members, and they utilized discursive practices to create meaning to the hardships children were enduring on the road and in detention. Practices of removing children from loved ones in the countries of origin, and lying to them was difficult for mothers to do, and for children to understand.

This study showed that while their main maternal work was related to the preservation of children, mothers also pursued the emotional and intellectual development of children (Ruddick,

1989). They did this through nurturing practices that allowed children to feel supported and loved in harsh circumstances; and through making education available for them by quickly registering them in United States public schools so they could have “a better future”. Mothers also engaged in training maternal work (Ruddick, 1989) by pursuing, through migration, the moral integrity of children; their growing up into “good people” away from the culture of violence and delinquency they perceived in their home countries. This can suggest that the difference with white middle class mothers, might not reside in different maternal roles, but in the difficulties that marginalized mothers endure while trying to perform those roles. Maternal work for marginalized mothers requires enormous amounts of extra energy, effort, sacrifices and risks. It also involves deep emotional pain related to the hard decisions they are forced to make such a separating from children, separating siblings and risking their children to many sufferings.

Maternal work for this group of marginalized mothers also involved resistance (Collins, 1994; García Coll et al., 1998; Aptheker, 1998). Resistance of the eminent death or abuse of their children if left in their countries of origin; resistance to violence, poverty and neglect; resistance to oppression and the limits imposed by borders; resistance to repeating the past or to “a bad future”; resistance to extreme hardship in order to survive and to find better spaces where life is possible (Collins, 1994).

Maternal Mental Health

The prevalence of depression, anxiety and PTSD found in this sample of asylum-seeking mothers confirms what scholars have extensively documented: how the multiple human rights abuses produced by the contexts described affect the mental health of refugees and asylum-seekers from this region. Scholars have documented how the exposure to difficult pre-migration events resulting from political violence can affect the psychological wellbeing of immigrants

from Central America (Martín-Baró, 1989; Fortuna et al, 2008; Eisenman et al., 2003; Keller et al., 2017; Lusk & Galindo, 2017); and how sexual trauma is another stressor for many Latino asylum-seeking women (Kaltman et al., 2011; May & Quinteros, 2012). Others have documented how restrictive immigration policies contribute to negatively affect the mental health of migrant families (Silove, et al., 2000; Steel et al., 2011; Villalobo, 2011; AIC, 2016; Lusk & Galindo, 2017), and how the practices of detention and separation of families, in particular, have harmful effects on families, especially on children (Barrick, 2016; Miller, Hess, Bybee & Goodkind, 2017; Wan, 2018; Amnesty International, 2018a; Wood, 2018; Monico et al., 2019). Some scholars have also documented how post-migration and resettlement difficulties including poverty, legal vulnerability and restricted access to services, adds to the psychological distress experienced by asylum-seeking families (Silove et al., 2000; Torres et al., 2018). The present study contributes to the literature that observes the cumulative effect of traumatic events across borders on the mental health of asylum-seekers (see Kaltman et al., 2010; Lykes & Herschbert, 2011; Torres et al. 2018; Lusk & Chaparro, 2018; Esposito et al., 2019). It provides evidence on “psychosocial trauma” (Martín-Baró, 1998) as experienced by women who are mothers. The study exemplifies how this type of trauma is produced by oppressive social systems across borders, having its roots in the societies in which these mothers live and transit.

The findings from this study also provide evidence about the particular experiences and suffering endured by asylum-seekers who are mothers, and suggest that for mothers trauma not only accumulates across borders, but also across generations, as the trauma experienced by their own children is also traumatizing for mothers. Future studies could observe how trauma endured by mothers, could also pass to their children. This study holds that the multiple human rights violations across borders and across generations produce negative mental health outcomes,

directly violating mothers' rights to mental health. This is especially critical in the case of these mothers, as they are typically the ones responsible for providing emotional and other types of support to children. As described, traumatic events endured by mothers can translate into less effective parenting and affect the development of their children (Foroghe & Muller, 2012; May & Quintero, 2012; Van EE, et al., 2012). Children impacted by trauma might not find adequate support in their mothers who are dealing with their own trauma without access to specialized mental health services. As a consequence, and despite all extreme efforts marginalized mothers make for their children, children's right to survival, development, and protection could still be at stake.

This study has found that not only the traumatic experiences produced by these contexts, but also the adaptive maternal practices had an impact on maternal wellbeing. Similar to birth mothers who give children in adoption (Henney et al., 2007), these mothers reported sadness, grief and PTD symptoms when separating from the children they left behind or sent across borders with others, despite the mother understanding that she had no better choice. The practice of risking children in the dangerous roads, "splitting" siblings and lying to children, also produced negative health and mental health outcomes for mothers. The findings support the hypothesis that unjust contextual conditions, give rise to "unjust mothering practices"²⁵ (Tan, 2012, p.115), and also result in unjust mental health outcomes for marginalized mothers. Perhaps the most unjust mental health outcome for mothers is the feeling of guilt for decisions that were made to assure their children's survival, but still produced suffering in children. These feelings

²⁵ As mentioned in the introduction, the concept of "unjust mothering practices" does not refer to the mother being unfair to children, but to an unfair context that forces mothers into difficult practices, that mothers in other social locations are not subjected to make.

are especially unjust in a context in which marginalized mothers are forced to make these decisions given the failure of institutions to provide peace, prosperity and special protections for women and children; however, they are the ones to assume the blame—or to be blamed and vilified—for the suffering of children.

As observed, 30% of the women in the study didn't report negative mental health outcomes, despite all of these women having reported experiencing possibly traumatizing events. Moreover, some mothers who did express symptoms of anxiety, PTSD and depression, still expressed positive feelings such as happiness due to feeling safer, pride in children, pride in their own courage and feelings of personal growth through overcoming difficulties. These findings provide evidence of the “extraordinary resiliency and strengths in the contexts of multiple adversities” of Central Americans (Brabeck, Sibley & Lykes, 2016, p. 25). While many studies focus on the negative impacts of trauma on refugees from Central America, fewer studies have explored their resiliency (Lusk & Galindo, 2017; Lusk & Chaparro, 2018). Similar to Lusk & Galindo (2017), women in this study derived strengths from their desire to give a better future to their children, and from their faith. Even some of the participants that reported depression, anxiety and PTSD, were able to slowly start improving their lives and the lives of their children despite their mental health challenges and material difficulties.

Mothering and migrating were two challenging experiences (Christou, et al., 2012), however they also had a potential to empower women to grow, to feel stronger and capable. Being able to successfully care for their children in extremely harsh conditions made mothers feel proud of themselves, and empowered them to continue fighting. Despite all the hardships described, their maternal roles of caring for their children gave mothers the strengths to move forward in life, resisting boundaries and conditions that oppressed them. Migration allowed them

to move to new spaces in which they could construct a better life for themselves and their children.

Limitations

This is an in-depth qualitative study with a sample of 17 asylum-seeking mothers from Central America, and additional follow up and member check-in interviews with 4 of the participants (24% of the sample). The small sample does not allow generalizing the findings to the experiences of all asylum-seeking mothers. However, this study can be considered as a case study of the application of international asylum laws in a particular host country with a particular population. Though limited in scope, the findings are relevant and important, given the fact that the United States has historically been one of the leading countries in refugee resettlement in the world, and the country to which most Central Americans are migrating.

The fact that the educational level of study participants was high (50% had completed high school, 24% had done some years of tertiary or university education, and 12% have actually completed this tertiary and university) calls for caution on the representativeness of the findings of other groups of women. Other mothers might or might not place so much emphasis on their children's education in the United States, or might not be able to access the same resources as this group of mothers.

Even though the sample size could be considered small from a positivistic perspective, it is appropriate and valid for this type of in depth and exploratory qualitative study (Trotter II, 2012, Boddy, 2016) and given the context of the study (Boddy, 2016). This is a population that is hard to reach because of participants' limited mobility due to childcare responsibilities and poverty levels, and because the study was conducted in a context in which anti-immigration policies generate fear of deportation making immigrants more reluctant to become visible.

The HTQ, though thorough and adequate to study traumatic experiences in asylum seekers and refugees, could present limitations in terms of assessing trauma in those who mother. Future studies could propose adding events on the list that reflect the specific experiences of those who care for children. These could include the typical experiences of mothers detailed in this study, the experiences endured by children that can potentially affect mothers' or parents' mental health, and difficult maternal practices which could also be traumatizing. While the HTQ has some open-ended questions that could allow capturing context-specific traumatic events, including events in the list can allow for better capturing and quantification of the events endured by mothers and fathers.

This study aimed to describe the particular experiences of Central American mothers travelling with some of their children. It purposively selected asylum-seeking mothers who were the beneficiaries of a humanitarian initiative. Because of its focus on mothers, this study is limited in terms of its capability in comparing with the experiences of men, who are fathers. This calls for caution in drawing conclusions such as believing that asylum-seeking fathers and their children do not endure atrocities along the way and do not need protections. Fathers—or other figures such as older siblings, grandparents, tutors, and other relatives—can play the “maternal roles” of protecting, nurturing and training children (Ruddick, 1998).

Another limitation could arise given the nature of studies on trauma. While the PI was a compassionate listener and most women seemed or said they felt comfortable during the interview, some study participants might not have disclosed traumatic stories to someone they had met for the first time, or due to not wanting to talk about painful experiences, or simply because trauma can affect memory. One participant said she chose carefully to whom to tell her story and only told the whole story to a counselor in detention. Another one said that she didn't

like to talk about the past, and two other participants disclosed new traumatic events during the second, not the first, meeting with the PI. This is a limitation inherent to research on trauma, especially research such as this study that aimed to respect and give some control to participants about what they wanted to disclose. Given that some participants disclosed traumatic events on the follow up and member check-in interview, future studies can be designed with two or three interviews or could adopt a more ethnographic approach.

Despite these limitations, the stories gathered through this study were deep and rich. The fact that the PI was Latina and a migrant mother herself created a context of intimacy that facilitated the conversations. Several participants expressed relief in sharing their stories and were appreciative of having a compassionate listener to witness their lives. Interviews represented a moment of “catharsis” for many of the women (Lusk & Chaparro, 2018). The information gathered through the 21 interviews was complemented by the knowledge the PI acquired by 3 years of prolonged exposure in the field, the guidance of practitioners, volunteers and professors, and the literature reviewed.

Implications and Recommendations

This section presents some of the implications and recommendations for policy, practice and scholarship that derive from the findings.

Implications for policy. The first implication is the importance of advocating for policies that create contexts that are not hostile to mothers and children, where human rights are respected and where mothers do not have to make extreme sacrifices and take extreme risks to assure the survival and development of their children. In the countries of origin, this will translate into the correct implementation of existing laws protecting the human rights of women and children, and in fierce actions towards peace and prosperity. Policies and programs need to

be inclusive and take into account the particular experiences of mothers and children, especially of those at the margins of local societies. Local government could work in redressing the failure of institutions to protect women from all forms of discrimination and violence, addressing the ideological components behind these failures.

All mothers in this study cited violence as their main reason to seek asylum protections, and many expressed mental health symptoms typically of those who are refugees. This confirms the violent crisis endured by Central Americans, and highlights the importance of acknowledging that many of those presenting themselves at the border are legitimate refugees who are fleeing from life threatening conditions. This calls for advocating for increased refugee quotas for this region in the United States—and other peaceful nations—and to fight against current political initiatives that aim to dismantle existing refugee protections. It also calls for the acknowledgment from U.S. asylum policies and practices of other current forms of violence different to political or religious persecution as grounds for asylum, and to the recognition that criminal violence, intimate partner and sexual violence especially affects women, mothers and children. The findings suggest that single mothers taking care of children are a special group in need of protection; they are visible to criminal groups or violent individuals, and attacked through particular tactics of vigilance and extortion.

Advocating for increased refugee quotas is important, as this would allow these families to travel safely as other refugees, tourists and business travelers do, avoiding the unnecessary risks and human rights violations occurring along irregular routes. While the option of safe refuge is constrained for these populations, it is also critical to advocate for the fulfillment of basic human rights along the irregular journey. This could be provided by the governments of countries through which migrants transit or local institutions.

The findings also highlight the importance of challenging the hostility towards immigrant mothers and children—as well as immigrants in general—of current asylum policies and practices, and to advocate for reforms that center their protection and wellbeing. This involves providing adequate services, correctly satisfying basic needs and offering a humane treatment. Practices that produce further harm and re-traumatize those who already endured trauma, including the practices of separating mothers from their children need to be abolished. This study has shown how separating mothers from children could also leave children without all the meaning making resources mothers have to protect children from the psychological impacts of migration and detention, as well as their sacrifices for their physical survival. U.S. asylum policies could contemplate that not only mothers who give birth are responsible for children, but also other maternal or paternal figures, including older siblings, and also avoid these separations.

The prevalence of traumatic events endured by mothers and children in this sample and the resulting mental health problems call for advocating for mental health services accessible to this population upon arrival and resettlement. Trauma informed programs appear critical, especially for those who are experiencing PTSD. At the same time, scholars could call for the creation of new international human rights discourses on the protection of refugees, that expands the notion of the right to be safe physically, to the right to “feel safe” from the recurring traumatic memories of past events. The “right to heal from trauma” appears critical for asylum seeking mothers who care for children, as mothers need to be strong to continue fighting for the survival of children in the new context, and supporting them with their own traumas and resettlement experiences.

Free or affordable legal services is a pre-requisite to fulfill the right-to-asylum for these women. Advocacy could be made to correct problems in the system and make sure asylum is

accessible to marginalized mothers with valid claims, by providing more pro-bono attorneys and social workers that can facilitate the processes. As several scholars have highlighted, the United States has a responsibility towards the protection of refugees from this region, given their involvement in the past conflicts that generated the current forms of violence, the deportation of those who created the gangs, and their role as consumers of the narcotics trafficked through the region (Mahler & Ugrina, 2006; Labrador & Renwick, 2018; Labrador & Renwick, 2018; Lusk & Chaparro, 2018; Meyer, 2019)

Implications for practice. Mental health services providers working with immigrant mothers need to be aware of the possible accumulation of traumatic events these mothers endured across borders; and of the traumatic impact that both difficult contexts and difficult maternal practices have on mothers' mental health. It is important that these professionals understand that difficult maternal practices can be a consequence of societal oppression, and not a defect or lack of attachment of the individual mother. Apparent maternal detachment from children can also be a consequence of trauma in refugee mothers (Rohani, personal communication, October 16, 2019). Practitioners need to be aware of the complexities of mothering in these contexts, and help mothers appreciate their efforts and accomplishments, fostering feelings of growth and empowerment, which are also part of the immigration experience for mothers.

Asylum-seeking mothers and children allowed to enter the United States do not necessarily find safety and stability upon arrival to their final destinations. As observed, mothers who cannot rely on informal supportive networks are at greater risk of poverty, homelessness and food insecurity. A social work case management approach, similar to the one offered to those granted refugee status, is needed to help asylum-seekers resettle, to assure their basic needs

are met, to explain legal procedures, to facilitate access to lawyers, and to orient to mental health services. This approach needs to be an integral part of asylum policies. Based on the PI's observations working with these women, case management needs to be more intensive for those affected by PTSD, and for single mothers with young children who have work and mobility constraints. It should also be more intensive for those mothers who do not have basic technological and language skills to navigate services' websites—and make phone calls— and do not have someone that can help them as an interpreter. The social work profession can also play a role in providing knowledge and support to those who receive asylum-seekers at the border, by implementing undoing racism workshops, human rights and trauma trainings.

Implications for future scholarship. Scholars could continue to investigate the national and racial ideological components that impede the implementation of international human rights frameworks. While an increasingly globalized world continues to be organized in racial/nation states, mothers and children from other racial/nation states are at risk of not receiving the protections they deserve per international agreements. Scholars could create or promote existing models for international transparency, and for accountability of states that fail as duty-bearers in the protection of those refugees of other races. Academic-community engagements like the present one, in which social workers, mental health professionals, lawyers and academics collaborate to document the impacts of the failures of asylum policies and practices on asylum-seekers material realities and mental health appear critical. These collaborations are also important to design appropriate protections in research studies with participants who have endured trauma and who are living under situations of economic and legal precariousness.

More research on asylum-seeking maternal experiences, practices and mental health is needed to inform specific interventions with mothers and children. Future research could study

the impacts of difficult maternal practices—such as separating siblings or separating children from grandparents or other loved ones in their countries—on the mother-child relationship. This research could observe possible feelings of resentment in children, especially in a context that vilifies immigrant mothers. Studies can also explore the impact of the interpersonal and institutional mistreatment of mothers in front of their children, on maternal authority and child development.

Women participants shared many stories of what they called “angels”, who were people from different national origins that helped them on their journeys, in detention and in the United States. Some were guards in detention centers that used Santa Claus hats and secretly gave candies to children; some were people in Mexico providing food, water or shelter, some were volunteers in Boston giving clothes, food and furniture. The actions of these “angels” talk about a sensitivity for human rights and a sentiment of compassion in societies for these marginalized mothers and children. Social work scholars could continue to write about these practices, to make them visible and to counter the apparently prevalent anti-immigration rhetoric that is not representative of all.

Conclusion

This study has sought to bring Central American asylum-seeking mothers’ voices to the center of a discussion of asylum practices. It has sought to give visibility to their stories about the difficult contexts in which they mother, and the difficult and exceptional mothering practices with which they engage to assure the right to survival and development of their children. For this study, shifting the center not only meant including the voices of otherwise marginalized mothers. It also meant shifting the center of discourses of blaming, discriminating, de-valuing and criminalizing migrant mothers, to instead reflect on how governments across borders

systematically fail to protect the rights of mothers and children, disrespecting international human rights agreements with no punishment nor sense of accountability.

By centering mothers' stories of love, struggle and growth, this study hopes to contribute to seeing the common humanity within the "m/other" and to press for the creation of asylum legal systems based on compassion and solidarity. These systems need to respect the right to mothering, and for children, the right to have maternal protections within the complexities of an increasingly globalized world. The protection, nurturance and development of children are not only necessary maternal roles, or children's demands, but should also be maternal and children's universal human rights to be respected across borders.

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Appendix 1: Recruitment Materials

Script to Facilitate Referrals

Project: Mothering across borders

I would like to invite you to participate in a project. I think it could be interesting to you. This project collects the stories of mothers from Central America. These mothers migrated to the United States with their children. Knowing these stories can help us understand better what these mothers and their children need. In that way, we might be able to support them better.

Who participates?

Mothers originally from Central America living here. They have crossed the borders between Mexico and the United States. They have done so with their children. They have arrived in the **last four years, or after 2014**. These mothers are at least 18 years old.

What is it about?

This project collects the stories of these mothers. It asks about their stories before, during and after migrating. It asks what they need, who helped them, what makes them strong, how do they feel.

What is this project NOT about?

This project is not a requirement to obtain the help of a lawyer. It is neither a requirement to receive services from CLSACC nor another agency. This project is something independent.

Who leads it?

Emilia Bianco leads this project. She studies Social Work. She studies at Boston College. Emilia worked as a volunteer until recently. She helped mothers who sought asylum in Boston. I met her when... Emilia is also a migrant from South America. She has two kids. One of them migrated with her.

Who approved it?

The School of social work at Boston College approved this project. IIIC and CLSACC also approved this project. These are agencies that support migrants and other people.

Should I participate?

Your participation could help social workers. It could also help lawyers and advocates of immigrant rights. This study can help them understand better what mothers and children need.

Participating from this project is voluntary. You can decide not to participate. This won't change the services you receive.

How are these conversations?

These conversations are in Spanish. Emilia is Latina and she speaks Spanish. They will take about one hour and a half. They will be held at CLSACC or at a place convenient to you. They are individual conversations. Only Emilia and the mother participant will be present. Everything said there is private and confidential.

Will I receive any compensation?

You will receive a 25 USD Target gift card. This is to appreciate your time. Your travel costs will be reimbursed, up to 10 USD.

Would you like to participate?

If you do, could you give me your telephone number? I will give it to Emilia. She will call you. She will ask you when you can see each other. You will decide a good place to meet.

When can she call you? At what time of the day?

First name or nickname

Thank you!

Poster for Recruitment and Referrals

Would you help me understand the needs of mothers who have crossed the borders?

Hi! I am Emilia. I study Social Work at Boston College.

What is this project about?

I am collecting the stories of mothers from Central America. These mothers crossed the borders with their children. They crossed in the last **4 years or since 2014**.

I would like learn about their needs. Then, I would like to teach what I learn to people that help immigrants. These could be social workers, lawyers or others.

How can you participate? You can contact me at **781-327-5727**. We will find a place and time to meet. We will talk for about one and a half hour. **Everything will be private and confidential.**



Will I receive compensation? Yes, you will receive a **\$25 Target gift card**. This is to appreciate your time. You will receive up to 10 dollars for the costs of your commute.

Your participation is voluntary

If you participate, it does not mean you will receive services from CLSACC.

If you don't participate, you won't lose any benefit from CLSACC.

Why should I participate?

Your participation would help social workers and advocates of immigrants rights. They will be able to understand better the stories and needs of mothers and children.

Looking forward to hearing from you!

Appendix 2: Informed Consent



Boston College School of Social Work

Research project

“Mothering across borders:

**The stories of Central American mothers who have crossed the US-Mexico borders
with their children and are seeking asylum in the United States.”**

Principal Investigator: Maria Emilia Bianco

Informed Consent

Informed Consent

Thank you very much for coming. Before agreeing to the interview, please read this form or listen to me read it. This form explains the project and your rights. Please ask me any question you may have.

What is this project about?

- This project collects the stories of a group of Central American mothers. These mothers have crossed the US-Mexico borders with their children. It asks mothers about their experiences before, during and after migrating. It also asks about their current needs and their supports. It asks about their sources of strengths and their feelings. It asks about their dreams and hopes for the future.
- What I learn from this project can inform social workers. They will be able to learn about these migrant mothers. They will be able to learn how to support them better.
- It can also inform advocates defending the rights of migrants. This information could allow them to think of ways to advocate for migrant mothers and children.

What is this project NOT about?

- This project is not related to your asylum application. Participating is not something that you have to do to obtain asylum in the United States.
- Participating is not something that you have to do to receive services from lawyers from CLSACC or IIIC.
- I cannot give you any legal advice.
- Participating is not something you have to do to receive social services.
- Is this clear to you? Do you have any question on this?

What if I choose not to take part or leave this project?

- Participating is voluntary.
- You can choose not to be in this project. This will not affect your relations with CLSACC, IIIC or other agencies.
- You will not lose any benefit from these organizations if you do not take part.
- You can answer some questions and skip others.
- You can leave the study at any time. You can leave for whatever reason.

Why have I been invited to participate?

[This organization] gave me your name so I could invite you to participate. You were invited because of the following.

- You are a mother originally from Central America.
- You have crossed the US-Mexico border in the last 4 years, or after 2014.

- You have crossed with your child or children.
- You are living now in Massachusetts or in another state from the United States.
- You are at least 18 years old.
- You might be interested in sharing your experiences and ideas.

Who else will participate?

- I am planning to interview at least 15 mothers. I will interview between 15 and 40 mothers.
- I am also planning to interview 10 to 20 more people. These will be volunteers and professionals that work with migrants. I will ask them about the general situations and needs of migrant mothers. I will also ask them what they need to better support these mothers.

What will happen in the interview?

I would ask you to have a conversation with me. We will talk about the following.

- The experiences of Central American mothers before, during and after crossing the borders.
- Your own story. The reasons why you decided to migrate with your children. The challenges that you encountered. The people that supported you. What has kept you strong. Your feelings. The feelings of your children. Your hopes and dreams for the future. Your current needs.
- I will ask you questions. We will also do some activities. I might show you pictures and we will talk about them. Later, we will imagine we are writing a letter to a mother who is leaving her home.
- I would ask you if I could use my audio recorder during the interview. I will not record your complete name. We can use a pseudonym or a nickname you choose. It is easier for me to listen to you if I record the interview. It is a little more difficult to listen while taking notes. If you don't feel comfortable with this, it is not a problem. I can also take notes by hand.
- We will finish reviewing this consent shortly. After that, the conversation could last about one hour and fifteen minutes. You can stay longer if you would like to share more stories with me. You can stop earlier if you wish.

How will things I say be kept private?

- I won't collect your name on the interview notes and audios.
- The informed consent will be the only one with your name. But, I will keep this form separate from the interview notes and the audios. It won't be possible to link the consent form to the interview records.
- I will not include your name in any report I publish. I will not include the names of your children. I will not include your address.

- Research records will be kept private in a locked cabinet.
- All information in my computer will be secured using passwords. I will save information on a secure server at Boston College.
- I will be the only person that access the data. I will make all efforts so no one else can access. However, in some rare occasions others can request to review the records. These could be my supervisors, sponsors, research assistant or the government. The data from the interview will not have your name on them.

Who approved this project?

- My professors at Boston College approved this project.
- The Institutional Review Board at Boston College also approved this project. This board is a group of professors at Boston College. They make sure research respects participants' rights. It is also called IRB.
- CLSACC and IIIC also approved this project.

What are the risks of being in this project?

- Telling certain stories may make you feel sad. Do not feel that you have to share with me things that you don't want to share. You can decide what to share.
- If you feel sad after telling me some story, I will stay with you until you feel better. I can also refer you to someone who might be able to assist you.
- This study may include risks that we don't know at this time.

What are the benefits to being in this project?

- I will use what I learn to inform social workers and migrant rights' advocates. They will be able to understand better the needs and situations of mothers and children.
- Telling your story can make you feel relieved.

Will I receive any payment?

- You will receive a 25 USD gift card. This will in appreciation of your time. You will still receive the gift card if you leave the interview earlier. You will receive up USD 10 for the costs you had to spend for getting here.

Who can I contact if I have any question?

- You can call me or send me a text message at my number: 781-327-5727. You can also send me an e-mail at: Emilia.bianco@bc.edu . You can contact me for any reason. I might not be able to help you in an emergency. If you have an emergency, please call 911. You can also contact my supervisor. Her name is Brinton Lykes. Her phone number is: 857-228-8957 Her e mail is: lykes@bc.edu
- You can also contact the IRB at Boston College for questions about your rights in this research. The telephone number is: (617) 552-4778. The e mail address is: irb@bc.edu

- In some cases I may contact you after the interview, for example to see how you are doing after the interview, to give you more information, or to ask for clarifications on things that we talk today. At the end of the interview I will ask you if you would like me to contact you again, or if you prefer not to be contacted again. I will respect what you tell me.

Will I get a copy of this consent form?

- Yes, you can keep this form or I can send you one on the mail or e-mail.

Disclosure

I understand that participating in this study is voluntary. It does not mean that I will receive additional or new legal representation or social services from CLSACC or any other organization.

I have been able to ask clarifying questions about this.

Signatures/Dates

Study Participant signature

Study Participant Print Name:

Date

Researcher's signature

Researcher's print name:

Date

Disclosure statement for the interviews on the phone

Do you understand that this project is voluntary?

Do you understand that participating does not mean you will receive new services from CLSACC or other organization?

Were you able to make questions?

Statement of Consent to Participate in this Project

- I have read this consent form or someone read it to me.
- I have been encouraged to ask questions.
- I have received answers to my questions.
- I give my consent to be in this study.
- I have received (or will receive) a copy of this form.

Signatures/Dates

Study Participant signature:

Study Participant Print Name:

Date:

I give my consent to be tape-recorded

Study Participant signature

Study Participant Print Name:

Date:

Researcher's signature

Researcher's print name:

Date:

Oral Consent for interviews on the phone

- Have you listened to this consent?
- Have you been encouraged to ask questions?
- Have you received answers to your questions?
- Do you give your consent to be in this study?
- Have you received (or will receive) a copy of this form?
- Do you give your consent for the interview to be recorded?

Appendix 3: Interview Protocol



Research Project:

Mothering across borders: The stories of Central American mothers who have crossed the US-Mexico borders with their children and are seeking asylum in the United States

Principal Investigator: Maria Emilia Bianco

Interview with Mothers

[Note: This English version is for reference. All the interviews will be conducted in Spanish. The readability level of the Spanish questionnaire has been tested with appropriate instruments to measure texts in Spanish. This questionnaire is considered “very easy” on the Inflesz scale, and suitable for a 5th grade level according to Fernandez Huerta readability test.]

[Note: In the Spanish version, the interviewer will ask if the participants prefer to be addressed with the informal pronoun “tu” or the formal “usted”]

I. Family and migration

[Estimated time: 3 minutes]

Thank you very much for participating! I would like to know a little bit about you and your family first.

1. [If I do not have this information already] From what country are you coming? Were you born there?
2. [If I do not have this information already] Do you remember when you last arrived to the US?
 - a. [Sub-question if the mother does not talk about it] Have you been here before?
3. In what city or town are you living now?
4. Do you have children? Can you tell me a little bit about them? I would like to know how many you have and what is their gender. You can tell me their first name or nickname. You don’t need to tell me their last names [As the participant presents this information, the interviewer explores where they were born, where they are living now and if they are from the same or different fathers]
5. Did any of your children cross the borders with you this time? Did any of these children cross the borders before you?
6. Who did you reunify with when you arrived to Boston/Massachusetts?

- a. [If the interviewee did not comment on this] Did you have family here when you arrived? Who were they?
- b. Is the father [or any of the fathers] of your children in Boston/ Massachusetts?
 - i. [If she replies yes] Did he cross the borders with you?
 - ii. [If she says he was/they were here] Did you reunify with him [any of them]?
 - iii. [If he or they are not here] Where is he [where are them] now?

II. Before migrating...

[Estimated time: 5 minutes]

- 7. Can you tell me a little bit about why you came to the United States with your child/children?

Sub-questions

[The interviewer will listen to the story without interrupt. When appropriate, and if the interviewee hadn't talked about it, she will try to explore the following issues:

- a. [Reasons and Motivations] What were the reasons for migrating? What gave you the motivation to come? [or] you talked about [something], do you think that was your main motivation to come? [or] Would you have made the decision to come if it was not for [your children or other motive mentioned]?)
- b. [Strengths] Where did you get the strengths to pursue this journey across borders?
- c. [If applicable] Why did you bring this child/ these children with you?
- d. [If applicable] Why did you leave this child/these children behind?
- e. [Social or community support] What did your family members say when they knew you were coming? What did they do? Did they helped you or gave you advice? Why?
- f. [Hopes and dreams] Did you have any hope or dream for coming to the US? [Or] When you thought of living in the US, what were you hoping for? What did you imagine? [If she does not say the following] What were your hopes for your children?

[ALTERNATIVE: If the participant does not want to talk about her own story, the interviewer can ask the same questions about another mothers the participant know about, who have also crossed the borders with their children or that they are planning to do so. She will ask how the interviewee knows this person, and how she relates to her]

- 8. You told me about [these experiences], which one has been the most difficult for you? Why do you think so? Did you receive any support through that experience?

Thank you very much for these answers.

III. Being a mother

[Estimated time: 10 minutes]

9. Mothers' lives can be a little different in each place or country. That is why I would like to ask you how it was for you to be a mother in [your place of origin] You can tell me about who you lived with, what you're your chores, your responsibilities, who helped you... or whatever you would like to tell me about your work as a mother.

Sub-questions

[The interviewer will listen to the woman and will explore the following:

- a. What do you think it is a good mother? [explore qualities and values] [or] You can complete "A good mother is one that... can you complete the phrase?"
 - b. What do you think a mother should do for their children?
10. [Photo elicitation activity with pictures of mothers crossing borders with their children] Thank you very much for these answers. I will now show you some pictures of mothers who have left their homes and are crossing the borders with their children. Here are the pictures. Could you pick one and tell me what you see? There is no right or wrong answer; I am just interested what you think.

Sub-questions

[These will be questions to prompt only used if the mother needs more guidance]

- a. What do you see in this picture?
- b. What is this mother experiencing?
- c. How is she feeling?
- d. How do you think this mother is? / How would you describe her? [explore qualities]
- e. Is the mother who migrate the same as the mother who stays in the community? How do you think they are similar? How do you think they are different?

IV. The journey across borders

[Estimated time 10 minutes]

11. Now, I would like to continue talking with you about these mothers that travel across borders with their children. For this, I would invite you to write a letter for a mother that is about to leave her home to cross the borders with her children. You can think this mother is the mother you see on this picture [the one chosen for the photo elicitation]. She can be a friend or relative that you know. Please, take one minute to think about what three things you would tell her. [You can write the letter by yourself on this piece of paper, or if you prefer, I can write what you tell me to write] Are you ready? So we are going to write a letter that starts like this: "Dear mom, if you re

planning to cross the borders with your children or you have already left your home...” what three things would you say to her?

[If the mom needs more guidance, the interviewer could ask the following prompts:]

- a. What would be your advice?
- b. What would keep her and the children safe? What would give them strengths to continue?
- c. What can this mother do or say to protect and encourage her children to continue?
- d. Do you think that during the journey across borders they would suffer from experiences that are difficult to talk about? Do you think you can tell me about some of these experiences?
- e. [Other sub-questions could be made to explore what the mother had written on her letter. For example: why do you recommend this? Could you tell me a bit more about this?]

V. Experiences in detention centers

(Estimated time 5 minutes)

12. After crossing the borders, some people spend some time in detention centers for immigrants. Have you been in one of these centers? Would you like to share a story with me about the time you spent there?

Sub-questions

[The interviewer will ask the following prompts if the interview did not mention these already:

- a. Approximately how long have you been in detention?
- b. Where you informed about your rights in detention? Which rights? [for example: your right to speak on the phone, your right to a lawyer]
- c. How were you treated in detention?
- d. How did you feel there? Was there something that made you feel strong or better?
- e. Where you there with your children? How were your children there? Did you have to do anything special to support them? To keep them strong or happy? What did you do?
- f. Where you separated from your children or family members? Would you please tell me a little more about this? Have you been able to communicate with them?
- g. Did you receive support from others?

BREAK: The interviewer will ask how the mother is feeling and if she would like to continue or have some tea or take a break.

VI. Arriving in Massachusetts [or other state]

[Estimated time: 10 minutes]

Thank you for sharing with me your story about traveling to the United States. Now I would like to ask you about your life now in MA [other state].

13. Would you share a story with me about your arrival to MA [or other state]?

14. What have you found easy here? What has been more difficult?

Sub-questions

[If the interviewee did not talk about this, the interviewer could ask]

- a. Have you experienced any challenge? Any difficulty? Which ones?
- b. Where you able to sort it out? How?
- c.

15. Can you tell me a little bit about what support you received when you arrived here?

Sub-questions

[If the interviewee did not talk about this, the interviewer could ask]

- a. [If applicable] Did your family support you in any way? What kind of support did you receive from them? Why do you think they help you/not help you?
- b. Do you have friends here? Did they help you? How?
- c. Do you receive support from others (example: volunteers, people from your church, of from your children's schools, etc.)? How have they helped you?
 - i. Do you have any help with the care and livelihood support to your children here?
 - ii. Do you receive any support from the father or the fathers of your children? How do/es he/they help?

16. How are your children doing now in the US? How do you think they feel? Do you do something to support them [with that, with their adjustment]? How do you support them/ what do you do?

- a. [If applicable] How are your children in your country of origin? Do you communicate with them? Do you help them with something from here?

VII. Feelings

(Estimated time: 10 minutes)

17. You have told me about your life here in Boston/ MA. You have told me how your children are feeling. I would like to know how are you feeling here. How are you feeling? How are you doing?

18. I would like to talk a little more about your feelings. I have here some questions used by researchers. They are used to understand better how people are feeling. It is

voluntary to answer these questions. Here they are. You can take a look at them. Would you like to try to answer them? [If the interviewee accepts] Listed below are symptoms or problems that people sometimes have. Please read each one carefully and describe how much the symptoms bothered you or distressed you in the last week, including today. Place a check in the appropriate column

Part I: Anxiety symptoms	Not at all	A little	Quite a bit	Extremely
Suddenly scared for no reason				
Feeling fearful				
Faintness, dizziness or weakness				
Nervousness or shakiness inside				
Heart pounding or racing				
Trembling				
Feeling tense or keyed up				
Headaches				
Spell of terror or panic				
Feeling restless or can't sit still				

Part II: Depression symptoms	Not at all	A little	Quite a bit	Extremely
Feeling low in energy, slowed down				
Blaming yourself for things				
Crying easily				
Loss of sexual interest or pleasure				
Poor appetite				
Difficulty falling asleep, staying asleep				
Feeling hopeless about the future				
Feeling blue				
Feeling lonely				
Thought of ending your life				
Feeling of being trapped or caught				
Worry too much about things				
Feeling no interest in things				
Feeling everything is an effort				
Feelings of worthlessness				

19. People who endure difficult experiences in the past can sometimes feel well in the present. Sometimes, they can experience some difficulties. It could be difficult for

them to sleep, eat or relax. They can have many memories from the past or have some nightmares. I have these other questions that researchers use. They are used to know how people who went through difficult experiences feel. Look, these are the questions. Answering them is voluntary. If you would like to try to answer them, please read each one carefully or listen to me read them. Then think if these problems have bothered you in the past week. Mark with a cross the space that you choose.

	Not at all	A little	Quite a bit	Extremely
Recurring thoughts or memories of the most hurtful or terrifying events				
Feelings as if the event is happening again				
Recurrent nightmares				
Feeling detached or withdrawn from people				
Unable to feel emotions				
Feeling jumpy, easily startled				
Difficulty concentrating				
Trouble sleeping				
Feeling on guard				
Feeling irritable or having outbursts of anger				
Avoiding activities that remind you of the traumatic or hurtful event				
Inability to remember parts of the most hurtful or traumatic events				
Less interest in daily activities				
Feelings as if you don't have a future				
Avoiding thoughts or feelings associated with the traumatic or hurtful events				
Sudden emotional or physical reaction when reminded of the most hurtful or traumatic event				

20. [ALTERNATIVE to 20 and 21: If the participant does not want to answer some of these questionnaires, the interviewer can ask her to make a drawing of her life in the US] Would you please draw me a simple picture of yourself in the US now?

Sub-questions

[After the picture is done, if the interviewee didn't talk about these issues while drawing, the interviewer could ask:

- Can you describe this picture for me?
- What is happening in this drawing?

- c. How do you feel? Is this the way you are feeling now?
- 21. Thank you for sharing these feelings with me. Do you have someone close to share your feelings with? (It could be a friend, relative, doctor, counselor)?
- 22. [If applicable] Would you like me to find out if some counselor or social worker can help you with these feelings?

VIII. Meaning and growth

[Estimated time: 7 minutes]

- 23. In my country, Argentina, we believe that going through difficult experiences makes us stronger. What do you think? How true do you think this is for you after all the experiences you went through?

Sub-questions

[The following sub-questions could be asked after the participant's answer]

- a. Did you come out as a different woman after this journey? Did you learn something new about yourself? Did you learn anything new about yourself as a mother?
- b. Did you learn anything new about others? Did you learn anything new about your children? Do you feel the relationship with your children changed?
- c. Do you feel you appreciate or look at life differently? How?
- d. Do you think there is meaning in what happened? Or in what you endured? What is that meaning?
- e. Do you feel you became more spiritual?
- f. Do you see any new opportunity now?
- 24. You told me that your hope or dream for this journey was [...] Now that you are here, what do you need to realize these dreams?

IX. Demographics and life situation questions

[Estimated time: 5 minutes]

Thank you so much for sharing your time with me. We are arriving to the last part of the questionnaire. These are all quick questions.

- 25. What year were you born?
- 26. What is your gender?
- 27. In your country of origin, did you live in a rural area or in a city?
- 28. What was your occupation in your country?
- 29. What is your occupation now? Do you work? How do you sustain yourself? How do you sustain your children?
- 30. Have you attended school? [If yes:]
 - a. Where?

- b. What is the highest educational level you attained? Or for how many years did you go to school?
- 31. Do you consider yourself religious? [If yes:]
 - a. What is your religion?
 - b. How do you practice your religion?
- 32. How do you think you speak English? Very well, Quite well, A little, Nothing...
- 33. People in the US people identify themselves with their race and ethnicity. In Latin America we don't typically ask this question. This question can feel strange to you. Do you identify yourself with a race or an ethnicity?
 - a. Which one would that be?
 - b. Do you belong to an Indigenous group?
- 34. What languages do you speak? What languages do or did your parents speak?
- 35. Who do you live with now? [explore if she lives at relatives' house, shelter, church, etc.]
- 36. Some mothers have decided to apply for asylum in this country. If you did so, or tried to do so, did you have any challenge?
- 37. Have you been able to enroll your children to school? [If not: why not? what were the problems you encountered?]
- 38. Have you been to the doctor or to a clinic to take care of your health? Have you done so for your children? Do you have health insurance? If not, what challenges have you encountered accessing?

X. Invitation to other women and final greeting

[Estimated time: 3 minutes]

Thank you very much for sharing your ideas and stories with me.

- 39. Would you like me to send you a summary of all that I learn? I can do so once I finish interviewing all the women participants.
- 40. **Would you like me to contact you again to see how things are going or to ask you some clarifying questions? Or, would you prefer me not to call you again?**
- 41. Do you know about other women who could be interested in telling me their stories? If so, could you provide me their name and phone number so I can invite them to participate? Or could you give them my contact information?
- 42. Is there something else you would like me to write about the mothers that cross borders? Is there something else you would like society or other people understand about these mothers?
- 43. Do you have any question for me?

You can call me if you would need to talk to me after we greet goodbye today. My number is here. Thank you so much again. It was so nice to get to know you.