**ORIGINAL PAPER**

# *Luchando Junt@s Por Una Familia Unida* (Fighting Together for a United Family): Rebuilding the Cohesive Self of Immigrant Parents and Community Healing after a Family Separation in the United States – A Self Psychology Perspective

Cheryl Aguilar[1,2]

## Abstract

The Zero Tolerance policy implemented by the Trump administration resulted in the separation of thousands of Central American families seeking asylum at the U.S. Southern border. This policy has had a devastating impact on the mental health of parents and their children. While most of the literature on forced immigration family separation, and reunification focuses on children's traumatic responses, it is essential to expand the literature to include the impact on parents, who can help mitigate the negative consequences of adverse events and traumatic stress on their children. When parents are not provided with adequate culturally sensitive healing interventions, their distress, and emotional needs may affect their ability to effectively support their children. Using a self psychology lens, this theoretical article sheds light on the psychological experiences of Central American parents who endured forced family separation. It also contributes knowledge to self psychology theory and its integration into group work with Central Americans. This article draws from the literature, my clinical experience with immigrants and refugees, and my work with Central American asylum-seeking families impacted by the "zero tolerance" immigration policy to argue that self psychology provides a lens for understanding the impact of the government's empathic failure on parents upon entering the United States that led to a blow to parents' cohesive self. Parents' cohesive self can be restored with sufficient collective *twinship*, *mirroring*, and *idealizing* experiences, which in self-psychology are paramount psychological needs to be met for building and maintaining a strong self.

**Keywords** Immigrants and refugees · Immigrant mental health · Immigration family separation and reunification · Central Americans · Asylum-seekers · Group interventions with immigrants · Self psychology and groups

"*Everyone talks about the American Dream, but no one talks about the American Nightmare*"– Asylum seeker.

At the end of 2021, 89.3 million people were forcibly displaced worldwide (United Nations High Commissioner for Refugees, 2023). Central America is a region with a long history of forced migration patterns, and over the last two decades, millions of Central Americans have migrated to the United States to escape violence, governmental corruption, persecution, natural disasters, the COVID-19 pandemic, dire poverty, and other sociopolitical and environmental challenges (Babich & Batalova, 2021), either alone, with their families, or in caravan groups (Rechitsky & Hoekstra, 2020; Kenix & Lopez, 2021). The surge in immigration, particularly through the U.S.-Mexico border, has been met with harsh and oppressive enforcement policies, such as the "zero tolerance" immigration policy implemented by the Trump administration in 2018 (Refugees International, 2018), which resulted in the gut-wrenching forcible separation of newly arrived asylum-seeking families (Olivares, 2019). The separations inflicted profound emotional trauma and severe mental health repercussions, and denied families

✉ Cheryl Aguilar
  caguilar02@smith.edu;
  caguilar@thehopecenterforwellness.com

1 Smith College School for Social Work, Northampton, Massachusetts, USA

2 Hope Center for Wellness, Washington, DC, USA

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fundamental human rights including due process (Baker & Timm, 2020).

Family separation of children from their parents is a dark part of American history. This practice affected thousands of enslaved and Native American children forcibly separated from their parents by the U.S. government, causing immense trauma and pain to their families (Burrison, 2007; Curtin, 2017; Williams, 2018). Centuries later, the zero tolerance policy is one of the latest examples of a racist and xenophobic policy designed to separate families despite evidence of the traumatic psychological injuries it will cause (Hampton et al., 2021). Analyzing the impact of the zero tolerance policy is crucial; as a modern-day governmental measure, it literally and psychologically tore families apart and inflicted traumatic stress and lasting damage to attachment bonds. The policy's forced family separations have been deemed torture, a crime against humanity (Arreaga, 2022), and systemic trauma[1] (Domínguez, 2022).

Under the zero tolerance policy, individuals caught crossing the border between Mexico and the United States as unauthorized immigrants[2] are prosecuted as criminals rather than facing civil or administrative charges (Famulari, 2020). When former Attorney General Sessions unveiled the policy, he announced that it would likely result in the separation of children from their parents so the parents could be prosecuted (Olivares, 2019). Consequently, immigrant parents primarily from Central America were separated from their children upon migration or deported, while their children were sent to various facilities, including detention and care centers, across the country for extended periods (American Civil Liberties Union, 2019). The Zero Tolerance policy led to the separation of more than 5,000 immigrant families (Bruzzone, 2021) without any plan for reunification (Olivares, 2019). Most of the families were from Guatemala, Honduras, and El Salvador, with the majority of the children being boys between 5 and 17 years old (American Civil Liberties Union, 2019). As of April 2023, nearly 1,000 families had yet to be reunified (Department of Homeland Security, 2023).

The effect of the zero tolerance policy will be felt for years to come. It has been documented that immigration separations can result in long-term mental health consequences, including traumatic symptoms, anxiety, depression, and behavioral disorders (Delgado et al., 2021). There is also potential for intergenerational trauma. Family separation between a child and a parent has consequences for

attachment disruption that may interfere with the child's relationship with the caregiver and others well into adulthood (Cohen & Mannarino, 2019). Family separation also negatively affects parents and is associated with a higher prevalence of post-traumatic stress disorder and major depressive disorder among caregivers who have been forcibly separated from their children (Bruzzone, 2021).

Parental challenges following immigration separation and reunification remain underexplored in the literature. Timely, effective, and culturally sensitive service and policy interventions that support Central American parents require attunement to their psychological experiences. Research has shown that parents have the potential to mitigate their children's negative consequences of adverse events and traumatic stress. Williamson et al. (2018) posit that parental response to traumatic symptoms plays an important role in supporting or hindering psychological adjustment; however, without proper support, parents' distress and emotional needs may compromise their ability to support their children effectively.

This theoretical paper examines the psychological challenges parents impacted by the zero tolerance policy face following a traumatizing entry to the United States. The experiences of these parents are explained using a self psychology lens, a psychodynamic theory that will also be used as a framework for a culturally informed group intervention. Self psychology is a psychoanalytic theory and approach to understanding human development and psychological functioning. It was developed by Heinz Kohut, a prominent psychoanalyst, in the mid-20th century. Self psychology focuses on the formation and development of the self, emphasizing the importance of empathic attunement (Kohut, 1971). Self psychology is an appropriate theory for working with asylum-seekers due to its application in understanding the impact of the external environment on the psyche and extension of the theory for group work.

In this article, I argue that self psychology provides a lens to understand the impact of the government's empathic failure on parents upon entering the United States, which has led to a blow to their cohesive self or sense of wholeness and continuity of identity. I theorize that a parent's cohesive self can be restored with sufficient collective *twinship*, *mirroring* and *idealizing* experiences, which in self psychology are paramount psychological needs for building and maintaining a strong self. I begin the article by briefly outlining the immigration context from Central America and discussing the psychosocial impact of immigration, forced migration, family separation, and reunification. I continue with a summary of key concepts of self psychology and explore how a group facilitator, group members, and the group can meet the impacted parent's psychological needs. Finally, I expand on the concept of *transmuting internalization*, or the

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[1] Dominguez (2022) describes systemic trauma inflicted on asylum-seekers as orchestrated attempts to cause harm to specific groups across different settings, institutions, and political administrations.

[2] Unauthorized immigrant, also known as undocumented immigrant, refers to an immigrant who enters the country without the documentation required by the country's immigration laws (Capps et al., 2020).

internalization of an experience, and offer that the group as a whole can serve a crucial coping function when internalized. A composite case from my individual and group practice with Central American parents will be used to illustrate theoretical claims.

## Positionality

As a Honduran immigrant, I come to this topic with lived experience of an immigration family separation and reunification, an experience not unique to me or the composite case study I present in this article. Many immigration journeys include family members migrating separately and reuniting later; however, immigration separation experiences vary depending on the circumstances surrounding separation and reunification. My familiarity with the issue guides my clinical curiosity to explore, understand, and support immigrant families whose separation and reunification situations lead to struggle and heartache, but also hope, and resolve.

### Why Do They Come? The Context of Forced Migration from Central America to the U.S.

Historically, immigration from Central America to the United States has been a result of a multifaceted interplay of push and pull factors[3] deeply embedded in socio-economic, political, and historical contexts (Rosenblum & Brick, 2011) and is deeply intertwined with the historical context of U.S. involvement in the region (Organista, 2023; Zayas, 2023). Over the last two decades, Central Americans have continued to grapple with challenging living conditions marked by an ongoing sociopolitical crisis involving growing gang violence, extreme poverty, lack of educational opportunities, and government corruption and instability, propelling families to seek protection and improved opportunities elsewhere (Gerschutz-Bell, 2022; Meyer & Taft-Morales, 2019), and leading to a surge in applications for asylum in the United States (Edyburn & Meek, 2021). Numerous scholarly works have been published on the fundamental factors that contribute to the prevalence of inequality and violence in Central America, which include the enduring legacy of colonialism and the impact of exploitative economic and trade policies of the United States, natural disasters, climate change and poor governance (Eckler, 2020; Edyburn & Meek, 2021; Main, 2020; Meyer & Taft-Morales, 2019). The involvement of the United States has wielded significant influence over the political, economic,

and social landscapes of nations like Guatemala, El Salvador, Honduras, and Nicaragua. Notably, during the Guatemalan Civil War spanning from 1960 to 1996, U.S. support for the Guatemalan military regime played a role in exacerbating instability and violence, ultimately resulting in extensive displacement and forced migration (Rabe, 2012). Similarly, in El Salvador and Honduras, U.S. involvement in internal conflicts and support for authoritarian regimes contributed to the displacement of hundreds of thousands of people (D'Haeseleer, 2017; LeoGrande, 1998; Montgomery, 1995). The consequences of these historical interventions continue to resonate today, as Central American nations grapple with the enduring legacies of violence, poverty, and political instability. These factors have driven many individuals and families to seek refuge and economic security in the United States, contributing to ongoing migration challenges at the U.S.-Mexico border.

International migrants arriving at the U.S.-Mexico border forced out of their native countries and fleeing life-threatening situations often qualify as refugees in need of legal protection. This migratory movement with an element of coercion, including threats to life and livelihood arising from both natural and man-made causes, is also commonly known as forced migration (Reed et al., 2016). Legal protections for refugees have been recognized since 1951, when the United Nations 1951 Refugee Convention established that individuals should not be returned to a country where they face dangers (Chin & Cortes, 2015; Hatton, 2020). However, these rights are often violated and under threat due to government-led asylum bans.

Forced migration from Central America reflects a deeply troubling and complex phenomenon driven by intersecting factors, such as persistent violence, organized crime, and political instability, creating an environment where safety is severely compromised. One example of migrants being forced out due to turmoil occurred in the 1980s when over 300,000 individuals affected by regional civil wars in Central America, mainly from El Salvador, Nicaragua, and Guatemala, fled their native countries. Between the 1980 and 1990's, migration from Central America more than tripled (Babich & Batalova, 2021). Since 2014, an estimated 400,000 people, with new trends of women and children immigrants, have migrated annually from El Salvador, Guatemala, and Honduras (Cheatham & Roy, 2020). The escalating violence in these countries, which have among the highest homicide rates in the world, has been documented as the most prevalent reason associated with forced migration (Roth et al., 2022).

In another example of a violent trend with historical and intergenerational trauma implications (Cerdeña et al., 2021), some Central American families impacted by the zero tolerance policy fled from their home countries after having

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[3] Push factors are conditions or circumstances in a person's home country that encourage that person to leave. Pull factors are conditions in a destination country that encourage people to move there (Rosenblum & Brick, 2011).

been targets of gang violence, fearing continued persecution by gangs and to protect their children from being recruited, raped, or killed by gangs (Hampton et al., 2021). The persecutions committed by violent gangs in the region parallels the tyranny of past civil wars, when children were recruited as soldiers to fight in El Salvador's civil war (Courtney, 2010), causing families to flee to protect their children from recruitment. In a faltering U.S. immigration reform system, Central American families impacted by these conditions face limited pathways to U.S. citizenship due to visa caps, reduced worker and temporary visas, and lengthy immigration visa processing backlogs, which can extend up to 20 years. These roadblocks drive families in precarious situations to seek asylum in the United States as one of the few legal options to escape dangerous situations (Bier, 2022).

## The Psychological Impact of Forced Migration

Extensive literature has delved into the psychological impact of migration. Whether fleeing from violence, reuniting with family members, or pursuing economic or educational opportunities, the journey of immigration is one of separation, change, adaptation, emotions, mourning, gains, and losses, and the reworking of identity and self-narrative (Akhtar, 1999; Falicov, 2011; Grinberg & Grinberg, 1989; Zayas, 2015). Asylum-seekers fleeing violence and persecution are faced with cumulative and new traumatic events experienced before, during, and after the immigration journey and in the receiving country.

The extent of the psychological impact of immigration is also related to several factors associated with the circumstances surrounding the migration, the type of migration experience, the developmental stage when the migration occurred, the support available before and after migration, and whether a migrant arrived alone or with family members (Akhtar, 1999; Falicov, 2011; Lijtmaer, 2017; Tummala-Narra, 2019).

When faced with an unknown and different social, cultural, and political context, migrating to a new country may evoke cultural shock (Lijtmaer, 2020). Akhtar (1999) posits that this experience is aggravated by the political and social climate, the welcome given by the receiving country, and narratives about immigrants in the host country, which impinge on an immigrant's self-view and sense of self. Throughout the course of history, immigrant populations have consistently encountered enduring negative perceptions and stereotypes. These prejudices carry significant ramifications, influencing the treatment of immigrants, shaping immigration-related policies, and profoundly affecting the immigrants' psychological well-being. Adverse characterizations of immigrants often depict them as posing threats to the security, identity, and cultural fabric of the host

country (Gonzales et al., 2019). These detrimental narratives tend to escalate, particularly when immigration originates from certain specific geographical regions, involves people of color, or is seen as unauthorized. For instance, Central American and Mexican immigrants have been decried as criminals, afflicted with disease, and as ostensibly seeking to exploit economic opportunities within the United States (Massey, 2020). Research indicates that the proliferation of sentiments rooted in Latinx resentment and the ascent of White nationalism contribute significantly to the perception of immigrants as criminal entities (Baranauskas & Stowell, 2022). These prejudices frequently emanate from apprehensions associated with the unfamiliar and with economic competition, and are exacerbated by nativist tendencies and xenophobic sentiments. Such portrayals, perpetuated via media outlets, political discourse, and public opinion, have jointly contributed to a dehumanizing narrative that corrodes the self-esteem of immigrants and augments their sense of marginalization (Morey, 2018). The psychological toll incurred is considerable, as immigrants wrestle with internalized shame, heightened anxiety, and a diminished sense of belonging.

Identity and continuity of self-disruptions have important implications for an individual's sense of capacity. Lijtmaer (2017) asserts that asylum-seekers suffer rejection, endure dehumanization, and shame, and experience feelings of helplessness, loss of dignity, frustration, and anger when perceived as unwanted. She posits that asylum-seekers are now or will soon suffer from post-traumatic stress disorder (PTSD) due to psychic trauma, and suggests that such a traumatic assault often leads to the loss of physical cohesion and continuity of the self.

Other challenges faced by migrants are conflicting feelings, such as guilt for leaving loved ones, fear of the future, loneliness, and sadness that may predominate after migration, along with experiences of joy, an increased sense of safety, and hope for the future. Adding to these contradictory feelings is a yearning to return to a familiar place (i.e., the country of origin) when feeling rejected or experiencing a lack of belonging, loss, and mourning related to the inability to return to one's home country without jeopardizing the asylum seeker process or once refugee status is granted.

## The Psychological Impact of Family Separation

The traumatic impact of children who are forcibly removed from their families is well documented in the literature (Monico et al., 2019). While it is beyond the scope of this research to review the entire history of the impact of family separations and attachment theory, it is essential to acknowledge the historical psychodynamic contributions to understanding the impact of forced family separation.

Monico et al. (2019) summarized research in the United Kingdom conducted by psychologist John Bowlby, who was concerned about children the British government sent away from the dangers of the World War II London bombing to the safety of the countryside. Bowlby, who developed the parent-child attachment theory, studied children experiencing these evacuations. He observed that children subjected to extended separations from their primary caregivers displayed the most pronounced levels of trauma. Bowlby's observations led him to conclude that children who established profound emotional attachment and a sense of trust with the adults in their lives were more adept at coping. He concluded that separations from the children's parents led to disrupted attachment with their caregiver, attachment challenges later in life, and juvenile delinquency. While the separation's impact on children was well documented by this early literature, the effects on parents were understudied.

Separations from parents or primary caregivers have been documented as one of the most severe traumatic stressors a child can experience, with a dire impact on attachment, mainly when separations occur under sudden, chaotic, scary, and prolonged circumstances (The National Child Traumatic Stress Network, 2022). These types of separations increase children's risk of developing depression, anxiety, and separation-related post-traumatic stress disorder, conditions that have also been documented as impacting parents (de la Peña et al., 2019). The literature and clinical evidence suggest that mothers exposed to trauma are less responsive to their children's distress, leading to disengagement from their children's distress (Kim et al., 2014). Additionally, parental trauma can directly impact their children's psychological wellbeing. In a study of transmission of trauma in refugee families, Dalgaard et al. (2016) found that parental trauma history and subsequent PTSD symptoms can influence children negatively and may lead to their development of psychological distress. Further, forced family separation in the context of detention has been directly correlated with mental health outcomes of depression, PTSD symptoms, and psychological quality of life (de la Peña et al., 2019).

## Reality VS. Expectation: Central American Parent's Psychological Experiences

Asylum-seekers' expectations of their immigration transition are often met with a much different reality than they envisioned. As a former asylum-seeker client once shared: "*Everyone talks about the American Dream, but no one talks about the American Nightmare.*" Under the Zero Tolerance policy, families seeking safety experienced the U.S. government as hostile and punitive, who deemed them as "bad" and treated them as criminals. In stark contrast, Central American parents I have worked with consider their decision to seek asylum as an act of bravery and sacrifice for the wellbeing of their children. While holding to the belief that migrating was an act of courage, many of the parents I have worked with simultaneously struggle with the internalization of some of the predominant negative stereotypes.

In my individual clinical and group practice, I have observed at least two initial affective states in adults resulting from family separation and reunification: anxiety and depression, followed by the activation of traumatic symptoms. Anxiety is connected to how parents felt during the separation while being detained, and depression is linked to how they feel after reunification with their children. Past traumatic experiences re-activate during the reunification period as parents grapple with the reasons they fled and their feelings of guilt, self-blame, and anger. These latter emotions are amplified by the impact of the family separation on their children and the children's reproach toward their parents. Parents' affective experiences are complicated by regression to more archaic states, permanent loss of their self-soothing and self-comforting capacities, and an intolerable sense of helplessness. These psychological states are compounded by the constant hurdles parents experience when trying to meet their basic needs of housing, employment, legal, and health services, the added pressure of their immigration status limitations, and exposure to discrimination and racism.

## Composite Case Illustrating Psychological Experiences of Separated Parents

Separated parents such as Silvia reported severe distress due to inadequate information about their children's whereabouts, leading to constant worries about their children's wellbeing and confusion about their separation and detention process. "*Estaba desesperada*" ("I felt desperate"), recalled Silvia. She migrated in early 2018 from Honduras with her two daughters and son, who were between 5 and 14 years old. She had been a victim of multiple rapes during different periods of her life, with the last one taking place in 2016. The perpetrator threatened to further harm her and her children upon his release from jail, and threats continued for multiple months after his incarceration and intensified right before his release. Unknown people would go to Silvia's house to warn her "*Ten cuidado, algo va a pasar, el va a buscar revancha* ("Watch out, something is coming. He will seek revenge.") Silvia's fears of continued violence against her were well founded. Honduras has the highest femicide rates in Latin America (United Nations Sustainable Development Group, 2021), and Silvia had heard of a handful of

people in her community who had disappeared without a trace.

Terrified of what the perpetrator might do, Silvia fled with her children through the Guatemalan and Mexican borders, as others in similar threatening situations had done before. She was hopeful that she could find safety and protection in the United States. To her dismay, and what she calls her nightmare, the day after she crossed the border, her children were taken away by the government, and she was arrested. "*No hice nada malo. Nunca le he hecho nada malo a nadie y me trataron como una criminal. Lo único que quería hacer era protegerlos*" ("I didn't do anything wrong. I had never done anything bad to anyone, yet I was treated as a criminal. All I wanted was to protect them"). Silvia still vividly recalls her young daughter crying and extending her arms toward her when an immigration official took her away.

While Silvia was in immigration detention, she had trouble sleeping, and when she was finally able to fall asleep, she had nightmares about past traumatic circumstances and her family's future. She experienced panic attacks and reported feeling restless most of the time. She reported thinking the worst and fearing she might never see her children again. When she sought support from detention staff and asked about her children's whereabouts, the staff acted uninformed and careless. She felt mocked, misunderstood, and with no one to turn to for assistance.

Silvia was deported after five months of being detained, and her children were reunited with their father, who had migrated to the United States previously. Approximately three years after her deportation, under the Biden administration's Task Force on Reunification of Families (Olivares, 2023), Silvia was reunited with her children. Despite her initial joy, Silvia felt that something had drastically changed. "*Ya no me quieren. Se alejan de mí y ya no me escuchan. Es como que ya no existo*" ("They no longer love me. They push me away and do not even listen to me. It is like I do not exist") she shared between sobs. This painful disconnection pushed her into a deep depressive state that included suicidal ideation. While she was finally reunited with her children, she felt more alone than when they were separated. During their years apart, Silvia's children had significantly grown up, become proficient in English, and developed different tastes in food, clothing, and hobbies. They also built a strong bond with their father, who became a source of support and guidance for them, and Silvia felt she could not relate. However, more painful was Silvia's feeling of being rejected by her children. This rejection is tied to the children's traumatic symptoms that led to their perception of being abandoned. They wondered what had happened, why she was not there for them, and whether she had fought to regain them. For Silvia, this was hard to grapple with because, despite repeated efforts to explain to

her daughters that she was not at fault for their separation, she felt misunderstood and hurt by their reactions. Her old wounds of sexual assault began to open again as she remembered the reasons she fled, but she could not entirely share them because of shame.

Some parents and children experience the classic reunification honeymoon period following reunification. This joyful period is disrupted when the cumulative stressors of the separation and reunification manifest in psychosocial problems (Lu et al., 2020). Parents separated by the zero tolerance policy reported an inability to connect with their children as they once did, becoming doubtful about their immigration decisions and experiencing profound sadness when they perceived rejection from their children. Upon reunification, when parents encounter trouble reconnecting, they feel hopeless that the situation may get better, leading to perceived and real parental inadequacy. They find themselves in a conundrum trying to comfort their children without an accurate understanding of what is wrong while also trying to explain how the family separation occurred, which may lead to a decreased ability to validate their children's pain because they are tending to their own suffering. Parents often feel alone in their pain without anyone who can understand them. Following reunification with their children, parents describe traumatic stress symptoms and characterize their children as having changed, and being defiant and distant. Their children's traumatic response and expression (verbal and nonverbal behaviors) of irritability and anger is interpreted as "*malcriados*" (bad-mannered, rude, naughty). Parents' ability to manage their new situation impacts their sense of competence. Feeling hopeless and rejected, they may become disengaged from connecting with their children out of the unconscious and sometimes conscious fear of rejection and frustration that their attempts do not work. Silvia stopped trying after a few months of attempting to connect with her children because she felt her efforts were pointless, no matter how hard she tried. She stopped hugging, kissing, and embracing her daughters, who stopped trying as well. Silvia remembers feeling that she was among strangers. When she felt incapable of parenting, her self-esteem shattered, impacting other aspects of her life, including her ability to make new friends because of shame and fear of judgment if they learned about her family troubles.

While Silvia often felt defeated in her initial attempts to reconnect with her children, in moments of sorrow, she never stopped praying for comfort, guidance, and for the situation to improve. She read her Bible daily, saying "*Esto me alimenta el espíritu y me ayuda en momentos difíciles*" ("This feeds my soul and helps me in tough times"). She also connected with her mother in Honduras by video a few times per week. These strengths and actions helped mitigate Silvia's depression.

# Finding Strength, Connection, and Healing through Group Interventions

As I provided individual therapy to parents who experienced forced family separation, I began to identify themes arising in these sessions. Parents expressed confusion about their children's new behaviors and struggled with understanding and soothing them while dealing with their own emotions related to their separation and reunification experience. Several central questions arose from individual sessions, including "*¿Que hago para ayudar a mis hijos? ¿Cómo hago para que las cosas sean como antes? ¿Por qué no me entienden? ¿Por qué no me hacen caso y se alejan de mí?*" ("What do I do to help my children? What do I do so things are like they used to be? Why don't they understand me? Why don't they listen to me anymore? and Why are they distant with me?").

Looming in the background of these questions were the effects of attachment rupture that appeared as kids' and parents' withdrawal from one another. The impact of the attachment rupture and the government's traumatic response and punishment of parents' needs for safety, support, and refuge led to decreased self-esteem and a thwarted parental sense of self. Parents began feeling that they had failed in their attempts to protect their children and doubted their ability to manage the situation at home. Among the overwhelming stressors of being new immigrants and coping with the effects of trauma, parents had diminished access to their internal strengths, qualities, and ability to survive precarious situations. In addition to tending to parents' emotional struggles, I saw a need to provide psychoeducation about the traumatic and attachment impact of the separations. Despite some of the progress I was seeing in individual therapy, the magnitude of the parents' pain appeared to merit a strong and collective response from those with similar experiences (*twinship*) who were also eager for understanding and mirroring of unmirrored suffering, strengths, and goals.

Having designed and implemented numerous therapeutic groups for immigrants, such as Emotions and Politics, a Spanish-language group for immigrants experiencing anxiety over the political environment, and seeing firsthand the positive impact on participants being in community with others impacted by the same issue, I set out to create a therapeutic group for Central American parents through my community-based mental health practice. The groups have lasted between 8 and 12 sessions and been weekly, closed groups that meet virtually via Zoom and are facilitated in Spanish, my native language, and the native and chosen language of the participants. Up to 12 parents are recruited for each group. The requirements to participate in the group is for parents to have (a) been separated from their children, (b) been later reunified, and (c) experienced challenges connecting with their children. Participants were not required to

have received therapy prior to joining the group, but some had received individual therapy.

Under the banner *Conéctate, Aprende y Sana con Mi Familia Unida!* (Connect, Learn, and Heal with My Family United), the group is promoted to parents as a safe space to learn strategies to deal with the reunification transition, emotions, and traumatic experiences stemming from family separation. Ideas for topics emerged from themes observed in individual sessions and topics parents expressed wanting to learn more about. Sessions have included the following topics: Orientation to Group and Purpose, Migration Journey as a Stressor, What it Means to be an Immigrant, Psychoeducation on Trauma, Children's Developmental Stages and Trauma, Role of Attachment in Children's Development, Connection and Attachment Building Strategies, Love Languages, Trauma Informed Discipline Strategies, Parental Self-Care, Navigating Schools and Community Resources, Closing Reflections. Each session includes three therapeutic components: processing, psychoeducation, and building coping skills.

Most of the participants to date have been mothers between their 20 and 40 s. To date, I have facilitated three therapeutic groups for Central American families, two of which were based on the principles of self psychology.

While I had a menu of topics, I felt responded to the needs of parents I saw emerging in my individual sessions, the group I held in the Spring of 2022 provided a closer look and attunement to the depth of the parents's narcissistic injuries[4]. Unlike other groups I had held where information and validation had once appeared helpful to group participants, this information-based methodology did not resonate with this new group of parents who had been violently ripped apart from their children by the government. The "psychoeducation" on their children's traumatic symptoms and strategies to help them cope was hard to accept when parents had their own disappointments, rage, and loss to tend to. This psychoeducational approach may have been another infliction of their injuries. I also began to observe that individual needs took a back seat to the needs of the group as a whole. At this point I decided to set my list of topics aside and respond to the group as themes unfolded organically in sessions through a self psychology lens, a theory I was deeply delving into. Parents needed connection and more empathic attunement to feel seen, heard, and understood before information and tools. Their feelings needed resonance, not solutions, at that time. The theory's emphasis on empathic attunement made my new theoretical direction for the groups a natural fit.

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[4] In self psychology, narcissistic injuries refer to situations or experiences that result in a disruption or damage to an individual's sense of self-worth and self-esteem (Kohut, 2013).
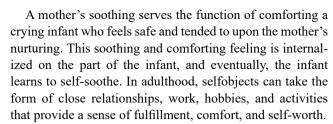
## A Review of Self Psychology Key Concepts

In the Restoration of the Self, Heinz Kohut, who pioneered self psychology, a theory that emphasizes the role of empathy in developing and maintaining a cohesive self, asserted that a baby is born powerful because of a milieu of empathic responses (Kohut, 1977). Thomas Kohut, who expanded on his father's work in self psychology, emphasizes the role of the external environment in shaping the psyche. He posits that the self is a product of the internalization of the environment's responses (Kohut, 2023).

Kohut posited that the developing self of an individual or the sense of "I" is formed through the empathic attunement of others to their emerging needs (Harwood & Pines, 1998). Kohut and Wolf (1978) further conceptualized a healthy self as a cohesive self that is vibrant, creative, loving, and experiences vigor, inner harmony, and self-esteem—a self that remains stable even in the face of threats to one's identity. The cohesive self is developed and maintained through empathic attunement to three interplaying poles or what Kohut postulated as the tripolar self that meets an individual's psychic needs by others and the environment who are deemed selfobjects (Kohut & Wolf, 1978). These needs are: *mirroring* of vitality, greatness, perfection, and talents; *idealizing* of others deemed as strong, calming, and admiring; and *twinship* needs to find sameness and partnership with others). Kohut viewed these needs as healthy narcissistic needs inherent in all of us that become pathological upon insufficient attunement to selfobject needs from others, leading to individuals remaining excessively invested in themselves (Kohut & Wolf, 1978).

While selfobject experiences are initially facilitated by parents, caregivers, and a caretaking environment, selfobject needs are continuously met, satisfied, and frustrated by others and the external environment throughout an individual's lifetime. In Kohut's view, a selfobject serves a particular function in meeting the needs of others and represents an individual's experience of another that becomes a part of the self that is as vital as oxygen (Kohut, 1984). In synthesizing Kohut's definition of selfobjects, Melano Flanagan (2016) summarized that selfobjects can be anything in the outer world that serves psychological nourishment, including culture, art, religion, and politics. Harwood and Pines (1998) expanded on this concept and noted that notions of culture, politics, religion, and historical circumstances need to be considered as constitutes of the individual self.

A critical selfobject need, the *idealized parent imago* or idealizing selfobject function is internalized by the child via *transmuting internalization*, the taking in of the function that provides a sense of safety, calm, competence, and omnipotence of the idealized figure that becomes an individual's own capacities (Goldstein, 2001).

A mother's soothing serves the function of comforting a crying infant who feels safe and tended to upon the mother's nurturing. This soothing and comforting feeling is internalized on the part of the infant, and eventually, the infant learns to self-soothe. In adulthood, selfobjects can take the form of close relationships, work, hobbies, and activities that provide a sense of fulfillment, comfort, and self-worth.

Self psychology's strong stance of development as a continuum (Harwood, 1992) and its extension of others beyond parents or caregivers to mentors, teachers, friends, relatives, or the community itself influencing the formation of the self widens opportunities for individuals to receive the necessary mirroring, idealization of others, and twinship, provisions that are a marker of health and the center of psychological development in this theory. The interconnection of the self to the experiences with and responses of others makes this sense of *we-ness* culturally applicable to work with Central Americans, who uphold *familismo* (importance of family and community) and *personalismo* (importance of relationships) as cultural values, among others (Añez et al., 2005), important protective factors that have been linked to positive mental health.

## Self-Psychology Views of Pathology and Repair

Kohut coined the term *tragic man* to capture a self that reflects un-mirrored ambitions and a self that is quite sad and suffering (Goldstein, 2001). In self psychology, affective disorders, such as the anxiety and depression experienced by Central American parents, are viewed as resulting from a pattern of empathic failures to the tripolar self. A lack of mirroring hinders the development of healthy goals and ambitions. Unmet idealizing needs impact opportunities to merge with a soothing, strong, and admiring other and can affect the ability to self-soothe, leaving the individual feeling depleted and empty. A lack of twinship can lead to feelings of isolation and loneliness. Anxiety in self psychology is experienced as disintegration anxiety, a threat of dissolution, or loss of the self (Rowe & Mac Isaac, 2000). Lack of empathic attunement and responsiveness from others leads to narcissist vulnerabilities, mobilized upon disappointment, rejection, misunderstanding, criticism, lack of appreciation, traumatic injuries, and other environmental failures (Melano Flanagan, 2016).

Kohut and Wolf (1978) formulated several types of transferences related to unmet selfobject needs that involve individuals projecting their past emotions, expectations, and developmental needs onto others. In therapy, these selfobject transferences can help individuals revive and repair early unmet needs for *mirroring*, *idealizing*, and *twinship* through empathic attunement and optimal responses from the therapist. This process strengthens the client's

self-structure and occurs in interactions and relationships outside therapy. Furthermore, Goldstein (2001) posits that the therapist's empathic failures cause transference disruptions, and recommends that therapists be self-scrutinizing to understand the reasons for their lack of attunement with clients, such as looking into their countertransference feelings. In self-psychology, countertransference is understood as the therapist's vulnerabilities that stem from their own selfobject needs and are exacerbated by working with a particular client.

Parents and caregivers unable to meet their children's selfobject needs may have suffered or be suffering from selfobject deficiencies, or may be impacted by current stressors forcing them to go inward to meet their narcissistic needs, making it difficult to satisfy or be attuned to someone else's needs. In support groups, members may transfer their thwarted psychological needs onto other group members or the therapist through transferences.

### The Self and Groups

While Kohut did not focus on group work until he began exploring it in his late life, he alluded to the influence of the social in his writing, eventually bringing attention to the group self. Kohut first discussed the group self in 1976 through his paper "Creativeness, Charisma, and Group Psychology: Reflections on the Self-Analysis of Freud" (Karterud & Stone, 2003). In this seminal article, Kohut posited that when individuals are part of groups, their individuality diminishes to make room for a group self or group's sense of self. Kohut theorized that a group self represents the group's central ambitions and ideals and accounts for the continuity and cohesion of the group (Karterud & Stone, 2003).

Several self psychologist-oriented therapists and scholars, including Rosemary Segalla (2021) and Irene Harwood (1992) have expanded self psychology concepts for their integration into therapeutic group work. The self psychology and group literature suggest that in group therapy, individuals are viewed as constituted out of a network of other people, gaining a sense of personal identity from the offering of others and their environment (Harwood & Pines, 1998). Each group member influences one another, and their needs, goals, and desires become interconnected to become the group's ambitions and sense of self. Schermer (2000), who also brought attention to the formation of a group self and emphasized the collective needs arising in the group, posits that if the group has a self, this self has a set of functions designed to maintain cohesiveness and integration of the group self, to foster group initiative and set goal direction.

The group process is actively facilitated by the group therapist, who through transference responses meets the selfobject needs of group participants. However, unlike individual therapy, intrapsychic experiences and needs go beyond the individual's needs to include the intrapsychic experience of the group (Segalla, 1998). In recognition of the multiple selfobject needs that arise in therapy groups, Segalla (2021) coined the term groupobject needs. Groupobject needs also recognize the different functions that support the organization of the group self (Segalla, 1998 as cited in Karterud, 1998).

The power of groups lies within the responses and transferential exchanges supplied by group members to one another, what the group represents, and how the group can be internalized as a positive force that becomes integrated as part of the self, thus allowing for new organizing principles. I theorize that for Central American parents, the group symbolizes a collective through which strength and safety can be derived, similar to *la familia* (the family), groups, and communities they belonged to and turned to for support in their home countries.

## Application of Self-Psychology to Groups with Central American Parents

By meeting *twinship* (sameness), *mirroring*, and *idealizing* needs, self psychology-oriented therapeutic groups provide multiple and ongoing opportunities for reparative interactions between participants and therapist and among participants that assist in the restoration of the cohesive self while fostering community. In therapeutic groups, the group self and the groupobject needs take precedence over the individual self and needs (Karterud, 1998). As groupobjects activate, the facilitator and group members meet these needs through transferential responses. Because groupobject needs activate constantly, the facilitator may unintentionally frustrate meeting these needs. However, these frustrations can be ameliorated by group members and not solely by the therapist. While the group therapist must remain vigilant to the multiple needs arising, the facilitator also plays another role in modeling empathetic responses, thus vicariously inviting participants in groups to respond to one another similarly. Segalla (2021) asserted that group members gradually internalize the capacity for empathy over the course of the group's life. Using the analogy of a conductor, Paparo (1984), as cited in Paparo and Nebbiosi (1998), suggests that the group facilitator (the conductor) "catalyzes and maintains an atmosphere that allows the mobilization and working through of selfobject needs" (p. 71).

### Twinship in Groups

Silvia's traumatic entry into the United States, the aggressive response by a government she turned to for help,

and the rejection by her children as a consequence of the attachment rupture led to a narcissistic vulnerability that impacted her sense of capability as a parent. After a few months in individual therapy, Silvia decided to join my support group. Silvia's initial sense of being in a welcoming setting arose when fellow group members began discussing the traditional dishes they enjoyed eating from their respective home countries. Her nonverbals and affect hinted at surprise and comfort. Discussions on lighter topics created a safe and stable environment for delving into their traumatic experiences. During the sessions, she quietly observed others narrate their experiences. The first mention of the word "separation" triggered the parents' pain and tears, and Silvia quickly identified with other members' frustration, sadness, and worries, and began participating and sharing her experiences in the group. "*Pensé que yo era la única que se sentía así*," ("I thought I was the only one who felt this way."). Togashi and Kottler (2015) assert that trauma leads to a profound need for sameness. Although appearing shy and cautious at first, Silvia and others found much comradery in their experiences as Central Americans and their commonalities, including the motivations for fleeing and hope for the future.

In this support group, having participants from the same geographical location who experienced similar traumatic experiences and also had similar aspirations led to closeness, belonging, and a sense of shared identity. At one point during the sessions, the group self began to give light when a participant uttered "*Somos fuertes*" ("We are strong"), interconnecting her strengths to those of other members and the group as a whole. There were also elements of twinship between the group participants and I. As fellow native Central Americans from Honduras, we spoke the same language, found much delight in finding Central American comfort foods in our area, and have experienced what it is like to leave one's home country and separate from loved ones. While the groups were centered around the participants' experiences, my connection with them as an immigrant and my own family separation experience provided me with valuable countertransference feelings through which I could access the participants' sense of loss. Sometimes, I thought I knew exactly how group members felt, and was eager to validate them. However, the urge I sensed in my body to want participants to know I understood their experiences immediately was also a clue that I needed to pause and understand my impulses based on my own needs to portray myself as understanding and more empathetic than the government. This recognition of my countertransference feelings allowed me to set aside my own wants and better attune to what the participants needed at the moment.

## Mirroring

During the group sessions, Silvia began to feel more comfortable sharing how difficult it was for her to connect with her children and her growing sense of failure because of it. In our individual sessions, her shame regarding the ruptured relationship was palpable.

Silvia often covered her face when discussing how hard things had been with her daughters, but in the group, she spoke courageously, unveiling her face and allowing herself to be seen. Group participants quickly jumped in to comfort Silvia, told their own experiences of failed attempts with their children, and provided recommendations. Silvia saw her pain reflected and accepted through the stories of other participants. Even when group participants did not always directly validate her experiences, their similar narratives alone provided a mirror in which Silvia could see herself reflected. She no longer had to hide. Perhaps in individual therapy, through the activation of the transference, Silvia unconsciously felt pressure from me to get things right, a pressure she felt from her mother, who consoled her across borders via WhatsApp. However, among peers with the same lived experiences, the pressure to deliver results appeared to decrease. Participants' empathic responses to Silvia's struggles and their belief that she could reconnect with her children as she aspired enlivened her sense of capacity. Silvia would eagerly come week after week, sharing a different attempt to repair the relationship with their daughters. "*Ya vienen a donde mi para preguntarme consejos*" ("They come to me now to ask me for advice"). Bacal (1985) and Stern (1985), as cited in Jackson (1994) suggest that empathic responses attenuate painful affect and assist in reacting to pre-existing cohesive states.

## Idealized Parent Imago

Considering that selfobjects can be anything in the outer world that serves as psychological nourishment, including culture, art, religion, and politics, because of the expectations immigrant parents had on how the U.S. government would support them, this system served the function of an idealized parent imago, but failed in its functions to provide aid, comfort, and a sense of safety. Instead, Central American parents experienced the deplorable punishment of family separation, incarceration, and abandonment by a nation that has meddled in their countries' affairs but could not humanely respond to the increasing needs of asylum-seekers. For some of the parents I worked with, the treatment of the U.S. government activated transference of the parent's

experience with an unresponsive government in their native countries that did not protect them from harm. Jackson (1994) suggested that *idealized parent imago* failures lead to a weak and fragmented self, and through the vicarious experience of the vitality and strength of the group, the individual weakened self of participants became stronger. Group participants experienced the group as a whole as a soothing, empathic, and validating *idealized parent imago*.

Although all selfobject needs are essential to meet to provide specific psychological benefits, I argue that in group work with asylum-seeking parents, the functions of strength, safety, and calm that the *idealized parent imago* (facilitator, group participants, group as a whole) offer are essential to provide self-regulation and repair of the cohesive parental self. When these functions are *transmuted internalized* as part of the self (e.g., we are strong, we are safe), it provides internal and external resourcing that immigrant parents can tap into when feeling lonely, unsafe, and in need of support. During a session, one of the parents shared how she thought of the group and the members when she felt scared to start a new job: "*Pensé, todos estamos pasando por lo mismo. Si todas hemos podido llegar aquí y sobrepasar lo que hemos vivido, yo puedo hacer esto*" ("We are all going through the same experience. If we have all been able to get here and overcome what we have lived through, I can do this"). This group member was able to access the strength of the group and connect to it as her own. She remembered the affirmations that group members had provided her that eventually became her own affirmations. She was able to merge with the omnipotence of the group, eventually internalizing that power as her own.

As external resourcing, parents in the last group I held began to connect outside of the group, sharing resources, tips, and developing friendships. Paparo and Nebbiosi (1998) affirm that among the powerful experiences of being in groups is the intensity with which the groups regulate the affect states of their members. Silvia's unmirrored self, reminiscent of Kohut's tragic man, became emboldened and filled with hope and possibility through the shared group's strengths, ambitions, and goals. Silvia is now working, attending English classes, attending a local church where she has made a few friends, and courageously continuing her attempts to strengthen the bonds with her children toward a united family.

## Discussion

With an increasing demand for culturally informed mental health services, group therapy can bridge the service gap and represent cultural responsiveness as it may align with interconnected cultures that prioritize groups, family, and friendship circles. Therapeutic support groups also provide a platform to break the cycle of silence and stigma that often accompanies historical trauma (Ortega-Williams et al., 2021), allowing individuals to confront and process their pain collectively. Self psychology-oriented groups in particular offer multiple opportunities for repair and can foster a sense of community, and internalization of the strength and supportive benefits of a collective. This transmuting internalization of collective safety and strength can be particularly beneficial for newly arrived immigrants, who may experience isolation due to traumatic immigration experiences and a frustrating welcome in their new country. Self psychology-oriented groups are also uniquely situated to provide trauma-informed care, as both approaches recognize the importance of safety, collaboration, and empathic attunement. Group mirroring can be especially helpful in addressing feelings of shame and isolation that often accompany trauma, enhancing connection, and promoting a supportive environment.

## Clinical Considerations

When working with asylum-seekers with pre-existing trauma, it is critical to account not only for the losses and traumatic stress associated with fleeing their native countries and their immigration journey; equally significant is acknowledging the repercussions of the losses and expectations frustrated upon migration coupled with new traumatic experiences. This includes interactions with systems and governmental entities that can activate narcissistic vulnerabilities and impact the cohesive self.

Conducting group therapy requires consideration of the group's composition, size, and the relevant experiences of its members. Participants in the last support group I facilitated for asylum-seeking parents were at different stages in their healing journey and had varying levels of engagement with culturally-driven support systems, such as church networks. While prior therapeutic support and a certain length of stay in the United States were not requirements to join the group, having members with diverse but relevant experiences enriched the insights and learning for all participants. Specifically, having individuals who were further along in their healing journeys or more integrated into their new communities fortified the group's mirroring and dynamic.

In my experience working with large and small groups of asylum-seekers with traumatic experiences by video, smaller groups with an average of 6 to 8 people allowed for an enhanced sense of safety and increased sharing and processing compared to larger groups. Therefore, smaller groups may provide more opportunities for empathic attunement to ongoing groupobject needs and may decrease the empathic frustration that can arise in larger groups. When

facilitating video-based group sessions, it is essential to consider the constraints and opportunities inherent in utilizing technology, all while adhering to established guidelines. In my groups, I used Zoom's chat feature, allowing participants to communicate their experiences through writing if they showed difficulty with verbalizing them. This approach garnered positive feedback, underscoring the value of offering various avenues for sharing and enhancing rapport. However, it is important to note that our video sessions did encounter limitations, primarily arising from connectivity issues among group members. These disruptions occasionally hindered the overall attunement between participants.

While this article has primarily centered on addressing the psychological challenges faced by Central American parents in relation to family separation and reunification, it is essential to recognize that there are additional complexities such as group dynamics to consider when facilitating groups. Group dynamics encompass a range of factors such as communication patterns, power dynamics, cultural backgrounds, and individual roles within the group. These elements significantly influence how the group interacts and progresses.

Furthermore, facilitators should be mindful of potential conflicts, individual needs, and the overall atmosphere within the group. Creating a safe and inclusive environment, promoting active participation, and fostering effective communication are critical aspects of ensuring a positive group experience.

Finally, in alignment with a strength-based approach, social workers, therapists, and other mental health professionals working with asylum-seeking families should proactively integrate strengths assessment and incorporate these attributes into the fabric of their intervention strategies. Despite the internal and external challenges and barriers that immigrants face in pursuit of their goals and dreams, the immigration process is also marked by the hope, determination, and strengths of those who undertake it, as exemplified by the Composite Case. As previously noted, immigrants often leave behind familiar environments, support networks, and cultural contexts, embarking on a journey fraught with uncertainties and adjustments. Whether driven by economic aspirations or the pursuit of safety, the decision to migrate requires a profound level of courage. This optimism and determination often enable immigrants to navigate unfamiliar landscapes and contribute meaningfully to their new communities.

## Training Implications

Since the emergence of therapeutic groups in the 1940s, groups have been shown to provide therapeutic outcomes equivalent to the results of individual therapy (Yalom & Leszcz, 2020). However, educational and training institutions have limited learning opportunities for group therapy work. With more demand for therapeutic services, educational institutions must prioritize group work training to adequately prepare psychotherapists. Furthermore, the expansion of psychodynamic studies in master's level programs is critical to better equip students to delve deeply into the intricate unconscious workings of the mind and effectively address transference and countertransference issues that are inherent to all clinical endeavors and hold pivotal within the exploration of group dynamics in work with immigrants. Social workers, therapists, and other mental health professionals interested in facilitating groups should also seek supervision or consultation and attend existing training or turn to the extensive literature on groups for guidance and knowledge.

## Research Implications

Future research on the impact of forced family separation should explore the long-term impact of parent-child attachment and the effect of external biopsychosocial stressors on the rebuilding process of parent-child attachment. While this article focused on exploring the traumatic aspects of forced family separation experiences and parent's mental health responses, future research should explore families' strengths, resilience, and post-traumatic growth through frameworks such as historical trauma-post traumatic growth. To continue to understand the experiences of asylum-seekers and provide group support through a psychodynamic lens, future exploration can include the examination of group therapy through intersubjective self psychology theory to explore the influence of group members' subjectivities and the group's therapist in the co-creation of therapeutic experience and healing.

## Policy Implications

The zero tolerance policy is one of many deleterious governmental policies that undermine immigrants' physical and psychological wellbeing. Given the considerable impact of sociopolitical factors on an individual's psyche, it is paramount for mental health providers to stay abreast of new immigration policies that can inflict a traumatic response. Policies that undermine asylum-seekers' rights to seek asylum, such as forced family separation or family detentions, need to be addressed and challenged to mitigate the harmful effects they have on the mental health of immigrants. As a mental health community, it is essential not only to respond with services, but to advocate for the

rights of asylum-seekers and engage in critical analysis and activism to challenge these policies and promote more humane and just immigration practices.

## Conclusion

Asylum-seeking parents from Central America who were separated under the zero tolerance policy have endured significant pain and mental health distress, including trauma, as a result of their forced government-led separation and subsequent reunification with their children. Increased attention to the impact of separation on parents is needed to adequately address their psychological scars. Their deep wounds demand interventions that align with their cultural familiarity and are trauma-informed, offering validation, avenues for processing, and opportunities for the internalization of positive aspects of a collective after a traumatizing welcome into the United States. Recognizing individuals' inherent connection to groups such as family and community where collective identity influences personal identity underscores the potential of group therapy for asylum-seekers scarred by traumatic experiences that disrupted their self-cohesion.

By providing a safe and supportive environment and the alchemy of shared narratives, empathetic connections, and the affirmation of a collective experience, self psychology-oriented therapeutic groups, in particular, can facilitate rebuilding a sense of self-identity and belonging.

Furthermore, the synergy between the tenets of self psychology and the group therapy setting resonates deeply with the intricate challenges that asylum-seekers often grapple with. The emphasis on empathy, mirroring, twinship, idealizing, and transmuting internalization within self psychology seamlessly align with some of the core healing needs of asylum-seeking parents. For Central American parents who have endured a blow to their cohesive selves, the transmuting internalization of the support group can symbolize strength and safety similar to *la familia* (the family) or *la comunidad* (the community), which represent familial cultural values.

Social workers, therapists and other mental health professionals interested in implementing self psychology groups can familiarize themselves with the extensive literature on self psychology and its expansion into groups and seek consultation and supervision when needed. Supporting asylum seeking families goes beyond a clinical response. Social workers, therapists and other mental health providers are encouraged to engage in social justice work to dismantle oppressive systems, advocate for fair and trauma-informed policies and mobilize communities.

## Declarations

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**Cheryl Aguilar**  is a clinical social worker and founder at Hope Center for Wellness. She is a doctoral student at Smith College School for Social Work, a fellow at the Robert Wood Johnson Foundation's Health Policy Research Scholars program and at the American Psychological Association's Interdisciplinary Minority Fellowship program.