Clinicians Not Immune to Impact of Border Violence

As the violence escalates in Mexico’s drug war, clinicians at two Network-affiliated centers in US/Mexico border regions are coping with increasing personal stress. “Almost all of us here have some family ties to Nuevo Laredo, and we worry about their safety,” said Gabriela Pérez, MA, Clinical Director at SCAN (Serving Children and Adolescents in Need, Inc.), located in Laredo, TX. Such is the reach of border trauma where community spirit and peace once thrived. For generations, border cities such as Laredo and Nuevo Laredo have comprised unified communities—what impacts one side also affects the other. “There has always been a great deal of fluidity here, with people crossing to shop, to bring their children to school, or to visit family,” noted Luis E. Flores, MA, SCAN’s Executive Vice President. Until the past few years, Flores and Pérez also enjoyed the fluidity of easy crossings to visit family and friends. That has all changed. Escalating drug cartel terrorism now pervades daily life in the border area, said Flores: “People are really afraid to go across and visit family members.” He and Pérez still cross from their home base in Laredo to visit family, but they avoid traveling at night; bring cash but no important documents; and always take a different route to their destinations.

Dante Jimenez, MA, Clinical Director of the Behavioral Health Clinic (BHC) at Aliviane, in El Paso, also customarily crossed the border to Juarez, his home town. But in the past two years he’s gone only once, and that was to consult a dentist. “As soon as you cross the bridge,” he said, “you see the military with machine guns at checkpoints. It is militarized; it is a war zone.”

Adapting to Danger

“Until 10 years ago,” Flores recalled, “there were fights between cartels but the general population was not that affected. Now, the cartels [mainly the Gulf Cartel and the paramilitary offshoot rival, the Zetas] intimidate the general public.” Cartels place mutilated bodies along with narcomantas (large banners) in prominent places to warn of the consequences of cooperating with the army and the government.

Pérez’s family has been directly affected by the violence: her father is a physician whose medical office in Nuevo Laredo was targeted in an invasion robbery. Although no one was injured, the experience was traumatic for Pérez and her family.

Concerns about Long-Term Effects

Flores expressed amazement about the resilience he has observed in communities faced with horrific violence. “People have devised ways of continuing their lives amidst ongoing threats to their safety,” he said. They travel in groups, are always alert to who is ahead or behind them while driving, pay close attention at intersections, and know to lie low instead of running if a shootout erupts in traffic. He said he worries about the long-term consequences of these forced adaptations, and about the effects on familismo, the cultural value that is such a protective factor for people of Mexican descent. “Borderlanders,” Flores observed, “no longer have the freedom to access connections to extended family and support networks across the border, as they were able to do in the past.”

Jimenez, too, has noted a change in his birthplace city of Juarez. “When I was young, we would play outside sometimes until 10 at night,” he said. “Now, people start going back into their houses as soon as it begins to get dark. It is not the same Juarez as when I was there. Now the violence is everywhere, so they have to reframe their thought processes of the situation.” He is concerned that citizens will become desensitized to the violence.

Tools for Coping

To combat the toll of border violence on themselves, Flores, Pérez and Jimenez maintain an open-door policy with staff members, encouraging them to discuss difficult cases or personal situations. When staff are at risk or begin to show signs of stress, Pérez sits with them to fill out and score together the Professional Quality of Life (ProQOL) scale, comprised of compassion satisfaction, burnout, and trauma compassion fatigue subscales (available at www.proqol.org).

“The understanding of the impact of trauma, and our efforts to promote the importance of self-care, is grounded in the trauma information that we have been getting for the past seven years as NCTSN affiliates,” Flores said. “It drives our push towards monitoring how we’re doing and how everyone else is doing, and what we can do as an organization to facilitate safety and self-care.”