

Hesitant: Undocumented Students' Use of Mental Health Services

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The Undocumented Student Equity Project is dedicated to conducting rigorous empirical research to inform institutional policy and practice, and ensure that universities effectively meet the needs of undocumented students.

USEP was founded at the University of California, Irvine.

It is a collaboration of undocumented and allied undergraduates, graduate students, and faculty.

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Surveyed undocumented undergraduate students at the University of California had higher levels of stress than those reported by other national samples. This presents a challenge to pursuing a college education as they have difficulty managing the multiple stressors connected to their immigration status.

Drawing on 508 survey responses and interviews with 30 undocumented students at the University of California, this brief explores undocumented students' perceptions and use of mental health services to understand how their immigration status creates psychosocial barriers to using mental health services. We conclude by outlining policy recommendations.

Undocumented students need mental health services but few seek help.

Almost two thirds of survey respondents reported feeling that they needed mental health counseling in the past year. However, only half actually sought help, with 68% of these seeing an on-campus mental health professional, 25% a nontherapist (e.g., professor, staff member, friend, or family member) and 7% an off-campus mental health professional.

Help-seeking is likely higher at the UCs than at other institutions because the UC system requires all students to enroll in a comprehensive student health insurance program (or provide proof of other insurance), and all campuses provide on-campus mental health services.

Interviews suggest that those who had accessed services did so intermittently and not on a consistent basis.

64%

of UC undocumented students reported needing mental health services.



Of these,
only 2 in 5
sought professional help.

Undocumented students normalized their strain, lowering their perceived need for services.

Students' chronic exposure to stressors made their mental health strain seem normal, rather than indicative of poor mental health. Tyler noted, "We've come to internalize it or normalize it. Not normalize in a good way but normalize in a sense that this is just something that everyone experiences so it's okay for me to experience it. ... We forget it shouldn't be a thing we're experiencing."

The normalization of mental health strain was further compounded by students' prominent use of denial as a coping strategy. Heisy, explained, "I just lie to myself like, 'Nah, it's not gonna affect me too much.' ... And in the back of my head, I know what's going on. But I'm trying to not let it bother me even though it is affecting me." Seeking to avoid thinking about immigration-related barriers, students pushed these thoughts to the side, which lowered their perceived need for services.

Undocumented students believed that seeking help would not address underlying sources of stress.

Some students chose not to access care because they felt that speaking with a counselor would not resolve the underlying immigration-related issues at the root of their stress. Ellen observed matter-of-factly, "But I don't think that [self-care] is gonna help my problems. Like taking a really nice bath isn't gonna make my problems go away. ... Doing yoga and meditating isn't going to impeach [President] Trump." Although such techniques may prove beneficial for coping with stress, students dismissed them as ineffective because they would not address the laws and policies producing their strain.

Others worried that discussing immigration status issues could increase mental health strain, rather than resolving it. Tania reasoned, "It literally feels like when you take one step [forward] and two steps back. ... You take one step in a sense that you're going to feel better or you're going to get these resources, ... But at the same time, it's like, two steps back because you're just reminded, one, I don't have a status, and two, now I have to encounter all these situations and all these questions and answer things."

Undocumented students worried about being stigmatized by counselors because of their undocumented status.

Only 17% of survey respondents believed that the mental health counselors on their campuses were knowledgeable about undocumented students and their issues. In his interview, Mauricio shared his experience with a counselor who was not sufficiently aware of undocumented students' issues: "A lot of it was me explaining what issues undocumented individuals face and then her just pitying me." Others anticipated similarly stigmatizing interactions and avoided seeking help.

Students expressed that a personal connection to the undocumented immigrant experience was critical to understanding their concerns and reducing potential stigma. Tania stated, "If you're not living it, if you're not experiencing it, if you're not going through the mental state, I'm sorry but you're just not going to understand." Thus, students reported seeking services and having positive experiences with counselors who were themselves previously undocumented or had training in understanding immigration issues.

Policy Recommendations

- 1. Provide professional development training for counselors to ensure that they understand immigration issues.** Hire and openly identify counselors who have experience effectively working with undocumented students.
- 2. Promote the use of mental health services.** Develop educational campaigns that promote the recognition of mental health strain and highlight how services can help students cope. Demystify assumptions that services have the ability to fix issues.
- 3. Establish undocumented student support groups.** Create safe spaces where students can discuss their stress and learn coping techniques.
- 4. Establish drop-in counseling hours or other avenues through which undocumented students can quickly access mental health services.** This is critical when immigration-related stress may be higher, such as after announced immigration policy changes or during periods of high immigration enforcement.