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# Lessons for Social Workers: A Review of the Latino/a Undocumented Immigrant Experience

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Lessons for Social Workers: A Review of the  
Latino/a Undocumented Immigrant Experience

by

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MSW Clinical Research Paper

Presented to the Faculty of the  
School of Social Work  
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St. Paul, Minnesota  
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Master of Social Work

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The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University/University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present the findings of the study. This project is neither a Master's thesis nor a dissertation.

## Abstract

Undocumented Latino/a immigrants seeking social work services face additional challenges due to their immigration status, such as social isolation, trauma, a hostile political climate, and fear of deportation. The researcher of this systematic literature review sought to answer the research questions: “What factors do undocumented Latino/a immigrants identify as helpful when utilizing social work services?” and “What factors do undocumented Latino/a immigrants identify as hurtful or barriers when utilizing social work services?” A systematic review was conducted using the databases SOCIndex, PsycINFO, and Social Work Abstracts and variations of the search terms “Latino/a,” “immigrant,” and “social work services.” Articles that were peer-reviewed and directly incorporated the thoughts and opinions of immigrant clients were accepted for inclusion. In total, 14 articles met the inclusion and exclusion criteria for this literature review. The following themes emerged regarding factors that Latino/a immigrant clients identified as helpful or hurtful when accessing social work services: 1) accessibility of social work services, 2) language and culture, 3) discrimination and prejudice, and 4) information and resources. Future research implications included the need to increase the amount of studies that directly incorporate the voices of undocumented immigrants. Future research should also examine the effects of the larger political climate on social work practice with undocumented immigrants. Practice implications included the need for social workers to provide accessible, culturally responsive, and bilingual services to their undocumented Latino/a immigrant clients.

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Soli Deo gloria.

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## Lessons for Social Workers: A Review of the Latino/a Undocumented Immigrant Experience

One of the largest-growing populations in recent history within the United States is that of Latino/a immigrants. In 2012 there were 53 million Latino/as living in the United States, or 17% of the population (Brown & Hugo Lopez, 2013). Of this Latino/a population, a portion are undocumented immigrants. An undocumented immigrant is someone who has entered the United States without legal paperwork, or has remained in the United States past their legal stay (for example, by overstaying a work visa) (Internal Revenue Service, 2016). While the number of undocumented immigrants can be difficult to measure, it is estimated that in 2014 there were 11.3 million undocumented immigrants living in the United States. Roughly half of all undocumented immigrants in the United States are from Mexico (about 52%), with another large portion of this population from Central and South American countries (Krogstad & Passel, 2015). More than half of undocumented immigrants (from all countries) live in the following six states: California, Florida, Illinois, New Jersey, New York, and Texas (Passel & Cohn, 2014). The number of undocumented immigrants in the United States grew rapidly from about 1990 to 2007, after which the trend began to level off (Passel & Cohn, 2014).

### **Countries of Origin**

A majority (52%) of the Latino/a undocumented population in the United States comes from Mexico (Passel & Cohn, 2014). However, recently the proportion of Mexican undocumented immigrants in the United States has fallen drastically. In 2012, there were 5.9 million undocumented Mexican immigrants in the United States, a sharp decrease from 6.4 million immigrants in 2009. This change is attributed to both a decrease in immigrants coming to the United States and an increase in immigrants leaving the United States permanently (Passel & Cohn, 2014). These trends are due to a myriad of factors including a weaker U.S. economy,

higher numbers of deportations, and changes in the Mexican economy (Passel, Cohn, & Gonzalez-Barrera, 2012). The next largest countries of origins for undocumented Latino/a immigrants in the United States are El Salvador, Guatemala, Honduras, the Dominican Republic, and Columbia (Passel & Cohn, 2014). Puerto Rico was not included in the list of countries of origin for undocumented immigrants since it is a U.S. territory and Puerto Ricans are U.S. citizens (Passel & Cohn, 2014).

### **Reasons for Migration**

There are a number of reasons why Latino/a immigrants leave their country of origin in order to come to the United States. These reasons could be economic, in the case of immigrants migrating to seek higher-paid jobs or escaping a difficult economic climate. Immigrants may also migrate for social reasons (family reunification) or political reasons (fleeing civil violence or governmental human rights violations) (Massey, Durand, & Pren, 2014). Specifically, researchers have found that two separate catalysts characterize trends in migration from Mexico and Central America: economic factors and political unrest.

The majority of immigration from Mexico was caused by economic changes. Upward trends of migration from Mexico occurred during Mexico's economic crisis in the 1980s and declined when the United States faced a recession in the 1990s. The majority of Mexican immigrants migrated to the United States to seek unskilled low-wage jobs (Massey, et al., 2014). While many believe that immigration from Mexico is primarily influenced by U.S. immigration policy, research shows that it is actually the U.S. labor demand that controls immigration rates (Massey, et al., 2014). In fact, in one study researchers found that the only significant predictor of Mexican migration to the United States was the strength of the U.S. labor demand for workers in

low-wage jobs, and this was the only consistent predictor of migration despite surges in U.S. border control enforcement (Massey, et al., 2014).

The majority of Central American immigrants have migrated to the United States due to political unrest and civil violence, often resulting from interventionist U.S. policies in the 1980s. Central America suffered from high levels of political violence between 1979 and 1989, and this strongly influenced the low likelihood of undocumented immigrants returning to Central America during this time period. While experts expected undocumented immigration from Central America to subside as political violence decreased, it has only subsided slightly due to increases in civil and gang violence (Massey, et al., 2014).

### **Undocumented Latino/a Immigrants Seeking Social Work Services**

Undocumented immigrants often seek social work services for reasons identical to those held by U.S. citizens, such as stage-of-life issues, mental health problems, or obstacles in meeting basic needs. However, an undocumented status can alter these reasons in both severity and quality. One factor that significantly alters the functioning of undocumented people is the internalization of anti-immigrant sentiment. Many undocumented immigrants in the United States are characterized by the term “illegal immigrant.” Current U.S. political climate often contains the rhetoric that undocumented immigrants should just “get in line” and immigrate “the right way.” Contrary to popular belief, often there is no “line” for undocumented people to access. Legal immigration channels in the United States are limited to employer sponsorship, familial reunification, or humanitarian protection (such as refugee status) situations. Most immigrants do not have U.S. employers or family who can sponsor them, and their situation in their home country does not qualify them for refugee status. Even for those individuals who do qualify for legal immigration through one of these channels, the backlog of cases creates

incredibly long wait times- over 20 years for some people (American Immigration Council, 2016).

This “illegal” label paints a picture of undocumented immigrants as dangerous or criminal. When clients internalize this label, it can make them feel fearful, lonely, and left feeling hopeless about their future as a member of U.S. society (Gonzales, Suárez-Orozco, & Dedios-Sanguinetti, 2013). Immigrants may suffer from very low self-esteem due to the stigma of being undocumented, which then leads to poor self-care (such as not seeking medical help or preventative care) and self-endangering behaviors (such as drinking excessively or using drugs) (Gonzales, et al., 2013). Others internalize this negative self-image and suffer from anxiety, depression, difficulty sleeping, and chronic medical problems such as high blood pressure (Gonzales, et al., 2013).

An undocumented status also negatively affects clients’ ability to utilize social networks and increases the likelihood that the client will be socially isolated. Due to a fear of deportation or being “found out,” individuals who are undocumented often feel hesitant to expand their social circles or participate in social groups outside of family (Gonzales, et al., 2013). Parents may indirectly or directly communicate this fear to their children, discouraging them from forming friendships (Congress & González, 2013). Parents and children in mixed-status families (families in which some members are documented and some are not) often experience a clash of cultures between the parents’ traditional values of their country of origin and the children’s values derived from mainstream U.S. culture. Differing levels of acculturation within families and intergenerational conflict can erode the only source of social support - the family (Foner & Dreby, 2011).

Individuals who are undocumented also encounter obstacles in accessing stage of life rituals that are pertinent to economic opportunity and identity in U.S. society. Children of undocumented parents have lower levels of pre-kindergarten enrollment, possibly due to parents' fear of filling out paperwork for public pre-kindergarten programs. Children of all ages live with the very real fear that they or their parent may be deported and their family torn apart. These fears can interfere with their academic and social functioning (Carnock, 2016). Adolescents and young adults who are undocumented face barriers in accessing important stage of life rituals that require citizenship or a social security number, such as getting a driver's license, voting, or obtaining financial aid to attend college (Gonzales, et al., 2013). Adults with an undocumented status encounter extremely limited channels to obtain a job, access health insurance, and rent or purchase housing (McMillen, 2015). These barriers limit immigrants' economic opportunities and their ability to participate in the larger U.S. social culture.

Social work clients who are undocumented encounter unique challenges related to meeting basic needs and ensuring their safety and security. Many immigrant families send money home to relatives in their country of origin, decreasing the income that the family has to use for food, shelter, and other basic needs (Rebala, 2015). Undocumented immigrants are not eligible for public benefits such as food stamps, welfare, or Medicaid, further increasing this population's risk factors for poverty, homelessness, and food insecurity (Santana, 2014). Furthermore, due to fear of being questioned about their immigration status, immigrants are significantly less likely to contact police to report a crime committed against them (Theodore, 2013). The implications of this fear have substantial consequences for immigrants' likelihood of initiating interactions with other safety entities, such as child protection or emergency responders.

In addition to threats to basic needs and safety, many immigrants have experienced high levels of trauma, which alters their mental health functioning and perception of safety. This trauma may have originated in their home country (for instance, partner abuse or political violence) or a harrowing immigration journey. Immigration journeys are often characterized by life-threatening travel conditions, gang violence, sexual assault, and physical danger. Finally, immigrants are at a higher risk for remaining in unsafe conditions, such as an abusive relationships, as fear of deportation discourages them from contacting police or asking for help (Kaltman, Hurtado de Mendoza, Gonzales, Serrano, & Guarnaccia, 2011). All of these factors may increase the likelihood that undocumented immigrants will seek social work services, and necessitate that social workers working with this population are trained in interventions specific to this population and their unique experiences.

### **Previous Research**

Several systematic literature reviews have been conducted on topics related to Latino/a immigrants in the mental health field. Cardoso and Thompson (2010) examined the literature relating to resilience factors for Latino/a immigrants and found four key areas of resilience: individual characteristics, family strengths, cultural factors, and community supports. These researchers suggest that social workers should capitalize on these resilience factors when working with Latino/a immigrants. While these recommendations are beneficial for social work practice, this review encompasses both documented and undocumented Latino/a immigrants, lacking specificity to only undocumented populations. The results of this study include helpful findings regarding Latino/a immigrant strengths, but do not explore what Latino/a immigrants find helpful or harmful within the provision of social work services.

A second systematic literature review by Martinez, et al. (2015) focused on the effect of anti-immigration policy and the physical and mental health of undocumented immigrants. These researchers found that anti-immigration policy led to lack of access to vital health care for undocumented immigrants, discrimination towards immigrants from health professionals, and mental health problems such as depression, anxiety, and posttraumatic stress disorder among immigrants. This study demonstrates that immigrants often face discrimination from care professionals who should be providing them with services. Social work professionals must therefore take extra steps to provide culturally responsive services to undocumented immigrants in a society whose policies often encourage systemic oppression and discrimination.

The literature also shows that a majority of social workers have more negative attitudes toward undocumented immigrants in comparison to their attitudes regarding documented immigrants. These attitudes toward immigrants are influenced by social workers' workplace policies toward immigrants, level of education, political beliefs, and amount of contact with immigrants (Park, Bhuyan, Richards, & Rundle, 2011). A lack of understanding around the needs of undocumented Latino/a clients may also stem from an underrepresentation of this population among social workers. Only 4.3% of licensed social workers identify as Hispanic or Latino/a, yet 77% of social workers report working with Latino/a clients (Center for Health Workforce Studies, 2006). While there is a gap in research regarding the number of licensed social workers who are undocumented immigrants, currently only five states allow undocumented immigrants to apply for professional licensure (Catholic Legal Immigration Network Inc., 2016). This barrier, along with obstacles undocumented immigrants face in applying for financial aid and enrolling in higher education, decrease the likelihood that social workers reflect the undocumented populations they serve. This research demonstrates the importance of teaching social workers

about the unique vulnerabilities and stressors faced by undocumented immigrant clients, perhaps stemming from attitudes that social workers themselves hold. Finally, research shows that social work classes on practice with immigrants do not necessarily produce the intended effect of more positive views toward immigrant clients. Instead, further research and coursework is needed to examine the unique experiences of undocumented immigrants in our current political and economic climate (Bhuyan, Park, & Rundle, 2012).

### **Research Question**

Further research is needed to study the unique experiences of undocumented immigrants. In addition, social work practice would benefit from even more specific recommendations regarding how to provide culturally responsive social work services to undocumented Latino/a immigrants. These previous literature reviews demonstrate the need for further research regarding the ways in which social work professionals can provide care that is explicitly anti-racist and anti-discriminatory toward undocumented Latino/a immigrants. Social workers believe that research is not separate or devoid of values (National Association of Social Workers, 2008). Instead, social workers should utilize the tenets of social work to guide their research. For this reason, elevating the voices of undocumented immigrants and allowing them to serve as the authority on what is beneficial and harmful in social work is of the utmost importance. Current research and social work ethical stance supports the argument that social workers have the responsibility to advocate for their undocumented immigrant clients, regardless of citizenship status (Cleaveland, 2010; National Association of Social Workers, 2008). However, in recent history the priorities of the social work profession have transitioned away from community-based work and toward clinical social work. A byproduct of this transition is that fewer social

workers are engaged with the most marginalized clients in our communities, including immigrant clients (Furman, Loya, Jones, & Hugo, 2013).

This systematic literature review will attempt to fill a gap in current research literature regarding the experiences of undocumented Latino/a immigrants seeking social work services. There appears to be a lack of research synthesizing Latino/a immigrant voices regarding their needs and preferences when accessing social work services. Using exclusively studies with undocumented Latino/a immigrants as participants, the researcher will attempt to answer the questions, “What factors do undocumented Latino/a immigrants identify as helpful when utilizing social work services?” and “What factors do undocumented Latino/a immigrants identify as hurtful or barriers when utilizing social work services?” By solely focusing on studies with undocumented Latino/a immigrants, the researcher will seek to elevate the voice of this population as the authority on what helps and hurts them in social work services. The researcher will also seek to provide social workers with practical, concrete information regarding how to provide effective, culturally responsive services to this group.

## **Methods**

### **Research Purpose**

The two research questions for this systematic literature review were: “What factors do undocumented Latino/a immigrants identify as helpful when utilizing social work services?” and “What factors do undocumented Latino/a immigrants identify as hurtful or barriers when utilizing social work services?”

The researcher’s definition of the term “Latino/a” for the purpose of this study included people from primarily Spanish-speaking countries in Latin America. In current vernacular, the term “Hispanic” refers to people who speak the Spanish language (including in South and

Central America, Mexico, and Spain, and excluding Brazil). The term “Latino/a” is commonly used to refer to people from the geographic area of Latin America (therefore including Brazil and excluding Spain). Therefore, for the purpose of this study the term “Latino/a” refers to people from Latin America who speak primarily Spanish and are not from Brazil.

Second, the term “undocumented immigrant” for the purpose of this study referred to someone who has immigrated to the United States without legal papers, or who has illegally overstayed their period of allowed residency. The researcher believed that an undocumented status has a significant effect on these clients’ experiences accessing social work services compared to other immigrant groups’ experiences. Since many studies did not specify the immigration status of their sample group, but often made mention of issues of immigration status in the findings section, the researcher included all studies that specified that participants were immigrants or foreign-born, unless they explicitly described their sample group as legal immigrants (for example, a sample group of only Puerto Ricans who are all U.S. citizens).

Third, “social work services” is used to refer to micro-, mezzo-, or macro-level social services. This includes generalist social work practice such as case management or basic needs assistance, as well as general mental health services (including more clinical treatments for diagnoses such as depression, anxiety, or trauma).

### **Types of Studies**

The types of studies accepted for inclusion in this systematic review were qualitative or quantitative empirical studies. The primary selection criterion for this systematic literature review was the type of sample group: only studies that incorporated the opinions and thoughts of undocumented immigrants directly, rather than indirectly (such as social workers reporting on their experiences with undocumented immigrants) were included. This review only utilized

studies conducted within the United States, as results may be highly affected by current immigration laws and societal beliefs about immigrants.

### **Levels of Sensitivity and Specificity**

To determine the feasibility of this review, the researcher conducted both a sensitivity and specificity study. A sensitivity study uses more general search terms and yields a high number of studies, many of which may be irrelevant to the research question. A specificity study uses more stringent search terms and yields mostly relevant studies, but does not capture all of the relevant studies within the databases searched. It was determined that the review was feasible.

### **Review Protocol**

The researcher considered peer-reviewed, full-text articles for this literature review. Databases searched included SOCIndex, Social Work Abstracts, and PsycINFO. Searches were conducted in October 2016. The following exclusion and inclusion criteria were utilized to systematically include articles that answered the research question.

**Inclusion criteria.** At the first stage of this research, a search was conducted in SOCIndex using the following search terms: “Hispanic Americans”, “undocumented immigrants”, and “social services” or “social casework” or “medical social work” or “outreach programs” or “psychiatric social work” or “school social work” or “social services case management” or “social services utilization” or “social workers.” These terms were found using the “subject terms” index in SOCIndex. The first search in SOCIndex yielded 10 non-duplicated peer-reviewed articles. In the Social Works Abstract database, a search was conducted using the terms “Latino” or “Latina” or “Hispanic.” “undocumented immigrants” or “illegal immigrants,” and “social work” or “social services” or “case management” or “social workers.” The first search in Social Work Abstracts yielded three non-duplicated peer-reviewed articles. In the

PsycINFO database, a search was conducted using following terms: “Latinos/Latinas” or “Mexican Americans,” “illegal” or “undocumented,” and “social workers” or “social casework” or “case management” or “child welfare” or “mental health services” or “outreach programs” or “protective services” or “social services” or “social programs.” All search terms except for “illegal” and “undocumented” were found using PsycINFO’s “term finder” tool. The first search in PsycINFO yielded nine non-duplicated peer-reviewed articles.

A second search in each database was conducted when the researcher noted that many studies did not specify the immigration status of the participants in the title or abstract, but had participants who were undocumented. A second search in SOCIndex included the same search terms as the first search in this database, but used the subject term “immigrants” in place of “undocumented immigrants.” This search yielded 25 non-duplicated peer-reviewed articles. A second search in Social Work Abstracts used the same search terms as the first search, but used the term “immigrant” in place of “undocumented immigrants” or “illegal immigrants.” This search yielded 35 non-duplicated peer-reviewed articles. A second search in PsycINFO included the same search terms as the first search, but substituted “immigrant” or “immigrants” for the search terms “illegal” or “undocumented.” This search yielded 75 non-duplicated peer-reviewed articles.

**Exclusion Criteria.** A total of 157 articles were then reviewed against this study’s exclusion criteria. The researcher reviewed the title, abstract, and in some cases the entire body of the study to determine whether the study met the exclusion criteria. Studies were discarded if they were not empirical studies (for example, if they were conceptual or opinion papers). Studies were excluded if they did not directly incorporate the thoughts and opinions of immigrants about their perspectives. If studies made no mention that their sample was part immigrant or foreign-

born, they were excluded. Studies that included only Puerto Ricans in their sample were excluded, as Puerto Ricans are U.S. citizens. Studies that utilized the voices of Latino/a providers rather than Latino/a clients were excluded. Studies outside of the United States were excluded. And finally, studies that did not include participants' views on social work, social workers, mezzo- or macro-level social programs, or mental health services in general were excluded. Two of the articles that were requested via the researcher's institution's library system, but did not arrive and therefore were not evaluated against the above exclusion criteria. It is unknown whether or not these articles would have met criteria for this review. After exclusion criteria were applied, a total of 14 articles met the criteria for this review. A detailed list of these articles can be found in Table 1.

### **Findings**

The 14 articles that passed the exclusion and inclusion criteria for this study represented a variety of methods, sample sizes and service contexts. The majority of these studies were conducted using qualitative methods such as open-ended interviews or focus groups. Researchers also used field observation, secondary data analysis, surveys, and community-based participatory research models to gain information from participants. Service contexts of research spanned a continuum of social services including domestic violence and sexual assault services, maternal and child health programs, a family childcare certification program for Latino/as, community centers, senior services, legal services for undocumented immigrants, educational services, and primary care and mental health clinics. Participants in the selected research studies, while all Latino/a immigrants, also possessed varying characteristics with respect to age, country of origin, and family role (ex: single mothers). All studies made mention that their participants were foreign-born or immigrants and nearly all mentioned that all or some of their participants were

Table 1

## Included Articles

<b>Author/Year</b>	<b>Title</b>	<b>Sample</b>	<b>Type of Study</b>	<b>Service Context</b>	<b>Beneficial Factors in Social Work</b>	<b>Detrimental Factors in Social Work</b>
Ayón, C. (2014)	Service Needs among Latino Immigrant Families: Implications for Social Work Practice	52 first-generation immigrants	Qualitative: semi-structured interviews using focus groups	Community-based agency	<ul style="list-style-type: none"> <li>• Provide information on housing, jobs, recreational activities</li> <li>• Provide information on immigration laws and their effects on family</li> </ul>	<ul style="list-style-type: none"> <li>• Asking for identification or papers</li> </ul>
Belliveau, M. (2011)	Gendered Matters: Undocumented Mexican Mothers in the Current Policy Context	20 Latina undocumented mothers	Qualitative: interviews	Local maternal and child health program	<ul style="list-style-type: none"> <li>• Strategies that advocates used to address misinformation and rumors in the community</li> </ul>	<ul style="list-style-type: none"> <li>• Systemic discrimination from welfare workers</li> </ul>
Cardemil, et al. (2007)	The Latino Mental Health Project: A local mental health needs assessment	166 Latino/a community members, the majority of whom were immigrants	Qualitative: semi-structured interviews	General mental health services	N/A	<ul style="list-style-type: none"> <li>• Language/cultural barriers</li> <li>• Fear to access services because of immigration status</li> </ul>
Chapman, M. & Stein, G. (2014)	How Do New Immigrant Latino Parents Interpret Problem Behavior in Adolescents?	16 Latino/a immigrant parents	Secondary data analysis from The Latino Adolescent Migration, Health, and Adaptation Project. Data portion used was a qualitative data collection of interviews with parents.	Mental health services for parents/adolescents	<ul style="list-style-type: none"> <li>• Professional equips parents to parent better instead of working directly with adolescent</li> </ul>	N/A

Eisenman, et al. (2008)	PTSD in Latino Patients: Illness Beliefs, Treatment Preferences, and Implications for Care	Sixty foreign-born Latino/a adults	Qualitative: Semi-structured interviews	Primary care centers, mental health services for patients with PTSD	<ul style="list-style-type: none"> <li>Professionals providing self-help materials, social service/employment assistance</li> </ul>	N/A
Heckert, C. M. (2012)	Latina Immigrants in Rural Western Pennsylvania and Use of Mental Health Resources When Coping with Depression: Implications for Practice	8 Latina immigrants	Qualitative: semi-structured interviews	Mental health resources when coping with depression	<ul style="list-style-type: none"> <li>Practitioners who respected women's desires to use treatment modalities besides medication</li> </ul>	<ul style="list-style-type: none"> <li>Language barriers</li> </ul>
Kaltman, S., Hurtado de Mendoza, A., Gonzalez, F., & Serrano A. (2014)	Preferences for Trauma-Related Mental Health Services Among Latina Immigrants from Central America, South America, and Mexico	27 low-income immigrant women from Central America	Qualitative: interviews	Primary care clinics/mental health services	<ul style="list-style-type: none"> <li>Preferred locations: primary care clinics, mental health clinics.</li> <li>Receiving services in parks, churches, houses, community centers, cultural locations</li> <li>Affordable cost</li> <li>Bilingual provider</li> <li>Flexible appointment times</li> </ul>	<ul style="list-style-type: none"> <li>Asked to show immigration papers</li> </ul>
Quinones-Mayo, Y. & Dempsey, P. (2005)	Finding the Bicultural Balance: Immigrant Latino Mothers Raising "American" Adolescents	12 Latina immigrant single mothers raising adolescent children	Qualitative: focus group using narrative therapy	Local community center: services to adolescents and their parents	<ul style="list-style-type: none"> <li>Workers exposed to various languages and cultures</li> <li>Emphasize client's culture and language in assessments</li> <li>Treat clients humanely</li> </ul>	N/A

Reina, A.S., & Lohman, B. J. (2015)	Barriers Preventing Latina Immigrants from Seeking Advocacy Services for Domestic Violence Victims: A Qualitative Analysis	10 female immigrants from Mexico and Central/South America- all undocumented	Qualitative: Open-ended interviews and a focus group	Nonprofit domestic violence and sexual assault agency	<ul style="list-style-type: none"> <li>Identified need for support groups focused on self-improvement, information on parenting skills, school, jobs</li> <li>Outreach for victims who live in rural or isolated areas</li> </ul>	<ul style="list-style-type: none"> <li>Discriminatory practices and attitudes</li> </ul>
Scharlach, A. E., & Sanchez, E. (2010)	From Interviewers to Friendly Visitors: Bridging Research and Practice to Meet the Needs of Low-Income Latino Seniors	210 Latino/a seniors (many undocumented immigrants)	Qualitative: in-depth interviews	Latino senior services	N/A	<ul style="list-style-type: none"> <li>Services offered only in English</li> <li>Lack of Latino participants and staff</li> <li>Activities not culturally appropriate</li> </ul>
Strug, D.L., & Mason, S.E. (2001)	Social Service Needs of Hispanic Immigrants: An Exploratory Study of the Washington Heights Community	30 Latino/a immigrants (several non-citizens)	Qualitative: interviews with community experts and focus groups with community residents	<ul style="list-style-type: none"> <li>Agency offering legal advice and service referrals for non-citizens</li> <li>Educational programs for noncitizens</li> <li>Hispanic senior services</li> </ul>	N/A	<ul style="list-style-type: none"> <li>Lack of staff to help fill out/translate paperwork</li> <li>Staff using discriminatory practices</li> </ul>
Martinez Tyson, D. M., Arriola, N. B., & Corvin, J. (2016)	Perceptions of Depression and Access to Mental Health Care Among Latino Immigrants: Looking Beyond One Size Fits All	120 Latino/a immigrants	Qualitative: Semi-structured interviews	Mental health care for depression	<ul style="list-style-type: none"> <li>Linking to services and helping immigrants navigate U.S. systems</li> </ul>	<ul style="list-style-type: none"> <li>High cost</li> <li>No insurance</li> <li>Non-bilingual providers</li> <li>Fear of deportation</li> </ul>

<p>Uttal, L. (2006)</p>	<p>Organizational Cultural Competency: Shifting Programs for Latino Immigrants from a Client-Centered to a Community-Based Orientation</p>	<p>Undocumented and documented Latino/a family childcare providers</p>	<p>Community-based action research: 2 years of field observations of the development of a family childcare provider certification program in Spanish. Used observations, surveys, focus groups, individual interviews</p>	<p>Family childcare provider certification program (social justice purpose)</p>	<ul style="list-style-type: none"> <li>• Spanish-speaking staff functioned as information resource beyond scope of their job</li> <li>• Culturally-specific programming that addressed needs holistically</li> </ul>	<ul style="list-style-type: none"> <li>• Background checks</li> </ul>
<p>Xu, Q. &amp; Brabek, K. (2012)</p>	<p>Service Utilization for Latino Children in Mixed-Status Families</p>	<p>Undocumented Latino/a parents of documented children</p>	<ul style="list-style-type: none"> <li>• Qualitative portion: in-depth interviews</li> <li>• Quantitative portion: community survey</li> <li>• Participatory action research project: dialogue with participants</li> </ul>	<p>General social services: undocumented parents accessing services for their citizen children</p>	<ul style="list-style-type: none"> <li>• Free services</li> <li>• Clinics that don't check legal documentation</li> <li>• Spanish-speaking staff</li> <li>• Services offered in hospitals and schools</li> <li>• Schools and hospitals serving as access points to other services- connecting clients with other resources</li> <li>• Positive experience in these entry points lead to more confidence in accessing other services for their children</li> </ul>	<p>N/A</p>

undocumented. These studies yielded several themes that display Latino/a immigrants' preferences regarding social work services.

### **Accessibility of Social Work Services**

The theme of accessibility of social work services appeared repeatedly in the literature as a concern for Latino/a immigrants. Issues of cost, distance, and location entry points affected immigrants' ability to access social services.

**Cost.** Cost of social services was a major determining factor in the likelihood that immigrants, especially undocumented immigrants, were able to access services. Undocumented families were particularly likely to seek out free services (Xu & Brabeck, 2012). In one study with 27 low-income Latina immigrants, cost was the most important logistical factor, surpassing the need for a Spanish-speaking provider, flexible hours and location, and the preferred gender of the provider (Kaltman, Hurtado de Mendoza, Gonzalez, & Serrano, 2014). In another study, immigrants from Mexico, Cuba, Puerto Rico, and Columbia identified high cost and lack of health insurance as major prohibitive factors to seeking out mental health services (Martinez Tyson, Arriola, & Corvin, 2016).

**Location.** When it comes to accessibility of services for Latino/a immigrants, research indicated that location matters. The research showed that undocumented immigrants were more likely to easily access services within hospitals, medical clinics, and schools (Kaltman, et al., 2014; Xu & Brabeck, 2012). A study by Kaltman, et al. (2014) found that immigrants preferred receiving trauma-related mental health services in their primary care clinics, followed by mental health clinics, which they experienced as familiar places that provided affordable services. Undocumented parents of children found particular ease in accessing services for their children in schools and medical clinics, which then served as doors to other services such as basic needs

assistance, preventative health services, mental health services, early childhood programs, or other medical services (Xu & Brabeck, 2012). Xu and Brabeck (2012) found that undocumented parents who were able to successfully access services for their children through these entry points experienced more confidence and independence when seeking additional services for themselves and their children. Other immigrants identified additional locations as optimal to receive mental health services. Some immigrants preferred to meet at parks or their houses, citing the comfort and privacy of these locations, and others suggested cultural locations such as a restaurant serving food from their country of origin (Kaltman, et al., 2014).

**Immigration status.** An undocumented immigration status adds additional complexities to the process of utilizing social work services, and the research reflected this. A major fear of undocumented immigrant clients was that in accessing services, they would face negative consequences due to their immigration status, such as a risk of deportation (Cardemil, et al., 2007; Martinez Tyson, et al., 2016). For this reason, undocumented immigrants desired services that do not check legal documentation, including providers that do not ask for identification, immigration papers, or require background checks to receive benefits or services (Ayón, 2014; Kaltman, et al., 2014; Uttal, 2006; Xu & Brabeck, 2012)

**Other accessibility factors.** Participants in the research offered a few other suggestions for making social work services more accessible to undocumented Latino/a immigrants. Reina and Lohman (2015) found that Latina immigrant women identified the need for social workers to do outreach to domestic violence victims who live in rural or isolated regions. Other participants in a study by Kaltman, et al. (2014) identified flexible appointment times as an important accessibility factor. Most participants preferred services that were offered outside of their work

schedules, and non-working parents preferred services that they could access while their children were in school. (Kaltman, et al., 2014).

### **Language and Culture**

Another theme that showed up in the literature was the role that different languages and cultural values had on the delivery of social work services to undocumented immigrants. Many studies contained opinions from immigrants about how a match or mismatch in language and culture has a direct effect on services.

**Spanish-speaking staff.** Research in this study showed that providers who only spoke English were a major deterrent for Latino/a immigrants seeking social work services (Cardemil, et al., 2007). Immigrants were less likely to attend programs or solicit help when they knew the services were offered only in English (Heckert, 2012; Scharlach & Sanchez, 2010; Martinez Tyson, et al., 2016). Participants reported that the presence of a Spanish-speaking staff helped them access services more independently and made them feel more fully understood (Kaltman, et al., 2014; Xu and Brabeck, 2012). Several immigrants in a study by Kaltman, et al. (2014) said that they would be willing to pay more to see a provider who spoke Spanish, a powerful statement when coupled with the findings regarding the importance of low-cost services for this population group. In a related finding, participants in a study by Scharlach and Sanchez (2010) cited a lack of Latino/a staff *and* participants as a deterrent to participating in services for seniors. The use of interpreters was not directly mentioned in the literature. Some study participants talked specifically about their desire for a provider that spoke Spanish. Others just expressed a need for services provided in Spanish, which begs the question as to whether the use of interpreters would meet that need.

**Culturally-responsive treatment.** The issue of culturally responsive services was also raised by Latino/a immigrants in this research. Some participants cited cultural barriers as a reason for not pursuing mental health services (Cardemil, et al., 2007). In one study, a group of Latina mothers communicated that it was important to them that social workers have a variety of bicultural and bilingual experiences to draw from, and that they incorporate a client's language and culture into both the assessment and treatment processes. They questioned why they, as clients, were forced to adapt to the dominant culture and language, instead of social workers educating themselves on the language, customs, and values of their Latino/a clients. (Quinones-Mayo & Dempsey, 2005).

Several cultural values regarding treatment preferences also emerged in the literature. Since the Latino/a immigrant population is a heterogeneous group made up of several cultures, countries of origin, and languages, these conclusions should not be indiscriminately applied to all Latino/a immigrants. Still, these identified preferences serve as possibilities for social workers to contemplate while carefully considering goodness-of-fit when working with clients from these populations. For example, a secondary data analysis by Chapman and Stein (2014) with interviews of newly-immigrated Latino/a parents of adolescents revealed that these parents believed that the practitioner should work with them and help them to improve their parenting skills, rather than working directly with their adolescent child. They were emphatic about their desire to serve as the main influence in their child's treatment, with the professional taking a supportive and resource-driven role, rather than a directive treatment role. A group of Latina immigrants experiencing depression expressed the need for mental health providers to respect their desire to try treatments other than medication (Heckert, 2012).

A final example of the need for social workers to adjust their work to fit the values of their client population appeared in a study with a group of Latina child care providers participating in a social justice-based childcare certification program. These child care providers expected that the bilingual director would help them with general needs outside her list of job responsibilities, such as answering questions about raising teenagers or translating documents (Uttal, 2006). In keeping with this holistic view, the participants in this study also challenged the program to expand their services beyond simply licensing and certification. They expressed a preference that the program address higher-level issues such as cultural differences in childrearing and education in child development that they believed would assist their entire community, not just those involved in the program. In expressing the need for a holistic, systemic view of services, one woman in this study said, “To me, this is very important, we can become educated to take care of children. Not only a way of making a living, but a way of becoming educated, not only for my children, but for other peoples’ children” (Uttal, 2006, p. 259).

### **Information and Resources**

Another theme that emerged in the literature was information: the need for practical information and the helpful ways social workers disseminated it to Latino/a immigrants. One participant in Ayón’s (2014) study stated succinctly, “We need information on everything!” (p. 18). Latino/a immigrants expressed their desire for social workers to serve as resources for information on issues like housing, employment, schooling options, recreational activities for children, immigration law and rights of undocumented parents and their documented children (Ayón, 2014). Other immigrants requested information on self-help materials for mental health issues and general social service resources (Eisenman, et al., 2008; Reina & Lohman, 2015). Participants in a study by Martinez Tyson, et al. (2016) reported their preference that social

service agencies assist with connecting them to services and helping them navigate the U.S. health care system. One Columbian man told researchers in Strug and Mason's (2001) study that the lack of social workers in a Medicaid office led to him giving up and going home, unable to find help in translating and filling out the paperwork. Across studies, immigrant participants vouched for the necessity of social workers to connect them with information and help them navigate complicated systems.

A final idea emerged in the research literature regarding information, or more specifically, the dissemination of information. A group of undocumented immigrant mothers interviewed by Belliveau (2011) raised the issue of misinformation and rumors that often circulated among the undocumented community, leading to a fear of applying for benefits or services among many immigrants. Participants in this study identified providers as crucial players in providing accurate information to immigrant communities, and doing so in a way that honored cultural family values. Since the men in these families often held the key to whether or not their families applied for benefits, these undocumented mothers appreciated the way that advocates provided the mothers with accurate information in a respectful, culturally appropriate way that addressed misinformation while not disparaging the role or credibility of their husbands (Belliveau, 2011).

### **Discrimination and Prejudice**

The final theme evident in the research regarding what is helpful and hurtful in social work services to undocumented immigrants was discrimination and prejudice. Undocumented immigrants in the literature were clear about their right to services that valued their humanity. Unfortunately, they often told stories of experiencing racial discrimination when trying to access social work services. Forty percent of participants in a focus group conducted by Strug and Mason (2001) reported that they were resistant to seek social services from non-Latino agencies

after experiencing discrimination on the basis of their race and legal status there. One participant said, “If you are not a citizen you get nothing. People treat us with indifference. They speak badly to us. I would rather not ask for help then feel discriminated against” (Strug & Mason, 2001, p. 82). Immigrant women reported systemic discrimination when trying to apply for subsidized child care and welfare (Belliveau, 2011). Another woman described the way a provider treated her with disrespect and delayed her application for governmental assistance for no apparent reason (Reina & Lohman, 2015). A Dominican female immigrant told of her experience with administrative hospital staff,

The last time I had to go the hospital, the staff kept me waiting. They responded to me rudely. They had a bad attitude. They employees in the hospital told me if you want to live in America, then speak English. This makes you feel humiliated. I felt very bad, humiliated. But you cannot say anything or they will treat you even worse. This is what has happened to me. And they didn't provide me any social services either. (Strug & Mason, 2001, p. 78)

Finally, participants asked social workers to resist discrimination and racism, instead treating immigrant clients humanely, appreciating their differences and focusing on their strengths as an individual and a culture (Quinones-Mayo & Dempsey, 2005).

### **Discussion**

Though this systematic review yielded a somewhat low number of studies to consider, the research synthesized in this review provided a wealth of information regarding social work services to Latino/a immigrants. While the original research question focused on only undocumented immigrants, research criteria was expanded to include any studies that had Latino/a immigrants in the sample, unless the researchers explicitly said that their participants

were legal immigrants. Therefore, sample participants in the included studies may include a mix of both documented and undocumented immigrants. For this reason, findings may not be generalizable to exclusively undocumented immigrant groups. Rather, the researcher of this study believes these findings represent a broader “toolbox” of information that social workers can use when working with undocumented or documented immigrants, while always incorporating the client’s individual preferences and clinical judgment when applying research knowledge to practice situations.

This systematic literature review revealed several themes that may be helpful to both researchers and practitioners alike when working with the immigrant Latino/a population. The first theme was that of accessibility. This theme was common in the research, found in seven of the 14 studies included in this review. Immigrants in these studies identified issues such as cost, location, and appointment times as crucial in their ability to access social services. A notable detail about location was the concept of “entry points” identified by participants in one study (Xu & Brabeck, 2012). Locations such as schools and hospitals were viewed as safer and more accessible to undocumented immigrant parents, and therefore connected families with a larger network of services after they started at these “entry points.” Practitioners and researchers should keep in mind that “not all locations are created equal” and maximize their service or research efforts by meeting immigrant clients where they are most comfortable. A second notable point in the accessibility theme was that clients who were undocumented identified their immigration status as a major cause of fear, and therefore organizations that focused on this detail (by asking for identification or requiring background checks) created substantial barriers, both legal and emotional, for their undocumented clients. Social workers seeking to serve undocumented immigrant clients should work to eliminate these barriers on both agency and systemic levels.

A second theme that emerged in the research was that of language and culture. Participants identified bilingual providers and culturally responsive services as enormously beneficial when accessing social services. Immigrants in several studies expressed that they felt that a Spanish-speaking clinician helped them feel more confident and understood when accessing services. Study participants also expressed that a clinician's ability to incorporate a client's cultural and value systems in assessment and treatment was imperative. Some studies revealed that Latino/a immigrant clients had different expectations regarding the role of the social worker or social service provider, expecting them to go beyond their traditional role responsibilities to incorporate a broader and more holistic view of treatment. This theme provides justification for further training on several levels for social workers. First, social workers should receive additional language training in Spanish if they hope to work with Latino/a immigrant populations, and more opportunities should be created to assist native Spanish speakers in pursuing their social work licensure. Second, social workers should receive extensive training on culturally responsive assessment and treatment. Finally, agencies and supervisors should encourage discussion regarding ways to adjust role responsibilities and treatment expectations to accurately reflect the service needs and value systems of their undocumented Latino/a clients.

A third theme that emerged in the literature was the theme of information and resources. Study participants were clear that a main priority for them in seeking social work services was to solicit practical information that helped them navigate multiple systems in their life. For many immigrants, knowledge is power, and they relied on social workers to connect them with the knowledge they needed to pursue a better life for themselves and their families. Social workers working in both generalist and clinical settings should hold to a holistic view of their clients and

provide not only clinical and mental health-related treatment, but information and resources that assist their clients in improving other pertinent areas of their life, such as housing, basic needs, and employment issues.

A final theme that emerged was the theme of discrimination and prejudice. Despite an emphasis on social justice and diversity issues among social work and social service education programs, many study participants told stories of discrimination and prejudice that they experienced from social service workers. Participants attributed poor treatment to issues of racism or prejudice regarding immigration status, and identified these experiences as major barriers to seeking social services. Clearly, additional education, training, and supervision are essential in the social service field to promote ethical and anti-discriminatory services for undocumented immigrant clients.

### **Implications for Future Research**

In surveying the current literature, several implications surface for future research. The first, and most obvious, is that there is a scarcity of research directly utilizing the voices of undocumented immigrants. Much of the research surveyed for this literature review was excluded because it did not directly incorporate the views of immigrant participants, but rather utilized standardized outcome measures or professionals' opinions to assess benefits and barriers to social work services. While outcome measures can be helpful to assess effectiveness of interventions and professional opinions can provide useful recommendations, the researcher of this study believes that as a disenfranchised population in our culture, undocumented Latino/a immigrants should be given a greater voice in their own treatment and services. The researcher recognizes that conducting studies where the voices of immigrants are directly incorporated may require additional time, effort, and money in order to supersede language barriers, cultural

differences, or participant hesitation due to fear of deportation. However, the researcher believes that these efforts are well worth it to expand the paucity of knowledge regarding this population.

A second implication for future research involves the distinction between documented and undocumented immigrants. Due to the shortage of research for this systematic literature review, the researcher included studies with immigrants in general, rather than only undocumented immigrants. However, this limits the generalizability of this study, as an undocumented status has vast implications for the mental health, service needs, and barriers to services for an immigrant. Additional research is needed with solely undocumented immigrants to identify specific benefits and barriers to social work, unique to this population group. An important detail to note here is that some studies did not request immigration status information, as this question could be a detriment to undocumented immigrants participating in the study due to fear of deportation. Therefore, researchers who are committed to studying undocumented immigrants exclusively should be strategic in their recruitment efforts. It may be helpful to solicit research participants from programs where clients are already identified as undocumented, include extra measures to assure participants that their information and immigration status will be kept confidential, and partner with trusted entry points as identified in this review, such as medical providers or schools.

The research studies selected for this review included exploratory research, identifying benefits and barriers to service according to immigrants. Many of the articles around this topic were conceptual rather than empirical and were excluded from this review. Future research should expand on empirical exploratory research, as there was a shortage of studies addressing this research question. Once a substantial amount of exploratory research has been achieved, future research should move in the direction of experimental research. Experimental research

would allow researchers to make more definitive and generalizable statements regarding the effectiveness of certain factors (i.e. a bilingual practitioner or a low-cost treatment) on the outcomes of social work services for undocumented immigrants, and thus further justifying the implementation of these factors on individual, agency-wide, and systemic levels.

Future research should also delve into each of the themes identified in this study to better understand the mechanisms behind them and their usefulness. For example, why do undocumented immigrants prefer bilingual providers? Is it because if they are native Spanish speakers, they also might share some cultural values with the client, or is it because they can function as an intermediary between the client and other English-speaking providers? Future research should also explore undocumented Latino/a immigrants' perceptions of the use of interpreters, since training interpreters could be a faster and more cost-effective way to provide more immediate bilingual services. Each theme and sub-theme in this review could warrant its own study to assist practitioners and researchers in understanding exactly why these variables affect immigrant clients' experiences with social work services.

Finally, future research should consider the effect of the larger political climate on undocumented immigrants and social workers serving this population. While the social work Code of Ethics is explicit about social workers' responsibility to advocate for their clients regardless of immigration status, social workers still hold a more negative view of undocumented immigrants than they do toward documented immigrants (National Association of Social Workers, 2008; Park, Bhuyan, Richards, & Rundle, 2011). Further research should explore the effect of the larger societal view of immigration and how this alters social workers' attitudes toward undocumented immigrants and their ability to carry out their ethical responsibility toward immigrants. Furthermore, research on social work within and outside of "sanctuary cities" (cities

that place a low priority on cooperating with the federal government in prosecuting undocumented immigrants) would provide useful findings on the effects of federal and local policy on social work practice with immigrants (Pearson, 2015).

### **Implications for Practice**

This review also provides several implications for social work practice. First, social workers should not overlook the oft-forgotten issue of accessibility when working with undocumented immigrant clients. For this population, many barriers need to be addressed before the client even shows up for their first appointment. Agency administration and social workers should examine their policies on health insurance and cost for low-income clients, perhaps offering a portion of their services free or on a sliding fee scale for clients who do not have the income to pay for services. Agencies and professionals should also examine policies on asking for identification, citizenship information (such as a social security number), and requiring background checks, as these policies may discourage undocumented immigrant clients from approaching their services in the first place. Finally, social workers should maximize their contact with the undocumented immigrant population group by offering services in the context of schools and medical providers, where these clients may already be receiving services and may already trust providers.

A second important practice implication gleaned from the literature is the issue of culturally responsive practice. According to the findings in this study, undocumented Latino/a immigrant clients still experience discrimination and prejudice when seeking out social services. Social workers should make it their urgent priority to confront their own biases and prejudices in themselves and agencies should place a high value on confronting racism and discrimination in their settings. However, social workers should not stop at simply fighting discrimination. Instead,

social workers should take another step forward and weave culturally responsive practices into all facets of their work. It is imperative that all social workers receive culturally focused education, training, and supervision in order to incorporate a client's cultural and racial identity into all facets of services, from assessment to evaluation. This may require social workers to "think outside the box" in terms of their job responsibilities and work flexibly with clients according to a client's value systems and view of social work services, rather than solely adopting the dominant culture's expectations of the social worker. With adequate training and reflective supervision, social workers in all fields (not just those working exclusively with immigrant populations) should have the opportunity to grow their practice in a way that honors the diversity of their clients.

A final implication for social workers is the need for bilingual practitioners. When a client has access social work services provided in their native language, they are more likely to feel comfortable and trust their social worker, which will inevitably increase positive outcomes. For some clients, access to a bilingual social worker may be the deciding factor as to whether or not they will even darken the door of an agency. To increase the amount of Spanish-speaking social workers, two paths should be considered. First, social workers who already speak some Spanish should have the opportunity to grow and develop their language skills. Social work baccalaureate and graduate programs should join with Spanish language programs to provide classes and field opportunities in Spanish for social work students, and practicing social workers should have access to continuing education credits around the use of the Spanish language in practice. Second, native Spanish speakers who want to become social workers should have access to additional support and scholarship opportunities to assist them in completing school

and obtaining licensure. By supporting bilingual social workers through education and training, we are inevitably supporting their future clients.

This literature review yielded important implications for future research and practice with the undocumented Latino/a immigrant population. Future research should shift to elevate the opinions of undocumented immigrants as the authority on what is helpful and harmful in social work practice, and examine the effect of the larger political climate on social workers' abilities to fulfill their ethical responsibility to their immigrant clients. Social workers serving this population should increase their advocacy for their clients on individual, agency, and systemic levels. Social workers should also remain acutely responsive to immigrant clients' declarations of "what helps and what hurts" in social work practice in terms of bilingual, culturally-responsive, and accessible services.

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