



Help-Seeking Preferences Among Latine Immigrants: Impact of Immigration-Related Stressors on Seeking Formal vs. Informal Care

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Introduction

- Latine individuals are the largest racial/ethnic minority group
- They are projected to reach approximately 25% of the population by 2050 (Villatoro et al., 2014).
- Health disparities can arise from immigration-related stressors
- These kinds of stressors include discrimination and fear of deportation
- Both may impact help-seeking preferences and behaviors among Latine populations (Dang et al., 2012; Ortega et al., 2007)
- May also deter help seeking across formal services and healthcare systems

Background

- Help seeking through formal routes is paid care provided by medical institutions or medically trained individuals (Oh et al., 2024)
- Informal care refers to unpaid care provided by family, friends, support groups, and neighbors (Oh et al., 2024)
- Models of healthcare utilization suggest barriers such as immigration stressors may impede formal, but not informal help seeking (Abraham & Sheeran, 2015)
- On the other hand, many immigration stressors may increase risk of symptomology, particularly for PTSD
- The presence of PTSD symptoms may increase the preference for formal services because informal sources because symptoms outstrip the capability of informal sources
- Studies need to account for the complex role of symptomology when examining preferred methods of help seeking
- Further, immigration stressors may be more impactful for those with limited English proficiency and thus limited ability to access formal sources of care
- Those with low English proficiency may prefer informal sources as they can seek help in their own language

Materials & Methods

- The study involved 202 Latine immigrants living in Grand Island, Nebraska
- Participants completed a series of online surveys consisting of measures of discrimination (EDS), fear of deportation, trauma exposure (THQ), PTSD symptoms (PCL-IV), preferred help-seeking methods, and demographics, including English proficiency
- The series of questionnaires were a part of a broader assessment of stress exposure, mental health help seeking, and healthcare access
- Study materials were available in English and Spanish

Figure 1. Percentage Preferring Informal Help Seeking by Fear of Deportation and English Proficiency

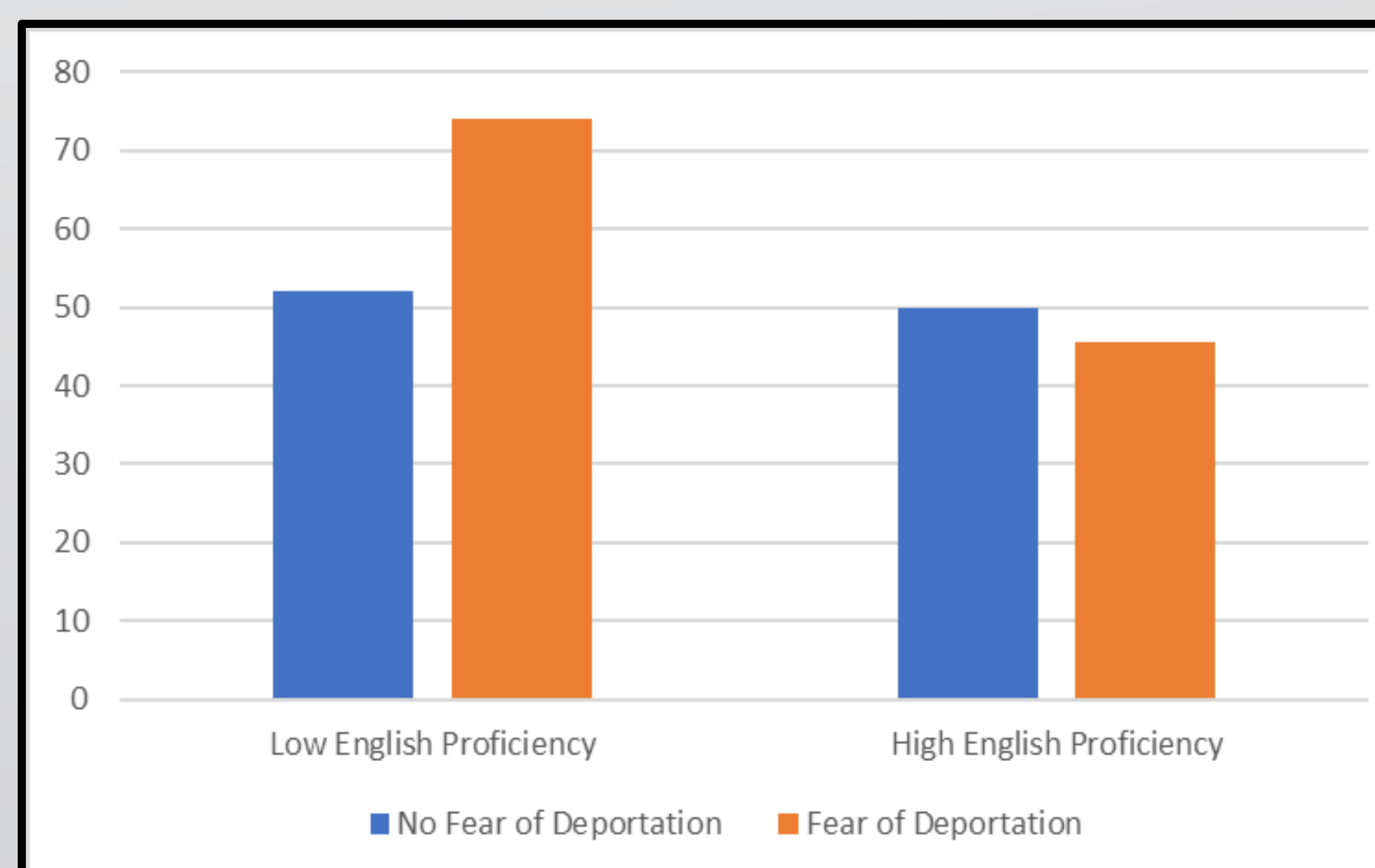


Table 1. Path Model Regression Results

	PTSD Symptoms			Informal Help Seeking Preferences		
	b	SE	p	b	SE	p
Polyvictimization	.96	.40	.017	.003	.05	.957
Discrimination	.19	.10	.068	.02	.02	.356
Deportation Fear	1.69	1.56	.276	1.44	.49	.003
English Proficiency	1.40	.83	.090	.14	.18	.450
Deportation Fear* English Proficiency	NA	NA	NA	-.67	.33	.042
PTSD Symptoms	NA	NA	NA	-.02	.01	.236

Results and Discussion

- Deportation fear was associated with greater odds of preferring informal services, but only at low levels of English proficiency.
- The interaction of deportation fear and English proficiency was significant ($p = .042$)
- No other interaction was significant and was therefore removed (p -values $> .05$)
- Polyvictimization, a measure of traumatic event exposure, was positively associated with PTSD symptoms ($p = .017$)
- Most hypotheses were not supported
- Deportation fear predicted informal care use, echoing research on how immigration status and policies deter formal service use (Asad, 2020; Berk & Schur, 2001)
- Low English proficiency may create barriers that limit access to formal care (Hacker et al., 2015) and intensify fear of deportation, which may explain why Latine immigrants prefer informal support where they feel safer and better understood

References

