

# Recent immigrants saw biggest spike in mental distress as anti-immigrant sentiment increased, find researchers

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Anti-immigrant rhetoric and policies are widely known to have harmful impacts on mental health, but a new policy brief from the UCLA Center

for Health Policy Research has revealed large disparities in rates of serious psychological distress across immigrant subgroups in California.

Serious psychological distress was defined as severe, diagnosable [mental health](#) challenges such as depression and anxiety that warrant [mental health treatment](#) within a population. It was based on the number and frequency of symptoms reported in the year prior to being surveyed.

Recent immigrants were the most affected. For immigrants living in the United States fewer than five years, rates of serious psychological distress increased 140%, from 5% of those surveyed between 2015–17 to 12% for those surveyed between 2019–21.

By comparison, adult immigrants overall saw a 50% increase—from 6% to 9%—according to the brief, which is based on 2015–21 data from the center's annual California Health Interview Survey, known as CHIS.

The report noted that the increases in negative mental health outcomes occurred despite California being more welcoming of immigrants. According to a 2023 [report from the California Public Policy Institute](#), nearly 80% of adults believe immigrants provide benefits to the state. In 2021, Gov. Gavin Newsom signed a law making access to [health care](#) easier for immigrants, regardless of their [citizenship status](#).

"Even in the most culturally diverse state in the nation, immigrants are still experiencing serious psychological distress, especially immigrants who came to the United States more recently," said Sean Tan, senior public administration analyst at the center and one of the brief's authors. The authors' findings are the result of how CHIS by its construction generates disaggregated data—data sorted into more precise demographic groups.

Responses gathered during 2015–17 served as the baseline, while

2019–21 provided a comparison period based on how anti-[immigrant](#) sentiment increased in the United States.

Previous research has shown that stressful forms of discrimination—such as anti-immigrant rhetoric and policies that restrict immigrants' participation in the workforce and education—can exacerbate existing health disparities among marginalized populations.

"Immigrant status is a known social driver of health, and the findings strongly suggest that the tone of the national discourse and adoption of anti-immigrant policies are connected to individuals' mental health," Tan said.

Increases in reports of serious psychological distress were lower for adult immigrants more proficient in English and those who had permanent legal status, the researchers found.

While immigrants who speak only English showed no increase in serious psychological distress, adults with limited to no English proficiency experienced a 33% increase, from 6% to 8%. Those proficient in English saw a 67% increase, from 6% to 10%.

Naturalized citizens reported a 33% increase in serious psychological distress, while noncitizens with green cards showed an 83% increase and noncitizens without green cards showed a 71% increase.

Compounding stress related to the increase in anti-immigrant rhetoric and policies, 67% of all immigrants with serious psychological distress said they did not see a health care provider for their mental health care needs between 2019 and 2021.

Familiarity with [social systems](#) in the United States influenced whether someone saw a mental [health care provider](#). The report showed:

- Immigrants living in the United States for fewer than five years were more likely to report unmet needs—77% versus 66% for those in the U.S. longer than five years.
- Noncitizen immigrants were more likely than naturalized citizens to have unmet needs, 73% vs. 60%.
- Non-English speakers were more likely than those who spoke only English to have unmet needs, 72% vs. 58%.

To help overcome these barriers to care, the report's authors recommend increasing access to affordable, culturally relevant and linguistically appropriate [mental health care](#) for all Californians, regardless of citizenship. Some specific recommendations include:

- Adopting evidence-based practices, such as trauma systems therapy for refugees, that address the historical and current distress stemming from detention, deportation, family separation and other stressors related to immigration policies.
- Taking advantage of technological advances such as telehealth and expanding the mental health workforce with diverse lay providers.

Provided by University of California, Los Angeles

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