Innovations in Counseling (Part 11, Session 2)

Culturally Responsive Practices for Serving the Undocumented Immigrant Community

Webinar Follow-up Question and Answer Session With Pamela Fullerton, MA, MEd, NCC, LPC, LCPC

Question from S. Gummaluri:
What are your thoughts on the use of the term migrants vs immigrants as an umbrella term for various migrant groups when talking about this community (while being mindful that migrants are not a monolith) I have seen the terms used interchangeably and I am curious about it for my own writing.

Answer from Presenters:
My understanding of the differences between migrant and immigrant have to do with the permanency of the move. Those who are moving to another place/country with more permanence in mind are considered immigrants. Those who are moving but do not plan on staying permanently, are considered migrants. Consider the *migrant* worker, for example. They may work for a season or so then return home or move again to another place and continue to follow work.

Question from J. Johnson:
Do you have any ideas for reaching immigrant clients for private practice when dealing with stigmas and lack of documentation?

Answer from Presenters:
The vulnerable status of this community definitely makes it more challenging to reach them. I have found a grassroots effort to be the key to connecting mental health services to this community. By this I mean, we must go to where the community is to show our allyship. Think about going to community centers, newcomer centers, local places of worship, post flyers for a mental health talk at local grocery stores, restaurants, libraries, etc. You need to show up and show support. Offer to host talks about mental health at schools, community colleges, places of worship, newcomer centers, etc. just to get the word out that you are an advocate and ally, willing to offer your services. Remember to consider low-cost services for this group, especially those with limited income and the uninsured. You can also look for grant funding to offset the cost.

Question from Student:
How do we navigate documentation status in regards to confidentiality and discriminatory laws? In some more prohibitive states, might it be necessary to see undocumented clients without reporting their documentation status?

Answer from Presenters:
Documentation status should NEVER be reported. There are NO laws in any state saying someone who is undocumented must be reported. Back in 1982 the Supreme Court ruled that all children k-12 can go to school for free regardless of documentation status. Since then, the law protects them from having to disclose status. This is also why many children do not find out they are undocumented until they go for a license, want to get a job, or want to apply for FAFSA/college. We MUST maintain confidentiality when someone decides to disclose to us that they are undocumented.

Question from A. Vosburg:
When building a working relationship with the undocumented, what is a positive and progressive way in which to help the client or community to comfort in the relationship.

Answer from Presenters:

There are certain qualities of a positive therapeutic alliance that will always be the same, no matter who we are working with: Build a relationship first, establish trust and honesty, and minimize imbalances that can impact trust and connection. However, specifically for working with the undocumented population, we must also demonstrate multicultural competency and continue to work to increase it. Many therapists do not come from an immigrant background, so the experience is completely new to them. Furthermore, the overwhelming majority of clinicians have not had to deal with the issues of documentation status. There is quite a bit of multicultural competency needed to engage in conversations and empathy surrounding these topics. I would also add that a progressive way to engage in a working relationship requires advocacy and allyship (beyond the dyad, we must combat the impacts systems of oppression have on these individuals/community).