

University of Texas Rio Grande Valley

ScholarWorks @ UTRGV

Psychological Science Faculty Publications and Presentations

College of Liberal Arts

11-22-2021

Lessons Learned From Undocumented Latinx Immigrants: How to Build Resilience and Overcome Distress in the Face of Adversity

Luz M. Garcini

University of Texas Health Science - San Antonio

German Cadenas

Melanie M. Domenech Rodriguez

Alfonso Mercado

The University of Texas Rio Grande Valley

Liliana Campos

See next page for additional authors

Follow this and additional works at: https://scholarworks.utrgv.edu/psy_fac



Part of the [Psychology Commons](#)

Recommended Citation

Garcini, L. M., Cadenas, G., Domenech Rodríguez, M. M., Mercado, A., Campos, L., Abraham, C., Silva, M., & Paris, M. (2022). Lessons learned from undocumented Latinx immigrants: How to build resilience and overcome distress in the face of adversity. *Psychological services*, 19(Suppl 1), 62–71. <https://doi.org/10.1037/ser0000603>

This Article is brought to you for free and open access by the College of Liberal Arts at ScholarWorks @ UTRGV. It has been accepted for inclusion in Psychological Science Faculty Publications and Presentations by an authorized administrator of ScholarWorks @ UTRGV. For more information, please contact justin.white@utrgv.edu, william.flores01@utrgv.edu.

Authors

Luz M. Garcini, German Cadenas, Melanie M. Domenech Rodriguez, Alfonso Mercado, Liliana Campos, Cristina Abraham, Michelle Silva, and Manuel Paris



Published in final edited form as:

Psychol Serv. 2022 ; 19(Suppl 1): 62–71. doi:10.1037/ser0000603.

Lessons Learned From Undocumented Latinx Immigrants: How to Build Resilience and Overcome Distress in the Face of Adversity

Luz M. Garcini¹, German Cadenas², Melanie M. Domenech Rodríguez³, Alfonso Mercado⁴, Lilliana Campos⁵, Cristina Abraham⁶, Michelle Silva⁷, Manuel Paris⁷

¹Joe R. and Teresa Lozano Long School of Medicine, Department of Medicine, University of Texas Health Science Center at San Antonio

²Department of Psychology, Lehigh University

³Department of Psychology, Utah State University

⁴Department of Psychology, University of Texas Rio Grande Valley

⁵Department of Psychology, University of San Francisco

⁶Health Science Center, University of Texas at San Antonio

⁷Department of Psychiatry, Yale University

Abstract

Living under chronic uncertainty, fear, and isolation is the experience of many undocumented immigrants particularly under the recent sociopolitical climate. Yet, despite facing chronic adversity and an uncertain future, undocumented immigrants are highly resilient. This paper draws upon the clinical and research expertise of leading Latinx psychologists working with diverse undocumented communities across the United States. Qualitative data from seven focus groups with undocumented Latinxs and 15 in-depth interviews with key informants were used to complement clinical insights to identify and highlight strategies of undocumented Latinxs that promote their resilience. Overall, six primary strategies emerged including cognitive reframing, behavioral adaptability, acceptance, sociability, courage, and ancestral or cultural pride. Within each of these primary strategies, two-to-five additional facets emerged. We also identified the positive effects of the aforementioned strategies, including the fostering of meaning, purpose, and hope. Our findings are essential to address biases and stigmatization against undocumented immigrants, as well as to inform strength-based interventions and services, as well as culturally and contextually sensitive resources. Health services providers working with undocumented Latinxs can identify and build on strengths in their patients to demonstrate accurate cultural understanding and also to support resilience.

Correspondence concerning this article should be addressed to Luz M. Garcini, Joe R. and Teresa Lozano Long School of Medicine, Department of Medicine, University of Texas Health Science Center at San Antonio, 7703 Floyd Curl Drive, San Antonio, TX 78229, United States. garcini@uthscsa.edu.

We have no conflicts of interest to disclose.

Keywords

undocumented; Latinx immigrants; resilience; mental health distress

Living under chronic stress stemming from uncertainty, constant threats, loss and social disadvantage, racism, discrimination, marginalization, and stigmatization is a common experience for many undocumented immigrants. Most undocumented immigrants live under constant fear, including facing threats of deportation and family separation (Garcini et al., 2016). Premigration trauma in the form of exposure to violence and abuse, including severe poverty, often becomes exacerbated during the migration journey; thus, adding to the complexity of compounded stress faced by undocumented immigrants (Tummala-Narra, 2014). Postmigration trauma stemming from racial discrimination and other forms of oppression often impact undocumented immigrants' sense of belonging and safety further contributing to chronic stress. Indeed, the psychological experiences and harsh living conditions faced by undocumented individuals before, during, and after migration have been associated with high levels of comorbid stress, depression, and anxiety (Gonzales et al., 2013).

The detrimental effects resulting from chronic and prolonged exposure to distressing and adverse experiences are well documented. From a physical health perspective, long term chronic stress may reduce the capacity of the immune system to fight off illnesses, thus placing people at greater risk for becoming ill and having more severe courses or complications arising from infectious or chronic diseases (Dhabhar, 2014). Chronic stress can lead to inflammation in the body which has been associated with cardiovascular disease, strokes, cancer, autoimmune disorders, and the frailty syndrome, the last of which increases the risk for catastrophic declines in health and functioning as people get older (Fioranelli et al., 2018; Rohleder, 2019). Additional effects of chronic stress on the body include cardiovascular issues that can impact one's blood vessels and the neurotoxic effects of stress hormones on the brain, which may be associated to cognitive deficits in aging (Fioranelli et al., 2018; Lupien et al., 2018). From a mental health perspective, chronic stress is known to exacerbate trauma-related symptoms, lead to severe depression, debilitating anxiety, increased substance use, and diminished level of functioning that can contribute to disability, job loss, interpersonal instability, and other severe effects increasing the risk of suicidality (Brady & Sinha, 2005; Scott et al., 2015). Among children and adolescents, additional implications of chronic stress include failure to meet developmental and academic milestones, increased risk for unhealthy behaviors (e.g., substance use, disordered eating, and aggression), and unsafe practices (e.g., gang involvement and promiscuity; Beato-Fernández et al., 2007; Broderick & Jennings, 2012; Hughes et al., 2017). Identifying protective factors and behaviors helpful to reduce and manage chronic stress is essential to diminish the aforementioned physical and mental health risks.

Despite facing compounded chronic stress and adversity, most undocumented immigrants are extremely resilient (Gonzales et al., 2013). For example, even in the face of the current coronavirus 2019 (COVID-19) pandemic and anti-immigrant climate, many undocumented immigrants have continued to show strength and resilience by performing essential jobs in

many different sectors of the workforce (Jawetz, 2020). A population-based phenomenon that has been used to document and explain the resilience of immigrants is the “immigrant paradox.” This paradox is based on health and social science research showing that recent immigrants, particularly those of Mexican origin, have better physical and mental health outcomes, as well as better conduct and crime-related outcomes, when compared to U.S.-born natives and more established immigrants (Alcántara et al., 2017; Vaughn et al., 2014). The irony in this phenomenon is that recent immigrants experience more desirable outcomes despite facing significant adversity and social disadvantage. Several hypotheses have been proposed to explain the health advantage of recent immigrants, including self-selection, so that only the strongest immigrants would migrate; the salmon bias, or proposition that immigrants who are ill or old return to their home country to die, thus not accounting for lower mortality rates; and high levels of social support as a protective factor (Medina-Inojosa et al., 2014). Studies among Latinx immigrants have also suggested healthier lifestyles and diets as protective factors to the health of recent immigrants (Teruya & Bazargan-Hejazi, 2013). Immigrants may use specific cognitive or behavioral strategies that may build resilience and facilitate coping with adversity, particularly in the face of unprecedented events. A study among 20 leaders working with immigrant and refugee communities highlighted that individual values, such as hopefulness, persistence, having a focus, accepting suffering as part of life, and having a vision of the future, are constructive strategies used by immigrants to cope with adversity (Yakushko, 2010). Likewise, attributes such as having the ability to build social connections and to be giving towards others have been found to be helpful strategies to cope with immigrant-related stress (Yakushko, 2010). Although research has shown that the immigrant health advantage eventually deteriorates with longer time living in the U.S., possibly as a result of continued exposure to stress, developing a better understanding of specific strategies that help build resilience among the most vulnerable and in the face of adversity, could help inform intervention efforts and resources that may be generalized to other at-risk populations facing adversity.

The purpose of this paper is to identify and highlight protective factors, specifically strategies of undocumented Latinx immigrants, that promote resilience and facilitate coping in the face of adversity. Our work is guided by the Hispanic Immigrant Paradox framework (Teruya & Bazargan-Hejazi, 2013) and the expertise of leading Latinx psychologists working with diverse undocumented communities. Strategies in this paper are defined as cognitive and/or behavioral manifestations used by the immigrant to cope with adversity. These strategies can help buffer the negative effects of threatening environments to facilitate the functioning of the immigrant, their social interactions, and the social exchanges that take place within communities (Shonkoff & Meisels, 2011). Information about protective factors is essential to reduce stigmatization of this marginalized population, and to guide intervention efforts, services, and resources that are culturally and contextually appropriate.

Method

Data were extracted from seven focus group discussions with undocumented Latinx immigrants ($n = 20$) and 15 in-depth interviews with key informants in the Fall of 2014. In this study, key informants refer to knowledgeable individuals who have experience working, serving, and/or interacting with undocumented immigrants and who can provide insight into

risk and protective factors to their well-being. Focus groups ranged in size from two to five participants. We used a phenomenological approach and were guided by principles of community-based participatory research. The study focused on engaging community leaders and representatives of the undocumented Latinx community across all stages of the research process and in all phases of community efforts (Wallerstein & Duran, 2010). The San Diego State University/University of California San Diego Institutional Review Board (IRB) provided approval for this study.

Positionality Statement

The research team was composed of eight scholars affiliated with research universities. All members of the research team were of Latinx and immigrant background, including three formerly undocumented immigrants. While engaging in data analyses, the researchers often discussed how the themes in the analyses compared to their own immigrant experiences as a way of further validating the data. Five out of eight of the researchers identified as women, and seven out of eight spoke Spanish as their first language. The gender makeup of the team may have sensitized the researchers to the experiences of immigrant women in the study. In addition, Spanish-fluency allowed the team to analyze interviews in Spanish and discuss themes in this language as well. All of the researchers are actively engaged in community-oriented scholarship, clinical services, and advocacy efforts for immigrant health, which may have helped attune them to the themes emergent in the study.

Focus Groups

Participants—Participants in the focus groups were undocumented Latinx immigrant adults (ages 18 and over) varying in sociodemographic and immigration characteristics. Most participants in the focus groups were of Mexican-origin. Among undocumented immigrants in the focus groups, the majority were women (74%), married (79%), and had an average age of 44 years ($SD = 12.5$). Most had a lower than high school education (54%) and approximately half were employed (49%). On average, undocumented immigrant participants had lived in the U.S. for approximately 21 years ($SD = 9.9$; see Table 1).

Procedure—Purposeful sampling was used to recruit participants for the focus groups to facilitate greater group discussions (Palinkas et al., 2015). Specifically, participants for the focus groups were recruited using network-based referrals from community partners and collaborators. Specific strategies used in the recruitment of focus group participants were active (i.e., electronic mailing lists, snowball sampling, social networks, and venue-based recruitment) and passive approaches (e.g., the distribution of flyers by trusted sources). Recruitment materials invited individuals to participate in a “community health study,” and included information about the study name (*Proyecto Voces*), study location, compensation, and a contact number for participants to call to determine eligibility. For safety, neither the description of the study, nor the requirements for participation were provided in the recruitment materials. Study recruitment for focus group participants took place in a region near the U.S.–Mexico border. To determine eligibility for participation in the focus groups, a brief screener in Spanish was presented to potential participants prior to participation.

Data Collection—To ensure the security of participants, focus groups were conducted at locations identified as safe by collaborators and community organizations. Participants filled out a demographic questionnaire prior to participation in a focus group. For participants unable to read and/or write, the questionnaire was read in private by a research assistant. Verbal informed consent was obtained prior to participation and participants were informed that the groups were going to be audiotaped and transcribed. A bilingual facilitator and two research assistants conducted the focus groups and all focus groups were conducted in Spanish. The focus groups lasted 2–3 hr. Participants received a \$20 incentive for participation. Questions for the focus groups were semistructured and were aimed at fostering discussion pertaining to: (a) the experiencing of distress and related health concerns among undocumented Latinx immigrants and (b) the identification of risk and protective factors to the well-being of undocumented Latinx immigrants (see Table 2). Audiotapes from the focus groups were transcribed by a professional service to facilitate the analysis of data.

Key Informants

Participants—Among key informants, half were women (50%), most were married (65%), and had an average age of 42 years ($SD = 12.9$). In contrast to undocumented immigrant participants, most key informants had a greater than high school education (85%), and approximately 34% were community leaders (i.e., faith-based, indigenous, and activists), 27% health providers to undocumented immigrants, 20% research experts on the health of undocumented immigrants, 13% legal experts or attorneys, and 7% employers. On average, key informants reported working with undocumented immigrants almost every day of the week ($M = 5$ days/week; $SD = 1.5$) for approximately the past 13 years ($SD = 11$; see Table 3).

Procedure—Key informants were recruited using existing networks from academia, community partners, and collaborators who facilitate outreach, research, and the provision of health, social, and legal services for undocumented immigrants. Key informants were recruited nationwide.

Data Collection—In-depth interviews with key informants were held at private locations convenient to the key informant or via teleconference for those who resided away from the study location. Key informants filled out a demographic questionnaire prior to participation in the in-depth interview and verbal informed consent was obtained prior to participation. Interviews were conducted in English or Spanish depending on preference of the key informant. Key informant interviews lasted on average 1 hr. Key informants received \$20 as incentive for participation. The same questions that were asked in the focus groups were asked to the key informants. Audiotapes from the interviews were transcribed by a professional service.

Data Analysis

Quantitative data from the demographic questionnaires were analyzed using descriptive statistics (i.e., frequencies and measures of central tendency) to develop a demographic profile for participants in this study. Qualitative data from the focus groups and key

informant interviews were analyzed through systematic methods (Morrow & Smith, 2000). The research began with specific questions previously developed and then proceeded through the steps of data reduction, data display, and conclusion drawing and confirmation. The qualitative Spanish transcripts were analyzed by the principal investigator (PI) and three bilingual native-Spanish speaking research assistants. Initially, the PI and one research assistant independently coded four of the focus group transcripts to come up with a coding frame to highlight primary codes and subcodes, including developing definitions and examples for the codes identified. Agreement in coding was achieved through discussion of overlaps and divergences. The coding frame and definitions were shared and discussed with community partners for feedback, and adjustments were made to the coding frame. Subsequently, the coding frame was used to code the rest of the transcripts. Each transcript was analyzed independently by two coders and collaborative weekly team meetings were used to check results for clarification. In addition, triangulation of multiple data sources and agreement checks were used to ensure trustworthiness, credibility, transferability, and accuracy of the qualitative findings. This qualitative approach was particularly beneficial given the exploratory nature of this study.

Results

Six primary codes representing different strategies emerged: (a) cognitive reframing; (b) behavioral adaptability; (c) acceptance; (d) sociability; (e) courage; and (f) ancestral or cultural pride. As illustrated in Table 4, different facets arose in each of the six strategies identified, including protective effects. Transcript segments were translated into English from Spanish for readers' convenience.

Cognitive Reframing

This refers to an immigrant's ability to shift their mindset or attitudes to interpret their experience in a new, often more positive, light, which facilitates adaptation. Overall, *cognitive reframing* fosters meaning in the immigrant experience, enhance purpose in their life, and build hope in the midst of adversity. Within cognitive reframing, five subcodes emerged: (a) *optimism*, (b) *relativity*, (c) *impermanence*, (d) *future-focus*, and (e) *spirituality*. *Optimism* is the ability to expect or hope for positive outcomes regardless of the challenges faced. To describe *optimism*, an immigrant emphasized, "It is about believing that life goes on and that it will get better ... wherever a door closes, I look to find an open window ... hope is our friend, which mitigates our sorrow and enlightens our paths."

The second subcode that emerged was *relativity*, or the ability to consider or see events relative to a frame of reference, which in this case is the immigrant's view of life through the lens of their past history. In this regard, an immigrant declared, "Even if I am poor here, I think it's a thousand times better than living in Mexico; it was so bad where I came from, that it cannot be any worse here."

In comparing their present situation to their past living conditions in their country of origin, undocumented immigrants often find contentment regardless of their current difficulties. Somewhat similar to relativity is the subcode of *impermanence*, which is the belief that situations are not everlasting and that change for the better is possible. This facilitates

finding comfort in the present moment. For example, an immigrant asserted, “Even though it’s difficult, unbearable at times, [my situation] will change ... I know that things will be different even though it doesn’t feel like it at the moment.” Likewise, being *future-focused* or having a strong conviction to anticipate what is coming, rather than dwelling on results from the past, also emerged as a protective factor. In this regard, an immigrant stated, “We have to look forward, because to look back, it’s not possible.”

Moreover, *spirituality*, specifically the belief or trust in God’s protection and justice, was identified as another subcode that is essential to coping with distress. For example, an immigrant affirmed, “Nothing is going to happen [to me]. I am protected by God. God has a destiny for me, and in that I trust.” Along these lines, another immigrant described that it is through *spirituality* that the undocumented community finds strength, encouragement, comfort, relief, and forbearance day after day. Significantly relevant to *spirituality* is the ability to become accepting of the current situation while relying on God’s grace. This was captured in a young immigrant’s statement: “I just know that I will hand it over [to God]. I’ll let it be what it’s supposed to be and I won’t let my mind be bothered by it ... being spiritual has really helped me stay strong and cope.”

Data gathered from key informants also confirmed *optimism*, *spirituality*, and *impermanence* as strategies of undocumented immigrants that help them cope with adversity. For example, a legal expert stated, “Sometimes [undocumented immigrants] don’t have a lot of resources, but they have optimism that everything will be better.” In another comment, a key informant explained the link between *optimism*, *spirituality*, and *impermanence* as effective coping strategies,

I feel that optimism comes in the form of faith, having faith in God or whoever this entity might be would make [things] better ... even though it’s difficult, unbearable at times, [undocumented immigrants] see [their situation] as impermanent ... it’s like things would get different, things would cease to be even though it doesn’t feel like it at the moment ... it is a form of optimism.

Behavioral Adaptability

Behavioral adaptability refers to the ability to change actions and behaviors in response to changes in the external or internal environment of the immigrant. Broadly, behavioral adaptability facilitates opportunities for the immigrant, helps to build their self-confidence, and increases self-reliance. Within behavioral adaptability, *flexibility* emerged as an important subcode. In this regard, an immigrant stated, “Whatever comes my way, I am here. Give me any work and I will do it ... 3 A.M., with cold, hot, danger, whatever it takes.” In being flexible undocumented, immigrants are able to alter their behavior to adapt to uncertainty and changing situations while also embracing opportunities.

Consistent with this definition, data from key informants also confirmed *flexibility* as an important coping strategy of undocumented immigrants. For example, a key informant emphasized, “Flexibility is key, as well as having willingness without fear ... [undocumented immigrants] are not afraid of work, any type of work at any time of day.”

Information from key informants helped to identify another subcode that emerged as a protective factor related to behavioral adaptability: *creativity* or the ability to imagine, generalize, recognize, or develop novel ideas and possibilities to solve problems. In this regard, a mental health provider with expertise working with undocumented communities emphasized, “Their willingness to move forward is great, and they are super creative in how they do things and how they think about life ... their creativity is incredible and helps them survive.” As described by a key informant, *creativity* among undocumented immigrants includes “thinking outside the box,” and despite having limited resources, developing alternatives for problem solving to find “a way out.”

Acceptance

Acceptance refers to the acknowledgement of one’s potential, abilities, situation, and/or context. Broadly, acceptance helps these immigrants by increasing a sense of satisfaction and positive affect. Two subcodes emerged within *acceptance*. The first was *gratefulness*, which involved being appreciative or thankful for what one has. In this regard, an immigrant commented, “I am here and I am grateful for my work, my truck ... it’s an old truck but before I didn’t even have a bicycle.” While another immigrant mentioned, “I have two hands and two feet so that I can work ... I believe that is a good strength.”

The second subcode that emerged was *contentment*, which involves feeling satisfied with what one has, whatever or, however, little or not ideal that may be, although it does not imply losing a desire to strive for more or loss of ambition. Contentment can be easily appreciated in an immigrant’s comment when she said,

I live happy ... even when I have problems in my marriage because most marriages do ... and I have my job ... my job helps me because if I have problems at home, I get distracted at work and then I forget.

Similarly, another immigrant stated,

I don’t feel fully accomplished, but I feel good and I think I am going to be even better. I can work, I can speak English, I am self-employed, and I have learned a lot to get ahead. I feel that I am an intelligent person that likes to learn so I try my best and things are good.

Sociability

Sociability pertains to the ability of being gregarious or willing to talk and engage in activities with other people in a friendly manner. It is essential for undocumented immigrants in that it helps build a sense of community and cohesion among people, as well as facilitates the acquisition of resources. It helps facilitate connections with others, build support systems, and reduce loneliness and a sense of isolation. Within sociability, four subcodes emerged. The first was *kindliness*, or having an attentive, generous, considerate, and non-judgmental attitude towards others, particularly those less fortunate. It also refers to the sincere and voluntary use of one’s time, talents and/or resources to better the lives of others and to show love. Kindliness is particularly important, because not only does it improve the quality of life of the person being kind, but also of those around them. An immigrant commented,

I try to provide others with support, advice, and help so that they can keep moving forward. I don't judge them or lecture them or tell them what they are doing wrong. That is what is most needed ... we need someone that understands us and that can guide us to keep moving forward or how to overcome our problems.

The second subcode was *responsiveness*, which refers to having a willingness to react quickly and positively to the needs of others. In this regard, an immigrant commented,

Our community is very small, but if something happens to a Honduran, we immediately collect money among ourselves to help, and if immigration takes him, we send him the money.

Responsiveness is about being present to attend to someone else's needs, which helps build a sense of community.

The next subcode that emerged was *friendliness* or being easily approachable. To illustrate, an immigrant commented, "We support each other ... for example, my friend brings her friends and then her friends brings their friends and then our group grows bigger and bigger and that is how we support each other."

Finally, the fourth subcode was *good sense of humor*, which refers to having an ability to see things or events, even those that are negative or harsh, in a more positive light. A good sense of humor reflects the ability to see humor in everyday situations and to appreciate life's irony. It helps to defuse tense and aggressive situations that otherwise could lead to distress and negative emotions. A sense of humor is appreciated in the following story told by an immigrant while laughing,

I went to a job that a friend recommended and there was this very pretty girl that discriminated me because they saw me as fat and ugly ... and this girl was very pretty ... well, immigration got her and they didn't get me.

Courage

Broadly, *courage* refers to having the mental or moral strength to face adversity, fear, and/or difficulties. Courage is helpful to maintain motivation despite fear and it helps withstand hardship. Two subcodes emerged within courage. The first was *tenacity*, which refers to having an unconditional disposition or willingness to endure hardship to achieve a desired goal. For example, an immigrant stated, "We are very strong. We don't give up easily regardless of how difficult our lives are. We need to remain strong; with enough effort, anything is possible." It is the belief in their inner and physical strength that undocumented immigrants find reassurance that they will be able to withstand calamity while still coming out victorious.

The second subcode under courage was *fortitude*. Although somewhat similar to tenacity, fortitude refers to an immigrant's fearlessness and ability to be realistic about the hardships to be faced in working towards the ultimate goal of achieving the American Dream and a better life. An immigrant captured this construct by commenting,

Not being afraid is an important value. I am going to start from zero, I am going to face hardship, I am going to face risks, I am going to face hunger, but it doesn't matter. I am going to do it, I am going to try, I have to do it.

Several key informants agreed about the importance of *fortitude*, with one of them stating that undocumented immigrants “are willing to give it all to gain it all.”

Ancestral or Cultural Pride

This refers to the epicenter of a person's values and sense of identity that helps to foster dignity, self-respect, and self-esteem. It also facilitates connections among people of similar backgrounds. Within *ancestral or cultural pride*, two subcodes emerged. The first subcode is *pride in cultural/ethnic identity and values*. This refers to being proud about one's place of origin and/or ethnic/racial group, as well as of the endorsement of a person's cultural values and traditions. For example, to highlight pride in *familismo*, a Latinx value that emphasizes dedication, commitment and loyalty to the family, an immigrant commented,

We are very traditional and believe in the unity of the family ... one day, a co-worker was making fun of me by saying, [Mexicans] bring the grandma, the kids, and everybody to the beach ... I told her that this is the way we are and that I treasure it.

The second subcode that emerged was *pride in immigrant identity*, which centers around building one's self-image on the lessons learned from the immigration experience, including courage and resilience. The following quote by an immigrant exemplifies this subcode by highlighting, “We are a people that know how to stand up in the face of difficulties. We know that where there are difficulties, there are also possibilities, and we carry that in our veins.”

Discussion

Undocumented Latinx immigrants use specific strategies to cope with uncertainty and hardship. Our findings provide support to previous research while also furthering our understanding of how specific strategies can be helpful in promoting resilience among this marginalized population. For example, consistent with research that highlights cognitive reframing as an important protective factor that helps undocumented immigrants cope with adversity (Benuto, Casas, & Gonzalez, 2018; Garcini et al., 2016), our findings emphasize how these immigrants use optimism, focus on the future, and perceptions of the relativity and impermanence of undesirable situations, as ways to reframe hardship to find meaning, purpose and hope. Similarly, in line with research showing that social support is an essential factor that promotes the well-being of immigrants (Brietzke & Perreira, 2017; Cano et al., 2017; Garcini et al., 2016), our findings identify and define specific sociable traits that help undocumented immigrants succeed in building support networks, such as being kind, friendly, and responsive to others. Furthermore, in accordance with research supporting the positive effects that adherence to cultural values and to ethnic/racial identity have on the health of undocumented immigrants (Cobb et al., 2019; Garcini et al., 2016), our findings illustrate how cultural and ancestral pride enables immigrants to protect their self-esteem and increase positive emotions in the midst of hardship. Our findings highlight how courage

and flexibility, paired with acceptance and gratitude, help undocumented immigrants cope with adversity while remaining resilient.

Considerations to the strategies identified in this study can be useful to inform interventions, services, and resources for immigrants at risk, and for other populations facing uncertainty and hardship. Although strategies, such as optimism, sociability, and courage, have been often considered to be innate characteristics, research shows that the strategies highlighted in this paper can be learned or acquired by experience (Abela et al., 2004; Pury, 2008). For example, courage may be developed by building self-efficacy and using cognitive techniques, such as asking people to remember the past experiences of success when facing challenging situations or fears, as well as by helping people reflect on the purpose of being courageous with personal motivating factors in mind (e.g., provide for the needs of the family; Pury, 2008). Similarly, to increase strategies, such as optimism, cognitive behavioral techniques, such as self-disputing negative or maladaptive beliefs, learning to put things in perspective, and setting attainable goals, can be effective (Gillham & Reivich, 2004). Moreover, to increase sociability, behavioral training focused on the development of communication and social skills, recognition of other people's emotions from behavioral cues, and building prosocial concerns for others has been shown to be useful (Waytz & Gray, 2018). Particularly relevant to the current pandemic is that skills such as sociability can be implemented despite social distancing restrictions that are needed to reduce the spread of the COVID-19 virus (Van Orden et al., 2020). For example, technology or online means can be used to build support groups and a sense of community, or to bring people together to raise awareness or money for a joint cause (Falicov et al., 2020; Waytz & Gray, 2018). These findings are particularly valuable in the context of liberation psychology, a theory that provides guidance for community mobilization and individual intervention (Chavez-Dueñas & Adames, 2021; Chavez-Dueñas et al., 2019; Comas-Díaz & Torres Rivera, 2020). Developing and disseminating interventions, programs, and resources aimed at helping immigrants at-risk foster or build upon the strategies identified in this study is needed to help nurture resilience during challenging and uncertain times.

Culturally Competent, Strength-Based, and Resilience Building Approaches

Findings from the study underscore the need to train psychologists in cultural competencies that are responsive to their clients' lived experiences, and that bolster existing strengths and resilience. The literature on training culturally competent psychologists suggests that there is still much room for growth in this area of work (Benuto, Casas, & O'Donohue, 2018; Benuto et al., 2019), and that psychologists may benefit from integrating multicultural and social justice competencies to meet the needs of immigrant clients, who may perceive them as not being highly culturally competent (Rogers-Sirin et al., 2015). Our findings also suggest the helpfulness of strength-based approaches, which focus on developing and building upon a person's strengths, qualities, and motivation to foster resilience and a positive self-image (Smith, 2006). Prior studies support the effectiveness of strength-based approaches in increasing positive feelings (i.e., happiness) and diminishing negative affectivity (i.e., depression; Rashid, 2015).

In addition, ancestral or cultural pride may perhaps inform ways to foster desirable attributes, such as responsiveness, kindness, sociability, resourcefulness, ingenuity, creativity, bravery, contentment, gratefulness, appreciativeness, and a sense of humor. Being able to elicit and consider the stories immigrants tell as a platform for exploring and strengthening ancestral wisdom, pride, and resilience is a strength-based approach that psychologists, social workers, and medical providers may use as an effective culturally inclusive intervention when working with immigrant and undocumented communities (Cadenas et al., 2021). Ancestral or cultural resilience as a construct can be described as one's line of ancestry filled with a history and stories that connect our past and our present. The stories that immigrant people tell are used for knowledge sharing as well as healing, which bonds people through struggle and resilience. Ancestral resilience, which also incorporates intuition, is a compass of survival and gratitude for life. For example, the Spanish saying, "lo llevamos en las venas" [we carry it in our veins], is a cultural concept of ancestral resilience that embodies a collective and inherited form of ingenuity, creativity, bravery, gratefulness, appreciativeness, and a desire for life. Story-telling through testimonials can be helpful to build ancestral resilience and cultural pride. In reflecting upon one's life journey, individuals may increase their self-awareness and self-perception of resilience despite the social limitations imposed by harsh living environments (Cadenas et al., 2021), which in turn can foster identity formation and cognitive reframing. Indeed, it is in reflecting upon one's past challenges, difficulties, and the lessons learned that people can see things in a new light and often find renewed meaning, purpose, and hope in the midst of adversity. Facilitating ways for undocumented immigrants to build on ancestral resilience and cultural pride could be helpful to increase perceptions of resourcefulness and strength, which is needed to endure uncertain situations and threatening environments.

The strategies identified in this study are a promising focus for strength-based interventions at various systemic levels (Paat, 2013). Strength-based interventions, services, and resources aiming to bolster the strategies highlighted in this paper may prove helpful to meet the immediate (e.g., low access to resources) and long-term needs (e.g., coping with ongoing systemic challenges) of undocumented immigrants. Psychologists, medical providers, social workers, counselors, public health workers, and other allied health professionals serving undocumented immigrants may find it helpful to read the recently published *Guide for Providing Mental Health Services* to better serve this population (Cadenas et al., 2020). The guide highlights many of the strategies discussed in this study and provides practical information on how to incorporate these into assessment, practice, and community-based approaches. In addition, the guide highlights strategies for how health providers may make use of trauma-informed care, multicultural and social justice competencies, develop their understanding of legal and political contexts, and develop communities of support to bolster immigrants' strategies.

Evidently, undocumented Latinx immigrants use a number of strategies that provide positive effects for them, as they develop resilience to cope and thrive in the face of compounded stressors. Although these strategies are used among immigrants, they are not exclusive to them, and they may be fostered and developed among other vulnerable populations facing adversity. Importantly, the significant increase in unemployment rates and widespread fear and loss due to the COVID-19 pandemic may place large numbers of individuals into

new positions of vulnerability, disempowerment, and newfound marginalization, which may impact their psychological and physical well-being (Blustein & Guarino, 2020; Blustein et al., 2020). In addition, intersecting stressors may foster racial battle fatigue and burnout among communities maintaining the movement for racial and social justice in the U.S. and globally, and thus, individuals participating in these movements may also benefit from strength-based and affirming mental health and health services (Gorski & Erakat, 2019). We see that the strategies shared by participants in this study, and the practice recommendations to foster them, have relevance/application, and may be useful to alleviate distress and promote health equity among vulnerable individuals and communities at-risk.

Overcoming the Stigmatization of Being Undocumented

Anti-immigrant climate and harmful rhetoric brings tremendous distress to many immigrant communities, including undocumented immigrants. Undocumented immigrants have often been portrayed as dangerous, a threat to economic stability, a drain to society, and more recently as disease carriers and a public health hazard within the context of the COVID-19 pandemic (Garcini et al., 2020). Biased information about who these immigrants are, and a poor understanding of the immigration experience has perpetuated the aforementioned stereotypes and its associated negative consequences (Garcini et al., 2020). The strategies identified in this paper highlight the many positive abilities and skills that undocumented immigrants have; thus, providing us with valuable knowledge and lessons learned as to what it takes to survive adversity in the face of uncertainty and hardship.

While it is important to recognize that the aforementioned strategies provide a counter narrative to anti-immigrant rhetoric, it is also critical to stress that undocumented individuals need not be subjected to a counter narrative that reinforces the “good immigrant narrative” (Campos Ramales, 2019). Our focus on strengths is intended to focus on the practical aspects of building resilience without implying that immigrants are deserving of a just immigration policy, because they are good or worthy immigrants. By focusing on the positive qualities and resilient factors of undocumented communities, providers and policy makers can learn the many ways in which individuals who experience oppression and hardship not only overcome conditions that are harmful to their health, but also transform their social conditions from a state of surviving to one of thriving. It is essential to recognize that immigration policy should not just be dependent on how much individuals can endure, survive, or contribute economically, but rather, focus on individual protections from exposure to traumatic events, such as ongoing discrimination, stigmatization, racism, and ethnviolence. The strategies identified in this study require us to understand people as whole human beings experiencing an array of individual and collective, physical, and psychological processes as a response to adversity.

Limitations

Our study provides notable findings to elucidate the mechanisms through which undocumented Latinx immigrants develop resilience in the face of uncertainty and crisis. Regardless, it is prudent to consider our study in light of its limitations. One limitation is the regional specificity of the sample. Given that all participants resided in a border region in the West of the U.S., our findings may specifically speak to the psychological experiences

of undocumented Mexican immigrants in that region. Future studies will need to explore the resilience-building mechanisms among other groups of undocumented immigrants, such as those originating from other Latin American countries, Asian, and Africa. Nonetheless, findings from this study are validated by the clinical insights of leading psychologists with expertise working with undocumented communities throughout the U.S.

Conclusion

This manuscript highlights strategies and protective effects that contribute to resiliency in the face of adversity for undocumented immigrants. The results of this study remind us of the power of the human condition and the collective experience of suffering. The underserved and marginalized communities we work with offer untold contributions that unfortunately can go easily unnoticed. The immigrants that live within these communities are models of determination and courage, and as such, should be treated with the respect, kindness, and the dignity that they deserve. These communities can provide us with a multitude of lessons on how to successfully face and navigate the hardship and uncertainty in life, particularly during catastrophic times, such as the COVID-19 pandemic. The interviews in this study crystallize for us the power each and every individual has to overcome adversity and the fact that our country is at its best when diversity prevails.

Acknowledgments

National Institutes of Health, National Heart, Lung, and Blood Institute (NHLBI) (K01HL150247; PI: Luz M. Garcini).

References

- Abela JRZ, Brozina K, & Seligman MEP (2004). A test of integration of the activation hypothesis and the diathesis-stress component of the hopelessness theory of depression. *British Journal of Clinical Psychology*, 43(2), 111–128. 10.1348/014466504323088006
- Alcántara C, Estevez CD, & Alegría M (2017). Latino and Asian immigrant adult health: Paradoxes and explanations. In Schwartz SJ & Unger JB (Eds.), *Oxford library of psychology. The Oxford handbook of acculturation and health* (pp. 197–220). Oxford University Press.
- Beato-Fernández L, Rodríguez-Cano T, Pelayo-Delgado E, & Calaf M (2007). Are there gender-specific pathways from early adolescence psychological distress symptoms toward the development of substance use and abnormal eating behavior? *Child Psychiatry and Human Development*, 37(3), 193–203. 10.1007/s10578-006-0029-2 [PubMed: 17001526]
- Benuto LT, Casas J, & O'Donohue WT (2018). Training culturally competent psychologists: A systematic review of the training outcome literature. *Training and Education in Professional Psychology*, 12(3), 125–134. 10.1037/tep0000190
- Benuto LT, Casas JB, Gonzalez FR, & Newlands RT (2018). Being an undocumented child immigrant. *Children and Youth Services Review*, 89, 198–204. 10.1016/j.childyouth.2018.04.036
- Benuto LT, Singer J, Newlands RT, & Casas JB (2019). Training culturally competent psychologists: Where are we and where do we need to go? *Training and Education in Professional Psychology*, 13(1), 56–63. 10.1037/tep0000214
- Blustein DL, Duffy R, Ferreira JA, Cohen-Scali V, Cinamon RG, & Allan BA (2020). Unemployment in the time of COVID-19: A research agenda. *Journal of Vocational Behavior*, 119. Article 103436. 10.1016/j.jvb.2020.103436
- Blustein DL, & Guarino PA (2020). Work and unemployment in the time of COVID-19: The existential experience of loss and fear. *Journal of Humanistic Psychology*, 60(5), 702–709. 10.1177/0022167820934229

- Brady KT, & Sinha R (2005). Co-occurring mental and substance use disorders: The neurobiological effects of chronic stress. *The American Journal of Psychiatry*, 162(8), 1483–1493. 10.1176/appi.ajp.162.8.1483 [PubMed: 16055769]
- Brietzke M, & Perreira K (2017). Stress and coping: Latino youth coming of age in a new Latino destination. *Journal of Adolescent Research*, 32(4), 407–432. 10.1177/0743558416637915 [PubMed: 28626298]
- Broderick PC, & Jennings PA (2012). Mindfulness for adolescents: A promising approach to supporting emotion regulation and preventing risky behavior. *New Directions for Youth Development*, 2012(136), 111–126. 10.1002/yd.20042 [PubMed: 23359447]
- Cadenas GA, Campos L, Minero LP, & Aguilar C (2020, April 20). A guide for providing mental health services to immigrants impacted by changes to DACA and the COVID-19 pandemic. <https://www.informedimmigrant.com/guides/daca-mental-health-providers/>
- Cadenas GA, Peña D, Minero LP, Rojas-Araúz BO, & Lynn N (2021). Critical agency and vocational outcome expectations as coping mechanisms among undocumented immigrant students. *Journal of Latinx Psychology*, 9(2), 92–108. 10.1037/lat0000178
- Campos Ramales L (2019). A political action against the good immigrant narrative. *Genealogy*, 3(4). Article 69. 10.3390/genealogy3040069
- Cano MÁ, Sánchez M, Trepka MJ, Dillon FR, Sheehan DM, Rojas P, Kanamori MJ, Huang H, Auf R, & De La Rosa M (2017). Immigration stress and alcohol use severity among recently immigrated Hispanic adults: Examining moderating effects of gender, immigration status, and social support. *Journal of Clinical Psychology*, 73(3), 294–307. 10.1002/jclp.22330 [PubMed: 27228112]
- Chavez-Dueñas NY, & Adames HY (2021). Intersectionality awakening model of womanista: A transnational treatment approach for Latinx women. *Women & Therapy*, 44(1–2), 83–100. 10.1080/02703149.2020.1775022
- Chavez-Dueñas NY, Adames HY, Perez-Chavez JG, & Salas SP (2019). Healing ethno-racial trauma in Latinx immigrant communities: Cultivating hope, resistance, and action. *American Psychologist*, 74(1), 49–62. 10.1037/amp0000289
- Cobb CL, Meca A, Branscombe NR, Schwartz SJ, Xie D, Zea MC, Fernandez CA, & Sanders GL (2019). Perceived discrimination and well-being among unauthorized Hispanic immigrants: The moderating role of ethnic/racial group identity centrality. *Cultural Diversity and Ethnic Minority Psychology*, 25(2), 280–287. 10.1037/cdp0000227 [PubMed: 30284850]
- Comas-Díaz L, & Torres Rivera E (Eds.). (2020). *Liberation psychology: Theory, method, practice, and social justice*. American Psychological Association. 10.1037/0000198-000
- Dhabhar FS (2014). Effects of stress on immune function: The good, the bad, and the beautiful. *Immunologic Research*, 58(2–3), 193–210. 10.1007/s12026-014-8517-0 [PubMed: 24798553]
- Falicov C, Niño A, & D’Urso S (2020). Expanding possibilities: Flexibility and solidarity with under-resourced immigrant families during the COVID-19 pandemic. *Family Process*, 59(3), 865–882. 10.1111/famp.12578 [PubMed: 32663315]
- Fioranelli M, Bottaccioli AG, Bottaccioli F, Bianchi M, Rovesti M, & Roccia MG (2018). Stress and inflammation in coronary artery disease: A review psychoneuroendocrineimmunology-based. *Frontiers in Immunology*, 9. Article 2031. 10.3389/fimmu.2018.02031
- Garcini LM, Domenech Rodríguez MM, Mercado A, & Paris M (2020). A tale of two crises: The compounded effect of COVID-19 and anti-immigration policy in the United States. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(S1), S230–S232. 10.1037/tra0000775
- Garcini LM, Murray KE, Zhou A, Klonoff EA, Myers MG, & Elder JP (2016). Mental health of undocumented immigrant adults in the United States: A systematic review of methodology and findings. *Journal of Immigrant & Refugee Studies*, 14, 1–25. 10.1080/15562948.2014.998849
- Gillham J, & Reivich K (2004). Cultivating optimism in childhood and adolescence. *The Annals of the American Academy of Political and Social Science*, 591(1), 146–163. 10.1177/0002716203260095
- Gonzales RG, Suárez-Orozco C, & Dedios-Sanguinetti MC (2013). No place to belong: Contextualizing concepts of mental health among undocumented immigrant youth in the United States. *American Behavioral Scientist*, 57(8), 1174–1199. 10.1177/0002764213487349

- Gorski PC, & Erakat N (2019). Racism, whiteness, and burnout in antiracism movements: How white racial justice activists elevate burnout in racial justice activists of color in the United States. *Ethnicities*, 19(5), 784–808. 10.1177/1468796819833871
- Hughes K, Bellis MA, Hardcastle KA, Sethi D, Butchart A, Mikton C, Jones L, & Dunne MP (2017). The effect of multiple adverse childhood experiences on health: A systematic review and meta-analysis. *The Lancet. Public Health*, 2(8), e356–e366. 10.1016/S2468-2667(17)30118-4 [PubMed: 29253477]
- Jawetz T (2020). Immigrants as essential workers during COVID-19: Testimony before the U.S. House Judiciary Subcommittee on Immigration and Citizenship. Center for American Progress. https://cdn.americanprogress.org/content/uploads/2020/09/28102223/JawetzImmigrantsCOVID-testimony1.pdf?_ga=2.83197397.2130974704.1607468539-1268505844.1605720923
- Lupien SJ, Juster RP, Raymond C, & Marin MF (2018). The effects of chronic stress on the human brain: From neurotoxicity, to vulnerability, to opportunity. *Frontiers in Neuroendocrinology*, 49, 91–105. 10.1016/j.yfrne.2018.02.001 [PubMed: 29421159]
- Medina-Inojosa J, Jean N, Cortes-Bergoderi M, & Lopez-Jimenez F (2014). The Hispanic paradox in cardiovascular disease and total mortality. *Progress in Cardiovascular Diseases*, 57(3), 286–292. 10.1016/j.pcad.2014.09.001 [PubMed: 25246267]
- Morrow SL, & Smith ML (2000). Qualitative research for counseling psychology. In Brown SD & Lent RW (Eds.), *Handbook of counseling psychology* (p. 199–230). Wiley.
- Paat YF (2013). Working with immigrant children and their families: An application of Bronfenbrenner's ecological systems theory. *Journal of Human Behavior in the Social Environment*, 23(8), 954–966. 10.1080/10911359.2013.800007
- Palinkas LA, Horwitz SM, Green CA, Wisdom JP, Duan N, & Hoagwood K (2015). Purposeful sampling for qualitative data collection and analysis in mixed method implementation research. *Administration and Policy in Mental Health and Mental Health Services Research*, 42(5), 533–544. 10.1007/s10488-013-0528-y [PubMed: 24193818]
- Pury CLS (2008). Can courage be learned? In Lopez SJ (Ed.), *Positive psychology exploring the best people* (pp. 109–130). Greenwood Publishing Group.
- Rashid T (2015). Positive psychotherapy: A strength-based approach. *The Journal of Positive Psychology*, 10(1), 25–40. 10.1080/17439760.2014.920411
- Rogers-Sirin L, Melendez F, Refano C, & Zegarra Y (2015). Immigrant perceptions of therapists' cultural competence: A qualitative investigation. *Professional Psychology: Research and Practice*, 46(4), 258–269. 10.1037/pro0000033
- Rohleder N (2019). Stress and inflammation—The need to address the gap in the transition between acute and chronic stress effects. *Psychoneuroendocrinology*, 105, 164–171. 10.1016/j.psyneuen.2019.02.021 [PubMed: 30826163]
- Scott SB, Graham-Engeland JE, Engeland CG, Smyth JM, Almeida DM, Katz MJ, Lipton RB, Mogle JA, Munoz E, Ram N & Sliwinski MJ (2015). The effects of stress on cognitive aging, physiology and emotion (ESCAPE) project. *BMC Psychiatry*, 15. Article 146. 10.1186/s12888-015-0497-7
- Shonkoff J, & Meisels S (2011). *Handbook of early childhood interventions*. Cambridge University Press.
- Smith EJ (2006). The strength-based counseling model. *The Counseling Psychologist*, 34(1), 13–79. 10.1177/0011000005277018
- Teruya SA, & Bazargan-Hejazi S (2013). The immigrant and Hispanic paradoxes: A systematic review of their predictions and effects. *Hispanic Journal of Behavioral Sciences*, 35(4), 486–509. 10.1177/0739986313499004 [PubMed: 26120244]
- Tummala-Narra P (2014). Cultural identity in the context of trauma and immigration from a psychoanalytic perspective. *Psychoanalytic Psychology*, 31(3), 396–409. 10.1037/a0036539
- Van Orden KA, Bower E, Lutz J, Silva C, Gallegos AM, Podgorski CA, Santos EJ, & Conwell Y (2020). Strategies to promote social connections among older adults during 'social distancing' restrictions. *The American Journal of Geriatric Psychiatry*, 29(8), 816–827. 10.1016/j.jagp.2020.05.004 [PubMed: 32425473]
- Vaughn MG, Salas-Wright CP, Maynard BR, Qian Z, Terzis L, Kusow AM, & DeLisi M (2014). Criminal epidemiology and the immigrant paradox: Intergenerational discontinuity in violence

and antisocial behavior among immigrants. *Journal of Criminal Justice*, 42(6), 483–490. 10.1016/j.jcrimjus.2014.09.004

Wallerstein N, & Duran B (2010). Community-based participatory research contributions to intervention research: The intersection of science and practice to improve health equity. *American Journal of Public Health*, 100(Suppl. 1), S40–S46. 10.2105/AJPH.2009.184036 [PubMed: 20147663]

Waytz A, & Gray K (2018). Does online technology make us more or less sociable? A preliminary review and call for research. *Perspectives on Psychological Science*, 13(4), 473–491. 10.1177/1745691617746509 [PubMed: 29758166]

Yakushko O (2010). Stress and coping strategies in the lives of recent immigrants: A grounded theory model. *International Journal for the Advancement of Counselling*, 32(4), 256–273. 10.1007/s10447-010-9105-1

Impact Statement

Undocumented Latinx immigrants are highly resilient, making use of six strategies to cope with chronic problems: thinking differently (cognitive reframing), adapting to new challenges (behavioral adaptability), acceptance, sociability, courage, and ancestral/cultural pride. These coping tools were observed in 15 interviews with undocumented informants, and from clinical insights from psychologists. These coping tools can be helpful to those developing clinical practices, programs, and policies to support undocumented Latinx immigrants.

Author Manuscript

Author Manuscript

Author Manuscript

Author Manuscript

Table 1

Characteristics of Participants in Focus Groups

Variables	Sample characteristics
Number of focus groups (<i>N</i>)	7
Total number of participants (<i>N</i>)	20
Sex: % women	74
Age (<i>M, SD</i>)	43.5 (12.5)
Marital status: % married	79
Education: % below HS	54
Employment: % working	49
Age of arrival to the U.S. (<i>M, SD</i>)	22.2 (9.1)
Years in the U.S. (<i>M, SD</i>)	21.4 (9.9)
Social network: % undocumented	59

Author Manuscript

Author Manuscript

Author Manuscript

Author Manuscript

Table 2

Focus Group and Key Informant Guided Focus Group Questions

Domain	Questions
Contextual stressors	<ul style="list-style-type: none"> • What comes to mind when you hear someone talk about the stress faced by [your community/undocumented immigrants]? • What are some constant stressors that [your community/undocumented immigrants] face?
Coping and resilience factors	<ul style="list-style-type: none"> • Overall, how do [members of your community/undocumented immigrants] cope with the stressors identified [or the chronic stress that they face?]? <ul style="list-style-type: none"> a. What are some strategies that help [members of your community/undocumented immigrants] keep strong in the face of adversity? b. What are some social abilities or characteristics that help [members of your community/undocumented immigrants] cope with adversity? c. What are additional ways in which [members of your community/undocumented immigrants] cope with stress and adversity? • What needs to be done to help protect the well-being and health of [members of your community/undocumented immigrants]? • Do you have any suggestions or recommendations as to how you would improve the well-being of [your community/undocumented immigrants] in the face of adversity?

Table 3

Characteristics of Key Informants

Variables	Sample characteristics
Number of key informants (<i>N</i>)	15
Sex: % women	50
Age (<i>M, SD</i>)	42.0 (12.9)
Marital status: % married/living as married	65
Education: % below HS	15
Key informant role/work	
% research	20
% Health service provider (CHW)	7
% Mental health provider	20
% Spiritual/religious leader	20
% Indigenous leader	7
% Legal/political expert	13
% Employer	7
% Community activist	6
Knowledge of undocumented community	
Years serving the undocumented (<i>M, SD</i>)	13 (11)
Days per week interacting with the undocumented (<i>M, SD</i>)	5 (1.5)
% of undocumented immigrants served	73

Table 4
 Primary Codes, Subcodes, and Examples of Protective Effects of Coping Strategies Used by Undocumented Immigrants

Strategies: primary codes	Strategies: subcodes	Protective effects of strategies
a. Cognitive reframing	1 Optimism	• Fosters meaning
	2 Relativity	• Enhances purpose
	3 Impermanence	• Builds hope
	4 Future-focused	
	5 Spirituality	
b. Behavioral adaptability	1 Flexibility	• Facilitates opportunities
	2 Creativity	• Build self-confidence
	3 Resourcefulness	• Increase self-reliance
c. Acceptance	1 Gratefulness	• Increases satisfaction
	2 Contentment	• Increases positive affect
d. Sociability	1 Kindness	• Facilitates connections
	2 Responsiveness	• Helps build support systems
	3 Friendliness	• Reduces isolation/loneliness
	4 Good sense of humor	• Increases positive affect
e. Courage	1 Tenacity	• Maintains motivation
	2 Fortitude	• Helps withstand difficulties
f. Ancestral or cultural pride	1 Pride in cultural identity and values	• Increases positive affect
	2 Pride in immigrant identity	• Facilitates connections
		• Fosters self-esteem
		• Enhances self-identity