

Ursinus College Digital Commons @ Ursinus College

African American and Africana Studies Summer Fellows

Student Research

7-19-2019

Black Women's Wellbeing: The Intersections of Race, Immigrant Status, and Mental Health Among African Diasporan Women in Houston, Texas

Sianneh Vesslee Ursinus College, sivesslee@ursinus.edu

Follow this and additional works at: https://digitalcommons.ursinus.edu/african sum

Part of the African American Studies Commons, Mental and Social Health Commons, Migration Studies Commons, Public Policy Commons, and the Women's Studies Commons
Click here to let us know how access to this document benefits you.

Recommended Citation

Vesslee, Sianneh, "Black Women's Wellbeing: The Intersections of Race, Immigrant Status, and Mental Health Among African Diasporan Women in Houston, Texas" (2019). *African American and Africana Studies Summer Fellows*. 3. https://digitalcommons.ursinus.edu/african_sum/3

This Paper is brought to you for free and open access by the Student Research at Digital Commons @ Ursinus College. It has been accepted for inclusion in African American and Africana Studies Summer Fellows by an authorized administrator of Digital Commons @ Ursinus College. For more information, please contact aprock@ursinus.edu.

Black Women's Wellbeing: The Intersections of Race, Immigrant Status, and Mental
Health Among African Diasporan Women in Houston, Texas
Sianneh Vesslee
Summer Fellows Final Project
Abstract

This research questions what barriers impede on African Diaspora women's mental health, access to mental healthcare, and status as mental health patients in the United States as discernible in state policies for psychological wellness. It investigates whether and/or how patriarchal white supremacy shapes the ways in which state policies for mental healthcare address the particular needs of black women who immigrate to Houston, Texas from Nigeria and Mexico. Using various scholarly sources dated from the late-twentieth century up to the present, including published mental healthcare policies published to the public and other related primary and secondary documents, this research ascertains whether and/or how their language and official U.S. guidelines have aided in constructing narratives and representations of black immigrant women that maintain white supremacist ideologies, promote predatory relationships with these women's home countries, and obstruct access to care. in addition, it uses legal scholar Kimberlé Crenshaw's concept, "intersectionality," to highlight how policies and politics related to racial and/or gendered disparities, including services for victims of domestic violence, often erase the particular experiences of black women. In doing so it becomes clear that a new methodology, "critical race medicine," is necessary for considering the full effects of immigration policy and access to adequate health care on black immigrant women

Introduction

Lydia, a forty-five-year-old Nigerian mother of two, migrated to the United States as a student. Lydia's experience immigrating and adjusting to the United States was challenging due to unexpected events, like discovering she was pregnant and her boyfriend leaving her, that

-

¹ Ette, Ezekiel Umo. 2012. *Nigerian Immigrants in the United States : Race, Identity, and Acculturation*. Lanham, Md: Lexington Books. http://search.ebscohost.com/login.aspx?direct=true&db=nlebk&AN=405946&site=ehost-live

rendered her vulnerable and unable to work because of her visa at the time. Her circumstances forced her to depend on the generosity of strangers and to take any job that was available for her.² In the end, although she faced difficulties because of the lack of help she received from her community, Lydia was able to adjust and find the means to support herself and her children.³ Lydia is like the many Black women who emigrate to the United States and struggle to adjust to life in a new country. Such women often deal with hardships such as discrimination and a lack of economic support and quality healthcare from their host country, and these factors can negatively impact their mental health outcomes.⁴ Even though Black immigrant women are very much a part of the United States, they rarely get representation in public discourses, policies, and scholarly literature about immigrant mental healthcare.⁵ This is the case even for states like Texas which has large immigrant communities, including those from Nigeria and Mexico.

According to the Migration Policy Institute, a Washington-based immigration think tank, Texas is home to around 1.6 million immigrants, one of the largest immigrant populations in the United States.⁶ While most immigrants to Texas come from Mexico, recent data has shown that more Nigerians are settling in the state, especially its largest city, Houston.⁷ Because Houston has prominent Nigerian and Mexican immigrant populations, it is a fitting city to investigate the primary concern of this research project. That is, to explore Nigerian and Afro-Mexican women

-

² Ette, Ezekiel Umo. 2012. *Nigerian Immigrants in the United States : Race, Identity, and Acculturation*. Lanham, Md: Lexington Books. http://search.ebscohost.com/login.aspx?direct=true&db=nlebk&AN=405946&site=ehost-live.

³ Ette, Ezekiel Umo. 2012. *Nigerian Immigrants in the United States : Race, Identity, and Acculturation*. Lanham, Md: Lexington Books. http://search.ebscohost.com/login.aspx?direct=true&db=nlebk&AN=405946&site=ehost-live.

⁵ Ette, Ezekiel Umo. 2012. Nigerian Immigrants in the United States: Race, Identity, and Acculturation,

⁶ Migration Policy Institute tabulations of the U.S. Census Bureau American Community Survey (ACS) and Decennial Census. Provide the full citation at first mention.

⁷ Migration Policy Institute tabulations of the U.S. Census Bureau American Community Survey (ACS) and Decennial Census

immigrants' mental health and to interrogate how systems of power such as white supremacy,

sexism, and classism affect whether and/or how they receive mental healthcare.

Questioning how systems of power and the disparities they produce shape mental

wellbeing and mental healthcare accessibility for Black women immigrants in the United States is

important given the consequences that relocating to this nation have for them. Studies have shown

that Black immigrants tend to be healthier when they first arrive, and usually have better mental

health outcomes than Black non-immigrants in the United States. Yet, studies also have shown

that once Black immigrants come to the United States, they experience a negative impact on their

mental health outcomes, and these outcomes become worse the longer they stay in the United

States. This paper will explore whether or how existing scholarly literature addresses the ways

that power structures impact how Black immigrant women fare mental health wise in the United

States and how they navigate the U.S. mental healthcare system. My research focuses on black

immigrant women due to the limited research and knowledge about Black immigrants. Ultimately,

it asks: how have white supremacy, patriarchy and misogyny, and xenophobia impacted Nigerian

and Afro-Mexican women's mental health, access to mental healthcare, and identities as mental

health patients in the United States as discernible in state policies and political discourses about

psychological wellness? The goal of this research is to explore the scholarship regarding this issues

with hopes of eventually developing a new praxis.

Black Feminist and Critical Race Theory: Notes on Methodology

⁸ Hamilton & Green, 2017

⁹ Hwang & Goto, 2008

4

In order to analyze my primary research problem, my methodology incorporates both Critical Race Theory and Black Feminist Theory, namely intersectionality, to understand how U.S. public health policies and systems of power impact Black women's mental healthcare accessibility and rights. Richard Delgado and Jean Stefancic 2001 book, Critical Race Theory: An Introduction, is essentially a primer to understanding Critical Race Theory for beginners and non-lawyers.¹⁰ Scholars such as Derrick Bell, Alen Freeman, and Richard Delgado started Critical Race Theory and its movement in the mid-1970s. The theory and movement drew a collection of activists and scholars interested in transforming the relationship between race, racism, and power and addressing the changing forms of racism in the United States.¹¹ What makes Critical Race Theorists different from Civil Rights organizers and activists is that Critical Race Theory essentially questions the foundations of the liberal order by critiquing equality theory, legal reasoning, Enlightenment rationalism, and neutral principles of constitutional law. 12 Critical Race Theorists place those themes in a broader perspective which includes economics, history, legal context, group- and self-interests, feelings, and the unconscious. Critical Race Theory builds on the insight of two previous movements and/or scholarly interventions: radical feminism and critical legal studies. 13 As Delgado and Stefancic outline, Critical Race Theorists put forth three main claims. First, racism is normal and not abnormal in society. Second, because racism benefits white elites materially and the white working-class psychologically, most white people have no intention to dismantle racism. Third and finally, race and races are social constructions. 14 The

_

¹⁰ Delgado, Richard, and Jean Stefancic. Critical Race Theory: An Introduction. Critical America. New York: New York University Press, 2001.,1pg

¹¹ Delgado, Richard, and Jean Stefancic. Critical Race Theory: An Introduction. Critical America. New York: New York University Press, 2001.,1pg

¹² Delgado, and Stefancic.

¹³ Delgado, and Stefancic.

¹⁴ Delgado, and Stefancic.

authors organize the book to address the themes and characteristics of what they frame as the new critical race jurisprudence. Critical Race Theory claims that the U.S. legal system is not colorblind, and benefits primarily white individuals and maintains white supremacy.

Delgado and Stefancic's book on Critical Race Theory helps me to create a framework that addresses the systemic issues of racism in policies and laws that potentially prevent black women immigrants from receiving proper, if any, mental health care from physicians and other mental healthcare providers. Critical Race Theory also shows how racism is not an anomaly in American society, including its jurisprudence, but an essential part of maintaining a White Supremacist status quo. With the understanding that racism is more systematic and important for maintaining White Supremacy, I can ascertain whether and/or how U.S. mental healthcare policies essentially other and further marginalize black immigrant women by distorting how they view themselves as patients in the United States and how policies and providers view and treat them as well. In addition to considering white supremacy, my research also probes the overlap between that system and others like sexism and xenophobia.

Such kinds of overlap are central to Kimberlé Crenshaw's seminal 1989 essay, "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory, and Antiracist Politics" which develops a Black Feminist study of the common practice of treating race and gender as mutually exclusive categories of experience and analysis. ¹⁵ Crenshaw's essay examines how anti-discrimination laws, feminist theory, and antiracist politics use a single-axis analysis in that they focus only on one type of oppression at a time. Crenshaw centered black women in her essay to show how the single-axis

¹⁵ Crenshaw, Kimberle. "(1989). Demarginalizing the intersection of race and sex: A Black feminist critique of antidiscrimination doctrine, feminist theory, and antiracist politics." In University of Chicago Legal Forum

analysis approach has limited and undermined the efforts of feminist and antiracist analyses because they primarily focus on white women and black men and thereby erase people like black women who are multiply burdened in race and sex discrimination cases. ¹⁶ In conclusion, Crenshaw states that Black liberationist politics and feminist theory need to include intersectional experiences in their groups in order to have a more inclusive and liberating.

Building on the 1989 piece, Crenshaw's 1991 essay, titled "Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color," examines the racial and gender dimensions of violence that women of color specifically experience and how many discourses have failed to consider their unique position. The Crenshaw looks at how the intersection of race and gender shape structural, political, and representational aspects of violence enacted on women of color. The author divides "Mapping the Margins" into three parts. In part one, she discusses structural intersectionality and the ways in which the location of women of color at the intersection of race and gender make their experience with domestic violence, rape, and remedial reform qualitatively different from white women. In part two, Crenshaw discusses political intersectionality and analyzes how feminist and antiracist politics have often helped to marginalize the issue of violence against women of color. Finally, in part three, Crenshaw addresses the significance of having an intersectional approach within the broader scope of contemporary identity politics. Ultimately, the awareness of intersectionality with oppression and socio

4

¹⁶ Crenshaw, Kimberle. "(1989). Demarginalizing the intersection of race and sex: A Black feminist critique of antidiscrimination doctrine, feminist theory, and antiracist politics." In University of Chicago Legal Forum

¹⁷ Crenshaw, Kimberlé. "Mapping the Margins: Identity politics, intersectionality, and violence against women." Stanford Law Review 43, no. 6 (1991)

¹⁸ Crenshaw, Kimberlé. "Mapping the Margins: Identity politics, intersectionality, and violence against women." Stanford Law Review 43, no. 6 (1991)

¹⁹ Crenshaw, Kimberlé. "Mapping the Margins: Identity politics, intersectionality, and violence against women." Stanford Law Review 43, no. 6 (1991)

²⁰ Crenshaw,

political positions such as race and gender can help us better acknowledge the differences among us to understand how those differences will be expressed, and we can apply this knowledge for more effective group politics.

Considering Crenshaw's contributions, this paper gives attention to intersections of oppression in order to more thoroughly analyze some of the obstacles in the lives of Afro-Mexican and Nigerian women immigrants who are in need or in search of mental healthcare. Acknowledging how sociopolitical positioning based on race, sex, gender, and immigration status combine to impact them will lend itself to a more comprehensive explanation of how laws and public discourses in Houston do or do not effectively address their mental wellbeing. Comprehensiveness is important because a single-axis framework can look over black immigrant women who require mental healthcare, and it also impedes scholarly analysis. This impediment is apparent in that there is limited research and knowledge concerning Black immigrant women and mental health and healthcare. That which is available conflates Nigerian women with all other African immigrants and Caribbean immigrants, and it facilitates the complete erasure of Afro-Mexicans' blackness, history, and contemporary experiences. An intersectional framework helps to address these oversimplifications and erasures and advocates for policies and public discourses that are more inclusive and effective.

Further, Crenshaw's methodology will be important for a proper critique of how Texas law handles black immigrant women as mental health patients. Crenshaw discusses how immigration laws, which are aimed at controlling illegal immigration or closing loopholes that immigrants might exploit only, further marginalize immigrant women and makes them more susceptible to domestic abuse and violence. On top of that, the programs that are meant to help immigrant women

prove to be ineffective as well because they are not intersectional.²¹This shows the importance of intersectionality to not only in policies, but programs and activism as well, including those intending to assist black immigrant women—documented and undocumented—who require mental healthcare.

Literature Review

Recall Lydia and her struggles as a Nigerian immigrant, mother, and student. Researchers, policymakers, and physicians often exclude Black women immigrants like Lydia when they discuss immigrants in the United States, their mental healthcare outcomes and statuses, access to mental healthcare, and their experience as mental healthcare patients. As a result, Black immigrant women are less likely to benefit from mental healthcare policies that are designed to specifically help or protect patients and their rights. Therefore, it is important to consider questions such as, what are some of the difficulties that primarily affect Black immigrant women's mental health outcomes, what barriers prevent Black immigrant women from actively seeking mental healthcare, and how do physicians and mental healthcare providers who are supposed to be treating Black immigrants see them as patients? Studies have shown that constant exposure to stressors such as discrimination based on race and gender can lead to poor mental health outcomes for Black immigrant women.²² Discrimination and unchecked biases can also prove to be barriers, along with socioeconomic status and documentation status, for Black immigrant women patients who are trying to receive mental healthcare.²³ Studies, policies, and care providers must take into

_

²¹Crenshaw

²² Finch, Brian Karl, Bohdan Kolody, and William A. Vega. "Perceived discrimination and depression among Mexican-origin adults in California." Journal of health and social behavior (2000).

²³ Michael K. Gusmano, "Undocumented Immigrants in the United States: U.S. Health Policy and Access to Care,"

account these social factors when studying, treating, and creating policies that will affect Black immigrant women.²⁴ Studies that do cover Black immigrants and healthcare in the United States usually obscure the nuance and complexity of Black immigrant women's experiences in the United States, especially those women's dealings with sexism, racism, immigration status, and economic status while trying to navigate a healthcare system with a racist historical foundation.²⁵

This literature review analyzes the academic scholarship on Nigerian and Mexican immigrants, including Black women, and their mental health and healthcare. The literature included herein demonstrates that there are few studies specifically focused on Black immigrant women, and the scholarship also fails to point out how the intersections between gender, racism, immigration status, and socioeconomic status can impact Black immigrant women's mental health outcomes, how they receive mental healthcare, and how Black immigrant women and physicians view them as mental health patients. Yet, Black women, including immigrants, experience health disparities throughout the African Diaspora. I thus advocate for a new praxis, informed by Critical Race Theory and intersectionality, for studying and making policies that impact immigrant mental health in the United States. The literature review is organized by the major topics of what is covered by the majority of the literature as what is missing from the literature. The major topics that the literature is organized in is

Globalization, Western Domination, and Immigration

-

²⁴ Obasi, E. M., & Leong, F. L. (2009). Psychological distress, acculturation, and mental healthseeking attitudes among people of African descent in the United States: A preliminary investigation.

²⁵Michael K. Gusmano, "Undocumented Immigrants in the United States: U.S. Health Policy and Access to Care,

²⁶ Spigner, Clarence. "Race, health, and the African Diaspora." *International quarterly of community health education* 27, no. 2 (2007): 161-176.

Nigerian public health researcher Ezekiel Umo Ette analyzes the current research on U.S. immigration policy and the benefits and drawbacks of globalization in general in his 2012 book Nigerian Immigrants in the United States: Race, Identity, and Acculturation. The main questions addressed in chapter 3 of his book are why do countries like the United States easily allow immigrants become citizens compared to others, and does the research say anything about how well the immigrants adjust in their host country?²⁷ Ette looks at three main parts of immigration policy, namely the regulation of how many immigrants a host country accepts, the behavioral control of immigrants who come to and stay in the United States through laws, and the kind of aid is accessible for immigrants.²⁸ Using Marxist theory and ecological theory, he analyzes globalism in and immigration to countries like the United States.²⁹ Ette states that, through a Marxist lens, immigration and globalization are forms of exploiting poor people who are forced to migrate to another country for their labor. However, scholars do push back on this Marxist critique a little by bringing in an ecological point of view. Those scholars state that people immigrate due to things such as civil unrest, war, and the desire for safety, which can make globalization and immigration good things for immigrants. Ette has explored the different policies and reasons why governments of host countries accept or reject individuals who seek to immigrate to a new country. 30 Ette's analysis shows that destination countries accept immigrants based on their self-interests and the interests of those with power, rather than as favors to immigrants.

Ette's analysis shows clearly how and why immigration policy can be biased and benefit European immigrants, for instance, over Black immigrants. He also decries the lack of research on how certain groups of immigrants deal with being in a new country. Finally, he makes clear that

07

²⁷ Ette, 31

²⁸ Ette, 32

²⁹ Ette. 33

³⁰ Ette, 36

U.S. cultural norms can be detrimental to immigrants when they present obstacles in their paths to obtaining proper care and resources that may help them thrive in their new communities. Ette's take on globalization, however, falls short in one important area; he misses key opportunities to critique the lack of attention to and policies for Black immigrants' mental health issues. If there is a lack of aid and awareness around the issues that black immigrants face, then their health status and access to proper care will be poor.

Barriers to Immigrant Healthcare

Another pattern in the literature is the lack of knowledge and research on Black immigrant women and their mental health outcomes in general. Margaret Sullivan and Roberta Rehm's 2005 literature review, "Mental Health of Undocumented Mexican Immigrants," outlines the current knowledge of undocumented Mexican immigrants' psychological wellbeing. Sullivan and Rahn's criteria for the literature that they assessed were that it had to be peer-reviewed, published after 1980, focused on the documentation status of community-dwelling, adult, Mexican immigrants living in the United States who were not detained or under order of deportation, and specific to the disciplines of medicine, nursing, anthropology, public health/policy, and psychology. The study found that, overall, the limited research showed that undocumented Mexican immigrants' mental health status was affected by restricted mobility, marginalization/isolation, stigma/blame, guilt/shame, vulnerability/exploitability, fear, and fear-based behaviors, which leads to stress and mental health problems such depression. Ultimately, these scholars advocated for more research on the mental health status of undocumented Mexican

³¹ Vaughn, Bobby. "Mexico Negro: From the shadows of nationalist mestizaje to new possibilities in Afro-Mexican identity." The Journal of Pan African Studies 6, no. 1 (2013): 227

³² Sullivan, Margaret M., and Roberta Rehm. "Mental health of undocumented Mexican immigrants: a review of the literature." Advances in Nursing Science (2005)

³³ Sullivan, Margaret M., and Roberta Rehm. "Mental health of undocumented Mexican immigrants: a review of the literature." Advances in Nursing Science (2005)

immigrants, hoping that they might help clinicians and scholars in nursing better understand the mental health status, needs, and challenges of undocumented Mexican immigrants.³⁴ One of the major limitations of the literature is that they are not distinct and acknowledge how different ethnic groups of Mexicans experience different forms of discrimination and oppression, like Afro-Mexicans.

Knowledge and studies on mental health outcomes for Afro-Mexican women are scarce. Mier's 2008 study, *Health-Related quality of life among Mexican Americans living in colonias at the Texas-Mexico Border*, examines how the personal and the socio-environmental correlate to the health-related quality of life (HRQL) among Mexican Americans who live in colonias at the Texas-Mexico border. Those Mexican Americans are considered a vulnerable, hard-to-reach group. The proposed correlates of HRQL in this study include demographic and health factors. Researchers used an eight-item survey for residents living in the colonias to determine their health status. The results showed that Mexican Americans have an average mental health status similar to the average mental health status of other Americans in the United States. However, the study shows that the lack of access to mental healthcare was related to having a poor mental health status. The study survey did reveal that the physical health of Mexican Americans was worse compared to the average physical health of an American in the United States. *Intersectionality's Impact on Black Immigrant Women*

³⁴ Sullivan, Margaret M., and Roberta Rehm. "Mental health of undocumented Mexican immigrants: a review of the literature." Advances in Nursing Science (2005)

³⁵ Mier, Nelda, Marcia G. Ory, Dongling Zhan, Martha Conkling, Joseph R. Sharkey, and James N. Burdine. "Health-related quality of life among Mexican Americans living in colonias at the Texas–Mexico border." Social Science & Medicine (2008)

³⁶ Mier, Nelda, Marcia G. Ory, Dongling Zhan, Martha Conkling, Joseph R. Sharkey, and James N. Burdine. "Health-related quality of life among Mexican Americans living in colonias at the Texas–Mexico border." Social Science & Medicine (2008)

Existing scholarship provides context for apprehending how the overlapping oppressions of sexism, classism, racism, and nativism that Black immigrant women face can impact all aspects of those women's lives, including their mental health. Returning to Ette's 2012 book, *Nigerian Immigrants in the United States*, the author discusses the relationships between marriage, immigration status, and laws to show how these intersections can disproportionately affect immigrant Nigerian women and give their American spouse's more power over them.³⁷

Another point that Ette brings up is Black immigrant women in the United States married to military spouses who have returned to Nigeria to looking for a wife, and women who advertise themselves as "Mail Order brides." Mail order brides are women from different countries who marry American men. In most cases, they do not really know each other. The women agree to these arrangements so that they may come to America and become citizens. Immigrant Nigerian women are at a disadvantage in the United States because American spouses can use the threat of deportation against them, making it harder for immigrant women to become independent and support themselves. In those cases, the women must rely heavily on their American spouse for basic material support. For example, Grace, Hope, and Mercy, three women who Ette interviewed, came to the United States after marrying their Nigerian-American spouses. Immigration laws of the United States did not support them or really have their best interest in mind considering they were immigrants who had to rely on their husbands economically because they could not find work that provided good income.

Ette also discusses how white supremacy shapes immigrant Nigerian women's life experiences in the United States. He tells the story of Bea who discusses how she came to the

³⁷ Ette. 86

³⁸ Ette, 90

United States on a scholarship for a graduate program to do research. While Bea was in her graduate program, she first experienced segregation and racism both at school and in her everyday life. Bea came to realize that racism was a part of the black experience in America. Bea also stated that her immigration status, since she was first in the United States on a visa, made it difficult for her to find a job in academia. Bea's blackness and status as a non-citizen put her, and many others like her, at a disadvantage, making it harder to adjust in the United States. The stories of Bea, Grace, Hope, and Mercy all show that there need to be policies and programs set in place that protect vulnerable Black women immigrant populations who sit at the intersection of oppressed identities such as woman, wife, immigrant, non-citizen, and black. Though Ette does not delve into how social factors such as gender, marital status, immigration status, and educational background impact Nigerian immigrant women's mental health care, he does provide important social, cultural, and political context for understanding how intersecting oppressions render those women's lives constrained.

Culture Erasure

One of the main themes of the literature on Black immigrant women is how cultural erasure prevents them from being properly represented in policy and public discourse. Cultural erasure in this context means that there is no acknowledgment or distinction among the diverse cultures of black immigrants. This becomes clear when accounting for Nigerian and Afro-Mexican women.⁴¹ culture erasure essentially makes entire groups like Black immigrant women and their cultures

³⁹ Ette, 95

⁴⁰ Ette, 97

⁴¹ Obasi, E. M., & Leong, F. L. *Psychological distress, acculturation, and mental healthseeking attitudes among people of African descent in the United States: A preliminary investigation.* Journal of Counseling Psychology, (2009)

invisible. Being invisible to the public and erased means that Black immigrant women are not properly represented or actively considered when it comes to writing mental healthcare policies, it can impact the way that Black immigrant women are ultimately seen as patients in the United States by physicians who are treating them. It is important to acknowledge the distinctions between the diverse cultures that Black immigrant women come from because every black immigrant woman's experience of immigrating and adapting to the United States is not the same.⁴²

Public health researcher Ifeoma Ezobele uses the Husserlian approach to contribute more knowledge on how Nigerian immigrant women understand mental health and what treatment they do or do not actively try to seek out. The Husserlian approach is qualitative research method that is used to describe how human beings experience a certain event in order to explore and understand what that event means. Ezobele is concerned with what depression means to Nigerian immigrant women perceive depression, and what approaches doctors and mental healthcare providers have used to care for Nigerian-born immigrant women living in the United States with depression."⁴³ Nigerian immigrant women from a Nigerian community in Texas took part in a Forty to sixty minute interview conducted by the Principal investigator and answered, how they interpreted depression.⁴⁴ Ezobele's study results showed that, out of the nineteen participants, the overarching theme was that depression was not acceptable in the Nigerian community. The four main subthemes were that depression in the Nigerian community was considered incurable and untreatable;

⁴² Obasi, E. M., & Leong, F. L. *Psychological distress, acculturation, and mental healthseeking attitudes among people of African descent in the United States: A preliminary investigation.* Journal of Counseling Psychology, (2009)

⁴³ Ezeobele, I., A. Malecha, P. Landrum, and L. Symes. "Depression and Nigerian-born immigrant women in the United States: a phenomenological study." Journal of psychiatric and mental health nursing (2010)

Ezeobele, I., A. Malecha, P. Landrum, and L. Symes. "Depression and Nigerian-born immigrant women in the United States: a phenomenological study." Journal of psychiatric and mental health nursing (2010)

stigma affects the individual who has depression and their family's status in the community; religion and spirituality in the Nigeria Community is viewed as the primary treatment for depression; and more education on mental illness for Nigerians is needed to help the Nigerian community understand mental illnesses such as depression. ⁴⁵

Ezobele points out that many studies that were conducted on black immigrants, specifically African and Caribbean immigrants, lacked diversity. ⁴⁶ Past studies often grouped African and Caribbean immigrants together. ⁴⁷ This grouping proved problematic because it does not take into account the differences between African and Caribbean cultures, and it gives a false sense that Black immigrant experiences are monolithic. ⁴⁸ The problematic grouping of Black immigrants can also make it difficult for physicians and caretakers to fully understand Black immigrants as mental health patients due to the fact that they come from different cultures, which can impact how they understand mental health. ⁴⁹ Ezobele reveals how stigma about mental health, religion, and lack of knowledge about mental illnesses can become barriers that prevent Nigerian immigrant women from actively seeking mental health care. ⁵⁰ Cultural erasure elides such important specificities and thus impedes policy makers, providers, and public discourse from having more nuanced discussions about immigrant mental health and healthcare.

⁴⁵ Ezeobele, I., A. Malecha, P. Landrum, and L. Symes. "Depression and Nigerian-born immigrant women in the United States: a phenomenological study." Journal of psychiatric and mental health nursing (2010)

⁴⁶ Ezeobele, I., A. Malecha, P. Landrum, and L. Symes. "Depression and Nigerian-born immigrant women in the United States: a phenomenological study." Journal of psychiatric and mental health nursing (2010)

Ezeobele, I., A. Malecha, P. Landrum, and L. Symes. "Depression and Nigerian-born immigrant women in the United States: a phenomenological study."

⁴⁸ Ezeobele, I., A. Malecha, P. Landrum, and L. Symes. "Depression and Nigerian-born immigrant women in the United States: a phenomenological study."

⁴⁹ Ezeobele, Malecha, Landrum, and Symes.

⁵⁰ Ezeobele, Malecha, Landrum, and Symes.

Public/community health researchers Joyce O'Mahony and Tam Donnelly's 2007 scholarly article, "The Influence of Culture on Immigrant Women's Mental Health Care Experience From The Perspectives of Health Care Providers" shows that the health care provider-client relationship, is also very important and can be a barrier for black immigrant women due to the unfair power dynamic that is between physicians and Black immigrant women seeking mental health care. This is why it is critical that physician understand how they see Black immigrant women as mental health patients, not just Black immigrant women themselves. This would require physicians to actively work through their biases as well as fully understand the power and the issues that come with having a Western imperial mindset while treating Black immigrant women. Academic psychologist Augustine Nwoye also aims to broaden and extend the current Western frameworks for understanding and treating the psychological needs and challenges of transnational immigrants. Understanding how Black immigrant women interpret mental health care and how physicians and mental health care providers understand Black immigrant women as mental health patients.

Regarding Afro-Mexican women, scholars like anthropologist Bobby Vaughn argue that Afro-Mexicans have experienced culture erasure through having their blackness and place in the African Diaspora erased or minimized.⁵³ The term Afro-mestizo, according to Vaughn, was used during the late nineteenth century by white Mexican scholars in order to support the notion that

⁵¹ O'Mahony, Joyce Maureen, and Tam Truong Donnelly. "The influence of culture on immigrant women's mental health care experiences from the perspectives of health care providers." Issues in mental health nursing (2007)

⁵² O'Mahony, Joyce Maureen, and Tam Truong Donnelly. "The influence of culture on immigrant women's mental health care experiences from the perspectives of health care providers." Issues in mental health nursing (2007)

⁵³ Vaughn, Bobby. "Mexico Negro: From the shadows of nationalist mestizaje to new possibilities in Afro-Mexican identity." The Journal of Pan African Studies (2013)

Black Mexicans are a mixed race and therefore not completely black.⁵⁴ Such logic suggested Black Mexicans are not fully a part of the African Diaspora, which further pushes the ideology of a mestizo Mexico, meaning a mixed-race and ethnic Mexico. Vaughn gives a sociohistorical context on how the erasure of Afro-Mexicans and their African ancestry and black identity can be detrimental because it also makes the racial discrimination that they face invisible.⁵⁵ Yet, Vaughn could have gone more in-depth regarding how the erasure of Afro-Mexican's black identity affects them on a systemic level including how they experience racial discrimination which can impact them health-wise.⁵⁶ The erasure of Afro-Mexicans brings up questions such as how do Afro-Mexicans deal with racial discrimination if they do not even exist in public discourse? How does the erasure of Afro-Mexicans' blackness impact their mental health when they emigrate and try to adjust in the United States?

Relatedly, Congolese native and scholar Jean-Philibert N'Djoli's does go over the three main ways that Afro-Mexicans are essentially "invisibilized". ⁵⁷ N'Djoli's essay explains that Afro-Mexicans and their blackness are erased by incorrectly grouping them with indigenous people, despite the fact that Afro-Mexican and indigenous peoples are ethnically different. Afro-Mexicans experience discrimination differently, sometimes even more, than indigenous people. Mexico's

⁵⁴ Vaughn, Bobby. "Mexico Negro: From the shadows of nationalist mestizaje to new possibilities in Afro-Mexican identity." The Journal of Pan African Studies (2013)

⁵⁵ Vaughn, Bobby. "Mexico Negro: From the shadows of nationalist mestizaje to new possibilities in Afro-Mexican identity." The Journal of Pan African Studies (2013)

⁵⁶ Vaughn, Bobby. "Mexico Negro: From the shadows of nationalist mestizaje to new possibilities in Afro-Mexican identity." The Journal of Pan African Studies (2013)

⁵⁷ Jiménez Román, Miriam, and Juan Flores, eds. The Afro-Latin@ Reader: History and Culture in the United States. Durham, NC: Duke University Press, 2010.

rejection of ethnic difference, makes it harder to address the racial inequality that Afro-Mexicans face.⁵⁸

The effects of erasing Afro-Mexican's blackness can also be seen in Maria Jackson's "Profile of an Afro-Latina: Black Mexican, Both," an essay discussing Jackson's and her Black immigrant journey of understanding her identity and place in the United States as an African American Mexican woman. Jackson discusses her upbringing by her African American father and a Mexican mestiza mother. She tells readers how her father actively taught her about African American history and the major contributions that black people have made to civilizations; those lessons contradicted the stereotypical notion that black people contributed nothing and had no meaningful history. Jackson also discusses how her mother, a self-identified mestiza woman, equally made sure that Jackson and her siblings embraced their Mexican heritage. Being both Black and Mexican, Jackson experienced firsthand how her identity was questioned and viewed more like a "curiosity," and not really Black The author also talks about how the process of othering Afro-Latinas and Afro-Caribbean people essentially leave them questioning their blackness and where they "fit in." Jackson concludes that racial and ethnic labels can be tools

_

⁵⁸ Jiménez Román, Miriam, and Juan Flores, eds. The Afro-Latin@ Reader: History and Culture in the United States. Durham, NC: Duke University Press, 2010.

⁵⁹ Jiménez Román, Miriam, and Juan Flores, eds. The Afro-Latin@ Reader: History and Culture in the United States. Durham, NC: Duke University Press, 2010.

⁶⁰ Jiménez Román, Miriam, and Juan Flores, eds. The Afro-Latin@ Reader: History and Culture in the United States. Durham, NC: Duke University Press, 2010.

⁶¹ Jiménez Román, Miriam, and Juan Flores, eds. The Afro-Latin@ Reader: History and Culture in the United States. Durham, NC: Duke University Press, 2010.

⁶² Jiménez Román, Miriam, and Juan Flores, eds. The Afro-Latin@ Reader: History and Culture in the United States. Durham, NC: Duke University Press, 2010.

⁶³ Jiménez Román, Miriam, and Juan Flores, eds. The Afro-Latin@ Reader: History and Culture in the United States. Durham, NC: Duke University Press, 2010.

that either help or hurt social justice, and there needs to be more acknowledgment of the benefits of understanding the confluence and distinction between Latin American and Black cultures.⁶⁴

The rejection of Afro-Mexicans' blackness, even if with the intention of creating a multicultural national identity to bring more solidarity between the Mexican people, might have major effects on how Afro-Mexicans see themselves and their communities, how they interact with the broader society, and also their health. Racism and discrimination have major impacts because their purpose is to maintain white supremacy and anti-blackness. Mexico's mestizo culture might reject differences in favor of unity, but it does not erase the anti-blackness or the discrimination that Afro-Mexicans face in Mexico. This act of invisibilizing complex cultures and ethnicities, again, can also be applied to the discussion of black immigrant women's mental health. The lack of representation and research does not give them the opportunity to see themselves as mental health patients.

Conclusion

When healthcare professionals and policy makers learn more about Nigerian and Afro-Mexican immigrant women as unique and vulnerable populations of immigrants, they will be more likely to provide and improve programs and policies that assist them. Serious consideration of the multiple and overlapping structural inequities that harm Black immigrant women will help physicians, healthcare policy makers, and researchers understand how living in a white supremacist, patriarchal, classist, and xenophobic society can affect how Black immigrant women navigate the mental healthcare system. It also clarifies how they are seen as patients by healthcare

_

⁶⁴ Jiménez Román, Miriam, and Juan Flores, eds. The Afro-Latin@ Reader: History and Culture in the United States. Durham, NC: Duke University Press, 2010.

providers and policy makers and represents the diversity of Black immigrant women's voices. Therefore, my future research will provide more information about these women and analyze their experiences in the United States. Doing so will help health professionals and policymakers who are trying to develop preventive and medical services for underserved populations.

Bibliography

Primary Sources:

Handbook of Texas Online, Dennis R. Jones and Sheila Allee, "Texas Department Of Mental Health And Mental Retardation," accessed July 14, 2019, http://www.tshaonline.org/handbook/online/articles/mctvf.

Texas House of Representatives, House Research Organization, *Health Care for Undocumented Immigrants: Who Pays?*, Kelli Donges. 77, Edinburg, Texas: University of Texas Pan American, 2001.

Texas Senate Committee on Health and Human Services, *Interim Report to the* 84TH Legislature, Charles Schwertner, Bob Deuell, Joan Huffman, Jane Nelson, Robert Nichols, Larry Taylor, Carlos Uresti, Royce West, Judith Zaffirini. 78711, Austin, Texas: Texas Senate Committee on Health and Human Services, 2014.

Ette, Ezekiel Umo. 2012. Nigerian Immigrants in the United States: Race, Identity, and Acculturation. Lanham, Md: Lexington

Books. http://search.ebscohost.com/login.aspx?direct=true&db=nlebk&AN=405946&site=ehost-live.

Andrews, George Reid. *Afro-Latin America*, *1800-2000*. Cary: Oxford University Press, 2004. 2004. Accessed June 12, 2019. https://ursinuscollege.on.worldcat.org/oclc/1027523370.

Secondary Sources:

Escobar JI. Immigration and Mental Health: *Why Are Immigrants Better Off*? Arch Gen Psychiatry.1998;55(9):781–782. doi:10.1001/archpsyc.55.9.781

Ezeobele, I., A. Malecha, P. Landrum, and L. Symes. "Depression and Nigerian-born immigrant women in the United States: a phenomenological study." *Journal of psychiatric and mental health nursing* 17, no. 3 (2010): 193-201.

Ette, Ezekiel Umo. *Nigerian Immigrants in the United States : Race, Identity, and Acculturation*. Lanham, Md.: Lexington Books, 2012. 2012. Accessed June 18, 2019. https://ursinuscollege.on.worldcat.org/oclc/762689852

Ford, Chandra L., and Collins O. Airhihenbuwa. "The public health critical race methodology: praxis for antiracism research." *Social Science & Medicine* 71, no. 8 (2010): 1390-1398.

MOLINA, NATALIA. "Borders, Laborers, and Racialized Medicalization: Mexican Immigration and U.S. Public Health Practices in the Twentieth Century." In *Precarious Prescriptions: Contested Histories of Race and Health in North America*, edited by Green Laurie B., Mckiernan-González John, And Summers Martin, 167-84. University of Minnesota Press, 2014. http://www.jstor.org/stable/10.5749/j.ctt6wr7rq.11

Griswold Del Castillo, Richard, and Arnoldo De León. *North to Aztlán : A History of Mexican Americans in the United States*. Twayne's Immigrant Heritage of America Series. New York: Twayne Publishers, an Imprint of Simon & Schuster Macmillan, 1996.

Vila, Pablo. Crossing Borders, Reinforcing Borders: Social Categories, Metaphors, and Narrative Identities on the U.S.-Mexico Frontier. 1st ed. Inter-America Series. Austin: University of Texas Press, 2000. 2000. Accessed June 13, 2019. https://ursinuscollege.on.worldcat.org/oclc/70179581

Vaughn, Bobby. "Mexico Negro: From the shadows of nationalist mestizaje to new possibilities in Afro-Mexican identity." *The Journal of Pan African Studies* 6, no. 1 (2013): 227.

Michael K. Gusmano, "Undocumented Immigrants in the United States: U.S. Health Policy and Access to Care," Undocumented Patients web site (Garrison, NY: The Hastings Center), originally published: March 15, 2012. Available at http://undocumentedpatients.org/issuebrief/health-policy-and-access-to-care/

Jiménez Román, Miriam, and Juan Flores, eds. *The Afro-Latin@ Reader : History and Culture in the United States*. Durham, NC: Duke University Press, 2010.

Obasi, E. M., & Leong, F. L. (2009). Psychological distress, acculturation, and mental healthseeking attitudes among people of African descent in the United States: A preliminary investigation. Journal of Counseling Psychology, 56(2), 227-238. doi:10.1037/a0014865

Mier, Nelda, Marcia G. Ory, Dongling Zhan, Martha Conkling, Joseph R. Sharkey, and James N. Burdine. "Health-related quality of life among Mexican Americans living in colonias at the Texas–Mexico border." Social Science & Medicine 66, no. 8 (2008): 1760-1771.

New Freedom Commission on Mental Health. (2003). Achieving the promise: Transforming mental health care in America. Final promise. DHHS Pub. No. SMA-03-3832. Rockville, MD: Author.

Kamya, H. A. (1997). African immigrants in the United States: The challenge for research and practice. Social Work, 42(1), 154-165. doi:10.1093/sw/42.2.154

Oliver, M., Pearson, N., Coe, N., & Gunnell, D. (2005). Help-seeking behaviour in men and women with common mental health problems: Cross-sectional study. The British Journal of Psychiatry, 186(4), 297-301. doi:10.1192/bjp.186.4.297

O'Mahony, Joyce Maureen, and Tam Truong Donnelly. "The influence of culture on immigrant women's mental health care experiences from the perspectives of health care providers." Issues in mental health nursing 28, no. 5 (2007): 453-471.

Page, C. (2012, September 18). Black immigrants, an invisible 'model minority'. Retrieved from Real Clear Politics:

http://www.realclearpolitics.com/articles/2007/03/black_immigrants_an_invisible.html

Pfaff, J., Acres, J., & McKelvey, R. (2001). Training general practitioners to recognise and respond to psychological distress and suicidal ideation in young people. Medical Journal of Australia, 174(5), 222-226. Retrieved from https://www.mja.com.au/

Phinney, J. S. (1996). When we talk about American ethnic groups, what do we mean? Psychological Bulletin, 51, 918-927. doi:10.1037//0003-066X.51.9.918

Pumariega, A. J., Rothe, E., & Pumariega, J. B. (2005). Mental health of immigrants and refugees. Community Mental Health Journal, 41(5), 581-597. doi:10.1007/s10597-005-6363-1

Saechao, F., Sharrock, S., Reicherter, D., Livingston, J., Aylward, A., Whisnant, J., & ... Kohli, S. (2012). Stressors and barriers to using mental health services among diverse groups of first-generation immigrants to the United States. Community Mental Health Journal, 48(1), 98-106. doi:10.1007/s10597-011-9419-4

Sellers, S. L., Ward, E. C., & Pate, D. (2006). Dimensions of depression: A qualitative study of wellbeing among Black African immigrant women. Qualitative Social Work: Research and Practice, 5(1), 45-66. doi:10.1177/1473325006061538

Sullivan, Margaret M., and Roberta Rehm. "Mental health of undocumented Mexican immigrants: a review of the literature." Advances in Nursing Science 28, no. 3 (2005): 240-251.

Ting, L. (2010). Out of Africa: coping strategies of African immigrant women survivors of intimate partner violence. Health Care for Women International, 31(4), 345-364. doi:10.1080/07399330903348741

Umoren, U. E. (1990). Religion and traditional medicine: An anthropological case study of a Nigerian treatment of mental illness. Medical Anthropology, 12(4), 389-400. doi:10.1080/01459740.1990.9966033

Venters, H., & Gany, F. (2011). African immigrant health. Journal of Immigrant and Minority Health, 13(2), 333-344. doi:10.1007/s10903-009-9243-x

Venters, H., Adekugbe, O., Massaquoi, J., Nadeau, C., Saul, J., & Gany, F. (2011). Mental health concerns among African immigrants. Journal of Immigrant and Minority Health, 13(4), 795-797. doi:10.1007/s10903-010-9357-1

Wasem, R. E., & Ester, K. (2011). Temporary protected status: Current immigration policy and issues. Washington, DC: Congressional Research Service. Retrieved from www.fas.org/sgp/crs/homesec/RS20844.pdf

Whitley, R. K. (2006). Understanding immigrants' reluctance to use mental health services: A qualitative study from Montreal. Canadian Journal of Psychiatry, 51(4), 205-209. Retrieved from http://publications.cpa-apc.org/browse/sections/0

Zartaloudi, A., & Madianos, M. (2010). Mental health treatment fearfulness and help-seeking. Issues in Mental Health Nursing, 31(10), 662-669. doi:10.3109/01612840.2010.490929

Cohen, Jeffrey. 2004. The Culture of Migration in Southern Mexico. Austin: University of Texas

Menchaca, Martha. 2001. Recovering History, Constructing Race: The Indian, Black and White Roots of Mexican-Americans. Austin: University of Texas.

Kissam, Ed. 2003. Trends in the Ethnic Composition of the California Farm Labor Force. Memo to the Agricultural Worker Health Initiative Policy Advisory Group, July 1

Saucedo, G., M. Garcia, and F.V. Castro. 2008. "Socio-Economic and Health Conditions of an Afro-Mexican Rural Population in the State of Veracruz, Mexico, 2007." Callaloo no. 31 (1):147-162

Mulroy, Kevin. 1993. Freedom on the Border: The Seminole Maroons in Florida, the Indian Territory, Coahuila, and Texas. Lubbock, TX: Texas Tech University Press.

Hernández, Tanya Katerí. "Afro-Mexicans and the Chicano movement: The unknown story." (2004): 1537-1551.

Viruell-Fuentes, Edna A. "Beyond acculturation: immigration, discrimination, and health research among Mexicans in the United States." *Social science & medicine* 65, no. 7 (2007): 1524-1535.

Stepanikova, Irena. "Applying a status perspective to racial/ethnic misclassification: Implications for health." In *Advances in group processes*, pp. 159-183. Emerald Group Publishing Limited, 2010.

Martinez Jr, Cervando. "15 Psychiatric Care of Mexican Americans." *Culture, ethnicity, and mental illness* (1993): 431.

Fox, P., Burns, K., Popvich, J., & Ilg, M. (2001). Depression among immigrant Mexican women and Southeast Asian refugee women in the U.S. International Journal of Psychiatric Nursing Research, 7, 778–792