


The Matilda García Initiative: Latin American Research Scholars Exchange



Matilda García

The 20th Annual Research Conference
 A System of Care for Children's Mental Health: Expanding the Research Base
 Research & Training Center for Children's Mental Health • Department of Child & Family Studies,
 Louis de la Parte Florida Mental Health Institute • University of South Florida

Latinos/Hispanos: A Potential Explosion? or An Explosion of Potential! (In Spite of the "Walls")



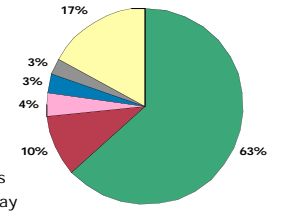
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March 5, 2007


Who Are We?

- We come in many shades and colors, from many places, speaking many variations of Spanish (and English), with much culture and history and are very heterogeneous
- 40% of Latinos today were born outside of the US!



■ Mexican	■ Puerto Rican	■ Cuban
■ Salvadoran	■ Dominican	■ From other parts


And How Many Of Us Are There?



- As of 2004 there were 41.3 million Latinos who constituted 14% of the US population (not including 3.9 million Puerto Ricans on the Island) almost double since 1990
- By 2030, there will be 73 million, 20.1% of the US population and by 2050, 102.6 million or 24% of the total US population
- By 2050, one third of all youth under 19 will be Latinos
- Latinos are the largest ethnic group in 19 states
- LOOK OUT! Here we come.....Arkansas (170%), Nevada (145%), N. Carolina (129%), Georgia (120%), Nebraska (108%), Tennessee (105%) (% growth in Latinos from 1990-2000)

The First Wall: *Immigration (Hysteria)*

- One in ten children in the US lives in a family in which at least one parent is a non-US citizen and one child is a US citizen (Commonwealth Fund, 2001)
- Two out of five of us are immigrants
- Latinos pay taxes like everyone else, even undocumented immigrants pay taxes!
 - ◆ The U.S. Social Security Administration has estimated that three quarters of undocumented immigrants pay payroll taxes, contributing \$6-7 billion in Social Security funds that they will be unable to claim (Porter 2005)
- "A Day Without a Mexican"



The Second Wall: *Disparities In Health Care*

- 32.7% of Latinos are uninsured (22% or 3 million children) compared to
- 11.3% for non-Hispanic Whites (7.4% of children) and
- 19.7% for African Americans (14.5% of children)
- 12.4% for Asian/Pacific Islander children
- 57% of non-US citizen Latinos lacked health insurance



Risk Factors For Being Uninsured



- Being Latino itself is not a risk factor, but...
 - ◆ Having a documented immigrant parent makes it twice as likely to be uninsured
 - ◆ Having parents who are not US citizens makes it six times as likely to be uninsured
 - ◆ Having two working parents makes it twice as likely to be uninsured
 - ◆ Having low family income is also a risk factor (Pediatrics, 2006)
 - 22% of Latinos live below the poverty level

Medicaid And SCHIP



- 74% of all uninsured children are eligible
- 9 out of 10 low income Latino families with uninsured children have heard of Medicaid, SCHIP or both, but are still not enrolled
- In the last few years, Medicaid enrollment growth slowed to 1.6%, the lowest since 1999
- In 2006, 35 states enacted positive enrollment and eligibility requirements, after having restricted them between 2000-2005...
 - ◆ Yet 35 states charge premiums or enrollment fees, and
 - ◆ 22 states charge co-payments (SCHIP)
- SCHIP is up for re-authorization in 2007!
(Kaiser Commission on Medicaid and the Uninsured, January 2007)

Then, Why Are So Many Latino Children Still Uninsured? *(The Hidden And Not So Hidden Walls)*



- The Hidden "Walls" that deter Latinos from enrolling—
 - *Language barriers-remember Title VI?*
 - *Administrative barriers (DRA 2005)*
 - *Lack, or drop in use, of 12 month continuous coverage and presumptive eligibility*
 - *"Immigration hysteria" and deportation fervor*
 - *Quality/cultural appropriateness of care-does it fit/work?*

The Third Wall: *Language Access And Availability*



- **Intoxicado**, the \$71 million word
- Title VI of 1964 Civil Rights Act mandates "competent" interpreters be provided
 - ◆ 31 million (out of 47 million who speak language other than English) of US residents age 5 and older speak Spanish at home
 - ◆ More than 1 in 10 US households speak Spanish
 - ◆ 53% increase in the number of Limited English Proficiency (LEP) Americans in last decade
 - ◆ There are only 29 Latino mental health professionals per 100,000 compared to 173 professionals per 100,000 for non-Latinos

The Fourth Wall: *The Criminalization Of Youth Of Color (Disproportionality)*



- The national juvenile justice custody rate for youth of color to that for Caucasians was 2.6 to 1 in 2003
- In 2003, for every 100,000, 348 Latino youth were in juvenile custody compared to 190 Caucasian youth
- In 2003, >59,000 youth of color were locked in juvenile facilities, 61% of total youth in custody, and 19% of them were Latino

Interestingly...



- Mexican Americans have a higher proportion of 2 parent families and lower divorce and separation rates compared to US born Caucasians
- Mexican immigrant women have better nutrient intake and their children have lower child mortality rates and higher birth weights than the children of US born mothers of Mexican descent

The Mental Health of Latinos



- Immigrants in general appear to have lower rates of mental disorders than their US born counterparts (50% less in some studies)
- Latinos who self-reported lesser ability to speak, read and write English showed a lower overall risk for mental disorders and a reduced risk for substance use
- Second and later generations of immigrants have a higher risk for mental disorders than their parents

(NSAL and NLAAS Studies in the American Journal of Public Health, 2007)

But, Second Generation And Beyond Is Another Story....



- 88% of US born Latino children/youth have unmet mental health needs, highest of all ethnic/racial groups, with...
- High rates of depression, anxiety-related disorders and rates of suicidal ideation and attempts among US born Latino, yet...
- Latino children and youth utilize mental health services at the lowest rates compared to all other ethnic/racial groups

These are the Real Behavioral Health Disparities

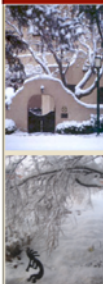
What Policies Should We Support To Bring Down The Walls/Barriers... To Unleash Our Potential?



- Immigration
 - ◆ An informed, socially just and comprehensive reform policy (not a Blind Purging Policy)
- Health Care Disparities (Insurance)
 - ◆ Comprehensive healthcare reform
 - ◆ Enrollment outreach, engagement, retention and barrier reduction for public insurance
 - ◆ Employer sponsored health insurance
- Language
 - ◆ Enforcement of Title VI, it's the law!
- Criminalization children and youth
 - ◆ Treat instead of incarcerate



Treating Latinos: A Clinician's Perspective on Issues of Research & Policy



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Should We Be Addressing Culture Rather than Ethnicity?




- Ethnic groupings more typical in studies examining "generic" Evidence-Based Treatment (EBT) for ethnic groups
- Differences between ethnic groups can be due to many other variables with which ethnicity has been confounded (Kazdin et al., 1995)
- "Generic" EBT superiority over Usual Care (UR) not reduced by inclusion of minority youth (Weisz et al., 2006)

Should We Be Addressing Culture Rather than Ethnicity?




- Representative numbers of ethnic minorities in efficacy studies not a solution (Miranda et al., 2003)
- Evidence-Based Treatments (EBTs) likely optimized by developing culturally specific treatment variations (Shirk, 2005)
- Studies of cultural adaptation of EBTs focus on "culture" rather than "ethnicity"

To Adapt "Generic" EBTs or Not to Adapt?



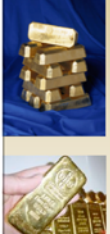
- Little empirical evidence for superiority of adapted treatments (Kazdin, 1993)
- "Adaptation of treatments" loosely used (Hwang, 2006)
- Need to include better and multiple measures of culture
- Need to develop more stringent and uniform criteria for what "culturally adapted" means in research
- Need to consider developing treatments within a cultural group

To Adapt "Generic" EBTs or Not to Adapt?



- Can there be a balance between treatment fidelity and adaptation?
- Examples of culturally adapted EBTs
 - ◆ GANA version of PCIT (McCabe et al., 2005)
 - ◆ Racial Socialization in Parent Training with African American Families (Coard et al., 2004)
 - ◆ Chinese Taoist cognitive therapy for Chinese clients with anxiety disorder (Zhang et al., 2002)

Is the Current Approach to the Study of Efficacy "The Gold Standard" for Establishing EBTs?



- The efficacy study is the wrong method (Seligman, 1995); it omits too many crucial elements of what is done in the field
- Random Clinical Trials (RCTs) de-emphasize processual aspects of therapy (Elliott, 1998)
- EBTs focus on average response of patients (Nagayama Hall, 2001)
- Remember Dr. Cook's comment that EBT is based on efficacy studies, not effectiveness studies.

Are We Moving Too Quickly?



- Wait a minute I thought we were still at efficacy? How did we get to effectiveness so quick?
- Is Empiricism the Only Answer?
 - ◆ Empiricism itself is culturally constituted
 - ◆ EBT becoming an ideological and economic monopoly (Slife et al. 2005); need for methodological pluralism
 - ◆ Concerns about the dogmatism of an exclusive ideology (Bernal & Scharrón-del-Río, 2003); need for discovery-oriented research

Are We Moving Too Quickly?



- Creating an imperialist fallacy (Ford & Urban, 1998), insisting others adopt a belief or model
- Physical concepts are free creations of the human mind not uniquely determined by the external world (Einstein & Infeld, 1938)
- Expanding what we consider evidence, or viewing the world from other epistemologies
- Practice-based evidence (Friedman, 2005)



Do We Really Know What We Think We Know?



EBT, Culture, and Arbitrary Metrics

- ◆ What is an arbitrary metric? (Blanton & Jaccard, 2006)
- ◆ Research designed to establish empirical underpinnings of psychotherapy relies on arbitrary metrics (Kazdin, 2006)
- ◆ Need for real-world referents
- ◆ Implications of arbitrary metrics to culturally responsive therapy

Do Politics, Power, and Privilege Play a Role in the Scientific Study of Treatment Outcome ?



- “Generic” EBTs are actually culturally based, usually on the dominant society
- Meta-analytic studies are not immune from unintentional biases
- Every treatment has an underlying, culturally constituted epistemology
- Exportation of EBTs another form of cultural imperialism (Bernal & Scharrón-del-Río, 2003)

Preserving Diversity in Our Research: Extricating Research from the Enticements of Transnational Capitalism

Transnational Capitalism



- Core Value: “The Western way is the good way; national culture is inferior” (from Holly Sklar, editor of *Trilateralism: The Trilateral Commission and Elite Planning for World Management*)
- Goal: “One world of homogeneous consumption...[I am] looking forward to the day when Arabs and Americans, Latinos, and Scandinavians, will be munching Ritz crackers as enthusiastically as they already drink Coke or brush their teeth with Colgate.” (from the President of Nabisco Corporation as cited by Jerry Mander, author of *In the Absence of the Sacred*)