

# Preface

We are at the crossroads in Latino mental health. The future well-being of our nation rests in our ability to promote the mental and physical health in this population. In many ways, the task before us is daunting, yet history reminds us of the endless possibility of human ingenuity to use the tools at hand and realize the most seemingly impossible goals.

As scholars, practitioners, and policymakers, we can foresee a world with ample facilities, resources, and personnel—key aspects of infrastructure—to provide effective mental health services. Moreover, within that world, we can envision service access regardless of ancestry, citizenship status, language preference, or cultural belief. However, to reach our destination, we need to know where we are, where we want to go, and what obstacles we can anticipate along the way. The scholarly advances of our disciplines, the shifting demographic landscape, public policies, and the like guide us. Taking stock of where we are, we recognize that there is a growing literature on culturally responsive interventions, but a dearth of scholarship on ways to connect these interventions to our existing service systems. In many cases, we must chart new courses and build new infrastructures to deliver these interventions. In the chapters that follow, this book shows how an interdisciplinary group of scholars used their expertise to document where we are, propose future pathways, and illuminate potential obstacles along the way.

Throughout the book, one overarching theme emerged: Achieving a service structure that meets the mental health needs of Latinos will entail a radical change in the status quo. Without a concerted and coordinated effort to change our course, we can foresee a nation in which its largest ethnic minority—expected to comprise nearly a quarter of the future workforce—is unnecessarily hampered by mental health morbidity.

To reach our destination, we must navigate complex and uncertain terrain, recognizing the need to take stock of our surroundings by surveying interdisciplinary perspectives to move the mental health field forward. As co-editors from two different disciplines (psychology and social work), we sought to bring together authors from a wide range of disciplines, writing from diverse geographic locations, and reflecting insights from established and new scholars. In the process, we felt challenged by the constraints of disciplinary perspective and discourse. For many of

our authors, the writing process necessitated many revisions, but was punctuated by the exhilaration of thinking of their work in new, innovative ways. Thus, the final products are pioneering, and we look forward to our readers benefiting from the authors' insights.

We have grouped 14 chapters into four parts. The first part contains three chapters that provide an overview of the forces shaping service provision and the implications of those forces. In the first chapter, Andrade and Viruell-Fuentes offer a window into the future: How the current demographic trends drive the ongoing population transformation and ultimately affect service provision. Their analysis includes a discussion of panethnic labels, which serve a methodical purpose but often mask the diversity of the population. By delineating the diversity within the Latino population and then contrasting broad population trends with those of non-Latino Whites, they build an argument for the development of infrastructures aimed at specific dimensions of structural inequality, such as education, income, access to health insurance, immigrant status, and English language proficiency. Andrade and Viruell-Fuentes argue that federal, state, and local governments have a role in infrastructure development, and contend that there is a great need for infrastructures built at the local level attuned to the specific needs of those communities.

In Chap. 2, Perez draws a similar conclusion about the role of government in addressing acculturation issues. In her discussion of acculturation and assimilation, Perez underscores the range of contextual and individual-level factors that interact in ways unique to each immigrant. She argues that because the contemporary sociopolitical context complicates Latino immigrants' incorporation into US life, their nuanced realities challenge contemporary notions of service provision and institutional arrangements. Simply put, a "one-size-fits-all" approach to mental health services is inadequate for Latino immigrants. Moreover, Perez argues that because the federal government regulates immigration policy, it must direct attention to the full incorporation of immigrants within its borders, seriously consider its role in protecting them, and regulate the admission of new immigrants and refugees. The current approach leaves much to the individual immigrants and the local communities in which they reside. Neglect fuels community tensions, marginalizes immigrants, and ultimately affects Latinos' mental health and well-being.

In Chap. 3, Piedra, Andrade, and Larrison point to a confluence of factors that undermine linguistically accessible services. The increasing number of people who need these services and the lack of a bilingual workforce contribute to the problem. Shifting settlement patterns into nontraditional immigrant communities further compound the situation. In this context, the authors argue for staff- and agency-level solutions that improve the quality of interpretation and enhance its effect on the professional relationship between provider and client. Consistent with the arguments advanced by Andrade and Viruell-Fuentes (Chap. 1), and Perez (Chap. 2), the authors conclude that solutions for building infrastructure must be multifaceted, responsive to current demographic trends, reflect sound social policy, and be grounded within the institutional, cultural, and social context of the existing mental health and health care delivery system. Even so, the authors in this first part of the book

unanimously indicate that infrastructure building must extend beyond the borders of the mental health and health care sectors, a theme more fully explored in Part 2.

In the second part of the book, four chapters discuss the need for organizational change and for infrastructure-building across service sectors. In Chap. 4, Acevedo-Polakovich, Crider, Kassab, and Gerhart present a conceptual model for enhancing the availability, accessibility, and utilization of mental health services for Latinos by focusing on organizational cultural competence—the compatibility between service environments and local conceptions of behavioral health. According to their model, service disparities arise from a fundamental incompatibility in how service providers and ethnic-minority communities conceive of behavioral health and useful interventions. Because existing interventions reflect the conceptualization of service providers, the authors argue that reducing service disparities requires organizations to align their interventions with how local communities understand behavioral health. The authors argue that without organizational change to bridge this gap, efforts to develop a culturally competent workforce and implement culturally competent practices will be undermined.

In Chap. 5, Delgado-Romero, Espino, Werther, and González tackle the challenge of building infrastructure through training and interdisciplinary collaboration. They draw attention to structural issues present in mental health training and the specific challenges related to training a bilingual and bicultural workforce. By highlighting exemplary bilingual and bicultural mental health training programs, the authors illustrate the need to create an infrastructure that promotes interdisciplinary collaborations and that makes use of untapped resources such as students, faculty, and staff at Hispanic-serving institutions; international Latino mental health workers; and non-Latino mental health workers.

In Chap. 6, Piedra, Schiffner, and Reynaga-Abiko tackle the factors that contribute to a leaky educational pipeline. They reason that in a technologically advanced society such as the United States, access to higher education is arguably the *sine qua non* for a high quality of life, and therefore is a cornerstone of Latino mental health. The authors posit that because so many current and future Latino college students are the first in their families to attend college, increasing the number of college graduates among Latinos entails prioritizing the academic and psychological needs of first-generation college students. They propose three foundational strategies to facilitate recruitment, retention, and successful degree completion for this population, such as engaging multiple levels of government and creating institutionally based programs that meet both the instrumental and psychological needs of first-generation college students.

In Chap. 7, Abbott offers another important cornerstone of a culturally and linguistically responsive infrastructure: university–community partnerships that create opportunities for university Spanish students to act as brokers, navigators, and advocates for Latinos with limited English proficiency. First, Abbott calls attention to the fact that the rapid increase of Spanish speakers in the United States has created parallel shifts in human service infrastructure needs and the curricular design of university Spanish studies. In this context of heightened need, Spanish community service learning (CSL) holds much promise by taking students out of the

classroom and placing them in the community. Abbott shows how students with language skills but no mental health background can still play an important, supportive role to direct service providers. Because language barriers complicate even the most mundane tasks, in the absence of these Spanish CSL students, many of the tasks would fall to an overburdened service provider or completely through the cracks. Thus, these Spanish CSL programs can help reduce mental health disparities among Spanish speakers.

In the third part of the book, four chapters highlight priority contexts for infrastructure development. Although it would be impossible to address the needs of all the especially vulnerable Latino populations, the chapters reflect a synergy of research, practice, and policy to promote greater social inclusion and social justice for populations easily overlooked.

In Chap. 8, Barrio, Hernández, and Barragán discuss how many Latino families compensate for service disparities by providing essential care to family members diagnosed with serious mental disorders. Because these families represent a critical and often unrecognized resource in the care of Latinos living with mental illness, the authors argue that engaging and supporting family caregivers must be a central component of any mental health infrastructure for Latinos. Toward this end, the authors examine the sociocultural issues that program managers and practitioners need to consider in supporting these families. Drawing from the research and practice literature, as well as from their own experiences as scientists and practitioners, Barrio, Hernández, and Barragán discuss the need for family involvement in services during the early stages of illness and promising theory-based psychoeducational programs known to help Latino families. The authors make a compelling argument that, given the strong role played by families in the care of Latinos with serious mental disorders, existing billing mechanisms that fail to reimburse family services actually harm Latinos. Therefore, they conclude that if we are to build a mental health services infrastructure that effectively meets the needs of Latinos, service reimbursement requires further consideration.

Weemhoff and Villarruel also draw from their research and practice experiences to tackle the plight of youth in the juvenile justice system. They provide evidence that Latino youth are disproportionately represented at each of the critical intervention points in the system, which eventually results in them suffering harsher treatment for the same offenses than non-Latino White youth. They explore ways in which trauma and mental health issues contribute to Latino youths' overrepresentation, and argue that court decisions must hinge upon early identification of mental health needs through culturally appropriate screening and assessment. Further, they contend that courts must rely on evidence-based diversion programs, and that the multiple needs of youth require a coordinated plan to ensure that they are referred to services relevant to their needs.

In Chap. 10, Aldarondo and Becker broach a topic we seldom hear about: the well-being of thousands of minors who immigrate to the United States without a legal guardian. Putting their lives at risk, these children leave their home countries to escape poverty, abuse, and exploitation, or to join relatives in the United States, among other reasons. The authors place this phenomenon in a global context, and

point to the ways in which immigration policies and the journey to the United States itself affect these young migrants' health and well-being. To meet the needs of these youth, they discuss an ongoing, innovative academic–community partnership that promotes youths' rights and well-being. Through the partnership's efforts, the service infrastructure has been enhanced by strengthening local detention facilities' ability to serve these youth in an equitable manner.

In Chap. 11, Cristancho, Garcés, and Peters draw from their community-based research in the Upper Midwest in their discussion of ways to enhance access to mental health services for Latinos in rural areas. The authors point to the clash of cultures that occurs as newly arrived immigrants in rural areas encounter a service infrastructure ill prepared to serve their needs. Based on a multisite study involving several rural communities, Cristancho, Garcés, and Peters present data showing that mental health issues are quite prevalent in rural communities, and illustrate ways in which existing community resources can be mobilized to enhance service capacity while empowering community members to become active agents of change. The authors argue that to be effective, programs must emerge from an empirical approach based on assessment, planned action, implementation, evaluation, and dissemination; moreover, these programs must be easily accessible, offered through several sites, and be responsive to the social and environmental challenges facing the rural Latino population.

The fourth and last part of the book comprises three chapters that reflect on service opportunities in Latino mental health. These chapters illustrate the various forms and models through which effective practice can enhance the mental health of Latino populations.

In Chap. 12, Mayfield and Buki argue that with the expected increase in the number of Latinas in the United States, more women will be diagnosed with breast cancer. Yet, despite evidence that Latinas with breast cancer experience physical and mental health disparities, we are ill prepared to serve the support needs of this population. As an illustration, the authors use a comprehensive service model from a community-based organization dedicated to enhancing the mental health and well-being of Latinas with breast cancer. Mayfield and Buki argue that for such programs to be optimally effective, services must be provided by bilingual staff well versed in women's cultural backgrounds, and must provide not only mental health services, but also support in accessing health care and successfully navigating the complicated US health care system.

In Chap. 13, Morales reflects on another health disparity: The disproportionate number of Latinos diagnosed with HIV/AIDS, particularly gay and bisexual men, and men who have sex with men. He contends that with the greater attention currently paid to behavioral aspects of prevention, advocacy is needed to increase the resources devoted to this area. Moreover, given the challenges in reaching this population, he argues that one way to enhance infrastructure is through social capital development. Morales provides an overview of ways in which social capital may be harnessed, and illustrates these strategies through the work of two community-based programs in which he has been actively involved.

Comas-Díaz closes the part with Chap. 14, in which she discusses lessons she has learned from her “niche” group private practice with Latino clients. Her writing will inspire those who aspire to develop such a niche as practitioners. The chapter begins with Comas-Díaz’s personal reflections on how to build a group private practice with Latino clients and how she came to develop that practice. In particular, she shares how she increased her visibility in the Latino community and the profession at large, and ways in which she conceptualizes her work with Latinos. She closes her brief reflection with a series of concrete and aspirational suggestions for building a successful private practice.

The book concludes with an epilogue by Toro, who invites us to consider that politics and mental health are inextricably related. She begins by reviewing various efforts to promote mental health at the policy level, pointing out ways in which recent health care and immigration legislation may affect our ability to provide adequate mental health services for Latino populations. She contends that as a society, we have a responsibility to ensure that health care, and specifically mental health, does not become an item of choice for those who need services but cannot afford them. Thus, she urges us to become politically involved and advocate for the types of policies that will foster greater infrastructure development.

We are delighted to present this book to you, and do so with the hope and expectation that it will inspire you to envision and forge new, fruitful paths in your quest to promote mental health among Latinos.

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