



Prevalence of Mental Illness Among Latino Youth

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1 Abstract

Mental illness is a marginalized area of public health, particularly for Latino youth ages 10-18. A unique combination of socioeconomic and cultural factors contribute to why Latino youth experience a higher prevalence of mental illness such as depression, anxiety, and bipolar disorder when compared to other ethnicities of the same age group. These factors include cultural stigma and lack of education. The literature revealed that minorities (such as Latinos) experience higher levels of mental illness and mental health related stigma than other ethnic groups. A survey regarding mental health prevalence and stigma was distributed among various ethnic groups in Reno, NV. Out of 100 responses, the data indicates that Latino youth ages 10-18 report a high level of mental illness and a low level of treatment seeking behavior. Interviews with various community members including social networks and healthcare professionals supports the survey data.

2 Introduction

1 in 5 individuals in the U.S. are affected by mental illness. Moreover, 1 in 4 Latino high school students are affected by mental illness. Mental illness is a condition that affects a person's thinking, feeling or mood that may affect someone's ability to relate to others. Thus, several factors contribute to an individual's mental health. Several components are particularly unique to the Latino youth population between the ages of 10-18. Socioeconomic and cultural factors that affect this population include but are not limited to religion, access to healthcare, and stigmas among social networks. We hypothesized that if we compare the level of mental illness in Latino youth ages 10-18 to youth of other ethnicities of the same age, the prevalence of mental illness will be higher in the Latino youth population. The literature and data obtained from individuals living in Northern Nevada confirmed our alternative hypothesis.

3 Methods

Literature Review: finding 30+ peer-reviewed articles and synthesizing their implications

Photovoice: exploring the community to capture the mental health disparities among Latino youth.

Interviews: working with friends, family, neighbors, researchers, and health professionals to gain insight on the problem

Survey: administering to 100 community members to gain foundational quantitative data.

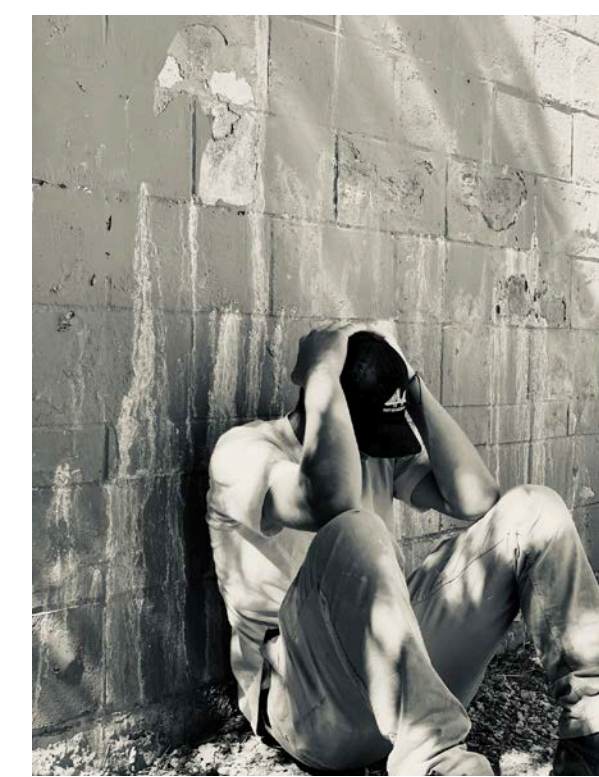
Poster: designing a visual display to effectively communicate our results

Dissemination: delivering significant, relevant content to our community to reduce the stigma and increase education surround mental health and our Latino youth.



4 Results

Photovoice



Latinos are not weak, they are not crazy. They need loved ones to understand them.



Victims feel they are screaming for help and no one is listening. It leaves them feeling helpless.



Many Latino youth feel isolated and cannot bare to face their problems alone.

Interviews

Lack of Education

"I don't know much about it (mental health), we've never had that conversation."

"I want to educate my parents on mental illness but I don't fully understand it."

"School only teaches us about diet and exercise, I have never heard of mental health."



Cultural Stigma

"Mental health is just all fake and is a way to get attention."

"Social media contributes to the stigma. 12-year-olds talk about how they are depressed as if it's cute."

"My parents told me I was crazy, and that I needed to go outside and do something."

Survey

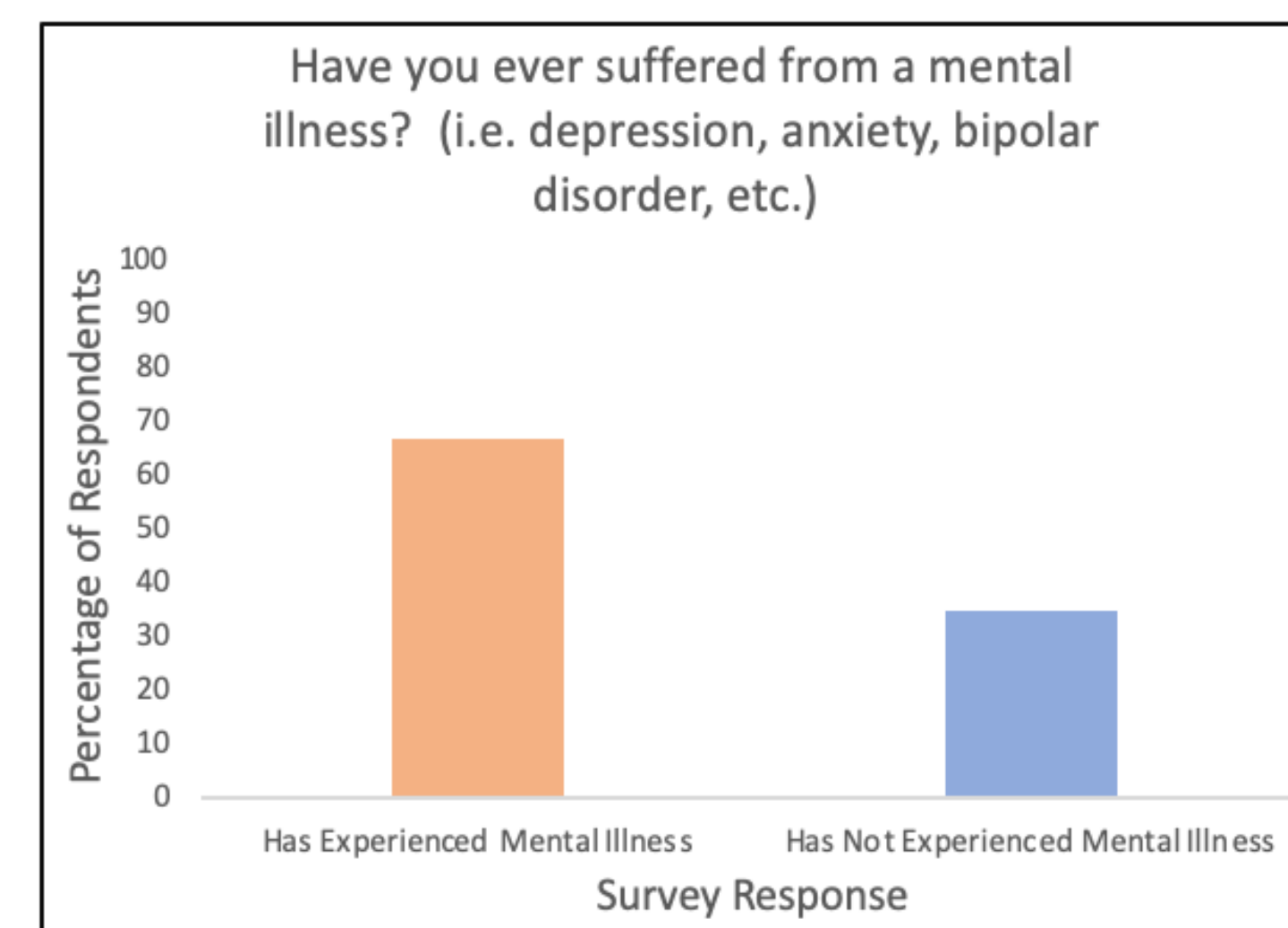


Figure 1. This graph shows that of our 100 survey participants, 66% reported that they had experienced a form of mental illness.

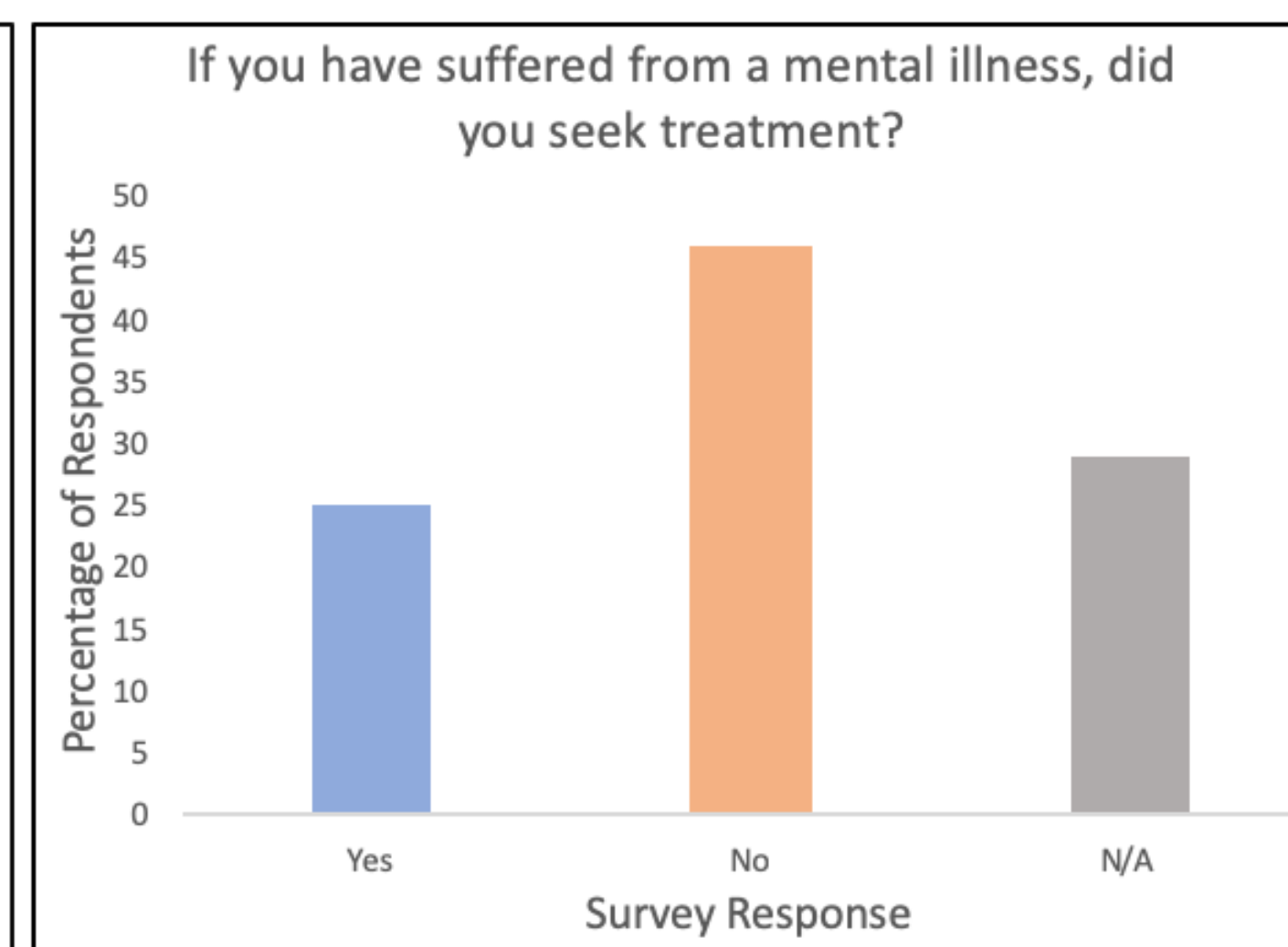


Figure 2. Of the 100 survey participants, 45% reported that they believed they had a mental illness but did not seek treatment.

5 Solutions and Future Directions

Problems

- Cultural Stigma
- Lack of Mental Health Education
- Unattended Mental Illnesses

Solutions

- Increase mental health programming and exposure to Latino youth in schools, churches, and community events (e.i. CBESS)

- More bilingual health care providers increase diversity in healthcare



- Connecting and conducting mandatory annual mental health checkups at schools in marginalized communities.

Future Directions

- Longitudinal and experimental studies are necessary to assess the effectiveness of alternative mental health approaches in Northern Nevada.
- Financial accessibility for both the target population and for the organizations creating programs and training (schools, churches, etc.)

6 Conclusion

Addressing the cultural stigma and the lack of education surrounding the mental health of Latino youth is paramount to their long-term health outcomes. Solutions to this mental health disparity have proven to be successful in some populations, however these solutions have yet to be implemented thoroughly in Northern Nevada. A change in community culture is necessary to influence the leaders of our government, hospital, and educational system to address these issues with fiscal and legislative support. By introducing community-wide mental health programming, more bilingual health professionals, and mandatory annual mental health check ups and services, an increase in mental health education and a decrease in stigma should occur. It is imperative that these implementations are supplemented by epidemiological surveillance to discover pertinent risk factors for the most severely affected communities and to monitor the effectiveness of the various mental health advocacy, evaluation, and treatment efforts.

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