

Addressing the mental health of the Latino/Hispanic community and its correlation to HIV care outcomes

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Learning Objectives

At the conclusion of this activity, participants will be able to:

1. Recognize the risks/factors impacting the mental health of the Latino/Hispanic community
2. Identify and analyze the correlation between mental health and HIV care outcomes among the Latino/Hispanic community
3. Consider and discuss various effective strategies/interventions to address the mental health concerns of the Latino/Hispanic community

Current Trends

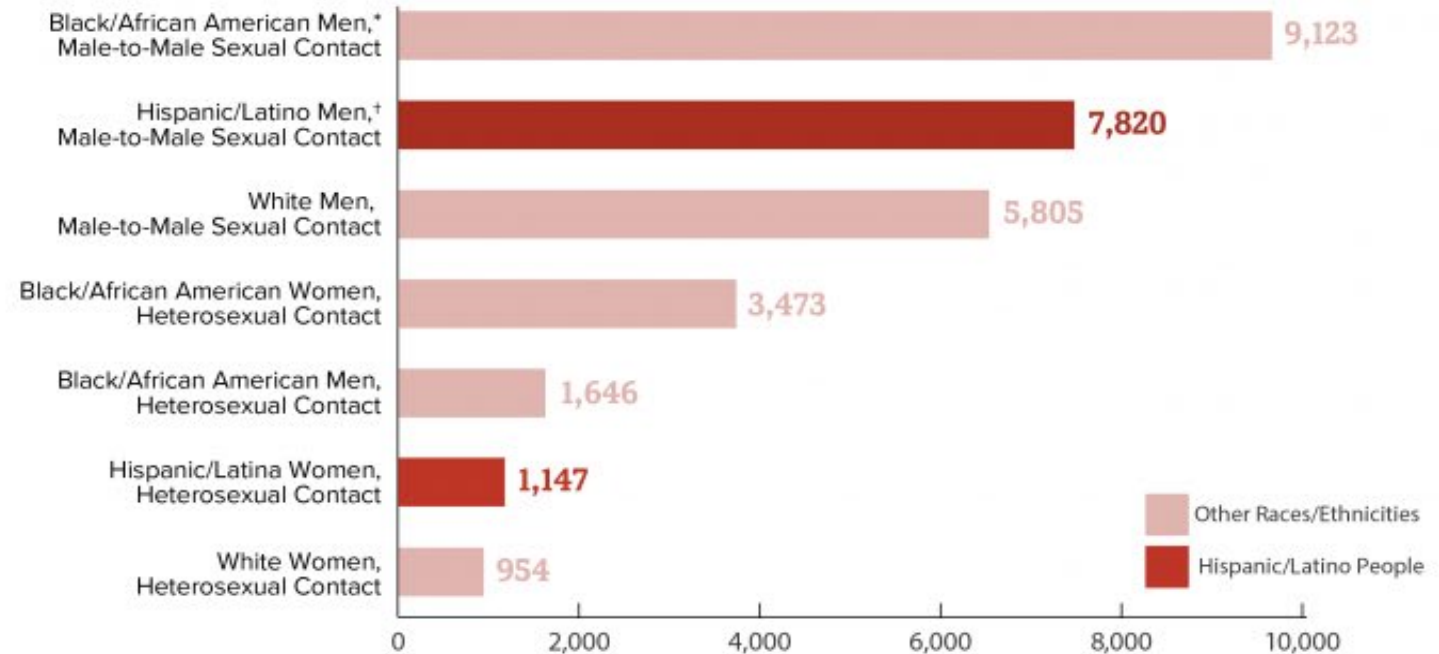
- Recent CENSUS data shows that Latino/Hispanics make up about 60 million of the entire USA population (about 18%)
 - Projected to double by 2060
- The highest concentrations of Latino/Hispanic is found in California, Florida, New York and Puerto Rico
- Lowest concentration in the Midwest



(CENSUS data, Guilamo-Ramos et al., 2020)

New HIV Diagnoses in the US and Dependent Areas for the Most-Affected Subpopulations, 2019

HIV disproportionately affects Hispanic/Latino communities.



NOTE: Subpopulations representing 2% or less of all people who received an HIV diagnosis in 2019 are not represented in this chart.

* *Black* refers to people having origins in any of the Black racial groups of Africa. *African American* is a term often used for people of African descent with ancestry in North America.

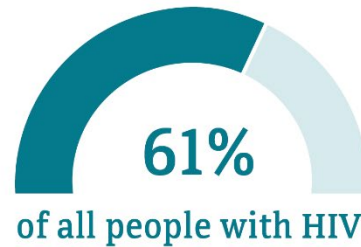
† Hispanic/Latino people can be of any race.

Source: CDC. Diagnoses of HIV infection in the United States and dependent areas, 2019. *HIV Surveillance Report* 2021;32.

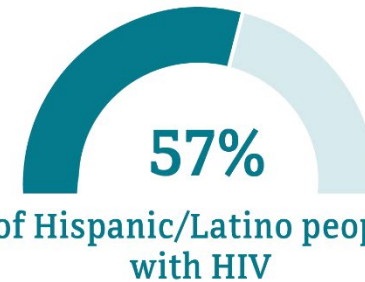
HIV Trends Among the Latino/Hispanic Populations



Of the **36,801 NEW HIV DIAGNOSES** in the US and dependent areas in 2019, 29% (10,494) were among Hispanic/Latino people.



of all people with HIV



of Hispanic/Latino people with HIV

took all their doses of HIV medicine over the last 30 days

Source: CDC

Some HIV Trends within the Latino/Hispanic Population

- There have been declines of HIV diagnoses among heterosexual Latinas and young Latino/Hispanic ages 13-24 (CDC, 2020)
- 3 groups most affected by HIV
 - MSM (men who have sex with men)
 - Transgender Females
 - Recent Immigrants
- California, Texas, Florida and Puerto Rico accounted for 2/3's of new HIV diagnoses in 2016

Sources: (CDC data 2020; Guilamo-Ramos et al., 2020)

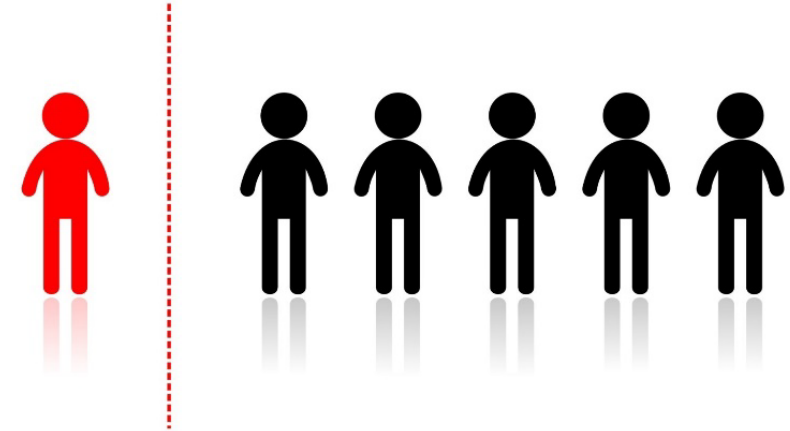
Some HIV Trends within the Latino/Hispanic Population (cont.)

- MSMs account for 80% of estimated HIV incidence among Latinos/Hispanics
 - Particularly high for ages 25-34
- 1 out of 4 Transgender Latinas is living with HIV
- Those born outside of the continental USA account for at least 1 in 3 new HIV diagnoses (2017)
 - Majority acquired HIV **after** migrating to USA

Sources: (CDC data 2020; Guilamo-Ramos et al., 2020; Poon et al., 2013; Cesar et al., 2016)

Unique challenges impacting HIV care outcomes among the Hispanic/Latino population

- Healthcare access/lack of insurance
- Fear/stigma
- Homophobia within community
- Immigration status
- Cultural Differences
- Health Literacy
- Knowledge/Education Gaps
- Racism/Discrimination
- Lack of culturally-appropriate services
- Other?



Sources: (Guilamo-Ramos et al., 2020; Calvo, 2016; Lee et al., 2019; Galvan et al., 2017; Henny et al., 2017)

Mental Health Risk Factors



Mental Health Trends Among Latinos/Hispanics

- In 2019, 8.9 million Hispanic adults (over age 18) had a mental illness and/or substance use disorder
 - An 3.7% increase from 2018
- For Hispanics over age 12, marijuana is the most used illicit drug as of 2019
 - Consider the legality in some states

Source: 2019 National Survey On Drug Use And Health: Hispanics, Latino Or Spanish Origin Or Descent

Risk Factors Impacting Mental Health within the Latino/Hispanic Community

- Language Barriers
- Cultural Beliefs
- Discrimination
- Access to appropriate care/Lack of health insurance
- Low educational attainments
- Financial instability
- Undocumented status
- Taboos around Mental Health
- Degree of Acculturation
- “Machismo” Culture/Beliefs
- Other?



Sources: Duffer, 2018; Walter & Valenzuela, 2020; Leung at al., 2014; Lomabana, 2021; Alfaro & Bui, 2018)

How Mental Health and HIV are correlated

- Undiagnosed and/or untreated mental health conditions can impact HIV care outcomes
 - Inability to take ARVs as prescribed or to take consistently
 - Stigma
 - Poor judgment/impairment
 - Poor self-esteem/self-worth
 - Thoughts of self-harm/suicide



Source: Guilamo-Ramos et al., 2020

Effective Strategies/Interventions to Address Mental Health Concerns for the Latino/Hispanic Community

Effective Strategies to Consider

- Culturally-appropriate Services
 - Latino/Hispanic individuals are more likely to engage in mental health services if these are accessible in their preferred language AND include culturally relevant elements (Lombana)
 - “illegal” vs. “undocumented” (Duffer)
 - Avoid stereotypes/Misconceptions



Sources: Lombana, 2021; Duffer, 2018; Alfaro & Bui, 2018

Effective Strategies to Consider

- Incorporating Spirituality into Practice
 - Recognizing culturally-specific illness manifestation and/or folk treatments
 - Utilizing religion or spirituality as a tool for growth



Sources: Lombana, 2021

Effective Strategies to Consider

- Trauma Therapy/Trauma-Informed Therapy
 - Childhood trauma
 - Consider migration journeys
- Group Therapy/Peer-Led Group Discussion
 - Takes into consideration the collective nature of the community

Sources: Lombana, 2021

Effective Strategies to Consider

- Specific interventions
 - Liberation psychology
 - *Testimonio*
 - Family Constellation Therapy (FCT)
 - Group Cognitive-Behavioral Therapy



Sources: Lombana, 2021; Aguilera et al., 2010

Case 2

Maria is a 47y/o Salvadorean female; she only speaks Spanish and is illiterate; she migrated to the USA 7 years ago; she reports escaping the violence in her home country. Feels ashamed of being HIV+, never been undetectable. Identified praying as her only coping mechanism

- Medical provider and case manager allow extra time to educate her and provide an avenue for her express her feelings without judgment
- Maria has agreed to engage in mental health therapy
- Maria is encouraged to continue using her religion as a method of self-reflection and coping

Case 1

Pablo is 32 y/o, originally from Mexico; reports being physically abused as a child and ran away from home at age 15 to live with his aunt in Texas; his last relationship ended after he beat his partner while intoxicated on alcohol; he spent time in jail and has been deported 3 times. HIV care was inconsistent with multiple missed visits and inconsistent ARV use

Working with bilingual case manager, Pablo was linked to a Spanish-speaking therapist who specialized in trauma therapy; Pablo also attended a weekly Spanish AA group at local Catholic church.

- Alcohol use decreased
- Pablo was able to recognize his triggers and learn better coping skills
- Pablo was able to build a small network of peers of positive influence

Questions?



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