An Overview of Mental Health Issues for Latino and Asian Immigrants in the United States

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Outline

- Terminology
- Challenges
- Why Study Immigrant Health?
  - Immigrant Health Paradox
  - Acculturation and related experiences
- Examples
  - Latinos: Acculturation and Disorder by Generational Status
  - Asians: Acculturation, Intergenerational Cultural Dissonance and Alcohol Use
- Caveats
- Cultural Considerations
- Service Use and Barriers to Care
Terminology

- Immigrant

- Latino vs. Hispanic

- Subethnicity
  - Country of origin, Ancestry

- Nativity
  - Generational Status
Challenges in Studying Immigrant Health

- Measurement
  - Changing definitions
  - Lack of data
    - Subgroup comparisons

- Complex phenomena
  - No agreement of operationalization

- Politics
Why Study Immigrant Health?

- Immigration at highest rate since end of 19th century
  - US has more immigrants than any other country
  - 13.4% of US population, up from 4.7% in 1970

- Latinos are the largest and third-fastest growing minority group
  - 17.8% of total U.S. population (~57 million)
  - 25% of population by 2060
  - Largest foreign-born population

- Asian Americans represent the fastest growing racial population in the U.S.
  - 5.6% of total U.S. population (~18 million)
  - 2nd largest foreign-born population (~30%)
  - Projected to be the largest by 2055
Minority health disparities, with increased:
- Mortality
- Physical illnesses
- Smoking and alcohol-related problems
- Psychological distress

Foreign–born individuals exhibit decreased:
- Mortality
- Physical illnesses
- Substance use

Despite lower SES and other stressors associated with minority status or immigration, risk reaches (and often surpasses) US–born whites after spending time in the US.

(Lariscy, 2015; Ortega et al., 2000)
Lifetime Prevalence of Disorder in Latinos and Non-Hispanic Whites in the US, by ancestry

Data from the NLAAS

(Alegria et al., 2007)
Lifetime Prevalence of Disorder in Latinos and Non-Hispanic Whites in the US, by nativity

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(Hong et al., 2014; Alegria et al., 2007)
Lifetime Prevalence of Disorder in Asians in the US, by Immigration Characteristic

Data from the NLAAS

(Takeuchi et al., 2007)
Acculturation

“… [encompasses] those phenomena which result when groups of individuals having different cultures come into continuous first-hand contact, with subsequent changes in the original culture patterns of either or both groups.”

(Redfield, Linton & Herskovits, 1936, p.149)

Enculturation

“… the process of preserving the norms of the native group, whereby individuals retain identification with their ethnic cultures of origin.”

(Guarnaccia et al., 2007)
Related Experiences

- Context of Exit
  - Varies by subgroup

- Experiences in the U.S.
  - Discrimination
  - Acculturative Stress
  - Family Conflict / Intergenerational Dissonance
  - Access to services

- Similar yet different than refugees!
Latinos: Acculturation and Disorder by Generational Status
Acculturative Experiences by Generational Status

<table>
<thead>
<tr>
<th>Category</th>
<th>1st Generation</th>
<th>1.5 Generation</th>
<th>2nd Generation</th>
<th>3rd Generation</th>
</tr>
</thead>
<tbody>
<tr>
<td>GOOD/EXCELLENT ENGLISH PROFICIENCY</td>
<td>81.9</td>
<td>92.8</td>
<td>91.8</td>
<td>18.2</td>
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<tr>
<td>DISCRIMINATION</td>
<td>54.9</td>
<td>74.2</td>
<td>77.6</td>
<td>54.9</td>
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<tr>
<td>MEDIUM/HIGH ACCULTURATIVE STRESS</td>
<td>30.8</td>
<td>9.3</td>
<td>91.8</td>
<td>57.9</td>
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<tr>
<td>FAMILY CONFLICT</td>
<td>40.7</td>
<td>54.9</td>
<td>53.7</td>
<td>53.7</td>
</tr>
</tbody>
</table>

All differences p<0.0001; Acculturative stress items not assessed in US-born population
Past 12-Month Disorder Prevalence by Generational Status

All differences p<0.0001; n/a = Acculturative stress items not assessed in US-born population
### Adjusted Relative Odds of Past 12-Month Depressive Disorder

<table>
<thead>
<tr>
<th></th>
<th>1st Generation (n=1,257)</th>
<th>1.5 Generation (n=365)</th>
<th>2nd Generation (n=522)</th>
<th>3rd Generation (n=397)</th>
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</thead>
<tbody>
<tr>
<td><strong>English Proficiency</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Good/Excell vs. None/Poor</td>
<td>--</td>
<td>1.24 (0.42-3.65)</td>
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<tr>
<td><strong>Discrimination</strong></td>
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<tr>
<td>Ever vs. Never</td>
<td>--</td>
<td>12.6 (1.63-97.1)*</td>
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<td>2.75 (0.78-9.72)</td>
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<tr>
<td><strong>Acculturative Stress</strong></td>
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<tr>
<td>Med/High vs. None/Low</td>
<td>1.71 (1.12-2.60)*</td>
<td>--</td>
<td>n/a‡</td>
<td>n/a‡</td>
</tr>
<tr>
<td><strong>Family Conflict</strong></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Ever vs. Never</td>
<td>2.40 (1.60-3.61)**</td>
<td>1.67 (0.68-4.11)</td>
<td>3.05 (1.46-6.39)**</td>
<td>1.54 (0.80-2.94)</td>
</tr>
</tbody>
</table>

All models adjusted for age at interview and sex. Some adjusted for marital status, education, and ancestry/nationality.

*p<.05; **p<.001; OR, odds ratio (CI, confidence interval); ‡ Acculturative stress items not assessed in US-born population.
## Adjusted Relative Odds of Past 12-Month Anxiety Disorder

<table>
<thead>
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<th>1st Generation (n=1,257)</th>
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<tr>
<td><strong>Discrimination</strong></td>
<td></td>
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<tr>
<td>Ever vs. Never</td>
<td>1.29 (0.84-1.97)</td>
<td>14.6 (1.93-110)*</td>
<td>2.98 (1.12-7.92)*</td>
<td>2.28 (0.75-6.96)</td>
</tr>
<tr>
<td><strong>Acculturative Stress</strong></td>
<td></td>
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</tr>
<tr>
<td>Med/High vs. None/Low</td>
<td>1.95 (1.29-2.94)**</td>
<td>--</td>
<td>n/a‡</td>
<td>n/a‡</td>
</tr>
<tr>
<td><strong>Family Conflict</strong></td>
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</tr>
<tr>
<td>Ever vs. Never</td>
<td>2.00 (1.35-2.96)**</td>
<td>1.67 (0.78-3.58)</td>
<td>2.84 (1.44-5.60)*</td>
<td>--</td>
</tr>
</tbody>
</table>

All models adjusted for for age at interview and sex. Some adjusted for marital status, education, and ancestry/nationality. *p<.05; **p<.001; OR, odds ratio (CI, confidence interval); ‡ Acculturative stress items not assessed in US-born population.
### Adjusted Relative Odds of Past 12-Month Substance Use Disorder

<table>
<thead>
<tr>
<th></th>
<th>1&lt;sup&gt;st&lt;/sup&gt; Generation (n=1,257)</th>
<th>1.5 Generation (n=365)</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt; Generation (n=522)</th>
<th>3&lt;sup&gt;rd&lt;/sup&gt; Generation (n=397)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>English Proficiency</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good/Excell vs. None/Poor</td>
<td>14.1 (1.47-135)*</td>
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</tr>
<tr>
<td><strong>Discrimination</strong></td>
<td></td>
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</tr>
<tr>
<td>Ever vs. Never</td>
<td>2.71 (0.32-22.9)</td>
<td>--</td>
<td>--</td>
<td>3.20 (0.41-25.0)</td>
</tr>
<tr>
<td><strong>Acculturative Stress</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Med/High vs. None/Low</td>
<td>2.68 (0.70-10.2)</td>
<td>--</td>
<td>n/a‡</td>
<td>n/a‡</td>
</tr>
<tr>
<td><strong>Family Conflict</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ever vs. Never</td>
<td>10.2 (1.25-82.6)*</td>
<td>4.06 (0.47-35.4)</td>
<td>6.04 (1.78-20.5)*</td>
<td>--</td>
</tr>
</tbody>
</table>

All models adjusted for age at interview and sex. Some adjusted for marital status, education, and ancestry/nationality.  
*=<0.05; **p<.001; OR, odds ratio (CI, confidence interval); ‡ Acculturative stress items not assessed in US-born population.
Latino generations are extremely heterogeneous

“Generation 1.5” often resemble their US–born counterparts more than other first generation immigrants

Generational groups have different relationships with mental disorder

Effects also vary by type of mental disorder

Take into account generational status and age at migration

Avoid collapsing psychiatric disorders into one category
Asians: Intergenerational Cultural Dissonance and Alcohol Use
Asian Americans & Alcohol Use

- Underage drinking is a widespread problem with multiple negative outcomes

- Asians experience a range of adverse outcomes from alcohol misuse

- Alcohol use problems differ across adolescent Asian subgroups
  - Higher rates of use and binge drinking among Korean, Japanese, and Filipino Americans
  - Lower rates among Chinese and Asian Indian Americans
  - Very few data on Vietnamese and Cambodian American youth

Wu et al. (2011); Iwamoto et al. (2012); Lee et al. (2009); Makimoto (1998); Cheng et al. (2012)
Intergenerational Cultural Dissonance (ICD)

“The Acculturation Gap”

- ICD measures the difference in acculturation between children and their caregivers
  - Leads to increased miscommunication, misunderstanding, and familial conflict
  - Associated with a range of subsequent adverse child outcomes including depression and alcohol use
  - Most research comes from Hispanic populations

Portes & Rumbaut (1996); Lau et al. (2005); Choi et al. (2008); Kim et al. (2009)
Objective: Estimate the association of ICD and alcohol use in Vietnamese and Cambodian adolescents
Is this relationship mediated by depression?

Data come from the Cross Cultural Families project
ICD, Alcohol Use and Depression in Vietnamese and Cambodian Adolescents

*Adjusted for sex, age, nativity, nationality, and acculturation

** p<.05
ICD, Alcohol Use and Depression in Vietnamese and Cambodian Adolescents

**Adjusted for sex, age, nativity, nationality, and acculturation**

** ADJUSTED ODDS RATIO **

- ICD and Alcohol Use
- ICD and Depression
- Baseline Depression and Alcohol Use
- ICD and Alcohol Use
- Baseline Depression and Alcohol Use

** p<.05
ICD, Alcohol Use and Depression in Vietnamese and Cambodian Adolescents

*Adjusted for sex, age, nativity, nationality, and acculturation

** $p < .05$
ICD, Alcohol Use and Depression in Vietnamese and Cambodian Adolescents

*Adjusted for sex, age, nativity, nationality, and acculturation**

** p<.05
Asians: Conclusions

- Complex processes

- Points to a potential mechanism

- Prevention of adolescent alcohol use by targeting ICD
  - More proximal risk factor than acculturation
  - Enhancing communication and bicultural effectiveness training (BET)

- Randomized trials needed
  - Powered for subgroup analyses
Caveats and Cultural Considerations

- Oversimplification of complex processes
- Validity in Measurement
- Etic vs. Emic Approach
- Somatization

- Culture-Bound Syndromes
  - Latinos: Ataque de Nervios
  - Asians: Khyal cap

- Resilience
  - Familism, Biculturalism, Spiritualism
Service Use Among Immigrants

- Less likely to use mental health services
  - Latinos: 12-month usage: 4.44% Mexicans, 5.55% Cubans
  - Asians: 1/3 less likely, 12-month usage: 3.1%
  - Varies by generation: 3rd gen. higher rates

- More use of informal services
  - Friend/relative
  - Clergy
  - Indigenous healers

Spencer et al. (2010); NCLR report (2005)
Past-Year Mental Health Service Use in Latinos in the US, by Immigration Characteristic

- **Years in US**: 2.63 (0-5 yrs), 2.03 (6-10 yrs), 2.73 (11-20 yrs), 6.35 (>=21 yrs)
- **Age at Immigration**: 15.87 (US-born), 24.62 (<=12 yrs), 25.32 (13-17 yrs), 15.16 (18-34 yrs), 23.97 (>=35 yrs)
- **Generational Status**: 15.16 (First), 12.76 (Second), 13.29 (Third+)

Data from the NLAAS (Alegria et al., 2008)
Barriers to Care

- **Structural**
  - Insurance, availability and accessibility of services, transportation, financial burden

- **Language and cultural competency**
  - Communication with provider and staff

- **Legal**
  - Fear of deportation

- **Stigma**
  - Acceptability of mental illness in one’s culture
  - Shame is associated with less use of services

- **Discrimination**
  - Racism
  - Suspicion of service delivery system

Spencer et al. (2010); NCLR report (2005)

Source: NLAAS, Spencer et al., 2010
Cultural Considerations in a Clinical Setting

- Disease-related Beliefs
  - Mal de Ojo

- Stigma

- Culture
  - Fatalismo
  - Engagement with family members

- Cultural competence
  - “…ability to interact effectively with people of different cultures… [and] helps ensure the needs of all community members are addressed.” (SAMHSA, 2016)
  - “…to be respectful and responsive to the health beliefs and practices… of diverse population groups”

www.thinkculturalhealth.hhs.gov/clas/blueprint

Alegria et al. (2012)
Acknowledgements

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  - NIMH Psychiatric Epidemiology Training Program (5T32MH014592–39; PI: Zandi, Peter)
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