



CBOs Can Address Health Disparities in LatinX Communities

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Lack of attention to issues of culture, context, and diversity makes it challenging for LatinX immigrant families to find the support they need in usual care settings. Immigrant families experience multiple stressors that contribute to negative mental health outcomes for both children and parents. Increased anti-immigrant policies exacerbate psychological distress, mistrust in systems of care, and poor access to needed health and social services. Over the last decade, more research emerged to illustrate the various ways that undocumented status shapes social, emotional, and educational trajectories. In addition, the pervasive presence of Immigration and Customs Enforcement (ICE) cultivates fear within communities and erodes the collective sense of belonging. The lack of attention to increasing LatinX immigrant health inequities created by these system-level factors has created a public mental health crisis that calls for innovative strategies to support immigrant families and the community-based organizations that serve them.

It is critical to focus on building capacity within community-based organizations (CBOs) that immigrant families already access. This affirms the trusted spaces that can offer more equitable and non-stigmatized access for LatinX immigrant families.



Figure 1 Photograph by Ketut Subiyanto from Pexels. Used under CCO.

Highlights

CBOs are critical to diffuse mental health promotion strategies for all immigrant communities.

The FMHA model draws from evidence-based parent support strategies and advocacy skills to help CBO staff incorporate mental health promotion in their work.

In addition, there is untapped potential of front-line, non-traditional providers within these organizations who are uniquely positioned to leverage their knowledge and experience.

We propose a Family Mental Health Advocacy (FMHA) model that combines components of positive parenting and self-advocacy skills interventions to: (1) align mental health promotion with the advocacy mission of CBOs, (2) engage CBO staff in how to integrate mental health “messaging” within their ongoing programs and services, and (3) empower immigrant parents as critical change agents in their own lives and the lives of their children.

Methods

We draw from two established community-based delivered interventions to develop the FMHA Model: one focused on positive parenting skills and the other on self-advocacy skills. Both recognize the importance of ecological context and rely on practices that are strength-based and empowerment-focused. Brief psychoeducation modules are also included to equip CBO staff in the advocacy process with parents (e.g., how to consult with teacher/schools) and how to reinforce parenting skills and provide support (e.g., coping with anxiety, home routines). We discuss the rationale for a staff training intervention that can help integrate mental health promotion strategies into the day-to-day services that CBO staff provide for LatinX immigrant parents and families.

Results

- CBOs offer more equitable and non-stigmatized access to services for LatinX immigrant families.
- Mental health promotion models need to leverage the skills of CBO staff and align with the goals of CBO programs.
- The proposed FMHA model includes training to build capacity among CBO staff to promote parent self-advocacy skills and provide parenting support.
- FMHA training aims to strengthen CBO staff skills and knowledge about key parenting skills and supports. The training also reviews collaboration with parents to identify concerns and needs, set goals and action plans, and monitor progress.

HOW DID A COMMUNITY PSYCHOLOGY PERSPECTIVE INFORM YOUR WORK?

We highlight the importance of community settings for decreasing stigma and systematic barriers to mental health care. Consistent with Community Psychology frameworks, CBOs are informed by local context and involve the community in problem identification and social justice action. Efforts to support and equip CBO staff and allied providers to address the pressing and urgent needs of LatinX immigrant families are crucial. CBOs are at the forefront of disseminating information about policy actions and updates, and they are necessary for rapid response efforts as evidenced during the Covid-19 pandemic. For example, CBO staff provide health information, facilitate family coping and community relief efforts, and organize resources to support affected communities.

What Does This Mean For?

Research and Evaluation: There are many challenges associated with integrating mental health promotion strategies into the day-to-day practice of CBO staff. These challenges require ongoing professional development and leadership support. This includes discussion of the successes and challenges that arise when integrating mental health promotion strategies within existing CBO programs and services.

Practice: Mental health services are often defined by traditional notions of who providers should be and what services should look like. We can transform this system by first investing our resources in the places that LatinX immigrant families already access. Then, we can collaboratively design strategies to support the day-to-day activities of front-line community staff. This will facilitate more innovative, responsive, and strengths-based strategies to support the mental health and well-being of all immigrant LatinX families.

Social Action: There is an urgent call for researchers to address how continued anti-immigrant policies affect the mental health of children in LatinX immigrant families, as well as the community providers that are also impacted by these policies. Community-engaged interventions must focus on workforce development, community engagement in defining mental health promotion goals, and advocacy toward addressing the impact of racism and discrimination.

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