

Assessing Mental Health Needs of Latino Male Youth in the Fruitvale Neighborhood of Oakland

Spanish Speaking Citizens' Foundation
San Francisco State University – Health Education Department
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Community Needs Assessment Practicum



Presenter Disclosures

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(i) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months: No relationships to disclose.

Outline

- Research Objectives
- Community Description
- Methods
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- Key Findings
- Key Recommendations
- Acknowledgments



Research Objectives

To assess and inform the improvement of mental health services for Latino males, ages 11-18, who have been affected by violence.



Community Description

Assessment target population is Latino male youth, ages 11 – 18, who live or go to school in the Fruitvale neighborhood of Oakland, California.



Methods

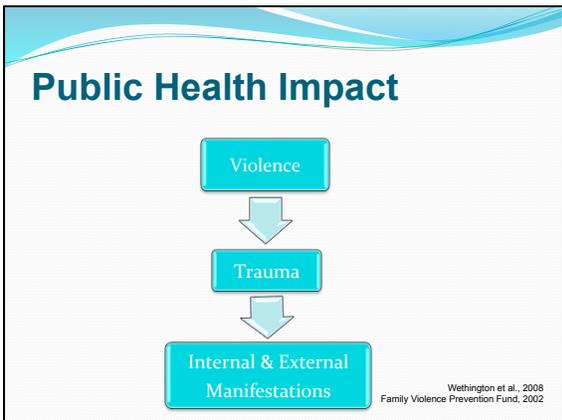
Focus Groups

- Three groups totaling 20 youth

Key Informant Interviews

- Four interviews

(All data collected in summer of 2011)



Key Findings

1. The stigma of being labeled “crazy” is a key barrier to accessing mental health services for Latino male youth ages 11 to 18.

“Quién quiere ser loco? [Who wants to be crazy?] Nobody wants to see the doc. Nobody wants to be identified as being crazy or mentally ill...”

-Key Informant

Key Findings

2. One positive strategy youth practice to deal with the stress caused by violence is talking with people who may not hold a license to practice mental health services, but who they can trust.

“We practice it [mental health] at beauty salons and barber shops. Those are our therapists...My best mental health counselor besides my abuela [grandmother] was my barber. I am sitting there trying to get a haircut and when he saw me really stressed, he would cut my hair slower ‘cause he was gonna try to talk to me...He was a mental health practitioner with scissors.”

-Key Informant

Key Findings

3. Youth's constant state of anxiety, fear and hyper vigilance was expressed by Latino male youth and key informants. These feelings reinforce youth's ideas that their lives will end prematurely due to violence.

"I see too much people getting shot and I seen a couple people getting killed, so that's why I be thinking about that [death]. Even when I'm watching the news, I'm watching them, but at the same time, I'm thinking, what if that was me?"

-Youth Participant

Key Findings

4. Access to mental health services for youth were limited due to: insufficient funding to satisfy community's demand, immigration status affecting ability to qualify for health insurance and narrow eligibility requirements in clinically based settings.

"We have a lack of resources...just in this area we refer people to Sol y Luna...and they have a waiting list. Other places in the Fruitvale area...also have a waiting list. We have the kids that do not have papers...we do not have places to refer them to because they [agencies with mental health services] require Medicare or some type of health insurance."

-Key Informant

Key Recommendations

1. De-stigmatize mental health through outreach services that aim to educate youth and the community about what mental health is and the benefits of receiving mental health services.



Key Recommendations

2. Review requirements to receive mental health services and ensure they are inclusive and accessible to Latino male youth.



Key Recommendations

3. Foster more safe spaces for Latino male youth to develop their capacity to maintain positive mental health and well being.



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Key Informants & Community Leaders
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