

Depression Among Latino Children in the Public Child Welfare System

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Overview of Presentation

- Latino children and the Child Welfare system
- Children's mental health
- Latino mental health
- Purpose of study, Methods, and Results
- Implications for practice
 - Focus on assessment issues

Latino Families and the Child Welfare System

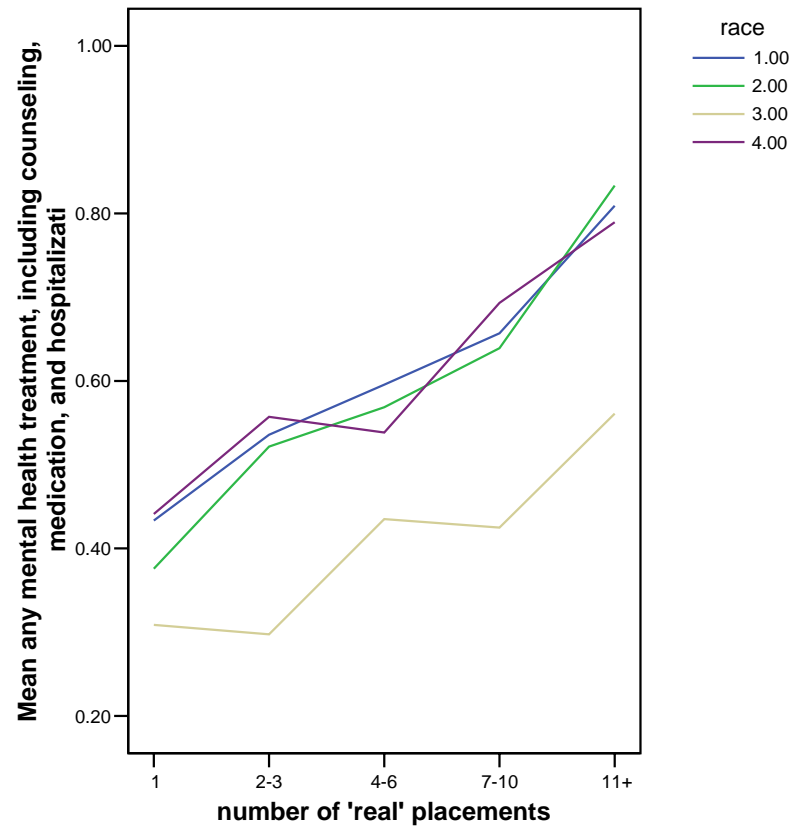
- The number of Latino children reported for child maltreatment increased from 11% (n = 90,922) in 1996 to 14% (n = 108,105) in 1999.
- The number of Latino children in foster care doubled from eight percent in 1990 to 15% in 1999.
- Latino children represent approximately 50% of the foster care population in New Mexico, more than 30% in Arizona, California, Connecticut, and Texas, and at least 20% in Colorado and Massachusetts
- A high percentage of the Latino children in foster care are not yet one year old (35%), leading to an increased possibilities for developmental consequences.



Mental Health needs among Youth in the Foster Care System

- Children in the FC system experience high rates of mental health needs.
- National studies have found that 51% of children in FC ages 4-18 years exhibit clinically significant behavioral problems.
- Most children in the child welfare system manifest externalizing mental health conditions, yet those with histories of sexual or physical abuse are 3 to 4 times more likely to become depressed or suicidal during adolescence or adulthood.
- Children of color are less likely to obtain MH services when in care.

Percent Receiving Treatment by Number of Placements and Race



Latino Mental Health

- Focus on history of immigration, length of residency, and Latino origin.
- “Epidemiological paradox” – poor Mexican women compared to Mexican American women, have better outcomes in areas such as infant birth weight and child immunization rates.
- Mull, Agran, Winn, & Adernson (2001) found that Mexican mothers experienced more hardships related to poverty rates, yet they were more likely to have healthier lifestyles (i.e., less likely to use drugs, alcohol, or experience health disorders) compared to Mexican American and non-Hispanic White women.
- Vega and Colleagues, have found that longer length of residence in the U.S. increases the risk of experiencing lifetime rates of MH disorders and other health problems.
- Between and within Latino population differences should be considered (M. Alegria).



Purpose of the Study

- To examine Latino children's experience of depression as rated by the Children's Depression Inventory (CDI) over 3 yrs.
- To examine predictors in patterns of change in Latino children's depression symptomatology over 3 yrs.
 - Predictors of interest:
 - Latino origin
 - Mexican, Puerto Rican, or Other Latino origin
 - Caregiver's immigration status
 - U.S. Born, Immigrant <10 years residence, Immigrant >10 years residence

Methodology

- National Survey of Child and Adolescent Well-Being (NSCAW)
 - Longitudinal, nationally representative sample (N=6200)
- SAMPLE: Latino children ages 7 years and older were included in this study (N = 385).
- Measure
 - Children's Depression Inventory (CDI), a 27-item self-report measure used to assess symptoms of depression in school aged children
- Data Analysis
 - Latent Growth Model analysis was completed

Results - Demographics

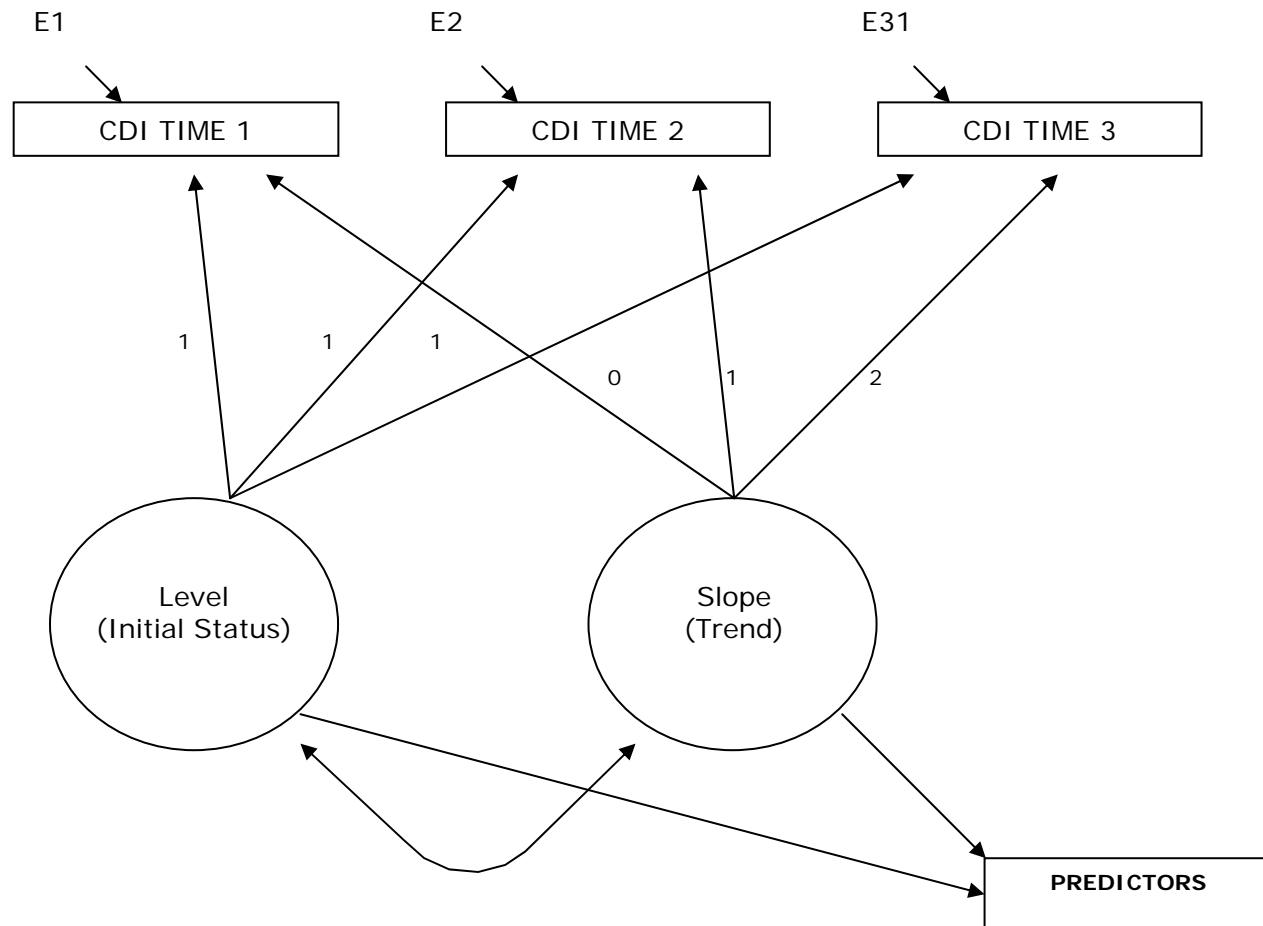
- Child
 - 56% were female
 - Average age was 10.5
 - 64% Mexican, 15% Puerto Rican, and 21% other Latino origin
 - 27% had chronic health problems
- Caregivers
 - 29% were married
 - On average 4 biological children
 - Education levels were low
 - Half had family incomes below \$20,000
 - 63% were U.S born, 27% were immigrants (>10 yrs), 10% were immigrants (<10 yrs)
- Case
 - 78% of children were residing with a permanent caregiver
 - Placement/Service: 31% in home receiving no services, 47% in home receiving services, 22% in an out of home placement
 - A majority of children were referred for physical, sexual maltreatment, or neglect.



Results-Depression

- Few children were experiencing depression at a clinical level
 - Baseline (n = 44),
 - T2 (n = 24),
 - T3 (n = 15)

Latent Growth Model of Change in the CDI Score over 3 years

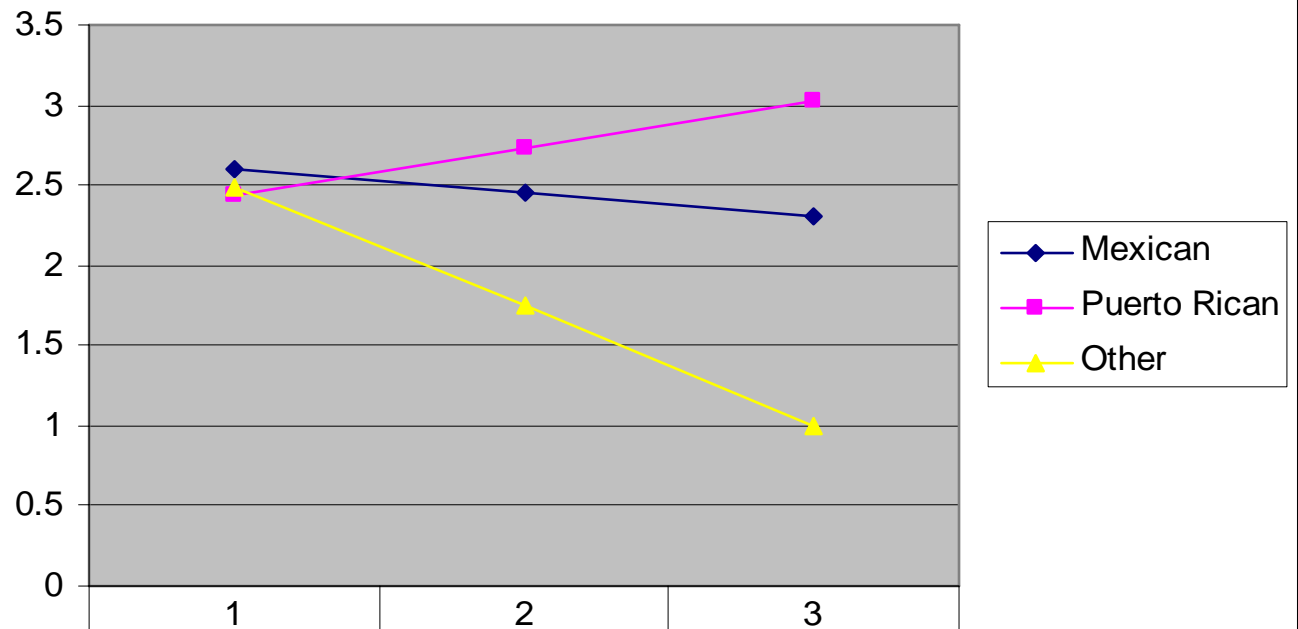


Results – Latent Growth Model

- The change model and predictor model fit the data well.
- CHANGE MODEL:
 - Latino children's depression scores decreased over the three years.
 - There were individual differences at baseline, but over time the change rate was similar among children.
 - Where children start is important.
- PREDICTOR MODEL:
 - Age was significant – Older children had higher levels of depression at baseline
 - Latino origin

Change over time by Latino Origin

Change Over Time by Latino Origin



◆ Mexican	2.60282	2.45788	2.31294
■ Puerto Rican	2.43682	2.72988	3.02294
▲ Other	2.48982	1.74288	0.99594

Implications for Practice

- Assessment Models for Immigrant and/or Latino Families
 - *Cultural grams* – derived from ecomaps (focus on the relationships of family members with outside environment) and gemograms (focus on the intergenerational relationships among family members) – Congress (1994)
 - *Ecological perspective* - consists of the Micro (inside the family system), Mezzo (formal and informal networks, supports, and resources), Macro (the impact of social structures) system – Hancock (2005)



Implications for practice

- Assessments should include:
 - Reasons for immigration
 - Length of time in the country
 - Age at time of immigration
 - Languages spoken by setting
 - Values about family, education, and work
 - Diversity within family
 - Legal or undocumented status
 - Formal, informal networks, and resources
 - Impact of social structures – policies

Implications for Practice

Paths to services taken by Mexican immigrant families in the child welfare system

