

Mental Health in the Latinx Community

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Mental health is a difficult topic of conversation for many individuals. Issues involving major mental health concerns like depression, generalized anxiety disorder, post-traumatic stress disorder, and addiction when left untreated have the risk of becoming uncontrollable and disastrous.

For many people in the United States today, it is difficult enough to begin the process of counseling. However, the odds seem to be unfairly stacked against the many individuals who belong to non-white, non-English speaking communities.

The Latinx community that dominates various cities across the United States encounters many external forces that prevent them from receiving the same level of care as other citizens.

According to the National Alliance on Mental Illness (NAMI), “approximately 33% of Latino adults with mental illness receive treatment each year compared to the U.S. average of 43%” due to circumstances that are both cultural and systematic.

The Gándara Center, with offices in Springfield and West Springfield, has strived to achieve and refine the image of mental health within the Latinx community by supporting and meeting the economic needs of those within the community. Their main aim is to advocate for a healthier lifestyle both mentally and socially for those amongst the Latinx community, targeting these diverse populations to promote a change for those individuals and the cultural stigmas that surround their everyday lives.

Rahiza Gallardo-Vazquez, a counselor at Gándara Center, was recruited by the agency after becoming certified as a counselor in Puerto Rico.

She said that when she first arrived in the United States to work in Springfield, she noticed that there were a lot of cultural barriers between clinicians and their patients.

She said one misunderstanding she encountered at first was that “a lot of the [Latinx] population were diagnosed as bipolar” by non-Latinx counselors as a result of a misunderstanding of dress codes.

Gallardo-Vazquez said counselors had assumed that these Latinx people were bipolar because, despite going through issues with their mental health, they show up “at nine a.m... overdressed...and with a lot of makeup,” something that to them is generally uncommon with the patients that they encounter.

Gallardo-Vazquez explained how this cultural misunderstanding came about. In Puerto Rico, it is normal and accepted in the community to dress up and take care of their appearance prior to entering a public setting, while in the United States it is considered “outstanding.”

She said that the lack of cultural understanding between clinicians and patients has led to many misdiagnoses, a factor that has unjustly targeted non-English speakers and immigrants.

Mental health within the Latinx community holds both a significant and insignificant role to the community and the individuals within it.

“Overall, the Latino community does not talk about mental health issues,” according to the National Alliance on Mental Illness.

This cultural structure branches from a multitude of traditional and societal stances that are carried amongst these various Latinx communities. Mental health is viewed as a taboo subject, one that holds importance to individuals because of the impact and results it may pose, yet holds no importance to the community because of lack of encouragement.

“Many Latinos do not seek treatment for fear of being labeled as “*locos*” (crazy) or as having a mental health condition because this may cause shame,” states the National Alliance on Mental Illness.

In addition to cultural stigmas about mental health, there are also various systematic issues that prevent the Latinx community from receiving equal treatment. Perhaps the most evident obstacle is the language barrier between most clinicians and their patients, which oftentimes results in a bad experience for Latinx individuals. Although there are many mental health and other medical professionals that can speak medical Spanish, they may not comprehend the cultural issues of Latin Americans.

Gallardo-Vazquez acknowledges that an important step to improving the relationship between clinician and patient is to start a basis for understanding.

She has experience with cultural studies after taking courses in Puerto Rico that helped her learn how to interact with “individuals from various Latin-American backgrounds, individuals who are immigrants, and individuals with varying abilities.”

Since her time at Gándara Center, Gallardo-Vazquez claims that Spanish dominates a majority of her interactions with her patients, which, she adds, has helped to create a productive relationship.