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Latinx Access to Healthcare and Mental Health Services.

The current state of the Healthcare system in America receives a lot of critiques. Many demographics have limited access to insurance, adequate treatment plans and prescription medications. Mental health services are even less accessible and this leaves many middle class to impoverished people without the help they need to consistently provide for themselves and their dependents. The term Latinx is used to describe those who ethnically identify as Latin American without assuming gender, or sexuality. This term largely belongs to those who identify as LGBTQ+ and Latin American and live in the United States. This group of people can be considered a double or even triple minority and about twenty percent of this community live at or below the federal poverty line. With the current hegemonic mindset, policies, and oppressive nature of healthcare workers and American voters, those who belong to the Latinx community are not receiving adequate physical and mental healthcare.

A paper published in November of 2019 studied differences in pain perception between Latinx and white Americans. This paper titled, *The influence of Latinx American identity on pain perception and treatment seeking,* stated that, “Latinx-Americans report that expectations of racial bias and fears of discrimination fuel distrust in the medical system and contribute to observed relative under-utilization (Ng, Nanavaty, and Mathur) .” In many cases, Latinx individuals are choosing home-remedies over professional medicine because of a distrust in the

healthcare system. Disease and injury among Latinx individuals is incredibly under-reported, this is a major contributing factor in the health of the community. When disease and injury are under-reported, they remain untreated until it becomes life-threatening or fatal. While holistic and natural treatments are helpful, they can not replace a professional medical opinion in many situations. This distrust comes from the fear of financial insecurity, citizenship issues, and language barriers. Many of those considered a minority can even recall a situation in which they were directly discriminated against by a medical professional. This is specifically evident in Latinx individuals who are LGBTQ+.

Physical and mental health studies have been performed on both people of color and people belonging to the LGBTQ+ community. However, the world of research is severely lacking a study that shows how the intersectionality of these two things affect a persons' mental and physical health. A paper published in 2018 titled, *Integrating the Neurobiology of Minority Stress with an Intersectionality Framework for LGBTQ‐Latinx Populations,* highlighted this by stating, "Neurobiological studies of stress regulation have yet to bring visibility to understanding how LGBTQ Latinx individuals internalize multiple transactions between and within cultural, institutional, and societal stressors…(Parra and Hastings)." Just like how many physical ailments present different symptoms in different genders, mental health issues present differently in different genders, ethnicities, and demographics. There is no "one size fits all" when it comes to mental health. There is simply just not enough being done to better understand the members of this community and thus they can not receive adequate treatments. Family structure, acceptance, and morals are just a few things that vary greatly between different ethnic groups and are ingrained in the children. These things alone can often lead a person to a need for resources to

accept their own individuality. When you also factor in an individual who is questioning their sexuality and confronted with a disparity of acceptance among minority groups, you must consider these factors. Many physical and mental health treatments are based on what works for white, heterosexual, male, financially secure individuals. While the current treatment process has come a long way and is important for research, it is dumbfounding that in 2020 the healthcare system will still cut and paste this process across all genders, ethnicities, sexualties, and financial standings. However, the healthcare system is not entirely to blame, the immigration policies in the United States have created a barrier to adequate healthcare that is mortifying.

Many illegal immigrants and their children in the United States come prepared to take any job they are given and will not fight over wages, benefits, or safe working conditions. In the United States right now it is legal to hire children to do work on farms. In North Carolina a study in the last year was done on latinx child farm-workers, these children were dedicated to their family and were hesitant to complain and most genuinely needed the wages they were receiving. However when the study was complete, it was reported that, “over 65% of the children were injured in some way at work, and that only about 5% received medical care after said work injury (Arcury et al).” This study also discussed many heat-related injuries, loss of limbs, and head injuries that resulted in concussion like symptoms. The children in the study aged 10-17 were already reporting back and neck pain as well as pain in their knees and many presented with wheezing or other respiratory issues. While it is horrifying that these children go through this even today, it is still legal in the U.S. and can be reported on without any real fear of reparations. It is impossible to say how many adults or children are working in illegal, hazardous conditions without adequate pay or healthcare benefits. Latinx individuals across the United

States do not seek medical care because they do not want to skip work or do not have the ability to pay medical bills. Even those individuals who are making standard wages are scared to go to the doctor for fear of deportation. Because these individuals are undocumented, there is no way to discuss an accurate death or serious injury toll. These individuals are most certainly not receiving bare minimum healthcare services, much less adequate treatment of on the job injuries or chronic health conditions due to a lifetime of extremely strenuous working conditions.

The warranted distrust of modern american medicine over many generations of latinx families forming communities in America has led to the development of a complex system of natural home remedies. An essay titled, “Curanderismo In Appalachia: The Use Of Remedios Caseros Among Latinos In Northeastern Tennessee”, includes a compiled list of the home remedies of seventy two latinx individuals. This list included a number of medicinal plants as well as common household items and how they can be used to treat almost any common ailment. The latinx community in the United States has been using things such as Coca-Cola and common household spices to treat anything from acne to high blood pressure. It is apparent that the use of these natural remedies deserves some merit. However, without proper medical training, treatment is often symptom focused. The authors of this essay state, “The use of some traditional materia medica is also problematic in cases of debilitating and potentially fatal chronic diseases when an individual attributes efficacy to a folk remedy that, in fact, does not exist (Cavender, Gladson, Cummings, and Hammet).” Symptom treatment works for small ailments such as a cold, a headache, or a superficial wound, but this kind of treatment will not cure or prevent more serious illnesses. In fact, covering up symptoms using home remedies can be detrimental, as this way serious diseases may not be discoverable until it is too late to treat them. It is true that antibiotics

and opioids are over-prescribed in the U.S. and lots of pharmaceuticals may not actually be necessary to live a healthy life. However, treatments such as dialysis, chemotherapy, and insulin injections are important medical developments that have no adequate natural alternative. There are research facilities, doctors, engineers, and academics whose life works are creating cutting edge technology to treat many serious ailments in their early stages. Home remedies, however useful at providing comfort, can not compete with the healthcare system in America today.

Herd immunity and disease prevention is another important aspect of the Latinx access to healthcare. These topics have been prevalent recently as the COVID-19 pandemic has affected the United States and many minority communities are facing the worst of it. Because public schools require basic vaccinations, most young Americans have access to these. However, access to flu shots, the HPV vaccination, eventually a COVID-19 vaccine, and other new preventative measures is often an issue in Latinx and other minority communities. *The Columbian,* ran a story on April thirtieth of 2020 on the effect of COVID-19 on the Latinx community. The article stated "People of Hispanic descent represent 13% of the state's overall population but 30% of its confirmed COVID-19 cases, according to the Department of Health (Hastings)." Many minority communities in America can not afford to miss work or buy a month's worth of groceries at a time. Thus, "social distancing" only works for communities that can afford a few months of isolation. Those communities that are doing blue collar or essential work do not necessarily have the protections or financial backing to demand that their employers provide protections. Implementing better preventative measures could deter latinx individuals from reaching a point where their only options are to forgo treatment or face an irreparable financial burden.

Access to healthcare in the United states is not a black and white issue. There are many factors that go into whether or not a person can receive the treatment they need. The term Latinx inherently describes a community that faces intersecting issues. Issues like citizenship, socioeconomic status, racial discrimination, and sexuality can be huge barriers to this community. There is an extreme lack of research on this community's biggest health concerns and how their differing family and interpersonal dynamics affect mental health. Without research that focuses on this community even those that can afford or access healthcare are most likely not receiving the adequate care that they deserve. There is a lack of protections over Latinx individuals in blue collar and farm work, especially if they are undocumented. All these intersecting issues have created a national trust barrier between the Latinx community and the healthcare system. This has led these communities to depend on home remedies that are likely just silencing symptoms of more serious health issues. The healthcare system must work towards providing adequate preventative care, treatments, and targeted research to the Latinx community to improve the standard of living of the country as a whole.

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