

Do facilities that offer Medicaid, mental health treatment in Spanish, a sliding scale, or no charge for services have a greater number of Latino patients?



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Abstract

- Estimates include that 1 in 11 Hispanic Americans with mental health issues seek out mental health treatment.
- This study utilizes data from the National Mental Health Services Survey (N-MHSS) annual survey, which is a cross-sectional and multi-site survey.
- Study findings suggested that there are statistical significances between facilities offering Medicaid, treatment in Spanish, sliding fee scale, treatment at no charge and the number of Hispanic or Latino patients. Facilities that offered these services had a greater number of Hispanic/Latino patients.

Introduction

Significance of Study

- The findings in the present study are important to social work practice because the number of Hispanics and Latinos are increasing within the U.S. Social work code of ethics includes service, social justice, and competence. It is vital for social workers to be educated on certain barriers that minorities may face. It is also vital for social workers to increase support for Hispanic or Latino populations in order to increase quality care, especially for mental health.

Purpose

- The primary purpose of the present study was to examine if mental health facilities that offer Medicaid, mental health treatment in Spanish, a sliding fee scale, and no charge for services have a greater number of Latino patients than facilities that do not offer the aforementioned.

Research Question

- Do facilities that offer Medicaid, mental health treatment in Spanish, sliding scale, or no charge for services have a greater number of Latino patients?

Hypothesis

- Facilities that offer Medicaid, treatment in Spanish, sliding fee scale, or no charge for treatments will have a greater number of Latino patients than those facilities that do not offer those services.

Literature Review

- Other studies that examine the barriers that Hispanics or Latinos face when accessing mental health services and how facilities that offer certain resources have a greater number of Hispanic or Latino patients.
- Barriers included treatment language, cost, and financial assistance.
- The Ecological Systems Theory relates to this study because there are various levels (micro, mezzo, macro) that prohibit Latinos from accessing and continuing mental health care in the United States.

Methods

Research Design

- The present study uses data from The National Mental Health Services Survey (N-MHSS), which is a cross-sectional quantitative study that uses an annual survey that was conducted from June 2010 to January 2011
- The survey consisted of basic data that includes the number and characteristics of the multiple mental health treatment providers in the U.S.
- The purpose of the N-MHSS is to assess the amount and degree of services provided in government, non-profit, for-profit, and private mental health facilities.

Sample

- A sample size of n=10,374 mental treatment facilities across the United States.
- The hospitals that were included in the study provided services throughout 50 states, the District of Columbia, and United States territories.
- From the n=10,374 facilities, a total of n=9,139 facilities provided basic facility information, service characteristics, and client numbers.
- The remaining n=1,235 facilities did not provide service characteristics but were still included in the study.
- Survey conducted from June 2010 to January 2011

Measures

- The N-MHSS utilized a 10-page 36 question survey provided to mental health care facilities. The survey questions asked about facility type, primary treatment focus, facility treatment characteristics, facility payment methods, and client demographic characteristics.

Independent Variables:

Medicaid
Treatment in Spanish
Sliding Fee Scale
Offer Treatment At No Charge

Dependent Variables:

Total Hispanic Or Latino Hospital Inpatients
Total Hispanic Or Latino Residential Care Clients
Total Hispanic Or Latino Outpatients

Results

- A series of Mann-Whitney U tests were also conducted to test the research hypotheses and provide inferential analysis data.
- Descriptive and inferential analysis was done to test the relationship between facilities with Medicaid, treatment in Spanish, sliding fee scale, or no charge for treatments having a greater number of Latino patients.
- Hospitals that offered Medicaid did not have significantly more Latino or Hispanic patients than hospitals that did offer Medicaid
- Hospitals that offered treatment in Spanish did have a higher number of Latino or Hispanic patients than hospitals that did not offer treatment in Spanish.

Results Continued

- Hospitals that utilized a sliding fee scale had a lower number of Hispanic or Latino residential patients than hospitals that did not. However, Hospitals that utilized a sliding fee scale had a higher number of Hispanic or Latino inpatients and outpatients than hospitals that did not offer a sliding fee scale.
- Hospitals that offered treatment at no charge had a higher number of Hispanic or Latino inpatient and outpatients, but not residential care patients when compared to hospitals that did not offer treatment at no charge.

Discussion

- The present study found a significant relationship between certain services offered at mental health facilities and a greater number of Hispanic or Latino patients. For example, treatment provided in Spanish, usage of sliding fee scales, and offering treatment at no charge showed statistically significant differences in regard to an increase in Latino patients than facilities that did not offer those services. However, facilities that offered Medicaid showed statistically significant differences depending on what type of Latino patients it was offered to.

Implications for Research, Practice, and Policy

- It is also vital for social workers to increase support for Hispanic or Latino populations in order to increase quality care, especially for mental health. Social workers across the United States need to understand cultural factors and barriers that influence the way that certain populations access mental health treatment. Influences that prohibit and or encourage Latino populations in accessing mental health care can provide social workers with a better understanding on how to advocate or assist Latino populations in accessing mental health care.

Strengths and Limitations of the Study

- Strengths include the use of a diverse and nationwide sample of facilities that offer mental health to patients.
- The inclusion of multi-site facilities increases the representation of the nation. Despite the study strengths, the study has several limitations.
- The first limitation is that the present study is cross-sectional which means that no inference of causality can be made.
- Another limitation is that the study was voluntary which means that facilities that wanted to participate did and the ones that did not, did not send their data and information.

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