

Substance Use in Hispanic and Latine Communities: Trends, Barriers, and Strategies to Improve Access and Services

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HISPANIC/LATINO
BEHAVIORAL HEALTH
CENTER OF EXCELLENCE



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The Hispanic/Latino Behavioral Health Center of Excellence recognizes the complexities associated with gender and ethnic identification as well as the right of all individuals to self-identify. The Center uses the term Latine with the intention of both facilitating a fluent reading and pronunciation and supporting an inclusive and respectful language. Latine is a gender-neutral form of the word Latino that uses the letter e at the end, an idea native to the Spanish language.

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Institute of Research, Education, and Services in Addiction (IRESA)

The Institute of Research, Education, and Services in Addiction (IRESA) of the Universidad Central del Caribe leads the National Hispanic and Latino MHTTC. The Center serves as a national subject matter expert and a key resource for the workforce and communities seeking to address mental illness prevention, treatment, and recovery support to reduce health care disparities among Hispanic and Latino populations across the United States and its territories. In partnership with state and local governments, mental health providers, consumers and family organizations, Hispanic stakeholders, Substance Abuse Mental Health Services Administration (SAMHSA) regional administrators, and the MHTTC Network, the Center seeks to accelerate the adoption and implementation of mental health-related evidence-based practices.

Hispanic/Latino Behavioral Health Center of Excellence

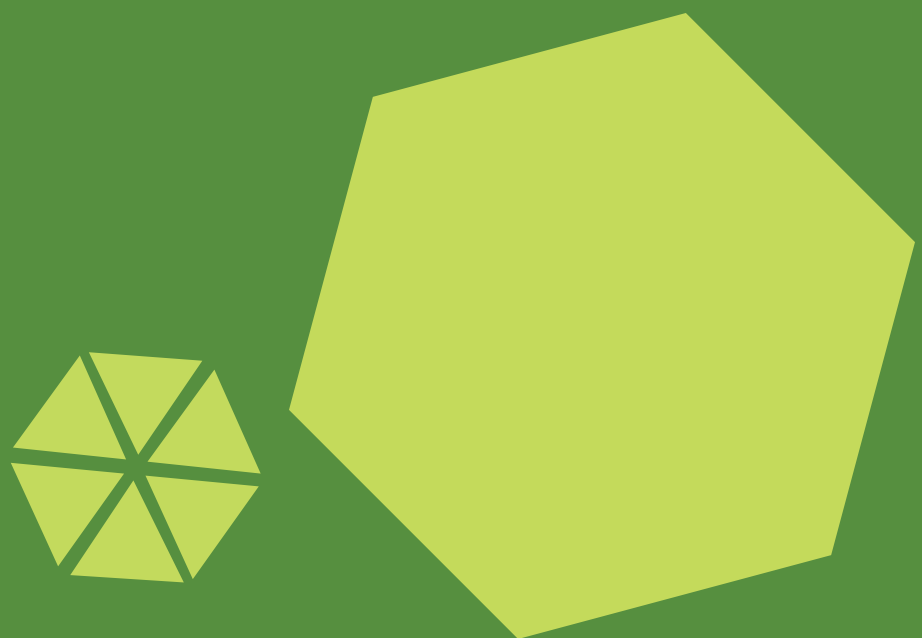
Through funding from the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration's Office of Behavioral Health Equity, our Center of Excellence is established to advance the behavioral health equity of Latine communities through the development and dissemination of culturally-informed, evidence-based behavioral health information, provision of training and technical assistance and directed support to expand the behavioral health workforce that serves Latine communities.

We serve as a resource for mental health and substance use providers, primary care providers, community-based and faith-based organizations, research institutions, Hispanic and Latine-Serving Institutions (HSIs) of higher education, peer and recovery support service providers, as well as state, regional, local, and federal entities. Our outreach also encompasses the general public, including Hispanic and Latine individuals, families, and communities, as well as persons with lived experiences. Our mission is to advance and support the sustainability of behavioral health equity by promoting community driven, culturally grounded and person-centered prevention, intervention, multiple pathways of recovery, and recovery supports for diverse Hispanic and Latine communities.



Table of Contents

Overview.....	5
Current Substance Use Trends and Statistics among Hispanics.....	6
Barriers and Resources for Accessing Substance Use Disorder Treatments in Hispanic Populations.....	8
Cultural Values and Substance Use in Hispanic Populations.....	9
Culturally Integrated Practices and Intervention Models for Hispanic Communities.....	10
References.....	11



Overview

This booklet offers an overview of substance use trends within Hispanic and Latine communities in the United States, focusing on patterns, outcomes, and disparities in care. It also addresses cultural, linguistic, and structural barriers affecting access to substance use disorder treatments and highlights community-driven, culturally integrated approaches which can help address these challenges.



Current Substance Use Trends and Statistics among Hispanics

Substance use trends among Hispanic communities in the United States show unique patterns influenced by socioeconomic, cultural and demographic factors. While the overall rates of substance use disorder in Hispanics are slightly lower compared to the general U.S. population, there are notable variations in the types of substances used and the prevalence among different subgroups within the Hispanic community including by age, acculturation and nationality.

General Trends:

- Nearly 9 million Hispanic individuals, 17% of the total Hispanic population in the U.S, have a past year substance use disorder (SUD).¹
- The rates of substance use among Hispanic communities mirror those of the broader U.S. population, with a marginally lower incidence of substance use disorders.
- Hispanics exhibit lower lifetime illicit drug use compared to other ethnic groups but have comparable rates of alcohol use disorder and binge drinking to European Americans and slightly higher than African Americans.¹

Youth Substance Use:

- A 2017 Centers for Disease Control and Prevention survey revealed that Hispanic youth had a higher prevalence of illicit drug use compared to the overall high school population and other racial groups.²
- Among all the Hispanic age groups, Hispanic young adults (18-25) are the most likely to have a past year substance use, alcohol use or drug use disorder, with 27.4% of Hispanic young adults presenting a SUD.¹
- Among Hispanic young adults, 38% used illicit drugs and 35.9% used marijuana in the past year. ¹

Subgroup Differences:

- Puerto Ricans have the highest rates of recent illicit drug use and marijuana consumption among Hispanic Americans and are the heaviest drinkers within this demographic.³
- Cultural factors, such as early initiation into drinking and lower stigma associated with alcohol use, contribute to the high rates of alcohol consumption among Puerto Ricans.⁴

Substance Use and Mental Health:

- Hispanic adults with mental illnesses are more likely to engage in binge drinking, smoking (both cigarettes and marijuana), illicit drug use, and misuse prescription pain relievers.



Barriers and Resources for Accessing Substance Use Disorder Treatments in Hispanic Populations

Hispanic populations in the United States face numerous cultural, linguistic, and structural barriers in accessing substance use disorder (SUD) treatments. These barriers contribute to significant disparities in care and highlight the need for culturally relevant resources to facilitate access and adherence to treatment.

Treatment Disparities:

- Nearly 90% of Hispanic individuals with a SUD did not receive treatment, underscoring significant disparities in access and care.¹
- Of the 7.8 million Hispanics with a SUD who did not receive treatment, nearly all (93.4%) perceived they did not need treatment. This may be influenced by stigma, perceived lack of social support from family, and avoidance of specialty treatment due to cultural factors.^{1, 5}

Seeking Help and Diagnosis Challenges:

- Hispanics are more likely to seek help for mental health disorders from a primary care provider rather than a mental health specialist.
- In 2022, more than 1 in 4 Hispanic adults ages 18–64 (27.6%) lacked health insurance, further complicating access to care.⁶
- Mental health problems can be complex to identify in this population, as Hispanics often focus on physical rather than psychiatric symptoms during doctor visits.

Language and Communication Barriers:

- Language and communication issues can lead to dissatisfaction, poor comprehension and adherence, and a lower quality of care.
- Effective communication style and cultural competence are crucial for patient retention in treatment.

Culturally Relevant Services:

- The availability of culturally relevant services has been shown to increase Hispanic service utilization and treatment effectiveness.
- Compatibility between the patient and therapist, mutual trust, and therapeutic efficacy are essential for successful treatment outcomes.

Cultural Values and Substance Use in Hispanic Populations

Hispanic populations in the United States exhibit a range of cultural values and practices that influence perceptions and behaviors toward substance use. Understanding these factors is crucial for developing effective prevention and treatment strategies.

- **Diverse Hispanic Heritage and Substance Use Patterns:** The Hispanic community is not monolithic; it comprises various subgroups with distinct cultural backgrounds, leading to variations in substance use patterns across different heritage groups and locations.
- **Acculturation, Assimilation, and Substance Use:** Acculturation and assimilation can significantly impact substance use behaviors within Hispanic communities. Higher rates of substance use are observed among Hispanics who demonstrate greater degrees of acculturation as are U.S.-born Hispanics, those who have lived in the U.S. for longer periods, and those who primarily use English.
- **Cultural Identity and Substance Use:** Hispanics with a weaker connection to their ethnic and cultural identity are at a higher risk for illicit drug use and developing substance use disorders. A strong cultural connection can serve as a protective factor against substance misuse.
- **Religious and Spiritual Protective Influences:** Religious and spiritual beliefs in many Hispanic communities discourage the use of alcohol and illegal substances, influencing health behaviors and potentially reducing substance use.
- **Cultural Norms and Substance Use:** Cultural values that emphasize respect for others, particularly based on age, gender, and authority, can protect against substance use, especially in children who are guided by parental advice against drug use. However, these values can also pose a risk if children admire and seek to emulate adults who use substances.



Culturally Integrated Practices and Intervention Models for Hispanic Communities

To effectively address behavioral health needs within these populations, it is essential to implement culturally integrated practices, intervention models and research efforts. approaches not only enhance the relevance and effectiveness of services but also foster trust and engagement within the community. The following are strategies for integrating community driven and culturally oriented approaches to behavioral health interventions for Hispanic communities.

- **Peer-to-Peer Support and Community Capacity Building:** Implement peer support and mentoring programs to leverage shared experiences and foster supportive relationships within the community. Additionally, focus on community capacity-building strategies that connect community-based strengths with health improvement efforts to enhance Hispanic behavioral health outcomes.
- **Educational and School-Based Programs:** Establish mental health programs within academic and school settings to provide accessible support and resources for Hispanic youth, ensuring early intervention and ongoing care.
- **Precision Medicine and Research Representation:** Utilize publicly available genomic and epigenomic tools to advance precision medicine tailored to Hispanic populations. Prioritize inclusive research initiatives that focus on underrepresented Hispanic groups to ensure diverse and accurate data for better health outcomes.
- **Community Involvement in Treatment and Policy Development:** Create policies and procedures that facilitate active community involvement in treatment settings, ensuring that care is culturally relevant and effective. This includes involving the community in decision-making processes and tailoring treatments to meet their specific needs.
- **Multilingual Outreach and Educational Engagement:** Develop and distribute outreach and educational materials in multiple languages to better serve diverse Hispanic communities. Do so by engaging in local events to raise awareness of available services, build trust and relationships, and gain insights into local cultural practices.
- **Monitoring Demographic Trends:** Periodically analyze community demographic trends to adapt services and interventions to the evolving needs of Hispanic populations. This ensures that health services remain relevant and effective as the community changes over time.



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