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Lost in America

Cultural immersion tied to rise in meth addiction among Hispanic youth By Victoria Sweeney

BY VICTORIA SWEENEY



The American dream is turning deadly for some Latino children.

Once considered at low risk, they now are outpacing their white and African-American peers in methamphetamine use.

One reason may lie in their adoption of American lifestyles and habits.

“People who are very traditional in their culture still have strong ties to family and the church and are less likely to use drugs,” says Domingo Rodriguez, executive vice president of Chicanos Por La Causa, Inc. (CPLC), which provides drug prevention and counseling programs statewide and other social services.

“I think some of that gets lost when they become acculturated,” says Rodriguez, who suffered with heroin addiction as a teen. “They are dealing with two cultures at the same time.”

The trend is increasingly common in Arizona.

The state now ranks third in the nation with 8.8 percent of Latino adolescents reporting they have tried meth, according to the national Youth Risk Behavior Surveillance study of 2005. Nevada and Arkansas hold the top two spots.

The cause for this alarming increase is unclear, says Felipe Gonzalez Castro, an Arizona State University psychology professor and a leading researcher in illicit drug use among Hispanic youth.

But initial research shows certain factors may put adolescents at risk – breakdown of the family unit, movement away from cultural traditions, and identity conflicts among children from parents of mixed racial or ethnic backgrounds, said Castro, who is working to develop research-based public policies to address the problem in Arizona.

Disparity in treatment

Access to treatment remains a huge dilemma – particularly in rural areas.

Only a fraction of eligible Hispanics are enrolled in the state's health care system for the poor, the Arizona Health Care Cost Containment System, says Rodriguez, who adds that there also is a lack of culturally relevant programs to treat meth addiction.

“One size fits all doesn't work,” Rodriguez says. “Cultural competency in treatment is very important. We need strategies that are efficient with particular communities.”

CPLC recently held its third policy summit with state, county and other mental health officials to press for action in addressing the disparities.

Rodriguez understands addiction firsthand.

Growing up in the Bronx, he became a teenage heroin addict. At 19, he was paroled from a three-year sentence for possession. Two years later, he helped start a methadone clinic. That was the kick-start of a 36-year career in the substance abuse, mental health and social services fields.

Throw-away mentality persists

Too often, young addicts in Arizona land in jail instead of treatment facilities.

“Governments believe they can arrest away the problem,” says Bill Brown, a mental health consultant who sits on two of the Governor's meth task forces. “Over 80 percent of the public prefers treatment over jail.”

Court time and incarceration costs taxpayers seven times the expense of caring for troubled children in community-based programs, he says.

Some of the blame lies with insurance companies. Most plans don't provide adequate coverage for primary, extended and transitional care that is essential to treat meth addiction among adolescents, he says.

Federal legislation now before Congress – The Paul Wellstone Mental Health and Addiction Equity Act of 2007 – would prohibit insurance companies from discriminating against people suffering from addiction and mental illness.

Building coalitions to eradicate use

Meanwhile, Arizona is taking aggressive measures to attack meth on several fronts.

In September, it received \$8.3 million in federal grants to fight drug abuse statewide. The widespread Arizona Meth Project targets young users – including radio, television and ad campaigns in Spanish. Companies like Cox Communications sponsor activities to support healthy lifestyles among all teenagers.

While it's too soon to measure the impact, there are signs of progress. A prevention program started in 2003 within the Creighton Elementary School District boundaries in central Phoenix is seeing a “steady decline” in drug and alcohol use among fifth- through seventh-graders, says Michael Valdez, a prevention and education specialist in the program.

“We focus on coalition building to establish change,” Valdez says. “Enforcement alone or prevention alone or treatment alone doesn't work.”

Valdez and other staff work with students, families and community members five days a week, full-time. They host community meetings, hold parent workshops and work one-on-one with children.

“Education must start in elementary school because by the time you get to high school, you're doing intervention,” Valdez says.

Call to parents

Many Hispanic parents – and children – continue to remain unaware of the meth's deadly potency.

“What I've seen is that a lot of people don't realize how addictive and how potent it is,” says Erasmo Rodriguez, an Adult Outpatient Clinician at the Centro De La Familia clinic in west Phoenix. “A lot of kids have access to it in the schools or street. They try it for the first time and get addicted.”

He sees firsthand what meth does to families: divorce, financial problems, criminal activity, health, mental health problems, dropping out of school, and loss of jobs.

Prevention can be as easy as talking to children, mental health experts say.

“There's nothing more powerful than an active parent,” says Domingo Rodriguez, of CPLC. “Parents have to be

able to develop relationships with their children in elementary school so children can come to them when they're caught in a bind."