

## Engaging Ecuadorian, Peruvian, and Nicaraguan Indigenous Populations in Mental Health Treatment

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### Facts of Ecuadorian, Peruvian, and Nicaraguan Indigenous Populations Living in the United States

- Ecuadorians are the 10th-largest immigrant population from Latin America living in the United States. Peruvians are in 11th place, and Nicaraguans in 12th place.
- Even though the three nation-states consider themselves multinational, multilingual, and multicultural, indigenous populations continue to experience discrimination, marginalization, and high-poverty rates.
- High rates of poverty are seen between indigenous and Afro-descendant populations compared to mestizx (mixed of indigenous and European heritage).
- The main reasons for migration include the destruction of their territories, the assassination of leaders, and widespread violence against indigenous communities, which causes psychological distress [1].



### **Indigenous Populations from Ecuador Living in the United States**

- Ecuador has a population of over 17 million, 74% Roman Catholic, 11% Protestants, 8% atheist and agnostic.
- About 71.9% of Ecuadorians are considered mestizx, 7% Amerindian, 7% Afro-Ecuadorians, and 12% White people of European descent.
- Ecuador recognizes 14 indigenous nations in three regions: Amazon, Andean, and Coast. Major indigenous nations are Kichwa, Shuar, Epera, and Manta.
- Around 4.1% of the population speaks Quechua.

### **Indigenous Populations from Peru Living in the United States**

- Peru has a population of over 32 million, 60% Roman Catholic, 14.6% Protestant, and 4% non-religious.
- Peruvians self-identified as mestizx, (59.5%), 27.2% Amerindian, 1.6%, Black/Mulattx, 4.9% White, and 6.7% other.
- Officially, Peru recognizes 55 indigenous nations and 48 languages, 82.9% speak Spanish, 13.6% Quechua, 1.6% Aymara, 0.3% Ashaninka, and 0.8% other indigenous languages.

### **Indigenous Populations from Nicaragua Living in the United States**

- Nicaragua is one of the poorest countries in Central America.
  - Its population is close to 7 million, and 50% considered themselves Roman Catholic.
  - About 69% of Nicaraguans are considered mestizx, 17% White, 9% Black, and 5% Amerindian, including Chorotegas, Cacaopera, Ocanxiu, Nahua, Miskitu, Sumo, and Rama.
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### **How to Increase Engagement with Indigenous Families, Children, and Youth**

- Increase cultural awareness, knowledge, and skills of indigenous populations at the individual, program, and organizational levels [2]. Several recommended books include:
    - Latinx Immigrants Transcending Acculturation and Xenophobia.
    - Indigenous of South America- inequalities in mental health care. Culture and Mental Health- a Comprehensive Textbook.
    - Psychiatrists and Traditional Healers: Unwitting Partners in Global Mental Health.
  - Build direct partnerships and collaborations with indigenous populations' organizations. For example: Runajambi - Institute for the Study of Quichua Culture and Health, <http://www.runajambi.org/index.html>
  - Develop intercultural services, such as holistic treatment choices using local traditional healers [1]:
    - In the development and design of campaigns about physical health and mental health promotion, education, and prevention.
    - In the delivery of family-centered therapy interventions.
    - In the formulation of mental health policies [1]. For more information, [click here](#).
  - Organize meetings with indigenous leaders from Ecuador, Peru, and Nicaragua to explore the main mental health needs and feasible ways to tackle those needs.
  - Develop resources about mental health issues and idioms of distress in several languages using different levels of health literacy [3].
  - Implement the World Health Organization approach of primary care teams.
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## How to Increase Engagement with Indigenous Families, Children, and Youth (cont.)

- Provide flexible and culturally-sensitive mental health services. Focus on client's values, language, notions of illness causations, and treatment preferences [1].
- During migration, indigenous population faced adverse experiences, such as extreme poverty, dispossession, violence, and discrimination [1]. It is recommended to:
  - Discuss topics related to trust, credibility and legitimacy [2].
  - Explore the indigenous Identity and how they self-identify [4].
  - Explore family roles, behavior, dynamics and rules [2].

## References

1. Incayawar, M. (2009). Future partnerships in global mental health foreseeing the encounter of psychiatrists and traditional healers. In M. Incayawar, R. Wintrob, & L. Rouchard, (Eds.). *Psychiatrists and Traditional Healers: Unwitting Partners in Global Mental Health*. Wiley-Blackwell, 79-91.
2. Substance Abuse and Mental Health Services Administration. (2014). A Treatment Improvement protocol: Improving Cultural Competence. Author.
3. Rios, M. (2017). Engagement of Latino mental health: voices from professionals in the Minnesota community [Master's Dissertation Catherine University]. DOI: [https://sophia.stkate.edu/msw\\_papers/780](https://sophia.stkate.edu/msw_papers/780)
4. Lopera, J. S. & Rojas, S. (2012). Salud mental en poblaciones indígenas. Una aproximación a la problemática de salud pública. *Medicina UPB*, 31(1), 42-52.