Examining the Market Potential for Mental Health Care Needs for Elderly Latinos in Washington State

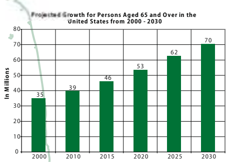
Marketing Scenario and Background

The United States along with several other countries throughout the world have just experienced their first wave of "Baby Boomers" transitioning into 'elderly' status. Baby Boomers are classified as those who were born post World War II between the years of 1946 - 1964. The number of elderly persons is expected to increase from 35 million to 70 million in the next 25 years. The large number of elderly individuals in this group poses new challenges to American society and especially to the health care industry. We will have to find ways to accommodate existing health care facilities, services, and treatments to the elderly's growing numbers.

Rank	State	2006 Population	2000 Population	# Change 2000-2006	% Change 2000-2006
1	California	13,087,981	10,928,470	2,159,511	19.8
2	Texas	[illegible]	[illegible]	[illegible]	26.0
3	Florida	[illegible]	[illegible]	[illegible]	36.2
4	New York	3,139,787	[illegible]	284,796	[illegible]
5	Illinois	[illegible]	[illegible]	[illegible]	[illegible]
6	Arizona	1,796,643	1,292,152	504,491	[illegible]
7	New Jersey	1,360,784	1,117,604	243,180	[illegible]
8	Colorado	927,453	735,769	191,684	26.1
9	New Mexico	874,125	759,343	114,782	15.1
10	Georgia	695,521	434,375	261,146	60.1
11	Nevada	605,059	393,397	211,662	53.8
12	North Carolina	595,376	377,084	218,292	57.9
13	Washington	586,020	444,718	141,302	31.8
14	Pennsylvania	522,280	399,736	122,544	30.7
15	Massachusetts	509,219	428,530	80,689	18.8
16	Virginia	465,545	333,482	132,063	39.6
17	Michigan	398,935	330,952	67,983	20.5
18	Connecticut	[illegible]	[illegible]	[illegible]	20.3
19	Oregon	378,444	[illegible]	[illegible]	38.5
20	Maryland	341,261	[illegible]	[illegible]	47.7

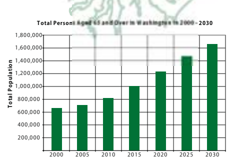
Change in the Hispanic Population by State: 2000 and 2006

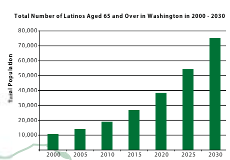
Source: Pew Hispanic Center tabulations of 2000 Census PUMS & 2006 American Community Survey (1% PUMS)



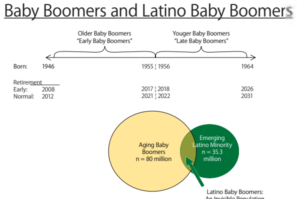
One area in the health care industry that has been recently receiving more attention, is that of mental health care especially among the elderly. Even though almost everyone aged 65 and over has some form of health care (i.e. Medicare, Medicaid), the issue of providing mental health care has not been widely recognized as it should. Meaning that there are fewer choices for diagnosis and treatment. The number of older adults with mental illness in the United States will double from 7 million to 14 million for the years of 2000 to 2030, while the population of minority elderly adults is expected to increase from 15% - 25%.

One ethnic group that is experiencing large increase is that of Latinos, who are the fastest growing ethnic group in the United States and will continue to be over the next several decades. Despite their growing numbers they have been overlooked as a segment of the elderly population.



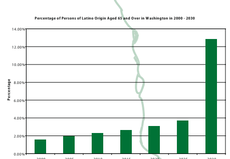


Baby Boomers and Latino Baby Boomers



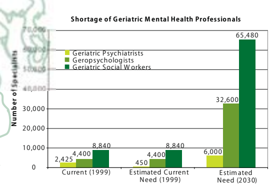
Older Baby Boomers
"Early Baby Boomers"
Youger Baby Boomers
"Late Baby Boomers"
Born: 1946 | 1955 ¦ 1956 | 1964
Retirement
Early: 2008 | 2017 ¦ 2018 | 2026
Normal: 2012 | 2021 ¦ 2022 | 2031
Aging Baby Boomers n = 80 million
Emerging Latino Minority n = 35.3 million
Latino Baby Boomers: An Invisible Population n = 8 million

Source: Zachary D. Gassoumis, Kathleen H. Wilber, & Fernando Torres-Gil, 2008



Marketing Goals

This analysis will attempt to identify the market potential for mental health needs of elderly Latinos in Washington State. Information regarding facilities and opportunities for Washington State's elderly Latinos will be examined to aid in this determination. This analysis will help in promoting the need for elderly services with attention focused on mental health issues that are often associate with this largely understudied cohort. This study will also help the State of Washington promote demand for services that cater to its elderly Latino populations and the overall economy of Washington while improving the state's residents' lives and livelihoods.



Shortage of Geriatric Mental Health Professionals
Geriatric Psychiatrists
Geropsychologists
Geriatric Social Workers
Number of Specialists
2,425
4,400
8,840
450
4,400
8,840
6,000
32,600
65,480
Current (1999)
Estimated Current Need (1999)
Estimated Need (2030)

Methods and Data

To aid in establishing the market potential for elderly Latinos, decennial census data from 2000, data provided by the Washington State's Office of Financial Management (OFM), and the United States Bureau of Labor Statistics were manipulated to make the case that there in fact is a strong need / demand for medical professionals specializing in mental health who can effectively manage elderly Latino patients. The information used in this study was available at the county level and this is how data has been aggregated and presented in this document. The Washington State Department of Health has identified communities and areas that have a health profession area along with underserved areas throughout Washington.

Quick Statistics on Washington State's Health Facilities

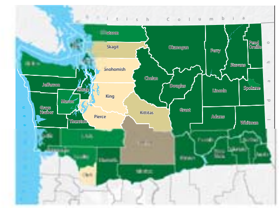
2,666 Adult Family Homes
547 Boarding Homes
253 Nursing Homes
175 Group Care Facilities
156 Community and Migrant Health Centers
130 Rural Health Clinics
119 Hospitals (1,035 beds for psychiatric care)
50 Health Service Corps Providers

Barriers to Mental Health Care for Latinos

Latinos are less likely to receive care for depression and are even less likely to receive quality depression care (Schoenbaum, Miranda & Sherbourne, 2004).

Among Latinos with a mental disorder, less than one in 11 contacts a mental health specialist, while fewer than one in five contacts a general health care provider.

In addition, among Latino immigrants with mental disorders, fewer than 1 in 20 uses services from a mental health specialist, while less than 1 in 10 uses services from a general health care provider (A Report of the Surgeon General, 2001). In a study using the Los Angeles-Epidemiologic Catchment Area Sample, Mexican Americans with mental disorders reported using both health and mental health services at a lower rate than non-Hispanic Whites (11.1% versus 21.7%, respectively) in the six months prior to the research interview (Hough, Landsverk & Karno, 1987). Similarly, in a study conducted in Fresno, California, only 8.8% of Mexican Americans with mental health disorders during the 12 months prior to being interviewed used mental health specialists (Vega, Kolody & Aguilar-Gaxiola, 1999). Furthermore, there is a great problem with recidivism in mental health care with more than 70% of Latinos who do access mental health services not returning after their first visit (Aguilar-Gaxiola, 2005). The underutilization of mental health services coupled with low rates of antidepressant medication use can be attributed to the prevalence of chronic depression among Latinos more than any other group (Aguilar-Gaxiola, 2005).

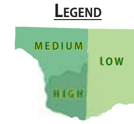


Designation Type	General Requirements
Geographic	Everyone has difficulty getting health care services
Population	Low-income, migrant, or homeless populations have difficulty getting care
Facility	A facility not in a designated area, but who serves residents from a designated shortage area
Federally Recognized Tribe	American Indian and Alaska Native
Correctional Facility	Medium or maximum security facility

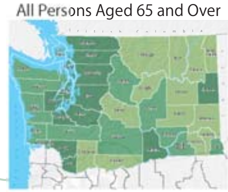
The map above displays the Washington State Department of Health's communities and areas that have been identified as experiencing a health profession area shortage along with underserved areas throughout Washington. Of the 39 counties, 25 fall under the category of 'Geographic', where everyone has difficulty getting health care services. Whereas 6 counties and an area near Spokane are 'Population' designated or where low income, migrant, or homeless populations have difficulty getting care. Totalling almost 80% of Washington State resident lacking adequate access to health care.

The following map series was created from the Decennial Census Data (2000) and are classified by 'HIGH', 'MEDIUM' and 'LOW' with populations normalized by each county's total land area.

Legend



All Persons Aged 65 and Over



All Latinos in Washington

All Latinos Aged 65 and Over

Latinos Who Did Not Finish High School

Median Household Income for Latinos Aged 65 and Over

Latinos Aged 65 and Over Who Are Below Poverty

Linguistically Isolated Spanish Speakers

All Persons Aged 65 and Over With Mental Disability

NAICS Code	Category Name	Location Quotient
623312	Homes for the elderly	1.94
62142	Outpatient mental health centers	1.82
621420	Outpatient mental health centers	1.82
6233	Community care facilities for the elderly	1.72
62331	Community care facilities for the elderly	1.72
623311	Continuing care retirement communities	1.52
62412	Services for the elderly and disabled	1.33
624120	Services for the elderly and disabled	1.33
[illegible]3	Nursing and residential care facilities	0.91
[illegible]133	Offices of mental health practitioners	0.61
[illegible]1330	Offices of mental health practitioners	0.61
[illegible]32	Residential mental health facilities	0.53
[illegible]1112	Offices of mental health physicians	0.31

Source: United States Bureau of Labor Statistics, Retrieved July 2008

Location quotients (LQ) are a measure that is familiar to regional labor economists as a way to readily compare the industrial activity levels among different areas of the country. In general, location quotients are ratios that compare the concentration of a resource or activity, such as employment, in a defined area to that of a larger area or base. For example, location quotients can be used to compare State employment by industry to that of the nation (as was done for the above); or employment in a city, county, metropolitan statistical area (MSA), or other defined geographic sub-area to that in the State.

If LQ = 1, then the industry has the same share of its area employment as it does in the reference area. An LQ > 1 indicates an industry with a greater share of the local area employment than is the case in the reference area. For example (assuming the U.S. as the reference area), Las Vegas will have an LQ > 1 in the Leisure and Hospitality industry because this industry makes up a larger share of the Las Vegas employment total than it does for the country as a whole.

Conclusions and Recommendations

From this analysis it has been made apparent that there is a large growing elderly Latino population in the United States and especially in the State of Washington that will keep up until roughly 2030 when the 'Baby Boomer' effect will begin to decline. The state has the opportunity to provide the much needed services and infrastructure to the aging Latinos. It has been shown that the location quotients for the state make it an excellent area to further pursue efforts to provide for the elderly Latino population. Although it is also made apparent that the State of Washington is lacking in mental health care facilities and personnel. Washington needs to work with agencies to help increase their locations quotients in these areas and not only create a stronger more diverse economy, but also provide much needed services to those in need. One next stepwould be to look at the block group level to better create specific geograpihic campaigns that would encourage younger people to enter the mental health care field.

Sources: *United States Census Bureau; Bureau of Labor Statistics; Washington State Office of Financial Management; Washington State Department of Health; American Geriatric Society; National Congress for Mental Health*

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