Therapy Outcomes: Difference between Latino and Non-Latino Foster Youth Alicia G. Escobedo, Corie E. Schwabenland, Rosana M. Aguilar, Saralyn C. Ruff University of San Francisco

Children in foster care experience a range of psychological symptoms due to their experiences with maltreatment. Latinos are a growing population within foster care, reflective of their growing numbers in the United States. Latinos often do not seek out mental health services and many face obstacles related to language, transportation, and lack of family support.

The current study describes treatment parameters of Latino and non-Latino foster youth receiving long-term, pro-bono psychotherapy through a non-profit. Telephone interviews were completed with the youths' therapists at the start and end of treatment. Among the completed cases, nine were identified as Latino patients. An additional nine patients were randomly selected for comparison from 88 non-Latino cases.

Therapists (n = 18) were predominately female (77.8%), white (100%) and held doctorates (76.7%). Latino patients were on average 14.36 years old (SD = 6.45) and non-Latino patients were on average 10.56 years old (SD = 5.73) at the start of treatment. The non-Latino subset included African American (55.6%), White (22.2%) and Multi-ethnic (22.2%) patients.

For all patients, repeated measures ANOVAs revealed significant decreases in the severity of depression F(1,1) = 24, p = .000, anxiety F(1,1) = 23.68, p = .000, dissociative symptoms F(1,1) = 13.52, p = .002, sleep problems F(1,1) = 6.011, p = .027, and school problems F(1,1) = 7.67, p = .015 over the course of treatment. When comparing between ethnic groups, therapists reported school problems F(1,1) = 5.75, p = .031 at a significantly lower rate in Latinos compared to non-Latinos. The average length of treatment for Latinos (M = 1.67 years, SD = .99) was about a year less than non-Latinos (M = 2.73 years, SD = 5.74). Therapists reported a higher frequency of resistance by the patient and a lack of support from biological parents as obstacles to treatment for Latino patients.

Future research should take into consideration how therapist bias, patient resiliency, cultural competency, and protective factors relate to symptom severity and treatment outcomes. This analysis is limited by a small sample size; however, it reflects the mental health needs and cultural experiences of the exponentially growing Latino population.