The 2013 International Conference on

Aging in the Americas

Demographics of Aging in the Americas: How Should We Prepare for an Aging Population in Mexico and the U.S.A.?

September 17-19, 2013
The University of Texas at Austin
SINCE THE LIVES TIMES BEFORE MEMORY, la mariposa monarca (or the monarch butterfly) journeys through the Americas to sustain its life. In cool, clear skies of October, indigenous people reverently welcome returning souls on wings aloft, reuniting in central Mexican forests and valleys. So the cycle continues from beginnings unknown to no ends...

The Aging in the Americas Conference selected la mariposa to symbolize the threads that weaves across the Americas in understanding and reverently preserving the dignity and integrity of life’s cycle that knows no beginnings or ends. Roberto Salas was commissioned by the Conference to create la mariposa. La mariposa was drawn from pre-Columbian images and images from industrialized and postindustrialized Americas.

Salas is a Chicano artist who received his Masters in Fine Arts from the University of California, San Diego (UCSD). A Buena Vista native, he is the Director of Centro Artistiaco y Cultural, a non-profit organization, dedicated to providing the community of Buena Vista in El Paso, Texas with educational services relating to the cultural life of the community.

Desde los tiempos antes de la memoria, la mariposa monarca viaja a través de las Américas para mantener su vida. Durante los frescos y clara abril de octubre, indígenas reverentemente dan la bienvenida a las almas que regresan con alas, reuníndose en valles y bosques de México central. Así el ciclo continúa desde orígenes desconocidos sin fin... La serie de conferencias acerca del Envejecimiento en las Américas (CAA - por sus siglas en Inglés) eligió la monarca para simbolizar los hilos que nos unen a través de las Américas en la comprensión y preservación de la dignidad y la integridad del ciclo de vida que no conoce inicio ni extremo. Roberto Salas fue comisionado por la CAA para crear la mariposa. La mariposa fue tomada de imágenes precolombinas y de los países industrializados y no-industrializados de las Américas.

Salas es un artista Chicano que recibió su Maestría en Bellas Artes de la Universidad de California, San Diego (UCSD). Nacido en Buena Vista, él es el Director del Centro Artistico y Cultural, una organización sin fines de lucro, dedicada a proporcionar servicios educativos relacionados con la vida cultural de la comunidad en Buena Vista en El Paso, Texas.
Welcome to the sixth installment of the Conference Series on Aging in the Americas (CAA). And, welcome to The University of Texas at Austin! This year we come together for a meeting to collaborate, network, mentor students, and exchange ideas for the future of the field of Latino health and aging.

I would like to thank everyone for their participation in the CAA. I am indebted to the dedicated efforts of the 2013 ICAA Organizers and CAA Advisory Group for their involvement in this year’s meeting planning. I also want to extend my sincere appreciation to our sponsors for this year’s activities whose generous contributions helped to make this year’s program possible (listed on the back of the program).

With this in mind, I hope you find the meeting both informative and enjoyable.

JACQUELINE (JACQU) ANGEL
Principal Investigator (NIA-R13, CAA)

July 28, 2013

Congratulations to you and your co-organizers, Fernando Torres-Gill and Alberto Pallari, for assembling an extraordinary conference on Aging in Mexico and the United States. The substantive breadth of the topics to be considered is impressive, and the broad disciplinary representation will ensure comprehensive analysis of the complex political and social dimensions of population aging in both countries. For decades, the U.S.-Mexico bilateral relationship has been lopsided, but our demographic futures are converging in ways not envisioned even a decade ago. Given this deep economic and social ties between the nations, it is paramount to understand how the shared demographic destinies of population aging will unfold in each country and what this portends for their bilateral ties. You, Fernando and Alberto have convened a superb group of scholars to address these questions and many more.

I regret that, due to a change in Princeton’s calendar, I cannot participate directly in the rich conversations that will take place in September, but look forward to joining you and your co-organizers by reading the papers and contributing a chapter to your conference volume.

Sincerely,

MAURICE P. DURING ’22 PROFESSOR OF DEMOGRAPHIC STUDIES

July 28, 2013

Professor Jacqueline Angel,
Co-Organizer
2013 ICAA International Conference on Aging in the Americas

Dear Jacqui,

Congratulations to you and your co-organizers, Fernando Torres-Gill and Alberto Pallari, for assembling an extraordinary conference on Aging in Mexico and the United States. The substantive breadth of the topics to be considered is impressive, and the broad disciplinary representation will ensure comprehensive analysis of the complex political and social dimensions of population aging in both countries. For decades, the U.S.-Mexico bilateral relationship has been lopsided, but our demographic futures are converging in ways not envisioned even a decade ago. Given this deep economic and social ties between the nations, it is paramount to understand how the shared demographic destinies of population aging will unfold in each country and what this portends for their bilateral ties. You, Fernando and Alberto have convened a superb group of scholars to address these questions and many more.

I regret that, due to a change in Princeton’s calendar, I cannot participate directly in the rich conversations that will take place in September, but look forward to joining you and your co-organizers by reading the papers and contributing a chapter to your conference volume.

Sincerely,
Dear Jacqui,

I regret that my obligations at Harvard will prevent me from participating in the 2013 International Conference on Aging in the Americas (ICA). Demographics of Aging in the Americas: How Should We Prepare for an Aging Population in Mexico and the USA have been planned to engage with distinguished and emerging scholars in past ICA installments and look forward to participating in future meetings.

The conference addresses vitally important issues that affect not only the Hispanic population of the United States, but those of all Latin American nations in which the demographic transition took a century or more in Europe is occurring in a few decades. The rapid demographic transition in Mexico has immediate practical implications for both that country and the United States. It is extremely important to educate everyone about the impact that rapid demographic change has on all social institutions. New policies dealing with education, health care, housing, transportation, and more will be necessary to address changing population age compositions.

We currently lack a sophisticated understanding of the impact of rapid aging on minority populations, and the consequences of age differentials among minority and majority groups for the nation as a whole. It is imperative that we identify and develop the most effective and equitable approaches to meeting the unique financial and health care needs of Hispanic families in later life, within the context of what is likely to be a long-term fiscal reevaluation. A conference focused specifically on aging in the population of Mexico and the unique social, political, and economic ties between Mexico and the United States is essential to understanding how aging affects the well-being of both societies in an increasingly globalized economy.

I am certain that your and your colleagues’ work will shed new light on meeting the goals of Healthy People 2020. The paper you are to publish in the Springer Science volume will discuss many critical issues that face us and inform our agenda for research addressing disparities in the health and economic systems of Mexico and the United States.

In closing, let me reiterate my opinion that this conference series is crucial in bringing together leading senior scholars and emerging scholars to develop a critical mass of theoretical and practical work aimed at expanding greatly our knowledge base concerning the consequences of population aging in the Americas.

I wish you a successful conference.

With my best regards,

Julie Powers, MD, MPH, PhD
Dean of the Harvard School of Public Health
T & G Angell Professor of Public Health and International Development
Harvard School of Public Health and Harvard Kennedy School
Harvard School of Public Health
Emerson Building, Rooms 3005
677 Huntington Avenue
Boston, Massachusetts 02115
THE 2013 THEM: DEMOGRAPHICS OF AGING IN THE AMERICAS: HOW SHOULD WE PREPARE FOR AN AGING POPULATION IN MEXICO AND THE U.S.? This theme is major issues related to the changing demographics in Mexico and its impact on the health and financial well-being of aging Mexicans and Hispanics of Mexican origin in the context of the second epidemiologic transition. A large body of research points to a dramatic demographic transformation in Mexico that shows the population relatively young but at the same time the country must address the needs of a rapidly growing elderly population with far more limited resources than the U.S. in the coming years. The United States, with a much older population and a growing fraction of people 85 and over, and a shrinking working-age population, must deal with a much larger old-age dependency burden but with a considerably larger resource base. However, the U.S. and Mexico-bilateral relationships and assumptions have been based on a demographic conventional wisdom that a young Mexico and an aging USA have compatible interests. The conference will address the challenges both countries face in different social, cultural, and economic contexts.

In addition to the invited speakers and keynote lectures, the CAA fosters the development of emerging scholars by sponsoring a peer-reviewed poster session, awards reception, and dinner on Wednesday, September 18. In addition, the mentoring program enhances the skills, knowledge, and experience to prepare emerging scholars to excel as future career paths in the behavioral and social sciences in minority aging with a special emphasis on Hispanic health and Hispanics of Mexican origin. The Emerging Scholar Poster Session and Mentoring Program encourages proposals from all interested graduate students and post-doctoral trainees and is dedicated to maximizing diversity within the Scholar network.

Program Schedule

Tuesday, September 17, 2013 – The University of Texas at Austin

Liberal Arts Building (CLA): Julius Glickman Conference Center

5:00 pm Registration
6:00 – 8:45 pm Welcome Dinner
6:00 pm Welcome & Introduction Remarks

Awards Presentation
Victoria Rodriguez
Rosalba Ojeda, General Consul

Keynote Address Introduction
William Vega

Opening Keynote Address: Apple Pie, Enchiladas and the Age-Race Shift: Young and Aging Latinos in an Aging North America
Jorge Chapa

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6:00 – 8:45 pm Welcome Dinner
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Wednesday, September 18, 2013 – The University of Texas at Austin
Liberal Arts Building (CLA): Julius Glickman Conference Center

7:30 – 8:30 am  Registration & Breakfast
8:30 am  Welcome  Robert Hutchings
8:45 – 10:00 am  Panel Presentation I: Demographic and Economic Implications for Health and Well-being (Perspective) in Mexico and the USA: An Overview
Presider: Mark Hayward
Discussant: Marie Mora
Aging and Retirement Security: The Americas in Comparative Perspective  Jorge Bravo
Latino Immigrants Across the Generations- A Comparative Analysis  James Smith
Pension Reform and Civil Society in Latin America  Ronald Angel
10:00 – 10:15 am  Break
10:15 – 11:30 am  Panel Presentation II: New Data and Methodological Approaches on Aging Research in Mexico and the United States
Presider: Andrés Villareal
Discussant: Flavia Andrade
Alleviating Poverty for Older Persons: Results of a Social Welfare Program in Mexico  Emma Aguila
Lifelines: The Implications of Migrant Remittances and Transnational Elder Care for the Financial Security of Low-Income Hispanic Immigrants in the United States  Chenoa Flippen
Prevalence and Falls in Older Americans: Findings from ENSANUT 2012, Mexican National Health and Nutrition Survey  María Aranda
11:30 – 11:45 am  Break
11:45 am–1:00pm  Keynote Introduction
Introduction: Peter Ward
Presider: Fernando Torres-Gil
Keynote Speaker: Steven Murdock
Lunch Keynote Address: The Latino Future is the Future of the United States but what Kind of Future Will It Be?
1:00 – 2:15 pm  Panel Presentation III: Issues of Social, Cultural, and Mental Health Implications
Presider: William Vega
Discussant: Luis Miguel Gutiérrez-Robledo
Impact of Aging and Social Changes in Mexico: A Clinical and Practical Perspective  María Elena Aguilar Aldrete
Culturally-competent Research and Practices in Older Mexican Americans with Substance Abuse  Erick G. Guarnaccia
Informal Caregiving to Older Latinos: What Does the Qualitative Literature Tell Us? The Mental Health of Aging Latinos: What We Know and Where to go From Here  Ladonna Hinton
2:15 – 3:30 pm  Panel Presentation IV: Bi-national, Trans-national Migration Perspectives: Mexico, Latin America, and the USA
Presider: Néstor Rodríguez
Discussant: Raquel Mooker
New Mexican Immigrants and Economic Integration  Rogelio Sáenz
Family Support Networks and the Aging Mexican Population Living in the United States  Vanessa Martos de Oro
Thursday, September 19, 2013 – The University of Texas at Austin
Liberal Arts Building (CLA): Julius Glickman Conference Center

7:00 – 8:00 am Registration & Breakfast

8:00 - 9:15 am Panel Presentation VI: Cost and Coverage: Fiscal Impacts of Health Policy

9:15 – 9:30 am Break

9:30 - 10:45 am Panel Presentation VII: Policy and the Relevance to Contemporary Politics of Aging

5:30 – 7:00 pm Awards Reception

6:30 – 9:30 pm Dinner and Mentoring Program
International Conference on Aging in the Americas

10:45 – 11:45am Keynote Introduction

Closing Address: Taker Two to Tango: Reflections on the Political Demography of Mexican Migration, Mexican-American Aging, and Ethnic Inequalities

Elena Bastida

Keynote Speaker:
Rubén Rumbaut

12:00 – 1:00 pm Consensus Building Session and Sit-down Luncheon

Presider: Jacqueline Angel

Presider: Fernando Tena-Calé

1:00 – 2:00 pm CAA Advisory Group Publications Meeting

Chair: Jacqueline Angel

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Presentation Briefs

Opening Keynote:

Apple Pie, Enchiladas and the Age-Race Shift: Young and Aging Latinos in an Aging North America

Jorge Chapa, Ph.D.
University of Illinois, Urbana-Champaign

My talk will combine themes from my first book and my latest and apply their themes to the social and demographic prospects for the U.S. and Mexico. The Burden of Support is an analysis of the social and economic consequences of the low attainment levels of a growing, young Latino population in an aging Anglo society. We called these differential age distributions the age-race shift. Apple Pie & Enchiladas examines the difficulties Latino immigrants had in being accepted and integrated in the predominantly white rural Midwest. This talk will look at these themes as they apply to some aspects of the foreseeable futures of the United States and Mexico.

Panel Presentation I – Demographic and Economic Implications for Health and Well-being (Perspective) in Mexico and the USA: An Overview

Aging and Retirement Security: The Americas in Comparative Perspective

Jorge Bravo, Ph.D. and Mun Sin Lai, Ph.D.
Population Division, United Nations

The presentation provides a review of new evidence from National Transfer Accounts on the different ways to provide retirement security in the Americas, with an emphasis on Mexico and the United States. Traditionally, the study of retirement security has
International Conference on Aging in the Americas

focused mainly or exclusively on public pensions and health care, which are sizable programs in the U.S., but only finance a smaller proportion of the consumption of retirees in Mexico. The presentation will also examine the role of labour income, private transfers and asset income. Labour income of older persons is significant in both countries, but it declines much faster with age in the U.S. than in Mexico. While private income is also a significant factor, but in the net, private transfers do not provide significant financial support for retirees. Rather, the contrary is observed in both Mexico and the United States: net private transfers flow from older to younger family members. Finally, we find that income from asset accounts for a large share of consumption of retirement-age adults in both the U.S. and Mexico.

Latino Immigrants Across the Generations: A Comparative Analysis

James Smith, Ph.D.
RAND Corporation

The goal of this research is to compare education generational progress of Latino immigrants, and in particular Mexican immigrants to the United States, to those of the prior experience of groups of European immigrants to the United States in the 19th and 20th century. In particular, the Latino generational experience is compared to that of various waves of Irish and Italian immigrants. I derive two concepts: the gain of future generations if the migrant did migrate and the gain if the migration had not occurred. The difference between the two is the correct measure of the education gain of future generations due to migration. We find large differences among both European and Latino ethnic groups. For Europeans, the largest generational change took place among Italian immigrants to the United States, while among Latino immigrants the largest change took place among Mexican immigrants. Comparing these two groups, Italian immigrants made the largest gains in education progress of their progeny while in the 20th century the biggest educational advances were made among Mexican immigrants. This analysis is conducted separately for female and male immigrants to the United States and a separate analysis is conducted for the gains of the second and third plus generations.

Pension Reform and Civil Society in Latin America

Ronald Angel, Ph.D.
The University of Texas at Austin
Javier Pereira, Ph.D.
Universidad Católica del Uruguay

In 1981, Chile replaced its public pension system with a system based on individual retirement accounts similar to 401(k) plans in the U.S. During the 1990s, ten other Latin American countries either replaced their public pension systems entirely (e.g., Mexico) or introduced mixed public and private systems. This new approach to retirement savings represents a profound change in pension philosophy that implicitly rejects the socialization of the risk of poverty in old age upon which the modern welfare state was based. It also rejects the redistributive component of traditional pensions in which public funding transfers income from those with high earnings to those with lower earnings, including women. This shift in old age support philosophy has been vigorously promoted by the World Bank, the International Monetary Fund, and a number of other neoliberal actors that make up what has been characterized as a new transnational advocacy network. One of the stated objectives of these reforms was the extension of coverage and the reduction in informality in the labor force. Yet in most nations coverage dropped after reforms were introduced, and levels of informality increased. The clear result of the reforms, though, is a vastly changed retirement environment with important implications for intergenerational solidarity, equity, and national accounts. In this presentation, we examine formal and informal retirement systems in Argentina, Chile, Mexico, and Uruguay, nations that adopted pension reforms that have subsequently required a second round of reforms to deal with inequities, or have dropped reform efforts entirely, as in the case of Argentina.
Panel Presentation II: New Data and Methodological Approaches on Aging Research in Mexico and the United States

Alleviating Poverty for Older Persons: Results of a Social Welfare Program in Mexico
Emma Aguila, Ph.D.
Center for Latin American Social Policy, RAND Corporation

Non-contributory social security programs have been implemented in at least 15 countries around the world. These are cash transfer programs aimed at poverty alleviation among the elderly population. Previous studies have found that these programs reduce poverty and inequality, while the health effects are less clear. The presentation will discuss a study that designs and evaluates a non-contributory social security program in the State of Yucatan, Mexico. This program is for individuals 70 years or over. Eligible individuals are assigned to treatment and control groups and a large array of background variables and outcome measures are collected at baseline and during the course of the experiment for individuals in both the treatment and control groups approximately every six months. The preliminary findings using a difference-in-differences approach are treatment effects on labor supply, hunger, medical consumption, and memory. Eligible individuals spend their pension on food, visits to the doctor, and medicine, while sharply reducing labor supply.

Lifelines: The Implications of Migrant Remittances and Transnational Elder Care for the Financial Security of Low-income Hispanic Immigrants in the United States
Chenoa Flippen, Ph.D.
University of Pennsylvania

Research on population aging generally focuses on a particular elderly population in a specific location or context. However, a growing literature on transnationalism emphasizes that for immigrant populations, societies of origin and settlement are linked through a dense web of economic, cultural, and political connections. As such, aging in the Americas among populations shaped by immigration must consider the indelible impact of transnational ties. This presentation draws on original survey and in-depth interview data from Durham, North Carolina to investigate the impact of transnational and transgenerational ties on the financial security of low-income Hispanic immigrants. Results demonstrate not only that a large share of immigrant households in Durham routinely support elderly parents and grandparents abroad, but also that urgent healthcare needs of elders in Latin America represent an important form of “wealth shock” that often precipitates a cascade of financial penalties in the United States. The findings suggest that the need to support aging relatives abroad is an important contributor to the precarious financial position of low-skill immigrants, with potential implications for the both the inter-generational transmission of inequality and the future old-age security of immigrants themselves.

Prevalence and Correlates of Falls in older Mexican: Findings from the ENSANUT 2012—Mexican National Health and Nutrition Survey
María Aranda, Ph.D.
University of Southern California

Falls are a significant health burden on individuals, families, and health care systems. Although the prevalence and determinants of falls are well documented in the USA, minimal attention has been given to the public health burden of falls in Latin American countries. Drawing from the 2012 Mexican National Health and Nutrition Survey, this presentation addresses the prevalence and correlates of falls in a representative sample of 8,861 adults 60+ years of which 55.6% are women. Of the total sample, 3,011 (34.0%) reported having at least one fall in the past 12 months: 29.2% men and 38.1% women. Female gender and older age were significant in determining falls ($p \leq 0.01$) while education and marital status were not. In terms of clinical correlates, having one or more chronic diseases, having suffered a stroke in the past year, presenting depressive symptoms, and reporting difficulty in performing ADLs were significant determinants ($p \leq 0.01$) of having fallen in the past 12 months. In addition, reporting problems with vision and audition were both highly significant. The study shows similar results to studies in other countries, specifically that female gender, older age, chronic disease, depressive symptoms, functional ability, and sensory impairment are significant determinants of single and recurrent falls. Implications for future research and practice are addressed.
Lunch Keynote Address

The Latino Future is the Future of the United States but what Kind of Future Will It Be?
Steven Murdock, Ph.D.
Rice University

Recent demographic patterns and projections, coupled with vital statistics and the demographic structure of the United States population indicate that the future of the United States will largely be determined by the Hispanic Population of the United States. But the socioeconomic characteristics of the future population of the United States and its Hispanic Population are much less certain. This presentation will discuss these issues with an emphasis on how essential closing the educational gap between Hispanics and non-Hispanic Whites and others is to both the future of Hispanics and to the overall socioeconomic characteristics of the United States. It seems that how well Hispanics do is how well the United States will do.

Panel Presentation III: Issues of Social, Cultural, and Mental Health Implications

Impact of Aging and Social Changes in Mexico: A Clinical and Practical Perspective
María Elena Aguilar Aldrete, Ph.D.
Colegio de Geriatria y Gerontologia de Jalisco, Mexico

The population in Mexico is aging as evidenced by the increase in the number of people over 65 years of age in the nation from 1.8 million in the 1970s to 7 million in 2010. This increase has similar implications for Mexico as it does in Europe, the USA and Canada, but these implications manifest themselves in different ways. The demographic projections raise important challenges for social assistance and health systems. There is an urgent necessity to reorient public policies to take into account an aging culture, including education, economic status, health promotion, intergenerational relations, strengthening social networks, and the environment. The government must assume those responsibilities in a society that is polarized with 50% of the population in extreme poverty and 10% of the population possessing a very large amount of wealth. The health concerns of the elderly are also polarized, with wealth leading to chronic degenerative diseases such as hypertension, diabetes and heart conditions, and poverty leading to malnutrition. In addition, Mexico is seen as the world leader in people who are overweight and obese. These phenomena have never before been seen in Mexican history. This presentation will offer perspectives for understanding Mexico’s aging society in the context of the nation’s poverty, inequality and fragile health systems.

Culturally-Competent Research and Practices in Older Mexican Americans with Substance Abuse
Erick Guerrero, Ph.D.
University of Southern California

Health insurance coverage and quality of care are common factors believed to improve access and retention of social and ethnic minority groups in health care. However, there is little evidence that acceptance of public insurance and provision of culturally responsive care decrease wait time and retention among Latins served by community-based substance abuse treatment. This presentation will provide an analysis of client and program data collected in 2010–2011 from publicly funded treatment programs in Los Angeles County, California. An analytical sample of 13,328 clients nested within 104 treatment programs was analyzed using multilevel negative binomial regression on count measures of days to initiate and remain in treatment. Latinos represented 43% of the sample, with 10% of this sample reporting 60 years of age or older. Programs that accepted Medicaid payment acceptance (p < .001) and in which staff reported personal involvement (p < .01) and linkages and resources with minority communities (p < .001) were negatively associated with client wait time. Similarly, programs with culturally responsive policies and assessment and treatment practices (p < .05) were positively associated with retention in treatment, after controlling for individual and program characteristics. The older Latino population was less likely to access treatment on demand and also dropped out of treatment faster than the young adult population. These preliminary findings provide an evidentiary base for the role of community-based financial and cultural practices in improving accessibility and treatment adherence within a population that is at high risk of treatment dropout. Implications related to health care reform legislation are discussed.
Informal Caregiving to Older Latinos: What Does the Qualitative Literature Tell Us?

Ladson Hinton, M.D.
University of California, Davis

With the unprecedented aging of the U.S. population—the largest projected growth among Latinos of all ethnic groups in the country—and persistent health disparities, ensuring Latino caregiver wellbeing remains a significant public health challenge. Caregivers play a central role in the formal and informal health management of older adults, especially those with Alzheimer’s Disease (AD) and related dementias. Up to 70% of individuals suffering from AD in the U.S. are cared for at home and approximately 9.8 million kin and non-kin members take on the responsibilities of providing this often “invisible” and unremunerated daily work. Due to the incurred costs and burden, caregivers are at risk for poor quality of life and declining mental and physical health. Thus there is a pressing need to understand how to provide optimal support to community-dwelling Latino elderly and their caregivers to prevent adverse outcomes (e.g., institutionalization, increased caregiver distress, reduced quality of life) and, when possible, help older Latinos to age in place. A critical, systematic evaluation of current qualitative literature on Latino informal caregiving can help us understand how sociocultural factors are related to caregiving experiences and outcomes in this group. The overall objective of this study being presented is to report on the state of the science in qualitative research on the topic of informal Latino caregiving to persons with cognitive impairment in order to advance our understanding of caregiving socio-cultural processes among Latinos. Findings from this review may inform intervention, policy and theory development related to community-based care and support for older Latinos and those involved in informal caregiving.

The Mental Health of Aging Latinos: What We Know and Where to Go from Here

Hector González, Ph.D.
Wayne State University

The U.S. population of Latinos young and old has been expanding rapidly over recent decades, and it is critical that detailed and reliable information be available now to inform public health policy for the future. This presentation will examine current opinions on mental health among older Latinos in the context of recent psychiatric epidemiologic findings. Additionally, it will describe International Conference on Aging in the Americas interactions between culture and mental health and present mental health projections for older Latinos and Latino mental health implications for public health in the coming years.

Panel IV Presentation: Bi-national, Trans-national Migration Perspectives: Mexico, Latin America, and the USA

New Mexican Immigrants and Economic Integration
Rogelio Sáenz, Ph.D.
The University of Texas at San Antonio

The United States and Mexico are undergoing significant demographic changes that will result in each country having an increasingly older population. In the United States, the aging of baby boomers will result in a tremendous growth of the elderly population from 2011-2029 as the baby-boom generation reaches age 65. Moreover, the Mexican-origin population in the United States is also expected to age significantly over the coming decades, despite the youthfulness of the overall Mexican-origin population. Furthermore, due to major declines in fertility rates and the selectivity of emigrants from Mexico drawn from the younger segments of the population, Mexico’s overall population is projected to age dramatically over the coming decades. The analysis being presented will examine the economic patterns of the elderly population in the United States and Mexico over the last three decades (1990s, 2000s, and 2010s) Data was obtained from the University of Minnesota’s Integrated Public Use Microdata Samples (IPUMS). The analysis will assess the economic characteristics of these elderly populations: U.S.-elderly, Mexican-origin elderly in the United States and Mexican elderly in Mexico. The analysis will examine each characteristic as the educational level, presence of disability, labor market participation, income sources, health insurance availability, and poverty. The analysis will also inspect population projections to assess the growth of the elderly population.
in the coming decades. The presentation will conclude with the policy implications of the changing economic and demographic patterns of the elderly population in the United States and Mexico with particular attention to bi-national approaches related to the healthcare needs of the Mexican-origin population in these two countries.

Family Support Networks and the Aging Mexican Population Living in the United States
Verónica Montes de Oca Zavala Zenaida, Ph.D.
Universidad Nacional Autonoma de Mexico

In Mexico, like in other Latin American countries, family is one of the most important resources supporting the elderly population, both emotionally and materially. However, in some cases this support is modified based on the internal and international migration of household members. There is substantial evidence that migrants provide assistance to the elderly from their country of origin through remittances. In fact, previous research has shown that the loss of circular migration reduces transnational social capital among migrant families, especially for those who remain in their countries of origin. However, very little is known about family support and the role the family plays among immigrants in the receiving country. The research being presented aims to investigate the role of family support in the maintenance of physical and mental health among the elderly Mexican population. Moreover, this research investigates access to health services and living conditions among the elderly Mexican population living in the United States. Data is from the National Health Interview Survey (NHIS) and American Community Survey (ACS). A series of indicators related to families and/or homes, and on the health conditions and access to medical care of elderly Mexican immigrants in the U.S. were created. Qualitative data was also gathered through in-depth interviews with elderly Mexicans living in Dallas, Texas, Los Angeles, California, and Chicago, Illinois. This mixed-methods approach is necessary as it captures more nuanced findings relating to family support and the importance of health care in the context of the aging process. Findings show varying levels of vulnerability that Mexican migrants face in the United States. For example, the lack of health insurance exacerbates health and mental health problems by lessening opportunities for early detection and preventative care. Despite these adverse effects, the cultural capital of the Mexican population serves as a protective factor against threatening health conditions in the United States.

The Profile of Mexican Elder Migration Flow into the U.S. (2003-2012)
Silvia Mejia-Arango, Ph.D. and Roberto Ham-Chande, Ph.D.
El Colegio de la Frontera Norte

Operating since 1993, the Border Survey of Mexican Migration is the oldest continuous research program tracking original data on the number of people arriving to Mexican border cities. Through the survey (Encuesta sobre Migración en la Frontera Norte de México (EMIF)) conducted in selected points such as airports and bus stations on the Mexican side of the border cities by El Colegio de la Frontera Norte (COLEF), the composition and characteristics of Mexican flows are measured. The primary aim of the study being presented is to describe migration flow of older subjects (60 and over) from south to north during the period 2003 to 2012. Longitudinal changes in size and socio-demographic characteristics in subjects who get to the border and in subjects who intend to cross the border and stay in the U.S. permanently are analyzed.

Aging, Inheritance and Multigenerational Residence in Low Income Colonias and Informal Subdivisions in Texas and the U.S.
Pete Ward, Ph.D.
The University of Texas at Austin

This paper examines the intersection between dwelling structures, household organization, and aging among owners in Texas border colonias and Central Texas informal homestead subdivisions. Using original household survey data it analyzes how homeowners in these peri-urban self-built and/or self-managed dwellings cope with the life course, aging, declining physical mobility, rising chronic morbidity. In Texas, colonias and IFHSs are largely Hispanic, often comprise spacious lots (1/2 – 1 acre) which in combination with the flexibility and low-cost nature of self-help dwelling construction and management, offers multiple opportunities of household extension, cross generational multi-lot sharing among kin related poor households (adult children usually), and/or residential care for aging parents or grandparents. The housing assets commonly range between a median value of $30,000-$60,000. Less than 10 per cent of home owners have wills, such that inheritance takes place under intestacy law and is leading to title confusion and ownership conflicts among beneficiaries, that creates insecurity and undermines home improvement and investment in dwelling improvements.
Migration-related Stress, Family Cohesion, and Psychological Distress among Foreign-born Latinos
Georgiana Bostean, Ph.D.
University of California, Los Angeles

Studies suggest that Latinos have strong family cohesion, which can buffer the negative effects of stress on mental health. Latino migrants may face unique stressors due to the migration experience and subsequent adjustment to the host country. The study being presented addresses the following empirical questions: 1) Is migration-related stress associated with psychological distress among Latino immigrants? 2) If so, does the association between migration-related stress and distress vary by level of family cohesion? Using data from the National Latino and Asian American Survey, we examine foreign-born Latinos (n=1,561) by sub-group to assess whether family cohesion moderates the association between migration-related stress (e.g., felt guilty for leaving family in country of origin; found it hard interacting with others because of difficulties with the English language) and psychological distress (e.g., felt hopeless or depressed in the past 30 days). We computed zero-truncated Poisson regressions and calculated predicted distress. Preliminary results show that those with high family cohesion have lower psychological distress compared to those with lower family cohesion who have similar migration-related stress levels (mean distress was 15 and 16, respectively). Findings speak to the role of family relationships in buffering foreign-born Latinos’ mental health outcomes, and may inform interventions aimed at improving mental health in this population.

Trajectories of Limitations in ADLs in Mexico, 2001-2012
Carlos Díaz-Venegas, Ph.D.
The University of Texas Medical Branch at Galveston

Activities of Daily Living (ADLs) have generally been used as a tool to assess whether or not a person requires help performing daily self-care activities (such as dressing, bathing, eating, among others), especially at old age. In addition to evaluating an older’s level of independence, ADLs can also be a predictor of a successful aging because the ability to perform basic activities enables their involvement in more complex ones. Mexico is facing a rapidly aging population. This rapid pace, compounded with varying risk profiles and cultural, socioeconomic, and gender differences might hinder the ability for self-care, especially for the elderly, thus the analysis of ADLs is particularly relevant to understanding the disablement process in developing countries whose populations will age fast. This presentation seeks to describe the progression of limitations in daily activities in the Mexican elderly population, and identify how income and education might create differences in these limitations across groups defined by age, gender, and place of residence. The data come from the Mexican Health and Aging Study (MHAS), a national sample of adults born in 1951 or earlier, including a baseline survey in 2001 and follow-ups in 2003 and 2012. The main approach is to measure the different ADLs at baseline and then monitor the different transitions two and eleven years later.

Health of Older Mexican American Adults and Family Caregiver Distress
Sunshine Rote, Ph.D.
The University of Texas Medical Branch at Galveston

This presentation examines the impact of older Mexican American care recipient’s health (functional, mental and cognitive) on family caregiver’s psychological distress. Data were drawn from Wave 7 of the Hispanic Established Population for the Epidemiological Study of the Elderly (H-EPES, 2010/2011) when respondents provided information on a close person they could rely on for help. Out of the 908 informants interviewed, we identified 339 family caregivers. Using OLS regression, we found no differences in caregiver depressive symptoms by functional ability. However, we did find incoherence in reports of ADLs and IADLs by caregiver and care recipient in predicting caregiver depressive symptoms. Additionally, depressive symptoms and the Neuropsychiatric Inventory (NPI) or problematic behavior associated with cognitive decline in older adults were associated with caregiver distress. Partially attenuated but does not fully explain these differences. We also identified a subset of caregivers who are more vulnerable to care recipient depressive symptoms, namely, caregivers of older adults born outside of the U.S. Questions of the role of caregiver mediacy factors and possible mediators of these relationships within the context of aging Mexican Americans and their families will be part of the presentation.
Limited But Not Disabled: A Comparison of Self-Reports of Disability with Mobility Assessments For Elderly Mexican Americans

Phillip Cantu, BA
The University of Texas at Austin

The study being presented examines the association between physical mobility assessments and self-reported disability for elderly Mexican Americans. Using data from waves 1-7 of the Hispanic Established Populations for the Epidemiologic Study of the Elderly (HEPESE) (n=3,952), the disablement model was used to investigate the ways in which functional limitations are necessary but not sufficient for self-reports of disability. Within the disablement process, the research draws particularly upon two concepts: 1) functional limitation, an objective measure of physical frailty, and 2) disability, a socially constructed concept that is determined by the inability to perform socially defined necessary tasks. By conceptualizing performance oriented mobility assessments (POMA) as an objective measurement of functional limitation and self-reports of activity of daily living (ADL) disability as a subjective measurement of disability. Preliminary findings suggest that while Mexican Americans, on average, spend more than one-half of their life expectancy past 65 with at least one objective mobility limitation, they self-report considerably fewer years in disability. These patterns hold for men and women as well as native born and foreign born after controls for covariates. Further analyses will identify covariates that, in addition to mobility limitation, predict self-reports of disability. These findings shed new light on understanding the disablement process. The presentation will end with a discussion of implications for improving the provision of services for elderly Mexican Americans, and particularly for those experiencing the greatest risk of disability.

Panel Presentation VI: Cost and Coverage: Fiscal Impacts of Health Policy

Caring for Older Mexican Americans: Community Health Strategies
Steve Wallace, Ph.D.
University of California, Los Angeles

The composition of older Mexican Americans in the U.S. is changing with an increasing proportion being second and third generation. U.S. Census data shows that later generation Mexican Americans are less likely to coreside with extended family, and family size is shrinking. Yet older Mexican American elders have lower rates of formal service use. With the emphasis in health care reform on bolstering long-term services and supports (LTSS) in the community rather than in institutions, the Mexican American population should be a priority target population for policy and planning. From a public health perspective, preventing disability and the need for LTSS is a primary prevention strategy. The disproportionate levels of diabetes and obesity, which are directly linked with disability, are preventable conditions that need to be put at the core of a disability prevention strategy. These conditions are sensitive to both social determinants of health, as well as high quality ambulatory care. Once disability occurs, appropriate community-based supportive services for both the older adult and the family can maximize aging with dignity. Polling data from California show that Hispanics are more likely than non-Hispanic whites to be caring for a family member and be supportive of public funding for community services. Given the lower incomes and inability to afford to pay for LTSS, a program similar to the CLASS Act would provide the best assistance to Mexican American older adults who need LTSS.

Health characteristics of aging Hispanics eligible for Medicaid: Are states not expanding differently?
H. Shalena Brown, Ph.D.
The University of Texas Health Science Center at Houston, School of Public Health

Although the Affordable Care Act (ACA) changes many parts of our health care system, a central element of the new law is expanding insurance coverage through the establishment of exchanges and the expansion of Medicaid. For Hispanics close to retirement, the expansion of Medicaid is particularly important. The Kaiser Family Foundation reports that up to 24 states are not participating in the Medicaid expansion. The characteristics of the ‘soon to be insured’ are understudied. Further, how their characteristics differ from states not participating in the program is largely unknown. The 2011 Medicaid Expansion Panel Survey provides new data on health status, race and ethnicity, age and demographics. With restricted data, we examine how...
characteristics of uninsured individuals near retirement age, but eligible for Medicaid under the ACA, differ by whether or not states choose to participate in Medicaid expansion. Fiscal implications, including costs and benefits, of increasing enrollments in Medicaid and state health insurance market places, are discussed.

The Economic Security of an Aging Minority Population: A Profile of Latino Baby Boomers to Inform Future Retirees

Zachary Gassoumis, Ph.D.
University of Southern California

Healthcare spending in the U.S. is at an all-time high and is projected to continue rising, due in part to the aging of the baby boomers. As most of the public spending for healthcare comes from general taxation revenues, the ability of the U.S. government to fund these future liabilities will be determined by the economic productivity of the workforce. Population growth in the U.S. over the next several decades will be driven by a growing Latino population, meaning that taxation revenue will be dependent on the incomes of an increasingly Latino workforce. Minimizing the persistent income disparities between Latinos and non-Latinos will be crucial to ensuring both the economic prosperity of the Latino community and the advancement of the overall U.S. economy. Using data from the U.S. Census Bureau, this presentation presents models of current and past income disparities, primarily among the baby boom generation cohort. Results of these models are used to advocate for current and future investment in the Latino population, both for the advancement of Latino economic security and the bolstering of national economic growth.

Panel Presentation VII: Policy and the Relevance to Contemporary Politics of Aging

The Politics of Mexican Demography, Migration and its Implications for Border Health and Human Security

Gregory Wolk, Ph.D.
University of North Carolina, Charlotte

The recent U.S. presidential election highlighted the emerging cohort of young Latinos in the “New South,” most of whom are U.S. citizens and will help to shape the political landscape of the region in the future. Part of that future will include the aging of their parents and grandparents, many of whom are neither citizens nor legal immigrants. This presentation will examine the size and rates of growth of the older Latino population in the southern states, including a set of population projections out to 2060, based on trends occurring between the 2000 and 2010 censuses. Using Charlotte as a case study, the presentation will explore the ways in which this population might have different needs from the non-Hispanic population that will have to be addressed by local and state governments.

The Politics of Aging and Social Policy in the U.S.A: Implications for U.S. Latinos

Fernando Torres-Gil, Ph.D.
University of California, Los Angeles

The United States faces tremendous policy challenges as it confronts its demographic and political changes. As it gets older, it faces budgetary constraints in maintaining entitlement programs (e.g. Social Security, Medicare). While its aging baby boomers grow older, they may face a greater level of retirement insecurity. Its national security needs must confront a changing global order with the rise of new powers: China, Brazil and India. Through this maelstrom of dilemmas, the USA will also become a majority-minority nation and for the first time in its history a combination of minorities, immigrants and refugees will comprise a majority of its population and cause its non-Hispanic white subgroups to become a minority. What does it mean for the politics of aging in the USA, where white older persons have been a traditionally powerful electoral force, to confront the rise of emerging ethnic, racial and immigrant groups? How does this impact the ongoing policy debates around budgets, the role of government, immigration reform and social policy? This presentation will provide a historical and policy context by which we can have a better understanding of the issues, questions and potential solutions and opportunities that may arise with the aging and growing diversity of the United States.

Politics of Aging and Social Policy in Mexico: The New President’s Agenda

Bryan Roberts, Ph.D.
The University of Texas at Austin

The age distribution of Mexico is a young one, but the decrease in the birth rate and increased longevity is projected to make Mexico an aged economy by 2050 with an increasingly unfavorable ratio of taxpayers to beneficiaries of social programs, including those for the elderly. Mexico has a universal, though uneven, health care system and non-contributory pensions are provided for all those 65 of the older Latino population in the southern states, including a set of population projections out to 2060, based on trends occurring between the 2000 and 2010 censuses. Using Charlotte as a case study, the presentation will explore the ways in which this population might have different needs from the non-Hispanic population that will have to be addressed by local and state governments.

The Politics of Aging and Social Policy in the U.S.A: Implications for U.S. Latinos

Fernando Torres-Gil, Ph.D.
University of California, Los Angeles

The United States faces tremendous policy challenges as it confronts its demographic and political changes. As it gets older, it faces budgetary constraints in maintaining entitlement programs (e.g. Social Security, Medicare). While its aging baby boomers grow older, they may face a greater level of retirement insecurity. Its national security needs must confront a changing global order with the rise of new powers: China, Brazil and India. Through this maelstrom of dilemmas, the USA will also become a majority-minority nation and for the first time in its history a combination of minorities, immigrants and refugees will comprise a majority of its population and cause its non-Hispanic white subgroups to become a minority. What does it mean for the politics of aging in the USA, where white older persons have been a traditionally powerful electoral force, to confront the rise of emerging ethnic, racial and immigrant groups? How does this impact the ongoing policy debates around budgets, the role of government, immigration reform and social policy? This presentation will provide a historical and policy context by which we can have a better understanding of the issues, questions and potential solutions and opportunities that may arise with the aging and growing diversity of the United States.
and over without other pension sources. INAPAM, a government institute, housed in the Ministry of Social Development administers centrally social policy for the elderly. The challenge it faces is meeting the increasingly diverse needs of the elderly. This diversity reflects several demographic and social factors: some arise from the lack of social support as a result of smaller family sizes or high rates of internal and international migration that break-up families, weaken community support networks and are only partially compensated by remittances; others arise from concentrated poverty and the lack of health infrastructure; others from the informally constructed housing of the 1960s to 1980s, much of which needs upgrading to meet the needs of the now elderly owners.

Closing Keynote Address

Taeks Two to Tango: Reflections on the Political Demography of Mexican Migration, Mexican-American Aging, and Ethnic Inequalities
Rubén G. Rumbaut, Ph.D.
University of California, Irvine

Crystal-ball gazing, a futurologist's errand, relies for its forecasting on a past that will not be repeated and a present shaped by complexity, conflict, and contradiction. Nonetheless, the coming of a “majority-minority” society is projected for the United States within a generation, much as has already happened in California and Texas. Planning and policymaking for the aging and well-being of the rapidly growing Mexican-American population need to be contextualized within the tangled “tango” of U.S.-Mexico interconnectedness, specifically with respect to international migration flows, the putative demographic “fit” of U.S.-Mexico economic and population needs, the incorporation of immigrants and their descendants, and the political contexts which mold it. Demographic and economic “irresistible forces” clash with political “immovable objects” in a context of widening inequalities in which the large Mexican-origin population is falling behind in such key indicators as poverty, income and wealth (gaps worsened by the Great Recession), and in education and access to health care – portents of a more sharply stratified future, even as the relatively young Latino population grows older in larger numbers and shares. An enduring caste-like stature for millions of aging immigrants denied permanent residency or the possibility of citizenship, who will continue to be targets of systematic state persecution, remains a potential scenario.
Programa

Martes, 17 de Septiembre, 2013 – La Universidad de Texas en Austin

Edificio de Artes Liberales (Liberal Arts Building, CLA):
Centro de Conferencias Julius Glickman (Julius Glickman Conference Center)

5:00 pm Inscripción
6:00 – 8:45 pm Cena de Apertura
Bienvenida e Introducción

6:00 Bienvenida e Introducción

Entrega de Premios

Introducción del Conferencista Magistral

Discurso Magistral de Apertura: La Próxima América: Cambios Demográficos, Desconexión Social y Retos Futuros

Miércoles, 18 de Septiembre, 2013 – La Universidad de Texas en Austin

Edificio de Artes Liberales (Liberal Arts Building, CLA):
Centro de Conferencias Julius Glickman (Julius Glickman Conference Center)

7:30 – 8:30 am Inscripción y Desayuno

8:30 am Bienvenida

8:45 – 10:00 am Presentación del Panel I: Implicaciones Demográficas y Económicas sobre Salud y Perspectiva de Bienestar en México y en EE.UU.: Una Visión General
Entregamiento y Seguridad en el Retiro: Las Américas en Perspectiva Comparada
Los Inmigrantes Latinos a través de las Generaciones – Un Análisis Comparativo
Reforma al Sistema de Pensión y la Sociedad Civil en América Latina

10:00 – 10:15 am Receso

10:15 – 11:30 am Presentación del Panel II: Nuevos Datos y Enfoques Metodológicos sobre la Investigación del Envejecimiento en México y en Estados Unidos
Aliviando la Pobreza de los Ancianos: Resultados de un Programa de Bienestar Social en México
Vidas: Implicaciones de las Remesas y el Cuidado Transnacional de los Ancianos en la Seguridad Económica de los Inmigrantes Hispanos de Bajos Ingresos en Estados Unidos
Prevalecia y Elementos Correlacionados de Caídas en Adultos Mayores Mexicanos:
Resultados de la ENSANUT 2012.—Encuesta Nacional de Salud y Nutrición
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<td>Moderador: Fernando Torres-Gil</td>
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<td>Impacto del Envejecimiento y las Transiciones Sociales en México: Una Perspectiva Clínica y Práctica</td>
<td>Maria Elena Gutiérrez-Robledo</td>
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<td>Investigación y Prácticas Culturalmente Competentes en Adultos Mayores Mexicanos-Americanos con Problemas de Abuso de Sustancias</td>
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<td>Cuidado Informal de los Adultos Mayores Latinos: ¿Qué Nos Indica la Literatura Cuantitativa?</td>
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<td>La Salud Mental de los Latinos que Están Envejeciendo: Lo Que Sabemos y Hacia Donde Ir</td>
<td>Hector Gonzalez</td>
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<td>Presentación del Panel IV: Perspectivas de Migración Bi-nacional y Transnacional: México, América Latina y Estados Unidos</td>
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<td>Estere por Migración, Cohesión Familiar, y Afección Psicológica en Latinoas Nacidas en el Extranjero</td>
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<td>Trayectorias de las Limitaciones en las AVD en México, 2001-2012</td>
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<td>La Salud de los Adultos Mayores Mexicanos-Americanos y la Afección de los Cuidadores Familiares</td>
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<td>Limitado Pero No Incapacitado: Una Comparación de los Auto-Reportes de Discapacidad con Evaluaciones de Movilidad de Ancianos México-Americanos</td>
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Conferencia Internacional Envejecimiento en Las Americas

Programa

Jueves, 19 de Septiembre, 2013 – La Universidad de Texas en Austin
Edificio de Artes Liberales (Liberal Arts Building, CLA):
Centro de Conferencias Julius Glickman (Julius Glickman Conference Center)

7:00 – 8:00 am Inscripción y Desayuno

8:00 - 9:15 am Presentación del Panel VI: Costo y Cobertura: Impactos Fiscales de las Políticas de Salud
Moderador: Eduardo Sánchez
Conferencista: David Warner
Steve Wallace
Eduardo Sánchez
Shelton Brown

9:15 – 9:30 am Receso

9:30 - 10:45 am Presentación del Panel VII: Las Políticas y su Relevancia a la Política Contemporánea del Envejecimiento
Moderador: Victoria Rodríguez
Conferencista: David Cord
Gregory Weeks
Fernando Torres-Gil

10:45 – 11:45am Conferencista Magistral
Elena Bastida
Discurso Magistral de Clausura: Se Requiere a Dos para Bailar Tánaro: Reflexiones sobre la Demografía Política de la Migración Mexicana, del Envejecimiento Mexican-Americano y de las Desigualdades Étnicas

12:00- 1:00 pm Sesión de Consenso y Almuerzo
Moderador: Jacqueline Angel y Fernando Torres-Gil

1:00 – 2:00 pm Sesión de Publicaciones del Gabinete Asesor del CAA
Moderador: Jacqueline Angel

Política del Envejecimiento y Política Social en México: La Agenda del Nuevo Presidente
Bryan Roberts

Política del Envejecimiento y Política Social en EE.UU.: Implicaciones para los Latinoamericanos

Discurso Magistral de Clausura: Se Requiere a Dos para Bailar Tánaro: Reflexiones sobre la Demografía Política de la Migración Mexicana, del Envejecimiento Mexican-Americano y de las Desigualdades Étnicas
Elena Bastida

La Política de la Demografía Mexicana, la Migración y sus Implicaciones para la Salud y Seguridad Personal Fronteriza
Gregory Weeks

La Política del Envejecimiento y la Política Social en EE.UU.: Implicaciones para los Latinoamericanos
Fernando Torres-Gil
Resumen de Presentaciones (en orden de presentación)

Discurso Magistral de Apertura

Tarta de Manzana, Enchiladas y la Transición Edad-Raza: Latinos Jóvenes y Adultos en un Mundo que Envejece

Jorge Chapa, Ph.D.
Universidad de Illinois, Urbana-Champaign

Este discurso de apertura combina temas presentados por Chapa en dos de sus libros, cuyos títulos traducidos al español son: La Carga del Apoyo (The Burden of Support) y Tarta de Manzana y Enchiladas: Los Latinos Recién Llegados en el Medio Oeste Rural Estadounidense (Apple Pie and Enchiladas: Latino Newcomers in the Rural Midwest), y se aplica a aspectos con expectativas sociales y demográficas en los EE.UU. y México. La Carga del Apoyo es un análisis de las consecuencias sociales y económicas de los bajos niveles de logros de una creciente población latina joven dentro de una sociedad anglo que está envejeciendo. Nos referimos a estos diferenciales en la distribución de la edad como la transición edad-raza. Tarta de Manzana y Enchiladas examina las dificultades experimentadas por los inmigrantes latinos para ser aceptados e integrarse en el medio oeste rural estadounidense, el cual es predominantemente blanco. Este discurso se enfoca en la aplicación de estos temas a algunos aspectos de los futuros cercanos de los Estados Unidos y de México.

Presentación del Panel I – Implicaciones Demográficas y Económicas sobre Salud y Perspectiva de Bienestar en México y en EE.UU.: Una Visión General

Envejecimiento y Seguridad en el Retiro: Las Américas en Perspectiva Comparada
Jorge Bravo, Ph.D.
Population Division, United Nations

Esta presentación provee una revisión de los nuevos datos de cuentas nacionales de transferencia sobre las diferentes formas de proporcionar seguridad en la jubilación en las Américas, con énfasis en México y Estados Unidos. Tradicionalmente, el estudio de la seguridad en el retiro se ha enfocado principalmente o exclusivamente en las pensiones públicas y en el cuidado a la salud, los cuales son programas importantes en los EE.UU., pero que sólo financian una proporción pequeña del consumo de estos servicios por parte de los jubilados en México. En la presentación también se examina el papel que juega el ingreso laboral, las transferencias privadas y la renta de los activos. El ingreso laboral de los mayores mayores es significativo en ambos países, pero disminuye con la edad mucho más rápido en EE.UU. que en México. Los mayores de edad avanzada dan y reciben transferencias familiares, pero en términos netos, las transferencias privadas no representan un apoyo económico importante para los jubilados. Más bien se observa lo contrario tanto en México como en Estados Unidos: el flujo de transferencias privadas netas de los miembros más viejos a los miembros jóvenes de la familia. Por último, nos encontramos con que los ingresos de los activos representan una gran parte del consumo de los adultos en edad de jubilación; esto se observa tanto en los EE.UU. como en México.

Los valores a través de las Generaciones – Un Análisis Comparativo

James Smith, Ph.D.
RAND Corporation

El objetivo de este estudio es comparar el avance generacional de los niveles de educación en los inmigrantes latinos, y en particular los inmigrantes mexicanos a Estados Unidos, al avance observado en los grupos de inmigrantes europeos a los Estados Unidos en el siglo 19 y siglo 20. En particular, se compara la experiencia generacional de los latinos con la de las otras anteriores de inmigrantes europeos.
Conferencia Internacional Envejecimiento en Las Americas

e italianos. Detenue dos conceptos—el avance en las generaciones futuras si el migrante migra y el avance si la migración no ocurre. La diferencia entre los dos conceptos es la medida correcta del avance de los niveles de educación en las generaciones futuras como resultado de la migración. Encontramos grandes diferencias entre los dos grupos étnicos (europeos y latinos). Para los europeos, el mayor cambio generacional tuvo lugar entre los inmigrantes italianos a Estados Unidos, mientras que en el grupo de inmigrantes mexicanos el mayor cambio se produjo entre los inmigrantes mexicanos. Si comparamos estos dos grupos, encontramos que los inmigrantes italianos alcanzaron el mayor progreso educativo de su descendencia, mientras que en el siglo 20 los mayores avances educativos se observaron dentro del grupo de los inmigrantes mexicanos. Este análisis se realizó por separado para los inmigrantes a los Estados Unidos de ambos sexos; asimismo, se realizó otro análisis para examinar los avances educativos de la segunda generación en adelante.

Reforma al Sistema de Pensiones y la Sociedad Civil en América Latina
Ronald Angel, Ph.D.
The University of Texas at Austin

En 1981, Chile reemplazó su sistema público de pensiones con un sistema de cuentas de retiro individual similar al plan 401(k) de los EE.UU. Durante la década de los noventa, otros diez países de América Latina reemplazaron por completo sus sistemas públicos de pensiones (como por ejemplo, México) o introdujeron sistemas mixtos (públicos y privados). Este nuevo enfoque de ahorro para la jubilación representa un cambio importante en la filosofía de pensiones que rechaza implícitamente la socialización del riesgo de pobreza en la vejez en que está basado el estado benefactor moderno. También rechaza el componente redistributivo de las pensiones tradicionales en el que los fondos públicos transfieren el ingreso de las personas con salarios altos a aquellas con salarios más bajos, incluida las mujeres. Este cambio en la filosofía del apoyo a la edad avanzada ha sido fomentado activamente por el Banco Mundial, el Fondo Monetario Internacional y una serie de actores neoliberales que conforman lo que se ha caracterizado como una nueva red de activismo transnacional. Dos de los objetivos de estas reformas fueron la ampliación de la cobertura y la reducción de la informalidad en el mercado laboral. Sin embargo, en la mayoría de los países, la cobertura disminuyó después de que se implementaron las reformas, mientras que los niveles de informalidad aumentaron. El resultado de estas reformas, no obstante, es un cambio en el ambiente que rodea a la jubilación y que tiene implicaciones importantes para la solvencia intergeneracional, la equidad y las cuentas nacionales. En esta presentación, se examinan los sistemas de retiro, formales e informales, en América Latina.

Presentación del Panel II: Nuevos Datos y Enfoques Metodológicos sobre la Investigación del Envejecimiento en México y en Estados Unidos

Aliviando la Pobreza de los Ancianos: Resultados de un Programa de Bienestar Social en México
Emma Aguila, Ph.D.
Center for Latin American Social Policy, RAND Corporation

Los programas no contributivos de seguridad social se han implementado en al menos 15 países de todo el mundo. Estos son programas de transferencia de efectivo destinados a la mitigación de la pobreza entre la población de edad avanzada. Estudios previos han encontrado que estos programas reducen la pobreza y la desigualdad, mientras que sus efectos sobre la salud son menos claros. Esta presentación discutirá un estudio que dirigió y evaluó un programa de seguridad social no contributivo en el Estado de Yucatán, México, para personas de 70 años de edad en adelante. Personas que son elegibles al programa son asignadas a grupo de tratamiento o de control, obteniendo de ellas un conjunto de variables de antecedentes y medidas principales al inicio y cada seis meses, aproximadamente, durante el transcurso del experimento. Los resultados preliminares, utilizando un enfoque de diferencias en diferencias, son efectos del tratamiento sobre la oferta laboral, el hambre, el consumo médico y la memoria. Las personas que son elegibles al programa ganan su pensión en alimentos, visita al médico y en medicamentos, reduciendo drásticamente su oferta laboral.
Valores, Implicaciones de las Remesas y el Cuidado Transnacional de los Ancianos en la Seguridad Económica de los Inmigrantes Hispánicos de Bajos Ingresos en Estados Unidos
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La investigación sobre el envejecimiento de la población se enfoca generalmente en una población de edad avanzada en particular, en un lugar o contexto específico. Sin embargo, una creciente literatura sobre transnacionalismo hace hincapié en que para la población inmigrante, las sociedades de origen y de asentamiento están vinculadas a través de una densa red de conexiones económicas, culturales y políticas. Como tal, el envejecimiento en las Américas, entre poblaciones moldeadas por la inmigración, debe tener en cuenta el impacto indeleble de los vínculos transnacionales. Esta presentación se basa en encuestas originales y datos de entrevistas a profundidad en Durham, Carolina del Norte para investigar el impacto de las remesas y el cuidado transnacional de los ancianos sobre la seguridad económica de los inmigrantes hispánicos de bajos ingresos. Los resultados muestran que más de la mitad de los hogares de inmigrantes en Durham mantienen económicamente a los padres de edad avanzada y abuelos en el extranjero, lo que representa un importante “shock de riqueza” que a menudo precipita una cascada de sanciones económicas para los inmigrantes en los Estados Unidos. Los resultados sugieren que la necesidad de mantener económicamente a familiares mayores es un factor importante en la situación económica precaria de los inmigrantes poco calificados, y que tiene posibles consecuencias tanto para la transmisión intergeneracional de la desigualdad como para la seguridad en la vejez de los mismos inmigrantes.

Prevalencia y Elementos Correlacionados de Caídas en Adultos Mayores Mexicanos: Resultados de la ENSANUT 2012—Encuesta Nacional de Salud y Nutrición
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Las caídas representan una importante carga para la salud de los individuos, las familias y los sistemas de cuidado de la salud. A pesar de que la prevalencia y los factores determinantes de las caídas están bien documentados en EE.UU., se ha prestado poca atención a la carga que imponen las caídas a la salud pública en los países de América Latina. A partir de la Encuesta Nacional de Salud y Nutrición 2012 de México, esta presentación se enfoca en la prevalencia y los elementos correlacionados de las caídas en una muestra representativa de 8,801 adultos de 60 años en adelante, el 55.6% son mujeres. De la muestra total, 3,011 (34.0%) reportaron haber tenido al menos una caída en los últimos 12 meses; 29.2% hombres y 38.1% mujeres. El sexo femenino y la edad avanzada fueron significativos en la determinación de las caídas (p < 0.01), mientras que la educación y el estado civil no lo fueron. En cuanto a la condición clínica, el tener una o más enfermedades crónicas, el haber soportado un derrame cerebral en el último año, el presentar un cuadro depresivo, y el reportar dificultad para realizar las AVD, fueron determinantes significativos (p < 0.01) de haber tenido caídas en los últimos 12 meses. Además, el reportar problemas visuales y auditivos fueron ambos altamente significativos. El estudio muestra resultados similares a los de estudios realizados en otros países, específicamente que el sexo femenino, la edad avanzada, las enfermedades crónicas, el deterioro sensorial, la incapacidad funcional y el deterioro cognitivo son factores determinantes de las caídas individuales y recurrentes. Se presentan aquí implicaciones para futuras investigaciones y prácticas.

Discurso Magistral del Almuerzo
El Futuro Latino es el Futuro de Estados Unidos pero Qué Tipo de Futuro Será Este
Steven Murdock, Ph.D.
Rice University

Las tendencias y proyecciones demográficas recientes en Estados Unidos, al igual que sus estadísticas vitales y la estructura demográfica de su población, indican que el futuro de este país será determinado en gran medida por la población hispánica. Sin embargo, las características socioeconómicas de la población futura de Estados Unidos y de su población hispánica son mucho más inciertas. Esta presentación discutirá estos temas, haciendo énfasis en lo esencial que es el futuro de la medio ambiente, economía, empleo y políticas de EE.UU. que el futuro de los hispánicos y para las características socioeconómicas generales de los Estados Unidos. La presentación hace hincapié de que mientras mejoren las vidas a los hispánicos, mejor lo será al país.
La cobertura del seguro de salud y la calidad de la atención son factores comunes que se cree mejoran el acceso y la retención de las minorías raciales y étnicas a los servicios de salud. Sin embargo, hay poca evidencia de que la aceptación de un seguro público y la prestación de servicios que sean culturalmente competentes disminuyan el tiempo de espera y la retención entre latinos en tratamiento comunitario por abuso de sustancias. Esta presentación proveerá un análisis de datos del 2010 al 2011 a nivel de cliente y programas obtenidos de los programas de tratamiento que son financiados con fondos públicos en el condado de Los Angeles, California. Se analizó una muestra analítica de 13,328 clientes anidados dentro de 104 programas de tratamiento mediante modelos multinivel de regresiones binomiales negativas de medidas de conteo de los días para iniciar y permanecer en tratamiento. Los latinos representan el 43% de la muestra, con un 10% de esta muestra conteniendo 40 años de edad o más. Los programas que aceptan pago a través de Medicaid (p <0.001) y en el que el personal informa estar involucrado personalmente (p <0.01) así como los vínculos y recursos con las comunidades minoritarias (p <0.001) están negativamente correlacionados con el tiempo de espera del cliente. Del mismo modo, los programas con políticas y prácticas de evaluación y tratamiento que son culturalmente competentes (p <0.05) están asociadas positivamente a la retención en el tratamiento, después de controlar por características individuales y del programa. Se observa que, comparada a la población de adultos jóvenes, la población adulta mayor latina fue menos probable que accediera a un tratamiento oportuno. Asimismo, se observa que esta población abandonó el tratamiento más rápido que los jóvenes. Estos resultados preliminares proporcionan una base probabilística del por qué juegan las prácticas económicas y culturales minoritarias en mejorar el acceso y la permanencia a programas de salud en una población que está en alto riesgo de abandonar tratamientos. En esta presentación, se discuten las implicaciones de la reforma de salud.

Cuidado Informal de los Adultos Mayores Latinos: ¿Qué Nos Indica la Literatura Cualitativa?
Ladson Hinton, M.D.
University of California, Davis
Con el envejecimiento sin precedentes de la población de EEUU —el mayor crecimiento proyectado es el de los latinos entre todos los grupos étnicos del país— y las disparidades persistentes en materia de salud, es crucial mejorar la base de los sistemas que brindan cuidados para un importante problema de salud pública. Los cuidadores juegan un papel crucial en la administración formal e informal de...
la salud de los adultos mayores, especialmente de las personas con Alzheimer y otras demencias relacionadas. Hasta el 70% de las personas que sufren de Alzheimer en los EE.UU. son atendidas en el hogar y aproximadamente 9.8 millones de miembros familiares y no familiares de los hogares asumen las responsabilidades de prestar este servicio diario, mismo que a menudo es “invisible” y no remunerado. Debido a la carga y a los costos incurridos, los cuidadores están en riesgo de una mala calidad de vida y del deterioro de su salud mental y física. Por lo tanto, existe una necesidad urgente de entender cómo proporcionar un apoyo óptimo a los adultos mayores latinos dentro de las comunidades al igual que a sus cuidadores para evitar resultados adversos por ejemplo, la institucionalización, el aumento en el nivel de aflicción de los cuidadores, la reducción de la calidad de vida y del deterioro de su salud mental y física. Este estudio continuará examinando las opiniones que existen sobre la salud mental de los adultos mayores latinos en el contexto de los hallazgos epidemiológicos psiquiátricos recientes. El análisis examinará las características económicas de tres poblaciones adultas: ancianos estadounidenses, ancianos de origen mexicano en Estados Unidos, y ancianos mexicanos en México. El análisis examinará características tales como el nivel educativo, la presencia de una discapacidad, la participación en el mercado laboral, la fuente de ingresos, el acceso a seguro médico y la pobreza. El análisis también examinará proyecciones de la población para evaluar el crecimiento de la población de edad avanzada en las próximas décadas y las implicaciones de política de los cambios en los patrones económicos y demográficos de la población de edad avanzada en los Estados Unidos y en México, prestando especial atención a los enfoques binacionales relacionados con las necesidades del cuidado de la salud de la población de origen mexicano en ambos países.
Redes de Apoyo Familiar y la Población Mexicana que Está Envejeciendo en Estados Unidos
Verónica Montes de Oca Zavala Zenaida, Ph.D.
Universidad Nacional Autónoma de México

En México, como en otros países latinoamericanos, la familia constituye uno de los recursos más importantes de apoyo a la población adulta mayor, tanto en lo emocional como en lo material. Sin embargo, en algunos casos dicho apoyo se modifica frente a la migración interna e internacional de los miembros del hogar. En los países de origen, por ejemplo, se ha documentado que los migrantes proporcionan ayuda a las personas adultas mayores a través de las remesas monetarias, restringiendo el apoyo solo al ámbito económico. De hecho, las evidencias previas muestran que la pérdida de circularidad migratoria reduce el capital transnacional social entre las familias migrantes, sobre todo para aquellas que se han quedado en el hogar de origen. No obstante, muy poco se conoce sobre los apoyos y el papel de la familia en el país de llegada. Este trabajo de investigación tiene como objetivo principal indagar sobre el papel que juega el apoyo familiar en el mantenimiento de la salud física y mental, así como el acceso a los servicios de salud y condiciones de vida de la población mexicana adulta mayor que vive en Estados Unidos. El estudio usa datos de la Encuesta Nacional de Entrevistas de Salud (National Health Interview Survey, NHIS) y la Encuesta de la Comunidad Americana (American Community Survey, ACS), a través de las cuales se ha podido construir una serie de indicadores relacionados con las familias y/o hogares, así como sobre las condiciones de salud y acceso a servicios médicos de los inmigrantes mexicanos que han envejecido en EE.UU. Asimismo, se utiliza información cualitativa recolectada a través de entrevistas en profundidad realizadas a adultos mayores mexicanos residentes en Dallas, Texas, Los Ángeles, California y Chicago, Illinois. Esta perspectiva que integra métodos de investigación cuantitativos y cualitativos puede complementar y dar voz a los datos que las encuestas arrojan proporcionando el sentir de los migrantes mexicanos sobre el apoyo familiar y la importancia del cuidado a la salud en el contexto del envejecimiento. Los datos muestran que existen diferentes niveles de desprotección de la población migrante mexicana residente en Estados Unidos en materia de servicios de salud, con lo cual no pueden prevenir cabalmente problemas de salud física o mental. A pesar de estos efectos adversos, el capital cultural de la población mexicana es un factor que la protege ante la adversidad que amenaza sus condiciones de salud en los EE.UU.
hispánicas, y a menudo comprenden terrenos espaciosos (1/2 - 1 acre), que en combinación con la flexibilidad y el bajo costo de la auto-
construcción y administración de las viviendas, ofrecen múltiples posibilidades de ampliar el hogar, de combinar y compartir terrenos entre
miembros multigeneracionales de una familia en hogares pobres (por lo regular entre hijos adultos), y/o de proveer cuidados a los padres de
edad avanzada o abuelos dentro de la misma vivienda. En promedio, el valor de estas propiedades inmobiliarias oscila entre los $30,000 y
$60,000. Menos del 10 por ciento de los dueños de estas viviendas tienen testamentos, de manera que la herencia se defiere por la ley de
sucesión intestada, lo que lleva consigo confusiones en los títulos de propiedad y conflictos entre los beneficiarios, creando incertidumbre
y socavando mejoras en el hogar, perjudicando así la inversión para mejorar la vivienda.

Presentación del Panel V: Académicos Emergentes – Presentaciones Orales

Estrés por Migración, Cohesión Familiar y Aflicción Psicológica en Latinos Nacidos en el Extranjero
Georgiana Bostean, Ph.D.
University of California, Los Angeles

Estudios sugieren que los latinos tienen un fuerte grado de cohesión familiar, que puede amortiguar los efectos negativos del estrés sobre
la salud mental. Los inmigrantes latinos pueden enfrentar factores estresantes únicos a la experiencia de la migración y a la adaptación
posterior al país de destino. El estudio que se presenta responde a las siguientes preguntas empíricas: 1) ¿Está relacionado el estrés que
se experimenta con la migración a trastornos psicológicos entre los inmigrantes latinos? 2) Si este es el caso, ¿varía la relación entre el
estrés y la aflicción relacionada con la migración según el grado de cohesión familiar? Utilizando datos de una encuesta nacional de latinos
y asiáticos en Estados Unidos (titulada en inglés National Latino and Asian American Survey), examinamos a los latinos nacidos en el
extranjero (n = 1561) por sub-grupo para evaluar si la cohesión familiar regula la asociación entre el estrés relacionado con la migración
(por ejemplo, se sentía culpable por dejar a la familia en el país de origen, resultaba difícil relacionarse con los demás debido a las dificultades
con el idioma inglés) y los trastornos psicológicos (por ejemplo, se sentía desesperanzado o padeció depresión en los últimos 30 días).
Calculamos regresiones de Poisson truncadas en cero así como el valor estimado de la aflicción. Los resultados preliminares muestran que las
personas con un alto grado de cohesión familiar padecen de menor aflicción psicológica en comparación con aquellas con un menor grado
de cohesión para los síntomas de estrés similar (el valor de la aflicción promedio fue de 15 y 16, respectivamente). Los resultados hablan de la
función que tienen las relaciones familiares en amortiguar los resultados de la salud mental para los latinos nacidos en el extranjero,
asimismo, informan las intervenciones de política dirigidas a mejorar la salud mental de esta población.

Traекторias de las Limitaciones en las AVD en México, 2001-2012
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The University of Texas Medical Branch at Galveston

Las Actividades de la Vida Diaria (AVD) se han utilizado, generalmente, como una herramienta para evaluar si una persona necesita ayuda
para realizar las actividades diarias del cuidado personal (como vestirse, bañarse, comer, entre otros), especialmente en la vejez. Además de
evaluar el nivel de independencia de un adulto, las AVD también pueden servir para producir un envejecimiento saludable ya que la capacidad
de una persona de realizar actividades básicas permite su participación en actividades más complejas. México se enfrenta a una población que
está envejeciendo rápidamente. Este ritmo acelerado, combinado con diferentes perfiles de riesgo y diferentes culturales, socioeconómicos
y de género, puede obstaculizar la capacidad de las adultos mayores de cuidarse a sí mismos, por lo que el análisis de las AVD es
particularmente relevante para entender el proceso de discapacidad en países en desarrollo, cuyas poblaciones envejecerán rápidamente. Esta
presentación tiene por objeto describir las trayectorias que siguen las limitaciones de las AVD en México, e identificar cómo los ingresos y la educación pueden crear diferencias en estas limitaciones a través de grupos definidos por
edad, sexo y lugar de residencia. Los datos provienen del Estudio Nacional de Saúde y Envejecimiento en México (ENASEM), una muestra
nacional de adultos mayores nacidos antes o durante el año de 1951, que incluyó un estudio de referencia en el 2001 y seguimientos en el 2003 y el
2012. El enfoque principal es de medir las diferentes actividades cotidianas al inicio del estudio y monitorear las diferentes transiciones dos y
cinco años más tarde.
La Salud de los Adultos Mayores Mexico-Americanos y la Aflicción de los Cuidadores Familiares
Sunshine Rote, Ph.D.
The University of Texas Medical Branch at Galveston
Esta presentación examina el impacto del estado de salud (funcional, mental y cognitivo) de mexicanos de edad avanzada en el nivel de aflicción psicológica que experimentan los familiares que están a cargo de su cuidado. Los datos fueron extraídos de la séptima ola del Hispanic Established Population for the Epidemiological Study of the Elderly (H-EPESE, 2010/2011) donde los participantes del estudio proveen información acerca de alguna persona cercana con la que pudieran contar en caso de necesitar ayuda. De los 905 informantes entrevistados, identificaron a 339 cuidadores familiares. Mediante el uso de regresiones OLS, no encontramos diferencias en los síntomas depresivos de un cuidador dada su capacidad funcional. Sin embargo, encontramos una incongruencia en los reportes de las AVD y de las AIVD por cuidador y dependiente para predecir síntomas de depresión en el cuidador. Asimismo, los síntomas de depresión y el Inventario Neuropsiquiátrico (NPI por sus siglas en inglés) o la conducta problemática asociada con el deterioro cognitivo en los adultos mayores se asociaron con la aflicción del cuidador. El estrés percibido atenúa parcialmente, pero no explica por completo estas diferencias. También identificamos a un subconjunto de cuidadores, los cuales son los más vulnerables a presentar síntomas de depresión; nos referimos en particular a los cuidadores de adultos mayores nacidos fuera de Estados Unidos. Serán parte de la presentación, discusiones sobre el papel que juegan los factores de resiliencia en el cuidador y sobre posibles mediadores de estas relaciones dentro del contexto del envejecimiento de los mexicanos y de sus familias.

Limitado Pero No Incapacitado: Una Comparación de los Auto-Reportes de Discapacidad con Evaluaciones de Movilidad de Ancianos Mexico-Americanos
Phillip Cantu, BA
The University of Texas at Austin
El estudio que se presenta analiza la asociación entre las evaluaciones de movilidad física y la discapacidad auto-reportada para el caso de los mexicanos de edad avanzada. Mediante el uso de datos de las olas 1 a la 7 del Hispanic Established Populations for the Epidemiological Study of the Elderly (H-EPESE) (n= 3,952), se utilizó el modelo de incapacidad para investigar las formas en que las limitaciones funcionales son necesarias pero no suficientes para el auto reporte de la discapacidad. La investigación se basa, particularmente, en dos conceptos dentro del proceso de incapacidad: 1) la limitación funcional, una medida objetiva de la debilidad física, y 2) la discapacidad, un concepto constituido socialmente que está determinado por la incapacidad para realizar tareas socialmente definidas como necesarias. Conceptualizamos las evaluaciones de movilidad orientadas en el desempeño (POMA por sus siglas en inglés) como una medida objetiva de la limitación funcional, y los auto-reportes de discapacidad para la realización de actividades de la vida diaria (AVD) como una medida subjetiva de la discapacidad. Los resultados preliminares sugieren que mientras que los mexicanos, en promedio, pasan más de la mitad de su esperanza de vida después de los 65 años de edad con al menos una limitación objetiva de movilidad, auto-reportan significativamente menos años en situación de discapacidad. Estos patrones se mantienen para los hombres y mujeres, así como para nativos y para aquellos nacidos en el extranjero, luego de controlar por covariables. Análisis posteriores identificarán covariables que, sumadas a la limitación de la movilidad, predicen el auto-reporte de discapacidad. Estos hallazgos serán aportes nuevos para guiar el proceso de incapacidad. La presentación concluirá con una discusión de implicaciones para mejorar la prestación de servicios para los mexicanos americanos de edad avanzada, en particular para los que experimentan el mayor riesgo de discapacidad.

El Cuidado de los Adultos Mayores Mexico-Americanos: Estrategias Comunitarias de Salud
Steve Wallace, Ph.D.
University of California, Los Angeles
La composición de los mexicanos de edad avanzada en los EUU está cambiando, con una proporción cada vez mayor siendo segunda y tercera generación. Los datos del Censo de Estados Unidos muestran que la generación más tardía de mexicanos es menos propensa a cohabitar con parientes, y que el tamaño de la familia se está reduciendo. No obstante, los adultos mayores mexicanos tienen bajas tasas de uso de servicios de salud formales. Con el énfasis de la reforma de salud en fortalecer servicios y programas...
de apoyo a largo plazo (LTSS por sus siglas en inglés) en la comunidad y no en las instituciones, la población mexicana debe ser una población objetivo prioritaria dentro de la política y la planificación. Desde una perspectiva de salud pública, prevenir la discapacidad y la necesidad del uso de LTSS es una estrategia de prevención prioritaria. Los niveles desproporcionados de diabetes y obesidad, que están directamente relacionados con la discapacidad, son condiciones prevenibles que deben ser parte de una estrategia de prevención de la discapacidad. Estas condiciones son influidas tanto por los determinantes sociales de la salud como por la atención asistencial de alta calidad. Una vez que se produzca la discapacidad, los servicios de apoyo comunitarios que son apropiados tanto para el adulto mayor como para la familia pueden maximizar el envejecimiento con dignidad. Encuestas de California muestran que los hispanos son más propensos que los blancos no hispanos a estar cuidando a un miembro de la familia, así como de apoyar la financiación pública de los servicios comunitarios. Teniendo en cuenta los bajos ingresos y la imposibilidad de pagar por LTSS, un programa similar al CLASS Act proporcionaría la mejor asistencia a los adultos mayores latinos que necesiten de estos servicios y programas.

Características de la Salud de los Hispanos que Están Envejeciendo y que Son Elegibles para Recibir Medicaid: ¿Qué los Estados No Están Ampliando la Cobertura de Manera Diferente?

H. Shelton Brown, Ph.D.
The University of Texas Health Science Center at Houston, School of Public Health

Aunque la Ley del Cuidado de Salud a Bajo Precio (Affordable Care Act, ACA) cambia muchas de las partes de nuestro sistema de salud, un elemento fundamental de la nueva ley es ampliar la cobertura de los seguros por medio del establecimiento de intercambios y de la expansión de Medicaid. Para los hispanos que están a punto de jubilarse, la expansión de Medicaid es particularmente importante. Según la Fundación Kaiser, hasta 24 de los estados del país no están participando en esta expansión. Las características de las personas que pronto estarán aseguradas no han sido suficientemente estudiadas. De igual forma, la manera en que sus características difieren de aquellas en los estados que no optan por participar en la ampliación de la cobertura de Medicaid y los mercados de seguros de salud estatales.

La Seguridad Económica de una Población Minoritaria que Envejece: Un Perfil de los “Baby Boomers” Latinos para Informar a los Futuros Jubilados

Zachary Gassoumis, Ph.D.
University of Southern California

El gasto en el cuidado de la salud en los EE.UU. se encuentra en un máximo histórico y se prevé que siga aumentando, debido en parte al envejecimiento de los “baby boomers”. Como la mayor parte del gasto público en salud proviene de los ingresos fiscales generales, la capacidad del gobierno de los EE.UU. para financiar estas obligaciones futuras está determinada por la productividad económica de la fuerza laboral. El crecimiento de la población en los EE.UU. durante las próximas décadas está impulsado por una creciente población latina, lo que significa que los ingresos fiscales dependen de los ingresos de una fuerza laboral conformada por, cada vez más, latinos. El minimizar las desigualdades de ingreso persistentes entre latinos y no latinos será crucial para garantizar tanto la productividad económica de la comunidad latina como el crecimiento general de la economía de EE.UU. Utilizando datos de la Oficina de Censo de EE.UU., esta presentación presenta modelos de las disparidades de ingreso, actuales y del pasado, principalmente entre el grupo de los “baby boomers”. Los resultados de estos modelos se utilizarán para ahorrar la inversión actual y futura en la población latina, tanto para el desarrollo de la seguridad económica de los latinos como para el fortalecimiento del crecimiento económico nacional.
La Política de la Demografía Mexicana, la Migración y sus Implicaciones para la Salud y Seguridad Personal Fronteriza
Gregory Weeks, Ph.D.
University of North Carolina, Charlotte

La reciente elección presidencial de EE.UU. destacó al grupo de latinos jóvenes que está emergiendo en el “Nuevo Sur”, la mayoría de los cuales son ciudadanos estadounidenses que ayudarán a dar forma al panorama político de la región en un futuro. Parte de ese futuro incluirá el envejecimiento de sus padres y abuelos, muchos de los cuales ni son ciudadanos ni inmigrantes legales. Esta presentación examinará el tamaño y la tasa de crecimiento de la población adulta-mayor latina en los estados del sur, incluyendo un conjunto de proyecciones de la población hasta el año 2040, basándose en las tendencias que se evidencian entre los censo del 2000 y del 2010. Usando Charlotte como un estudio de caso, la presentación explorará las formas en que esta población puede tener diferentes necesidades a la población no hispana, que tendrán que ser abordadas por los gobiernos locales y estatales.

Estados Unidos enfrenta enormes retos de política pública derivados de sus transiciones demográficas y políticas. A medida que su población envejece, el país enfrenta limitaciones presupuestarias para administrar programas de asistencia social (como, por ejemplo, el Seguro Social y Medicare). Es posible que los “baby boomers” enfrenten con la edad mayor inseguridad económica en el retiro. Las necesidades de seguridad nacional del país deben enfrentarse a un cambio de orden global con el surgimiento de nuevas potencias: China, Brasil e India. A través de este torbellino de dilemas, EE.UU. también se convertirá en un país de “mayoría-minoría” y, por primera vez en su historia, una combinación de las minorías, los inmigrantes y los refugiados conformará la mayoría de su población, convirtiendo a sus subgrupos minoritarios en una minoría. ¿Qué significa para la política de envejecimiento en los EE.UU., donde los adultos mayores blancos han sido una fuerza electoral tradicionalmente poderosa, el hacer frente al crecimiento de grupos emergentes, tanto étnicos y sociales como de inmigrantes? ¿Cómo aborda esto a los debates políticos actuales sobre presupuesto, el papel que juega el gobierno, la reforma de inmigración y la política social? Esta presentación ofrecerá un contexto histórico y político para comprender mejor los temas, las preguntas y las posibles soluciones y oportunidades que puedan surgir con el envejecimiento y la creciente diversidad de los Estados Unidos.

La distribución por edad de México indica una población joven, pero la disminución en la tasa de natalidad y el aumento en la longevidad proyecta que México se convertirá en una economía adulta para el año 2035, con una relación de proporción de los contribuyentes a los beneficiarios de los programas sociales, incluyendo los programas de asistencia a personas de la tercera edad, cada vez más desfavorable. México cuenta con un sistema de salud, aunque desigual, universal, y las pensiones no contributivas se proveen para todas aquellas personas de 65 años de edad o más sin otras fuentes de ingreso por jubilación. El INAPAM, un instituto gubernamental, que se encuentra dentro de la Secretaría de Desarrollo Social, administra centralmente la política social para los adultos mayores. El desafío que enfrenta es el de satisfacer las cada vez más diversas necesidades de este grupo. Esta diversidad refleja varios factores demográficos y sociales: algunos surgen por la falta de apoyo social, como resultado de la disminución en el tamaño de la familia o las altas tasas de migración interna e internacional que enfrentan a la familia, que debilita las redes de apoyo dentro de la comunidad, y que está sólo parcialmente recompensadas por el Estado.
por las remesas; otros surgen por la pobreza concentrada y la falta de infraestructura en los servicios de salud, mientras que otros surgen por la vivienda informal, construida entre las décadas de los sesenta y los ochenta, y mucha de la cual necesita mejoras para satisfacer las necesidades de los propietarios ya de edad avanzada.

Discurso Magistral de Clausura

Se Requiere a Dos para Bailar Tango: Reflexiones sobre la Demografía Política de la Migración Mexicana, del Envejecimiento México-Americano y de las Desigualdades Étnicas.

Rubén G. Rumbaut, Ph.D.
University of California, Irvine

Mediante el uso de una bola de cristal, el futurólogo basa sus predicciones en un pasado que no volverá a repetirse y en un presente moldeado por la complejidad, el conflicto y la contradicción. No obstante, la llegada de una sociedad que es “mayoría-minoría” se prevé para Estados Unidos dentro de una generación, hecho que ya ha sucedido en los estados de California y Texas. La planeación y formulación de políticas para el envejecimiento y el bienestar de una creciente población mexico-americana deben ser contextualizadas dentro del “tango” enredado que es la interconexión entre Estados Unidos y México, particularmente en lo que concierne a los flujos migratorios internacionales, al supuesto “ajuste” demográfico de las necesidades económicas y de población de ambos países, a la incorporación de inmigrantes y de sus descendientes, y a los contextos políticos que la moldean. Las “fuerzas demográficas y económicas irresistibles” chocan con “objetos políticos inmóviles” en un contexto de crecientes desigualdades dentro de las cuales la mayoría de la población de origen mexicano se encuentra rezagada en términos de indicadores clave como la pobreza, el ingreso y la riqueza (dispériados que empezaron durante la Gran Recesión), así como en la educación y el acceso a los servicios de salud—fenómenos de un futuro más pronunciadamente entrelazado, aún cuando la población hispana relativamente joven envejece en un mayor número y proporción. Un estado perdurable muy similar al de las castas sigue siendo un posible panorama para millones de inmigrantes de edad adulta a los que se les ha negado la residencia permanente o la ciudadanía, mismos que seguirán siendo blanco de la persecución sistemática del Estado.
Georgiana Bostean, University of California, Los Angeles (UCLA)
Flavia Andrade, University of Illinois, Champaign-Urbana
Edina Vrbaří-Foster, University of Illinois, Champaign-Urbana
Migration-related Stress, Family Cohesion, and Psychological Distress among Foreign-born Latinos

Daisy Carreon, University of California, Irvine
Unmet Medical Need Among Asian American Subgroups: The Role of Residential Segregation

Phillip Castaño, The University of Texas at Austin
Chi-Tsun Chiu, Duke University-NUS Graduate Medical School
Limited But Not Disabled: A Comparison of Self-Reports of Disability With Mobility Assessments For Elderly Mexican Americans

Carlos Díaz-Venegas, The University of Texas Medical Branch at Galveston
Trajectories of Limitations in ADLs in Mexico, 2007-2012

Haruna Fukui, Arizona State University
Social Isolation of Immigrants in Old Age: Exploring Multiple Aspects of Social Network and Resource Flow

Marc A. Garcia, The University of Texas at Austin
Chi-Tsun Chiu, Duke University-NUS Graduate Medical School
Phillip Castaño, The University of Texas at Austin
Estimates of Active Life Expectancy in Older Mexican American Men and Women

Mauricio Garnier-Villarreal, University of Kansas
David K. Johnson, University of Kansas
Carol Woods, University of Kansas

Mónica Salazar-Villanea, University of Costa Rica
The Factor Structure and Item Properties of the Geriatric Depression Scale in a Costa Rican sample (GDS)

Mauricio Garnier-Villarreal, University of Kansas
Mónica Salazar-Villanea, University of Costa Rica
Esteban Montenegro-Montenegro, University of Costa Rica
David K. Johnson, University of Kansas

How The Autobiographical Memory Does Relate To Emotional And Cognitive Constructs In A Sample Of Costa Rican Older Adults

Elizabeth Goode, Oregon State University
Caroline Indelicato, Oregon State University
Mexican-Origin Women’s Perception of Preparing to Give Care: A Qualitative study

Nicole Marcione, University of Southern California (USC)
Sleep Interventions and Ethnically Diverse Older Adults

Stipica Mudrazija, University of Southern California (USC)
Latinx Populations and the Risk of Financial Insecurity in Later Life

Lawrence Panas, The University of Texas Medical Branch at Galveston
Karl Eichenhöchle, The University of Texas Medical Branch at Galveston
Temporal Trends in Differentiable and Cause-specific Mortality for Hispanics and non-Hispanics in the Southwestern United States, by Gender, 1990-2010

Kate Prickett, The University of Texas at Austin
Jacqueline Angel, The University of Texas at Austin
The Trajectory of Late-life Living Arrangements in the Unmarried Mexican-American Population

Mónica Salazar-Villanea, University of Costa Rica
The Factor Structure and Item Properties of the Geriatric Depression Scale in a Costa Rican sample (GDS)
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Nekehia Quashie, University of Utah
International Transfers to Older adults in Urban Mexico: Adult Children’s Perspectives

Telésforo Ramírez, Consejo Nacional de Población, Juárez, México
Mexican-Origin Elderly Aging Experiences in the United States: Persisting Inequalities in the Land of Opportunities

Adriana Reyes, The Pennsylvania State University
Health Services Utilization and the Living Arrangements of Elderly Immigrants and Natives

Soflighte Roit, The University of Texas Medical Branch at Galveston
Health of Mexican-Origin Elderly Aging Experiences in the United States: Persisting Inequalities in the Land of Opportunities

Juanita García, Texas A&M University
Mexican-origin Elderly Aging Experiences in the United States: Persisting Inequalities in the Land of Opportunities

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Soflighte Roit, The University of Texas Medical Branch at Galveston
Health of Mexican-Origin Elderly Aging Experiences in the United States: Persisting Inequalities in the Land of Opportunities

Joseph Sáenz, The University of Texas Medical Branch at Galveston
Early Life Socioeconomic Status and All Cause Mortality in the Mexican Health and Aging Study

Jennifer J. Salinas, The University of Texas Health Science Center, School of Public Health
Proximity to the US-Mexico Border and Life Space in Oldest Old Mexican Americans Living in the Southwest

Kimberly Wilson, The University of Texas Health Science Center, School of Public Health
The Role of U.S. Migration and Documentation Status on Health in Mexican Males

2013 Conference Leadership Biographies

Principal Investigator
JACQUELINE L. ANGEL (Ph.D., Rutgers 1989) is currently a Professor of Public Affairs and Sociology and a Faculty Affiliate at the Population Research Center and the LBJ School Center for Health and Social Policy at The University of Texas at Austin. Prior to joining the U.T. Faculty, she did her post-doctoral training at Rutgers in mental health services research and the Pennsylvania State University Program in Demography of Aging. Her research addresses the relationships linking family structures, inequality, and health across the life course, including a special focus on older Hispanics. She is particularly interested in evaluating the impact of social policies on the health and well-being of aging immigrants. Some of her recent publications include: Aging, Health and Longevity in the Mexican-Origin Population co-edited with Fernando Torres-Gil, and Kyriakos Markides, Handbook of the Sociology of Aging with Rick Settersten; and Hispanic Families at Risk: The New Economy, Work, and the Welfare State co-authored with Ronald Angel. Dr. Angel is a Fellow of the Behavioral and Social Sciences section of the Gerontological Society of America (GSA) and a Senior Fellow at the Sealy Center on Aging, UTMB School of Medicine. In 2010, she received the GSA Senior Service Scholar Award and in 2012, the Jacob’s Institute of Women’s Health Charles E. Gibbs Leadership Prize for the best manuscript in 2011.

2013 Conference Organizers
FERNANDO M. TORRES-GIL, M.S.W., PH.D., is a multidisciplinary career spanning the academic, professional, and policy arena. He is a Professor of Social Welfare and Public Policy at the University of California, Los Angeles (UCLA); an Adjunct Professor at the Davis School of Gerontology at the University of Southern California (USC), and Director of the UCLA Center for Policy Research on Aging. He has served as Associate Dean and Acting Dean at the UCLA School of Public Affairs. He has written six books and over 100 publications, including The New Aging: Politics and Change in America (1992) and Lessons from Three Nations, Volumes I and II (2007). His academic contributions have earned him membership in the prestigious Academies of Public Administration,
International Conference on Aging in the Americas

Gerontology and Social Insurance. His research spans important topics of health and long-term care, disability, entitlement reform, and the politics of aging. Dr. Torres-Gil was born and raised in Salinas, California, the son of migrant farm workers. He earned his A.A. in Political Science at Hartnell Community College (1968), a B.A. with honors in Political Science from San Jose State University (1970), and an M.S.W. (1972) and Ph.D. (1976) in Social Policy, Planning and Research from the Heller Graduate School in Social Policy and Management at Brandeis University. Dr. Torres-Gil is a co-investigator of the Conference Series on Aging in the Americas.

ALBERTO PALLONI, PH.D. is the H. Edwin Young Professor of Population and International studies, Director of Center for Demography and Ecology of the University of Wisconsin-Madison, and immediate past PAA president. Palloni works on formal models and statistical applications in demographic analysis. He is currently doing research on health and mortality disparities in the US and Latin America, aging and longevity, models for the study of mortality and morbidity in developing countries, modeling of the spread and consequence of HIV/AIDS in Sub-Saharan Africa, health and morbidity among Hispanics in the US and Mexico, health-related processes that operate as determinants of educational achievement and of adult socioeconomic attainment. He is PI of the panel study of Puerto Rican elderly (PREHCO), was PI of the study of aging in seven Latin American countries (SABE) and participated in the formulation of the Mexican Study of elderly people (MHAS).

Conference Series on Aging in the Americas (CAA)

Co-Investigators

KYRIAKOS S. MARKIDES, PH.D., is currently the Annie and John Gnitzinger Distinguished Professor of Aging and Director of the Division of Sociomedical Sciences, Department of Preventive Medicine and Community Health at the University of Texas Medical Branch in Galveston. He received his Ph.D. in Sociology in 1976 from Louisiana State University. He Dr. Markides is the Editor of the Journal of Aging and Health which he founded in 1989. He is the author or co-author of over 317 publications most of which are on aging and health issues in the Mexican American population as well as minority aging issues in general. His research has been funded continuously by the National Institute of Health since 1980. He is currently Principal Investigator of the Hispanic EPESE (Established Population for the Epidemiological Study of the Elderly), a longitudinal study of the health of 3,000 older Mexican Americans from the five Southwestern states. Dr. Markides is credited with coining the term ‘Hispanic Epidemiological Paradox’ (with J. Coreil) which is currently the leading theme in Hispanic health. He is also the editor of the Encyclopædia of Health and Aging published by SAGE Publications in 2005. The Institute for Scientific Information (ISI) has listed Dr. Markides among the most highly cited social scientists in the world. Dr. Markides is the 2006 recipient of the Distinguished Mentorship Award of the Gerontological Society of America, and the 2009 Distinguished Professor Award in Gerontology and Geriatrics from UCLA. He was also the inaugural recipient of the Pewinum Prize for outstanding service to the field of aging from the Eldred R. Royal Institute on Aging at the University of Southern California. The prize was awarded in February, 2010.

WILLIAM A. VEGA, PH.D. is a Professor at the University of Southern California, and holds appointments in Social Work, Preventive Medicine, Psychiatry, Family Medicine, Gerontology and Psychology. Dr. Vega is an elected member of the Institute of Medicine, National Academies of Science, and Emeritus Professor at the University of California, Berkeley. He was Co-Director of the Network for Multicultural Research on Health and Healthcare at UCLA. He has conducted field and clinical research projects on health, mental health, and substance abuse in various regions of the United States and Latin America. His specialty is multi-cultural epidemiologic and services research with adolescents and adults, work that has been funded by multiple public and private sources. He has published over 190 articles and chapters on these topics, in addition to several books. Dr. Vega was cited in ISIHighlyCited.com Web of Science in the top one-half of one percent of most highly cited researchers in the social science literature worldwide between 1990 and 2010. In 2002, he was awarded the Culture, Community, and Prevention Science Award by the Society for Prevention Research, and the National Award for Excellence in Research by a Senior Scientist by the National Hispanic Science Network. He was formerly a Council member of the Fogarty International Center of the NIH, a founding member of the International Consortium of Psychiatry Researchers on Aging.
Epidemiology of the World Health Organization, and a member of the Institute of Medicine (IOM) - Board of Population Health and Disease Prevention, a past member of the Robert Wood Johnson Foundation National Advisory Group for Health Policy Scholars, and immediate past chair of the IOM Health Disparities Roundtable.

Poster Session Presider and Organizer

TERRENCE D. HILL, PH.D. is an Associate Professor, Sociology Department, University of Utah. He received his PhD in Sociology at the University of Texas at Austin in 2006. His research examines the social distribution of health and health-relevant behaviors. He is especially interested in the effects of religious involvement, neighborhood context, social relationships, and socioeconomic status. His publications appear in a range of journals, including, for example, the Journal of Health and Social Behavior, Social Science & Medicine, The Journals of Gerontology, The Gerontologist, American Journal of Public Health, and Social Work. He has also recently published chapters in the Handbook of Sociology of Aging, Annual Review of Gerontology and Geriatrics, and the Handbook of the Sociology of Mental Health. His work on relationship violence benefited from the financial support of the National Institutes of Health—National Center on Minority Health and Health Disparities.

CAA Program Committee

MARÍA P. ARANDA, PH.D., LCSW is an Associate Professor at the University of Southern California, School of Social Work. Her research and teaching interests address the interplay between chronic medical conditions, psychiatric disorders, and sociocultural diversity among people from low-income, minority populations.

ELENA BASTIDA, PH.D. is Chair and Professor of the Department of Health Promotion and Disease Prevention at the Robert Stempel College of Public Health and Social Work, Florida International University in Miami. Her areas of expertise are aging, population health, health disparities, and mental health.

EILEEN CRIMMINS, PH.D. is the AARP Chair in Gerontology at the Davis School of Gerontology at the University of Southern California (USC), where she is currently the Director of the USC/UCLA Center on Biodemography and Population Health. Crimmins is also the Director of the Multidisciplinary Training in Gerontology and the National Institute on Aging (NIA)-sponsored Network on Measurement of Biological Risk. Her areas of expertise are demography of older populations, health and mortality, socioeconomic differences in health, biological risk, and aging.

DONALD A. LLOYD, PH.D. is a social epidemiologist trained at the University of Toronto. Dr. Lloyd has worked on several large-scale community-based studies in Canada and Florida. His work focuses on life-course processes that are associated with differential risk for mental health and substance-use problems across sociodemographic groups. His recent projects address the role of lifetime cumulative exposure to major and potentially traumatic events in the risk for initial onset of psychiatric disorders and addictions. His published research documents the important distinction between proximal and distal exposure to stressful events and their independent contribution to the risk for subsequent disorder. Dr. Lloyd developed and has led graduate seminars in the burgeoning field of life course epidemiology.

HECTOR M. GONZÁLEZ, PH.D. is an Associate Professor of family medicine and gerontology at the Wayne State University, School of Medicine. He is a Faculty Associate at the University of Michigan, Institute of Social Research, Research Center for Group Dynamics, Program for Research on Black Americans, and the Latina/o Studies Program. His areas of expertise are neuropsychology, neuroepidemiology and psychiatric epidemiology.

MARY N. HAAN, PH.D. is Professor in Residence, Department of Epidemiology & Biostatistics, Division of Clinical Trials and MultiCenter Studies at the University of California, San Francisco (UCSF). Her areas of expertise are epidemiology of aging and chronic disease, the effects of vascular and metabolic risk factors on dementia and cognitive performance, the role of socioeconomic status in chronic disease in older populations.

MARK D. HAYWARD, PH.D. is Director, Population Research Center; Professor of Sociology & Centennial Commission; Professor in the Liberal Arts at The University of Texas at Austin. His areas of expertise are life course origins of health disparities, mobility and mortality, biodemography and dynamic models, life table techniques.
ALBERTO PALLONI, PH.D. is the Samuel H. Preston Professor of Population Studies, Department of Sociology at the University of Washington. His areas of expertise are biodemography of aging: social, economic, and biological determinants of the aging process in the United States, Latin America and the Caribbean.

V. NELLY SALGADO DE SNYDER, PH.D. is a Senior Professor and Researcher at the National Institute of Public Health in Mexico (INSP), where she also directs the Global Health Program. Her research expertise is social determinants of health and mental health among vulnerable groups particularly Mexican U.S. migration, aging, poverty, gender and other social determinants of health.

REBECA WONG, PH.D. is P. & S. Kempner Distinguished Professor in Health Disparities, and Director of the World Health Organization Pan American Health Organization Collaborating Center on Aging and Health at The University of Texas Medical Branch at Galveston (UTMB).

Keynote Speakers

JORGE CHAPA is a Professor at the Institute of Government and Public Affairs (IGPA) at the University of Illinois in Urbana-Champaign where is also Professor of Sociology and Latina/Latino Studies. Chapa’s research has focused on alternatives to increase the successful participation of Latinos in higher education. He is currently a member of the U.S. Environmental Protection Agency’s National Advisory Committee. He has served as a member of the National Research Council Panel on Residence Rules in the U.S. Census and as a member of the U.S. Bureau of the Census Advisory Committee on Hispanic Population from 1994-2002. In 2006, Chapa was given the “Outstanding Latino/a Faculty Award in Higher Education and Teaching,” by the American Association of Hispanics in Higher Education (AAHHE). In 2006, his co-authored book, Apple Pie & Enchiladas: Latino Newcomers in the Rural Midwest (University of Texas Press, 2004) was nominated for the Senior Book Award of the American Ethnological Association. In 2005, he received the Indiana University Trustees Teaching Award in 2004. Now a U.S. citizen, Chapa was born in Mexico of Mexican parents and migrated to Chicago as an infant.

RUBÉN G. RUMBAUT is a professor of sociology at the University of California, Irvine. A native of Havana, Cuba, Dr. Rumbaut received his Ph.D. from Brandeis University. Over the past three decades he has directed seminal empirical studies of immigrants and refugees in the United States, from the principal survey of refugees from Vietnam, Laos and Cambodia in the 1980s, to the landmark Children of Immigrants Longitudinal Study (with Alejandro Portes). Among other books, he is the co-author of Immigrant America: A Portrait, and Legacies: The Story of the Immigrant Second Generation, which won the American Sociological Association’s awards for Distinguished Scholarship and for best book in the immigration field. He is the founding chair of the International Migration Section of the American Sociological Association, and a member of the Committee on Population of the National Academy of Sciences, the MacArthur Research Network on Transitions to Adulthood, and the Sociological Research Association. In 2013 he was elected to the National Academy of Education.

STEVE H. MURDOCK is the Allyn R. and Gladys M. Clune Professor of Sociology at Rice University. He previously served as Director of the U.S. Bureau of the Census until January of 2009. Prior to his appointment at Rice, he was the Lutcher Brown Distinguished Chair in Demography and Organization Studies at the University of Texas at San Antonio (UTSA) and the Director of the Institute for Demographic and Socioeconomic Research. Dr. Murdock earned his Ph.D. in demography and sociology from the University of Kentucky and he is the author or editor of 13 books and more than 150 articles and technical reports on the implications of current and future demographic and socioeconomic change. He is the recipient of numerous honors and awards. He was named one of the fifty most influential Texans by Texas Business in 1997 and as one of the twenty-five most influential persons in Texas by Texas Monthly in 2008. He is a member of the Phi Beta Kappa, Phi Kappa Phi, and Phi Eta Epsilon national honor societies.
RONALD ANGEL received his PhD in Sociology from the University of Wisconsin Madison. His interests include social stratification, medical sociology, race and ethnicity. He is the author of five books; over seventy referred journal articles; and numerous chapters and reports. He is currently completing a new work with Jacqueline Angel entitled: *Latinos in an Aging World* (Rutledge). Throughout his career Angel has been engaged in cutting-edge research based on multi-method techniques to address questions related to racial and ethnic disparities in wealth, income, health, and retirement security. His general research interests focus on social welfare and retirement systems, as well as access to and use of medical care by Hispanics and other minority populations.

EMMA AGUILA (Ph.D., Economics, University College London) is Director of the Center for Latin American Social Policy (CLASP). She earned her Bachelor’s Degree at the Instituto Tecnológico Autónomo de México (ITAM) in Mexico City. Her research is on pension reform, retirement behavior, subegy of saving, non-contributory pension programs as a poverty alleviation policy, and social security coverage and labor market behavior of immigrants. In her research she analyzes the effects on private savings and consumption as a result of a pension reform from a pay-as-you-go to a fully-funded system with individual retirement accounts in the First Prize of the Award on Pensions 2005 in Mexico. Aguila’s research on the social security systems, pension provision, retirement behavior in Mexico won the First Prize of the Inter-American Award for Research in Social Security 2007. She has experience designing and collecting survey data. She is currently leading a randomized control trial analyzing the impact of a non-contributory pension program in the State of Yucatan, Mexico.

MARÍA ELENA AGUILAR ALDRETE is Professor and researcher at the University of Guadalajara and President of the Gerontology Academic Board University of Guadalajara. Dr. Aguilar Aldrete received her M.D. at the University of Guadalajara, master in Gerontology at the University of Barcelona, Spain. Fellow in geriatric in Raigmore Hospital NHS Trust and Highland Health Board, Scotland. Diploma on “Services for the Elderly in the Family and Community”, in Israel; Special participation in the course of “U.S. Policy on Aging”, organized by the Catholic University of the Americas and White House in U.S.A., Washington, DC, professional stays in the Policy Research Center on Aging at UCLA. Her research interests are mainly based on longevity and quality of life, lifestyle health and illness. She has participated in numerous international scientific events in Europe, America, Japan, Australia. He has published articles in international scientific journals and renewal books in gerontology; she has won awards in national and regional level on research.

MARÍA P. ARANDA is an Associate Professor at the USC School of Social Work. She joined the School faculty in 1999 and holds a joint appointment with the USC Leonard Davis School of Gerontology. Dr. Aranda’s research and teaching interests address the interplay between chronic medical conditions, psychiatric disorders, and social support for people from low-income, minority populations. Dr. Aranda has served as research investigator on a number of studies addressing mental health interventions for geriatric and understudied populations, psychiatric care of older adults with chronic psychiatric disorders, generalizability of evidence-based mental health care, and training of interventionists in evidence-based practice. Dr. Aranda served on the Institute of Medicine’s (IOM) Committee on the Mental Health Workforce for Geriatric Populations which released its final report last year. She has received awards for her mentoring efforts in higher education and for her long-standing efforts to improve community-based services for older Americans.

GEORGIANA BOSTEAN is an Assistant Professor of Health Science, Environment and Policy at Chapman University. Broadly, her research is in the area of population health and health disparities, focusing on the social determinants of health among immigrant groups in the United States. Dr. Bostean’s research has examined selective migration and family relationships as contributors to the Latino epidemiological paradox, and the role of socioeconomic factors in explaining mortality differences in health behaviors and outcomes. Her work has been...
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between functioning and self-identification of disability status in the Hispanic Established Populations for the Epidemiologic Study of the
Assessments (POMAS), and subjective measures of disability, such as Activities of Daily Living (ADLS), in order to understand the relation
morbidity and mortality. In his current research he is exploring objective measures of functioning, such as Performance Oriented Mobility
Texas at Austin and a research fellow at the Population Research Center. He researches Hispanic health and aging with a focus on disability,
received his bachelor's degree in sociology from Southwestern University and is a graduate student at the University of
PHILLIP CANTU
workplace bans. He has looked at the effects of diabetes on the likelihood of working, including the community-wide. Finally, he has been
and Economics, the Annals of Regional Science and Diabetes Care. He has recently focused on the economics of health issues with long-
1998-2002. His work appears in Health Economics, the Journal of Health Economics, the International Journal of Health Care Finance
Vanderbilt University in 1998. Dr. Brown was at the School of Economics at the University of Queensland in Brisbane, Australia from
SHELTON BROWN
His current work focuses on the interrelations between global demographic trends and socio-economic development, urbanization,
and Economic, (ECLAC) included policy-oriented research and leading technical cooperation projects on economic-demographic issues, implemented in
Social Affairs (DESA), New York. His earlier work as Regional Advisor at the Economic Commission for Latin America and the Caribbean
is an Associate Professor of Health Economics in the Division of Management, Policy and Community Health at the University of Texas Health Sciences Center at Houston, School of Public Health in Austin. He received his Ph.D. in Economics from Vanderbilt University in 1998. Dr. Brown was at the School of Economics at the University of Queensland in Brisbane, Australia from

His current work focuses on the interrelations between global demographic trends and socio-economic development, urbanization,
pharmaceutical and consumer behavior, the economics of health care, and the economics of migration. He focuses on health care policy,
policy-oriented research and leading technical cooperation projects on economic-demographic issues, implemented in

PHILIP CANTU
immigration, health and social issues in Mexico, the United States and Europe. He has conducted research in Latin American,

SHELTON BROWN
is an Associate Professor in the Department of Demography and Biostatistics at Michigan State University, College of Human Medicine. He is the son of Mexican immigrants. Dr. González has clinical and research expertise in the epidemiology
of neurodegenerative disorders. His primary research interest is in Latino health. Dr. González is a principle investigator of the
Study of the Elderly (HEPESE). He also researches healthy life expectancy and differences by racial/ethnic/nativity groups in order to better understand
health disparities. Cantu hopes to continue to study health and aging in Hispanic populations across different data sets including the
NHIS, NHANES, NHAS, and HEPESE. His research interests include health disparities in aging and mortality, demography, quantitative methodology, survival analysis, and the life course.

CARLOS DÍAZ-VENEGAS
received his doctoral degree in Sociology from the University of Texas at Austin. During his doctoral studies, he worked as graduate research assistant with the research team of the Hispanic Established Populations for the Epidemiologic Study of the Elderly (HEPESE). Carlos's research interests are mortality, aging, and health issues in Mexican American community in the United States. He currently works as a postdoctoral fellow at the University of Texas Medical Branch in Galveston. Carlos would like to examine the connection between socio-demographic and economic factors (e.g., migration, educational attainment, income, etc.) and outcomes such as physical and mental disability, depression, prevalence of chronic illness, financial strain, and cognition, among others. Further, Carlos would like to expand his research in order to connect these variables to late-life mortality, morbidity, and disability risks in order to gain better understanding of the aging process in Mexico.

CHENOA A. FLIPPEN
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LADSON HINTON is Professor and Director of Geriatric Psychiatry in the Department of Psychiatry at UC Davis (UCD). He received postdoctoral training in various aspects of quality of life for older adults, specifically concentrating on the financial security of socially/economic minority and immigrant populations with an emphasis on the Latino baby boomer population. This work has assessed the relationship between immigration status, education, and income across various generational cohorts. His research also encompasses older adults and older adult interventions, particularly among social/ethnic minority communities, andtransitioning older adults from nursing homes to the community. Zach is a former recipient of a doctoral dissertation fellowship from the Center for Retirement Research at Boston College and previously served as a pre-doctoral fellow at the U.C. Edward R. Roybal Institute on Aging.

ERICK GUERRERO, PH.D. is an Assistant professor at the University of Southern California, School of Social Work. He completed his doctoral education at the University of Chicago, School of Social Service Administration. His program of research focuses on three inter-related areas associated with organizational capacity to improve standards of care for vulnerable populations: (1) Latino disparities in behavioral health services, (2) Implementation of culturally responsive and evidence-based practices, and (3) Integration of behavioral health services with primary care services. Dr. Guerrero has interest in healthcare services research, especially as it relates to ethnic/racial healthcare disparities. In his health services research, he has documented the important need for disaggregating Latino ethnicities to avert “masking” important between group differences. Dr. Gonzalez is an assistant professor at the University of Southern California, School of Social Work and was recently appointed as the National Institute on Aging (NIH) funded Clinically-relevant Medical Anthropology Program at Harvard Medical School. Dr. Hinton is recognized for his work on acculturation aspects of geriatric mental health, particularly Alzheimers Disease and late life depression. He has used both qualitative and quantitative methods in research on family caregiving to older Latinos with dementia and on barriers and facilitators of depression care for older Latino men. He directs the UCD RCMAR (Latino Aging Research Resource Center www.ucdmc.ucdavis.edu/latinoaging) and is conducting an NIMH funded study to develop a family-based primary care intervention for ethnically diverse older men in primary care. He conducts research on culture and psychiatric assessment of older adults (using the DSM-5 Cultural Formulation) and on global mental health.

VERÓNICA MONTES DE OCA ZAVAñA is a Sociologist at the National University of Mexico. She received her Master Degree in Demography, and PhD in Social Sciences with focus in Population Studies by El Colegio de Mexico. She is a National Researcher for the National System of Research (SNI). In October she was appointed to the Rector de la UNAM, Dr. José Narro Robles, Coordinator of the Aging and VíA Age University Seminar in the UNAM. She can coordinate 21 schools, institutes, centers and faculties with researcher and teachers in Gerontology and Ageing Studies. Her areas of research include: demographics Aging, social policies, immigration, population studies, public policies and organized youth and social networks. She is author of books, chapters and articles about aging, migration and transnationalism, health, families and social networks.

ZACHARY GASOUIM is a researcher in the economics of aging at the University of Southern California’s Price School of Public Policy. He completed his doctoral education at the University of Chicago, School of Social Service Administration. His program of research focuses on the capacity of the substance abuse treatment system to implement culturally responsive practices to treat low-income Latinos with co-occurring addictions. Dr. Gasounim is also the Principal Investigator in a 5-year NIDA study examining how changes precipitated by the Affordable Care Act may impact the capacity of community-based substance abuse treatment organizations to expand service delivery (mental health and substance use services) to Latino communities and their families. Zach's research focuses on various aspects of the social and economic determinants of the capacity of the substance abuse treatment system to implement culturally responsive practices to treat low-income Latinos with co-occurring addictions. Dr. Gasounim is also the Principal Investigator in a 5-year NIDA study examining how changes precipitated by the Affordable Care Act may impact the capacity of community-based substance abuse treatment organizations to expand service delivery (mental health and substance use services) to Latino communities and their families. Zach's research focuses on various aspects of the social and economic determinants of the capacity of the substance abuse treatment system to implement culturally responsive practices to treat low-income Latinos with co-occurring addictions. Dr. Gasounim is also the Principal Investigator in a 5-year NIDA study examining how changes precipitated by the Affordable Care Act may impact the capacity of community-based substance abuse treatment organizations to expand service delivery (mental health and substance use services) to Latino communities and their families.

SILVIA MEJIA-ARANGO is a Research Professor and Chair of the Population Studies Department at the Colegio de la Frontera Norte in Tijuana, Mexico. She received her Ph.D. in Psychology from the National University of Mexico. Dr. Mejia is involved in studies focusing on public health and aging in Mexican and Mexican-American populations. She has been collaborating during the last years with the Mexican Health and Aging Study in the area of cognition.
FERNANDO M. TORRES-GIL earned his A.A. in Political Science at Hartnell Community College (1968), a B.A. with honors in Political Science from San Jose State University (1970), and an M.S.W. (1972) and Ph.D. (1976) in Social Policy, Planning and Research from the Heller Graduate School in Social Policy and Management at Brandeis University. His multifaceted career spans the academic, professional, and policy arenas. He is a Professor of Social Welfare and Public Policy at UCLA, an Adjunct Professor of Gerontology at USC, and Director of the UCLA Center for Policy Research on Aging. He has served as Associate Dean and Acting Dean at the UCLA School of Public Affairs, and most recently Chair of the Social Welfare Department. He has written six books and over 100 publications, including The New Aging: Politics and Change in America (1992) and Lessons from Three Nations, Volumes I and II (2007). His academic contributions have earned him membership in the prestigious Academies of Public Administration, Gerontology and Social Insurance. His research spans important topics of health and long-term care, disability, entitlement reforms, and the politics of aging. In 2016 he received his third presidential appointment (with Senate Confirmation) when President Barack Obama appointed him as Vice Chair of the National Council on Disability, an independent federal agency that reports to the Congress and White House on federal matters related to disability policy. During his public service in Washington, D.C., he also served as Staff Director of the U.S. House Robert Robert Commission on Aging under his mentor, Congressman Edward R. Roybal.

STEVEN P. WALLACE, PHD. Dr. Wallace is professor and Chair of the Department of Community Health Sciences at UCLA Fielding School of Public Health, Associate Director of the UCLA Center for Health Policy Research (Center), and Director of NIA’s Resource Centers for Minority Aging (RCMAR) Coordinating Center. Wallace is a leading scholar in the U.S. in the area of aging in communities of color. He has published research on access to long-term care by diverse elderly groups, disparities in the consequences of health policy changes on racial/ethnic minority elderly, and the politics of aging. His research covers older Latino, American Indian, Alaska Native, Asian-Pacific Islander American, and African American. He has also published research on immigrant health for over 25 years. His work has been widely published in leading academic journals as well as in several dozen book chapters. His interest in reaching a policy and key stakeholder audience has also led him to routinely publish policy briefs and reports at the Center. His work has been widely published in leading academic journals as well as in several dozen book chapters. His interest in reaching a policy and key stakeholder audience has also led him to routinely publish policy briefs and reports at the Center.
research includes projects on the Elder Economic Security Standard Index, the impact of shifting low-income older adults with disabilities into managed care, the evidence base on effective approaches to improving clinical preventive service use by older adults through community-based efforts, and the impact of health care reform on undocumented immigrant adults.

PETER M. WARD earned his Ph.D. in geography from the University of Liverpool in 1976. His principal research interests are Latin American urbanization, contemporary Mexican politics, housing policy and planning, Mexico City, and colonia-type agencies. In addition to over one hundred articles and book chapters on public policy in Mexico and Latin America, he has written twelve books. Among his most recent texts are Mexico City (second edition), New Federalism and State Government in Mexico: Bringing the Statue Back Up (with Victoria Rodríguez), Colonias and Public Policy in Texas: Urbanization by Steal, and in 2008, Governance in the Americas: Decentralization Democracy and Subnational Government in the USA, Mexico, and Brazil (with Robert Warner, Peter Spink and Victoria Rodríguez) University of Notre Dame Press. A “sister” volume will appear in 2010 Metropolitan Governance in the Federalist Americas: Case Studies and Strategies for Equitable and Integrated Development (with Peter Spink and Robert Wilson), also with The University of Notre Dame Press. He is currently completing a book entitled: Informal America: Colonias, “Wildcat” Settlements and Homestead Settlements. In 2000, he and Victoria Rodríguez were jointly awarded the “Ohtli Medal and Recognition” from the Government of Mexico for their research and academic services to improving bi-lateral relations.

GREGORY WEEKS is Professor and Chair of the Department of Political Science & Public Administration at the University of North Carolina at Charlotte, where he has taught since 2000. His research focuses on Latin American politics, U.S.-Latin American relations, and Latino immigration. His previous books are The Military and Politics in Postauthoritarian Chile (2003); U.S. and Latin American Relations (2008); The Bachelet Government: Conflict and Consensus in Post-Pinochet Chile (with Silvia Borzutzky); and Irresistible Forces: Explaining Latin American Migration to the United States and its Effects on the South (with John R. Weeks). He is currently completing a textbook, Understanding Latin American Politics, slated to be published in 2014. He blogs regularly on all these issues at http://weeksnotice.blogspot.com/ and tweets about them at @GregWeeksUNCC.

Acknowledgements

We would like to thank each individual who contributed to the success of the 2013 CAA including, the invited speakers, emerging scholar poster presenters, presiders, discussants, rapporteurs, as well as those who provided staff assistance. We sincerely hope to see you at future CAA meetings.

Distingushed professional appreciation are the conference Distinguished Discussants who helped to foster healthy discussions and raise critical issues for consideration: Marie Mora, The University of Texas, Pan American, Florida; Flavia Andrade, The University of Illinois at Urbana-Champaign, Luis Miguel Gutierrez -Robledo, Instituto Nacional de Geriatría, Mexico City, Mexico; David Warner, University of Texas at Austin; Kristopher Manduke, University of Texas Medical Branch at Galveston; Tyson Brown, Vanderbilt University; David Warner, University of Texas at Austin; David Leal, University of Texas at Austin.

Thanks also to the Presiders for directing the sessions and for providing oversight: Victoria Rodríguez, Mark Hayward, Aníbal Villareal, Néstor Rodríguez, David Leal, The University of Texas at Austin; William Vega, Donald Lloyd, University of Southern California; Eduardo Sánchez, American Heart Association, National Center, and Elena Bastida, Florida International University.

Those involved with the poster session deserve special recognition for their efforts to inspire tomorrow’s emerging scholars in the field of Hispanic aging and health. We especially thank Teresa Hill for organizing and providing over the Emerging Scholars Poster Session, for Maria Aranda, John Taylor, Angelica Herrera, and Fernando Riesenberg for serving as judges in the juried poster session, and William Vega and Sharonne Kathe for acting as Presidents of the Mentoring Program.

Additional thanks must be given to our sponsors led by Kimberly Wilson, University of Texas School of Public Health, Austin Regional Campus, Courtney Bensch, University of California, Los Angeles, Donna Lane, Darmouth College, and Rebecca Benson, Marc Garcia, and Phillip Canto, University of Texas at Austin.
Special Acknowledgement

We must express our gratitude for the dedicated and tireless efforts of the staff at the University of Texas at Austin: in particular, Mary De La Garza, Phillip Hebert, Meghan Thomson, Sylvia Celedon, and Iris Aguilar from the University of Southern California. Their behind-the-scenes work helped to make this conference possible.

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The conference is being funded in part by a (R13) Scientific Meeting Grant from the National Institute on Aging (NIA) No. AG029767-01A2.

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