

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

THE UNIVERSITY OF
TEXAS
— AT AUSTIN —





2013 International Conference on Aging in the Americas

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University of Texas at Austin
College of Liberal Arts Building
Julius Glickman Conference Center
305 W 23rd St
Austin, TX 78712

SINCE THE 1700'S 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 monarca to symbolize the threads that unite us 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 monarca. La monarca 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 Artístico 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 claros cielos de octubre, indígenas reverentemente dan la bienvenida a las almas que regresan con alas, reuniéndose en valles y bosques de México centrales. 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 inicios ni extremos. Roberto Salas fue comisionado por la CAA para crear la monarca. La monarca fue tomada de imágenes precolombino y de los países industrializados y no-industrializados de las Américas.

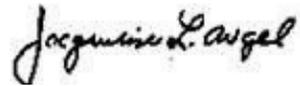
Salas es un artista Chicano que recibió su maestría en Bellas Artes de la Universidad de California, San Diego (UCSD). Nacido en Buena Vista, él es el Director del Centro Artístico y Cultural, una organización sin fines de lucro, dedicada a proporcionar servicios educativos relacionados con la vida cultural de la comunidad la comunidad de Buena Vista en El Paso, Texas.

Special Message from the Host

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 (JACQUI) ANGEL
Principal Investigator (NIA-R13, CAA)

PRINCETON UNIVERSITY

OFFICE OF POPULATION RESEARCH

MARTA TIENDA

WALLACE HALL,
SECOND FLOOR
PRINCETON, NEW JERSEY 08544

MAURICE P. DURING '22 PROFESSOR OF DEMOGRAPHIC STUDIES
PROFESSOR OF SOCIOLOGY AND PUBLIC AFFAIRS

July 28, 2013

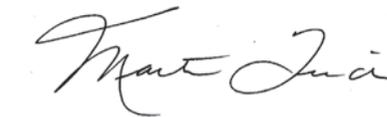
Professor Jacqueline Angel,
Co-Organizer
2013 ICAA International Conference
on Aging in the Americas

Dear Jacqui,

Congratulations to you and your co-organizers, Fernando Torres-Gill and Alberto Palloni, 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 the 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,





Julio Frenk, Dean
T & G Angelopoulos Professor of Public Health and International Development

July 30, 2013

Jacqueline L. Angel, Ph.D.
Principal Investigator
NIH/NIA Conference Series on Aging in the Americas: Mexico and the U.S.
The University of Texas at Austin
P.O. Box Y
Austin, TX 78713

Dear Jacqui,

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

The conference series 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 that 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 long-term fiscal retrenchment. A conference focused specifically on aging in the population of Mexican-origin and the unique social, political, and economic ties between Mexico and the United States is essential to understand 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 papers to be published in the Springer Sciences volume will discuss many critical issues that outline and inform an agenda for future research addressing disparities in the health and human services 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,

A handwritten signature in black ink, appearing to read "Julio Frenk".

Julio Frenk, MD, MPH, PhD
Dean of the Faculty, Harvard School of Public Health
T & G Angelopoulos Professor of Public Health and International Development
Harvard School of Public Health and Harvard Kennedy School
Harvard School of Public Health
Kresge Building, Room 1005
677 Huntington Avenue
Boston, Massachusetts 02115

2013 International Conference on Aging in the Americas

THE 2013 ICAA THEME: DEMOGRAPHICS OF AGING IN THE AMERICAS: HOW SHOULD WE PREPARE FOR AN AGING POPULATION IN MEXICO AND THE U.S.A.? focuses on key 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 in his/her career path 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	<i>Jacqueline Angel Fernando Torres-Gil Kyriakos Markides</i>
	Awards Presentation	<i>Victoria Rodríguez Rosalba Ojeda, General Consul</i>
	Keynote Address Introduction	<i>William Vega</i>
	Opening Keynote Address: Apple Pie, Enchiladas and the Age-Race Shift: Young and Aging Latinos in an Aging North America	<i>Jorge Chapa</i>

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	<i>Robert Hutchings</i>
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	<i>Presider: Mark Hayward Discussant: Marie Mora</i>
	Aging and Retirement Security: The Americas in Comparative Perspective	<i>Jorge Bravo</i>
	Latino Immigrants Across the Generations- A Comparative Analysis	<i>James Smith</i>
	Pension Reform and Civil Society in Latin America	<i>Ronald Angel</i>
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	<i>Presider: Andrés Villareal Discussant: Flavia Andrade</i>
	Alleviating Poverty for Older Persons: Results of a Social Welfare Program in Mexico	<i>Emma Aguila</i>
	Lifelines: The Implications of Migrant Remittances and Transnational Elder Care for the Financial Security of Low-Income Hispanic Immigrants in the United States	<i>Chenoa Flippen</i>
	Prevalence and Falls in Older Americans: Findings from ENSANUT 2012, Mexican National Health and Nutrition Survey	<i>María Aranda</i>

11:30 – 11:45 am	Break	
11:45 am-1:00pm	Keynote Introduction	<i>Introduction: Peter Ward Presider: Fernando Torres-Gil</i>
	Lunch Keynote Address: The Latino Future is the Future of the United States but what Kind of Future Will It Be?	<i>Keynote Speaker: Steven Murdock</i>
1:00 – 2:15 pm	Panel Presentation III: Issues of Social, Cultural, and Mental Health Implications	<i>Presider: William Vega Discussant: Luis Miguel Gutiérrez-Robledo</i>
	Impact of Aging and Social Changes in Mexico: A Clinical and Practical Perspective	<i>María Elena Aguilar Aldrete</i>
	Culturally-competent Research and Practices in Older Mexican Americans with Substance Abuse	<i>Erick G. Guerrero</i>
	Informal Caregiving to Older Latinos: What Does the Qualitative Literature Tell Us?	<i>Ladson Hinton</i>
	The Mental Health of Aging Latinos: What We Know and Where to go From Here	<i>Hector González</i>
2:15 – 3:30 pm	Panel Presentation IV: Bi-national, Trans-national Migration Perspectives: Mexico, Latin America, and the USA	<i>Presider: Néstor Rodríguez Discussant: Kyriakos Markides</i>
	New Mexican Immigrants and Economic Integration	<i>Rogelio Sáenz</i>
	Family Support Networks and the Aging Mexican Population Living in the United States	<i>Verónica Montes de Oca</i>

	The Profile of Mexican Elder Migration Flow into the US (2003-2012)	<i>Silvia Mejia</i>
	Aging, Inheritance and Multigenerational Residence in Low Income Colonias and Informal Subdivisions in Texas and the US	<i>Peter Ward</i>
3:30 – 5:00 pm	Juried Poster Session Judges: María Aranda, John Taylor, Angelica Herrera, Fernando Riosmena	<i>Organizer: Terrence Hill</i>
4:00 – 5:00 pm	Panel Presentation V: Emerging Scholars – Oral Presentations	<i>Presider: Donald Lloyd Discussant: Tyson Brown</i>
	Migration-related Stress, Family Cohesion, and Psychological Distress Among Foreign-born Latinos	<i>Georgiana Bostean</i>
	Trajectories of Limitations in ADLs in Mexico, 2001-2012	<i>Carlos Díaz-Venegas</i>
	Health of Older Mexican American Adults and Family Caregiver Distress	<i>Sunshine Rote</i>
	Limited But Not Disabled: A Comparison of Self-Reports of Disability With Mobility Assessments for Elderly Mexican Americans	<i>Phillip Cantu</i>
5:00 – 6:00 pm	Awards Reception	<i>Presider: Terrence Hill</i>
6:30 – 9:30 pm	Dinner and Mentoring Program	<i>Presiders: William Vega and Sunshine Rote</i>

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	<i>Presider: Eduardo Sánchez Discussant: David Warner</i>
	Caring for Older Mexican Americans: Community Health Strategies	<i>Steve Wallace</i>
	Health characteristics of aging Hispanics eligible for Medicaid: Are states not expanding differently?	<i>Shelton Brown</i>
	The Economic Security of an Aging Minority Population: A Profile of Latino Baby Boomers to Inform Future Retirees	<i>Zachary Gassoumis</i>
9:15 – 9:30 am	Break	
9:30 - 10:45 am	Panel Presentation VII: Policy and the Relevance to Contemporary Politics of Aging	<i>Presider: Victoria Rodríguez Discussant: David Leal</i>
	The Politics of Mexican Demography, Migration and its Implications for Border Health and Human Security	<i>Gregory Weeks</i>
	The Politics of Aging and Social Policy in the USA: Implications for U.S. Latinos	<i>Fernando Torres-Gil</i>
	Politics of Aging and Social Policy in Mexico: The New President's Agenda	<i>Bryan Roberts</i>

10:45 – 11:45am	Keynote Introduction	<i>Elena Bastida</i>
	Closing Address: Takes Two to Tango: Reflections on the Political Demography of Mexican Migration, Mexican-American Aging, and Ethnic Inequalities	<i>Keynote Speaker: Rubén Rumbaut</i>
12:00- 1:00 pm	Consensus Building Session and Sit-down Luncheon	<i>Presider: Jacqueline Angel Presider: Fernando Torres-Gil</i>
1:00 – 2:00 pm	CAA Advisory Group Publications Meeting	<i>Chair: Jacqueline Angel</i>

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

focused mainly or exclusively on public pensions and health care, which are sizeable 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. Older persons give and receive family transfers, 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 assets 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 prior 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 measures 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 reform that have subsequently required a second round of reforms to deal with inequities, or have been 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 medicines, 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 remittances and transnational elder care 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 Mexicans: Findings from the ENSANUT 2012—Mexican National Health and Nutrition Survey

María Aranda, Ph.D.

University of Southern California

Mariana López Ortega, PhD, and Luis Miguel Guitérrez Robledo, MD, PhD. Instituto Nacional de Geriatria, Mexico

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 ($p \leq .01$) 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 ($p \leq .01$) 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 diseases, 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 gaps 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 stresses 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 manifests 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 security, 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 racial 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 Latinos 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 regressions on count measures of days to initiate and remain in treatment. Latinos represented 43% of the sample, with 10% of this sample reporting 50 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 Latina caregiver wellbeing remains a significant public health challenge. Caregivers play a central role in the formal and informal health management of older adults, especially of 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 experience 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 lifecourse

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.

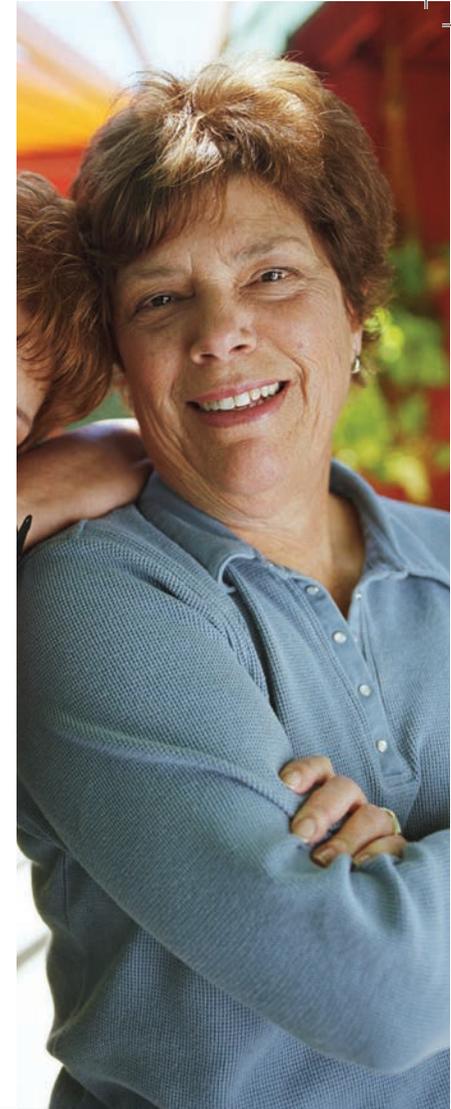
Panel IV Presentation: Bi-national, Trans-national Migration Perspectives: Mexico, Latin America, and the USA

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 three elderly populations: U.S. elderly, Mexican-origin elderly in the United States and Mexican elderly in Mexico. The analysis will examine such characteristics 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 Autónoma de México

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 countries. 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 U.S. 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 Mejía-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 elder subjects (50 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.

Peter 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 ranges between a median value of \$30-\$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

Panel Presentation V: Emerging Scholars – Oral Presentations

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 elder'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-EPESE, 2010/2011) when respondents provided information on a close person they could rely on for help. Out of the 905 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 incongruence 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. Perceived stress partially attenuates 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. Discussions of the role of caregiver resiliency 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. We conceptualize 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 low 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 part 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. Shelton 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 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 Expenditure 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 generational 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 Weeks, 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 rate of growth

of the older Latino population in the southern states, including a set of population projections out to 2040, 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 USA: 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 sustaining entitlement programs (e.g. Social Security, Medicare). While its aging baby boomers grow older, they may well 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 2035 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

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

Takes 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 status 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.

Conferencia Internacional Envejecimiento en las Americas (ICAA) 2013

EL LEMA DE LA CONFERENCIA INTERNACIONAL SOBRE EL ENVEJECIMIENTO EN LAS AMÉRICAS (ICAA, POR SUS SIGLAS EN INGLÉS) 2013, *Demografía del Envejecimiento en las Américas: ¿Cómo Prepararnos para una Población que está Envejeciendo en México y en EE.UU.?*, se enfoca en temas clave, dentro del contexto de la segunda transición epidemiológica, relacionados a cambios demográficos en México y a su impacto en la salud y el bienestar económico de la población mexicana e hispana (de origen mexicano) que está envejeciendo. Un gran cuerpo de investigación apunta a una dramática transformación demográfica en México, que muestra a una población relativamente joven, pero al mismo tiempo, el país debe atender en los próximos años las necesidades de una creciente población de edad avanzada con recursos mucho más limitados que los de EE.UU. Los Estados Unidos, con una mayor población en edad avanzada y con una fracción cada vez mayor de personas de 85 años de edad en adelante, debe lidiar con una carga mucho mayor de dependencia pero con una base de recursos considerablemente mayor. Sin embargo, entre los Estados Unidos y México, las relaciones bilaterales y los supuestos se han basado en una sabiduría convencional demográfica de un México joven y un Estados Unidos en envejecimiento tienen intereses compatibles. La Conferencia abordará los desafíos que enfrentan ambos países en diferentes contextos sociales, culturales y económicos.

Además de los ponentes invitados y de las conferencias magistrales, la Serie de Conferencias sobre el Envejecimiento en las Américas (CAA, por sus siglas en Inglés) fomenta el desarrollo de investigadores emergentes, mediante el patrocinio de una sesión de posters evaluados, una recepción a los premiados y una cena se llevará a cabo el miércoles 18 de septiembre. El objetivo de este programa es aportar habilidades, conocimientos y experiencia a los investigadores emergentes, para prepararlos a sobresalir dentro de las ciencias sociales y las ciencias del comportamiento en el campo del envejecimiento de las minorías con un énfasis principal en el estudio de la salud de los hispanos, en general, y de aquellos de origen mexicano. La *Sesión de Posters de Investigadores Emergentes y el Programa de Mentores* promueven que estudiantes de postgrado y alumnos de post-doctorado interesados en estos temas presenten propuestas de investigación. Al mismo tiempo, ambos programas se dedican a fomentar una mayor diversidad dentro de la red de investigadores.

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	
6:00	Bienvenida e Introducción	<i>Jacqueline Angel Fernando Torres-Gil Kyriakos Markides</i>
	Entrega de Premios	<i>Victoria Rodriguez Rosalba Ojeda, Cónsul General</i>
	Introducción del Conferencista Magistral	<i>William Vega</i>
	Discurso Magistral de Apertura: La Próxima América: Cambios Demográficos, Desconexión Social y Retos Futuros	<i>Jorge Chapa</i>

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	<i>Robert Hutchings</i>
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	<i>Moderador: Mark Hayward Comentarios: Marie Mora</i>
	Envejecimiento y Seguridad en el Retiro: Las Américas en Perspectiva Comparada	<i>Jorge Bravo</i>
	Los Inmigrantes Latinos a través de las Generaciones – Un Análisis Comparativo	<i>James Smith</i>
	Reforma al Sistema de Pensiones y la Sociedad Civil en América Latina	<i>Ronald Angel</i>
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	<i>Moderador: Andres Villareal Comentarios: Flavia Andrade</i>
	Aliviando la Pobreza de los Ancianos: Resultados de un Programa de Bienestar Social en México	<i>Emma Aguila</i>
	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	<i>Chenoa Flippen</i>
	Prevalencia y Elementos Correlacionados de Caídas en Adultos Mayores Mexicanos: Resultados de la ENSANUT 2012—Encuesta Nacional de Salud y Nutrición	<i>María Aranda</i>

11:30 – 11:45 am	Receso	
11:45 am-1:00pm	Presentación del Conferencista Magistral	<i>Presentador: Peter Ward</i> <i>Moderador: Fernando Torres-Gil</i>
	Discurso Magistral del Almuerzo: El Futuro Latino es el Futuro de Estados Unidos pero Qué Tipo de Futuro Será Este	<i>Steven Murdock</i>
1:00 – 2:15 pm	Presentación del Panel III: Temas con Implicaciones Sociales, Culturales y de Salud Mental	<i>Moderador: William Vega</i> <i>Comentarios: Luis Miguel Gutiérrez-Robledo</i>
	Impacto del Envejecimiento y las Transiciones Sociales en México: Una Perspectiva Clínica y Práctica	<i>María Elena Aguilar Aldrete</i>
	Investigación y Prácticas Culturalmente Competentes en Adultos Mayores Mexico-Americanos con Problemas de Abuso de Sustancias	<i>Erick G. Guerrero</i>
	Cuidado Informal de los Adultos Mayores Latinos: ¿Qué Nos Indica la Literatura Cualitativa?	<i>Ladson Hinton</i>
	La Salud Mental de los Latinos que Están Envejeciendo: Lo Que Sabemos y Hacia Donde Ir	<i>Hector Gonzalez</i>
2:15 – 3:30 pm	Presentación del Panel IV: Perspectivas de Migración Bi-nacional y Transnacional: México, América Latina y Estados Unidos	<i>Moderador: Néstor Rodríguez</i> <i>Comentarios: Kyriakos Markides</i>
	Nuevos Inmigrantes Mexicanos y su Integración Económica	<i>Rogelio Sáenz</i>
	Redes de Apoyo Familiar y la Población Mexicana que Está Envejeciendo en Estados Unidos	<i>Veronica Montez de Oca</i>

	Perfil de los Flujos de Migración a Estados Unidos de los Ancianos Mexicanos (2003-2012)	<i>Silvia Mejia</i>
	Envejecimiento, Herencia y la Residencia Multigeneracional en Colonias de Bajos Ingresos y Subdivisiones Informales en Texas y en los Estados Unidos	<i>Peter Ward</i>
3:30 – 5:00 pm	Sesión y Evaluación de Posters	<i>Organizador: Terrence Hill</i>
	Jueces: María Aranda, John Taylor, Angélica Herrera, Fernando Risomena	
4:00 – 5:00 pm	Presentación del Panel V: Académicos Emergentes – Presentaciones Orales	<i>Moderador: Donald Lloyd</i> <i>Comentarios: Tyson Brown</i>
	Estrés por Migración, Cohesión Familiar, y Aflicción Psicológica en Latinos Nacidos en el Extranjero	<i>Georgiana Bostean</i>
	Trayectorias de las Limitaciones en las AVD en México, 2001-2012	<i>Carlos Díaz-Venegas</i>
	La Salud de los Adultos Mayores Mexico-Americanos y la Aflicción de los Cuidadores Familiares	<i>Sunshine Rote</i>
	Limitado Pero No Incapacitado: Una Comparación de los Auto-Reportes de Discapacidad con Evaluaciones de Movilidad de Ancianos Mexico-Americanos	<i>Philip Cantu</i>
5:00 – 6:00 pm	Recepción a los Premiados	<i>Preside: Terrence Hill</i>
6:30 – 9:30 pm	Cena y Programa de Mentores	<i>Preside: William Vega y Sunshine Rote</i>

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	<i>Moderador: Eduardo Sánchez Comentarios: David Warner</i>
	El Cuidado de los Adultos Mayores Mexico-Americanos: Estrategias Comunitarias de Salud	<i>Steve Wallace</i>
	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?	<i>Shelton Brown</i>
	La Seguridad Económica de una Población Minoritaria que Envejece: Un Perfil de los “Baby Boomers” Latinos para Informar a los Futuros Jubilados	<i>Zachary Gassoumis</i>
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	<i>Moderador: Victoria Rodríguez Comentarios: David Leal</i>
	La Política de la Demografía Mexicana, la Migración y sus Implicaciones para la Salud y Seguridad Personal Fronteriza	<i>Gregory Weeks</i>
	La Política del Envejecimiento y la Política Social en EE.UU.: Implicaciones para los Latinos Estadounidenses	<i>Fernando Torres-Gil</i>

	Política del Envejecimiento y Política Social en México: La Agenda del Nuevo Presidente	<i>Bryan Roberts</i>
10:45 – 11:45am	Presentación del Conferencista Magistral	<i>Elena Bastida</i>
	Discurso Magistral de Clausura: Se Requiere a Dos para Bailar Tango: Reflexiones sobre la Demografía Política de la Migración Mexicana, del Envejecimiento Mexico-Americano y de las Desigualdades Étnicas	<i>Conferencista Magistral: Rubén Rumbaut</i>
12:00- 1:00 pm	Sesión de Consenso y Almuerzo	<i>Moderadores: Jacqueline Angel y Fernando Torres-Gil</i>
1:00 – 2:00 pm	Sesión de Publicaciones del Gabinete Asesor del CAA	<i>Moderador: Jacqueline Angel</i>

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 examinará el papel que juegan el ingreso laboral, las transferencias privadas y la renta de los activos. El ingreso laboral de las personas mayores es significativo en ambos países, pero disminuye con la edad mucho más rápido en EE.UU. que en México. Las personas 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 Inmigrantes Latinos a través de las Generaciones – Un Análisis Comparativo

James Smith, Ph.D.

RAND Corporation

El objetivo de este estudio es de 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 olas anteriores de inmigrantes irlandeses

e italianos. Derivo 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 latinos 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 observan 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, incluidas las mujeres. Este cambio en la filosofía del apoyo a la edad avanzada ha sido fomentado enérgicamente 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 eran 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 las reformas, no obstante, es un cambio en el ambiente que rodea a la jubilación y que tiene implicaciones

importantes para la solidaridad intergeneracional, la equidad y las cuentas nacionales. En esta presentación, se examinan los sistemas de retiro, formales e informales, en Argentina, Chile, México y Uruguay, países donde las reformas de pensiones adoptadas han requerido de una segunda ronda de reformas para hacer frente a las desigualdades, o se han dejado de lado por completo, como es el caso de Argentina.

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 diseña y evalúa un programa de seguridad social no contributiva en el Estado de Yucatán, México, para personas de 70 años de edad en adelante. Personas que son elegibles al programa son asignadas a grupos 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 gastan su pensión en alimentos, visitas al médico y en medicamentos, reduciendo drásticamente su oferta laboral.



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

Chenoa Flippen, Ph.D.

University of Pennsylvania

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 hispanos de bajos ingresos. Los resultados muestran no sólo que gran parte de los hogares de inmigrantes en Durham mantienen económicamente a los padres de edad avanzada y abuelos en el extranjero, sino también que las necesidades urgentes para el cuidado de la salud de los ancianos en América Latina representan 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 en el extranjero 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

María Aranda, Ph.D.

University of Southern California

Las caídas representan una importante carga para la salud de los individuos, las familias y los sistemas del 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 8,861 adultos de 60 años en adelante, de los cuales 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 ($p \leq 0.01$), mientras que la educación y el estado civil no lo fueron. En cuanto a la correlación clínica, el tener una o más enfermedades crónicas, el haber sufrido un derrame cerebral en el último año, el presentar un cuadro depresivo, y el reportar dificultad para realizar las AVD, fueron determinantes significativos ($p \leq 0.01$) de haberse caído en los últimos 12 meses. Además, el reportar problemas de visión 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, los síntomas depresivos, la capacidad funcional y el deterioro sensorial 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 hispana. Sin embargo, las características socioeconómicas de la población futura de Estados Unidos y de su población hispana son mucho más inciertas. Esta presentación discutirá estos temas, haciendo énfasis en lo esencial que es el cerrar la brecha educativa entre los hispanos y los blancos no hispanos (junto a otros) tanto para el futuro de los hispanos como para las características socioeconómicas generales de los Estados Unidos. La presentación hace hincapié de que mientras mejor les vaya a los hispanos, mejor le irá al país.

Presentación del Panel III: Temas con Implicaciones Sociales, Culturales y de Salud Mental

Impacto del Envejecimiento y las Transiciones Sociales en México: Una Perspectiva Clínica y Práctica

María Elena Aguilar Aldrete, Ph.D.

Colegio de Geriátría y Gerontología de Jalisco, México

La población de México está envejeciendo, como lo demuestra el aumento del número de personas mayores de 65 años de edad en el país, de 1.8 millones en la década de los setenta a 7 millones en el 2010. Este aumento tiene consecuencias similares tanto para México como para Europa, los EE.UU. y Canadá, aunque estas implicaciones se manifiestan de diferentes maneras. Las proyecciones demográficas plantean retos importantes para los sistemas de salud y asistencia social. Hay una necesidad urgente de reorientar las políticas públicas para tener en cuenta una cultura que está envejeciendo, incluyendo las políticas de educación, seguridad económica, fomento de la salud, relaciones intergeneracionales, fortalecimiento de las redes sociales y políticas del medio ambiente. El gobierno debe asumir esas responsabilidades en una sociedad que está polarizada, con un 50% de la población en extrema pobreza y un 10% de la población poseyendo grandes cantidades de riqueza. Los problemas de salud de los adultos mayores también están polarizados, con la riqueza conduciendo a enfermedades degenerativas crónicas, como la hipertensión, la diabetes y las enfermedades del corazón, y la pobreza llevando a la desnutrición. Asimismo, México es visto como el líder mundial en personas con sobrepeso y obesas. Nunca antes se habían observado estos fenómenos en la historia mexicana. Esta presentación ofrecerá perspectivas, dentro del contexto de la pobreza, la desigualdad y los frágiles sistemas de salud del país, para entender a la sociedad de México que está envejeciendo.

Investigación y Prácticas Culturalmente Competentes en Adultos Mayores Mexico-Americanos con Problemas de Abuso de Sustancias

Erick Guerrero, Ph.D.

University of Southern California

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 son culturalmente competentes disminuyen 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 programa 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 contando con 50 años de edad o más. Los programas que aceptan pagos a través de Medicaid ($p < 0.001$) y en el que el personal informó 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 probatoria del papel que juegan las prácticas económicas y culturales comunitarias 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 precedente de la población de EE.UU.—el mayor crecimiento proyectado es el de los latinos entre todos los grupos étnicos del país—y las disparidades persistentes en materia de salud, el asegurar el bienestar de los Latinos que brindan cuidados sigue siendo un importante problema de salud pública. Los cuidadores juegan un papel principal 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 atendidos 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 costes 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 (como por ejemplo, la institucionalización, el aumento en el nivel de aflicción de los cuidadores, la reducción de la calidad de vida) y, cuando sea posible, ayudar a los latinos de edad avanzada a envejecer en su lugar de residencia. Una evaluación sistemática y crítica de la literatura cualitativa actual sobre cuidados informales por parte de los latinos puede ayudarnos a entender cómo los factores socioculturales están relacionados con la experiencia de proveer cuidados y los resultados en este grupo. El objetivo general de este estudio es de informar sobre el estado de la ciencia en la investigación cualitativa sobre el tema de los cuidados informales que proveen los latinos a las personas con deterioro cognitivo, con el fin de avanzar nuestro conocimiento de los procesos socioculturales del cuidado entre la población latina. Los resultados de esta revisión pueden informar la intervención, las políticas y el desarrollo de teorías relacionadas a la atención y al apoyo comunitario a los adultos mayores latinos y a aquellos involucrados en el cuidado informal.

La Salud Mental de los Latinos que Están Envejeciendo: Lo Que Sabemos y Hacia Donde Ir

Héctor González, Ph.D.

Wayne State University

La población de latinos jóvenes y adultos en EE.UU. ha estado creciendo rápidamente en las últimas décadas, y es fundamental que exista información detallada y fiable que informe la elaboración de futuras políticas de salud pública. Esta presentación examinará las opiniones que existen sobre la salud mental de los adultos mayores latinos en el contexto de los hallazgos epidemiológicos psiquiátricos recientes. De igual forma, describirá las interacciones entre la cultura y la salud mental a lo largo del ciclo vital, y presentará proyecciones sobre la salud mental de los adultos mayores latinos así como implicaciones de la salud mental de los latinos para la salud pública en los próximos años.

Presentación del Panel IV: Perspectivas de Migración Bi-nacional y Transnacional: México, América Latina y Estados Unidos

Nuevos Inmigrantes Mexicanos y su Integración Económica

Rogelio Sáenz, Ph.D.

The University of Texas at San Antonio

Los Estados Unidos y México están experimentando importantes cambios demográficos que conllevan a que cada país tenga una población cada vez de mayor edad. En los Estados Unidos, el envejecimiento de los “baby boomers” se traducirá en un enorme crecimiento de la población de ancianos durante el periodo 2011-2029 cuando la generación del “baby boom” alcance los 65 años de edad. Asimismo, se espera que la población de origen mexicano en los Estados Unidos envejezca de manera significativa en las próximas décadas a pesar de la juventud de su población. Por otra parte, debido a las importantes disminuciones en las tasas de fertilidad y a la selectividad entre los grupos más jóvenes de emigrar, la población total de México se prevé que envejezca drásticamente en las próximas décadas. El análisis que se presenta examinará patrones económicos dentro de la población de edad avanzada en los Estados Unidos y en México durante las últimas tres décadas (de la década de los noventa a la década del 2010). Los datos se obtuvieron de las muestras integradas de microdatos censales de uso público que provee la Universidad de Minnesota bajo el nombre en inglés de *Integrated Public Use Microdata Samples* (IPUMS, por sus siglas en inglés). El análisis evaluará 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, las fuentes de ingreso, 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. La presentación concluye con 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 aquellos que se han quedado en el lugar 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 fue posible 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 cuanti-cuali 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 residiendo 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 Estados Unidos.

Perfil de los Flujos de Migración a Estados Unidos de los Ancianos Mexicanos (2003-2012)

Silvia Mejía-Arango, Ph.D. and Roberto Ham-Chande, Ph.D.

El Colegio de la Frontera Norte

En funcionamiento desde 1993, la Encuesta sobre Migración en la Frontera Norte de México (EMIF) es el programa de investigación ininterrumpido más antiguo del país que traza datos originales sobre el número de personas que llegan a las ciudades fronterizas mexicanas. A través de la encuesta llevada a cabo por El Colegio de la Frontera Norte (COLEF) en puntos específicos, tales como aeropuertos y estaciones de autobuses en el lado mexicano de las ciudades fronterizas, se miden la composición y las características de los flujos de mexicanos. El objetivo principal del estudio que se presenta es el de describir el flujo de la migración de los adultos mayores (de 50 años de edad en adelante) del sur al norte del país durante el período del 2003 al 2012. Asimismo, se analizan longitudinalmente el tamaño de los cambios y las características socio-demográficas de los individuos que llegan a la frontera y de aquellos con la intención de cruzar la frontera y permanecer en los EE.UU. permanentemente.

Envejecimiento, Herencia y la Residencia Multigeneracional en Colonias de Bajos Ingresos y Subdivisiones Informales en Texas y en los Estados Unidos

Peter Ward, Ph.D.

The University of Texas at Austin

Este trabajo analiza la intersección entre las estructuras de vivienda, la organización del hogar y el envejecimiento de propietarios en colonias a lo largo de la frontera de Texas y en subdivisiones informales de vivienda (llamadas en inglés informal homestead subdivisions o IHSSs) en el Centro de Texas. Utilizando datos originales de una encuesta de hogares, este trabajo analiza cómo los propietarios de estas viviendas periurbanas, mismos que han construido y/o administran sus propias viviendas, afrontan el curso de la vida, el envejecimiento, la disminución en la movilidad física y el aumento en la morbilidad crónica. En Texas, las colonias y las IHSSs son en gran parte



hispanas, 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 defiende por la ley de sucesión intestada, lo que lleva consigo confusiones en los títulos de propiedad y conflictos entre los beneficiarios, creando inseguridad 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 aquellos con un menor grado de cohesión pero con niveles de estrés similares (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.

Trayectorias de las Limitaciones en las AVD en México, 2001-2012

Carlos Díaz-Venegas, Ph.D.

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 predecir 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 diferencias culturales, socioeconómicas y de género, puede obstaculizar la capacidad de los 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 actividades diarias para la población adulta mayor 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 Salud y Envejecimiento en México (ENASEM), una muestra nacional de adultos nacidos antes o durante el año de 1951, que incluye 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 once 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 mexico-americanos 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 podrían contar en caso de necesitar ayuda. De los 905 informantes entrevistados, identificamos 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 mexico-americanos 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 mexico-americanos de edad avanzada. Mediante el uso de datos de las olas 1 a la 7 del Hispanic Established Populations for the

Epidemiologic Study of the Elderly (HEPESE) (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 construido 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 mexico-americanos, 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 considerablemente 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 aportan nueva luz para entender el proceso de incapacidad. La presentación concluirá con una discusión de implicaciones para mejorar la prestación de servicios para los mexico-americanos de edad avanzada, y en particular para los que experimentan el mayor riesgo de discapacidad.

Presentación del Panel VI: Costo y Cobertura: Impactos Fiscales de las Políticas de Salud**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 mexico-americanos de edad avanzada en los EE.UU. 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 mexico-americanos es menos propensa a cohabitar con parientes, y que el tamaño de la familia se está reduciendo. No obstante, los adultos mayores mexico-americanos tienen bajas tasas de uso de servicios de salud formales. Con el énfasis de la reforma de salud de 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 mexico-americana debiera ser una población objetivo prioritaria dentro de la política y la planeación. Desde una perspectiva de salud pública, prevenir la discapacidad y la necesidad del uso de LTSS es una estrategia de prevención primaria. 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 influenciadas tanto por los determinantes sociales de la salud como por la atención ambulatoria de alta calidad. Una vez que se produce 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 necesitan 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 de 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 estados que no participan en el programa se desconoce en gran parte. La Encuesta de Panel de Gastos de Medicaid (Medicaid Expenditure Panel Survey) para el año 2011 proporciona nuevos datos sobre el estado de salud, la raza y el origen étnico, la edad y la demografía. Con datos restringidos, examinamos cómo las características de las personas sin seguro, con edad próxima a la jubilación, pero elegibles para

recibir Medicaid bajo el ACA, difieren entre los estados que optan por participar en la ampliación de la cobertura de Medicaid y los que no. Se discuten las implicaciones fiscales, incluyendo los costos y beneficios, de aumentar el número de beneficiarios 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 será determinada por la productividad económica de la fuerza laboral. El crecimiento de la población en los EE.UU. durante las próximas décadas será impulsado por una creciente población latina, lo que significa que los ingresos fiscales dependerán 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 prosperidad económica de la comunidad latina como el crecimiento general de la economía de EE.UU. Utilizando datos de la Oficina del Censo de EE.UU., esta presentación plantea modelos de las disparidades de ingreso, actuales y del pasado, principalmente entre el grupo de los “baby boomers”. Los resultados de estos modelos se utilizan para abogar por 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.

Presentación del Panel VII: Las Políticas y su Relevancia a la Política Contemporánea del Envejecimiento

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 censos 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.

La Política del Envejecimiento y la Política Social en EE.UU.: Implicaciones para los Latinos Estadounidenses

Fernando Torres-Gil, Ph.D.

University of California, Los Angeles

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 blancos no hispanos 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 raciales como de inmigrantes? ¿Cómo afecta esto a los debates políticos actuales sobre presupuestos, 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.

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

Bryan Roberts, Ph.D.

The University of Texas at Austin

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 separa a las familias, que debilita las redes de apoyo dentro de la comunidad, y que está sólo parcialmente recompensada

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 Mexico-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 (disparidades que empeoraron durante la Gran Recesión), así como en la educación y el acceso a los servicios de salud—presagios de un futuro más pronunciadamente estratificado, aun 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 posibilidad de la ciudadanía, mismos que seguirán siendo blanco de la persecución sistemática del Estado.

Mentoring Emerging Scholars

The overarching goal of the Conference Series on Aging in the Americas (CAA) mentoring program is to provide the skills, knowledge and experience to prepare the emerging scholar to excel in his or her career path in behavioral and social sciences in minority aging with a special emphasis on Hispanic health.

The CAA fosters the development of emerging scholars in field of Hispanic aging through its various conference activities, which include:

- the acceptance of exemplary poster submissions for a juried poster session
- the selection of exemplary posters for oral presentation
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- the opportunity to speak with leading researchers in the field of Hispanic aging during a one-on-one mentoring session, which is followed by a celebratory dinner

The mentoring efforts of these ten preeminent researchers in the field of Hispanic aging at the 2013 International Conference on Aging in the Americas (ICAA) cannot be overlooked:

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Poster Presenters

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Flavia Andrade, University of Illinois, Champaign-Urbana

Edna Viruell-Fuentes, 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 Cantu, 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, 2001-2012

Haruna Fukui, Arizona State University

Social Inequality 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 Cantu, 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

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

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Mexican-Origin Women's Processes of Preparing to Give Care: A Qualitative study

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Latino Population and the Risk of Financial Insecurity in Later Life

Lawrence Panas, The University of Texas Medical Branch at Galveston

Karl Eschbach, The University of Texas Medical Branch at Galveston

Temporal Trends in Differentials in Age 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

Nekehia Quashie, University of Utah

Intergenerational Transfers to Older adults in Urban Mexico: Adult Children's Perspectives

Telésforo Ramírez, Consejo Nacional de Población, Juárez, México

Veronica Montes de Oca, Universidad Nacional Autónoma de México (UNAM)

Juanita García, Texas A&M University

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

Sunshine Rote, The University of Texas Medical Branch at Galveston

Jacqueline Angel, The University of Texas at Austin

Kyriakos Markides, The University of Texas Medical Branch at Galveston

Health of Older Mexican American Adults and Family Caregiver Distress

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

Soham Al Snih, University of Texas Medical Branch at Galveston

Kyriakos Markides, The University of Texas Medical Branch at Galveston

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.'s multifaceted career spans the academic, professional, and policy arenas. 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,

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 morbidity and mortality in developing countries, modeling of the spread and consequences of HIV/AIDS in SubSaharan Africa, health and mortality 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 Gnitinger 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 Institutes 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 3,952 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 Encyclopedia of Health and Aging published by SAGE Publications in 2007. The Institute for Scientific Information (ISA) 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 Pearmain Prize for outstanding service to the field of aging from the Edward R. Roybal Institute on Aging at the University of Southern California. The prize was awarded in February, 2010.

WILLIAM A. VEGA, PH.D. is Provost 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 world-wide 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



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 Inequities 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.

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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 Program 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, global aging.

DONALD A. LLOYD, PH.D. 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 race/ethnicity 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, morbidity 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 Mexico-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 the Hispanic Population from 1994-2002. In 2006, Chapa was given the "Outstanding Latino/a Faculty Award in Higher Education Research and Teaching," by the American Association of Hispanics in Higher Education (AAHHE). In 2005, 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, 2005. He received the Indiana University Trustees Teaching Award in 2004. Now a US citizen, Chapa was born in Mexico of Mexican parents and migrated to Chicago as an infant.



RUBÉN G. RUMBAUT is 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 surveys 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 coauthor 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. Cline 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 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 2005. He is a member of the Phi Beta Kappa, Phi Kappa Phi, and Phi Eta Epsilon national honor societies.



Speakers Biographies

Co-authors are listed in the presentation briefs section starting on page 15.

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 book 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, adequacy 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 won the First Prize of the Award on Pensions 2005 in Mexico. Aguila's research on the social security systems, pension provision, and 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, Centro Universitario de Ciencias de la Salud de la Universidad de Guadalajara and President del Colegio de Geriatría, Psicogeriatría y Gerontología, Medica del Estado de Jalisco; 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, a specialty in ergonomics from the Polytechnic University of Catalunya and Ph.D. by

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 disease. He has participated in numerous international scientific events in Europe, America, Japan, Australia. He has published articles in international scientific journals and several 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 1995 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 sociocultural diversity among people from low-income, minority populations. Dr. Aranda has served on several key studies addressing mental health interventions for geriatric and underrepresented populations, psychosocial care of late-life psychiatric disorders, sociocultural adaptations to 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 nativity differences in health behaviors and outcomes. Her work has been



supported by grants from the National Science Foundation and UC Office of the President, and published in journals including *Journal of Immigrant and Minority Health* and *Annals of Epidemiology*.

JORGE BRAVO is an Economist from the University of Chile, and holds a Ph.D. in Demography from the University of California, Berkeley. Jorge is the Chief of the Population and Development Section of the Population Division, U.N. Department of Economic and Social Affairs (DESA), New York. His earlier work as Regional Advisor at the Economic Commission for Latin America and the Caribbean (ECLAC) included policy-oriented research and leading technical cooperation projects on economic-demographic issues, implemented in collaboration with national governments, the Inter-American Development Bank, the World Bank and other international organizations. His current work focuses on the interrelations between global demographic trends and socio-economic development, urbanization, population and environment, and the socio-economic aspects of ageing and intergenerational transfers.

SHELTON BROWN 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 1998-2002. His work appears in *Health Economics*, the *Journal of Health Economics*, the *International Journal of Health Care Finance and Economics*, the *Annals of Regional Science* and *Diabetes Care*. He has recently focused on the economics of health issues with long-term consequences. Dr. Brown is currently engaged in research predicting cigarette quit-line calls as they relate to policies like taxes and workplace bans. He has looked at the effects of diabetes on the likelihood of working, including the community-wide. Finally, he has been engaged in the economics of obesity, completing a cost-effectiveness study of CATCH, an obesity-related health promotion program.

PHILLIP CANTU received his bachelor's degree in sociology from Southwestern University and is a graduate student at the University of Texas at Austin and a research fellow at the Population Research Center. He researches Hispanic health and aging with a focus on disability, morbidity and mortality. In his current research he is exploring objective measures of functioning, such as Performance Oriented Mobility Assessments (POMAS), and subjective measures of disability, such as Activities of Daily Living (ADLS), in order to understand the relation between functioning and self-identification of disability status in the Hispanic Established Populations for the Epidemiologic 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, MHAS, 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 (H-EPESE). Carlos's research interests are mortality, aging, and health issues in Mexico as well as the 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.

CHENO A. FLIPPEN received her PhD in Sociology from the University of Chicago and is currently an Assistant Professor at the University of Pennsylvania's Department of Sociology and Population Research Center. Her research addresses the connection between racial and ethnic inequality and contextual forces at the neighborhood, metropolitan, and national level. She has published on diverse topics in stratification, including minority aging and retirement pathways, inequality in wealth accumulation, Hispanic immigrant adaptation and employment patterns in new destinations, the impact of migration on gender roles and women's labor market outcomes, the impact of residential segregation on minority homeownership and housing appreciation, and regional and racial variation in the relationship between internal U.S. migration and social mobility.

HECTOR M. GONZÁLEZ is an Associate Professor in the Department of Epidemiology 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 *Hispanic Community Health Study/Study of Latinos* (HCHS/SOL; NHLBI) Neurocognitive Reading Center, which is the largest study of its kind

of Latinos to-date. Dr. González has interest in healthcare services research, especially as it relates to ethnic/racial healthcare disparities. He has published several peer-reviewed manuscripts in leading journals on innovative methods for rigorously operationalizing 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. González is and has been funded by several NIH institutes, including the NIA, NHLBI, NIMH, and NINDS.

ZACHARY GASSOUMIS is a researcher in the economics of aging at the University of Southern California’s Davis School of Gerontology, where he recently completed the requirements for the PhD in Gerontology. Zach’s research focuses on various aspects of quality of life for older adults, specifically concentrating on the financial security of racial/ethnic minority and immigrant populations with an emphasis on the Latino baby boom population. This work has assessed the relationship between immigration status, education, and income across various generational cohorts. His research also encompasses elder abuse and elder abuse interventions, particularly among racial/ethnic minority communities, and transitioning 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 USC 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 and primary care services. His funded research includes a study funded by Los Angeles County, Department of Public Health to examine the capacity of the substance abuse treatment system to implement culturally responsive practices to treat low-income Latinos with co-occurring disorders. Dr. Guerrero 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 HIV prevention) and eliminate outcome disparities among African American and Latino clients.

LADSON HINTON is Professor and Director of Geriatric Psychiatry in the Department of Psychiatry at U.C Davis (UCD). He received his M.D. from Tulane University and completed his psychiatric residency at UC San Francisco (UCSF). He received postdoctoral training

mental health services in the Robert Wood Johnson Clinical Scholars Program at UCSF and in the National Institute of Mental Health (NIMH) funded Clinically-relevant Medical Anthropology Program at Harvard Medical School. Dr. Hinton is recognized for his work on sociocultural aspects of geriatric mental health, particularly Alzheimer’s 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.

SILVIA MEJÍA-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.

VERÓNICA MONTES DE OCA ZAVALA is a Sociologist at the National University of México. She received her Master Degree in Demography, and PhD in Social Sciences with focus in Population Studies by El Colegio de México. She is a National Research for the Social Research Institute and for the National System of Research (SNI). In October she was assigned to the Rector de la UNAM, Dr. José Narro Robles, Coordinator of the Aging and Old 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: demographic Aging, social networks, social supports, family relationship gender and aging, labor market and public policies. She is author of books, chapters and articles about aging, migration and transnationalism, health, families and social network.

BRYAN ROBERTS is a Sociologist and C.B. Smith Sr. Chair in US-Mexico Relations, Professor at The University of Texas at Austin. His activities encompass many funded research projects, most currently a Ford Foundation funded research and training project on Self-sustaining Community Development in Argentina, Chile, Colombia and Peru and two projects on Urbanization in Latin America funded by the Andrew W. Mellon Foundation. One of these, jointly with the Urban Affairs Institute of the University is on

Urban Governance and Intra-urban Population Differentials in six countries of Latin America (Argentina, Brazil, Chile, Mexico, Peru and Uruguay) and the other, jointly with the Center for Migration and Development of Princeton University, is on Latin American Urbanization in the late Twentieth Century.

SUNSHINE ROTE received her Ph.D. in Sociology from Florida State University in 2012. She is currently a postdoctoral fellow in the Sealy Center on Aging at the University of Texas Medical Branch at Galveston and the assistant editor of the *Journal of Aging and Health*. Her postdoctoral training is in health disparities, with an emphasis on elderly Mexican Americans. She is interested in the role of social relationships, particularly family, for health and well-being in later life. Her current projects use the Hispanic EPESE (Established Population for the Epidemiological Study of the Elderly) to examine predictors of healthy aging and survival to advanced ages and outline processes that contribute to family caregiver distress.

ROGELIO SÁENZ is Dean of the College of Public Policy and Peter Flawn Professor of Demography at the University of Texas at San Antonio. He is also a Policy Fellow at the Carsey Institute at the University of New Hampshire. Sáenz has written extensively in the areas of demography, Latina/os, race and ethnic relations, inequality, and immigration. He is co-editor of *Latina/os in the United States: Changing the Face of América* and co-author of *Latino Issues: A Reference Handbook*. Sáenz also writes regularly for the Population Reference Bureau concerning ongoing demographic trends, including authoring the Population Reference Bureau's Population Bulletin Update titled *Latinos in the United States 2010*. He is currently President-Elect of the Southwestern Social Science Association and is also Chair of the Council of the Inter-University Consortium for Political and Social Research (ICPSR) at the University of Michigan.

JAMES P. SMITH holds the RAND Chair in Labor Markets and Demographic Studies and received his Ph.D in Economics from the University of Chicago. He has led numerous projects, including studies of immigration, the economics of aging, wealth accumulation and savings behavior, the implications of early life conditions for later life SES and Health, and the interrelation of health and economic status around the world. Dr. Smith currently serves as the chair of the NIA Data Monitoring Committee for HRS and is a scientific advisor for the many of the HRS type surveys around the world in Europe and Asia including the English Longitudinal Survey of Aging. Smith is a co-pi I of the New Immigrant Survey Smith is a two time recipient of a National Institutes of Health MERIT Award, a recipient of the Ulysses Medal from University College Dublin in 2009, and was elected to the Institute of Medicine in 2012.

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 reform, and the politics of aging. In 2010 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 Select Committee 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 the 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 Latinos, American Indians/Alaska Natives, Asian-Pacific Islander Americans, and African Americans. 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. Those briefs and his broader research have received broad media coverage, including articles and stories in the *New York Times*, *LA Times*, *U.S. News and World Report*, *National Public Radio*, and *Fox News*. He has testified a number of times at state legislative hearings and in other forums. His current

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 States Back In* (with Victoria Rodríguez), *Colonias and Public Policy in Texas: Urbanization by Stealth*, and in 2008, *Governance in the Americas: Decentralization Democracy and Subnational Government in the USA, Mexico, and Brazil* (with Robert Wilson, 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 ICAA 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.

Deserving of profound appreciation are the conference Distinguished Discussants who helped to foster lively discussions and raise critical issues for consideration: Marie Mora, The University of Texas, Pan American; Flavia Andrade, The University of Illinois at Urbana-Champaign; Luis Miguel Gutiérrez -Robledo, Instituto Nacional de Geriátria, Mexico City, Mexico; David Warner, University of Texas at Austin; Kyriakos Markides, 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.

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