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In my career, my goal is threefold: 1) to work with community-based mental health organizations in an advisory position; 2) to produce research that is accessible across multiple populations; and 3) to advocate for, and empower, minoritized groups in mental healthcare. Throughout my doctoral studies my focus has been to understand the pathways for providing help and fostering mental health service access for better positive outcomes. This work has been an extension of my time working in mental health as both a high needs case manager for children and a domestic violence advocate. For my dissertation, the work has narrowed into how organizations can enhance the access experience for Latinx-identified persons seeking help.

Background

My first experience working in the mental health field was actually in my previous career in the medical field. I had a young lady with severe mental illness that did not understand she was pregnant, although she was 8 months along. She was wearing nothing but a pink t-shirt, walked in barefoot, and was living with delusions and hallucinations. This young lady and myself built a rapport because I understood her experience. Later, once we found a way to contact her family, I was the Spanish translator for the conversation between the providers and the parents so that this patient could acquire consistent medical and mental healthcare. This was the pathway I saw for myself as a helper. I knew I could use my experiences as a person living with mental illness to understand the journey for persons seeking treatment. The experience I had with this young lady fueled my passion into social work, and it continues to encourage my studies and my career.

For my general exam, I lived for a summer on a reservation in Central Washington. I conducted focus groups and interviews for the qualitative strand of a mixed methods study. As the lead for the qualitative piece, I developed the interview guide, led the team in creating the codebook, and wrote the final piece on the qualitative strand for my candidacy. The paper was called, “Somebody you can trust:...” which was a quote taken from the adolescents that participated in the focus groups. With these youth, I explored interpretations of “mental health,” how they defined mental health for themselves and their community, as well as what would promote their help-seeking. The work in this paper was the foundation for my dissertation.

My dissertation is an examination into the power imbalances we see in how social service providers create access to mental health treatment and services. The dissertation consists of three papers that focus on organizational culture, the power/powerlessness providers have in decision-making for and with their clients, and how discrimination and stigma play a role in a hotbed of immigration like the State of Arizona. To develop these papers, I ask questions that delve into internal and external policies, organizational workflow, and funding priorities. Qualitative interviews are being conducted with direct service providers, caseworkers, administrators, and other practitioners, in hopes of better understanding the inroads for creating culturally relevant and meaningful access to the Latinx population.

Future Work

In my future work, I plan to apply for funding specific to healthcare through the National Institutes of Mental Health, the Office of Minority Health, and through K grant applications. Further, it is my goal to work within communities. Arizona state, for example, has what is called a Regional Behavioral Health Authority (RBHA). The RBHA works specifically with persons living with severe and persistent mental illness and provides services through the state Medicaid programs, even if a person does not have Medicaid. A person diagnosed with a severe and persistent mental illness, through the clinics contracted with the RBHA, can receive psychiatric care, counseling, alternative therapies, and peer support, to name just a few of the benefits. In addition to working in academia on tenure track, I would like to do consulting with entities similar to the RBHA and conduct internal evaluative research to better these services and ensure that the needs of underrepresented populations are being addressed.

Conducting research with Latinx persons is constantly evolving because it is a dynamic group. Using qualitative methods from a critical theory perspective helps to navigate some of the issues around institutionalized racism, discrimination, and prioritizing of funds for different groups. I have written papers in the process of submission delving into decolonizing methodologies with the Latinx population – this is particularly relevant given that many Latinx subgroups have been historically colonized. In the United States, these same persons are transitioning into a colonized society that does not prioritize their minoritized experience. Using critical race theory, as well as exploring organizational theories, I will continue my research by examining power, advocating from an anti-racist lens, and targeting groups that are the decision-makers in policy (organizational and otherwise).

Summary

There are few words to express my passion for research, teaching, and community. In my experience, academia has not historically advocated for minoritized groups. Through my work, as outlined above, I plan to work within and through academia to make the work it produces accessible across populations. There are many avenues that have yet to be explored, and through my teaching future social workers, I will make social service organizations more relevant to historically oppressed groups. As a student at the University of Washington, I am aware that I have a lot of privilege. Having been given the chance to study at such a place of honor, I recognize the importance of taking this all back to my community in order to serve their needs.