



[César Escobar-Viera](#) is a postdoctoral associate at the [Center for Research on Media, Technology, and Health \(MTH\)](#). He was a practicing psychiatrist in Paraguay before coming to the U.S. in 2009 to complete his Master's and PhD degrees at the University of Florida. Dr. Escobar-Viera's current research focuses on improving mental health outcomes and access among sexual and gender minorities through the use of social media. His work is supported by a K99/R00 and joint-awarded pilot grant from the ETUDES Center, the MTH, and our own Center. The Center's Sarah Crowe had the opportunity to ask Dr. Escobar-Viera about his transition to research and the work that he does with LGBTQ+ youth.



Can you tell me a little bit about your background? Why did you decide to come to the United States?

I'm originally from Paraguay, and I was in a managerial role in a public psychiatric hospital during the country's Psychiatric Reform. During this time, we were trying to place long-term patients back into their communities rather than unnecessarily keeping

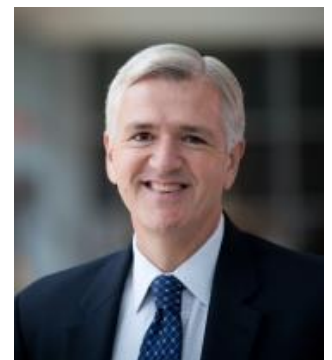
them in the hospital. The government found itself with the problem of not having sufficient community resources to provide mental healthcare access. I started asking myself about how we could increase access to mental health services beyond just visiting a hospital or an office, and I felt as though my clinical skills alone would not be enough to help me answer this question. I thought that getting an MPH with a focus on management and policy would be a good idea, so I applied for a [Fulbright scholarship](#). By the second year of my [MPH at the University of Florida](#), I had rediscovered my passion for research. I decided to switch career paths and embrace health research full-time.

Who were your mentors at the University of Florida?

My primary mentors for my PhD were Drs. [Robert Cook](#) and [Jeffrey Harman](#). Coincidentally, both had been faculty members at Pitt, as Bob was in our Division of General Internal Medicine and Jeff was in the Department of Psychiatry. Jeff inspired me and allowed me the freedom to pursue my passion to apply consumer information technology to improving mental health outcomes. I became involved in a project with Bob to evaluate the implementation of a mobile app to improve medication adherence among people living with HIV in Florida. We recently published one [manuscript](#) together, and we're in the process of publishing another.

What brought you to Pittsburgh?

Coming to Pittsburgh was a matter of getting in touch with [Brian Primack](#) and [Everette James](#). As I was finishing my PhD, I was looking for a mentor in the field of social media and mental health. Browsing through research manuscripts, I happened to read one of Brian's papers, and I realized that he was the mentor that I had been looking for. I sent an introduction email to him and told him that I thought his work and my goals lined up perfectly. I remember he replied very nicely and said that at that time, he was not recruiting, but he encouraged me to reach out again soon. Not long after, I saw a recruiting announcement for a post-doc in health services research at the [Health Policy Institute](#) under the mentorship of Everette James. It would also expose me to other great researchers who were working with him at the time. Coincidentally, Brian was one of them. When they flew me to Pittsburgh to interview, Brian was one of the people I spoke with. A few weeks later, I was at Pitt, and Brian became my full-time mentor until he left Pitt to take a new dean position in Arkansas this summer.



Everette James, JD, MBA
Director, Health Policy Institute



Well we're glad it worked out that way! I know that your research is mainly focused on improving mental health access among sexual and gender minority youth in rural areas. What inspired this particular interest?

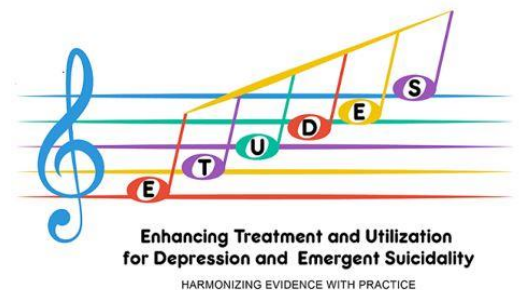
My interest in working with sexual and gender minorities is closely related to the social media component of my work. Research shows that these populations use social media a lot, but they also often face discrimination and rejection on many social media platforms. Still, they continue to use social media to combat social isolation. This is especially true in geographically isolated environments. Although urban LGBTQ+ populations also face many challenges, they often have more resources available to them than those living in rural areas. Youth face these challenges even more than adults, because their sexual orientations are often newly discovered and they do not yet have all the tools that adults use to connect with other people. There are also huge mental health disparities between sexual and gender minorities and the rest of the population, specifically in terms of depression, anxiety, and suicidality. Combined, all of these factors make rural LGBTQ+ youth an incredibly vulnerable population.

Can you tell me a little bit more about your K99/R00 project?

My [K99/R00](#) project is an observational study that includes several components. The first is a cross-sectional quantitative analysis of a sample of sexual minority young adults exploring associations between different characteristics of social media usage and depression. The second component involves qualitative online interviews with a national sample of sexual and gender minority young adults to learn about their experiences on social media and the impact of this experience on their mental well-being. The third component is a longitudinal survey that will explore the factors unveiled in the online interviews and their longitudinal association with depression among sexual and gender minority young adults. The goal of my K99/R00 is to unveil behaviors on social media that might be protective or deleterious for mental health outcomes, specifically for depression. This will help us develop interventions that take advantage of the protective behaviors and reduce risky social media behaviors.

That sounds fascinating! How does that project relate to your newly-funded ETUDES pilot study?

Both projects are part of a continuum research plan that I have. The [ETUDES \(Enhancing Treatment and Utilization for Depression and Emergent Suicidality\)](#) pilot is the first step of what I hope will be an actual intervention to improve social media use and reduce social isolation among LGBTQ+ youth. We're focusing on social isolation because it is an environmental risk factor for depression. The intervention will seek to encourage the protective behaviors while trying to reduce the risky behaviors that LGBTQ+ youth have on social media. Because of this, it is directly informed by the data from my K99/R00 project.



What has been the most rewarding part of your work with LGBTQ+ youth?

Because we are dealing with a population that faces these mental health disparities, these youth often seem very open to participating and being a part of the research process. This is incredibly valuable, because we want to create something that people will like and will use. Getting potential user's feedback and suggestions is fundamental to this. The fact that we're finding such an eagerness to participate has been very, very rewarding.

What are the particular challenges of working in this research field?

One challenge for a lot of researchers studying social media is to try to understand its risks and benefits. It's also hard to figure out how we can reinforce the benefits while keeping the risks at bay. That's going to be a driver over the next few years for me and for a lot of other researchers who are trying to create tools like ours. An incentive for me, though, is that I just don't see a trend of people using social media any less in the next few years. Because of that, I see many opportunities to provide health services and improve access to these over time.

