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Latino Adolescents and Acculturation

LISA M. EDWARDS

Latino youth are a growing, dynamic presence within most U.S. communities. Over the past decade, the number of Latino children has increased at a higher rate than any other ethnic group, and it is projected that by 2035, one in three children will be of Latino descent (National Council of La Raza, 2011). Many of these youth thrive and experience well-being, while others are faced with challenges imposed by discrimination and limited opportunities and access to resources. While adolescence is a unique developmental period of identity exploration and discovery for all youth, Latino adolescents in particular may face additional challenges as a result of their ethnic minority status and how they are viewed by others in U.S. society (Edwards & Lopez, 2006; Vázquez García, García Coll, Erkut, Alarcón, & Tropp, 2000). To support Latino youth in light of the challenges they may face, mental health professionals must understand their unique cultural contexts and identities. One aspect of identity, *acculturation*, has been identified as a prominent variable that is related to mental health outcomes and behaviors among Latino youth. In this chapter, definitions and models of acculturation are described, as well as research about the relationship between acculturation orientation and well-being. Finally, a case study is provided to illustrate some of the concerns that a Latino adolescent might present in therapy based on his level of acculturation and life experiences.

Acculturation: Definitions and Models

There are many cultural values and characteristics that are similar among Latino adolescents in the United States; however, there is incredible within-group heterogeneity in this population (Carlo, Villaruel, Azmitia, & Cabrera, 2009; Umaña-Taylor & Fine, 2001). It is not difficult to imagine, for example, the differences in life experiences between a fourth-generation 14-year-old Cuban American living with two parents in Miami, and a 14-year-old from Mexico who recently immigrated to Texas with only his cousin and uncle. Indeed, researchers and practitioners are encouraged to attend to the vast heterogeneity among Latinos based on national origin, immigrant status, language, gender, socioeconomic status, educational attainment, and many other identity variables.

Perhaps one of the most prominent of these variables that helps to define an individual's experience in the United States as a Latino is acculturation (Marin & Gamba, 1996). At the individual level, acculturation is the process of change that occurs when someone is in contact with two or more different cultures (Berry, 1997, 2003). Changes from acculturation can involve modifications in customs, language, cultural beliefs, and identity, and they can occur whether someone has lived in the United States for years or if he or she is a recent immigrant. Early models of acculturation posited a unidimensional approach, which situated Latino individuals, for example, on a continuum of acculturation between two opposite poles of European American and Latino culture. As individuals assimilated to mainstream culture, these frameworks suggested that they moved toward the European American end of the continuum and away from their Latino culture. A limitation of this approach, however, was that there was no acknowledgment of the possibility that acculturation toward the dominant culture does not necessarily preclude the simultaneous retention of one's culture of origin (LaFromboise, Coleman, & Gerton, 1993; Marin, 1992; Szapocznik & Kurtines, 1993; Zane & Mak, 2003).

Researchers now advocate utilizing bidimensional models of acculturation to account for individuals' abilities to assimilate to U.S. culture to some degree *and* maintain their Latino cultural values and identity (Berry, 2003; Zane & Mak, 2003). Berry's (1997) bidimensional model posits four acculturation categories based on an individual's level of connection to the receiving culture (i.e., the mainstream U.S. cultural dimension) and the heritage culture (Latino cultural dimension). These categories include *assimilation* (discarding heritage culture in favor of adopting receiving culture), *separation* (rejecting receiving culture and retaining heritage culture), *integration/biculturalism* (acquiring receiving culture and retaining heritage culture), and *marginalization* (rejecting receiving culture and discarding heritage culture). This model has served as the basis for research about different types of cultural orientations and their relationship to outcomes and adaptation, though it should be noted that studies are still often published with unidimensional models or simplistic markers of acculturation (e.g., language use, national origin).

In addition to the importance of integrating a bidimensional framework into an understanding of acculturation, researchers have recently called for a more multidimensional conceptualization of acculturation that includes values as well as behaviors (Schwartz, Unger, Zamboanga, & Szapocznik, 2010). Most acculturation measures only assess cultural practices or behaviors (e.g., associating with Latino friends, eating Latin American foods, reading in Spanish), rather than values and beliefs (e.g., feeling proud of one's cultural background, believing in certain gender role expectations). Clearly, understanding the degree to which a Latino adolescent adheres to Latino and White cultural values is important with regard to assessing acculturation, let alone developing an appropriate intervention for a mental health concern. The following sections briefly discuss three prominent Latino cultural values: familism, gender roles, and religiosity.

1 Familism

For Latino adolescents, families play a role in monitoring and involvement in youth behavior, and providing social support, among other functions. *Familismo* (familism) is the term used to describe the importance of extended family ties in Latino culture, as well as the strong identification, loyalty, and attachment of individuals with their families (Castillo & Cano, 2007). For example, adolescent Latinas have been found to be more likely to turn to family when requesting help for depression (Rew, Resnick, & Blum, 1997).

Because of the importance Latino culture places on family, conflicts that might arise if there are differences in expectations regarding behavior can be particularly distressing to youth. For example, there may be times in which the high importance placed on family loyalty (e.g., familial obligations) conflicts with personal aspirations regarding spending time with friends or developing independence as an adult. Studies have found that these types of family conflicts are related to higher depressive symptoms (Kuhlberg et al., 2010).

2 Gender Roles

All adolescents are socialized in contexts that provide expectations regarding gender roles. Among Latinos, the most commonly described gender roles are *marianismo*, *machismo*, and *caballerismo*. *Marianismo* is a traditional female role characterized by nurturance, self-sacrifice, and ability to endure suffering (Arredondo & Perez, 2003; Gloria et al., 2004). The traditional male gender roles, *machismo* and *caballerismo*, refer to characteristics such as strength and dominance (*machismo*) and protection of the family (*caballerismo*; Arciniega, Anderson, Tovar-Blank, & Tracy, 2008; Santiago-Rivera, Arredondo, & Gallardo-Cooper, 2002). In general, Latino boys are granted more freedom than girls, who are expected to be more home/family centered, reverent of the Virgin Mary,

spiritually superior; and protected from sexualization (Gloria et al., 2004; Sanchez, Reyes, & Singh, 2006). Qualitative research has shown that Latino youth are aware of and affected by these different gender expectations (National Women's Law Center & Mexican American Legal Defense and Educational Fund, 2009; Padilla, 2006), and that strong adherence to certain values, such as *machismo*, may serve as a risk factor for depression (Fragoso & Kashubeck, 2000), or risky sexual behavior (Herbst, Passin, Lyles, Crepaz, Marín, & AIDS Prevention Research Synthesis Team, 2007).

3 Religiosity

Religiosity/spirituality holds a prominent position in Latino culture as a unifying value (Gloria et al., 2004) and is prevalent in Latino families and communities. Latino adolescents often attend church with their families and may utilize religious faith as a source of support in times of need. Research has provided support for a positive relationship between religiosity and various health and well-being outcomes in samples of adults (e.g., Hackney & Sanders, 2003), aggregate samples of adolescents of various racial/ethnic backgrounds (e.g., Milevsky & Levitt, 2004), and specific minority groups (e.g., African American youth; Ball, Armistead, & Austin, 2003). Importantly, religiosity has been associated with less risky sexual activity among Latino adolescents (Edwards, Fehring, Jarrett, & Haglund, 2008; Edwards, Fehring, Haglund, & Pruszynski, 2011).

4 Acculturative Stress

When the process of acculturation is challenging, individuals may experience acculturative stress (or bicultural stress), which include conflicts in cultural values, acculturation gaps, language difficulties, and perceived discrimination (Edwards, 2004; Flores, Tschann, Dimas, Pasch, & deGroat, 2010; Gil, Vega, & Dimas, 1994;

Rodriguez & Morrobel, 2004; Romero & Roberts, 2003). Research suggests that higher levels of bicultural stress have been associated with symptoms of depression in immigrant Mexican American adolescents (Hovey, 1998; Hovey & King, 1996), Mexican American adolescents (Romero & Roberts, 2003) and Latina adolescents (Romero, Carvajal, Valle, & Orduña, 2007). Additionally, studies have shown that acculturation orientation is associated with certain health outcomes, particularly engagement in risky behaviors. In this section, examples of bicultural stressors are provided, as well as research demonstrating how these negatively affect the lives of Latino youth. Specifically, cultural value conflict, language difficulties, discrimination and stereotypes, and risky behaviors are discussed.

Differences in acculturation level or level of adherence to cultural values between parents and their children may lead to conflict. Latino parents may have more traditional expectations for their adolescents' behavior, and they may become aware that their child is both increasing in independence as well as being influenced by greater U.S. society. This can often lead to a fear that a child will lose his or her sense of cultural identity and heritage values. For example, in the area of gender role expectations, the expectation that Latinas be more dependent and family centered (e.g., *marianismo*) may also place young Latinas at odds with their parents as they develop more autonomy and associate more with peers (Goldston et al., 2008).

Latino adolescents sometimes experience strains related to their English and/or Spanish fluency. Youth often note that they feel at a disadvantage, and at times discriminated against, if they are unable to speak English with fluency (Flores et al., 2010; Rosenbloom & Way, 2004), which can cause challenges at school, with peers, and in everyday interactions in the community. In addition, when Latino youth do not speak Spanish with fluency, they might also experience stress as a result of difficulties in communicating with family members or peers. In some cases, they may be perceived as having lost

their Latino culture or heritage if they are not able to pass authenticity “tests” such as speaking Spanish well.

Latino youth also report facing discrimination from peers, teachers, and other adults in society. Research with adolescents suggests that this discrimination is pervasive and primarily based on poverty, lack of English fluency, skin color, and negative stereotypes about Latinos (Fennelly et al., 1998; Flores et al., 2010; Romero & Roberts, 2003; Rosenbloom & Way, 2004). These unique stressors—generally not faced by nonminority adolescents—can cause a great deal of conflict and stress for Latino youth, particularly because some may have subtle, yet significant consequences for treatment in various life contexts such as school and future opportunities.

In the past 20 years, data have accumulated about patterns of Latino health and behavior that suggest what researchers call the *immigrant paradox* (Markides & Coreil, 1986; Vega & Sribney, 2011). Specifically, studies have noted that first-generation Latinos (i.e., those born outside of the United States), engage in fewer health risk behaviors and generally experience better health outcomes in contrast to their second-generation counterparts (i.e., those born in America to immigrant parents). This is surprising, given that traditional assimilation models would posit these immigrants would experience substantial gains in social capital and opportunity upon arriving in the United States (Guarini, Marks, Patton, & Garcia Coll, 2011).

In recent longitudinal studies that investigated whether the immigrant paradox was relevant to adolescents in the areas of risky sexual activity and drug use, findings provided support for the pattern. Specifically, first-generation Latino adolescents demonstrated the lowest levels of sexual risk behavior (e.g., ever had sex, total number of partners, use of birth control) at each time point across adolescence and early adulthood as compared to their more acculturated counterparts (Guarini et al., 2011). With regard to substance use, first-generation Latino teens showed a later initiation of drinking and had less problematic alcohol use as compared to later-generation

teens (Bacio, Mays, & Lau, 2013). Importantly, this study investigated variables that mediated this relationship, and found that the erosion of family closeness and increased association with drinking peers were two mediating mechanisms. Together, the findings of these longitudinal studies emphasize the importance of identifying factors that might support youth in the acculturation process, and working to intervene before adolescents begin to engage in risky health behavior. A call for protective factors, particularly those that emanate from Latino culture, are critical in this process.

Protective Factors in the Lives of Latino Youth

Numerous factors have been identified that might serve to bolster the resiliency of Latino youth. While some may appear to be applicable to adolescents of all backgrounds (e.g., coping strategies), others are more specific to the cultural contexts of Latinos. Ethnic identity and biculturalism are discussed in this section as two protective factors that researchers have identified for Latino youth.

Ethnic identity and its relation to positive outcomes in the lives of Latino youth has been investigated in several studies. Phinney and Kohatsu (1997) describe ethnic identity as “a complex, multidimensional concept including, at a minimum, self-identification, a sense of belonging and commitment to one’s ethnic group, and the cognitive and affective meanings of one’s group membership” (p. 422). For Latino youth, having a strong sense of ethnic identity would include feeling proud to be Latino, wanting to explore Latino history and identity, and feeling a connection with Latinos and Latino culture. In a review of 21 studies with Latino adolescents, Umaña-Taylor, Diversi, and Fine (2002) found an overall positive relationship between ethnic identity and self-esteem. Umaña-Taylor and Updegraff (2007) found

that ethnic identity positively predicted self-esteem among Latino/a adolescents, and that self-esteem partially mediated the relationship between perceived discrimination and depressive symptoms. In other words, having a positive ethnic identity was related to self-esteem, which helped to decrease the negative effects of discrimination.

In addition to the values of possessing a strong ethnic identity, research has shown that having a bicultural orientation can be adaptive for Latino youth. Among adults, findings suggest those who are bicultural have more positive mental health outcomes than adults who are marginalized or who reject or are rejected by both cultures (Negy & Woods, 1992; Schwartz et al., 2010). Being bicultural has also been found to be adaptive among youth. In a study of 705 Latino/a adolescents, youth who were bicultural, as compared to those who were considered marginalized, were more likely to be optimistic and to have less depressive symptomatology (Carvajal, Hanson, Romero, & Coyle, 2002). Other recent studies have provided additional support for the idea that biculturalism is generally the most positive acculturation orientation for Latino adolescents (Coatsworth et al., 2005; Sullivan et al., 2007).

As has been discussed, being a Latino adolescent in current U.S. society can be challenging. Discrimination, acculturation gaps, language issues, and health disparities are some of the daily struggles that youth face as they develop into adults. Nonetheless, Latino youth have the potential to utilize personal and cultural strengths to experience well-being and may in fact possess additional resources as a result of their resilience (Edwards & Lopez, 2006; Sue & Constantine, 2003). In the following vignette, the case of a Latino adolescent named Juan is described to illustrate the effect of stressors related to acculturation, and to provide treatment recommendations for a clinician working with Juan that are based on the integration of protective factors with an understanding of Latino cultural values.

Case Vignette: Juan

Juan is a Mexican American 14-year-old who has recently been acting increasingly withdrawn from his family and neighborhood friends. Juan's parents are concerned because he avoids being seen in public with his family, has asked that people start calling him "John," and has started decorating his bedroom with pictures of European American celebrities. Juan has made negative and stereotypic comments about Latinos and recently expressed an interest in dating someone who is not Latino. Juan's grades in school have dropped over the past semester and he stays in his room a great deal. His parents mention their concerns to the school counselor and are given the name of a local clinician to contact for counseling.

In this vignette, Juan's family is concerned about his recent behavior, his disconnect from his family, and his rejection of various aspects of his Latino heritage. The tension between Juan and his family members could be conceptualized as normative behavior for this age, since many adolescents are exploring their identity and often experience this tension with family as they test boundaries and attempt to make decisions independently. For Juan, however, the strains of navigating two cultural contexts seem to be adding a layer of stress to his overall functioning. While this may be a part of his journey toward adulthood and exploring his identity as a man of Mexican American descent, he nonetheless may benefit from additional support at this time to prevent further withdrawn behavior and academic concerns.

A clinician who receives Juan as a referral will need to consider the multiple contextual and systemic influences on Juan's current functioning. Juan is at the age when he is beginning to think about his identity and his place in U.S. society. He is living in a family and neighborhood environment that is predominantly Mexican American, and yet he exists in a larger context of the White majority culture. It is this larger cultural context that is exerting a great deal of influence on Juan currently, particularly as it seems to provide

standards for what is successful, attractive, and desirable. It is possible that Juan has internalized messages about racial/ethnic minorities being less valued than White individuals, and he may have a degree of shame or self-hatred about his Latino heritage at this stage in his development as a result of others' perceptions and possible experiences of discrimination.

It will be particularly important for a clinician working with Juan to normalize some of his challenges navigating cultural contexts. The therapist can engage Juan in conversations about various acculturative stressors he experiences and discuss how these are common experiences for racial/ethnic minority youth. The clinician might also discuss cultural orientations and how many youth try to find a balance between retaining their family cultures while adapting to some degree to majority culture. Integrating bibliotherapy and other forms of media that provide narratives of how others have struggled to balance cultural contexts and identity might be particularly interesting and informative for Juan. In addition, the therapist might consider using strategies from narrative therapy to encourage Juan to tell the story of his identity journey in the past and what he expects for the future.

A clinician working with Juan also should keep in mind the importance of identifying individual, family, and community strengths, since positive functioning is often overlooked in Latino youth (Edwards & Lopez, 2006; Rodriguez & Morrobel, 2004). Juan can be encouraged to build upon personal strengths that have helped him cope in the past, and to consider which resources can be utilized to foster resilience and coping. Furthermore, discussing the differences and similarities of White and Latino cultural orientations may help him to see how he might integrate selective aspects of these cultures that seem to enhance his well-being.

Finally, a clinician working with Juan may find it helpful to engage his family members in the therapeutic process. Several researchers and theorists have noted the importance of including family members in therapy (Celano & Kaslow, 2000; Goldston et al.,

2008; Zayas & Pilat, 2008). Providing psychoeducation to Juan's family about Latino adolescents' bicultural experiences may help to provide a context for Juan's behavior and help his family understand some of the unique challenges that he is facing. In this way, further dialogue can proceed if both Juan and his family are aware that his experiences are common and not necessarily a sign of severe pathology. They may then all be able to work together to address conflicts arising from acculturative stress.

Treatment Recommendations

- Gather additional information about client's level of acculturation, ethnic identity, and adherence to Latino cultural values by administering the Acculturation Rating Scale for Mexican Americans-II (ARSMA-II; Cuellar, Arnold, & Maldonado, 1995) and the Multigroup Ethnic Identity Measure (MEIM; Phinney, 1992).
- Gather additional information about client's functioning in school, including experiences of discrimination, relationships with teachers, and ability to meet academic expectations.
- Continue weekly individual therapy focusing on exploration of acculturative stressors, cultural identity, and coping strategies.
- Consider brief family therapy sessions with parents and client.
- Possible referral for group therapy with culturally diverse adolescent boys.

As can be seen in Juan's case, having knowledge about the experiences Latino adolescents face in the United States is critical for therapists working with this growing demographic. Clinicians should learn about common stressors that Latino youth encounter and also devote appropriate time and energy to fully understanding

their clients' unique backgrounds, which may not necessarily fit the description of the "typical" Latino adolescent. Broadening conceptualizations to integrate familial and cultural strengths is also an important step for intervention, since the strengths of ethnic minority youth are commonly overlooked. Clinicians can thus normalize bicultural and personal stressors that their clients navigate, and utilize their clients' strengths and assets to work toward shared therapeutic goals.

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