

Articles on Latino Issues

Introduction:

This document is a compiled list of journal articles on issues concerning the Latino population. Each article is listed alphabetically by author and is categorized by topic area. The topic areas include: mental health, alcohol & other drugs, children & youth, community, research, policy, interventions, human behavior & development, and health. A brief description of each article is listed under its corresponding title, and how it can be utilized by readers. Multiple data bases and search strategies were used to retrieve and develop this resource. The list contains a combination of research and conceptual articles, which may be cross listed among topics. The Latino population is the fastest growing ethnic group in the United States. The purpose of this document is to familiarize and educate readers on issues concerning the Latino population. Ideas on how this resource can be used are listed following the description of each article.

Mental Health:

1.) Aguilar-Gaxiola, S.A., Zelezny,L., Garcia, B., Edmondson,C., Alejo-Garcia, C., & Vega, W.A. (2002). Translating research into action: Reducing disparities in mental health care for Mexican Americans. *Psychiatric Services*, 53(12), 1563-1568.

An evidence-based process was applied to educate the community about the need for improved mental health care for minorities. Policy changes are suggested to increase and improve the availability, accessibility, and appropriateness of mental health care for Mexican Americans. This is a community and consumer driven model, which aims to allocate resources to rural areas of California. Research is translated into action, to change policy and improve services.

This article is a good tool to demonstrate how research can be translated into practice to improve services and influence policy changes. It is relevant to research, practice, policy, and mental health areas. It is an example of how evidence based practice is developed.

2.) Anez, L.M., Paris, M., Bedregal, L.E., Davidson, L., & Grilo, C.M. (2005). Application of cultural constructs in the care of first generation Latino clients in a community mental health setting. *Journal of Psychiatric Practice*, 11(4), 221-230.

The Latino population experiences mental health problems similar to other ethnic groups, but underutilizes mental health services. The identified reasons for underutilization include; stigma, language, and acculturation levels. These factors become significant barriers to seeking treatment. This article offers practical clinical guidelines for mental health professionals who work with Latino groups based on cultural constructs and clinical experiences of work conducted in a large community-based Hispanic mental health clinic. The therapeutic alliance is important predictor of treatment adherence, which can be enhanced by understanding and appreciation of cultural constructs. Disparities among the mental health system and service utilization,

satisfaction, and outcome of Latino clients can be minimized by using culturally sensitive interventions and understanding cultural constructs.

This article may be beneficial in discussing social work mental health with emphasis on the therapeutic alliance and understanding culture as a factor in treatment engagement and retention.

3.) Baez, A. & Hernandez, D. (2001). Complementary spiritual beliefs in the Latino community: the interface with psychotherapy. *American Journal of Orthopsychiatry*, 71 (4), 408-415.

Culturally sensitive and competent mental health services depend on the congruency between the client and mental health practitioner views on mental illness and its treatment. Clinicians and researchers working with Latinos need to gain understanding of their religious beliefs and spiritual traditions. Clinicians also need to adopt a flexible, client centered approach to therapy and become aware of their own spiritual beliefs and its impact on interventions.

This article is useful in mental health courses, to develop an understanding of how religious beliefs and spiritual traditions can influence the definition of mental health problems and its corresponding treatment.

4.) Cardemil, E.V., Kim, S., Pinedo, T.M., & Miller, I. (2005). Developing a culturally appropriate depression prevention program: The family coping skills program. *Cultural Diversity & Ethnic Minority Psychology*, 11(2), 99-112.

Culturally appropriate prevention programs offer a way to provide accessible and effective mental health services. The Family Coping Skills Program (FCSP) is a depression prevention program developed specifically for low income Latino mothers. The FCSP is a culturally sensitive cognitive behavioral, group based prevention program. The program is based on four components: flexibility to language, culturally relevant group material, culturally sensitive delivery, and multi-cultural competence of delivery providers. Those participants who experience mild to moderate depressive symptoms reported a significant improvement. Whereas, those who were asymptomatic did not report any changes. Additionally, the participants who attended the family session component had better outcomes. This study suggests that family interventions are an active component of this program and it can be more accurately described as an intervention program, rather than a prevention program.

This article is relevant to social work mental health, emphasizing cultural competence in developing, implementing, and evaluating preventive programs and interventions.

5.) Fragoso, J.M. & Kashubeck, S. (2000). Machismo, gender role conflict, and mental health in Mexican American men. *Psychology of Men & Masculinity*, 1(2), 87-97.

This research study investigates the role among machismo, gender role conflict, and mental health in 113 Mexican American men. While controlling for levels of acculturation, machismo

and gender role conflict predicted levels of stress and depression. The higher levels of the predictor variables were associated with increased levels of stress and depression. However, the interaction of machismo and gender role conflict was not a significant predictor of either stress or depression. These findings imply that machismo and gender role conflict are accurate underlying constructs of psychological well being of Mexican American men. Additionally, less acculturation to main stream culture was associated with higher levels of stress.

This study is a good analysis of how cultural constructs can influence the expression of mental health symptoms and overall psychological well-being. It can be used in social work mental health courses to enhance learning of underlying meanings and cultural constructs, and their influence on mental health.

6.) Gelman, C.R. (2004). Toward a better understanding of the use of psychodynamically informed treatment with Latinos: Findings from clinician experience. *Clinical Social Work Journal*, 32(1), 61-77.

This article summarizes the results of a qualitative study of Latino therapists who implement a psychodynamic practice orientation with Latino mental health clients. Modifications to the psychodynamic approach include increased self-disclosure, flexibility of relationship, viewing the client as an individual, and understanding of external reality and its impact on the client. Additional adaptations include; accepting gifts from clients, being more active and directive, and employing language as a tool to facilitate the therapeutic process. These modifications are congruent with Latino cultural values and expectations, and appear to enhance cultural sensitivity of clinicians working with Latino clients.

This article is a good tool when discussing specific mental health interventions (psychodynamic) and in understanding how to adjust “mainstream” practices into culturally appropriate interventions for clients with diverse backgrounds (Latino).

7.) Hough, R.L., Hazen, A.L., Soriano, F.I., Wood, P., McCabe, K., & Yeh, M. (2002). Mental health services for Latino adolescents with psychiatric disorders. *Psychiatric Services*, 53(12), 1556-1562.

Survey data was gathered on a large random sample of Latino adolescents who were receiving public mental health services. The main goals of this study were to identify the prevalence of mental health disorders and utilization of mental health services among Latino adolescents. 50% of Latino adolescents within this sample received mental health services. When these adolescents were compared to their white counterparts, Latino adolescents were underserved. Furthermore, Latino adolescents entered treatment at a later age, and had significantly less visits per year. Latino adolescents were less likely, compared to whites to use specialty mental health services, irrespective of diagnosis, gender, age, and service sector. The prevalence of disruptive disorders, such as conduct disorder, attention deficit hyperactivity disorder, and oppositional defiant disorder was very high among Latino adolescents. The majority of Latino youths in need of specialty mental health services received it, and utilization rates are high compared to the general population for specialty mental health services. However, in examining mental health holistically disparities exist between Latino and white adolescents. This study revealed that Latino

adolescents are underserved in mental health care compared to their white counterparts; with the exception of specialty mental health services. The main limitation of this study was the absence of Spanish language diagnostic assessment instruments.

This study illustrates the disparities of mental health service utilization between Latino and white adolescents. The prevalence rates of mental health problems are higher among Latino adolescents. This article can help identify barriers to attaining mental health services and how culturally inappropriate assessment instruments can influence outcomes.

8.) Kataoka, S.H., Stein, B.D., Jaycox, L.H., Wong, M., Escudero, P., Tu, W., Zaragoza, C., & Fink, A. (2003). A school- based mental health program for traumatized Latino immigrant children. *Journal of American Academic Child Adolescent Psychiatry*, 42(3), 311-318.

This study aims to test a school based mental health program for Latino immigrant students who have been exposed to community violence. 198 students diagnosed with trauma-related depression and/or post traumatic stress disorder symptoms were compared after receiving an intervention or being on a waitlist. The intervention consisted of a cognitive behavioral therapy group, which was delivered in Spanish by bilingual, bicultural school social workers. The results of this study revealed that at 3 month follow up; the intervention group had significantly more improvement on symptoms compared with the control group. However, symptoms continued to remain in the clinical range, with girls having greater symptoms than boys. Additionally, attrition rates varied across both groups and sample size between groups were unequal. Randomization of groups was only conducted on a portion of the sample. Future research needs to address these limitations and replication studies can be useful in assessing the utility of this intervention for Latino children.

This intervention study is a good tool in research and mental health courses to discuss how culturally informed interventions may not be deemed “successful” due to the limitations within the research design and other important demographic variables such as gender.

9.) La Roche, M.J. (2002). Psychotherapeutic considerations in treating Latinos. *Harvard Review of Psychiatry*, 10(2), 115-122.

The Latino population has grown rapidly in the United States by almost 58% between 1990 and 2000, and is projected to continue to increase. Mental health problems of Latinos are under treated and understudied. Latinos are only half as likely as non-Hispanics to utilize mental health services and tend to drop out more quickly. Latinos are overrepresented in psychiatric hospitals and twice as likely as non-Hispanics to be hospitalized in a restrictive psychiatric facility. Most psychotherapeutic interventions have been designed for non-Hispanic white patients and overlook cultural differences. The author of this article proposes guidelines when treating the Latino population; addressing chief complaints and reducing symptoms, understanding patients’ narratives, and fostering empowerment, which is deemed as culturally competent practices.

This article is a good resource in understanding how cultural differences can influence prevalence of mental health problems, and treatment engagement and retention. Guidelines are proposed to enhance culturally competent treatment. This article is geared towards mental health and social work practice.

10.) Lopez, S.R. (2002). A research agenda to improve the accessibility and quality of mental health care for Latinos. *Psychiatric Services*, 53(12), 1569-1573.

This article reviews the issue of under utilization of mental health services by the Latino population. The main objective discussed is how to get quality Latino mental health care to Latino consumers and their families. Longitudinal studies can be useful to identify factors that restrict and enable utilization of services. Social factors are important to include in studies of service accessibility and quality of care. Examples of social factors, which are often neglected include; economic factors, cultural models, and organizational factors. Intervention research is important to test specific cultural adaptations and treatment components and what specifically should be altered to achieve best outcomes. Collaboration across disciplines, consumers, providers, and researchers will increase the likelihood that research will be disseminated, implemented, and advocated in the community.

This article can be useful in mental health and social work intervention research. The focus is on testing culturally competent interventions or models and other issues that may influence outcomes. Strategies for dissemination of research and information are discussed including community collaboration.

11.) Matias-Carrelo, L.E., Chavez, L.M., Negron, G., Canino, G., Aguilar-Gaxiola, S., & Hoppe, S. (2003). The Spanish translation and cultural adaptation of five mental health outcome measures. *Culture, Medicine & Psychiatry*, 27(3), 291-313.

This article describes the process in translating five mental health outcome measures into Spanish and adapting them into Latino culture. The five instruments are as follows; World Health Organization Disability Assessment Scale, Burden Assessment Scale, Family Burden Assessment Scale, Lehman's Quality of Life Interview, and Continuity of Care in Mental Health Services Interview. The translation and adaptation of the scales from English to Spanish were compared on five dimensions; semantic, content, technical, construct, and criterion equivalence. This article presents information on three of the dimensions (semantic, content, and technical). Latino subgroups were considered in this sample, which included Puerto Rican and Mexican American. Focus groups and a Multi-National Bilingual Committee were used to examine the translation and adaptation of these instruments. The modified instruments became more sensitive to cultural issues that influence how constructs are interpreted within a cultural context.

This article can be useful in discussing mental health assessment instruments and issues in translating and adapting them to be culturally sensitive. Understanding cultural constructs within a cultural context is important in accurately assessing needs of diverse clients. This article can be beneficial to use in mental health and social work practice and research oriented courses.

12.) Mennen, F.E. (2004). PTSD symptoms in abused Latino Children. *Child and Adolescent Social Work Journal*, 21(5), 477-493.

This is an exploratory study that examines and evaluates the relationship of PTSD symptoms to other symptoms, characteristics of abuse, and demographics within a sample of abused Latino children. PTSD scores were related to scores on measures of anxiety, behavior problems, dissociation, and verbal IQ. The PTSD measure was correlated with most of the outcome measures, except for depression. There also exist a significant overlap between PTSD symptoms and behavior problems. There lacked any significant relationships among age, gender, and PTSD symptoms. Lastly, type of abuse and PTSD symptoms were not found to have a significant relationship. Small sample size may have been a factor in not detecting significant effects.

This article is a good tool to use in mental health and social work practice courses because it illustrates the complexity of culturally appropriate assessment measures and how “symptoms” may be displayed differently depending on the cultural context.

13.) Opler, L.A., Ramirez, P.M., Dominguez, L.M., Fox, M.S., & Johnson, P.B. (2004). Rethinking medication prescribing practices in an inner city Hispanic mental health clinic. *Journal of Psychiatric Practices*, 10(2), 134-140.

This article addressed the issue of the need for psychiatrists to become aware of cultural factors in order to better treat patients with various cultural backgrounds. Medication non-compliance is high among immigrants, which is thought to be due to the conflicting views on the causes, cures, and nature of distress between patients and doctors. Non-compliance of antipsychotic medications in Hispanic outpatients is understood to be caused by differing concepts of illness, medication, and side effects between professionals and patients. Changes in procedures to address cultural differences produced an increase in patient retention rate and decrease in non-compliance with medication. This study suggests that improved patient compliance with pharmacotherapy was achieved in treating Hispanic outpatients with psychotic disorders when culturally based differences were acknowledged between patients and psychiatrists, and practice procedures were modified to be more culturally sensitive and competent.

This study is beneficial in describing how cultural variables can influence treatment outcome in mental health. This is a good article to use in mental health, social work practice and research orientated courses.

14.) Ramos, B.M. & Carlson, B.E. (2004). Lifetime abuse and mental health distress among English-speaking Latinas. *Affilia*, 19, 239-256.

This is a descriptive study of lifetime abuse (childhood and adult partners) and mental health in a small sample of English speaking Latinas. Psychological symptoms of depression, anxiety, and somatization were examined, and recent emotional abuse was associated with distress which manifested into anxiety. Childhood abuse was associated with an elevated risk of victimization in

adulthood. Feminist and multi-cultural social work approaches recognize the role of sexism, oppression, and patriarchy as underlying constructs of violence against women. Violence and victimization are often rooted in cultural and political structures. Latinas in this study tended to manifest distress as anxiety because it was viewed as a more socially acceptable way to express distress. Socioeconomic factors and discrimination may be more influential factors than cultural differences per say. Overall, anxiety, distress, and somatization were considerable among both abused and non-abuse women. However, women who had reported childhood abuse were more likely to report past and recent physical, emotional, and sexual abuse. Cultural factors are important because they may influence the way abuse is perceived and responded to. Structural and cultural factors should be examined in practice, which may influence detection and treatment of violence. Social policies that affect women such as equal pay, employment opportunities, child care, welfare benefits, and job training should be considered.

This article is a good tool to highlight how important culture can be in the way in which clients perceive and express a mental health problem, and underlying social and cultural reasons for this idea. Mental health and social work practice and policy courses may find this article useful.

15.) Simoni, J.M. & Ortiz, M.Z. (2003). Mediation models of spirituality and depressive symptomology among HIV-positive Puerto Rican Women. *Cultural Diversity & Ethnic Minority Psychology*, 9(1), 3-15.

This study examined Puerto Rican women living with HIV/AIDS and depression. This study specifically tested a mediational model of spirituality and depressive symptomology. Results from this study suggest that higher scores on spirituality are related to lower depression scores. Confounding variables such as medical and socioeconomic factors were controlled, and self-esteem scores mediated the relationship between spirituality and depression. This study suggests that spirituality can enhance self-esteem or self-worth, resulting in psychological adaptation to dealing with depression.

This article is an excellent tool to use as an example of a mediational model relating to mental health and culture. Often interventions may not be successful because mediating variables are not taken into consideration, especially in dealing with complex processes involved in cultural issues.

16.) Tsai, J.L., Pole, N., Levenson, R.W., & Munoz, R.F. (2003). The effects of depression on the emotional responses of Spanish speaking Latinas. *Cultural Diversity & Ethnic Minority Psychology*, 9(1), 49-63.

This study evaluated a small sample of two groups; 12 depressed and 10 non-depressed Spanish speaking Latinas during sad and amusing film clips. Emotional responses were compared between the groups based on physiological, self-report, and facial expression measures. Latinas who were depressed exhibited less electrodermal activity across film clips and displayed fewer smiles during amusing film clips compared with non-depressed individuals. However, not all measures differed between groups; cardiovascular measures, reports of emotions, and facial expressions of happiness and negative emotion. This study suggests that reduced electrodermal

activity may be associated with depression across cultures, but for Latinas depression may influence or selectively alter expressions for interpersonal functions.

This article can be used to exemplify how culture can influence the way in which mental health problems are expressed differently among cultures.

Alcohol & Other Drugs:

17.) Delgado, M. (2002). Latinos and alcohol: treatment considerations. *Alcoholism Treatment Quarterly*, 20 (3/4), 187-192.

The Latino community has been significantly affected by alcohol abuse. Alcohol is the most widely used and accessible drug in the Latino community. The consequences of alcohol abuse to the Latino community include liver diseases, rapes, homicides, and crimes against women. Alcohol ads appear to commonly target the Latino community. Alcohol treatment services appear to compete with other drug treatment programs in the Latino community. Alcohol treatment services need to address the problem within a sociocultural context. Among the key factors that need to be taken into account include: citizenship, gender, religious beliefs, urban/rural setting, and sexual orientation. In the United States between years 1995 and 2025, the Latino population is projected to increase by 34 percent, which is more than likely an underestimate. It is important to address alcohol related problems within the Latino community and provide culturally competent alcohol treatment services.

This article is a brief synopsis of the effects of alcohol on the Latino communities. It is a useful tool for alcohol and drug and community courses. This article demonstrates how individual alcohol problems can impact a community.

18.) Del La Rosa, M. (2002). Acculturation and Latino adolescents' substance use: A research agenda for the future. *Substance Use & Misuse*, 37(4), 429-456.

This paper reviews the literature on acculturation and its effects on Latino adolescents' cultural values and substance using behaviors. The research has revealed conflicting, contradictory findings regarding levels of acculturation, immigration versus US born status, and substance use. It should be noted that there exists a continuum of acculturation and mitigating factors that influence acculturative stress. Examples of influential factors include: individual characteristics, familial factors, and community factors. Additionally, measuring levels of acculturation can be a difficult task due to the lack of a broad continuum of levels and constructs being measured. The acculturation process still is an important mechanism underlying substance using behaviors.

This is a good article that can be used as a supplement to discuss acculturation and birth place status on substance use behaviors. The main point of this article is to understand the complex relationships among these cultural variables, which lie on a continuum making it difficult to measure.

19.) Gil, A.G., Wagner, E.F., & Vega, W.A. (2000). Acculturation, familism, and alcohol use among Latino adolescent males: Longitudinal relations. *Journal of Community Psychology*, 28(4), 443-458.

This article explores the issues and factors associated with patterns and consequences of early alcohol involvement among Latino adolescents. Factors addressed include acculturation, familism, and alcohol involvement. Acculturation and acculturative stress are important predictors on the intensity of alcohol use among immigrant Latino males. Acculturation and acculturative stress are thought to influence alcohol use mainly through the deterioration of Latino family values, attitudes, and familistic behavior. There were many important relationships within this study, which included a sample of both immigrant and US born Latinos. One major finding was as immigrant Latino adolescents become more acculturated, language difficulties decrease, but perceived discrimination and other accelerated problems persist and increase. The results of this study are consistent with the stress coping conceptualization of alcohol use among immigrant Latino youth. Alcohol use increases as acculturative stress increases from the process of acculturation. In immigrant Latino sample, acculturation not only increases stress, but decreases protective factors such as familism and parental respect. In the US born Latino sample, increased acculturation reduces acculturative stress, but also reduces protective as well. The immigrant group had stronger associations among decreased protective factors, than the US born group. However, the US born group had higher levels of alcohol use and length of time in the US was associated with greater alcohol use. Increased alcohol use is associated with increased acculturation and acculturative stress, and decreased protective factors. However, the differing factor among the two groups; immigrant and US born Latinos is a complex relationship that future research could address.

This is a complex study of acculturation, family, and alcohol involvement. This study demonstrates how acculturation is a complex cultural component that needs to be understood in order to apply it to social problems.

20.) Guilamo-Ramos, V., Jaccard, J., Johansson, M., & Turrisi, R. (2004). Binge drinking among Latino youth: Role of acculturation-related variables. *Psychology of Addictive Behaviors*, 18(2), 135-142.

The relationship among acculturation related variables and binge drinking were evaluated among representative samples of Mexican American, Cuban American, and Puerto Rican youth. The length of time in the United States, Primary language spoken, and binge drinking was assessed among these Latino subgroups. This study revealed that youth with a past history of alcohol use were more likely have binge drinking that was related as a function of acculturation variables, and an inverse relationship was found for those youths without a past history of alcohol use. However, the relationships among these variables are complex.

This article can be used to describe the complex relationship relating to acculturation issues and substance abuse. Acculturation issues include differences among subgroups of Latinos and length of time in the US.

21.) Hadjicostandi, J. & Cheurprakobkit, S. (2002). Drugs and substances: views from a Latino community. *The American Journal of Drug and Alcohol Abuse*, 28 (4), 693-710.

This is an exploratory study examining the attitudes and perceptions of Latino individuals on alcohol and drug abuse. Very few studies have explored the connections among alcohol and drug use and its effects on the Latino family and community. The majority of Latinos reported an association among alcohol, tobacco, and drugs with crime, violence, and family problems. Alcohol and tobacco were the most frequently reported reason for family problems. This study reveals the consequences of alcohol and other drugs on the Latino family and community.

This exploratory study is a good tool to use in alcohol and other drug and community courses. It captures the attitudes and perceptions among Latino individuals and applies it at a community level.

22.) Santisteban, D.A., Coatsworth, D.J., Perez-Vidal, A., Kurtines, W.M., Schwartz, S., LaPerriere, A. & Szapocznik, J. (2003). Efficacy of brief strategic family therapy in modifying Hispanic adolescent behavior problems and substance use. *Journal of Family Psychology*, 17(1), 121-13.

A brief strategic family therapy (BSFT) was studied to evaluate the efficacy with 126 Hispanic families who had an adolescent with a behavior problem. The families were randomly assigned to 1 of 2 conditions; BSFT or group treatment. The results show that compared to the control group, BSFT had significantly more improvement in parent reports of adolescent conduct problems and delinquency, adolescent reports of marijuana use, and family functioning. Several limitations include attrition, lack of follow up, and missing data on family interaction measures.

This intervention study can be used to gain understanding of culturally competent interventions and identification of limitations when evaluating outcomes.

23.) Tapia, M.I., Schwartz, S.J., Prado, G., Lopez, B., & Pantin, H. (2006). Parent-centered intervention: A practical approach for preventing drug abuse in Hispanic adolescents. *Research on Social Work Practice*, 16, 146-165.

This article is a guide for social workers and mental health professionals for working with Hispanic immigrant adolescents and their families. An empirically family based adolescent substance use and HIV prevention program is outlined, focusing on engagement and retention interventions. Acculturation, language barriers, and poverty heighten the risks for drug use, risky behaviors, and other social problems among the Hispanic population. The family based preventive intervention includes parent support group and skill development, family visits, and parent-adolescent discussion circles. This intervention is designed to prevent adolescent substance use, sexual risk taking, and HIV contraction. The importance of culturally appropriate assessment and measurement tools is emphasized in evaluating outcome studies because of the variation among Hispanic subgroups. This preventive intervention appears to be promising in preventing problematic behaviors among Hispanic adolescents.

This article can help guide social work students in working with Hispanic immigrant adolescents and their families. The importance of culturally appropriate assessment instruments and interventions is highlighted.

24.) Woodruff, S.I., Talavera, G.A., & Elder, J.P (2002). Evaluation of a culturally appropriate smoking cessation intervention for Latinos. *Tobacco Control*, 11(4), 361-367.

Randomized, controlled studies of culturally appropriate smoking cessation interventions for Latinos are scarce. This article describes a randomized study evaluating a culturally appropriate Latino smoking cessation intervention. The intervention was family based and included didactic methods, role playing, skills development, and motivational interviewing techniques. The comparison condition was a Spanish language helpline using proactive techniques. The results showed a higher abstinence rate among Latinos in the intervention condition, compared to Latinos in the comparison condition. This study suggests that a culturally appropriate intervention for Latinos needs to incorporate underlying social cognitive constructs of the Latino culture. This can be accomplished by capturing underlying meanings of words and acknowledging family as a significant element of Latino culture.

This intervention study stresses the need to understand cultural constructs because focusing solely on language limits culturally competent interventions.

Community:

25.) De Mendoza, V.B. (2001). Culturally appropriate care for pregnant Latina women who are victims of domestic violence. *Journal of Obstetric, Gynecologic, & Neonatal Nursing*, 30(6), 579-588.

This article discusses barriers to accessing health care and finding appropriate services for pregnant Latina women who are victims of domestic violence. It is hypothesized that social, cultural, economic, political, and legal issues influence accessibility of appropriate health care. This article makes recommendations on practice guidelines in assessment and treatment of pregnant Latina women who are experiencing domestic violence. The family is an important part of Latino culture; consequently interventions need to include this area. Resource identification and preventive strategies are also recommended.

This article provides useful information and examples of how numerous factors can influence access to treatment. These factors include cultural, social, economic, political, and legal issues, which can create an interactive effect.

26.) Gelman, C.R. (2003). The elder Latino population in Holyoke, MA: A qualitative study of unmet needs and community strengths. *Journal of Gerontological Social Work*, 39(4), 89-114.

13 detailed interviews were conducted in the Latino elderly population. This group's needs and service utilization patterns were assessed. Transportation, social and recreational activities, and sense of safety are areas in which needs were identified. Negative perceptions of aging, anxiety, depression, and boredom were difficulties reported by this group of individuals. Some barriers to service utilization include: poverty, discrimination, transportation, language, lack knowledge of services, and mistrust of the service system. Many of the participants depended on informal support systems, such as their family and church. Collaboration is needed between formal service systems and informal networks, training bilingual workers, and dissemination of resources.

This article describes needs of clients and patterns of service utilization. Many important factors were identified, which can be used to understand barriers to services.

27.) Hadjicostandi, J. & Cheurprakobkit, S. (2002). Drugs and substances: views from a Latino community. *The American Journal of Drug and Alcohol Abuse*, 28 (4), 693-710.

This is an exploratory study examining the attitudes and perceptions of Latino individuals on alcohol and drug abuse. Very few studies have explored the connections among alcohol and drug use and its effects on the Latino family and community. The majority of Latinos reported an association among alcohol, tobacco, and drugs with crime, violence, and family problems. Alcohol and tobacco were the most frequently reported reason for family problems. This study reveals the consequences of alcohol and other drugs on the Latino family and community.

This exploratory study is a good tool to use in alcohol and other drug and community courses. It captures the attitudes and perceptions among Latino individuals and applies it at a community level.

28.) Lassetter, J.H., & Baldwin, J.H. (2004). Health care barriers for Latino children and provision of culturally competent care. *Journal of Pediatric Nursing*, 19(3), 184-192.

This article describes the significant increase of the Latino population in the United States. It specifically exams the utilization of the emergency department and inpatient services at a pediatric medical care center. Suggestions are made on overcoming barriers to health care for Latinos and providing culturally competent care. The demographic changes in the United States have directly influenced the demographic of patients at this medical center. Health professionals need to learn about the Latino culture to be able to provide culturally competent care to better meet patient needs.

This article is a good example of how macro level changes within a community can result in specific consequences within meso and micro levels.

29.) McNutt, J.G., Queiro-Tajalli, I., Boland, K.M., & Campbell, C. (2001). Information Poverty and the Latino community: Implications for social work practice and social work education. *Journal of Ethnic & Cultural Diversity in Social Work*, 10(4), 1-20.

Poverty and inequality in the Latino community has been linked to other problems within the Latino community such as gang violence, drug abuse, and poor housing. The issue of poverty within the Latino community is described and interventions are suggested. This article also describes how social work education can teach students about these issues. Poverty is hypothesized to be caused by a lack of connection to information, such as skills, education, and access to technology. Social workers and social work educators need to be trained in dealing with these issues. When confronting these issues, interventions should be aimed at identifying the connection, reducing barriers to resources and information, and helping to access resources and information.

This article is a good tool for exemplifying how macro level, community issues can significantly impact social problems for individuals and their families, and prevent them from recovering from these problems.

30.) Randall, H., & Csikai, E. Issues affecting utilization of hospice services by rural Hispanics. (2003). *Journal of Ethnic & Cultural Diversity in Social Work*, 12(2), 79-94.

Although the Hispanic community is rapidly rising, utilization of hospice care remains low for the Hispanic population. 88% of 110 Hispanics within this study were not familiar with hospice services, but reported they would accept such services. Potential barriers in accessing hospice services include language, poverty, lacking health insurance, and low education. Hospice social workers have a responsibility to raise awareness within the Hispanic community and promote cultural awareness among other hospice staff.

This article is a good tool to facilitate discussions relating to outreach services and cultural awareness. The barriers to attaining services include language, but it also reflects many other societal problems.

31.) Schachter, K.A. & Cohen, S. J. (2005). From research to practice: challenges to implementing national diabetes guidelines with five community health centers on the U.S.-Mexico border. *Preventing Chronic Disease: Public Health Research, Practice, and Policy*, 2(1), 1-7.

Diabetes is a rapidly growing and chronic health problem among Mexican Americans living along the U.S.-Mexico border. A project funded by the Centers for Disease Control enabled researchers to assist community health centers with developing measures for diabetes, identify health care gaps, and implement strategies to fill identified gaps. After one year follow up, there was evidence of improvement for the majority of health care centers. However, gaps remained and at 2 year follow up one center lost its gains. Translating health care guidelines into practice is a difficult and challenging task. Factors that can influence change include staff willingness and buy-in, and availability of resources.

This is a good article for research and community courses to demonstrate the challenges and obstacles in translating research into practice, especially at a community level.

Youth:

32.) Acosta, O.M., Weist, M.D., Lopez, F.A., Shafer, M.E., & Pizarro, L.J. (2004). Assessing the psychosocial and academic needs of Latino youth to inform the development of school based programs. *Behavior Modification*, 28, 579-595.

This article uncovers the needs and difficulties that Latino adolescents experience. Latino community leaders report Latino adolescents experience significant stress in the United States and present with academic and behavior problems. They also have difficulties accessing services and resources to help them with these problems. There is a strong need to develop programs that can effectively address the needs of Latino adolescents.

This article can be used to emphasize the problems, obstacles, and needs of Latino adolescents. This article highlights the need for cultural competent programs that can help address the needs of this population. Preliminary research indicates that if these programs and services were made available, treatment engagement and retention would increase among this population.

33.) Dinh, K., Roosa, M.W., Tein, J.Y., & Lopez, V.A. (2002). The relationship between acculturation and problem behavior proneness in a Hispanic youth sample: A longitudinal mediation model. *Journal of Abnormal Child Psychology*, 30(3), 295-309.

A mediation model was tested among Hispanic children and adolescents, relating to acculturation and proneness of behavior problems. It was hypothesized that self-esteem would be the mediator in this relationship. The results indicate that parental involvement, rather than self-esteem was the mediator in the relationship of acculturation and proneness of behavior problems.

This study can be used to illustrate how interventions can be derived from research studies. Parental involvement is a significant influential factor, which suggests utilizing interventions that target less acculturated parents to increase parental involvement with their children may prevent behavior problems in Latino youth.

34.) Flores, E., Cicchetti, D., & Rogosch, F.A. (2005). Predictors of resilience in maltreated and non-maltreated Latino children. *Developmental Psychology*, 41(2), 338-351.

This study examined predictors of resiliency in both maltreated and non-maltreated Latino children. Maltreated children were found to have fewer areas of resiliency compared to non-maltreated children. The significant predictors of resiliency were ego control, personal resources, and ability to form positive relationships with an adult. Non-maltreated children had higher levels of factors that are conducive to interpersonal relationships. Although, non-maltreated children had experience difficulties due to societal factors, they possessed higher levels of resiliency. Ego resiliency was found to be the strongest predictor of resiliency among both groups of children.

This study can be used to illustrate the effects of maltreatment on Latino children, identify predictors of resiliency, and to develop preventive interventions to enhance resiliency.

35.) Flores, G., Fuentes-Afflick, E., Barbot, O., Carter-Pokras, O., Claudio, L., Lara, M., McLaurin, J.A., Pachter, L., Gomez, F.R., Mendoza, F., Valdez, R.B., Villarruel, A.M., Zambrana, R.E., Greenberg, R., & Weitzman, M. (2002). The health of Latino children: Urgent priorities, unanswered questions, and a research agenda. *JAMA*, 288(1), 82-90.

Latinos are the largest ethnic group of children in the United States. The Latino Consortium of the American Academy of Pediatrics Center for Child Health Research identified issues in Latino child health. Among the issues included lack of validated assessment instruments, exclusion from research studies, and failure to analyze data on subgroups. Latino children are at heightened risk for many behavioral and developmental disorders, which remains unclear. Additional problems include lack of health insurance coverage and lack of culturally appropriate health care. Recommendations are highlighted that experts have agreed would benefit Latino children, which represents 1 of every 6 US children. Recommendations include training health care professions in cultural competence, research on Latino children, enhancing education opportunities for Latino children, increasing Latino health professionals, and reducing obstacles and disparities in accessing health services and quality of care.

This review article is an excellent summary of key issues with Latino children. It is a comprehensive review of the problems and recommended courses of action. It exemplifies the role of social work by providing a holistic and comprehensive approach at multiple levels.

36.) Pantin, H., Schwartz, S., Sullivan, S., Prado, G., & Szapocznik, J. (2004). Ecodevelopmental HIV prevention programs for Hispanic adolescents. *American Journal of Orthopsychiatry*, 74(4), 545-558.

This article examines an ecodevelopmental perspective relating to the study and prevention of risky sexual behavior in immigrant Hispanic adolescents. This theory can be applied to help develop HIV preventive programs for Hispanic adolescents. Preventive strategies can be developed and implemented at multiple levels; community, family, and adolescents. This model may be useful in targeting unique cultural and ecodevelopmental risk factors predisposing Hispanic adolescents for risky sexual behaviors.

This article is a good tool in illustrating the multiple levels involved in social work practice; micro, meso, and macro levels. It is a good article to describe the interactive relationships among multiple systems and to identify potential prevention and intervention strategies that target multiple levels.

37.) Romero, A.J., & Robeerts, R.E. (2003). Stress within a bicultural context for adolescents of Mexican descent. *Cultural Diversity & Ethnic Minority Psychology*, 9(2), 171-184.

This study examined responses from middle school students of Mexican descent on stress and coping. Immigrant youths reported more total number of stressors; US born youths reported

stress from language barriers in school, and higher stress levels were associated with more depressive symptoms in both immigrant and US born youths. This study has identified various components of stress, but has not been able to identify positive coping strategies.

This article is a useful tool to identify stressors Latino youth experience in a bicultural context. It displays cultural variation within Latino population subgroups; immigrants and US born.

38.) Springer, D.W., Lynch, C. & Rubin, A. (2000). Effects of a solution-focused mutual aid group for Hispanic children of incarcerated parents. *Child and Adolescent Social Work*, 17(6), 431- 442.

This article describes a solution focused, mutual aid group intervention for Hispanic children with parents who are incarcerated. The study evaluated the effectiveness of this intervention on children's self-esteem. The results indicate improvement of self-esteem in children who were in the intervention group, but due to various limitations of this study future research needs to further study this intervention and evaluate outcomes.

This article can be used as an educational resource on solution focused mutual aid group interventions. It provides a rationale for utilizing this intervention and connects the idea of self-esteem as an outcome measure. This may be a good article to use to facilitate discussions on why certain interventions and outcome measures are chosen for specific problems.

39.) Umana-Taylor, A.J. (2004). Ethnic identity and self-esteem: examining the role of social context. *Journal of Adolescence*, 27, 139-146.

This study examined ethnic identity and self-esteem among 1062 Mexican adolescents attending one of three schools varying on their ethnic composition. The results of this study suggest significant relationships among all three schools on self-esteem and ethnicity. The adolescents attending the predominately non-Latino school reported the highest levels of ethnic identity, compared to the other schools. These findings support ecological theory in which individual lives are embedded within multiple settings and interact with each-other to influence developmental outcomes.

This study can be used in human behavior and development, youth, and community courses. It describes how human development and social context can interact to influence ethnic identity and self-esteem.

Research:

40.) Aguilar-Gaxiola, S.A., Zelezny,L., Garcia, B., Edmondson,C., Alejo-Garcia, C., & Vega, W.A. (2002). Translating research into action: Reducing disparities in mental health care for Mexican Americans. *Psychiatric Services*, 53(12), 1563-1568.

An evidence-based process was applied to educate the community about the need for improved mental health care for minorities. Policy changes are suggested to increase and improve the availability, accessibility, and appropriateness of mental health care for Mexican Americans.

This is a community driven and consumer orientated model, which aims to allocate resources to rural areas of California. Research is translated into action, to change policy and improve services.

This article is a good tool to demonstrate how research can be translated into practice to improve services and influence policy changes. It is relevant to research, practice, policy, and mental health areas. It is an example of how evidence based practice is developed.

41.) Evans, B.C. (2005). Content validation of instruments: Are the perspectives of Anglo reviewers different from those of Hispanic/Latino and American Indian reviewers? *Journal of Nursing Education*, 44(5), 216-224.

This article reviews 8 quantitative instruments which assess the interventions and outcomes for a Nursing Workforce Diversity Grant. The purpose of this study was to identify if perspectives or response patterns differed between Anglo and Latino and American Indian reviewers. The five themes analyzed were: importance of a personal relationship with students of color, the effect of isolation from home and family, the need for collaborative, interactive learning and a curriculum of inclusion, the importance of culture and ethnicity in personal identity, and the presence of prejudice, discrimination, and racism. The results suggest that Anglo reviewers have different perspectives than other ethnic backgrounds. The Anglo respondents showed lower cultural awareness and tend to have assumptions and make generalizations about people of color.

This article provides a good example of how perceptions can vary across ethnic backgrounds and allude to development of assumptions, stereotypes, and generalizations.

42.) Lopez, S.R. (2002). A research agenda to improve the accessibility and quality of mental health care for Latinos. *Psychiatric Services*, 53(12), 1569-1573.

This article reviews the issue of under utilization of mental health services by the Latino population. The main objective discussed is how to get quality Latino mental health care to Latino consumers and their families. Longitudinal studies can be useful to identify factors that restrict and enable utilization of services. Social factors are important to include in studies of service accessibility and quality of care. Examples of social factors, which are often neglected include; economic factors, cultural models, and organizational factors. Intervention research is important to test specific cultural adaptations and treatment components and what specifically should be altered to achieve best outcomes. Collaboration across disciplines, consumers, providers, and researchers will increase the likelihood that research will be disseminated, implemented, and advocated in the community.

This article can be useful in mental health and social work intervention research. The focus is on testing culturally competent interventions or models and other issues that may influence outcomes. Strategies for dissemination of research and information are discussed including community collaboration.

43.) Matias-Carrelo, L.E., Chavez, L.M., Negron, G., Canino, G., Aguilar-Gaxiola, S., & Hoppe, S. (2003). The Spanish translation and cultural adaptation of five mental health outcome measures. *Culture, Medicine & Psychiatry*, 27(3), 291-313.

This article describes the process in translating five mental health outcome measures into Spanish and adapting them into Latino culture. The five instruments are as follows; World Health Organization Disability Assessment Scale, Burden Assessment Scale, Family Burden Assessment Scale, Lehman's Quality of Life Interview, and Continuity of Care in Mental Health Services Interview. The translation and adaptation of the scales from English to Spanish were compared on five dimensions; semantic, content, technical, construct, and criterion equivalence. This article presents information on three of the dimensions (semantic, content, and technical). Latino subgroups were considered in this sample, which included Puerto Rican and Mexican American. Focus groups and a Multi-National Bilingual Committee were used to examine the translation and adaptation of these instruments. The modified instruments became more sensitive to cultural issues that influence how constructs are interpreted within a cultural context.

This article can be useful in discussing mental health assessment instruments and issues in translating and adapting them to be culturally sensitive. Understanding cultural constructs within a cultural context is important in accurately assessing needs of diverse clients. This article can be beneficial to use in mental health and social work practice and research oriented courses.

44.) Mattson, S. & Ruiz, E. (2005). Intimate partner violence in the Latino community and its effect on children. *Health Care for Women International*, 26(6), 523-529.

Focus groups were conducted with Latino men and women regarding their views on intimate partner violence. Beliefs, triggers, and how the Mexican culture influences intimate partner violence was discussed. The data from this study was used to develop a children's book describing alternative anger management strategies. A pilot study will be conducted to identify how children deal with their anger before and after reading this book. Although the sample was too small to identify patterns of behavior, at baseline Latino and biracial children tended to select more physically active strategies such as drawing, running, and breathing.

This qualitative, exploratory study is important in identifying cultural differences in perceiving and responding to issues. It is an effective example of how data from exploratory studies can drive further advanced studies, which on the surface appear to be unrelated subject areas, but provide extremely useful information for intervention development.

45.) Mezzich, J.E., Ruiperez, M.A., Perez, C., Yoon, G., Liu, J., Mahmud, S. (2000). The Spanish version of the quality of life index: Presentation and validation. *Journal of Nervous & Mental Disease*, 188(5), 301-305.

The Quality of Life Index (QLI-Sp) was developed to address the growing Latino population in the United States. This instrument is thought to be a comprehensive, culture-informed, self-rated assessment of health related quality of life. It is composed of 10 dimensions rated on a 10 point scale. The study sample included 60 Latino psychiatric patients and 20 Latino health care

professionals. The majority of the sample reported that the instrument was easy to use and had a reliability correlation coefficient of .89. Discriminate validity was tested with controls and internal structure of the instrument was concluded as a universal concept of quality of life. This instrument was deemed as efficient because it was reported as easy to use and took 4 minutes on average to complete.

This article is useful in identifying positive characteristics of an assessment instrument that is culturally appropriate. It can be used to discuss development of culturally appropriate assessment measures and related issues.

46.) Murguia, A., Zea, M.C., Reisen, C.A., & Peterson, R.A. (2000). The development of the Cultural Health Attributions Questionnaire (CHAQ). *Cultural Diversity and Ethnic Minority Psychology*, 6 (3), 268-283.

Currently used health measures that are designed to assess health behaviors, do not capture the health beliefs of Latinos. This study developed a reliable and valid measure of Latino health beliefs. The relationships between subscales on the measure and acculturation levels demonstrated good construct validity. Criterion validity was established by linking measures with health seeking behaviors. It is important to have a culturally appropriate health measure because Latinos may differ in their beliefs on the etiology, symptoms expression, and treatment of an illness. Consequently, these beliefs can influence treatment seeking behavior and types of treatment that is provided.

This is a great study for research and community courses, which describes how culture can influence beliefs, symptom expression, and behaviors. Assessment and measurement are discussed including reliability and validity issues.

47.) Rodriguez, N., Myers, H., Mira, C.B., Flores, T., & Garcia-Hernandez, L. (2002). Development of the multidimensional acculturative stress inventory for adults of Mexican origin. *Psychological Assessment*, 14(4), 451-461.

Acculturation occurs when two or more cultural groups come into contact to produce cultural changes. The Multidimensional Acculturative Stress Inventory (MASI) is a 36 item measure designed for individuals of Mexican origin living in the United States. This measure was tested among 174 adults, primarily women. 4 factors on this measure accounted for a substantial amount of the variance and correlated with criterion measures of acculturation and/or psychological adjustment. The 4 reliable factors include; Spanish Competency Pressures, English Competency Pressures, Pressure to Acculturate, and Pressure Against Acculturation. The MASI indicates that both acculturated and unacculturated adults of Mexican origin experience acculturative stress, but from different sources, and their importance varies on number of years in the US, level of generation, and acculturation. Those who are unacculturated face societal pressures to acculturate to main stream society and the acculturated face pressures from their own cultural group.

This article is a good resource to help social work students understand the meaning and implications of acculturation.

48.) Schachter, K.A. & Cohen, S. J. (2005). From research to practice: challenges to implementing national diabetes guidelines with five community health centers on the U.S.-Mexico border. *Preventing Chronic Disease: Public Health Research, Practice, and Policy*, 2 (1), 1-7.

Diabetes is a rapidly growing and chronic health problem among Mexican Americans living along the U.S.-Mexico border. A project funded by the Centers for Disease Control enabled researchers to assist community health centers with developing measures for diabetes, identify health care gaps, and implement strategies to fill identified gaps. After one year follow up, there was evidence of improvement for the majority of health care centers. However, gaps remained and at 2 year follow up one center lost its gains. Translating health care guidelines into practice is a difficult and challenging task. Factors that can influence change include staff willingness and buy-in, and availability of resources.

This is a good article for research and community courses to demonstrate the challenges and obstacles in translating research into practice, especially at a community level.

49.) Zea, M.C., Asner-Self, K.K., Birman, D., & Buki, L. (2003). The Abbreviated Multidimensional Acculturation Scale: Empirical validation with two Latino/Latina samples. *Cultural Diversity & Ethnic Minority Psychology*, 9(2), 107-126.

This study tests the validity of an instrument measuring levels of acculturation within 2 samples. The results of this study reveal good internal reliability, and adequate concurrent, convergent, discriminate, and construct validity. 3 subscales emerged which included cultural identity, language competence, and cultural competence. Acculturation is a complex process that occurs on a continuum with various influential factors and social context. The development and validation of a measure that can accurately capture this process will help researchers and social workers assess this multidimensional construct.

Policy:

50.) Aguilar-Gaxiola, S.A., Zelezny,L., Garcia, B., Edmondson,C., Alejo-Garcia, C., & Vega, W.A. (2002). Translating research into action: Reducing disparities in mental health care for Mexican Americans. *Psychiatric Services*, 53(12), 1563-1568.

An evidence-based process was applied to educate the community about the need for improved mental health care for minorities. Policy changes are suggested to increase and improve the availability, accessibility, and appropriateness of mental health care for Mexican Americans. This is a community driven and consumer orientated model, which aims to allocate resources to rural areas of California. Research is translated into action, to change policy and improve services.

This article is a good tool to demonstrate how research can be translated into practice to improve services and influence policy changes. It is relevant to research, practice, policy, and mental health areas. It is an example of how evidence based practice is developed.

Interventions:

51.) Amerson, R. & Burgins, S. (2005). Hablamos Espanol: Crossing communication barriers with the Latino population. *Journal of Nursing Education*, 44(5), 241-243.

This article describes a pilot project to teach Spanish phrases related to health care, to students in a nursing program. The project focus is to facilitate communication between nursing students and Latino clients. Instructors begin class everyday by teaching a single Spanish phrase; students who participate receive extra credit. The majority of students learned basic Spanish phrases and were encourage to utilize them in class. There is a significant increase in the Latino population, thus it is important for health care providers to overcome communication barriers. As a result of this pilot program the nursing students can use basic Spanish language to communicate with Latino clients, rather than using hand gestures.

This article can be used as a tool to reduce communication barriers between social work professionals and clients.

52.) Antshel, K.M. (2002). Integrating culture as a means of improving treatment adherence in the Latino population. *Psychology, Health & Medicine*, 7(4), 435-449.

Culture is an important factor in medical treatment adherence. The influential elements of Latino culture include acculturation, familismo, language, respeto, personalismo, espiritismo, simpatia, and fatalismo. Interventions used to improve treatment adherence include educational, organizational, and behavioral strategies. Treatment adherence can be improved by recognizing cultural variables and economic constraints, then incorporating concepts into intervention delivery.

This article can help provide an understanding of numerous cultural factors, which can improve treatment retention.

53.) Aranda, M.P., Valentine, M., Trejo, L., Ramirez, R., & Ranney, M. (2003). El Portal Latino Alzheimer's Project: Model program for Latino caregivers of Alzheimer's disease-affected people. *Social Work*, 48(2), 259-271.

This article describes an outreach and services program targeting Latino family care givers of Latino dementia affected adults. This program provides a variety of culturally specific services to Latino dementia affected adults and their family care givers. The results of the program evaluation indicate reduction in barriers to care and increase in service utilization. This program is thought to be effective through combining coordinated services of main stream and ethnic agencies.

This article is useful to learning about culturally competent programs and important components of the program and strategies that can reduce barriers to receiving services.

54.) Carballo, D.A., Dolezal, C., Leu, C., Nieves, L., Diaz, F., Decena, C., & Balan, I. (2005). A randomized controlled trial to test an HIV-prevention intervention for Latino gay and bisexual men: Lessons learned. *AIDS Care*, 17(3), 314-328.

There are high prevalence rates of HIV among gay and bisexual men. Culturally sensitive and appropriate interventions to reduce sexual risk behavior are scarce. This is the first random controlled study conducted in this area. 180 men were randomly assigned to either the intervention condition or a wait list control group. The intervention was derived from the empowerment theory and prior research that identified determinants of unsafe sex. Participants were assessed at 2 and 6 months following intervention. The results show that half of the men in the intervention condition did not have unsafe sex at follow up assessments. However, these results can not be attributed to the intervention because the control group also has behavior modifications similar to those in the intervention group.

This study is important to understanding the complexity of intervention research with culturally diverse populations. Although an intervention is deemed culturally appropriate, results are not always cut and dry. In this case both the intervention and control groups had similar results. This article can help facilitate a discussion on limitations of intervention research and confounding variables or non-specific treatment effects.

55.) Cardemil, E.V., Kim, S., Pinedo, T.M., & Miller, I. (2005). Developing a culturally appropriate depression prevention program: The family coping skills program. *Cultural Diversity & Ethnic Minority Psychology*, 11(2), 99-112.

Culturally appropriate prevention programs offer a way to provide accessible and effective mental health services. The Family Coping Skills Program (FCSP) is a depression prevention program developed specifically for low income Latino mothers. The FCSP is a culturally sensitive cognitive behavioral, group based prevention program. The program is based on four components; flexibility to language, culturally relevant group material, culturally sensitive delivery, and multi-cultural competence of delivery providers. Those participants who experience mild to moderate depressive symptoms reported a significant improvement. Whereas, those who were asymptomatic did not report any changes. Additionally, the participants who attended the family session component had better outcomes. This study suggests that family interventions are an active component of this program and it can be more accurately described as an intervention program, rather than a prevention program.

This article is relevant to social work mental health, emphasizing cultural competence in developing, implementing, and evaluating preventive programs and interventions.

56.) Garcia, L., Hurwitz, E.L., & Kraus, J.F. (2005). Acculturation and reported intimate partner violence among Latinas in Los Angeles. *Journal of Interpersonal Violence*, 20, 569-590.

This article describes the relationship between acculturation and reporting intimate partner violence. Highly acculturated Latinas were more likely to report intimate partner violence compared to Latinas with lower acculturation levels. This study is important because it

contributes to our understanding of Latinas. It is important to uncover barriers that prevent them from seeking help. The knowledge acquired from this study may help develop intervention and prevention programs that are cultural appropriate.

This article is a good tool to understand acculturation and its influence on treatment seeking.

57.) Gelman, C.R. (2004). Empirically-based principles for culturally competent practice with Latinos. *Journal of Ethnic & Cultural Diversity in Social Work*. 13(1), 83-108.

This article is a qualitative study on culturally competent social work practice principles with Latino clients. Cultural competence includes understanding the meaning and function of culture in human behavior. The results of this study indicate the following principles as important in the therapeutic relationship: developing a connection and alliance, acknowledging clients' individuality, addressing clients' realities, flexibility of treatment, modification of practice, increased self-disclosure, acceptance of gifts, language, and increased activity and direction.

This article can be used in interventions social work courses to exemplify culture and social work practice.

58.) Gelman, C.R. (2004). Toward a better understanding of the use of psychodynamically informed treatment with Latinos: Findings from clinician experience. *Clinical Social Work Journal*, 32(1), 61-77.

This article summarizes the results of a qualitative study of Latino therapists who implement a psychodynamic practice orientation with Latino mental health clients. Modifications to the psychodynamic approach include increased self-disclosure, flexibility of relationship, viewing client as an individual, and understanding of external reality and its impact on the client. Additional adaptations include; accepting gifts from clients, being more active and directive, and employing language as a tool to facilitate the therapeutic process. These modifications are congruent with Latino cultural values and expectations, and appear to enhance cultural sensitivity of clinicians working with Latino clients.

This article is a good tool when discussing specific mental health interventions (psychodynamic) and in understanding how to adjust "mainstream" practices into culturally appropriate interventions for clients with diverse backgrounds (Latino).

59.) Mattson, S. & Ruiz, E. (2005). Intimate partner violence in the Latino community and its effect on children. *Health Care for Women International*, 26(6), 523-529.

Focus groups were conducted with Latino men and women regarding their views on intimate partner violence. Beliefs, triggers, and how the Mexican culture influences intimate partner violence was discussed. The data from this study was used to develop a children's book describing alternative anger management strategies. A pilot study will be conducted to identify how children deal with their anger before and after reading this book. Although the sample was

too small to identify patterns of behavior, at baseline Latino and biracial children tended to select more physically active strategies such as drawing, running, and breathing.

This qualitative, exploratory study is important in identifying cultural differences in perceiving and responding to issues. It is an effective example of how data from exploratory studies can drive further advanced studies, which on the surface appear to be unrelated subject areas, but provide extremely useful information for intervention development.

60.) Santisteban, D.A., Coatsworth, D.J., Perez-Vidal, A., Kurtines, W.M., Schwartz, S., LaPerriere, A. & Szapocznik, J. (2003). Efficacy of brief strategic family therapy in modifying Hispanic adolescent behavior problems and substance use. *Journal of Family Psychology*, 17(1), 121-13.

A brief strategic family therapy (BSFT) was studied to evaluate the efficacy with 126 Hispanic families who had an adolescent with a behavior problem. The families were randomly assigned to 1 of 2 conditions; BSFT or group treatment. The results show that compared to the control group, BSFT had significantly more improvement in parent reports of adolescent conduct problems and delinquency, adolescent reports of marijuana use, and family functioning. Several limitations include attrition, lack of follow up, and missing data on family interaction measures.

This intervention study can be used to gain understanding of culturally competent interventions and identification of limitations when evaluating outcomes.

61.) Springer, D.W., Lynch, C. & Rubin, A. (2000). Effects of a solution-focused mutual aid group for Hispanic children of incarcerated parents. *Child and Adolescent Social Work*, 17(6), 431- 442.

This article describes a solution focused, mutual aid group intervention for Hispanic children with parents who are incarcerated. The study evaluated the effectiveness of this intervention on children's self-esteem. The results indicate improvement of self-esteem in children who were in the intervention group, but due to various limitations of this study future research needs to further study this intervention and evaluate outcomes.

This article can be used as an educational resource on solution focused mutual aid group interventions. It provides a rationale for utilizing this intervention and connects the idea of self-esteem as an outcome measure. This may be a good article to use to facilitate discussions on why certain interventions and outcome measures are chosen for specific problems.

62.) Tapia, M.I., Schwartz, S.J., Prado, G., Lopez, B., & Pantin, H. (2006). Parent-centered intervention: A practical approach for preventing drug abuse in Hispanic adolescents. *Research on Social Work Practice*, 16, 146-165.

This article is a guide for social workers and mental health professionals for working with Hispanic immigrant adolescents and their families. An empirically family based adolescent substance use and HIV prevention program is outlined, focusing on engagement and retention interventions. Acculturation, language barriers, and poverty heighten the risks for drug use, risky

behaviors, and other social problems among the Hispanic population. The family based preventive intervention includes parent support group and skill development, family visits, and parent-adolescent discussion circles. This intervention is designed to prevent adolescent substance use, sexual risk taking, and HIV contraction. The importance of culturally appropriate assessment and measurement tools is emphasized in evaluating outcome studies because of the variation among Hispanic subgroups. This preventive intervention appears to be promising in preventing problematic behaviors among Hispanic adolescents.

This article can help guide social work students in working with Hispanic immigrant adolescents and their families. The importance of culturally appropriate assessment instruments and interventions is highlighted.

63.) Woodruff, S.I., Talavera, G.A., & Elder, J.P (2002). Evaluation of a culturally appropriate smoking cessation intervention for Latinos. *Tobacco Control*, 11(4), 361-367.

Randomized, controlled studies of culturally appropriate smoking cessation interventions for Latinos are scarce. This article describes a randomized study evaluating a culturally appropriate Latino smoking cessation intervention. The intervention was family based and included didactic methods, role playing, skills development, and motivational interviewing techniques. The comparison condition was a Spanish language helpline using proactive techniques. The results showed a higher abstinence rate among Latinos in the intervention condition, compared to Latinos in the comparison condition. This study suggests that a culturally appropriate intervention for Latinos needs to incorporate underlying social cognitive constructs of the Latino culture. This can be accomplished by capturing underlying meanings of words and acknowledging family as a significant element of Latino culture.

This intervention study stresses the need to understand cultural constructs because focusing solely on language limits culturally competent interventions.

Human Behavior and Development:

64.) Aranda, M.P., Valentine, M., Trejo, L., Ramirez, R., & Ranney, M. (2003). El Portal Latino Alzheimer's Project: Model program for Latino caregivers of Alzheimer's disease-affected people. *Social Work*, 48(2), 259-271.

This article describes an outreach and services program targeting Latino family care givers of Latino dementia affected adults. This program provides a variety of culturally specific services to Latino dementia affected adults and their family care givers. The results of the program evaluation indicate reduction in barriers to care and increase in service utilization. This program is thought to be effective through combining coordinated services of main stream and ethnic agencies.

This article is useful to learning about culturally competent programs and important components of the program and strategies that can reduce barriers to receiving services.

65.) Gelman, C.R. (2003). The elder Latino population in Holyoke, MA: A qualitative study of unmet needs and community strengths. *Journal of Gerontological Social Work*, 39(4), 89-114.

13 detailed interviews were conducted in the Latino elderly population. This group's needs and service utilization patterns were assessed. Transportation, social and recreational activities, and sense of safety are areas in which needs were identified. Negative perceptions of aging, anxiety, depression, and boredom were difficulties reported by this group of individuals. Some barriers to service utilization include: poverty, discrimination, transportation, language, lack knowledge of services, and mistrust of the service system. Many of the participants depended on informal support systems, such as their family and church. Collaboration is needed between formal service systems and informal networks, training bilingual workers, and dissemination of resources.

This article describes needs of clients and patterns of service utilization. Many important factors were identified, which can be used to understand barriers to services.

66.) Gorek, B., Martin, J., White, N., Peters, D., & Hummel, F. (2002). Culturally competent care for Latino elders in long-term care settings. *Geriatric Nursing*, 23(5), 272-275.

Family is a significant part of the Latino culture. When a family member is placed in a long term care facility it conflicts with Latino cultural values and norms. Consequently, this can create problems for family members and facility staff. This article describes the cultural norms of the Latino population and makes recommendations for facility staff to make adjustments and improve outcomes for the residents and their families. Knowledge of cultural beliefs, values, and practices can facilitate the development and implementation on culturally competent care.

This article can be used to understand family as a significant element within culture, problems that can occur when cultural values conflict with mainstream society and suggestions for conflict resolution by adapting interventions and programs accordingly.

67.) Lau, A.S., McCabe, K.M., Yeh, M., Garland, A.F., Wood, P.A., & Hough, R.L. (2005). The acculturation gap-distress hypothesis among high-risk Mexican American families. *Journal of Family Psychology*, 19(3), 367-375.

The acculturation gap hypothesis among Mexican American parents and their children was examined within 260 high risk Mexican American families. The acculturation gap hypothesis suggests that greater acculturation gaps are associated with greater conflict between parents and their children, and more youth conduct problems. Conversely, the results of this study show a higher rate of conflict and youth conduct problems in families who are congruent to each other on traditional cultural beliefs. Future research needs to evaluate the circumstances in which acculturation gaps are problematic.

This study can be used as a potent example of the complexity of cultural factors and how they are interactive with other factors to produce or exacerbate a social problem. It was assumed based

on prior research that greater acculturation gaps would create more distress, but this study found the opposite results. This emphasizes the need to consider all potential influential factors and identify specific circumstances that are more likely to impact a problem of interest.

68.) Romero, A.J., Robinson, T.N., Haydel, K.F., Mendoza, F., & Killen, J. (2004). Associations among familism, language preference, and education in Mexican-American mothers and their children. *Journal of Developmental & Behavioral Pediatrics*, 25(1), 34-40.

This study examines the cultural concept of familism and its relationship to the process of acculturation. Acculturation was measured by language preference and household education. Mothers and children of Mexican descent completed measures on acculturation, education, and familism. The results were contradictory to the authors' hypotheses. Higher familism was associated with higher education, children who preferred both Spanish and English language or English alone had higher familism scores than children who preferred Spanish, and there were no significant differences in child familism scores and language differences between mother and children. The results suggest that cultural values, such as familism can be maintained through the acculturation process.

This research study can be useful in understanding retention of cultural values despite influences from acculturation. This illustrates how strongly cultural beliefs are valued and can remain intact despite environmental influences and pressures.

69.) Umana-Taylor, A.J. (2004). Ethnic identity and self-esteem: examining the role of social context. *Journal of Adolescence*, 27, 139-146.

This study examined ethnic identity and self-esteem among 1062 Mexican adolescents attending one of three schools varying on their ethnic composition. The results of this study suggest significant relationships among all three schools on self-esteem and ethnicity. The adolescents attending the predominately non-Latino school reported the highest levels of ethnic identity, compared to the other schools. These findings support ecological theory in which individual lives are embedded within multiple settings and interact with each-other to influence developmental outcomes.

This study can be used in human behavior and development, youth, and community courses. It describes how human development and social context can interact to influence ethnic identity and self-esteem.

Health:

70.) Borrayo, E.A., & Jenkins, S.R. (2003). Feeling Frugal: Socioeconomic status, acculturation, and cultural health beliefs among women of Mexican descent. *Cultural Diversity & Ethnic Minority Psychology*, 9(2), 197-206.

This study examined acculturation, socioeconomic status, and cultural health beliefs on Mexican women's preventive health behaviors. Among all Latinos, women of Mexican descent receive

the least preventive care. Women with more traditional cultural beliefs may rely on more home and family care. This study did not find a significant association among level of acculturation, socioeconomic status, and preventive screening health behaviors. The authors hypothesize that traditional cultural health beliefs may remain intact across acculturation process. Traditional cultural health beliefs are found to be a strong predictor in attaining preventive health care. Lastly, the concept of prevention and risk does not have the same meaning across cultures. Less acculturated women of Mexican descent may not engage in preventive health care because they may not recognize behaviors as risks, as defined in western society.

This study stresses the idea of traditional cultural beliefs as a significant influence on behaviors related to treatment seeking, specifically on preventive interventions. It is a good tool to understanding how cultural beliefs can influence perceptions and behaviors.

71.) Flores, G., Abreu, M., Schwartz, I., & Hill, M. (2000). The importance of language and culture in pediatric care: Case studies from the Latino community. *Journal of Pediatrics*, 137(6), 842-848.

This article examines 3 case studies which illustrate culture's effect on pediatric care. Culture has a significant impact on pediatric care. In these 3 cases failure to address language and cultural issues resulted in lower quality of care, adverse outcomes, and increased health care costs. Guidelines to increase cultural competence are outlined, which can facilitate better quality health care and improve overall outcomes for the Latino community.

This is an excellent article that provides 3 case examples of adverse outcomes and consequences of not utilizing culturally competent health care.

72.) Hunt, L.M., de Voogd, K.B. (2005). Clinical myths of the cultural "other": Implications for Latino patient care. *Academic Medicine*, 80(10), 918-924.

This article compares health professional and patient views of Latino culture relative to decision making around amniocentesis. The interviews reveal discrepancies among health professionals' and patients' views in decision making. The interviews of patients and health professionals were examined in regard to knowledge related to cultural competence. The results of this qualitative study suggest that efforts to promote cultural competency among health professionals can encourage stereotypes, which can compromise quality of clinical care. This study stresses the importance of cultural competency, while maintaining a patient centered approach.

This is a good article to use when discussing cultural competency and client centered approach in social work practice. Misunderstandings of cultural competence may contribute to stereotyping; "true cultural competence" incorporates values of the individuals as well as their cultural beliefs.

73.) Murguia, A., Zea, M.C., Reisen, C.A., & Peterson, R.A. (2000). The development of the Cultural Health Attributions Questionnaire (CHAQ). *Cultural Diversity and Ethnic Minority Psychology*, 6 (3), 268-283.

Currently used health measures that are designed to assess health behaviors, do not capture the health beliefs of Latinos. This study developed a reliable and valid measure of Latino health beliefs. The relationships between subscales on the measure and acculturation levels demonstrated good construct validity. Criterion validity was established by linking measures with health seeking behaviors. It is important to have a culturally appropriate health measure because Latinos may differ in their beliefs on the etiology, symptoms expression, and treatment of an illness. Consequently, these beliefs can influence treatment seeking behavior and types of treatment that is provided.

This is a great study for research and community courses, which describes how culture can influence beliefs, symptom expression, and behaviors. Assessment and measurement are discussed including reliability and validity issues.