Published in final edited form as:

Br J Soc Work. 2010 January 1; 40(1): 100–114. doi:10.1093/bjsw/bcn100.

Parental Monitoring, Religious Involvement and Drug Use Among Latino and Non-Latino Youth in the Southwestern United States

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Abstract

Aims—The purpose of this study was to examine parental monitoring practices and religious involvement (protective factors) and substance use among Mexican American and Non-Latino adolescents in the Southwest of the United States.

Framework—We also relied on social control theories to guide our investigation of why adolescents may choose not to use drugs.

Participants—The sample was N=1087 adolescents, the age ranged from 13 to 15 years, and the gender distribution was approximately equal. There were 71% Mexican Americans and 29% non-Latinos in the sample.

Methods—a number of measures were used including recent substance use, religiosity, religious affiliation, parental monitoring, parental permissiveness, parental norms, and acculturation. Linear regressions were used to examine the relationship between the variables of interest and the outcomes.

Results—Although the effect sizes of the significant relationships were modest, the findings are of interest because they reinforce the importance of the role of parents in the lives of their adolescents and supports previous studies that find that parents have great influence on children's behaviors including substance use. The results suggest that acculturating adolescents benefit from having clear rules from their parents concerning substance use, and from believing that there is some kind of consequence attached to their behavior. Parental monitoring, by itself, did not explain lower levels of drug use among these adolescents; but it was a predictor of adolescent strong anti-drug personal norms. This study is useful to social workers and other professionals working with parents and adolescents as it provides concrete evidence of possible parents pathway of influence on their children's health status.

Keywords

Latino; adolescent substance use; religiosity; parental monitoring

Introduction

Adolescence is a period in which individuals experiment and assert their independence from the adults in their lives (Noom, Dekovic, & Meeus, 2001). Sometimes the experimentation

may involve behaviors that put the adolescent at risk including experimentation with legal and/or illegal drugs. In the United States, annual prevalence of alcohol use during 2005 was 34% for 8th graders (usually ages 13 to 14), and rising to 67% by 12th grade (adolescents 17 to 18 years of age) (Monitoring the Future, 2006).

Drug use rates vary by racial and ethnic group. For example, among Native American adolescents the rates for illicit drug use are higher than among White, Latino and Black adolescents while Asians have the lowest rates of use (Department of Health and Human Services, 2002). Latino adolescents, compared with non-Latino Whites, have reported higher rates of alcohol and hard substances use (Marsiglia et al., 2002). Today, Latinos constitute the largest ethnic group in the U.S. and they continue growing in numbers, currently representing over 15% of the total U.S. population (US Census Bureau, 2008). Mexican Americans are the largest Latino subgroup, they represent 64% of the total Latino population in the US and more than 80% of all Latinos residing in the Southwest region (US Census Bureau, 2008). These characteristics create a unique environment where to test existing assumptions about parental monitoring, adolescents behavior and health outcomes.

This study advances knowledge by examining the relationship between a number of parental factors (parental monitoring, permissiveness, and injunctive norms) and substance use among a sample of Mexican American youth compared to non-Latinos residing in the Southwest region of the US. Due to its cultural specific focus, the study takes into consideration other important variables not usually included in these type of studies such as religious involvement and religious affiliation on substance use. Due to the collectivistic nature of Mexican and Mexican American cultures (Yeh, Arora, & Wu, 2006), institutions other than families may play an important role in supporting children and youth to live healthy lives.

Conceptual Framework

Ecological systems theory and theories of social control guided this study. Ecological theory is based on the belief that individuals belong to different micro-systems in which they develop relationships that may influence their behavior in other situations (Ashford, Lecroy, Lortie, 2001). It focuses on the interactive effects of risk and protective factors on the individual's behavior. The family is considered to be the most important context in which protective and risk factors occur, with parental control identified as the most powerful protective factor against adolescent's problem behaviors including substance use (Graves, 2005). Other systems such as the school, the community and religion also affect the family, and in turn, the individual.

Social Control theories focus on controlling factors that prevent the individual from engaging in deviant acts. From a micro perspective the theory focuses on informal systems that explain why individuals conform. One important controlling factor, identified from the micro system, is the family (Hirschi, 1969). Parental monitoring has been used as a measure of direct parental control measure in drug abuse and health risky behaviors research (DiClemente et al., 2001).

The role of parents and religion in adolescent drug use

Monitoring is the extent to which parents supervise their children's activities and whereabouts (Bahr, Maughan, Marcos, & Li, 1998). Parents who effectively monitor their adolescents have children at lower risk of smoking, drinking, and using illegal drugs than the average teen (CASA, 2001). Parental permissiveness is different than monitoring, in that it refers to parents who are lax about behavioral standards, and who have few requirements for their children (Sargent & Dalton, 2001). High parental permissiveness is associated with high involvement in drug use (Wood, Mitchell, Read, & Brand, 2004). In parallel fashion, Borsari & Carey (2003) concluded that injunctive norms (the positive or negative sanctions youth anticipate from significant others like parents and peers) were more likely than descriptive norms (youth's

perceptions of the prevalence of drug use among their age peers) to predict drinking behavior. Individuals may be more likely to avoid engaging in certain behaviors that they believe they risk disapproval from important social group (Nelson, 2004).

A wide body of literature has emerged over the past several decades demonstrating a strong inverse correlation between religiosity and substance use, suggesting that religion operates as a protective factor against substance use (Marsiglia et al., 2005). Religiosity refers to a person's behavioral and attitudinal religious devotion, regardless of the content of his/her beliefs (Amey, Albrecht, & Miller, 1996). In the United States 95 percent of people are affiliated with a specific religion, solidifying its importance for consideration among the array of influences acting on the lives of youth (CASA, 2001). Researchers proposed that youth who are involved in religious activities may have more opportunities to associate with positive peer groups who share attitudes, beliefs, and values that discourage the use of substances and to adopt more pro-social norms (White, et al., 2006). Since religions differ in their beliefs, organization, and practices, their members are affected in different ways (Hill, 2000). Forthun et al., (1999) found differences in protective features of religiosity based on denominational affiliation, with proscriptive denominations being more protective. This impact, however, varies among different ethnic groups. Researchers suggested that among Latino adolescents religion may have "multiple pathways of influence on substance use" that we need to differentiate in order to comprehend the possible ways religion may prevent substance use (Marsiglia et al., 2005).

Acculturation

The concept of acculturation has been defined as a process through which people from one culture adjust to another culture, modifying their attitudes and/or their behaviors as a result of the contact with a new culture (Berry, 1986). Intergenerational conflicts occur when immigrant families settle in more ethnically heterogeneous communities where they face more pressures to acculturate and where drugs are often more readily available (Myers, 2004). One hypothesis is that parental practices become disrupted because it is more difficult for parents to monitor their more acculturated adolescents (Samaniego, & Gonzales, 1999). Acculturation is also believed to erode the family's more conservative views on substance use (Martinez Jr., 2006). For example, in Mexico, substance use rates are far lower than in the U.S (Caetano & Medina-Mora, 1988). The present study examines parental practices, religious involvement and substance use among Latino and non-Latino adolescents. We hypothesized that higher levels of parental monitoring and lower levels of parental permissiveness would be protective against adolescent's substance use. We also hypothesized that adolescents who scored higher in religiosity would report less substance use. Finally, we hypothesized that differences would be found in rates of substance use by ethnic group.

Method

Data

This study relies on secondary analysis procedures using data from a drug use prevention study of middle school students in a Southwestern city (Hecht, Marsiglia, et al., 2003). In the 35 schools that participated, the majority of students claimed at least some Latino heritage, and most Latinos (90%) identified as of Mexican heritage. All the students in 7th grade were selected to participate, and 429 students from several 8th grades also took part in the research project.

The results of this study are based on a sub-sample of students who completed the first – or – pretest survey in Fall 1998, before any school interventions were begun. The criteria for inclusion were that the respondent was randomly selected to complete the survey versions that

contained questions on religious affiliation, religious involvement, parental monitoring, parental permissiveness and parents injunctive norms.

Subjects

The students ($n=1,087$) ranged from 11 to 15 years of age, with 519 males and 549 females. In the United States free or reduced lunches are provided to students who qualified for this benefit due to low household income. This often is used in research as a measure of socioeconomic status when respondents are children who have imperfect knowledge of family income and wealth. In this sub-sample 81% of the students were from low income families as indicated by a free school lunch or a (12%) a reduced-price lunch. In the regression model this variable is labeled "SES" (socioeconomic status). The majority of these students (54%) were either Mexican or Mexican American, the rest were other Latino (17%), and Non-Latino represented 29% (Whites 15%, African American 10%, and a very small proportion were Native American, Asian or other ethnicities). All non-Latinos were treated as one group because the small size of each group made it impossible to analyze them separately.

Instruments

The survey was available in English and Spanish and took approximately 45 minutes to complete. University-trained surveyors administered the questionnaire during regular school hours after obtaining authorization for student participation from the student's parents. The procedures were reviewed and approved by the Institutional Review Board at the investigators' university and by the school districts involved in the research. The surveyors informed the students that their involvement in the research project was voluntary and their responses were guaranteed confidentiality. Students were given the option of participating in a recreational activity if they did not want to complete the survey. The participating students represented approximately 87% of the students enrolled in the study schools at the time. The teachers were absent during the survey administration. No student names or identification numbers were recorded on the questionnaires and neither the teachers nor the school administrators had access to the original data, although they were provided with reports of school-specific, aggregated student responses.

Measures

The key outcomes examined in this study are Likert-type items that capture student's tobacco, marijuana and alcohol behaviors and attitudes, their religious affiliation and religious involvement, and perceived degrees of parental monitoring, parental permissiveness and parental injunctive norms.

The substance use dependent variables were constructed from questions concerning the amount and frequency of use, modeled after questionnaire items used by Flannery, Vasonyi, Torquati, and Fridrich (1994). These measures were chosen due to their developmental specificity for the age group being studied. Students reported how much alcohol they used, how many cigarettes they smoked, and quantities of marijuana use in the past 30 days, and they also reported the frequency of consumption of these substances. It has been argued that the 30-day measure reduces biases in measures based on respondent's recall of the timing and use of substances (Johnston, 1989). The original Likert scale responses were highly skewed toward low rates of drug use; therefore, in order to improve model fit the responses were transformed by calculating their natural log. Personal pro-drug norms was measured with a composite variable that included questions such as "is it okay for someone your age to drink alcohol?" The answers ranged from 1=definitely not okay to 4=definitely okay, indicating stronger to weaker pro-drug norms.

The degree of the student's religiosity was measured by asking how involved the student is in his/her religion. The responses ranged from 1="Not at all involved" to 5="very involved." Students also identified their religious affiliation as Catholic (51%), Protestant (9%), Mormon (3%), Native American Church (3%), Jewish (2%), other religion (17%), or non-religious (15%). To model effects of religious affiliation, two independent dichotomous variables were created. Since the great majority of the sample was Catholic, and the Catholic church in Latin America is tied with the cultural norms and values of the population, the first variable created was coded 1=Catholic, 0=other religious affiliation and no religious affiliation. Also, there was an interest to test the general effect of having a religious affiliation versus not having one. Therefore, a second variable was coded 1=no religious affiliation, 0=religious affiliation.

Perceived parental monitoring was measured using the question "How often do your parents ask where you are going when you leave the house?" Responses from 1="never" to 5="most of the time." Parental permissiveness questions were worded: "How often do your parents allow you to go out whenever you want to?" and "Do your parents allow you to drink alcohol at parties?" The responses ranged from 1="most of the time" to 5="never." The parental injunctive norms variable was constructed by calculating a composite measure based on mean scores across three questions: "How angry would your parents be if they found out you drunk alcohol?" "if they found out you smoked cigarettes?" and "...if they found out you smoked marijuana?" Responses for these three questions ranged from 1="not angry at all" to 4="very angry" indicating weaker to stronger parents injunctive norms.

Calderon-Rosado et al., (2002) argued that language is a very important dimension of acculturation. Language preference has been used as a proxy for acculturation by other researchers (Adam et al., 2005; Shelley et al., 2004), including in studies of adolescent substance use (Epstein, Botvin, & Diaz, 2001, 2001). In this study, students were asked two questions regarding the language they usually speak with their family and with their friends. Answers on a Likert scale ranged from 1="Spanish only" to 5="English only." These two items were averaged to produce a single score as a linear measure of students' acculturation level.

A proxy SES variable was constructed by contrasting students who did and did not receive a free or reduced school lunch, students who receive free or reduce lunches qualified for this benefit because of low household income (1=low SES, 0=not low SES). Typical school grades were self-reported, ranging from 1="mostly F's" to 9="mostly A's." "A" represent the highest grade that a student may received (ranges from 90 to 100%) and "F" represent the lowest grades (usually under 50%). In multivariate analyses ethnicity was dichotomized as Latino/non-Latino, using Non-Latino as the reference group.

Results

Although the majority of the students in this sample reported that they did not use cigarettes, marijuana, or alcohol in the last 30 days, a small group reported using one or more substances. Table 1 presents the demographic information of the sample and correlations with recent use of substances and pro-drug personal norms. The average student had recently used alcohol more frequently and in higher quantities than cigarettes or marijuana. Older students were more likely to report greater use of alcohol and marijuana and weaker pro-drug personal norms. Higher grades correlated negatively and significantly with use of all three substances and positively with strong personal pro-drug norms. Gender (being male) was positively correlated with marijuana use and strong pro-drug personal norms. While identifying as Latino was positively correlated with the recent use of alcohol and marijuana, and with strong personal pro-drug norms. Higher levels of perceived parental monitoring and lower levels of parental permissiveness were associated with lower substance use. About 67% of the students reported that their parents would get angry "most of the time" if they found that they were smoking

cigarettes or marijuana, and these students also tended to report less substance use than their counterparts.

In this sample, 85% of students were affiliated with a religion, with 15% either not believing in religion or not practicing. Catholic affiliation was most common with 543 (50%). Another 25% of students reported being affiliated with other religions. Thirty-seven percent reported being “very involved” or “involved” with their religion, while 63% reported their involvement as either “somewhat involved” to “not at all involved.” Religious involvement was negatively and significantly correlated with recent cigarette use and pro-drug personal norms. While religious affiliation in the Catholic church was significantly and negatively correlated with recent use of marijuana ($-.060$), no-religious affiliation was positively correlated only with marijuana use ($.081$).

Tables 2 and 3 summarize two OLS regression models that were estimated for each outcome, recent substance use and pro-drug personal norms. In the first linear regression model we entered all demographic variables including ethnicity and acculturation and the religious involvement variable, Catholic and no-affiliation (Model 1). On subsequent models we added first parental monitoring, followed by parental permissiveness and in the last model all parental variables were entered simultaneously. Since there were little or no changes in models 3 and 4 we present only the first and last models on Tables 2 and 3.

Demographic variables (age, male gender, low grades) played a role in predicting outcomes. Older age predicted marijuana use but this was attenuated when parental variables were included. Lower grades were a consistent and strong predictor for all substance use. Latino identification surfaced as a risk factor for recent alcohol and marijuana use compared to non-Latino identification. Religious involvement had no significant protective effects. However, religious affiliation to the Catholic church emerged as protective for recent use of cigarettes.

In the next model (not presented) we added parental monitoring which was significant ($p < .010$) for alcohol use, cigarette use ($p < .000$), marijuana use ($p < .002$) and pro-drug personal norms ($p < .000$). However, the significant effect of parental monitoring disappeared for all substances and personal norms when we introduced parental permissiveness suggesting that while parental monitoring is a valuable strategy, low parental permissiveness may be a more effective one. We present the last model in which all parental variables were tested simultaneously. That is Model 2 on the tables. The parental injunctive norms had significant expected effects on every outcome, while low parental permissiveness was protective of alcohol and cigarette use but not of marijuana. Parental monitoring, in contrast, had no effects on drug use. Changes in significance from Model 1 to Model 2 suggested that differences in parental variables accounted for age differences, low grades, and identification as Latino.

Table 3 displays the two regression models with personal pro-drug norms as a dependent variable. Personal pro-drug norms are important because they reflect the attitudes of the students towards drugs, and positive attitudes towards drug use are a precursor to actual use (Simons & Carey, 2000). Being male and being Latino surfaced as risk factors for weaker anti-drug norms but the effects were attenuated in model 2 when parental variables were added. Better grades predicted stronger anti-drug norms. More acculturated students were at more risk for stronger personal pro-drug norms. Religious involvement and religious affiliation did not have any significant effects, but all the parent variables predicted personal anti-drug norms in the expected direction. These results should be taken with caution since the R squared are weak.

Lastly, we tested the following interactions: parental permissiveness * sex, parental injunctive norms * sex, parental permissiveness * ethnicity and parental injunctive norms * ethnicity. Significant interactions suggested that the effects of parental permissiveness on cigarette and on personal anti-drug norms were more salient for the Latino than for non-Latino students.

Discussion

Guided by Ecological theory and Social Control theory we examined how direct parental control measures, such as parental monitoring, permissiveness and injunctive norms influenced young adolescents drug use. Our findings reinforce the importance of the role of parents in the lives of their adolescents and supports previous studies that find that parents have great influence on children's behaviors including substance use (Graves, 2005). Although parental monitoring, by itself, did not explain lower levels of drug use among these adolescents, it was a predictor of adolescent strong anti-drug personal norms. Personal norms against drug use are important because weak personal norms are often a precursor to actual substance use. Possibly, our measure of monitoring was too limited to capture effects on drug use. The mere act of asking adolescents about their whereabouts may not be enough to deter substance use. That could explain why the other two parental measures were more consistently associated with lower recent substance use and stronger personal anti-drug norms. The strong relationships between parental permissiveness, adolescents expectations regarding parents sanctions about drug use (parents' injunctive norms) and youth substance use suggest that adolescents, especially at this young age (13 years old), may respond more positively to more specific rules about drinking and about when and with whom they are allowed to go out. An important finding was that adolescents were less likely to use alcohol, cigarettes and marijuana when they believed that their parents would get angry if they found out that they have used any of those substances suggesting that unless adolescents believe that their parents are specifically prohibiting drug use, and that there is some kind of consequence attached to their behavior (in this case parental anger) they are more likely to use substances. This is important because it suggests that monitoring in itself may not be enough. Parents may need to be more specific in what is expected from their children. Although well intentioned, parents who are only asking their children's whereabouts and are failing to attach consequences to their children's behavior may not be doing enough to deter them from alcohol, cigarettes, and marijuana use.

Religion is part of the ecological system in which a person lives and may influence a person's behavior, and sometimes it may even exercise some control on individuals' behaviors and attitudes. However, religious involvement in this study was not significantly protective of substance use, and an analysis of religious affiliation offered very limited results. Given that the literature has identified spirituality and religiosity as two different constructs it is important to remember that our measure of religious involvement is only a measure of religiosity (which consists of behaviors, such as attending religious events- see Amey et al., 1996). Similarly, a lack of religious affiliation does not mean that the person lacks in faith and spirituality. Therefore, the lack of significance for religious involvement and the limited significant results that were obtained with religious affiliation in this analysis are only indicative of lack of religiosity without a consideration of the participant's spirituality. At this age, religious involvement may be more reflective of decisions by parents to take their children to church and church activities, and not the children's decisions. More research is needed to illuminate how the different aspects of religion, faith and spirituality may influence individual decisions to use drugs, and more importantly how religious families may differ from non-religious families in adolescent's substance use outcomes. Finally, the study suggests that Latino adolescents are at more risk for alcohol and marijuana use than non-Latinos, while the effects of low parental permissiveness were also more important for Latino youth.

A limitation of this study is that substance use measures rely on students self-report and risk both under-and over-reporting the actual level of parental involvement and youth substance use. In the future, data collection from both parents and their adolescents would help answer questions about actual versus adolescent-perceived parental permissiveness and monitoring practices. Future studies interested in the effects of religion on substance use and personal

norms will benefit from including measures that can differentiate between religiosity and spirituality.

Nevertheless, the findings of this study are useful in a number of ways. First, practitioners working with Latino youth need to keep in mind that this group seems to benefit from low levels of parental permissiveness. Specific information regarding the importance of not only monitoring their children but also of clearly delineating consequences to their behavior may help parents in adopting the best parenting practices for their children. This information may be incorporated in parenting classes, or informal parent meetings. In direct practice, social workers could also help parents to understand the differences between parental monitoring and permissiveness and the benefits of avoiding high permissiveness. The findings of this study are particularly interesting, and add to the body of literature in parenting in that they emphasize the importance of low parental permissiveness over passive monitoring, and the powerful effects of parental injunctive norms over substance use among Latino adolescents. Varela et al., (2004) argued that Latino parents use a more authoritarian parenting style as a way to help protect their children from problem behavior. This parenting style includes more strict discipline. It is then possible, that Latino youth who are used to this type of parenting would benefit from clear rules and knowing the consequences to their behavior. The importance of certain parental practices may be also taken into account when developing family programs. Secondly, religion may be important to their clients regardless of whether they attend religious services. If the client identifies himself or herself as religious, and if traditional practices are important to him or her, then religion should be taken into account during treatment. For example, a large number of Latinos are Catholic. Traditional Catholics may rely on the guidance and support provided by a religious figure (priest, bishop, nun). People with traditional views may feel more comfortable with the inclusion of a religious figure in treatment. This may mean that the religious figure receives appropriate information concerning the treatment plan and gives his/her blessing to adhere to the treatment. Or, that the client may desire to say a small prayer before sessions start, and a time is allocated for that. Most religions view prayer as a way to find peace and guidance from a Higher Being. These are very powerful tools in the lives of religious individuals, and can be easily incorporated in treatment sessions if these are important to the client. Social workers need to be sensitive to the client's religious beliefs and may need to consider offering the incorporation of short practices, such as prayer, to meetings with clients. Also, being sensitive to religious beliefs may simply mean to recognize the importance of these values and beliefs when the client talks about them.

Acknowledgments

This research was supported by the National Institutes of Health/National Institute on Drug Abuse grants funding the DRS Next Generation project (R01 DA14825) and the Southwest Interdisciplinary Research Consortium (R24 DA13937) at Arizona State University.

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Table 1
Demographic Information and Correlations with Substance Use and Personal Pro-Drug Norms

1. Alcohol	1,087	1.01	(0.55)	0–2.7		0.468***	0.516***	0.436***
2. Cigarettes	1,087	0.83	(0.40)	0–2.6		0.527***	0.397***	
3. Marijuana	1,087	0.88	(0.49)	0–2.6			0.501***	
4. Norms	1,087	10.17	(2.28)	1–11				
5. Parental Monitoring	1,087	1.63	(1.09)		–0.123***	–0.154***	–0.129***	–0.188***
6. Parental Permissiveness	1,087	3.42	(1.52)		0.289***	–0.232***	–0.2–0	0.304***
7. Parental Injunctive Norms	1,087	7.22	(1.40)		–0.298***	–0.303***	–0.360***	–0.413***
8. Religious inv.	1,087	2.9	(1.35)		0.056	0.065*	0.06	0.063*
9. Rel. affiliation	924				0.046	–0.04	–0.060*	–0.02
10. Non-religious	163	15			0.048	0.02	0.081*	0.03
10. Age	1,033	12.52	(0.63)		0.085**	0.03	0.116***	0.098**
11. Gender (1=male)	1063	49			0.024	0.04	0.075**	0.149***
12. Grades	1,079	3.25	(1.81)		–0.170***	–0.178***	–0.03***	0.197***
13. Latino	762	71			0.156***	0.06	0.113***	0.112***
14. Non-Latino	316	29						
15. SES	1,078	0.72	(0.45)		0.156***	0.06	0.113***	0.112***
16. Acculturation	1,087	7.47	(2.38)		–0.035	–0.02	0.02	0.01

*
p < 0.05

Notes: 1= alcohol use, 2= cigarette use, 3= marijuana use, 4= personal pro-drug norms

Table 2

Regression Models: Effects on frequency and severity of recent alcohol, cigarette and marijuana use - Unstandardized Regression Coefficients

Models	Alcohol Use		Cigarette Use		Marijuana Use	
	1	2	1	2	1	2
Age	0.056	0.035	0.027	0.012	0.056*	0.041
Gender (1=male)	-0.004	0.039	0.049	0.026	0.060	0.040
Grades	-0.047***	-0.027*	-0.038***	-0.024**	-0.052***	-0.034***
Latino	0.170**	0.149***	0.065	0.050	0.145**	0.122*
SES	-0.046	-0.031	-0.061	-0.051	-0.017	-0.011
Acculturation	0.003	0.003	-0.001	-0.003	0.017	0.012
Religious Inv.	0.019	0.011	0.011	0.007	0.019	0.014
Catholicism	-0.023	-0.007	-0.102*	-0.085*	-0.098	-0.066
Non-religious	0.089	0.072	-0.092	-0.111	0.053	0.028
P. Monitoring		-0.015		0.023		0.010
P. Permissiveness		-0.077***		-0.035***		-0.016
P. Inj. Norms		-0.082***		-0.063***		-0.105***
F	4.18***	10.84***	3.84***	9.620	6.15***	11.86***
Adjusted R ²	0.042	0.154	0.038	0.138	0.067	0.167

*
p <0.05,**
p <0.01,***
p <0.001

Table 3

Regression Models: Effects on personal anti-drug norms - Unstandardized Regression Coefficients

Models	Pro-drug Norms	
	1	2
Age	0.127	0.023
Gender (1=male)	.486 ^{**}	.328 [*]
Grades	-.262 ^{***}	-.160 ^{***}
Latino	.502 [*]	0.399
SES	0.086	0.154
Acculturation	.122 ^{**}	.097 ^{**}
Religious Inv.	-0.064	-0.035
Catholicism	-0.057	-0.061
Non-religious	0.068	0.201
P. Monitoring		-.158 [*]
P. Permissiveness		-.237 ^{***}
P. Inj. Norms		-.472 ^{***}
F	6.26 ^{***}	15.86 ^{***}
Adjusted R ²	.068	.215

*
p <0.05,**
p <0.01,***
p <0.001