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Exploring Culturally Based Intrafamilial Stressors Among Latino Adolescents

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Abstract

Despite the profound impact that intrafamilial stressors, including parent – adolescent acculturation discrepancies, may have on Latino adolescent behavioral and mental health, this line of research remains underdeveloped. The purpose of this study is to obtain rich descriptions from Latino adolescents of the most salient intrafamilial stressors. The authors employ focus group methodology with a grounded theory approach. A total of 25 focus groups were conducted with 170 Latino adolescents in the Northeast and Southwest United States. Findings indicate that Latino adolescents experience significant stressors related to parent – adolescent acculturation discrepancies. From this qualitative study the authors derive a series of testable hypotheses aimed at fully understanding the role of parent – adolescent acculturation discrepancies on Latino adolescent behavioral and mental health and informing the development of culturally responsive preventive interventions for this population.

Keywords

Latino/Hispanic; adolescent; acculturation; acculturation gap; acculturative stress; family functioning

Adolescence is a developmental period characterized by, among other things, increased risk taking (Institute of Medicine and National Research Council [IOM/NRC], 2011), and researchers have demonstrated the ways in which family relations shape Latino adolescents' lives to ameliorate risk behaviors (Gonzales et al., 2012; Roosa et al., 2011; Umana-Taylor, Updegraff, & Gonzales-Backen, 2011). Intrafamilial stressors, however, can negatively affect these parent – adolescent relationships and family functioning as a whole (Marceau, Dorn, & Susman, 2012). Although all families experience intrafamilial stressors as a result of normal developmental processes, Latino families can also experience culturally based stressors, including parent – adolescent acculturation discrepancies (Cordova, Huang, Garvey, Estrada, & Prado, 2014). Despite the profound effects that culturally based intrafamilial stressors may have on Latino adolescent development, research exploring the intrafamilial stressors Latino families experience remains underdeveloped (Schwartz et al., 2012; Schwartz, Unger, Zambopanga, & Szapocznik, 2010). In this study, we begin to address this critical research gap using qualitative research methodology. Although several

methodological and analytical approaches exist in qualitative research, we selected focus group methodology for data collection and grounded theory for analysis because these approaches aim to empower under-represented groups and because research findings are grounded in participants' experiences (Cervantes & Cordova, 2011; Cordova, Ciofu, et al., 2014; Parra-Cardona, Cordova, Holtrop, Villarruel, & Wieling, 2008; Pasch et al., 2006; Umana-Taylor & Bamaca, 2004).

With the rapid increase of the Latino population in the United States, understanding the culturally based intrafamilial stressors that Latinos experience is of particular importance because it can aid in developing culturally specific preventive interventions for a large segment of the U.S. population (Cordova, Huang, Pantin, & Prado, 2012; Gonzales et al., 2012; Roosa et al., 2011; Smokowski & Bacallao, 2010; Umana-Taylor et al., 2011). Indeed, the United States is home to 52 million Latinos and is second only to Mexico in size of Latino population. Culturally-specific interventions are particularly timely because, of the Latino population currently living in the United States, 47.1% report being foreign born and more than one half report having arrived after 1990 (U.S. Census Bureau, 2012). Further, the demographics of this population – approximately 61.1% of U.S. Latino households report having children age 18 years or younger – indicate that parent – adolescent stressors may be a significant aspect of intrafamilial stressors (U.S. Census Bureau, 2012). Despite this continued growth of the U.S. Latino population, culturally-specific preventive interventions to address mental and behavioral health needs of Latinos, including interventions targeting parent – adolescent intrafamilial stressors, are lacking (Cervantes, Goldbach, & Santos, 2011; Schwartz et al., 2012; Smokowski & Bacallao, 2010). Therefore, this study explores the nature of culturally based intrafamilial stressors, including parent – adolescent acculturation discrepancies, as described by a sample of Latino adolescents from the Northeast and Southwest United States.

Acculturation and Parent – Adolescent Acculturation Discrepancies

Broadly defined, acculturation is a multidimensional process by which change in individuals occur as a result of contact with a new host culture over time (Berry, 2001, 2007; Telzer, 2010). These multidimensional changes include, but are not limited to, language preference, values, practices, beliefs, and identity (Berry, 2006; Schwartz et al., 2010). For example, one can be highly acculturated to the host country with respect to language preference (e.g., primarily speaking English), but low in acculturation with respect to certain values (e.g., adhering strongly to *familismo* and *respeto*) (Schwartz et al., 2012). However, adolescents from immigrant families tend to acculturate at levels that far exceed those of their parents, a tendency that results in parent – adolescent acculturation discrepancies (Fuligni, 2012; Hwang, Wood, & Fujimoto, 2010; Szapocznik, Kurtines, & Hanna, 1979; Unger, Ritt-Olson, Wagner, Soto, & Baezconde-Garbanati, 2009). Telzer (2010) identified four types of parent – adolescent acculturation discrepancies: host cultural gap is higher (child more acculturated than parent in host culture), native cultural gap is higher (child more acculturated than parent in native culture), host cultural gap is lower (child less acculturated than parent in host culture), and native cultural gap is lower (child less acculturated than parent in native culture). This study focuses on acculturation discrepancies that exist when the host cultural gap is higher (Telzer, 2010). Researchers have focused on the effects of

parent – adolescent acculturation discrepancies on family functioning (Cordova, Huang, et al., 2014; Hwang & Wood, 2009; Morales-Campos, Markham, Peskin, & Fernandez, 2012) and health outcomes (Hwang & Wood, 2009; Juang & Umana-Taylor, 2012; Kim & Park, 2011; Schwartz et al., 2012; Telzer, 2011; Unger et al., 2009). Less understood, however, are processes – including culturally based intrafamilial stressors – that may mediate the relationship between parent – adolescent acculturation discrepancies and behavioral and mental health outcomes in Latino youth and their families.

Culturally Based Intrafamilial Stressors

Some researchers suggest that acculturation discrepancies moderate the relationship between mother – daughter conflict and mental health outcomes (Bámaca-Colbert & Gayles, 2010). Not surprisingly, parent – adolescent acculturation discrepancies may result in intrafamilial stress, as divergent cultural views provoke clashes between family members, and they struggle to resolve differences between culture of origin and new host culture (Agar, 1991; de Lardemelle, Onaga, & Suarez-Orozco, 2010; Garcia Coll & Marks, 2011; Juang, Syed, Cookston, Wang, & Yeong Kim, 2012; Kulis, Marsiglia, & Nieri, 2009). For the purposes of this study, we conceptualize intrafamilial stress as perceived stressors that affect parenting practices and family processes and, in turn, adolescent outcomes (Bronfenbrenner, 1994; Li, Jurkowski, & Davison, 2013). Parent – adolescent acculturation discrepancies can substantively affect adolescents and their families, and researchers have identified these discrepancies as important antecedents for internalizing and externalizing behaviors in adolescents and their families (Cervantes & Cordova, 2011; Cervantes, Fisher, Cordova, & Napper, 2012; Cordova & Cervantes, 2010; Miller, Kim, & Benet-Martinez, 2011; Rogler, Cortes, & Malgady, 1991; Sam & Horenczyk, 2012). However, relatively few researchers have examined culturally based intrafamilial stressors. Exploring these stressors is an important next step to understanding culturally based stressors as etiological factors of Latino adolescent behavioral and mental health outcomes because understanding them may assist in identifying pathways by which acculturation discrepancies affect adolescent behavioral and mental health outcomes.

The few available models of intrafamilial stress (Abidin, 1990, 1997; Webster-Stratton, 1990) posit that three types of variables affect intrafamilial stress: characteristics of the parent, characteristics of the child, and characteristics the environment. The relationship among the three, along with normative developmental processes and family transitions, also may influence experiences of intrafamilial stress (Crnic & Low, 2002). From a theoretical perspective, most intrafamilial stress models pay special attention to the parent – child relationship as a source of parenting stress, but they often ignore other microsystemic, mesosystemic, exosystemic, and macrosystemic influences (Bronfenbrenner & Morris, 2006) on intrafamilial stress. These influences include immigration policies and the context of receiving communities, as well as other cultural processes related to language, identity, attitudes, and value orientations. Considering these other sources of influence is crucial when studying Latino families and their children, because phenomena at the macrosystemic-level influence lower level systems such as schools, peers, and families, as well as the relationship among these systems (Szapocznik & Coatsworth, 1999). Additionally, current theories of intrafamilial stress simply do not include constructs of acculturation

discrepancies. A more emic, grounded theory approach seems essential to identifying these culturally based constructs, because macrosystemic cultural processes are an especially important context for Latino parents and their children in the United States. Using a grounded theory approach to begin identifying multidimensional aspects of intrafamilial stressors associated with parent – child cultural discrepancies is a logical next step to understanding culturally based intrafamilial stressors as etiological factors of behavioral and mental health; thus it forms the basis for this qualitative approach.

Rather than overlooking strengths and resources present in Latino youth and their families, this study focuses primarily on identifying challenges experienced by Latino youth. This is one component of a broader program of research, which consists of generating a set of stress items for the youth version of the Hispanic Stress Inventory – Adolescents (HSI-A; Cervantes et al., 2012). This qualitative analysis explores the nature of culturally based intrafamilial stressors as described by Latino adolescents, because few studies have attempted to explore these stressors using qualitative methods. We employ qualitative methodology specifically to gather process data not able to be collected through quantitative methods and to develop testable hypothesis for future research.

Method

Design

This study represents our analysis of qualitative data that informs a larger study aimed at identifying the stressors Latino youth experience and, ultimately, develops the HSI-A, a culturally responsive psychosocial stress instrument for Latino youth (Cervantes et al., 2012). For this component of the larger study, a mixed stratified sample strategy is designed to elicit information about stress events relevant to a wide range of Latino adolescents from diverse cultural origins. Additional methodological details have been reported elsewhere (Cervantes & Cordova, 2011, Cervantes et al., 2012; Cordova & Cervantes, 2010).

Development of the Interview Guide

An expert panel consisting of four Latino researchers was interviewed to determine current perspectives on Latino acculturative stressors that Latino youth experience. The expert panel consisted of three Latinos and one Latina, all of whom study Latino populations, particularly regarding acculturation, stress, mental health, and substance abuse treatment and prevention. The results of the expert panel interview were used to construct the open-ended focus group interview guide. The interview guide consisted of six grand tour areas of inquiry and related potential probes. *Grand tour questions* refer to the main areas of inquiry that researchers will explore (Spradley, 1979). The six grand tour areas of inquiry included (a) immigration stress, (b) communication and language stress, (c) school and academic stress, (d) peer and intimate relationships stress, (e) family stress, and (f) social and economic stress. For the purpose of this study, we sought to identify stressors with regard to parent – adolescent acculturation discrepancies, as expressed by participants. Open-ended questions (e.g. “What are the 3 main language or communication problems kids have with other family members? [e.g., being the family translator]”) were followed by interviewer probes designed to elicit a

range of responses. Once the interview guide was developed, we began to recruit and engage potential participants.

Sampling and Recruitment

To be considered for this study, participants had to (a) identify themselves as Hispanic or Latino, (b) be between ages 11 and 19, and (c) give assent and provide parental consent. The exclusion criterion included having more severe forms of adolescent mental health disorders such as developmental disorders (autism, mental retardation) and/or childhood/adolescent psychosis. The sampling design consisted of four strata. A total of 170 youth were interviewed in 25 focus groups. Participants were recruited from middle schools, high schools, and community-based clinical programs in two research sites located in the Northeast and Southwest regions of the United States. Community-based clinical programs refer to outpatient community-based organizations offering services to Latino youth and families, including health (e.g., substance abuse prevention) and mental health (e.g., family therapy) services.

Focus Group Procedures

The second author was present and, with a cofacilitator, conducted all Los Angeles – based interviews. A trained, bilingual PhD research associate conducted focus groups in New Jersey. Focus groups were mixed. They consisted of youth from various nationalities and ethnicities. Controlling for equal numbers stratified by ethnicity or nationality was not possible in this community- and school-based convenience sample approach.

Focus group interviews have been shown to be a powerful investigative tool to facilitate collection of rich data (Denzin & Lincoln, 2005; Patton, 2002). Furthermore, focus group interviews can be powerful because they allow for historically disenfranchised populations to be placed in the position of “expert” (Morgan, 1997; Stewart, Shamdasani, & Rook, 2007). Moreover, focus group interviews gather large amounts of data in a relatively short time, yet they produce insights that not easily obtained through individual interviews or quantitative methods (Morgan, 2002; Stewart et al., 2007). Focus groups are not without their limitations. Social conformity and social comparison may come into play; and some participants may dominate interviews, preventing diverse or minority viewpoints. Family relations can also be a very personal topic for some youth, preventing them from sharing the details of their experiences (Morgan, 2002; Stewart et al., 2007). Guidelines established by Umaña-Taylor and Bámaca (2004) for conducting focus group interviews with Latino populations were implemented in the study design. Specifically, we included bilingual focus group facilitators who were of Latino origin, and we offered participants the option of participating in a focus group interview in their preferred language.

The school principal and site coordinator introduced researchers to the teacher of each selected classroom from the school-based recruitment sample and explained to them the purpose of the study. Each teacher received an incentive of \$200 to each teacher to use for special class activities and the purchase of supplies. Participants who returned a parental consent form gathered in a separate classroom area where the focus group interviews were conducted. They were asked to complete a sociodemographic questionnaire. The second

author was present and, with a co-facilitator, conducted all Los Angeles – based interviews. A trained, bilingual Ph.D. research associate conducted groups in New Jersey. Each focus group interview was digitally recorded and was approximately 60 to 90 minutes in length.

Data Analysis

Four members of the research team – three doctoral-level researchers and one trained research assistant – transcribed the digital recordings of the 25 focus groups. All focus groups conducted in Spanish were translated verbatim. The primary author, a bilingual Mexican American male, and research assistant, a bilingual Puerto Rican female, then implemented back-translation methodology (H. Chen & Boore, 2009). The data were analyzed using grounded theory and constant comparative method that included a process of open, axial, and selective coding. Specifically, subsequent to open coding researchers used the axial process of relating categories to subcategories. Thereafter, an integration process took place, which fostered a refining of the theory (Strauss & Corbin, 1998). The analytic process led to the identification of five emerging themes related to parent-adolescent acculturation discrepancies. QSR International's XSight 2 was used to organize, analyze, and code the data.

Open coding consisted of breaking data into discrete parts or units of analysis with in vivo coding, in which concepts are labeled using the words expressed by participants (e.g., being the translator is hard; Strauss & Corbin, 1998). Axial coding, the second analytical phase, reached a higher level of data conceptualization by creating categories (LaRossa, 2005), allowing for the identification of relationships among categories based on properties and dimensions (e.g., translating in different contexts). The process of selective coding aimed at integrating a theoretical schema of the phenomenon under study (Strauss & Corbin, 1998). Selective coding consisted of identifying the main story underlying the analysis that most accurately describes the participants' experiences (e.g., parent – adolescent acculturation discrepancies and serving as the family translator; Fassinger 2005; LaRossa, 2005). The first and second authors independently coded the data and met to discuss the emerging themes. Codes were discussed until consensus was reached. For example, during the open-coding process, the first author observed emerging themes related to language brokering and mistrust of English in two separate categories. The second author coded them as one phenomena. The first and second author met to discuss this coding discrepancy; they discussed until reaching consensus that these would be coded as separate themes.

Trustworthiness of the Findings

Trustworthiness of the data ensures that research findings accurately describe what participants say without distortion that may result from researchers' biases (Guba & Lincoln, 1989). We established data trustworthiness using credibility, transferability, and dependability (Guba & Lincoln, 1989; Morrow, 2005). To ensure credibility, or rigor in the research process, we employed researcher reflexivity, research debriefers, prolonged engagement with participants, persistent observation in the field, and peer researchers (Morrow, 2005). For example, the second author spent a significant amount of time at data-collection sites. *Transferability* indicates whether, and to what extent, study findings can be generalized to other contexts. To this end, we described the research context, processes, and

participants. For example, data were collected in school- and community-based settings in New Jersey and Los Angeles; participants were recruited from classrooms and gathered in a reserved room to participate in focus group interviews; and the sample consisted of English- and Spanish speaking Hispanic adolescents. We established dependability, the process by which findings are repeatable to the extent possible (Morrow, 2005), by tracking research design and conducting an audit trail to document the research decision-making process. For example, we shared preliminary analysis and an audit trail with the expert panel and refined analysis based on their feedback.

Results

Descriptive Statistics

A descriptive statistics analysis indicated that 42% of focus group participants were recruited from middle school, 35% from high school, and 23% from clinics. The mean age of the sample was 14.8 ($SD = 2.20$) years, and more females (62%) than males (38%) participated in this study. The majority of the sample (52%) reported Mexico as familial country of origin, followed by Guatemala (14%) and Puerto Rico (10%), respectively. The remainder of the sample's familial country of origin included South America and Central American and Caribbean countries including Honduras, El Salvador, Costa Rica, and Ecuador. The majority of participants were foreign born (52%). Furthermore, 90% of participants' mothers and 89% of fathers were foreign born. In all, 60% of participants reported Spanish as their primary language, followed by Spanish/English bilingual (26%) and English (14%). Similarly, 47% of participants reported speaking Spanish at home, followed by speaking Spanish and English (43%) and English only (10%). However, participants reported speaking English with friends (33%) more frequently than Spanish (24%), and speaking both languages (43%) was the most common practice. Of participant parents, fathers were currently employed for 68% of the sample and mothers for 54% of the sample. Demographic information for each specific focus group or individual focus group responses was not calculated for this study. Although this may be a limitation, our intent was to develop an acculturation discrepancy profile across all Latino subgroups and language groups in the sample.

Focus Group Findings

Five categories emerged from the data that compose a theoretical schema describing the adolescents' most relevant experiences regarding parent-adolescent acculturation discrepancies: (a) "Being translator is hard": The family translator as stressful experience; (b) "Family doesn't like you to speak English": Parental and family mistrust of the English language; (c) "My parents don't want me to become more American": Parent-adolescent discrepancies in cultural values; (d) "Some parents are overprotective": Perceptions of overprotective parents; and (e) "The males in my house have more privileges": Perspectives on gender and culture. We describe each theme in detail below.

"Being Translator is Hard": Language Brokering as a Stressful Experience—

Perhaps most salient to the lives of Latino youth participating in this study, and within the context of parent – adolescent acculturation discrepancies, is the experience of serving as

family translator, particularly because many participants' parents had limited English proficiency. A number of participants expressed discomfort about this form of familial role reversal. Many explained that because of their fluency in English, many parents expected them to serve as a translator, especially when the parents' English was limited. For instance one youth explained, "I speak English better than my parents. Most don't know English that well so we have to translate." Participants reflected on the challenges of taking on the role of family translator and the ways in which this role could at times be stressful. In fact, many of the participants described this experience as difficult, uncertain, and creating feelings of nervousness. This was especially true for adolescents whose parents used Spanish words that were "big" or difficult to translate. For example, one youth expressed, "Being translator is hard. Dad used to forget English words ... big words are so hard."

Participants also reflected on contexts where the role of family translator proved more stressful. Specifically, participants expressed that serving as family translators when families need health services or are in other professional or service contexts was even more stressful, relative to other contexts. Participants, for example, shared experiences of not being taken seriously by health professionals during important doctor visits because of their age and youthful appearance. One participant mentioned, "I was ignored by nurses at the hospital because of being young when translating for my mother." Participants reflected on how such experiences created a stressful family environment, particularly because many adolescents resented parents for placing them in those types of situations. For example, one participant shared, "'Going along as a translator, you are put in places like doctors' and lawyers' offices where you should not be. Big words are used ... I used to get nervous.'" Similarly, another participant reflected:

My dad use to take me to, like, cause he didn't speak English, and he would take me and I was supposed to go with the lawyer, like, and they would use like some big words in English that I don't know like what's that. And my dad is like, "I brought you so you could translate!" And I'm like, yeah but those are some big words. I used to get nervous 'cause I would be like oh my God he's gonna get mad, he's gonna get mad!

Participants also shared stressful experiences regarding translation and back-translation, especially in situations where they could not identify words with identical meaning. For example, one participant explained, "There are words in English you don't have in Spanish and words in Spanish you don't have in English." Participants indicated that these experiences led to frustration and stress between adolescents and parents. Adolescents described this process as a systemic process whereby the parent would get "upset" because the adolescent did not know how to best translate, which in turn would upset the adolescent and escalate the situation. One participant explained, "You don't know how to explain or translate and your parents get mad and you get mad."

"Family Doesn't Like You to Speak English": Parental and Family Mistrust of the English Language—One of the most challenging experiences related to parent – adolescent acculturation discrepancies is parents' mistrust of adolescents for speaking English. In addition to serving as the family translator for parents, participants also

described experiencing mistrust from their monolingual Spanish speaking parents when speaking English. Many adolescents described this as a “double-bind” experience, in that they were expected to translate for, and speak English in, contexts that benefited parents, but not in contexts that perhaps may benefit the adolescent. Participants explained that many parents perceived that they were “talking bad about them,” which in turn would create family stress. For example, one participant mentioned, “My parents think that when you’re speaking English in front of them, you are talking bad about them.”

Participants shared that because of their parents’ limited English proficiency and the perception that adolescents were talking bad about them, speaking English often led to a significant amount of mistrust. One participant remarked, “What is difficult is parents not understanding English and mistrusting when English is spoken.” Adolescents reflected on how this mistrust often escalated and manifested as anger. One participant indicated, “Parents get angry when kids speak English.” Another participant elaborated:

My mom says we talk Spanish in the house ’cause she don’t want me to speak English ’cause she, she understands it, but she can’t speak it. She said, “Outside the house you can speak English all you want but right here you talk in Spanish ... I guess she feels bad because she doesn’t understand some of the words. She understands some of it, but not a lot.

Although the adolescents described their parents’ mistrust of English as a general experience, the degree of mistrust varied by context. Specifically, the mistrust was more pronounced in the context of speaking English with peers. Participants expressed experiencing increased mistrust from parents when speaking English with their friends. One youth, for example, expressed, “My family doesn’t like me to speak English with friends. That’s when they really think you are talking about them.”

“My Parents Don’t Want Me to Become More American”: Parent – Adolescent Discrepancies in Cultural Values—Youth often express experiencing stress regarding differences in cultural values, practices, and norms. From the adolescents’ perspective, this stress stems from parents being unfamiliar with U.S. cultural norms, not necessarily the adolescents’ familiarity with their country-of-origin cultural norms. For example, one participant stated, “My parents are not familiar with American norms.” Participants expressed that their parents’ lack of understanding regarding U.S. cultural norms included how they dressed and what music they listened to. These discrepancies in cultural preferences, adolescents shared, resulted in them not feeling understood. One participant mentioned, “Parents do not understand my dress, my music, and my language.”

Not surprisingly, participants expressed that their parents’ lack of understanding of American culture, combined with the adolescents’ desire to adopt some American cultural norms, often led to a clash in perspective and stressful family context. Adolescents shared how their parents’ lack of understanding of American norms and culture led to their parents’ desire for adolescents to maintain country-of-origin cultural values and not become “more American.” One adolescent, for example, stated, “My parents don’t want me to become more American. They want us to stay like they are.” Another participant reflected on this experience and expressed, “Parents want you to maintain your old country customs and

values, and not those of the U.S.” The focus group facilitator asked participants how these experiences affect their relationship with their families.

Facilitator: Do you have any problems with your family about the difference in cultures?

Participant 1: Like generation gaps. Like, my dad will tell me oh, I did this when I was little, I used to do it ... you’re supposed to do it. Things that they did and now I’m supposed to do that.

Participant 2: They think they’re right and I think I’m right, and there’s like a problem right there.

“Some Parents are Overprotective”: Perceptions of Overprotective Parents—

Adolescents in this study repeatedly emphasized that they perceived their parents as overprotective. Participants described this as stressful particularly because of the friction that this form of interaction between adolescents and their parents creates. Specifically, participants shared that having overprotective parents – whether perceived or real – would create arguments in the family. Many adolescents shared that they felt that their parents’ overprotectiveness was because their parents did not want them to “grow up.” For example, one adolescent indicated, “My parents are overprotective. Parents don’t want us to grow up.”

Additionally, adolescents shared the ways in which their parents did not allow them to hang out with friends who, they perceived, had more “freedom.” One participant shared:

Well, I had a friend that she was a person that they gave her a lot of freedom and my mom thought that I should not have that friendship because they gave her a lot of freedom, her mom, and because, because she is this or the other. And that hurts you a lot because you love that friend. How are parents going to take away the right to have friends? Then that hurts a lot because when you have friends, parents want you to have friends. When you have one, they don’t let you, and that is not fair.

Adolescents also shared how they came to perceive their parents as overprotective, and how they learned to cope with that challenge. Participants expressed that their parents’ overprotectiveness was a way of showing adolescents that their parents cared for them, as well as demonstrating that they cared about, and wanted adolescents to maintain, country-of-origin values and customs. One participant expressed, “My parents are overprotective. They do it because they care, but you have to learn how to deal with it.”

“The Males in My House Have More Privileges”: Perspectives on Gender Roles—Latino adolescents in this study reflected on how they experience gender-role inequities within the family context. Participants attributed these inequities to *machismo* in their family and expressed that females had many restrictions, relative to the boys and men in the family. One participant, for example, mentioned explicitly: “There is machismo in my family. There are gender-role restrictions.”

Participants also shared the ways in which gender-role inequities and male privilege challenge their lives. One participant, for example, indicated, “The males in my house have

more privileges.” Adolescents described how this experience left them feeling as though they had no voice. Female adolescent participants reported as particularly stressful that did not have the privilege of going out as freely as their male siblings. One participant elaborated on this experience, “There is sexism. The boys are favored. You have no voice in your house. You only get to go out if you are a male.”

Discussion

Researchers have examined the effects of acculturation gaps on youth in different populations, including Korean (Kim & Park, 2011), Chinese (Hall & Sham, 2007; Hwang et al., 2010; Juang et al., 2012), and Vietnamese immigrants in the United States (Ho & Birman, 2010; Tse, 1996). Yet the research and practice literature on Latino populations remains underdeveloped (Martinez, McClure, & Eddy, 2009). Even fewer studies have examined adolescent perspectives on intrafamilial stressors, including parent – adolescent acculturation discrepancies, using qualitative methodologies (Smokowski & Bacallao, 2010). Study findings indicate that adolescents experience significant culturally based intrafamilial stressors. For example, participants reflected on parent – adolescent acculturation discrepancies and stressors related to language brokering, parental mistrust of the English language, discrepancies in cultural values and beliefs, parenting practices, and gender-role conflict. Understanding these experiences may be particularly important, as intrafamilial stressors have demonstrated an effect on family functioning, which in turn may affect adolescent behavioral and mental health outcomes (Martinez et al., 2009).

Findings indicate that language brokering within the context of parent – adolescent acculturation discrepancies is a salient theme identified by Latino adolescents. Although other research shows that serving as the language broker can build resilience, growth, and maturity (Love & Buriel, 2007; Smokowski & Bacallao, 2010; Weisskirch, 2005), participants in this study reported this experience as a difficult and stressful task. These findings are in line with previous researchers who have found that language brokering among youth may negatively affect family functioning and lead to increased behavioral problems (Martinez et al., 2009; Umaña-Taylor, 2003; Weisskirch & Alva, 2002). For example, researchers have shown that high level of language brokering can increase stress among immigrant families (Martinez et al., 2009) and may be exacerbated when Latino adolescents perceive brokering as a burden (Kam & Lazarevic, 2013). Present findings are consistent with previous research showing that language brokering in medical context is particularly stressful for Latino adolescents (Corona et al., 2012) and expand on these findings by examining these processes in a larger heterogeneous sample of Latino adolescents, including middle and high-school age adolescents.

Study findings highlight the nuances and complexities of parent – adolescent acculturation discrepancies, particularly as they relate to language. In contrast to serving as a language broker, participants shared the ways in which they experienced parental mistrust for speaking English. Although previous studies have demonstrated parental mistrust toward adolescents brokering correctly (Straits, 2010), current findings expand on this research by demonstrating the ways in which Latino youth experience parental mistrust toward them for speaking English in general and not necessarily in a language-brokering context. From a

family communication perspective, family functioning (Fitzpatrick & Ritchie, 1992), including the support of family members, takes place primarily through verbal and nonverbal communication. Effective family communication can be a difficult task for all families in general; when coupled with acculturation discrepancies (Schwartz et al., 2010), these challenges may be more pronounced among Latino youth and their families.

Participants reflected on their parents' desire for them to maintain country-of-origin values and customs and not become "more American." These discrepancies in cultural preferences may affect adolescent stress and family context (Smokowski & Bacallao, 2010). Current Latino-specific efficacious interventions targeting adolescent problem behavior outcomes focus on, among other things, familiarizing immigrant parents to U.S. cultural norms (e.g., Cordova et al., 2012; Prado et al., 2012). Equally important, interventions may include models aimed at familiarizing adolescents with culture-of-origin norms.

Adolescents shared the ways in which they perceive their parents to be overprotective. From a developmental perspective (Kellam & Van Horn, 1997), many adolescents in the United States perceive parents as overprotective; however, this may be more pronounced in parent – adolescent dyads that involve acculturation discrepancies (Cervantes & Cordova, 2011; Smokowski & Bacallao, 2010). For example, parents who experience their child acculturating at a pace that far exceeds theirs may react by becoming overprotective. In fact, previous researchers have indicated that many immigrant youth, including Asian American (Lowinger & Kwok, 2001) and Asian Indian (Varghese & Jenkins, 2009) youth, perceive their parents as overprotective due, in part, to acculturation discrepancies. This study expands on these findings by examining this process in a group of Latino youth.

Study Implications

The salient intrafamilial stressors identified by a heterogeneous sample of Latino youth in this study have important implications for future research. Specifically, future research should include parents' perspectives with respect to parent – adolescent acculturation discrepancies, developing a fuller, systemic understanding of this underdeveloped phenomenon. Additionally, research is needed to better understand the moderating and mediating effects of intrafamilial stressors on Latino adolescent health and mental health outcomes. For example, though some researchers have shown acculturation discrepancies to moderate (Bamacá-Colbert & Gayles, 2010) and mediate health and mental health outcomes through family functioning (Cordova, Huang, et al., 2014), this line of research remains underdeveloped. Future research should examine the mediating and moderating role of acculturation discrepancies on adolescent health and mental outcomes in a longitudinal design.

Our findings do support the hypothesis that the construct of parent – child acculturation discrepancies should be part of any theoretical consideration or model. From a theoretical perspective, findings support developmental theories that suggest that many of the stressful experiences participants identified in this study could be seen as tensions that are typical of the individuation process (McGoldrick & Carter, 2003). These processes, however, may be exacerbated by acculturation discrepancies (e.g., parent overprotectiveness, mistrust of English use with peers), which may reflect parents' reluctance to adapt to changes in their

adolescents' connectedness, roles, and identities (Falicov, 2003). Additionally, findings support the idea that acculturation discrepancies generate atypical tensions (e.g., stress resulting from language brokering). Study findings indicate that sources of parent – child acculturation discrepancies have at their basis micro- and macrosystem cultural contexts such as language demands, values orientation, and traditional versus contemporary parent control issues, among others, which could be incorporated in theoretical frameworks when studying Latino populations.

Although scholars have highlighted the ways in which family is a central and salient theme in Latino populations, family is important across all cultures. It should not be surprising then that family functioning has been identified as a key mechanism for effective interventions in preventing adolescent problem behaviors (Sandler, Schoenfelder, Wolchik, & McKinnon, 2011) in several different ethnic/racial groups, including non-Latino White, African American, and Latino populations (Cordova et al., 2012, Milburn, Iribarren, & Duan, 2012; Spoth, Trudeau, Gyll, & Shin, 2012). However, many interventions take a general approach to improving family functioning and have not focused on ameliorating culturally based intrafamilial stressors (Cervantes et al., 2011). That is, scholars and practitioners have approached improving family functioning, including family communication and bonding, by demonstrating the family skillsets that may be universal across all cultures (e.g., using “I” statements when communicating). Equally important is to consider culturally specific intrafamilial stressors that may mediate these processes. Thus, the question still remains: “What culturally specific modules could be included in preventive interventions targeting family functioning?” Findings from this study suggest that perhaps interventions targeting those culturally specific stressors that may affect family functioning – including a parent’s desire for their adolescent to maintain culture-of-origin values – could be one appropriate way to work toward developing optimally efficacious preventive interventions. For example, some researchers have shown that adolescents’ fluency in the parents’ native language may improve family relationships by allowing for effective family communication among Vietnamese immigrant families (Ho & Birman, 2010). Future research should examine whether and to what extent these findings extend to Latino populations over time.

From a practice-based perspective, findings indicate the need for clinicians to remain attentive to the effects that cultural enrichment may have on healthy development in Latino immigrant clients. Public policy is often geared toward rapid acculturation of immigrant children and their families, yet biculturalism and bilingualism can play an important role in positive developmental outcomes. Known as the “immigrant paradox,” researchers have shown that more acculturated children, relative to their immigrant parents, may experience negative developmental outcomes (Garcia Coll & Marks, 2011). Several factors, including parent – adolescent acculturation discrepancies, have been identified as decisive in determining the health and mental health outcomes of children of immigrants (Rumbaut & Portes, 2001). Thus, clinical practice aimed at cultural enrichment may reduce intrafamilial stressors experienced by Latino adolescents and their families by remaining attentive to differences in cultural identities, practices and beliefs, while also highlighting strengths in Latino and American cultures.

Study findings have important policy implications. With the recent influx of immigrant populations, combined with the rapid and continual growth of the Latino population (U.S. Census Bureau, 2012), the landscape and diversity of the United States has changed, including an increase in limited English speakers. Indeed, this increase in limited English populations has resulted in legal mandates, including a translator, on health care institutions and practitioners to ensure equal access to treatment and services for this vulnerable population. Unfortunately, researchers have indicated that many health care institutions and practitioners are often unclear about their legal obligations to provide language services to limited English speaking populations (A. H. Chen, Youdelman, & Brooks, 2007). Equally important is for limited English speaking populations to understand their rights with respect to having a language broker in medical contexts. Indeed, youth in this study shared the ways in which they carried the burden of having to serve as the language broker in contexts such as medical and legal settings. From a policy perspective, there remains the need to (a) ensure sustainability of language assistance services aimed at achieving language service equity and narrow institutional variability in services offered, (b) increase the medical interpreter workforce, (c) increase medical institutions' and practitioners' knowledge with respect to the negative effects of language barriers on the mental and physical health of people in medical settings, and (d) increase patients' knowledge with respect to their rights to an interpreter (A. H. Chen et al., 2007). Relatively little is known with respect to Latinos' experiences of language brokering barriers in medical settings and future research in this area would help in this regard.

Study Limitations

The authors acknowledge several important study limitations that merit attention. Although the sample consisted of Latino adolescents from different cultural backgrounds, the sample is not representative of all Latino adolescent populations in the United States, and thus findings may not be generalized to all Latino adolescents. Our data were not analyzed specifically for any one ethnic group of youth, nor did the authors attempt to control for differences in the acculturation discrepancies found among English versus Spanish speakers. Given the inability to match participants with individual, verbatim responses, it was not possible to determine which specific comments were from immigrant, second or third, or later generation adolescents. These more detailed analyses are better informed by additional quantitative studies on stress, using much larger samples that allow for group comparisons. Findings from this study must only be taken as generalized results for all Latino groups represented in the sample without specific findings to any one ethnic, language, or nativity group. Further, though not a methodological limitation, qualitative methodologies are not able to determine causality. Thus, future research should examine the effect of parent – adolescent acculturation discrepancies on adolescent problem behaviors and the extent to which these effects are mediated by acculturative stress and family functioning. A limitation of this study consisted of the exclusive focus on challenges reported by youth, particularly because the study design did not allow for the reporting of strengths and resources experienced by this large sample.

In summary, parent – adolescent acculturation discrepancies can have a profound effect on Latino adolescents and their families. Findings suggest that adolescents experience

significant parent – adolescent acculturation discrepancies stressors. Identifying salient stressors related to parent – adolescent acculturation discrepancies may be useful in informing best-practice approaches to preventing and reducing health disparities in Latino adolescent populations.

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