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THE SOCIAL WORK FORUM

Special Issue on Social Work Practice with Latino Children and Families

Volumes 42/43

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From the Guest Editor

We are proud to bring you this collection of articles on Social Work Practice with Latino Children and Families. While some of the articles focus on the kinds of problems social workers encounter in their work with troubled families, such as childhood sexual abuse, others focus on sources of strength and identity, such as Latina leaders and folk healing practices. Within these articles, we believe readers will find reflections of the state of Latino children and families in the U.S. However, Latino realities are far too diverse to be adequately represented in this special issue. For instance, with the exception of the Kenny article on childhood sexual abuse prevention, all the other articles selected focus on U.S. Latinos of Mexican descent.

The diverse Latino population in the U.S. is growing at a rapid pace. While in 1900 there were only half a million people in the U.S. who might be called Latinos, today there are more than 35 million Latinos in the U.S. which makes the U.S. the second largest Latino country in the world. The Latino population growth is attributable to immigration/migration patterns, relatively high birth rates, social and economic upheaval in many Latin American countries including Mexico and Central America, and the impact of globalization on foreign markets. According to the Pew Hispanic Research Center, if current trends continue, the population of the United States will rise to 438 million in 2050, from 296 million in 2005, and 82 percent of the increase will be due to immigrants arriving from 2005 to 2050 and their U.S.-born descendants. This report further states that the Latino/Hispanic population, already the largest and fastest growing minority group in the U.S., will triple in size to 29 percent of the U.S. population by 2050. Social workers from all backgrounds and regions of the U.S. will need to learn culturally competent ways of working successfully with Latino colleagues, clients and communities.

It is a historic moment for Latinos in the U.S. as a Puerto Rican woman, Judge Sonia Sotomayor, has been appointed to the U.S. Supreme Court. This is a compelling reminder of the potential of each and every Latino born in the U.S. However, poverty rates continue to be unconscionably high with more than one fifth of Latino children living in poverty. In addition, punitive immigration practices, biases and prejudice contribute to Latino citizens or permanent residents living in fear of harassment and discrimination based on their last name, preferred language, skin color and physical appearance. Clearly, what it means to be "Latino" in the U.S., and the kinds of help one might need

from a social worker, vary greatly depending on the level of acculturation, immigration status, and social class.

We believe this special issue addresses some of these factors. We hope you will enjoy the articles included and find them useful. We welcome your comments and reactions directly to the authors or to the *Forum*.

Carmen Ortiz Hendricks, DSW, Professor and Associate Dean
Yeshiva University Wurzweiler School of Social Work

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Acculturation Gaps and Problem Behaviors among U.S. Southwestern Mexican Youth

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Blythe FitzHarris, Ph.D.

David Becerra, Ph.D.

Abstract

This article presents the findings of a study examining acculturation differences between adolescents and their mothers within Mexican immigrant families in the border region of the Southwest U.S. The main hypotheses of the study was that youth in mother-child dyads with mismatched acculturation strategies would report higher levels of externalizing problem behaviors than other adolescents, and that this relationship would be mediated by family conflict, acculturation conflict, family cohesion, and sense of familism.

The participants formed 142 dyads (N=284) of Mexican heritage mothers and their adolescent children. Regression analysis indicated that a gap or mismatch in acculturation strategies was associated with more externalizing youth problem behaviors.

Compared to the dyads where both mother and child were bicultural, only youth with more acculturated mothers demonstrated increased rates of externalizing problem behaviors. Family conflict and acculturation conflict mediated the relationship between acculturation gaps and externalizing behaviors. Implications for family-centered interventions as well as future research and policy implications are discussed.

Keywords: Adolescent and parent communication; Ethnic minority families; Latino families; Acculturation gap; Familism

Introduction

Children in immigrant families are the fastest growing group of children in the U.S., accounting for one-fourth of all children in the nation (Hernandez, Denton & Macartney, 2008). In Southwest border regions of the U.S., children of Mexican heritage increasingly represent a numerical majority in their schools and neighborhoods (Yabiku, et al., 2007). Many of these children embrace mainstream U.S values and often experience a clash of values with their immigrant or less acculturated parents, which can lead to family conflict and problems in family relationships (Choi, He, & Harachi, 2008). Due to the number of children affected, it is important to understand better how these cultural gaps affect the overall health and mental health of family members so that family interventions can be developed to prevent the erosion of protective factors from family and culture of origin, thereby reducing the risks associated with parent-child acculturation gaps.

Acculturation research has found an association between high levels of acculturation and adolescent externalizing problem behaviors, such as conduct problems and delinquency (Gonzalez, et al., 2008; Smokowski, Rose, & Bacallao, 2008). Acculturation gaps between parents and children can increase family conflict, which may increase the likelihood that youth will engage in deviant or externalizing problem behaviors (Mogro-Wilson, 2008; Szapocznik & Kurtines, 1993).

Acculturation gaps in immigrant families in the U.S. and their impact on family interactions and youth outcomes have been operationalized predominantly as a simple difference in degree of acculturation between parents and adolescents (Birman, 2006). To expand existing research, this study investigated the association between family acculturation gaps and youth self-reported externalizing problems using an expanded range of parent-child acculturation categories groups, and controlling for levels of family conflict.

Acculturation

Acculturation is a process of cultural adaptation characterized by changes in different psychosocial dimensions of individuals, families, and communities. It is triggered by intercultural contact which produces changes in attitudes, norms, behaviors, knowledge and identity (Berry, 2007). Acculturation is complex and multifaceted, and individuals may vary greatly in the rate and extent that they adopt the language, traditions, values, norms, and behaviors of a culture different than their culture of origin (Berry & Kim, 1988).

Acculturation is also multidirectional. As interactions among cultures may lead ethnic minority individuals to adopt cultural majority values, members of majority cultures may also acculturate into minority cultures, and individuals may acculturate from one minority culture into another. Individuals may also choose to maintain or regain a connection with their cultural heritage through enculturation, an effort to have a strong identification with a real and sometimes idealized culture of origin (Marsiglia & Kulis, 2009). Immigrant youth navigate these complex cultural processes while they transition from childhood into adolescence and then adulthood. Hence, their regular developmental transitions are enriched and sometimes further stressed by acculturation experiences.

Theoretical Approach

To approach the acculturation phenomenon from a culturally-specific perspective, this study was guided by the eco-developmental approach (Szapocznik & Coatsworth, 1999) and Berry's (2007) typology of four acculturation strategies. Berry's schema is based on the degree of affiliation with origin and destination cultures: Assimilation (low on origin, high on destination), Separation/Withdrawal (high on origin, low on destination), Alienation (low on both), and Bicultural/Integration (high on both). In addition to Berry's four acculturation strategies, a fifth strategy called Moderately Bicultural was added because recent research finds that a substantial proportion of Latino youth fall into this category (Coatsworth, et al., 2005). *Moderately*

Bicultural individuals have affinities for both Latino and mainstream American cultures but not at the very high levels suggested by Berry's Bicultural/Integration category. By utilizing this strategy, an expanded version of existing acculturation typologies (Berry, 2007) was possible, which addresses the unique characteristics of the fluid family acculturative environment present in border regions.

The eco-developmental approach (Szapocznik & Coatsworth, 1999) draws from Bronfenbrenner's ecological perspective (1979) and provides a multidimensional framework to understand the effects of acculturation on Latino immigrant adolescents and their families. The approach stresses the interrelatedness of social environments and how these interactions produce behavioral outcomes (Szapocznik & Coatsworth, 1999). According to eco-developmental theory, acculturation creates a risk for Latino families at the macro system level, where differences in Latino and mainstream American culture may marginalize Latino immigrants or create acculturation differences between youth and their parents which may impact available social supports of parents, erode cultural protective factors, or create conflict (Szapocznik & Coatsworth, 1999). Due to the multidimensionality and variation of the acculturation process, it is important to consider the interrelatedness of such risk and protective factors that are culturally-based within Latino families.

Protective Factors: Familism and Family Cohesion

Culture can be a source of strength and moderate the potential negative impacts of acculturation on Latino families (Marsiglia, Nieri, & Becerra, 2008). Central to Mexican heritage and other Latino families is the concept of *familism*, the importance of family closeness, preserving good relationships, and contributing to each other's well being (Marsiglia, Kulis, Wagstaff, Elek, & Dran, 2005; Santisteban, Muir-Malcolm, Mitrani, & Szapocznik, 2002).

Similarly, family cohesion is an important protective factor against deviant and problem behaviors among adolescents. Cohesion is the degree of connection between family members and the family unit. Less acculturated and more acculturated Latino families report higher cohesion, compared to families that are more acculturated to mainstream U.S. culture, or compared to bicultural families (Miranda, Estrada, & Firpo-Jimenez, 2000). Stronger adherence to traditional cultural beliefs concerning the prescribed roles of parent and child appears to create stronger emotional bonds among family members.

Potential Risk Factors: Acculturation and Family Conflict

In Mexican and other immigrant families, youth tend to acculturate at a faster rate than their parents due to environmental contexts in which they settle (Birman & Trickett, 2001; Szapocznik & Kurtines, 1993). Adults, on the other hand, tend to acculturate more slowly and are more likely to retain and pass on to their children the values of the culture of origin (Phinney & Vedder, 2006). As a result of the different pace of acculturation, an acculturation gap—where youth and their parent(s) are in different stages of acculturation—may develop.

This gap can lead to acculturation conflict, which emerges when parents and children have different cultural compasses or values. This acculturation conflict can be a stressor for family life because it exacerbates the natural generational gap that exists between adolescents and their parents (Choi et al., 2008). In Mexican heritage families, acculturation conflict can erode the protective effects of *familism* and family cohesion against deviant adolescent behaviors (Gil, Vega, & Dimas, 1994). The stress caused by differences in the level of acculturation between parents and children can negatively affect parenting practices, the relationship between parent and child, and healthy youth development (Martinez, 2006).

Migration often adds to family stress because of the loss of social support in raising children. Immigration may lead to extended periods where parents are separated both from each other and from the larger extended family that provides assistance in child rearing. In addition, immigrant parents in the U.S. tend to spend long hours at work and away from their children (Pantin, Schwartz, Sullivan, Coatsworth, & Szapocnik, 2003). As youth acculturate to dominant U.S. values and affiliate less with their culture of origin, they report reduced family pride and begin to view parental involvement as controlling and authoritarian rather than a product of their parents' desire to be involved and to be protective (Gil, et al., 1994; Lindahl & Malik, 1999).

Higher levels of parental acculturation influence children's development and can predict negative outcomes (Vega, Gil, & Wagner, 1998). Low parental acculturation and low linguistic acculturation have also been studied as possible risks factors. Adults learn English more slowly than children because children are more likely to be exposed to English in schools and through the media. As immigrant children acculturate and English becomes their preferred language, protective family ties and effective parental communication and monitoring can erode (Marsiglia, Miles, Dustman, & Sills, 2002). In families where the parents rely on the youth for communication in English, traditional roles are challenged in that the parents are now dependent on their child for certain social and or operational interactions. This role reversal could impact the child – parent relationship and overall family functioning.

Family Conflict

Family conflict is defined as the emergence of frequent disagreements, fights, arguments, and anger between parents and children (Barber & Delfabro, 2000; Choi, et al., 2008). Family conflict increases the likelihood of emotional and behavioral problems across different ethnic groups (Ary et al., 1999; Szapocznik & Kurtines, 1993). Immigrant families may experience increased family conflict as children and parents acculturate and they acquire different values and behaviors (Birman, 2006; Szapocznick & Kurtines, 1993). Immigrant families appear to face greater value discrepancies than non-immigrant families. Large parent-child value differences have been reported when immigrant parents had a stronger affiliation to their culture of origin and the child was either assimilated or integrated within the host culture (Phinney & Veddar, 2006).

Previous studies with immigrant groups from various cultures have shown mixed results in supporting an association between parent-child acculturation gaps and family conflict. Some studies with Mexican-heritage samples found that family conflict and separation from parents mediate the relationship between acculturation processes and youth outcomes of aggression and deviant behavior (McQueen, Getz, & Bray, 2003). Other studies with similar populations found that parent-child dyads with a larger acculturation gap as measured by linguistic acculturation were not more likely to report family conflict (Pasch et al., 2006).

Acculturation Gaps and Youth Problem Behavior

Research about the experience of Mexican American youth and acculturation gaps is also inconclusive regarding externalizing problem behaviors. In some cases no connection between acculturation gaps and youth negative outcomes such as school misconduct or sexual behaviors has been reported (Pasch, et al., 2006). While similar findings were reported in a longitudinal study with preadolescents, the child's perception of the quality of parent child relationship was found to moderate the association between acculturation gaps and reported youth negative behaviors (Schofield, Kim, Parke, & Coltrane, 2008). Findings with high risk Mexican American families did not support the acculturation gap-distress hypothesis but identified an unexpected group of parents who were more aligned with American culture than their at risk children (Lau et al., 2005).

Acculturation gap research is growing and diversifying its conceptual models but the assumption that acculturation differences between youth and their parent put children at greater risk for externalizing problems continues to be broadly accepted. A further assumption is that children are generally more acculturated to the host culture than their parents (Birman, 2006). In borderland regions these two assumptions need further exploration as the proximity to Mexico, the historical Mexican presence in the region, circular migration, and the constant influx of new immigrants may influence these processes in unique ways.

The ability of youth to incorporate both the host culture and the culture of origin appears to moderate intergenerational conflict (Miranda, Estrada, & Firoop-Jimenez, 2000). To better understand the complex ways that acculturation gaps may impact youth in Mexican immigrant families, this study evaluated the effects of acculturation differences between Mexican heritage mothers and adolescents using the matched / mismatched acculturation style method of previous studies plus a modified bicultural scale (Coatsworth, et al, 2005). This modified scale represents a fuller range of individual mother and child acculturation strategies so that mother-child dyads can be explored based on an expanded set of Berry's (1997) acculturation strategies: Separated, Alienated, Moderately Bicultural, Strongly Bicultural and Assimilated. This approach also allows for the exploration of children and mothers' personal identity and their matching or mismatched cultural identities and how cultural conflict could be

associated with problem behaviors and other health outcomes (Schwartz, Zamboanga, & Weisskirch, 2008).

From an eco-developmental perspective (Coatsworth, et al, 2005) it was hypothesized that adolescents more acculturated than their mothers will report a higher incidence of externalizing problem behaviors than adolescents who are bicultural and have bicultural mothers (either strong or moderate biculturalism). Family cohesion, familism and family conflict were treated as mediators between the acculturation mismatched mother-adolescent dyads and externalizing problem behaviors. It was further hypothesized that higher family cohesion and familism will decrease the incidence of externalizing problem behaviors among acculturating youth. Conversely higher family conflict and acculturation conflict will increase the likelihood of externalizing problem behaviors.

Methodology

Sample

This study uses data from a non-probability sample, the southwest component of the Latino Acculturation and Health Project, which examined acculturation and health outcomes. Data were drawn from the first, or baseline survey. The participants were 142 dyads of Mexican heritage mothers and adolescents, recruited in 2005 from ESL classes, community centers, local churches and community fairs in a large metropolitan area of the southwest U.S. Both the mother and adolescent in each dyad were interviewed separately at home. The university's Institutional Review Board evaluated and approved the study's protocol and its bilingual measures.

Measures

Participants self-identified their gender, age, time residing in the U.S., country of birth, and education. Gender was coded 0 for males and 1 for female adolescents. The education level for the mothers was skewed toward low levels of formal education, and thus was recoded into a dichotomous variable: 1 (less than a high school diploma) and 2 (high school diploma or higher). Academic achievement for the adolescents was measured by their self reported average grades in school. The original six response options were recoded into a dichotomous variable: 0 (other), 1 (mostly A's and B's).

Adolescent problem behaviors were assessed through the adolescents' reports on the Youth Self Report (YSR) (Achenbach, & Rescorla, 2001). The YSR measures of adolescent problem behaviors produced acceptably reliable scales for externalizing problems ($\alpha = .72$), which is a global measure of problems involving conflicts with others. The subscales of externalizing behaviors were also examined: aggressive behavior ($\alpha = .84$), a 17 item scale measuring physical and verbal aggression; conduct problems ($\alpha = .65$), a 15 item scale measuring lying, stealing, running away, setting fires, skipping school, threatening others, and lack of remorse for negative behaviors; oppositional defiant ($\alpha = .66$), a 5 item scale measuring arguing and disobeying; and rule breaking ($\alpha = .71$), a 15 item scale measuring adherence to rules in various settings.

Acculturation conflict within the family was measured using a 4 item scale (Vega, Alderete, Kolody, & Aguilar-Gaxiola, 1998) that assesses family problems caused by the youth's choice of American values and norms over the values and norms of their family's culture of origin, such as "How often have you had problems with your family because you prefer American customs?" ($\alpha = .86$). To measure family conflict more generally apart from issues specifically related to acculturation, a 15 item scale was employed (Robin & Foster, 1989) that gauges family fights and lack of understanding among family members, such as "At least three times a week we get angry at each other" ($\alpha = .65$).

Familismo (familism), was measured with a 6 item scale used in other studies of Latinos (Gil, et al., 2000) and found to be reliable in this sample ($\alpha = .86$). An example item in the familism scale is "Family members feel loyal to the family." The family cohesiveness scale (Olsen, 1991) includes 10 items that measure family bonding, how well they know each other, and how much they like spending time together ($\alpha = .89$). An example cohesiveness item is, "Family members are supportive during difficult times."

Acculturation was measured with the Bicultural Involvement Questionnaire (BIQ) (Szapocznik, Kurtines, & Fernandez, 1980). The BIQ measures the level of comfort with Latino and U.S. cultures in terms of language use, food, media consumption and cultural traditions. The BIQ *Hispanicism* scale has 20 items that are summed to indicate level of socialization to and affinity for a Latino way of life, and the *Americanism* scale has 20 items indicating socialization into and affinity for an Anglo-American way of life. Scores on the *Hispanicism* and *Americanism* scales were divided along the thresholds suggested by Coatsworth et al. (2005) to place each participating adolescent and mother into one of five acculturation groups: Alienated (low on both scales), Separated (high on Hispanicism, low on Americanism), Moderately Bicultural (moderately high on both), Strongly Bicultural (very high on both), and Assimilated (low on Hispanicism, high on Americanism). Rather than assuming a single underlying acculturation continuum, these groups represent a set of theoretically derived acculturation strategies (Berry, 2007).

Previous studies have measured the acculturation "gap" between parents and their children by subtracting the parent's from the child's overall acculturation score (Birman, 2006; Martinez, 2006). Problems with this approach include the confounding of distinct acculturation strategies for parent-child dyads that do not differ in acculturation (e.g., highly acculturated dyads are equated with highly unacculturated ones), and the need to simplify acculturation to a single continuum so that global scores for parent and child can be contrasted. Instead, this study created an acculturation gap typology based on the joint placement of adolescents and parents into the five theoretically meaningful acculturation groups. An advantage of this approach is that the large numbers of moderately bicultural respondents were identified.

TABLE 1

Mother and Adolescent Joint Acculturation Status

MOTHER

	Alienated	Separated	Moderately Bicultural	Strongly Bicultural	Assimilated	Mother Total (%)
Alienated	0	0	1	0	0	1 (0.7%)
Separated	0	15	5	0	0	20 (14.1%)
Moderately Bicultural	1	26	23	4	5	59 (41%)
Strongly Bicultural	0	19	19	18	0	56 (39.4%)
Assimilated	0	3	2	1	0	6 (4.2%)
Adolescent Total (%)	1 (0.7%)	63 (44.4%)	50 (35.2%)	23 (16.2%)	5 (3.5%)	142 (100%)

Table 1 presents a cross-tabulation of the adolescent-by-mother placements into acculturation groups. Among both mothers and adolescents, the most common acculturation category was Moderately Bicultural, which described 35% of the mothers and 42% of the adolescents. An additional 16% of the mothers and 39% of the adolescents were Strongly Bicultural. Thus more than half the parents and four-fifths of the adolescents were moderately or strongly bicultural. Only one other acculturation category, Separated, described substantial proportions of respondents, including 44% of the mothers and 14% of the adolescents. Four percent of mothers and of adolescents were Assimilated, and less than one percent of each was Alienated.

As indicators of mother-adolescent differences and similarities in acculturation, the dyads were then assigned to one of four groups based on their joint placements in the five acculturation categories: *Both Mother and Adolescent Bicultural* (both mothers and adolescents were Moderately Bicultural or Strongly Bicultural; N=64 dyads); *Both Mother and Adolescent Separated* (N=15 dyads); *Adolescent More Acculturated than Mother* (the adolescents were Assimilated and the mother was not, or the adolescents were Moderately or Strongly Bicultural and the mothers were in the Alienated or Separated groups; N=52 dyads); *Mother More Acculturated Than Adolescent* (the mothers were

Assimilated and the adolescent was not, or the mothers were Moderately Bicultural and the adolescents were in the Alienated or Separated groups; N=11 dyads). There were no dyads where mothers and adolescents were both Assimilated. Thus over half the mothers and adolescents shared the same acculturation status, mostly when both were moderately or strongly bicultural. In dyads differing in acculturation, the adolescent was usually the more acculturated (assimilated or bicultural when mother was not).

Analyses

The analysis tested whether acculturation gaps between mothers and adolescents are associated with adolescent self reports of externalizing problem behaviors, including aggression, conduct problems, oppositional defiance, and rule breaking. Bivariate relationships with the outcome variables were explored through correlations. Two sets of multivariate ordinary least square regression models were estimated. The first model included as predictors of problem behaviors a set of dummy variables representing the four joint parent-child acculturation categories with *Both Bicultural*, serving as the reference group. All models included controls for the adolescent's gender, age, school grades, time in the U.S., and the mother's education. In order to determine if the effects of mother-adolescent acculturation gaps on youth problem behaviors were attributable to certain family and social network dynamics, a second set of models added family cohesiveness, familism, family conflict, and acculturation conflict. A subsequent test of mediation analysis was conducted using the Sobel test.

TABLE 2

Descriptive Statistics

	N	Mean	Standard Deviation	Range
<u>Outcomes</u>				
YSR Externalizing Behavior	142	11.96	7.31	1 – 37
YSR Aggressive Behavior	142	9.18	5.14	0 – 28
YSR Oppositional Defiant	142	2.49	1.83	0 – 8
YSR Conduct Problems	142	3.58	2.83	0 – 13
YSR Rule Breaking	142	4.44	2.93	0 – 14
<u>Acculturation Scales</u>				
Adolescent BIQ Hispanicism	142	3.30	0.72	1 – 4
Adolescent BIQ Americanism	142	2.91	0.83	1 – 4
Mother BIQ Hispanicism	142	3.41	0.70	1 – 4
Mother BIQ Americanism	142	2.18	0.91	1 – 4
<u>Joint Mother-Adolescent Acculturation Dummy Variables</u>				
Both “Separated”	142	0.11	0.31	0 – 1
Mother More Acculturated than Adolescent	142	0.08	0.28	0 – 1
Adolescent More Acculturated than Mother	142	0.37	0.48	0 – 1
Both Moderately or Highly Acculturated (Reference)	142	0.45	0.56	0 – 1
<u>Hypothesized Mediators</u>				
Family Cohesiveness	142	37.21	8.14	14 – 50
Familism	142	20.12	3.20	9 – 24
Family Conflict	142	3.47	3.83	0 – 15
Acculturation Conflict	141	7.23	3.12	4 – 17
<u>Controls and Sample Demographics</u>				
Adolescent Gender (Male=0; Female=1)	142	0.62	0.49	0 – 1
Adolescent Age (years)	141	15.53	1.24	13 – 18
Adolescent School Grades (0=Other; 1=Mostly As and Bs)	140	0.62	0.48	0 – 1
Adolescent Time in U.S.	141	11.50	5.36	0.2 – 18
Adolescent Born Outside USA (0=No, Yes=1)	142	0.44	0.56	0 – 1
Mother’s Education (0=<H.S.; 1=H.S.)	142	0.34	0.47	0 – 1
Mother’s Age (years)	141	39.80	6.65	24 – 60
Mother’s Time in U.S.	141	16.98	12.60	0.3 – 60
Mother Born Outside USA (0=No, 1=Yes)	142	0.87	0.34	0 – 1

Results

Table 2 presents descriptive statistics for variables used in analysis, the acculturation groups, and demographic descriptors of the sample. Means for the outcome variables were far below the recommended YSR thresholds for classifying deviant behaviors as meeting clinical or borderline levels (Achenbach & Rescorla, 2001). The percentage of adolescents in the sample in the clinical range was 9% for externalizing problems and aggressive behavior, 7% for oppositional defiant behavior, and 11% for conduct problems. Another 7% of adolescents were in the borderline range for each of these problem behaviors. For rule breaking there were no adolescents in the borderline or the clinical range.

Means for the BIQ scales indicated that mothers were generally less acculturated than their adolescent child: the mothers reported somewhat higher *Hispanicism* but lower *Americanism* scores than their adolescent did. As reported above, mother-adolescent dyads most commonly were both bicultural (45%) or the adolescent was more acculturated than the mother (37%), with smaller numbers of dyads where both were relatively unacculturated or “separated” (11%), and a small group where mother was more acculturated than adolescent (8%).

Means on hypothesized mediating variables tended to be high—in the top quartile of the range—for family cohesiveness and familism, low for general family conflict, but in the mid-range for acculturation specific parent-child conflict.

Bivariate correlations between outcome and predictor variables indicated that the strongest relationships were with the hypothesized mediator variables. Family conflict ($r = .41$ to $.56$) and acculturation conflict ($r = .18$ to $.23$) were directly correlated with all of the problem behavior scales, while family cohesiveness and familism were inversely correlated ($r = -.20$ to $-.43$) with all outcomes. The correlations among these mediators were notable, with the largest being an $r = .60$ correlation between cohesiveness and familism, and $r = -.58$ between family conflict and familism. Due to the substantial correlations among the hypothesized mediators collinearity diagnostics were considered in all multivariate regression models, and no problematic levels of collinearity were found (all VIFs < 1.8). The dyadic acculturation gap measures were not strongly correlated with the outcomes. The largest relationship was with the dummy variable for dyads where parents were more acculturated than adolescents: here there were modest, marginally significant ($p < .10$) correlations with the outcomes ($r = .06$ to $.16$).

Table 3

Predictors of YSR Externalizing Problem Behaviors and Subscales

	Externalizing Behavior		Aggressive Behavior		Oppositional Defiant		Conduct Problems		Rule Breaking	
Gender	2.026 (1.258)	2.360* (1.047)	2.283** (.844)	2.041** (.759)	.831** (.302)	.781** (.287)	.197 (.481)	-.317 (.399)	.226 (.512)	.354 (.448)
Age	0.315 (.491)	.218 (.416)	.114 (.335)	.055 (.302)	.058 (.120)	.041 (.114)	-.009 (.191)	.021 (.158)	.247 (.203)	.279 (.178)
Grades	-0.137 (.358)	-.097 (.292)	-.029 (.240)	-.050 (.212)	-.060 (.086)	-.066 (.080)	-.039 (.137)	-.051 (.111)	-.036 (.145)	-.045 (.125)
Adolescent Time in U.S.	0.261* (.130)	-.042 (.114)	.171* (.087)	.005 (.083)	.105*** (.031)	.056+ (.031)	.084+ (.050)	-.047 (.043)	.091+ (.053)	-.035 (.480)
Mother's Education	-1.037 (.523)	-.704+ (.432)	-.527 (.352)	-.300 (.313)	-.137 (.126)	-.064 (.119)	-.342+ (.201)	-.174 (.164)	-.529* (.214)	-.362* (.185)
Both Separated Mother	2.071 (2.480)	-.506 (2.102)	1.752 (1.680)	.660 (1.525)	.542 (.600)	.227 (.577)	.497 (.958)	-.388 (.800)	-.367 (1.018)	-1.261 (.900)
More Acculturated than Adolescent	5.068* (2.224)	2.537 (1.911)	2.779+ (1.534)	1.281 (1.386)	.964+ (.548)	.468 (.525)	2.061* (.875)	.972 (.727)	2.276* (.929)	1.188 (.818)
Both Acculturated than Mother										
Bicultural (Reference)										
Cohesiveness		-.045 (.080)		.050 (.058)		-.001 (.022)		-.063* (.030)		-.071* (.034)
Familism		-.160 (.207)		-.176 (.150)		-.007 (.057)		-.047 (.079)		.013 (.089)
Family Conflict		.872*** (.162)		.550*** (.117)		.159*** (.044)		.333*** (.062)		.330*** (.069)
Acculturation Conflict		.212 (.169)		.186 (.122)		.068 (.046)		.027 (.064)		.027 (.072)
N	139	138	139	138	139	138	139	138	139	138
Adjusted R ²	.048	.345	.060	.275	.112	.234	.016	.356	.058	.310

Unstandardized regression coefficients and standard errors (in parentheses)

+ $p < .10$ * $p < .05$ ** $p < .01$ *** $p < .001$

Table 3 presents the results of the multivariate ordinary least square regression models predicting the youths' self reported aggressive behavior, oppositional defiance, conduct problems, rule breaking, and the global externalizing problem behaviors scale. The first models for each outcome did not include the hypothesized mediating variables. These models showed that, compared to the reference group where both mother and adolescent were bicultural, youth with mothers who were more acculturated than themselves reported significantly higher scores on the global externalizing problems scale. However, the larger group of dyads where the adolescent was more acculturated than the mother was not significantly different than the reference group on any outcome. These effects persisted when controlling for demographic variables

(gender, mother's education and time in the U.S.) that were significant predictors of the outcomes. Females reported higher scores than males on aggressive behavior and oppositional defiance. Youth with more highly educated mothers reported lower scores on conduct problems and rule breaking. Scores on all outcome measures were higher for youth who had lived in the U.S. longer.

The second set of regression models in Table 3 explored the possible mediating role of family cohesion, familism, family conflict, and acculturation conflict in the relationship between mother-adolescent acculturation gaps and youth problem behaviors. These regression models indicated that family conflict was significantly related to higher scores on all five youth problem behavior outcomes, and family cohesiveness had a significant negative relationship with conduct problems and rule breaking. However, after controlling for the hypothesized mediators, none of the mother-adolescent joint acculturation categories demonstrated significant relationships with any of the outcomes, suggesting the presence of a substantial indirect effect. These relationships were explored further in two ways. First, the four possible mediators were entered singly into the base models with joint acculturation categories and controls. In those analyses the dummy variable representing *mothers more acculturated than adolescent* did continue to have a significant positive relationship with the four externalizing behavior subscales (aggressiveness, oppositional defiance, conduct problems, and rule breaking) when familism or family cohesion were included, but not when acculturation conflict or family conflicts were included. A second additional analysis assessed the mediating relationship by applying the Sobel test of significance of the indirect relationship (Kline, 2005). Results indicated that both family and acculturation conflict were significant mediators connecting acculturation differences (mother more acculturated than adolescent) to the outcomes. However, the indirect effects through general family conflict (.05 for aggressiveness, .04 for oppositional defiance, .06 for conduct problems, and .12 for rule breaking) were more sizable than through acculturation conflict (.02 or .03 for all indirect effects). Because family conflict and acculturation conflict were only modestly correlated ($r = .254$), the more general measure of family conflict appeared to be the more salient mediating factor.

We explored an additional possible reason that youth who were less acculturated than their mothers reported more externalizing problem behaviors—that these youth may have arrived in the U.S. after their mothers had immigrated. However, after controlling for a difference between mother and adolescent in length of residence in the U.S., youth with more acculturated mothers continued to report significantly higher levels of adolescent problem behaviors as they had in the first models in Table 3 (results not presented in tables).

Discussion

Previous studies have found that adolescent problem behaviors are significantly associated with an acculturation gap between parent and child

(Birman, 2006; Szapocznick & Kurtines, 1993). The results of this study did not support the hypothesis that Mexican-heritage youth who are more acculturated than their mothers would report more problem behaviors. Although this study found that acculturation gaps were associated with significantly higher reported levels of externalizing problems, these problems were reported at elevated levels by youth from dyads where the mothers were more acculturated than the adolescents. This finding from a low risk group of families (i.e., reporting low rates of adolescent externalizing problem behaviors) supports the previous findings from a high risk Mexican American sample (Lau, et al, 2005). Explorations of possible reasons for this relationship suggested that both family and acculturation conflict are implicated in youth reports of an array of externalizing problems when their parents are more acculturated. Of these two factors, only family conflict remained as a significant predictor of youth problem behaviors in full models and the indirect effect of the salient acculturation difference through family conflict was larger than its counterpart through acculturation conflict. These results indicate that although acculturation gaps may exist between adolescents and parents in Mexican immigrant families, and these youth may exhibit problem behaviors, those behaviors may not necessarily be due to the acculturation gap itself but rather to intra-familial conflict.

Some of these findings are different than the results found in other studies (Gonzalez, et al, 2008) and further studies are needed to examine the unique situation where a parent is more acculturated than the adolescent and how mismatched acculturation affects adolescent behaviors. For example, reported parent-adolescent difference in acculturation may reflect different perceptions and experiences during the acculturation process. Parents who made the decision to immigrate with their families and remain in the U.S. may have a more positive view of the culture of their adopted country and their own incorporation of its values. Perhaps because their children are better able to master English language acquisition and enter the social networks of the native born, they may be more aware of difficulties and trade-offs in the acculturation process, such as the lack of full acceptance of immigrants and Latinos in U.S. society.

This study was conducted with Mexican heritage families living in a border state. The proximity to Mexico facilitates a fluid movement across the border. More information is needed about the frequency, purpose, and length of the adolescents' visits to Mexico. From an ecological perspective, family networks in Mexico might continue to be providing effective support to youth after migration to the U.S. (Gil, et al., 1994). In some cases, youth may be sent back to their towns of origin in Mexico as a strategy to correct externalizing behaviors and to distance them from U.S. peers who are perceived to have a negative influence. More information about this circular movement between the U.S. and Mexico may help explain the identified counterintuitive association between youth's higher rates of externalizing behaviors and their parents' relatively higher level of acculturation. Children born in the U.S. may have an

easier time crossing back and forth than their immigrant parents born in Mexico, potentially resulting in children with stronger social and cultural ties to Mexico than their parents.

Another area requiring more in depth study is the unexpected finding that female adolescents reported higher rates on some externalizing behavior outcomes than their male counterparts. The greater sheltering of girls within traditional Mexican homes compared to boys, may not prepare them as well to cope with expanded opportunities to engage in risk behaviors in U.S. society. Gender role transitions for Mexican heritage girls may involve more abrupt or drastic changes than for boys, introducing conflict in families (Choi, et al., 2008). Parents may also have a more difficult time accepting the girls' changes in norms and behaviors which may lead to more overt conflict.

Although this study provides important insights into possible causes of youth problem behaviors, it has several limitations. The sample size is modest and is not based on random probability sampling; therefore the results cannot be generalized to all Mexican immigrant groups. The modest sample size also resulted in small numbers in one of the acculturation gap groups, which may have affected the stability of the results. The study included only mothers and their adolescent children. Future research should apply innovative recruitment strategies to include Mexican immigrant fathers as well. More attention needs to be given to developmental differences between parents and their children and how the two generations interpret and answer questions gauging their acculturation strategies.

The findings suggest possible insights into the acculturation gap between children in immigrant families and their mothers in the U.S.-Mexico border region and advance knowledge about the experiences of Mexican families, their strengths and their needs. Policy makers can utilize these findings to inform the development of community and school policies that support language diversity and youth extracurricular activities. These findings can also inform the design of family interventions addressing the needs of children and parents facing the challenges of acculturation. The acculturation process is unavoidable but practitioners and researchers can assist immigrant Mexican origin parents and youth to navigate the sometimes turbulent waters of acculturation by relying on the strengths of the culture and the family. Children with externalizing problems may benefit from a combination of strategies applied within their immigrant families and with the support of practitioners.

Since much of the existing literature cites acculturation gaps between parents and children as a main factor in youth problem behaviors, teachers, social workers, psychologists and other professionals may incorrectly attribute all youth problem behaviors to acculturation gaps. Practitioners and researchers need to examine the issues affecting immigrant families in more depth because youth problem behaviors may be due to other family conflicts and not necessarily specifically due to acculturation conflict caused by acculturation gaps. Further research will be improved by involving youth and their families throughout the inquiry process and by adding a qualitative or narrative

dimension. There is a need to better understand the meaning of the acculturation experience by different families and in different social contexts. Family histories and family constellations will help assess in greater depth which family conflicts would have come to surface in the country of origin even if the migration process did not occur.

The results of this study support previous findings indicating that family cohesiveness appeared to be a selective protective factor against externalizing youth problem behaviors (Volk, Edwards, Lewis, & Sprenkle, 1989). As a result, practitioners can utilize a strengths based approach to work with immigrant families to enhance the culturally valued concept of family cohesion. Replications of the current study comparing Mexico-based samples with Mexican-heritage U.S. samples will help advance knowledge about family dynamics versus acculturation in a globalized context such as the U.S.-Mexico border region (Marsiglia, Kulis, Martinez Rodriguez, Becerra, & Castillo, 2008). The U.S.-Mexico borderlands' cultural and social context presents unique opportunities for future research with young people and their families immersed in Latino majority environments and engaged in enculturation processes (Marsiglia & Kulis, 2009) which are either by choice or a reaction to perceived discrimination or lack of acceptance by the larger society. Because the acculturation processes appears to be similar for other Latino subgroups as well as for other immigrant and migrant communities -with caution- these findings can be generalized to other populations.

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Childhood Sexual Abuse Prevention Education with Latino Families

Maureen C. Kenny

Abstract

Although there have been some attempts to identify cultural values that may contribute to the recovery from childhood sexual abuse (CSA), there have been few attempts to design CSA prevention programs for Latina/o victims. This paper describes a primary prevention program used with Latino parents and their children aged 3 to 5 years in a large metropolitan area. Results indicate that children were able to make gains in knowledge of body-safety skills and parents reported increased communication with their children as well as satisfaction with the program. Recommendations for future prevention efforts with Latinos are offered.

Key words: Hispanic/Latino families, childhood sexual abuse, prevention

Childhood sexual abuse (CSA) has been identified as a “serious public health problem” by the U.S. Centers for Disease Control and Prevention which has initiated and provided funding for programs to prevent violence against youth (U.S. Department of Health and Human Services, Centers for Disease Control, n.d., p. 2). With approximately 60,000 victims of childhood sexual abuse in the year 2007 (U.S. Department of Health and Human Services, 2009), there is a clear need to address this issue through prevention and intervention programs. Given that many victims report having experienced sexual abuse before the age of nine years (Vogeltanz, et al., 1999; Wyatt & Newcomb, 1990), programs geared toward young children are necessary. Much less is known about the ethnicity of victims. Latinos accounted for 18% of the CSA victims in 2007 (U.S. Department of Health and Human Services, 2009) second only to Whites who accounted for 52% of victims.

There are a plethora of prevention or educational programs designed to address the issue of childhood sexual abuse. Most programs target either parents or children and most are school-based. However, very few of these programs address cultural diversity. For example, Plummer (2001) found that only 17% of the 87 prevention programs she surveyed were aimed at culturally specific groups. The primary modification made is translation of materials into alternate languages. Several programs have materials (typically ones designed for parents) available in Spanish (ACT for Kids, Safe Child Program, Child Lures, Red Flag Green Flag© People) and a few other programs are available in other languages such as French and Korean (Kenny & Wurtele, in press). Beyond translation of materials, very few programs modify materials to meet the needs of culturally diverse people despite this recommendation (Tobin & Kessner, 2002). Marin (1989) suggests that psychoeducational materials dealing with CSA need to be culturally sensitive and gender informed taking into consideration variables of the target population such as language proficiency,

educational level and socioeconomic status. Highlighting the use of assertiveness and body safety skills for Latino children in response to sexual advances is also recommended (Fontes, 2005).

Given the increasing growth of Latinos in the U.S., it is essential to provide culturally appropriate prevention programs to this traditionally underserved population. According to the U.S. Census Bureau, between 2000 and 2006, Latinos accounted for half the nation's growth rate (U.S. Census Bureau, 2006). From 1980 to 2004, the percentage of children in the U.S. who were Latino more than doubled from 9% to 19%, with a projected increase of 24% of the child population by 2020 (Child Trends, 2003). Latinos are a diverse group; comprised of individuals from Mexican-origin, Central and South America, Puerto Rico, and Cuba (Hinson, Koverola & Morahan, 2002). Traditionally, the term Latino has been applied to those who come from Spanish-speaking countries; however, beyond sharing a common language, these individuals represent diverse religions, racial groups, and traditions. The term Latino is currently preferred by this author, but the U.S. government in most reports continues to refer to those whose ancestors came from a Spanish speaking country as Hispanic. Thus the research and statistics used in this study are often from sources using the term Hispanic.

Although there is some research conducted on parent-child discussions about CSA (e.g., Deblinger et al., in press; El-Shaieb & Wurtele, 2009; Wurtele, Kvaternick, & Franklin, 1992) few of these samples included Latino families. What is known is that there appears to be a taboo against discussing sexuality in many Latino cultures and that parental communication regarding sexuality is often lacking (Kenny & McEachern, 2000; Russell, Lee, & Latino Teen Pregnancy Prevention Workgroup, 2004). Fontes (2005, 2007) describes how many Latinos are raised to avoid "talking dirty" and that many Latina women have not been taught the correct words to describe sexual acts. For many Latina women, simply mentioning genitals or sexual acts is considered *muy bajo* or "vulgar" (Fontes, 2007; Low & Organista, 2000), and there is an attitude of simply not discussing sexual matters. Consistent with studies of other cultural groups, one study found that Hispanic women who reported a history of childhood sexual abuse reported repressed sexual attitudes in their homes with no discussions of sexuality (Kenny & McEachern, 2007). Previous research by Kenny and Wurtele (2008) found a significant difference in the use of slang terms for genitals by children from Spanish-speaking homes compared to English-speaking homes with significantly fewer Spanish-speaking children correctly labeling their genitals compared to English-speaking children. In fact, none of the Spanish-speaking children knew the correct terms for breasts, penis, or vulva. According to Fontes (2007) who writes about Puerto Rican children, "Latino families often severely punish children's sexual play" (p. 73) including masturbation. Given this cultural tradition of relative discomfort with sexual discussions and behaviors, Latino parents may benefit from programs that guide them in talking about sexuality and body safety with their children.

Research examining Latino victims of CSA have revealed some interesting differences between them and victims from other ethnic groups which may have bearing on prevention efforts, particularly on how messages about reporting abuse are perceived. Lefley (1999) reports that "Fear of disclosure and underreporting are particularly salient in a cultural milieu [Latino] with strong views about male and female sexuality and equally strong views about relationship with authorities" (p. 157). Fontes (1993) discusses other barriers to disclosure with Latinos, including stigmatization, shame, the value placed on virginity and chastity, and the fear of family punishment. It has been suggested that the value of placing the family above the individual's needs and the idea that disclosure may disrupt the family's well being may contribute to the silence of some victims (Comas-Díaz, 1995; Phillips-Sanders et al., 1995). Comas-Díaz (1995) argues that the cultural value of respect (*respeto*) may actually place children at increased risk for sexual abuse and in the position of maintaining silence. She states, "A sexually abused child may fear breaking the silence due to respect for the abuser and fear of consequences of breaking a cultural taboo" (p. 39).

Understanding the possible role and influence of Latino culture in the development and delivery of CSA prevention programs is essential if we are to develop effective and culturally appropriate programs. This paper will review results from a primary prevention psychoeducational program with Spanish-speaking parents in Miami-Dade County (Florida). The goal of the paper is to assist prevention experts or child and family counselors working in other regions with similar populations. The modifications made to two existing child prevention program curriculums are noted as well as ways in which the program was adapted to meet the needs of Latino families.

Method

Participants

Children. Ninety-one, three (37%), four (40%), and five (23%) year old children (M age = 3.86, SD = 0.74) served as participants. Forty-nine were male (54%) and 42 were female (46%). Parent-reported ethnicity of the children was as follows: Hispanic 90%, White (non-Hispanic) 6%, and "other" (African Caribbean (Haitian), Asian). All children were enrolled in preschool or daycare centers in Miami, Florida. Based on the child's stated preference, 71% of the children were administered the measures in Spanish and the remaining 29% in English.

Parents. There were 91 parents; the majority were mothers (95%) but other caretakers in attendance included fathers and grandparents. While all of the groups were conducted in Spanish, 36% of the parents chose to complete their test measures in English.

Procedure

Kids Learning About Safety (KLAS) (Kenny, 2006) is a primary prevention program created to serve Spanish-speaking families of Miami-Dade county home of the 4th largest school district in the U.S., where 62% of residents

self-identify as Latino (U.S. Census Bureau, Population Division, 2009). The program utilizes the *Body Safety Training* program (Wurtele, 2007) as it has been translated into Spanish and used with minority populations (Kenny, 2009) as well as the *Talking About Touching* curriculum (Committee for Children, 1996, 2001). The program has two distinct topic areas: general safety (fire, guns, poison) and body/personal safety. By beginning the program discussing and learning about general safety topics, parents and children were able to form rapport and gain a comfort level with the group before moving into the more sensitive topics.

KLAS followed the recommendations of Tobin and Kessner (2002) to “respect differences” when conducting a CSA prevention program by translating materials, using culturally relevant names in examples and role-plays, and using culturally diverse personnel to teach the program. Translation of material was provided by a professional translation agency with back translation by program staff. Permission was obtained from the Committee for Children to translate and reproduce several parent educational handouts covering such topics as assertiveness, safety steps for young children, and teaching rules about touching. Based on suggestions from Fontes (2005) on the need for at least one group facilitator to be of the same cultural group as the target population, group facilitators were all of Latino descent. All group facilitators were bilingual (English and Spanish) with some facilitators reporting Spanish as their primary language. Several were immigrants from Spanish speaking countries or first-generation Americans.

Public or private day care or preschool centers in the county were approached about partnering to offer the program. Once a site was selected, recruitment and registration took place. Typically, staff from the program were on site during high-traffic times (drop off, pick up, special school events) to speak directly to parents about the program. The groups were held at the centers. The KLAS program included approximately 12 hours of meetings; one-hour meetings held twice a week for 6 consecutive weeks. Parents and children met in separate groups, although they were brought together on occasion for demonstration and role plays. The children’s group used photo lesson cards (*Talking About Touching*) (Committee for Children, 2001), books, songs, a safety-step poster, and videos. (See Appendix A for list of resources). Each of the lessons lasted about 20–30 minutes and taught children simple rules to guide them toward safe decision making (always ask first, no-go-tell, body-safety rule about touching). The parents were presented information on each topic (through videos, handouts and verbal instruction) and then given a chance to ask questions and share experiences and thoughts. The material for the parent curriculum came from the BST, a variety of books related to CSA prevention, as well as activities the author developed for this purpose. Parents were shown the same videos and taught the same songs as the children but also saw an additional video that dealt with the topic of CSA, “What Do I Say Now? *¿Ahora que Digo?*” (Borch, 1996).

Measures

Multiple measures were used to evaluate gains in knowledge on the part of children and parents. These measures were all administered prior to the start of the program (Time 1) and at the conclusion of the program (Time 2).

Parent Measures

Child Assertiveness Questionnaire. This measure, created by the author, assesses the parent's perceptions of the child's assertive behaviors. Parents were asked to rate their child's ability in six areas: "to make a request," "uses eye contact when making a request," "uses eye contact when expressing feelings," "uses a confident tone of voice when making a request," and "uses a confident tone of voice when expressing feelings." It should be noted that maintaining eye contact may be asking children to give up some culturally-based signs of respect. However, it has been demonstrated to make them safer in the long run. Items were rated on a Likert-type scale (1-5) where 1 is "not at all" and 5 is "a great deal." For purposes of pre- and post-evaluation, a total average score was obtained for a child at Time 1 and Time 2. Scores range from 1 to 5. Higher scores indicate greater assertive behavior on the part of the child. Internal consistency using Cronbach's alpha was .92 (Kenny, 2009).

Parent Perception Questionnaire (PPQ; Wurtele, Currier, Gillispie, & Franklin, 1991) The PPQ consists of a checklist of 19 child behaviors. Parents were asked to indicate if any of the behaviors increased, decreased or stayed the same over the last month. Parents rated both positive (i.e., seems to display confidence in herself/himself) and negative (i.e., seems to be afraid of strangers) behavioral changes. For all behaviors, parents were asked to indicate whether or not the behavior reflected a problem. Only the negative behavior scores (14 items) were analyzed with internal consistency using KR-20 of .74 for the change in behavior and .81 for the problems.

Consumer Satisfaction Survey. This measure was created by the author to assess how helpful the group sessions were to parents. It was administered at the end of the group and consisted of an open-ended question, "What did you like best about the groups?" (*¿Que fue lo que mas te gusto de los grupos?*).

Child Measures

Personal Safety Questionnaire (PSQ, Wurtele, Gillispie, Currier, & Franklin, 1992). Although the PSQ consists of 11 closed-ended questions, only three were used in this study, and they were those deemed most important to the content of the program. These questions were designed to assess children's knowledge about sexual abuse (e. g., "If a big person touches a little kid's private parts has the kid done something wrong?" and "If the big person tells the kid to keep it a secret, should the kid tell somebody?") and attitudes towards sexuality (e.g., "Is it OK for kids to touch their own private parts?"). Children responded by saying "yes," "no," or "I don't know." Each correct response received one point and scores ranged from 0-3. Higher scores indicate a greater level of knowledge than lower scores.

What If Situations Test (WIST, Wurtele, Hughes, & Owens, 1998). The WIST measures children's skills in the areas of recognizing, resisting, and reporting of CSA. The WIST utilizes an individual interview format that includes six vignettes: three describe inappropriate requests to touch children's genitals and three describe appropriate requests to touch children's genitals. To assess recognition of inappropriate touch requests, after each vignette children were asked, "Would it be okay for [name of person in the vignette] to [touch your genitals/activity described in vignette]?" Correct responses received one point. Higher scores indicate a higher level of knowledge than lower scores. Responses to this question produced two scores: (1) Appropriate Request Identification Score measuring children's ability to identify three appropriate touch requests (range 0-3); and (2) Inappropriate Request Identification Score measuring children's ability to identify three inappropriate touch requests (range 0-3). Although the WIST contains questions to assess a child's ability to refuse, resist, and report inappropriate requests, these questions were not asked in this study. One-month test-retest reliabilities (Pearson r) for the Appropriate and Inappropriate Request Identification Scales were .76 and .81, respectively (Wurtele, Hughes, & Owens, 1998). Internal consistencies for the Inappropriate and Appropriate Touch Scales for this study using KR-20 were .88 and .75 respectively (Wurtele et al., 1998).

Body Parts: To determine knowledge of genital terminology, children were asked to provide the names of various body parts on a drawing of a nude boy and girl (there were two drawings per gender; a front side and a back view) (Wurtele et al., 1992). Children were asked the names of the following body parts: eyes, feet, head, breasts, vulva, penis, and buttocks (on both the boy and girl). For genital body parts, children's responses were scored either 0 for incorrect or "don't know," 1 for either the term "private parts" or correct answers. For English-speaking participants, correct responses for the genital body parts included: Breasts (breasts, nipples or chest); Vulva (vulva, vagina, gina); Penis (penis); Buttocks (buttocks, butt, bottom or behind) as well as the term "private parts" (for breasts, vulva, penis, or buttocks). For Spanish-speaking participants, correct responses included: Breasts (senos); Vulva (vagina, vulva); Penis (pene); Buttocks (nalgas) and the words "partes privadas" for breasts, vulva, penis, or buttocks. The Spanish genital terms were provided by the Medical Director of a Child Protection Team; a bilingual pediatrician who specializes in the assessment and treatment of child maltreatment.

Car, Traffic, Fire, Gun Safety Questionnaire. This measure was created by the author to test children's knowledge related to specific safety issues covered in the program. The assessment, which is conducted through individual interview with each child, consists of 10 questions designed to test children's knowledge of car safety (e.g., "Should you wear a seat belt in the car?"), traffic safety (e.g., "What should you do when you are going to cross the street?"), fire safety (e.g., "What would you do if you found matches?", "What should you do if you see fire?"), and gun safety ("What would you do if you saw a gun?"). The child is asked each question and scoring is based on providing a correct answer. For

some questions, there are multiple correct answers for each question that have been designated in the scoring manual. Scores range from 0 to 10, with a child receiving “1” for each correct response. Internal consistency using KR-20 was .71 in Kenny (2009).

Results

All data were entered and analyzed using SPSS 15.0. A MANOVA was conducted on the pre-test variables including age of child (3, 4, or 5 year old), gender of child, and year of program (data were collected across three years). Results indicated a significant main effect for year of program, $F(12,130)= 2.81$, $p =.002$, so year of program was included in all analyses along with gender and age. A MANOVA was conducted on each measure using Time 1 and Time 2 (pre- and post) test scores by gender, age and year of program. Table 1 shows the Time 1 and Time 2 adjusted means, standard errors, F and p values, and effect sizes for the scores. *PSQ*, *Child Assertiveness Questionnaire*, and *Body Parts* had significant interactions with year ($p < .01$) however, no clear pattern emerged with any one year demonstrating significant increases from Time 1 to Time 2 compared to the other years. In no year did mean scores decrease from Time 1 to Time 2 for any of the three measures.

Table 1 - Means and Standard Errors for Measures at Time 1 and Time 2

Measure	n	Time 1	Time 2	F	p <	partial η^2
		M (SE)	M(SE)			
Personal Safety Questionnaire (PSQ)	87	1.52 (.09)	1.93 (.09)	11.22	.001	.14
WIST-III Inappropriate	86	.82 (.13)	1.99 (.13)	60.88	.001	.47
WIST -III Appropriate	86	2.05 (.13)	2.51 (.12)	6.53	.01	.09
Car, Traffic, Fire, Gun Safety Questionnaire	89	3.00 (.23)	6.37 (.30)	95.68	.001	.57
Communication, Assertiveness, and Relationship Questionnaire (Parent Rating)	91	4.09 (.10)	4.46 (.07)	12.43	.001	.15
Body Parts	84	.26 (.08)	1.12(.12)	57.66	.001	.47

Parent Measures

There was a main effect of time on parents' scores on the *Child Assertiveness Questionnaire*, $F(1,73) = 12.43$, $p < .001$, partial $\eta^2 = .15$. On the *Parent Perception Questionnaire*, the percent of parents who reported increases in their children's negative behaviors did not significantly differ from Time 1 to Time 2, $F(1,30) = 0.52$, $p = .478$, $\eta^2 = .017$. The mean percent of parents at Time 1 was 9.24% ($SE=2.52$) and at Time 2 ($M = 7.55\%$, $SE=1.83$). There was a significant difference between the percent of parents who reported that the behaviors were a problem at Time 1 compared to Time 2, $F(1,30) = 6.00$, $p = .020$, $\eta^2 = .167$, with a greater mean percent of negative behaviors reported at Time 1 13.39% ($SE=2.99$) than Time 2 5.27% ($SE=2.07$). In response to the question on the *Consumer Satisfaction Survey*, What did you like best about the groups, feedback from parents centered around four main themes: (1) interaction

with other parents, (2) specific skills or knowledge, (3) materials used in groups, and (4) time/communication with child.

Child Measures

PSQ scores increased significantly from Time 1 to Time 2, $F(1,69) = 11.22, p < .001$, partial $\eta^2 = .14$. WIST Appropriate Touch scores increased significantly over time, $F(1,68) = 6.53, p < .01$, partial $\eta^2 = .09$ as did WIST Inappropriate Touch scores, $F(1,68) = 60.88, p < .001$, partial $\eta^2 = .47$. Children's Time 2 scores on the *Car, Traffic, Fire, Gun Safety Questionnaire* were significantly higher than Time 1 scores, $F(1,71) = 95.68, p < .001$, partial $\eta^2 = .57$. Children's knowledge of their genital *Body Parts* significantly improved over time from Time 1 to Time 2, $F(1,66) = 57.66, p < .001$, partial $\eta^2 = .47$. However, the main effect of time was moderated by a gender by time interaction, $F(1,66) = 14.80, p < .001$. Both males and females increased their knowledge of body parts from Time 1 to Time 2 testing, but females (Time 1 $M = .25, SE = .16$, Time 2 $M = 1.54, SE = .16$) increased significantly more than males (Time 1 $M = .27, SE = .11$, Time 2 $M = .70, SE = .16$).

Discussion

The results of this program with Spanish-speaking families over a three-year time period demonstrate that KLAS is a viable strategy to increase prevention knowledge and assertive behavior in preschool-aged children. Specifically, this simultaneous parent and child group-based primary prevention program was successful in teaching children knowledge of general safety topics including car, gun, traffic, and fire safety. Further, the program helped improve children's abilities to distinguish between appropriate and inappropriate touches and potentially abusive and non-abusive situations, as well as learn rules regarding secrets and correct names of their genitals. Children's knowledge scores increased over time regardless of the age or gender of the child. It is also promising that these results were achieved with no reported negative behavioral increases for children in fact, negative behaviors decreased over time. This study represents one of few documented attempts to teach prevention concepts to a Spanish-speaking population.

Parents reported satisfaction with the program primarily due to the sharing of experiences and discussion with other parents as well as the knowledge and skills they learned. It appears that these parents benefitted from the group interaction with other parents and this format may be ideal for teaching them specific skills or knowledge related to preventing sexual abuse.

As Mennen (2004) states, Latino children, like others, "need to have the helping community focus on their needs in a culturally sensitive and empirically supported fashion" (p. 490). Prevention programs, such as the one described here which emphasize to children that sexual abuse is never their fault, may help combat messages that may be present in their culture. Fontes (2007) has written extensively about the blame that may be placed on the female victim of sexual abuse in the Latino culture. She suggests that recovery efforts must assist with victims unlearning this myth. Thus, prevention efforts that include

messages about fault and blame could be proactive. In this study, as measured by an item on the PSQ, there were significant changes in children's knowledge regarding their fault if someone touched their private parts. Thus, this program shows promising results with regard to teaching children that CSA is not their fault.

Strengths of Study

Given the emerging diversity of the United States, selection or creation of a prevention program should include a consideration of the needs of participants who are culturally and linguistically diverse. KLAS followed the suggestions of Tobin and Kessner (2002) who advise that programs include culturally appropriate materials and culturally relevant names in role plays with children. Program materials were translated into Spanish to ensure the comfort and comprehension of children and parents. The use of staff who represented the cultural group, spoke the language fluently and understood the cultural mores appeared to help build rapport among parents and children. As Mennen (2004) concludes after examining Latino children who suffered CSA, the availability of bilingual therapists and the translation of effective interventions into Spanish are essential as many children who speak both English and Spanish may prefer to discuss this type of sexuality information in Spanish. Programs need to develop innovative strategies to work within the cultural values of a given group.

Limitations and Directions for Future Research

One of the limitations of this study is the generalizability of the results. Although this Latino group was comprised mainly of Cubans, there is still heterogeneity within this population, particularly with regard to acculturation. These results may not be generalizable to other Latino groups. In fact, the term Latino encompasses a wide range of individuals with great variation in culture and tradition. In addition, the lack of a control group and only pre and post testing, poses the difficulty of demonstrating evidence for the internal validity of these results. Namely, we cannot be certain that the changes observed and reported between pre and post measures is due to the program and not the passage of time. Furthermore, this sample consists of parents who volunteered for this program and may be more acculturated with regard to discussing sexual issues or may be more interested in prevention issues than those families who did not participate. Future studies should include a measure of acculturation to determine the degree to which levels of acculturation may affect participants' responses to the program.

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Appendix A

List of Spanish Resources Used In This Program

- Borch, P. (1996). *What do I say now?* [Motion picture]. Seattle, WA: Committee for Children.
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Church, Culture, and *Curanderismo*: Mexican American Social Work Students at the Border

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Abstract

In working with clients of Mexican descent, practitioners need to understand and respect *curanderismo*, the system of traditional healing commonly found in Mexican American and Mexican immigrant communities. A survey (N = 63) conducted in a university in the U.S.-Mexico border region found that slightly less than half (47.6%) of the Mexican American social work students had consulted a *curandero/a*. Moreover, the students who had consulted a *curandero/a* and those who attended church less frequently were more likely to approve of simultaneous treatment of Mexican folk illnesses by medical practitioners and traditional healers. The findings highlight the significance of diversity among Mexican Americans and suggest a need to foster skills in connecting across cultural differences within one's own ethnic group.

Keywords: Mexican Americans, *curanderismo*, folk healers, religion, diversity

Curanderismo, a term referring to folk illnesses and traditional healing practices in Mexican American communities, has been examined by a number of scholars seeking to understand patterns of health care utilization among Latinos in the United States (e.g., Applewhite, 1995; Guajardo, 1999; Harris, 1998; Higginbotham, Trevino, & Ray, 1990; Lopez, 2005; Tafur, Crowe, & Torres, 2009). An overall implication of these investigations is that health and mental health service providers need to understand the role of *curanderismo* in the physical, mental, and spiritual well-being of many Latinos. Appreciation of *curanderismo* is an element of cultural competence that must be cultivated by Latino as well as non-Latino social workers. Indeed, in light of diversity in immigration history and other cultural factors, Latino social work students may have limited knowledge of *curanderismo*, or they may harbor negative biases toward it based on past experiences or current influences in their lives. Little attention has been given to the challenges of connecting across cultural differences within one's own ethnic group.

The research reported here begins to address this gap by examining Mexican American social work students' experiences and attitudes related to *curanderismo*. Specifically, this study explored the students' experience with traditional healing and the relationship between their own experience and their level of approval for the use of *curanderismo* in conjunction with Western medical care. The findings from this study highlight the need for greater

attention to diversity within ethnic groups in preparing students for culturally sensitive practice.

The brief overview of *curanderismo* in the next section of this paper is essential as background for this study. For extensive reviews of the history and practice of *curanderismo*, readers are encouraged to consult other authors including Guajardo (1999), Torres (2006), Torres and Sawyer (2005), Trotter (2001), and Trotter and Chavira (1997).

Curanderismo: Overview and Utilization

The healing beliefs and practices known as *curanderismo* (from the Spanish verb *curar*, “to heal”) represent a syncretism of early indigenous (primarily Aztec) religious and healing practices in Latin America and the version of Catholicism imposed by Spanish colonialists during the conquest of the sixteenth century (Guajardo, 1999; Trotter, 2001). Over time these beliefs and practices evolved into a set of folk illnesses and healing methods that are commonly found in Mexican and Mexican American communities.

Mexican Americans are often introduced to *curanderismo* through home remedies such as herbal treatments and spiritual cleansings (*limpias* or *barridas*) administered by family members for a variety of ailments. When home remedies fail, help may be sought from a *curandera* (female) or *curandero* (male) in the community outside the immediate or extended family. Although *curanderos/as* are the most well-known healers, other traditional healing specialists include *yerberos/as* (herbalists), *parteras* (midwives), *sobadores/as* (massage specialists), and *espiritualistas* (psychic mediums) (Tafur, Crowe, & Torres, 2009). A commonality among traditional healers is that they are perceived as having a special gift for healing. Many traditional healers do not charge a fee but may accept donations (Torres & Sawyer, 2005; Tafur, Crowe, & Torres, 2009).

Treatments in *curanderismo* rely extensively on herbal remedies and use religious (typically Catholic) imagery, symbols, and objects. A hallmark of *curanderismo* is the integration of physical, mental, and spiritual dimensions in its perspective on illness and health. Thus, *curanderos/as* treat a variety of physical and spiritual ailments in addition to traditional folk illnesses (Tafur, Crowe, & Torres, 2006; Lopez, 2005).

Three of the many folk illnesses associated with *curanderismo* have been identified as culture bound syndromes in the fourth edition of the American Psychiatric Association’s *Diagnostic and Statistical Manual of Mental Disorders* (APA, 2000; see also Harris, 1998). *Mal de ojo*, typically known as “evil eye,” is an illness which is believed to occur in a person (usually an infant or child) as a result of someone staring or gazing at the person with great admiration. To prevent illness from occurring, the person who stared must touch the target of his/her gaze. If the person is not touched and becomes ill, specific rituals are used for treatment. *Susto*, or “fright,” is a condition in which a frightening or traumatic experience has caused the soul to leave the body, resulting in various emotional and somatic symptoms. *Nervios* is characterized

by emotional distress and may result from stressful life circumstances or general vulnerability to stress. Like other folk illnesses, these three conditions have characteristic symptoms that are often recognized by those experiencing the problem or by their family members prior to diagnosis by a *curandero/a* or other traditional healer.

Research suggests that most Mexican Americans who seek help from *curanderos/as* are also treated by physicians (Applewhite, 1995; Higginbotham, Trevino, & Ray, 1990; Richardson, 2006). Reasons for seeking treatment from *curanderos/as* include lack of health insurance or money to pay physicians, failure to improve after medical treatment, dissatisfaction with the type of care received from physicians, and desire for the spiritual element in care that is inherent in *curanderismo* (Applewhite, 1995; Higginbotham, Trevino, & Ray, 1990; Richardson, 2006).

A number of scholars have not only described *curanderismo* but also explored its role in the health care practices of Latinos. These investigations indicate that Latinos do not prefer *curanderismo* as an exclusive source of health care; indeed, consulting traditional healers does not reduce the likelihood of seeking medical care (Applewhite, 1995; Higginbotham, Trevino, & Ray, 1990). Rather, many Latinos seek both medical treatment and traditional remedies simultaneously or successively. Moreover, their choice of traditional or medical treatment at any point depends on factors such as type of illness, accessibility and affordability of medical treatment, beliefs about traditional remedies, religious beliefs, acculturation level, and previous level of satisfaction with medical treatment in terms of both health outcomes and degree of cultural sensitivity in provision of care (Applewhite, 1995; Harris, 1998; Higginbotham, Trevino, & Ray, 1990; Lopez, 2005; Richardson, 2006; Tafur, Crowe, & Torres, 2009). Recognizing cultural barriers to Latinos' access to health care (Aranda & Vazquez, 2004; Freire, 2002; Harris, 1998), some scholars have proposed strategies and methods for integrating traditional healing concepts and traditional healers into Western medical and mental health practice (Guajardo, 1999; Lee & Armstrong, 1995; Cavazos & Faver, 2007).

Estimates of the number of Mexican Americans who consult traditional healers vary widely, and are generally much lower than estimates of the number who utilize herbal remedies and other traditional treatments for various ailments. A study utilizing data collected in 1982-84 from a sample of 3,623 Mexican Americans living in the southwestern region of the United States found that only 4.2% had consulted a folk healer within the previous twelve months (Higginbotham, Trevino, & Ray, 1990). In a study of 25 Mexican American senior citizens in Arizona, only 12% of the participants reported that they consulted a *curandero*, but 76% used herbal remedies or other traditional treatments (Applewhite, 1995). A study of 50 Mexican American women found that the percentage of respondents who had used the services of a *yerbero*, a *curandero*, and a *sobador* were, respectively 20%, 25.7% and 38.6%; however, the great majority of respondents purchased herbs for medicinal purposes, including *manzanilla* (71%) for tea and *te de Yerba Buena* (80%). In a survey of

433 residents of the Rio Grande Valley in the Texas-Mexico border region (Richardson, 2006), only 17% of the respondents reported that they and their families and neighbors frequently visited a *curandero/a*. In contrast, almost 40% of the respondents reported that they frequently use herbs for cures, and 54% reported that they use *manzanilla* tea. Finally, a review of recent research concluded that 50% to 75% of Mexican Americans in some areas of the United States may use traditional healing practices (Tafur, Crowe, & Torres, 2009).

As noted previously, acculturation is believed to have an impact on the persistence or decline of traditional healing practices among Mexican Americans. In his survey of Rio Grande Valley residents, Richardson (2006) found that utilization of cultural practices such as visiting a *curandero*, using healing rituals to treat *susto*, and using herbal remedies declined with increasing acculturation. In Richardson's (2006) study acculturation was measured by a generational index constructed to measure the number of generations a family has lived in the United States.

Religious beliefs and involvement in organized religion may also have an important effect on attitudes toward traditional healing. Indeed, some people seek treatment from traditional healers in part because of the spiritual care such treatment provides. Lopez (2005) found that greater religiosity, measured by respondents' self-rating and by the presence of religious items in the home, was associated with greater utilization of the services of folk healers. In Applewhite's (1995) research, the predominant view expressed by respondents was that it is God who heals, regardless of whether the healing comes through a folk healer or a medical doctor. Nevertheless, some respondents were skeptical of *curanderos/as*, associating their healing practices with negative spiritual forces.

Reflecting its indigenous roots, *curanderismo* is generally viewed unfavorably by organized Christianity, including not only the Roman Catholic Church, but also other Christian denominations in which approximately a fifth of Latinos in the United States claim membership (Kosmin & Keysar, 2009). Thus, Mexican Americans who are highly involved in their churches, whether Catholic or not, may be discouraged from involvement in traditional healing practices and may be encouraged to perceive such practices as antithetical to their faith tradition.

The Study Context: The U.S.--Mexico Border Region

This study was conducted among Mexican American social work students in a university designated as a Hispanic-serving institution (HSI) in the U.S.--Mexico border region. Diversity among Latinos is accentuated in the U.S.--Mexico border region for at least two reasons. First, continuous immigration means that border communities always include new arrivals as well as people who have lived in the United States for many generations. Second, given the proximity of U.S. border communities to Mexico, even highly acculturated Mexican Americans can easily maintain contact with Mexican friends and relatives. Thus, proximity to Mexico increases the likelihood that Mexican

Americans in the border region will maintain familiarity with traditional healing practices.

While living near the border fosters familiarity with traditional healing, increasing acculturation reduces the likelihood of continuing to participate in such practices (Richardson, 2006). To the extent that traditional healing is perceived as being antithetical to Western science, pursuit of higher education is likely to discourage adherence to the set of beliefs and practices involved in traditional healing. Within social work education, however, students are encouraged to respect the belief systems and indigenous healing practices of all ethnic groups, including their own. Within this context, what do Mexican American social work students in the U.S.-Mexico border region think about the practice of *curanderismo*, and what aspects of their own experience are related to their attitudes toward *curanderismo*? This study was designed to address these questions.

The Study Questions

In a sample of Mexican American social work students in the U.S.-Mexico border region, this study sought to determine: (1) the proportion of students who have consulted a *curandero/a* outside their immediate or extended family; (2) the proportion of students who approve of seeking simultaneous treatment from a *curandero/a* and a Western medical practitioner for particular folk illnesses; and (3) whether the students' approval of seeking help from a *curandero/a* is associated with (a) the students' own experience of having consulted a *curandero/a*, (b) the students' involvement with organized religion, or (c) the students' degree of acculturation as indicated by their "generational score" (Richardson, 2006).

Method

Sample and Procedures

As previously noted, this study was conducted in a Hispanic-serving university in the U.S.--Mexico border region. In fall 2008, 86.3% of the university's student population was Hispanic (UTPA, 2008). The data were collected through a self-administered questionnaire completed by students in four social work classes between fall 2007 and summer 2009. Three of the classes were graduate courses and the other was an undergraduate course. The students' participation was voluntary and the study methods were approved by the Institutional Review Board of the university in which the study was conducted.

Survey Instrument and Measures

The students' experience with *curanderismo* was measured by asking whether and how often the respondent had consulted a *curandero/a* who was not a member of the respondent's immediate or extended family. The response alternatives were never, once, several times, and many times. In the analysis, the responses were combined to create a dichotomous variable indicating whether or not the respondent had ever consulted a *curandero/a* (yes or no).

To assess attitudes toward seeking help from traditional healers, the following question was asked: "Assume that you or someone you care about is seriously ill. While the person is under the care of a doctor, would you approve of simultaneous treatment by a *curandero/a*?" The respondents were asked to respond to this question by rating the extent of their approval or disapproval separately for each of the following traditional folk illnesses: *mal de ojo*, *susto*, and *nervios*. The rating scale included four alternatives: strongly disapprove, disapprove, approve, and strongly approve. In the analysis, the categories were combined to create a dichotomous variable indicating whether the respondent "approved" or "disapproved" of seeking treatment from a *curandero/a* for each of the three maladies.

Level of involvement with organized religion was measured by an item asking how often the respondent attended church or other religious meetings. The original six response alternatives were combined into two categories for analysis: "less than once a week" and "once a week or more."

Following the procedure created and described by Richardson (2006), a generational score for each respondent was computed to measure immigration level, which is generally regarded as a proxy variable for acculturation level. In other words, it is typically assumed that second generation immigrants are more acculturated than first generation immigrants, and so forth. Richardson (2006) created a generational index to address the problem of identifying immigration level when members of the same generation in a family are born in different countries. To obtain data for the scores, respondents were asked to indicate the place of birth of each of their maternal and paternal grandparents, their parents, and themselves. Following Richardson's (2006) procedure, generational scores were computed by assigning points for birth in the United States according to the following scheme: four points for the respondent, two points for each parent, and one point for each grandparent. The resulting scores range from zero (all born outside the U.S.) to twelve (all born within the U.S.). After a generational score was computed for each respondent, a dichotomous variable was created consisting of scores in the range of zero to 6 ($N = 33$) as one category and scores in the range of 7 to 12 ($N = 30$) as the other category.

The survey questionnaire also included items to obtain demographic data. Respondents were asked to identify their gender and age. Ethnic identity was determined by a questionnaire item asking the participants to select their ethnic identity from a list which included the option to indicate a preference not on the list. Only students who selected an ethnic identity preference that could be subsumed under the general label of "Latino" (e.g., Mexican American, Hispanic, *Mexicano*, Latino) were included in the study. Because the study was conducted in a university near the U.S.--Mexico border, the Latino students in the social work department are typically of Mexican descent, and no exception to this norm was identified among the respondents in this study.

Religious affiliation was determined by two open questions asking, "What is your religious affiliation currently?" and "What was your religious affiliation during childhood?" The responses were coded according to the

categories listed by the American Religious Identification Survey [ARIS 2008] (Kosmin & Keysar, 2009).

Data Analysis

Descriptive statistics were computed for all variables. Relationships between variables were assessed through cross-tabulations and computation of the chi-square statistic. The data were analyzed using SPSS 15.0 for Windows.

Results

Sample Characteristics

Of the sample of sixty-three Mexican American social work students, 88.9% were female and 84.1% were graduate students. The ages of the students ranged from 20 to 58 with a median of 29 and mean of 31.29 (SD = 8.9).

Two respondents did not report their religious affiliation during childhood, and one did not report current affiliation. Of those reporting, 78.7% were Catholic during childhood and 66.1% are currently Catholic. The next largest category of current religious affiliation was “generic Christian” (14.5%), which included nondenominational Christians and Christians with an unspecified denomination. Respondents who indicated they had no current religious affiliation (“none”) comprised 11.3% of the sample. These percentages can be compared to a national study conducted in 2008, which found that 59% of Hispanics were Catholic, 11% were generic Christians, and 12% had no religious affiliation (Kosmin & Keysar, 2009).

Eight respondents (12.7%) in this sample were born in Mexico. The respondents’ generational scores ranged from zero, indicating that the respondent and the respondents’ parents and grandparents were all born in Mexico, to twelve, indicating that all were born in the United States. The median was 6 and the mean was 6.43 (SD = 3.5). The dichotomous variable created from these scores included 52.4% of the sample in the zero to 6 category and 47.6% in the 7 to 12 category.

Attitudes toward *Curanderismo*

The majority of the respondents approved of simultaneous treatment by a medical doctor and a *curandero/a* for all three folk illnesses, but the rate of approval varied somewhat. The percentage approving simultaneous treatment was 65.1% for *mal de ojo*, 61.9% for *susto*, and 52.5% for *nervios*.

In the sample as a whole, 47.6% of the respondents reported that they had consulted a *curandero/a*. Chi-square analyses indicated that respondents who had consulted a *curandero/a* were significantly more likely than those who had not consulted a *curandero/a* to approve of simultaneous treatment for all three illnesses (Table 1). The percentage point differences in approval are striking; for example, 83.3% of those who had consulted a *curandero/a*, compared to 42.4% of those who had not consulted a *curandero/a*, approved of simultaneous treatment for *susto* (see Table 1).

Table 1. Consultation with a *Curandero/a* and Approval of Simultaneous Treatment

<u>Approval of Simultaneous Treatment</u>	<u>Consulted a <i>Curandero/a</i></u>		χ^2
	<u>Yes^a</u>	<u>No^b</u>	
<u>Syndrome</u>	<u>% Approve</u>	<u>% Approve</u>	
<i>Mal de Ojo</i>	86.7	45.5	10.00*
<i>Susto</i>	83.3	42.4	9.48*
<i>Nervios</i>	72.4	34.4	7.37*

^aFor *mal de ojo* and *susto*, total N = 30. For *nervios*, total N = 29.

^bFor *mal de ojo* and *susto*, total N = 33. For *nervios*, total N = 32.

* $p < .01$

Rate of approval for simultaneous treatment was also associated with the respondents' frequency of church attendance. In the sample as a whole, 34.9% of the sample attended church once a week or more, and the remaining 65.1% attended less frequently than once a week. Chi-square analyses indicated that those who attended church less than once a week were significantly more likely to approve of simultaneous treatment for all three illnesses (Table 2). Again, the percentage point differences are large. For example, three-fourths (75.6%) of the respondents who attend church less frequently than once a week, compared to 36.4% of those who attend church at least once a week, approved of simultaneous treatment for *susto*.

Table 2. Frequency of Church Attendance and Approval of Simultaneous Treatment

<u>Approval of Simultaneous Treatment</u>	<u>Frequency of Church Attendance</u>		χ^2
	<u>Less Than Once a Week^a</u>	<u>Once a Week or More^b</u>	
<u>Syndrome</u>	% Approve	% Approve	
<i>Mal de Ojo</i>	78.0	40.9	7.13*
<i>Susto</i>	75.6	36.4	7.76*
<i>Nervios</i>	65.0	28.6	5.94**

^aFor *mal de ojo* and *susto*, total N = 41. For *nervios*, total N = 40.

^bFor *mal de ojo* and *susto*, total N = 22. For *nervios*, total N = 21.

* $p < .01$

** $p < .05$

Rate of approval for simultaneous treatment was associated with generational scores only with respect to *susto* (Table 3). Three-fourths (75.8%) of the respondents whose generational scores were in the range of zero to six (indicating less acculturation), compared to less than half (46.7%) of those whose scores were in the seven to twelve range (indicating greater acculturation), approved of simultaneous treatment for *susto*. Generational scores were not associated with approval of simultaneous treatment for *mal de ojo* and *nervios*.

Table 3. Generational Scores and Approval of Simultaneous Treatment

<u>Approval of Simultaneous Treatment Syndrome</u>	<u>Generational Score</u>		χ^2
	<u>0-6^a</u>	<u>7-12^b</u>	
	<u>% Approve</u>	<u>% Approve</u>	
<i>Mal de Ojo</i>	75.8	53.3	2.56*
<i>Susto</i>	75.8	46.7	4.47**
<i>Nervios</i>	61.3	43.3	1.32*

^aFor *mal de ojo* and *susto*, total N = 33. For *nervios*, total N = 31.

^bFor all three syndromes, total N = 30.

* NS

** $p < .05$

Discussion

Summary of Findings

Slightly less than half the Mexican American social work students in this study reported that they had consulted a *curandero/a*. Moreover, depending on the particular folk illness under consideration, from one half to almost two-thirds of the respondents indicated approval for simultaneous treatment by a medical practitioner and a *curandero/a*. Respondents who had consulted a *curandero/a* and those who reported that they attend church less than once a week were more likely to approve of simultaneous treatment for each of the three illnesses. Respondents whose generational scores ranged from zero to six (indicating less acculturation) were more likely to approve of simultaneous treatment for *susto*, but generational scores were not significantly related to approval of simultaneous treatment for *mal de ojo* and *nervios*.

Explanation of the Results

Compared to the participants in a number of other studies (Applewhite, 1995; Higginbotham, Trevino, & Ray, 1990; Lopez, 2005; Richardson, 2006), the respondents in this study were more likely to report that they had consulted a *curandero/a*. One explanation for the higher rate could be differences in the way the questions were asked in the various studies. For example, in inquiring whether the respondent had consulted a *curandero/a*, this study did not limit the time frame to the recent past or ask whether consultation with a *curandero/a* is currently a regular part of the respondent's life. Given the varying estimates of utilization of the services of *curanderos/as* among Mexican Americans, it would be useful for future research to develop standardized questions on utilization for integration into all relevant research on Mexican Americans' cultural practices.

The finding that respondents who had consulted a *curandero/a* were more likely than those who had not consulted a *curandero/a* to approve of simultaneous treatment for folk illnesses can be interpreted several ways. It is possible that the respondents' experience with a *curandero/a* led to favorable views toward the practice of *curanderismo*. It may be more likely, however, that respondents who had consulted *curanderos/as* did so because their families already had positive views of *curanderismo*. Thus, having consulted a *curandero/a* could be viewed as a "proxy" variable, that is, an indicator of a type of family background that led to favorable attitudes toward simultaneous treatment of folk illnesses by medical practitioners and traditional healers.

The finding that respondents who attend church more frequently are less likely to approve of simultaneous treatment may seem odd given that spirituality is an integral part of *curanderismo*. A closer look, however, makes this finding more understandable. Although *curanderos/as* freely utilize religious symbols and images, for the most part this activity is not perceived favorably by representatives of organized religion (Richardson, 2006). Respondents who attend church frequently are more likely to be exposed to messages that cast doubt on the authenticity of the spiritual traditions within *curanderismo*. Thus, it is not surprising that respondents who attend church frequently (once a week or more) are more likely to disapprove of simultaneous treatment involving a *curandero/a* and a medical practitioner.

Lower generational scores, indicating less acculturation, were related to approval for simultaneous treatment of *susto*; however, generational scores were not significantly related to approval for simultaneous treatment of the other two illnesses (*mal de ojo* and *nervios*). One possible explanation for this apparent inconsistency is that generational scores may not be a good indicator of acculturation in a highly educated sample. In other words, higher education may accelerate the process of acculturation and override any effects of length of time (or number of generations) that a family has lived in the United States.

However, another possible explanation focuses on the differential nature and meaning of these three illnesses. As Richardson (2006) noted, touching a child to prevent *ojo* is a simple, positive action that does not interfere with standard health practices. Thus, beliefs and practices related to *mal de ojo* are likely to withstand acculturation. Indeed, in his survey of Rio Grande Valley residents, Richardson found that practices related to *ojo* were not related to generational scores; in other words, these practices did not decrease with acculturation.

Susto is a different story. *Susto* involves a belief that the soul leaves the body in response to a traumatic event and must be called back through various rituals or treatments. Because this belief system conflicts with a scientific worldview, it is likely to decline with acculturation. Not surprisingly, Richardson (2006) found that the frequency of engaging in practices to cure *susto* decreased with acculturation (as measured by generational scores). Similarly, the current study found that higher generational scores (showing

greater acculturation) were associated with less approval for simultaneous treatment of *susto*.

Manifestations of *nervios*, a syndrome not addressed in Richardson's (2006) study, are generally associated with reactions to stress and vulnerability to stressful events (APA, 2000). Acculturation is unlikely to affect the belief that stress is associated with illness; thus *nervios* does not have to be discarded in order to accept a Western worldview. Moreover, a more acculturated person may believe that consultation with a *curandero/a* may help provide the spiritual support a person with this syndrome may need. Thus, in short, greater acculturation would not necessarily diminish approval for simultaneous treatment of *nervios*.

6.3 Implications for Social Work Education

Many authors have argued that medical and mental health practitioners need to understand and respect *curanderismo* in order to work effectively with clients of Mexican descent (e.g., Applewhite, 1995; Guajardo, 1999; Harris, 1998; Tafur, Crowe, & Torres, 2009). Implicitly these calls for greater attention to the role of *curanderismo* in Latinos' health care practices are directed primarily toward members of the dominant ethnic group or other non-Latinos. The study described here, however, clearly demonstrates a great deal of diversity among Mexican American social work students in terms of their experience and attitudes toward *curanderismo*. Thus, the findings of this study highlight the importance of developing the knowledge and skills needed to connect effectively with clients across cultural differences even within one's own ethnic group.

The survey question in this study regarding approval of simultaneous treatment of folk illnesses by medical practitioners and *curanderos/as* was intentionally framed in terms of decision-making about the respondent's own health or the health of someone in the respondent's personal life. The purpose of the question was to assess students' personal beliefs because these may inadvertently and subtly affect their practice with clients, despite overt commitment to client self-determination. In light of the findings, it is important to address beliefs about *curanderismo* explicitly in training all social work students, including Mexican American students. Topics for exploration with students should include their prior knowledge and experience with traditional healing and how those experiences affect their current beliefs. Sensitivity to the impact of religious teachings and level of acculturation on beliefs about *curanderismo* is critical. This topic must be broached so that students can identify the sources of their beliefs and biases, and use self-awareness to avoid imposing their beliefs about *curanderismo*, whether positive or negative, on their clients. Being open to all aspects of a client's beliefs and experiences is extremely important because as others have noted (Tafur, Crowe, & Torres, 2009), clients are often reluctant to inform their health care providers about their alternative or complementary health care practices because of fear of disapproval. Yet, in order to address the needs and well-being of the whole person, social workers must create an environment in which people are willing

to share all their needs and concerns, including their cultural beliefs and practices.

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Hispanic Mothers of Sexually Abused Children: Experiences, Reactions, Concerns

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Abstract

Mothers play an important role in healing sexually victimized children by providing strength and support in the aftermath of abuse. This exploratory study focused on Hispanic mothers' experiences and perceptions after discovering abuse, their reactions to these events, and their concerns for the future. Almost half of the mothers had suspicions of abuse prior to learning about it and took action to learn more. Mothers were most convinced by their children's behaviors and most often hesitant to believe because the abuser denied the allegations. Concerns for children subsequent to the abuse experience ranged from the future in general to revictimization. Mothers' observations about changes in their relationships with their children included positive as well as negative changes. Implications for prevention and treatment are explored.

Keywords: Hispanic, mothers, childhood sexual abuse

There is extensive research on child sexual abuse in the United States. However, a gap in the literature remains regarding diverse populations with most studies focused on comparing rates of abuse or child outcomes based on cultural background (Feiring, Coates, & Taska, 2001; Kenny & McEachern, 2000). Results are often contradictory, partly due to the confounding variables related to other sociodemographic factors, such as income. While methodological problems, small studies, and an overall lack of clarity about interpreting study results persists, more research is needed to understand the experiences of marginalized groups in the United States.

As noted elsewhere, "Hispanic" and "Latino" are terms that often have been used interchangeably for a wide and diverse group of individuals from long-term US citizens to recent immigrants, from legal to illegal inhabitants and from many parts of the world (Fontes, 2007; Zambrana, Silva-Palacios & Powell, 1992). Although the most recent US Census data (July 1, 2007) claims that there are 45.5 million Hispanics living in the United States, this 15% of the US population includes a diverse range of Americans who identify as Puerto Rican, Mexican, Cuban and Dominican as well as others (U.S Census, 2007, para. 1). This multiplicity has been part of the difficulty in making sense of the

available data. Some studies reported higher rates of child sexual abuse among Hispanics in comparison to non-Hispanic Caucasians, African-Americans and Asians (e.g., Tzeng & Schwarzin, 1990), whereas others provide evidence that rates of child sexual abuse disclosure are similar across groups (Mennen, 1995; Priest, 1992; Shaw, Lewis, Loeb, Rodriguez, & Rosado, 2001). While some differences have been found based on ethnicity, most studies show remarkable similarity (Mennen, 1994, 1995, 2000, 2004; Wyatt, Loeb, Solis, & Carmona, 1999). Kenny & McEachern's (2000) review of the literature on ethnicity and child sexual abuse found that methodological issues probably result in these contradictory findings and, with no representative studies, no definitive conclusions can be drawn. In any case, with studies this old, and with scant recent research, there is little certainty about differences in child sexual abuse in different ethnic communities.

The National Longitudinal Study of Adolescent Health is a prospective cohort study that followed 15,197 young adults. Six racial and ethnic categories were used with Hispanics of all races and countries of origin combined into one category. In this study, Hispanic and Asian adolescents were more likely to report supervision neglect, physical neglect, and physical assault; however, when adjusting for other sociodemographic characteristics, especially poverty markers, these differences were no longer statistically significant. Family income was independently associated with increased supervision neglect, physical neglect and contact sexual abuse. Immigration was noted as straining families with 1/5 of U.S. children now living in immigrant families, but only supervision neglect was significantly associated with immigrant status after adjusting for other sociodemographic characteristics (Hussey, Chang, & Kotch, 2006).

Some studies have also examined who might be most at risk of being a victim or a victimizer based on ethnic differences. Most risk factors are consistent across ethnicities. The notable exceptions include: Hispanics may be more likely to be living with the perpetrator at time of the abuse (Rao, Ponton & DiClemente, 1992), to be abused by a biological father (Sanders-Phillips, Moisan, Wadlington, Morgan, & English, 1995) or parent figure (Feiring et al., 2001), and to experience abuse for a year or more (Feiring et al. 2001).

Although many of the short and long term effects for Hispanic children are similar to results for children from other ethnic groups, there are some differences. For Hispanic girls, but not European-American or African-American victims, abuse with penetration results in more symptoms than abuse without penetration (Mennen, 1995). There is some evidence that Hispanic children may be at particular risk of depressive symptoms (Mennen, 1995; Sanders-Phillips, et al., 1995; Shaw et al., 2001), internalizing symptoms (Feiring et al., 2001), anxiety and low self-esteem (Mennen, 1995) although other studies did not find any significant differences in symptom presentation for Hispanics (Clear, Vincent, & Harris, 2006).

Although these differences have yet to be fully explored and understood, specific variations related to cultural context may be at the root of

these discrepancies. Hispanic children and families may encounter additional cultural stressors such as poverty, language barriers, immigration difficulties including a fear of deportation and limited access to community resources (Hiott, Grzywacz, Arcury & Quandt, 2006; Smart & Smart, 1995). In her qualitative study of seven therapists and five Puerto Rican women who were sexually abused as children, Fontes (1993) identified cultural factors and norms that served as barriers to the disclosure of child sexual abuse. Systemic factors hindering disclosure included discrimination, migration, poverty, and a lack of bilingual services. Cultural factors inhibiting disclosure included childrearing norms and practices such as obedience and corporal punishment, the importance of premarital virginity and the maintenance of taboos against discussing sexuality (Fontes, 1993). In a study comparing Hispanic and African American families, 159 girls and their parents were surveyed. Hispanic girls experienced more abuse and waited longer to disclose (Shaw, et al., 2001). Hispanic girls were also significantly more likely to be abused by fathers and stepfathers than were African American girls (Shaw et al., 2001). A study of Latina and African American women revealed gendered variations in the definitions of child sexual abuse (Fontes, Cruz, & Tabachnick, 2001). While women spoke about the abuse in terms of the child's loss of innocence, men defined the abuse in terms of specific sexual acts (Fontes et al., 2001). Lowe, Pavkov, Casanova and Wetchler's (2005) study of 179 White American, African American and both White and non-White Hispanic American undergraduates revealed that all groups had comparable definitions of child sexual abuse, however, they found that Hispanics were more likely to recommend making a report to legal authorities.

Nonabusive mothers of sexually abused children from all ethnic backgrounds have been identified as playing a critical role in protection and healing in the aftermath of sexual victimization. Several studies indicate that maternal caretaker response to the child after abuse disclosure may be one of the key ingredients to the child's adjustment post-abuse (Cohen & Mannarino, 1996, 1998; Corcoran, 1998, 2004; Everson, Hunter, Runyon, Edelsohn & Coulter, 1989; Rubien, 1996). Yet, there has been little inquiry into the experiences of mothers of sexually abused children in minority populations. While there is acknowledgement that nonabusive mothers are a heterogeneous group, details about how they may be the same or different based on distinctive cultural backgrounds or values has received little empirical attention. One study comparing European American, African American and Hispanic families discovered that for Hispanic children, but not the other groups, high abuse severity was related to lower levels of satisfaction with caregiver support (Feiring et al., 2001). Hispanic children were found to be less likely to receive maternal support subsequent to sexual abuse than were African-American children (Sanders-Phillips et al., 1995) and in perceiving that lack of support, Hispanic children may be less willing to report abuse (Rao et al., 1992).

Attitudes about sexual abuse, including what should be considered abusive, is also seen as varying by culture. Religious attitudes have also been

deemed important in ascribing meaning to the event of childhood sexual abuse, as well as appropriate responses to it. Alaggia (2001) found in her qualitative inquiry that mothers with strong religious influences (in this case, primarily Catholic) and cultural values adhering to rigid patriarchal norms struggled with loyalty between their children and partners after abuse discovery. McGuffey (2005) suggested that the rampant mother-blaming found across ethnicities in cases of sexual abuse, even extrafamilial abuse, is deeply imbedded in cultural mores that reaffirm strict gender roles and emphasize the “traditional” role of ideal mothers. Comas-Dias (1995) reports that in Puerto Rican culture, mothers are held responsible for the behavior of their offspring, including being victimized by sexual abuse.

Research also illustrates an ongoing interest in the role of shame in the perception of and recovery from child sexual abuse for the victims (Aslund, Nilsson, Starrin & Sjoberg, 2007; Feiring, Taska & Lewis, 2002; Fontes, 2007; Kim, Talbot & Cicchetti, 2009). In one retrospective study comparing Hispanic and Anglo women in a medical clinic waiting room, more self-blame was discovered in the Hispanic sample of sexual assault victims (Katerndahl, Burge, Kellogg & Parra, 2005). Lewis (1999) suggests that the Catholic religion shared by many Hispanic ethnic groups may also result in more shame and self-blame in these groups, although shame was *not* significantly higher in Hispanic groups in at least one other study (Feiring et al., 2001). Indeed, the convergence of cultural pressures driven by shame, religion, taboos regarding sexuality, traditional gender roles and the importance of premarital virginity may help illuminate the unique challenges of Hispanic families affected by child sexual abuse.

The current study is a replication of research undertaken with a population that was primarily Caucasian and African American. The purpose of this descriptive study was to gather exploratory data from Hispanic mothers regarding their perceptions and concerns after learning of the sexual abuse of their children.

Sample

This study of 45 nonabusive maternal caregivers was conducted with a Hispanic population in a southwestern border town. Legal status of the families was unknown, but an ongoing connection with relatives in Mexico was the norm. Maternal caregivers of sexually abused children were recruited at a clinic that specializes in treatment of abused children. Most of the participants spoke Spanish as well as English, although only ten respondents elected to use the Spanish-language survey. Mothers included in the study described themselves as Mexican American (37.8%) or Hispanic/Latina (62.2%). A total of 54 women were recruited for the study, five of whom were white, one was African American and three were Native American. These nine respondents were excluded for the purposes of this study due to the focus on Hispanic mothers. “Mothers” is used in this article to describe all primary maternal caregivers even if not biological mothers to the abused child.

There was a wide range of both education and income levels. About one third of the mothers had some college with two (6.6%) having a bachelor's or master's degree. However, 19 mothers (42.2%) had less than a high school diploma. (See Table 1). The source of income for these mothers was full-time work for about one-third (31.1%), with 22.2% relying on welfare income and 13.3% receiving income primarily from their husband or male partner. Incomes were low, with one third (15) having household incomes between \$10,000 and \$20,000 per year.

Table 1
Sample Demographics

Variable	Number	Percentage
Household Income		
Under \$5000	12	26.7
\$5-10,000	10	22.2
\$10-20,000	15	33.3
\$20-30,000	5	11.1
Above 30,000	3	6.6
Education		
Grade 6 or less	5	11.1
7-8 grade	4	8.9
9-11	10	22.2
HS graduate	8	17.8
Some college	13	28.9
Associates degree	2	4.4
Bachelor or Masters degree	3	6.6
Age of Abused Child		
0-6	10	22.3%
7-11	19	42.2%
12-15	11	24.4%
16-18	5	11.1%
Mother's Relationship to Offender*		
Husband/Partner	7	15.5%
Ex	8	17.8%
Other relative	10	22.2%
Known non-relative	17	37.8%
Stranger	3	6.7%

**In cases where there were multiple offenders, data reflect the closest relationship to the mother.*

Note: Where percentages do not total to 100%, there was missing data.

Procedures

This research was a collaborative effort between a university professor and colleagues at a nonprofit agency in a city bordering Mexico. It was designed to focus on Hispanic mothers by replicating a study originally completed in the Midwest. The collaborators worked together to make certain the previously used instruments were adapted for cultural sensitivity and linguistic understanding. Two translators, one from the university and one from the local agency translated materials from English into Spanish with discrepancies resolved through mutual agreement. Standardized procedures and fidelity to the research protocol were assured through training all personnel together and using role plays to practice for contingencies.

Mothers were invited to participate through fliers provided to therapists and posters in clinic waiting rooms. Each eligible participant, those serving as the primary female caregiver to a sexually abused child, could voluntarily determine if and when to participate in this study. The survey completion could range from several weeks after first hearing a report of abuse up to as long as a child was receiving therapy or up to 2 years. The study was approved by the University Internal Review Board (IRB). The survey instrument was designed to be read at a fourth grade level and those needing assistance due to reading or language difficulties were provided a translator or someone to read the instrument to them. Mothers were permitted to select an English or Spanish version of the survey. After volunteering for the study, no mothers refused nor were there any incomplete responses. Researchers were present with the mothers in a conference room and were available to orient them to the procedure and explain confidentiality and informed consent. Mothers were provided with local referrals if they had any questions or experienced any distress due to the study. In addition to demographic questions, mothers provided information on the abuse, their own reactions, and their concerns for the future. Mothers were also asked to reflect on how their parent/child relationship had changed subsequent to learning of the child sexual abuse.

Data analysis included descriptive statistics as well as correlations and independent samples t-tests. To deal with missing data, subjects were excluded from unanswered questions unless it was part of a scale; in those cases we used the mean score on the scale to be able to include them even if they had omitted answering one or two variables.

Measures

Questions investigator-designed expressly for this study were mostly closed-ended and based on frequently provided responses in prior focus group studies with nonabusive mothers of sexually abused children (Plummer & Eastin, 2007). Questions were designed with input from professionals who worked with the mothers in the clinical settings. The instruments included:

Demographics: ethnicity, education, age, income source, income amount, marital status, relationship to child victim, relationship to alleged perpetrator.

Abuse-related information: age and gender of victims, types and numbers of sexual offenses, relationship of offender to victim, age and gender of offender, use of force, bribes, threats.

Disclosure/Discovery of Abuse: These questions included any time before knowledge of abuse that “you were concerned that something wasn’t quite right”?; actions taken when concerned (checklist of watched things closely, confronted offender, talked to relatives, etc.); level of certainty of abuse (Likert scale 1-6); checklist of what made more or less certain abuse occurred.

Future Concerns: This was measured using a checklist (i.e.: aggression, revictimization, ongoing safety, difficulty in school, etc.) and by analyzing qualitative data from an open-ended question, “Is there anything else you would like to tell us about your experience?”

Relationship Changes: This was measured using a checklist (i.e., conflictual, appreciative, closer, distant, communicative, etc.) delineated with a Likert scale to indicate level of change (1-3, less – more) and by analyzing qualitative data from the open-ended questions, “Is there anything else you would like to tell us about your experience?” The Relationship Change Scale was broken down into Positive (8 items) versus Negative (5 items) Relationship Change subscales. The internal consistency of each subscale was tested using Cronbach’s alpha (Positive=.796; Negative=.817).

Results

Abuse Details

The age ranges and the male/female breakdown of victims were similar to other studies. Seventy one percent of the abused children were female and 29% were males, abused alone or with one other child of the same gender. Eight of the mothers had more than one child who was sexually abused. Victims were of various ages (See Table 1). The relationship of the maternal caregiver to the child included 88.9% biological mothers with the rest being grandmothers (2), or other female relatives (3).

The relationship of the mother to the perpetrator was husband or partner (15.5%); ex-husband or ex-partner (17.8%); and known non-relative (47.8%). Only 15.6% of the children were sexually abused by their biological fathers and 8.9% were sexually abused by their stepfathers. One third (33.3%) of the suspected offenders were non-relative adults, such as family friends or acquaintances. Most of the alleged offenders were male (88.9%), and most abused alone (82.2%), but in 9% of the cases the mothers did not know if there was more than one offender or not. Thirteen percent of the mothers said the perpetrator was age ten or younger. Eleven percent (11%) of offenders were eleven through nineteen years of age. Eighteen percent of offenders were aged 20-30, 24% were 30-40, and 26.6% were over age 40. The age of 6.7% of the offenders was unknown to the respondents. Twenty percent of the offenders were non-Hispanic Caucasians. Sixty-five percent of the offenders were White and non-White Hispanics.

The most common types of abuse experienced by the children according to maternal reports were: 44.4% fondled below waist; 22.2% penis in vagina; 17.8% fondled above waist; 17.8% finger or object in vagina; 17.8% seeing a person naked; 15.6% touch; 15.6% kiss; and 13.3% finger or object in anus. Many children experienced multiple types of abuse.

Mothers were generally uncertain about whether or not their children were subjected to bribes or threats. Nearly 16% percent of the mothers knew their children were bribed to keep the abuse a secret most frequently with money or gifts. However, a full 37.8% said they did not know and an additional 8.9% said they suspected but were uncertain about a bribe. As for threats, 40% of the mothers said their children had been threatened to keep the abuse a secret. The most frequent threat was that the child would be blamed (13%), and 11% of the children were told their parent would be hurt, their disclosure would break up the family, or that they would be taken away from their family, or all of the above. Physical force was used against 22.2% of the children, according to the mothers. An additional 8.9% of the mothers said they suspected force was used and a full one third said they did not know if force was used. Of the incidents characterized by force, 20% included the child being held down while being abused. A few children were reportedly slapped, punched, or given drugs.

Maternal Suspicions and Discovery

When asked if they had ever had a time before they knew of the abuse where they suspected that something “wasn’t quite right”, 44.4% agreed, but 13.3% of the respondents stated they did not remember. Once they had any of these vague suspicions, the most common response was to talk to the child (68.9%) and half as many (31.1%) said they watched the child more closely (See Table 2). The mean number of actions taken when there was a suspicion was 2.2 actions.

Table 2

Actions taken by mothers believing something was “not right”

	New Mexico Frequency/Percentage	Midwest Frequency/Percentage
Talked with child	31/68.9	82/65.6
Watched “things” closely	14/31.1	49/39.2
Confronted suspect	13/28.9	37/29.6
Sought more information	9/20	39/31.2
Talked with relatives	9/20	32/25.6
Avoided contact with suspect	9/20	21/16.8
Talked with friends	5/11.1	29/23.2

Fifty three percent of these mothers said they completely believed that what happened was true, whereas 20% were not at all certain or had very little certainty. Asked what increased their certainty of the abuse, 62.2% stated the child’s behavior and 51.1% said the child’s emotional reactions. Interestingly, only 44.4% mentioned being convinced most by the child’s report of abuse (See Table 3). In examining the relationship of maternal education on certainty, there was a significant positive relationship between educational level and certainty that abuse had happened ($p=.05$).

Table 3
Evidence convincing mothers that sexual abuse did occur

	New Mexico Frequency/Percentage	Midwest Frequency/Percentage
Behavior of Child	28/62.2	83/66.4
Child's Emotions	23/51.1	75/60.0
Disclosure of Child	20/44.4	92/73.6
Therapist's Opinion	9/20	46/36.8
Judge's opinion	8/17.8	18/14.4
Medical examination	6/13.3	28/22.4
Other's concerns	6/13.3	31/24.8
Abuser's behavior	5/11.1	44/35.2
Abuser's disclosure	5/11.1	32/25.6
What I witnessed	3/6.7	38/30.4

Uncertainty about the abuse increased based on the following: offender denial, would/should have known, disbelief of other family members, feeling she "knows the abuser," and the child's story changing over time (See Table 4). Only two of the respondents reported they did not believe sexual abuse happened by the time they filled out the survey. They were both biological mothers to the children. In one case the alleged perpetrator was an ex-partner. In the other, the alleged perpetrator was another child to this mother. Twenty-four percent of the mothers stated they have always believed the abuse happened.

Table 4
*Variables increasing uncertainty about whether abuse occurred**

	New Mexico Frequency/Percentage	Midwest Frequency/Percentage
I would/should have known	9/20	32/25.6
Abuser denied	12/26.7	26/20.8
What I know of abuser	6/13.3	25/20.0
Child's story changed	6/13.3	17/13.6
Family didn't believe	6/13.3	15/12.0
I'm always around	4/8.9	13/10.4

*Some mothers denied having uncertainty.

Maternal Reactions and Experiences

Mothers felt guilt about what had happened to their children, with 73.3% still feeling guilty and 11.1% stating they didn't feel guilt now but had in the past. The main reasons for feeling guilt were listed as: I didn't protect (60%), I didn't know (57.8%), I didn't notice the signs of abuse (44.4%), the child didn't tell me sooner (42.2%) and I picked the abuser as a partner (22.2%).

Mothers shared a variety of observations about the changes they noticed in their relationships with their children since the allegations of abuse were revealed. Although many mothers in the sample described negative changes, many also described the changes in the relationships with their children as positive. Over three quarters of the sample (77.4%; N=41) indicated that they were much more protective of their children since the abuse (See Table 5). Some mothers elaborated on their answers by writing comments about their observations in the space provided on their surveys. One mother stated, "I've changed easily against my husband. I'm very worried about my daughter. I don't trust the majority of people. When she goes to school I always go with her." Another participant shared, "We are all blown away that something like this happened. I'm more careful with my family now."

Table 5

*Mothers' perceived changes in their relationships with their children.**

	Frequency NM	Percentage NM
Positive Changes		
More protective	41	77.4
More aware of child's needs	32	60.4
Grew closer	29	54.7
More time together	29	53.7
Better communication	28	52.8
Greater respect	25	47.2
More trusting	21	38.9
More appreciative	21	38.9
Negative Changes		
More tense or nervous	22	41.5
More conflictual	21	39.6
Child more difficult to handle	20	37.7
Greater uncertainty	17	32.1
More distant	11	20.8

*Responses add to more than 100% because mothers were instructed to "check all that apply".

Other positive changes in the parent/child relationship included feeling more aware of their children's needs (60.4%), growing closer (54.7%), and spending more time together (53.7). The qualitative data provides further

elaboration with the following example: A Mexican/Filipina single mother of a two year old who was abused by an adult non-relative (who gave the child alcohol in order to abuse her) observed, "I personally appreciate my children more yet never let my guard down when it comes to trusting anyone".

Not all of the observed relationship changes were positive. Negative changes reported by mothers included more tense and nervous in interactions (41.5%), increased conflict (39.6%), and the child becoming more difficult to handle (37.7%).

Mothers expressed a variety of concerns about their children's futures. The areas of most concern were: future in general (40%), future relationship problems (37.8%), difficulty in school (37.8%), peer/social problems (33.3%), aggression (28.9%), sexual acting out (26.7%), re-victimization (24.4%), ongoing safety (22.2%), other developmental issues (15%), and future sexual difficulties (13.3%). These themes were further expressed in the qualitative data regarding relationship problems: A 28 yr old divorced Latina mother has a preschool daughter who was abused by her brother (another child of this mother), under age 10. She fears her daughter may have "sexual acting out and future sexual and relationship difficulties, especially that she will associate sex with obligation, love, and acceptance." Note: Her daughter is less than 4 years old. A Mexican American aunt/foster mom, aged 37, speaking of a girl abused by her stepfather states, "I want her to be close to a person she is in love with."

Other mothers spoke of potential depression:

A Mexican American mother has a 9 yr. old son who was abused by her ex-husband and his current wife, the child's stepmom. She reports "he hasn't said anything but his actions, behaviors, and emotions are very worrisome. He wants to die"

"My daughter (15) says he touched her and her cousins and I took her to get checked with a doctor. I'm not sure it happened. I didn't leave them for a long time---just to go to the store. She's very distant and locks herself in her room and really doesn't like to talk" wrote a 31-year-old Latina mother.

Another mother states about her 10 yr. old who was abused by a man in his late 20's, "My daughter is in her own little world and won't talk much"

Regarding the future safety for a child, one Latina mother of a 10 year old son who was abused by his biological father who fondled him stated that she has concerns about his ongoing safety and has a restraining order against the abuser.

Additional comments provided by the qualitative data described maternal caregiver upset with system inaction and her distress including distrust and over-protectiveness:

A Hispanic mom, age 27 with some college had a 9 yr. old girl who was abused by an ex-partner. She says, “I don’t have or want a romantic partner.” She reports that her child experienced both vaginal and anal intercourse and oral sex. She discusses coping by going to Catholic Church with her daughters and “I talk to my brother about how I feel”.

“Not even the Sheriff Dept helped me with the verbal abuse that my children encountered. I didn’t know about the sexual abuse until the abuser moved out.”

A single grandmother, aged 47, used these words to describe the aftermath of her grandson’s abuse by another preschooler:

“The abuse occurred at a caregiver’s home where other children were being cared for. I was upset, angry & concerned with the lack of concern and disbelief of the caregiver that this would occur in her home. I was also not very pleased with the way the investigation was handled by CPS worker and the authorities. As for the therapy aspect, child received therapy but every now and then an incident may occur and he is referred back to therapy but therapists feel he does not need the service. I feel this experience will always have an affect on the child as well as when he goes into his adult years.”

Discussion

Reflective of a growing concern voiced by child abuse researchers (e.g., Behl, Crouch, May, Valente & Conyngham, 2001; Fontes & Faller, 2007; Ramos Lira, Koss, & Russo, 1999), it is possible that diverse cultural groups deal differently with understanding sexual abuse, have distinctive concerns about it and have unique service provision needs after abuse is discovered. This article provides descriptions of a group of Hispanic maternal caregivers with children under their care who were sexually abused.

Because this was a replication of an original study in the Midwest, comparisons may be useful (Plummer, 2006), but with some cautionary caveats. It should be noted that several differences may compromise the usefulness of comparisons. More specifically, the data were not collected simultaneously and the Midwestern sample had a significantly higher income and was more highly educated than the New Mexico participants. As a descriptive study that did not have a representative sample or control group, this research does not generalize to the broader Hispanic community, although it may engender new research questions and clinical issues.

Demographics showed lower income and less education for these maternal caregivers than those from the Midwestern study. Compared to the Midwest sample (NM/Midwest%), this sample was more likely to have an income of under \$10,000 (48.9/31.2%), less likely to have a family income of over \$30,000 (6.6/37.0%) and less likely to have graduated from high school (57.7/80.2%). However, it may be premature to disregard the data since this disparity may reflect real overall differences between Hispanic families and others in the United States. In many other categories, in fact, there were

similarities. Ages of abused children showed that 22.3% of both the Midwestern sample and the New Mexico sample were under age seven, with 42.2% of this Hispanic sample and 43.2% of the Midwestern sample being between ages 7 and 11 years. Results showed that both samples were comparable (NM/Midwest) regarding the relationship of the maternal respondent to the alleged perpetrator: husband partner 15.5/20.0%; ex-partner or ex-husband 17.8/19.2%; and strangers 6.7/3.2%. However, there was more of a difference in experiences with other relatives and known non-relatives. In this sample, abuse by known non-relatives was higher 37.8% to 24.8%, but abuse by other relatives was less than in the Midwestern sample (22.2% to 32.8%).

Mothers in this study reported similar abuse-related information to those in the Midwestern study, including the age and gender of both victims and offenders, relationship to the alleged offender, numbers of offenders, and the types and numbers of abusive activities. As in the earlier study (Plummer, 2006), nearly half of the mothers in this replication study had a prior uneasiness that something was amiss. Similarly, many chose to talk with their children and watch things more carefully. Nearly 1/3 chose to confront the offenders with their concerns as in the original study. Because mothers are unlikely to know how to respond to their suspicions and some actions (such as confronting a suspected offender) may create more harm and compromise legal proceedings, clinicians need to assist mothers in awareness of how to respond if suspicious. This study confirms that maternal caregivers who identify as Hispanic, non-Hispanic Caucasian or African American all struggle with prior suspicions and how to determine what has occurred.

Hispanic mothers reported less certainty about the abuse occurring at significantly higher rates than the Midwest sample ($p=.006$). There was also a correlation in the sample between education and income ($p=.02$), and educational level and certainty about the abuse ($p=.03$). Asked what increased their certainty of the abuse, 62.2% stated the child's behavior. Fifty-one percent attributed their convictions to the child's emotional reactions which were at a rate of 15% less than that of the Midwest sample (66.4%). Interestingly, only 44.4% mentioned being convinced most by the child's report of abuse, compared to 74% of mothers in the Midwest sample. Further research should examine to what degree the perceived veracity of child reports of abuse impact Hispanic mothers. The mothers in this study also were only half as likely as the Midwest sample to feel they "should have known" (20% versus 41%). While both samples were similar in some responses regarding their discovery process, this sample was less likely to report they doubted the abuse because they "know the abuser," and that the "child's story changed." However, this sample was more likely to be hesitant to believe because of the offenders' denial than for any other reason. In trying to better understand this finding, it is important to consider that for many Hispanic families, there are tremendous cultural values placed on loyalty and respect for the extended family and family unity (Ramos Lira et al., 1999). Recognition of these potential barriers to belief may help direct clinical inquiries and interventions.

Another area worthy of consideration is that these mothers lacked much information about the details of the abuse. This could affect their likelihood to believe the allegations of abuse as well as undermine their abilities to fully support their abused children. For example, many mothers did not know if force was used, if bribes were used, or even how many offenders were involved. Wherever possible, clinicians may want to fully involve mothers in the healing process by making certain they are more fully informed of the abuse. Further, additional research should examine if more knowledge about the abuse assists mothers in believing the abuse.

Feelings of guilt reported by maternal caregivers stemmed from the realization that they did not know of the abuse sooner and they did not protect their children. In order to be most effective, clinical interventions should address maternal guilt feelings within the context of societal pressures experienced by mothers more generally in addition to the specific cultural demands experienced by Hispanic mothers.

A nonsignificant trend that may be worthy of further investigation was the finding that maternal caregivers with more education reported greater negative relationship change with their children in the aftermath of sexual abuse. Future research should examine the likelihood that knowledge of potential harm from child sexual abuse may enhance maternal sensitivity to negative outcomes, create expectations for negative outcomes, and even fuel the perception of negative outcomes in the mother/child relationship.

The multiple positive relationship changes reported by maternal caregivers provide an excellent opportunity to assist mothers who have just learned about the allegations of sexual abuse. Indeed, if mothers can anticipate the potential for positive change in their relationships with their children, they may be better able to support their children in the aftermath of abuse. Additionally, mothers may be better equipped to handle difficulties with their children and conflict because they perceive it as a normative part of the healing process.

Concerns of mothers for their sexually abused children focused mostly on the future, relationship (peer and future romantic) issues, sexual issues (including sexual acting out or misconceptions about healthy sex), school or learning problems, and aggression or behavioral problems. In many Hispanic families, the emphasis on virginity before marriage and the taboos related to speaking about sexuality may serve as additional motivators for mothers' worries about their children in the aftermath of abuse. It is important that these concerns be acknowledged in planning interventions to help mothers dispel misinformation about what to anticipate, help resolve concerns, and build maternal competencies to deal with problems if they occur.

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Lessons from Latina Leaders: Dialogical Action in Community Practice

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Abstract

The well being of children and families in low income communities often depends on the ingenuity, leadership and strategic action of the women of the community. Three Latina leaders involved in successful community organizing in Texas *colonias* were interviewed to discover the methods they used to achieve remarkable results ranging from securing basic services to the creation of numerous education and service programs for children and families in their communities. The elements found at the core of their work reflected the humanism and dialogical action described by Paulo Freire in his seminal work, Pedagogy of the Oppressed (1968).

Keywords: Latinas, women leaders, *colonias*, Paulo Freire, community practice, community organizing

Those who have worked in low-income Latino communities often witness the emergence of indigenous women leaders who encompass the spirit, wisdom and strength of the community. Although these women are mentioned sporadically in the social work literature, their contributions are recognized only in the context of understanding the target population or assessing community needs (Netting, Kettner, & McMurtry 2004). They are relegated to the role of key informant or neighborhood leader who can support the dominant role of the macro social work practitioner in attempting to change the economic, political and social landscapes of these communities. Albeit unintentionally, the leadership of these women is often marginalized or at least overshadowed by that of the enthusiastic social worker who may be armed with lengthy agendas and strategies for change. Thus, there is a critical need for a deliberate and reflective consideration of the essential role of these indigenous women leaders in Latino community empowerment practice.

This paper responds to the need to re-examine the role of Latina indigenous women leaders by examining the characteristics of three indigenous women leaders working in the *colonias* of the Rio Grande Valley. *Colonias* are rural, often isolated communities located along the Texas/Mexico border, home to thousands of Mexican Americans living in poverty. Our purpose is to offer a theoretical framework for recognizing and understanding the leadership of these indigenous women. Perhaps more importantly, we hope to provoke critical reflection about the role of macro social work practitioners in low income communities while offering guiding principles derived from the leadership approaches of these women leaders. By documenting and analyzing the

leadership principles used by these women, the paper joins a growing body of scholarship that challenges traditional views of leadership and expands the knowledge base of community practice.

Traditional (predominantly male) theories define leadership in terms of formal managerial or public roles and focus on the acquisition and use of power. Leadership ability or potential is defined in terms of attributes, characteristics and skills that are often described by adjectives such as strong, tough, decisive and in control. In contrast, feminist theories of leadership argue that women's leadership emerges from their roles in families, neighborhoods and communities. Women's leadership has been characterized as decentralized, egalitarian (nonhierarchical), supportive of others, participatory, and involving a high degree of communication (West and Blumberg 1990; Bookman and Morgen 1988). This relational as opposed to individual conception of feminine leadership is consistent with women's roles as wives, mothers, neighbors and community volunteers and the values that correspond to those roles—understanding, nurturance, cooperation and service.

Our study of the leadership attributes of indigenous women leaders in low income Rio Grande Valley communities focuses on community organizing efforts in the *colonias*, communities where living conditions rival those found in Third World countries. We conducted videotaped interviews of three Mexican American women leaders working in the *colonias* of Hidalgo and Starr counties to determine elements in their leadership that could account for their effectiveness as leaders in these communities. All three of them were tied to successes in their communities that ranged from securing basic services, such as electricity, street paving and sewer systems to the creation of numerous education and service programs for both children and adults. The women leaders were simply asked to tell us about their work with the residents of the *colonias*, including their greatest challenges and satisfactions, how they organized to address basic needs of community residents and what sustained them in their work.

The Women Leaders and their Organizations

Each of the three women leaders we interviewed had worked as volunteers in their communities for many years, active in informal community groups and associations formed to address community problems and social injustice. As a tribute to their successes and effectiveness as community organizers, each of them is now gainfully employed in responsible administrative positions that allow them to continue their work through formally recognized paid employment.

Juanita Valdez Cox was a volunteer for the United Farm Workers of America, AFL-CIO (UFW) in Hidalgo County for twenty five years before founding the local chapter of LUPE – La Union del Pueblo Entero (The Whole Community's Union). LUPE is the brain-child of the late Cesar Chavez, who envisioned a community union of people banding together to improve not only their working conditions, but also the quality of their lives. As Director of the

Rio Grande Valley chapter of LUPE, Juanita now receives pay to continue the work she began twenty-five years ago. She is passionate in describing the work of LUPE:

Now with La Union Del Pueblo Entero, we're... concentrating on the whole community. Cesar also knew that our problems were not only in the workplace, it was in the community. What are we going to do about the problem that there is no day care for children? How do we figure out the problem that housing isn't available? How do we figure out that there are no streets in the *colonias*, or no libraries in the *colonias*, or no tutoring classes for children in the *colonias*, or there are no ESL classes for people, for adults, no opportunities to get their GED's.

Ramona Casas also addresses the problems in the *colonias* of Hidalgo County by working for the development of families and indigenous women leaders as a Coordinator for Project ARISE. After explaining that her work with the organization began as a *colonia* resident attending classes and group meetings, she articulates her personal connection with the work of her organization:

One of the values of our organization is that we will not do for the people what the people have to do for themselves. We do not take responsibilities in our hands, no, we know the needs of our community and together, we work to help each other and ask, who can help improve the lives of the families and the community. I arrived in this country many years ago; I am an American citizen. From Mexico, I barely had my elementary school certificate, but now I can say that the wall in my room is full of education certificates that I have received in my organization and certificates from other organizations, other institutions that have recognized all our training and now have certified us as people working for families in peaceful communities.

Blanca Juarez is founder and President of Colonias Unidas in Starr County, Texas. She is currently the Colonias Ombudsperson for Starr county *colonias*, one of the positions created through state legislation to assist the Texas Secretary of State's Office in its work to coordinate public resources to *colonias* in five major border counties. Blanca speaks proudly of her organization:

Colonias Unidas is a non-profit organization started around 1988. We started meeting to bring all the people together because there was no water [in the *colonias*]; it was due to

necessity. One of my greatest satisfactions is all the programs we've been able to bring, not just to Las Lomas [her own *colonia*], but also to all the *colonias*, because all the *colonias* benefited.

Latina Leadership in the Context of Previous Research

Analysis of the interviews revealed both commonalities and differences between these three Latina leaders and the women leaders whose experiences are captured in previous research (Bookman and Morgen, 1988; West and Blumberg, 1990; Faver, 1994, 2004). In terms of commonality, the Latina women leaders' pathways to leadership derived from their roles as family members, workers and volunteers. Advocacy and empowerment strategies were integrated into the planning and delivery of social services. In addition, as with other women leaders, their activism was a personal source of empowerment.

Very little research has focused specifically on the factors that motivate and sustain women leaders. One study (Faver, 2004) examined 50 women leaders who worked for social change as service providers or social reformers. The women were all members of a particular Christian denomination and resided in a rural area of a southeastern state in the U.S. Perhaps most importantly, all the women in Faver's (2004) study were middle-class and all except two, who were African-Americans, were Anglo (White non-Hispanic). Thus, these women occupied a very different "social location" from the low-income Latina women in south Texas. To put it bluntly, the middle-class social activists were privileged by social class and in most cases, by race. As we know, social location shapes life experiences which in turn influence beliefs, attitudes and values.

The middle-class women in Faver's (2004) study also differed from the Latina leaders in the nature of their work. All three Latina leaders were working with communities to improve the basic conditions within the community and to facilitate the development of community members. In contrast, the fifty middle-class women were working in diverse settings. Some were employed as social service providers or community workers while others were volunteers. Some were members of the community they were serving, while others worked from outside the community. For example, one participant in the study was a peace activist; thus, she was working on behalf of her own well-being as well as that of her entire community and the world. Two participants who were working for equal rights for the gay and lesbian community were themselves lesbians. Thus, they too were working to help themselves as well as others in their community of interest. Yet, the majority of the middle-class women were working to help people whose life conditions they did not share. For example, a number of the middle-class women were involved in anti-poverty programs or services. Clearly, the middle-class women felt *connected* to those who were engulfed by poverty and they believed that inevitably the whole community suffers by allowing poverty to persist. Yet, the middle-class women did not directly

experience the daily grind of poverty and the struggle to survive that dominates the lives of people whose basic needs are not adequately met.

All three Latina leaders in the current study are members of the communities in which they work and are strongly identified with the plight of the community members. They identify with the community members' experiences because "they have been there" and in some ways, are still there. They still reside in the communities they serve, but they have become more financially secure, gained additional education, and most importantly, they have a sense of efficacy and empowerment. They are convinced that what they have gained should be available to all in their communities and are committed to facilitating the empowerment of the community as a whole.

Against this backdrop, we can compare the middle-class women and the Latina leaders in the factors that motivated and sustained their work for social change. Specifically, the middle-class women were motivated (1) to ensure people's rights to respect and dignity, equal opportunity, self-determination, and basic necessities; (2) to fulfill a sense of responsibility to care for people and the environment; (3) to pass on opportunities and gifts they had received; (4) to redistribute resources and power; and (5) to restore relationships and build community, that is, to bring people together from diverse backgrounds and foster awareness of interdependence. In contrast, the initial motivating factor for these low-income Latina leaders was necessity, pure and simple. Since their community's needs were no different than their own, advocating for themselves meant advocating for their community. For these leaders, ensuring people's rights to respect and dignity, equal opportunity, self-determination and basic necessities were simply byproducts of the essential efforts to survive the potentially life-threatening problems in their *colonias*. These differences show how social location shapes experiences and attitudes.

The middle-class women were sustained by (1) their spirituality, that is, their relationship with God and their spiritual experiences and practices; (2) their relationships with other people, including their relationships with supportive communities within the workplace and church and their relationships with the clients they served; and (3) their connection to the work itself, reflected in a sense of calling, a sense of responsibility, and a sense of efficacy based on success or effectiveness in their work of helping others. The low-income Latina women were consistently sustained in their leadership by the reality of their own membership in the community they served. They had a strong sense of necessity to change the conditions of their communities against the enormous odds they faced. They too had a sense of efficacy; they had witnessed change and they believed more change could and must occur. Each of the Latina women expressed this in her own way. For Juanita, the expression "Si se puede!" (You can do it!) induced a distinctively personal response as she reflected on its significance:

We're going to have to change many things, and it's not going to be easy, and along the way, probably every single step,

people are going to tell us, “you’re not going to be able to do it, you can’t do it, you’re farm workers, you’re migrant farm workers, you’re low-income people, you can’t do it.” And we’ve got to believe this in our heart, so much that we’re going to tell them, “you know what, it’s a matter of time... we’re going to do it, we’re going to get it done, we are going to be a big, major part of the solution, and we’re going to build healthier communities for ourselves, and for our children, and it’s going to be a different world because we will be able to do it.

Ramona is sustained by the inevitability that a constant stream of immigrants would continue to come from Mexico to live in her community. She was acutely aware that these were people who, as in her own experience, would face isolation, maltreatment and stigma, and she wanted to be there for them. Blanca recalls that as a child in the fields of California, she was exposed to the maxim of Cesar Chavez and Dolores Huerta, “Si se puede!” Today, she is sustained by mere glimpses that some of the youth in her community will follow in her footsteps, insuring a better future for themselves and their families. For Blanca, the involvement of youth in her community work affirms that she is “doing something right.”

The salient factor that characterized the interview responses of the Latina women leaders was their identification with the community and the people in it. They see themselves as part of the community, not separate from it. Perhaps as an extension of their own confidence, they firmly believe in the people’s ability to solve community problems. In terms of their goals, the self-development of the people in the community is paramount. Accordingly, process is more important than results. Their responses reflect their conviction that without the presence and participation of the people in problem solving, collective decision-making and action, the community will not thrive and community members will not experience personal growth. The women leaders trust and respect community members and are humble about their own contributions to the change process.

We began our analysis by examining the leadership characteristics and methods of these women leaders against the backdrop of both traditional leadership and feminist conceptions of leadership. Upon further reflection, however, we began to see parallels between the leadership approaches of the women and the “genuine humanism” and revolutionary methods of revolutionary leaders in Latin America identified by the renowned Brazilian educator, Paulo Freire. Because the parallels are striking, we believe Freire’s dialogical action theory offers a relevant framework for recognizing and understanding their leadership.

Framework for Latina Leadership: Freire’s Dialogical Action

The theory of *dialogical action* was advanced by Paulo Freire in his seminal work, The Pedagogy of the Oppressed. Freire is best known for his

contribution to the field of adult education through his work with illiterate peasants in Latin America. Denouncing what he calls the “banking” concept of education, Freire exposes a system of education in which the teacher’s role is simply to deposit knowledge into empty “receptacles,” students whose own role is simply to receive, file and store the imparted knowledge. He posits that under this system of education, the relationship between teacher and student is that of subject-object, and that as a result, the student is oppressed and dehumanized. As an antidote to this dehumanizing approach to education, Freire offers a system of “co-intentional” education, a “problem-posing” process in which both teacher and student are “subjects” who use active, reflective dialogue in their mutual quest to unveil “reality” (knowledge) that is situational and by no means finished or completed. In this way, both teacher and student develop *conscientizacao*, a critical consciousness that leads to action against oppressive elements in their lives.

Freire’s “Dialogical Action” Theory

Writing about revolutionary leaders in Latin America, Freire extends his dialogical action platform to the political realm and asserts that revolution (transforming action) can only be achieved with *praxis*, the inextricable combination of reflection and action directed at the social structures that are the targets of change. In Freire’s view, reflection without action is mere verbalism and action without reflection is simply activism. For Freire, neither verbalism nor activism is capable of effecting change. The methods of revolutionary leaders, thus, must encompass “dialogical cultural action,” a type of transforming action that includes the elements of *cooperation*, *unity*, *organization* and *cultural synthesis*.

The cornerstone of dialogical action is the notion that the people have a fundamental role in the process of transformation. The people’s leaders engage in “courageous dialogue” with them, have faith in them and work in “unshakable solidarity with them.” They “think *with* the people” not *for* them, just as the teacher and student in problem-posing education exercise critical thinking to investigate and “name” the world. Cooperation, a key element of dialogical action, can only be achieved through “courageous dialogue” between the people and their leaders. This kind of dialogue results in humanizing communication. Freire asserts firmly that unless this type of communication takes place, true humanity cannot be achieved and that without it, people are “reduced to the status of ‘things’.”

For Freire, the leadership of revolutionaries in Latin America reflected a profound humanism, a combination of “love” for the people and the world, “faith” in the people’s abilities, “humility” in their interactions with the people, and the shared “hope” that change was possible (Freire, 1968). He believed it was this genuine humanism that made the leaders capable of engaging in courageous dialogue with the people. And it is this kind of dialogue that can effect the cooperation that ultimately leads to “cultural synthesis,” the prerequisite to authentic revolutionary action. This dialogue between the leaders

and the people results in mutual trust which can only occur among “subjects.” The people are never treated as objects. Leaders know that ignorance of the people is a myth and that, as much as the people may need their leadership, “they do not own the people and have no right to steer them blindly toward salvation.” Instead, the leaders have faith in the people and as a result, the people trust them. Unity occurs between the leaders and the people and organization proceeds naturally. When a fusion of the leaders and the people occurs, cultural synthesis is achieved; that is, the contradiction between the worldview of the leaders and that of the people is resolved and a new knowledge and new action is created. The action of the leaders with the people is then carried on in a spirit of hope and communion.

Revolutionary Humanism in the Latina Leaders

The elements of humanism described in Freire’s theory are clearly evident in the interviews with the Latina women leaders featured in this paper. The interviews reveal that love for the people, faith in their ability to think critically and to solve their problems, humility that embraces the people’s contributions, and the constant expression of hope are at the core of the work of these women leaders. When asked about the rewards in her work, Juanita Valdez Cox beamed with love and admiration for the farm workers and *colonia* residents with whom she worked. There was an expression of faith in their ability to “shine” and there was hope that with opportunity, the self-development she witnessed in them would continue. Humility was evident with her assertion that her contribution to this self-development was minimal.

We see satisfactions on a daily basis because we see that self-development in people was there, but we just help shine it up, or we help enhance it. We have a lot of natural leaders in our communities. It’s just that we haven’t been given the opportunity. And I think the rewards and the satisfaction come when you see them.

Ramona Casas’ excitement about her current venture reflected her love for the women of her community. In her certainty that in the future they would advocate for themselves, she acknowledged their inherent ability to do so, as well as her intention to step aside as they learned to speak for themselves:

What I am doing right now motivates me a lot. I am developing small groups of leaders, indigenous women, so that they themselves can go to the county office, to Channel 48, or where they need to go to express their needs, because there is no better result than the community speaking for itself.

For Blanca Juarez, working with the people represented a humbling experience filled with love, hope, and faith in their ability to succeed in their work together:

And I also have to see that it's not only me involved in my community. But the things that have happened to me, everything that has happened to me has been because a lot of people have been with me. It's not my work; it's the work of many people, and I believe it's been because they have trusted me and have trusted that we really are doing something, truly, because we like doing it.

The Dialogical Action Model

Inherent in the elements of dialogical action is an uncompromising recognition of the fundamental role of the people in the process of transformation, or social change. Dialogue with the people is also a fundamental imperative. Without dialogue, the leadership is not humanist or revolutionary and ultimately, the authenticity of any action taken is destroyed. Excerpts from the interviews with the three Latina women leaders illustrate how closely their leadership corresponds to the elements of dialogical action theory: cooperation, unity, organization and cultural synthesis.

Cooperation

The leader and the people meet to determine what the situation is in order to do something about it. This can occur only among subjects and only through communication, "courageous dialogue" (a humanizing process). The leader needs the adherence of the people, achieved through the people's understanding of the issue, need or plan. Adherence depends on the people's trust in themselves and their leader. In turn, the people's trust in the leader reflects the leader's confidence in the people. Of paramount importance is the leader's belief in the people's capacity to effect their own problem solving and liberation.

When Juanita refers to her role as a leader, her understanding of cooperation is clearly evident:

We work with them to figure out the needs because they have to identify them. Once they've been identified, then we try to figure out what's our part in the solution, and what's their part in the solution, and sort of work together in the process to figure it out. Here it's been very successful when we listen and they work on it together. The self-development occurs only when they were involved in the beginning and when they participate, participate, participate... and in the process, they end up finding the solution. And it makes them feel so much better about themselves and knowing that they could do it.

Blanca is able to obtain the cooperation of the people through mutual trust. She trusts that the people know their needs and is confident that they have the ability to do the work required:

I had to earn the trust of the people in the community, but once they began trusting, that they knew I was telling the truth, I gained respect, I mean, the people respected me....And more than anything is that I never promise anything I cannot do, and I always tell them that they have to do it. I can help them, but I cannot do it for them, because I don't know the needs they have. I believe that gives them some confidence.

Unity

Unity cannot be achieved unless there is unity among the people and between the leaders and the people. It involves solidarity and communion between the leader and the people. The revolutionary leader is in unity with the people through class consciousness. The people come to see themselves as actors who can transform their reality. Juanita is painfully aware of the oppression experienced in her community. She expresses a willingness to grow and learn in unity with her community to overcome the oppression and to internalize the confidence that their participation and contributions will inevitably bring:

They [politicians, social service agency people] see us maybe as weak and voiceless and incompetent... They don't see us the way we feel about us, the way we know about us... And I think that sort of denies us our...the respect that we have for ourselves and for our abilities. The challenge is changing those attitudes to seeing us for what we are... Work with us, don't do it for us... once we are given the opportunity and once we're educated about what we contribute and how important our contribution is, we take it to heart.

Blanca's unity with the people in her community is beyond question. When she refers to the people's willingness to help themselves, she is also referring to herself:

One of the things that satisfies me more is that those who have high positions realize that the people here are not sitting down waiting for anyone. But that we get up, we stand up and walk alone.

Organization

Organization naturally develops from unity. The leaders organize themselves *with* the people. Decisions are made with the people; they are not

imposed on the people. Learning is achieved through dialogue; ideas are shared. Blanca describes the process of organization once the people in her community realized that they must unite to address their concerns:

We started meeting to bring all the people together because there was no water in the *colonia*. Then, a lot of people met and I was coordinating, talking to people, that if we wanted to do something, we had to do it ourselves. We had the need in the community, nobody else had it. We started with nothing, from the bottom and we started to organize a lot of people.

Ramona describes the organization of the people in her community to accomplish the development of community programs that will serve them:

Our organization's philosophy, the values of our organization is that we believe that the community, each family, each member of the community, child, young person, adult—that everyone has talents—that every family has a lot to give to themselves and to the community. We have programs for the whole community. We ourselves have developed those programs, those curricula, because we know the needs of our people. We tell the families, you can contribute; the program is yours. We are a neighbor helping a neighbor in his neighborhood. It's a program of the people and with the people.

Cultural Synthesis

In cultural synthesis, leaders come to learn with the people about the people's world. They come with no predetermined plans. Contradictions or differences in the worldviews of the leader and the people are resolved and the result is a new enriched worldview. In this way, errors and miscalculations are reduced. New knowledge and new action are conceived and appropriate action can be taken. Through her work with LUPE, Juanita has learned the meaning of cultural synthesis. She expresses amazement at the new perspective and new development of solutions that is achieved when the leader truly listens to the people and blends her worldview with theirs:

We've learned throughout the years that if I think I can go to a meeting and tell them this is what I think your needs are, and this is how we're going to get it done, if it wasn't coming from them it's like pulling teeth. But when you do the process and you go to them and you listen, you *listen* to what they're saying, and together work on the solution, then we're amazed at how the process really works. I'm not saying it's easy, but it's easier because it came from them. They don't feel that it

was an outsider telling them, “This is what we think is the problem and this is how we’re going to fix it.”

Ramona describes cultural synthesis when she acknowledges that to work in her community means to acknowledge the people’s talents and abilities and to learn together with the people:

I always think that there are valuable people in each home and I know and I believe that I do not go there just to teach but to learn...And we here, each of my co-workers, it’s as if we were social workers, because we tell them, “you’re worth a lot, you deserve respect and you have a lot of dignity.” You will contribute. All the people need is the opportunity to feel accepted to do their part. But there are many institutions where the opportunity is not given and they are criticized, they are oppressed a lot. That is why we call ourselves promoters. We are promoting each other. Together we are learning.

Implications for Community Practitioners and Social Work Education

The Latina women leaders working in *colonias* of the Rio GrandeValley are using a self-reliant approach to community change that they refer to as “doing for ourselves.” This transformative approach features the investment of their own emotional resources in the form of love, faith, humility and hope for the future of their communities. In their work, communication and collective decision-making are primary tools. Leaders listen to the people, who come together as equal participants to define problems and propose solutions. Through this kind of communication and participation, which Freire defines as cooperation that reaches a point of cultural synthesis, both leaders and the people develop confidence, gain efficacy, and are empowered to change their lives and communities.

Freire’s dialogical action theory clearly provides a model of practice for social work in low-income oppressed communities. Incorporating the elements of dialogical action and the qualities of revolutionary humanism in the role of practitioner, the model, at the very least explains the processes at work in the leadership of indigenous low-income women leaders who work in cooperation and unity with other members of their communities. The model reflects both the work of the women leaders interviewed and social work principles, such as self-determination and autonomy, uncompromising respect for all people, the importance of human relationships, social justice, and critical thinking. Similarly, it embraces the notion of collaborative leadership recognized in the literature as emphasizing participatory problem-solving and nonhierarchical communication (Clift, Veal, Holland, Johnson & McCarthy 1995; Meenaghan & Gibbons 2000).

The theory of dialogical action summons the attention of community practitioners who seek to empower people and change the status quo in low-income communities. Indigenous women leaders who are practicing dialogical action teach us that to heed this call, practitioners must be armed with “love,” “faith,” and “humility” and must adopt the inherent “hope” of the people. Moreover, they tell us that we must be prepared to engage in honest and open dialogue with the community members at the risk of possibly losing their adherence to favored community practice strategies and time-tested organizing methods. This raises challenging questions for both practitioners and social work educators.

What can professional social workers and social work educators learn from these dynamic women leaders? How can we use their experience to strengthen efforts to help low-income communities help themselves? As social work practitioners, do we possess the requisite qualities for working effectively in these communities? Do we believe the people in the community can make good decisions? Are we tempted to direct group decision-making, fearing poor outcomes? Do we see people as the experts about their own lives and communities? Do we acknowledge the limitations of our own expertise? Can we commit ourselves to the self-development of people and community transformation over “the long haul”? How much patience is required? Do funding sources with ready-made programs for pre-defined problems represent barriers to community change? As social work educators, are we preparing practitioners to trust participatory decision-making? Will our graduates recognize that people are the experts about their own lives and communities? Will they have the patience required to facilitate the self-development of people in the community? Will they resist the temptation to use their credentials and professional authority to impose their own solutions? Finally, if we integrate the principles of dialogical action into community practice courses, will we help to ensure that future practitioners rely on collaborative leadership and work to cultivate, support and sustain the efforts of indigenous leaders?

These and countless other questions related to our social work mission to address the ravages of poverty and oppression, especially in our own back yards, must receive thoughtful and serious consideration if we want to engage in what Paulo Freire would undoubtedly dub “authentic” social work practice. In the meantime, we must commit to recognize and acknowledge the contributions of the courageous women who, armed with revolutionary humanism, are transforming their communities while improving their own lives. Clearly, these women deserve a special place in community practice literature and social work education.

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The Jewish Communities of Latin America: A Historical Perspective

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Abstract

There are currently about 400,000 members of the Jewish communities in Latin America. While these communities are very diverse, there are a number of commonalities among Latin American societies that have shaped their historical experience and development. This article will provide an historical overview for understanding the development of the Jewish communities of Latin America since the Expulsion from Spain and the voyages of Columbus in 1492 and up to the present. It will focus on the social determinants of immigration and the political and economic changes in Latin American and global societies that facilitated Jewish immigration and life. During the last 50 years, continuing political and economic challenges, including anti-Semitic violence, have challenged some Jewish communities. Although a complex picture, the article identifies some of the strengths and opportunities supporting many Jewish communities and families living in contemporary Latin America.

Keywords: Latin America, Jewish communities, history, Jewish immigrants

Introduction

There are currently about 400,000 self-identifying Jewish persons live in Latin America, the fourth largest Jewish population in the world after those of Israel, North America, and those living in the nations of the former Soviet Union. These Latin American communities have a long and illustrious history containing both elements of flight from persecution in search of a safe haven as well as pioneering settlement and manifold achievements in a “new” world. As with the other centers of Jewish life around the world, the Latin American Jewish communities face their own sets of challenges and opportunities, some unique to Latin America and others as universal as anti-Semitic attitudes and violent acts deriving from sources within and without the hemisphere. This introduction to the diverse historical development of Jewish communities in Latin America, and the varied social contexts in which it has developed, is intended to facilitate an understanding of the strengths of and challenges facing members of these communities and their families in the Americas and in other nations.

The term *Latin America* disguises vast linguistic, religious, racial, national, geographical, economic, and ethnic diversity. Likewise, the Jewish emigrants to Latin America were extremely diverse and came from communities

located throughout the world for a multiplicity of reasons. In the nations of Central America, the Caribbean and South America as well as Mexico, Jewish families have established themselves in diverse social, physical, and economic contexts: urban and rural; industrial, agricultural, or professional workers; living in lowland rainforests and mountain deserts; cosmopolitan and isolated settings; during economic booms and depressions; upper class and poor; and under democratic governments and fascist inspired dictatorships. While some Latin American Jews live in small communities where achieving a minyan (ten man prayer group) is a rare event, most Jewish persons in contemporary Latin America are members of well-organized communities served by synagogues, schools, community centers, and a variety of other local, national, and international social organizations (Bejarano, 2005; Elkin, 1998; Goldstein, 2005).

Estimates from the *American Jewish Year Book* (2007) indicate a Latin American core Jewish population of 389,200 persons with the following national breakdowns: Argentina 184,000; Brazil 96,200; Mexico 39,600, Chile 20,600; Uruguay 17,900; Venezuela 14,500; and Panama 5,000, with no other nation having a Jewish population greater than 2,500 (Della Pergola, 2007). The reason that much of the literature on Jewish Latin America focuses on Argentina, Brazil, and Mexico is clear – 82% of the Jewish population lives in those three nations.

The *Year Book* explains that these figures count the “core” Jewish population, those Jews associated in some direct way with Jewish life. It points out that studies performed in 2004 and 2005 that include partially assimilated Jewish persons who retain some sense of a Jewish identity increased these numbers substantially to 300,000 in Buenos Aires, for example, although the core Jewish population is only 165,000 (Della Pergola, 2007). The *Year Book* also notes that the total Latin American Jewish population appears to be slowly declining by about 1,000 persons a year, mainly due to low birth rates plus some assimilation and emigration, about half of which is to Israel (Della Pergola, 2007). Surveys of Latin American Sephardic organizations conducted by Marjalit Bejarano indicate that about a quarter of the population is Sephardic, deriving from both Ladino-speaking and Arabic-speaking backgrounds (2005, 2007).

The diversity of Latin American Jewish communities to some extent reflects the limits imposed by geography that promoted the early fracturing of half a hemisphere into more than 20 nation states. Unlike North America, where numerous, broad river systems and flatlands provided inexpensive access to the interior, even in the days of the fur trade, Latin America is fractured by numerous and often impassible mountain barriers, vast jungles, some impassible to this day, with only a few river systems offering broadly useful transportation from region to region.

Taking care to avoid stereotyping assumptions, there are a number of commonalities among Latin American societies that may have shaped the historical experience and development of many Latin American Jewish

communities. This brief profile will discuss the historical framework that first suppressed and then encouraged Jewish immigration since the time of Columbus (Cristóforo Colombo in modern Italian), will examine origins of Jewish immigrants to the newly independent nations and why they left their homelands, and will identify some of the strengths, challenges, and opportunities facing many Jewish communities and families in contemporary Latin America and the Caribbean.

Conquest, Colonization and Control

If one were to mark a date for the beginning of a Jewish presence in the Americas, one might look very closely at a pre-dawn tide bearing Christopher Columbus's three ships away from Palos, Spain on August 3, 1492, the day following Tisha B'Av (a day of fasting and mourning commemorating the destruction of the First and Second Temples and the beginning of the diaspora), and also the day following the conversion to Catholicism of a number of the ship's crew, and two days following the final deadline of the Edict of Expulsion of the Jews from Spain. In this hurried manner, Columbus left Spain on his first voyage (Beller, 1969; Menocal, 2002; Sacher, 1958).

While an observant Catholic, there is serious speculation that Columbus himself may have been of Jewish descent. Certainly a number of Columbus's crew were recent *conversos* (converts to Catholicism), at least five of whom, including the navigator, ship's doctor, the lookout who first sighted the New World, and Luis de Torres, the ship's Arabic and Hebrew translator/negotiator with the natives, appear to have converted the day before embarkation (Kalechofsky, 1980). As Maria Rosa Menocal describes the scene: "[on] August 3, the last of those whose choice had been to keep their faith openly, but abandon their homeland, were leaving on this first day of the second diaspora, and every [Spanish] port was still overflowing [with observant Jews]" (2002, p. 250).

De Torres, the translator, was apparently the first Jewish person who settled in the New World, being among the 39 persons that Columbus left in the new settlement of La Navidad on the north coast of Haiti upon his return to Spain. However, no members of the colony survived when Columbus returned the following year (Vilar, 1995).

Discussing the immediate effects of the Expulsion, especially as it pertains to Jewish immigration to the New World, is difficult for many reasons. First, the Expulsion and its aftermath is enormously moving and complex as well as a testament to the indomitable spirit and survival skills of many of the Sephardim (the Hebrew word for the Spanish). This history of senseless destruction and cruelty marked the final ruin of a vital and creatively diverse culture in the Iberian peninsula. Technically, after the Expulsion, no Jews existed in the Spanish state, and all that remained of Jewish life were the memories and private practices of Catholics who had converted.

In addition, any discourse on the Expulsion must incorporate a complicated series of terms and concepts, and the anti-Semitic prejudices and

racial bigotry they embody – *criollos* (Europeans born in Latin America), mestizos (mixed race persons), and *indios* (native, indigenous people living a traditional lifestyle).

Some of these terms were used in legal contexts and important for the smooth functioning of the bureaucracy of anti-Semitism embodied by the Holy Office of the Inquisition of Spain or Portugal. Important terms and concepts include *converso* (a convert from Judaism or Islam to Christianity and their descendants), a certificate of “clean blood” (*limpieza de sangre*, having no Jewish or Islamic ancestors), New Christian (*cristiano nuevo*, a convert from Judaism or Islam), Old Christian (*cristiano viejo*, someone whose ancestors had been Christian for many generations before the late 15th century), and the *anusim* (“forced ones,” a term from Jewish law referring to those who were forced to abandon the Law). And, of course, in the language of everyday derogatory speech, a *marrano* was both a pig and a *converso*, always assumed to be a relapsed Jew (Gitlitz, 2002; Hordes, 2005). Not all *conversos* were “former” Jews, for example, a *converso* from Islam would be called a *morisco* (like a Moor). Historians have recently begun to speak of *converso* families who maintained some Jewish identity or religious practices, often for generations and usually in deep secrecy, as *crypto-Jews* (Elkin, 1998; Gitlitz, 2002; Hordes, 2005).

Candidates for important civil offices and entry into professions were asked for certificates of “clean blood” before being accepted. Those with Jewish ancestors were often assumed to be practicing Jewish rites in private and many were becoming targets of increasing paranoia and jealousy. Thus the de-judification of Spain and later Portugal, as well as their colonies, became a central focus of the Holy Office of the Inquisition, with most attention especially in the early days paid to *conversos* (Gitlitz, 2002; Hordes, 2005). With a continuing demand for certificates of clean blood being the descendent of a convert took on a racial quality, although many noble Spanish and Portuguese families also had *converso* blood (Roth, 1995).

A significant number of *conversos*, certainly in the thousands, emigrated to the New World. Perhaps some hoped to escape the Inquisition if they went far enough into the wilderness. In one famous case, a *converso*, Luis de Carvajal, was granted a royal charter in 1579 to settle northeast Mexico (then New Spain) with about 200 settlers, 100 of whom comprised his extended family. In 1590 the community came to the attention of the Inquisition because some members of his family, including his son, were practicing Jews, and the family was destroyed with several of its members killed by a Mexican tribunal form of the Inquisition in 1596. Many *conversos* pioneered the settlement of New Mexico soon thereafter, perhaps another attempt to escape to the ends of the earth, as was the apparently large *converso* component in the Sixteenth Century settlement of Chile. (Beller, 1969; Cohen, 2001; Gitlitz, 2002).

In the face of overt state suppression and violent anti-Semitic prejudice, Jewish self-identity and practice was necessarily secret and private. It is not surprising, therefore, that these three centuries of suppression had effectively

removed from the Iberian Peninsula and its colonial possessions most public and visible traces of Jewish faith and practice, although some families still maintained a Jewish self-awareness and continued such practice as was possible. Building continuing Jewish communities of any size, however, had to await both the independence of the Latin American nations as well as new immigrants from the Jewish world diasporas.

Independence

Between 1810 and 1825 all the continental nations of Spain and Portugal freed themselves from Spanish and Portuguese rule. The Caribbean colonies achieved independence a bit later: 1844 for the Dominican Republic (from Haiti) and 1898 for Cuba and Puerto Rico. For the most part, independence brought hope, energy, a sense of possibility, and faith that the inhabitants of the Americas were now in charge of their own lives. The yoke of outdated institutions was thrown off including that of the Inquisition.

After independence, *Israelita* (by now the polite Spanish term for “Jew,” also used in legal contexts) migration became almost immediately possible in some areas of Latin America. Among the first were Portuguese-speaking Sephardic Jews residing in Curacao, a Dutch-ruled island located a few miles off the coast of Venezuela. Some of them had supported Liberator Simon Bolivar who in 1812, at a low point of the independence struggle, was famously sheltered in the home of Mordechai Ricardo, a prominent Curacao Jew (Chasteen, 2008). After independence, Caribbean Jews were welcomed into Venezuela, Colombia, and Panama, then comprising a single nation under Bolivar’s rule. Also soon after independence, Brazil welcomed, or at least tolerated, Spanish-speaking Sephardic Moroccan Jews who pioneered trade in the Amazon region. Sephardic Jews also set up a community in Santo Domingo prior to the Dominican Republic’s independence from Haiti in 1844, and a few moved into Guatemala after religious tolerance was proclaimed in 1833 (Bejarano, 2005; Elkin, 1998). Most Jewish immigrants were occasional businessmen or other technical specialists such as mining engineers. Scattered records and cemetery inscriptions indicate that most immigrants were from France, Alsace, and the Rhineland German states, (particularly after the failed liberal revolutions of 1848) as well as Sephardim and Oriental Jews (Elkin, 1998; Sacher, 1958).

Although few in number, these early Jewish immigrants to Latin America did serve as pathfinders, preparing the way for much larger waves of Jewish immigration during the late 19th century. The reasons why so few Jews immigrated to Latin America and waited to immigrate late in the 19th Century are complex, but in many nations necessary civil recognition and changes of civil law needed to be implemented. These included the registration of birth by other than a baptismal certificate and marriage outside the Catholic Church. These reforms of civil society were not implemented until the late 19th century.

Historian Judith Elkin discusses the necessary pre-conditions required before Jewish community life in a particular nation. Legal and social tolerance

of diverse religious practices was crucial. Equally important there must also be a legal basis for the existence of diverse families including a system of civil registration of births, marriages, and deaths as well as the right to cemeteries for all persons and access to secular schooling and qualifications for the professions (1998). One cannot live in the “modern” (post-1800) world without being able to prove one’s birth. A Jewish community cannot form in a society that requires a Catholic baptismal certificate as proof of birth, that will only recognize marriages performed in churches, denies mixed marriages, denies schooling to unbelievers, will not accept burials in their cemeteries, and will not accept wills without recognized proofs of identity and family relationships.

Some countries, such as Guatemala in 1833, sought to promote trade abroad and European immigration by disestablishing the Catholic Church and proclaiming religious tolerance for all. Brazil was religiously more tolerant than most of Latin America from 1808 onwards although Catholicism remained the official religion until 1889. Argentina came to tolerate diverse religious practices by mid century, but did not implement changes in civil laws until a secularizing government entered office in 1888 (Buhner-Thomas, 1994; Elkin, 1998). Registration of births, marriages, and deaths was implemented in Chile in 1885, followed by Catholic disestablishment in 1925. Mexico secularized in the 1850s. Peru’s constitution, however, forbade religious tolerance until 1915, although civil marriage was introduced in 1897 (Elkin, 1998). To some extent, however, contemporary population levels of Latin American Jews reflect the economic opportunity structures and protective legal systems prevalent in the various nations during the 1890s.

The Migration of 1880-1930

One other element is necessary for a sustainable Jewish community – a population large enough to support essential community institutions and to create a large enough pool of marriage prospects for children otherwise mixed marriages will accelerate assimilation. This was the fate of many of the early Jewish families in Latin America, but in large cities that barrier was removed by the migration waves after the late 1880s. The sources and motivations for this migration were hardly unique, and it greatly resembled the much larger immigration into the United States and Canada during the same period. The immigrants’ motives for leaving their homelands were generally a composite of being pushed out by discrimination and oppression, particularly from lands subject to the Russian Empire and the Middle East, and seeking a haven and freedom to live a Jewish life in a New World. A desire for economic betterment, and no doubt other motives, also served to spur the migrants west. Once civil recognition made Jewish life possible, pogroms and discrimination in European homelands encouraged many to set out for new lands full of social and economic possibilities (Gerchunoff, 1955; Sacher, 1958).

As the period opened, new technologies supported mass migration across the Atlantic and Pacific: fast, efficient, and inexpensive steamship transportation; refrigerated ships for meat exports; oceanic telegraph cables; the

mechanization of agriculture; and a system of railroads leading to the port city and capital of Buenos Aires, or from Sao Paulo to the ports of Santos and Rio de Janeiro. Seemingly in an instant, Argentina became the lowest cost world producer of many basic agricultural commodities as did Chile for certain mineral products and Brazil for coffee. And they all desperately needed workers in industry, mining, agriculture, and commerce. Expanding economies throughout the region – not only rich, under populated Argentina – threw open their doors to immigrants (Buhner-Thomas, 1994; Scobie, 1971). Thus, modern Jewish communities were able to be formed and were large enough to be sustained over time.

A classic example from Argentina offers one flavor of the new immigrant life.

A band of *gauchos* – the Argentine equivalent of North American cowboys – galloped towards the Moises Ville train station waving sombreros and shouting Yiddish welcomes to a trainload of emigrants fresh off a ship from the Ukraine. Such scenes recounted in Alberto Gerchunoff's memoir, *Los Gauchos Judios* (*The Jewish Gauchos of the Pampas* in translation), have immortalized the beginnings of the great migration of Jews from Eastern Europe into Argentina. Moises Ville, founded in 1889 with the support of the Jewish Colonization Agency (JCA), was Gerchunoff's hometown, and in some respects it played the role of the Plymouth Colony in the imaginations of the Eastern European Jews in Argentina. The pioneering youth in Moises Ville—and the later agricultural colonies founded by the JCA, which by the 1920s had 40,000 residents—much admired and imitated the Argentine *gauchos* (Gerchunoff, 1955; Rosenthal, 1906; Sacher, 1958). Moises Ville and the Jewish *gauchos* were the subject of a New York Times profile as late as 1996; although, only about 15% of Moises Ville's inhabitants were then Jewish (Sims, 1996). These agricultural colonies did not become the norm, and, as in North America the great preponderance of Jewish immigrants eventually came to live in urban settings, even if they had lived in agricultural villages in their homelands. Ninety percent of Argentinean Jews currently live in Buenos Aires. However, the farming and ranching communities often came to have surprising social effects. Brazilian writer Nachman Falbel argues that at least in Brazil the JCA's agricultural experiments—there were colonies in Brazil, Uruguay, and Canada in addition to the large settlements in Argentina—helped challenge common stereotypes that Jewish persons primarily worked in finance or commerce, thereby lending support to the liberalization of immigration restrictions (Falbel, 2007).

Lands of Refuge: 1930-1960

After the stock market crash of September 1929 and the onset of the worldwide Great Depression that followed, industrial production plummeted and the demand for many Latin Americas exports, primarily foodstuffs and raw materials, fell to a fraction of their levels in the 1920s. The ensuing economic crises, while affecting each nation somewhat differently, had many devastating

political and social effects throughout the Americas, few of them lending much popular support for immigration of any sort, especially for Jewish immigrants.

As the 1930s progressed, however, many persons, especially Jews, desperately sought places of refuge from rising anti-Semitic violence in many European nations, especially from the Nazi regime in Germany. In the United States, where a quarter of the labor force was unemployed in 1933, nationalist impulses led to the imposition of strict, even racist, immigration restrictions and quotas in the 1920s. These quotas were rigidly enforced in the 1930s, and support for their relaxation to accommodate the desperate Jewish refugees was insufficient to force Congress to open the doors (Kaplan, 2008).

Thousands of those denied entry to the United States succeeded in finding refuge in places as unlikely as the Cochabamba Valley of Bolivia and Sosua, an agricultural colony founded on the northern shore of the Dominican Republic, as well as in more expected venues such as Havana, Buenos Aires, and Bogota. Indeed, Jewish refugees continued entering Latin America during and after World War II—a period of renewed prosperity in the Western Hemisphere. There was a significant immigration wave from Egypt to Brazil, for example, as late as the Suez Crisis of the mid-1950s, and well after the creation of the state of Israel.

Acquiring entry visas through the early 1940s was often difficult, even when aided by such organizations as the Joint Distribution Center (JDC) and the Hebrew Immigrant Aid Society (HIAS). On the other hand, acceptance of refugees was sometimes regarded as improving relations with the United States, as has been documented of Rafael Trujillo, dictator of the Dominican Republic, but also by others. Trujillo also expressed common prejudices favoring European migration when he commented that he hoped the refugees would “whiten” the Dominican population and bring wider skills to the Republic. Bribes also played a role, and were demanded by consular officials in Europe or in the receiving countries. There were only 6-10 Jewish families in Santo Domingo in 1930; but by the late 1930s, the number had grown to about 225 persons who were defined as Jews by the Nazis and most of them had little means of earning a living. One motive for founding an agricultural community was that there was no other employment. Sosua, with its 500 families, was intended as a demonstration project for what was possible. After many difficulties, the mostly urban immigrants established a profitable dairy corporation that to this day supplies a substantial portion of the Dominican Republic’s cheese and butter (Kaplan, 2008).

In a few cases, most notably at Sosua, refugee immigration received sustained institutional support. In other situations, the support was local, ad hoc, or non-existent. In Cuba a substantial migration did not begin until the 1920s, when entry into the United States was curtailed. At first, many were merely complying with visa restrictions and soon passed on to the United States, but with further tightening of U.S. regulations, a Cuban Jewish community began to develop with 25,000 immigrants between 1920 and 1947, which included

thousands of European refugees during the 1930s and 1940s. After many hardships, a group of Ashkenazic and Sephardic Jews established synagogues, kosher food shops, community centers, and extensive participation in international Jewish institutions (Bejarano, 2007). After the Cuban Revolution of 1959, this entrepreneurial community was largely destroyed. There are currently perhaps 500 Jewish residents of Cuba (Della Pergola, 2007; La Porte, Strug, and Sweifach, in press). The rest of the community immigrated many to South Florida but many moved to Puerto Rico where they came to form a core element of the current 1,500 person Jewish community (Bejarano, 2005; Della Pergola, 2007).

The Jewish population of Brazil was about 40,000 in 1933. Although emigration was restricted in the 1930s, and its European consuls were ordered to deny visas to persons of “Semitic origin” – also referred to in other government documents as the “others” (Ben-Dror, 2002). Elkin estimates that at least 27,500 persons entered Brazil “by legal or semi-legal means” (1998) partly facilitated, as Ben Dror reports, by some Brazilian consuls who defied the government instructions. The number entering may have been larger because some immigrants utilized forged baptismal certificates, and a few immigrants entered on special visas that required a large cash bond exempting them from immigration quotas (2002). In the 1950s, about 20,000 French-speaking Egyptian Jews arrived in Brazil. The community supports numerous synagogues and social services, recreational, and educational facilities – some dating to the early decades of the 19th century, that reflect the diverse origins of Brazil’s complex emigration streams (Bejarano, 2005; Elkins, 1998; Goldstein, 2006).

Bolivia which had an estimated 30 Jewish families in 1930, including the famous German Jewish “tin baron” and mining engineer Dr. Moritz (Don Mauricio) Hochschild. During the 1930s until 1942, about 7,000 Jewish refugees settled in Bolivia, and Jewish synagogues and community institutions were established for their support, initially subsidized by Hochschild. In 1949 some Polish Jewish refugees, who had passed the war in Shanghai, immigrated to Bolivia as the Communists were taking over China (*Encyclopedia Judaica*, 1971). An estimated 20,000 to 30,000 Jewish refugees may have entered Argentina during the 1930 to 1942 period, a disappointingly low number given the much larger population and wealth of Argentina compared with Bolivia (Sacher, 1958). Some nations, such as Colombia, cumulatively accepted thousands of refugees. Others, such as El Salvador in the late 1930s, refused to accept any. In the long run, however, all of these new communities declined in population during the post-war period for a variety of reasons.

Diplomatic representatives of nations that rejected immigration sometimes ignored or violated laws to save Jewish lives – diplomatic equivalents to Oskar Schindler. The Consul General of El Salvador in Geneva, Switzerland, Col. Jose Castellanos, in complete violation of instructions from his superiors, had more than 10,000 certificates of citizenship printed up and distributed to persons seeking to escape Europe in the early 1940s. These

documents, given to persons who had no actual relationship with El Salvador may have saved thousands of lives. No doubt there were others who responded with heartfelt humanity when offered the opportunity just as there were those who exploited the desperate (Milfeld, 2008).

The Contemporary Latin American Jewish Communities

History may be prologue to the present, but it is clear that currently the Jewish communities of Latin America are again in transition. One of the most notable trends is the decline in the size of the core Jewish population. While birth rates have fallen, the key variable affecting population size appears to be emigration – Jews are leaving Latin America in large numbers.

There are obvious “pull” motives from the receiving countries: One might leave for Israel, the United States, Canada, or the United Kingdom to better live a Jewish life, or for education, or because a new home offers expanded professional opportunities and prospects for economic prosperity. In some Latin American nations, however, the daily pressure of anti-Semitism combined with occasional violence creates an insecure environment and further encourages emigration.

As discussed above, overt anti-Semitism is embedded deep in the social and political attitudes of Latin America dating from the Colonial era. On top of this anti-Semitism are the stereotypes of an international Jewish conspiracy and paranoia about foreign contamination of a pure culture. In Graciela Ben Dror’s analysis, this message from the pre-World War II era appears to have taken root more in Argentina than in any other Latin American nation (Ben-Dror, 2002).

A related series of right-wing anti-Communist military coups in the 1960s and 1970s took power in southern South America--Brazil, Uruguay, Argentina, and Chile – the nations home to the vast majority of Latin American Jews. These regimes, especially in Argentina and Chile, identified, arrested, and executed without trial thousands of “subversive” persons, often throwing the bodies into the ocean. Usually the arrests were extrajudicial and the victims simply disappeared. Estimates of the disappeared in Argentina alone range from a minimum of 6,000 persons to a realistic high of 30,000, and about 10% or as many as 3,000 were Jewish, about 10 times what one would expect from the relative size of the Jewish population, or one in a hundred of the Jewish community at that time (Brysk, 1994; Elkin, 1998). The disparity was not a matter of chance. Jewish newspaper editor and torture survivor Jacobo Timerman who personally knew many junta members of Argentina’s small political class details at length the anti-Semitic prejudices and expressed motives of his captors and interrogators in his now classic memoir *Prisoner Without a Name, Cell Without a Number* (1981). The “dirty war” sent a message that still resonates throughout Latin America – it can happen here (Timerman, 1987).

Although the situation in Argentina was greatly improved with the restoration of democracy in 1983, the early 1990s saw a series of violent incidents against Jews in Latin America that have again challenged, and were

perhaps intended to challenge, the sense of security for Jewish populations. The most serious were the suicide bombings of the Israeli embassy in Argentina in 1992, killing 29 and injuring more than 200; of a Buenos Aires Jewish community center, AMIA, in 1994, killing 85 persons and injuring 300; and one day later, of a commuter plane in Panama, killing 12 persons 9 of whom were Jewish. These bombings appear to have a Syrian/Hezbollah/Iranian connection. However, this connection is difficult to prove, and there is to this day a developing Argentine scandal that caused then President Nestor Kirshner to apologize to the victims and the nation in 2006. A fog of corruption, misinformation, and conflicting national and international interests involving governments on four continents makes it difficult to verify and prove that these three bombings are truly connected. In general, there is little assurance that security forces have the ability, or even the willingness, to protect Jewish persons throughout Latin America (BBC, 2003; JTA, 2009; Porter, January 18, 2008).

While there have been no more attacks of this scale since 1994, overt anti-Semitism in recent years appears to be increasing, marked by cemetery desecrations, graffiti, and the sale of anti-Semitic tracts and *Mein Kampf* in newspaper kiosks. Sometimes old issues resurface in new guises, as when popular evangelist Edgar Lopéz Bertran—Brother Tobi to his followers—preached in El Salvador that God still has not forgiven the Jews for killing Christ (Stephen Roth Institute for the Study of Anti-Semitism and Racism, 2008, 2007, 2002). Most key Latin American governments, however, perhaps with the notable exception of Venezuela's president, Hugo Chavez, seem to be overtly resisting anti-Semitism. Chavez's public support of Organization of the Petroleum Exporting Countries (OPEC) partner Iran, however, certainly increases the pressure on the 14,000-person Venezuelan Jewish Community (Llana, 2009; Stephen Roth Institute for the Study of Anti-Semitism and Racism, 2009).

Social attitudes are also being transformed, and many Latin Americans are learning to recognize and treasure diversity. Few governments are following Chavez's lead regarding the Jewish communities. Recent Argentinean governments have begun to overtly address anti-Semitic prejudice and discrimination, implementing religious antidiscrimination laws, as have other Latin American governments. Along with the Jews, other minority groups especially indigenous groups are asserting their identities and demanding human rights and social justice. Of direct significance for the Jewish community, many persons who descended from *marrano* (crypto-Jewish) families are revealing and acknowledging longtime family traditions of Jewish practices and a Jewish identity. These persons, many of whom have expressed great interest in their heritage and in learning more about Jewish life, are potential supporters of the core Jewish communities, and some have expressed interest in living a fully Jewish life (Alexy, 1993; Gitlitz, 2002; Hordes, 2005).

One must admire the strengths of the Jewish communities in Latin America. One must also admire their endurance and survival during difficult

circumstances from 1492 until the present. The Jewish communities have flourished, and have created institutions that have endured, sometimes for many generations, contributing immeasurably to the social and intellectual lives of the Jews as well as to the larger societies. It is hard to believe that Latin America's Jewish communities, after such a history and with such strengths, will not endure and flourish long into the future.

Implications for Practice with Latino Jewish Individuals and Families

This paper seeks to provide context, a sense of historical background, which facilitates an understanding for social workers of Latino Jewish individuals and families. As with all Latinos and all Jewish persons, the discussion above should indicate the great diversity among Latino Jews and the varied nature of their experiences. Primary to any relationship with a Latin American Jewish client is the need to seek an understanding of the meaning of this diversity for each person.

Latino Jews, for example may be Ashkenazi or Sephardic in background; they may have blond hair or dark hair; they may speak Spanish, Portuguese, French, Ladino, Arabic, Hebrew, Yiddish, or several of these languages. Latino Jews may be observant or they may have very little experience with living as Jews, through choice or imposed necessity. They may or may not have suffered from religious prejudice. Their current financial situation, which may include the entire spectrum of wealth from rich to poor, may or may not have any relationship with their situation in Latin America. They may be able to trace their Jewish ancestry back for centuries and yet also be a recent convert to Judaism or wishing to explore conversion. As with any client, especially a member of an immigrant family, social workers must reevaluate and reflect upon the relevance of their knowledge and preconceptions through direct, open-ended discussion and interaction with the client.

Social service needs may include a wide range of services from basic human needs and resettlement assistance, legal services, employment, education including language skills, and therapy with individuals and families dealing with a manifold range of issues. Social workers thus may need to be informed of the array of social services available through both Jewish communal services and those available in the larger community.

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The Legacy of the Holocaust: A Qualitative Study of Parent-Child Relationships

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Abstract

This qualitative study examined how the Holocaust influenced relationships between survivors and their children. It further explored the relationships of survivors' children with their offspring. Children of 16 survivors were interviewed. The data revealed that several of the second-generation presented with insecure-ambivalent attachment resulting in a drive to succeed in order to please the parents. Specific Holocaust family attributes such as guilt and enmeshment presented but not often enough to generalize to the entire sample. Most participants described strengths of their relationships. A sense of being loved by the survivor parent as well as the parent's presence contributed to the positive relationships experienced by the second generation and their children. The findings may be useful for working with survivors of other holocausts and their offspring.

KEY WORDS: Holocaust survivor families • parent-child relationships • attachment

Introduction

A healthy relationship between parent and child plays a major role in establishing the foundation for an individual's future relationships. Due to the possible strain on the parent-child relationship as a result of the 1940's Holocaust in Western Europe, one must examine what influences this might have had in order to determine its impact. The literature debates the influence that the Holocaust has had on survivors and their families. Clinical reports and some newer controlled studies show high levels of psychological pathology, (Cohen, Dekel, & Solomon, 2002; Danieli, 1985; Yehuda, Schmeidler, Wainberg, Binder-Brynes, & Duvdevani, 1998) while the majority of empirically based research do not (Rieck, 1994; Sagi-Schwartz, et al. 2003). Krell, Suedfeld and Soriano (2004) warned that one cannot "use the lives of well-adjusted survivors as a basis for neglecting the severe long-term effects of the Holocaust on some and equally commit the error of over-generalizing from those who seek therapy or other help to the entire population of survivors" (p. 505).

Although one must look at every person who grew up in a Holocaust family as an individual, Kellermann (2001) shows that when comparing clinical populations of Holocaust survivor offspring with other individuals suffering

from emotional problems, specific characteristics were ascribable to the former. Jucovy (1992) explains these patterns should not be labeled a syndrome but rather a profile. These attributes are not meant to define the individual or infer psychopathology, but rather are used to illustrate experiential similarities just as culture links individuals together. Consequently, one must look at the similarities observed among the range of attributes belonging to individual members of survivor families. This study of 16 adult children of Holocaust survivors was undertaken to elucidate relationships between survivors and their children and subsequent generations. Its findings may also be relevant to others who have experienced recent holocausts and severe oppression resulting in staggering deaths and traumas for survivors, such as:

[The] four million [deaths] each in Indo-China and Korea, uncounted millions in the holocaust of Southern Africa, over 300,000 in the proxy holocausts of Central America (200,000 Mayans in Guatemala, 75,000 in El Salvador, 50,000 in Nicaragua and 10,000 each in Honduras and Panama) and Iraq--over 700,000 and growing. (Petras, 2006, ¶ 43)

Characteristics of Survivor Families

In their review of contemporary research on emotion, Wiseman, Metzl, and Barber (2006) report that guilt is an interpersonal phenomenon rooted in close relationships. This feeling of guilt is important in relation to Holocaust survivor families, in which there is a positive association between the parents' level of vulnerability and the children's experience of guilt (Krell et al. 2004; Rosenthal, 2002; Wiseman et al., 2006). This is observed in descendants who derive a sense of guilt from the perceived injustice of experiencing enjoyment at the cost of their parents' efforts (Krell et al.).

Most children understand that part of the parent's role is to provide love and financial support in order to increase their quality of life. Children of Holocaust survivors would not experience the above-mentioned type of guilt if it were not for their parents' vulnerability. Some offspring also feel an inordinate sense of guilt about their inability to undo the Holocaust for their parent. These interactions combine to create a desire in the offspring to protect and care for the parent and to compensate the parent for their suffering through accomplishment (Rosenthal, 2002). This compensation is the foundation for the belief that Holocaust survivor offspring tend to be high achievers. Krell et al., (2004) believe that such compensation can be understood more fully as the children's sensitivity to the pain that their parents experienced, which results in a desire to please them. The most efficient way of accomplishing this was to excel in school and succeed in their careers. This desire to please may also have been reinforced by some parents who overvalued their children because they represented a new beginning; evidence that the parent had succeeded in life (Wiseman et al., 2006). The survivor parents wanted their children to succeed in order to make up for all of the combined potential that was lost as a result of the Holocaust.

Bound by guilt, some Holocaust survivor offspring and their parents share the same goals. The parents want their children to succeed for purposes of restitution, and the children want to succeed in order to compensate their parents for their pain. This exchange shows how the relationship in the family becomes enmeshed, which ultimately affects the offspring's separation and individuation. This behavior pattern can be repeated under multiple circumstances. The Holocaust survivor's wartime suffering led some parents to seek high levels of security for their children. In doing so, they created very restrictive environments for their children (Bar-On et al., 1998, Krell et al., 2004). "Parents like this, who care too much and who become overly involved and intrusive, tend to enmesh their offspring in the crossfire of their own emotional problems and bind their children unto themselves in a manner that makes it difficult for the children to gain independence" (Kellermann, 2000, p. 28). Similar to children's desire for achievement in order to compensate for parents' suffering, many also wanted to protect their parents from experiencing any new pain. Therefore even when offspring were angry about their parents' restrictions they would protect them by not expressing this anger, simply doing what their parents asked. This resulted in role reversals between the parent and child in which the child's main role was to protect and care for the parent. This made it difficult for the offspring to attempt to assert themselves and be understood (Wiseman et al., 2006).

If the influences of the Holocaust are examined according to a spectrum of extreme psychological pathology on one end and no evidence of psychological pathology on the other end, the question becomes why do some survivors adjust better than others, and how does this outcome affect their offspring?

Attachment Theory and Parental Protection

With a basic understanding of these attributes and why they occur, researchers use attachment theory as a framework for understanding the relationships between the Holocaust survivors and their offspring. Bar-On et al. (1998) proposed that insecure-ambivalent attachment provides a possible description of the observed relationships between survivors and their children. They used the results of three studies on Holocaust survivors and their offspring from different countries, the Netherlands ($n = 60$), Canada ($n = 57$), and Israel ($n = 1$), basing their position on the emerging theme of parental overprotection and the subsequent parentification on the part of the children, in these studies. They used insecure-ambivalent attachment to explain the nature of the relationships between Holocaust survivors and their offspring, but stressed that insecurity should only be considered a risk factor, which in combination with other risk factors might lead to mental distress or disorders. This can occur in two ways. First, in trying to please the parents with high achievement, children may become dissatisfied or feel distressed if they fail to reach these standards. Second, in times of higher life stress, they may be more vulnerable to maladaptive behaviors as they lack the foundation of a secure attachment

relationship. Bar-On et al. also indicated that an insecure-ambivalent attachment does not prevent children from becoming adaptive adults, "Their ambivalence and related feelings of guilt may constitute a major motivational force to be successful and to indeed keep pleasing parents" (pp. 330-331).

Sagi-Schwartz et al. (2003) proffered a different perspective. They conducted an exploratory study combining both quantitative interviews with qualitative inventories and used a non-probability sample of 48 Holocaust survivor families and 50 comparison subjects. They found that survivors did show more unresolved loss and displayed more anxiety and traumatic stress than their carefully matched comparison group, a finding supported by Cohen et al. (2002). Yet Sagi-Schwartz et al. found that these survivor parents were able to successfully protect their family relationships from being influenced by their Holocaust experiences. Their daughters did not differ from the comparison group in their attachment representations, anxiety, traumatic stress reactions or maternal behavior toward their own infants. By examining the dynamics of families who had experienced a specific and severe trauma in their past, the current study looks at the influences of that trauma on the relationships that followed, specifically how growing up in the home of a Holocaust survivor parent would influence the child's life. It then indicates how such an upbringing would impact the choices made as an adult, specifically related to parenting. This study will examine these relationship experiences by exploring the following themes: a) the relationship the adult children had with their survivor parent(s); b) the level of protection afforded children and parental expectations; c) the children's perception of their parents suffering and feelings of guilt; d) the communication style used in the home regarding the parents' lives during the Holocaust, and; e) how each of the above experiences relate to current parent-child relationships of the second generation. The relationships that children have with their parents will not only influence their experience of their place in that family but can also impact the way they view themselves in the world, thus affecting their relationships with their own children.

Method

Sample and Data Collection

After a university's Institutional Review Board approved this study, potential participants were contacted by emailing a flier to people who might know someone who would fit the study's criteria or would qualify themselves. The sample population consisted of the first 16 individuals who responded meeting the study's criteria, 4 English-speaking men and 12 English-speaking women, who were the children of at least one Holocaust survivor and had at least one child of their own. Only one person who originally contacted the researchers later declined the interview. After obtaining informed consent, one hour semi-structured interviews were conducted and audio-taped either in person or by telephone. At the end of the interview participants were thanked and given a list of resources to use if they felt they required assistance.

Instrument

The interview was guided using a semi-structured tool (Exhibit 1), created by the researchers, consisting of 14 open-ended questions based on themes derived from the literature. The first theme dealt with quality of the parent-child relationship as experienced by the second generation participant and their parent. Participants were asked to discuss the relationship with the parent(s) who was a Holocaust survivor. The second theme reflected the level of protection towards the second-generation child. A question was: "Please talk to me about the level of autonomy or independence you had while growing up. What are some examples?" Another theme explored in the instrument is the perspective of the second generation regarding withholding feelings of anger and/or feeling guilt regarding their first generation parent. A question was: "How would you say you typically responded if this parent did something to upset you? Could you provide examples?" The parental expectation level perceived by the child was also explored with this question: "Was it your goal to please your parent who was a survivor? If so, how did you go about doing this?" Another theme is the communication style used in the parent-child relationship regarding the Holocaust explored with the following question: "Tell me about dinner conversations in your childhood home." These themes are also explored from the second generation to the third generation. One example is: "How would you think your oldest child would describe his or her level of autonomy or independence in your home? What are some examples?" In addition, six demographic factors were obtained: highest level of education; parent's country of origin; parent's age when escaped or liberated, and; participant's age, occupation, and annual family income.

Analysis

The researchers used content analysis to deduce themes from the qualitative data. Regarding themes, inter-rater reliability was 85% of the time. When disagreement occurred, the researchers discussed their perspectives and eventually reached a consensus. Fifteen of the interviews were audio-recorded. The interviews were transcribed and coded by hand. A master list was kept of all of the codes throughout the data analysis process. With a systematic, inductive data analytic technique (Padgett, 1998), the researchers used the codes to quantify the data. Then they analyzed using frequencies and percentages supplemented by verbatim statements in order to illustrate the patterns found.

Results**Sample Description**Table 1. Demographics ($N = 16$)

Characteristic	<i>f</i>	%	<i>M</i>	<i>SD</i>
Gender				
Female	12	75.00		
Male	4	25.00		
Age (years)				
47-52	3	18.75	55.75	3.84
53-59	9	56.30		
60-65	4	25.00		
Highest Level of Education				
Doctoral Education	1	6.25		
Professional/ Graduate School	11	68.75		
College Graduate	2	12.50		
Some College	1	6.25		
High School Graduate	1	6.25		
Occupation				
Architect/Civil Engineer	2	12.5		
Culinary	1	6.25		
Education	3	18.75		
Financial	1	6.25		
Helping professional	4	25.00		
Homemaker	1	6.25		
Law	1	6.25		
Technology	3	18.75		
Approximate Annual Family Income				
40-59,999K	1	6.25		
60-79,999K	2	18.25		
80-99,999K	1	6.25		
100,000K or more	11	68.75		
No Response	1	6.25		

This data revealed that the majority of the 16 participants were female (12 or 75%). The ages ranged from 50-61 years of age, with a mean of 55.75 years ($SD_{3.84}$). The education level ranged from a doctorate (1 or 6.25%) to a high school diploma (1 or 6.25%). The majority of the participants (11 or 68.75%) held a professional or graduate degree. With one exception, the respondents were currently employed. The majority of respondents reported having jobs in the helping professions (4 or 25%), education (3 or 18.75%) and technology (3 or 18.75%). Approximate annual family income ranged between \$40,000-\$59,000 to \$100,000 or above. Eleven participants (68.75%) responded that their income was \$100,000 or above. Seventeen parents (60.72%) were between the ages of 18 and 25 when they escaped or were liberated, with a range of age from infancy to 52 years. The majority of the parents originated from Poland (20 or 71.42%). The other parents were from Germany (4 or 14.29%) and present-day Romania (4 or 14.29%). Two of the participants grew up in Israel and the rest were raised in the United States.

Participants' Evaluation of their Relationship with Their Parent

Participants were asked to describe their relationship with their survivor parent. Their answers were grouped into three main categories – positive, concerning or negative using multiple subcategories to illustrate the relationship (**Table 2**).

Table 2. Aspects of Survivor Parent/Child Relationship

Question/Responses	<i>f</i>	%
Tell me about your relationship with your parent who was a holocaust survivor. What are some examples that describe this relationship?		
Positive	14	87.50
Close, loving, caring, wonderful, adore, great positive	11	68.75
Honest/Open	3	18.75
Knew they loved me	2	12.50
Based on respect	1	6.25
Did a lot together	1	6.25
Grateful	1	6.25
Parent willing to sacrifice	1	6.25
Received Praise	1	6.25
Concerning Aspects	8	50.00
Conflictual/ambivalent	3	18.75
Emotional/dramatic	2	12.50
Didn't want to rock the boat	1	6.25
Less parent, more friend	1	6.25
Loved but didn't like	1	6.25
Overprotection of parent	1	6.25
Negative	3	18.75
Not very good	1	6.25
Didn't know how to parent	1	6.25
Hard to be good enough	1	6.25
Physically abusive	1	6.25
Parents didn't get along	1	6.25

^aNote: More than one response is possible for this question.

The majority of participants (14 or 87.5%) used at least one positive aspect to describe their relationship with their survivor parent. One participant portrayed their relationship as "...very loving, my mother just always showed very unconditional love to all of her children." Another participant described the openness they experienced with their parent. "I don't think there was anything growing up that was off limits in terms of things I could talk to my parents about." Yet, another discussed the time she spent with her mother. "My relationship with my mom was very strong...We used to do a lot of stuff together, go to matinees. She loved movies, so she used to take me to matinees."

Eight of the respondents (50%) reported at least one concerning aspect about their relationship with their parent. One participant described the ambivalence felt about the relationship with mother in the following quote:

In one way I tried to please her [mom] all the time. In the other sense, I just wanted to run away a lot...She always tried to do the right thing, she was a scout leader. She sewed clothes for me and tried, tried, tried to do the right thing, but she was so scarred by the war, it was very difficult for her.

One participant mentioned her mother's emotionality. "My mom's very emotional, when young, I hated her emotionality. I wanted to be like my father." Yet another depicted the relationship as more of a friendship. "We were best friends. He [dad] was less of a parent than a friend. I think the parenting had to go to the other parent mostly." Another participant stated, "[She] never questioned what she said or did, never apologized for it. She always thought she was right that was it. I loved my mother, although there were many things about her I just did not like."

In order to determine a value rating for the perceived level of success achieved by the survivor parent, participants were asked to rate the parent on a scale from 1 to 10 (**Table 3**).

Table 3. Numerical Value of Perceived Survivor Parenting Ability

Question/Responses	<i>f</i>	%
How would you rate you survivor parent's ability to parent you on a scale from 1-10, one being the least effective and ten being the most effective? For what reasons did you give this rating?		
High Rating	8	50.00
Twelve	1	6.25
Ten	3	18.75
Nine	2	12.50
Eight or Nine	1	6.25
Eight	1	6.25
Moderate Rating	5	25.00
Seven	1	6.25
Six	2	12.50
Five ½	1	6.25
Five	1	6.25
Low Rating	2	12.50
Four	2	12.50
Conflicting Rating	1	6.25
Two and Eight	1	6.25

Eight participants (50%) assigned their parent(s) a high ability rating. One participant created a new category to express extreme ability, stating, "They were really remarkable!" Five participants (31.25%) gave their parent a rating of 9 or 10. One participant explained this rating by stating, "...because of her [mom] consistent unconditional love, above everything else...her openness and willingness to continue to dig deeper and explore things with me and not be afraid of conversation." Another participant explained,

I felt that they gave everything that they could, and whatever they had they were ready to really spill blood for you. They didn't have much, but they gave, they were ready to stand by, you know, and be involved.

Five participants (31.25%) assigned their parent a moderate level of ability rating. One participant clarified: “He did his fatherly duties as far as providing, and he did very well at that. On other realms, you know, that’s what brings him down a little bit.” Another indicated that the parent did not rate high “...in terms of discipline ..., but [did] in terms of hanging out with us and doing fun things...”

Two participants (12.5%) assigned their parents a low ability rating. One participant explained, “I don’t think they knew anything about child rearing and back in

those days I don’t think there was a lot of good data about it...I think they were good in that they wanted the best, but certainly weren’t effective.” One participant (6.25%) assigned a conflicting score.

I think in certain areas it would be a 1 and in certain areas it would be a 10. They taught us no coping skills, none. They tried to bare everything for us, and so it was very difficult in dealing with disappointment and hardships and in that sense it was not very good. But in terms of being loved it was probably an eight...They weren’t very understanding. So I guess in that then a two. I couldn’t really discuss problems with them, because anything that was a problem for me would be a major, triple a problem for them...So in some ways they were very good at parenting, and in others not so much.

Participant’s Level of Autonomy in their Childhood Home

Participants were asked to describe the level of autonomy they had while growing up. The responses were grouped into four main categories and are illustrated in **Table 4**.

TABLE 4. Participant's Level of Autonomy in Childhood Home

Question/Responses	<i>f</i>	%
Please talk to me about the level of autonomy or independence you had while growing up. What are some examples?		
High level of autonomy	6	37.50
Little to no autonomy	6	37.50
Moderate level of autonomy	2	12.50
Struggled for autonomy	2	12.50

Six respondents (37.5%) reported having high levels of autonomy. One respondent said, "She [mom] never held me back from doing things or going anywhere, like field trips or stuff like that, as far as I remember...She probably wanted me to have as normal of an upbringing as possible." Two participants (12.5%) stated that they rebelled against their parents' expectations. One respondent said,

Pretty much I was expected to do what my parents wanted and in the end I usually did, but I caused some grief along the way. My mother went through a lot. She was young when the war broke out and kind of lost her childhood and so she kind of wanted to live her childhood through me and wanted me to be the perfect child, and I of course didn't want to be. So because of that, it was a rough go between my mother and myself.

Six respondents (37.5%) reported having little to no autonomy. This is illustrated by one of the participants who states, "I was tied to my mother's apron strings until I was in college, and even to this day have trouble with breaking away from home."

Guilt and Compensation for Parent's Trauma

Participants were also asked if one of their goals was to please their survivor parent. The data were categorized into "Yes," wanting to please

parents and “No” not feeling able or wanting to please their parent with sub-categories to better illustrate the responses. The majority of the participants (10 or 62.5%) responded that they strived to please their parents. Five (31.25%) did so by earning good grades. One participant explained, “Yes, definitely. Mostly by getting good grades and studying hard. Education was very important to my parents and I wanted to do well for them.” Four (25%) participants stated that they tried to please their parents by never saying no. One participant stated,

Definitely, I never said no. Throughout my childhood I did whatever they wanted...An example is my brother would spill his toys out of the box. My mom would ask me to pick it up for her. She would say do it for me, and I would.

In order to please their parents, two (12.5%) participants would offer them money. One respondent explained,

I was 12 or 13 or 14, in the summertime, I used to go and work at odd jobs...I would be glad to come home and show my parents hey look at that. I earned five dollars today; you guys can have it. I would give them everything I earned and say this is for you to help you run the budget for this week.

This same respondent desired to be a support, “I was really trying to make them feel like I’m not just a burden, but a shoulder for all the difficult times that they had over there.”

Six (37.5) participants responded that they did not strive to please their parents. Two participants (12.5%) felt that they could never be good enough, so they stopped trying. One participant explained, “I think I figured out at a pretty young age that [pleasing my parent] wasn’t going to happen, and so I think more than trying to please him [dad], was I fought against him.” Two participants (12.5%) respected their parents but did not make decisions for the purpose of pleasing their parent. One participant stated,

I respected both of my parents and so you know it was certainly important to show them that respect, but in terms of doing anything in particular because it pleased them, as opposed to doing something that would have been appropriate for me to do anyway, I don’t think so.

To better understand the interaction between the participants and their survivor parents, participants were asked to explain their typical response when their parent upset or disappointed them. The results were grouped into three main categories – active, passive and do not remember - with subcategories to better illustrate the responses (**Table 5**).

TABLE 5. Goal to Please Parent

Question/Responses	<i>f</i>	%
Was it your goal to please your parent who was a survivor? If so, how did you go about doing this?		
Yes	10	62.50
Good grades	5	31.25
Never said no	4	25.00
Stay out of trouble / don't rebel	3	18.75
Offered Money	2	12.50
Wanted to be a support	2	12.50
Interest in the world around me	1	6.25
No	6	37.50
Never good enough, stopped trying	2	12.50
Rebellious	2	12.50
Respected my parents, but didn't make decisions based on their wants	2	12.50
<i>I was carefree</i>	<i>1</i>	<i>6.25</i>
Parents' opinion didn't matter to me	1	6.25

^aNote: More than one response in the subcategory is possible for this question.

The majority of the participants (10 or 62.5%) used an active response when upset by their parent. Seven of the participants (43.75%) who reacted actively screamed or yelled in response. One participant characterized the exchange in this way, "They always did things to upset me but I don't think they did knowingly. The biggest thing they did that upset me was that they really never got along, and there was a lot of screaming and yelling in the house, and there are times that I just exploded and added to the screaming and yelling."

Two of the respondents (12.5%) talked through their problems with their parents. One participant described the communication:

I would have discussed it with them...if I thought I should be given permission to do something, and they didn't want to give me permission to do it, we would have discussed it. At times the discussion could be heated, not in the sense of angry or disrespectful, but if it was something my parents

passionately believed in or I passionately believed in, that I should do something, we would have discussed it.

One respondent (6.25%) describes running from parents when they were disappointed or upset.

...my dad was the disciplinarian, and when he got angry, he would head for the tush, over his lap and whack. My dad was strong...once I hit 12, I realized the best way to kind of get out of his reach is run like hell. We would be going around the house he would be chasing me, and I would be out in front of him.

Passive responses were used by 6 of the participants (37.5%). The most common of these responses (4 or 25%) was silence. One participant stated, "In my background, you certainly didn't talk back. You certainly didn't say that they were wrong, if anything the response was silence." Two participants (12.5%) responded that they avoided their parent when they were upset. One states, "I'd go lock myself in my room, or we live near a creek, I would leave the house and go run down and sit by the creek...I would just get away."

Communication Between Participant and Survivor Parent(s)

To gain a better understanding of the family dynamics and the types of conversations between the participants and their parents, participants were asked to discuss their dinner conversations growing up. The data are displayed in **Table 6** and reveal that the majority of families (7 or 43.75%) had at least some discussion involving the daily events. One respondent explained, "It was a time we talked about our days, what was good what went badly, but we always waited till dad had digested a little of his food before breaking bad news."

Table 6. Dinner Conversations in Childhood Home

Question/Responses	<i>f</i>	%
Tell me about dinner conversations in your childhood house.		
Family members' events of the day	7	43.75
Don't recall	5	31.25
Current events/news/politics	4	25.00
Academics	2	12.50
Finish your food	2	12.50
The Holocaust	2	12.50
Not much conversation	2	12.50
Ran the gamut	2	12.50
Yelling/fighting	2	12.50
Sports	1	6.25
Was lectured	1	6.25

^aNote: More than one response is possible for this question.

Five participants (31.25%) stated that they didn't recall dinner conversations growing up. This is expressed by one participant who states, "Honestly, I'm sure there were some, but that just doesn't even bring a memory to my mind. Family dinners sort of, I just can't remember them. Or maybe there was no pleasant ones to remember."

The importance of finishing food was a shared dinner conversation theme by two participants (12.5%). One respondent explains,

...they [dinner conversations] almost always centered around finishing your food. We were always served out portions, it wasn't like we got to help ourselves, and you had to finish your food, and it went into the whole conversation of there is someone starving, blah blah blah, somewhere, and so, you know, it's a crime to waste food...even though I had a problem with my weight, I was served food and then told, if I couldn't finish it, I couldn't have dessert.

Two participants (12.50%) stated that they discussed the Holocaust at dinner but they describe these conversations with very different sentiments. One participant advised, "My parents were extremely verbal about their experiences,

their background. My sister and I heard stories and we were encouraged to ask questions always.” The other respondent stated,

...my father would be talking to me about his experiences and it wasn't really a conversation...He never was able to reconcile a lot of the things that he went through. The fact that he was in a labor camp and how when he came back his entire family was wiped out. He was never ever able to forgive or forget that.

Parenting of the Third Generation

Participants were asked to assess their own parenting ability from their children's perspective (**Table 7**).

Table 7. Numerical value of perceived participant parenting ability

Question/Responses	<i>f</i>	%
How would you say your child would rate You as a parent on a scale from 1-10, one Being the least effective and ten being the Most effective? For what reasons did you Give this rating?		
High Rating	12	75.00
Ten	1	6.25
Nine or Ten	1	6.25
Nine	1	6.25
Eight or Nine	1	6.25
Eight	3	18.75
Seven or Eight	5	31.25
Pretty Good	1	6.25
Low to Moderate Rating	1	6.25
Four or Five	1	6.25
Conflicting Rating	1	6.25
Two and Eight	1	6.25
No Response	1	6.25

The majority of respondents (12 or 75%) stated that their children would rate them high in parenting ability. One of those participants (6.25%) stated her child would rate her with a 10. She explained,

...she knows that we're here for her and that...we're really close. She's never afraid to come to us and broach a problem or ask our opinion about a boyfriend...I think that the huge difference with how my dad reacted with the kids and how I react with my daughter and other son is with respect...I think that you teach them what they give you back.

Another participant (6.25%) said the child would assign a 9 or 10 for ability, stating, "...because we were engaged as parents, we were there for them when they needed us, yet we gave them a fair degree of autonomy and I think we provided well for them." Five (31.25%) of those respondents stated that their children would rate them a 7 or an 8 for ability. They believed their children would describe them as a good parent overall but may have some criticisms. One participant explained their reasoning, "I think she [daughter] would like more involvement, but I think she feels there is a good balance." Another participant stated, "He [son] would feel very supported, I try not to give him feedback unless he asks for it, but sometimes I do, even when he doesn't."

One participant (6.25%) gave a low to moderate rating. She explains her reasoning as inexperience, immaturity and youthfulness.

...I contribute that to getting married at 17, and having my daughter when I was 19. I think it's age-related, in short no question about it...I was behaving in a way that would be more in line with a teenager, because I didn't have it, because I chose to go in a different direction and when I look back on that time, my kids suffered horribly.

Four participants (25%) felt that their rating would depend on the day of the week. One participant stated:

I think there're days he would give me a two and then there's days that I think he'd give me an eight...I think the low rating, is that he doesn't think I've done a good job...In terms of the higher rating, I think that deep inside he knows he can totally trust me.

Third Generation's Level of Autonomy and Parental Expectations

Looking at the relationship between the participants and their children, they were asked how their own children would describe their own level of autonomy growing up in the participant's home. The data are displayed in Table 8.

Table 8. Participants view of their children's level of autonomy

Question/Responses	<i>f</i>	%
How would you think your oldest child would describe his or her level of autonomy or independence in your home? What are some examples?		
Very independent	8	50.00
Relatively Autonomous	4	25.00
Given Autonomy but doesn't use	1	6.25
Other parent was more restrictive	1	6.25
Restrictive	1	6.25
No response	1	6.25

Twelve of the participants (75%) believed that their children viewed their autonomy level or independence as relatively autonomous to very independent. One participant describes their son's autonomy in this way,

He participated in the sports that he wanted. He went out and had a good time with his friends. We never gave him unfair curfews. We never just said no for no reason. If once in a while my instinct was to say no, because it was dangerous, my husband, would kind of balance me out and we would talk about it."

Another participant explains, "...she [daughter] always made her own decisions, and she's got a very good head on her shoulders and so I trust what she does."

One participant (6.25%) responded that although they give their child autonomy the child does not take advantage of it. The participant explains,

She [daughter] has the use of a car, but she never wanted to drive. She's still frightened about going anywhere new. New experiences are a little hard for her, and I don't know how much of this has to do with my parenting or her own innate personality...Was I a bit overprotective, probably but not as much as the previous model. Not compared to the way I was raised. I think that she has the autonomy, but I think that she is a little apprehensive about new experiences.

One participant (6.25%) responded that they are more restrictive with their children. They describe the level of autonomy in this way,

We would say to our kids, our standards are a lot tighter, if you don't like it tough. I think we were very much more restrictive and rigid in our behavior towards our kids, but it didn't stop them. Every generation, every child will find a way to get around their parents. But we felt, or we thought that we had more control over them.

Communication with the Third Generation

Participants were asked to describe their own reactions as a result of being upset or disappointed by their child (Table 9).

Table 9. Participants response to child disappointment

Question/Responses	<i>f</i>	%
How do you typically respond if your oldest child upsets or disappoints you? Please provide examples.		
Active	11	68.75
Work through/talking/confronting	9	56.25
Respond Negatively	1	6.25
Talk to husband	1	6.25
Passive	3	18.75
Don't show disappointment	2	12.50
Take with a grain of salt	1	6.25
Never upset or disappoint me	2	12.50

The responses were grouped into three main categories using subcategories to better illustrate the results. The majority of participants (11 or 68.75%) use an active response to deal with disappointment from their child. Nine (56.25%) stated that they attempt to work through the problem using talking or confronting the issue. One participant explained, "I would try to engage in a discussion as to what it is that was bothering me, or if there was something that I thought was bothering her [daughter]. I would try to get her to talk about it." One participant described a negative response. "I respond negatively as well [as my parent]...I try every New Year's Eve. My resolution is to be more patient with him [son], every year."

Three participants (18.75%) stated passive responses as a reaction to disappointment from their child. Two of the participants (12.5%) stated that they don't show their disappointment. One participant explained, "I've tried to be supportive of every decision she's ever made. So I basically don't show my disappointment in herecause she gets angry." One participant (6.25%) expressed taking it with a grain of salt. "I learned that in today's world, you can't do things like we did before. Basically you just have to take it with a smile or try to be calm about it, and that's kind of where we are...you kind of had to just take it with a grain of salt."

Discussion

Holocaust Attributes

There was no clear finding in this study in terms of the Holocaust attributes represented amongst survivor families. The concept of guilt as described by Krell et al. (2004), Rosenthal, (2002), and Wiseman et al., (2006) was present but only in approximately half of the participants. This could be seen in the reasons that these participants gave for how they went about pleasing their survivor parent. A quarter of the sample never said no to their parent. This meant that they often sacrificed their own wants and desires in order to protect or take care of their parent's need.

This finding meshed well with Wiseman et al. (2006), who stated that many children wanted to protect their parent from experiencing any new pain. Therefore even when offspring were angry about their parents' restrictions they would protect them by not expressing this anger, simply doing as parents asked.

The other participants compensated their parents for their suffering through accomplishment. This is in agreement with Krell et al. (2004), who explained that compensation is really the children's sensitivity to the pain that their parents experienced, which results in a desire to please them.

There was also no clear finding of family enmeshment in this study as it is described by Kellermann (2000). This characteristic was present but only in half of the participants. The absence of this characteristic could be seen by observing the participants' perception of their level of autonomy in their childhood home. The other half were less autonomous and experienced enmeshment. This finding supports Wiseman et al. (2006) who asserted that this enmeshment resulted in role reversals between the parent and child in which the child's main role was to protect and care for their parent.

Attachment

This study's data was consistent with Bar-On et al. (1998) who described the attachment relationship of the second generation with their parent as insecure-ambivalent. The ambivalence felt by the second generation regarding their relationship with their survivor parents could be seen in the way the second generation describes this relationship. Of the respondents, 87.5% described at least one positive aspect regarding this relationship, while 68.75% expressed at least one concerning or negative aspect. These results indicate that

the participants felt strongly about their love for their parents as well as their understanding of their parents' situation while concurrently feeling negative about at least some aspect of the relationship.

This attachment style is further illustrated by the response from the majority of the participants that it was their goal to please their parents. This feeling of ambivalence combined with the need to please their parents defines the insecure-ambivalent attachment of this population. Yet attachment style need not result in pathology. Bar-On et al. (1998) emphasize, "Ambivalence and related feelings of guilt may constitute a major motivational force to be successful and to indeed keep pleasing parents" (pp. 330-331). Evidence of this is seen by the high level of education accomplished by the participants as well as their significant financial success.

The majority of second-generation individuals believed that they were successful in parenting as illustrated by positive outcomes of their parenting, such as raising successful/ independent and caring children with good values. This is consistent with Sagi-Schwartz et al. (2003) who reported that the daughters who participated in their study did not differ from the comparison group in their maternal behavior toward their own infants.

Unexpected Findings

Collectively this group of participants was able to create improved relationships with their own children. The reported autonomy levels of the third generation increased by 25%. Nine second-generation participants reported that talking through disappointments with their own children was the favored way of dealing with problems versus two participants who reported this method with their own parents. Finally, ratings regarding effective parenting went up 25% for the participants who believed in their own parenting ability versus the parenting they received. Because this group as a whole experienced this improvement, it cannot be explained as a result of individual resiliency. The findings show that despite the presence of the Holocaust in the participants' families of origin, they felt loved and that their parents were present. This foundation allowed the participants to experience positive relationships as adults. As parents, they were able to use what worked in their families of origin and improve upon what did not.

Limitations of the Study

There were several limitations to this study. The sample that was utilized was small and was gathered using a non-probability snowball sampling method. The characteristics of the individuals that were willing to participate could be quite different from the characteristics of those who did not, thus biasing the results.

Although two of the participants grew up in Israel, the researchers did not account for the cultural experiences of survivor families who immigrated to other countries after the war. Therefore, this study's findings can not be generalized to survivor families living in other countries.

Another limitation was that although some of the participants came from homes with two survivor parents, others had only one. Since questions were only asked about the participants' relationship with their survivor parents, the researchers could not know how the other parent would have influenced the participants' lives or the parenting choices made by the survivor parent.

Research regarding second-generation individuals shows that the first born was more greatly affected by Holocaust related issues; yet, this study did not ask about birth order of the participants. This study only asked about the second-generation's relationship with their first born child for the purpose of comparison; however, this may have been a limitation as some participants stated that their relationship with their other child/children was different.

This study did not take into account the different experiences of the survivors during the Holocaust. The survivors could have had very different experiences in a labor camp, versus in hiding or in a death camp. These different experiences could have had an influence on the survivors' perspective of life and therefore their parenting.

This study only examined the perspective of the second-generation. This may have skewed the results in terms of participants' evaluation of their own parenting and relationship with their children. It is possible that social desirability to be viewed as a good parent could have been a factor in the participants' statements regarding their parenting. Although the researchers attempted to gain an understanding of the parent-child relationships over two generations, the perspective was interpreted through the perceptions of one generation.

Lastly, this was a sensitive subject so a semi-structured interview may not have been the best choice for obtaining the most in-depth information. Many of the participants were protective of their stories, and probing questions may have helped the researchers gain more information. Additionally, the researchers may have had biases in interpreting the data, though they were able to provide a check for one other.

Implications for Practice, Policy/Administration and Research

In future work with this and similar populations, practitioners and researchers must remember that although some characteristics may be seen throughout a general population, they are working with individuals, whose own personal family experiences have shaped their lives. People will not always act according to an expected system of behaviors.

Family relationships did play an important role in the future relationships of this population. Keeping in mind that the most successful relationships in this group came from open and honest communication and an overall feeling of caring, it will be important for social workers to nurture these behaviors in families that have dealt with genocide.

Practitioners and researchers must also recognize the positives that can come out of extreme situations. This group of participants was largely college

educated and financially successful. They were driven to succeed by a need to please their parent.

Families are generational and extreme situations will affect the identity of each member and each generation of that family. Researchers and practitioners must allow each generation to express and deal with their own feelings and perceptions of this experience separately from others. Although one generation experienced the experience directly a ripple of consequences touches each family member in its own way. Social workers must also remember that this is an identity for the families that have experienced it, they must be sensitive to the beliefs they hold about themselves and others.

Program administrators and policy makers can use some of the findings from Holocaust studies to design programs for victims of oppression and trauma. Policy advocates and policy makers need to do everything possible to prevent and stop these types of traumas from occurring. Educators must teach future generations about these events in order for this type of oppression not to be repeated.

Few studies found that the Holocaust influenced the third generation. However, researchers must continue looking at relationships among these families and the influence they had in individual academic success, the formation of future relationships, the identity and roles experienced by the third generation individual, communication patterns in the family, career paths and religious beliefs and practices. It is suggested that they interview the third generation directly and use a non-structured interview because of the sensitivity of the subject matter. Taking the participant's lead will ultimately give the researchers the opportunity to gather more information.

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EXHIBIT 1

Interview Guide

Directions:

The following questions mostly pertain to your relationship with your parent who is a Holocaust Survivor. When answering questions about your own child, think about your oldest child.

- 1) Please talk to me about the level of autonomy or independence you had while growing up. What are some examples?
- 2) Tell me about your relationship with your parent who was a Holocaust survivor. What are some examples that describe this relationship?
- 3) What are some feelings or thoughts about yourself that you believe you have received or picked up from this parent? Have these feelings or thoughts changed over time?
- 4) Tell me about dinner conversations in your childhood house.
- 5) Was it your goal to please your parent who was a survivor? If so, how did you go about doing this?
- 6) How would you say you typically responded if this parent did something to upset you? Could you provide examples?

- 7) What do you consider to be the biggest success regarding your survivor parent's ability to parent you?
- 8) How would you rate your survivor parent's ability to parent you on a scale from 1-10, one being the least effective and ten being the most effective? For what reasons did you give this rating?
- 9) How do you typically respond if your oldest child upsets or disappoints you? Please provide an example.
- 10) How would you think your oldest child would describe his or her level of autonomy or independence in your home? What are some examples?
- 11) How is your relationship with your oldest child different or the same as your relationship with your survivor parent?
- 12) How would you say your child would rate you as a parent on a scale from 1-10, one being the least effective and ten being the most effective? For what reasons did you give this rating?
- 13) What do you consider to be your biggest success as a parent?
- 14) Have you, your parent, or your child ever seen a therapist or sought a support group to discuss any emotions that have arisen as a result of the Holocaust background in your family? Were these interventions helpful? Please explain how they were helpful or not useful?

Finally, I have a few personal questions.

1. What is the highest level of education that you received?

Doctoral Education	Professional or Graduate School	College Graduate	
Some College	High School Graduate	Less than High School	

2. What is your parent's country of origin?

3. How old was your parent when they escaped or were liberated.

Infancy-9	10-17	18-25	26-32	33-39	
40-46	47-52	53-59	60-and above		

4. How old are you?

18-25	26-32	33-39	40-46	47-52	53-59	60-and above
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5. What is or was your occupation?
6. What is your approximate annual family income?
- | | |
|-------------------|--------------|
| Less than 19,999K | 20-39,999K |
| 40-59,999K | 60-79,999K |
| 80-99,999K | 100K or more |

We have concluded this interview. I would like to thank you again for taking time to meet with me and answer my research questions. As a small token of appreciation for taking the time to interview with me I am making a donation to the Museum of Tolerance in Los Angeles.

Call for Papers

The Social Work Forum, a refereed journal of social work practice and Jewish social thought published by Wurzweiler School of Social Work of Yeshiva University, accepts manuscripts on a continuing basis. The Forum is devoted to presenting the current thinking, expertise and experience of faculty, social workers, and educators in the professional fields of social work and Jewish communal service.

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Intermarriage	Social welfare
Immigration	

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