Latino Immigrant Teens and Parents: What They Say about Their Lives

Preliminary Results

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SUMMARY

This report focuses on the migration and acculturation experiences of Latino first-generation immigrant youth ages 12-18 who were enrolled in a high school or middle school in North Carolina between Fall 2004 and Spring 2006. Six key themes have emerged in our preliminary analyses of the data:

- Latino immigrant youth in North Carolina are primarily of Mexican origin. They typically immigrate to North Carolina at age 9 or older and have been separated from one or both of their parents for 2.5 years.

- Though parents drive the decision to migrate to the U.S., about half (49%) of Latino youth also felt involved in the decision. Most adolescents report that their family came for one of two reasons: better job opportunities (47%) or to be reunited with family already living in the U.S. (22%).

- Youth participating in this study reported relatively high levels of school satisfaction, teacher support, and general social support. However, they did express concerns about school safety.

- Forty-one percent of Latino adolescents reported having felt discriminated against, especially by other kids at their schools. Moreover, they believed that racial discrimination in the U.S. would ultimately limit their economic opportunities.

- These experiences of family separation and perceived discrimination likely contributed to the high levels of depression (9%) and suicidal ideation (9%) that we identified among our first-generation immigrant Latino youth. Comparisons with national-level data suggest that these mental health concerns are more likely to increase rather than decrease with acculturation and time in the United States.

- The challenges of migration and acculturation also contributed to high levels of depressive symptoms among primary caregivers (mostly mothers) of our Latino youth. Sixty-two percent of the caregivers in our sample reported clinically significant symptoms of depression. Depression and psychological distress can undermine parents’ capacities to prove the nurturing environment that will help their children flourish.
The last decade has been characterized by an unprecedented growth in the Latino population of North Carolina. In North Carolina, the population has grown 394% from 77,000 in 1990 to 379,000 in 2000 (U.S. Census Bureau, 2001). This growth has created many new challenges for North Carolina’s health and social service organizations. One area where resources and data are especially lacking is mental health. At a state level, Hispanics, advocates, and policy makers attending the March 2001 El Foro Latino, an annual discussion forum for Hispanics in North Carolina, identified mental health needs as a key concern for the Latino community. At the national level, the Surgeon General recently released a report identifying many of the barriers faced by Latinos and other minorities in finding, accessing, and utilizing mental health services (U.S. Department of Health and Human Services, 2001). The report concludes with a call to action, saying that “…the National agenda can be informed by understanding how the strengths of different groups’ cultural and historical experiences might be drawn upon to help prevent the emergence of mental health problems or reduce the effects of mental illness when it strikes.”

Despite the increasing size and economic presence of Latinos in the U.S. and these urgent calls to action in preventing and treating mental illness, there is little definitive data on the prevalence or etiology of mental health problems among Latino adolescents. The few studies which do include information on mental health and have sufficient numbers of Latino respondents do not collect substantial data on migration or acculturation experiences. As a result mental health is inadequately contextualized to reflect the life events and experiences that may contribute to, or exacerbate, mental health difficulties.

The Latino Adolescent Migration, Health, and Adaptation (LAMHA) study aimed to: (1) provide prevalence data on mental health symptoms among first-generation Latino youth, (2) describe the characteristics of the community, school, and family contexts that affect the mental health of new immigrant youth, (3) describe the migration and acculturation experiences of immigrant Latino youth, and (4) explore parent and child understandings of mental health and illness. This project creates a foundation for further examination of the efficacy of culturally-tailored interventions, comparisons between established and newly forming immigrant communities, and the improvement of mental health services to Latino populations.

1 Throughout this report, we will use the word “Latino” or “Hispanic” interchangeably to describe the population of interest. We recognize that this term spans a variety of cultural groups with different migration histories, cultural traditions, and needs.
METHODS

Through the LAMHA study, data has been collected on 283 first-generation Latino immigrant youth ages 12-19 and 283 of their primary caregivers (mostly mothers). First-generation immigrant youth are youth born outside of the U.S. to foreign-born parents. Approximately half of the parent sample (n=151) also participated in a survey of health service use patterns adapted from the Child and Adolescent Service Assessment (CASA) (Ascher, et al., 1996). Finally, qualitative interviews about migration and acculturation experiences were completed with 20 Latino youth and qualitative interviews about mental health beliefs were completed with 14 primary caregivers. In a preliminary pilot study for the LAMHA project, qualitative interviews with 20 Latino parents were also conducted. All data is being made available by the Carolina Population Center through a contract use agreement and a project website (http://www.cpc.unc.edu/projects/lamha).

This report provides preliminary findings to school systems that assisted us. The findings are based on an unweighted sample of 150 parent-child dyads. All data were collected between the Fall of 2004 and the Spring of 2006.

Using a stratified random sampling strategy, the LAMHA study was designed to generalize to first-generation Latino immigrant youth aged 12-19 who were living in high-growth (i.e. ≥ 394% growth between 1990 and 2000) Latino communities in North Carolina with a Latino population of at least 5,000. Based on data from the Census 2000, 17% of North Carolina’s 100 counties qualified as large high-density Latino communities. Fifty-seven percent (N=217,221) of North Carolina’s Latino population lived in these 17 counties and 68% were first-generation immigrants.

The focus on first-generation Latino adolescents living in large high-growth communities was both practical and substantive. On a practical level, it greatly facilitated data collection efforts and reduced the cost of the study. The size criterion helped to ensure an adequate sample size while reducing travel costs. The growth criterion facilitated the enrollment of first-generation, immigrant youth into the study. On a substantive level, this design focused our study on communities in North Carolina where mental health services for the Latino community are most needed and least developed.

2 Youth born abroad to U.S. at least one U.S. born parent are U.S. citizens and are not included as first-generation immigrants.

3 The majority of qualitative interviews were conducted in Spanish. Interviewers translated and transcribed interviews. Dr. Perreira directed the adolescent interviews. She is fluent in Spanish and met weekly with interviewers on the adolescent interview team to review all transcriptions and translations. Though Dr. Chapman directed the health beliefs component of the study, Dr. Perreira also provided oversight of the transcription and translation of the health belief interviews with parents. These efforts help to ensure the integrity of the translations from Spanish to English.
To ensure economic variation in the communities in which Latino youth live, high schools serving large high-growth Latino communities were stratified into two groups – urban and rural. Urban high schools were defined as high schools serving counties where over 50% of the population is living inside an urbanized area or urban cluster. Rural high schools were defined as serving counties where 50% or less of the population is living in an urbanized area or urban cluster. Four high schools from the urban strata and six high schools from the rural strata were selected with a probability proportional to the size of Latino enrollment in each school. For each high school selected, all middle schools sending students to the participating high school were also selected.

A total of 4 urban and 6 rural school districts including 11 high schools and 14 middle schools participated in the study. After receiving passive consent from parents, school districts provided us with names and contact information for students who identified as Hispanic or Latino. Students and their primary caregivers were then contacted and recruited by phone. Active consent was provided for all interviews.

**Table 1. Contents of Parent and Youth Surveys**

<table>
<thead>
<tr>
<th>Factual Areas</th>
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</thead>
<tbody>
<tr>
<td>(1) Age at entry</td>
</tr>
<tr>
<td>(2) Length of time in the U.S.</td>
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<tr>
<td>(3) Family structure and Family functioning (Familism and FACES)</td>
</tr>
<tr>
<td>(4) Parent &amp; child employment and education histories</td>
</tr>
<tr>
<td>(5) Views of School</td>
</tr>
<tr>
<td>(6) Social Support</td>
</tr>
<tr>
<td>(7) Migration Experience and Acculturation</td>
</tr>
</tbody>
</table>

**Mental Health Measures – Youth**

| (1) Child Behavior Checklist (parent completed) |
| (2) Youth Self-Report |
| (3) Trauma Symptom Checklist for Children |
| (4) Children’s Depression Inventory |
| (5) Multidimensional Anxiety Scale for Children |
| (6) Youth Reported Delinquency |

**Mental Health Measures – Parents**

| (1) Modified PTSD Symptom Scale |
| (2) Center for Epidemiologic Studies- Despression Scale |
| (3) PRIME-MD Clinical Depression Scale |
| (4) K3 Psychological Distress Scale |
Teens and parents were asked to complete an interview-administered survey comprised of five sets of survey instruments that have been used and validated extensively with Spanish-speaking populations (Table 1). The first set of instruments focused on youth and parental mental health. The Child Behavior Checklist (Achenbach, 1991) and the corresponding Youth Self Report (Achenbach, 1991), asked questions about specific competencies and behavioral/emotional problems. Parents complete the Child Behavior Checklist and youth complete the Youth Self-Report. Youth also completed the Children’s Depression Inventory (Kovacs, 1992) and the Multidimensional Anxiety Scale for Children (MASC) (March et al., 1997). Parental depression and psychological distress was measured using the Center for Epidemiological Studies Depression Scale (CES-D) (Radloff, 1977), the PRIME-MD, and the K3 Psychological Distress measure. The Trauma Symptom Checklist for Children (Birere, 1996a) and the Modified PTSD Symptom Scale (MPSS-SR) (Falsetti et al., 1993), were used to identify symptoms of post-traumatic stress in youth and adults, respectively.

The second set of instruments focused on acculturation and family. The Psychological Acculturation Scale (Tropp, et al. 1999) was used to evaluate the degree of acculturation. The Family Adaptation and Cohesion Scale (FACES II) and the Gil & Vega’s Familism Scale (Gil, Wagner, & Vega, 2000) were used to assess emotional bonding in the family unit and the family’s ability to change its power structure, role relationships, and relationship rules in response to situational demands (Olson 1986, 1989).

Additionally, the survey included three scales on perceptions of school performance from the School Success Profile (Bowen & Richman, 2000) and the Social Support Scale (Richman, Rosenfeld, & Hardy, 1993). Lastly, participants answered socio-demographic questions and questions about the context of their migration and settlement into the United States. These questions were adapted from the Youth Adaptation and Growth Study and the corresponding survey for parents (Portes and Rumbaut, 2001).
OVERVIEW OF STUDY PARTICIPANTS

Latinos in the participating school districts were from several different countries. Data from the Census 2000 shows that most (67%) were from Mexico. Other places of origin included Puerto Rico (6%), Cuba (2%), Central America (9%), and South America (4%).

In our study, 71% of the participating youth were of Mexican origin (Table 2). Other represented countries included Chile, Colombia, Costa Rica, Ecuador, Honduras, El Salvador, and Venezuela. The plurality of youth in our sample arrived to the United States at age eleven or older. Moreover, they had been separated from one or both of their parents for an average of 2.5 years.

<table>
<thead>
<tr>
<th>Table 2. Selected Youth Participant Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys interviewed</td>
</tr>
<tr>
<td>Girls interviewed</td>
</tr>
<tr>
<td>Average age of Youth</td>
</tr>
<tr>
<td>Youth lived with two biological parents</td>
</tr>
<tr>
<td>Youth worked in past 12 months</td>
</tr>
<tr>
<td>Youth immigrated from Mexico</td>
</tr>
<tr>
<td>Average age at arrival</td>
</tr>
<tr>
<td>Between birth and five years</td>
</tr>
<tr>
<td>Between six and ten years of age</td>
</tr>
<tr>
<td>Eleven years old or above</td>
</tr>
<tr>
<td>Average length of separation from one or both parents</td>
</tr>
<tr>
<td>N=150</td>
</tr>
</tbody>
</table>
The caregivers participating in our study were mostly mothers (79%) and were not U.S. citizens (92%) at the time of the survey (Table 3). Nearly half (47%) had lived in the U.S. for 5 years or less and were therefore not yet eligible to naturalize. Most were living with a spouse or partner but few report high levels of family or social support. Despite having two working parents, the vast majority were living near poverty with an average monthly income of only $2,348 for a family of 5. Nevertheless, nearly one-quarter of the families (24%) reported owning their home (including a trailer home).

**Table 3. Selected LAMHA Caregiver Characteristics**

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mothers answered the survey</td>
<td>79%</td>
</tr>
<tr>
<td><strong>Acculturation</strong></td>
<td></td>
</tr>
<tr>
<td>Non U.S. Citizen</td>
<td>92%</td>
</tr>
<tr>
<td>&lt;= 5 yrs in U.S.</td>
<td>47%</td>
</tr>
<tr>
<td>Speaks only Spanish</td>
<td>78%</td>
</tr>
<tr>
<td><strong>Social Support</strong></td>
<td></td>
</tr>
<tr>
<td>Living with a Partner</td>
<td>80%</td>
</tr>
<tr>
<td>Religious</td>
<td>75%</td>
</tr>
<tr>
<td>High Social Support</td>
<td>18%</td>
</tr>
<tr>
<td>High Family Support</td>
<td>33%</td>
</tr>
<tr>
<td><strong>Socio-Economic Background</strong></td>
<td></td>
</tr>
<tr>
<td>No High School Diploma</td>
<td>62%</td>
</tr>
<tr>
<td>Parent works full- or part-time</td>
<td>73%</td>
</tr>
<tr>
<td>Avg. Monthly Income (14% missing)</td>
<td>$2,348</td>
</tr>
<tr>
<td>Avg. Monthly Remittances</td>
<td>$126</td>
</tr>
<tr>
<td>Avg. Household Size</td>
<td>5</td>
</tr>
<tr>
<td>Receives Public Assistance</td>
<td>9%</td>
</tr>
<tr>
<td>Owns a Home</td>
<td>24%</td>
</tr>
</tbody>
</table>

N=150
THE MIGRATION JOURNEY

Most adolescents (67%) say that either a mother or father made the decision to come to the U.S. Almost half (49%) perceived themselves to have been somewhat or very involved in this decision. Slightly over one third (36%) did not see themselves as involved in this decision. The following quotes represent a variety of perspectives expressed in our interviews about the children’s reaction to the decision to move to the U.S. In some cases children were not told until after their parents had left. Comments in italics indicate interviewer impressions or clarifications.

Quotation 1

I was 14 and my mom told me that we had to come here because my daddy was already here and we had to come because I had to get a better life, to learn English and that stuff. And, I didn’t like that. I was really mad at first because you know I was in middle school and my friends and everybody was there. When I was in middle school I thought I was going to graduate with all my friends and that stuff. And then my mom just told me that she wanted me to come here with her. It was hard because I didn’t want to. I said, ‘NO, I am not going over there!

Quotation 2

Well, I remember when she left we were in school, so we came back and [stops talking and begins to cry] it’s sad [chokes up], you go to school one day and come back and your mom’s not there [still crying]. I think that story is very similar to other kids. You know, their parents try to minimize, I don’t know, the crying and all this stuff, … so they try to leave whenever their kids are not at home or something. …In my case, I mean, it wasn’t that bad, I had my grandparents, my aunts and uncles, but I mean, it’s still bad whenever you come home and you think [chokes up] um no, not really. Not with us. She had talked about it with my grandparents and with my other family, my aunts and uncles, but they hadn’t talked to us [emphasis added by respondent] at all about that.
Quotation 3

I have to say, things did get better when my mom moved over here. I mean, there was more income. Like I said, I mean, I couldn’t say we were treated badly, we were with family. We were very close to my grandparents and everything. So I couldn’t really say life changed for the worse, I mean it’s something that, I mean, you miss you parents, your mom, but it’s not, since you’re living with relatives, that you’ve spent most of your life with, it minimizes that. But as far as, like, the quality of life did improve greatly.”

Adolescents voiced a variety of first reactions to this country. The quotes below describe some of these views.

Quotation 1

I thought the food (laughing) was very different. I didn’t like any of it. Nothing. I first tried it and I didn’t like it. I thought that it might be like the food in Mexico. I figured the people from my country might bring me my type of food. I thought we might be given tortillas or something like that, but they brought us a hamburger for each person. I really didn’t like it.

Quotation 2

From the moment I left I thought it was going to be fun. And then I got here and I said, "What? What is this?" This was all new to me. It's weird 'cause people were talking in a language I didn't understand, and every time I didn't understand that. I knew, I thought they were talking about me, but they were not talking about me, you know? I felt very weird because I couldn't communicate with them. Like if I needed to go to the bathroom how could I say [that] to the teacher. And I couldn't just walk out of the classroom. It was very difficult for me to adjust like this.
REASONS FOR MIGRATION

Most adolescents report that their family came for one of two reasons: better job opportunities (47%) or to be reunited with family (22%). Most (52%) described being concerned for their personal safety during the actual migration journey and 60% described the move/journey as somewhat or very stressful. The two quotes illustrate how adolescents understood their families’ decisions to emigrate.

Quotation 1

My family had concerns around work. Sometimes my dad had work and sometimes he didn’t or sometimes he couldn’t work. If the work was finished then he didn’t have other work. It is very, very difficult to be there without work—difficult, difficult. [really emphasizing these words]…In the town it wasn’t like here where you could find a factory to work at. There was no industry and no office work or businesses there. There were mostly just houses there. The only type of work was in planting, agricultural.

Quotation 2

There wasn't much money. We kept having hard times with money and stuff like that. Like we needed coats and there wasn't any money for any. They decided that that was enough. They knew that it was never going to change so they came here. That means if you don't study you don't have that much money so you are going to have to take care of your money. You'll have to be worrying about where it is going to be short or worrying you 'can't go to this place', 'you can't meet this people' 'cause you don't have that money, but if you study you have your money. You don't have to worry about [it]. I mean you just say, "I just have to pay my bills." You know. But you still have your own money to have fun. So they want us not to be working our whole lives like they did. They want us to enjoy our lives.”

Although most adolescents now say that moving to the U.S. was best for their family (79%) and for them as individuals (77%), many (70%) would like to return to live in their native county at some point in their lives and only 38% say they are happier in the U.S. than they would be in their native country.
For the most part, these youth speak mostly or exclusively Spanish in their homes (75%) but not with friends (28%). One fifth has worked for pay in the last 12 months. Three quarters report average or better grades on their last report card and 91% want to graduate from high school and pursue higher education. However, a smaller percentage (87%) believes they will actually be able to pursue higher education.
SCHOOL EXPERIENCES

As indicated in the previous section, many of these students have high aspirations for their education but are not entirely sure they will be able to achieve these goals. To understand school experiences further, we administered a number of scales that asked adolescents about school. These scales were taken from the School Success Profile (SSP) which has been administered to many students across the country. The School Satisfaction scale represents the extent to which a student perceives a positive academic and social climate at school. The Teacher Support scale represents the extent to which a student that teachers attitudes and behaviors are helpful. The School Safety scale represents the extent to which a student experiences the school environment as safe and secure. The General Social Support scale represents the extent to which a student has people in his or her life who provide both concrete and emotional expressions of support on a weekly basis.

Table 4. Means of School Experience Items for LAMHA participants vs. National Multi-Racial Sample

<table>
<thead>
<tr>
<th></th>
<th>LAMHA Sample</th>
<th>National SSP Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Satisfaction</td>
<td>5.6</td>
<td>4.7</td>
</tr>
<tr>
<td>Teacher Support</td>
<td>9.1</td>
<td>8.1</td>
</tr>
<tr>
<td>School Safety</td>
<td>6.1</td>
<td>11.3</td>
</tr>
<tr>
<td>General Social Support</td>
<td>5.5</td>
<td>5.9</td>
</tr>
</tbody>
</table>

In Table 3, we present the scores of the LAMHA participants on these measures as compared to a national non-probability sample (N=16,631) taken from 351 schools across six states between July 2001 and March 2003 (Bowen, Rose, and Bowen, 2005). The national sample is racially diverse and includes 41.3% non-Hispanic white, 47% non-Hispanic Black, and 4.4% Hispanic. The majority came from disadvantaged families with 55% indicating that they received free or reduced price lunch at school.

In all cases, a higher score indicates a more desirable perception. The only area in which LAMHA participants perceived school less positively than the national sample was in the area of school safety.

Below are some quotations taken from our interviews with adolescents about their school experiences in the U.S.
**Quotation 1**
Double in the studies and double in the quality of education. Here it is very different. It is more advanced here. The education is better. The attention given by the teachers is better here. Better instruction. It is better here. I don’t have any better words to use than that to express this enough.

**Quotation 2**
The teacher began to teach us words, the numbers, all the basic stuff. And after that year I think they give you a test of “oral language”. If you are in level 1—that’s where you begin—and then at the end of the year we got right up to level 5. And at the end of that year in that class I remember that we proved that we were at level 5, and level 5 means that you are ready for regular school. I was impressed that we advanced so quickly. So in one year in the 6th grade I went to the regular school just like all the others.

**Quotation 3**
I was the first Hispanic to go to that school and, it’s hard. I remember the first thing I learned how to say is “I don’t speak English.” It was hard, I mean you would go, the bus would pick you up in the morning, and there wouldn’t be other Hispanics so you would just sit there. Get to school, go to whichever class you had to go, the teachers would show you which way to go…And I remember I used to go to the library and they wouldn’t let me get library books!! No, ‘cause, I guess ‘cause I don’t have a card or something, I don’t know, but I mean, I remember I couldn’t check out books. It’s hard…The transition is hard. I remember one time I told my mom “why did you even bring us over here?” and she’ll probably tell you the same thing. But I did say “why? I don’t like this.” But you learn to adjust.

**Quotation 4**
They are really nice. They work--like I am really bad at math, but my teachers are helping me right now. So I'm making A's on my test because he's helping me after school, during lunch, or before school.
Quotation 5

They pay a lot more attention to you here than they do over there [in Mexico]. I guess it’s because of the size of the classrooms, it’s smaller like thirty students compared to there you might have fifty students, because you did have the grades separated but there were still a lot of kids in each grade. Here it’s more on a, not really on a one to one, but here if you have a question you have a lot more time to ask, you can stay after school or whatever. The teachers are more interested in you, in how you’re doing here than they are over there, really. If something is wrong, they’ll be like “is everything okay?” If you need to stay after school, [they’ll let you] or they’ll give you extra material or something.
PERCEIVED DISCRIMINATION

Adolescents in the LAMHA sample believed racial discrimination was a significant factor in their lives. Over half (56%) believe that discrimination limits economic opportunity in the U.S. and that Americans generally feel superior to foreigners (65%). Many report being discriminated against in the U.S. (41%). Of that group, the plurality (31%) reported the source of discrimination as being “kids at school. Below are some quotations about experiences with discrimination.

Quotation 1
They think that because they are in their country, they can discriminate [against] you or do whatever they want with you. Sometimes they call you “Wetback.” But sometimes they don’t know what you have been through. They don’t know why you are here. They don’t know what were the problems that make you come here. [Her eyes began to water as she started to tear up.] They don’t even think about the situation that you are in. They don’t think of how the person that they discriminate [against] feels. They just say, ‘Oh these Mexicans! They just come to take our jobs and our money, and to work here, and to be here without papers without being legal.’

Quotation 2
Yeah, it [school] was horrible. And people were just racist, and the bad thing about it was that the Hispanic kids were racist! The kids who were born there in Texas [means U.S born Hispanic kids] were like “why are you here!? Lalalalala.” I remember, they were teaching me English, the kids, they were being all nice to me and stuff, and they were teaching me English. And they taught me to say like “I’m crapping in my pants” or something like that. And I said it to the teacher and I got in trouble, everybody was like laughing, you know?
Quotation 3

It [racism] has changed me, 'cause if I was in Mexico there would more Hispanic people, and I would not see the world as it was, really is---racist. They looked at you just from being a Catholic-- just any kind of--if you are in a religion--they look at you differently--"No she's not Christian. Oh she's not Buddhist." From Mexico, I mean, you are just friends with a person. You don't care what religion they are. You are just friends with them. If you are in your own country, you belong there. You're not a stranger. So everything is familiar to you in your house. But if you go to someone else's house and live there they're always going to criticize at you 'cause you're not like them. You are different than they are. So that has changed me to see what people are really like. And you can see through them without even knowing them 'cause they look at you differently just 'cause you are a different color and different belief.

Quotation 4

And then here, I just let it all go, basically. I got into some bad stuff, got into some trouble, 'cause I don’t know. I know that it did and that it [racism] affected me. You know? I wasn’t myself, when I was doing the bad stuff I wasn’t myself, I was somebody else, I was wanting to be somebody else, I was trying to, I don’t know, I was trying to fit into a mold of some sort of society, you know? I didn’t know why I wanted, when I wanted it. I just took things and I don’t know, it all exploded. And it was me and my middle brother that were the most getting into bad stuff and stuff. We got into some gang violence, me and my middle brother. We got into some drug problems, you know. But thankfully our parents helped us out with that. And I told my mom [about the discrimination] and she told me “some people are like this and like that, but you gotta understand, you gotta forgive.” That was they key word, forgive. And our parents always put that on us, you have to forgive, even if they smack you on one cheek, turn the other…It’s like, you be the better person, don’t lower yourself to their standard. That was the main point that they always said. Don’t lower yourself, you know. You have to be beyond that.
HEALTH AND BEHAVIOR

General Health
The LAMHA study focused primarily on mental health and behavior among Latino youth. However, we also asked students and their parents questions about their health more generally and their utilization of services. On a 5-point Likert scale, slightly over half of our adolescent sample rated their own health as very good or excellent. Slightly less than half had received a routine medical examination in the last year.

Adolescent Mental Health and Behavior
Among Latino adolescents, 9% of our sample had significant symptoms of depression (i.e. a CDI score of 19 or more), 10% had significant symptoms of anxiety using the MASC, 9% were experiencing suicidal ideation, 4% had sub-clinical or clinical symptoms of Post Traumatic Stress Disorder, and 4% had evidence of disassociation (Figure 1). These symptoms varied substantially by gender. Girls were typically at greater risk of depressive symptoms (12% vs. 5%) while boys were at higher risk of disassociation (4% vs. 7%)

Figure 1. Adolescent Mental Health
Comparisons with data from the National Longitudinal Study of Adolescent Health (Add Health), demonstrate how mental health differs by immigrant generation. The percentage of Latino first-generation immigrants with depressive symptoms or reporting suicidal thoughts is similar in both the Add Health and LAMHA samples. When we look at the 2nd generation (U.S.-born youth with foreign-born parents) and the 3rd+ generation (U.S. born youth with U.S. born parents), the risk of depression exceeds 10% and the risk of suicidal ideation increase. Thus, the mental health needs of our Latino youth are not likely to diminish with time. Instead, they may increase and become more of a concern.

This is of particular concern given that few of our Latino youth have access to health insurance or a source of regular medical care (North Carolina Institute of Medicine, 2003). In our sample, only 5% received counseling in the last year despite the fact that 9% were at risk of clinical depression and another 9% had thought of killing themselves in the past two weeks.

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4 Initiated in 1994, the Add Health is a nationally representative study of more than 20,000 youth that explores the causes of health-related behaviors of adolescents in grades 7 through 12 and their outcomes in young adulthood (see http://www.cpc.unc.edu/projects/addhealth).
While Latino students reported relatively high levels of mental health concerns, they reported low levels of delinquency. As has been reported in previous studies, immigrant youth are much less likely to use illicit drugs or alcohol (Harris, 1999; Harris, et al., 2006). In our study, 98% report that they had never sold drugs; 95% reported that they had never used illicit drugs of any type; and just under one third had ever used alcohol. Pregnancy was a more common issue with 10% of Latino first-generation immigrant youth reporting that they had been pregnant or had impregnated someone else.

To ensure their confidentiality and promote the truthfulness of their answers, adolescents answered questions on their mental health and behaviors on their own. These sections of the survey were not interviewer administered.

**Caregiver Mental Health in Latino Immigrant Families**
Experiences of loss, trauma, discrimination, and other types of stress during migration and settlement in the U.S. can translate into high levels of depression and other mental health symptoms not only for adolescents but also for their primary caregivers (Perreira, Chapman, and Livas-Stein 2003). Moreover, parental depression has been strongly associated with depression and other developmental challenges for children (Dennis et al., 2003; Conger and Elder, 1994; Linver, Brooks-Gunn, & Kohen, 2002).

**Figure 3. Caregiver Mental Health in Latino Immigrant Families**

<table>
<thead>
<tr>
<th>Depressive Symptoms (CESD)</th>
<th>Depressive Symptoms (PRIME-MD)</th>
<th>Depressed (PRIME-MD)</th>
<th>Serious Psychological Distress (K6)</th>
<th>Experienced Trauma</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Head Start Mothers (N=195)</td>
<td>LAMHA Mothers (N=150)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>46%</td>
<td>62%</td>
<td>27%</td>
<td>23%</td>
<td>17%</td>
</tr>
</tbody>
</table>
In the LAMHA study, we found that 62% of our primary caregivers (mostly mothers) had significant symptoms of depression (Figure 3). This is similar to the levels of depression found among Latino mothers with infants and toddlers participating in Early Head Start programs in North Carolina (Perreira, Beeber, Schwartz, Holditch-Davis, 2005; 2006). It is also consistent with national studies reporting high rates of depression among Latinos, especially women and immigrants (Alderete et al., 2000; Ortega et al., 2000; Rickert, Weimann, & Berenson, 2000; Vega & Rumbaut, 1991). When we look at clinical diagnoses for depression or psychological distress, the rates are still quite high – 23% to 27%. In addition, 17% of caregivers with adolescents had experienced a traumatic event such as crime victimization during their trip to North Carolina.

Figure 4 shows that the experiences of acculturative stress (especially limited English proficiency), social isolation (e.g., low levels of social or family support), and discrimination clearly contribute to the risk of depression in caregivers in the LAMHA sample. For example, parents with significant depressive symptoms (CESD ≥ 16) reported lower levels of strong family support than parents without significant symptoms of depression (22% vs. 53%). Similarly, those who had significant depressive symptoms were more likely than those without symptoms to report feeling discriminated against (39% vs. 18%).

Figure 4. Acculturation, Social Support, and Discrimination, by Caregiver Depressive Symptoms (LAMHA Sample)
ADVICE FOR LATINO IMMIGRANT YOUTH

We asked our adolescent participants to tell us what advice they would give to other new immigrant youth. Here is a sampling of what they said.

Quotation 1

Don’t get freaked out by the change, you know. Don’t get freaked out by the rules. If you want it [racism] to affect you, it will affect you. Learn to be yourself, but also learn to help others, don’t be selfish. Don’t be selfish with your feelings [or] with your thoughts. Just don’t be selfish at all. And the golden rule, do unto others as you would like them to do unto you, and the whole karma essence. Basically that’s it. Be good.”

Quotation 2

There is really no good advice. You just gotta keep in mind that if they [your parents] did it, it’s to try to better your way of life, not just theirs. ‘cause, and I mean, you know that sooner or later they’re gonna go get you or get somebody to bring you over, ‘cause life, I mean, it’s hard living over there. I mean, if you go to school you can only go to a certain grade level because they don’t have like, like they have here, like the free education through twelfth grade, I mean you gotta buy books, sorta like if you were in a university. You gotta buy your books, you gotta pay tuition and all that stuff, and that’s expensive. So basically you just gotta, pull it up [he means suck it up, deal with it].

Quotation 3

When I was in the 11th grade, I graduated taking AP Calculus. It was just me and another Hispanic girl, and all the other Hispanics were like “why? You can’t continue studying, why would you do it?” and I was like “if there’s ever a chance for me to go [to college], I’ll have that behind me.” I also took a college level course. My grade point average was like 3.97 or something and I just think that helps you out. If you have the opportunity to go to college, to a community college even or whatever, you know you have that behind you and it’ll help you better yourself. And so I think the advice would be, go to school, don’t quit, don’t hang out with the wrong crowd. And I guess that’d be about it. And for the parents, just watch your kids. ‘cause there are a lot more
things that they could do here that you wouldn’t even…you know, in Mexico you didn’t hear, I didn’t hear nothin’ about no kid smokin’ marijuana or usin’ no kind of drugs. But here there are so many bad influences, peer pressure and stuff like that. So I would say watch your kids, ask ‘em where they’re goin’, stuff like that.
STUDY LIMITATIONS

These preliminary results should be read and used with some caveats in mind. First, preliminary results may change once the additional 130 participants are included and the data are weighted. Please check the LAMHA website cited earlier in this report for ongoing updates about study findings.

The next set of cautions relates to sampling strategies and our ability to contact potential respondents. Our respondents were initially contacted and recruited by phone and many could not be contacted because their phone lines had been disconnected, phone numbers changed, or they did not answer the phone after repeated attempts. Due to the sampling strategy and sampling frame, this study does not fully capture youth who live with parents who are migrant farm workers. In addition, the preliminary results include a few cases that are not first-generation immigrant youth. They are children born abroad to at least one U.S. citizen parent. In future analyses, these cases will be removed.

Please note that this sample is taken from Latino youth who are attending school. Many youth migrate to the U.S. and never attend a U.S. school system. In addition, of those that do enter school, many may drop out to enter the workforce, assume primary roles as young parents, or because language and educational barriers seem insurmountable to them. Therefore, our survey lacks the perspective of these youth who may be more vulnerable than those who are attending school.

Finally, the quotes selected for this report reflect the themes discussed by many of the participants in the initial adolescent qualitative interview. However, a more rigorous qualitative analysis is on-going and additional themes and inter-relationships between themes are being identified.
CONCLUSIONS

In sum, we found much strength and resiliency among the Latino immigrant youth that we interviewed. Our Latino youth are brought to this country as a part of their parents’ decisions to immigrate for economic security and to further their children’s life chances. These young people express mixed feelings on this decision saying that while they believe leaving their home countries was best for them and their families, they do hope to live in their native lands one day and are not sure they are happier here than they would have been there.

Our Latino youth generally express positive feelings about schools and teachers while not underestimating how difficult the experience is for them. Discrimination seems to be an issue that keeps them from feeling truly a part of the school community with most students saying they experienced discriminatory remarks from other students as opposed to other possible sources.

Our Latino youth have high aspirations and aim to work hard at school. They are worried about what their life chances really are but appear optimistic that they can achieve something in this country. They are not engaging in risk behaviors in large numbers. Yet, for a significant group their emotional and physical health needs are not being well met.

Schools are a critical part of the Latino immigrant child and family’s experience. We hope the information provided here is helpful as you work with this group of new North Carolinians.
NOTES

(1) Please refer questions regarding the adolescent interviews to Dr. Perreira. Questions regarding the parent health beliefs interviews should be referred to Dr. Chapman.

(2) Preliminary results regarding health beliefs and service use are not included in this report. They are on-line at www.cpc.unc.edu/projects/lamha/publications.

(3) Results for the LAMHA pilot interviews with Latino immigrant parents have been published elsewhere. A short abstract and reference to the article is on line at www.cpc.unc.edu/projects/lamha/publications.
REFERENCES


