Family Support and Parental Monitoring as Protective Factors in Preventing Depression and Alcohol Use among Mexican American Adolescents

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Statement of the Research Problem

The purpose of this dissertation research is to bridge the gap in the literature on Mexican American adolescent drinking and to contribute to the existing literature by examining generational differences in depression, adolescent alcohol use, frequency of use, and likelihood of experiencing social problems related to drinking. The existing literature on Latinos tends to group Mexican Americans with other Latino groups, which fails to capture unique characteristics of this culture. When Mexican Americans are studied as a unique and separate culture, the majority of the research does not distinguish between less acculturated Mexican Americans and those who are more oriented toward U.S. culture. Due to the lack of research and the need for further understanding of generational differences in Mexican American mental health outcomes, this study takes into consideration the important role of generational status in exploring the dependent variables. Furthermore this article seeks to explore precisely what aspects of family support and parental monitoring protect adolescent youth from using alcohol, engaging in frequent drinking, and experiencing social problems as a result of drinking.

Research Background and Hypotheses

The purpose of this study was to explore the effects of family support and parental monitoring on depression and alcohol use in Mexican American adolescents. Generational status, socioeconomic status, gender, and age were also examined. The study was a secondary analysis of data from The National Longitudinal Study of Adolescent Health (ADD Health). The ADD Health data used for this study was obtained during 1994-95.

While this first wave of the ADD Health study was conducted approximately 15 years ago, examination of this data set is valuable for several reasons. ADD Health is one of the largest nationally representative data sets available on Mexican American adolescents and it contains information not captured elsewhere, which is a key reason why recent articles and dissertations continue to use this data set (Mogro-Wilson, 2008; Guilamo-Ramos et al., 2004; Harker, 2001). Since there is a limited amount of research regarding risk and protective factors for depression and alcohol use in Mexican American

youth, this large data set provides important information on over 1,551 Mexican American youth residing across the United States during that time period. Furthermore, while the study did not inquire about immigration status, the participants in the ADD Health study consisted of Mexican American adolescent students across the country who due to their age were required to attend school regardless of immigration status, therefore providing information about this understudied subpopulation. Lastly, in addition to providing information about health behaviors at the time, ADD Health is a longitudinal study that is still in progress; therefore there is the possibility of using the data for follow up research on this population in the future.

This study investigated four research questions. The first two questions were intended to address the entire Mexican American sample, while questions three and four addressed youth who reported using alcohol. Of the 1551 Mexican American students examined in this dissertation, 949 respondents reported drinking alcohol and constituted the sample for the study questions on the frequency, amount, and consequences of alcohol use. The research questions and hypothesis were:

1) Are generational status, gender, age, and socioeconomic status of Mexican Americans related to their levels of depression and use of alcohol?

Hypotheses: Depression and alcohol use will increase with generational status for both males and females. Overall females, older adolescents, youth with low socioeconomic status, and youth who use alcohol will have higher rates of depression. Those who are older, third generation, male, have higher levels of depression, and who report lower socioeconomic status are expected to have higher levels of alcohol use.

2) What family support and parental monitoring factors affect levels of depression and/or alcohol use in Mexican American adolescents? Do they serve as mediators of the relationship between adolescent characteristics and depression and alcohol use?

Hypotheses: Youth with higher levels of family support and higher levels of parental monitoring will have lower levels of depression and alcohol use. Higher family support and parental monitoring will mediate the predicted factors associated with depression such as being female, older, being second or third generation, and having low socioeconomic status. Higher family support and parental monitoring will also mediate the predicted factors associated with alcohol use including being older, native born, male, and having low socioeconomic status.

3) Are generational status, gender, age, age of first use of alcohol, and socioeconomic status of Mexican American adolescents related to their frequency and amount of alcohol use? Is frequency and amount of alcohol use directly or indirectly involved in levels of depression? Do family support and parental monitoring serve as mediators in the relationship between adolescent characteristics and frequency of alcohol use?

Hypotheses: Second and third generation, older, male adolescents, and those who drink at an early age and who have low socioeconomic status will use alcohol more frequently, consume more alcohol, and become drunk on more days. Youth with higher levels of depression will also drink more frequently, consume more alcohol and become intoxicated on more days. Family support and parental monitoring factors will serve as

mediators in the relationship between these risk factors and frequency of alcohol use. Youth with higher rates of family support and parental monitoring will also drink less frequently.

4) Are generational status, gender, age, age of first use, and socioeconomic status of Mexican American adolescents related to the occurrence of social problems resulting from alcohol use? Is the occurrence of social problems related to alcohol use directly or indirectly involved through their effects on levels of depression? Do family support and parental monitoring serve as mediators in the relationship between adolescent characteristics and the occurrence of social problems from alcohol use?

Hypotheses: Male, older, second and third generation youth, and those who consumed alcohol at an early age and whose families have low socioeconomic status were hypothesized to have more alcohol-related social problems. Youth with higher levels of depression will also experience more alcohol-related social problems. Family support and parental monitoring factors will serve as mediators in the relationship between these risk factors and experiencing social problems from drinking. Youth with higher rates of family support and parental monitoring will also experience fewer social problems as a result of drinking alcohol.

Methodology

The data used for this study is a secondary analysis of WAVE I of The National Longitudinal Study of Adolescent Health (ADD Health) (Haris et. al, 1994-2008; Bearman et. al, 1997). ADD Health is one of the largest nationally representative data sets available on Mexican American adolescents and it contains information not captured elsewhere. The ADD Health study consisted of a sample of students in grades 7 through 12 attending various schools across the United States in 1994-1995. The age range of the participants was between 12 and 21 years old. Approximately 1551 Mexican American teens participated in this study. Of the 1551 Mexican Americans explored in this study, 1424 were able to be classified as first, second, or third generation. The final data analysis conducted for this article focused on the weighted sample of 1424 Mexican American students in the in-home interview who were categorized by generational status. Data analysis includes the use of multiple and logistic regression analysis.

Results

This secondary analysis of the ADD Health Study identified risk factors and mediators of depression and alcohol use in a sample of Mexican American adolescents residing across the United States. Risk factors of depression and alcohol use were examined including generational status, age, gender and socioeconomic status. Family support and parental monitoring were examined as protective factors against depression and alcohol use. Results showed that younger, second generation youth, females, and alcohol drinkers experienced higher levels of depression. Aspects of family support protected adolescent girls and youth who used alcohol from experiencing depression. Males and youth with higher rates of depression were at increased risk of using alcohol and drinking alcohol frequently. Aspects of parental monitoring buffered the effects of

depression on alcohol use and frequency of alcohol use but did not mediate the effects of gender. Findings provide important theoretical and clinical implications for social work practice with Mexican American youth.

Findings revealed that Mexican American youth were at higher risk for alcohol consumption with increased generational status. Significant mean differences were found in use of alcohol with U.S. born adolescents having higher rates of drinking compared to first generation youth. Males and youth with higher rates of depression were at increased risk of using alcohol, drinking alcohol frequently, and experiencing social problems as a result of drinking. Aspects of family support and parental monitoring buffered the effects of depression on alcohol use and frequency of alcohol use but did not mediate the effects of gender. Aspects of family support reduced the risk of depression for youth in this population. Second and third generation youth were at highest risk of depression compared to less acculturated youth. Depression rates were higher for females relative to males across generations, and were highest among females of second generation. Females scored lower in rates of family support compared to males. Aspects of family support reduced the risk of depression for both females and adolescent drinkers but did not mediate the risk of depression for second generation youth.

Utility for Social Work Practice

The increased independence that accompanies Western views of the process of separation-individuation in adolescence is contrary to traditional Latino parenting values that encourage interdependence and reliance on family members. Consequently, it appears to be this same reliance on the family combined with the increased parental support and supervision that first generation immigrants experience that most enhances their mental health outcomes. Because clinical practice is frequently guided by theory, these findings also illustrate the importance of taking culture into account when considering models of explaining "normal" adolescent development as there is the risk that in encouraging Mexican American clients to adapt to western views of parenting, the protective qualities of immigrant parenting styles could be lost.

The research presented in this study has many clinical implications for the social work profession. The results of this dissertation indicate that there are parenting practices such as higher levels of family support and parental monitoring that protect Mexican American youth from depression and use of alcohol. The important role of the parent-child relationship in adolescent mental health and alcohol use outcomes found in this study highlights the importance of including family members in therapeutic interventions for adolescents. Clinicians can also use this information to educate and empower parents to modify their parenting skills in ways that can benefit and protect their children. By understanding which adolescents are most at-risk of alcohol use and depression, clinicians can use the findings in this study to enhance their assessment and treatment of Mexican American youth.

Understanding risk factors associated with depression and alcohol use are important in formulating preventive programs to target those teens that are at increased risk. As in other studies, females were found to experience significantly higher rates of depression compared to males indicating the need for continued preventive efforts to

understand causes of depression in adolescent girls. One important finding in this study was that family support was an important mediator in counteracting the relationship between gender and depression. Feeling understood, paid attention to, and wanting to remain at home were important deterrents against depression for the girls in this study. These findings underscore the importance of understanding family dynamics and encouraging these traditional Mexican American family values among family members when treating symptoms of distress in this population.

In this study, males were found to be consistently in danger of consuming alcohol and using alcohol frequently. These findings indicate the importance of ongoing research and development of programs to encourage alternative methods of coping for Mexican American males who may be more likely to turn to alcohol to alleviate distress. Similarly, clinicians can utilize this information to facilitate open communication and to provide education about the risks of alcohol use with their Mexican American male patients.

The information obtained in this dissertation can guide social workers in improving quality of life for Mexican American children through advocacy for the development of culturally sensitive programs and services. Given that first generation youth have the lowest levels of depression and alcohol use, clinicians should increase their cultural awareness to encourage and celebrate traditional values in their Mexican American clients and to create programs that support and encourage these values.

Finally, as this study demonstrates, understanding generational differences in depression and alcohol outcomes is an important aspect of clinical practice and intervention efforts for Mexican Americans. While family support and parental monitoring are important factors, these family dynamics do not fully explain the relationship between gender and alcohol use. Thus there are other factors that contribute to the risk of alcohol use and frequent drinking for native-born youth that require further study.

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