

CURRICULUM-BASED FAMILY INTERVENTION PROGRAMS:
MEETING THE NEEDS OF LATINOS IN THE U.S.

by

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A dissertation submitted to the faculty of
The University of Utah
in partial fulfillment of the requirements for the degree of

Doctor of Philosophy

College of Social Work

University of Utah

December 2011

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ABSTRACT

The present research focuses on the need for culturally specific curriculum-based family intervention programs for Latino immigrant families residing in the United States. A review of the literature and direct practice experience with Latino families indicate that existing intervention programs do not adequately meet the needs of this population. Part one of the study provides a comprehensive review of the published work on existing curricula in use with U.S.-based Latino families to evaluate to what extent they are effective/evidence-based and culturally relevant. Part two of the study takes an in-depth look at one such program, Familias Unidas. Familias Unidas is a curriculum-based family intervention program tailored to meet the needs of the local Latino community. Program outcomes are evaluated using a pretest-posttest design. Also, outcome differences based on different levels of acculturation are explored. In the final part of the study, practitioners working with Latino immigrant families share their experiences through individual interviews and focus groups on their experiences implementing curriculum-based programs with Latino families. Overall findings and implications will be discussed as well as directions for future research.

The research is presented in the form of three distinct scholarly manuscripts. Each manuscript has its own distinct research questions, contributes to the overall research in a unique way, and makes specific recommendations for practice, policy, and research. The

three manuscripts together add to the knowledge base on curriculum-based programs as they apply to Latino families.

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CHAPTER 1

INTRODUCTION

Statement of the Problem

There exist few curriculum-based family intervention programs that adequately address the needs of Latino families living in the U.S. (e.g., Chapman & Perreira, 2005; Harachi, Catalano, & Hawkins, 1997; Maldonado-Molina, Reyes, & Espinosa-Hernandez, 2006; Tapia, Schwartz, Prado, Lopez & Pantin, 2006; Turner, 2000). This is especially true for recent immigrant families. The migration and relocation process places a great amount of stress on families that can lead to changes in family roles and often a breakdown in family functioning (Gonzales, Deardorff, Formoso, Barr, & Barrera, 2006; Holleran & Waller, 2003; Martinez, 2006; Padilla, 2002). This in turn can cause individual family members to turn to abuse of substances, violence, or high risk behaviors. It can affect individual family members' mental, emotional, or physical health (Padilla, 2002; Perreira, Chapman, & Stein, 2006; Spoth, Redmond, Trudeau, & Shin, 2002). When such problems arise, Latinos are reluctant to seek help and thus problems can escalate to the point of a third party taking notice and making a referral for intervention (Segal & Mayadas, 2005). Usually it is an adolescent's behavior that is noticed and thus becomes the target of intervention (Bacallao & Smokowski, 2009; Kumpfer & Bluth, 2004; Martinez & Eddy, 2005; Szapocznik & Kurtines, 1993). Many curriculum-based intervention programs involve only the adolescent or only the parents.

These parent-only and child-only programs miss a critical opportunity to practice and help restore family cohesion that is often the root cause of the acting out behavior.

Programs that involve both the parents and children in interactive activity are considered to be family intervention programs.

Family intervention is a broad concept that can encompass different treatment modalities, but the focus of this research is specific to curriculum-based programming. What is meant by “curriculum-based” is that the program follows a standard curriculum. In other words, it is a program that has an inherent structure by following a set of pre-determined instructions and/or activities. Most often the program adheres to a didactic psycho-educational model. The decision to focus on this type of family intervention modality is based on a number of reasons. Psychotherapeutic methods carry a certain stigma within the Latino culture and thus families are more open and receptive to psycho-educational programs (Segal & Mayadas, 2005). Service providers and social service agencies also prefer curriculum-based programming because it is a more cost-effective way of serving the greatest number of families in the shortest amount of time (Elliot & Mihalic, 2004; Harachi et al., 1997; Nation et al., 2003). Structured programming also lends itself to outcome testing to help build an evidence-base and subsequently leads to the dissemination of effective programs nationwide.

Of the existing curriculum-based family intervention programs, there is a scarcity of ones that would address the needs of Latino families (Kumpfer, Pinyucho, Teixeira de Melo, & Whiteside, 2008; Turner, 2000). Most programs lack cultural sensitivity and even those reporting cultural adaptations often only have surface structure adaptations (Castro, Barrera, & Martinez, 2004; Kumpfer, Alvarado, Smith, & Bellamy, 2002; Wiley

& Ebata, 2004). Cultural relevance is integral to program effectiveness yet most of the existing programs lack this critical component (Pantin, Coatsworth et al., 2003). The unique needs of Latino families will be discussed later in this chapter.

Relevance and Contribution of the Research

The lack of culturally sensitive programs is common across all ethnic groups in the U.S. The reason to focus on this one group is in part due to my own experience as a member of the culture but also my professional experience working with Latino families in direct practice. However, the main impetus for focusing on Latinos is the steady increase of the population in the U.S. Hispanics have become the largest ethnic minority group according to the last census data (U.S. Census, 2008a). This continual increase in numbers and information on the number of foreign-born Latinos suggest a large immigrant population. This growth calls attention to the need for increased focus on providing services to this population.

One of the distinguishable aspects of social work as a helping profession has been that it recognizes the need to view an individual within his/her context, recognizing that one does not operate in a vacuum and thus is influenced and affected by any number of elements in his/her environment. Therefore, in order to fully understand a family, one would need to consider the contextual pieces. This is directly relevant to social workers in program development and/or program evaluation. Direct service or clinical social workers are working with families on a regular basis and could benefit from this research, particularly in their direct practice work. It would have value to social policy and those working in funding and grant writing. Working with families has always been a role of social work (Early & GlenMaye, 2000), and in the profession's recent history there has

also been an emphasis on cultural competency. The focal population of this research has direct applications to practitioners in the field.

Finally, one of the largest contributions this research will have is to add to the body of knowledge that is lacking in the literature. The findings from this study can be a resource for all those who are actively involved in this type of research.

Theoretical Foundations

Strengths Perspective

The strengths perspective is the underlying approach to the current body of work. A guiding principle of the strengths perspective is that every individual, group, and family has strengths (Saleebey, 1997). Too often in work with ethnic minority populations the focus is on problems and thus solutions are based on a deficit model of understanding. The strengths perspective dictates that there be a constant focus on identifying a person's strengths and aiding in the mobilization of resources to improve the situation (Saleebey, 1997). The strengths perspective is a humanist approach that posits that all humans have the capacity for growth and change (Early & GlenMaye, 2000).

Under this perspective, the environment plays a critical role as both a resource and a target for intervention (Early & GlenMaye, 2000). Resilience is also a key concept of this perspective where it is assumed that humans are inherently resilient (Saleebey, 1997). Families have the combined capabilities of individual family members as well as shared strength of the larger systems in which they are imbedded (Early & GlenMaye, 2000). When a family fails to display competence, it does not mean that they failed; rather, it reflects a shortcoming of the wider social system that did not create the

opportunity for competency to be actualized (Dunst, 1994). The long-term goal of this research is to create opportunities for families to thrive. Strengths-based practice is a good fit for underserved ethnic communities because it can build on indigenous resources that might otherwise be overlooked (Delgado, 1997).

Ecological Theory

The ecology of human development is a theoretical perspective put forth by Bronfenbrenner (1979), who defined human development in terms of how one perceives and deals with his/her environment. The ecological environment is a set of nested structures. This perspective also encompasses the examination of the interactions that occur between an individual and his/her environment, including how the environments can affect that individual even in their absence (Bronfenbrenner, 1979). To illustrate, a Latino child's immediate environment (microsystem) is her family. Her family then resides in a particular school district (mesosystem) and ultimately this school district is a part of the state educational system (macrosystem). The state has the power to impose an English-only policy in all public school systems that could be in reaction to the increasing number of Spanish speaking Latinos in the state. The child affects her environment and her environment affects her. That is the interconnection between systems.

Ecological theory is concerned with understanding human development within the context of social influences. In regard to the family, ecological theory sees it "as the principal context in which human development takes place, and [there is] a keen interest in how intrafamilial processes are affected by extrafamilial systems" (Liddle & Hogue, 2000, p. 267). Therefore, ecological models of prevention will adopt a family-based approach while taking into account the myriad of social systems that affect the family.

This is not to say that the interventions set out to change schools or neighborhoods; rather, they aim to influence how the family relates to those systems (Liddle & Hogue, 2000).

In the case of Latino immigrant families, environment plays a large role in the lives of individuals and families. In particular, immigration policy will affect the rights of many Latinos and can trickle down to how they are treated in their local communities and how well they are received and/or welcomed in their microsystems.

Resiliency Theory

One broad definition of resilience is that it is a “process, capacity or outcome of successful adaptation despite challenges or threatening circumstances...good outcomes despite high risk status, sustained competence under threat and recovery from trauma” (Masten, Best, & Garmezy, 1990, p. 426). Resiliency theory identifies individual characteristics or resources that foster prosperity even in the face of high levels of risk (Middlemiss, 2005).

At an intervention level, arguments have been made that a resilience orientation towards family intervention aids families in restoring balance (Patterson, 2002). Resiliency-based intervention programs focus on identifying and building on family resources and individual strengths to help cope or protect from the continued risk families may face. Resiliency-based intervention in one area can translate to increased resiliency in other areas (Middlemiss, 2005).

Kumpfer’s (1999) Transactional Framework of Resilience proposes that the transactional processes between parent and child are extremely important in promoting resilience. This idea comes from the second wave of research on resiliency that added a

focus on interactional processes (Kumpfer & Bluth, 2004). She identifies six major predictors of resilience that include: 1) the stressors or challenges that cause the initial disequilibrium; 2) the environmental context such as family, community, school; 3) the interactional process between person and environment; 4) internal self characteristics; 5) coping processes, and 6) positive outcomes or successful life adaptations (Kumpfer, 1999).

Perreira et al. (2006) explored the ways in which Latinos describe their migration and acculturation experience in relation to their role as parents that resulted in a model of risk and resiliency encompassing the culture and diversity of Latino immigrant families. The literature on ethnic minorities is plagued with discussions of risk factors, deficits, and disadvantages. Not enough attention is given to resiliency of minority individuals and families. Since it has become well-established that these populations are often at risk and at a disadvantage, the focus needs to turn on how, despite these barriers, so many are able to succeed.

Critical Race Theory and Latina/Latino Critical Theory

Racism remains pervasive in the United States. The target population of said racism shifts depending on the social and political climate. It can easily be argued that the current target of racism is the Latino immigrant. Evidence for this is demonstrated by the Minutemen project, legislation to tighten the U.S.-Mexico border, and driver's license requirements just to name a few. These discriminatory practices and attitudes serve to oppress and affect the lives of individuals and consequently the family. "Critical race theory (CRT) retains its commitment to treating the social construction of race as central to the way that people of color are ordered and constrained in society" (Treviño, Harris,

& Wallace, 2008, p. 7). Critical race theory could be considered a tool to fight against the inequality and injustices perpetrated against those populations at the margins of mainstream society. The attention is directed towards the ways in which the social structure inhibits certain populations and seeks to give a voice to those who are victimized (Treviño et al., 2008). Furthermore, CRT serves to explain how racism affects lifestyles and life chances (Brown, 2008).

The manner in which racism plays out in the context of this research is the extent to which family intervention curricula are by and large ethnocentric. Most existing curricula were developed by and for a Caucasian middle class. Attempts to adapt the curricula to different ethnic populations do not address the underlying problematic theory and methodology. Much of the research that claims to take into account race simply involves a labeling of ethnic status and controlling for it statistically (Maldonado-Medina et al., 2006). This does not allow the researcher to truly understand ethnic differences. Examining core cultural values leads one to see how they can often serve as mediators and moderators (Maldonado-Medina et al., 2006). In order to gain a meaningful understanding of ethnic differences, one must incorporate a framework based on the person's understanding of his/her social world (McLoyd, 2004). This framework for understanding Latino families would have to include such experiences as immigration, racism, and generational status. Within mental health research, there is a weakness concerning the link between mental health and racial discrimination (Brown, 2008). Everyone experiences stress but there is something to be said for that stress that comes from being a part of a stigmatized group.

Literature Overview

Latinos in the U.S.

Prevalence

Overall, the nation's minority population reached 102.5 million in 2007, representing 34 % of the total (U.S. Census Bureau, 2008a). Migration from Latin America represents more than half of the foreign-born population in the U.S. (Larsen as cited in Tapia et al., 2006). Hispanics represent the largest minority group at 15.4% and are the fastest growing minority group (U.S. Census Bureau, 2008a). Between the 2000 census to the 2010 census, the Latino population in the U.S. increased from 35.3 million to 50.5 million (43%), which accounts for more than half of the 27.3 million increase in the total population of the United States (U.S. Census Bureau, 2011). This does not take into account the undocumented immigrants, which could possibly raise the population to as much as another 10 – 15 million (Bean, Russel, & Lewis, 2002). There has been a steady increase of families permanently emigrating to the U.S. from Latin American countries (Martinez & Eddy, 2005). The census projects a continued increase such that estimated numbers of Hispanics in the year 2050 is 102 million or 24% of the population (U.S. Census Bureau, 2008a). The majority of the Hispanics in the U.S. are from Mexico (63%) (U.S. Census Bureau, 2011).

Hispanics are younger than non-Hispanic Whites. The Hispanic population in 2007 had a median age of 27.6, compared with the population as a whole at 36.6. Almost 34 % of the Hispanic population was younger than 18, compared with 25 % of the total population (U.S. Census Bureau, 2008a). The non-Latino White school-age population has grown 4 % since 2000, while the number of Latino school-age kids surged 21 %

(Canham, 2007). Salt Lake City schools now have more minority students than White students (Canham, 2007). “One in five children living in the United States is an immigrant or a child of an immigrant, and 62% of these children are Latino” (Perreira et al., 2006, p. 1383).

In Utah Hispanic/Latinos comprise 12% of the population (U.S. Census Bureau, 2008b). It is by far the largest minority group in the state; Black persons are only 1.3% of the population, American Indians are 1.4%, Asians are 2%, and Pacific Islanders are less than 1% (U.S. Census Bureau, 2008b). The Hispanic growth rate from 2000 to 2006 for Utah was 40.1% (U.S. Census Bureau, 2006). It is projected that one out of every five Utahns will be a racial minority by 2010 (Canham, 2007). There are 676,930 families with children in Utah (45%), which is higher than the national average at 36% (Kaiser Family Foundation, 2007).

Too often Latinos are treated as a homogenous group, especially in social science research. Therefore it should be noted that Latinos are in fact extremely heterogeneous. Latinos come from more than 20 countries of origin, various racial and socioeconomic backgrounds, speak a variety of different languages, have different value systems and cultural practices, differ in immigration experience, and have different reception by the host community (Perreira et al., 2006).

Reasons for Immigrating

Latino families relocate to the U.S. for a variety of reasons and it is important to understand these because they influence the family in significant ways. The biggest distinction can be made between immigrants and refugees. Too often these two terms are used interchangeably as if they were describing a homogenous group. There are in fact

many distinctions between the two, but only those pertinent to the current research will be discussed. Immigrants make a conscious decision to relocate and have some reason for choosing to move to the U.S. while refugees are fleeing from their home and often do not have a say as to which country they will be placed in after having spent time in asylum (Segal & Mayadas, 2005). The circumstances between these two groups are quite different and therefore have influence on the psycho-social context of any given family. This difference also influences the groups' receptiveness to the host country and vice versa (Segal & Mayadas, 2005). For the purposes of this investigation I will be referring specifically to immigrant families.

There are a multitude of reasons for immigrating to the U.S. but there are two reasons that most Latinos have in common. One of the most pervasive reasons is that of financial need. Families, often from the lower socioeconomic class, simply are not able to make a living in Mexico and other Latin American countries no matter how hard they try. The promise of "The American Dream" is pervasive in foreign countries and thus attracts those who are unable to earn a living in their home countries. Another related reason that draws Latino families to the U.S. is the educational system. Free public education is a luxury that is not shared in most Latin American countries and so many parents desire to raise their families in the U.S. where they know that there will be more educational opportunity for the children. Parents decide to migrate because they have goals for their children that they are unable to fulfill at home due to poverty or war (Perreira et al., 2006).

Acculturation and Migration Stress

Latino immigrants face many challenges upon arrival to the U.S. Apart from the stress of immigrating itself, they often face the daunting task of having to raise their children within the context of an unfamiliar culture. Other challenges include language barriers, financial stress, social isolation, and lack of extended family as a source of support. Parents having to face all of these obstacles are at great risk of parental disinvestment, placing their adolescents at greater risk for high-risk behaviors (Pantin, Schwartz, Sullivan, Coatsworth, & Szapocznik, 2003). The immigrant experience or the migration trauma itself often places individuals at greater risk for onset of other mental health or behavioral problems. For example, Pantin, Schwartz, Sullivan, Prado, and Szapocznik (2004) note that the immigrant experience of many Latino adolescents can increase their vulnerability to drug use and sexual risk taking. Marsiglia and Waller (2002) found that Spanish monolingual youth used significantly less alcohol than their bilingual or English dominant peers.

Acculturation stress is also dependent upon the receptiveness of the host country to the particular immigrant population. Patterns of immigration have changed dramatically through the 20th and 21st century and these patterns influence the target of discrimination and oppression (Segal & Mayadas, 2005). In current times, there is a lot of negativity surrounding immigrants from Mexico. This negative attention has created increased hostility towards Mexicans and in turn adds a level of stress that in other eras may not have been present.

Adding to the migration stress is the case where families do not migrate together but rather in parts. It is not uncommon for one or both parents to go first and after

months or years send for the children. This dynamic incorporates the additional stress of family separations and reunifications (Chapman & Perreira, 2005). This can bring with it feelings of resentment and loss on the part of the children that can go unaddressed after reunification. It also has a direct effect on how each party experiences the immigration process.

Another related instance in which parents and children may experience immigration differently involves that of how the decision to immigrate is made. The hierarchy of the traditional Latino family places parents, specifically fathers, as the authority and decision makers. When a parent decides to move the family to the U.S., though the move is stressful for them, it is a stressor that they chose and often a relief from stress they experienced in their home country. But for the child, it was a decision made for them and thus can be perceived as unfair especially if the child was not exposed to stress in their home country. Related to this, Suarez-Orozco and Suarez-Orozco (2002) discuss how a dual frame of reference helps parents adjust to the new country because no matter how dire their circumstances in the native country, the immigrating process is viewed positively compared with the difficult situations that prompted the immigration from one's home country. Children either lack that dual frame of reference due to their young age or, conversely, they were happier in their home country as compared to the U.S.

In the migration process, families lose their social support network, social roles, and often social status or class (Perreira et al., 2006). The U.S. does not recognize professional degrees from other countries so even those that are practicing doctors and lawyers are unable to practice once in the U.S. without further education, testing, and

licensing. And once established in the U.S., most families encounter racism and discrimination (Perreira et al., 2006).

Acculturation and the Family

The acculturation period is a critical time in the formation of well-adjusted families and individuals. All people face hardships in their lives, and how they negotiate these critical times is dependent on their coping skills. These skills are dependent on several factors, one of which is the individual's social support network. When a family is displaced from their home, that larger social support network also shifts. A newly immigrated family faces an onslaught of hardships in the initial adjustment period, which is also the time that they are least able to cope with it due to redefining of social support networks. Acculturation, by definition, is a process, not a static variable, and there exist a myriad of ways to measure it, thus leading to discrepancies in findings on how acculturation affects individuals and families (Martinez, 2006). There is a relationship between family functioning in Latino families and the stress associated with acculturation and immigration (Chapman & Perreira, 2005).

Once established in the U.S., Latino families are then faced with the challenge of reconciling the differences between the two cultures and redefining themselves accordingly. This adjustment process places stress on the family unit that often translates into negative behavioral expression, most often by the adolescents. Children who are being raised in the U.S. experience high levels of acculturation, but their parents, who often have limited interactions with mainstream culture, do not. This difference often causes conflict, especially in terms of parent/child communication and bonding. The breakdown in communication places adolescents at greater risk of engaging in high-risk

behaviors (Martinez, 2006). Different levels of acculturation compromises the family functioning, which can lead to adolescent behavioral problems (Pantin, Schwartz et al., 2003). Greater levels of acculturation have been linked consistently with greater risk for deviant behavior among Latino adolescents (Martinez, 2006). Several researchers have found that more acculturated adolescents have more risk for externalizing behavior problems than their less acculturated peers (e.g., Gonzales et al., 2006). According to Szapocznik and Kurtines (1993), a traditional learning curve explains how youth acculturate at a more accelerated pace than their parents, who tend to hold on to traditions. This difference leads to a culturally diverse environment in the household where youth are pushing for autonomy and parents for family unity, resulting in children's loss of emotional/social support and parents' loss of authority. These intergenerational conflicts are compounded by intercultural conflict (Perreira et al., 2006).

But this is not the constant in every immigrant family; some parents accompany their children in the acculturation process, and in other families children may resist acculturation as much as their parents. Gonzales et al. (2006) posit an alternative view that it is not the differential acculturation that is causing youth problems; rather, when both parent and youth acculturate, there is a loss of cultural values/norms that would otherwise serve as protective factors.

For Latino families having to make major adjustments to their new lives in the U.S., it often involves changes in family roles and family structure. One instance where this occurs is when children learn English before their parents do and then are placed in situations where they must be the interpreters. The children in this case become the

cultural broker for the parents. Parents rely on their children to help them with daily activities such as banking and grocery shopping or more complex situations such as doctor's appointments or meetings with attorneys. This language dependency disrupts the family hierarchy and places children in a leadership position, resulting in a loss of parental authority that is contrary to traditional Latino values (Santisteban, Muir-Malcolm, Mitrani, & Szapocznik, 2002). This dynamic can lead to increased rigidity and discipline by the parent to overcompensate and thus creates tension and often rebellion. Language brokering has been related to differential acculturation where the children acculturate at greater speed or extent than their parents due to a greater immersion or association with the host culture (Tapia et al., 2006). Differential acculturation has been associated with compromised family functioning (Pantin, Prado, Schwartz, Sullivan, & Szapocznik, 2005).

Another example of fluctuation in traditional Latino family roles is that women will work outside the home, often for the first time. In some cases, due to the nature of the man's work, the woman may at certain times be the sole wage earner, causing disruption to the traditional idea that it is the man's duty to be the breadwinner. Additionally, the fact that the woman is earning can be a source of empowerment for her that can lead to greater confidence and make her feel entitled to more power and/or responsibility in the home. In some families, this dynamic can feel threatening to the father, causing negative reactions that disrupt the household.

Thus, effective programs need to address bicultural skills—teaching both parents and children how to manage their cultural differences. Family intervention needs to address converging values and beliefs and, more specifically, helping family members to

recognize their shared cultural values and to assist with finding common ground “amidst the discontinuities of diverging levels of acculturation and disrupted family and community life” (Holleran & Waller, 2003, p. 346).

The consequences of not providing culturally appropriate family intervention programs that address the special needs of the target population places families at risk of becoming dysfunctional. By not addressing the needs of these families, the parents are at risk of abusing or neglecting their children. The consequences of family dysfunction leading to adolescent behavior problems are many. Certainly it affects individual family members, but because families do not live in isolation, the consequences carry over to the broader community.

Family Focus

Most family intervention programs were designed primarily to target negative adolescent behavior. Research suggests the best way to prevent or curb adolescent high risk behavior is to involve the parents in any intervention (e.g., Becker, Hogue, & Liddle, 2002; DeMarsh & Kumpfer, 1985; Kumpfer & Alvarado, 2003; Martinez & Eddy, 2005). “Problem behavior develops from a complex interaction between personal, developmental, familial and environmental factors over time and across social contexts (Liddle & Hogue 2000, p. 267). The family is the primary environment for a child and the most important social system influencing his or her development (Early & GlenMaye, 2000). When the family is effectively mobilized, it can provide the appropriate context for lasting behavioral change (Tapia et al., 2006). Therefore, interventions that involve the family unit are key to the prevention of adolescent behavioral problems and building stronger familial bonds. If there is more than one child in the family, focusing on the

family can also serve as a prevention method for younger siblings of the target child. Durlak (1998) identifies eight major developmental outcomes for children that are affected by parents: school failure, poor physical health, behavior problems, physical abuse, physical injury, AIDS, early pregnancy, and drug use. Thus, if a program addresses parent-child relationships, then the increased protective factor of resistance to drugs, for example, can affect a greater community change.

Adolescents are continually faced with difficult decisions about whether or not to engage in high-risk behaviors. “Strong families and effective parents are critical to the prevention of youth problems” (Kumpfer & Alvarado, 2003, p. 457). Despite this fact, the reality is that parents engage more time in work or other activities than in parenting. For low-income immigrant families, the amount of time spent at work is not a choice but rather a means of survival. And often those who do invest time in parenting lack the skills to interact with and discipline adolescents. While it is true that peers have a great influence over adolescents’ decisions to engage in negative behaviors, research shows that parent disapproval of such behaviors also influences their decisions to stop (Johnston, O’Malley, & Bachman, 2001). Parents who recognize the importance of the role they play in their children’s lives often lack the outside support that they need to stay continually engaged. As cited by Tapia et al. (2006), there are a number of protective factors against adolescent behavioral problems. Among them are parental investment, parental monitoring of peers, and parent-adolescent communication. Traditional Latino families tend to prefer a family-focused approach as opposed to a youth-only or parent-only program because of their cultural collective identity (Boyd-Franklin, 2001). Research shows that the most effective interventions with Chicano/a youth in trouble

involve the family (Holleran & Waller, 2003). “Programs grounded in salient cultural values and beliefs related to (a) collectivism and (b) the relationship between hardship and transformation, would engage Chicano/a adolescents and build on their own belief system” (Holleran & Waller, 2003, p. 345).

Family Intervention

Need for Curriculum-Based Programs

Family intervention to address the aforementioned need could be approached in any number of ways. It is not my intent to say that one mode is better than another. I propose that a psycho-educational structured program that adheres to a curriculum may be one way to reach the most families in the most economical and culturally sensitive manner. A curriculum provides families with structure and safety.

Psychotherapeutic models of family therapy have the potential of tailoring intervention to the unique needs of any given family, and could thus be argued to be the most culturally appropriate (assuming the cultural competence of the therapist). However, in the general Latino population, there exists a resistance to seeking psychotherapy. Due to a high level of regard for education, Latinos are more likely to accept or seek help from educational programs. Multidimensional Family Prevention (MDFP) is considered by many practitioners to be one of the best ways to tailor intervention to the unique needs of the family. MDFP, an assessment-based and problem-focused intervention approach, combines standard prevention models with psychosocial treatment models (Liddle & Hogue, 2000). However, an ecologically based intervention model of this type is very intense, expensive, and time consuming (Liddle & Hogue, 2000).

For Latinos, there is a high level of familial privacy and a cultural norm to address problems *entre la familia* (within the family). “Most often, immigrant and refugee parents do not seek help for their children until difficulties become so significant that someone outside the family indicates concern for the situation” (Segal & Mayadas, 2005, p. 575). Because of this resistance, it is best to introduce prevention programs to families so that they are more open to receiving education instead of help.

Existing Programs

There are a plethora of curriculum-based family intervention programs, many which claim to be culturally appropriate for use with minority families. The reality is that there exist few interventions for ethnic minority families, and the few that exist lack scientific merit (Dumka, Roosa, Michaels, & Suh, 1995). “The breadth and diversity of the ethnic minority populations in primary prevention research are woefully under represented. More primary prevention research is needed on all major American ethnic minority groups” (Turner, 2000, p. 292). However, the reality is that there exist few family intervention programs that adequately address the unique needs of Latino families residing in the U.S. It is not enough for programs to be culturally adapted because often what that means is that the program is simply considering the families’ culture of origin. But the reality is that the family is trying to adjust to a host culture while navigating their culture of origin and it is that context and those challenges that need to be considered for program effectiveness. It is essential to view families within the culturally pluralistic environment in which they live (Szapocznik & Kurtines, 1993).

The most obvious problem with family intervention programs used with any ethnic population is that the vast majority of said programs were developed by and for

Caucasian middle class Americans. The theory and methodology do not necessarily apply then to ethnic minority populations. What many of these programs have done in an effort to become culturally relevant is to have their materials translated and/or to have a representative from that group conduct the program. While this is helpful, it is still fundamentally problematic. There is a need for programs to be developed by those familiar and sensitive enough to the needs of the particular population they are intending to serve. Wiley and Ebata (2004) define intervention curricula as different models. First is the dominant culture curricula written from the perspective of, and intended for, the majority population. A second model is described as the ethnic additive curricula, which adds activities and examples geared toward a particular ethnic minority group but still utilizes the dominant culture curricula as the basis. Finally, there is the multiethnic curriculum that is specifically designed by and for a specific ethnic group and is firmly based on its own cultural context.

Another problem is that, in an effort to be culturally sensitive, practitioners will deviate from the curriculum in ways that perhaps were not intended by those who developed the program, compromising its integrity. Research that has tested effective family interventions has revealed that only 10% of practitioners implement evidence-based family strengthening programs and only 25% are implemented with fidelity (Kumpfer & Alvarado, 2003). There exist a large number and variety of family strengthening interventions for Latino families. The effectiveness of these programs varies due to their nature and scope. Some of these programs are evidence-based, but the majority is not, and therefore it is difficult to conclude effectiveness. Successful outcomes are also dependent on the competency of the person implementing the program.

Even if there were an excellent curriculum in use, its effectiveness would be compromised at the hand of an untrained practitioner.

Another shortcoming of existing interventions is the lack of inclusiveness of pertinent family members in the intervention. Many family intervention programs are parent-centered, where intervention occurs only at the parental level (e.g., Martinez, 2006; Tapia et al., 2006) and other programs are targeting youth only. In a communal culture, it is important to consider intervening at the family level if one is to promote changes in the family unit. Lastly, a considerable challenge to interventions for Latinos is that the majority of the programs have not been appropriately adapted for the target audience. Because acculturation has been found to be a factor in family functioning, it is imperative that this be addressed in the programming.

Evidence-Based Movement in Social Work

One reason for the focus on curriculum-based intervention over other forms of intervention is that it is a preferred treatment modality for outcome testing. And as the social work field has joined the evidence-based movement, such programs have become more popular and widespread. Evidence-based practice plays a large role in U.S. prevention policy, and lists have been generated on “exemplary” or “model” programs based on their scientific findings of effectiveness (Gorman, Conde, & Huber, 2007). Funding agencies in particular emphasize the use of evidence-based programs in an effort to maintain accountability.

Despite this movement toward evidence-based practice in social work, outcome studies for Latinos are still lacking. To highlight an example, one of the leading journals in the field, *Research on Social Work Practice*, recently published a special issue on

intervention outcome research with Latinos that consisted of only three articles. The editors explain that great efforts were taken to announce a call for papers and deadlines were extended, but submissions were less than anticipated (Ortiz & Aranda, 2009). The problem then becomes that outcome studies to determine effective programs are based on studies done with majority populations. When one adapts that “model” program or uses it with ethnic minority populations, it can become problematic. There are those who have questioned the usefulness of “Evidence-Based Practice” (EBP) with marginalized populations because they do not always have the freedom to choose alternatives if the EBP is not helpful.

Due to the focus on evidence, many programs may be prevented from reaching a wider audience. There are countless family interventions that are not empirically evaluated in the research literature (Spath, Redmond, & Shin, 2001). So the truth may be that there are good intervention programs for Latinos but without that evidence base, they will never be recognized nor widely disseminated. This phenomenon speaks to the disconnect that exists between research and practice. Often, practitioners choose not to utilize evidence-based programs despite the high reputation they may have in the literature (Kumpfer et al., 2003). Usually this is due to the irrelevance they hold to ethnic populations. There is a need to translate research into practice (Polizzi Fox, Gottfredson, Kumpfer, & Beatty, 2004) and vice versa.

“The Gold Standard is widespread adoption of model programs, implemented with fidelity” (Elliot & Mihalic, 2004, p. 52). However, there is an ongoing debate in the literature between fidelity and fit. One side of the argument states that it is essential for programs to remain true to their original design (e.g., Elliot & Mihalic, 2004, Gottfredson

et al., 2006; Martinez & Eddy, 2005), while others state that programs need to be adapted to fit the needs of the audience because relevance is what predicts success (e.g., Castro et al., 2004; Holleran Steiker et al., 2008; Kumpfer, Pinyuchon, Teixeira de Melo, & Whiteside, 2008; Maldonado-Melina, 2006; Turner, 2000). National organizations list model programs that have been rigorously reviewed and deemed science-based effective programs, but over half of them have had to be adapted in some way (Castro et al., 2004). However, there is not much in the way of evidence as it relates to culturally adapted versions of a “proven” family intervention program (Martinez & Eddy, 2005). The ideal would be to design an empirically tested effective intervention that is also culturally relevant (Castro et al., 2004). There is a definite need for more outcome research with Latinos. However, Oritz and Aranda (2009) pose the question about whether linear methods of research design fit the research questions relevant to Latino social needs.

Cultural Relevance

Cultural Assets and Integration

Because this paper is specific to the Latino population, it is important to note that the approach to this work does not come from a deficit-based perspective. There is no assumption that Latino families need help simply because of their nationality/nativity; rather, it is because of the process they have to go through when they relocate from their home countries to the U.S. It is not a process that ends after a few years, but a process that continues on to future familial generations. The cultural norms and values in this case actually become assets when addressing the process challenge, and that is where nationality/nativity becomes a key component in drawing out strengths and commonalities. And because families are permanently settling in the U.S., there is much

that they have to offer. It is not just a question of Latinos having to adjust and acculturate to the host culture; rather, it can be thought of as a process of integration where each culture learns, grows, and thus adjusts to each other. The following paragraphs highlight some assets of the Latino culture that could be adopted or translated to the dominant culture and thus be integrated in mainstream family intervention programs.

Problems arise with highly acculturated parents and children because they lose cultural norms that would otherwise serve as protective factors (Gonzales et al., 2006). There are researchers who have discussed ethnicity as a risk factor for drug use (Johnston et al., 2001), but could it not be a protective factor? (Turner, 2000). There should be less emphasis placed on risk and personality factors among ethnic minorities; rather, the focus should be on strengths and assets as they relate to family, community, and environment (Turner, 2000).

Part of the reason for the pervasiveness of the deficit-model in research with ethnic minority populations has to do with widely accepted methodology that inherently elevates Caucasians to the standard against which all other groups are measured. This occurs because the theoretical foundations of the research and the measures used are based on the White population (Turner, 2000). It is common to find deficit-focused interpretations of Latino cultures in the professional literature, where culture becomes a deficit that interferes with assimilation (Holleran & Waller, 2003). “Research on parenting and child development in minority and immigrant families has been stunted by a comparative paradigm that sees children of color and children of immigrants as biologically or culturally deficient and contrasts their development with U.S. born White children” (Perreira et al., 2006, p. 1385).

Deficit-based models do little to serve minority families. Everyone would be better served by focusing on the strengths, assets, and protective factors that Latino families share. Latino families' cultural traits often serve as protective factors against the many risks associated with immigration (Chapman & Perreira, 2005). Latinos prioritize family above the individual (Tapia et al., 2006). Loyalty, reciprocity, and solidarity towards members of the family are common. The family is actually an extension of the self (Chapman & Perreira, 2005). Individuals place family first and, conversely, when someone is in need, the family is there to support him or her. Related to family are the values of respect for adults, conformity, and a sense of duty to parents (Santisteban, Muir-Malcolm, Mitrani, & Szapocznik, 2002); and deference to parental authority and cooperative behavior (Chapman & Perreira, 2005). The Latino culture is collective in nature, in contrast to the individualistic nature of the U.S. Collectivism involves empathy, self-sacrifice for the best interest of the group, and conforming to group expectations (Holleran & Waller, 2003).

Other cultural assets often cited are *respeto* (consideration for the sensibilities and needs of others), *fidelidad* (loyalty), *dignidad* (dignity, honor), *orgullo cultural* (ethnic pride), *machismo* (qualities of bravery, courage, generosity, respect for others, protection of and provision for loved ones), and *marianismo* (the centrality of the strong virtuous mother in the family) (Harrison, Thyer, & Wodarski, 1996). *Religiosidad* (religion) for many Latinos is often a combination of Roman Catholicism with native beliefs (Holleran & Waller, 2003). One way that it serves as a coping mechanism is that there is a strong belief in God's will. Latinos believe that everything happens for a reason. Hardships are

more bearable because individuals are able to defer responsibility to God and believe that it is for the best and redemption is soon to follow.

Holleran and Waller (2003) cite several researchers who suggest that Mexican Americans who assimilate experience greater psychological distress than those who maintain their cultural ties. The authors found that for Chicana adolescents, a stronger ethnic identity (with traditional values and beliefs) serves as a protective factor that contributes to their resiliency. Perreira et al. (2006) recognize four empowerment strategies used by immigrant parents: empathizing and respecting children, fostering social support for the kids, developing bicultural coping skills for the kids, and improving their communication with the children. The researchers found that “parent-child communication is a tool used by immigrant parents to help promote resiliency” (Perreira et al., 2006, p. 1407).

Some of the most notable culturally relevant protective factors of Latino families include ethnic identity, time in the U.S., acculturation, and social position (Maldonado-Medina et al., 2006). Protective factors facilitate positive outcomes by serving as buffers between adversity and the individual (Holleran & Waller, 2003). Culture is a source of strength and increases resiliency. Culture is the basis for identity and encompasses resources for coping (Holleran & Waller, 2003).

Cultural Component and Program Effectiveness

Chapman and Perreira (2005) insist that an adequate intervention model needs to consider “the immigration experience...the role of immigrant generation, acculturation levels...family functioning, and how the potential protective factors of Latino families interact with contextual risk” (p. 105). “Evidence suggests that the most effective

prevention programs are those tailored to the most salient risk and protective factors for a particular group” (Maldonado-Medina et al., 2006, p. 404). Not enough research and theoretical models seriously incorporate the effects of culture, “an inadequacy that hinders the planning and development of treatment and prevention programs for minority youth” (Turner, 2000, p. 289). Ethnicity must play an integral role in the conceptualization of research. It should give direction to the design of any given program.

There is controversy over whether programs should be culturally adapted. Martinez and Eddy (2005) argue that cultural adaptation actually compromises the original evidence-based research, limiting it so much to such a specific population that it cannot be widely used and thus is not worth the effort to develop a structured program. It is often agreed that fidelity requires only implementation of the core components of the tested intervention. However, the problem is that it is rarely ever clear what those core components are (Elliot & Mihalic, 2004). Fidelity is believed to be related to effectiveness, and thus deviations from this will compromise the program (Elliot & Mihalic, 2004). Gottfredson and colleagues (2006) claim that implementing research-based programs outside of the original context has continued to yield disappointing results. The authors found this to be true in testing effectiveness of the Strengthening Families Program with a substantially different population than the one it was initially tested on and under much more rigorous conditions.

First attempts to make programs culturally appropriate were mere surface structure modifications (Kumpfer et al., 2002). Surface structure cultural adaptations are those that match program materials to observable superficial materials (e.g., food, music,

clothing, language, people), and some of the more culturally specific programs are even based more on practitioners' perceptions of community needs. Kumpfer et al. (2002) asks the question, "Are culturally-adapted family programs more effective?" At the time she posed the question, there were no randomized control studies and limited research otherwise. There appears to be a divide between the theoretical and the empirical on this issue. On the theoretical side, the argument is made that culturally sensitive programs are essential for the success of programs, but because of lack of scientific evidence, this is based on theory and observation. There is documentation that behavior-based family interventions are more effective with diverse families than affective-based approaches (Taylor & Biglan, 1998). This could be because in some cultures, it is customary to seek guidance from experts, but in the form of advice, not by use of other therapeutic techniques. On the opposing side are researchers who point to the lack of empirical evidence to say that there is no proof that culturally sensitive programs are superior and thus do not justify the cost and effort of developing separate programs (e.g., Elliot & Mihalic, 2004; Kazdin, 1993). A counterargument to that is that the lack of success or decreased success of ethnic minority involvement in prevention programs coupled with the increase in rates of high-risk behaviors suggest that, in fact, existing programs are not effective within ethnically diverse communities (Turner, 2000). Deep structure adaptations refer to cultural, social, historical, environmental, developmental, and psychological influences on behavior (Resnicow et al. as cited in Maldonado-Medina et al., 2006).

One resolution to the fidelity-adaptation controversy is to create a new breed of intervention described by Castro as hybrid interventions that would have a core

components program with the flexibility to have a pre-intervention adaptations phase that would allow for adjustments to be made based on the target population (Holleran Steiker et al., 2008). This is a good idea in theory, but the reality is that it is based on assumptions that core components of a program have been identified, that enough is known and understood about the target audience as it relates to the program, and that all analysis and adjustments are being kept within the guidance of the original theoretical framework that was used in designing the program. Kumpfer et al. (2002) believes that fidelity is important in terms of dosage, and adaptation should simply include recognition and use of cultural practices (e.g., adding songs, blessings, stories). “Cultural adaptations should follow a well-thought-out adaptation process and be ongoing, involving considerable trial and error until the best changes are made as documented by the evaluation” (Holleran Steiker et al., 2008, p. 157). Marsiglia and Waller (2002) believe in building a program from the bottom up and questions whether a program like that can even be applied to another group. However, they recognize that we operate in a resource-limited world and cultural adaption is more cost effective and timely, but it should be done prior to delivering the intervention (Holleran Steiker et al., 2008). Kazdin (1993) suggests that instead of developing separate models/programs for each minority population, it is more practical to develop a set of standards to guide cultural adaptations of programs. Turner (2000) has recommended some principles to consider in cultural adaptations and Cervantes, Mayers, Kail, and Watts (1993) have also put forth recommendations specific to the Latino population.

For Latino immigrant families, cultural adaptations are not always enough because of their unique experiences and needs in adapting to life in a foreign country.

These families have challenges of migration stress and trauma, often separations and later reunifications of family members, and differential levels of acculturation that need to be addressed. Understanding the culture is not enough to fully explain the nature of the changes taking place within families. Latino families in the U.S. live in a multicultural context and thus need to be understood within the framework of a culturally pluralistic environment (Szapocznik & Kurtines, 1993). There exists a need to enhance bicultural skills among all members of the family; in other words, there is a need for better management of the cultural differences inherent in immigrant families.

Manuscripts

The following section is a description of the individual manuscripts that are included here under the Multiple Article Path (MAP) dissertation format. Although each article has distinct research questions and designs, together they form a cohesive body of knowledge. The integrating premise underlying all three articles is that there are not adequate curriculum-based family intervention programs to address the needs of Latino (immigrant) families. In order to provide a foundation and identify the gaps in the literature, the first manuscript is a review of the literature to see what research others have done regarding curriculum-based family intervention programs with Latinos, with an emphasis on effectiveness/outcome studies. The second manuscript focuses on outcomes of one such program that is modeled after a nationally renowned evidence-based program. The final manuscript begins a qualitative exploration of needs identified by family practitioners regarding their experience in implementing curriculum-based family intervention programs with Latino families. Practitioners shared their thoughts on the effectiveness of existing programs and their ideas for what is lacking or how these

programs could be improved. In future research (to be done post-PhD), a needs assessment will be conducted with Latino families (parents and youth) themselves regarding their thoughts and experiences with family intervention programs.

Curriculum-based Family Intervention Programs with Latino Families

Research Question

What is the current state of knowledge about the nature and outcomes of curriculum-based family intervention programs implemented with Latinos?

Methods

A systematic search was utilized to locate published articles from relevant literature databases regarding curriculum-based family interventions programs in use with Latino families. The following search terms were used in different combinations under the advanced search feature of each of the databases: Family, familia, parent-child, curricula, curriculum, curriculum-based, psycho-education, structured program, prevention program, intervention program, Latino, Hispanic.

The following inclusion criteria were used to identify studies:

- Content of the article is focused on a structured intervention or prevention program
- Majority of participants of said program must be Hispanic or Latino
- The program must follow a curriculum or predetermined structure of session content
- A focal point of the program is to address issues related to family functioning (e.g., parent-child communication, parent-child affect, parental monitoring or

disciplining)

The most relevant articles describing program outcomes were reviewed and conclusions were drawn based on findings and in-depth review of exemplary programs found in the literature.

Journal

The article will be submitted to *Advances in Social Work*. This is a peer reviewed journal that is committed to bridging the gap between practice, research, and education. The article's focus is on research that has been published about practice, thus making it a good fit for the journal.

Outcomes of a Culturally Adapted Family Intervention Program

Hypotheses and Research Questions

H1: There are significant mean differences from pretest to posttest in family functioning for families after participation in Familias Unidas.

RQ1: Will participation in the program increase parenting skills as measured by the "general child management" scale from pretest to posttest?

RQ2: Will participation in the program improve parent-child relationships as measured by the "parent-child affective quality" scale from pretest to posttest?

RQ3: Will participation in the program increase protective factors as measured by "sexual limits" and "self-efficacy to refuse sexual activity" subscales from pretest to posttest?

H2: Participation in Familias Unidas will increase protective factors for youth of different acculturation levels from pretest to posttest.

RQ1: Are there significant mean differences in protective factors (as measured by combination of “self-efficacy to refuse sexual activities” and “sexual limits”) for youth of different acculturation levels from pretest to posttest?

H3: Parenting skills will increase from pretest to posttest for parents of different acculturation levels who participate in Familias Unidas.

RQ1: Are there significant mean differences in parenting skills (as measured by the combination of “general child management” and “intervention-targeted parenting behavior”) for parents of different acculturation levels from pretest to posttest?

H4: Participation in the program will improve parent-child relationships for families of different acculturation levels from pretest to posttest.

RQ1: Are there significant mean differences in the relationship between parent and child (as measured by the combination of “parent-child affective quality” and “parent-child report of aggressive and hostile behaviors in interaction”) for families of different acculturation levels from pretest to posttest?

Methods

The database being used for analyses is secondary data that were collected over a period of 5 years by faculty at the University of Utah, College of Social Work.

Institutional Review Board (IRB) approval was obtained for the time period that the program was active and data were collected. For the purposes of this study a new exempt status application was submitted and approved by the IRB for secondary data analyses.

Assessment Procedures

Participants included 372 individuals (youth = 197, parents = 175). Study instruments were self-administered questionnaires. They were completed by adults and youth prior to commencement of the program at an orientation session and again 6 weeks later on the last day of the program. Only those who completed both the pretest and posttest were included in the subsequent analysis.

Instruments

The parent survey included items reflecting individual characteristics as well as items regarding their target child. Subscales relevant to this study included (a) general child management, (b) parent-child communication, (c) parent-child affective quality and (d) parent-child report of aggressive and hostile behaviors.

The youth survey instrument included self-report items about self behaviors and parent report behaviors. Subscales relevant to this study included (a) parent-child affective quality, (b) sexual risk behavior, and (c) refusal efficacy and sexual limits.

Subscale items were taken from existing scales that had been previously used and tested in the Iowa Youth & Families Project (Spoth, Redmond, Haggerty, & Thomas, 1995) and the program, "Preparing for the Drug (Free) Years" (Spoth et al., 1995). All responses were measured using Likert-type scales. Reliability alpha levels ranged from .80 to .89 for the various subscales used.

Data Analysis

For data analysis purposes, scores for all intervention groups were aggregated. Total summary scores were calculated for each subscale and used in subsequent analysis

after reverse coding for pertinent individual items. Comparisons were made to assess whether there were significant differences between those who dropped out and those who completed the program. Univariate and multivariate preliminary analyses were conducted prior to statistical analyses.

Pretest to posttest group differences were tested using paired samples *t*-tests with Bonferroni adjustments. Acculturation effects were tested using three separate MANCOVAs. One focused on changes in youth outcomes, another on changes in parent outcomes, and the last one on changes in the relationship between youth and parent.

Variables

A categorical variable of acculturation served as the independent variable. Acculturation was categorized as either low or high. Dependent variables included (a) general child management, (b) intervention-targeted parenting behavior, (c) parent-child affective quality, (d) sexual risk behavior, and (e) refusal efficacy and sexual limits.

Journal

This article will be submitted to the *Journal of Ethnic and Cultural Diversity in Social Work*. This is a peer-reviewed journal whose focal point is the impact of culture on the delivery of human services. This article's focus is on a culturally sensitive program that has been in use with Latino families and level of acculturation is examined in the analysis, making it a perfect fit for this particular publication.

Serving Latino Families Through Curriculum-Based Programs:
Input from Service Providers

Research Question

Among practitioners who work directly with Latino families, what is their experience working with and recommendations for culturally relevant curriculum-based family intervention programs?

Methods

Participants and Sampling

Participants consisted of current Utah practitioners/service providers who have worked at least 1 year in direct practice with Latino families and have conducted at least one series of curriculum-based family intervention with them.

Sampling was purposive, utilizing a snowball sampling technique. Initial contacts for participants were made in collaboration with the College of Social Work's field education office. All eligible participants were invited to be interviewed as well as participate in a focus group.

Data Analyses

Qualitative interviews were conducted individually with practitioners until saturation was reached. Focus groups were conducted based on the number of eligible participants. An assistant moderator was recruited to serve as a second observer and recorder. Structured open-ended questionnaire guides were employed in order to minimize interviewer effects and bias (Rubin & Babbie, 2005). Interviews and focus

groups were audio taped and transcribed. Empirical observations and subjective interpretations were recorded in a field journal after every interview and focus group.

Interview and focus group transcripts were thoroughly read and analyzed utilizing coding and categorizing techniques and concept mapping. Concept mapping displayed and discerned relevant concepts via graphical format. Common and recurrent themes were identified and categorized.

Journal

This article will be submitted to the *Hispanic Journal of Behavioral Sciences*. The journal has a multidisciplinary focus and publishes empirical articles of particular interest to Hispanic populations. The implications resulting from this study have the potential to be of interest to disciplines other than social work and have direct relevance to the Hispanic community, thus making this a good fit for submission to the journal.

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CHAPTER 2

CURRICULUM-BASED INTERVENTION PROGRAMS WITH LATINO FAMILIES

Abstract

Curriculum-based family intervention programs are popular and widely used to address a variety of issues. However, many of these programs lack empirical evidence of effectiveness, especially with families of diverse ethnic backgrounds. The objective of this article is to review current outcome studies of curriculum-based family intervention programs that are being implemented with Latino families living in the U.S. Data were collected via systematic searches of relevant databases to identify peer-reviewed outcome studies published in the last 10 years (2000 – 2010). Studies were rated for quality and each of the programs was described. Of the initial 450 articles identified in the searches, 27 were reviewed more closely and only 7 met the inclusion criteria and were included for review in this study. All of the intervention programs described here showed favorable results in meeting their intended goals and therefore were found to be effective in strengthening Latino families. Common components/elements among most of the programs included addressing cultural issues specific to Latino families, including both parents and their adolescent in the intervention, adherence to a psychoeducational cognitive-behavioral curricula, and having at least 12 sessions.

Introduction

Migration from Latin America represents more than half of the foreign-born population in the U.S. (Larsen as cited in Tapia et al., 2006). Latinos represent the largest minority group at 15.4% and are the fastest growing minority group (U.S. Census, 2008). For the purposes of this article, the term “Latino” will be used, rather than Latino/a and Hispanic, to describe persons having roots from Latin America. Between the 2000 census and the 2010 census, the Latino population in the U.S. increased from 35.3 million to 50.5 million (43%), which accounts for more than half of the 27.3 million increase in the total population of the United States (U.S. Census Bureau, 2011). This does not take into account undocumented immigrants, which could possibly raise the population to as much as another 10 – 15 million (Bean et al., 2002). There has been a steady increase of families permanently emigrating to the U.S. from Latin American countries (Martinez & Eddy, 2005). The census projects a continued increase such that estimated numbers of Latinos in the year 2050 is 102 million or 24% of the population (U.S. Census, 2008). These statistics evidence not only the large number of Latinos who reside in the U.S. but also speak to a steady influx of Latino immigrants. It is this continued migration that adds to the growing number of immigrant families. Social services cannot keep up with the needs of Latino families, especially when one considers the unique needs of immigrant families.

Families that immigrate to the U.S. face many unique challenges that begin with migration stress and continue in the adjustment period in which they find themselves raising children in a foreign culture while sustaining language barriers, financial stress, and lack of social support networks (e.g. Gonzales et al., 2006; Holleran & Waller, 2003;

Martinez, 2006; Padilla, 2002). These experiences place families at greater risk for mental health or behavioral problems as well as parental disinvestment or breakdown in family roles and communication patterns (Padilla, 2002; Perreira et al., 2006; Spoth et al., 2002). This period of adjustment is a critical time in the formation of well-adjusted families and individuals, and it is often at this point when families need help. Families at this stage are most often reconciling the difference between the two cultures and redefining themselves.

There is often differential acculturation occurring in which the children acculturate at a faster pace than their parents, which can interrupt bonding and communication (Litrownik et al., 2000; Martinez & Eddy, 2005; Pantin, Schwartz, Sullivan, Coatsworth, & Szapocznik, 2003). Many Spanish speakers in the U.S. report not speaking English well or at all (Shin & Bruno as cited in Pantin et al., 2004). A consequence of children learning English before their parents is that they become the interpreters. The children in this case become the cultural brokers for the parents, disrupting the family hierarchy and placing children in leadership positions (Pantin et al., 2004). The loss of parental authority is contrary to traditional Latino values and therefore can lead to increased rigidity and discipline by the parent who is overcompensating, which then creates tension and often rebellion (Santisteban et al., 2002).

While not all Latino families face immigration/migration issues, there is still a need for programs and services to be culturally sensitive. Even Latino families that have been living in the U.S. for generations often deal with issues related to discrimination and oppression, as well as conflicts between the two cultures. Family intervention needs to address these converging values and beliefs as well as the unique stressors faced by

Latinos. The consequences of not providing culturally appropriate family intervention programs that address the special needs of the target population places families and individuals at risk.

The literature on treatment with Latino families documents special considerations that should be taken into account when working with this population (e.g., Falicov, 2007; Santisteban & Mena, 2009). Not enough is known about family intervention with diverse families (Dumka, Roosa, Michaels, & Suh, 1995; Turner, 2000). The number of evidence-based treatments that are responsive to the unique characteristics of Latinos are limited, as are outcome testing of existing programs (Santisteban & Mena, 2009). Most of the research targets Caucasian middle-class, well-functioning families. High-risk families are less likely to participate in family intervention programs and research studies (Devall, 2004). “The optimal situation is that treatments for Latinos integrate specific content relevant to the experiences of Latino families, show the connection of these themes to well known family processes, and lend themselves to rigorous testing with this population” (Santisteban & Mena, 2009, p. 256).

There are many approaches to family intervention, all of which have their own advantages and disadvantages. The reason to focus on curriculum-based models of intervention is that they are favored to serve the most families in an economical and culturally sensitive manner. Curriculum-based family intervention refers to an intervention that has a predetermined curricula or structure that is time-limited, delivered in a group format, and often employs didactic or psycho-educational modalities. Structured modules provide clear guidance and make an intervention highly replicable. The free flowing process of family therapy is not always the best venue for learning

specific facts or skills (Santisteban et al., 2002). Curriculum-based interventions are more widely known and utilized for parent educational programs or youth-targeted behavioral intervention.

Curriculum-based programs are one of many ways to approach family intervention. The reasons for focusing on this particular approach are because it 1) accommodates many families at once, 2) is economical, 3) is less threatening than psychotherapeutic approaches, and 4) lends itself to cultural sensitivity. All of these approaches are appealing to social service agencies and their funders, especially under the current movement in the social work field towards evidence-based programming. Most programs are not evidence-based and do not use valid/reliable outcome measures. However, there is a demand for these programs to be evidence-based, which means that they have to be tested using quantitative outcome measures. Less common are programs that include participation by both the children and their parent(s). Most family-targeted programs work only with parents or only with the adolescent but not both (Devall, 2004).

When problems in the family arise, Latinos are often reluctant to seek outside help and thus problems often can escalate to the point of a third party taking notice, most often with the children (Segal & Mayadas, 2005). As a direct consequence, many family intervention programs target adolescent behavior. Additionally, among Latino families, greater levels of acculturation have been linked consistently with greater risk for deviant behavior among adolescents (e.g., Gonzalez et al., 2006; Martinez, 2006). Latino adolescents born in the U.S. are more likely to use drugs than their immigrant counterparts (Vega et al. as cited in Pantin et al., 2004). Research findings suggest that the best way to curb or prevent adolescent high risk behavior is through the involvement

of the parents and within the family context (e.g., Kumpfer et al., 2003; Martinez & Eddy, 2005; Tapia et al., 2006).

A curriculum-based program lends itself to outcome testing more easily than other intervention methods. Lists are being created on model programs based on their scientific findings of effectiveness (Gorman et al., 2007). There are many family intervention programs that lack this empirical evidence (Spoth & Redmond, 2000) and therefore will never be widely recognized or disseminated. Few researchers have studied the impact of parenting interventions among cultural groups (Martinez & Eddy 2005).

This study reviews the scientific literature on curriculum-based intervention programs among Latino families in an attempt to describe the types of existing programs and assess the efficacy of the methods in achieving program goals related to family functioning. The purpose of this article is to review the research literature in order to answer the following research question: What is the current state of knowledge about the nature and outcomes of curriculum-based family intervention programs with Latinos?

Methods

Search Methods

A systematic search was utilized to locate published articles from relevant databases regarding curriculum-based family intervention programs serving Latino families. The following databases were used: Social Services Abstracts; Sociological Abstracts; Social Work Abstracts; Family & Society Studies Worldwide; Fuente Academica; PsycARTICLES; Psychology & Behavioral Sciences Collection; PsycINFO; Women's Studies International; ERIC; Academic Search Premier; CINAHL; and Criminal Justice Abstracts.

The following search terms were used in different combinations under the advanced search feature of each of the databases outlined above: Family, familia, curricula, curriculum, curriculum-based, psycho-education, structured program, prevention program, intervention program, Latino, Hispanic. No language restrictions were used. Limiters included time (2000 – 2010) and peer reviewed journal articles.

Screening and Inclusion Criteria

The titles and abstracts were screened and articles that clearly did not fulfill the inclusion criteria were rejected while ones that were questionable were retrieved for further examination. If upon reading the article it did not meet the inclusion criteria, it was rejected. The following inclusion criteria were used to identify studies:

- Content of the article focused on a structured intervention or prevention program
- The article must have a focus on how the aforementioned program relates to the Latino population (majority of participants must be Latino) residing in the U.S.
- The program must follow a curriculum or predetermined structure of session content
- A focal point of the program addresses issues related to family functioning (e.g., parent-child communication, parent-child affect, parental monitoring or disciplining)

All relevant articles describing program outcomes were reviewed in depth and conclusions were drawn based on reported methods and outcomes. Each program was summarized in terms of its objectives, cultural considerations, setting, participants, session content and delivery, measures used, and outcomes. The common elements among the intervention program were discussed. To rate the quality of each outcome

study, a form was used in order to ensure a systematic evaluation. The Quality of Study Rating Form (QSRF) was developed by Gibbs (2003) to rate effectiveness studies. The form's index of rating a study's validity is used in this review to assign a number between 0 and 100 on the total quality points of the study. The higher the number, the more confidence the reader can have that the intervention caused a change (Gibbs, 2003).

Results

The searches from all databases yielded 450 results, many of which were duplicates (see Figure 1). In the 1st level screening, all titles were read and those that were obvious exclusions were removed from the list. The 2nd level screening involved reading the abstract of each article and those not meeting the inclusion criteria were removed from the list. The 3rd level screening involved retrieving the article and reading it to assure it met the criteria for inclusion. Due to the fact that the criteria were very specific, only seven articles met all the criteria and are included in this article. Only six different intervention programs are represented in these articles. When the article did not describe the program it was evaluating adequately, reference articles were retrieved and included in the description of the program.

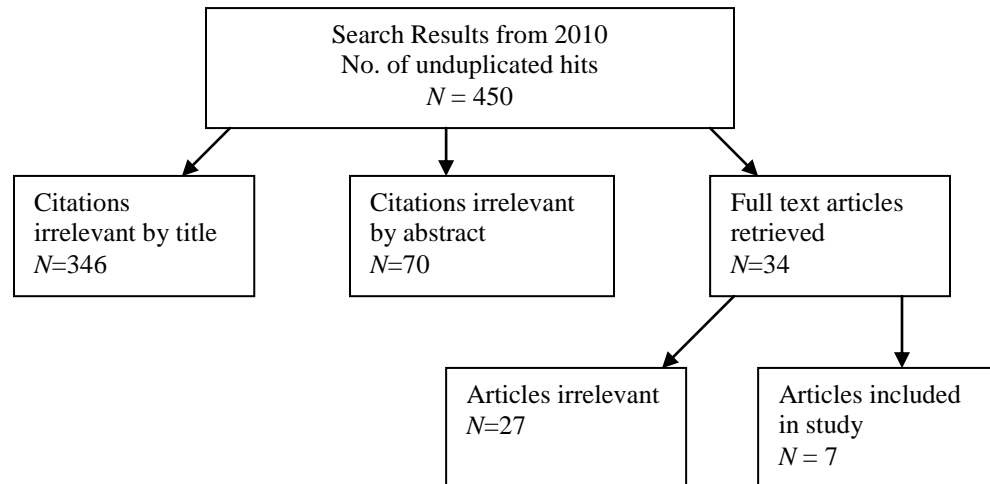


Figure 1. The study selection process.

The Programs

Sembrando Salud

This program is a culturally sensitive community-based tobacco and alcohol use prevention program targeting high-risk adolescents with an emphasis on parent-child communication (Litrownik et al., 2000). Program content included: 1) information about the effects of tobacco use and social influences on tobacco use, 2) training in refusal skills, and 3) parental involvement via parent-child communication. In terms of cultural considerations “the curriculum and group sessions were specifically tailored to a migrant Latino audience...all sessions were taught by bilingual/bicultural Mexican-American group leaders” (Litrownik et al., 2000 p. 127). All material including survey instruments were provided in Spanish as well as English. Role-play scenarios were typical of common experiences faced by migrant Latino adolescents. The curriculum incorporates cultural values of “familismo” and “respeto.”

Didactic presentation of information, modeling, behavioral rehearsal, role plays, and homework were conducted in eight sessions over a 7-10 week period. Only three of

those sessions included parent attendance. Sessions were conducted in the evening for 2 hours once a week: Session 1 - listening skills; Session 2 - communication skills; Session 3 - health effects of smoking and peer pressure; Session 4 - health effects of alcohol and decision making; Session 5 - societal influences; Session 6 - refusal skills; Session 7 - media and adult influences; and Session 8 - review.

The outcome study includes 660 migrant families recruited from those enrolled in the Migrant Education Program. The sample included families from 22 different schools, mostly Mexican. Participants were randomly assigned to the intervention or an attention-control group receiving home safety training in the same weekly format as the intervention group. Self-report pre/post surveys were administered to youth and adults. The 201 item survey included the “Communication with Parents” scale (Huizinga & Esbensen, 1990) and the “Acculturation Rating Scale for Mexican-Americans” (Cuellar, Harris, & Jasso, 1980). The retention rate from pretest to posttest was high, 96%.

Both parents and youth reported greater communication in the treatment group compared to the attention-control group (GEE, $Z=2.41$, $Z=1.98$ respectively, $p < .05$). Household size moderated the effect, suggesting that the positive effects of the program decrease as the household size increases. For youth, program effectiveness decreased with age and with higher levels of acculturation.

Reported limitations included small effect sizes, threat to external validity (60% of eligible families chose not to participate), short-term follow up, and bias related to self-report measures (see Table 1).

Table 1
Intervention Studies Implemented with Latino Families

Program, Study Author(s)	Participants & Retention	Nature of Intervention	Research Design Issues	Key Findings	Quality Rating
Sembrando Salud Litrownik et al., 2000	Parents & youth N = 660 100% Latino (majority Mexican) 96% Retention rate	8, 2-hour sessions (only 3 included parents) (1) information on the effects of tobacco use and social influences on tobacco use, (2) training in refusal skills, (3) parental involvement via parent-child communication.	Pre/Post survey measuring parent-child communication & acculturation. Attention-control group Generalized estimating equations	Both parents & children reported greater communication in treatment group compared to control. Household size moderated the effect.	83
Nurturing Parenting Program Devall, 2004	Parents & youth N = 323 60% Latino 60% Retention rate	9 – 24, 2.5 hour sessions (1) self-nurturing skills (communication & conflict resolution, stress, personal power, substance abuse), (2) parenting skills (family rules, rewards & punishment, choices & consequences, age-appropriate expectations, communication, routines)	Pre/Post survey measuring various elements of parenting No control or comparison group. No random selection ANOVAs	Parents improved in empathy towards children's needs and knowledge of positive discipline techniques while decreasing parent-child role reversals, inappropriate expectations, belief in corporal punishment, and restriction of child's independence.	50
Nuestras Familias: Andando Entre Culturas Martinez & Eddy, 2005	Parent only N = 73 100% Latino (90% Mexican) 94% Retention rate	12, 2.5 hour sessions (1) communication, (2) family roles, (3) problem-solving, (4) bridging cultures, (5) Latino roots, (6) encouragement & success, (7) discipline & other parenting considerations, (8) skill development	Pre/Post survey measuring parenting practices and youth adjustment Mixed factorial ANCOVAs Control group	Treatment group significantly better than control group at improving general parenting practices and skill encouragement for parents and youth. Youth nativity status played a role in intervention outcomes: parents of U.S.-born youth benefited more from the intervention, relative to control participants, than did parents of foreign-born youth. For youth adjustment outcome of depression, the intervention had stronger effects on U.S.-born youth.	87

Table 1 continued

Program, Study Author(s)	Participants & Retention	Nature of Intervention	Research Design Issues	Key Findings	Quality Rating
Familias Unidas Pantin et al., 2003	Parent & youth <i>N</i> = 167 100% Latino (majority Cuban or Central American)	9, 1.5 hour parent sessions & 8, 1 hour family sessions 1) familiarize and involve parents in extrafamilial contexts in which their children participate, 2) reinvest parents in their children's lives by facilitating parent-child bonding & cohesion, 3) build supportive relationships among Latino immigrant parents to decrease isolation.	Pre/Post survey measuring parental investment and youth problem behavior Control group ANCOVAs	Intervention found to be more efficacious than control in increasing parental investment and decreasing adolescent behavior problems.	79
Entre Dos Mundos Bacallao & Smokowski, 2009(a) & 2009(b)	Parent & youth (a) <i>N</i> = 81 (b) <i>N</i> = 89 100% Latino (majority Mexican)	8 sessions Aids parents & adolescents in decreasing conflict, coping with discrimination, and increasing bicultural coping skills.	Pre/Post survey comparing 2 intervention groups Multiple regressions	(a) Action oriented version of the intervention was found to be better than support group version as a predictor of child behavior and parent-child conflict (b) No significant differences found between groups implying both versions were equally beneficial.	(a) 68 (b) 72
Latino Family Connection Project Chartier et al., 2010	Parent & youth <i>N</i> = 270 100% Latino (majority Puerto Rican) 73% Retention Rate	10, 3-hour sessions (1) reduce substance abuse risk factors while increasing protective factors among youth (2) improve parenting skills (3) increase family bonding.	Pre/Post survey Control group ANOVAs	Intervention was effective in reducing children's aggressive and difficult behavior, improving family relationships, and reducing parental stress but it did not reduce substance use for parents or children.	64
Familias Unidas Pantin et al., 2003	Parent & youth <i>N</i> = 167 100% Latino (majority Cuban or Central American)	9, 1.5 hour parent sessions & 8, 1 hour family sessions 1) familiarize and involve parents in extrafamilial contexts in which their children participate, 2) reinvest parents in their children's lives by facilitating parent-child bonding & cohesion, 3) build supportive relationships among Latino immigrant parents to decrease isolation.	Pre/Post survey measuring parental investment and youth problem behavior Control group ANCOVAs	Intervention found to be more efficacious than control in increasing parental investment and decreasing adolescent behavior problems.	79

Nurturing Parenting Program (NPP)

A part of the National Registry of Evidence-Based Programs & Practices (NREPP), this is a family-based program for the prevention and treatment of child abuse and neglect. The Nurturing Parenting Program is recognized internationally as valid and reliable and nationally has been designated as a model program by the federal government (SAMHSA, 2010). The focus is on helping parents learn new patterns of parenting. Multiple versions of the NPP have been developed for various age groups and family circumstances (e.g., prenatal families, teen parents and their families, families with infants/toddlers/preschoolers, families with school-age children 5-11, families with adolescents 12-18, foster and adoptive families, and families in recovery from substance abuse). The NPP was developed by Stephen Bavolek (1984) and all the validation studies that have been conducted on the program are listed on their website (nurturvalidation.com).

The program addresses self-nurturing, parenting skills, life skills, and nutrition through lecture, discussion, role-play, practice skills, homework, and audiovisual exercises. The sessions are 2.5 hours per week and the number of sessions varies by version, ranging between 9 and 24. “Participants develop their awareness, knowledge, and skills in (1) age-appropriate expectations; (2) empathy, bonding, and attachment; (3) nonviolent nurturing discipline; (4) self-awareness and self-worth; and (5) empowerment, autonomy, and healthy independence” (United States Department of Health & Human Services, 2010). Cultural considerations include materials available in Spanish under the translated title of “Crianza con Cariño” where programs, videos, instructional aids, and

assessment tools have been developed and normed for Latino families (see website: www.nurturingparenting.com).

The outcome study included 323 parents. They ranged in age from 14 to 70 with a median age of 27. In terms of ethnicity, most were Latino (60%). More than half reported being single parents (58%). The number of children ranged from 1 to 9 with a median of 2. Pretests and posttests included items from three instruments. The Adult-Adolescent Parenting Inventory (AAPI-2) has five subscales: 1) inappropriate expectations of children, 2) lack of empathy towards children's needs, 3) strong belief in the use of corporal punishment, 4) reversing parent-child roles, and 5) oppressing children's power and independence (Bavolek & Keene, 1999). The Nurturing Quiz (NQ) assesses parents' knowledge of effective discipline techniques such as praise, redirection and consequences (Bavolek, 1984). The Family Social History Questionnaire (FSHQ) was used to gather demographic information (Bavolek, 1984). "The completion rate ranged from 33 to 100 % with an average completion rate across the 50 class series of 60%" (Devall, 2004, p. 24).

Pretests and posttests were administered measuring the dependent variable. The independent variable was curriculum, which had seven differing versions. A 2-way ANOVA (Time x Curriculum) was run for each of the five subscales on the AAPI and each of the three versions of the NQ. For curriculum, no significant main effects and no interaction effects were found, which meant there were no differences among the different curricula versions. For time, all five subscales of the AAPI were significant, i.e., parents showed significant improvement in empathy towards children's needs and knowledge of positive discipline techniques ($F=9.14, p = .01$) while showing significant

decreases in parent-child role reversals ($F=32.31, p < .01$), inappropriate expectations of their children ($F=26.65, p < .00$), belief in corporal punishment ($F=29.79, p < .01$), and restriction of their children's independence ($F=16.97, p < .01$). Statistically significant improvements on the NQ were found for prenatal families, families with preschool children, and families with school-age children.

Nuestras Familias: Andando Entre Culturas

The focus of this intervention was on parent empowerment and parent self-efficacy with the intent to decrease youth substance use and related negative outcomes and promote healthy adjustment. This program was “designed to impact parenting practices most proximally and family environmental variables more distally” (Martinez & Eddy, 2005, p. 843). In regard to cultural relevancy, the program was developed specifically for implementation with monolingual Spanish-speaking immigrant parents. The development team consisted of five Latino family interventionists who adapted an existing basic parent-management training model. The intervention core components were identified, as well as “new content areas to be developed to address culturally specific risk and protective factors involved in adjustment outcomes for Latino parents and youth (e.g., family acculturation issues, structural barriers such as discrimination)” (Martinez & Eddy, 2005, p. 845). *Nuestras Familias* was presented to focus groups of Latino parents for their feedback.

Didactic presentations, group discussions, role-plays, and homework were incorporated into the 12 weekly 2.5-hour sessions. The first hour of each session was dedicated to sharing a meal and social interaction. Topics included strong Latino roots; effective family communication; roles in the family; family problem-solving; bridging

cultures; giving good directions; being positive and encouraging success; teaching new skills; discipline and limit-setting; balancing discipline and encouragement; monitoring and supervision for school success; and dealing with obstacles on the road to success.

Participants included 73 mothers, fathers, and youth. Youth's average age was 12.7. Mother's average age was 36.4 and father's average age 39.3. Half the youth were foreign-born and half were born in the U.S. All mothers and all but one father were born outside the U.S. One hundred percent of families identified as Latino, 90% from Mexico. For the intervention group, 70% completed at least 10 of the 12 sessions, 9% completed 7-9 sessions, and 15% completed 4-6 sessions.

Outcome measurement included interviews with each family participant, self-report questionnaires, and observations by staff. Measures of parenting practices were collected in parent interviews examining six dimensions of parenting: "positive parental involvement, monitoring, homework engagement, skill encouragement, appropriate discipline and general parenting" (Martinez & Eddy, 2005, p. 845). Youth and parents also reported on youth adjustment: aggression, externalizing behavior, academic success, depression, and the likelihood of using substances.

For intervention effects on parenting practices, the ANCOVA found significant Group x Time interaction effects for overall effective parenting, $F(1, 51) = 2.79, p < .05$; general parenting, $F(1, 51) = 3.53, p < .05$; and skill encouragement, $F(1, 51) = 3.83, p < .05$. For youth, significant Group x Time effects of the intervention were found for youth aggression, $F(1, 50) = 5.40, p < .05$; externalizing, $F(1, 50) = 5.30, p < .05$; and likelihood of substance use, $F(1, 50) = 2.85, p < .05$. Group refers to intervention vs. control and time refers to baseline vs. intervention termination. All the model covariates

were youth gender, parent education, and parent years of U.S. residency. A series of three-way interaction analyses involving group, time, and youth nativity status (U.S. vs. foreign-born) revealed that nativity status played a role in intervention outcomes. The interaction suggests that “parents of U.S.-born youth benefited more from participation in the intervention, relative to control participants, than did parents of foreign-born youth” (Martinez & Eddy, 2005, p. 849). Also for youth adjustment outcome of depression, the intervention had stronger effects on U.S.-born youth.

Reported study limitations include low power, especially for analysis involving 3-way interactions. Authors did not compare culturally adapted intervention to a non-adapted version to say one is better than the other. Study design did not allow the study of “more multidimensional variables that involve family interactional patterns and cognitive processes” (p. 849).

Familias Unidas

This program is a preventive intervention that is specific to Latino immigrant families, ecologically focused, parent-centered, and aims to promote protection against and reduce risk for adolescent behavior problems. The program promotes protective factors against drug abuse and delinquency such as parental investment and adolescent school bonding/academic achievement. Familias Unidas is a multilevel integrative program that addresses parental investment within the family and fosters connections between the family and other important systems such as peers, schools, and sources of support for parents. The intervention targets three family conditions that are believed to be critical in avoiding negative outcomes: 1) parental involvement in their youth’s

extrafamilial contexts such as peers and school, 2) parent-child bonding, and 3) reducing parental isolation (Pantin et al., 2003).

Problem-posing and participatory exercises, group discussions, and parent-child interactions are central to the intervention. There are nine 90-minute structured parent support group sessions, four 60-minute family visits (practice of skills learned), and four 60-minute parent-adolescent discussion circles (practicing communication skills). The intervention covers topics related to the adolescent's world: family (communication, support, behavior management); school (American school system and parental involvement); peers (parents arrange supervised outings with their child and one of their friends and the friend's parent); and substance abuse (dangers of substance abuse).

Involved in this outcome study were 167 participants/families (96 in received intervention and 71 in the control group). The mean age of the adolescent was 12. The entire sample was Latino: 39% identified as Cuban, 29% Central American, 17% South American, 5% Puerto Rican, and 10% other. The vast majority of parents were born outside the U.S. (94%) and about half of the youth were (49%). Most (57%) of the families reported speaking only Spanish at home and 36% spoke both Spanish and English.

Ten standardized self-report instruments were administered to both parent and youth pretest and posttest. These were used to measure parental investment, adolescent behavior problems and adolescent school bonding/academic achievement. For parental investment, ANOVA revealed a significant Time x Condition interaction $F(4, 577) = 2.68, p < .05$. For adolescent problem behavior, the ANCOVA revealed a significant Time x Condition interaction $F(3, 424) = 4.25, p < .05$. For all models, time refers to

baseline vs. intervention completion and condition refers to intervention group vs. control group. The covariate in the models involving adolescents was parental investment. For adolescent school bonding/academic achievement, the ANCOVA did not yield significant results. These findings suggest that the intervention group was more efficacious than a community control condition in increasing parental investment and decreasing adolescent behavior problems.

Limitations of the intervention are that it requires a clinically skilled trained facilitator to administer, the length of the program is long (9 months) and the group sessions and home visits are not standardized. Study limitations include the fact that only positive domains of parenting were measured and not decreases in negative parenting practices; the exclusive use of questionnaires which could have introduced bias; and contamination (families talking to each other). In addition, only 35% responded to the initial invitation to participate.

Entre Dos Mundos

This prevention program was experiential, developmental, and ecologically focused. It was specifically designed for Latino families. It purports to mediate the negative effects of acculturation stress by increasing family adaptability and promoting biculturalism. Each session was devoted to a particular theme that had been empirically linked to acculturation stress (Bacallao & Smokowski, 2009).

The program consisted of one session per week for 8 weeks. Each session centers on a thematic question: 1) How are we as a family changing as we adapt to life in the U.S. and how do we balance demands from two cultures?, 2) What worries do adolescents have for their parents and parents for their adolescents? How can we help

each other decrease those worries and comfort one another?, 3) When cultural conflict arises, how can we remain united as a family while considering our different perspectives?, 4) How can we handle discrimination at school and at work and in what ways can we support each other during these experiences?, 5) In what ways do adolescents participate or wish to participate in school?, 6) How can we strengthen our relationships with non-Latino Americans (peers, teachers, coworkers, etc.)?, and 7) What does our future look like in 10 years (developing bicultural identities)? The last session is a graduation ceremony providing review, integration, and closure.

There are two formats being tested. One is an action-oriented format using psychodrama techniques such as role reversal, doubling, mirroring, empty chair, and enactment of critical scenes from shared family experiences. The other is a support group format that does not incorporate activities, only discussion of weekly themes.

Two outcome studies for this program were identified in the search. However, they draw from the same sample set and therefore will be described together and distinctions made where necessary. Study 1 will be used to reference “Entre Dos Mundos/Between Two Worlds Youth Violence Prevention” (Smokowski & Bacallao, 2009a) and study 2 to reference “Entre Dos Mundos/Between Two Worlds Youth Violence Prevention for Acculturating Latino Families” (Smokowski & Bacallao, 2009b). Both studies were meant to determine which of two implementation formats would be most effective in decreasing adolescent problems and each study yielded different results. In both studies, dependent measures were assessed pretest and posttest.

Participants in both studies were Latino families with a foreign-born adolescent. The mean age of the adolescent was 14. The number of years spent living in the U.S. for

youth was between 3 and 4 and for parents was just over 5. Most families were from Mexico (study 1= 78%, study 2= 73%).

In study 1 ($N = 81$), two standardized measures were used to record parents' reports of their child's behavior. The Child Behavior Checklist (CBCL; Achenbach & Rescorla, 2001) is a widely-used scale with 60 items that measure severity of a child's behavioral problems. The Conflict Behavior Questionnaire-20 (CBQ-20; Robin & Foster, 1989) provides an overall measure of negative communication conflict between parent and adolescent. In study 2 ($N = 89$), the CBCL is also used to measure parent reports of child problem behavior. To measure family adaptability, a subscale of the Faces II Scale was used (Olson, 1992). Bicultural identity was measured using the Bicultural Identity Integration scale (Benet-Martinez & Haritatos, 2005). Bicultural support was measured using the Bicultural Support Scale (Smokowski & Bacallao, 2006a; 2006b).

In study 1, stepwise multiple regression analyses were used. When controlling for pretest scores, length of parents' U.S. residency, family income, parent education, age, and marital status, program implementation format was found to be a statistically significant predictor of child problem behavior and parent-adolescent conflict in favor of action-oriented delivery. Parents who participated in the action-oriented format of *Entre Dos Mundos* reported significantly less conflict with their adolescent as compared to support group participants. They also reported significantly fewer mental health problems for their children than parents who were in the support group. In study 2, stepwise multiple regression analyses were also used but no statistically significant differences were found between conditions. Both groups showed changes in the desired directions from pretest to posttest. These findings suggest that action-oriented delivery had the same

beneficial effects as the unstructured support group format. “The amount of exposure to the...curriculum and the parents’ investment in regularly attending the groups were the critical ingredients for program success” (Smokowski & Bacallao, 2009, p. 175).

In terms of study limitations, the authors reported in both studies that the sample sizes were small for the statistical analysis used, limiting possibilities for subanalyses. There was no control group used in either study. Outcome measures of adolescents were based solely on parent reports. In study 1, there was a large attrition rate.

Latino Family Connection Project (LFCP)

This program was a culturally adapted version of the evidence-based Strengthening Families Program (SFP) for use with Latino families. It targeted families with preadolescent children with the intent of delaying or averting substance use. The goals of the program were concurrent with those of SFP: “to reduce substance abuse risk factors while increasing protective factors among children of substance-abusing parents, as well as to improve parenting skills of participating parents/caregivers” (Chartier, Negroni, & Hesselbrock, 2010, p. 5).

Sessions were offered in both Spanish and English. Staff were bilingual/bicultural. “Parents and children were helped to examine topics from their own cultural perspective and to compare the two different cultural perspectives” (Chartier et al., 2010, p. 6). Content was adapted to cover culturally relevant topics such as the effects of culture and acculturation on the parent-child relationship. Examples and family descriptions were changed to be reflective of cultural experiences. Additionally, culturally-relevant program activities were implemented, e.g., the celebration of the holiday “Three Kings Day.”

The program included didactic presentations, role-plays, group discussions, skill building activities, videos, and social bonding activities. Sessions were once a week for 10 weeks each lasting 3 hours. The 1st hour was a family meal time; in the 2nd hour, parents and youth had separate but concurrent sessions; and in the 3rd hour, parents and youth would come together for a family strengthening session to practice the skills learned. Topics covered in the parent sessions included use of reinforcement to increase desired child behavior, developmentally appropriate expectations of children, setting appropriate limits, and education regarding substances. Topics covered in the youth sessions included understanding feelings, resisting peer pressure, solving problems, and discussing alcohol and other drugs.

In this outcome study, all of the participants were Latino, mostly from Puerto Rico (76% intervention group, 88% control group). Adult participants were primarily born outside the U.S. mainland (82% intervention group, 86% control group). The average age of the child was between 10 and 11. In the intervention group, of the 198 participants who completed the pretest, only 135 completed the posttest (a retention rate of 68%). In the control group of 174 that completed the pretest, 135 completed the posttest. In comparing those who dropped out, differences were found. Compared to parents who dropped out, parents who completed the posttest tended to be older, less likely to be treated for substance abuse, and less likely to be born on the U.S. mainland.

To measure outcomes, the Parenting Stress Index – Short Format (PSI-SF; Abidin, 1995) was used to measure parental distress, parent-child dysfunctional interaction, and difficult child behavior. Adolescent aggression and sociability were measured by the Parent Observation of Child's Activities (POCA-R; Kellam, 1990)

instrument. Parents completed a Family Hardiness Index (FHI; McCubbin & Thompson, 1991), which is intended to assess a family's sense of control over life events and hardships. Family attachment, mental health, and substance use and risk were measured by nonstandardized survey questions. All measures were administered pretest and posttest.

Repeated measures ANOVA was used to test outcome variables. The Group x Time interaction effect was examined to identify group differences where group refers to intervention vs. control and time refers to baseline vs. exit surveys. The intervention group showed favorable statistically significant results in family hardiness $F(1, 133) = 23.07, p < .001$; family attachment $F(1, 89) = 4.24, p = .042$; and parent-child dysfunctional interaction $F(1, 133) = 8.18, p = .005$. For children in the intervention, there were favorable statistically significant results in difficult behavior $F(1, 133) = 10.25, p = .002$; and aggression $F(1, 133) = 5.59, p = .02$. Parents in the intervention group reported favorable statistically significant results in parental distress $F(1, 133) = 20.35, p < .001$. Although the intervention was effective in reducing children's aggressive and difficult behavior, improving family relationships, and reducing parental stress, it did not reduce substance use for parents or children. The most serious limitations to the study were that there was no random assignment and attrition rates were high.

Common Themes

Programs Developed Specifically for Latino Families

Four out of the six programs were specifically developed for Latino families (see Table 2). Martinez and Eddy (2005) believe that there are too few interventions that have been developed that take into consideration the culturally specific risk and protective

Table 2

Common Program Elements

Program & Outcome Study Author	Tx designed for Latino families	Tx includes both parent and youth	Tx targets youth behavior	Tx is cognitive-behavioral	Minimum of 12 sessions
Sembrando Salud (Litrownik et al., 2000)	X	X	X	X	
Nurturing Parenting Program (Devall, 2004)		X		X	X
Familias Unidas (Pantin et al., 2003)	X	X	X		X
Nuestras Familias (Martinez & Eddy, 2005)	X		X	X	X
Entre Dos Mundos (Bacallao & Smokowski, 2009a,b)	X	X	X		
Latino Family Connection Project (Chartier et al., 2010)		X	X	X	

factors that relate to Latino youth. The authors posit that the social contexts and acculturation processes influence the family environment, which then influences parenting practices and ultimately affects youth adjustment, including the frequency and extent of youth problem behavior. Nuestras Familias was designed specifically for delivery to monolingual Spanish-speaking immigrant parents, therefore incorporating elements not typically found in other culturally adapted intervention programs. Martinez and Eddy added content to address adjustment outcomes for parents and youth, e.g., family acculturation (i.e., differential acculturation), structural barriers, and discrimination. Recognizing the unique needs of immigrating Latino families, this program was “designed to impact parenting practices most proximally and family environmental variables more distally” (Martinez & Eddy, 2005, p. 843).

Pantin and her colleagues (2003) believe that factors related to acculturation and immigration play a role in distancing parents from their children. Incompatibility in dominant language between child and parent can become problematic, especially when children are used as cultural brokers, as this leads to inverted family hierarchy (Pantin et al., 2004). These conflicting cultural values can lead to family dissent. Family intervention programs for Latino families need to consider issues of differential acculturation between parents and their children, as well as the potential emergence of parental isolation. For newly immigrant families, there may also be a need for education regarding U.S. culture (Pantin et al., 2004). Other important considerations among Latino families are that there are often cultural incompatibilities between the immigrants' culture and the host culture and there is often a loss of social support networks.

Litrownik et al. (2000) state an obvious need to develop prevention programs that target the Latino immigrant population, specifically taking into account culture, language, and acculturation pressures. In developing their program, the authors felt it was important to incorporate common cultural values such as "familismo" and "respeto" so that youth could learn refusal skills without disrespecting their elders. The role plays were adapted from experiences that are common to Latino adolescents living in the U.S. (Litrownik et al., 2000)

"Acculturation-based prevention programs acknowledge the importance culture plays in intervention and attempt to decrease assimilation stress while increasing bicultural social skills" (Bacallao & Smokowski, 2005 p. 492). Bacallao & Smokowski (2005) make note of the empirical literature that shows that rapid assimilation can be a risk factor for Latino immigrant families and that biculturalism can be a protective factor.

They believe that increasing biculturalism and familism will decrease intergenerational conflict and cultural conflict within the family, thereby decreasing adolescent risk factors. Latinos have to cope with the complexities inherent in the process of acculturation that can affect physical and mental health (Bacallao & Smokowski, 2005).

Programs that Include Both Parents and Youth

All but one of the six programs under review felt it necessary to include both parents and their youth in the intervention. Even though most of the programs focused on youth problems, the program developers understood the important role that parents play and recognized that family process affects child behavior.

“The antecedents of adolescent drug abuse and antisocial behavior are known to involve family processes such as parental disinterest, disengagement, and uninvolvement in adolescents’ lives” (Pantin et al., 2003, p. 189). Therefore, one of the main program goals in Familias Unidas was to promote parental investment and parent-child bonding. This was achieved by involving both parents and youth in sessions to allow for parent-child discussion and interaction.

Even though Sembrando Salud targets prevention of substance use in adolescents, the developers felt it essential to involve parents in the program because of the important role they play in the protective effect of parent-child communication. They also understand the important role that the family unit plays in Latino culture (Litrownik et al., 2000).

Entre Dos Mundos was developed to “mediate the negative impact of parent-adolescent conflict and perceived discrimination by increasing familism and biculturalism in both Latino adolescents and their parents” (Bacallao & Sokowski, 2005,

p. 487). And since acculturation is an issue that affects the entire family, it is essential to include both parents and their youth in the interactive experiential sessions (Smokowski & Bacallao, 2009).

Programs Aimed at Reducing or Preventing High-Risk

Adolescent Behavior

Most family intervention programs were developed to address adolescent negative behavior. Although no search term referencing adolescent, teen, or youth was used, all but one of the results included in this analysis involves programs that target adolescent behavior. For adolescents, assimilation is a risk factor for negative health behaviors, especially involving substance use and mental health problems (Bacallao & Smokowski, 2005).

Nuestras Familias is intended to “decrease the likelihood of youth substance use and related negative outcomes and promote healthy adjustment” (Martinez & Eddy, 2005, p. 842). The authors believe the best way to achieve those intended outcomes is to impact parenting practices and, in turn, the family environment.

Pantin and her colleagues (2003) believe that factors related to acculturation and immigration play a role in distancing parents from their children and that disengaged parenting is a risk factor for adolescent negative behavior. Parental disinterest and uninvolvement in their adolescents’ lives place them at risk for drug abuse and antisocial behavior.

Litrownik et al. (2000) report that parents directly mediate and moderate their adolescent’s substance use, especially during early adolescence. Parental connectedness

that includes communication and monitoring has been found to be related to decreased substance use by adolescents.

“We have become increasingly aware that family plays an important role, as both a risk and protective factor, for children developing problem behaviors” (Chartier et al., 2010, p. 1). Therefore, it is believed that by focusing intervention on strengthening the family unit, problems such as adolescent substance abuse and delinquency can be prevented.

Programs that Use a Psychoeducational, Cognitive-Behavioral

Curriculum

Martinez and Eddy (2005) believe that this treatment modality is one of the most efficacious in affecting childhood behavior problems. They note the literature that has shown that cognitive-behavioral treatment reduces youth problems and related outcomes.

The Nurturing Parenting program adopts this approach because it focuses on re-parenting, which involves helping parents learn a new pattern of parenting. It is believed that a psychoeducational, cognitive-behavioral approach is an effective method towards that goal (NREPP, 2010).

Discussion

The steady and undeniably rapid growth of Latinos in the U.S. has heightened awareness among social scientists on the need for a research agenda that focuses on this population. However, the results of this review of the scientific literature highlight the scarcity of family intervention programs that adequately address the needs of the Latino community. Other researchers have noted similar findings; for example, Jani and

colleagues (2009) conducted a literature review of Latino outcome studies in social work and found

that there remains a paucity of intervention outcome research regarding the Latino population. The need for outcome studies investigating effectiveness of interventions for Latinos is important for social work practitioners and crucial to the quality of life of Latinos in the United States. (p.192)

Social work has joined the evidence-based movement at a time when evidence-based practice is playing an increasing role in U.S. prevention policy. It has reached the point where lists have been generated of “exemplary” or “model” intervention/prevention programs based on their scientific findings of effectiveness (Gorman et al., 2007). Indeed, funding agencies in particular emphasize the use of evidence-based programs in an effort to maintain accountability. Only two programs of those reviewed in this article have been rigorously tested and determined to be model programs by the federal government, the Nurturing Parent Program and the Strengthening Families Program (curriculum the LFCP uses). Consequently, they are also the only two programs that were not developed specifically for Latino populations. This speaks to the need for more rigorous and empirical testing to be conducted on those programs that have been developed specifically to address the needs of the Latino communities throughout the U.S.

This review is evidence that practitioners are taking notice of the need to develop culturally tailored family intervention programs to address the needs of Latino families. Many of the programs described here are incorporating issues relevant to Latinos, such as acculturation and discrimination, and recognizing that in the process of program development there is a need to incorporate feedback from Latino families themselves. Latinos are not a homogenous group, but many of the salient cultural experiences and

values are common and those are the elements that are being incorporated in many of the programs described here. Arguably, part of the cultural relevancy in intervention programs of this nature is in the delivery format.

While most of the programs followed a psychoeducational model employing mostly cognitive-behavioral techniques, there were a few that were experimenting with more participatory or experiential modalities that were found to have efficacious effects. It is important to challenge traditional notions of “treatment.” Within didactic cognitive-behavioral models, there is an underlying assumption that people need to learn and be trained when often this is far from the case. Latino families are often identified in the literature as “high-risk.” While this may be true, it should not imply that Latino families need help simply because of their ethnicity, but rather because of what they experience in the process of acculturating or integrating into a dominant culture. Almost all of the authors alluded to the fact that culture serves as a protective factor and thus the rationale behind including cultural wealth in their programs. By focusing or framing cultural values as assets we can empower families instead of simply treating undesired behaviors.

The findings from this study provide overwhelmingly evidence of the importance and efficacy of including both parents and youth in intervention programs, especially since most of the programs were targeting adolescent behaviors. The message conveyed here is that it is insufficient to simply “treat” the problematic behavior; rather, it is important to consider the centrality of the family unit, as well as the broader context of school, community, and culture. Most of the programs either discussed the importance of these broader contexts within their theoretical frameworks or actually structured their sessions to include them in their interventions (e.g., Familias Unidas, Entre Dos Mundos,

SFP). Another reason to include both parents and youth is that Latino parents tend to prefer a family-focused approach because of their cultural collective identity.

The purpose of this review was not to critique the quality or rigor of the program's outcome research design or findings but simply to present a description of the programs themselves. Indeed, there are countless family interventions that are not empirically evaluated in the research literature (Spoth, Redmond, Shin, & Azevedo, 2004). However, without that empirical evidence to support it, these potentially beneficial programs will not be widely recognized or disseminated. This phenomenon speaks to the disconnect that exists between research and practice. Often, practitioners choose not to utilize evidence-based programs despite the high reputation they may have in the literature (Kumpfer et al., 2003). Usually this is due to the irrelevance they hold to ethnic populations. There is a need to translate research into practice (Polizzi Fox, Gottfredson, Kumpfer, & Bellamy, 2004) and vice versa.

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CHAPTER 3

OUTCOMES OF A CULTURALLY ADAPTED FAMILY INTERVENTION PROGRAM

Abstract

The adequacy of existing curriculum-based family intervention programs to meet the needs of Latino families has been questioned in the research literature. Many programs have been culturally adapted to varying degrees. This study focuses on one such program, Familias Unidas. The objectives of the study are (1) to assess improvements in family functioning after participation in Familias Unidas and (2) to explore whether level of acculturation would affect these outcomes. Families were administered a pretest and posttest measuring parenting skills, protective factors, and parent-child relationships. Paired sample *t*-tests were run to assess differences from pretest to posttest. Then three separate MANCOVAs were used to assess differences between low and high acculturated families on these variables. Paired sample *t*-tests revealed significant desired results. However, the MANCOVAs produced no significant results, suggesting that the program can be equally favorable or applicable to Latino families regardless of their level of acculturation.

Introduction

There are a plethora of curriculum-based family intervention programs, many of which claim to be culturally appropriate for use with minority families. However, the reality is that there exist few curriculum-based family intervention programs that adequately address the needs of Latino families living in the U.S. (e.g., Chapman & Perreira, 2005; Harachi, Catalano, & Hawkins, 1997; Maldonado-Molina, Reyes, & Espinosa-Hernandez, 2006; Tapia, Schwartz, Prado, Lopez, & Pantin, 2006; Turner, 2000). This is especially true for recent immigrant families. The lack of culturally sensitive programs is common across all ethnic groups in the U.S.

The reason to focus on Latinos is the steady increase in population. In the U.S., Latinos have become the largest and fastest growing ethnic minority group (U.S. Census, 2008). Migration from Latin America represents more than half of the foreign-born population in the U.S. (Larsen as cited in Tapia et al., 2006). The migration and relocation process places a great amount of stress on families that can lead to changes in family roles and often a breakdown in family functioning (Gonzales, Deardorff, Formoso, Barr, & Barrera, 2006; Holleran & Waller 2003; Martinez, 2006; Padilla 2002). This in turn can cause individual family members to turn to use of substances, violence, or engage in high-risk behaviors. It can affect individual family members' mental, emotional, or physical health (Padilla 2002; Perreira, Chapman, & Stein, 2006; Spoth, Redmond, Trudeau, & Shin, 2002).

When such problems arise, Latinos are reluctant to seek help and thus problems can escalate to the point of a third party taking notice and making a referral for intervention (Segal & Mayadas, 2005). Usually it is an adolescent's behavior that is

noticed and thus becomes the target of intervention (Bacallao & Smokowski, 2009; Kumpfer & Bluth, 2004; Martinez & Eddy, 2005; Szapocznik & Kurtines, 1993). Many curriculum-based intervention programs involve only the adolescent or only the parents. These parent-only and child-only programs miss a critical opportunity to practice and help restore family cohesion, which is often the root cause of the acting out behavior. Programs that involve both the parents and children in interactive activity are considered to be family intervention programs.

Family intervention is a broad concept that can encompass different treatment modalities. It can range from a focused approach such as family therapy to a comprehensive approach such as multisystemic therapy. The approach can be clinical or educational, and within each of those categories, there are a multitude of variations. The focus of this research is specific to curriculum-based programming. What is meant by “curriculum-based” is that the program follows a standardized, manual-based, time-limited curriculum. In other words, it is a program that has an inherent structure that follows a set of predetermined instructions and/or activities. Most often the program adheres to a didactic psychoeducational model.

Of the existing curriculum-based family intervention programs, there is a scarcity of ones that address the needs of Latino families (Kumpfer, Pinyuchon, Teixeira de Melo, & Whiteside, 2008; Turner, 2000). Most programs lack cultural sensitivity and even those reporting cultural adaptations often only have surface structure adaptations (Castro, Barrera, & Martinez, 2004; Kumpfer, Alvarado, Smith, & Bellamy, 2002; Wiley & Ebata, 2004). Cultural relevance is integral to program effectiveness, yet most of the existing programs lack this critical component (Pantin et al., 2003). Chapman and

Perreira (2005) insist that an adequate intervention model needs to consider the immigration experience, the role of the immigrant generation, acculturation levels, family functioning, and how the potential protective factors interact with the contextual risks. “Evidence suggests that the most effective prevention programs are those tailored to the most salient risk and protective factors for a particular group” (Maldonado-Medina et al., 2006, p. 404).

Not enough research and theoretical models seriously incorporate the effects of culture (Turner, 2000). Ethnicity needs to be integral in the conceptualization of practice and research. It should give direction to the design of any given program. Surface structure cultural adaptations are those that match program materials to observable superficial materials (e.g., food, music, clothing, language, people). For Latino immigrant families, cultural adaptations are not always enough because of their unique experiences and needs in adapting to life in a foreign country. These families have challenges of migration stress and trauma, separations and later reunifications of family members, and differential levels of acculturation that need to be addressed.

Understanding the culture is not enough to fully explain the nature of the changes taking place within families. Latino families in the U.S. live in a multicultural context and thus need to be understood within the framework of a culturally pluralistic environment (Szapocznik & Kurtines, 1993). There exists a need to enhance bicultural skills among all members of the family; in other words, there is a need for better management of the cultural differences inherent in immigrant families. These deeper structure adaptations take into account the cultural, social, historical, environmental, developmental, and

psychological influences on behavior (Resnicow et al. as cited in Maldonado-Medina et al., 2006).

Familias Unidas or Families United is a program that was culturally and locally adapted for Latino families living in Utah. This family intervention program was adapted from the Strengthening Families Program: For Parents and Youth 10-14 (SFP 10-14). The SFP 10-14 was the result of a major revision of the original Strengthening Families Program developed by Kumpfer, DeMarsh, and Child in 1983 (Molgaard, Spoth, & Redmond, 2000). Molgaard worked closely with Kumpfer to revise the original SFP version from a 12-14 week curriculum to a 7 week curriculum more relevant to general families with young adolescents in a midwestern rural area. The results of this revision created the Iowa Strengthening Families Program that was later revised to make it appropriate for ethnically diverse families and was renamed the SFP 10-14 (Molgaard et al., 2000). The goal of the SFP 10-14 is to reduce substance abuse and other problem behavior in youth by bringing parents and youth together in building skills and changing behaviors (Molgaard et al., 2000). The authors conducted focus groups with Latinos and African Americans about how to revise the program to make it more culturally appropriate (Iowa State University, 1999). The SFP has been shown to demonstrate its effectiveness by independent researchers and has been modified for use with broader populations that include various multiethnic groups. It has been identified as a model program by the National Registry of Evidence-based Programs and Practices (SAMHSA, 2007).

While the SFP 10-14 has taken measures to be culturally sensitive, Familias Unidas has taken the adaptation one step further by making the program more relevant to

the local Latino culture. In the state of Utah, there was a need for HIV/AIDS education and prevention, especially among the Latino population, and thus, SFP 10-14 was adapted to include a special focus on HIV/AIDS. However, neither the SFP 10-14 nor the adapted Familias Unidas program has deep structural and culturally contextual adaptations that address the concerns of immigrant families aforementioned. The program does not address acculturation, migration stress/trauma, family separations, or issues of discrimination.

In the Familias Unidas program, parents learn new parenting strategies and youth develop skills such as problem-solving and decision-making. Families work together to improve communication and advance their understanding of the issues confronting youth such as drugs, HIV, and other STIs. The goals outlined by Familias Unidas for adolescents are to (1) increase protective factors among Latino/a adolescents ages 12-16; (2) delay onset, prevent, or decrease substance use and early initiation of sexual activity; (3) increase knowledge and awareness of HIV/AIDS; (4) increase skills to negotiate safe sex practices, including the use of condoms; and (5) increase decision-making and social skills. Goals for the parents include (1) to increase parent knowledge of adolescent development; (2) to increase knowledge about age-appropriate discipline techniques; and (3) to increase knowledge and awareness of HIV/AIDS. Goals for the family include (1) to increase parent/child communication and (2) to strengthen parent/child bonds. The expected outcomes of the program are that all or most of the stated goals will be met as measured by a survey which is administered to adults and youth separately before and after the program.

Given that the program did not address specific cultural issues, there was a question about whether the program would be as beneficial to Latino families, especially recent immigrant families. The researcher wondered, first, if the program would benefit Latino families overall; the researcher also hypothesized that families with lower acculturation levels would benefit less from this curriculum than families with higher acculturation levels because the program would be missing key components. Therefore, the focus of this study is on testing the hypothesis that differences in family functioning would be greater for highly acculturated families than lower acculturated family after participation in Familias Unidas.

Hypotheses and Research Questions

H1: There are significant mean differences from pretest to posttest in family functioning for families after participation in Familias Unidas.

RQ1: Will participation in the program increase parenting skills as measured by the “general child management” scale from pretest to posttest?

RQ2: Will participation in the program improve parent-child relationships as measured by the “parent-child affective quality” scale from pretest to posttest?

RQ3: Will participation in the program increase protective factors as measured by “sexual limits” and “self-efficacy to refuse sexual activity” subscales from pretest to posttest?

H2: Participation in Familias Unidas will increase protective factors for youth of different acculturation levels from pretest to posttest.

RQ1: Are there significant mean differences in protective factors (as measured by combination of “self-efficacy to refuse sexual activities” and “sexual limits”) for youth of different acculturation levels from pretest to posttest?

H3: Parenting skills will increase from pretest to posttest for parents of different acculturation levels who participate in Familias Unidas.

RQ1: Are there significant mean differences in parenting skills (as measured by the combination of “general child management” and “intervention-targeted parenting behavior”) for parents of different acculturation levels from pretest to posttest?

H4: Participation in the program will improve parent-child relationships for families of different acculturation levels from pretest to posttest.

RQ1: Are there significant mean differences in the relationship between parent and child (as measured by the combination of “parent-child affective quality” and “parent-child report of aggressive and hostile behaviors in interaction”) for families of different acculturation levels from pretest to posttest?

Methods

Participants

Participants included 372 individuals (youth = 197, parents = 175) (see Tables 3 and 4). Parents' ages ranged from 17 to 62 with the majority (75%) of parents between 31 and 45 years of age. The majority of the parents who participated were female (80%) and reported being the target child's mother (75%). Most of the parents were married (55%) and Latino (82%) of Mexican descent (78%). Just over half of them did not graduate from high school (52%) and were low income, earning \$24K or less a year

Table 3
Characteristics of Parents

Variable	N (175)	Valid %
Gender		
Male	35	20.5
Female	136	79.5
Age		
30 or younger	20	11.8
31-40	93	54.7
41 or older	57	33.6
Latino/a or Hispanic		
Yes	84	81.6
No	19	18.4
Ethnicity		
Mexican	83	78.3
Other	23	21.6
Marital Status		
Single, never married	22	13.5
Married	90	55.2
Divorced	32	19.6
Other	19	11.7
Highest Education Level		
Elementary or less	21	12.5
Graduated Junior High school	42	25
Attended High school	24	14.3
Graduated High school	46	27.4
Attended university	26	15.5
Graduated university	9	5.4
Family Income (annual)		
\$50K or more	14	8.6
\$25K-\$49K	49	30.1
\$24K or less	100	61.3
Hours per week in paid employment		
Do not work	59	34.5
1-20	14	8.2
21-40	48	28.1
40 or more	50	29.2
Relation to Target Child		
Mother	112	75.2
Father	22	14.8
Other (relative/guardian)	15	10
# of children (<18) in the home		
2 or less	68	39.8
3 – 4	83	48.5
5 or more	20	11.7

Table 4
Characteristics of Youth

Variable	N (197)	Valid %
Gender		
Male	127	64.8
Female	69	35.2
Age		
12 or younger	59	30.3
13 – 14	90	46.1
15 or older	46	23.6
Grade in school		
6 th or 7 th grade	54	28
8 th or 9 th grade	95	49.2
10 th – 12 th grade	44	22.7
Hispanic/Latino identity		
Yes	179	91.8
No	16	8.2
Ethnicity		
Mexican	103	56.3
Central or South American	56	28.6
Other	47	13.6
# of siblings		
None	4	2.1
One or Two	59	30.9
Three or Four	78	40.8
Five or more	50	26.2
Acculturation Level		
High	94	49
Low	98	51

(61%) while working 21 or more hours a week (57%). Thirty-five percent of parents reported being unemployed. Most parents reported having three or more children living in the home (60%) and no more than two adults (65%).

The gender makeup of the youth was 65% males and 35% females. They ranged in age from 10 – 18, with about half of them 14 and older (48%). Thus, half of the youth were in middle school (6th – 8th grade) and the other half in high school. The vast majority of the youth identified themselves as Latino/Hispanic (92%) and, in sync with the parents, were mostly of Mexican heritage (56%). In terms of acculturation, the

sample was equally divided among low acculturation (51%) and high acculturation (49%).

Assessment Procedures

Before assessment, all parents provided written consent and all youth provided written assent to participate in the study. Study instruments were self-administered questionnaires. They were completed by adults and youth prior to commencement of the program at an orientation session and again 6 weeks later on the last day of the program. Only those who completed both the pretest and posttest were included in the subsequent analysis (youth = 197, adults = 175).

University of Utah Institutional Review Board approval was obtained for the time period that the program was active and data were collected. For the purposes of this study, a new exempt status application was submitted and approved by the IRB for secondary data analyses.

Instruments

The survey instruments were developed to comprehensively measure all of the dependent variables as well as collect demographic information (see Table 5). Subscale items were taken from other instruments that have been documented to have well-established psychometric properties. When using Cronbach Alfa to test for reliability within the current sample, 5 of the 6 subscales used in this analysis were above the desired level of 0.7 (see Table 5). The parent report of the “general child management” scale was below the desired level and therefore an interitem correlation was run and found to have an adequate value of reliability (0.2). When using small scales (10 items or

Table 5
Survey Instrument Subscales

Scale	Source	# of items	Sample item	Response Format	α
General child management	Iowa Youth & Families Project (Conger, 1989)	10	In the course of a day, how often do you know where [your] child is?	5-point (1=always, to 5=never)	.58
Intervention-targeted parenting behavior	Preparing for the Drug (Free) Years (Spoth et al., 1995)	13	I often tell my child how I feel when (s)he misbehaves	5-point (1=strongly agree to 5=strongly disagree)	.85
Parent-adolescent aggressive & hostile behaviors in interaction	Iowa Youth & Families Project (Conger, 1989)	5	During the past month, when you and your child have spent time talking or doing things together, how often did this child get angry at you?	7-point (1=always to 7=never)	.86
Parent-child affective quality	Iowa Youth & Families Project (Conger, 1989)	6	During the past month, when you and your child have spent time talking or doing things together, how often did you get angry at him/her?	7-point (1=always to 7=never)	.73
Self-efficacy to refuse sexual activity	Student Health Questionnaire (UCSF: CAPS)	9	Imagine you are alone with someone you like very much. Could you stop them if they wanted to kiss you on the lips?	4-point (1=definitely could to 4=definitely could not)	.90
Sexual limits	Student Health Questionnaire (UCSF: CAPS)	4	Imagine you are alone with someone you like very much. Would you let them kiss you on the lips?	4-point (1=definitely not to 4=definitely yes)	.90

less), it has been recommended to run interitem correlation instead, where any value above .20 is considered adequate (Pallant, 2005).

Parent Survey

The parent survey included items reflecting individual characteristics as well as items regarding the target child. The subscales related to this study included (a) general child management, (b) parent-child communication, (c) parent-child affective quality, and (d) parent-adolescent aggressive and hostile behaviors in interaction.

General child management items were taken from the Iowa Youth & Families Project (Spoth et al., 1995). These items are concerned with rewarding positive child behavior, child monitoring, and effective discipline. The scale includes 10 questions such as, “In the course of a day, how often do you know where your child is?” Responses are made on a 5-point Likert-type scale ranging from always (1) to never (5). Scores are obtained by summing responses to all items. Items were scored such that lower scores are indicative of better parental monitoring and discipline practices. The selection of the items used for inclusion in the survey was guided by considering behaviors to which the intervention-specific behaviors would likely generalize. Reliability alpha levels were reported at .80 for mothers, .83 for fathers, and .89 for parents (average of mothers and fathers) on initial wave testing (Conger, 1989).

Parent-child communication items were adapted from an instrument used in a youth-oriented prevention program called “Preparing for the Drug (Free) Years” (Spoth et al., 1995). It consists of 13 questions that ask how the parent interacts with his or her child, for example: “I have discussed our family values with my child on several occasions.” Responses are made on a 5-point Likert-type scale ranging from always (1) to never (5). Scores are obtained by summing responses to all items. Lower scores in this case are indicative of better communication. Reliability for this scale has been reported at .86 for mothers, .85 for fathers, and .87 for parents (Spoth et al., 1995).

To measure quality of parent-child affect, two subscales were used to ask parents questions such as, “During the past month, how often did this child get angry at you?” or “How often did you let this child know you really care about him/her?” These 11 items were taken from the Iowa Youth & Families Project (Spoth et al., 1998). Responses are

made on a 7-point Likert-type scale ranging from always (1) to never (7). Scores were obtained by summing responses to all items. Items were coded such that lower scores indicated greater affect and less aggression/hostility. Reliability alpha levels were reported at .83 for mothers, .82 for fathers, and .85 for parents (average of mothers and fathers) on initial wave testing (Conger, 1989).

Youth Survey

The youth survey instrument included self-report items about self behaviors and parent-report behaviors. Subscales relevant to this study included (a) self-efficacy to refuse sexual activity and (b) sexual limits.

Self-efficacy to refuse sexual activity and sexual limits subscales were taken from the Student Health Questionnaire. This measure was pretested on seventh and eighth graders. Reliability was reported as .89 for self-efficacy to refuse sexual activity and .82 for sexual limits. The questions measure attitudes using a 4- or 5-point Likert response format (Marin, Coyle, Gomez, Carvajal, & Kirby, 2000).

To assess acculturation level, youth were asked two questions on the predominant language spoken at home and with friends and a third question regarding how long they have lived in the U.S. Responses to language questions were assigned a corresponding numerical value: (1) only English, (2) mostly English, (3) about half English and half my other language, (4) mostly my other language, (5) only my other language. The number of years they have lived in the U.S. were assigned the following values: all my life (1), more than 6 years (2), 4 to 6 years (3), 1 to 3 years (4), and less than 1 year (5). Answers to these three questions were summed and values of 7 or greater were coded as “low acculturation” and values of 6 or less were coded as “high acculturation.”

Program Process and Implementation

Familias Unidas operates as a 12-session program (each session is 2 hours). The first meeting, not counted as part of the 12-week instructional sessions, occurs 1 week prior to the beginning of the actual programming. Families attend an orientation session in which they receive an overview of the program, fill out forms, and are administered the survey instrument that measures the stated goals of the program. There are separate instruments for adults and youth. Individuals can choose to take the survey in either English or Spanish. The survey instrument was developed by the adaptation committee previously described. Families meet twice a week for 6 weeks in the evening at a local community center. Dinner is provided. After families share a meal together, the adolescents meet in a separate concurrent session for the first hour to participate in program activities especially designed for them. In the second hour, parents and adolescents are reunited and participate in an interaction group focused on the session's topic, exchange ideas, and practice skills. Small groups are utilized to help participants work on improving the specific skills.

Programs were offered separately in English and in Spanish. Successful completion of the program was defined as those who received at least 75% of the program curriculum. Reminder phone calls were made to participants and when participants missed a session, program staff called to follow up. Childcare was provided for younger children.

Participant Profile and Recruitment Efforts

The target population of Familias Unidas was those families with adolescents who had been identified as high risk. Program staff worked primarily with middle school

counselors for appropriate referrals. Referrals were based on adolescents' risk of poor academic performance, delinquent behavior, and/or family problems. However, the program was advertised widely so that families could self-select into the program. Recruitment and publicity efforts included radio and television interviews; fliers in grocery stores; laundromats, and other local gathering spots; and ads in Spanish newspapers and church bulletins. Exclusion criteria included families who had members with serious mental health problems or addictions which required treatment.

Variables

A categorical variable of acculturation served as the independent variable in all statistical analyses. A family's acculturation level was categorized as low or high as previously described based on questions about languages spoken in and out of the home and length of time in the U.S.

Dependent variables included posttest scores on several subscales. For parental assessment, (a) general child management and (b) intervention-targeted parenting behavior scales were used to assess parenting skills. For adolescent assessment, (a) sexual risk behavior and (b) refusal efficacy and sexual limits scales were used to measure protective factors. For family assessment, (a) parent-child affective quality and (b) parent-adolescent aggressive and hostile behaviors in interaction scales were used to assess the relationship between parent and child. Covariates were the pretest scores of all the scales previously mentioned.

Results

Preliminary Analysis

For data analysis purposes, scores for all intervention groups were aggregated. Total summary scores were calculated for each subscale and used in subsequent analysis after reverse coding for pertinent individual items. Baseline comparisons were made to assess differences between those who dropped out and those who completed the program on demographic variables as well as each of the outcome variables. The analyses did not detect any statistically significant differences between those who completed the posttest and those who dropped out.

Univariate preliminary analyses were run to assess data for missing items, outliers, normality, homogeneity of variance-covariance, and homogeneity of regression slopes. No major violations were found. Preliminary MANCOVAs were conducted to test the assumptions of homogeneity of variance-covariance and homogeneity of slopes. The resulting nonsignificant findings of the Box's Test allowed the utilization of the Wilks' Lambda test statistic in interpreting results and the subsequent full MANCOVA analyses.

Prior to all statistical tests, variables were transformed to eliminate outliers and missing data. The number of outlying cases was small among all groups. Variables with extreme outliers were transformed such that the outliers were replaced with the maximum/minimum value that fell within the accepted distribution for that variable. The range of missing cases for all groups was also small, typically falling between 5% and 15%; thus, missing values were replaced with the series mean (mean score of all available cases for that variable).

Main Findings

Paired sample *t*-tests on pretest and posttest data revealed favorable results. Both parents and youth had significantly improved from pretest to posttest on the target variables (see Table 6). Findings revealed that Familias Unidas had a positive effect on parent-child interaction, $t(134) = 2.94: p < .01$ and less conflict, $t(88) = -2.15: p < .05$. Parents reported an increase in parenting skills, $t(131) = 2.83: p < .01$. For youth who participated in the program, there was improvement reported in regards to problem behaviors. Youth reported decreased engagement in sexual risk behaviors and an increase in their ability to refuse sexual activity, $t(176) = 1.99: p < .05$. Youth also had a significant decrease in aggressive and hostile behaviors, $t(155) = 2.07: p < .05$.

Pretest to posttest group differences were examined using three separate one-way MANCOVAs. One focused on differences in youth outcomes, another on differences in parent outcomes, and the last on differences in the relationship between youth and parent from pretest to posttest.

Table 6
Paired-Samples Differences From Pretest to Posttest

Item	n	Pretest		Posttest		t	Sig	ES
		M	SD	M	SD			
General child management	132	23.83	4.99	22.47	4.72	2.83	.005**	.28
Intervention targeted parenting behavior	135	27.76	7.73	25.41	7.66	2.94	.004**	.31
Aggression/hostility/conflict	89	11.36	2.03	11.88	1.54	-2.15	.034*	.29
Sexual risk behavior	177	7.89	3.97	7.43	3.74	1.992	.048*	.12
Aggression/destructive behavior	156	6.89	15.58	4.39	6.89	2.07	.040*	.21

* $p < .05$ ** $p < .01$

Parenting Skills

Multivariate analysis of covariance (MANCOVA) was conducted to determine the effect of acculturation on parenting skills as measured by two subscales while controlling for pretest scores of these scales. The independent variable was acculturation level (low or high), and the dependent variables were scores on different parenting scales administered after the intervention was completed. Participants' scores on the pre-intervention administration of these scales served as the covariates in the analysis. After adjusting for pre-intervention scores, results revealed no significant differences among acculturation levels on the combined dependent variable, Wilks Lambda = .995, $F(2, 156) = .391, p = .68$

Adolescent Protective Factors

Multivariate analysis of covariance (MANCOVA) was conducted to determine the effect of acculturation on protective factors for youth as measured by two subscales while controlling for pretest scores of these scales. Results revealed no significant differences among acculturation levels on the combined dependent variable, Wilks Lambda = .996, $F(2, 187) = .337, p = .71$

Family Bonding

Multivariate analysis of covariance (MANCOVA) was conducted to determine the effect of acculturation on the relationship between parent and child as measured by two subscales of parent-child affect while controlling for pretest scores of these scales. Results revealed no significant differences among acculturation levels on the combined dependent variable, Wilks' Lambda=.996, $F(2, 156) = .317 p=.73$

Discussion

The impetus for this study was the need for intervention programs to be culturally relevant. The literature suggests that adequate intervention models for Latino populations need to address issues such as immigration, migration stress/trauma, orientation to host culture, acculturation, and discrimination (e.g., Cervantes, Mayers, Kail, & Watts, 1993; Chapman & Perriera, 2005; Turner, 2000). Familias Unidas, while adhering to cultural sensitivity, did not include deep structural and culturally contextual adaptations that have been identified as essential in the literature (e.g., Resnicow et al. as cited in Maldonado-Medina et al., 2006; Wiley & Ebata, 2004). Thus, the question arose as to whether differences would be found for families of different acculturation levels. The findings from this study did not substantiate the hypothesis that acculturation would affect differences in family functioning after participation in Familias Unidas.

There is controversy in the literature about whether curriculum-based programming is sensitive enough for use with diverse families (e.g., Elliot & Mihalic, 2004; Gottfredson et al., 2006; Turner, 2000). Thus, research such as the current study is needed to determine whether these programs are effective with diverse families despite the inherent “one size fits all” philosophy of this approach. The present study focuses on a culturally adapted family intervention program that had previously shown favorable results on family functioning among its Latino sample. Those past findings, coupled with the current ones, suggest that Familias Unidas can have favorable influences on all Latino families residing in Utah regardless of their acculturation level.

One possible explanation for the uniformity of results may be that family issues among Latinos are consistent across acculturation levels. In other words, those issues

addressed in the program such as parent-child interactions, discipline, communication, and youth behaviors may have similar etiologies and dynamics that cut across acculturation lines. Another possibility is that the foci of the curriculum have universal application to all families regardless of culture. The focus of improving relationships and communication is widely applicable and desirable. Also, families coming together in shared experiences can be supportive and beneficial. The relationships and dynamics provided by the program may be enough to impact problem areas in most families regardless of their individual and unique circumstances.

Many of the goals set forth by Familias Unidas have universal applicability: (1) to increase parent knowledge of adolescent development; (2) to increase knowledge about age-appropriate discipline techniques; (3) to increase parent/child communication; and (4) to strengthen parent/child bonds. Through participation in the program, families are provided structure and guidance so that parents are given the opportunity to learn new parenting strategies and youth to develop problem-solving and decision-making skills. The relationship between facilitator and family provides formal support and gives the family structured time to address their own struggles. Relational factors are influential both within families and with proximal individuals. Outcome research shows that relational factors are strong predictors in outcome testing.

Indeed, there is a side of the discussion in the research literature that questions whether cultural adaptations are necessary (e.g., Elliot & Mihalic, 2004; Kazdin, 1993) or to what degree cultural adaptations need to be made (e.g., Holleran Steiker et al., 2008; Kazdin, 1993; Kumpfer et al., 2002; Marsiglia & Waller, 2002). Findings from this study suggest that specific elements of acculturation and immigration experience need not be

emphasized to effect an increase in some of the more universal family functioning outcomes. This is not to suggest that these elements are not important or should be ignored in continued program development. Rather, when working with high-risk families, these issues of immigration and acculturation take a secondary role to the more immediate needs of basic parenting skills and family interaction issues.

However, there are a number of limitations to this study. Neither the previous findings nor the current ones allow for deduction of program effectiveness due to the limitations of the research model. The findings only detect changes in scores from pretest to posttest; without a control/comparison group or random selection, effectiveness cannot be assessed. Due to this and the fact that the adaptation was specific to the local community, findings cannot be generalized to a broader Latino population. Utah is unique in many ways, which could affect the context in which these families live. Another important limitation of the current study relates to how acculturation was measured. No standardized measure was utilized and the acculturation questions were limited to language and number of years in the U.S.

Outcome measures for this study included scales that had been empirically tested for reliability, which is seen as favorable in the research literature on outcome testing. However, when one considers that the vast majority of these instruments were developed by and tested on Caucasian populations, their applicability to ethnic groups needs to be considered. Family functioning constructs are being measured, but against what standard?

This study was strictly quantitative, yielding nonsignificant results that may cause some to question its scientific value. However, the findings are informative and, beyond

scientific applicability, they also have practical implications. The findings are culturally significant, in that such programs can have an important impact on this population.

Future research on program outcomes should include comparisons between acculturation levels of Latino families to continue assessing the need for the development of culturally relevant programs. Future studies should look into questions of what specifically mattered most to families that participated in the program. There should be a focus on those areas where the most improvement is detected and whether there are family characteristics other than acculturation influencing outcomes. Qualitative studies could also add richness to this ongoing conversation about program effectiveness and whether family intervention programs need to address specific cultural issues as those previously mentioned.

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CHAPTER 4

SERVING LATINO FAMILIES THROUGH CURRICULUM-BASED PROGRAMS: INPUT FROM SERVICE PROVIDERS

Abstract

The lack of representation that Latinos continue to have in both research and practice leads social scientists to investigate the causes. In regard to curriculum-based intervention programs, there has been a movement towards cultural adaptations in an effort to attract Latino audiences. This qualitative investigation explores service providers' experiences in facilitation of culturally adapted programs with Latino families and their perceptions about the cultural relevance and recommendations to consider. Individual interviews and focus groups were conducted ($N=20$) with direct service providers with experience in working with Latino families and implementing curriculum-based programs. Results revealed that even with programs that claimed to be culturally relevant, they found that they had to make cultural and other adjustments. Relevance of the program to the Latino families they worked with was continually questioned. Their recommendations included a need to educate parents, build in follow-up sessions, focus on various forms of communication, and add time for discussion and process. The findings have direct application to research and practice and help address the disconnect that often exists between the two.

Introduction

Latinos have become the largest ethnic minority population in the United States yet they are continually underrepresented both in research and in practice (i.e., service delivery) (Turner, 2000). Research on health disparities has found that Latino immigrant families underutilize evidence-based parenting interventions (Flores, Olson, & Tomany-Korman, 2005). Their lack of participation and involvement in both the development and implementation of intervention program leads Latinos to be systematically marginalized from research and program design (Alderete, Vega, Kolody, & Aguilar-Gaxiola, 1999). One reason for not seeking services may be related to real or perceived threat of discrimination from the system or individual service providers (Berk & Schur, 2001). Another reason is that Latinos may not find programs and services accessible due to language or cultural barriers. And even when they are accessible, they may not always be applicable due to a lack of cultural sensitivity inherent in many evidence-based programs (Kumpfer, Pinyuchon, Teixeira de Melo, & Whiteside, 2008).

The most obvious problem with family intervention programs used with any ethnic population is that the vast majority were developed by and for Caucasian middle class Americans. The theory and methodology do not necessarily apply then to ethnic minority populations. What many of these programs have done in an effort to become culturally relevant is to have their materials translated and/or to have a representative from that group conduct the program. While this is helpful, it is still fundamentally problematic. Therefore, there is a need for programs to be developed by those familiar with and sensitive enough to the needs of the particular population they are intending to serve. Wiley and Ebata (2004) define intervention curricula as different models. First is

the dominant culture curricula written from the perspective of and intended for the majority population. A second model is described as the ethnic additive curricula, which adds distinct units such as activities and examples geared toward a particular ethnic minority group but still utilizes the dominant culture curricula as its basis. Finally, there is the multiethnic curricula that is specifically designed by and for a specific ethnic group and is firmly based in that group's own cultural context.

Another problem is that in an effort to be culturally sensitive, practitioners will deviate from the curriculum in ways that perhaps were not intended by those who developed the program, compromising its integrity. Research that has tested effective family interventions has revealed that only 10% of practitioners implement evidence-based family strengthening programs and only 25% are implemented with fidelity (Kumpfer & Alvarado, 2003). There exists a large number and variety of family strengthening interventions for Latino families. The effectiveness of these programs varies due to their nature and scope. Some of these programs are evidence-based, but the majority are not, making it difficult to conclude effectiveness. Successful outcomes are also dependent on the competency of the person implementing the program.

“The Gold Standard is widespread adoption of model programs, implemented with fidelity” (Elliot & Mihalic, 2004, p.52). However, there is an ongoing debate in the literature between fidelity and fit. One side of the argument states that it is essential for programs to remain true to their original design (e.g., Elliot & Mihalic, 2004; Gottfredson et al., 2006; Martinez & Eddy, 2005) while others state that programs need to be adapted to fit the needs of the audience because relevance is what predicts success (e.g., Castro, Barrera, & Martinez, 2004; Holleran Steiker et al., 2008; Maldonado-Molina, Reyes, &

Espinoza-Hernandez, 2006; Turner, 2000). National organizations list model programs that have been rigorously reviewed and deemed science-based, effective programs but over half of them have had to be adapted in some way (Castro et al., 2004). However, there is not much in the way of evidence as it relates to culturally adapted versions of “proven” family intervention programs (Martinez & Eddy, 2005). The ideal would be to design an empirically tested effective intervention that is also culturally relevant (Castro et al., 2004). There is a definite need for more outcome research with Latinos. However, Ortiz and Aranda (2009) pose the question about whether linear methods of research design fit the research questions relevant to Latino social needs.

The evidence-based movement in the social services is undeniably gaining popularity, yet outcome studies for Latinos are still lacking. The problem then becomes that outcome studies to determine effective programs are based on studies done with the majority populations. Adapting that “model” program or using it with ethnic minority populations can become problematic. There are those who have questioned the usefulness of evidence-based practice with marginalized populations because practitioners do not always have the freedom to choose alternatives if the practice is not helpful. Due to the focus on evidence, many programs may be prevented from reaching a wider audience. There are countless family interventions that are not empirically evaluated in the research literature (Spath & Redmond, 2000). This phenomenon speaks to the disconnect that exists between research and practice. Often, practitioners choose not to utilize evidence-based programs despite the high reputation they may have in the literature (Kumpfer, Alvarado, & Whiteside, 2003). Usually this is due to the irrelevance they hold for ethnic populations or because practitioners resist treating unique clients

with a one-size-fits-all model. There is a need to translate research into practice and vice versa (Polizzi Fox, Gottredson, Kumpfer, & Beatty, 2004).

This study addresses the disconnect between research and practice by collecting information from direct service providers whose wealth of experience and expertise can provide useful information to social scientists and practitioners. The purpose of this study was to explore service providers' perceptions about the relevance of existing curriculum-based family interventions with Latino families. A secondary goal was to learn which components they considered important to include in designing a culturally relevant family intervention program. The research question driving the study is: Among practitioners who work directly with Latino families, what is their experience working with and recommendations for culturally relevant, curriculum-based family intervention programs?

Methods

Participants and Sampling

Inclusion criteria for participants were Utah service providers who (1) have worked at least 1 year in direct practice with Latino families and (2) have conducted at least one series of curriculum-based family intervention with them. Participants were not excluded on the basis of their discipline, educational degree, position within their agency/organization, age, sex, or ethnicity.

Sampling was purposive, utilizing a snowball sampling technique. Initial contacts for participants were made in collaboration with the College of Social Work's field education office. The director of field education within the College of Social Work has an extensive working knowledge of the practitioners in local communities and made

appropriate initial referrals. Other initial contacts were made by contacting program directors of existing family intervention programs actively operating in the local area. As these individuals were approached regarding participation, they were asked to identify other potential participants. All eligible participants were invited to participate in individual interviews as well as focus groups. They were allowed to participate in the interview, the focus group, or both.

Design

Qualitative interviews and focus groups were conducted with service providers. Interviews continued until saturation was reached. The number of focus groups was based on the number of available participants. Structured open-ended interviews were employed in order to minimize interviewer effects and bias (Rubin & Babbie, 2005). Questions were written out in advance detailing exactly how the question would be read and which ones would be allowed for probing or follow-up inquiry. The same questions were used in all interviews and read in the same sequence. Interviews were audio taped and transcribed. A field journal was kept with entries made after every interview to include both empirical observations and subjective interpretations.

The rationale for including focus groups is that they are a good way to elicit multiple perspectives, involve more people, and create an environment where a free flow of ideas and discussion can stimulate and build on individual input. Focus groups have been identified as a valuable method for exploring issues and outcomes of professionals involved in intervention work (Brotherson, 1994). The focus groups also served as a triangulation method via member check as a few of those who were individually interviewed also chose to participate in the focus groups. An assistant moderator was

recruited to serve as a second observer and recorder. The sessions were audio taped and notes were taken during and immediately following each session to include objective observations and subjective interpretations. Approval for this study was granted by the University of Utah Institutional Review Board.

Interviews and focus groups began with an introduction of the researcher and a general description of the study and the interview or group process. Participants were reassured about the confidentiality of their responses, i.e., study results would not include their names, the names of the programs they spoke about, or the name of the organization/agency with which they were affiliated. The focus group and interview guide had 10 questions. The questions centered on their experiences in delivering curriculum-based programming to Latino families and recommendations for improvements.

The research was carried out by the first author, who is a female Mexican native and first generation immigrant. She is a current doctoral student and recent Utah resident. She has not been a direct service provider in Utah and therefore did not have professional or personal ties to those within the sampling frame. The assistant moderators were student peers selected based on their lack of relationship to participants so as not to introduce bias. They aided in focus groups by taking notes, making observations, and helping with the audio recording but did not aid in facilitation.

Interview and focus group transcripts were thoroughly read and analyzed utilizing coding and categorizing techniques and concept mapping. Common and recurrent themes were identified and categorized. Concept mapping was used to display and discern relevant concepts via graphical format. To ensure credibility, member checking

criteria were used. Initial thematic analysis of the data was sent via email to respondents to get their feedback on the accuracy of results as presented. Member checking, according to Lincoln and Guba (1985), is crucial to establish the credibility of a study. Multiple data collection methods (in-depth interviews, focus groups, and a journal) were utilized to deepen understanding.

Results

A total of 20 unduplicated service providers participated in this study and will be referred to here as “respondents.” All respondents provided written consent to participate in the study and completed the entire interview and/or focus group. All respondents will be referred to in this study by their corresponding pseudonyms. Ten individual interviews and two focus groups were conducted. Three respondents chose both the interview and focus group option. Respondents were asked about their ethnic identity, and, to protect their confidentiality, their exact identification is not presented. Rather, only two labels were created: Latino or Other. If the study respondent self-identified as Latino/a, Chicano/a, Hispanic, Mexican or Mexican-American, Spanish, Columbian, or South American, they were given the label of “Latino”; any other ethnic identification was labeled as “Other.” Table 7 lists key characteristics of the individual interview respondents. Seven of the 10 interviewees were Latino. Most have over 10 years of experience working with the Latino population and have implemented a dozen or more series of curriculum-based family intervention programs. Eight of the 14 focus group

Table 7
Individual Interviews: Respondent Information

Respondent	Ethnicity	Estimate no. of years working with Latinos in U.S.	Estimate no. of programs taught
Alex	Latino	8	20
Blanca	Latino	22	15
Camila	Latino	20	25
Charlie	Other	15	5
Heather	Other	4	12
Luna	Latino	1	1
Molly	Latino	15	30
Rita	Latino	17	20
Tito	Latino	12	5
Tristan	Other	10	20

respondents were Latino. One focus group had 6 participants and the other had 8. Each focus group lasted approximately 55 minutes.

There were three main curriculum-based family intervention programs represented among respondents. The names of the programs will not be stated in an effort to maintain respondent confidentiality. Two of the curricula represented in the findings are nationally renowned and well-known programs and the third is locally developed but also widely used in the local area. The focus groups were curriculum-specific, meaning that all respondents had facilitated the same curriculum and answered the questions specifically for that one curriculum. Every effort was made to conduct one focus group for each of the three main curricula represented here; however, with one of the programs, there were not enough available program facilitators to warrant a focus group.

The interviews and focus groups followed a structured question guide and therefore, responses naturally grouped together under three major inquiries. In analyzing the data, responses were first grouped into three main categories and then themes were extracted under each. The categories include (1) Modifications: respondents addressed

the modifications they had to make to the curriculum; (2) Relevance: respondents discussed at length how relevant or not the curriculum was to the Latino families with whom they work; (3) Recommendations: respondents stated their recommendations to improve curriculum-based programs. The themes that emerged under each of these categories are presented here.

Modifications

Language

When asked about what modifications they had to make in delivery of the program, an overwhelming majority of respondents made reference to language-related modifications. In one of the focus groups, there was unanimous agreement that the Spanish translation of the material was of such poor quality that Blanca and Camila wondered if it had been translated by a non-Spanish speaker or even a computer program. All the curricula had material translated into Spanish but most of the respondents still felt it necessary to translate further or translate it differently. Alex pointed out that since the literal translations of text and videos do not make sense and are not effective, she is consistently having to translate the translated material. When talking about the usefulness of the video clips that are integral to one of the program she facilitates, Camila noted that “it loses so much in the translation.” Tito had similar sentiments:

The way the language was written, and the videos, and even though some of it was translated, I guess, culturally [it] was not totally sensitive, or did not cross over as well, and so we had to modify or, at least, in the moment, try to clarify things in a way that would make sense to the families.

Language was one of the main reasons the majority of respondents found themselves omitting the video segments, limiting them, or role-playing the meaning of the video

themselves. Another reason that the use of videos was omitted or altered was due to the fact that the videos were outdated or played out scenarios that did not reflect the lives of the families in attendance.

Time

The other way that almost all of the respondents modified the curriculum was in relation to time. Many of them felt that the time allotted for each session was not enough, some of them felt that the number of sessions was not sufficient, and others felt the proximity of each session was too far apart. Tito reported that in the curriculum she uses

You're supposed to have a stop watch... and it felt very rigid and that did not go over well with families nor with us because you did not feel like you were really getting into anything...they just feel like things are being thrown at them and you can't process.

Therefore, many modifications were reported by respondents in which they had to cut or modify curriculum content due to time constraints.

Rapport

Another modification that relates to reasons for time constraints is that respondents believed it essential to add in time for building trust and rapport with the families they worked with. A majority of respondents felt strongly about the importance of rapport building, which was not built into any of the curricula. Star, Camila, Lina, Pat, Rita, and Tito talked about the need to relate to participants on a personal level to increase the impact of the curriculum and improve retention of participants. Camila captured a common sentiment among respondents: "I do not teach things detached from people. Persons that are not just clients." Star and Lina both described how they take the

first few minutes of every session to ask everyone how their week was and how they are doing, as well as to share their own responses to these questions.

Another way that rapport was built was by serving dinner prior to session delivery. Providing dinner for families not only fosters family bonding, but also gives facilitators an opportunity to make connections. Heather described her experience:

In the beginning, we really did not get involved with [dinner]. We let them do their own thing but...we found that it was definitely more effective for them to trust us to sit down with them and join them in their family meals and even if we were only there for a minute you could see the difference in them when they came the next time and greeted us the next time. It was just like we were old friends.

Similarly, a majority of respondents reported adding a potluck and celebration at the end of the program, which were well received and enjoyed by all.

Relevance

Cultural Relevancy of Curriculum

Even though all of the curricula in question claim to be culturally adapted to Latino audiences, respondents overwhelmingly disagreed. Many respondents brought up concerns that much of what was in the curriculum was not culturally relevant to the families with whom they were working. Molly stated, in talking about the curriculum she worked with, “[It] is a good program. I just do not think it fits the Latino community.” The scenarios or activities often had to be modified so that the families would be better able to relate to them. Camila added:

These curriculums that we’re using, we’re adapting them because they were originally targeted for a “gringo” [slang for Caucasian] audience so obviously you can take the same topic for the lesson, but certain things you kind of have to work this area a little bit more. I will introduce some idea that touches close to home because of the culture.

Charlie had much to say on the cultural relevancy of the curriculum that he implemented. He taught the curriculum to both Latino and non-Latino groups and noted that with his Caucasian families the session “flowed as the curriculum was designed to flow with whoever they tested it on or developed it with.” However, this was not the case with his Latino families. He felt that many of the concepts put forth by the curriculum were not relevant to the Latino families. For example, the curriculum introduces the concept of letting consequences lie with the child. If a child is refusing to wear a coat to school, then the parent should allow him/her that choice and if he/she feels cold, then a valuable lesson will have been learned that there are consequences to the choices we make. In reference to this concept, Charlie said:

The English, primarily White, were able to grasp the concept. And even though it was kind of shifting their paradigm, I think they could really grasp “all right, yeah, I am going to let my kid suffer the consequences.” As opposed to...the Latino population...to tell them not to clothe their child to go to school was a major thing, not just a paradigm sort of shift...but how [it] reflects on their ability to care as parents and culturally ...how they would be viewed as parents and not taking care of their kids and how that would reflect on them was a big thing. [T]here was really some blank stares...that concept was one that almost did not register as being an option.

Despite these concerns, respondents also noted the parts of the curriculum that were relevant. The majority agreed that the overall topics of each session were relevant and could be applied to their families. The cultural incongruence was called into question more in the presentation or the delivery of the topics. For instance, Blanca voiced her challenge:

Teaching communication skills...that is a hard one because maybe you were raised differently and now somebody’s telling you that you want to have open communication where culturally that is not quite what it was.

Some respondents felt that all of the topics in their curriculum were relevant, especially to newly-arrived immigrant families whom they felt had never received instruction related to parenting. Many of the respondents felt that their Latino families learned many of the skills in the course of their participation in the program, particularly the sessions on communication and discipline.

Demographic Relevancy of Curriculum

Many respondents alluded to the fact that the curriculum they implemented did not always fit the families with whom they were working. This was particularly apparent in one of the focus groups, where many of the respondents often worked with families in which there are teen parents or teens who are actively engaged in high-risk behaviors.

Nina stated:

It just does not at all appeal to our teen population which is...low income, minority students who have struggles way above and beyond what is represented in this curriculum...our kids are, you know, they're actively engaged in sex...the manner they use to present the information seems completely irrelevant and I couldn't imagine a student in a situation where they're at a party and a friend or a parent or a cousin is offering them drugs that they would use one of these techniques in the book and say "no thanks, I think I hear my mother calling me" or whatever it says to do.

Tristan and Tito shared similar sentiments and noted how material for the youth sessions is just not relevant to the teens, who are facing, oftentimes, more serious issues than those addressed in the curriculum. Consequently, they have to alter scenarios to reflect issues such as pressures to join gangs or protection against sexually transmitted diseases.

Some of the essential components of the curricula are relevant, but many of the skills may not be realistically applied in many low-income families. For example, in regard to parenting skills, one curriculum emphasizes consistency of consequences, and

Tito commented on how some of the parents spend so little time in the home due to demanding work schedules and how children are often being cared for by many different relatives, making it impossible to have consistency in discipline techniques. The same is true for all the homework assignments, for example, the homework of holding regular family meetings because often both parents have alternating work schedules.

Respondents also noted that the curriculum often assumes an education level higher than that of the families with whom they work. Lina, Star, and Rita all referred to the fact that many of the parents in their programs do not know how to read or write and the curriculum is not sensitive to that, so the facilitator has to be. Charlie said that in his experience, many of the worksheets or supplemental material are not at an appropriate reading level.

In addition, many of the respondents' comments related to the fact that the curriculum they were using was geared toward traditional two-parent families. Tristan relayed her experiences with some families:

Some of the kids [say] like "well, I do not know who's my dad. So my dad does not care, I guess." With the family sometimes, a lot of times they say "well, my husband's not involved, so how do I expect someone else to come help me with this or even talk to my husband."

Tito had similar comments and added that in many of the families with whom she works, extended families play a significant role but the activities do not always allow for that inclusion.

Relevancy of Programs Irrespective of Curriculum

Many of the elements that made the curriculum relevant to Latino families had nothing to do with curriculum content. Respondents spoke to many positive, unintended

outcomes that were natural occurrences. Many of the intervention programs were inclusive of entire families, allowing them to share a meal together, which respondents said was an anomaly for the families with whom they worked. Pat observed:

They'll remember those moments of eating a meal with their kid. They may be busy during the week so that is a good time for them to bond and talk about what they've learned.

Another advantage of being able to accommodate entire families was that often, younger siblings of the "target child" were allowed to participate, as Tristan explained:

When we have...kids that are already [older] and they're referred by the court... a lot of time you know that they're kind of more [just] sitting there [because they] need their hours. It is interesting because I think it did not affect that teen as much but then the younger sibling that had ended up coming along, it does kind of put a good influence for them.

The program also gave parents and their children structured time together, which many respondents referred to as a luxury these families do not often have. Star noted what occurs in the second hour of the session:

They do activities in families all together so that is a good time for parents and kids to be together to communicate and to do something together because sometimes at home, they do not do anything so that is something; I think they enjoy it and they start to learn more about each other.

Respondents noted that many of the youth served by these programs have chaotic or unstable home lives, and thus the program offers them a safe space where they feel validated. Betsy believes that the youth appreciate having a place where "they feel like they can open to talk with you and it is not going anywhere." Kasey stated the following in reference to the youth:

I think it is a positive place for them to come that they're not judged; that there is not fighting or yelling or you know, I think it is just a safe place for them, you know, so I think it is good.

Another phenomenon noted by respondents was that when trust was built, their parent sessions became more than just a “class.” They began to see natural support groups forming. At the beginning of the program Tristan would often see that parents would be embarrassed by the kind of trouble or behaviors in which their children were engaging. However, by sharing their experiences, parents would begin to feel more confident that they were not alone and that it “might just be a period of time that the kids are facing, that is it.” The feedback Tristan often received from parents was that they enjoyed the social contacts made with others facing the same things they were. Blanca and Chris also noted that in their sessions, parents would often give each other ideas and tips of things that worked for them. Even after the program ended, respondents often saw that parents would be exchanging contact information. Heather shared that this is a benefit she does not see in other programs:

It is so nice that we can bring them together and once they’re done with us it is not over. They still have each other as a support group and that is nice to see that carries on, where with a lot of other programs you do not see that connection.

A final unintended outcome noted by many of the respondents was that Latino facilitators often served as role models to both parents and youth. Pat provided a good example:

They are really observant of how we as staff and volunteers are because one of the parents told me...“so my daughter was saying she wants to go to college and have a career and so I asked why and she says well I see your teacher...has a nice car. I want a car like his so I want that same career path.” So they observe what we’re doing without us really noticing, even the little ones.

Recommendations

Education

Respondents shared important elements they felt were missing from the curricula. One of the major themes here centered around an educational piece for parents. Tristan

and Tito felt it was important in the context of their program to add an informative session on how different systems in the U.S. work, in particular the school system, which is often quite different from how schools operate in the family's home country. Molly also felt that parents, especially newly arrived immigrant parents, needed to learn more about the risks their children face:

...gang issues and sex that is going on with the kids and the drugs that are going on with the kids nowadays, a lot of parents that are coming in aren't aware of what the kids are doing because the only communication in English that they're getting are what communication the kids are giving them. So making them more aware of what's out there and to be aware of what's going on more with their children.

Camila echoed this sentiment and suggested a further need for the parents would be computer literacy or at minimum an understanding of what is available via Internet access. As she put it, children "have the world at their fingertips," and the parents need to be acquainted with what that "world" is. Other respondents felt it necessary to inform program participants of other relevant resources, especially those families who were recent immigrants and were not yet aware of available resources.

Follow-up

Another major theme that emerged under recommendations is a need for follow-up after the program ends. For many respondents, termination always felt abrupt, especially when there was good rapport among the group. Rita suggested having a reunion or booster session 6 months after the program ends to see how the family is doing and if they are continuing to employ the skills and concepts learned in the program. Camila continually gets feedback from her families about wanting more sessions or more programs to the point where she is currently working on forming support groups based on

the expressed need. Charlie did that as well when he noticed that it was difficult to end the program:

We found it difficult to kind of shut down the program that we eventually evolve it or incorporate it back into more of a school-based or more of a program where we would pick other topics...where we would get parents and families back together, so it grew into something bigger and not necessarily curriculum-based per se...that they felt like part of a community of families which also seemed to work well.

Father Involvement

Another missing piece that most of the respondents addressed was the notable absence of fathers in these family intervention programs. Most program participants are mothers and many respondents alluded to the benefit of having both parents involved. They noted that on the rare occasions when fathers did participate, they had sporadic attendance or were not actively engaged. Many wondered if there was some way or something that could be added to the curriculum that would make it more attractive to fathers. Pat suggested adding mechanics, sports, or other things to which fathers might relate would help draw them in. Rita suggested that having father-son activities built into the curriculum might entice fathers or other father-figures to come to the sessions. Pat, Tristan, and Rita thought it might be as simple as asking fathers directly to participate since in many of the Latino families they work with, it seems to be a cultural custom to give mom the responsibility of the children. Tristan recounted one incident:

In the family case, it was interesting because for the first few sessions, only the mom came and I think it was one of the daughters that had asked the dad “well we’re doing this every Wednesday, do you want to come?” and the dad ended up coming.

Communication

When respondents were asked to share their opinion of the most important things for programs to have in serving Latino families, overwhelmingly the most common, immediate, and emphatic response was “communication.” Molly and Luna discussed the importance of stressing parent-child communication, as well as communication between parents and schools or other community agencies. Others talked about the importance of stressing communication within families, specifically on cultural issues such as personal values. For example, Nina said that she stresses discussions on values:

For the Latino students, we have a dialogue about the difference between American values and the values that their parents have. How...conflicts and how education fits into it so I think that helps them to have that discussion, really just to have validation on what they're feeling.

Several other respondents stressed the importance within families for parents to feel proud of their cultural heritage and communicate that to their children, especially if the child is disconnected from his or her native country. Other respondents emphasized the importance of communicating boundaries, especially in working with Latino families where sometimes the culture promotes loose boundaries among family members.

Unstructured Time (Process, Discussion, Questions)

The other major concern under this category was the importance of building into the curricula time to process things in session and more time for questions and/or discussion. Luna remarked:

We had time constraints so when an individual wanted to get into a little deeper discussion...we really couldn't get really in depth. I think it was nice for the other participants to hear what other people were going through or how they dealt or managed these skills that they learned...and I do not think there was that much time given for that.

Tito noted that time for discussion and questions not only benefited the parents but also provided feedback to the facilitator on what things were working or what might need to be addressed.

Discipline

Respondents made reference to the fact that, in their experience, the main reason families sought intervention programs was to learn alternatives to disciplining their children. Latino families in particular come from a culture where corporal punishment is the norm, and often parents do not know of alternatives. Lina and Rita commented that many times they have families newly arrived to the U.S. who are surprised that they are not legally allowed to physically discipline their child and feel at a loss for not knowing alternatives. Charlie was among many respondents who mentioned the importance of teaching practical skills on disciplining techniques in response to requests from the parents:

...them looking for actual strategies for discipline as opposed to them controlling their response and having the child kind of suffer the consequences, they were actually looking for straight-forward suggestions on “how do I discipline my child?”

Discussion

This study confirms previous findings related to family intervention with Latino populations, primarily the need for more culturally relevant family intervention programs. The results add to the literature by illustrating ways in which interventions can be adapted to effect the most change in Latino families. The study provides rich narratives from experts in the field who have a wealth of knowledge based on years of implementing

different curriculum-based programs. Findings from this investigation provide specific suggestion on ways in which interventions can be improved or made more relevant to increase participation from Latino families.

Study findings also add to the empirical debate on cultural adaptation vs. fidelity. The fact that all of the respondents deviated from their curricula indicates that there are differing opinions on what it means to culturally adapt a program. Perhaps the curricula represented in these findings would be ones described by Wiley and Ebata (2004) as “ethnic additive curricula,” which are better than no adaptation but not at the level of a multiethnic curriculum. This study also reinforces Kumpfer and Alvarado’s (2003) findings that there are few practitioners who implement family intervention programs with fidelity. Many respondents in the current study expressed a strong desire to implement curricula with fidelity but ultimately decided that meeting the needs of the families they were working with was most important. This suggests that for fidelity to increase, practitioners have to reconsider what it means for programs to be culturally relevant.

Findings from this study offer insight into what cultural relevance means in the context of curriculum-based family intervention programs. It seems clear that these programs are well-received by Latino families and that, for the most part, concepts and main topics addressed by the curricula are relevant. Therefore, it becomes a more simple matter of ensuring the presentation and delivery are culturally sensitive.

Study limitations include sampling bias. The snowball sampling technique may not have provided a representative sample of service providers. Another limitation was that the first author’s affiliation with the College of Social Work may have influenced

some of the respondents who had delivered a curriculum-based program through the College in the past. The study's external validity is limited, given the small sample size and focus on a specific population. Latinos residing in Utah are mostly from Mexico and therefore not representative of broader Latino populations residing in the U.S.

Results from this study have strong clinical implications for anyone in direct practice with Latinos. The findings offer specific strategies practitioners can use to engage Latino families in culturally sensitive ways that foster a welcoming and engaging environment. Due to the lack of true culturally sensitive intervention programs, practitioners often find themselves making their own adaptations of existing programs or taking pieces from many of them to develop their own programs. Findings from this study can help inform ways in which that may be done.

Finally, this study offers a qualitative perspective on intervention outcome research that is mainly informed by quantitative analyses. Findings presented here answer many of the "why" questions that follow outcome testing. There is value in knowing why a program is effective or not. Learning how program facilitators adapt their programs raises the question as to whether programs are effective strictly because of what is presented in the curricula or because of the environment and cultural adaptations that are made by facilitators. To help answer this question, future research should include qualitative research that includes Latino families, both parents and children, who participate in these programs.

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CHAPTER 5

CONCLUSION

Dissertation Summary

The purpose of this research project was to explore curriculum-based family intervention programs and their application to Latino families. The focus of this research was to understand the relevance that existing programs have to working with Latino families, specifically recent immigrant families. The research project was presented in the form of three distinct manuscripts. The first one reviewed the literature in order to explore the current state of knowledge about the nature and outcomes of curriculum-based family intervention programs implemented with Latinos. The second manuscript focused on one such program, Familias Unidas, and explored potential differences in family functioning for families of different acculturation levels. In the last manuscript, service providers implementing curriculum-based family intervention programs with Latinos shared their experiences and recommendations through interviews and focus groups.

This chapter includes a summary of each of the three manuscripts and an explanation of how the three manuscripts encompass the overall purpose and objectives of the dissertation research. In addition, the strengths and limitations of the overall research will be presented and as well as the implications for practice, policy, and research.

Chapter 2 Summary

The first manuscript, titled “Curriculum-Based Family Intervention Programs with Latino Families,” will be submitted for publication to *Advances in Social Work*. This peer-reviewed journal was selected because of its commitment to bridging the gap between practice, research, and education. This manuscript is a structured review of the scientific literature on curriculum-based intervention programs currently being implemented with Latino families. The most relevant databases were used to conduct a thorough search using search terms based on specific inclusion criteria. The searches produced only seven results that met the inclusion criteria. These seven articles represent six different family intervention programs that are being implemented with Latino families. In the manuscript, I summarized each article and discussed their commonalities.

Findings from this manuscript suggest that family intervention programs work best with Latino audiences when they address cultural factors, include both parents and youth in the intervention, and meet for a minimum of 2 months. Another element that the programs had in common was the focus of their interventions on reducing or preventing adolescent high-risk behavior by means of cognitive-behavioral techniques.

Four of the six programs presented in this manuscript were developed specifically to meet the needs of Latino immigrant families instead of having mere surface structure adaptations of existing programs. Therefore, these programs included cultural factors such as culturally specific risk and protective factors and issues surrounding differential acculturation. Five of the six programs included both parents and youth in the intervention despite the fact that the programs were aimed at decreasing adolescent risk

behavior, highlighting the important role that family plays as a protective factor for youth. Most of the programs were between 8 and 12 sessions long with fairly high retention rates, suggesting that the time frame is not unrealistic for family attendance.

Chapter 3 Summary

The manuscript titled, “Outcomes of a Culturally Adapted Family Intervention Program,” will be submitted to the *Journal of Ethnic and Cultural Diversity in Social Work*. One of the journal’s focal points is on the impact of culture on the delivery of human services. This article’s focus is on a culturally adapted program and its effect on Latino families, making it a good fit for this particular publication. This manuscript is a quantitative analysis of Familias Unidas (Families United), a family intervention program adapted from the Strengthening Families Program: For Parents and Youth 10-14 (SFP 10-14). Familias Unidas was adapted to meet the needs of local Latino Families and was implemented in Utah for 5 years.

Data collected via self-administered surveys from pretest and posttests for each of the program sessions were aggregated and analyzed. Paired sample *t*-tests revealed significant group differences in a positive direction on targeted family functioning variables. Further analyses were conducted to assess differences between families of different acculturation levels. Three separate MANCOVAs were run to explore acculturation effects on parenting skills, adolescent protective factors, and family bonding. All three models yielded statistically nonsignificant results, suggesting that acculturation level does not affect family functioning outcomes after participation in the program. The uniformity of results may indicate that those issues addressed in Familias Unidas such as parent-child interactions, discipline, communication, and youth behaviors

have similar etiologies that cut across acculturation lines. The behaviors and skills being measured by the survey may have universal applications to most families regardless of ethnicity. Improving parent-child bonding and communication is widely applicable and desired by most families irrespective of culture.

Chapter 4 Summary

The third manuscript titled, “Serving Latino Families Through Curriculum-based Programs: Input from Service Providers,” will be submitted to the *Hispanic Journal of Behavioral Sciences*. The implications from this study have the potential to be of interest to disciplines other than social work and have direct relevance to anyone working with the Latino community. This qualitative investigation presents the findings from interviews and focus groups carried out with practitioners/service providers. The inquiry was focused on gaining information from service providers related to their experience implementing curriculum-based programs with Latinos. The majority of the study participants had over 10 years experience working with the Latino community and had implemented a dozen or more series of culturally adapted curriculum-based programs.

The themes resulting from data analyses were grouped into three categories: modifications, relevance, and recommendations. The first category highlighted the ways in which most of the respondents have had to modify the curriculum when working with Latino families and justifications for doing so. These included modifications related to language, time, and rapport building. The second category centered on relevance of the programs. Respondents reported on the relevance or lack thereof in relation to culture, relevance of other demographic characteristics, and relevance of program components other than the curriculum. The final category consisted of recommendations on essential

elements to include in making curriculum-based programs most relevant to Latino families. These recommendations included parent education, building in follow-up, encouraging father involvement, the importance of allowing time for process discussion and questions, and emphasizing communication and discipline techniques.

The findings suggested that even curricula that claim to be culturally adapted are lacking important elements, namely the importance of building rapport and making the program more flexible in terms of time to allow for questions, discussion, or processing information. For the most part, focal topics put forth in the curriculum are relevant to Latino families but the presentation and the delivery may need to be altered to be relevant to families, also taking into consideration education level and socioeconomic status. Other elements of the program that families responded well to did not relate to any one curriculum. These include having structured time to share as a family, finding support from shared experiences with other group participants, and having group facilitators serve as role models. Recommendations included building in informative sessions to parents on the dangers and risks their children are faced with, as well as information on American school systems; having follow-up or booster sessions after the program ends; and having more emphasis on parent-child communication, especially around values and culture.

Interconnectedness of the Manuscripts

The three manuscripts together provide an in-depth understanding of curriculum-based intervention programs as they relate to Latino families. The first manuscript provides the foundation of the research by reviewing the scientific literature and reporting on the current state of knowledge of curriculum-based intervention programs currently being implemented with Latino families. It also serves to highlight the gaps in the

literature and the overall need for more research on this topic. The findings from this article provide useful information on programs that have demonstrated effectiveness within the Latino community. The fact that I was unable to reject the null hypothesis in my second manuscript raised some important questions about the need for curriculum-based programs to include culturally specific issues of immigration and acculturation. Namely, do the issues addressed by the intervention programs have universal applications to all Latino families residing in the U.S.? The third manuscript provided findings that offered insight into possible explanations for the nonsignificant findings of the outcome study. Several of the respondents from the qualitative study had experience in facilitating Familias Unidas, and thus results from this investigation had direct impact on possible explanations for the findings of the quantitative analyses. Respondents shared the overwhelmingly positive responses from family participants on aspects of the programs that had nothing to do with curriculum content, indicating that the structure and nature of bringing families together in shared experiences and structured family time in itself could have affected outcomes.

Conclusions of Overall Research

This research was driven by my experience as a Latino immigrant, practitioner in the field of social work, and as a researcher focused on applied research. The initial interest in conducting this research stems from my own experience of being raised in the U.S. as a member of an immigrant family from Mexico and living the familial struggles that seemed unique to me and my family at the time. As a professional working within the Latino community and implementing curriculum-based programs, I began to recognize the need to have culturally relevant programs. As a scholar and researcher, I

immersed myself in the literature on curriculum-based family interventions and their application to Latinos. These combined experiences and acquired knowledge led me to conclude that there are not adequate curriculum-based family intervention programs that address the unique needs of Latino families, in particular those of recent immigrant families.

The literature review article supports the conclusion that there are not sufficient curriculum-based programs reported in the scientific literature that have been shown to be effective with Latino families. Outcome research based on Latino samples is scarce, demonstrating that this population continues to be underrepresented in research and practice. Another conclusion from the literature review is that, in research with Latino populations, deficit-based perspectives continue to be the norm. Part of the reason for the pervasiveness of the deficit-model in research with ethnic minority populations has to do with widely accepted methodology that inherently elevates Caucasians to the standard against which all other groups are measured. This occurs because the theoretical foundations of the research and the measures used are based on White populations (Turner, 2000). It is common to find deficit-focused interpretations of Latino cultures in the professional literature where culture becomes a deficit that interferes with assimilation (Holleran & Waller, 2003). Empowerment or strengths-based models are more useful in understanding cultural dynamics. The conversation regarding integration versus acculturation is almost nonexistent in the empirical research. Integration refers to a process in which the coming together of two cultures becomes a process where each one learns, grows, and adjusts to one another instead of forcing one to adapt to the host culture. The other common finding from this study stems from a strengths perspective,

namely that culture serves as a protective factor for youth. Intervention programs targeting youth behavior can better serve them by capitalizing on existing strengths and protective factors.

The empirical evidence and findings from the first study led me to investigate in my second study the possible differences in program outcomes for families of different levels of acculturation. Because the program under investigation, Familias Unidas, did not directly address issues pertaining to immigrant families, it was interesting to find that the program had the same effect with recent immigrant families as with those who have lived in the U.S. longer. The results from this study raised questions about whether programs require a focus on specific cultural aspects related to the immigrant experience. The answers to questions raised in this study were partially addressed by the findings from the qualitative inquiry. Respondents from the interviews and focus groups were largely reporting on culturally adapted intervention models that included Familias Unidas. While there was general consensus that the programs were not culturally relevant to the Latino families with whom they worked, respondents felt positive about the programs and reported on the positive impact they had on the families. Findings from the quantitative and qualitative studies combined lead me to hypothesize that there are different levels of needs among Latino immigrant families. The positive outcomes that these programs demonstrate, despite their lack of cultural relevance, leads me to believe that they are addressing the more universal needs of families. That is to say that there are commonalities among families regardless of ethnic or other demographic differences. Among the most salient would be a need among most families in skills training in communication and the use of discipline. There is also a positive effect in bringing

families of similar backgrounds together in groups and allowing them structured time to focus on their own family issues and support one another. In terms of a hierarchy of needs, this may be the most pressing or immediate need that, once fulfilled, would allow a secondary set of needs to be met, i.e., those pertaining to the cultural factors discussed in the literature.

Each of the three articles also generated new knowledge of curriculum-based family intervention programs and highlighted the continued need for developing relevant programs for Latino families living in the U.S. The findings in the three manuscripts not only provided a unique and in-depth understanding into the relevance and use of curriculum-based family intervention programs, but also generated future ideas for research, social work practice, and policy.

Implications

Practice Implications

Practitioners who have experience serving Latino families through curriculum-based programs speak to the importance of, and the overwhelming demand for, these programs in the Latino communities in which they work. There is receptiveness and appeal for these types of programs within the Latino community and, therefore, at the hands of a culturally competent facilitator any program offered will have some level of adaptation. This may be problematic for those who question the effectiveness curriculum-based programs can have when fidelity is compromised. However, the reality in practice is that most often funding agencies require use of evidence-based programs based on majority populations. Given the scarcity of culturally developed models, practitioners are left with no other option than to adapt these less culturally appropriate

programs. This research helps inform practice on issues to consider in delivering intervention program to Latino families. In order for fidelity to increase, programs need to consider cultural relevancy through such phases of program development as needs assessment, theory development, pilot testing, implementation, and evaluation.

Policy Implications

Evidence-based practice is playing an increasing role in U.S. prevention policy, to the extent that now there are lists being generated of “exemplary” or “model” programs based on their scientific findings of effectiveness (Gorman et al., 2007). Funding agencies in particular emphasize the use of evidence-based programs in an effort to maintain accountability. At a policy level, this research provides a deeper understanding of how limiting it can be to require that evidence-based programs based on majority populations be implemented with ethnic minority populations. Due to the underrepresentation of ethnic groups in intervention and outcome studies, the applicability of research findings to these groups is called into question. Findings from qualitative interviews of service providers found that programs that claim to be evidence-based did not have the same relevance to populations other than those on which they were tested.

Research Implications

There is a critical need for more outcome study research to determine the effectiveness of programs developed specifically for ethnic minorities, as opposed to majority populations, to assure more inclusiveness in what is deemed to be evidence-based model programs. These studies are necessary in order for culturally developed

programs to be disseminated and reach wider audiences. However, social scientists should also question whether linear methods of research design fit the research questions relevant to the needs of Latinos (Ortiz & Aranda, 2009). There should be questions posed on the relevance of the scales being used to measure outcomes as well. It would also be worthwhile to include practice-based evidence that utilizes monitoring and feedback from clients themselves. This approach is more culturally sensitive and continues to challenge the one-size-fits all models derived solely from clinical trials.

Future research on program outcomes should include comparisons between acculturation levels of Latino families to continue to assess the need for the development of culturally relevant programs. Future studies should explore what specifically mattered most to families who participated in the program. There should be a focus on those areas where the most improvement is detected and whether there are other family characteristics influencing those outcomes. Qualitative designs should be considered in future research because they allow for richness and depth that can add much to the ongoing conversation about program effectiveness.

Strengths and Limitations of the Dissertation Studies

This research has several limitations. The sample drawn for the interviews and focus groups was not random and therefore cannot be assumed to be representative of all service providers in direct practice with Latino populations. Also, Latino populations are not a homogenous group and those served by local service providers may be different from Latinos residing in other parts of the U.S. This sample was limited to Utah, which also is not a representative region of the U.S. The research was conducted using

snowballing techniques, which runs the risk of introducing bias. Another limitation was the low numbers of available participants who were identified.

In examining the differences in program effectiveness based on acculturation levels, there was a limitation in measurement of that key variable. Acculturation level was assessed on reports from youth based on language and length of time residing in the U.S. No acculturation questions were asked of parents nor was any other measure of acculturation utilized. Inadequate measurement might have influenced the research findings. In the structured review of the literature, it is possible that the inclusion criteria were too rigid or that important databases were left out of the search.

In spite of the above limitations, the study has several strengths and makes significant contributions to research, practice, and policy. This body of research utilized both quantitative and qualitative methods, allowing the data to be analyzed from varied perspectives. The qualitative nature of the research facilitated the identification of themes that otherwise could not have been fully understood. The qualitative data were collected using both in-depth interviews and focus group discussions. This triangulation of data collection techniques was useful in gathering more in-depth and rich data. Finally, the quantitative analyses allowed for testing of important research questions on a large sample using powerful and sophisticated statistical techniques, and the literature review provided the necessary foundation to assist in interpretations of results.

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