

# Ties That Protect: An Ecological Perspective on Latino/a Urban Pre-Adolescent Drug Use

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**SUMMARY.** An ecological risk and resiliency framework was applied to explore how social contexts, especially the role of families and schools, are affecting Latino/a pre-adolescent substance use in the urban Southwest. A mixed research design, using both quantitative and qualitative methodologies, guided the study. Quantitative data were collected through surveys administered as part of a school-based prevention intervention experiment (N = 2,125). Individual interviews conducted with a randomly selected number of matched students (N = 60) provided the

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**qualitative data. The main theme emerging throughout both data sets was a strong resilience against drug use of the participating 7th grade urban youth. The vast majority of students did not use hard drugs, and agreed that alcohol use was inappropriate at their age. A high degree of attachment and strong ties to their parents and their school environment emerged as a shared protective factor. Recommendations include social work interventions that support the resiliency characteristics of urban Latino/a youth in different social contexts such as communities, schools, and families. Limitations of the study are reviewed and suggestions for future research are offered.** *(Article copies available for a fee from The Haworth Document Delivery Service: 1-800-HA WORTH. E-mail address: <docdelivery@haworthpress.com> Website: <<http://www.HaworthPress.com>> © 2002 by The Haworth Press, Inc. All rights reserved]*

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## INTRODUCTION

The purpose of this research is to advance our understanding of the protective and risk factors that shield Latino and other pre-adolescents from drug use. National survey data show that drug use has increased significantly among adolescents over the past decades (Botvin et al., 2000a). It has been estimated that 13.9 million American youth 12 and older use illicit drugs, with a 2.4% increase between 1996 and 1997 (SAMHSA, 1998). Commonly, these increases in drug use are associated with risk factors located within a risk and protective factors continuum (Smokowski et al., 1999; NIDA, 1999). These factors can have a risk or a protective effect at different times and in different contexts. Some and school have been identified as key contexts influencing adolescents' substance use (Bauman & Phongsau, 1999; Ellickson & Morton, 1999; Luekefeld et al., 1998; McWhirter et al., 1998).

In urban settings with high concentrations of ethnic minorities, there is a tendency to describe the social contexts of home and school as strained and faltering, therefore, increasing at-risk factors of youth (Adams, 1999). Risk factors present at home and school have been specifically associated with substance abuse among Latino youth (Botvin et al., 2000b; Cabrera Strait, 1999; Chalk & Phillips, 1996). The influence of family, on the other hand, has been identified as a powerful protective factor against substance use (Herman et al., 1997; Howard, 1996;.

Swaim et al., 1998), as has investment in school and good academic performance (Seydlita & Jenkins, 1998; McWhirter et al., 1998; Swaim et al., 1998) and involvement in after-school and religious activities (Mahoney & Stattin, 2000; Johanson et al., 1996). In addition, biculturalism and ethnic pride have been identified as strengthening the resiliency of Latino adolescents against drug abuse (Belgrave et al., 1997; Marsiglia et al., 2001; Marsiglia & Holleran, 1999; Kulis et al., 2000). Connectedness to home and school is hypothesized here to be a key protective factor against drug use (Seligman & Csikszentmihalyi, 2000).

The assumption is that despite the strains experienced by homes, schools, and communities, these social contexts play a protective role in preventing or reducing delinquent behavior through attachment and control (McWhirter et al., 1998; Seydlita & Jenkins, 1998; Smokowski et al., 1999). In other words, the purpose of this research is to explore how selected social contexts protect children against the stressors they encounter in their daily lives and keep them healthy (Newcomb & Bentler, 1988). The central question guiding this study is "What resiliency role do the social contexts of home and school play in the ability of Latino/a urban pre-adolescents in the Southwest to refuse drug offers?" This question will be explored from an ecological risk and resiliency perspective.

### *THEORETICAL APPROACH*

The emphasis on families, schools, and communities follows an ecosystems perspective, which is fundamental to social work practice. The Ecological Risk and Resiliency Approach (Bogenschneider, 1996) will be followed because it takes into account the relationship between the individual and her/his social context, addressing both the risk and protective factors influencing behavioral outcomes. Researchers using this approach argue that greater attention should be paid to basic social conditions. Studies, they argue, need to contextualize individually based risk factors by examining what puts people at risk. Social factors such as ethnicity and culture are relevant to disease prevention and treatment because they influence access to important resources, including social support, and impact multiple disease outcomes, including drug abuse. Although membership in particular ethnic or geographic communities is not in itself a risk factor, it may influence access to both prevention resources and effective service delivery systems.

Bronfenbrenner's (1986) ecological risk and resiliency approach is used to examine the complex issues associated with the ability to resist hugs among Latino/a and other youth in the urban Southwest—a border- and population of mostly Mexican American heritage with strong cultural and language ties to Mexico and to Mexican American culture in the U.S. This ecosystem perspective considers structural factors that prove critical when differentiating drug use patterns, particularly within and between ethnic and racial groupings (Brunswick, 1999).

Resiliency is measured by the degree to which people (or communities) are productive and healthy despite hardships, traumas, and obstacles in their environment (Bogenschneider, 1996). Personal attributes are important determinants of resiliency, but cultural factors are also important as they can amplify risks and resiliencies in the environment. The ecological risk and resiliency approach will be specifically applied to the study of a sample of Latino/a and other youth ability to refuse hugs.

## LITERATURE REVIEW

### i *Drug Use Among Latino Youth*

Latinos/as are a heterogeneous umbrella group, and, as such, present many differences in terms of etiology of use, frequency of use, and drugs of choice (Cervantes et al., 1990/91). Because this study was conducted in the Southwest, the attention is focused on Mexicans and Mexican Americans. The Mexican American population has higher rates of heavy drinking and alcohol related problems than many other Latino subgroups (Cervantes et al., 1990/91). Mexican American women have higher rates of both abstinence and frequent heavy drinking than other Latinas, and the prevalence of alcoholism is higher among U.S.-born Mexican American women than among Mexican women immigrants (Aguirre-Molina & Caetano, 1994; Caetano, 1988). Mexican American adolescents with strong Mexican cultural identification are less likely than those with weaker ethnic identification to be regular users of tobacco, and more likely to believe that tobacco use is harmful (Casas et al., 1998). This pattern reflects several factors, including varying degrees of adherence to traditional Mexican substance use norms. Mexican culture holds strong social norms against drinking and drug abuse by women (Canino, 1994; Van Wilkinson, 1989); but tolerates heavy

drinking for men, especially in rural areas (DeWalt, 1979; Madsen & Madsen, 1979).

### *Family Context as a Protective Factor*

Perhaps the most important protective factor arising from Mexican American culture is *familism*, a cultural orientation in which the family of origin is of primary importance, even after marriage (Suarez-Orozco & Suarez-Orozco, 1995). Mexican and Mexican American families tend to have stronger family pride, family closeness, respect for parents, mutual obligation, trust and cohesion than non-Hispanic White families (Chandler et al., 1999, Olson et al., 1983). Traditional Mexican norms such as parental monitoring and involvement with children, and the tendency of married couples to settle close to parents and other family members, also act protectively as they provide children with more attention by a greater number of caring adults and situate children in more cohesive communities (Chandler et al., 1999; Denner, 2001; Gonzales, 1993).

On the other hand, migration can dislocate families and seriously limit their ability to rely upon relatives, *compadres* (ritualistic relatives), neighbors, and friends (Patterson & Marsiglia, 2000). The protective aspects of culture can also be weakened by acculturation and acculturation stress, resulting in vulnerability to drug use (Barnes, 1979; Beauvais, 1998; Bonnheim & Korman, 1985). Acculturation stress can weaken adolescents' connections with traditional support systems such as family. Recent immigrants who do not yet have the skills (such as language use) necessary to navigate the host society have a difficult time developing replacement sources of support in the new culture (Rogler, Cortes, & Malgady, 1991).

Despite the challenges associated with migration and acculturation, family context remains a vital factor associated with adolescent substance use (Resnick, 2000). Family strength (often called cohesiveness) and family sanctions against substance use are associated with youth resiliency against drug use (Howard, 1996; Swaim et al., 1998). On the other hand, family factors that promote adolescent substance use include perception of family use, actual family use, family discord, family separation, lack of family guidance, and absence of a father (Duncan et al., 1995; Friedman et al., 2000; Iannotti, 1996; Nurco et al., 1998; Smokowski, 1999). Many treatment and prevention strategies acknowledge the role of the family in substance use and abuse and include them in their interventions (Vega & Gil, 1998). However, the role of the fam-

ly varies among groups, emerging as a diverse issue with differing impact on families-especially with regard to ethnic and racial differentials (Vega & Gil, 1998).

### *School Context as a Protective Factor*

The role of schools in urban communities has been covered extensively in the literature (Agnew, 1999; Botvin, 2000; Resnick, 2000; Ripple & Luthar, 2000). Youth who drop out of school have higher rates of delinquency, drug use, theft, and violent crimes (Guagliardo et al., 1998; Obot & Anthony, 1999; Swaim et al., 1998). Communities that report high delinquency rates also record high truancy rates, low student educational performance, and low socioeconomic status (Farrington, 1992).

Schools and teachers provide physical care, ensure safety, develop social skills, reinforce pro-social behavior, and exercise control (Chazan, 1992). Since the 1930s, emphasis has been placed on the role of schools in curbing delinquent behaviors such as drug use (Everett, 1933). In general, student behaviors and attitudes reflect the degree of adjustment to the school environment. Positive school adjustment functions as a protective factor against drug using peer affiliation (Swaim et al., 1998). Recently the role of teachers in schools also has been linked to resiliency factors in adolescent drug use research (Smokowski, 1999). Understanding the way in which the described social contexts operate to shield Latino youth from drugs is vital in aiding youth, families, school personnel, and social work practitioners with their prevention efforts against the increase of substance use among adolescents.

## *METHODS*

A mixed method research design guided the implementation of this study. Both quantitative and qualitative data were gathered and analyzed. Quantitative data were collected through the administration of surveys as part of a school-based intervention research project. This article reports only the quantitative data collected through a pretest survey administered at all schools (control and experimental) before a drug prevention experiment took place. The ethnographic or qualitative data were collected through recorded face-to-face interviews conducted by graduate students trained in ethnographic methods.

### *Sample*

All 45 middle schools within a large size Southwestern city were recruited for the study, and 35 schools from 9 different school districts agreed to participate. Within these schools, every 7th grader was selected as a participant in the study. The 35 schools produced samples ranging in size from 56 to 725 students; their proportion of Mexican, Mexican-American, other Latino, and multi-ethnic Latino origin students ranged from 21.2% to 98.6%.

The total sample consisted of 6,035 students. Most of them ( $n = 3,318$ ) were Mexican or Mexican American students, followed by 1,141 students of other Latino or multi-ethnic Latino origin (e.g., Mexican and White, Mexican and American Indian), 1,049 European American students, and 527 African American students. According to student responses, 74.3% qualified for a free school lunch and 8.0% qualified for reduced priced lunches. The 7th graders averaged 12.53 years of age ( $SD = .65$  years; overall range of 9 to 18 years), with little age variability among the racial/ethnic groups.

The results reported in this article utilized a sub-sample of the total sample. Only student surveys from eight schools randomly selected to have an ethnographer were used in the analysis. There were 2,125 completed surveys in those eight schools and sixty of those students completing the survey were successfully matched with those interviewed by the ethnographers assigned to their school. Table 1 summarizes demographic data on the 2,125 student sub-sample and the sixty matched interviewees.

### *Survey Data*

The surveys (each up to 82-items) utilized a three-form design (Graham, Hofer, & MacKinnon, 1996; Graham, Hofer, & Piccinin, 1994; Graham, Taylor, & Cumsille, 2001) using limited combinations of items to reduce the number of items each individual student received in his/her survey, while maximizing the total number of items available for later analysis. Students responded to demographic items (9 items); recent alcohol, cigarette, and marijuana use (6 items); anti-drug personal norms (3 items); descriptive norms (2 items); and anti-drug use intentions (3 items). The remainder of the 23 relevant items were distributed across three groups (A, B, and C) with each student receiving all questions from two of the three groups (i.e., A and B, B and C, or C and A). All of the main survey based scales of interest to this study ap-

TABLE 1. Demographic Overview

Sender	Non-Interviewed Students		Interviewees			Non-Interviewed Students		Interviewees	
	Percent	N	Percent	N	Free/Reduced Lunch	Percent	N	Percent	N
Male	52.6	1052	38.3	23	Free lunch	82.3	1719	62.1	36
Female	47.4	949	61.7	37	Reduced lunch	6.8	143	13.8	8
Total	100.0	2001	100.0	60	Neither reduced nor free	10.8	226	24.1	14
					Total	100.0	2088	100.0	58

  

Ethnicity	Non-Interviewed Students		Interviewees			Non-Interviewed Students		Interviewees	
	Percent	N	Percent	N	Home Language	Percent	N	Percent	N
Other Hispanic	3.5	73	3.4	2	English only	28.0	593	40.0	24
American Indian	3.7	77	10.3	6	Mostly English	10.1	214	13.3	8
Other Multi-Ethnic	4.0	83	13.8	8	Both English and Spanish, about equal	32.9	698	23.3	14
African-American	5.3	110	1.7	1	Mostly Spanish	10.2	217	6.7	4
Mexican Multi-Ethnic	11.0	226	8.6	5	Spanish only	16.9	358	13.3	8
Non-Hispanic White	11.1	228	12.1	7	Other language	1.9	40	3.3	2
Mexican/Chicano	61.3	1263	50.0	29	Total	100.0	2120	100.0	60
Total	100.0	2060	100.0	58					

  

Academic Goals	Non-Interviewed Students		Interviewees			Non-Interviewed Students		Interviewees	
	Percent	N	Percent	N	Self-Reported Grades	Percent	N	Percent	N
4 years of college	52.0	1100	59.3	35	Mostly A's	9.1	192	13.6	8
2 years of college	22.5	476	28.8	17	A's and B's	33.0	696	45.8	27
Trade/vocational school	2.6	55	3.4	2	Mostly B's	9.0	190	3.4	2
High school	19.7	417	6.8	4	B's and C's	27.6	583	22.0	13
3th grade	3.3	69	1.7	1	Mostly C's	5.8	122	3.4	2
Total	100.0	2117	100.0	59	C's and D's	10.7	226	6.8	4
					Mostly D's	1.2	26	1.7	1
					D's and F's	3.0	64	3.4	2
					Mostly F's	0.6	12	0.0	0
					Total	100.0	2111	100.0	59

feasible and acceptable to highly reliable, including recent substance use ( $\alpha = .89$ ), parent injunctive norms ( $\alpha = .73$ ), friend injunctive norms ( $\alpha = .82$ ), personal norms ( $\alpha = .84$ ), self-efficacy ( $\alpha = .78$ ), personal intentions ( $\alpha = .84$ ), and substance use expectancies ( $\alpha = .77$ ).

University trained proctors administered the 45-minute survey, (one form containing both English and Spanish versions) during regular

school hours in science, health, or homeroom classes, with the students in a few schools assembled together for survey administration. Table 1 presents a basic demographic profile of the students who were interviewed and all their school peers in the eight selected schools that completed the survey.

### *Ethnographic Data*

Narratives were gathered using structured questions designed to explore the students' forms of understanding situational and temporal contexts. The narratives, in addition to serving as mirrors of reality, represented the actual mode of thinking used in the students' everyday life (Widdershoven, 1993). The interviewers utilized a semi-structured interview guide, which focused on youth culture and how youth respond to substance use situations. Multiple interviewers at the eight schools utilized the same interview guide to elicit narration by the interviewees. The narratives shared by the adolescents provide an insiders' perspective into the protective and risk factors present in their homes, schools, and neighborhoods, and the impact of these factors on drug use. Because the ethnographers had prior experience in the schools, a pre-established contextual knowledge and rapport existed. Twenty interviewees were randomly selected from each of the eight schools. Some of the key questions used in the interviews were: "Can you tell me a story about drugs in your life, in your friends' lives, in your family or in your neighborhood? If you needed some help getting out of a situation that involved drugs, alcohol, or cigarettes, who would you go to? How would your friends have acted in that situation? Who do you hang out with at school? Are they the same people you hang out with when you're not at school?"

Of the original pool of 160 students, interviews were conducted with a total of 141. From the 141 interviews, 60 were successfully matched with the survey data using the students' initials and birth dates. Using hermeneutical analysis techniques, emergent themes were drawn from the interviews and coded using NUD\*IST software, version 4.0. The emergent themes form the foundation of the qualitative findings.

### *Mixed Method Procedures*

The two sources of data were used to inform and complement each other. The survey data provided insight into the phenomenon through aggregate data or the "what," while the ethnographic data aimed at pro-

ding meaning or the "why" and "how." All the survey respondents are selected from the eight schools from which interviewees were drawn (N = 2,125). Interview responses then were matched to individual surveys, resulting in 60 clear matches. General descriptive statistics of the interviewed population were compared to those of the non-interviewed school population. T-tests were conducted to compare the mean scores of survey respondents that were interviewed with the responses of the rest of the survey respondents who were not interviewed by the ethnographers. In order to protect the anonymity of the participants, only gender and age information will be provided when referring to a particular student; no names will be used.

## FINDINGS

### *Descriptive Statistics*

When descriptive statistics were compared, distinctions emerged between the 60 matched cases of students who completed both the written survey and the in-person interview, and the 2,065 students who simply answered the survey but were not interviewed. Those interviewed were found to be disproportionately female, English speakers, and with above average grades. Because the selection process for the intensive interviews required an additional signed parental consent form to be returned to the school, the authors surmise that female students, and students with better attendance records, were more likely to comply, and that their parents would be more likely to allow their children to participate and return the required extra consent forms. Additionally, when ethnicity and socioeconomic status were considered, as measured by the proxy of free or reduced lunch eligibility, those interviewed were less likely to be Mexican/Chicano (though more likely to be American than or Non-Hispanics Multi-ethnic) and less likely to receive either free or reduced lunch subsidies. Finally, there were differences in the long-term academic aspirations of those interviewed; they were more likely to indicate post-secondary education plans than the general population of the schools from which they were drawn. As our results show, interview subjects also differed based on the attachment, commitment, and involvement with their families and schools. The survey respondents and the smaller number of interviewees provide a glimpse to the risk and resiliency spectrum present within the overall [sample](#). The narratives, in particular, are a rich exemplar of how the students'

home, school and neighborhood contexts were supporting their resiliency.

t-tests were used to determine whether the mean values of core drug use related variables were significantly different between those who were interviewed and the other students in their schools. The interviewees presented fewer risk factors and more protective factors than the non-interviewed sub sample (see Table 2).

Drug use profiles for all respondents showed that the majority of students-both those interviewed and those not interviewed-reported no use of alcohol, cigarettes or marijuana in the recent past, and they agreed that alcohol use was inappropriate at their age. While both groups of students showed low levels of drug use in the aggregate, differences between the interviewees and non-interviewees were, however, statistically significant in many instances. Importantly, in all measures of last 30-day use of alcohol, marijuana, and cigarettes, and lifetime use of alcohol and marijuana, interviewees were found to use significantly less than other non-interviewed survey respondents. This difference may be due to the need for an additional parental consent for the interview participants. This distinction in drug use resiliency is also apparent in the ethnographic interviews.

Although the interviews were conducted with a relatively low at-risk group, the transcripts provide valuable insights into the experiences and understandings of the participating youth. The following section will focus on data gathered from the 60 students completing the written survey and the intensive interview. The results were organized around overarching themes emerging from the survey and ethnographic data sets.

### *Resiliency Themes Emerging in Families, Schools, and Neighborhoods*

#### *The Family Context*

Survey results reported by the students who were also interviewed by ethnographers highlight the importance of family as a protective factor and the themes of resiliency emerging from the narratives about family life support. Both sources of data support the premise that social bonding and resilience resulted from attachment, commitment, and involvement with family. In examining these survey findings, it is important to remember that students received at random three somewhat different forms of the questionnaire containing the pertinent family survey items. Only about two-thirds of the 60 student interviewees answered each of

*SOCIAL WORK WITH MULTICULTURAL YOUTH*

BLE 2. T-Tests of Mean Differences on Drug Use Related Survey Items, Comparing Interviewees and Non-Interviewees

Variables	Students Not-Interviewed			Interviewees			t-statistic	sig.
	N	Mean	Std. Error of Mean	N	Mean	Std. Error of Mean		
As in entire life	2049	3.234	0.052	59	2.915	0.240	-1.696	
Cigarettes in entire life	2054	2.314	0.045	60	2.167	0.233	-0.783	
Marijuana "hits" in entire life	2043	1.726	0.034	59	1.373	0.145	-3.190	***
Used smokeless tobacco ever (Yes =1; No = 0)	2052	1.063	0.006	60	1.100	0.052	0.813	
Used crack, LSD, downers, etc., ever (Yes =1; No = 0)	2054	1.078	0.007	60	1.083	0.043	0.151	
Used uppers (speed) ever (Yes =1; No = 0)	2053	1.061	0.007	60	1.083	0.049	0.525	
Used inhalants ever (Yes =1; No = 0)	2047	1.244	0.012	59	1.169	0.049	-2.010	
Used alcohol drinks last 30 days	2049	1.861	0.037	60	1.617	0.168	-1.865	
Frequency used alcohol last 30 days	2044	1.433	0.022	60	1.267	0.082	-2.755	***
Cigarettes last 30 days	2051	1.349	0.023	59	1.153	0.079	-3.482	***
Frequency used cigarettes in last 30 days	2052	1.246	0.017	59	1.068	0.048	-5.905	***
Marijuana "hits" in last 30 days	2043	1.581	0.034	59	1.237	0.119	-4.019	**
Frequency used marijuana in last 30 days	2041	1.350	0.022	59	1.186	0.092	-2.349	**
Feeling at your age OK	2047	3.292	0.019	59	3.288	0.114	-0.042	
Feeling at your age OK	2046	3.380	0.018	59	3.458	0.103	0.910	
Marijuana at your age OK	2045	3.373	0.020	58	3.569	0.099	2.498	**
Willingness of accepting future alcohol offer	2040	1.784	0.018	59	1.644	0.099	-1.738	
Willingness of accepting future cigarette offer	2040	1.620	0.016	59	1.559	0.088	-0.846	
Willingness of accepting future marijuana offer	2026	1.630	0.019	59	1.390	0.087	-3.544	***
Proportion of # of other students who tried drugs once	2030	1.275	0.014	59	2.373	0.128	9.669	***
Proportion of # of regular drug users in your school	2024	2.081	0.022	58	2.931	0.115	9.116	***
Proportion of regular participation in drug use by classmates	1987	2.506	0.050	58	2.672	0.304	0.657	

= 0.005  
 = 0.01  
 = 0.05

family items. Their responses express a high degree of attachment and connectedness to their parents, complemented by strong parental authority and control (see Table 3). Most of the interviewee respondents who answered the relevant family items (84%) identified themselves as being "close" or "very close" to their parents and feeling that their parents were proud of them most of the time (50%). The survey results demonstrated that parents, especially mothers, played a strong role in educating these students about drugs. Seventy-three percent (73%) indicated that their parents have taught them the most about the consequences of using drugs. Parental

TABLE 3. Attachment and Parental Authority as Reported by Interviewees on Written Surveys

Attachment/Connectedness					
	<u>A little close</u>	<u>Neutral</u>	<u>Close</u>	<u>Very close</u>	
Closeness to parents (N = 40)	3(8%)	7(18%)	13(33%)	17(43%)	
	<u>Strongly Disagree</u>	<u>Disagree</u>	<u>Agree</u>	<u>Strongly Agree</u>	
Feel I belong in this school (N = 29)	1 (3%)	3 (10%)	10 (34%)	15(52%)	
	<u>No one</u>	<u>Media</u>	<u>School</u>	<u>Friends</u>	<u>Dad/Mom</u>
Who taught R about drugs (N = 33)	4(12%)	1 (3%)	3(9%)	1 (3%)	24(73%)
	<u>Never</u>	<u>Almost never</u>	<u>Sometimes</u>	<u>Often</u>	<u>Most of the time</u>
Freq. parents proud of you (N = 36)	0	4 (11%)	8(22%)	6(17%)	18(50%)
Parental Authority					
	<u>All of the time</u>	<u>Sometimes</u>	<u>Never</u>		
Parents allow R to drink at parties (N = 40)	1(3%)	9(23%)	30(75%)		
	<u>Never</u>	<u>Almost never</u>	<u>Sometimes</u>	<u>Often</u>	<u>Most of the time</u>
Freq. parents question where R goes (N = 35)	0	0	2(6%)	4 (11%)	29(83%)
	<u>Never</u>	<u>Almost never</u>	<u>Sometimes</u>	<u>Often</u>	<u>Most of the time</u>
Freq. parents set time R comes home 0 (N = 39)	0	2(5%)	9(23%)	11 (35%)	17(44%)
	<u>Never</u>	<u>Almost never</u>	<u>Sometimes</u>	<u>Often</u>	<u>Most of the time</u>
Freq. parents forbid activities (N = 31)	1 (3%)	13(42%)	7(23%)	4(12%)	6(14%)
	<u>Never</u>	<u>Almost never</u>	<u>Sometimes</u>	<u>Often</u>	<u>Most of the time</u>
Freq. parent allows R to go out (N = 30)	3 (10%)	4(13%)	15(50%)	3 (10%)	5(17%)
	<u>Not angry at all</u>	<u>A little angry</u>	<u>Pretty angry</u>	<u>Very angry</u>	
Parent's reaction if R had alcohol (N = 36)	1 (3%)	1 (3%)	4 (11%)	30(83%)	
	<u>Not angry at all</u>	<u>A little angry</u>	<u>Very angry</u>	<u>Very angry</u>	
Parent's reaction if R smoked cigarettes (N = 35)	2(6%)	2(6%)	3 (9%)	28(79%)	
	<u>Not angry at all</u>	<u>A little angry</u>	<u>Very angry</u>	<u>Very angry</u>	
Parent's reaction if R smoked marijuana (N = 36)	0	4 (11%)	4 (11%)	28(80%)	

"Note all percentages are rounded to the nearest whole percent

<sup>1</sup> Because of the multiple form structure of the survey questionnaire, one-third or more of the interviewees were not asked each of these questions

authority was demonstrated by the fact that the majority (74%) of respondents' parents never allowed them to drink at parties, reinforced boundaries by questioning them about where they were going (83%), and set time limits (72%). On the other hand, most interviewee respondents (77%) indicated that their parents allowed them to go out and less than half of them were regularly forbidden to do certain activities (19%). Finally, respondents overwhelmingly believed that their parents would be very angry if they were to drink alcohol (83%), smoke cigarettes (79%), or use marijuana (78%).

The survey results present the interviewee respondents as youth closely connected with their parents, with whom they appear to share a sense of trust and maintain good communication. The ethnographic data confirm and further explain the survey results. The majority of youth who were interviewed identified a strong influence of social control and few reports of strain in the immediate family. The strongest influence of social control was parental influence on drug use, including the connectedness with mothers as the most commonly reported bond. Three main resiliency themes emerged from the ethnographic data within the realm of family context; they were: (1) Parental control, (2) Parental support, and (3) Shared time.

*1. Parental control.* Parental control was identified in many forms, such as parents setting boundaries and parents reinforcing expected behaviors. An example of these practices is found in the following comment.

I'd probably go to my parents, and they'd probably be mad at me. But, kinda like, in a way they'll be mad at you, but then they'll kinda be happy that you told them so they can help you out. That's a parenting thing that a parent will understand. But my friends, I don't know. I guess they'd help me if I had helped them. Hopefully, but. . . . To get help, like to get real help, I'd have to go to my parents 'cause I know they'll still love me then. They care about me. (Male, age 13)

In general, setting boundaries was described as parents getting upset, setting clear rules, being disappointed, or punishing unacceptable behavior. When asked if he would go along with friends who were doing something he did not approve, a 14 year old male replied, "No. Because I wouldn't want to do that.. . They [my parents] would tell me of to do bad things." A 13 year old female responded to the same question by saying, "No. Because my Mom will get mad. Because they don't

like for me to do bad stuff." Parental positive reinforcement of pro-social behavior was described frequently as praise as well as more affective responses of "being happy" or "being glad." The youth more often identified positive reinforcement than they did boundary setting.

2. Parental support. The theme of parental support emerged out of the written surveys and the students' narratives describing their help seeking behaviors. For example, parents were the most common response to the survey question about whom you would go to if you had a problem with drugs. In their narratives as in their survey responses (see Table 3), parents were mentioned as the first source of help and advice.

I think, my Mom. Because I can tell her anything and she just goes along with it, and she helps me, and all that. (Female, age 13)

My parents. They would probably talk to me about it; my friends; that they might be like.... How did they do it? (Female, age 14)

Other interviewees explicitly chose their parents over other adults in their lives. They talked about trust, using phrases like "they care about me." Both adolescent females and males offered the following observations about their parents as being available and trustworthy,

[I'd talk] with a teacher that comes here for that, or if not, maybe I would tell my parents or someone I trust. Mmm, I think it's better with my parents because they know what they're going do better than the teachers, but I trust my parents more, to ... to talk to them. (Female, age 14)

Well, first, I think I'd go to my parents `cause, you know, they're always.... They're always defending me and, you know, they've taught me everything so far, so I'd pretty much go to my parents. Yeah, `cause, you know... they would help me. (Female, age 13)

I'd go to my Mom and my Dad because most of the time they're really always.... All the time, they're really always there for me. So, I would just go and I'll tell them what's going on and they'll pray about it and then. . . Like, pretty soon they'll have the answer to what's right or what's wrong. (Male, age 14)

Although the students mentioned their parents as their primary source of advice, their stories mostly involved their mothers. For example,

I'd have to say my Mom `cause if my Dad.... I know he'll yell and scream at me. Like, "You done this. You never told me." Blah, blah, blah. And like make it all bad. And, "Your body's gonna be all different" and "You're gonna get all new friends." But my Mom, I don't think she'll tell my Dad. It's like. . . If anything really bad happens to me, she'll try to see if she can help. With my Mom.... I can talk to her when I want to talk to her. And, like, you know, she's a woman and so it's like easier to talk to her. `Cause my Dad.... Some of my friends, they live with their Dad `cause their Mom got divorced, and I think it's pretty hard to talk ... I mean, if it's a man, you know? (Female, age 13)

Both adolescent males and females seem to rely mostly on their mothers for help and advice, however, other family members were mentioned as sources of support and help and as role models. Such was the case below. When asked whom would he go to for help, the student replied:

Probably my brother 'cause he would like back me up. Yeah. He's 18 and he would help me, like, to read the situation and would probably tell me how it's very important to talk to him, and [ask me] why are you doing that and ... (Male, age 14)

As this quote illustrates, older siblings were sometimes described by the interviewees as performing parental roles. There was a complete absence of any reliance on professional or institutionalized forms of help.

3. *Shared time.* The majority of the students identified their out of school socialization as taking place within the family's sphere of influence. Mothers were once more identified as the main person with whom they shared unstructured time outside of the school. One female respondent gave an example of this practice by saying: "I stay home. I help my mom at home." Another added,

Most of the time on weekends, I don't hang out with them [friends]. Only like when we go somewhere together. But, most of the weekend I spend time with my Mom or something to do with family. (Female, age 13)

Commonly, after-school socialization included family members such as cousins and siblings: "just my sister and me hang around when we are

not in school" (Female, age 14). Sharing time with non-family members is heavily scrutinized as illustrated by the following vignette.

'Cause, my parents ... they are so protective of me. They don't want me to go to my friend's house because they might ... Like my friend.... Me and my best friend Lisa, we went to the mall and my Mom didn't know that we're best friends yet, and then she wouldn't let me go to the mall with her Dad because she wasn't sure he wouldn't try kidnaping me. And so, I think.... She's really protective of me. (Female, age 13)

The rest of the students participating in the ethnographic component of the study appear to be enjoying a close and rewarding relationship with their parents especially their mothers. Their parents are available to them, provide the support students feel they need and at the same time communicate clear messages in terms of what is and what is not permissible.

#### *The School Context*

The school context also proved to be important in social support and bonding. Most survey respondents (87%) expressed a strong sense of belonging to school (see Table 3). Teachers were identified as key players in supporting a sense of belonging and social bonding. However, drug offers and drug use frequently occurred in school. Next to parents, the teacher was the person a youth most likely would seek out if they had a problem with drugs.

I would go to a teacher or to an adult because you don't know what they are going to do to you. They can hold you and take you for treatment. (Male, age 14)

Teachers were identified as a good alternative to parents, especially for students coming from very strict homes.

I'd be scared to death to go to my family, so I wouldn't go to them [parents] first. I'd probably like ask one of my teachers for help. Like, "I don't ... I want to stop, but I can't . . ." And if they could help me, then I might go to my family. I have a pretty good relationship with all of my teachers. (Female, age 13)

The respondents also reported several examples of teachers' use of modeling and discipline-how a teacher handled drugs in the classroom.

Last week a group of boys were using drugs and I told a teacher that they were using it, and they got them and they were looking for the drugs, and they couldn't find it. And a boy threw it into a trash and the teacher found it. And I was glad because I thought they were going to do something to me. [And later] I remember when we were gonna make cookies at life skills class, and the kids-I don't know what happened or anything-but the teacher opened one of them, and they caught him, and they were putting marijuana in the cookies. (Female, age 14)

Yet, the youth maintained school norms, illustrated by instances in which several youth reported drugs or drug use to school officials. Those instances were followed by positive reinforcement by authority figures. Many of the respondents stated that there was drug use in school, but only a few identified offenders. Several youth reported drug use by peers to a school authority. Below is an illustration of these practices supported by a positive social structure despite the presence of drugs.

Last year I had this friend that had brought weed, and he gave it away so we could take care of it. He had gotten caught, and they sent him to the office. We talked to my teacher and the principal. That was about it. Yes. We threw it away and later on we thought there would be more, like the people that hang out with them. We got it and put it into this paper. So we went to the teacher, and she took us to the principal. They suspended him. (Female, 14 years old)

Youth identified school personnel next to the police as the adults they would go to if they had a problem with drugs. When asked whom he would go to for help one 13 year old male responded, "To the police ... the teacher or the principal." When asked the same question, another male student replied, "The counselors from school, because I don't know them, and I prefer to speak with someone I don't know, because if I spoke with someone I did know, I would feel ashamed." Several youth identified the counselor or principal, but more often they named their mother. Counselors and principals were mentioned as more anonymous sources of help. As stated above, going to the family and in some cases the teacher (seen in a familial light) would bring "shame" to the family

name. This type of helping seeking behavior seems to be an unintended consequence of "familismo." Strong identification with family and family honor may prevent some youth from asking for help out of respect to the family.

Although the school experienced both the presence of drugs, and drug offers, the risks were minimized by the social support of the school structure and the social bonding and modeling by the adults within the school. The school context allowed learning opportunities for youth to address drug issues within a strong pro-social supportive environment while, at the same time, providing institutional reinforcement for pro-social behaviors.

### *The After-School Context*

The school was described by the interviewees as a social context nurturing resiliency. By contrast, the after-school context lacked positive social structures and relied solely on the strong social support of the family system. There was a significant absence of opportunity for social bonding outside of the students' families. Most of the participants reported that they did not play outside or have friends in their neighborhood, and only one youth identified going to community center activities. The great majority of the youth did not have after-school peer socialization opportunities and, in many cases, did not have permission to leave the house once home from school. These responses illustrated that strong parental control focused on protectiveness and safety concerns. For example:

I can't go out on school days. I go out on Saturdays and Sundays because that is when my Mom lets me go out on my bike. I go around here. She doesn't let me go anywhere else. Every time I ask her, she wants me to tell her the address and everything. If something comes up, she goes and picks me up. (Male, 13 years old)

Other respondents described similar situations: "At home I'm, like totally over protected. Can't really go anywhere. So, I just hang out with my next-door neighbor" (Male, 14 year old). "No ... No, I do not have friends outside of school. I do not play outside of school. Because no, they do not let me go out a lot. I never leaves my home" (Female, 14 years old). "My parents don't let me. They are afraid. I stay at home. I do my chores like clean and mop and I also do my homework" (Female, 13 years old).

**Other youth identified two separate peer groups for leisure time. In most instances, the reason was due to proximity of homes and the protectiveness/safety issue. "I have different friends in my neighborhood. I just hang around with them and I go outside and play kick ball and stuff (Female, 14 years old). When asked why she had different friends she responded:**

**I live kind of far from them. Like some of them live in trailers and I live over here. Like on 1st Avenue... And that is why, because my dad won't let me go anywhere. Well they don't let me go on the streets because my dad says that's bad. That it's bad because I could do something like smoke or something can happen to me. Like people, you know how there is bad people around? They can grab me and rape me. Bad stuff can happen on the street.**

**When asked why his peer and school group was the same, the respondent replied, "Cause they live close to me, they are just school friends." A 14 year old female respondent reported that, for her, it is easier to have just one big group of friends.**

**Because it's just easier. I mean, it's easier if you have like one group of friends than if you have like one here, then at home, you have a group, and then, you know, what you have here and everything. So, if you just have one big group, it's much easier.**

**Although some students said they go out with the same groups and had after-school socialization opportunities, a factor even for these youth was the role of family in outside-of-school socialization. Students specifically noted that out-of-school time with friends was limited. For example: "When I am at home, I usually don't hang out with all of them. At school I hang out with most of them, not at home. At home I usually hang out with my sister or my cousins, my family. We play mostly at school, but sometimes at our houses" (Male, 13 years old).**

**The lack of involvement with community centers and city parks was most universal. Only one youth mentioned going to community centers after school. This student said that he went to the YMCA. However, many youth noted that they did not play outside or have friends in the neighborhood. Only a few youth mentioned that they went to the park to play. One of the reasons for that may be the presence of gangs. A 14 year old male student gave one instance: "I used to hang out with gang members. . . . Every time I go to the park, I see them over there writing their**

signs and saying stuff." One of the main reasons that the students reported minimal or no peer relationships outside of school was due to safety concerns and the protective nature, of their parents. These reactions resulted from the strain produced in the neighborhood. In fact, a few youth reported that their families moved out of neighborhoods, providing examples of parental social control. A student provided an example:

Well in our neighborhood, we want to move out of our neighborhood because there are a lot of people that go there to buy drugs in the apartments that we live in. My dad is trying to find a house for us to move into because our current neighborhood is very dangerous and there is a lot of gunfire there. I hardly ever leave my house. Or I run if I am going to a friend's house or I am taken. That is why they want to move because they say it's very dangerous for us. (Female, 13 years old)

Home and school appear to be perceived by parents and students as connected and relatively safe. After school activities are not available to them or are not accessible. Unstructured time outside of the home is not part of the experience of this group of students.

#### *Risks Factors Present in Families, Schools, and Neighborhoods*

Students, at times, encountered family environments where there was drug use or where they were using. One student described such an experience: "Uh, my Mom.... My Mom did drugs and my Step-Dad did drugs. I'm not sure about my Step-Dad. My Mom's doing them now" (Male, 14 years old). The risk factors present in neighborhoods and the impact of those factors on the substance use of a family also were apparent in the following perspective:

In my neighborhood they do a lot of drugs and things happen. In my family too ... My grandma's son, he does a lot of drugs too. My sister too. My sister tried to get me into it, and I didn't really like it. My brother too and that same day I got into it and after two days, I got out of it. I felt very bad and I told my grandma. When I do things I tell my grandma, because I tell her everything. I told her, "you know grandma I did something bad and I wasn't supposed to do it; it was the wrong thing, I know it can mess up my mind and I can't do things in school like think or nothing." I told her. Now my

family doesn't do that no more. In the neighborhood, people go by, and go to that house where they sell drugs. (Female, 13 years old)

This response touches on many of the aspects of family influences, the risk and resiliency. But for this respondent, it was the parental figure of her grandmother that changed her actions to pro-social behaviors. Most commonly, families were described as playing a role at ameliorating the risk of drug use. Once students or their families become engaged in risk behaviors, the boundaries between the different social contexts become more diffused. A student offered an example of the crossing over effects of risk and resiliency when the interviewer asked out any personal experiences with drugs.

A long time ago, before I started going to church, I used to do a lot of drugs. And, I wasn't really like going to school a lot. I would like to stay home and do like really bad stuff. Like do drugs and stuff. (Male, 14 years old)

He mentioned that he had not attended school when he was involved with drugs. The absence of the school attachment was a contributing factor to his drug use. When questioned about his mother's response, he continued,

I would get in a lot of trouble. And, I would always tell her that I really didn't care about anything, and she would tell me that, "You better start caring 'cause one of these days, you might get caught and go to jail." And I kept on telling her, "So?" and "I don't care." and "Just leave me alone. I'm gonna go out and go to my friends." And she would try to keep me in the house so I wouldn't go out and do anything wrong anymore.

This respondent also described how important his step-father was to sense of parental support, and explained how he would seek both his mother's and step-father's advice if he were in trouble.

Most of the time, they are there for me. When I do right, they'll be proud of me. But, when I do wrong, I know I did wrong so I like.... I just stay in the room for a couple . . . for a while and just think about what I did and then I'll go in and apologize to them because I know they'll feel bad. But then, my Step-dad, he used to.... He

goes to church. And he talked to me, and I started going to church, and he got married to my Mom, and just because, now that he got to me, I stopped doing that stuff. Now, I go to church and everything. I go to my Mom and my Dad because most of the time they're really always ... All the time, they're really always there for me. So, I would just go and I'll tell them what's going on and... And they'll pray about it and then ... like, pretty soon they'll have the answer to what's right or what's wrong.

This quote also highlights the role of after-school involvement with a community institution. The role of the church as a source of social support is clearly apparent in this narrative. The threat of jail was not identified as a deterrent, yet the investment of a family member, his step-dad, and involvement with his church steered the youth away from drugs.

### *DISCUSSION*

These findings confirm other research identifying family bonding and school commitment as sources of resiliency for Latino youth (Cabrera Strait, 1999; Marsiglia & Holleran, 1999; Robertson et al., 1998; Swaim et al., 1998). The neighborhoods of the large Southwestern city where the study took place are characterized by a demographic explosion, with a growing Latino population, high poverty rates, high mobility rates, and high drug use rates. Yet youth are still resistant to substance use offers. Thus, the common belief that high poverty and minority concentrations increase the likelihood of substance use does not fit in this case. This study defies these commonly held notions, which are often utilized to perpetuate myths and stereotypes of minority and impoverished populations.

The after school context presented the surprising finding that a majority of the interviewed youth did not socialize with their same school peer group after school, or they did not have a peer group after school. Often the youth said that this was due to the dangers of their neighborhood context, such as gangs. Moreover, only one youth mentioned involvement in after school institutions such as community centers, boy/girl scouts, and church groups. Involvement in structured activities is a key component in drug use prevention (Mahoney & Stattin, 2000), yet this is absent in the interviews with these youth.

The presence and strength of families in these youths' lives emerged as the cornerstone of their resiliency (Akers & Lee, 1999). The family

provides the youth with advice, direction, modeling, and support when it comes to drug use and other deviant behaviors. The family represents the foundation of resiliency in the lives of this predominately Latino/a youth sample. The school functioned as a protective institution in the resiliency of these youth. The school provided structured support, discipline, and modeling of pro-social behaviors for these youth.

The strong ties to school and family protected these youth and counterbalanced the risks present in their neighborhoods. The school, and particularly the families, provided a social bond and support that was fundamental to the resilience of these youth. The presence of opportunity and risks in this urban setting was countered by the commitment of these youth to family and school. The schools and families reciprocated their commitment in their support and reinforcement of the youth's pro-social behaviors.

### *Limitations*

The participants were mostly pre-adolescents, at a developmental age where experimentation with drugs increases rapidly. The protective effects of family and school may or may not continue as these youths grow older and more detached from family and teachers. Because both the survey and ethnographic data sets used in this analysis are cross-sectional, the study lacks longitudinal and developmental comparisons. Follow-up interviews and follow-up surveys may capture developmental changes, and the students' adjustments to them. Resiliency may continue as documented or may begin to switch to peer groups. These changes need to be understood and anticipated to effectively support them.

In some key respects, the matched group of 60 interviewees was not completely representative of the larger group of 2,125 students surveyed at the eight schools. The interviewees were more resilient and less at-risk than their classmates. Although they were originally randomly selected, the additional parental permission slips made the subsample less representative and the matching to completed surveys reduced their numbers further in some analyses reported here. Students with poor attendance records (and probably higher drug use) were less likely to be included among the interviewees. To be included they needed to be at school during both data gathering activities and have actively participated in obtaining their parents' signed permission. These factors limit the generalizability of the mixed-method findings. The ethnographic data cannot be generalized to the larger sample or other

middle school students. In future studies, innovative approaches may need to be developed to more effectively reach the at-risk student population at the same time that human subject procedures are observed.

### Implications

The implication for social work practice is that the emphasis on the family is fundamental in interventions targeting Latino/a youth. Additionally the implication of inclusion of family in clinical work with Latino/a youth regarding substance use/abuse is essential. Future social work research in this area should focus on the strengths present within minority families and communities rather than emphasizing the negative stereotypes. Addressing the issue of minority youth substance abuse in an urban context requires a unification of cultural competency, strengths based practice, and global ethnographic questions (Deweese, 2001).

On the macro level, the placement of institutional support for the Latino/a families is essential to enhancing youth resiliency. Another vital element is the impact of schools in creating attachment and commitment with the youth. Schools influence youth investment in academics, with a majority of the youth in this study seeing college in their future. The school on a mezzo level serves to create social bonds that resist the strains of the urban context and lack of community activities. The school is a vital link between the community and the family system and has tremendous potential for intervention strategies. The call for social work is to develop and enhance this linkage through expanding social work practices within school settings.

The absence of after-school opportunity is a profound finding, and rather disturbing. The lack of this macro support structure is a key element that should not be overlooked or ignored by social workers. This finding begs the question, why are there no after school opportunities in these communities of need? Critical evaluation of this finding needs to address where in the city are the after school resources, why are they there, and why are they not in these communities? The revelation from these questions may call for social workers to advocate change in the allocation of resources by local governments. If, in fact, the neighborhoods have after school services, the question will change to why do Latino students not use them? Issues of access and equity may need to be addressed.

The recommendations offered as a result of this analysis highlight several possibilities for social workers to strengthen the social bond that

ready exists between the students and their families and schools, and create and increase the community bonding opportunities that were absent in these findings. For example one major recommendation that stems from this research is that prevention programs should target families, schools and communities as partners in the intervention strategies. The role of community organizers and school social workers would be indispensable in the development of such programs.

A key role social workers can play is the role of cultural mediator (Marsiglia & Holleran, 1999). As such, social workers will provide services that nurture and maintain the protective effects of family and culture of origin as youth go through the acculturation process. Lowering the negative consequences of acculturation stress on the youth and assisting them in maintaining their protective ties to family and culture of origin could have great prevention impact on youth.

A possible concrete step in that direction would be to create Family Centers in schools-welcoming places where families could access resources, support and educational groups, information and referral services, activities for youth and families, and family assistance programs. Each collaborative effort also should target and reinforce youth attachment and family commitment to schools and communities. The lack of after school activities leaves a need for social workers to advocate for the development of after school programs and community centers in these neighborhoods. These recommendations emphasize ways to strengthen the resilient social bond with both school and family that was found in the study, and to increase the community bonding that was absent in the findings. These would enhance the web of protective factors already present within families and schools, as well as adding an important strand of community bonding.

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