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Latinx Immigrant Parent-Child Relationships: An Intergenerational Model of Cohesion, Conflict and Mental Health

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Latinx Immigrant Parent-Child Relationships: An Intergenerational Model of Cohesion,  
Conflict and Mental Health

A dissertation submitted in partial satisfaction of the  
requirements for the degree Doctor of Philosophy  
in Counseling, Clinical and School Psychology

by

Diana Evdoxia Santacrose

Committee in charge:

Professor Maryam Kia-Keating, Chair

Professor Melissa Morgan Consoli

Professor Karen Nylund-Gibson

Dr. Jessica Adams

September 2018

The dissertation of Diana Evdoxia Santacrose is approved.

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Melissa Morgan Consoli

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Maryam Kia-Keating, Committee Chair

June 2018

Latinx Immigrant Parent-Child Relationships: An Intergenerational Model of Cohesion,  
Conflict and Mental Health

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by

Diana Evdoxia Santacrose

## ACKNOWLEDGEMENTS

Over the last six years I have received incredible support and guidance from many individuals who have fostered by development in both professional and personal ways. I am incredibly grateful of the mentorship, support, and commitment to supporting me that so many people have shown me through these past several years. I could not have completed this dissertation without your support, and I want to express gratitude for the following people:

To Maryam Kia-Keating: Thank you for your invaluable mentorship, guidance, and determination. You always encouraged me to develop as a better researcher, writer, clinician, and whole person. I have so appreciated learning from your creativity and vision. I am humbled by the incredible lessons I have learned from you and our work with Proyecto HEROES.

To Jessica Adams: Thank you for your wonderful support, commitment, passion and mentorship through every step of this project. This project is so much richer because of the lessons I learned from your wisdom, humility, and encouragement.

To my committee members: Thank you for your thought-provoking questions and feedback. I so appreciate your flexibility, creativity and patience as I navigated the challenges of doing research with vulnerable populations.

To Proyecto HÉROES: You were the inspiration for this project, as I learned invaluable lessons from CAB members experiences in the community. I am so thankful to all CAB members for opening your doors to building long-lasting relationships, and the wonderful support to allow for successful completion of this project. A special thanks to all CAB members who helped us collect all the data, and for the many formal and informal

discussions that helped developed the ideas reflected in this project. I am beyond humbled by your dedication to our Latino community, the countless hours you have invested to support a better future for Latinx youth, and the creativity and passion you all bring to this work.

To our team of undergraduate research assistants: I greatly appreciate for your dedication to this work and your creativity and passion for giving back to the local community. I learned so much from you each, and have enjoyed getting to know you personally and professionally. This work could not have been possible without your dedication and commitment to Proyecto HÉROES, and for this I am grateful.

To my lab mates, by friends, colleagues, mentors and support while navigating graduate school: Cally Sprague-Knapp, Jocelyn Levitan, Caitlin Lepore, Christine Schock, Laurel Brown, Hannah Weisman, Sheila Modir, Sabrina Liu, Ginette Sims, and Ida Taghavi. Thank you for being such an incredible group of people to work with, for building such a cohesive and supportive environment. I am so grateful to have gotten to know you each both personally and professionally.

To my friends in graduate school, I am so grateful for you! Celebrating the many little moments, major milestones, finding respite in our shared laughter through the hardest parts of graduate school, I could not have done this without you. A special thank you to Mercedes Fernández Oromendia and Alexis Olson for always being there.

Most importantly, to my family, this is for you! I am so humbled by your endless support, love, and joy in celebrating every success in graduate school, and encouragement as I navigated the many hurdles and milestones these past six years. To my siblings, you are my inspiration and biggest cheerleaders, and I am so grateful to have learned so much from you all. To my mother, thank you for your unconditional love, your modeling of what it means to

be a strong, independent woman, and for always reminding me to be open, curious, and positive as I approached the many opportunities and challenges in graduate school. To my husband, thank you for always being there with endless love, encouragement, understanding, patience, and for reminding me to always work hard and to help others. I am so thankful to be a part of a family with such inspiring, strong, and humble members.

# CURRICULUM VITAE OF DIANA E SANTACROSE

Curriculum Vitae

## Diana Evdoxia Santacrose

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### EDUCATION

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- 2018 **Ph.D. in Counseling, Clinical and School Psychology, Doctoral Candidate, Emphasis in Clinical Psychology**  
(Expected) University of California, Santa Barbara, Santa Barbara, CA
- Dissertation: *Latinx immigrant parent-child relationships: An intergenerational model of cohesion, conflict, and mental health*
- Dissertation Committee: Maryam Kia-Keating, Ph.D. (Chair), Melissa Morgan-Consoli, Ph.D., Karen Nylund-Gibson, Ph.D., and Jessica Adams, Ph.D.
- 2014 **Master of Science, Counseling Psychology**  
University of California, Santa Barbara, Santa Barbara, CA  
Thesis Title: *An exploration or motivation for treatment, avoidance, and psychopathology among trauma-exposed clients*  
Thesis Advisor: Maryam Kia-Keating, Ph.D.
- 2009 **Bachelor of Science, Human Development, Emphasis in Social and Personality Development**  
Cornell University, Ithaca, NY

### AWARDS

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- Susan A. Neufeldt Award for Excellence in Clinical Supervision*, University of California, Santa Barbara,  
Department of Counseling, Clinical and School Psychology, Hosford Psychological Services  
Santa Barbara, CA, 2016.
- Outstanding Student Advocacy and Service Award*, International Society for Traumatic Stress Studies,  
New Orleans, 2015.
- Hosford Hero Clinical Award*, University of California, Santa Barbara, Department of Counseling,  
Clinical and School Psychology, Hosford Psychological Services Clinic, Santa Barbara, CA,  
2013. An award for students, faculty and staff for outstanding contribution of clinical  
services.



## **FELLOWSHIPS AND SCHOLARSHIPS**

---

- 2017            *Counseling, Clinical and School Psychology Internship Stipend Award*, University of California, Santa Barbara, Santa Barbara, CA
- 2016- 2017    *Presidents Dissertation Fellowship*, University of California, Santa Barbara, Santa Barbara, CA
- 2015            *Block Grant*, University of California, Santa Barbara, Department of Counseling, Clinical and School Psychology, Santa Barbara, CA
- 2014- 2015    *Philip and Aida Siff Educational Foundation Scholarship*, Santa Barbara, CA
- 2014            *Block Grant*, University of California, Santa Barbara, Department of Counseling, Clinical and School Psychology, Santa Barbara, CA
- 2013            *Block Grant*, University of California, Santa Barbara, Department of Counseling, Clinical and School Psychology, Santa Barbara, CA,
- 2012            *Block Grant*, University of California, Santa Barbara, Department of Counseling, Clinical and School Psychology, Santa Barbara, CA

## **RESEARCH SUPPORT**

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- 2017  
Santa            *Chicano Studies Institute Graduate Dissertation Award*, University of California, Barbara, Santa Barbara, CA
- 2017            *Society for Community Research and Action National Student Dissertation Grant*
- 2014            *CCSP Continuing Student Fellowship Research Award*, University of California, Santa Barbara, Department of Counseling, Clinical and School Psychology, Santa Barbara, CA
- 2013            *Hosford Fellowship Research Award*, University of California, Santa Barbara, Department of Counseling, Clinical and School Psychology, Santa Barbara, CA, 2013. Role: Primary Investigator

### **Travel Awards**

- 2016-2017    *Student Travel Grant*, Society for Research in Child Development annual convention, funded by the Department Clinical Counseling and School Psychology, University of California, Santa Barbara
- 2015- 2016    *Student Travel Grant*, The International Society of Traumatic Stress Studies annual convention, funded by the Department Clinical Counseling and School Psychology, University of California, Santa Barbara
- 2014- 2015    *Student Travel Grant*, The International Society of Traumatic Stress Studies annual convention, funded by the Department Clinical Counseling and School Psychology, University of California, Santa Barbara

- 2013-2014      *Student Travel Grant*, The Society of the Study of Psychiatry and Culture annual convention, funded by the Department Clinical Counseling and School Psychology, University of California, Santa Barbara
- 2012- 2013      *Student Travel Grant*, American Psychological Association annual convention, funded by the Department Clinical Counseling and School Psychology, University of California, Santa Barbara

## **PUBLICATIONS**

---

- Liu, S., Kia-Keating, M., **Santacrose, D. E.**, Modir, S. (under review). Linking profiles of neighborhood elements to health and flourishing of children across the United States. *Health and Place*.
- Wang, Q., Bee Kim Koh, J., **Santacrose, D.**, Song, Q., Klemfuss, Z., & Doan, S. N. (under review). Child-centered memory conversations facilitate children's episodic thinking: A prospective training study. *Developmental Psychology*.
- Kia-Keating, M., **Santacrose, D.**, & Liu, S. (2017). Participatory photography and social media use in community-based participatory research with youth: Ethical considerations. *American Journal of Community Psychology*.
- Kia-Keating, M., **Santacrose, D.**, Liu, S., & Adams, J. (2017). Using community based participatory research and human centered design to address violence-related health disparities among Latino/a youth. *Family & Community Health*, 40(2), 160-169.  
doi: [10.1097/FCH.0000000000000145](https://doi.org/10.1097/FCH.0000000000000145)
- Capous, D. E.**, Wallace, N. M., McNeil, D. J., & Cargo, T. A. (2016). Parent-Child Interaction Therapy across diverse cultural groups. In K. Alvarez (Ed.). *Parent-child interactions and relationships: perceptions, practices and developmental outcomes*. Hauppauge, NY: Nova Publishers.
- Kia-Keating, M., **Capous, D.**, Juang, L., & Bacio, G. (2016). Family Factors: Immigrant Families and Intergenerational Considerations. In S. G. Patel, D. Reicherter, & J. Wong (Eds.). *Psychotherapy for immigrant youth*. New York, NY: Springer Publishing Company.
- Wang, Q., **Capous, D.**, Kim Koh, J., & Hou, Y. (2014). Past and future episodic thinking in middle childhood. *Journal of Cognition and Development*.
- Capous, D.**, Gopaul-Knights, K., Haddock, A. (2013). Posttraumatic stress in children and adolescents.  
*Division 16 of School Psychology*.

## **MANUSCRIPTS IN PREPARATION**

---

- Santacrose, D. E.**, Kia-Keating, M., & Liu, S. R (in prep.). Intergenerational risk and protective factors: Moderated mediational model of interpartner violence, mental health and

parent-child communication.

**Santacrose, D. E.** & Christian-Brandt, A. (in prep.). Empirical review of interventions for pediatric medical traumatic stress.

Christian-Brandt, A., & **Santacrose, D.** (in prep.). Bedside PCIT: Building resilience among families of medically ill children.

Christian-Brandt, A., & **Santacrose, D.** (in prep.). Bedside PCIT: A manual for practitioners.

**Santacrose, D.,** & Kia-Keating, M. (in prep.). A pilot exploration of motivation for treatment, avoidance, and client symptoms among trauma-exposed clients.

**Santacrose, D.,** & Kia-Keating, M. (in prep.). School and community violence among Latino/a youth in the U.S.: Using a trauma-specific developmental framework.

## **PRESENTATIONS**

---

**Santacrose, D. E.,** Kia-Keating, M., & Liu, S. R. (2017, November). *Mental Health of Youth Exposed to Intimate Partner Violence: Moderated Mediation Model of Parent-Child Factors*. Poster presented at the 33<sup>rd</sup> annual meeting of the International Society for Traumatic Stress Studies, Chicago, IL.

Kia-Keating, M., **Santacrose, D. E.,** Liu, S.R., & Adams, J. (2017, August). *Using Community Based Participatory Research & Human Centered Design to Address Violence-Related Health Disparities among Latino/a Youth*. Symposium presentation at The American Psychological Foundation Annual Convention, Washington, D.C.

Liu, S.R., Kia-Keating, M., **Santacrose, D.,** & Modir, S. (2017, April). *Linking Profiles of Neighborhood Elements to Health & Flourishing of Children across the United States: A Latent Class Analysis*. Poster presented at the Biennial Meeting for the Society of Research in Child Development, Austin, TX.

Mora, A., Kia-Keating, M., **Capous, D.** (2016, October). *Latino/a parental barriers to help-seeking*. Poster presented at the 2016 National Latina/o Psychological Association Biennial Conferencia, Orlando, FL.

**Capous, D.,** Dunlap, D., Kia-Keating-, M., Paredes, M., Adams, J., & Smith, R. (2016, September). *Community dissemination of Parent-Child Interaction Therapy: Effectiveness of working in the context of trauma*. Poster presented at the 16<sup>th</sup> Annual Conference on Parent-Child Interaction Therapy for Traumatized Children, Los Angeles, CA.

Mora, A., Kia-Keating, M., Liu S., & **Capous, D.** (2016, August). *Utilization of campus student services among Latino/a college students: A mixed methods approach*. Individual paper presented at the University of California, Santa Barbara McNair Scholars Program Summer Research Symposium, Santa Barbara, CA.

Kia-Keating, M., & **Capous, D.** (2016, July). *Interactive discussion: Community-based participatory research with ethnic minorities: Challenges and recommendations*. Presented at the Division 45 Research Conference, Palo Alto, CA.

- Mora, A., Kia-Keating, M., **Capous, D.** (2016, June). *Barriers to mental health service utilization among Latino/as: Understanding the community perspective*. Individual paper presented at the 22nd Annual SAEOPP McNair/SSS Scholars Research Conference, Atlanta, GA.
- Kia-Keating, M., Adams, J., & **Capous, D.** (2015, November). *Using community-based participatory research methodologies to bridge trauma-informed research, policy and clinical practice with Latino youth*. Workshop presented at the 31th annual meeting of the International Society for Traumatic Stress Studies, New Orleans, LA.
- Capous, D.,** & Kia-Keating, M. (2015, November). *Daily coping and emotion regulation in the context of trauma: A longitudinal study of trauma-exposed clients*. Poster presented at the 31th annual meeting of the International Society for Traumatic Stress Studies, New Orleans, LA.
- Capous, D.,** Wallas, N., & McNeil, D. (2015, September). *Best practices for Parent-Child Interaction Therapy across diverse cultural groups*. Poster presented at the Parent-Child Interaction Therapy International Convention, Pittsburg, PA.
- Wang, Q., Kim Koh, J., **Capous, D.,** (2015, March). *Past and future episodic thinking in cultural contexts*. Individual paper presented at the SRCD Biennial Meeting, Philadelphia, PA
- Kia-Keating, M., **Capous, D.,** & Adams, J. (2015, June). *Engaging Latino first and second generation immigrant youth through photovoice*. In S. Patel (chair) Creative methodologies for addressing the psychosocial needs of immigrant youth. Symposium presented at the 15<sup>th</sup> biannual conference of the Society for Community Research and Action, Lowell, MA.
- Capous, D.,** Kia-Keating, M., Kim, A., & Weisman, H. (2014, November). *An exploration of motivation for treatment, avoidance, and psychopathology among trauma-exposed clients*. Poster presented at the International Society for Traumatic Stress Studies Annual Meeting, Miami, FL.
- Kia-Keating, M., & Weisman, H., **Capous, D.,** & Kim, A. Y., (2014, November). *Understanding the daily lives of trauma-exposed clients: Stress, coping, and emotion regulation*. Poster presented at the International Society for Traumatic Stress Studies Annual Meeting, Miami, FL.
- Patallo, B., **Capous, D.,** & Kia-Keating, M. (2014, October). *The role of emotion-focused disengagement on first-year adjustment to college*. Poster presented at the Florida International University McNair Scholars Research Conference, Miami, FL.
- Capous, D.,** Kia-Keating, M., Sprague, C., & Levitan, J. (2014, May). *School and community violence: A review of protective and promotive factors among Latino youth*. Presented at The Society of the Study of Psychiatry and Culture, San Diego, CA.
- Capous, D.,** Kia-Keating, M., Sprague, C., & Levitan, J. (2013, August). *School and Community Violence Among Latino Youth: Empirical Literature Review*. Poster presented at the 120th annual convention of the American Psychological Association, Division 27: Society for Community Research and Action, Honolulu, HI.
- Wang, Q., **Capous, D.,** Kim Koh, J. (2011, August). *Autobiographical memory in middle childhood*. Individual paper presented at the 5th International Conference on Memory, York, England.

## CONFERENCE PLANNING

---

*Nuestras Escuelas: Voces de la Comunidad (Our Schools: Community Voices)*. Franklin Elementary School, Santa Barbara, CA, May 2014.

*Esta es nuestra comunidad: Estos son nuestros hijos (This is our community: These are our children)*. United Methodist Church, Santa Barbara, CA, September 2014.

*Comunidad Unidos: Community unity*. Lower Westside Community Center and Family Opportunity Center, Santa Barbara, CA, May 2015.

## INVITED PRESENTATIONS

---

**Santacrose, D.** (October, 2017). *Parent Child Interaction Therapy: Working with Medically Complex Patients in Hospital Settings*. Invited presentation for the Pediatric Consult/Liaison Service at University of California, Los Angeles.

**Capous, D.,** & Liu, S. (November, 2016). *Using Dialectical Behavior Therapy with Adolescent Populations*. Invited presentation for an Advanced Fieldwork Supervision Course in the Department of Counseling, Clinical, and School Psychology at the University of California, Santa Barbara.

**Capous, D.,** & Stanley-Olson, A. (June, 2016). *Dialectical Behavior Therapy*. Invited presentation for an Advanced Fieldwork Supervision Course in the Department of Counseling, Clinical, and School Psychology at the University of California, Santa Barbara.

Adams, J., Kia-Keating, M., & **Capous, D.** (October, 2014). *Proyecto HEROES: Trauma, violence prevention, and Latino youth*. Invited presentation for the Community Action Commission, Santa Maria, CA.

Adams, J., Kia-Keating, M., & **Capous, D.** (October, 2014). *Proyecto HEROES: Trauma, violence prevention, and Latino youth*. Invited presentation for the Child Abuse Prevention Council, Buellton, CA.

Kia-Keating, M., Adams, J., & **Capous, D.** (July, 2014). *Proyecto HEROES: Trauma, violence prevention, and Latino youth*. Invited presentation for the South Coast Task Force on Youth Gangs, Goleta, CA.

## RESEARCH EXPERIENCE

---

2013- 2017      **Project Coordinator**  
**Preventing Violence and Racial Disparities for Latino Youth**  
**Proyecto HEROES (Honor, Education, Respect, Opportunity, Hope, Solutions)**  
University of California, Santa Barbara  
Principal Investigators: Maryam Kia-Keating, Ph.D. and Jessica Adams, Ph.D.  
National Institute of Child Health and Human Development, 1R13HD075495-01A1

2013-2015      **Graduate Student Researcher**  
**Daily Stress, Coping, and Clinical Outcomes**

**Trauma Recovery and Resilience Center: Risk & Resilience Laboratory**

University of California, Santa Barbara

Principal Investigator: Maryam Kia-Keating, Ph.D

- 2015 **Graduate Student Researcher**  
**Evaluation of Fresh Start Program: Residential Treatment for Mothers and Children**  
University of California, Santa Barbara  
Principal Investigator: Merith Cosden, Ph.D.
- 2010- 2012 **Research Assistant & Intern Coordinator**  
**Project STEP (Successful Transitions in Ethological Perspectives)**  
University of Rochester  
Principal Investigators: Patrick Davies, Ph.D. and Melissa Sturge-Apple, Ph.D.
- 2009- 2010 **Research Associate**  
**Middle Childhood Project, Social Cognition Development Lab**  
Cornell University  
Principal Investigator: Qi Wang, Ph.D.
- 2009 **Research Assistant**  
**Early Childhood Cognition Lab**  
Cornell University  
Primary Investigator: Tamar Kushnir, Ph.D. and Nadia Chernyak, Ph.D. Candidate

**CLINICAL EXPERIENCE**

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- 2017-  
present **Predocloral Psychology Intern, Stress, Trauma and Resilience Track**  
**UCLA Semel Institute for Neuroscience and Human Behavior**  
Director: Rhonda Sena
- Therapist & Assessor, Stress, Trauma, and Resilience Clinic*  
Supervisors: Catherine Mogil, Psy.D., Patricia Lester, M.D., and Blanca Orellana,  
Ph.D.
- Therapist & Assessor, TIES for Families*  
Supervisors: Victor Rico, PhD.
- Therapist & Assessor, Child Obsessive Compulsive Disorder Intensive Outpatient Treatment Program*  
Supervisors: Lindsey Bergman, Ph.D. and Michelle Rozenman, Ph.D.
- Consultant, Pediatric Consultation-Liaison Service*  
Supervisors: Brenda Bursch, Ph.D., Margaret Stuber, M.D., and Jena Lee, M.D.
- Consultant, Adolescent Medical Clinic*  
Supervisor: Brenda Bursch, Ph.D.
- 2014- 2017 **Practicum Clinician/ Psychological Assistant**

**Child Abuse Listening and Mediation (CALM), Santa Barbara, CA**

Supervisors: Ryan Smith, Psy.D., Jessica Adams, Ph.D., and Dora Dunlap, LCSW

- 2016 **Psychiatric Health Facility, Santa Barbara County Department of Behavioral Wellness, Santa Barbara, CA**  
**Clinical Extern**  
Supervisors: Cecile Lyons, Ph.D.
- 2013- 2017 **Hosford Psychological Assessment Clinic of Santa Barbara, Santa Barbara, CA**  
**Junior Clinician and Senior Clinician**  
Supervisors: Erik Lande, Ph.D., Jordan Witt, Ph.D., and Steve Smith, Ph.D.
- 2013- 2014 **Hosford Counseling and Psychological Services Clinic of Santa Barbara, Santa Barbara, CA**  
**Practicum Clinician**  
Supervisor: Steve Smith, Ph.D.
- 2013- 2014 **Child Abuse Listening Mediation (CALM)**  
**Assessment Specialist**

**TEACHING AND MENTORING EXPERIENCE**

---

- Spring 2016 **Volunteer Teaching Assistant**  
Department of Counseling, Clinical and School Psychology  
University of California, Santa Barbara  
Research as a Personal and Political Act: Participatory Research with the Latino Community in Santa Barbara (Undergraduate)
- Summer 2015 **Teaching Associate (Instructor of Record)**  
Department of Counseling, Clinical and School Psychology  
University of California, Santa Barbara  
Psychology of Gender (Undergraduate)
- Winter 2015 **Teaching Assistant**  
Department of Psychological and Brain Sciences  
University of California, Santa Barbara  
Helping Relationships Theory and Practice (Undergraduate)
- Fall 2014 **Teaching Assistant**  
Department of Psychological and Brain Sciences  
University of California, Santa Barbara  
Advanced Research Methods (Undergraduate)  
Applied research methods lab course
- Summer 2014 **Teaching Assistant**  
Department of Psychological and Brain Sciences  
University of California, Santa Barbara  
Peer Helping (Undergraduate)

Spring 2014    **Teaching Assistant**  
Department of Psychological and Brain Sciences  
University of California, Santa Barbara  
Introduction to Vocational Counseling (Undergraduate)

Spring 2013    **Teaching Assistant**  
Department of Psychological and Brain Sciences  
University of California, Santa Barbara  
Advanced Research Methods (Undergraduate)  
Applied research methods lab course

Fall 2008      **Teaching Assistant**  
College of Human Ecology  
Cornell University  
Collaborative Leadership (Undergraduate)

### **Other Mentoring Experiences**

2016            **Graduate Student Mentor**  
McNair Scholars Program  
University of California, Santa Barbara

2014            **Graduate Student Mentor**  
Academic Research Consortium (ARC) Summer Program  
University of California, Santa Barbara

2013- 2014    **Resident Advisor**  
University of California, Santa Barbara

2007- 2009    **Resident Advisor**  
Cornell University

### **CLINICAL SUPERVISION EXPERIENCE**

---

2015- 2016    **Hosford Counseling and Psychological Services Clinic of Santa Barbara, Santa Barbara, CA**  
**Clinical Supervisor & Outreach Coordinator**

2013- 2017    **Hosford Psychological Assessment Clinic of Santa Barbara, Santa Barbara, CA**  
**Senior Clinician**

2016            **University of California, Santa Barbara Doctoral Training in Basic Practicum, Santa Barbara, CA**  
**Supervisory Coach**

### **TRAININGS AND CERTIFICATIONS**

---

#### **Trainings**

2017            Adoption-Specific Prevention Treatment (ADAPT), 1-Day Training  
TIES For Families, University of California, Los Angeles



Developers & Trainers: Audra Langley, Ph.D. and Jill Watterman, Ph.D.

- 2017 Families Overcoming Under Stress (FOCUS for Families), 2-Day Training  
Nathanson Family Resilience Center, University of California, Los Angeles
- 2015- 2016 Parent-Child Interaction Therapy: 40-Hour Training Workshop, 2-Day Advanced  
Training, and Year-Long Consultation, University of West Virginia, Morgantown,  
WV  
Master Trainer: Dr. Cheryl McNeil
- 2015- 2016 Gottman Institute Level 1 2-Day Training, and Level 2 4-Day Training. Video-based  
trainings with consultation from a Master Trainer in the Gottman Method
- 2014- 2015 Dialectical Behavior Therapy two half-day training, Year-Long Consultation Team,  
Child Abuse Listening and Mediation, Santa Barbara, CA  
Consultation Supervisor: Lisa Ulrich
- 2014 Community-Based Participatory Research day-long Workshop, Child Abuse  
Listening and Mediation, Santa Barbara, CA  
Facilitators: Drs. Deborah Koniak-Griffin and Janna Lesser
- 2014 Trauma-Focused Cognitive Behavioral Therapy 2-day training.
- 2008 Monster Diversity Leadership Training

### **Certifications**

- 2016 Certificate of Completion of the Level 2 Training: Assessment, Intervention and Co-  
Morbidity: Gottman Method Couples Therapy
- 2015 Certificate of Completion of the Level 1 Training: Bridging the Couple Chasm:  
Gottman Method Couples Therapy

### **COMMUNITY SERVICE**

---

- 2015- 2016 Outreach Coordinator  
Hosford Counseling and Psychological Services Clinic  
Table and present at events in the community  
Topic: Access to mental health
- 2013- 2017 Community Outreach  
Proyecto HEROES  
Table and present at events that community partners host  
Topic: Violence prevention, teen mental health, and community services
- 2013 Community Presenter  
Everybody Does Outreach  
Hosford Counseling and Psychological Services Clinic Community Outreach  
Program  
Topic: "Life Balance" Presentation for Spanish speakers

## **PROFESSIONAL AFFILIATIONS**

---

*American Psychological Association (APA)*

APA Division 12 (Clinical Psychology)

APA Division 27 (Society for Community Research and Action)

APA Division 56 (Trauma)

*International Society for the Study of Traumatic Stress (ISTSS)*

## **DEPARTMENTAL/ PROFESSIONAL SERVICE**

---

### **Departmental and University Committees:**

2015- 2016     *Associated Students Representative*, Department of Clinical, Counseling & School Psychology

2014- 2015     *Committee Member*, GGSE Hosford Clinic Committee

2013- 2015     *Clinical Chat Hour Coordinator*, Department of Clinical, Counseling & School Psychology

2013- 2014     *Committee Member*, GGSE: Diversity and Equity Committee, 2013-14

### **Professional Committees:**

2015- 2017     *Student Representative Board Member*, Santa Barbara County Psychological Association

2013- 2017     *Campus Representative*, Advocacy Coordinating Team, American Psychological Association of Graduate Students

## ABSTRACT

### Latinx Immigrant Parent-Child Relationships: An Intergenerational Model of Cohesion, Conflict and Mental Health

by

Diana E. Santacrose

In the United States, one fifth of school-aged children are Latinx, a majority who are first or second generation immigrants (Pew Hispanic Center, 2009). Given the rise in this population of Latinx immigrant youth, scholars recommend the need to develop a more in-depth understanding of influences contributing to deleterious mental health outcomes for Latinx immigrant families (Ornelas & Perreira, 2011). Among these, include family processes, such as family conflict. Latinx immigrant youth and parents often experience stress and family conflict (Lau, McCabe, Yeh, Garland, Wood, & Hough, 2005), impacting family cohesion (Leidy et al., 2010), and mental health outcomes (Hovey & King, 1996). There is also a dearth of research that studies typical parenting practices among immigrant populations (Perreira, Chapman, & Stein, 2006). Utilizing community-based participatory research and mixed methods approaches, the current study extends this line of research by examining family cohesion, family conflict, and parent-child relationships in the presence of a multitude of stressors. Moreover, the current study investigated the relationships between parents' mental health, family cohesion, family conflict and youths' depression. To examine

these relationships the current study used focus groups with 64 immigrant parents, and a battery of measures with 38 parent-youth dyads who were predominantly from Mexico.

Based on focus group results we developed an integrated theoretical model of family cohesion, family conflict and parent-child relationships that includes four common parent-child interactions Mexican immigrant families engaged in when facing stressors. Results also indicated significant differences in parents' and youths' reports of family cohesion and family conflict. Family cohesion and family conflict were both significantly related to youths' and parents' depression. However, parents' depression was not found to moderate the relationships between family cohesion/family conflict and youths' depression. Implications for Latinx immigrant prevention and intervention efforts will be discussed.

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## CHAPTER ONE: INTRODUCTION

### Latinx Immigrant Parents and Youth in the United States

The constellation of families in the United States (U.S.) has gradually been changing since 1990, with a rise in the children being raised by at least one immigrant parent (Migration Policy Institute, 2018). In 2016, these national rates indicated that a quarter of children in the U.S. lived with at least one immigrant parent. Further, there are specific states that reflect even higher rates; for example, in California, 1 in 2 children are raised by at least one immigrant parent (Migration Policy Institute, 2018). Moreover, nearly half of immigrants in the U.S. identify as Latinx<sup>1</sup> (Zong, Batalova, & Hallock, 2018), and among immigrant children the majority are from Mexico (Child Trends Data Bank, 2014). Considering the rise in this ethnic and racial population in the U.S., scholars have recommended the need to develop a more in-depth understanding of influences contributing to deleterious mental health outcomes for Latinx immigrant families (Ornelas & Perreira, 2011). Research indicated that children of Latinx immigrants exhibit higher rates of living in poverty (Macartney, 2011) and are more likely to experience trauma exposure (Bernal & Saez-Santiago, 2006; Fortuna, Porcheb, & Alegria, 2008; Jaycox et al., 2002) and risk factors

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<sup>1</sup> The term Latinx was chosen to be inclusive of gender identities, and when used we are referring to individuals or groups who identified as male or female. We chose to use the term Latinx rather than Hispanic based on preferences in terminology from the region in which this study took place. We recognize that the terms Latino/a or Latinx are U.S. created terms to identify a very heterogenous group of individuals, and that there are often differences within the Latinx population, including within-group differences that may exist from individuals from a shared country of origin. Throughout the study we will explicitly note if research cited was about a particular group and otherwise will use the term Latinx to include descriptions of samples from multiple Latin cultures.

associated with poor mental health outcomes (Gallo, Penedo, Espinosa de los Monteros, & Arguelles, 2009).

Latinx immigrant adults are also subject to unique challenges associated with poor mental health outcomes. Specifically, Latinx immigrant adults experience discrimination and acculturative stress, which are commonly associated with anxiety and depression (Leong, Park & Kalibatseva, 2013). In the context of facing these various stressors, Latinx immigrant youth and parents are challenged by family conflict (Laursen, Coy, & Collins, 1998), intergenerational acculturation gaps (Schofield, Parke, Kim, & Coltrane, 2008) and language difficulties (Morales & Hanson, 2005) that may strain parent-child relationships.

Given the multitude of risk factors faced by immigrant parents and youth, it is imperative to better understand parent-child relationships, highlighting the protective role of family factors, and the experience of parenting in the context of these stressors. Researchers established the protective role of various family factors, including parent-child relationships (Schofield et al., 2008), parental support (Bámaca-Colbert, Umaña-Taylor, & Gayles, 2012) and family cohesion (Leong et al., 2013), that buffer from poor mental health outcomes. Yet as previously noted, having a more in-depth understanding of the poor mental health outcomes of Latinx immigrant families is needed (Ornelas & Perreira, 2011). Thus, the current study aimed to fill this gap by using mixed methods and community-based approaches. Furthermore, we aimed to gain an in-depth understanding of the nature of Latinx immigrant parent-child relationships, and examine family risk and protective factors as associated with youth mental health outcomes.

This review provides an overview of research on Latinx immigrant parenting and select research on parent-child relationships in immigrant families. Next, we will discuss

various risk and protective factors impacting Latinx families, first by presenting the theoretical framework used and then presenting select family- and community-level factors. Last, we will discuss mental health outcomes for Latinx immigrant youth.

### **Parenting and Parent-Child Relationships in Latinx Immigrant Families**

There is a dearth of research that studies typical parenting practices among immigrant populations (Perreira, Chapman, & Stein, 2006), and similarly, research on Latinx parenting practices is limited (Ceballo, Kennedy, Bregman, & Epstein-Ngo, 2012). Researchers criticized previous qualitative studies examining acculturation among Latinx immigrant parents for being limited in scope of the contexts explored (e.g., school or health systems) (Perreira et al., 2006). Furthermore, existing qualitative research with Latinx immigrant parents also falls short of considering parenting in the context of simultaneous community-level stressors (e.g., community violence, work stressors, school discrimination or broader community context). Researchers have begun to incorporate contextual considerations into their examinations of Latinx parenting practices. For example, in a study that examined parenting practices in high-risk neighborhoods (e.g., marked by poverty and community violence), among 49 low-income Latina mothers, parental monitoring and parent-child communication were identified as important for effective parenting (Ceballo et al., 2012). Although this study integrated contextual considerations in the fabric of Latinx parenting using qualitative methods, it only minimally discussed the unique aspects of Latinx immigrant parenting experiences, even though over half of the parents in the study were immigrants. The current study aimed to address this gap in qualitative research by integrating unique Latinx parenting experiences as immigrants with a consideration of contextual stressors.

Other researchers found that qualities of parenting practices among Latinx immigrant families, such as supportive parenting, served a protective role from various familial stressors and youths' mental health outcomes. For example, in a sample of Mexican adolescents, maternal supportive parenting demonstrated both direct and indirect predictive associations with depression; such that greater supportive parenting was associated with less depression symptoms for early-adolescents, and the relationship between supportive parenting and depression symptoms was mediated by conflict for both early- and middle-adolescents (Bámaca-Colbert et al., 2012).

Similar to parenting practices, the importance of parent-child relationships has been emphasized as a critical factor in families and child development for decades. The links between parent-child relationship quality and mental health outcomes are also well established (Brumariou & Kerns, 2010). Among research examining Latinx immigrant families (predominately from Mexico with a few families from Colombia, Argentina, and one from El Salvador), a majority focused on acculturation gaps and family conflict (Perreira et al., 2006), which will be discussed later. However, in efforts to establish an understanding of good parent-child relationships, researchers used qualitative approaches to learn from Latinx immigrant youth and parents (e.g., Crockett, Brown, Russel, & Shen, 2007; Perreira et al., 2006). First- and second-generation Latinx adolescent perspectives of good parent-child relationships were examined using focus groups. Specifically, in a study with 19 Mexican teens, themes of support (e.g., emotional and physical), parenting control (e.g., monitoring, strictness, lax parenting), open communication, indirect displays of affection, and values (e.g., trust and respect) emerged, with "open communication as the hallmark of a good relationship with both parents" (Crockett et al., 2007; p.658). Similarly, in another qualitative

study, Latinx immigrant parents denoted the importance of parent-child communication (Perreira et al., 2006). The protective role of parent-child relationships have also been examined using quantitative approaches. For example, parent-child relationship quality moderated the relationship of intergenerational acculturative gap, father-child conflict and behavior problems for Latinx youth (Schofield et al., 2008). Overall, these findings highlight aspects of good parent-child relationships, the importance of communication as an indicator of a good relationship, and established the protective role of these relationships in the lives of Latinx immigrant families.

### **Theoretical Framework**

The current study examined unique family processes impacting Latinx immigrant parents and their youth using a cultural framework of resilience by employing the Cultural-Ecological- Transactional Perspective (Kuperminc, Wilkins, Roche, & Alvarez-Jimenez, 2009). This perspective builds on Bronfenbrenner's (1979) Transactional- Ecological Model by integrating the contribution of cultural factors in developmental processes.

Bronfenbrenner's (1979) model emphasizes the interactions that influence development across and between different systems, including: the *microsystem* (settings in which the individual lives and interacts; e.g., family and school), the *mesosystem* (more distant level that is characterized by interactions between microsystems), the *exosystem* (norms and policies related to the communities in which the child and family reside), and the *macrosystem* (ideologies, cultures, and social institutions).

Researchers have critiqued Bronfenbrenner's model as well as other mainstream developmental models for being "too narrowly defined and applied, without elaborating those considerations unique to populations of children of color (e.g., the culturally diverse

physical and psychological attributes of individual children of color, the contexts specific to their daily experience, the racial and ethnic values that influence their competencies, and the societal structures that limit them)” (Garcia Coll et al., 1996, p. 1894). Kuperminc and colleagues (2009) attempt to integrate these considerations into the Cultural-Ecological-Transactional Perspective as they apply to a model of resilience by which an individual child/youth navigates interactions between their heritage culture and mainstream culture through a vital developmental process. In turn, cultural factors (e.g., values, norms, and actions) are involved in interactions/transactions with each ecological level and influence outcomes for the child/youth (Reyes & Elias, 2011).

### **Risk and Protective Factors for Latinx Immigrant Parents and Youth**

#### *Unique Stressors and Risk Factors*

Immigrant parents and their youth may encounter various stressors or be exposed to traumatic experiences (Kia-Keating, Capous, Juang, & Bacio, 2016). Foster (2005) posits that immigrants may experience *peri-migration trauma*, known as distress that occurs during various parts of the migration process as immigrants encounter various stressors. Pre-migration stressors may include living in impoverished and crime-ridden communities (Partida, 1996). While migrating, individuals may be subject to harsh living conditions, witness death, loss or separation from family members. Immigrants may encounter stressors of rejection as they seek asylum, and lastly may experience ongoing stressors while trying to survive as immigrants in a new country (Foster, 2005). In post-migration, immigrant and ethnic/racial minority parents and youth are subject to continuous stressors. These stressors could include loss of social support or extended family, documentation status, financial

struggles and lack of parental supervision due to parent's working longer hours (Smokowski & Kurtines, 2011).

Research exclusively studying the experience of Latinx immigrant families in the U.S. established the pervasiveness of various unique challenges or stressors faced by this ethnic minority group. For example, acculturation gaps are a common experience among high risk Latinx parent-adolescent dyads (Lau et al, 2005), and were described by adolescents as leading to clashes and a stressful family context (Cordova, Ciofu, & Cervantes, 2014). Even in the context of migrating for hopes of a better future for their children, parents and youth are faced with challenges traversing two cultures, with parents playing an important role in providing access to these cultures (Leyendecker et al., 2018).

Navigating two cultures for Latinx immigrant families may be especially difficult given challenges with language proficiency, adjusting to a new environment and perceived discrimination (Gudiño, Nadeem, Kataoka, & Lau, 2011). Discrimination is another identified stressor confronted by Latinx youth, who report daily experiences of this stressor (Edwards & Romero, 2008; Kulis, Marsiglia, & Niegri, 2009), and a challenge immigrant parents describe as impacting their parenting (Leidy, Guerra, & Toro, 2010). Stressors in neighborhood contexts were also found to be disproportionately higher for Latinx youth in the U.S. For example, Latinx youth report being three times more likely to witness community violence compared to youth of other ethnic/racial groups (National Child Traumatic Stress Network, 2005). Additionally, Latinx immigrant youth who recently immigrated report being exposed to higher rates of violence in the U.S. compared to pre-migration or during the migration process (Gudiño et al., 2011). These pervasive challenges will be discussed next in

context of community-level and intra-familial stressors with implications for Latinx immigrant mental health.

**Community-level stressors: Community Violence.** A prominent community-level stressor is community violence exposure. *Community violence* has been defined as exposure to violent acts that take place in public by people that are not related to the victim or witness of violence (National Child Traumatic Stress Network, 2005). Latinx youth are exposed to high rates of community violence and consequently experience the deleterious psychosocial effects that witnessing or victimization is associated with.

Latinx youth are exposed to disproportionate rates of violence compared to Caucasians (Ford, Hartman, Hawke, & Chapman, 2008) and other ethnic/racial groups (Aisenberg, Ayón, & Orozco-Figueroa, 2008; National Child Traumatic Stress Network, 2005). Consistently, high rates of violence exposure were cited among middle school-aged youth (e.g.,  $n = 164$ ; 59% reported direct victimization and 87.2% reported witnessing violence) (Aisenberg et al., 2008) and high school students (e.g.,  $N = 1,601$ ; 63% were victims of violent threats or assaults and 88% were witnesses to such violence) (Kataoka et al., 2008). Reports of Latina mothers were similarly high, with 77% of mothers reporting community violence exposure (Aisenberg, 2001). These high rates are especially concerning given the well-established links between exposure to community violence and behavioral problems (Gudiño et al., 2012), increased violent behaviors among adolescents (Brady, Gorman-Smith, Henry & Tolan, 2008; Gorman-Smith & Tolan, 1998), and poor mental health outcomes (e.g., PTSD, depression) (Aisenberg, Trickett, Mennen, Saltzman, & Zayas, 2007; Franco Suglia, Ryan, Bellinger, Enlow, & Wright, 2011).



Broadening the dialogue of Latinx parents tasked with raising children in communities of violence, researchers integrated considerations of the role of parents and family factors (Aisenberg et al., 2007). This line of research has also expanded to include considerations of the effect of community violence exposure on parent psychopathology, parenting, and youth outcomes (Aisenberg et al., 2007; Franco Suglia et al., 2011; Self-Brown, LeBlanc, Kelley, Hanson, Laslie, & Wingate, 2006; Westbrook & Jones Harden, 2010). Qualitative research also contributed to the dialogue by highlighting the voices and unique experiences of Latinx parents raising youth in high-risk neighborhoods (Ceballo et al., 2012). The current study aimed to integrate considerations of the stressor of community violence in an in-depth understanding of Latinx immigrant parenting and parent-child relationships.

**Intra-familial stressors: Family Conflict, Acculturation Gaps, and Parents' Mental Health.** Latinx immigrant families experience various intra-familial stressors that may impact family functioning and youth mental health. Two common stressors noted in the literature are *family conflict* and *acculturation gaps*. Family conflict among immigrant families was often discussed in the context of acculturation (Kapke et al., 2017; Smokowski et al. 2017). Szapocznik & Kurtines (1993) suggested that parent-child conflict would arise from differing values, interests, and language proficiency among immigrant parents and their youth. Scholars have established that these intergenerational differences in values were more distinct as time in the U.S. increases (Phinney, Ong, & Madden, 2000). Further, youth recognized that these intergenerational differences were significant. Researchers examining intra-familial stressors among 170 Latinx adolescents involved in 25 focus groups found that adolescents identified parent-adolescent acculturation discrepancies to be pronounced

(Cordova et al., 2014). Specifically, they found that among predominantly first and second generation Latinx adolescents, intra-familial stressors related to acculturation discrepancies were comprised of overprotective parenting, challenges of language brokering, mistrust of speaking English, disapproval of youth becoming more American, and gender differences in families. These differences in values have been identified as *acculturative gaps*, and are assumed to pose a risk for youths' problem behavior (Marsiglia, Kulis, Fitz Harris, & Becerra, 2009) and have been noted to impact positive parenting and family cohesion (Leidy et al., 2010). Given the multitude of risk factors faced by immigrant parents and youth, it is imperative to better understand parent-child relationship, highlighting the protective role of family factors, and the experience of parenting in the context of these stressors.

The influence of acculturative gaps on mental health outcomes has been examined using the acculturative gap stress hypothesis, which posits that intergenerational gaps in values and acculturation may source family conflict that then leads to adolescent adjustment difficulties (Lee, Choe, & Ngo, 2000; see Telzer, 2010 for a review on the acculturative gap distress model). It is noteworthy that some scholars found contradictory evidence related to the acculturative gap stress hypothesis. For example, one study found no relationship between acculturation gaps and increased family conflict or conduct problems in youth (Lau et al., 2005); while others found conflict to be associated with high rates of depression, regardless of family acculturation, suggesting the mediating role of family conflict (Gonzales, Deardorff, Formoso, Barr, & Barrera, 2006). Researchers also found partial support of the acculturation gap stress hypothesis with middle-adolescents (e.g., ages 14-17) but not for early-adolescents (e.g. ages 12-14) (Bámaca-Colbert et al., 2012). A more direct pathway between acculturative gaps and youth outcomes was also examined. For example,

one study with 142 Mexican mother-adolescent dyads found that acculturative gaps were related to significantly greater levels of externalizing difficulties (Marsiglia et al., 2009). Hovey and King (1996) also established the direct relationships between acculturative stress (e.g., family gap stress) and depressive symptoms, dissociation, and lifetime exposure to community violence with a large sample of Latinx adolescents ( $N = 304$ ). Although research on the acculturative gap distress model is mixed, there is support to indicate the deleterious mental health implications of both acculturative gaps and family conflict, or parent-child conflict.

As with other populations, family conflict has also been recognized as a pervasive mental health stressor among Latinx immigrant populations. Researchers employing CBPR approaches in their work with 53 Latinx immigrant adolescents and parents found family conflict to be noted as a prevalent mental health stressor across the eight focus groups (Garcia & Lindgren, 2009). Adolescents in their study often referred to parent-child conflict, which was expected of their developmental stage, whereas parents noted concerns for interpartner conflict more frequently. Congruent with developmental considerations, Laursen, Coy, and Collins (1998) conducted a meta-analysis and found parent-child conflict to be the highest in early through middle adolescence. Together these results suggest the importance of examining intergenerational conflict across a wide range of developmental stages.

Family conflict is a risk factor among Latinx immigrant youth. In a large study of immigrant youth ( $N = 2,063$ ) family conflict strongly predicted youth depression and self-esteem (Rumbault, 2000). Researchers also found family conflict to be associated with youth aggression (Smokowski & Bacallao, 2006; Smokowski et al., 2017), emotional distress

(Chung, Flook, & Fuglini, 2009), and depression (Dennis, Basañez, & Farahmand, 2010). Long lasting impacts of family conflict were also found. For example, researchers found longitudinal relationships between family conflict and depression between middle school and high school (Fosco, Ryzin, Connell, & Stormshak, 2016).

Expanding on research on family conflict, scholars have begun to integrate multiple contextual considerations in their modeling of risk and protective factors that impact mental health outcomes for Latinx immigrant youth. For example, Bámaca-Colbert and colleagues (2012) used multiple group path analyses in their study with 271 Mexican immigrant adolescents and their mother to elucidate a contextual model of depression. They found mother-daughter conflict to be associated with increased depressive symptoms among early- and middle-adolescents. It is interesting that Bámaca-Colbert and colleagues modeled these relationships with mother-adolescent dyads, especially considering that adolescents report higher rates of conflict in relationships with their mothers compared to their fathers (Chung et al., 2009). Bámaca-Colbert and colleagues' (2012) developmental-contextual model of depressive symptoms contributes a comprehensive model of the interplay of various family processes that impact youths' mental health. However, attention to the influence of parents' depressive symptoms on family risk or protective factors (e.g., parent-child conflict, acculturative gaps, supportive parenting) would strengthen this relational and contextual approach to understanding factors impacting youths' depression.

In terms of Latinx immigrant parents' depression, findings indicate the prevalence of symptoms (Ornelas & Perreira, 2011) and associated impact on youths' mental health (Corona, Lefkowitz, Sigman, & Rumo, 2005) and family processes (e.g., Gilbert, Spears Brown & Mistry, 2017; Ornelas & Perreira, 2011). Among Latinx immigrant parents, pre-

migration, migration, and post-migration factors were associated with depression symptoms (Ornelas & Perreira, 2011). In turn, Latinx immigrant parents' symptoms of depression were associated with youths' internalizing and externalizing behaviors (Corona et al., 2005).

Furthermore, depression was also found to impact family factors, such as familism (Ornelas & Perreira, 2011), and Latinx immigrant parenting, as seen with reduced parental monitoring (Gilbert et al., 2017). Among a sample of Mexican American two-parent families, parent depression mediated the relationship between work pressure, warmth and conflict in the parent-adolescent relationship (Wheeler, Updegraff, & Crouter, 2011). These findings suggest the importance of considering the mediating or moderating role of parent depression in the relationship with family factors.

Little is known about the role of parents' depression on the relationships between risk or protective factors and youth outcomes among Latinx immigrant families. Fendrich, Warner and Weissman (1990) found that in the presence of family risk factors, parental depression consistently served as a more significant predictor of youths' depression and anxiety in their study of youth with depressed ( $n = 153$ ) and non-depressed ( $n = 67$ ) parents. Fendrich and colleagues found that youth who had a depressed parent reported higher rates of family discord and lower family cohesion when compared to youth with a non-depressed parent. Additionally, when considering the relationship between family risk factors and youth outcomes, they found that reports of parent-child conflict and low family cohesion were related to prevalence of conduct disorder among the youth with a depressed parent when compared to youth of non-depressed parents. It is noteworthy, that although their sample represented a diverse age range (e.g., between 6 and 23 years-old) the youth and families were all White. Further research is needed to understand these relationships as they apply to

Latinx immigrant families given the multifaceted stressors, risk and protective factors commonly found in this ethnic minority group.

### *Protective Factors for Latinx Immigrant Parents and Youth*

Current research on protective factors that buffer stressors and associated outcomes offers a useful vantage point for understanding family strengths and functioning among Latinx immigrant families, as well as the effects on youth outcomes. Scholars suggested that supportive parenting may shield children from the adverse effects of environmental adversities and stressors (Leidy et al., 2010). For example, parental support was found to moderate the relationship between acculturative stress on mental health symptomology (e.g., anxiety and depression) (Crockett et al., 2007). Inclusive of parenting, the theme of family support as a protective factor has been explored in the context of culturally related stressors, trauma exposure and mental health (Gonzales et al., 2006; Gorman-Smith, Henry, & Tolan, 2010). Another family-level protective factor examined in relation to Latinx immigrant families is *family cohesion*.

**Family Cohesion.** Olson, Russel, and Sprenkle (1982) defined family cohesion as emotional closeness and bonds between family members. Family cohesion has consistently shown utility as a protective factor that buffers against mental health outcomes for immigrant youth. For example, in a large sample of immigrant youth in Southern California, family cohesion was found to be a significant predictor of self-esteem and depression (Rumbault, 2000). Other researchers established that family cohesion was related to psychological distress, such that higher cohesion was associated with lower levels of distress among diverse groups of Latinx (e.g., Cubans, Mexicans, Puerto Ricans, and other Latinx) (Riviera et al, 2008). In a study with 151 first- and second-generation immigrant Mexican adolescents and

their parents, family cohesion was related to conduct problems and rule-breaking behavior (Marsiglia, Parsai, Kulis, & Southwest Interdisciplinary Research Center, 2009). Considering community-level stressors, family cohesion has also demonstrated protective capabilities. For example, family cohesion buffered the relationship between Latinx youths' community violence exposure and substance use (Kliewer et al., 2006; Ramírez García et al., 2010). Researchers also examined the promising protective effects of family cohesion beyond exposure to extreme risk. Leidy and colleagues (2010) found that family cohesion was associated with increases in youths' problem solving skills and self-efficacy among a sample of 282 Latinx parent-child dyads.

Family cohesion also serves a protective role in the context of Latinx immigrant parenting. Specifically, one study examined cultural differences in cohesion and parenting practices in the context of stressors among Mexican American and European American parents (Behnke et al., 2008). Behnke and colleagues found that compared to European American mothers, Mexican American mothers demonstrate consistent parenting practices (e.g., use of discipline) and greater nurturing parenting styles when they rated family cohesion high.

**Discrepancies in Reporting of Risk and Protective Factors Among Latinx Families.** Interestingly, scholars found discrepancies in reporting of various intra-familial risk and protective factors. For example, in a large study of 972 parent-child dyads, parent and adolescent discrepancies of reports of family functioning (e.g., family conflict, family cohesion) were predictive of adolescent well-being over time (Stuart & Jose, 2012). Moreover, others have claimed that these discrepancies are notable on their own (De Los Reyes, Henry, Tolan & Wakshlag, 2009; as seen in Stuart & Jose, 2012).

## **Overview of Research Gaps**

Many researcher have identified unique risk and protective factors, and associated mental health implications among Latinx immigrant families. The various community- and family-level stressors are both pervasive in the lives of Latinx immigrant families and associated with poor mental health outcomes among Latinx youth. Although existing research has developed a foundation for understanding these relationships, there is limited integration of multiple stressors unique to Latinx immigrant families in the literature.

Among existing research with Latinx immigrant families, scholars have called for the need for more research to better understand factors impacting mental health of Latinx immigrant youth (Ornelas & Perreira, 2011). To better understand depression among Latinx samples, some scholars established a developmental-contextual model of depression with Mexican adolescents (Bámaca-Colbert et al., 2012). Although in this model, family risk and protective factors (e.g., family cohesion, family conflict) appeared important in predicting youths' depression, researchers have yet to incorporate parents' depression as a factor, which may be important provided the prevalence of depression among Latinx immigrant adults (De Oliveira, Cianelli, Gattamorta, Kowalski, & Peragallo, 2017).

Given the deleterious impact that culturally based familial stressors have on Latinx youths' lives, researchers noted that existing research examining intrafamilial stressors in Latinx families is lacking (Schwartz et al., 2012; Schwartz, Unger, Zambopanga, & Szapocznik, 2010). Furthermore, regarding community-level stressors, research often lacked discussion or measurement of unique immigrant stressors that may play a role in parenting and youths' mental health outcomes among Latinx immigrant samples.



Researchers have noted the paucity of research exclusively studying parenting practices among immigrant (Perreira et al., 2006) and Latinx (Ceballo et al., 2012) populations. Furthermore, research employing qualitative approaches to examine parenting among Latinx immigrant parents (e.g., Ceballo et al., 2012) fails to highlight the unique contextual risk factors (e.g., Aisenberg, 2001; Macartney, 2011; National Child Traumatic Stress Network, 2005) that are prevalent in this population.

### **The Current Study**

The current study aimed to fill these gaps in research by using mixed methods sequential design and a community-based participatory research (CBPR) approach while drawing from a 5-year community-university partnership. We conceptualized and designed the study as QUAL + quan, and data was collected sequentially (Creswell & Plano Clark, 2017). The qualitative approach was given precedence (Creswell et al., 2003) in the current study given the sequential design and that the qualitative findings informed the design and research questions of the quantitative phase (Creswell & Plano Clark, 2017). First, to gain an in-depth understanding parent-child relationships and parenting experiences among Latinx immigrant parents, we used focus groups to build on current research of immigrant parents while integrating consideration of community-level stressors. Initial results of main themes from the qualitative phase in conjunction with both formal and informal dialogues with CAB members informed the decisions we made about the quantitative phase, including the selection of measures and the decision to examine questions related to mental health. In particular, the current study aimed to examine the relationships between family cohesion, family conflict, parents' depression symptoms and youths' mental health outcomes next in the quantitative phase. Although initial results from the qualitative phase informed the

decisions about the quantitative phase, the results of both the quantitative and qualitative phases were integrated (Creswell & Plano Clark, 2017) in the discussion.

### **Research Questions and Hypotheses**

**Research Question 1.** What are Latinx immigrant parents' experiences of parent-child relationships and parenting?

- a. What themes emerge as challenges in the parent-child relationships among Latinx immigrant parents raising their youth in the face of various stressors?
- b. What themes of parent-child strength/protective factors emerge through parents' reflections of living in a community with violence and stressors?

**Research Question 2.** Are there significant discrepancies between parent and youth reports of family cohesion and family conflict?

*Hypothesis 1.* Parent and youth report of family cohesion and family conflict will be significantly different.

**Research Question 3.** Are youth self-report of family cohesion and family conflict significantly related to youth report of depression symptoms and parent report of youth behavior problems?

*Hypothesis 2.* Youth self-report of cohesion will be negatively associated with depression and behavior problems. Whereas, greater family conflict (youth self-report) will be associated with less depression and behavior problems.

**Research Question 4.** Are youth reports of community violence exposure significantly related to their depression and behavior problems?

*Hypothesis 3.* Exposure to community violence will be positively related to youth depression and behavior problems.

**Research Question 5.** Is parents' depression related to youth reports of family cohesion and family conflict?

*Hypothesis 4.* Parents' depression will be negatively related to youth reports of family cohesion and associated with greater family conflict (youth report).

**Research Question 6.** Does parents' depression moderate the relationship between family cohesion or family conflict and youth depression?

*Hypothesis 5.* Parents' depression will moderate the relationship between family cohesion and youths' depression.

*Hypothesis 6.* Parents' depression will moderate the relationship between family conflict youths' depression.

## **CHAPTER TWO: METHOD**

### **Research Approach: Community Based Participatory Research**

The current study used a CBPR approach. Israel, Schulz, Parker, and Becker (2001) described the key principles of CBPR to include, that it builds on community strengths/resources, facilitates collaborative partnerships in research, and integrates mutually beneficial knowledge and action for a unique approach to address research gaps and inform culturally sensitive methodology. CBPR is a useful approach because it enhances the quality and validity of research by involving diverse people with knowledge of the local community in the research process (Israel et al., 2001). By including such input, CBPR may likely increase the cultural relevance and efficiency of addressing health disparities (Israel, Eng, Schulz, & Parker, 2012).

The current study is part of a larger community-university collaborative project, Proyecto HÉROES, that uses CBPR. Proyecto HÉROES (Honor, Educación, Respeto,

Oportunidad, Esperanza, y Soluciones) is an existing ongoing collaboration funded by the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD). During the early stages of developing Proyecto HÉROES, the Primary Investigators met with several community members and leaders to form an advisory board of community partners, the Community Advisory Board (CAB). CAB was comprised of twenty-four key stakeholders, that included leaders and representatives from Latinx-serving community organizations (i.e., school district, afterschool programs, religious organizations, mental health agencies) and city departments (i.e., police, city council), as well as researchers, community health workers, and Latinx parents and youth.

Congruent with a CBPR approach, CAB members were engaged in various aspects of research design, data collection, and interpretation. This community-driven approach helped strengthen the cultural validity of the research, and may have offered opportunities for key stakeholders collecting data to share insights and likely create a more comfortable experience for focus group participants who may be more willing to share with a valued peer (Kia-Keating, Santacrose, Liu, & Adams, 2017).

## **Qualitative Methodology**

### **Participants**

A total of 64 Latinx mothers (84%) and fathers (16%) participated in the focus groups. See Table 1 and 2 for demographic information for the qualitative sample. All participants identified as being a parent and two identified as being grandparents. Parents reported having children between 1 and 33 years of age ( $M_{age} = 12.51$ ,  $SD = 6.90$ ), and the number of children parents had ranged between 1 and 7 ( $M = 2.84$ ,  $SD = 1.74$ ). It is noteworthy, that among the 12 parents from one of the focus groups that took place in a

housing center predominantly serving low-income families, all parents had between 4 and 7 children ( $M = 5.17$ ). Information on marital status was reported for 49 parents, and among these 67% were married, 28% were single, 2% were separated and 2% were widowed. Data on participants' country of origin was collected from the 42 participants who shared information on their country of origin. The sample was predominantly Mexican origin, except for one from Guatemala (92% immigrant, 90% Mexican, of participants who reported their country of origin).

#### *Community-Partnered Focus Group Recruitment*

Groups of Latinx parents were recruited with assistance from CAB members. CAB members strategically recruited in several predominantly Latinx, low-income neighborhoods within Santa Barbara County, a context known for extreme economic disparities and stratification. Focus group data collection occurred during a 12-month period. During this time there were several publicized stressors that likely impacted the communities where data collection took place. Local politics focused on the ruling of a controversial gang injunction, there was tension between law enforcement and community members involved in a riot near a university (in which several people were injured), and a mass shooting in which six people were killed and fourteen were injured. During this time CAB members focused efforts on how to respond to the various community stressors and increase service utilization.

Data collection took place in community settings, with two in a mental health clinic (Midtown), a cultural community center (East), an elementary school (North), a facilitator's home (North), and a housing center (West). Locations were identified by CAB members who expressed interest in organizing and facilitating a focus group. Location and time of the focus groups were chosen to first, include a cross-section of neighborhoods and sub-communities

to get diverse perspectives, and then within those locations, to best accommodate the participants needs (e.g., proximity to their home, availability from work). Childcare was provided as an option to reduce barriers to participation.

### *Qualitative Data Collection*

**Demographics Questionnaire.** The demographics information collected included age, gender, marital status, country of origin, number of children, and ages of children. The demographics questionnaire was only administered to participants in Focus Groups 3, 4, 5, and 6. After completed Focus Groups 1 and 2, the research team discussed the importance of collecting demographics information to better understand the sample; and a brief demographics questionnaire was subsequently administered to Focus Groups 3, 4, 5, and 6. Whenever possible, demographics information that was shared during narratives in the focus groups for Focus Groups 1 and 2 were used to inform demographics for these two focus groups.

**Semi-structured interview.** In-depth semi-structured interviews were conducted with Latinx immigrant parents to develop a more comprehensive understanding of community challenges impacting the Latinx community, how these challenges impact parenting and families, as well as questions to gain a more nuanced understanding of parents' and youths' perceptions of these issues and solutions. The semi-structured interview questions and prompts were co-developed by the Proyecto HÉROES primary investigators and the CAB. The focus group interviews were approximately two-hours in length.

### **Procedures**

All procedures were approved by the Institutional Review Board at the University of California, Santa Barbara. Approval was also obtained from the participating community agencies where focus groups were implemented.

Focus groups (approximately 120 minutes) were facilitated by pairs of two bilingual Latinx facilitators and accompanied by 1-2 bilingual Latinx undergraduate research assistants. All facilitators were associated with community organizations represented by CAB members. Primary Investigators (PIs) trained facilitators on focus group interviewing techniques. Focus group facilitators were encouraged to contact PIs for further assistance if needed and received additional guidance on how to write a memo following the focus group. Research assistants were trained on obtaining consent and demographics information, as well as writing memos after the focus group.

At the start of each focus group, facilitators and research assistants distributed consent forms that were available in both English and Spanish. Consent forms were described, and consent was obtained by each interested participant. Focus group participants were given the option to participate in either Spanish or English, however, all participants preferred Spanish. All parents consented to participate in the focus groups. All focus groups were audio-recorded, and research assistants transcribed during the session to aid in later accuracy of audio transcriptions. As an incentive for participating, participants received a \$30 grocery gift card.

## **Quantitative Methodology**

### **Participants**

A total of 38 Latinx youth between the ages of 8 and 16 ( $M_{\text{age}} = 12.05$ ,  $SD = 2.07$ ; 40% identified as female) participated in the survey. See Table 3 for demographics

information. Among the youth, 35 were born in the U.S. and 3 were born in Mexico, and 100% self-identified as Latino/a. Parent participants were comprised of 38 parents between the ages of 27 and 50 ( $M_{\text{age}} = 39.32$ ,  $SD = 5.85$ ; 97.4% females). All of the parent sample were immigrants, with the majority being from Mexico (with the exception of 1 who was born in Guatemala). The amount of time parents lived in the U.S. ranged from 9 to 34 years ( $M = 18.84$ ,  $SD = 5.91$ ). The youths' other biological parent who did not participate were also mostly immigrants, and the majority were from Mexico (with the exception of 3 born in Guatemala, 1 born in Colombia and 3 born in the U.S.). Parents reported a range of marital status, with parent participants reporting being either single (26.3%), married (65.8%) or divorced (7.9%). The parent sample was socioeconomically diverse in regard to education, with parent participants reporting that the highest level of education they attained was less than high school (31.6%), some high school (18.4%), high school or equivalent (26.3%), some college (7.9%), or associates degree (15.8%). The sample reflected a predominantly low socioeconomic demographic, in that all but one participant received free or reduced lunch at school.

### *Recruitment Approach*

Eligibility criteria used for recruitment for the survey included: (1) youth between 8 and 16 years of age, (2) parents and youth identifying as Latinx, and (3) youth and parents residing in Santa Barbara County. Participants were recruited from community agencies and neighborhood centers in Santa Barbara County. CAB aided in identifying recruitment sites and families that may be interested in participating. CAB members also suggested recruitment opportunities for distribution of flyers at community fairs, school events, and parenting groups. In addition to assistance from CAB, we shared recruitment information



with community agencies that served a high frequency of Latinx families (e.g., Boys and Girls Club, housing projects, food banks). Data collection took place at the Latinx-service community-based agencies, neighborhood centers and in participants' homes, based on participant preferences and ease of accessibility for families.

Data was collected starting during a 15-month period (2017-2018). During the time of data collection there were various stressors that may have impacted participation in the study. In particular, there were several socio-political stressors with a new administration, an immigration ban, and highly publicized Immigration and Customs Enforcement (ICE) raids. Additionally, the community was impacted by two natural disasters. During the time of recruitment there was also a streak of high school suicides. CAB members noticed an increase of stress and fear impacting the Latinx community during the period when recruitment was taking place.

## **Procedures**

**Informed Consent.** Interested youth and parents were provided with study details and informed about the consent procedures (Note: assent procedures were reviewed with minors). Consent forms were presented in both English and Spanish. Participants were notified that their participation was voluntary and that they may decline to participate at any time. Additionally, participants were told they could skip any question they preferred not to answer.

**Data Collection.** Trained, bilingual (Spanish-English) and bicultural graduate and undergraduate students collected data in either Spanish or English based on participant preference. After consenting or assenting, all youth and parents completed separate individual interviews for approximately 60 minutes. Whenever possible, interviews were

conducted simultaneously in separate rooms to preserve confidentiality and to minimize time commitments for the family.

All survey items were read verbatim verbally to minimize any barriers related to literacy levels, and research assistants entered responses directly into a password-protected tablet computer within a password protected Qualtrics survey. Similar research studies with solely Latinx populations have used the method of reading all questionnaires to youth and parent participants (Leidy et al., 2010; Marshall & Orlando, 2002).

All participants were provided with a list of community mental health resources and a few psychoeducational pamphlets after the survey.

### *Measures*

**Method of translating measures.** The Survey Research Center (2016) created a best practice guide clearly stating the successful aims of cross-cultural translation of surveys:

A successful survey translation is expected to do all of the following: keep the content of the questions semantically similar; keep the question format similar within the bounds of the target language; retain measurement properties, including the range of response options offered; and maintain the same stimulus (Harkness, Edwards, Hansen, Miller, & Villar, 2010). Based on growing evidence, the guidelines presented below recommend a team translation approach for survey instrument production (Harkness, 2008a; Harkness, 2008b; Harkness, Pennell, & Schoua-Glusberg, 2004; Pan & de la Puente, 2005; Willis et al., 2010). (p. 234)

Considering these best practices for cross-cultural survey translation, the current study used a team translation method for measures that were not available in Spanish. A team or committee approach requires individuals to translate independently, followed by reviewing

the translations with the translators, and having another member of the team review and decide when the translation is finalized (Survey Research Center, 2016). The benefits of utilizing a committee or team approach is in the process of ensuring consensus among bilingual team members that go beyond the compounding factors (e.g., cultural differences, unequal fluency in either language used) (Schoua-Glusberg, 2004).

In the current study, pairs of two bilingual and native Spanish-speakers worked independently to translate each measure. Translators met to discuss translations, resolve disagreements, come to a consensus and synthesize translations. Difficulties with specific terms or questions were discussed and consensus reached with the research team of diverse Latinx bilingual individuals (e.g., Mexican, Guatemalan, Costa Rican). Synthesized translations were reviewed by a community-partner and member of the CAB who was also a bilingual and native Spanish-speaker with expertise in working with Latinx children and families in the community. Additionally, two Latinx, bilingual CAB members assisted in determining the cultural relevance of some of the measures.

**Demographics Questionnaire.** The demographics information collected included age, gender, generation level, years living in the U.S., a proxy for socio-economic status, and parent marital status.

**Family Cohesion.** To measure family cohesion, both parents and youth completed the Family Adaptability and Cohesion Evaluation Scales III (FACES III; Olson, Portner & Lavee, 1985). The Family Cohesion subscale is a 10-item scale that measures bonds between family members. Participants were asked to rate each statement with how frequently these happen for them in their family, with responses ranging from 1 (*Almost never*) to 5 (*Almost always*). Examples of these questions included, “Family members feel very close to each

other” and in Spanish: “los miembros de la familia se sienten muy cercanos unos a otros.” Scoring consisted of adding all items to create a sum score of cohesion. Olson (1991) suggested an interpretation in which scores represent four styles of cohesion: Disengaged (scored between 10-34), Separated (scores between 35-40), Connected (scores between 41-45), and Very Connected (scores between 46-50). The English version of the FACES III Cohesion subscale demonstrated adequate reliability (Cronbach’s  $\alpha = .62$ ) with adolescents and adults (Olson et al. 1985) and with Caucasian and African American adolescents between the ages of thirteen and fifteen (Cronbach’s  $\alpha = .93$ ) (Cumsille & Epstein, 1994). The translated FACES III Cohesion scale demonstrated good reliability with Spanish parents ( $n = 632$ ; Cronbach’s  $\alpha = .72$ ) (Forjaz, Cano, & Cervera- Enguix, 2002) and Mexican families ( $n = 270$ ; Cronbach’s  $\alpha = .70$ ) (Ponce Rosas, Clavelina, Trill, Irigoyen Coria & Ibanez, 2002). Another study established that the FACES III was appropriate to use with Mexican-American families, by comparing norms reported by Olson and colleagues (1983) with their sample of 969 Mexican-American families ( $n = 318$ , age range: 13-19 years) (Flores & Sprenkle, 2014). Internal consistency in the current sample for youth was  $\alpha = .87$ , and for parents was  $\alpha = .81$ .

**Family Conflict.** To assess family conflict, parents and youth completed the Brief Family Relationships Scale (BFRS; Fok, Allen, Henry, & People Awakening Team, 2014). The BFRS a 15-item measure adapted from the Relationship dimension of the Family Environment Scale (Moos & Moos, 1994). This measure has been used across diverse samples, including tribal communities in the Pacific Northwest (Rasmus et al., 2016), and Alaska Native youth between the ages of 12 to 18 (Allen et al., 2017). However, it has yet to be used with Latinx families. Respondents were asked to rate statements about families using

a scale that ranged from 1 to 20, indicating “Not at all,” “Somewhat,” and “A lot.” Example items from the Family Conflict subscale included, “In our family we argue a lot,” “In our family we lose our tempers a lot,” and “In our family we often put down each other.” This measure was translated for the current study. Prior to calculating a scale score, the 20 interval responses were recoded and grouped based on Fok and colleagues (2014) approach of grouping to estimated normal distribution (e.g., responses 1-7 = 1, 8-11 = 2, 12-15 = 3, 16-18 = 4, 19-20 = 5). All six items on the Family Conflict subscale were reverse coded prior to analyses and a scale score was calculated by summing these six items. Higher scores on this scale were indicative of less family conflict, whereas lower scores were indicative of greater family conflict. Factor analyses revealed close to adequate fit for a second-order 3-factor model among a sample of 12 to 18-year-old Alaska Native youth ( $\chi^2(101) = 164.9$ ,  $\chi^2/df = 1.63$ , GFI = .93, RMSEA = .05, and CFI = .95) (Fok et al., 2014). Internal consistency for the Family Conflict subscale for youth was  $\alpha = .79$  and for parents was  $\alpha = .77$ .

**Youth Depression.** The Center for Epidemiologic Studies Depression Scale- Revised 10-item version (CESD-R-10; Haroz, Ybarra, & Eaton, 2014) for adolescents was used to measure youth symptoms of depression. The CESD-R-10 was developed to accurately represent DSM-IV depression criteria and to be a succinct screener among adolescent samples in the U.S. (Haroz et al., 2014). Respondents were asked to rate how often they have experienced each symptom. Participants used a 5-point Likert scale that ranged from 0 (*Not at all or less than 1 day in the last week*) to 4 (*Nearly every day for 2 weeks*). Example items included, “My appetite was poor,” “I felt sad,” and “I lost interest in my usual activities.” This measure was translated into Spanish for the current study. A scale score was created by averaging all items. A score of 4 or less was considered as not depressed, scores

ranging from 5 to 9 were categorized as mildly depressed, scores between 10 and 14 were considered moderately depressed, and those 15 and above were considered severely depressed. The measure demonstrated good internal consistency among two national samples of predominantly Caucasian adolescents between 13 and 18 years of age (Sample 1:  $n = 3,777$ ,  $\alpha = .90$ ; Sample 2:  $n = 1,150$ ,  $\alpha = .91$ ). Factor analyses also established a 1-factor model with good model fit (Sample 1: RMSEA = .06, TLI = .99, CFI = .99; Sample 2: RMSEA = .08, TLI = .96, CFI = .99) (Haroz et al., 2014). In the current sample, the CESD-R-10 demonstrated good psychometric properties ( $\alpha = .80$ ).

**Youth Behavior Problems.** To assess youth behavior problems parents completed the Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997), which is a 25-item parent-report measure designed to assess children's strengths and difficulties across a number of domains. The SDQ is comprised of a total score and individual scores from five subscales: Emotional Symptoms, Conduct Problems, Hyperactivity/Inattention, Peer-Relationship Problems, and Prosocial Behaviors. Each subscale is composed of 5 items that parents ranked using a 3-item Likert scale indicating, 0 (*Not true*) 1 (*Somewhat true*), and 2 (*Certainly true*). Parents were asked to provide responses based on the target child's behavior over the last six months or during the school year. Example items included, "Restless, overactive, cannot stay still for long," "Many worries or often seems worried," and "Often fights with other children or bullies them." Scoring included reverse scoring some items (e.g., 1, 11, 14, 21, 25), calculating the sum of all subscales, and then creating a Total Difficulties score by calculating the sum of the several of the subscales (e.g., Emotional Symptoms, Conduct Problems, Hyperactivity/ Inattention, Peer-Relationship Problems). A score above 17 on the Total Difficulties was indicative of a clinically significant level of child difficulties. The

SDQ was available in Spanish and English. As a measure, the SDQ demonstrated good internal consistency ( $\alpha = .73$ ) (Goodman, 2001) and was used with Latinx samples (Lakes, Vargas, Riggs, Schmidt, & Baird, 2011; Valdez, Padilla, Moore, & Magaña, 2013). In the current study, the SDQ demonstrated good internal reliability ( $\alpha = .83$ ).

**Parent's Depression Symptoms.** Parents completed the Patient Health Questionnaire (PHQ-9) which measures symptoms of depression by assessing moods and feelings over the last 2 weeks (Kroenke et al. 2001). Parents rated each item on a 4-point Likert scale, ranging from 0 (*not at all*) to 3 (*nearly every day*). A total score was created by summing all items. Scores ranged from 0 to 27, in which lower scores indicated lower symptom severity (e.g., 10-14 represents minor depression symptoms), mid-range scores (e.g., 15-19) indicated moderately severe depression symptoms, and higher scores indicated severe depression symptoms (e.g., scores greater than 20). The PHQ-9 was found to be valid among English and Spanish speaking Latinx (Chavez-Korell, Benson-Flórez, Delgado Rendón, & Farías, 2014; Gilbody, Richards, Brealey, & Hewitt, 2006). Additionally, among a large sample of Latinx primary care patients, the PHQ-9 demonstrated good internal reliability ( $\alpha = .80$ ) (Huang, Chung, Kroenke, Delucchi, & Spitzer, 2005). In the current study, the PHQ-9 demonstrated excellent internal reliability ( $\alpha = .90$ ).

**Youth Exposure to Community Violence.** Youth completed the Children's Exposure to Community Violence (CECV; Richters & Martinez, 1993). The CECV is an abbreviated 13-item measure that assesses exposure to community violence around the home or neighborhood. Respondents were asked to indicate how often they have seen or heard the event occur using a 4-point Likert scale that ranged from 1 (*Never*) to 4 (*Many times*). Example items included: "I have seen someone being beaten up," "I have seen somebody get

stabbed,” and “I have heard guns being shot.” The CECV was translated into Spanish for the current study. Although approaches to scoring this measure vary, scoring followed Thompson and colleagues’ (2007) suggestions of using a global community violence score. Items about family violence were excluded from analyses. Items were dichotomized by re-scoring responses that ranged from 2 to 4, as 1 (*exposed*), and responses that were 1, were recoded to 0 (*not exposed*). Researchers dichotomized this measure to understand whether exposure has occurred (Thompson et al., 2007). All items were summed to indicate total number of different types of exposure to community violence, with higher scores indicating more exposure to acts of crime and violence. The measure demonstrated excellent internal consistency with a large sample of students between the ages of 11 and 13 (Cronbach’s alpha ranged from .90 to .94) (Ritchers & Martinez, 1990). In the current study, the CECV demonstrated poor internal reliability ( $\alpha = .51$ ).

## **Data Analytic Plan**

### *Mixed Methods Design*

The current study used a mixed methods participatory-social justice design, with a QUAL → quan approach that incorporated exploratory sequential design (Creswell & Plano Clark, 2017). The mixed method participatory-social justice design emphasizes the marriage of participatory approaches that integrate collaboration with participants or key-stakeholders with a central mixed method design (Creswell & Plano Clark, 2017). Efforts to delineate the utility of this integration to account for the cyclical nature of participatory research have been well documented (e.g., Ivankova, 2015).

The mixed methods sequential exploratory design is comprised of two phases, a qualitative phase in which interview data may be collected and analyzed, followed by a



quantitative phase (Creswell & Plano Clark, 2017). The second phase is typically informed by main themes or trends seen in the qualitative data, and is often used to examine whether the results from the qualitative data generalize to others (Morgan, 2014). Quantitative data in the second phase may also be used to study relationships, phenomenon or emerging research questions found from the qualitative data (Creswell & Plano Clark, 2017). As a core design, the qualitative data informs the construction of quantitative measures, or further exploration of research questions, yet for mixed methods participatory-social justice designs the integration of findings also emphasizes the study's participatory framework (Creswell & Plano Clark, 2017).

The philosophy of science behind the mixed method research we conducted was informed by two paradigms, constructivism and postpositivism. Constructivism, often used in qualitative methods, incorporates assumptions that meaning is generated through understanding participants' subjective perspectives (Creswell & Plano Clark, 2017). In the qualitative phase, our findings were informed by participants' perspectives in which we learned from their experiences, while also balancing our own perspectives. Our quantitative phase was informed by applying a postpositivism approach that is often used in quantitative methods and focuses on causal thinking, examining how select variables relate, empirical observation and measurement of constructs, and examining theories (Creswell & Plano Clark, 2017)

### *Qualitative Data Analysis*

Focus groups were audio-recorded and transcribed verbatim in Spanish shortly after data collection. Focus groups initially transcribed were checked for accuracy by having a second Latinx bilingual research assistant listen to the audio-recorded focus group and

simultaneously read the transcription to correct any errors. Focus group transcripts were then translated by two bilingual and bicultural research assistants, initially by one and then checked by the second. Translation discrepancies between the two translators were discussed and resolved by eight members of the research team who were all bilingual and bicultural.

The coding team was comprised of one of the PIs for Proyecto HÉROES (a faculty member with a Ph.D. in Clinical Psychology), two doctoral graduate students, and three of the trained undergraduate students who helped with translating focus groups. Among the coding team, one of graduate students and all three undergraduate research assistants were bilingual in English and Spanish, and identified as Latinx. The coding team analyzed the data using thematic analysis to generate a coding system of themes emerging from the data (Braun & Clarke, 2006). The coding team applied an inductive, data-driven approach to coding, meaning the themes emerged were strongly linked to the data rather than theoretical understanding (Braun & Clarke, 2006).

Braun and Clarke (2006) described the phases of thematic analysis to involve (1) familiarizing yourself with your data by transcribing verbal data, reading and re-reading, (2) creating initial codes by coding all possible themes or patterns, (3) searching for themes after initial coding and organizing has occurred, (4) reviewing and refining themes, (5) defining and refining themes, while writing a detailed analysis for each theme, (6) writing-up results to share the story of your data. Following these stages, our coding team began by becoming familiar with the data by reading the transcripts several times, thinking about the content being read and what was important about what each participant was saying. Next, our team identified concepts and initial themes in one of the focus groups by using open coding, known as a line-by-line examination of initial categories to capture participant's narratives

(Strauss, 1987). Coders manually noted any concepts or initial themes in the margins.

Themes that may have been better reflected in Spanish were manually noted in Spanish. The second PI for Proyecto HÉROES, and CAB member, joined coding team meetings during open coding as a cultural expert to aid in cultural validity of initial coding themes that were found. Each transcript was coded through open coding at least twice. Next, the team continued with a detailed coding process of applying the themes generated in open coding to three additional focus groups (e.g., Focus Group 2, 3, and 4); each coded by two coders. The coding team met to establish consensus among pairs of coders, discuss and refine organization of coding themes into specific codes and sub-codes.

Next, the coding team all re-coded Focus Group 1 with the refined coding scheme. Coders examined both the English and Spanish transcripts to ensure that the codes fit the language of our participants. The coding team engaged in an interactive process of going through all of Focus Group 1 to ensure consistency among coders, discuss any codes that may not have had enough data or use to support retaining them, and examine codes that may have required being merged or dropped. This meeting resulted in a revised system of codes and sub-codes that was then used to re-code all focus groups. The PI for the current project re-coded all focus group transcripts and met with a Proyecto HÉROES PI and a graduate student who had divided re-coding all six focus groups to ensure consistency in coding.

**Coding Select Themes.** To investigate overarching themes of parent-child relationships and parenting related to Latinx immigrant families, the MAXQDA retrieved segments tool was used to isolate all focus group data coded as *PARENT AND CHILD*, or *ACCULTURATION*, and coding was conducted within each code segment. *PARENT AND CHILD* was coded when parents spoke about parent-child relationships, communication, or

interactions between parents and their youth. *ACCULTURATION* was coded when the parent spoke about differences in culture or practices comparing Latino culture to mainstream American culture. Coding within the *PARENT AND CHILD* and *ACCULTURATION* codes revealed unique community and family experiences related to parenting and parent-child relationships.

**Trustworthiness and credibility.** To ensure trustworthiness of the qualitative analysis the team used various verifications/procedures. The coding team used different stages of coding the data and memo development, including memos in the data collection phase, in the phase of processing verbal data into transcripts, and at various phases of coding. Scholars have recommended using different approaches (e.g., member-checking, triangulation of data, presenting disconfirming evidence, or asking others to examine the data) to ensure trustworthiness or qualitative validity and consistency (Braun & Clarke, 2006). In line with this recommendation, the current study used triangulation of data by **ensuring that themes were considered when there multiple individuals shared a similar experience** in the process of developing and applying the coding scheme. Additionally, all six transcripts were coded by at least two coders for reliability. Lastly, to support the analysis process and account for dependability of results, the coding team engaged in clear descriptions of the research/analysis process (e.g., notes during data collection, memos from focus group interviewers/note-takers, summaries and memos from transcribers, notes on reflexive coding discussions from coding team meetings, progression of coding drafts, and clear documentation of coding decisions).

**Reflexivity.** In her book, Ivankova (2015) describes the importance of reflexivity in action research that occurs throughout the research process. This reflexive practice “occurs through spirals of reflection and action” (Ivankova, 2015, p.47).

My role as a researcher was often impacted by my worldview and lived experiences. My worldview is one which is influenced by my intersecting identities as a female and daughter of two parents who immigrated to the U.S. from Costa Rica and Greece. As a researcher, I often straddled the line between being an insider and outsider with the community, and I was very aware of how my bilingualism and appearance was both a strength and limitation in traversing these roles. Throughout the process, I engaged in discussions with our research team about being considered an insider or outsider among certain community groups, and whether other members of our team would better represent recruitment and data collection efforts. I did not observe any overt indication that my involvement in recruitment or data collection efforts impacted participants’ behavior, but continuously reflected on this issue throughout the project.

When coding the focus groups, I was often reminded of similar lived experiences in my own immigrant family. To address this, I would engage in memo writing about my reactions, discuss these with the research team, and corroborate all findings with members of the coding team. Given that during open coding, several of our coders also shared similar identities of being Latinx and having their own immigration histories; we recognized this as a strength in our ability to understand the experiences of participants in the focus group, and to engage in conversations about the importance of not over identifying with the narratives but reading the transcripts for what they said.

It is also important to reflect upon how my role as a researcher may have been impacted by my professional training in clinical psychology and prior research training examining family conflict and communication in dyadic and triadic interactions. In my clinical training, I developed a theoretical orientation of applying systems approaches, in which I look through the lens of how a child or individual is mutually influenced by multiple systems (e.g., family, community, school) in which they interact. My clinical training was also influenced by specializing in both trauma research and clinical service working with diverse clients, including several Latinx families. My role as a researcher in coding was often complicated as I was drawn to integrating research I previously read, labeling themes with clinical terminology I had learned, and processing emerging themes through a systemic lens.

As Ivankova (2015) described, reflexivity is an ongoing process in action research, and one that I continue to engage in daily.

### *Quantitative Data Analysis*

Prior to conducting analyses to tests hypotheses, assumptions of paired-sample t-test and multiple regression were examined. Assumptions included normality tests (e.g., univariate and multivariate), homoscedasticity, reliability of measures, and collinearity between variables. Both visual analyses using histograms, and Q-Q plots, as well as Shapiro-Wilk normality tests were used. The Shapiro-Wilk normality test was the recommended test (Thode, 2002), especially for samples smaller than 50 (Elliot & Woodward, 2007). All analyses were conducted using IBM SPSS Statistics software version 24.0.

**Sample size estimation.** Although an a priori power analysis using “G\*Power3” (Faul, Erdfelder, Lang, & Buchner, 2007) is often recommended to determine sample size, the current study conducted a post hoc power analysis. However, mixed method approaches

have been found to be appropriate for exploratory research when working with small sample sizes (Creswell, Plano Clark, Gutmann, & Hanson, 2003).

**Research Question 2.** Are there significant discrepancies between parent and youth reports of family cohesion and conflict?

*Hypothesis 1.* Parent and youth report of family cohesion and family conflict will be significantly different.

*Data analysis for hypothesis 1.* Paired samples t-tests were conducted to examine whether significant differences between parent and youth report of family cohesion and conflict were present.

**Research Question 3.** Are youth self-report of family cohesion and family conflict significantly related to youth report of depression symptoms and parent report of youth behavior problems?

*Hypothesis 2.* Youth self-report of cohesion will be negatively associated with depression and behavior problems. Whereas, greater family conflict (youth self-report) will be associated with less depression and behavior problems.

*Data analysis for hypothesis 2.* Pearson correlations were used to examine the strength of the associations.

**Research Question 4.** Are youth reports of community violence exposure significantly related to their depression and behavior problems?

*Hypothesis 3.* Exposure to community violence will be positively related to youth depression and behavior problems.

*Data analysis for hypothesis 3.* Pearson correlations were used to examine the strength of the associations.

**Research Question 5.** Is parent depression related to youth reports of family cohesion and family conflict?

*Hypothesis 4* Parents' depression will be negatively related to youth reports of family cohesion and associated with greater family conflict (youth report).

*Data analysis for hypothesis 4.* Pearson correlations were used to examine the strength of these associations.

**Research Question 6.** Does parents' depression moderate the relationship between family cohesion or family conflict and youth depression?

*Hypothesis 5.* Parents' depression will moderate the relationship between family cohesion and youths' depression.

*Hypothesis 6.* Parents' depression will moderate the relationship between family conflict youths' depression.

*Data analyses for hypotheses 5 and 6.* To investigate these hypotheses, four hierarchical regression models were constructed, examining these relationships using youth and parent report of family cohesion and family conflict. In each model, youth age, cohesion/conflict, and parents' depression were entered in the first step. In the subsequent step, an interaction term (e.g., cohesion x parents' depression, conflict x parents' depression) was entered.

## **CHAPTER THREE: RESULTS**

### **Qualitative**

Given the focus on violence, all participants reflected on their experiences of various stressors; including community violence, interpersonal conflict with peers in the neighborhood, witnessing or awareness of crime, and gang involvement. Participants shared



their personal experiences of interacting with their youth in the face of these stressors. Detailed below are several salient themes that emerged from participant responses, and quotations are used to demonstrate themes. Whenever possible, details about the type of stressor encountered are described or embedded in the quote.

### **Integrative Theoretical Model of Family Cohesion, Family Conflict, and Parent-Child Relationships**

Based on the findings described below, we developed an integrative theoretical model of family cohesion, family conflict, and parent-child relationships among a sample of predominantly Mexican immigrant families dealing with various stressors. This model integrated consideration of contextual stressors Latinx immigrant parents and/or youth may encounter in their communities, schools or neighborhoods. The model offered a theoretical understanding of variables related to parent-child relationships (See *Figure 1*). More specifically, the model demonstrated pathways between four common parent-child interactions amidst stressors (e.g., guidance/support, monitoring, communication and *impotencia*) that related to family cohesion and conflict, and in turn to parent-child relationships. The various constructs of the integrative theoretical model were detailed in the sections to follow.

#### **Immigrant Parent-Child Interactions in the Face of Stressors**

Based on findings from parent narratives, there were four parent-child interactions immigrant parents expressed when encountering various stressors: 1) guidance/support, 2) monitoring, 3) communication, and 4) *impotencia*.

**Guidance and Support.** Parents identified instances where they provided advice to their children about taking care of themselves, and reflected how as parents they were aware

of the increased risks of being near violence. Parents' fears about these risks impacted their providing guidance and messages of self-protection to their youth; but as parents they still had to grapple with the uncertainty that something bad may happen to their youth despite this support. For example, amidst a discussion about parents' fears for youth and community violence, one mother of two children (ages: 4 and 6 years) shared:

I think that while there is violence on the streets, I don't think it matters if you had nothing to do with it. Simply by being there and there being violent people on the streets and although you don't do anything, you are in the wrong place and time... As a mother, I would educate my daughters, teach them morals and respect and show them how to take care of themselves when they are adolescents. I've already talked to them about it. My worry is that even teaching them that, something bad might happen to them even though they don't do anything, all because of the violence on the streets.

*[Yo creo que mientras haiga violencia en las calles, no importa si tu no (24:09) tengas nada que ver. O simplemente por el hecho de estar allí y hay gente violenta en la calle, y aunque no has hecho nada estas en el lugar y en el momento no educado también toca también... Para mí como madre sería educar a mis hijas, enseñarles morales, respeto y que sepan cuidarse a sí mismas para cuando ellas sean adolescentes que ya no estén a mi lado. Mi preocupación es que habiéndoles enseñado eso, les pase algo, aunque no hayan hecho ellas algo malo, pero por culpa de la violencia que está en las calles.]*

In this example, the mere knowing about violence in the community was enough to prompt this mother to preventatively provide guidance. Whereas parents also shared interactions with their youth in which they provided guidance and support in response to youth communication

about encounters they had regarding conflict, bullying, and other risky-behaviors. In these cases, parents' worry and awareness about the stressors also impacted their provision of guidance.

For example, a mother (youth's age: 10) reflected that her parenting strategies differed based on the temperament of her two sons-- one a fighter and the other more "docile," and the conflict they experienced. This mother described interactions of providing guidance after her son told her about how he was dealing with discrimination and violence with a peer at school. In her reflection, she illustrated the emotions that inform her guiding her son to reciprocate violence by engaging in self-defense, or to access support from adults.

There are times that I tell him, "Don't hit him. If he hits you, go to the office." But there are times that I get so angry about them hitting and bothering him and that he doesn't defend himself. I told him, "Son, if they hit you, return the hit because if you don't defend yourself, they are going to keep bothering" ... I always tell them, "don't get involved in problems. If you see that someone is bothering you, back away and ignore them" ... Don't pay attention to them. My son is always getting bothered because he is browner... I mean what can I do? I don't want to keep telling him to hit back but if he does, who is going to be expelled? My son? But if he doesn't defend himself what are we going to do? That is my fear with him right now. I'm telling myself, okay, he is only in elementary right now, when he goes to middle school, if he doesn't defend himself it's going to keep on happening.

*[Yo hay a veces que si le digo "no le pegues. Si te pega ve a la oficina." Pero hay a veces que me lleno de coraje que le peguen y que le estén molestando, y él no se defiende. Dije "mijo si te pega, regrésale el golpe porque si tú no te defiendes, te van*

*a seguir molestando y te van a encontrar todo el tiempo, te van a seguir molestando”*  
*... Siempre le digo, “no se metan en problemas. Si ven que alguien les está*  
*molestando, retírense, ignórenlos... No les hagan caso.” Pero ya a mi niñas siempre*  
*constantes lo están molestando porque él es más morenito... ¿Qué hago? No le quiero*  
*decir golpéalo y si lo golpea, ¿A quien van a expulsar? ¿A mi hijo? ¿Pero si no se*  
*defiende que vamos a hacer? Ese es mi temor ahorita con él. Digo okay ahorita está*  
*en la primaria, cuando él llegue a la junior, si el no se defiende va a seguir más.]*

These interactions led parents to feelings of uncertainty, worry, frustration. Participants’ worry about youth stressors increased as they reflected on youths’ dislike of defending themselves, the effectiveness of the guidance they provided, and parents’ own cultural “dichos” or sayings of how conflict lives within a system; these in turn impacted family relationships. For example, a mother (youth’s age: unknown) stated:

I have always taught my children that if someone does something to them, that they tell me or some other adult and for them not to do anything. I don’t know if I made a mistake with my oldest son since he doesn’t want to defend himself. He doesn’t know how to defend himself. I just don’t know sometimes I think it was a mistake. And sometimes, I think that, and I tell them “no *mijo* because violence will bring more violence, instead tell me” but I know that he stays quiet sometimes...now that my son left well I am left with the worry, I say now what are they going to do to him.” I mean yeah, I am no longer calm. But also, one as a mother too, it affects the whole family... In Mexico, they would apply this saying a lot "the strong one lives until the weaker one wants them to" ... it is what I don’t want, well for me it doesn’t take

much to tell my son “defend yourself” but for me it isn’t right, I think that it isn’t the best solution, I would want other solutions.

*[Siempre a mis niños les ha enseñado que, si alguien les hace algo, estos me digan a mi o cualquier adulto que ellos no hagan nada. Yo no sé si hice un error con mi niño más grande, él, como él no quiere defenderse. No sabe defenderse. No sé a veces pienso que fue un error. Y a veces pienso que, y yo les digo ‘no mijo porque violencia va a traer más violencia, mejor dime.’ Pero yo sé que él se queda callado a veces...Ahora que se fue mi hijo pues yo me quedo con apuro, yo digo ahora que les van a hacer. Ósea ya, ya no estoy tranquila, claro que primero ellos. Pero uno como madre también, afecta toda la familia...en México se aplicaba mucho el dicho ese que tenemos de que ‘el valiente vive hasta que el cobarde quiere’ ... Es lo que yo no quiero, ósea yo a mí que me cuesta a decirle a mi hijo “defiéndete” pero yo para mí no está bien, yo pienso que eso no es la mejor solución, yo quisiera otras soluciones.]*

Parents also reflected on times when their guidance seemed to be ineffective and seemed to impact the parent-child relationship. For example, a mother (Child’s age: unknown) shared: “I always tell him ‘no you shouldn’t use violence, you have to talk first with your teacher or tell me.’ So, one time they were bothering him a lot, until it got to a point where he told me that he didn’t love me because I didn’t believe him, because I let them do what they were doing to him and I didn’t believe him.” [*“Siempre le digo ‘no, tu no debes de usar violencia, tú tienes que hablar primero con tu maestra o decirme a mí’ entonces un tiempo le estuvieron molestando mucho, hasta que llego al grado que me dijo que ya no me quería, porque yo no le creía aunque porque yo dejaba que hicieran lo que hicieran y yo no le creía, dijo que yo no lo creía.”*]. This mother verbalized the difficulties

that arise when providing guidance may not be a sufficient strategy for youth to resolve their stressors, and the sense of mistrust youth may feel when their parent does not demonstrate an understanding of the severity of the situation.

Parents understanding of the stressors youth encountered was often highlighted as youth communicated about how they implemented parents' guidance and as parents responded by getting even more involved. For example, a mother shared a narrative about her need to get involved with the school because her son (age 5) defended other children using the self-defense suggestions his mother provided. This mother illustrated the difficulties Latinx parents often face in their efforts to provide guidance to their youth, while simultaneously navigating a school system and at times, confrontation with other parents. As a mother, she got involved in talking to the teachers, the principal, and her son to understand her son's involvement in the conflict with a peer. After communicating dissatisfaction with school monitoring to prevent this occurrence, she was confronted by the other child's parent. For example, she stated:

I told the principal, how can you tell me that my son is a bully when two, three people have told me that the kid who hit my son was the school's bully? Why didn't you do anything about that boy?...Then the mom came to me from the back and told me "if your son hits my son again then I will fix things with you." I looked at her and said "are you serious? Are you talking to me like that here at the school, seriously?" She said "yes." "I'm going to do you a favor let's go outside the school and let's talk. Because at the school I will not give a bad example of fighting. They come here to learn, not to fight. But now if you want to solve it, if you think that you are going to

solve this problem by fighting let's go outside the school... Now I see why your kid is the school's bully. Because you are teaching him that.”

*[Le dije a la principal, “¿como me puedes decir que mi hijo es un bullí cuando a mí me acaban de decir dos tres personas que el que le pego mi hijo era el bullí de la escuela? ¿Porque no hiciste tu nada de ese niño?” ...Entonces la mama me llevo por atrás y me dijo, “si tu hijo vuelve a golpear al mío pues yo me voy arreglar contigo.” Le dije “¿En serio? ¿Me estás hablando así aquí en la escuela, enserio?” Dice “sí.” “Te voy a hacer un favor vamos fuera de la escuela, vamos a ver. Porque yo en la escuela no voy a dar el ejemplo de estar peleando. Aquí vienen a aprender, no a pelear. Pero ahora si quieres resolver, tú piensas que se va a resolver este problema con golpeas vámonos afuera de la escuela. ... Ahora veo porque tu hijo es bullí en la escuela. Porque tú le estas enseñando eso.”]*

This mother highlighted the importance of considering the implications of modeling violence while providing support to her son. Parents emphasized their understanding that violence was being taught within families and then extended out to schools and communities.

**Monitoring.** A second theme that emerged in relation to parent-child interactions was parents' experiences of and decisions around monitoring their children. Based on participant responses, monitoring consisted of supervising, watching youth directly, or having conversations with youth about their activities, whereabouts and which peers they spent time with. Parents discussed parental monitoring as strategies to help youth stay out of trouble and prevent youth involvement in gangs, community violence, and crime. A mother reflected on how her parenting was impacted by living in a mostly Latinx neighborhood in which the neighborhood youth her son interacted with were minimally monitored. She verbalized the

struggles Latinx immigrant parents face in trying to provide sufficient monitoring, the fear of what youth may be exposed to, and the larger struggle of dealing with other parents' parenting practices. This mother reflected on her interactions with her son (age 8) in the neighborhood park who was exposed to another boy's private parts and nude pictures:

I am very worried because there are kids that, I suppose aren't cared for well enough by the parents or they can't because they work or have older siblings... It's just that you have to be there all the time but that is impossible. At what time am I going to make food? ...

I can see [my son] from the window of the house and when I see that something is wrong then I go down... they are very young kids that are already exposed to very ugly things... We are always on top of them. And sometimes my son tells me, "why are you always here? You don't let me play, look at my friends, where are their moms? They don't even come and watch them." I tell him, "you know that they don't worry about them but I do worry... What if... someone hits you or kidnaps you and I don't notice. That's why I have to be watching where you are, who you are with, what you are doing."

*[Estoy muy preocupada porque hay niños que, yo supongo que no están bien cuidados por los papas o no pueden porque trabajan o tienen hermanos mayores... es que tienen que estar usted todo el tiempo allí' pero eso es imposible. ¿A qué hora voy a hacer la comida? Yo lo puedo ver desde la ventana de la casa y cuando veo que algo está mal pues me bajo...son niños muy chiquitos pues y ya están dispuestos a cosas muy feas. Yo siempre ando atrás de los míos y se por dónde andan... Y a veces me dice mi hijo "¿porque siempre estás aquí, no me dejas jugar, mira mis amigos,*



*sus mamas ¿dónde están? Ni siquiera vienen a verlos.” Y yo le dijo, “sabes que ellas no se preocupan por ellos. Pero yo me preocupo... Que tal si...alguien te pega o te roba y yo no ve voy a dar cuenta. Así que tengo que estar mirando donde andas, con quien estas, que andas hacienda.”]*

Youth frustration with parental monitoring was a barrier identified by parents, as was evident from the above quote. These interactions about monitoring were even more complicated as youth noticed differences in parenting approaches and parents grappled with their fears of community danger or what may happen to their youth.

Parents felt that using positive practices, such as parental monitoring at an early age with their youth instilled good values, facilitated more time together as a family and positively impacted parent-child relationships. For example, a widowed mother of two boys and one girl (ages: unknown) described how from an early age she would “tell them this is your life, this is your body, you have to take care of it for the rest of your life because you are responsible for yourselves... From a young age, they were not standing in corners with friends, I did not let them go out, no... Wherever we went, the whole family went, everywhere. They never went alone with friends... from the beginning as they say since they are little, they take shape.” [*Les decía este es su vida, este es su cuerpo, lo tienen que cuidar para toda su vida porque ustedes, responden por ustedes...Desde chiquitos no tenía en esquinas parados con amigos, nos los dejaba salir, no . . . Donde íbamos iba toda la familia, a todos lados. Nunca iban ellos solos con los amigos... como dicen desde chiquitos, se van este haciendo.”]. Parents recognized the importance of starting these parenting practices when their children were young. Parents also discussed how they noticed long-lasting*

benefits of closely monitoring in regard to family cohesion and parent-child relationships.

For example, one mother described parenting her daughter (age: unknown):

We always take her to school, we always pick her up, always when arriving at the house...we were really vigilant after them. Until now the oldest daughter that is 21 years old is still with us. Until now I still see that she is obedient with what we tell her. In reality, they see that we are by their side, we find a way to treat them right, with care.

*[Siempre la llevamos a la escuela, siempre la vamos a recoger, siempre llegando a la casa... sí que estemos al pendiente de ellos. Hasta ahorita, hasta la mayor que tiene 21 años todavía pues está con nosotros. Hasta ahorita todavía la veo que, que nos obedece en lo que, le decimos. Ellos ven realmente que estamos al pie de ellos, buscamos la manera como este, como, como tratarlos verdad con, con cariño.]*

Parents emphasized the importance of their youth experiencing a sense of support, knowing that their parents were nearby and monitoring them.

**Communication.** Based on participants' responses, communication between parents and their youth was a third common interaction in the face of various stressors. Parents discussed values of open communication and instilling trust as a cornerstone of their parenting. For example, a mother (youth's age: 20) shared: "I think that the best as a parent is good communication and trust...because if we do not trust them, we do not communicate with our children, who is going to guide them?" [*Yo pienso que lo mejor de un padre es la buena comunicación y la confianza...Porque si no les tenemos confianza, no los comunicamos con nuestros hijos, quien los va a guiar?"*]. This mother was referring to other parents who expected the schools to discipline and manage their children. However, other

parents discussed their fears that delinquent peers would influence their children, especially if they did not build a strong, trusting parent-child relationship with open communication.

A father of four (ages: 3, 7, 11, and 13) reflected the value of open communication and trust even as it deviated from his upbringing:

I think that many of us in Mexico had an education with a lot of violence, with very little education from our parents that in some part was their way, that treated us bad, beating us. What we have tried ourselves to do is to break the chain of abuse.

Obviously, as parents we must sometimes be strong with the kids, talk to them strongly, but not with the violence we were treated with. Instead to have a lot of communication with them, to try and explain the most of what they want to learn, to ask them, give them trust, make them value the strength of their mother and father, that they love each other I think it is one of the most important principals.

*[Pienso que muchos de nosotros en México tuvimos una educación con mucha violencia, con muy poca educación de nuestros padres que a lo mejor era su modo de ellos, que nos trataron mal, golpes lo que sea. Lo que hemos nosotros tratado de hacer es romper esa cadena de malos tratos. Obvio uno como padre también tiene que a veces ser fuerte con los hijos, hablarles fuerte, pero no con la violencia que nos trataron a nosotros. Sino con tener mucha comunicación con ellos, este tratar de explicarles lo más que pueda uno de lo que ellos quieran saber, este preguntarles, darles la confianza, hacerles que valoren el esfuerzo de su madre y de su padre, este que se quieran entre ellos pienso que es una de las bases principales.]*

Parenting was impacted by Latinx immigrant parents' past, as parents had to intentionally work to break the cycle of violence and parent in a manner that would instill a sense of

communication and trust, closeness between family members, and overall strong parent-child relationships.

Parents provided examples of ways they incite communication to strengthen the parent-child relationship. One mother (child's age: unknown) offered advice as she shared the importance of parental involvement:

When they get home from school ask, "What did you do at school, what happened?" and little by little they will start telling you what happened to them at school and you won't have to dig for it yourselves...there they will tell you and maybe there you will find out if they are being bullied. With good words, you all can bring out the truth.

*[Llegan de la escuela, pregúntenles, "¿Que hiciste en la escuela? ¿Que paso?" Y poco a poco ellas les van diciendo que les paso en la escuela y no le están escarbando ustedes...ya allí ellas le van a decir y quisas allí se dan cuenta si alguien les está haciendo bullying. Con buenas palabras ustedes les pueden sacar la verdad.]*

Parent also discussed how in the face of stressors, they commonly had trouble with communication with their youth. One common communication difficulty that arose from participant responses was the theme we termed *youth callado*, reflecting the notion of youth not expressing themselves or refraining from sharing information with their parents.

A mother described her experience with her daughter (age: 15), who struggled with bullying for many years and had depression. This mother shared instances where she would arrive at school and see her daughter curled up and crying, suggesting the importance of relying on non-verbal cues parents use for information about their youth's stressors. In this example, the mother described how her daughter would not communicate what was going on at school:

I got to the school, the ladies were gossiping by the tree...She would not tell me, “Mom this is a problem, mom.” No no no. My daughter is very quiet, she would keep it in. Day after day after day she didn’t want to go and it wasn’t because there were problems at home...I wouldn’t want to go either if they kept attacking and attacking and attacking me all the time.

*[Llegue a la escuela, las viejas estaban de chismosas al lado del árbol...Ella no me decía, “Mami este es problema, mami.” No no no. Mi hija bien callada, se lo guardaba. Mi hija ya no quiso ir a la escuela. Día tras día tras día, y no era porque había problemas en la casa...Yo tampoco quisiera ir si me estaban ataque y ataque y ataque todos el tiempo.]*

The relationship between providing guidance/support and parent-child communication was apparent as parents reflected on youth fears that contributed to youth not sharing information. In particular, a mother who typically would respond to her youth’s stressors by providing support and addressing the stressor with the school directly, discussed an instance when her son (Age: unknown) came home annoyed because a boy sprayed deodorant in his eyes while on the bus. As she reflected on the interaction, she shared that she was bothered by the situation and frustrated that she cannot be with her son all the time. The following quote exemplified this mother’s understanding as to why her son does not share more with her:

It is the first time well that he tells me, that this happened, I always talk to him and tell him to tell me but, unfortunately at this age kids are very scared because they know that if they are going to tell us something and one talks, then the people find out

and the kids find out and they also begin to say “you’re a snitch”, “oh you went and told your mommy” and I know that my son is afraid because of that.

*[Es la primera vez bueno que él me dice, que paso esto, yo no sé, yo siempre hablo con él y le digo ‘dime’ pero, desgraciadamente a esta edad los niños tienen mucho miedo porque ellos saben que sí que van a decirle a uno y uno habla, ya la gente se da cuenta y los niños se dan cuenta y empiezan también a “ay usted es un chismoso,” “ay, fuiste a mami a decirle.” Y yo sé que mi niño tiene miedo por eso.]*

For this mother, she was faced with managing her emotional reactions of wishing she could provide support or increase her monitoring, and the reality that protecting her son from this type of conflict was difficult. Like others, this mother’s frustration about *youth callado* and what she manageably could do to support her son were present. Similar frustrations about parent-child communication and parenting experiences were exemplified in another mother’s example with her teenage daughter (Age: unknown). While sharing her experience with the focus group she banged her hand on the table and stated:

I told her "that is enough, okay, you know what? Something is going on with you and you are going to tell me why you are so mad with the world. I don’t do anything to you, I ask you a question and you answer angrily at me. I am your mother, I must help you, and I can see that things aren't okay. What is happening to you?" She didn’t want to say anything to me, she didn’t want to tell me. At last, I told her, “today we aren't going to do anything, we have to talk and resolve this because I don’t feel happy that you are responding mean to everyone else. I see that no one offends you. No one says anything to you and you still answer mean.”

[Le dije “¿sabes qué? A ti algo te pasa. Me lo vas a decir, porque estas corajuda con todo el mundo. Yo no te hago nada, te hago una pregunta y también a mí me contestas mal. Yo soy tu mama, yo te tengo que ayudar, y yo veo que las cosas no están no se ven bien. ¿Que es lo que está pasando?” Y entonces ya este no me quería decir. No me quería decir. Al fin este le dije “hoy no vamos hacer nada tenemos que hablar y resolver esto porque yo no me siento a gusto de que tu anda, contestando muy mal a las demás personas. Yo veo que nadie te ofende. Que nadie te dice nada y tu contesta mal.”]

This mother’s experience of communication with her daughter was marked by distance and conflict, and in turn related to the mother’s own frustration. Communication for this parent and her daughter relied on the mother reflecting her daughter’s expression of anger and pointing out these patterns. By confronting her daughter, reminding her of a parent’s responsibility to provide support, she was attempting to resolve the challenge of parent-child communication, *youth callado*, and trying to create a space for her daughter to share her experience.

**Impotencia.** Based on parents’ reports, a fourth common theme of parent-child interactions emerged: *impotencia*, defined as lack of parenting self-efficacy or hopelessness. For example, one mother expressed the sentiment of *impotencia* or hopelessness regarding parenting efforts to address children hitting each other: “Me telling my kid not to hit others doesn’t help if all the other kids are going to be hitting each other. Or if the parents are not going to do anything. That’s what worries me. That I don’t know what I’m going to do.” [“*Que gano yo si le digo a mi niño no pegues, si todos los demás niños van a pegar. O si no van hacer nada los papas. Es lo que me preocupa a mí. Que no sé qué voy hacer.*”]. This

parent's helplessness is fueled by recognizing the difficulties of raising her child with a certain set of values-to not be violent- that may not be mirrored by those of other parents. Additionally, parents grappled with their worries about things that were out of their control and the effectiveness of their parenting. In the face of various stressors, parents reflected on their fears and parenting self-efficacy of how their parenting strategies may be effective or not in protecting their youth from poor outcomes. Even among neighborhoods populated with other Latinx families, parents reflected their fears about how other parents socialize their youth to harass children and be aggressive. When sharing these fears and concerns for other parents' socializing practices, parents felt less efficacious in their own parenting:

I saw that even the parents incite their children to bully. So, I said, if the parents themselves do that, how are we going to teach our children to be respectful children? And that is my fear. Because maybe I can teach my daughter, you teach her to be defenseless to face those kids who are being taught to be aggressive in their homes. That is my fear, and I do not want my daughter to grow up being aggressive towards others. I don't want that because maybe one day when she is all grown up she might end up in a coffin, and I don't want that.

*[Yo veo que hasta los papas incitan a los niños a este al bullying. ¿Entonces digo si los papas hacemos eso, entonces como vamos a educar a unos niños que sean niños con respeto? Y ese es mi miedo. Porque tal vez yo pueda educar a mi niña, pero a la niña la apoyas ser indefensa, para poder enfrentar a esos niños que los están educando con dientes en su casa. Y ese es mi miedo, y yo no quiero que mi niña crezca este siendo agresiva ni agraviando a las demás personas. Oses no quiero eso*



*porque tal vez cuando ella se grandevalla a terminar en una caja de muerto, y yo no quiero eso.]*

This mother discussed the power of fear. For her, she drew a relationship between being aggressive and ending up in a coffin, suggesting the intensity of fear she experienced when considering probable risky outcomes for her daughter. She felt helpless that she could not be with her daughter to protect her because she has to work, but also recognized that in teaching her daughter to not be aggressive, she may be setting her up to be defenseless when encountering conflict.

**Family conflict and distancing.** Participants described family conflict and distancing as they reflected on parent-child and family interactions. A source of conflict parents discussed was in handling communication about adverse experiences from parents' upbringing and their concerns about sustaining these patterns within their families. Parenting involved navigating the burden of one's own trauma, recognizing differences in parents' compared to youths' upbringings, and handling disagreements. A mother described her disagreement with her husband sharing his difficult upbringing of working as an orphan at a young age with their son (age: 21). She communicated her worry about what this does for their relationships:

A lot of times one drags the things we carry, like they say, since childhood... [My husband] has always told to my son, "me at your age, I would do this." I told [my husband], "you do not have to make him drag it too, what you suffered." I told [my husband], "that is your problem, you are always telling him. 'I did not have this, I do not have it, you have to be like me.' That is wrong." ...One day my son told my husband, "it is not my fault you were alone. For you to be telling me, 'no at your age I did this, and that and that.' That is how you had to live, you had to live like that but

not me.” So those are patterns that we also carry and if [our children] do not have a place to have fun, they do not have a place to do good things.

*[Muchas veces se arrastran las cosas que traen como dicen desde niños... [Mi esposo] siempre le ha dicho a mi hijo, “yo a tu edad ya hacia esto.” Le dije “pero es que no tiene porque arrástralo, que tu sufriste.” Le dije “allí está un problema tuyo, siempre estás diciéndole. ‘Yo no tuve esto, yo no lo tengo yo, tú tienes que ser como yo.’ Eso está mal.” ...Un día le dijo mi hijo a mi esposo, “no es mi culpa que tu hagas estado solo. Para que me estés poniendo, ‘no yo a tu edad hacia esto, y esto y esto.’ Así te toco vivir a ti, a ti te toco vivir, pero a mí no.” Entonces son patrones que ya los traemos también. Y si [nuestros niños] no tienen en que divertirse, no tienen en que hacer cosas sanas.]*

As this mother reflected on this conflict, she expressed her worry that not having a place to have fun at home is how children “lose their way.” Mexican immigrant parent-child relationships may be challenged by a constant reminder of parent’s adversities, sacrifices, or direct comparison to how upbringings may be different between parents and youth.

Parents’ descriptions of family conflict often incorporated a multitude of stressors, including time, parenting stress, maneuvering work schedules and roles within a family, as well as communication difficulties that played into family conflict. For example, one mother shared how she has learned from other people’s mistakes of the impact of family conflict.

This mother shared the following statement about her nephew and his parents:

The [mom] was stressed at home... [the father] wanted his free time because it was his days off. In the end, they did not agree in any form of communication. When the parents would start to fight, the child would cover his ears and he wanted to go to the

street. He didn't want to listen, he perhaps wanted the time and attention with his parents but they would fight, so instead he would go out into the street. So that resulted, he was about ten when he began to go out into the street with his friends, going to the park around the corner from his house and he began to get involved with the gangs so much that he began to get involved with drugs later on... At fifteen or fourteen years-old, the girlfriend was 13 and he got her pregnant. At fifteen he was sent to jail. Now he is eighteen and he has been to jail five times. The other brother is thirteen years-old and he is equally involved in the gangs and the drugs and the bad thing is that he has tried to kill the enemy gangs. I say that the violence began with their parents, at home.

*[La [madre] estaba estresada de la casa... [el padre] quería también su tiempo libre porque eran sus días de descanso. Total de que ellos no se acordaban en nada en la comunicación. Cuando los padres se empezaban a pelear, el niño se tapaba los oídos y se quería ir a la calle. No quería escuchar, él quería a la mejor tener la atención y el tiempo con los padres pero era pleito, entonces el mejor se salía a las calles. Se eso se generó, él tenía como diez años de edad cuando empezaba ya a salirse con los amiguitos al parque de la esquina de su casa y allí se empezó a involucrarse en las pandillas tanto que después empezó con drogas... A sus quince años- catorce años, la noviecita 13 años y embarazo a la novia. A los quince años él cayó la primera vez a la cárcel. Ahorita tiene 18 años y a caído cinco veces a la cárcel. Y el otro hermanito tiene trece años y está igual, metido en pandillas y en drogas y lo malo es que ya a intentado matar con las pandillas contrarias. Digo, la violencia empezó en sus padres, en el hogar.]*

As vocalized by this mother, family conflict led to more distanced parent-child relationships and youth turning to the streets to escape the conflict. For this family, the stakes of strained parent-child relationships that resulted from the conflict were high, given the youth's deleterious outcomes. Mexican immigrant parents shared their perspectives of the role of parenting and parent-child relationships, recognizing this larger issue that was previously mentioned- violence begins at home.

In higher conflict examples, parents involved authorities. For example, a mother of three shared a story in which she relied on authorities to address conflict that marked her relationship with one of her sons who was now eighteen:

I locked my son up in prison for the first time. My son was in jail because of me. He started yelling at me in the house. He hit and broke the door. I called the police to come get him, when he was taken away. He arrived at juvenile hall... They kept them busy, things that my son did not want to do at home... For me my son was safer because he didn't listen to me, and we were already confronting each other and it was a horrible thing, I would prefer for him to be locked up.

*[Yo metí por primera vez a mi hijo a la cárcel. Mi hijo toco la cárcel por mí. Empezó detonando la casa, le metió una, un golpe a la puerta, me rompió la puerta. Llame a la policía, vengan por él, cuando a él se lo llevaron, llego a la juvenil...Allí los mantenían ocupados. Cosa que mi hijo no quería ser en mi casa... Yo para mí, mi hijo estaba más seguro, porque como a mí no me hacía caso, y ya estábamos confrontándolos era una cosa horrible, yo lo preferiría adentro.]*

In high conflict situations, reliance on judicial or police sources became the solution. Parents reflected helplessness in their parenting efforts, and extreme difficulty in their relationships

with their youth. As evident in this parent's narrative she believed in the justice system, more so than in her own parenting to keep her son safe. She reflected on how her decision to intervene with police strengthened her relationship with her son, because he learned values of respect while incarcerated.

Parents also reported situations in which youth threatened to or did involve authorities such as police or child protective services. Youth would threaten to call the police in response to being told to do something they didn't want to do. Parents' responses to these threats included being fearful that youth would actually call, threatening that the police would get the child to do the unwanted task, or expressing concerns that the police would take a parent away. One parent shared an example he heard from another father about a parenting interaction that illustrated this conflict:

So, he said that one day his wife told him, "My daughter is being rebellious, every time I discipline her or something she tells me that if I discipline her she is going to call the police, and she grabs the telephone." She said, "I don't tell her anything anymore." One day the man said, "I arrived, arrived angry and I don't know what she was doing, a tantrum and I grabbed her and told her, 'what is going on?' 'If you scream at me,' [his daughter] said, 'if you discipline me,' she said, 'I will call the police.' No I gave her a little push and I passed her the telephone, 'call the police' I told her, 'I am going to go to jail but you will leave my house, I'll let the government do what they want with you, I don't want you.'"

*[Entonces dice que un día su esposa un día le dijo, "me dijo, mi hija se está poniendo rebelde, cada que yo la regano o algo me dice si me reganas voy a llamar a la policía dice y agarra el teléfono." Y todo dijo, "yo ya no le digo nada." Un día dijo el señor,*

*“llegue encabronado y no sé qué estaba haciendo berrinche y que agarro y le dije, “y tú que tienes?” “Si me gritas” dijo, “si me reganas” dijo, “voy a llamar a la policía.” No yo le di un pachoncito así dijo y que le paso el teléfono, “llámale a la policía” le dije, “yo me voy a ir a la cárcel, pero tú de mi casa te me vas, ahí que el gobierno haga contigo lo que quiera, yo no te quiero.”]*

Family conflict of this caliber challenged parents’ abilities in setting limits, disciplining their children, and recognizing rebellious behavior that could have serious implications for the family. In addition to handling family conflict around discipline, parents had to negotiate the power imbalance that may have occurred as youth express conflict by threatening to involve police authorities. Concurrently, the parent-child relationship was strained by parents’ responses of explaining potential consequences of incarceration that may have resulted from involving police.

**Family cohesion.** As with family conflict and distancing, family cohesion was described in relation to several of the other key themes previously explored. Family cohesion was identified as closeness in emotional and relational bonds between family members. Parents shared their perspectives of prioritizing closeness within family relationships. One mother (youth ages unknown) provided a good example of this:

I think because the children always need someone to pay attention to them so that they feel that security in themselves of someone that listens to them and loves them... sometimes I stop cooking and I prefer to buy food to be with them... I give them affection and they don’t say anything back I say, “I know that something is wrong, your face tells me everything”, “I want to talk with you and we are going to sit and

relax” and that’s when they start to express how they’re feeling about what’s happening and a lot of times because of that I feel happy to have talked with them. *[Todos los dias necesitan que uno este al pendiente de ellos para que ellos sientan esa seguridad de en ellos mismos de que halla alguien que los escucha que los quiere...yo dejo de aveces de cocinar prefiero comprar comida para estar con ellos... les ago carinos y ni dicen nada. Yo les digo “yo se que si les pasa algo, su cara me lo dice todo,” “yo quiero hablar con ustedes vamos a sentarnos vamos a relajarnos” y es cuando empiesan a expresar lo que sienten lo que esta pasando y por eso muchas veces me siento—despues de que pasa eso me siento feliz estando haber hablado con ellos.]*

This notion of emotional closeness as representative of family cohesion was illustrated as this single mother reflected on the interactions with her youth (two sons and a daughter; ages unknown):

Have patience, calmness, and more than anything talk to them. “How do you feel?” “How was your day?” “You don’t want to talk right now? Okay, later then.” “In a moment, I will talk to you, in a moment I’ll talk.” That was my job, like a mother and father. I learned to know the three of them. If I cried, one of them cried, because I knew that he was crying with me. If I got mad, he knew that he made me mad. And with my other child, it is the same. But that is our job, to learn to know the personalities of our children, because we are all different, and we cannot treat them the same.

*[Tenerles paciencia, y calma, y más que nada platicar con ellos. “Cómo te sientes?” “Como te fue?” “No quieres hablar ahorita bueno, al ratito.” “En un momento*

*hablo contigo, un momento hablo.” Ese fue mi trabajo, como madre y padre.*

*Entonces yo aprende a conocer a los tres. Si yo lloraba, uno lloraba, porque el que yo sabía que si lloraba conmigo. Si yo me enojaba ya sabía que pues él me hacía enojar. Y con la otra pues también igual. Pero eso es el trabajo de nosotros, aprender a conocer el carácter de nuestros hijos, porque todos somos diferentes, y no podemos tratarlos a todos igual.]*

These various examples allude to the protective role that family cohesion can have on parent-child relationships, especially when raising youth in the face of various stressors.

**Parent-Child Relationships.** Parents highlighted the importance of parent-child relationships as they discussed interactions they have had with their youth, considered their upbringing and reflected on parenting ideals. While discussing their role in creating positive parent-child relationships, parents reflected on their own experiences with their parents, recognizing the long-term impact of how they were parented with violence, abuse, or harsh parenting; and making a point to change these experiences in their relationship with their child. For example, a mother of three (ages: unknown) stated:

I do not hit them, my father would hit us. But I said, no I will not hit them, because they only have their mother, and where were they going to seek comfort. Usually the children seek comfort from their mom or the dad, right? And I would say, they do not have a father, so that is why, I made a change there, one has to learn to know their children in order to coexist with them.

*[Yo no golpes, mi papa si con golpes. Pero yo dije no yo no les voy a golpear porque nomas tienen mama y en donde se van a refugiar. Usualmente los hijos se refugian en la mama o en el papa, ¿Verdad? Y yo decía estos no tienen un padre, entonces por*



*eso, allí vuelvo hacer un cambio, uno tiene que aprender, a conocer a sus hijos para convivir con ellos.]*

This mother recognized the importance of her role as a single mother to provide support and comfort for her youth, so they do not seek this support elsewhere. One goal of trusting and open parent-child communication for Mexican parents is for youth to seek support within the home rather than from others. For example, a father drew from his own upbringing, challenged by being raised around violence and being removed from the home at 12-years of age, to reflect on the importance of closeness between parents and children, open communication, and creating an environment where youth feel supported:

The reality is that it will help your children, and these are teachings that [parents] teach from childhood. That is, many of our traditions that children learn from the time that they are in the bellies of our mothers... The teachings to begin in our homes... if young boys and young girls see violence in their homes, they are also going to see it in the community, but also it depends how one raises their kids. It's how many adolescents are going to make their decisions... All it takes is simple being there for them with an open door because if we lie to our kids they are no longer going to ask us questions. And if you don't get involved in your children's lives, someone else is going to involve them.

*[La realidad que, si les va a ayudar a sus hijos, y son enseñanzas que enseñan desde niños. Este muchas de las tradiciones de nosotros es que los niños aprenden desde que están en el estómago de nuestras madres... Este son las enseñanzas si empiezan en la casa de nosotros... si los muchachos o las muchachas ven violencia en su casa, también lo van a ver en la comunidad, e pero también depende como uno crea a los*

*hijos es como las decisiones que muchos muchachos van a tomar. Es simplemente estar puerta abierta con ellos porque si nosotros les mentimos a los a nuestros niños ya no nos van a hacer preguntas. Y si usted no se involucra en la vida de sus hijos alguien más los va a involucrar a ellos.]*

This parent illustrated the tension between modeling lessons (both positive and negative) in the home through the parent-child relationship and interactions that later impact youth's decision making, especially around issues of violence, and seeking support. It is evident that this parent recognized the crucial role of parents in being engaged in their youth's lives, in fostering closeness and cohesion, to prevent youth from turning to other places to seek this type of support.

Parents explained the significance of parent-child relationships and the value of supporting youth starting at an early age. Parents discussed the challenges of balancing work, time, and their attention for their children, as well as recognizing that their absence in relationships with their children runs the risk of youth being exposed to bad influences from peers, gangs, or addictions. In response to parents sharing these concerns, a father of four children (ages: 3, 7, 11, and 13) reflected on his perspective of the role of parents:

It's one very important base, the children from an early age in their house, to know what the home is, the support, to be told, "I love you, I love you," and to support them in their homework and to lend your attention more than anything.

*[Es una base bien importante, los niños que desde chiquitos en su casa, que sepan los que es el hogar, el apoyo, que les digan "te quiero, te amo," y que les apoyen en sus tareas y que les presten atención más que nada.]*

This father verbalized the responsibility parents have in being able to foster interactions that strengthen the parent-child relationship. Parents described everyday interactions, communication, modeling, and developing a sense of closeness that start when youth are young to strengthen these relationships. In doing so, parents recognized their imperfections, the barriers of time, energy, and balancing other stressors, but nonetheless shared the value of these relationships with their children.

**Mental Health.** Parents identified mental health challenges that impacted parenting and interactions with their youth, including providing guidance or support and communication. Parents reflected on understanding the adversities children face, the importance of empathy and communication about these stressors. A widowed mother of three (ages: unknown) stated:

Because the kids, they too, have depression, the kids face everything at school. We too face everything in our lives, which is how we should understand our children. And have patience, and calm, and more than anything talk to them.

*[Porque los niños también tienen depresión, los niños también se enfrentan en la escuela a todo. Entonces como nosotros también nos enfrentamos a la vida a todo, así debemos de entender a nuestros hijos. Y tenerles paciencia, y calma, y más que nada platicar con ellos].*

Parents emphasized the importance of communicating patience and understanding as parents drew from their own experiences with stressors to gain perspective of their youth's challenges. Parents discussed how stressors youth experienced, such as being victimized by peers for many years, affected them: noticing they were sadder, crying a lot, isolated, and depressed.

Parents disclosure of their own mental health challenges came up as they reflected on various adversities they experienced in the community (e.g., sexual assault in their neighborhood). A mother explained how her mental health after being physically assaulted impacted her ability to provide support and care for her daughters (Ages: unknown): “I stayed in bed so much that in reality I did not want to know anything about the world, I wanted to, I don't know, end my life. So, it came to the point in which I could no longer take care of my daughters because I was in a very bad place” [*“Me metí tanto en la cama que en realidad yo no quería saber nada del mundo, yo quería, no se quitarme la vida. Entonces hubo esto caso que, ya después este yo no podía cuidar en mis hijas, del mal que estaba.”*]. This mother discussed how harm impacts the whole family, as she reflected on her daughter’s subsequent emotional distress. As a mother, she adapted strategies to buffer her daughters from seeing her emotional turmoil (e.g., crying when her children are not around), engaged in communication about her daughter’s emotional distress, and sought mental health services.

Although not many parents disclosed mental health challenges, the few that were shared were compelling and warranted being highlighted. Parents were not given specific prompts to discuss mental health and the format of focus groups was not conducive to disclosure about mental health challenges that parents or their youth faced, thus we further explored this theme in a more anonymous approach using quantitative approaches.

## **Quantitative**

**Data Screening.** Normality statistics, comparison of variances, and measure reliability were reported in Tables 4 and 5. Histograms and P-P plots were used in addition to Shapiro-Wilk tests of normality to establish that data met assumptions of paired-sample t-

tests and multiple regression. Given histogram and P-P plot visual analyses indicating a left skew, a square transformation was completed for the teen report of BFRS Family Conflict subscale. Similarly, the same was done for the parent report of BFRS Family Conflict subscale, as results from the Shapiro-Wilk test indicated non-normal distribution, and the histogram indicated a slight left skew. Results from the Shapiro-Wilk test of normality indicated a violation of normality for parent and teen report of family cohesion (e.g., FACES), and examination of histograms indicated a left skew; thus, square transformations were completed. Results from normality statistics and visual analyses of histograms and P-P plots indicated a right skew that required square root transformations for the teen and parent report of depression. See Table 6 for an examination of collinearity using bivariate correlation for variables included in each research question. There was no concern for multicollinearity among the variables included in analyses.

**Missing Data.** Subscale scores were calculated if at least 80% of the scale items had been completed. The amount of missing data for teen subscales was at or below 5%, whereas the amount of missing data for parents was at or below 12.5% (see Table 3). There was missing data for two participants among the total of 40 parent-child dyads who were recruited for the current study. One youth participant chose not to assent or participate, thus only parent data was collected. Additionally, there was a technology error in saving the data through Qualtrics for the second participant, and thus the child's data is missing. These two parent-child dyads were excluded from analyses and thus the sample used for data analyses was comprised of 38 parent-child dyads.

### **Discrepancies in Parent and Youth report of Family Cohesion and Family Conflict (RQ2)**

**H1: Parent and youth report of family cohesion and family conflict will be significantly different.** After assumptions were met by completing square transformations, two paired samples t-test were conducted to examine whether there were significant discrepancies between parent and youth reports of family cohesion and family conflict. Congruent with our hypothesis, there were significant differences in youth and parent report of family cohesion. Specifically, youth reported significantly lower levels of family cohesion ( $M = 38.82, SD = 8.05$ ) compared to parents ( $M = 42.33, SD = 5.45$ ),  $t(37) = -2.64, p = .01$ . As seen in Table 7, similar results were found regarding family conflict, in which youth reported significantly more family conflict ( $M = 25.96, SD = 3.92$ ) compared to parents ( $M = 27.18, SD = 3.96$ ),  $t(31) = -2.67, p = .01$ , as evidenced by their lower scores.

**Family cohesion and family conflict and youth's mental health outcomes (RQ3)**

**H2: Youth self-report of family cohesion will be negatively associated with depression and total behavior problems. Whereas, greater family conflict (youth self-report) will be associated with less depression and behavior problems.**

Pearson correlations were used to examine associations between youth reported cohesion or conflict and depression and behavior problems (See Table 6). Youth's report of family cohesion was negatively and significantly associated with youth depression ( $r = -0.58, p < .001$ ), and parent reported behavior problems among youth ( $r = -0.40, p = .01$ ), such that higher family cohesion was associated with lower depression symptoms and behavior problems. Similarly, our hypothesis was confirmed, in regard to findings suggesting that youth reports family conflict were associated with increased youth's depression ( $r = -0.47, p = .004$ ) and behavior problems ( $r = -0.35, p = .04$ ). The direction of these association is congruent with our hypotheses given that lower scores on the family conflict subscale were

indicative of higher family conflict. Among our sample, 55% were scored within the not depressed range, 22.5% were considered mildly depressed, 5% were moderately depressed, and 13.5% were severely depressed.

#### **Youth community violence exposure and mental health outcomes (RQ4)**

**H3: Exposure to community violence will be positively related to youth depression and behavior problems.** Pearson correlations were used to examine the strength of the association between exposure to community violence and self-reported depression symptoms, as well as parent report of behavior problems. Our hypothesis was partially supported, in that youth report of exposure to community violence was positively associated with youth depression ( $r = 0.35, p = .03$ ), but not with behavior problems ( $r = -0.16, p = .34$ ).

#### **Parents' depression as related to youth reports of family cohesion and family conflict (RQ5)**

**H4: Parents' depression will be negatively related to youth reports of family cohesion and associated with greater family conflict (youth report).** We used Pearson correlations to examine our hypothesis. Results partially supported our hypothesis, indicating parents' depression was moderately and negatively associated with youth reports of family cohesion, ( $r = -.32, p = .05$ ). However, we did not find a significant relationship between parents' depression and youth's report of family conflict ( $r = -.24, p = .17$ ).

#### **RQ 6: Moderating role of parents' depression in the relationship between family cohesion or family conflict and youth mental health outcomes**

**H5: Parents' depression will moderate the relationship between family cohesion and youths' depression.** To test this hypothesis, four hierarchical regression models were

constructed, the first two to examine youth reports of cohesion, and the second two to examine parent reports of cohesion in the models. All four models are present in Table 8. In the first step (Model 1(Y)), youth age, youth report of family cohesion, and parents' depression accounted for 35% of the variance in youths' depression symptoms,  $F(3, 33) = 5.87, p = .003$ . Next, an interaction term of parents' depression was added to the model as a moderator in order to examine its moderating effects. Contrary to the hypothesis, parents' depression did not significantly moderate the relationship between youth reported family cohesion and youth symptoms of depression ( $\beta = .45, p = .26$ ). In the moderation model, youth reported family cohesion was the only significant predictor of youth's depressive symptoms ( $\beta = -0.92, p = .009$ ). This model, which was comprised of youth's age, youth report of family cohesion, maternal depression and the interaction term accounted for 37% of the variance in youths' symptoms of depression  $F(4, 32) = 4.76, p = .004$ .

Two additional hierarchical regression models were conducted to examine this hypothesis using parent report of family cohesion. In Model 1(P), youth's age, parent report of family cohesion, and parents' depression were entered as predictors of youths' depression symptoms. Results indicated no significant predictors of youths' depression, and a model that was not significant,  $F(3, 33) = 1.82, p = .16$ . Similar results were found in Model 2(P), in which parents' depression was added as a moderator, by including an interaction term. Our hypothesis was again not supported by these results, suggesting that parents' depression did not moderate the relationship between family cohesion (parent report) and youth's depression ( $\beta = -0.25, p = .16$ ). Additionally, results revealed a non-significant model ( $F(4, 32) = 1.94, p = .13$ ), in which youth's age, parent-report of cohesion, maternal depression, nor the interaction term were significant predictors of youth's depression. Results from the post-hoc



power analyses suggested that in Model 2(Y) our power was .97, meaning we had adequate sample size to achieve a high level of power and reduce the chance of making a Type II error. However, post-hoc power analyses revealed that our Model 2(P) was underpowered (.62).

**H6: Parents' depression will moderate the relationship between family conflict and youth depression.** Four hierarchical regression models were conducted to test this hypothesis. Results from hierarchical regression analyses utilizing youth self-reported depression symptoms as the criterion variable were presented in Table 9. In Model A(Y), youths' age, youth-report of family conflict and parents' depression accounted for 22% of the variance in youths' depression symptoms,  $F(3, 32) = 3.06, p = .04$ . In this model, youth's report of family conflict was the only variable that emerged as a significant predictor of youths' depression symptoms ( $\beta = -0.44, p = .01$ ). In Model B(Y), an interaction term was added to examine whether parents' depression served as a moderator in the relationship between family conflict (youth report) and youths' symptoms of depression. Contrary to our hypothesis, parents' depression did not moderate the relationship between youth self-reported conflict and youths' depression ( $\beta = -0.14, p = .42$ ). Additionally, adding the interaction term weakened the model, such that the model was no longer significant ( $F(4, 31) = 2.43, p = .07$ , and age ( $\beta = 0.14, p = .44$ ), nor parents' depression ( $\beta = -0.30, p = .85$ ) significantly predicted youths' depression symptoms; however, youth reported conflict ( $\beta = -0.40, p = .03$ ) did significantly predict youth depression. It is noteworthy, that results from a post-hoc power analysis revealed we did not have sufficient power for Model B(Y) (.79), given the sample size.

To examine this hypothesis with parent reported family conflict, we conducted two additional hierarchical regression models, Model A(P) and Model B(P). In Model A(P), when youths' age, parent reported conflict, and parents' depression were entered, only parent reported conflict was predictive of youths' depression symptoms ( $\beta = -0.38, p = .05$ ). However, the overall model was not significant,  $F(3, 29) = 2.18, p = .11$ . Similar results were found in Model B(P), in which the model with youths' age, parent reported conflict, parents' depression and an interaction term was not significant,  $F(4, 28) = 2.06, p = .11$ . Additionally, results suggest that the moderating effect of parents' depression was not found in the relationship between parent reported family conflict and youths' depressive symptoms ( $\beta = -0.22, p = .22$ ). Post-hoc power analyses suggested that we did not have adequate power for Model B(P) (.70) given our sample size.

#### **CHAPTER FOUR: DISCUSSION**

The current study was embedded within the unique context of an ongoing community based participatory research collaboration involving Latinx youth-serving agencies and community partners.

Using a CBPR, mixed methods approach, that integrated community key stakeholders in various aspects of the research process (i.e., conceptualization, recruitment, data collection), offered a culturally-responsive way of engaging an underrepresented and vulnerable population. This project contributed both methodologically and conceptually to current literature. Scholars have suggested that examining discrepancies in parent and child reports is a notable area of research (De Los Reyes et al., 2009; as seen in Stuart & Jose, 2012), yet is an area that is understudied among Latinx immigrant samples. This study contributed to the literature by examining discrepancies in parent and youth reports of family

cohesion and family conflict. By using a QUAL-quan approach, we demonstrated how when working with vulnerable populations, the format of data collection (e.g., focus group as compared to individual interview) may limit participants' comfort with personal disclosures about sensitive topics like mental health; thus, using mixed methods allows for a more comprehensive approach.

Current literature with Latinx families has been criticized for being limited in the contexts studied, and for lacking consideration of unique Latinx immigrant stressors. Thus, a strength of this study was in applying the Cultural-Ecological- Transactional Perspective (Kuperminc et al., 2009) to examine unique experiences of Latinx immigrant parents and their youth. This study integrated cultural considerations in examining the daily transactions and broadly defined stressors youth and parents face in their neighborhoods, communities, and schools. This research furthered our understanding of contributing factors that impact family conflict and family cohesion, and overall parent-child relationships among Mexican immigrant families navigating a multitude of stressors.

### **Parent-Child Interactions and Implications for Family Processes**

Results from focus groups indicated that families experienced several stressors consistent with prior research, including neighborhood violence (Ceballo et al., 2012), bullying (Shea, Wang, Shi, Gonzalez, & Espelage, 2016) and concerns about deviant peers (Eamon & Mulder, 2005). We found that immigrant parents and youth responded to stressors in their neighborhoods, schools and communities in four ways: by providing guidance and support, monitoring, communication, and parents' *impotencia*. Several of our findings were congruent with previous research, including parents' emphasis on monitoring and communication (Ceballo et al., 2012). Additionally, in accordance with previous research,

parents identified the importance of open and trusting communication (Crockett et al., 2007; Perreira et al., 2006), and difficulties of *callado* (Nicolaidis et al., 2011). However, to our knowledge, findings of *callado* or keeping things inside have only been investigated among a sample of Latina adult survivors of violence (Nicolaidis et al., 2011) and not among youth encountering similar stressors of violence.

Parents' tendencies to provide support and guidance in the face of stressors also aligned with Shea and colleagues' (2016) research that examined responses to bullying among Asian and Latinx immigrant parents. They found parents to employ "pragmatic or solution-focused strategies" that included telling their children to distance from the problem, speak to an authority figure, or directly get involved themselves (p. 90). Parents in the current study, however, highlighted fears about leaving their child defenseless in the face aggression or violence in their community and worries about the prospective adverse outcomes their youth may encounter living in their communities, which impacted their provision of support and guidance. These concerns are especially valid, when considering that ethnic and racial minority youth are at disproportionately greater risk of exposure to violence (Masseti & David-Ferdon, 2016), and parents in the focus groups identified that just being around violence increased youth risk for poor outcomes. In navigating these stressors and fears about deleterious outcomes, parents expressed *impotencia*. However, there is little existing research to contextualize this finding among Latinx immigrant families. Scholars have alluded to parents' "diminished sense of self-esteem and self-efficacy" resulting from being unable to protect youth from community violence (Aisenberg et al., 2007, p. 1232), but have yet to empirically test this construct. Others demonstrated parents' expression of helplessness for their insufficient abilities of protecting their youth while living among community violence

(Richters & Martinez, 1993), however, this study was not exclusively focused on Latinx immigrant families.

### **Family Cohesion and Family Conflict**

Family cohesion and conflict are constructs that have largely been studied as protective or risk factors among Latinx samples in separate bodies of literature. For example, Leidy, Guerra, and Toro (2012) examined family cohesion among 12 Latina mothers and found barriers to parenting and family cohesion to include acculturation, barriers to educational involvement, loss of family social support, and discrimination regarding immigrant and legal status. The current study added to this existing research by offering a model of factors contributing to family cohesion, conflict and parent-child relationships in the face of multiple neighborhood, school and community stressors.

Results of the integrated theoretical model indicated the associations between parent-child interactions (e.g., guidance/support, monitoring, communication, and *impotencia*), family cohesion and family conflict, and implications for parent-child relationships. The associations we found between various parent-child interactions and family conflict and cohesion are congruent with previous research (e.g., Knight, Tein, Shell, & Roosa, 1992; Wagner et al., 2010). For example, in a large sample of Latinx 9<sup>th</sup> and 10<sup>th</sup> graders ( $N = 1,433$ ), Wagner and colleagues (2010) found communication and monitoring to be negatively related to family conflict and positively related to family cohesion. The link we found between providing support and family cohesion was also consistent with previous research examining youth exposed to high rates of community violence (Houtlberg, Henry, & Morris, 2012).

Related to experiences of family conflict and cohesion within Latinx immigrant families, results from our survey indicated that parents perceived significantly greater family cohesion, but youth perceived greater family conflict. These findings were consistent with current research in samples not specific to Latinx (e.g., Stuart & Jose, 2012), and among Latinx families based on different stages of acculturation (e.g., Miranda, Estrada, & Firpo-Jimenez, 2000). Although acculturation stages or differences in acculturation have often been examined in relation to family conflict (e.g., Gonzales et al., 2006; Lee et al., 2000; Telzer, 2010), in the current study, these challenges were not as prevalent in parents' narratives of parenting or in their reflections on parent-child relationships in the face of various stressors related to violence.

Focus group findings indicated the difficulties families face when family conflict involved youth threats to call police or child protective services. Leidy and colleagues (2012) found similar challenges in their study with 12 immigrant Latina mothers. They highlighted that parents in these instances were burdened with managing the power imbalance with their youth, navigating new laws around parenting their youth, and amending their discipline strategies. Another expression of family conflict was in parents' use of the judicial system or communicating to their child the prospect of them being taken away. Researchers found similar language in their study with Latinx fathers. In particular, scholars examined the concept of psychological aggression, which appears to include an aspect of this- "threatening to send the child away" (Lee, Altschul, Shair, & Taylor, 2011, p. 2). Lee and colleagues (2011) suggested an area of future research to include assessing whether perceived threats of child welfare involvement impacts immigrant parenting behaviors. These trends are especially important to consider given the hazard to family stability with the changing U.S.

immigration policies (Roche, Vaquera, White, & Rivera, 2018) and the difficulties youth and parents may face in the aftermath of family separation from detainment or deportation (Chaudry et al., 2010; Brabeck & Xu, 2010).

Even in the context of facing a multitude of stressors, findings suggested that parents greatly emphasized the importance of closeness, family being the source of support, and the protective role of establishing good parent-child relationships at an early age. However, as parents discussed the importance of parent-child relationships, they reflected on their own upbringing, trauma histories, and experiences of harsh parenting. Thus, an important concern that warrants further investigation is whether Mexican immigrant parents navigating parenting decisions about communicating their adversities, sacrifices and likely histories of trauma impacts parent-child relationships.

Examining relationships between these previously mentioned constructs and youths' or parents' mental health within the focus groups was challenging given the format not being conducive to this form of personal disclosure. Nevertheless, focus group participants identified mental health difficulties resulting from exposure to stressors (e.g., victimization and assault). As a result, we examined these mental health challenges in a more anonymous way using quantitative approaches and found that approximately 40% of parents and youth experienced between mild to severe depression symptoms. As hypothesized, the association between community violence and youths' depression was established and was consistent with prior research (Aisenberg et al., 2007; Ayón, Marsiglia, & Bermudez-Parsai, 2010; Bennett & Joe, 2015; Gorman-Smith & Tolan, 1998; Hovey & King, 1996; Huynh & Fuligni, 2010; Kessler, Mickelson, & Williams, 2009; Gudiño et al., 2012). In line with previous research, results indicated that increased family cohesion was associated youths' reduced

depression and total behavior problems; whereas, greater family conflict was associated with higher rates of depression and behavior problems (Xu, Boyd, Butler, Moore, & Benton, 2017).

The findings partially supported our hypotheses that parents' depression would be related to youth report of family conflict and family cohesion. Consistent with previous research, we found parents' depression to be negatively associated with family cohesion (Zapata, Carlos, Merten, Gallus, & Grzywacz, 2017). However, we did not find a significant relationship between parent's depression and family conflict. Wheeler and colleagues (2011) reported mixed findings regarding the associations between parents' symptoms of depression and parent-youth conflict, such that maternal depression was associated with parent-youth conflict, but paternal depression symptoms was associated with parent-youth conflict for younger but not older youth in their sample.

The role of parents' depression was examined as a moderator of the relationship between family cohesion (parent- or youth-report) and youths' depression, and similarly of the relationships between family conflict (parent- or youth-report) and youths' depression. Overall, the results did not support these hypotheses. Parents' depression did not moderate the relationship between family cohesion and youths' depression, or family conflict and youths' depression. Among the predictors in the model, youth-reported family cohesion was the only strong predictor of youths' depression, even when controlling for age, and parents' depression. Although other studies report similar predictive relationships between family cohesion and youths' depression (e.g., Nair, Roche, & White, 2018; Roche et al., 2018), to our awareness, none to date have examined parents' depression as a moderator in these relationships. One explanation of our finding that in our model with our sample of



predominantly Mexican immigrant parents, parents' depression did not demonstrate a moderating role between family conflict or family cohesion and youths' depression may be that Latinx experience depression more commonly in somatic forms that may not impede on interpersonal relationships. For example, Corona and colleagues (2005) found that among 111 Latinx parent-adolescent dyads, parent self-report of depression symptoms was not related to observations of maternal behavior while having a conversation about conflicts with their adolescents, or to adolescent reports of family satisfaction. The nonsignificant moderation results may also be attributed to a small sample size, and a model that is underpowered by too many predictors.

### **Strengths and Limitations**

There were several limitations to the current study, for both the qualitative and quantitative approaches. The most notable limitation in the qualitative phase was not being able to link demographic variables to participant narratives. Additionally, although we had a large sample that was representative of various neighborhoods, we had relatively few father participants in the focus groups. In particular, several focus groups had only one father participating, and one focus group had no fathers participating. It could be possible that content discussed in focus groups may have differed with more gender homogeneity. Although this was not tested empirically in this study, it warrants consideration.

There are several limitations for the quantitative phase of the study regarding the sample. One possible limitation included generalizability of the sample given the wide age-range of 8 to 16 years of age. Yet most notable, was the small sample size of 38 parent-child dyads, which limited the type of analyses feasible. There were several potential reasons regarding recruitment difficulties that may have contributed to the small sample size; these

included several socio-political stressors (e.g., new administration, immigration ban, Immigration and Customs Enforcement (ICE) raids), natural disasters, and a streak of high school suicides. CAB identified increase fear impacting the Latinx community and reduced rates of service utilization during several months when recruitment was taking place. Together, given these stressors along with issues of documentation status and fear of deportation, it is important to consider the selection bias of who was willing to participate, and question the vulnerability of individuals who may not have been willing or able to participate.

There were also limitations related to using mixed method approach. In particular, the study design required a lengthy amount of time to complete the two phases. Thus, consideration of temporal and contextual factors that may have impacted the sample during the span of time required to implement both phases was necessary.

There were significant strengths of the current study despite these limitations. Using a CBPR mixed method approach with CAB members facilitating focus group data collection helped to ensure cultural validity of the project. Having Latinx bilingual and bicultural CAB members facilitate focus groups was intended to foster an environment where participants could be more comfortable to share their perspectives, although this was not tested empirically.

### **Implications and Future Directions**

There is a dearth of research that elucidates how Latinx parents' mental health impacts parenting or relationships between parents and youth (Corona et al., 2005). Similar to the current study, researchers found family cohesion to be associated with depression among Latina immigrant women (Zapata et al., 2017). However, no study to date has

examined the moderating role of parents' depression on the relationship between family cohesion/conflict and youths' depression. More research is needed, with larger samples, to understand the interplay of parents' mental health and family processes of cohesion/conflict, and youths' outcomes. The current study included a sample of predominantly mothers, thus increasing father participation in similar studies is recommended in future research.

Researchers have begun to integrate culturally-specific factors that may impact Latinx immigrant parenting (e.g., Ayón, Williams, Marsiglia, Ayers, & Keihne, 2015; Leidy et al., 2012), and the current study contributes to this literature. The results of this research provided an integrated theoretical model of family cohesion, conflict, and parent-child relationships among a sample of predominantly Mexican immigrant families. With the rise in Latinx immigrant children in the U.S., researchers have highlighted the importance of understanding family processes that hinder and promote youth's adjustment and the challenges families may encounter in trying to sustain healthy family functioning among Latinx immigrant families (Leidy et al., 2012). Recognizing not only the unique stressors, adversities and everyday experiences of Latinx immigrant families, it is also important to examine promotive practices parents employ in raising their youth amidst these stressors.

One important point from the current research is parents' difficulties with self-efficacy and youth *callado* that impacted family cohesion and conflict. Future research should examine how these experiences impact help-seeking among Latinx immigrant families, especially given the trends of underutilization of mental health services (Vega, Kolody, Aguilar-Gaxiola & Catalano, 1999). A contributing factor may include the challenges of limited access to insurance and health care immigrant that populations face (Ku & Matani, 2001). Thus, to reduce barriers to accessing services, communities, schools, and

policy-makers should consider incorporating prevention programs into systems Latinx immigrant families frequent.

Researchers developed culturally-sensitive and trauma informed school-based mental health programs that demonstrated improvements in reducing depression and trauma symptoms among Latinx immigrant youth exposed to community violence (Kataoka et al., 2003). Other scholars have partnered with *promotores* to implement prevention programs to address the needs of Latinx communities. Specifically, Edberg and colleagues (2010) worked with *promotores*, or “lay facilitators” (p.224), to implement a multi-tiered prevention approach, SAFER Latinos, to address aspects within a Latinx immigrant community that prevented youth violence. It is noteworthy that the Latino community in which this prevention program was implemented was predominantly from El Salvador. SAFER Latinos was designed to address difficulties with family cohesion, school-barriers, instill community cohesion, and address gang presence in the community by using *promotores*, peer advocates, a community drop-in centers, events and media (Edberg et al., 2010). The Madres a Madres program is another example of partnering with *promotores* to meet the needs of Latinx communities. In particular, the Madres a Madres program is a four session parent training program designed to help immigrant mothers to foster stronger relationships with their young children (Williamson, Knox, Guerra, & Williams, 2014). Together, these prevention and intervention efforts that target unique challenges of Latinx immigrant children impacted by violence, and/or practices that foster strong family ties and a sense of community cohesion may be especially important for vulnerable populations. Furthermore, given that results from the current study illustrated parents’ emphasis on values of closeness, desire for open and trusting communication, monitoring and provision of support, there is a need for continued

implementation and dissemination of culturally-responsive prevention and intervention efforts that strengthen family bonds and engage parents in building family support among Latinx immigrant families and communities.

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Table 1

*Demographics of All Focus Group Participants*

Variable	Total (N = 64)		
	<i>M (SD)</i>	<i>Frequency</i>	<i>%</i>
Age	38.76 (6.89)		
Gender			
Female		52	73.2
Male		10	14.1
Marital Status <sup>1</sup>			
Married		33	67.3
Single		14	28.6
Separated		1	2
Widowed		1	2
Country of Origin <sup>2</sup>			
Mexico		38	90.5
Guatemala		1	2.4
United States		3	7.1
Number of Children	2.98 (1.66)		
Ages of Children	12.51 (6.90)		

*Note.* <sup>1</sup>Marital status was reported for 49 parents. <sup>2</sup>Country of origin was collected for 42 participants.

Table 2

*Participant Demographics by Focus Group*

Variable	Focus Group 1 (N = 6)			Focus Group 2 (N = 10)			Focus Group 3 (N = 12)			Focus Group 4 (N = 14)			Focus Group 5 (N = 8)			Focus Group 6 (N = 12)		
	M (SD)	Frequency	%	M (SD)	Frequency	%	M (SD)	Frequency	%	M (SD)	Frequency	%	M (SD)	Frequency	%	M (SD)	Frequency	%
Age	-			-			37.83 (6.04)			31.67 (8.0)			38.25 (4.5)			43.58 (5.23)		5.23
Gender																		
Female		7	77.8		6	60		11	91.7		14	100		7	87.5		7	58.3
Male		2	22.2		1	10		1	8.3					1	12.5		5	41.7
Marital Status																		
Married		-			2	20		11	91.7		5	35.7		7	87.5		8	66.7
Single		-			-			1	8.3		8	57.1		1	12.5		4	33.3
Separated		1	16.7		-													
Widowed		-			1	10												
Country of Origin																		
Mexico		1	16.7		-			12	100		10	71.4		6	75		9	75
Guatemala		1	16.7															
U.S.											2	14.3					1	8.3
Number of Children	1.4 (0.89)			1.86 (1.07)			2.42 (1.17)			2.64 (1.34)			3.13 (0.99)			5.17 (1.27)		
Ages of Children	22 (6.93)			17.22 (8.18)			8.79 (4.23)			10.03 (4.81)			10.76 (5.51)			15.27 (7.53)		

Table 3

*Demographics of Survey Participants*

Variable	<i>M (SD)</i>	<i>Frequency</i>	<i>%</i>
<i>Youth (N=38)_</i>			
Age	12.05 (2.07)		
Gender			
Female		16	40
Male		22	60
Country of Origin			
Mexico		3	8
United States		35	92
<i>Parents (N=38)_</i>			
Marital Status			
Single		10	26.3
Married		25	65.8
Divorced		3	7.9
Time in the U.S.	18.84 (5.91)		
Country of Origin			
Mexico		37	97.4
Guatemala		1	2.6
Country of Origin (other parent)			
United States		3	7.9
Mexico		30	78.9
Guatemala		3	7.9
Columbia		1	2.6
Education Level			
Less than HS		12	31.6
Some HS		7	18.4
HS or equivalent		10	26.3
Some college		3	7.9
Associates degree		6	15.8

Table 4

*Psychometric Properties of All Variables*

Variable	% Missing	<i>M</i>	<i>SD</i>	Variance	$\alpha$	Range		Skewness	Kurtosis
						Potential	Actual		
Cohesion (T)	5%	38.82	8.05	64.86	0.87	10-50	17-50	-0.83	0.32
Cohesion (P)	0%	42.33	5.45	29.71	0.81	10-50	29-50	-0.85	-0.06
Conflict (T)	7.5%	26.05	3.77	14.22	0.79	6-30	15-30	-0.98	.86 <sup>a</sup>
Conflict (P)	12.5%	27.09	4.01	16.08	0.77	6-30	12-30	<b>-2.23</b>	<b>5.58</b>
CESD (T)	5%	4.79	5.37	28.82	0.80	0-40	0-19	1.22	.48 <sup>b</sup>
SDQ (P)	2.5%	10.85	6.67	44.34	0.83	20-60	1-30	0.61	0.18
CECV (T)	5%	2	1.54	2.38	0.51	0-10	0-5	0.37	-0.74
PHQ-9 (P)	2.5%	4.77	5.30	28.08	0.90	0-27	0-26	2.30	6.66 <sup>d</sup>

*Note.* Values in bold indicated possible violations of statistical assumptions. <sup>a</sup>Square transformation done to BFRS-Conflict (teen report) given histogram and P-P plot visual analysis indicating left skew. <sup>b</sup>Square root transformation made to CESD given visual analysis of P-P plot and histogram indicating right-skew. <sup>d</sup>Square root transformation made to PHQ-9 given skewness, kurtosis and histogram indicating right-skew.

Table 5

*Shapiro-Wilk Tests of Normality for All Variables*

Variable	Sig.	df	F
Cohesion (T)	.03	38	<b>0.94</b> <sup>a</sup>
Cohesion (P)	.007	40	<b>0.92</b> <sup>a</sup>
Conflict (T)	.001	38	<b>0.87</b>
Conflict (P)	.001	34	<b>0.78</b>
CESD (T)	.001	38	<b>0.82</b>
SDQ (P)	.08	39	0.95
CECV (T)	.007	38	<b>0.92</b> <sup>b</sup>
PHQ-9 (P)	.001	39	<b>0.77</b>

*Note.* Bolded items indicate a violation of normality assumptions. <sup>a</sup>A square transformation was done to address the violation of normality and the left-skew. <sup>b</sup>Given the violation of normality assumption, and visual analysis of the histogram indicating right-skew, a square root transformation was done.

Table 6

*Correlations, Means, and Standard Deviations for Measured Variables*

	1	2	3	4	5	6	7	8
1. Cohesion (T)	–							
2. Cohesion (P)	0.40*	–						
3. Conflict (T)	0.55***	0.33*	–					
4. Conflict (P)	0.40*	0.54***	0.47**	–				
5. CECV (T)	-0.10	-0.04	-0.25	-0.19	–			
6. CESD (T)	-0.58***	-0.30	-0.47**	-0.42*	0.35*	–		
7. SDQ-Total (P)	-0.40**	-0.41**	-0.35*	-0.10	-0.16	0.40*	–	
8. PHQ-9 (P)	-0.32*	-0.49**	-0.24	-0.21*	-0.08	0.10	0.46**	–
Mean	38.82	42.33	25.96	27.18	2.00	1.76	10.85	1.86
SD	8.05	5.45	3.92	3.96	1.54	1.32	6.66	1.16

*Note.* Cohesion= Family Adaptability and Cohesion Evaluation Scales III, (T) teen report and (P) parent report; Conflict = Brief Family Relationship Scale Subscale teen report (T) and parent report (P); CECV = teen report of Children's Exposure to Community Violence; CESD = Center for Epidemiological Studies Depression Scale- Revised teen report; SDQ-Total = parent report on the Strengths and Difficulties Questionnaire Total Problems; PHQ-9 (P) = parent report of the Patient Health Questionnaire; SD = standard deviation.

Table 7

*Sample Descriptive Statistics Using Paired Sample T-Test for Equality of Means*

	Parent		Teen		
	M	SD	M	SD	
Cohesion	42.33	5.45	38.82	8.05	-2.64**
Conflict	27.18	3.96	25.96	3.92	-2.67**

*Note.* M = Mean. SD = Standard Deviation.

\*\* $p = .01$



Table 8

*Summary of Hierarchical Regression Analysis for Parents' Depression and Family Cohesion in Predicting Youths' Depression*

Variable	Model 1(Y)			Model 2(Y)			Model 1(P)			Model 2(P)		
	<i>B</i>	SE <i>B</i>	$\beta$	<i>B</i>	SE <i>B</i>	$\beta$	<i>B</i>	SE <i>B</i>	$\beta$	<i>B</i>	SE <i>B</i>	$\beta$
Intercept	-0.21	0.77		0.07	0.81		-0.25	0.88		-0.96	1.00	
Age	.06	0.15	0.06	0.00	0.16	0.000	0.18	0.17	0.18	0.27	0.18	0.27
Cohesion (Y)	<b>0.60***</b>	0.00	-0.59	<b>-0.67***</b>	0.17	-0.92	-	-	-	-	-	-
Cohesion (P)	-	-	-	-	-	-	-0.33	0.20	-0.32	-0.23	0.21	-0.23
Depression (P)	-0.10	0.15	-0.10	-0.05	0.15	-0.50	-0.09	0.18	-0.09	-0.06	0.18	-0.06
Cohesion (Y) x Depression (P)				0.03	0.03	0.45						
Cohesion (P) x Depression (P)										-0.05	0.03	-0.25
<i>R</i>		0.59			0.61			0.38			0.44	
<i>R</i> <sup>2</sup>		0.35			0.37			0.14			0.20	
Model <i>F</i>		<b>5.87**</b>			<b>4.76**</b>			1.82			1.94	
DF		3,33			4,32			3,33			4,32	
p-value		.003			.004			.16			.13	
<i>F</i> for change in <i>R</i> <sup>2</sup>		5.86			1.29			1.82			2.12	

Note. \**p* < .05. \*\**p* < .01. \*\*\**p* < .001.

Maternal Depression= Parent self-report on PHQ-9.

Table 9

*Summary of Hierarchical Regression Analysis for Parents' Depression and Family Conflict in Predicting Youths' Depression*

Variable	Model A(Y)			Model B(Y)			Model A(P)			Model B(P)		
	<i>B</i>	SE <i>B</i>	$\beta$	<i>B</i>	SE <i>B</i>	$\beta$	<i>B</i>	SE <i>B</i>	$\beta$	<i>B</i>	SE <i>B</i>	$\beta$
Intercept	-0,03	0.85		-0.23	0.88		-0.14	0.95		-0.57	1.00	
Age	0.10	0.17	0.09	0.14	0.18	0.14	0.12	0.12	0.12	0.16	0.18	0.16
Conflict (Y)	<b>-0.45**</b>	0.17	-0.44	<b>-0.40*</b>	0.18	-0.40	-	-	-	-	-	-
Conflict (P)	-	-	-	-	-	-	<b>-0.38*</b>	0.19	-0.38	<b>-0.34*</b>	0.18	-0.36
Depression (P)	-0.30	0.15	-0.03	-0.03	0.15	-0.03	0.003	0.18	0.003	0.04	0.18	0.04
Conflict (Y) x Depression (P)				-0.03	0.03	-0.14						
Conflict (P) x Depression (P)										-0.06	0.05	-0.22
<i>R</i>		0.47			0.49			0.43			0.48	
<i>R</i> <sup>2</sup>		0.22			0.24			0.18			0.23	
Model <i>F</i>		<b>3.06*</b>			2.43			2.18			2.06	
DF		3,32			4,31			3,29			4,28	
p-value		0.04			0.07			0.11			0.11	
<i>F</i> for change in <i>R</i> <sup>2</sup>		3.06			0.66			2.18			1.57	

Note. \**p* < .05. \*\**p* < .01. \*\*\**p* < .001.

Maternal Depression= Parent self-report on PHQ-9.

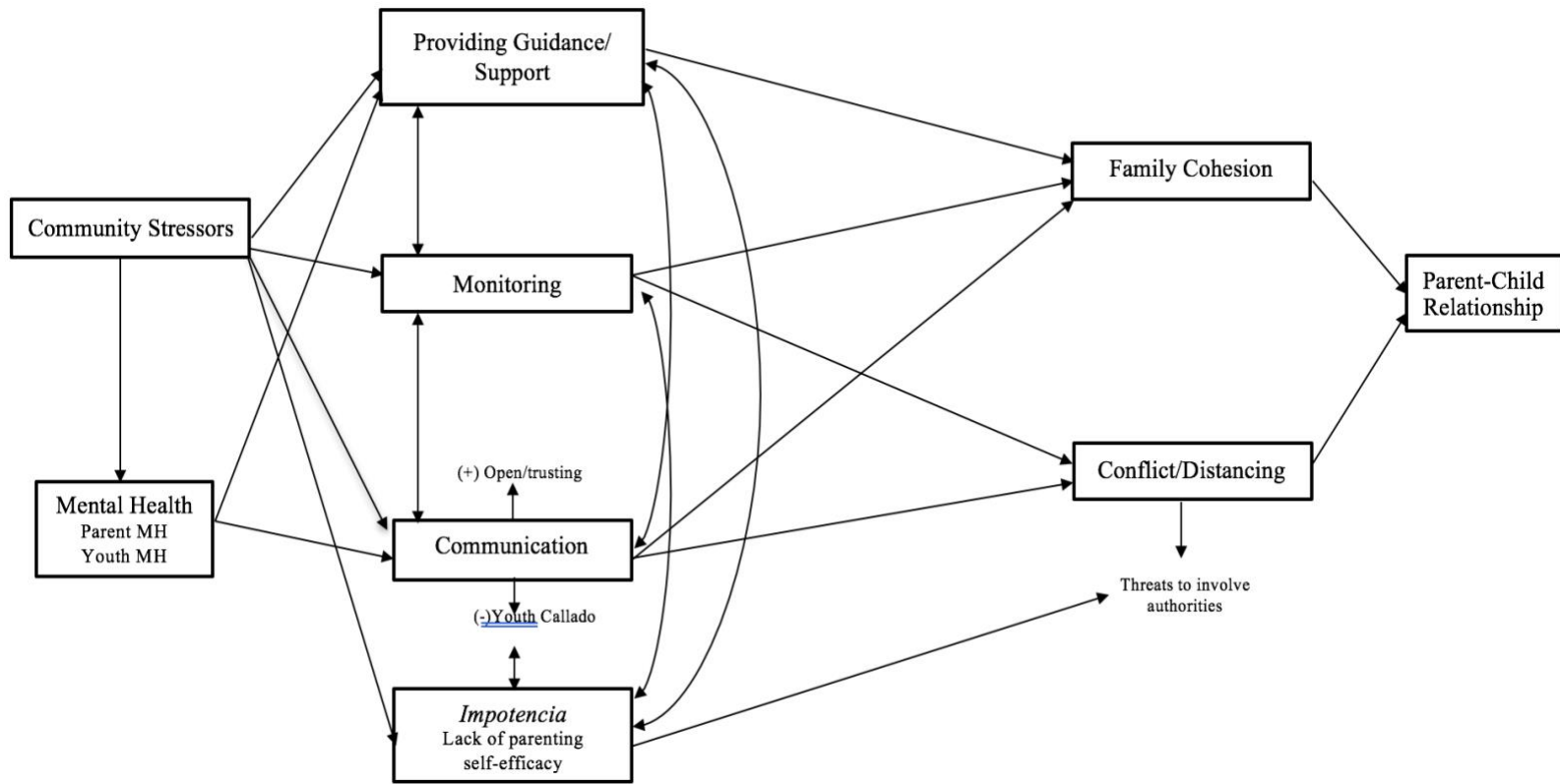


Figure 1. Integrative model of family cohesion, family conflict/distancing, and parent-child relationships among Latinx immigrants.