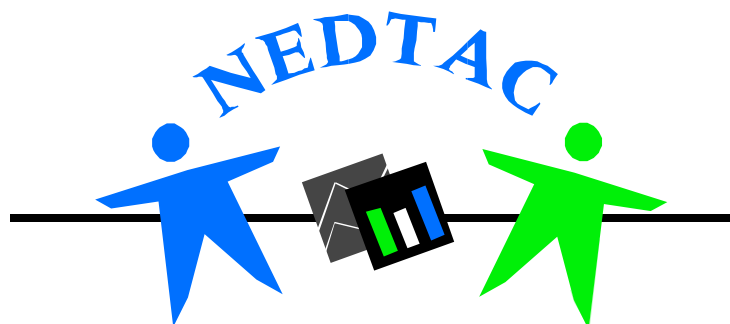


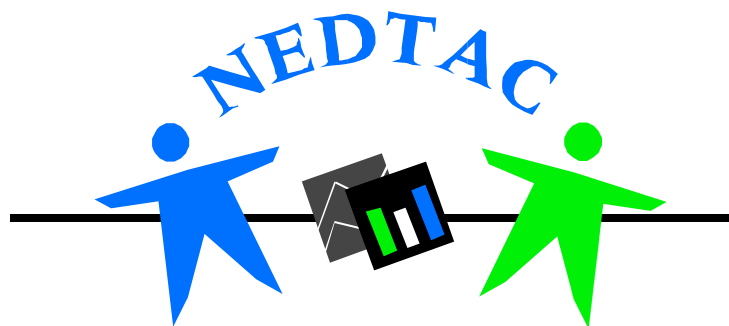
**NATIONAL EVALUATION DATA AND
TECHNICAL ASSISTANCE CENTER**



**HISPANIC/LATINO INITIATIVES:
SELECTED BIBLIOGRAPHIES, 1990-1998**

April 1999

NATIONAL EVALUATION DATA AND TECHNICAL ASSISTANCE CENTER



HISPANIC/LATINO INITIATIVES: SELECTED BIBLIOGRAPHIES, 1990-1998

April 1999

This document was supported by the Center for Substance Abuse Treatment, Department of Health and Human Services, Caliber/NEDTAC Contract No. 270-94-0001.

CSAT
Center for Substance
Abuse Treatment
SAMHSA

TABLE OF CONTENTS

FOREWORD	i
I. HISPANIC/LATINO SUBSTANCE ABUSE TREATMENT: ANNOTATED BIBLIOGRAPHY	1
II. HISPANIC/LATINO SUBSTANCE ABUSE TREATMENT: SELECTED CITATIONS	15

FOREWORD

The mission of the Center for Substance Abuse Treatment (CSAT) is to enhance the nation's substance abuse treatment system by identifying, developing, and supporting appropriate policies, approaches, and programs. In short, for the field of substance abuse treatment, CSAT seeks to determine what works, for whom, how well, and at what cost.

Building knowledge through evaluation is the key to answering these questions. From CSAT's perspective, evaluation—including cost analysis and performance measurement—is an integral component of program management and part of an ongoing process of knowledge development, assessment, and improvement. Toward this end, CSAT's Program Evaluation Branch established the National Evaluation Data and Technical Assistance Center (NEDTAC) to advance state-of-the-art evaluation in the field of substance abuse.

As part of its mission to further the development and dissemination of knowledge in the treatment field, NEDTAC produced a series of bibliographies in key topic areas related to substance abuse treatment. As part of that series, this document focuses on the provision of substance abuse treatment and mental health services that address Hispanic/Latino cultural needs. These needs are varied, since they address cultural groups such as Mexican Americans, Puerto Ricans, Cuban Americans, and Latin Americans.

This bibliography, along with others in this series, was developed under the guidance of the NEDTAC Government Project Officer, Ron Smith, Ph.D., Program Evaluation Branch at the Office of Evaluation, Scientific Analysis, and Synthesis. We also wish to thank Beth Archibald Tang of the NEDTAC Clearinghouse for compiling and reviewing this document.

Sharon Bishop
Director
National Data Evaluation and
Technical Assistance Center (NEDTAC)

**I. HISPANIC/LATINO SUBSTANCE ABUSE TREATMENT:
ANNOTATED BIBLIOGRAPHY**

I. HISPANIC/LATINO SUBSTANCE ABUSE TREATMENT: ANNOTATED BIBLIOGRAPHY

Alva, S. A. (1995). Psychological distress and alcohol use in Hispanic adolescents. Journal of Youth and Adolescence, 24, 481-497.

Psychological distress has been recently implicated as a risk factor that predisposes adolescents toward alcohol and drug use, particularly for Hispanics and other minority groups. Research on the relation between psychosocial stress and alcohol use has found higher levels of alcohol and drug use among Hispanic adolescents who report higher levels of psychological and emotional distress. In this study, Hispanic adolescents (N = 171), with a median age of 14, completed a paper-and-pencil questionnaire to assess levels of psychosocial stress, anxiety, and depression; self-reported patterns of alcohol use were also assessed. In general, males reported higher levels of alcohol use and more friends who drink; the study also found generational differences in drinking patterns. A strong association between psychosocial stress, depression, and alcohol use was also found, suggesting that Hispanic adolescents are using alcohol as a way of coping with conflicts in adapting to the norms and expectations of the dominant group and other difficult events and conditions that produce psychological distress. (Author abstract modified)

Amaro, H., & Aguiar, M. (1994). Programa Mama/Mom's Project: A community-based outreach model for addicted women. In J. Szapocznik, J. (Ed.), A Hispanic/Latino family approach to substance abuse prevention (pp. 125-153). Rockville, MD: Center for Substance Abuse Prevention.

Researchers associate acculturation and/or a longer stay in the U.S. with increased rates of low birth weight. Some of the factors believed to jeopardize the health of Hispanic/Latino women are the stress of cultural adaptation, changes in traditional gender roles, and exposure to "toxic" social and physical inner city environments. Programa Mama is a community-based program in Boston that tries to prevent exposure to drugs in utero and the related poor pregnancy and health outcomes for women and their children. Programa Mama has four intervention components: outreach to drug-abusing pregnant women; advocacy and referral services; support services to assist with immediate needs; and education/discussion groups to reduce social isolation, promote early entry into drug treatment and prenatal care, and support women in early stages of recovery. The program draws women into the program by appealing to Hispanic/Latino cultural values that highly regard family, motherhood, and the welfare of children. However, cultural values such as traditional gender roles and reluctance to talk to outsiders about family problems can be barriers to seeking treatment. Addicted women face barriers to services such as lack of appropriate treatment for pregnant women, providers' fears of legal liability, lack of child care, and a fragmented approach to care. Hispanic/Latino women face the additional barrier of lack of culturally and linguistically appropriate services. Undocumented pregnant women often delay seeking treatment for fear they will be deported or because Medicaid is not available to them.

Argeriou, M., & Daley, M. (1997). Examination of racial and ethnic differences within a sample of Hispanic, white (non-Hispanic), and African American Medicaid-eligible pregnant substance abusers. Journal of Substance Abuse Treatment, 14, 489-498.

White (n = 213), African American (n = 210), and Hispanic (n = 104) Medicaid-eligible, chemically-dependent, pregnant women were interviewed during their stay in publicly-funded detoxification centers in Massachusetts. Comparisons of demographic, psychosocial, and substance abuse variables revealed significant intergroup differences in almost all instances. There appears to be as much heterogeneity within the treatment population subgroup of pregnant women as there is across different treatment populations. Ramifications of the observed differences for treatment planning and service provision are discussed.

Arroyo, J.A., Westerberg, V.S., & Tonigan, J.S. (1998). Comparison of treatment utilization and outcome for Hispanics and non-Hispanic whites. Journal of Studies on Alcohol, 59, 286-291.

This study examined the use of formal alcohol treatment and Alcoholics Anonymous (AA) by Hispanics and non-Hispanic whites and compared ethnic groups on post-treatment functioning. Data from a publicly funded substance abuse treatment center were used to investigate possible differences between Hispanic (n = 46) and non-Hispanic white (n = 62) men (n = 76) and women (n = 32) on percent days in alcohol therapy and in AA attendance for 6 months after study recruitment. The Hispanic clients were more often male (80% vs. 63%) than were non-Hispanic white clients; reported heavy drinking (drinks per drinking day mean=16.7; standard drink units in prior 90 days mean=941) and few abstinent days (mean=0.44). Both groups at intake improved over time with Hispanics engaging in more formal alcohol therapy sessions but attending fewer AA meetings than non-Hispanic whites over the course of 6 months of follow-up. Attendance at treatment and AA were separately associated with decreased intensity and quantity of alcohol use, but not abstinent days, for both ethnic groups. Hispanic and non-Hispanic white clients used somewhat different treatment strategies to deal with alcohol-related problems. These paths, however, ultimately resulted in similar post-treatment drinking outcomes (frequency, intensity, and quantity of alcohol consumption). (Author abstract modified)

Barrera, M., Li, S. A., & Chassin, L. (1993). Ethnic group differences in vulnerability to parental alcoholism and life stress: A study of Hispanic and non-Hispanic Caucasian adolescents. American Journal of Community Psychology, 21, 15-35.

This article reports on Hispanic and Caucasian adolescents' tested vulnerability to parental alcoholism and life stress. Sixty-nine Hispanic and 237 Caucasian adolescents completed measures of life stress, social support, and alcohol use. Their parents reported on the adolescents' psychological symptoms and their own alcohol and substance use. Parental alcoholism and life stress were related to almost all indicators of adolescents' psychological distress and alcohol use. In addition, results showed some evidence that Caucasian adolescents were more vulnerable to

the effects of life stress and parental alcoholism than Hispanics. Neither social support nor the higher substance use of Caucasian parents provided a good explanation for this differential vulnerability. (Author abstract modified)

Bernal, G., Bonillo, J., & Bellido, C. (1995). Ecological validity and cultural sensitivity for outcome research: Issues for the cultural adaptation and development of psychosocial treatments with Hispanics. *Journal of Abnormal Child Psychology*, *23*, 67-82.

The ecological validity of psychosocial treatment outcome research can be enhanced by incorporating a culturally sensitive perspective. Taking Hispanics as an example, a preliminary framework explores the dimensions of language, cultural similarities, and cultural differences between client and therapist, use of cultural symbols and concepts, cultural knowledge, and treatment concepts, goals, methods, and context.

Burge, S.K., Amodei, N., Elkin, B., Catala, S., Andrew, S.R., Lane, P.A., & Seale, J.P. (1997). An evaluation of two primary care interventions for alcohol abuse among Mexican-American patients. *Addiction*, *92*, 1705-1716.

This study examined the effects of two primary care interventions on drinking patterns, psychosocial problems, and blood test results. Subjects were randomized into one of four treatment groups: physician intervention, psychoeducation, both interventions, or no intervention. Follow-up data were collected at 12 and 18 months. There were 175 Mexican-American female and male primary care patients who screened positive for alcohol abuse or dependence and who were not seeking help for alcohol problems. The Diagnostic Interview Schedule was used to assess subjects for alcohol abuse and the Addiction Severity Index was used to measure alcohol-related problems, including psychosocial issues. All four treatment groups demonstrated significant improvement over time, with few differences between intervention and control groups.

Caetano, R., & Clark, C.L. (1998). Trends in alcohol-related problems among whites, blacks, and Hispanics: 1984-1995. *Alcohol, Clinical and Experimental Research*, *22*, 534-538.

This study reports on trends in alcohol problems among whites, blacks, and Hispanics between 1984 and 1995. Data were obtained from two nationwide probability samples of U.S. households, conducted in 1984 and 1995. The 1984 sample consisted of 1,777 whites, 1,947 blacks, and 1,453 Hispanics. The 1995 sample included 1,636 whites, 1,582 blacks, and 1,585 Hispanics. On both occasions, interviews were conducted in the respondents' homes by trained interviewers. The results indicate that between 1984 and 1995, alcohol problems were stable among white and black men but increased among Hispanic men. The rates of three or more alcohol problems for men of each ethnic group for 1984 and 1995 were: 12 percent and 11 percent for white men, 16 percent and 13 percent for black men, and 9 percent and 16 percent for Hispanic men, respectively. Problem prevalence was stable and relatively low among women in all three ethnic groups. Overall, the prevalence of alcohol problems continues to be high among

men in the U.S. Even though recent research showed that rates of frequent heavy drinking among white men have declined, the authors found no corresponding decrease in problem prevalence. Rates of frequent heavy drinking and alcohol-related problems between 1984 and 1995 have remained especially high among black and Hispanic men, suggesting that men of these two ethnic groups should be specifically targeted for renewed prevention efforts. (Author abstract modified)

Castro, F.G., & Gutierrez, S. (1997). Drug and alcohol use among rural Mexican Americans. In E.B. Robertson, Z. Sloboda, G.M. Boyd, L. Beatty, & N.J. Kozel (Eds.), Rural substance abuse: State of knowledge and issues (NIDA Research Monograph No. 168, pp. 498-530). Rockville, MD: National Institute on Drug Abuse.

This chapter reviews the literature on drug and alcohol use among rural Mexican Americans. The review focuses on the social and cultural factors linked to drug and alcohol use, with a presentation of an integrated analysis of factors related to the risks of drug use. The relationship between levels of acculturation and traditionalism as they relate to the risks of drug abuse is also reviewed.

Center for Substance Abuse Prevention. (1994). Hispanic/Latino natural support systems. Rockville, MD: Author.

Information is presented concerning the Hispanic/Latino community to help service providers develop effective prevention services responsive to the values and norms of the community they serve. Because of its distinct cultural values and orientation, the Hispanic/Latino community benefits most from a culturally sensitive prevention program that incorporates both formal and informal systems of support. This approach acknowledges the variety of factors that influence alcohol, tobacco, and other drug abuse and the social context in which it occurs. An integrated program that capitalizes on the strengths and resources of the community it serves is both culturally relevant and cost-effective. Collaboration with Hispanic/Latino natural support systems (NSSs) involves several steps: assessing the NSSs; identifying appropriate natural support providers and mapping their location in the community; building a relationship with identified NSSs; and programming collaborative activities with NSSs, such as sharing resources, knowledge building and consultation, outreach and community education, and counseling. This collaborative effort results in a natural system of support that will remain in the community beyond the life of the grant.

Center for Substance Abuse Prevention. (1997). Hispanic/Latino evaluation handbook (CSAP Technical Report Number 14). Rockville, MD: SAMHSA.

This report reviews and synthesizes existing research and evaluation tools for Hispanic/Latino populations. A description of each instrument is provided, including information on its psychometric properties. Also, it examines the current evaluation practices among federally

funded, high-risk Hispanic youth programs, with special attention given to factors associated with cultural competency. An appendix provides copies of the instruments, as well as a summary (in tabular form) of the various instruments used and organized by the focus of the programs, e.g., cultural or personal factors.

Cervantes, R. C., & Garcia, I. (1995). Alcohol abuse prevention in the Hispanic community. In P. A. Langton (Ed.), The challenge of participatory research: Preventing alcohol-related problems in ethnic communities (CSAP Cultural Competence Monograph Number 3, pp. pp. 305-319). Rockville, MD: Center for Substance Abuse Prevention.

This chapter discusses the impact of Hispanic cultural factors on the process of conducting community-based alcohol prevention research. It addresses the role and structure of the family, religion, and the community, as well as briefly describing alcohol use patterns. Issues that are relevant to prevention in the Hispanic community are reviewed.

Curadrado, M., & Leiberman, L. (1998). Traditionalism in the prevention of substance misuse among Puerto Ricans. Substance Use and Misuse, 33, 2737-2755.

Data are presented from a multicluster stratified sample of 1,084 Puerto Rican households in the New York City area. Researchers examined the impact of loss of traditional Hispanic family-oriented gender role values and degree of acculturation upon drug use. Sociodemographic variables are presented. Indices of “traditionalism” and “acculturation” were created, validated, and correlated with drug use. Traditionalism was found to covary negatively with drug use, but more so for women. The positive relationship between acculturation and drug use was found to be influenced by different levels of traditionalism. Implications for treatment and prevention are discussed.

De La Rosa, M. R. & Adrados, J. L. R. (Eds.). (1993). Drug abuse among minority youth: Methodological issues and recent research advances (NIDA Research Monograph Number 130). Rockville, MD: National Institute on Drug Abuse.

Data are presented on recent findings from theory-driven research studies on the etiology of drug use among minority youth. Information regarding methodological problems and other barriers affecting the lack and quality of research in this field also is presented. Issues under discussion include cultural identification, acculturation, integrating mainstream and subcultural explanations of drug use, social network theory, interactional theory, self-report validity, survey techniques, and data collection.

Delgado, J.L., Metzger, R., & Falcon, A.P. (1995). Meeting the health promotion needs of Hispanic communities. American Journal of Health Promotion, 9, 300-311.

Strategies and actions designed to reduce drinking and driving crashes are presented in seven sections: public education; individual responsibility; the health care community; businesses and employers; legislation; enforcement and adjudication; and technology. The focus is partnerships. Each section contains recommended strategies, a background statement, actions steps for implementing the strategies, and the benefits to be realized by implementing the specific actions.

Department of Health and Human Services. (1994). Policy report: AIDS and drug abuse research and technology transfer in Hispanic communities. Rockville, MD: Author.

Hispanics are a distinct cultural group, and the fastest growing minority in the United States today, representing some 22 million persons or 9 percent of the total population. Research and policy issues related to the prevention and treatment of HIV disease and drug abuse in America's Latino/Hispanic communities are discussed. Three critical policy issues are examined: (1) setting future research priorities, (2) strategies for community involvement in research, and (3) strategies for increasing Hispanic researcher involvement.

Felix-Ortiz, M., Munoz, R., & Newcomb, M.D. (1994). Role of emotional distress in drug use among Latino adolescents. Journal of Child and Adolescent Substance Abuse, 3(4), 1-22.

This article reviews issues around emotional distress and drug use in Latino adolescents. Comorbidity of emotional distress and drug use, the question of whether emotional distress is an antecedent or consequence of drug use, assessment issues, and the relationships surrounding drug use, emotional distress, and high-risk behaviors are among the issues addressed. In a survey of high school immigrant Mexican students, emotional distress was assessed using three scales of depression, hostility, and anxiety; a history of suicide attempts was also assessed. Frequency and quantity of 10 substances including alcohol, cigarettes, and hard drugs were also assessed. Most types of drug use were significantly correlated with emotional distress and positive history of suicide attempts. A high frequency of alcohol use and inhalant use were associated with emotional distress and a positive history of suicide attempts. Hostility was most strongly correlated with drug use. It is suggested that hostility as well as moderate to high depression symptom levels be considered risk factors for drug use and suicidality in Latino adolescents. It is also recommended that emotional distress be explicitly addressed in the treatment of drug abuse and other problem behaviors in Latino adolescents. (Author abstract modified)

Ferreira-Pinto, J. B., & Ramos, R. (1995). HIV/AIDS prevention among female sexual partners of injection drug users in Ciudad Juarez, Mexico. AIDS Care, 7, 477-488.

A participatory community project in the U.S.-Mexico border town of Ciudad Juarez, aimed at helping women who are sex partners of male injection drug users to reduce behaviors that increase their risk for HIV infection, is described and evaluated. The design and implementation of the project were influenced by Paulo Freire's pedagogy in the Latin American tradition of popular

education, by Bandura's self-efficacy concepts, and by David Warner's "barefoot doctor" community health care methodology. Using these approaches, the participants were directly involved in the development of teaching materials, curriculum content, and implementation of the project. The program was evaluated quantitatively using NIDA's AIDS Intake and Follow-up Assessment (AIA/AFA) questionnaires, and qualitatively using open-ended interviews. While the AIA/AFA questionnaires detected small changes in the frequency of condom use among the participants, ethnographic interviews detected significant changes in the nature of the behaviors that were placing the women at risk. The changes seem to stem from an increase in the degree of self-esteem, self-efficacy, and awareness of the social, economic, and political constraints of their lives. These results demonstrate the need for qualitative measures to be incorporated in the evaluation of community-based health education programs. A series of recommendations is presented to facilitate further development and replication of the program in similar populations.

Gilbert, M. J. (1991). Acculturation and changes in drinking patterns among Mexican-American women. *Alcohol Health & Research World*, 15, 234-238.

The author compares the drinking patterns of Mexican-American women to Mexican-American men, women of the general U.S. population, women of other Hispanic backgrounds, like Puerto Rican and Cuban-American, and Mexican-American women of different generations. It was found that alcohol consumption by Mexican-American women increases with each successive generation following immigration to the U.S. Differences in drinking patterns can be attributed to an acculturative process, in which behaviors, attitudes, and beliefs of immigrants change over time to resemble those of the host population. Mexican society has strong proscriptions against women's drinking, while sanctions against male drinking are weak. When Mexicans immigrate to the U.S., men usually increase their drinking, while women maintain original patterns of abstinence or light drinking. U.S.-born daughters, granddaughters, and great-granddaughters increase both their frequency and quantity of drinking with each successive generation until Mexican-American drinking patterns resemble drinking patterns of the general U.S. female population. It was also determined that changes in Mexican-American female drinking patterns, unlike those of Mexican-American men, are positively correlated with levels of education, income, and employment. As drinking rates increase for Mexican-American women, so do alcohol-related problems. Prevention efforts need to be designed before the problem develops. Gilbert recommends prevention programs that target pre-adolescents because Latinas are exposed to alcohol in their early teens. Prevention programs should be sensitive to the generation gap between parents and children concerning women's drinking and should address the variety of acculturation pressures that Latina adolescents face, rather than concentrating exclusively on the pressure to drink.

Golding, J. M., Burnam, M. A., Wells, K. B., & Benjamin, B. (1993). Alcohol use, depressive symptoms, and cultural characteristics in two Mexican-American samples. *International Journal of the Addictions*, 28, 451-476.

This study was designed to model the associations of quantity and frequency of alcohol use with depressive symptoms (negative affect, lack of positive affect, somatic disturbance, interpersonal problems) from two surveys of Mexican Americans. Alcohol use was not consistently related to depression. In some analyses, cultural characteristics accounted for associations of alcohol use with depression; in others, associations of alcohol use with depression depended on cultural characteristics. Associations of drinking with depression depended on cultural characteristics; associations of drinking with depression tended not to be robust across samples. (Author abstract)

Goldstein, A., & Herrera, J. (1995). Heroin addicts and methadone treatment in Albuquerque: 22-year follow-up. *Drug and Alcohol Dependence*, 40, 139-150.

Heroin addicts who registered for methadone treatment in Albuquerque in 1969-1971 (N = 1,019), were the subjects of this follow-up study, conducted in 1991-1993. The cohort was almost entirely of Hispanic (Chicano) ethnicity, 86 percent male, with median age 27 at entry. The authors interviewed 243 respondents. At least one-third of the original group had died during the 22-year period, representing standard mortality ratios of 4.0 for males and 6.8 for females. Drug overdose, violence, alcohol, or suicide accounted for nearly all deaths of which the causes were known. Despite the availability of treatment, including methadone maintenance, both heroin use and criminality continued at a high rate. Of the 428 known survivors, 48 percent were currently enrolled in a methadone program after 22 years. They were using significantly less heroin, alcohol, and other drugs (except nicotine) than those not on methadone. Similar beneficial effects of methadone maintenance were reported retrospectively at interview. The findings offer an insight into heroin addiction as a chronic lifelong relapsing disease with a high fatality rate.

Longshore, D. (1998). Desire for help among drug-using Mexican-American arrestees. *Substance Use and Misuse*, 33, 1387-1406.

In a sample of 88 drug-using Mexican-American arrestees, the authors examined demographic factors, drug-problem severity indicators, and personal and social resources as correlates of self-reported desire for help with problems related to drug use. Ethnicity-related attitudes, perceptions, and experiences were among the factors tested. Among 35 potential correlates in this data set, recognition of drug-related interpersonal problems was the sole significant correlate of desire for help in a multivariate regression analysis. This finding was interpreted in comparison to previously identified correlates of Mexican-American drug users' desire for help specifically in the form of drug user treatment. Implications were derived regarding drug-use-associated problem recognition and other potential determinants of help-seeking and success in drug user treatment among Mexican-American drug users. (Author abstract modified)

Longshore, D., Hsieh, S.C., Anglin, M.D., & Annon, T.A. (1992). Ethnic patterns in drug abuse treatment utilization. *Journal of Mental Health Administration*, 19, 268-277.

This study describes utilization of substance abuse treatment and related perceptions among African American, Hispanic, and Anglo drug-using arrestees in Los Angeles. The study extends prior research first, by describing ethnic variation in treatment utilization through analyses that control for nonethnic demographic factors and second, by exploring the degree to which ethnicity is related to two predisposing factors (attitude toward treatment and perceived need) and two enabling factors (perceived cost and availability). After nonethnic demographic factors and past drug dependence are controlled, African American and Hispanic drug users in Los Angeles are less likely to report having been in drug abuse treatment. Hispanic drug users are more likely than Anglos to say that they have not sought treatment because they do not need it. African American drug users are more likely than Anglos to hold unfavorable views of treatment. (Author abstract)

Marin, G. (1993). Defining culturally appropriate community interventions: Hispanics as a case study. *Journal of Community Psychology*, 21, 149-161.

This article proposes three components necessary to develop community-wide change interventions that are culturally appropriate or group-specific. The basis for the development of targeted group-specific interventions is the evidence that shows that ethnic/racial groups differ in terms of their cultural values, norms, expectations, and attitudes. These differences predicate the notion that to be effective, community interventions need to consider the specific characteristics of the group being targeted. Culturally appropriate interventions are defined, therefore, as meeting each of the following criteria. The interventions are based on the cultural values of the group; the strategies that comprise the intervention reflect the subjective culture of the group; and the components that comprise the strategies reflect the behavioral preferences and expectations of the group's members. The implications of this definition for the development of a culturally appropriate intervention for Hispanics are also discussed.

Marks, G., Cantero, P.J., & Simoni, J.M. (1998). Is acculturation associated with sexual risk behaviours? An investigation of HIV-positive Latino men and women. *AIDS Care*, 10, 283-295.

This cross-sectional study of 226 HIV-positive Latino men and women sampled and assessed at an outpatient HIV clinic in Los Angeles examined the associations among acculturation, use of a substance before sex, and unsafe sexual behaviour. As acculturation increased, men and women were increasingly likely to have engaged in unsafe sex in the most recent sexual encounter since testing seropositive. In men, the association was partially mediated by use of a substance (primarily alcohol) in the 3 hours before the sexual encounter; in women, the association was not mediated by drug use. The findings underscore the need for culturally sensitive, secondary prevention programmes for HIV-positive persons.

Martinez, I.Z. (1994). Quien soy? Who am I? Identity issues for Puerto Rican adolescents. In D.R. Koslow & E.P. Salett (Eds.), Race ethnicity and self: Identity in multicultural perspective (pp. 89-116). Washington, DC: National Multicultural Institute.

The experience of Puerto Rican adolescents growing up in the United States can be described as an “entremundos” (between two worlds) reality. The sociopolitical relationship between the United States and Puerto Rico and the migration phenomenon over the past 4 decades provide a backdrop for understanding the identity issues facing these youth. Case studies are presented to demonstrate how sociocultural factors can be integrated with therapeutic processes to help Puerto Rican adolescents in the United States find the answer to the question “Who am I?” (Author abstract)

Reback, C.J., & Brown, V.B. (1994). Community-based HIV interventions to drug-using women. In L.S. Harris (Ed.), Problems of drug dependence 1994: Proceedings of the 56th Annual Scientific Meeting: The College on Problems of Drug Dependence (Volume II: NIDA Monograph Number 153, p. 73). Rockville, MD: National Institute on Drug Abuse.

A community-based research and demonstration project for high-risk women is described. Target populations include women who are: injection drug users, non-injection drug users, sexual partners of drug users, former drug users, and those who exchange sex for money and/or drugs. All communities served are low income, predominantly African American and Latino, and within the inner-city neighborhoods in Los Angeles County. Participants are randomly assigned either to a standard or an enhanced intervention. The standard intervention includes three individual counseling sessions, six unstructured groups, pre- and post-test counseling, HIV antibody testing for women who choose to be tested, and referrals without advocacy to appropriate services. The enhanced model includes three individual counseling sessions, optional crisis intervention counseling from a social worker, six structured groups with specific topics and curricula, two pre- and post-test counseling sessions, HIV antibody testing for those who choose to be tested, and referrals with advocacy to appropriate services. It was found that effective outreach strategies for hard-to-reach women must include codes that signify that the outreach worker identifies with the target population. These signifiers include continuity in the field; knowledge of gatekeepers in the community; up-to-date and culturally appropriate referrals to treatment centers, shelters, disaster relief programs, and other agencies; sharing of personal experiences; and gift giving. Common barriers in the women’s lives are drug use; past or current physical, emotional, or sexual abuse; feelings of lack of control over their lives; psychological distress; few close friends; and intimate relationships that cause stress and problems.

Rodriguez, O., Lessinger, J., & Guarnaccia, P. (1992). The societal and organizational contexts of culturally sensitive health services: Findings from an evaluation of bilingual-bicultural psychiatric programs. Journal of Mental Health Administration, 19, 213-223.

Hispanic mental health literature focuses mostly on cultural and clinical issues. This paper argues that researchers and practitioners concerned with mental health services for Hispanics and other minority groups need to pay more attention to the societal and organizational contexts that facilitate or impede the development of the effective culturally sensitive psychiatric programs. Utilizing data from an evaluation of three New York psychiatric programs for serious mentally ill Hispanic patients, the paper discusses societal and organizational factors that influenced the program's development. Among societal forces were the significance of Hispanics as a voting bloc, the political organization of Hispanic mental health professionals, the philosophy of ethnic assimilation in American society, prevailing views about the place of cultural knowledge in psychiatric treatment, and the shortage of Hispanic mental health professionals. Among organizational factors, hospital administrative support and program leadership mediated the effects of societal forces upon the programs, while ethnic competition and lack of coordination between the program and other organizational units acted as barriers to the programs' development. The findings are relevant to any innovative mental health service in an organizational setting. (Author abstract)

Ruiz, P. (1997). Issues in the psychiatric care of Hispanics. *Psychiatric Services*, 48, 539-540.

Hispanics, the second largest of minority groups in the United States, face problems of access to care to mental health, high rates of substance abuse and HIV, and shortages of Hispanic psychiatric professionals. Recommendations for improving psychiatric care for Hispanics include changes in the areas of health insurance, research funding, affirmative action, and psychiatric training.

Seale, J.P., Williams, J.F., & Amodei, N. (1992). Alcoholism prevalence and utilization of medical services by Mexican Americans. *Journal of Family Practice*, 35, 169-174.

A sample of Mexican Americans was assessed for prevalence of alcoholism and use of medical services. The group, patients 18 years and older in a family health center in south Texas, were asked to respond to a health screening interview and to the Short Michigan Alcoholism Screening Test. The results of the study indicated that alcoholism was more prevalent among males than females; the prevalence among Mexican Americans was similar to that among other ethnic groups; equal percentages were identified in a primary care clinic and in a walk-in clinic; and alcoholic patients reported more unemployment and poorer health than nonalcoholic patients. It is concluded that alcoholism can be identified in a variety of outpatient settings and that employment status and not ethnic group may serve as an indicator for alcoholism screening.

Trepper, T.S., Nelson, T.S., McCollum, E.E., & McAvoy, P. (1997). Improving substance abuse service delivery to Hispanic women through increased cultural competencies: A qualitative study. *Journal of Substance Abuse Treatment*, 14, 225-234.

In 1985, one woman in 17 in the U.S. was Hispanic—an estimated 8.5 million—and it is predicted that by the end of this century, Hispanics will comprise the largest ethnic group in this country. Although the term “Hispanic” suggests a homogeneous group united by similarities, this is not the case. The term refers to an ethnic group, not a racial one, whose chief commonalities are the Spanish language and some broad cultural values. Making substance abuse treatment services accessible to Hispanic women and their families requires that agencies become culturally competent to deal with this population. The authors of this qualitative study interviewed female Hispanic substance-abuse treatment clients and therapists to find what agencies might do to create a receptive atmosphere for Hispanic women.

U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (1998). Prevalence of substance use among racial and ethnic subgroups in the United States, 1991-1993. Rockville, MD: Author.

This report analyzes racial and ethnic patterns of substance use in the United States using a more detailed classification of race/ethnicity than has been possible in previous reports that used the National Household Survey on Drug Abuse (NHSDA). This report combines data from the 1991, 1992, and 1993 NHSDA surveys to estimate the prevalences of substance use, alcohol dependence, and need for illicit drug abuse treatment within 11 racial/ethnic subgroups. These subgroups are Native Americans, Asian/Pacific Islanders, non-Hispanic blacks, non-Hispanic whites, and seven subgroups of Hispanics. Researchers explored the following questions: How does the prevalence of alcohol, cigarette, and illicit drug use vary across racial/ethnic subgroups? Are there important racial/ethnic differences in the age and gender patterns of substance use? To what extent do the different social, demographic, and economic profiles of racial/ethnic subgroups account for their different patterns of substance use? Are racial/ethnic patterns of dependence on alcohol different from corresponding patterns of substance use? Finally, this report considers racial/ethnic subgroups that appear to be most in need of illicit drug abuse treatment.

Weeks, M., Himmelgreen, D., Singer, M., Woolley, S., Romero-Daza, N., et al. (1996). Community-based AIDS prevention: Preliminary outcomes of a program for African American and Latino injection drug users. Journal of Drug Issues, 26, 561-590.

This paper presents preliminary outcomes of a community-based AIDS prevention program for drug users called Project COPE II, the National Institute on Drug Abuse (NIDA) cooperative agreement study in Hartford, Connecticut. COPE II's study compares the NIDA standard intervention against two culturally targeted enhanced interventions, one for African Americans and one for Puerto Ricans. A sample of 188 out-of-treatment injection drug users (IDUs) with matched baseline and 6-month follow-up interviews were compared for changes in monthly injection rates and proportionate use of new and pre-used needles and used injection supplies. Effects of injection outliers, attrition, and ethnic differences were examined for impact on outcome measures and to identify subgroups within the study population for whom the intervention had differential effects. These preliminary analyses suggest that attendance in

culturally targeted enhanced interventions may increase the likelihood of positive program outcome, including drug-related risk reduction for some populations. However, subgroups of IDUs, such as extremely high injectors or individuals who drop out before initiating or completing the program, may require different intervention approaches. Further research is needed to understand the relationship between intervention and behavior change, reasons for attrition, and moderating factors affecting project outcomes.

White, J.M., Winn, K.I., & Young, W. (1998). Predictors of attrition from an outpatient chemical dependency program. Substance Abuse: Journal of the Association for Medical Education and Research in Substance Abuse, 19(2), 49-59.

This study investigated differences between completers and noncompleters of an intensive outpatient substance abuse treatment program to identify key predictors of attrition. Participants (N = 138) completed a comprehensive intake/assessment package that included the Addiction Severity Index as a precursor to participation in the program. Discriminant function analyses (DFA) suggested that ASI composite scores and severity ratings were not useful predictors. However, analysis of individual items was useful in identifying “red flags” as predictors for treatment attrition. The subsequent DFA identified the following variables as significant predictors: Hispanic ethnicity, absence of a professional skill, shorter time since last hospitalization, cocaine or cannabis use in the last 30 days, total number of family members with drug problems, presence of emotional abuse in last 30 days, concern with family problems, and number of family group meetings that family members attended. These red flags can serve the important function of providing clinicians with enough information to intervene early with patients at risk for treatment dropout.

Woodward, A.M., Dwinell, A.D., & Arons, B.S. (1992). Barriers to mental health care for Hispanic Americans: A literature review and discussion. Journal of Mental Health Administration, 19, 224-236.

The Hispanic American population, the second largest and fastest growing minority population in the United States, faces barriers to access to both medical health and mental health care. This paper examines both financial and cultural barriers to utilization of mental health care services; it is a broad review of the literature and is not intended to be comprehensively detailed. The research review suggests that the financial barrier is a major determinant of mental health service access for Hispanic American populations. Also, nonfinancial barriers such as acculturation are examined. A two-part plan is suggested to reduce both financial and nonfinancial barriers. Very little literature on utilization of substance abuse services was found; suggestions for further research are thus proposed. (Author abstract)

Zayas, L.H., Rojas, M., & Malgady, R.G. (1998). Alcohol and drug use, and depression among Hispanic men in early adulthood. *American Journal of Community Psychology*, *26*, 425-438.

Community research and clinical practice have shown that alcohol/drug use and depression are interrelated. Among Hispanics, acculturation may play a role in these relationships. To investigate these relationships as well as alcohol-related problems, we interviewed 288 Puerto Rican, Dominican, and Colombian men in early adulthood. No significant differences emerged in the proportions of abstainers across the three groups. Colombians drank significantly more frequently and had more alcohol-related problems than Dominicans. Dominicans were at the least risk for and least likely to have alcohol-related problems. Puerto Ricans were much more likely to use drugs than the other Hispanic men. Drug use was associated with an increased likelihood of heavy drinking which, in turn, increased the risk of drug use and depression. Acculturation decreased the risk of drug use. Results are discussed in terms of implications for community psychology research and interventions.

**II. HISPANIC/LATINO SUBSTANCE ABUSE TREATMENT:
SELECTED CITATIONS**

II. HISPANIC/LATINO SUBSTANCE ABUSE TREATMENT: SELECTED CITATIONS

- Alegria, M., Vera, M., Negron, G., Burgos, M., Albizu, C., et al. (1998). Methodological and conceptual issues in understanding female Hispanic drug users. In C.L. Wetherington and A.B. Roman (Eds.), Drug addiction research and the health of women (pp. 529-551). Rockville, MD: National Institute on Drug Abuse.
- Alegria, M. (1998). Hispanic women. In C.L. Wetherington & A.B. Roman (Eds.), Drug addiction research and the health of women: Executive summary (pp. 123-126). Bethesda, MD: National Institutes of Health.
- Atkinson, D. R., Abreu, J., Ortiz-Bush, Y., & Brewer, S. (1994). Mexican American and European American ratings of four alcoholism treatment programs. Hispanic Journal of Behavioral Sciences, 16, 265-280.
- Bing, E. G., & Soto, T. A. (1991). Treatment issues for African-Americans and Hispanics with AIDS. Psychiatric Medicine, 9, 455-467.
- Birkel, R. C., Golaszewski, T., Koman, J. J., Singh, B. K., Catan, V., & Souply, K. (1993). Findings from the Horizontes Acquired Immune Deficiency Syndrome Education project: The impact of indigenous outreach workers as change agents for injection drug users. Health Education Quarterly, 20, 523-538.
- Brooks, A.J., Stuewig, J., & LeCroy, C.W. (1998). Family-based model of Hispanic adolescent substance use. Journal of Drug Education, 28(1), 65-86.
- Caetano, R. (1993). Priorities for alcohol treatment research among U.S. Hispanics. Journal of Psychoactive Drugs, 25, 53-60.
- Caetano, R., & Kaskutas, L. A. (1995). Changes in drinking patterns among whites, blacks, and Hispanics: 1984-1992. Journal of Studies on Alcohol, 56, 558-565.
- Canino, G. (1994). Alcohol use and misuse among Hispanic women: Selected factors, processes, and studies. International Journal of the Addictions, 29, 1083-1100.
- Carrier, J. M., & Magana, J. R. (1991). Use of ethnosexual data on men of Mexican origin for HIV/AIDS prevention programs. Journal of Sex Research, 28, 189-202.
- Casas, J. M. (1992). A culturally sensitive model for evaluating alcohol and other drug abuse prevention programs: A Hispanic perspective. In M. A. Orlandi, R. Weston, & L. G. Epstein (Eds.), Cultural competence for evaluators: A guide for alcohol prevention practitioners working with ethnic/racial communities (pp. 173-201). Rockville, MD: Office for Substance Abuse Prevention.

- Castro, F.G., Harmon, M.P., Coe, K., & Tafoya-Barraza, H.M. (1994). Drug prevention research with Hispanic populations: Theoretical and methodological issues and generic structural model. In A. Cazares & L. A. Beatty (Eds.), Scientific methods for prevention intervention research (NIDA Research Monograph Number 139, pp. 203-233). Rockville, MD: National Institute on Drug Abuse.
- Castro, F. G., Sharp, E. V., Barrington, E. H., Walton, M., & Rawson R. A. (1991). Drug abuse and identity in Mexican Americans: Theoretical and empirical considerations. Hispanic Journal of Behavioral Science, *13*, 209-225.
- Cervantes, R. C., & Arroyo, W. (1994). DSM-IV implications for Hispanic children and adolescents. Hispanic Journal of the Behavioral Sciences, *16*, 22-27.
- Chavez, E. L., & Swaim, R. C. (1992). Hispanic substance use: Problems in epidemiology. Drugs and Society, *6*, 211-230.
- Cherpitel, C.J. (1998). Differences in performance of screening instruments for problem drinking among blacks, whites and Hispanics in an emergency room population. Journal of Studies on Alcohol, *59*, 420-426.
- Codina, G.E., Yin, Z., Katims, D.S., & Zapata, J.T. (1998). Marijuana use and academic achievement among Mexican American school-age students: Underlying psychosocial and behavioral characteristics. Journal of Child and Adolescent Substance Abuse, *7*(3), 79-96.
- Comas-Diaz, L. (1990). Delivering preventive health care to Hispanics: A manual for providers (revised edition). Washington: National Coalition of Hispanic Health and Human Services Organizations.
- Eaton, W. W., & Garrison, R. (1992). Mental health in Mariel Cubans and Haitian boat people. International Migration Review, *26*, 1395-1415.
- Estrada, A. L. (1998). Drug use and HIV risks among African-American, Mexican-American, and Puerto Rican-American drug injectors. Journal of Psychoactive Drugs, *30*, 247-253.
- Flaskerud, J. H., & Nyamathi, A. M. (1990). Effects of an AIDS education program on the knowledge, attitudes and practices of low income black and Latina women. Journal of Community Health, *15*, 343-355.
- Flaskerud, J. H., & Uman, G. (1993). Directions for AIDS education for Hispanic women based on analyses of survey findings. Public Health Report, *108*, 298-304.
- Freudenberg, N., & Trinidad, U. (1992). The role of community organizations in AIDS prevention in two Latino communities in New York City. Health Education Quarterly, *19*, 219-232.

- Gloria, A. M., & Peregoy, J. J. (1996). Counseling Latino alcohol and other substance users/abusers: Cultural considerations for counselors. Journal of Substance Abuse Treatment, *13*, 119-126.
- Gordon, A. J. (1991). Alcoholism treatment services to Hispanics: An ethnographic examination of a community's service. Family and Community Health, *13*(4), 12-24.
- Guiao, I.Z., & Esparza, D. (1997). Family interventions with "troubled" Mexican American teens: An extrapolation from a review of the literature. Issues in Mental Health Nursing, *18*(3), 191-207.
- Hall, P. A., & Reyes, M. B. (1992). Evaluation of alcohol and other drug use prevention programs with Mexican-American youth. In C. E. Marcus & J. D. Swisher (Eds.), Working with youth in high-risk environments: Experiences in prevention (CSAP Prevention Monograph Number 12, pp. 86-94). Rockville, MD: Center for Substance Abuse Prevention.
- Henrickson, M. (1990). A mobile HIV education, counseling, and testing unit: A pilot initiative. AIDS Education and Prevention, *2*, 137-144.
- Hernandez, E. (1998). Effects of alcohol on Latinos in California: A report for Alcohol Awareness Month, April 1998. Sacramento, CA: CalPartners Coalition.
- Hoffman, F. (1994). Cultural adaptations of Alcoholics Anonymous to serve Hispanic populations. International Journal of the Addictions, *29*, 445-460.
- Inclan, J., & Hernandez, M. (1992). Cross-cultural perspectives and codependence: The case of poor Hispanics. American Journal of Orthopsychiatry, *62*, 245-255.
- Johnson, P.B., & Glassman, M. (1999). The moderating effects of gender and ethnicity on the relationship between effect expectancies and alcohol problems. Journal of Studies on Alcohol, *60*(1), 64-69.
- Lalonde, B., Rabinowitz, P., Shefsky, M.L., & Washienko, K. (1997). La Esperanza del Valle: Alcohol prevention novelas for Hispanic youth and their families. Health Education and Behavior, *24*, 587-602.
- Langer, L. M., Zimmerman, R. S., Warheit, G. J., & Duncan, R. C. (1993). Decision-making orientation and AIDS-related knowledge, attitudes, and behaviors of Hispanic, African-American, and white adolescents. Health Psychology, *12*, 227-234.
- Laureano, M., & Poliandro, E. (1991). Understanding cultural values of Latino male alcoholics and their families: A culture-sensitive model. Journal of Chemical Dependency Treatment, *4*, 137-155.

- Lee, D.J., Markides, K.S., & Ray, L.A. (1997). Epidemiology of self-reported past heavy drinking in Hispanic adults. *Ethnicity and Health*, *2*(1-2), 77-88.
- Lessenger, L.H. (1997). Acculturation and MMPI-2 scale scores of Mexican American substance abuse patients. *Psychological Reports*, *80*(3, Pt. 2), 1181-1182.
- Lindenberg, C.S., Solorzano, R.M., Krantz, M.S., Galvis, C., Baroni, G., & Strickland, O. (1998). Risk and resilience: Building protective factors. An intervention for preventing substance abuse and sexual risk-taking and for promoting strength and protection among young, low-income Hispanic women. *American Journal of Maternal/Child Nursing*, *23*(2), 99-104.
- Mahon, J., McFarlane, J., & Golden, K. (1991). De Madres a Madres: A community partnership for health. *Public Health Nursing*, *8*, 15-19.
- Maldonado, I. C., & Harrison, P. (1990). *Latina AIDS action plan and resource guide*. Washington, DC: HDI Projects.
- Marin, B. V., Tschann, J. M., Gomez, C. A., & Kegeles, S. M. (1993). Acculturation and gender differences in sexual attitudes and behaviors: Hispanic vs. non-Hispanic white unmarried adults. *American Journal of Public Health*, *83*, 1759-1761.
- Marin, G., & Marin, B. V. (1990). Perceived credibility of channels and sources of AIDS information among Hispanics. *AIDS Education and Prevention*, *2*, 154-161.
- Moore, J. (1994). Men, women, and heroin use in two Chicano gangs. In P. J. Venturelli (Ed.), *Drug use in America: Social, cultural, and political perspectives* (pp. 113-120). Boston, MA: Jones and Bartlett Publishers.
- Moore, J. (1994). The chola life course: Chicano heroin users and the barrio gang. *International Journal of the Addictions*, *29*, 1115-1126.
- National Coalition of Hispanic Health and Human Services Organizations. (1997). *Growing up Hispanic* (Volume 1: Leadership Report, Volume 2: National Chartbook, Volume 3: State Chartbook). Washington, DC: Author.
- Prendergast, M.L., Hser, Y.I., & Gil-Rivas, V. (1998). Ethnic differences in longitudinal patterns and consequences of narcotics addiction. *Journal of Drug Issues*, *28*, 495-516.
- Ramirez, A.G., Gallion, K.J., Espinoza, R., McAlister, A., & Chalela, P. (1997). Developing a media- and school-based program for substance abuse prevention among Hispanic youth: A case study of Mirame!/Look at me! *Health Education and Behavior*, *24*, 603-612.

- Ramos, R. (1990). Chicano intravenous drug users. In E. Y. Lambert (Ed.), Collection and interpretation of data from hidden populations (NIDA Research Monograph Number 98, pp. 128-145). Rockville, MD: National Institute on Drug Abuse.
- Sanders-Phillips, K. (1998). Factors influencing health behaviors and drug abuse among low-income black and Latino women. In C.L. Wetherington & A.B. Roman (Eds.), Drug addiction research and the health of women (pp. 439-465). Rockville, MD: National Institute on Drug Abuse.
- Szapocznik, J. (Ed.). (1994). A Hispanic/Latino family approach to substance abuse prevention. Rockville, MD: Center for Substance Abuse Prevention.
- Volk, R.J., Cantor, S.B., Steinbauer, J.R., & Cass, A.R. (1997). Item bias in the CAGE screening test for alcohol use disorders. Journal of General Internal Medicine, *12*, 763-769.
- Volk, R.J., Steinbauer, J.R., Cantor, S.B., & Holzer, C.E. (1997). The Alcohol Use Disorders Identification Test as a screen for at-risk drinking in primary care patients of different racial/ethnic backgrounds. Addiction, *92*, 197-206.

The perspective offered in this document is solely that of the author(s) and does not reflect the policies or views of the Federal government, or any of its Departments or Agencies.