
Reaching Hispanics with Messages to Prevent Alcohol and Other Drug Abuse

ELAINE M. JOHNSON, PhD
JANE L. DELGADO, PhD

Dr. Johnson is the Director of the Office for Substance Abuse Prevention (OSAP) of the Alcohol, Drug Abuse, and Mental Health Administration. Previously, she was Deputy Director of the National Institute on Drug Abuse (NIDA). Dr. Delgado has served as President and Chief Executive Officer of the National Coalition of Hispanic Health and Human Services Organizations since 1985. She came to the position from the Immediate Office of the Secretary of the Department of Health and Human Services.

Tearsheet requests to Dr. Johnson, ADAMHA-OSAP, Rm. 9A-54, Parklawn Bldg., 5600 Fishers Lane, Rockville, MD 20857.

Synopsis

Hispanics are often labeled a "hard-to-reach" population in the context of health communications, yet there are indicators that corporate interests increasingly are reporting successes in designing advertising and promotional campaigns targeting Hispanic markets. The authors suggest research priorities designed to promote more effective communications programming in the substance abuse field, and they identify three key target audiences: children and adolescents, women of childbearing age, and heavy-drinking men. The significance of the diversity within the Hispanic community; the opportunities to reinforce attitudes, norms, and behaviors that counter substance use; and the centrality of family are discussed as approaches to communications planning and message development.

IF TELEVISION ADVERTISING is a barometer of audience importance, the Hispanic community has emerged as one of the more lucrative battlegrounds in the quest for consumers. Between 1986 and 1987, advertising revenues for Spanish language television increased by 21 percent, compared with a growth of only 4.1 percent of English language networks and stations (1). Even as major corporations turn to Spanish language television to increase sales, English language stations are investing in campaigns to woo Hispanic viewers. In 1988, the NBC affiliate in Miami invested \$250,000 in a Spanish language promotional campaign; other competitors were reported to be hiring more Hispanics and increasing coverage of Hispanic affairs (2).

The growing interest in the Hispanic population reflects basic demographic trends of the 1980s. From 1980 to 1987, the Hispanic population grew by 34 percent, while the non-Hispanic population grew by only 7 percent. This trend is likely to continue, with projections suggesting that Hispanic growth will be about five times that of non-Hispanic populations in upcoming years (3).

It is not just the growth that makes the Hispanic market attractive. The concentration of the population in key centers provides ideal opportunities to target large audiences through a few outlets. More than 85 percent of the Hispanic population resides

in nine States, and the vast majority live in the nations largest metropolitan areas (3).

To tap effectively this large, growing, concentrated pool of consumers, U.S. industry is engaging in extensive research on buying habits, behaviors, and preferences. We now know that Hispanics in Dade County, FL, spend 25 percent more than non-Hispanics for groceries on a weekly basis; that Hispanics are less likely than non-Hispanics to take photos; that coffee drinking is higher among Hispanics; and that Hispanics tend to respond well to family-focused commercials (4). Of course much of what corporate America knows about the marketplace are considered trade secrets.

The implication of these developments in the private sector is that the Hispanic community, for commercial purposes, is no longer considered hard-to-reach. Rather, profit-oriented corporations are conducting extensive market research; selecting audience segments; designing campaigns that are language-, culture-, and image-sensitive; and tracking consumer response. One company reported a 15 to 20 percent increase in sales after a Spanish language radio campaign in Los Angeles and planned to continue and expand its advertising campaign in future years (4).

The fervor in the private sector should generate strong interest among those concerned about the prevention of disease. It would be difficult to claim

convincingly that changing attitudes about alcohol and other drugs is equivalent to influencing brand name selection. However, the corporate example underscores the simple fact that access to the Hispanic community via communication channels is more open than previously thought. The challenge for prevention is not to rely upon industry models in selling products but rather to develop the knowledge and experience that will lead to successful communication of prevention messages.

Developing the foundation of knowledge and experience will require orientation of research and demonstration programs to issues of communications. As a starting point, research efforts can begin with media use, nonbroadcast points of access, preferences for and appropriateness of spokespersons, and development of messages for selected target audiences.

Media Use

In the last several years, data on Hispanic patterns in viewing television and listening to radio have been collected by the nation's leading commercial broadcast rating companies. However, the data rarely have been analyzed in planning alcohol or other drug abuse communications programs. Indeed, there appear to be mixed messages coming from industry. A number of research firms report that use of Spanish language television is extensive—approximately 60 to 75 percent of households (5,6). However, data from Nielson and Arbitron are interpreted as showing the dominance of English language television in Hispanic households in major markets (2). In fact, it is likely that many households watch programming in both languages. The issue, then, becomes one of defining with more precision the viewing habits of subgroups.

One of the first steps should be the analysis of commercial data for the major Hispanic markets. The range and reliability of the data are both areas for preliminary investigation. Assuming appropriate data sets are available, research designs can examine use with a wide range of variables in mind—ethnic and national origin, age, gender, education level, income, program format, and time of day and day of week. While it may be helpful to obtain a national overview of use, for communications planning purposes it will be necessary to move into market-by-market analyses.

Because Hispanic media research is a relatively new field, it will be important to proceed cautiously in interpreting findings. Patterns of use not withstanding, segments of the Hispanic market may

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express strong preferences for particular formats and programs. It is interesting to note, for example, that an AIDS survey conducted in Chicago found that the preferred radio and television programs overwhelmingly originated from Spanish language stations (7).

The Chicago study suggests the need to augment findings from commercial sources with other data drawn from community-based research. A uniform methodology, outlining key questions, variables, and collection protocols, would bring to local studies comparability that allows for cross-market assessments. This type of research guidance, as well as the analysis of commercial data, can be provided appropriately at the national level.

Nonbroadcast Access

With census data showing large groups of Hispanics located in a relatively small number of geographic areas, the prospect of developing effective means of direct and indirect (intermediary group) contact to reach large numbers of persons is very strong. Approaches in the past largely have looked at ways of using institutions—schools, churches, and social services institutions—to reach audiences (8). Relatively little attention has been paid to point-of-purchase, direct mail, street intercept, and other innovations.

The range of possibilities is extensive, as indicated by a number of approaches now emerging. In Los Angeles, a private market study by Coronado Communications in 1988 revealed that Hispanics were more likely than non-Hispanic whites to own a video cassette recorder. A national AIDS media campaign is being planned by Hispanic Designers, Inc., to place public service messages produced with Hispanic television and cinema talent in movie theaters as well as on television. In Washington, DC, information about classes for English

language skills to fulfill requirements for the amnesty program is being printed on customer receipts in supermarkets in Hispanic neighborhoods. Also in Washington, the Public Health Commission is planning to distribute AIDS messages for minority youth through sporting goods outlets.

The potential for direct mail also is relatively unknown. There have been conflicting data on Hispanics' use of coupons, with high and low rates of use reported (4). The most recent mass-mailing of public health messages, the distribution of the "America Responds to AIDS" brochure to every household, has not yielded definitive data. Anecdotally, Federal sources have suggested that the distribution—which used an English language publication with a message in Spanish giving instructions on how to request a Spanish language text—yielded a large response. A survey in Arizona, however, indicated that a relatively low proportion of Hispanics recalled receiving the brochure (9).

As in the case of media analysis, studies of points of access need to be undertaken in the context of specific markets and population variables. Age, gender, socioeconomic status, language, and acculturation are among the most important variables to consider. The market-specific nature of the research does not, however, preclude the application of findings to national level programs. Uniform research methodologies will enable communications planners to test and validate assumptions in a range of markets that, combined, would create a broad regional or national scope of knowledge for campaign planning.

Spokesperson Preferences, Appropriateness

Perhaps because communications efforts aimed at Hispanics are relatively recent, there is little experience in the selection and evaluation of spokespersons used to deliver alcohol or other drug messages. Consumer audiences responded well to the use of Hispanic celebrities in the bilingual adaptation of the national "Be Smart! Don't Start! Just Say No!" materials aimed at 8- to 12-year-olds (10). However, in two independent AIDS information surveys conducted with Hispanics in San Francisco, celebrities ranked below physicians, clinical workers, and persons with AIDS as credible sources of information among those age 18 and older (11,12).

These conflicting experiences point to the need for research providing reliable insights on the use of spokespersons. As in other communications research, a local market context is essential. It has

been pointed out, for instance, that while there are few Hispanic celebrities of national standing, there are a wide range of sports figures, musicians, and others who have a strong regional following (13).

The findings of the San Francisco studies point to the need to proceed carefully with the research design. The search for credible sources of information needs to be distinguished from the search for appropriate role models who can influence attitudes and behaviors. Role modeling and the establishment of norms and values within a community should be of as much concern as the delivery of information.

Message Development for Target Audiences

Data from the National Household Survey on Drug Abuse and the Hispanic Health and Nutrition Examination Survey (H-HANES) indicate considerable variation in use patterns of alcohol and other drug substances—by age, national origin, and sex—within the Hispanic population (14). Likewise, analysis of a national survey of alcohol-related attitudes and practices among Hispanics shows extensive variation (15). Given the multiplicity of potential target populations, development of priorities becomes an important process in planning for communications research. Three groups of Hispanics emerge from the data as having special needs that could be addressed through communications programs—children and adolescents likely to be exposed to alcohol and other drugs, women of childbearing age, and heavy-drinking men.

Priority Audiences

Children and adolescents. The overall youthfulness of the Hispanic population underscores the importance of channeling messages to children and youth. Proportionally, persons age 19 and younger comprise 38 percent of all Hispanic persons, while in the non-Hispanic population this age group represents only 28 percent of the total population (3). High dropout rates among Hispanics, with estimates of 40 percent and higher in major population centers, point to limits in the use of school-based communication approaches and to the desirability of targeting younger children.

Data from a number of studies confirm that Hispanic children are at high risk for use of alcohol and other drugs. Analyses of H-HANES data indicate strong patterns of early initiation of use among Hispanic youth. Responses from persons ages 12 to 25 indicated that by age 18

- Marijuana has been used by 50 percent of Puerto Ricans, 46 percent of Mexican Americans, and 24 percent of Cuban Americans;
- Cocaine has been used by 20 percent of Puerto Ricans and 7 percent of Mexican Americans and Cuban Americans; and
- Alcohol has been used by 54 percent of Cuban Americans, 50 percent of Mexican Americans, and 46 percent of Puerto Ricans (16).

Additionally, data from the National Household Survey on Drug Abuse indicate that Hispanics ages 12 to 17 are more likely to report lifetime use of a range of substances than are black youth in the same age group. In terms of alcohol, tranquilizers, PCP, hallucinogens, inhalants, and stimulants, Hispanic rates were intermediary between those of blacks and whites, with whites reporting the highest rates of any group. For cocaine, Hispanic males in the 12- to 17-year age group reported the highest rate of lifetime use, while for marijuana, Hispanic men were less likely than black men to report use (14).

Women of childbearing age. Data are not available on the use of alcohol and other drugs by Hispanic women during pregnancy, but there is considerable concern about the potential scope of the problem. Fertility rates are higher for Hispanic women than for women in general, with Hispanics reporting 94 births per 1,000 women compared with only 68.8 in the general population, and they are even higher for Mexican American women (98.5) and women of other Hispanic origin (109.0). Further, birth data show that childbearing begins at a younger age and continues for more years when comparing Hispanic with non-Hispanic women (17).

Changes that are occurring in alcohol and other drug use among Hispanic women also raise concern. Data from the National Household Survey on Drug Use for the age group 12 to 17 years indicate that for a number of substances (stimulants and tranquilizers) Hispanic women were more likely than men to report lifetime use, and the trends across age groups suggest that prohibitions against use by Hispanic women may be weakening (14). Data from H-HANES also suggest that differences in use by gender are diminishing, particularly among younger women and among Puerto Ricans, according to Hortensia Amaro, PhD, School of Public Health, Boston University School of Medicine.

Analyses of responses in the 1984 national survey of Hispanics and alcohol use also suggest that, over

time, alcohol use by Hispanic women may become more frequent. Studies show that while only 2 percent of Hispanic women born in Mexico were frequent high maximum drinkers, the rate for those born in the United States of American parents was 26 percent. Likewise, acculturation appears to make a significant difference in alcohol use by Hispanic women. Mexican American women characterized as highly acculturated to the United States were five times more likely than those described as having low acculturation to be frequent high maximum drinkers or frequent heavy drinkers (15).

Heavy-drinking men. Data available for drug use indicate that, on a lifetime basis, Hispanic men are less likely to report use than white men; they are also less likely to report use than are black men, except for categories of tranquilizers, stimulants, and alcohol (14). Only in the case of alcohol are more extensive data on patterns of use available. The 1984 national survey is the primary source for self-reported drinking by amount consumed and attitudes toward alcohol. From the analysis of several data sets, it appears that heavy drinking occurs in roughly 40 to 50 percent of Hispanic men ages 18 to 39, that acknowledgment of drunkenness is less frequent than the actual frequency of drinking suggestive of drunkenness, and that roughly 12 to 30 percent of men in the age groups of 18 to 39 look favorably on drunkenness (18).

Two categories of consumption are of particular interest—frequent high maximum use, defined as having five or more drinks per sitting at least once a year, and frequent heavy drinking, which is having five or more drinks per sitting at least once a week. For the age group 18 to 29, 30 percent of men are categorized as frequent high maximum drinkers, and 11 percent are described as frequent heavy drinkers. In the age group 30 to 39, the proportions for the two categories are 29 percent and 25 percent, respectively. The inconsistency between reported consumption and self-assessment of drunkenness is particularly obvious among frequent heavy drinkers. In the age group 30 to 39, only 8 percent of men report being drunk at least once a month, despite the fact that 25 percent are frequent heavy drinkers (18).

Approaches to message development. The three target groups—children and adolescents, women of childbearing age, and heavy drinking men—represent diverse audiences. No single set of messages—and no single delivery strategy—will adequately meet communications objectives for each group.

Likewise, there are no simple “magic bullets” or cultural triggers which, through their incorporation in communications programs, will automatically yield products that are appropriate for and effective with Hispanic populations. There are, however, a number of approaches to be considered in the development process—approaches that cut across audiences and can contribute to more effective communications products and outcomes.

Recognizing diversity. Data on lifetime use, initiation of use, and attitudes all point out the differences that characterize the major Hispanic subgroups (14–16). Effective message development will have to take these differences into consideration and rely upon development strategies to test messages with all of the appropriate groups. The diversity is derived not only from national origin (Mexican American, Puerto Rican, Cuban American, Central or South American), but also from socioeconomic status, level of education, place of residence (urban or rural), and level of acculturation. Communications programs may opt to focus on audiences defined narrowly and specifically by one or more of these variables. Goals to reach a range of diverse audiences will have to build in steps to validate the content with multiple audiences and to ensure the appropriateness of image and style.

Reinforcing attitudes, norms, and behaviors that counter alcohol and other drug abuse. The data that identify the extent of alcohol and other drug use in the Hispanic population also provide evidence that most Hispanic children are not initiating use before age 19; that most Hispanic women still are not using alcohol and other drugs; and that, despite the large number of Hispanic men who report heavy alcohol consumption through age 39, by age 49 almost 70 percent of Hispanic men are abstainers or light consumers (14,16,18). Little is known about the attitudes, social norms and values, and resistance behaviors that create a large pool of nonusers or nonabusers. Research that identifies these variables will provide a rich base from which to develop messages that tap into the strengths of Hispanic communities.

Using the persistent belief in the centrality and importance of family. Despite shifting patterns of family configurations in the Hispanic population, “familism”—strong family norms, mutual obligations, and expectations—still is considered a significant psychological factor that influences most His-

panic persons (15). Hispanic family-focused programs, such as the work of the Spanish Family Guidance Center in Miami, have been developed successfully for intervention with drug use via therapy (19), but communications programs rarely have capitalized on the concept of familism. There are implications for messages aimed at all three proposed target audiences. For children and parents, the issues include the role of disruptive family events as antecedents for the initiation of alcohol and other drug use by children and role modeling behavior of parents. For women of childbearing age, key issues include damage to the fetus and interference with parenting. For heavy-drinking men, messages that emphasize how alcohol and drug use interfere with family responsibilities and how use can affect children may be effective. For all audiences, the overriding concern is to avoid superficial references to family and to find, instead, powerful images and messages that can activate positive behaviors directly linked to prevention goals.

Addressing intrafamilial communications barriers. Within Hispanic families, open discussion between parents and among parents and children often is limited. An ethnographic study on the drinking-related behaviors of Mexican American couples found that the degree of discussion about alcohol and other drug use varied by socioeconomic status, with very little discussion between husband and wife in blue collar families (20). Researchers in a parent training project found that, across the major Hispanic subgroups, parents lacked skills to communicate with their children, to establish leadership, and to assume leadership roles within the family (21). Most recently, data from the National Health Interview Survey indicated that Hispanics were less likely than non-Hispanics to talk with children ages 12 to 17 about AIDS (22). These findings reflect fairly ingrained patterns of interaction that may not be susceptible to change as the result of messages. However, changing attitudes about the desirability of better intrafamilial communication and encouraging family members to seek help to overcome barriers are reasonable objectives.

Conclusion

Hispanics often are labeled a “hard-to-reach” population. Problems in communication result not from inherent characteristics of the Hispanic population but from the relationship between the audi-

ences and the communications program—the less known about the audience, the greater the difficulty in developing effective strategies and materials.

In the case of Hispanics, the data on alcohol and other drug use as it relates to knowledge, attitudes, and behaviors have been extremely limited. Only in recent years have reliable national data sets become available. The research field is still evolving in terms of its Hispanic capability, but it is clear from the experience with a number of sources, including the National Household Survey of Drug Use and the Hispanic Health and Nutrition Examination Survey, that there is a growing demand for data and for analyses that can be used to design programs aimed at Hispanic communities.

The research and development activities discussed in this paper offer the potential for developing communications strategies building upon the increasing body of literature on knowledge, attitudes, and behaviors. Like the Hispanic population itself, which has rapidly increased in the past two decades, communications channels and access points are much more visible. Our knowledge of how to use these opportunities for communicating messages about alcohol and other drugs now needs to grow as well.

Alcohol and other drug use is ever-evolving; drugs of choice change from year to year. Likewise, methods of communication, preferred sources of information, credible sources and role models, and images of self, group, and society all change over time. The Hispanic community, like all segments of our society, is not static in this regard. There is, however, a particular dynamic in the case of Hispanic communities. The factors that define “Hispanic”—norms, values, self-perceptions, intra-group structures, and relationships—constantly interact with the factors that define “non-Hispanic.” Thus the sense of what is Hispanic constantly builds upon changes, some subtle and others dramatic, that occur over time. Effective Hispanic communication programs will reflect the capability to assess and respond to these changes—just as successful advertising campaigns anticipate changes in the consumer marketplace. And, as is the case with successful commercial ventures, communications concepts, messages, design, language, images, and sources must be carefully crafted and then pretested with members of the target audience.

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Mexican American and White American School Dropouts' Drug Use, Health Status, and Involvement in Violence

ERNEST L. CHAVEZ, PhD
RUTH EDWARDS, MBA
E. R. OETTING, PhD

Dr. Chavez is an Associate Professor, Dr. Oetting is a Professor, and Ms. Edwards is a Research Associate, in the Department of Psychology, Colorado State University.

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Tearsheet requests to Ernest L. Chavez, PhD, Colorado State University, Fort Collins, CO 80523.

Synopsis

A group of Mexican American and white American school dropouts were compared with a control group and a group of academically at-risk students in three locations in the Southwest. The sample group consisted of school dropouts and comparison subjects in grades 6 through 12. Both comparison groups were matched with the dropouts by sex, ethnicity, and school grade. At risk students also were matched by age and grade point average.

Dropout subjects were found to have the highest rates of alcohol and drug use, followed by at risk

student subjects. The relative rates of use were about the same for nearly all drugs, with the largest differences found for drinking to intoxication and use of marijuana, uppers, and cocaine. Among the dropouts, 75 percent of Mexican American males and 90 percent of white American males had tried marijuana. More than a third of the dropouts had tried cocaine. One-third of the Mexican American males and more than half of the females in both the Mexican American and the white American group had tried uppers.

Females, especially dropouts, had higher rates of tobacco smoking than males. The rates of cigarette smoking among dropouts were significantly greater than among the control group only for males. Health problems of parents were not related to dropping out of school for any of the ethnic or sex groups. However, dropouts were more likely to have had serious illness within the preceding year than members of the control group.

Many dropouts live in a violent and dangerous world. As an example, about one in five dropouts had held a gun on someone in a confrontation, and 20 percent had cut someone with a knife. Nearly half had been badly beaten. Females were rarely perpetrators of crimes or misdemeanors, but were often victims. Forty-two percent of the white American female dropouts had been either raped or sexually assaulted. Mexican American females were found less likely to be victims of violence, which perhaps reflects cultural values of marianisma and machismo, involving protectiveness toward females.

FIFTY PERCENT of the U.S. Hispanic population is Mexican American, the largest Hispanic subpopulation. In the Southwest, more than 80 percent of Hispanics are Mexican American. Estimates show that Mexican Americans will be the majority

of the population younger than 30 years of age in the Southwest by the year 2000. Their median age is 22 years, with almost a quarter younger than 10 years (1). The economic and social welfare of the region will be heavily dependent in the near future