

# **HHS Public Access**

Author manuscript *Cogn Behav Pract*. Author manuscript; available in PMC 2015 May 06.

Published in final edited form as:

Cogn Behav Pract. 2010 May ; 17(2): 167-175. doi:10.1016/j.cbpra.2010.01.003.

# **Bringing Culture Into Parent Training With Latinos**

# Esther J. Calzada

New York University Child Study Center

# Abstract

Traditional frameworks of parenting have failed to capture the distinctive nature of parenting in Latino families. Cultural values likely influence parenting practices. The study of cultural values may allow us to identify aspects of parenting that are unique to Latinos and which complement traditional frameworks of parenting. This paper presents qualitative work on two Latino cultural values, familismo and respeto, and examines ways in which these values may inform the provision of standard parent training programs with Latinos. The first study is an ethnography that explored the value of familismo. The second study consisted of focus groups in which Latina mothers discussed the value of respeto. Findings from these two studies are used to examine the cultural congruence of the characteristics of parent training programs and the Latino values of familismo and respeto. In light of the issues identified, clinical guidelines for working with Latino parents in parent training programs are offered.

There is general consensus that culture largely determines the inferred basis of parenthood, so that parenting is defined according to cultural understanding and is grounded on the past experiences of that culture within its unique environment (Baumrind, 1995). Still, researchers have long relied upon assumptions about normative childrearing practices and beliefs that are based on middle-class, European American families (Zayas & Solari, 1994). Cultural differences in rules, beliefs, preferences, codes of communication, and standards of competence have implications for the parenting of children (Levine, 1989), at least insofar as they lead to different parental values (Fracasso, Bush-Rossnagel, & Fisher, 1994). Values held by parents are thought to predict parenting behavior (Belsky, 1984) and appear to be relatively stable (Cote & Bornstein, 2003).

A pervasive theme of American child-rearing ideology is independence, a value that helps explain why, for example, European American parents use praise and enthusiastic attention (Levine, 1980). Parents of different cultures place less emphasis on independence, resulting in parenting differences (Garcia Coll, 1990; Gutierrez, Sameroff, & Karrer, 1988). In the Latino culture, mothers value obedience and respect more than U.S. mainstream values such as independence, autonomy, and being assertive (Arcia & Johnson, 1998; Gonzalez-Ramos, Zayas, & Cohen, 1998). Arcia and Johnson found that for Mexican immigrant mothers, "obedience was at the basis of all desirable characteristics (p. 86).

<sup>© 2010</sup> Association for Behavioral and Cognitive Therapies. Published by Elsevier Ltd. All rights reserved.

Address correspondence to Esther J. Calzada, Ph.D., NYU Child Study Center, 215 Lexington Ave., 13th floor, New York, NY 10016; Esther.Calzada@nyumc.org.

In a series of studies of Puerto Rican and European American mothers, Harwood and colleagues (Harwood, Schoelmerich, Schulze, & Gonzalez, 1999; Harwood, 1992) have demonstrated cross-cultural differences in both parental values and parenting practices. For example, European American mothers attend to personal development (e.g., self-confidence, independence) in infant behavior, whereas Puerto Rican mothers attend to dimensions of respect (e.g., obedience, good behavior). Self-report and behavioral observations corroborate these differences in that Puerto Rican mothers discourage autonomous and exploratory behaviors, assert their parental authority, and use physical restraint more than European American mothers, who use more modeling, praise, and suggestions.

Such findings have led researchers to argue for the need to systematically incorporate culture into mental health interventions such as parent training programs (Forehand & Kotchick, 1996), particularly given the low engagement and retention rates for Latinos compared to non-Latino Whites (McCabe et al., 1999). Currently, however, evidence-based parent training programs are informed by Westernized (i.e., middle-class, European American culture in the U.S.) models of parenting that may not capture the true nature of Latino parenting or appeal to the greatest number of Latino parents (but see Maritnez & Eddy, 2005; McCabe, Yeh, Garland, Lau, & Chavez, 2005).

Few would argue with the idea that culture must be considered in order to maximize program success (Hoag-wood, Burns, Kiser, Ringeisen, & Schoenwald, 2001). A recent meta-analytic review by Griner and Smith (2006) found evidence in favor of cultural adaptation of mental health interventions. In contrast, Miranda and colleagues (Miranda, Bernal, Lau, Kohn, Hwang, & LaFramboise, 2005) presented literature on the efficacy and effectiveness of evidence-based treatments across ethnic groups and concluded that "evidence-based care is likely appropriate for most ethnic minority individuals (p 134). As this debate remains unresolved, scholars have called for a conservative approach to cultural adaptation (Lau, 2006) as well as increased attention to the efficacy of evidence-based treatments with ethnic minority groups (Forehand & Kotchick, 1996; Hall, 2001).

Without empirical data, the field is tasked with meeting a growing demand to provide sensitive and effective intervention services for Latinos based on clinical judgment and theory. In response, the clinical literature has examined ways in which common cultural elements—most typically cultural values—may manifest in the therapeutic context (e.g., Añez, Paris, Bedregal, Davidson & Grilo, 2005; Simoni & Perez, 1995). With little exception (McCabe et al., 2005, Maritnez & Eddy, 2005), though, there has been no discussion in the literature on the relation between culture and the elements of parent training. The absence of clinical guidelines—specifically for parent training programs—is striking as parent training is widely considered the gold-standard intervention for many childhood mental health problems (Brestan & Eyeberg, 1998).

The aim of this paper is to explore ways in which the espousal of Latino cultural values may relate to parent training interventions. The discussion builds on findings from two previous studies that explored *familismo* and *respeto*, core cultural values that may play a central role in parenting among Latino families. Specific clinical guidelines are offered with the goal of increasing congruence between intervention efforts and these specific Latino cultural values.

# Study 1: Familismo

*Familismo* is a multifaceted construct that can be understood in terms of attitudinal and behavioral manifestations (Keefe, 1984). Attitudinal *familismo* refers to feelings of loyalty, solidarity, and reciprocity among family members. According to Lugo Steidel and Contreras (2003), attitudinal *familismo* has four components: (a) belief that family comes before the individual; (b) familial interconnectedness; (c) belief in family reciprocity; and (d) belief in familial honor. Behavioral *familismo* refers to the behaviors that reflect these beliefs. There has been little empirical attention given to these attitudinal components, and the behavioral component of *familismo* is even less understood.

Study 1 (Calzada, Tamis-LeMonda & Yoshikawa, 2010) used ethnographies from a multiyear research project on infant and early adolescent development among immigrant families to study *familismo*. The ethnographies employed a combination of semistructured interviews and participant observation methods. Families were visited between 9 and 12 times over a period of 6 to 9 months by trained, bilingual field workers who covered a range of topics across six modules (e.g., immigration experiences, family, and peer relationships). Interviews and field notes were coded for mention of family. After extracting all data with the *Family* code, which resulted in over 600 pages of text, the authors analyzed the data for themes. Our thematic analysis involved "the search for and identification of common threads that extend throughout an entire interview or set of interviews (Bowen, 2006). Specifically, after careful review of each participant's transcript, a list of themes was generated and themes that were consistent across participants were retained and used to guide a more indepth review of each transcript. Illustrative text was then extracted for each theme. Thus, analyses were conducted within case (i.e., for a given participant), followed by analysis across cases.

Participants were 12 Latina (i.e., Dominican, Mexican, and Puerto Rican) mothers. The Mexican and Dominican mothers were Spanish-speaking and the Puerto Rican mothers were English-speaking. The Puerto Rican mothers and one of the Dominican mothers were born on the U.S. mainland; the other participants were foreign-born. All families had a household income below 250% of the federal poverty threshold for the previous year. The children in these families were either between 3 months and 3 years old or between 10 and 12 years old (matching the sample of a larger research study). The average age of the mothers was 34 (range: 22–51).

#### Results

Our qualitative data supported each of the four components of attitudinal familismo:

**a.** The belief that one should sacrifice individual needs and desires for the sake of family:

My brother, even today when he is grown up, after having worked, he gives my mother all the money and my mother gives him some money for him. She says, 'This is for you, spend it.'

**b.** The belief that adults should keep a strong emotional and physical bond with the family although they may be independent in many aspects of their personal life:

You have to help each other out, be there for each other, especially when you're growing up or when you have families. I mean that togetherness is very important, you know?

**c.** The belief that an individual has an obligation to give whatever support is needed by other family members when that support is called for:

I rely on them for any emergency that I may have. [And] I help them in every way I possibly can. If they need me, at whatever hour, I go, because they never refuse [to help] me. Because they treat me well. When I had the illness (depression), they helped me a lot...they didn't leave me alone.

**d.** Individuals have the duty to upkeep and protect the family name and honor and, if need be, actively defend it:

[In reference to a confrontation with her co-worker] I was like, 'You don't talk about my sister like that.' You know? I got very emotional, too. Because I was like, you're talking about my blood like that.

**Behavioral Familismo**—We also sought to identify the ways in which *familismo* manifests in the everyday lives of Latinos. Five themes were identified and are briefly summarized below with illustrative quotes.

Shared finances: Extended family members rely on each other for financial support.

I borrow something from someone in my family if I have any emergency. I am ashamed, but, I have been lucky that it has always been my family and if they see that I'm in trouble, they always help me; they never deny me.

Cause it's like my mom taught us, you know, don't borrow from friends.

Shared living: Extended family members share formal and informal living arrangements.

[An adult mother, in reference to her own mother] She wants to gather us up in one little tent...living all together.

Yes, sometimes we see each other three times a week; when I don't go over there, they come over here. They have the key, they come whenever they want to, they spend the night here. I give them my key; you never know, you go to bed...but you never know [if someone is going to come].

Shared daily activities: Extended family spends most of their nonworking hours together.

We'll go with them to wherever they need to go; to the stores, to the park. .... We don't like to be alone.

Shared childrearing: Extended family members are instrumental in raising children.

[From field worker notes] Karin's mom was in the States, but had to leave because her mom who was in Mexico got sick; she needed to return to take care of her. She left the child with the father, but the father works too much and is unable to take care of Karin. So Gloria is taking care of her. Gloria tells me that when her cousin (Karin's father) brought Karin over, he handed her all her papers. He just said, "Keep her, I can't." She thought that he had wanted her to adopt Karin, but in reality he just wanted her to raise her. Gloria stated emphatically, "While Karin is here in the house, I'll love her as much as [my own children].

Immigration: Extended family members provide the motivation and means to immigrate.

A man brought us...to Queens (NY). And my husband's cousin came later to pick us up. Then she gave money to the coyote and he delivered us.

These findings from Study 1 suggest that *familismo* manifests across domains in the everyday lives of Latinos and in ways that are likely to affect family functioning and influence Latinos' engagement and response in parent training programs.

#### Study 2: Respeto

The value of *respeto* is based on the importance of respect and obedience of authority (Gonzales-Ramos et al., 1998), is a means of maintaining harmony within the extended family (Marin & Marin, 1991), and is related to "knowing the level of courtesy and decorum required in a given situation in relation to other people of a particular age, sex and social status (Harwood, Miller, & Irizarry, 1995, p.98). Delgado-Gaitan (1994) illustrated that for Mexican American parents, *respeto* emphasizes that children should be highly considerate of adults and should not interrupt or argue. At least in the context of parenting young children, *respeto* appears to delineate the boundaries of appropriate and inappropriate child behavior. To identify these boundaries, Study 2 explored the behavioral manifestations of *respeto*.

Participants for Study 2 (Calzada, Fernandez, & Cortes, 2010) were 48 female primary caregivers of 3- to 6-year-old children who self-identified as Dominican (n=31) or Mexican (n=17). All Mexican participants were born in Mexico and the majority (77%) of Dominican mothers were foreign-born. Immigrant mothers had been residing 15 years (SD=9) on average in the U.S. The average yearly household income was \$19,060 (range: \$1,896 – \$60,000). Mothers were 33 years old (SD =8), and children were 48.6 months (SD=10.6) on average.

Participants were recruited with fliers and in person at Head Start and day-care centers in New York City to attend a focus group. Each focus group lasted approximately 2 hours and was led by the first author and a research assistant (both bilingual). Focus groups followed a semistructured protocol that began with open-ended questions about cultural values (i.e., *What values are most important to you as a Dominican/Mexican?*) and proceeded to narrow in on *respeto* (e.g., *What does it mean for a child to show* respeto?).

Focus groups were transcribed (150 pages) and analyzed in their original language (i.e., Spanish or English) by the first and second authors, with consultation from the third author;

all three coders are bilingual. Coding followed a *constant comparative analysis* approach (Glaser & Strauss, 1967; Padgett, 1998), in which the data were analyzed for themes, which were then confirmed by further analysis of the data, followed by a third review of the data to look for new codes and themes. Twelve themes—both anticipated and unanticipated—were identified using this approach. Agreement was high between coders. Differences, where they existed, were discussed to reach consensus. Each focus group was coded separately and results from the six groups were examined independently and in concert.

#### Results

The behavioral manifestations of *respeto* were categorized into four domains, including obedience/conformity to authority, deference, decorum, and public behavior. As illustrated in Table 1, results show that Latino parent participants believe in the importance of raising obedient children who accept authority without question, defer to elders, follow specific rules of decorum and exhibit high degrees of control over their behavior, particularly in public. In general, we found that many Latino parents hold the accompanying belief that good behavior—namely, obedience—results from children's respect for elders. These findings suggest that *respeto* plays a predominant role in child-rearing and underlies many of the practices of Latino parents starting in the preschool years.

# **Clinical Implications**

The findings from the two studies described above highlight the importance of *respeto* and *familismo* in the lives of Latino families, specifically in the domain of parenting, and compel us to explore how cultural values interact with the characteristics of a Westernized parent training program. *What are the important cultural processes that would improve engagement and retention? How are treatment mechanisms presented in a manner that makes sense in the cultural context? Are there new mechanisms of change that need to be considered? Are there mechanisms of change that need to be excluded or deemphasized? In what ways do values such as* familismo *and* respeto *confer benefit; in what ways may they increase risk?* These questions are complex and deserve empirical attention. In the interim, the present paper offers a preliminary examination of some of the clinical implications that *familismo* and *respeto* may have for parent training programs.

#### **Cultural Implications Regarding Program Modality**

As suggested by Study 1, a primary consideration in following traditional parent training programs is clearly the Latino view of family, with its emphasis on an entire network of extended members who play a significant role in the child's life. The status of grandparents, in particular, cannot be underestimated, as expressed by a Dominican mother who said, "Your parents are number one but your grandparents are even greater than number one. Within this culture of nondyadic socialization, the emphasis of Westernized programs on the dyadic parent-child relationship may be culturally incongruent.

This inconsistency has been noted by researchers (e.g., McCabe et al., 2005), leading to recommendations that key caregivers within the family be engaged in services to maximize effectiveness. The engagement of multiple caregivers into parent training would introduce a

shift from a dyadic treatment model to a family therapy model, and affords the opportunity to examine questions that may be key to effecting change in children's behavior (i.e., *How are caregivers supporting each other in their caregiving efforts? How do caregivers handle disagreements?*). The rich clinical literature on family therapy (Minuchin, Lee, & Simon, 2006) can offer specific guidelines for negotiating family dynamics in and out of therapy sessions.

Beyond the engagement of multiple caregivers, the inconsistency between nondyadic and dyadic child socialization has implications for the acceptability, feasibility and effectiveness of specific parenting skills. For example, dyadic *parent-child play* may be modified to include multiple caregivers, allowing for play time for the whole family. Similarly, *discipline* plans, including the selection, monitoring, rewarding, and punishing of target behaviors should be developed with and for multiple caregivers. Finally, as living arrangements are fluid, with extended family coming in and out of a given home, daily *routines* must likewise be fluid, plan for change, and reflect the formal and informal roles of various members in the family network.

#### **Cultural Implications Regarding Program Content**

Beyond issues of modality, findings from Study 2 suggest that Latino (i.e., *respeto*-driven) parenting is associated with the use of strategies that may be inconsistent with those taught in parent training programs. Specifically, parents who value *respeto* may disagree with the use of positive reinforcement because *respeto* dictates that children obey parents "just because or "because parents said so. In other words, positive reinforcement is not considered necessary in the shaping of children's behavior and takes on a feel of bribery. Latino parents may also disagree with the idea of ignoring misbehaviors that may be mild and attention-seeking but are nonetheless disrespectful, such as sass, back-talk, name-calling, or making a face at a parent. Even if the misbehavior is not considered disrespectful, ignoring may be viewed as a passive discipline strategy that is unacceptable because parents who value *respeto* appear to overemphasize discipline. The strong emphasis on discipline seems to stem from the view that harsh reprimands and spanking are a successful means of teaching children to respect and obey parents may also be reluctant to use alternative discipline strategies such as time-out and loss of privileges.

Despite these considerations, clinicians are tasked with educating Latino parents in the use of strategies that will be the most effective for their children. Thus, even as numerous and complicated issues of cultural congruence remain unresolved, the field continues to teach Westernized parenting practices given the alternative of abandoning evidence-based practices for use with Latinos altogether. The clinical process, then, arguably becomes the critical component in working with Latino parents. In other words, the clinical process is the tool through which a parent and clinician find a middle ground so that evidence-based strategies may be adopted by the parent but with important adjustments to fit the cultural context of the family.

#### **Cultural Implications Regarding the Clinical Process**

Building on the model of motivational interviewing, which "emphasizes and honors client autonomy to choose whether, when and how to change, (Hettema, Steele, & Miller, 2005, pg. 93), parent training work should be guided by two underlying principles—collaboration and flexibility—to obtain the maximum benefit for Latino families. To create a *collaboration*, clinicians must create an environment in which parents (a) feel open to talking about parenting in an honest and reflective way, (b) feel open to learning about new parenting strategies, and (c) are empowered that they have the knowledge and skill to raise successful children. The role of the clinician is not to prescribe parenting strategies but to help a parent explore her decisions carefully enough so that she can evaluate whether they truly are best for her family. This involves teaching new (i.e., Westernized) strategies for the parent to consider. Clinicians expect and accept that the evidence-based strategies are to be individualized (e.g., modified, rejected) to each parent's culture. Ultimately, parents make decisions that are consistent with their values and goals (driven by characteristics of the child, family, and culture) while also being informed by evidence-based practices.

Following the idea that parent input is encouraged and enabled throughout the intervention, the clinical process remains *flexible* and open to the ideas and beliefs of parents. The clinical process may follow a sequence that includes: (a) laying the groundwork for parents to think about how their parenting is culturally driven; (b) encouraging parents to educate clinicians about their culture; (c) weaving the culture of parents into the fabric of treatment by adjusting ongoing sessions to fit the cultural context of the family. Two illustrations of this clinical process are offered below.

#### Example 1

Clinician (C): What do you think about selective ignoring as a discipline strategy?

Parent (P): It doesn't seem like discipline to me. You're basically doing nothing, as a parent, if you ignore your child talking back to you.

C: OK, you think you wouldn't be doing your job as a parent if you used selective ignoring. I appreciate how important it is to you to be an involved parent who deals directly with your child's misbehavior.

P: You know, when I was growing up, you had to be crazy to talk back to your parents. No one got away with that kind of falta de respeto [lack of respect].

C: Sounds like its pretty serious business in your family for a child to talk back to a parent. I can understand why you don't want to ignore that behavior. What about whining? You've talked about how Christopher whines a lot. Is that disrespectful?

P: No, no, not disrespectful. He is only 4.

C: So how would you feel about ignoring Christopher's whining?

P: I don't think it would work. As a parent, you need to teach your child what is right and what is wrong. You can't just walk away.

C: I agree. Teaching kids right from wrong is very important. Let's say Christopher is whining, what would you want to say to him to teach him that it is wrong?

P: "Christopher, you cannot talk that way. You are a big boy now and you need to talk right."

C: I like that idea—you say something clear and simple to teach him whining is not the way you want him to talk to you. After you say that, can you walk away?

P: Sure, then I could walk away.

C: I think we just came up with a great plan: when Christopher whines, you can say something simple and clear to teach him how you do want him to talk. Then you can walk away until he stops whining and starts talking like the big boy he is. What do you think?

This example shows how a clinician, by remaining flexible, may address a parent's resistance to adopt a parenting strategy that is culturally incongruent by allowing the parent's cultural values and beliefs to shape her acceptance and ultimately, her individualized use of that specific strategy.

**Example 2**—The next example relates to the Latino value of *familismo* and its dictate that family members defend one another, which has direct implications for the modification of aggressive behaviors. Aggression, when it occurs, is an important target behavior in parent training programs yet parents who teach children that verbal and physical aggression is acceptable in the defense of themselves and their family may resist efforts to punish these incidences of aggression. The steps outlined below allow the clinician to remain collaborative and flexible:

- **1.** Identify the misbehavior. Crystal, a 6-year-old girl, punches her classmate because that classmate was teasing her 5-year-old sister.
- **2.** Consider whether the misbehavior is a culturally congruent or incongruent behavior.

How would you as a clinician interpret this behavior? How would Crystal's parents, extended family and community interpret this behavior? Are these interpretations consistent?

**3.** If the misbehavior is culturally congruent, explore the cultural perspective. As with all cultural behaviors, there is valid reason that a community raises its children with that belief.

What value may underlie the family's views of this behavior? What adaptive function does the behavior serve?

**4.** Once identified, reflect the underlying cultural perspective with the parent and child:

"I understand that teaching your girls to defend each other is important in your family" or "I see that taking care of your sister by making sure no one teases her is important to you."

**5.** Challenge the underlying assumption that the behavior should be targeted for change.

How adaptive is the culturally congruent behavior? In what context is the specific behavior adaptive? Considering the cultural context, how will the child/family benefit if this behavior is eliminated? What costs may be associated with eliminating this behavior?

**6.** If the specific behavior is not adaptive in particular or all contexts, help the parent and the child understand the need and the context for change.

"I admire how important family is to you. I also respect the way in which you are raising your children to look out for each other. I want to talk about how to help Crystal do that without getting into fights because kids are not allowed to fight when they are at school."

"Crystal, I can see how much you love your sister and I understand that it is important in your family that you stick up for her. But sometimes things are different at school than they are at home. At school, children are not allowed to hit other kids no matter what. It is a rule that we have so that all the kids feel safe and protected. When you are at school, it is really important that you follow this rule. If someone teases you or your sister, we can help you deal with it so that you don't have to fight, ok?"

7. Collaborate with the parent to develop a plan that will respect the underlying value while teaching the child an adaptive behavioral response given the context in which it manifests.

"How can we help Crystal learn the importance of defending her family honor without teaching her to fight?"

**8.** Recommend an appropriate behavior management strategy. In other words, you would still give a consequence for aggression, like a time-out or a loss of privilege, as well as positive reinforcement for staying out of fights.

In this example, the clinician encountered cultural differences in the selection of a target behavior. Through collaboration, the parent and clinician are able to identify the most adaptive child behavior based on the cultural context within which the child must function.

#### Cultural Implications Regarding Assessments

As we continue to work towards an empirical understanding of the interaction between cultural values and parent training program characteristics, clinicians have been cautioned against ascribing these values to any given family given the heterogeneity of the pan-Latino population. Indeed, Guarnaccia and Rodriguez (1996) argue that culture is "both a product of group values, norms, and experiences and of individual innovations and life histories (p. 421), adding "culture is as much a process as a thing and thus, attempts to freeze culture in a set of generalized value orientations or behaviors will constantly misrepresent what culture is (p. 433). This conceptualization of culture as an interaction between group and individual level variables and as a dynamic construct underscores the importance of assessment in

parent training programs. Measuring parental values in relation to the impact those values may have on the clinical process and program content allows clinicians to gather information relevant to the engagement and retention of the Latino family and its members as individuals embedded within a specific cultural context (Dumka, Lopez, & Carter, 2002). Assessments will be most useful when they tap into both attitudinal and behavioral components of cultural values, are conducted formally at intake (McCabe et al., 2005), and continue informally throughout treatment. Without this careful and systematic consideration of cultural values, our services for Latino parents may continue to lag behind those of non-Latino Whites in terms of feasibility, acceptability, and effectiveness.

# Summary

This paper used findings from two previous studies on *familismo* and *resepto* to inform a discussion on the clinical implications of these cultural values for parent training programs with Latinos. This work addresses some of the challenges posed by multiculturalism by considering an "etic-to-emic approach in which a culturally universal (i.e., etic) intervention —parent training—is modified based on culturally specific (i.e., emic) considerations. Culturally informed programs are more likely to engage participants to the fullest extent possible, thereby increasing the possibility of long-term outcomes. Still, there is considerable debate regarding the utility and process of cultural adaptation (Griner & Smith, 2006) and further work is needed to resolve these questions. As researchers take on this challenge, our clinical work must continue to strive for best practices and cultural sensitivity as we serve the vast Latino population.

# Acknowledgments

This work was supported by a K23 award from the National Institute of Child Health and Human Development (K23 HD049730-03) to Esther J. Calzada and by grants from the National Science Foundation (PI: C. Tamis-LeMonda; Co-PIs: D. Hughes, N. Way, H. Yoshikawa) and the W.T. Grant Foundation (PI: H. Yoshikawa). The author gratefully acknowledges the support of a grant from the National Institute of Mental Health (R13 MH077403; Luis Zayas, PI), the *Developing Interventions for Latino Children, Youth and Families* conference members, its planning committee and Dr. Luis Zayas. The author also wishes to thank the clinical team of the Institute for Prevention Science at the New York University Child Study Center for their insights.

# References

- Añez LM, Paris M, Bedregal LE, Davidson L, Grilo CM. Application of cultural constructs in the care of first generation Latino clients in a community mental health setting. Journal of Psychiatric Practice. 2005; 11:221–230. [PubMed: 16041232]
- Arcia E, Johnson A. When respect means to obey: Immigrant Mexican mothers' values for their children. Journal of Child and Family Studies. 1998; 7(1):79–95.
- Baumrind, D. Child maltreatment and optimal caregiving in social contexts. New York: Garland; 1995. Childrearing dimensions relevant to child maltreatment; p. 55-73.
- Belsky J. The determinants of parenting: A process model. Child Development. 1984; 55:83–96. [PubMed: 6705636]
- Bowen GA. Grounded theory and sensitizing concepts. International Journal of Qualitative Methods. 2006; 5:1–9.
- Brestan E, Eyeberg S. Effective psychosocial treatments of conduct-disordered children and adolescents: 29 years, 82 studies, and 5,272 kids. Journal of Clinical Child Psychology. 1998; 27:180–189. [PubMed: 9648035]

- Calzada EJ, Fernandez Y, Cortes D. Incorporating the cultural value of *respeto* into a framework of Latino parenting. Cultural Diversity and Ethnic Minority Psychology. 2010; 16:77–86. [PubMed: 20099967]
- Calzada EJ, Tamis-LeMonda C, Yoshikawa H. Costs and benefits of the Latino cultural value of Familismo. 2008 Manuscript submitted for publication.
- Cote LR, Bornstein MH. Cultural and parenting cognitions in acculturating cultures: Cultural comparisons and developmental continuity and stability. Journal of Cross Cultural Psychology. 2003; 34:324–349.
- Delgado-Gaitan, C. Socializing young children in Mexican-American families: An intergenerational perspective. In: Greenfield, PM.; Cocking, RR., editors. Cross-cultural roots of minority child development. New York: Lawrence Erlbaum; 1994. p. 55-86.
- Dumka, LE.; Lopez, VA.; Carter, SJ. Parenting interventions adapted for Latino families: Progress and prospects. In: Contreras, JM.; Kerns, KA.; Neal-Barnett, AM., editors. Latino children and families in the United States: Current research and future directions. Westport, CT: Praeger/ Greenwood; 2002. p. 203-231.
- Forehand R, Kotchick BA. Cultural diversity: A wake-up call for parent training. Behavior Therapy. 1996; 27:187–206.
- Fracasso MP, Busch-Rossnagel NA, Fisher CB. The relationship of maternal behavior and acculturation to the quality of attachment in Hispanic infants living in New York City. Hispanic Journal of Behavioral Sciences. 1994; 16:143–154.
- Garcia Coll CT. Developmental outcome of minority infants: A process-oriented look into our beginnings. Child Development. 1990; 61(2):270–289. [PubMed: 2188805]
- Glaser, BG.; Strauss, AL. The discovery of grounded theory: Strategies for qualitative research. Chicago: Aldine; 1967.
- Gonzalez-Ramos G, Zayas L, Cohen E. Child-rearing values of low-income, urban Puerto Rican mothers of preschoolers. Professional Psychology Research & Practice. 1998; 29:377–382.
- Griner D, Smith TB. Culturally adapted mental health interventions: A meta-analytic review. Psychotherapy: Theory, Research, Practice, Training. 2006; 43:531–548.
- Guarnaccia PJ, Rodriguez O. Concepts of culture and their role in the development of culturally competent mental health services. Hispanic Journal of Behavioral Sciences. 1996; 18:419–433.
- Gutierrez J, Sameroff AJ, Karrer BM. Acculturation and SES effects on Mexican-American parents' concepts of development. Child Development. 1988; 59(1):250–255.
- Hall GCN. Psychotherapy with ethnic minorities: Empirical, ethical and conceptual issues. Journal of Consulting and Clinical Psychology. 2001; 69:502–510. [PubMed: 11495179]
- Harwood RL. The influence of culturally derived values on Anglo and Puerto Rican mothers' perceptions of attachment behavior. Child Development. 1992; 63(4):822–839. [PubMed: 1505243]
- Harwood, RL.; Miller, JG.; Irizarry, NL. Culture and attachment: Perceptions of the child in context. New York: Guilford Press; 1995.
- Harwood RL, Schoelmerich A, Schulze PA, Gonzalez Z. Cultural differences in maternal beliefs and behaviors: A study of middle-class Anglo and Puerto Rican mother-infant pairs in four everyday situations. Child Development. 1999; 70(4):1005–1016. [PubMed: 10446732]
- Hettema J, Steele J, Miller WR. Motivational Interviewing. Annual Review of Clinical Psychology. 2005; 1:91–111.
- Hoagwood K, Burns BJ, Kiser L, Ringesisen H, Scheonwald SK. Evidence-based practice in child and adolescent mental health services. Psychiatric Services. 2001; 52:1179–1189. [PubMed: 11533391]
- Keefe SE. Real and ideal extended familism among Mexican Americans and Anglo Americans: On the meaning of "close family ties. Human Organization. 1984; 43:65–70.
- Lau AS. Making the case for selective and directed cultural adaptations of evidence-based treatments: Examples from parent training. Clinical Psychology: Science and Practice. 2006; 13:295–310.
- Levine, R. A cross-cultural perspective on parenting. In: Fantini, MD.; Cardenas, R., editors. Parenting in a multicultural environment. New York: Longman; 1980. p. 17-26.

- Levine, R. Cultural environments in child development. In: Damon, W., editor. Child development today and tomorrow. San Francisco: Jossey-Bass; 1989. p. 52-68.
- Lugo Steidel AG, Contreras JM. A new familism scale for use with Latino populations. Hispanic Journal of Behavioral Sciences. 2003; 25:312–330.

Marin, G.; Marin, B. Research with Hispanic populations. Newbury Park, CA: Sage; 1991.

- Maritnez C, Eddy J. Effects of culturally adapted parent management training on Latino youth behavioral health outcomes. Journal of Consulting and Clinical Psychology. 2005; 73:841–851. [PubMed: 16287384]
- McCabe KM, Yeh M, Garland AF, Lau AS, Chavez G. The GANA program: A tailoring approach to adapting parent child interaction therapy for Mexican Americans. Education and Treatment of Children. 2005; 28:111–129.
- McCabe KM, Yeh M, Hough R, Landsverk J, Hurlburt M, Culver S, Reynolds B. Racial/ethnic representation across five public sectors of care for youth. Journal of Emotiona and Behavioral Disorders. 1999; 7:72–82.
- Minuchin, S.; Lee, W-Y.; Simon, GM. Mastering family therapy: Journeys of growth and transformation. 2. Hoboken, NJ: John Wiley & Sons; 2006.
- Miranda J, Bernal G, Lau A, Kohn L, Hwang WC, LaFramboise T. State of the science of psychosocial interventions for ethnic minorities. Annual Review of Clinical Psychology. 2005; 1:113–142.
- Padgett, DK. Qualitative methods in social work research: Challenges and rewards. Thousand Oaks, CA: Sage; 1998.
- Simoni JM, Perez L. Latinos and mutual support groups: A case for considering culture. American Journal of Orthopsychiatry. 1995; 65:440–445. [PubMed: 7485430]
- Zayas LH, Solari F. Early childhood socialization in Hispanic families: Context, culture, and practice implications. Professional Psychology: Research and Practice. 1994; 25:200–206.

# Table 1

# Behavioral Manifestations of Respeto

Obedience/Conformity to authority	
$\succ$ obey parents no matter what	"If he doesn't obey or did something wrong, then that is a lack of respect."
≻ accept parental authority without questioning it	"I say to my son, 'You are very fresh. You cannot be disrespectful to your elders. I have told you, one hundred times I have told you, that when an elder tells you to go home, or tells you that your behavior is wrong, you pay attention and stay quiet and don't make an ugly face because you are not big. Remember your place because you are a child and children have to respect adults."
➤ look parent in the eye during commands	"When a child and a parent are talking, we must look each other in the eye."
➤ stay quiet when reprimanded/ disciplined	"My mother, if she reprimands me, I don't answer. I stay quiet." "My son, when he misbehaves to a certain point, I tell him, 'Go to your room,' [He responds] 'But mommy, let me say something and I say, 'No, you will go right now.'"
≻ never talk back	"In regards to the childrensome of us raise them like: 'You don't talk. You don't respond."
Deference	
never listen in on/participate in adult conversations	"So I would say to [my son], 'Well, and you, who invited you into this discussion? That looks bad. That reflects poorly on you. It is bad manners to get involved in adult conversations."
≻ never express disagreement with adults	"Sometimes [my] mom says something that I disagree with, and sometimes I'll even wink my eye, and I say, 'Well, ok. Even though I disagree, to not be contrary, to not raise my voice, to notdo you understand?"
≻ never interrupt adults	"They [children] should not sit down and say, 'Excuse me, mom, I need to talk to you. Because one is discussing adult matters that they are not supposed to listen to."
$\succ$ offer seat to elders	
➤ wait until all adults have a seat before sitting down	(Describing <i>falta de respeto</i> ) "Nowadays, they [children] say hello and they sit down before you [the adult]."
$\succ$ offer to help elders	"If my mother [child's grandmother] needs something, that they [children] get it for her. They need to help her. They should not let her go get it."
≻ defer to adult wishes	"If my child says, 'Oh, I want to sleep with grandmother, No, quiet! She is the one who knows. If she is not feeling well, if she is sick or uncomfortable, you have to respect. And [I tell my] mother, 'If he comes to you anyway, you get the belt and whip him two times.'"
Decorum	
➤ avoid bad words	"that the child not say bad words."
➤ avoid rude tone of voice	"He comes and talks to me with an ugly tone, or to his grandparents, or his father, that is disrespect."
$\succ$ say <i>please, thank you</i> , etc	"When his brother is playing with something and he comes and takes it. That is disrespectful. He needs to ask, 'Can I play with you?""
➤ greet adults politely (e.g., pedir la bendición)	"When you go out and someone greets you. Out of respect, you need to greet them. If an elder arrives at the house, you must greet them."
➤ address elders formally (e.g., usted, Don/Dopa rather than tu)	
Public behavior	
➤ when visiting someone's home, never touch anything without permission	"You need to ask permission to touch thingswhen we go out, don't touch." "To not respect things that belong to others. To me, that is disrespectful."
≻ stay calm and quiet in public situations (e.g., visiting someone's home)	(Referring to common saying) "Se ve mas bonito calladito./Quiet behavior looks nicer." "If one takes them somewherefor example, this meeting that I took my son tohe knows that he has to be respectful with the people there. Behave well. Stay calm."
never run around noisily in non- sanctioned situations	"Stay seated. Not go around jumping all over the place."