

Immigration at a young age may increase risk for later alcohol and drug problems

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Prior research has shown that Hispanic immigrants have lower rates of alcohol- and drug-related problems and disorders than their U.S.-born counterparts. Furthermore, Hispanic immigrants tend to have better health outcomes than U.S.-born Hispanics. However, a new study has found that immigration from Mexico to the U.S. before 14 years of age often results in risky alcohol- and drug-related behavior that mirrors U.S.-born Mexican Americans.

Results will be published in the July 2014 online-only issue of *Alcoholism: Clinical & Experimental Research* and are currently available at Early View.

"The tendency for foreign-born Hispanics – who we would expect to show poorer signs of health due to immigration and lifestyle disruptions such as not being able to locate familiar, healthy foods – to report more favorable health indicators than U.S.-born Hispanics has been known as the 'immigrant paradox,'" explained, Jennifer M. Reingle, assistant professor in the department of epidemiology, human genetics and environmental sciences at The University of Texas School of Public Health Dallas Regional Campus, part of The University of Texas Health Science Center at Houston (UTHealth). "Researchers believe that this paradox is associated with the deterioration of cultural and Hispanic family values – which are protective from most risk behaviors – during assimilation into U.S. culture."

"These findings may reflect either changes in norms related to alcohol

and drug use that occur with adaptation to the U.S. or a response to stresses associated with acculturation," added Sarah Zemore, senior scientist and associate director of the National Alcohol Research Center at the Alcohol Research Group. "I think the existing evidence more strongly supports the normative model than the stress model. For example, the normative model makes better sense of the fact that researchers repeatedly find stronger effects for nativity status and acculturation on alcohol and drug outcomes among women than men. For female [immigrants](#), it's clear that norms surrounding alcohol and drugs are typically much more restrictive in their countries of origin compared to the U.S.; for male immigrants, the differences are more nuanced. Thus, different effects across genders are consistent with a normative perspective."

Reingle, who is also the corresponding author for the study, noted that the sampling method – which compared Mexican Americans who live in cities near the U.S./Mexico border with Mexican Americans who live in cities much farther away – makes the study especially unique and different from other research.

"There are very important contextual differences between the U.S./Mexico border and large cities nationwide in the U.S. that have a high concentration of Mexican Americans," she said. "The U.S./Mexico border population is characterized by a high concentration of poverty, low education levels, drug trafficking, and even some cartel-related violence. Alcohol is easily accessible across the border, as the legal drinking age in Mexico is 18 [years,] and the drinking age is not enforced as strictly as it is in the U.S."

Reingle and her colleagues examined two samples of Mexican American adults: 1,307 adults residing along the U.S.-Mexico border; and 1,288 non-border adults, residing in Los Angeles (n=609), Houston (n=513), New York (n=86), Philadelphia (n=59), and Miami (n=21). The latter

group was interviewed as a part of the 2006 Hispanic Americans Baseline Alcohol Survey study. Statistical methods were used to examine how immigration age during adolescence is related to alcohol and drug use in adulthood.

"We found that U.S.-born Mexican Americans, compared to immigrants in general, were consistently at elevated risk for current alcohol use and had a greater drinking volume each week," said Reingle. "However, Mexican Americans who immigrated to the U.S. before age 12 were two to three times more likely than older immigrants, ages 25 and older, to use illicit drugs. We expected that immigration between the ages of 12 and 14 would be especially important based upon prior developmental research on adolescence and immigration. Early adolescence is a critical developmental time period, and individuals are fighting to form an individual identity. Further, young immigrants may have difficulty speaking English and may not 'fit in,' so they may develop a 'low social status' identity and have difficulty associating with a positive network of [friends](#)."

"The pattern of results for age of immigration is certainly provocative and exciting," added Zemore. "I agree with Dr. Reingle's conclusion that early socialization processes might be particularly important in the development of substance use patterns. Hispanic immigrants who attend schools in the U.S., and who learn about and experiment with alcohol and drugs there, may be especially likely to embark on problematic trajectories that mirror those of many of their American-born peers. However, it is not completely clear from the current data that there is a threshold effect at early adolescence for both alcohol and drug outcomes. The data are certainly suggestive of such a threshold for drug use, but more complicated for the alcohol outcomes. At present I would say we need more data."

"Researchers have known for decades that the Hispanic culture is

protective, even when a family or individual immigrates to the U.S.," said Reingle. "A Hispanic person, or a clinician working with Hispanics, should work to retain, or emphasize the retention of, Hispanic cultural norms within the family unit to minimize any risk factors that may result in substance use – speaking Spanish, maintain traditional eating habits, and parenting techniques are key. Also important is research focusing on the U.S./Mexico border, a large region that is difficult to study due to a large variety of populations, ranging from very poor immigrants living in colonias to faculty who work at universities. Our major contribution is that we were able to measure drug use and sub-clinical [alcohol](#) use, which may not meet the diagnostic criteria for abuse or dependence."

"This is important work because it helps us think about how to target messages to reduce the risk for substance use disorders among Latinos," said Zemore. "Further, I think the findings are exciting because they may be suggestive of general processes that also apply to other immigrant groups, as well as other health-related behaviors. That is, the team's findings may point to the possibility of sensitive periods for the acquisition of many behavior patterns, such as those related to smoking, eating, and exercise, among immigrant groups. I hope these findings inspire additional research on this possibility. A better understanding of cultural adaptation processes seems bound to improve the timing and content of interventions with immigrant populations, who often suffer worse health with increasing adaptation to the U.S."

Provided by Alcoholism: Clinical & Experimental Research

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