

Acculturative Stress, PTSD Symptoms and Suicide Behavior in Central American Refugees Living in the United States

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BACKGROUND

Over the past two decades, research has documented that acculturative stress is a risk factor for depression and suicide behavior in various ethnic-immigrant groups in the United States. Little research, however, has examined acculturative stress and mental health in Central American migrants despite the fact that well over 3 million Central American migrants live in the U.S. and that the scant research (e.g., Aron et al., 1991; Cervantes et al., 1989; Hovey 2000a) suggests that they are at severe risk for depression, PTSD and suicide due to both premigration factors (e.g., socio-political trauma; being "pushed" out of one's country) and postmigration factors (e.g., acculturative stressors such as discrimination, language inefficiency, and life status changes). Moreover, the previous research has focused predominantly on risk factors with little research focusing on the impact of coping skills in reducing the impact of acculturative stress on mental health.

PURPOSES AND HYPOTHESES

The purposes of the present study were to examine, in a community-based sample of adult Central American migrants in the U.S., the influence of acculturative stress on PTSD symptoms, depression and suicide behavior; the associations among PTSD symptoms, depression, and suicide behavior; and the moderating influence of coping competence on the relationship between acculturative stress and suicide behavior. The concept of coping competence (Schroder, 2004) is based on learned helplessness theory and it represents a dispositional resilience against negative mental health outcomes.

In specific, we expected that:

- •Greater acculturative stress would be significantly associated with greater levels of PTSD symptoms, depression, and suicide behavior.
- •PTSD symptoms, depression, and suicide behaviors would be strongly intercorrelated.
- •Behavioral disengagement (i.e., a lack of coping competence) would moderate the relationship between acculturative stress and suicide behavior—such that individuals with high acculturative stress and high behavioral disengagement would report greater levels of suicide behavior compared to individuals with high acculturative stress and lower behavioral disengagement (i.e., greater coping competence).

Intercorrelations among Variables

	Acculturative Stress	Depression Symptoms	PTSD Symptoms	Suicide Behavior
Behavioral Disengagement	.32***	.14*	.26***	.14*
Acculturative Stress		.41***	.38***	.22**
Depression Symptoms	.41***		.60***	.14*
PTSD Symptoms	.38***	.60***		.21**

Note: * $p \le .05$, ** $p \le .01$, *** $p \le .001$

METHODS

Participants

•Participants were 114 adult Central American immigrants from Guatemala, El Salvador, and Honduras. M age = 36 (SD = 13). Males = 56%; females = 44%.

Measures

•SAFE Scale: 26-item measure that assesses acculturative stress in social, attitudinal, familial, and environmental contexts, in addition to perceived discrimination towards immigrant populations (Hovey et al., 2000a, 2000b; Mena et al., 1987).

•<u>Center for Epidemiologic Studies Depression Scale</u>: 20-item scale that assesses level of depressive symptomatology Radloff, 1977).

•<u>Screen for Posttraumatic Stress Symptoms</u>: 17-item measure that assesses symptoms of Post Traumatic Stress Disorder (Carlson, 2004).

•<u>Behavioral Disengagement Subscale from the Brief Cope</u>: Used to measure lack of coping competence. Sample items include "I gave up trying to deal with it" and "I gave up the attempt to cope" (Carver, 1997).

•<u>Suicidal Behaviors Questionnaire-Revised</u>: Assesses history of suicide attempts, frequency of suicide ideation during past year, communication of suicide intent, and likelihood of future attempts (Osman et al., 2001).

Procedure

Participants were administered the questionnaires in community centers in Cincinnati, Ohio and Chicago, Illinois. The participants were given the choice of completing the measures in Spanish or English; a great majority chose the Spanish versions of the measures which had previously been back-translated through the double-translation procedure (Brislin et al., 1973). Participants were given gift cards for their participation.

RESULTS

Multiple Regression Analysis of PTSD

Predictor Variables	β	t	p
Age	.16	1.6	.06
Age Behavioral Disengagement	.20	1.9	.03
Acculturative Stress	.08	0.7	.24
Depression	.44	4.4	.00

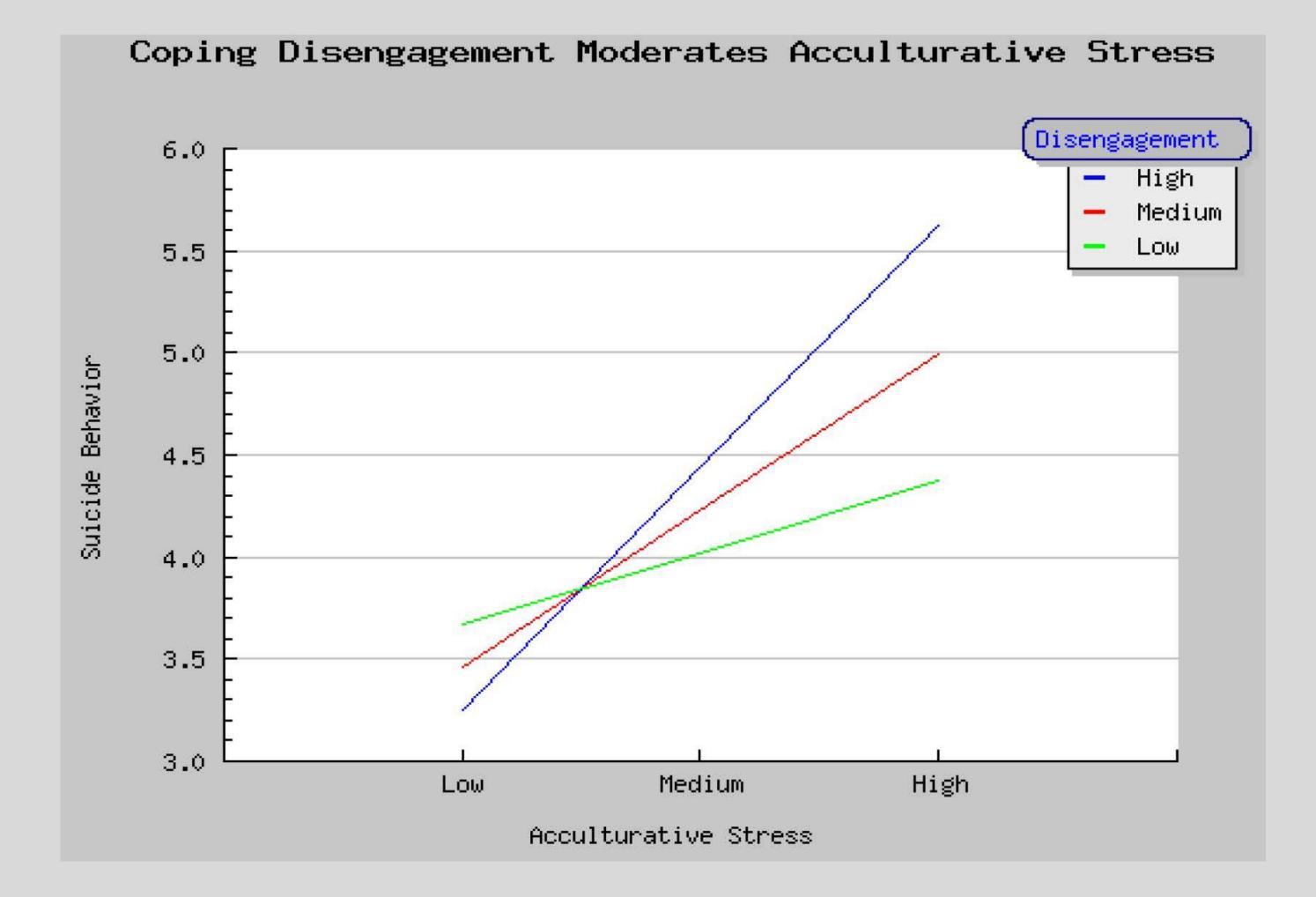
Note: Overall $R^2 = .31$

Multiple Regression Analysis of Suicide Behavior

Predictor Variables	β	t	P	
Age	10	86	.19	
Behavioral Disengagement	.04	0.4	.34	
Acculturative Stress	.27	2.3	.01	
Depression	.01	0.1	.48	
PTSD	.23	1.8	.04	

Note: Overall $R^2 = .15$

RESULTS CONTINUED



SUMMARY & CONCLUSIONS

- As expected, elevated acculturative stress was significantly associated with depression, PTSD symptoms, and suicide behavior; and depression, PTSD symptoms, and suicide behavior were significantly intercorrelated.
- Multiple regression analyses indicated that, while controlling for age, depression and behavioral disengagement were the strongest predictors of PTSD symptoms and PTSD symptoms and acculturative stress were the strongest predictors of suicide behaviors.
- As seen in the above diagram, a separate regression analysis indicated that behavioral disengagement interacted with acculturative stress (β =. 15, p = .09) in predicting suicide behavior. This findings suggests that coping competence (i.e., low behavioral disengagement) may serve as a protective factor against suicide behavior in Central American immigrants.
- The findings have applied implications. For example, clinicians working with individuals experiencing acculturative stress should help these individuals develop and maintain a sense of coping competence, which may in turn help protect them against negative mental health outcomes such as suicide behaviors.
- Future research should more fully examine possible coping strategies that may help buffer against deleterious influences on mental health in Central American migrants.
- Longitudinal research is needed to precisely examine the ongoing interplay between mental health risk and protective factors in Central American and other immigrant groups.

Please contact the corresponding author if you have questions about the Project or if you would like a copy of the presentation: joseph.hovey@utrgv.edu