

# Latino Fathers: Risk and Resiliency Factors Contributing to Mental Health

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### Abstract

Latino fathers are at risk for mental health issues for many reasons. In general men utilize support services less than women, even though studies have shown men experience mental health issues like anxiety, stress and depression just as much as women (Lee and Owens, 2007). It is widely known that immigrants face extra hardships than puts a strain on them and their families. For example the language barrier, acculturation, a new culture, poverty, low-paying jobs, education and many more all play a role in why Latino immigrants, illegal and legal face adversity once in the United States (Flores and Carey, 2000). It is this reason why Latino men are in need of more support whether it is from the government, non profits, or at a local level. This study took 19 Latino fathers from Chicago and interviewed them. Using grounded theory two main ideas emerged from the interviews. They are unique risk factors of Latino fathers and unique resiliency factors of Latino fathers. With the information we already know about Latinos and mental health and the ideas on risk and resiliency factors, human service providers can support the programs geared to this population. A literature review will provide information that is already available about Latinos, men and mental health. Finally, implications are offered for programs, practice and research for the future.

### Introduction

Latinos in the United States make up the largest and fastest growing minority population (R. Corona, pg1). For their large numbers, Latinos in the U.S. can have a strong influence on things that involve their community. Yet because they are one of the newer minority populations, Latinos have not been researched properly. Certainly in the last decade or so there has been an increase in research on Latinos but there is a long time before researchers catch up to the research of other populations. It is difficult to study Latinos in the United States for many reasons. Some are illegal and they are afraid of coming forth to answer any questions. Some Latinos do not speak English and others do not speak Spanish, this diversity can be associated with timing of immigration or generation status (G status). This is another difficult characteristic of Latinos as well, different times of immigration equals to different experiences and stories. Researchers have to be willing to look at all the different types of Latinos

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there are. Lastly the word Latino itself is very vague, this population is one of the most diverse group of people. Latinos can be African American, Caucasian and any shade in between. Some Latinos are from tropical Islands while others are from snow covered mountains. There are indigenous Latinos who speak other native languages and there are Meztizo Latinos who are a mix of Spanish blood and native blood. It is difficult to group Latinos into one category because each subgroup, for example, El Salvadorians, and Dominicans, are extremely different in most aspects of their lives. Yet these groups do share several commonalities like language, food, culture, values, religion, dance, music, and history. Once a Latino enters into the United States they all face certain hardships like poverty, not knowing the culture, lower education, violence, prejudice, and not knowing the language, all makes the immigration experience a difficult one.

### **Purpose**

The purpose of this study is to contribute to the research on Latino fathers and mental health and to bring awareness to this topic. This study is meant to find what are the causes of mental health problems in Latino fathers, what types of mental health issues are occurring and what can be done to support these fathers.

### **Significance of the Research**

This research is significant because the population being discussed is at risk for mental health issues meaning there is an urgency to find what is causing the problem, and how can we prevent them from occurring. Yet no one is talking to these fathers and hearing their experiences to see where the problem is rooted. Moreover, a healthy father may mean a healthier family. For example if he is not depressed and knows how to handle his stress then he may be able to provide for his family emotionally. On the other hand if a father is too upset to even play with his children or be there for them this may have long term negative effects on his offspring and family. Research in this field is vital to the services that are already available and those programs that have not been created yet. Human services providers who deal with Latino fathers also can use this information to change their services to better cater to the needs of the men. They can educate the men and their families on how to support one another. The human services providers can also advocate for Latino fathers, the more information there is available the more support they will get and in the end the more fathers can prevent any crisis before it occurs.

#### **RESEARCH QUESTION**

What are the risk and resiliency factors that influence the mental health of Latino fathers?

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## **Delimitations of Research**

The research is not looking into the mental health of Latino women and children. It is not solely concentrating on one type of Latino, for example this study is not examining the mental health of Latino fathers who were only born in the United States. This research is not examining one age range of Latino fathers; it is looking at various types.

## **Definitions**

To better understand this study the definitions of important words are included. Co-parenting is the relationship between the mother and father of the child, and whether or not they work together to parent their offspring. Familismo is describing how Latinos are very family orientated; it is a characteristic of the population. G1 is describing an immigrant who came to the United States after the age of 12, meaning most of their socialization occurred in their country of origin. G1.5 is someone who came to the U.S. before the age of 12, saying that they have had some socialization in the U.S. G2 is referring to people who were born in the states and all their socialization occurred in the U.S.

## **Literature Review**

The literature on men's health and mental health is not as extensive as the research done on women's health. There are many reasons why this is true, Christina Lee and R. Glynn Owens wrote in their 2002 book entitled *The Psychology of Men's Health* that men are less likely than women to make use of health care and screening services and are slower to acknowledge symptoms of illness (pg14). Maybe it is because men are, "less likely than women to express an interest in making health related lifestyle changes (Lee and Owens, 2002)" Another reason for this could be because, "stigma is attached to help seeking for men as well as counseling theories and methods are more appropriate for traditionally feminine than for traditionally masculine individuals (Levant, 1997)." For whatever reasons men are in need of more services from the health departments, especially when it comes to depression. Sam Cochran and Fredric Rabinowitz wrote in their 2002 book, *Men and Depression: Clinical and Empirical Perspectives* that men suffer from and are diagnosed with depression about half as frequently as women. Clinical experiences soon bears out the reality that men do get depressed, many suffer from longstanding and unremitting depression (pg.1)." Needless to say many men also face traumatic situations that can affect their mental health and even parenting skills. T. Real spoke about trauma and the consequences with men in his 1997 book called *I don't want to talk about it: Overcoming the legacy of male depression*, "active trauma involves obvious and dramatic violations of trust such as physical violence, or a death of a parent, passive trauma situations involve subtle breaches of trust such as a parent not meeting a child's need to be loved, seen or valued. Although not as obvious, passive trauma can have a profound effect." Men who have been through traumatic experiences sometimes

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express their feelings in different ways, one of them being aggressive behavior and addictive behaviors. “Another form of masking depressive states is mood alteration through alcohol, drugs or other addictive activities, we know that men suffer from alcohol and drugs abuse in significantly greater numbers than women (Cochran and Rabinowitz, 2000). It is known that men commit suicide more than women, there are many explanations for this, one being that, “lack of communication of feelings, loneliness, isolation, and a resulting inability to elicit sympathetic responses from others may be contributing factors to the disproportionate suicide rate (Toomer, 1980).”

Now Latino men also have their own characteristics or stereotypes about them. For example Joseph M. Cervantes said in his 2004 book entitled *Mexican-Americans: A prospective analysis and counseling paradigm* that the, “defining characteristic among Latino men based on some combination of myth, stereotype or anthropological observation had been the label of macho or machismo, this description makes reference to a culturally expected and stylized set of actions from Latino men with respect to hypersexual and aggressive behaviors.” Pena (1991) said that, “the concept of machismo has been identified in several studies as a contributing factor to heavy alcohol consumption and its subsequent destructive consequences include domestic violence and child abuse.”

Furthermore Latinos in general face many hardships when first coming to the United States. Gonzalez (2000) writes, “...mental health problems of Hispanics living in poverty and undocumented Hispanic immigrants are often exacerbated by socioeconomic stressors, racism, and political oppression. Effective mental health treatment for the population must encompass case advocacy, community outreach and the mediating of complex social systems.” Moreover acculturative stress is yet another challenging hurdle many immigrant Latinos must face. Miranda and Matheny (2000) stated that, “acculturative stress experienced by Latinos relates to the efficacy of stress-coping resources, degree of acculturation, cohesion of the family, language use and length of residence in the United States.” Acculturative stress can greatly impact a Latinos life, for instance Smart and Smart (1995) wrote that acculturative stress can lead to, “decreased self-efficacy expectations, decreased career self-efficacy, depression, suicidal ideation, low social interest...yet the family environment tends to buffer Latino from the stress.” Besides stress Latinos are at risk for other difficulties such as, “poverty (Prelow and Loukas, 2003), low educational attainment (Prelow and Loukas, 2003), mental health concerns (McGowan, 1988), substance abuse (Hernandez and Lucero, 1996), ill health and exposure to violence (Peacock, McClure and Agars, 2003).

It is quit evident that Latino fathers are in need of extra mental health support. Furthermore the research on this population is little yet the need is great especially since Latinos are such an influential population in the United States. It seems that Latinos are at risk for many circumstances and if not addressed properly, generations and generations of Latino families may be negatively affected by the consequences.

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## **Research Design and Methodology**

The purpose of this study is to find what unique factors influence the mental health of Latino fathers and what can be done to provide better support services for the men and their families. Furthermore it is to contribute to the research that already exists on Latino fathers and mental health. The research question is what are the risk and resiliency factors that influence the mental health of Latino fathers?

## **Data Collection and Data Sources**

In 2004 total of 19 interviews were conducted by Dr. Kevin Roy and his two staff members, one female and one male who were both bilingual. Originally the interviews were part of a greater study that included fathers of all races. But for the purpose of this study only the interviews on Latino fathers were considered. Kevin or the staff members made in home visits to interview the participant. The semi structured life story interviews took place in the homes of the Latino fathers in Chicago, Illinois. Semi structured life story interviews meant that the interviewer had probing questions but the point was to allow the father to speak about his entire life in different stages. For instance, the interviewer asked the father to speak about his childhood, adolescence and adulthood. Most of the fathers lived in a town in Chicago called Pilsen, this is because the fathers were recruited from *El Valor*, a head start program for children with low income families, it first started in 1973 to support the fast growing Latino community in Pilsen (2003, El valor). All of the 19 men interviewed had at least one child, for this was a requirement in order to be interviewed. The interviews were conducted in either language to help make the father feel more comfortable, and then later they were transcribed to English. Each interview lasted around one to two hours long.

## **Data Analysis and Data Quality**

This study uses a qualitative approach to examine the interviews and discuss the information. This was the best approach because I was interested in the men's experiences rather than the cause and effect. Also this is an exploratory study because the topic being examined is fairly uncharted territory, the literature review covered Latinos, men and mental health.

This research utilized grounded theory to review the interviews. Grounded theory is comprised of three types of coding, open, axial and selective coding. Open coding was conducted by first reading through each of the 19 interviews and underlining ideas, and themes that I saw reoccurring. Axial coding was more specific, it was reading through the interviews a second time but going through and highlighting main findings and other information relative to them. At the end of this stage I had each interviewed color coded for different themes and I began to see a pattern and an over all idea form. Selective coding was looking at the interviews and asking myself what did all the highlighted green say about Latino fathers? What

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did all the highlighted pink say about Latino fathers? I looked at this information with a mental health lens.

There are more than one ways of looking at this information and using grounded theory has its advantages and disadvantages. Some advantages of utilizing grounded theory are I felt very comfortable with the information because of the fact that I had reviewed it so many times. I was able to better understand the fathers and their personal stories. A disadvantage of using grounded theory is that I was unable to get another perspective of the information. Every theory has a unique aspect to it and if given more time I could be able to compare other theories and see which ones fit better or work with the population better than grounded theory. Regardless, grounded theory suited this study and the time frame that was allotted.

### **Strategies for Minimizing Bias and Error**

I had several ways for minimizing bias and error in this study. One of them being that I used triangulation, which is having a team evaluate and debrief the findings with me. I had three mentors and another student researcher who was also using the same data source. As a team we reviewed the interviews for our topics and findings, we talked about the ideas that emerged from the data, and we spoke about how to structure this information into a research paper. I was in consistent communication with my team and they were in consistent communication with me. We met once if not twice a week to update ourselves on our progress. I was able to have mentors who were very diligent and corrected my paper, presentation poster and who prepared me to defend the research I had done.

### **Ethical Considerations**

There are some ethical considerations to reflect on, for example the interviews did receive the permission from an I.R.B. which means it fulfilled a certain level of requirements from the university. The Latino fathers gave permission to Dr. Kevin Roy to be interviewed, everything the father talked about was voluntarily said and there was no pressure to continue with the interview if the person felt uncomfortable. Again, the interviews were done in Spanish or English to allow each father to speak in whatever language they feel most comfortable in.

### **Limitations**

This study had several limitations; one being that the interviews were not conducted by my self. This made it more difficult to interpret the interviews. Especially when some of the men spoke in Spanish and then the interview was transcribed into English. What this means is that some of the true meanings of the interview was lost in the translation. The actual interviews themselves were at times complicated to read because the person interviewing the fathers could not understand what they were saying. There were many reasons why the interviewer

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could not understand the interviewee, some were there was back ground noise, the man spoke too softly, the interviewer could not comprehend because of the accent, and lastly in some of the interviews the tape recorder cut of, abruptly ending the conversation. For these reason I was forced to interpret or speculate what the father meant to say or what he was going to say.

Furthermore the study is not a representative sample of all Latinos in the United States. Latinos are so diverse and this makes for difficult research because getting an appropriate sample size of each type of Latino is complex. The sample included in this study is mostly Mexican fathers from Pilson, Chicago which is a very specific sample, when the study is trying to incorporate all Latino fathers. Also fathers from one state have a completely different experience from fathers at another state. Again this study is looking into the lives of fathers from Pilson, the outcomes could vary if it had taken place in Texas or New York.

Another limitation of this study is that because of the time constraint I was unable to further my research on topics that related to this study. For example the timing of immigration or G status is very important yet I was unable to dive deeper into the meaning and literature to see the connection with mental health. Once research on Latino fathers and mental health has advanced then maybe scholars can figure out the differences in each generation status. For this study and the amount of time I had allotted which was six weeks, I was unable to concentrate so much on details but more on the overall needs and concerns. Time was limited and all the necessary topics had to be covered before I could go back and elaborate on other ideas.

## **Reflexology**

In order to understand this study, the reader should note the reflexology of the writer; this is the personal background of the author to better understand how the paper is written. I am 21 years old born and raised in Wheaton, Maryland. I am Latina, my father is from El Salvador and my mother is from Mexico. I am a senior Family Science major at the University of Maryland, College Park. I am a born helper and I exemplify this through my activities, future academic and career goals. For example I volunteer at the Montgomery County, Abused Persons Program (APP). I participate in community services through different organizations that I am a member of like, Lambda Theta Alpha Latin Sorority Incorporated, Phi Upsilon Omicron Family Science Honors Society, Latino Student Union, and the Pan Hellenic Counsel. All the services are geared toward minority populations in the D.C., Maryland and Virginia metropolitan area, specifically the Latino community. My future career goals are to become an LCSW-C which stands for license certified social worker clinical. With this certification I will be able to practice therapy and social work. I would like to work for the Latino community in the metropolitan area. A long term goal I have is to open up my own non profit geared toward supporting Latino families in need.

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**Findings, Recommendations and Conclusions**

<b>Age</b>	
18-25 yrs	n=4 (21%)
26-34 yrs	n=7 (37%)
35+ yrs	n=8 (42%)
<b>Relationship Status</b>	
Married, residential	n=12 (63%)
Unmarried, transitory	n=7 (31%)
<b>Race/Ethnicity</b>	
Mexican or Mexican-American	n=17 (89%)
Puerto Rican	n=2 (11%)
<b>Children</b>	
Average #/ father	2 children
Biological only	n=18 (95%)

<b>Generation</b>	
1st	n=9 (47%)
1.5 (<age 12)	n=4 (21%)
2nd	n=6 (32%)
<b>Employment</b>	
Full-time	n=13 (68%)
Part-time	n=3 (16%)
Unemployed	n=3 (16%)
<b>College</b>	
1 year or more	n=8 (42%)
< than 1 year	n=3 (16%)
No secondary education	n=8 (42%)



## Demographics

The above chart looks at the demographics of the 19 interviews. The men's ages range from 18 to 35 plus years. The majority of the men are married and are also Mexican. They have an average of two children and the bulk of the Latino fathers are first generation. Most of the men have full time jobs and most of the men interviewed had one or more year in college or no secondary education at all.

### *Unique Risk Factors that influence the Mental Health of Latino Fathers*

This theme is about risk, which means different things, but for the use of this study, risk is anything that can put the father or family at a disadvantage. For example the majority of the fathers are immigrants from Mexico. This is a risk because they have to learn how to speak English, get use to the American culture and work long hours for little pay, all while still having a family. Another risky topic is working; most of the fathers being interviewed have been jumping from job to job. Not having a steady income is dangerous especially when he is the main provider for his family. This puts an enormous amount of stress on him to make sure he is coming up with the bread and butter.

Each father had their own experience when it came to having a role model or not. It was harder for the father being interviewed when he did not have someone to look up to, especially a male figure. For example when asked who taught you to be a father, this particular participant answered, "I don't know, I guess just my own experiences, my dad he lived with us all my life but he was doing some not so good stuff, drank a lot, you know did drugs here and there. And I guess that's the only thing that affected me is that I used to see my dad...when I was seven he put a gun to my mom's head, we were all there...hugging my mom telling him to stop."

Alcohol and drugs was a topic that some fathers spoke about in their interviews. Whether it was having a parent/family member who was addicted, it was prevalent in their neighborhoods or they themselves were addicted to drinking or using drugs. Either way it was a topic frequently discussed.

Most of the fathers had issues with gangs, again it had several different meanings but gangs and gangbanging was a common problem. Some fathers use to be in gangs, have friends who were in them, or just hung out with a gang. Other fathers were never affiliated but did have them in their neighborhoods and could speak about the huge threat they were to the neighborhood and the children. There were some significant stories of how certain fathers got shot. I was surprised to see how many fathers actually got shot, some more than once. Here is one personal story, "the guys that came from Mexico suck together and we formed a gang, we started fighting and one fight got to another one, next thing I know I have to leave school because of too many fights, I had to start working, I was 17, it was my junior year, I didn't get my GED." The quote shows that for some, gangs were the only form of protection especially for immigrants.

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Crime was another reoccurring theme in the interviews. A couple of fathers had a history or record of committing a criminal act. Some never were involved but they did speak about crime in their neighborhoods. In addition to crime, they also talked about how the police force in their neighborhoods was not enough to scare off the gangs, crime and violence.

Many fathers had a history of moving around, whether it is from Mexico to the United States, state to state or neighborhood to neighborhood, there was a significant trend in fathers consistently moving. There were many reasons why some fathers were not settling down in one place. A couple of the main reasons were, dangerous and unsafe neighborhood for their families, more affordable housing, moved to where there was work, family, better schools, retirement. Living in several different places throughout a lifetime is difficult and can be stressful under certain circumstances. The unstableness can create strain on a family and especially on the children. The children have to go to different schools, make new friends and familiarize themselves with new surroundings. Parents are looking for new jobs, trying to find someone to provide daycare, and trying to fit in into their new location. An example of this occurrence is Augusto, he has a wife and two daughters. This is what he has to say about why he had moved around several times, “gangs...so that’s why we are just jumping from house to house. Well, we’ve moved three times, in the same area, trying to check that there is no gangs ...but still in the same neighborhood. This is one of the reasons that we just moved (from) one place to another.” Some of the fathers are moving around because they are the main providers for their families. This title and responsibility of being a provider has forced them to look for jobs outside of Chicago or at least outside of their city.

### ***Unique Resiliency Factors that Influence the Mental Health of Latino Fathers***

There were many reoccurring topics that influenced the way each Latino father parented their child/children. One of the questions asked was who taught you to be father and who was your role model? The responses were very mixed with the majority of the Latino fathers all wanting one main goal; to provide a good life for their family and children. Some fathers had parents to look up to but they may not have been there emotionally, for example Carlos says “the relationship with my father there was no communication, no involvement with him, uh no family time, mostly he was (spending) most of the time working so he didn’t have that much time with us.” This has influenced the way he parents his son, it is not a surprise when he says “my attention is more to my son all the time, so he gets all the attention, in other words spoiled.” Then there are the fathers that did have a position role model, whether it was their mother, father, brother, uncle or any one else. These Latino fathers have a different outlook or definition of what it means to be a father. This has an impact on how they treat their children. For example Martin has two daughters and when asked about his role models he said “I was with my brothers (and) we were very attached to my grandfather, he was patient with us,

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I was spending time with him, so he would always talk with me about what (not) to do and all (those) things.” Martin’s relationship with his children and wife is strong, healthy and it is partially with the help of his role models that he knows how to parent so successfully.

Another strong factor that has an influence in how these Latino men raise their children is the Latino culture. Many men spoke about how they want their children to learn how to speak Spanish. This quote touches upon some Latin traditions, like passing on the Spanish culture and having a relative babysit. Antonio says “Well, my mother watches him while I go to work or go to school, she’s been the babysitter from the moment he was born cuz I didn’t want to put him in a day care because I want him to speak Spanish. My mom speaks nothing but Spanish to him and at daycare they’re more likely to speak nothing but English to him.” Language is a resilient factor because being bilingual opens doors to more opportunities while still maintaining that Latin tradition and culture.

An important aspect of the Latino culture is familismo which illustrates how family orientated Latinos are, this helps families stay unified. This is beneficial for many reasons, the father feels support from his relatives, he can feel safe especially if he is a G1 or G1.5 father, and they will always help out a family member in need. Cultural influences are important for Latinos and this is very evident through each interview.

Lastly every single father wanted a better life for their children and family, no exceptions. The fathers were adamant about working hard to provide for their children and being a “good father”. They talked about being there emotionally and physically for their families.

“She never keeps me away from my kids...she would never take them away from me...I would never do that to her either.” This is the over-all attitude that the 19 Latino fathers vocalized when asked about the relationship with their baby’s mother. Not one father said that the baby’s mother does not allow him to visit his children. The fathers that were either married or living with the baby’s mother has similar feelings. The mothers were encouraging their husbands/partners/baby’s fathers to spend more quality time with their children. For instance Sergio is married with a three year old son and when asked if his wife encourages him to be involved with his child he answers, “ yeah, she encourages me like uh...play sports, and she usually tells me you gotta spend more time with him, spend more time (on the) playground, get out of work, pick him up from school, and have him all day. Everyday is like that.” The fathers were very responsive to the encouragement; many of them agreed that they liked how their partner pushed them to develop a stronger relationship with their child/children. Although the relatives of the mother were not always as supportive, in two cases the father of the baby’s mother did not have a good relationship with her baby’s father. In those cases the Latino father being interviewed did say that because of the tension and feelings they stayed away from that specific in-law, even as far as saying they were not allowed in side the house. This naturally discouraged the fathers from visiting that side of the family

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and it may have discouraged the father from taking his child/children to go visit their relatives.

The parenting was split between the mother and father; most of the fathers were the bread winners in the families, a few mothers also worked. The fathers felt that it was their duty to provide financially even if the baby's mother was working.

### **Implications for Program and Practice**

After reviewing the findings, there are implications for programs and practice. The human service providers should be culturally competent and aware of the diversity that comes along with Latinos. A human service provider is making a big mistake by assuming all Latinos have similar backgrounds therefore they can approach them all the same. In fact it is the exact opposite, it is essential that a provider be able to know the difference between Mexicans, Puerto Ricans, and Costa Ricans. That is they should know the difference between G1, G1.5 and G2 Latinos because like the research has shown each status has different experiences. They should also be familiar with the gender roles associated with Latino men and women. Traditional and modern views among parents are significantly distinct, for this reason providers must be able to talk about their client's views and work with them to still provide the initial services.

Most of the fathers in the interviews were the main providers for their children and/or families, many of them work long hours a week. This is an example of just how much one of the fathers is working, "(I was) working 80 hours a week for two or three years...(I would) spend two hours or three hours (with my child)." In order for them to be able to participate in the services being provided, the hours of operation should be very flexible to cater to the father's availability.

I also noticed that a couple fathers said they did not drive for whatever reason, this is important because location can deter a father from attending an event. Especially for families living in the city were they rely on public transportation to get around. This quote shows why this father is not driving, "I don't have a license cause I don't drive, I've never driven, basically it's because of all these accidents that I'm there to see, since I'm always on my feet walking or riding the bus, you always get to see a lot of things, I'm afraid of other drivers."

Being that certain fathers spoke about being single fathers and its difficulties, another implication is to have some form of day care or childcare for when the father is receiving services. Once the father is receiving services, it would help tremendously if the providers knew basic Spanish; this will help the communication for both parties.

Another important aspect to consider is the promotion of services available for the Latino fathers. The immigration status may confuse fathers who are able to receive services, in order to prevent this government services and non profits should highly promote their services, especially in English and Spanish and in areas were the ads can reach the targeted populations.

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## Implications for Research

Research also needs to be furthered in the area of mental health and Latino fathers. Some questions to start with are what are the mental health needs of Latino fathers? How does depression and stress in Latino fathers affect their parenting skills? What are some mental health factors that influence the parenting styles of Latino fathers? These questions are just starting points for researchers to take into consideration while conducting their future studies. It would be ideal to see more qualitative and quantitative research on the mental health of Latino fathers.

## Discussion

Concentrating on the positive and negative aspects of Latino fathers and families is a different way to approach the mental health concerns of Latino fathers. For example, “the Mexican cultural value of collectivism and communal orientation has the potential to serve as a protective factor in mitigating distress (Cabrera and Padilla, (2004).” As noted in the literature review men have a very different psychology than women and theirs is more unknown than women’s. It is harder to study men’s mental health when they are less likely to seek help for symptoms. Put on top of that the fact that these men are Latinos, makes for even more at risk health. Latino men’s mental health is dangerous if left untouched because they are, “the fastest growing group in the United States, thus it is imperative that social workers and other mental health practitioners be knowledgeable about the current literature on how to effectively serve this population (Furman, Negi, Iwamoto, Rowan, Shukraft, 2009).” This is why more qualitative and quantitative research must be done on this group. It is important to make a distinction between when the Latino got to the United States or if they were born in the U.S. because this factor seems to make a big difference in how mentally stable a father is.

## Conclusion

The main idea of this study is to bring more awareness and support to Latino father’s mental health concerns. It is clear that this specific population is at risk. Yet they influence their children, spouses and families which make Latino fathers a population that is imperatively in need of mental health support through organizations, therapy, advocacy, research and programming. This study is shedding light to the resiliency factors to support these methods of help intended for Latino fathers.

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