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FACTORS ASSOCIATED WITH ACCULTURATIVE STRESS AND DEPRESSIVE SYMPTOMATOLOGY AMONG MARRIED MEXICAN IMMIGRANT WOMEN

V. Nelly Salgado de Snyder
University of California, Los Angeles

The purpose of the present study was to describe levels of acculturative stress and individual stressors and their relationship to levels of depressive symptomatology among young Mexican immigrant women. The mean age of the respondents was 25.7 years with a mean of 9.4 years of education. Their age at migration was 18.5 years and their average length of stay in the United States was 7.5 years. Women who in the last three months experienced discrimination, sex-role conflicts, and concern about starting a family in this country had significantly higher (over 16) CES-D scores than women who did not report experiencing those situations. The overall findings suggest that this sample of Mexican women immigrants as a group are at risk for the development of psychological problems.

Empirical studies conducted in Mexico confirm the fact that women are assigned very traditional sex roles in Mexico (e.g., Elu de Leñero, 1975; Rodriguez de Arizmendi, Almeida, Mercado, & Rivero-Weber, 1981). In that country, the values and sex roles of women differ significantly from

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Requests for reprints should be sent to Nelly Salgado de Snyder, Spanish Speaking Mental Health Research Center; Department of Psychology, University of California, Los Angeles, CA 90024-1563.

those assigned to men. Moreover, the improvement of educational and occupational opportunities for women in Mexico has not yet had an impact on their role expectations. Rodriguez de Arizmendi et al. (1981) indicated that Mexican women believe that their most important role is at home. Further, Mexican women tend to assign rigid and traditional sex roles that indicate passivity to themselves, but allot active roles to men. Moreover, the participation of the Mexican woman in decisionmaking processes, even when the issues to be decided upon are of major concern to her, has been extremely limited (Elu de Leñero, 1975).

All this indicates that the small but significant social changes (in Mexican laws, family organization, and educational and occupational institutions) that allow women to advance and change their condition of inequality with respect to men have not been sufficient to produce a notable reduction of the often self-imposed psychosocial barriers faced by Mexican women. Thus Mexican women have not participated in the women's movement for sex-role equality to the extent that European and Anglo-American women have (Rodriguez de Arizmendi et al., 1981).

Mexican women who migrate to the United States bring with them their culture, traditions, and values that gradually change in the process of contact, conflict, and accommodation to the host culture. It has been suggested that Mexicans who migrate autonomously and voluntarily are a self-selected group of people in that they are ambitious and productive (Buriel, 1984). Research indicates that Mexican immigrants to the United States exhibit a stronger need for achievement and a stronger propensity to plan for the future. They are also less fatalistic, less submissive, and more authoritarian (Zarrugh, 1974). It has been further reported (Craig, 1971) that those traits are enhanced by experiences in the United States. These characteristics are clearly not typical of women in the traditional Mexican culture. Thus, Mexican women who immigrate would seem to be selected for *psychological strength*. Further, women who themselves make the final decision to migrate would seem to be less traditional than those women who stay behind or those who immigrate as companions to their husbands or as part of a family.

Because of geographical location, California has the nation's largest concentration of legal and illegal immigrants from Mexico. In the decade of 1970-1980, 44.3% of those who migrated from Mexico between the ages of 20-29 years were women, with a mean of 6.9 years of education (Portes & Bach, 1985; Tienda, Jensen, & Bach, 1984). Although the accuracy of migration figures from Mexico is questionable, Chaney (1985) has suggested that Hispanic women play a very active, instrumental role in the migration process. Often, if the adult female does not want to migrate the family will probably not go, and the male is left with two alternatives, either to leave his family behind or to stay and support his family as best as he can. Although Chaney's (1985) proposition is certainly interesting, no data are available to confirm such a contention. Furthermore, a review of recent

studies on migration from Mexico (e.g., Winnie, 1984) indicates that females who migrate to the United States are likely to migrate as members of a whole family together, or as dependents of males who have already established permanent residency.

The literature on mental health and migration strongly suggests that immigration in and of itself is a stressful situation for the migrant. Furthermore, recent studies (Padilla, Lindholm, Alvarez, & Wagatsuma, 1985) have indicated that individuals who migrate after the age of 14 (late immigrants) experience higher levels of stress than those who migrate prior to age 14 (early immigrants). Such studies emphasize the importance of the cultural context in which childhood and early adolescent socialization takes place as a determinant of successful adaptation/integration to a new environment. Specifically, among late immigrants, the combination of self-imposed pressure to succeed in the new country and lack of communication and other skills (in addition to having left behind family, friends, and acquaintances) provides a high-risk situation for the development of psychosocial conflicts. In addition, given that desirable and undesirable events may be identified as contributing to stress, it can be assumed that the level of negative stress would seem to be highest among those immigrants for whom immigration represented an undesirable change.

Although no studies have directly focused on the immigrant's own perception of the decision to migrate and its impact on his/her well-being, two studies (Dane, 1980; Melville, 1978) indicated that immigrant women were often pressured to leave their native countries following someone else's decision to migrate. Furthermore, some women played no role in the decision process to migrate and did not want to immigrate in the first place, nor did they wish to remain in the United States after migration.

Immigration and the process of adaptation to the host culture can be considered important life event changes. A number of reported studies have consistently indicated a correlation between life events, stress, and psychological and physical disturbances (e.g., Holmes & Rahe, 1967; Warheit, 1979). Although the definitions of stress are rather numerous, stress is generally conceptualized as an altered state of an organism produced by agents in the psychological, social, cultural, and/or physical environment. It is further assumed that stress produces deleterious effects on the physical and/or mental well-being of the individual (Warheit, 1979).

It has been suggested that among the global indicators of stress, depression is the most appropriate to study (Pearlin, Meneghan, Lieberman, & Fullan, 1981). The general literature on depression has consistently reported important sex differences in depression and depressive symptomatology in the general population. Among females there are higher rates of depression and depressive symptomatology than among males (e.g., Gove Tudor, 1973; Weissman & Klerman, 1977). According to these reviews, any hypotheses have been proposed to explain the sex differential in rates

of depression. Some of these involve difficulties associated with the feminine role in modern Western society, negative self-image, higher intensity of stressful life events, genetic transmission of depression, premenstrual tension, and other endocrinological factors (Weissman & Paykel, 1974). Overall, the studies reviewed by Gove and Tudor (1973) and Weissman and Klerman (1977) indicated that the male-female difference in rates of depression are real and reflect differences in the life conditions that are experienced by men and women.

Depression is perhaps the single most researched mental health outcome among Mexican Americans. Several large-scale surveys have been conducted to analyze the prevalence of psychological distress and depression among Mexican Americans (e.g., Quesada, Spears, & Ramos, 1978; Roberts & Roberts, 1982). Findings of such studies consistently revealed that psychological impairment as measured by self-reports of depressive symptomatology among Mexican Americans is as high or higher than in other groups. Furthermore, Mexican American women reported more depressive symptoms than men even after controlling for the effects of age, education, and income (Roberts & Roberts 1982). More recently Vega, Kolody, Valle, and Hough (1986) reported that the most salient finding of their large cross-sectional survey of 1,800 Mexican immigrant women was the very high prevalence of symptoms of depression, with 41.5% of the respondents reaching CES-D (Center for Epidemiologic Studies Depression scale, Radloff, 1977) scores of 16 or more which constitutes the scale's cut-off for determining caseness. The caseness rate of the group of Mexican immigrant women studied by Vega is twice the average reported in previous community studies.

The purpose of the present study was first to explore and describe levels of acculturative stress and depressive symptomatology in a sample of Mexican late immigrant women (immigrated after age 14). Another purpose was to explore choice in the decision to migrate, motives for migration, situations associated with the migration decision, and plans for the future. A final purpose was to identify the specific stressful situations related to the migration and acculturation processes and to explore the relationship of such stressors with levels of depressive symptomatology.

METHOD

Subjects

Respondents for this study were 140 Mexican immigrant women between the ages of 17 and 49 ($M = 25.7$), married for the first time in Los Angeles county during 1984-85. All subjects were late immigrants; that is, they were born in Mexico and raised in that country until they were at least 14 years old, when immigration to the United States took place. Most re-

spondents (87.1%) were Catholic; the rest (12.8%) reported other religious affiliations such as Protestant, Baptist, and Jehovah's Witness. The group's mean age at migration was 18.3 years. The average length of stay in this country was 7.5 years. Twenty percent of the respondents reported speaking only Spanish and no English at all; 58.7% indicated that they had speaking knowledge of at least some English; and 21.4% stated that they spoke good English and considered themselves bilingual.

Regarding employment status, 50% of the respondents were housewives and 50% worked outside the home mostly in skilled (33%) and semi-skilled (59%) occupations. As for the subjects' level of education, the range was from no education at all to 20 years, with a group mean of 9.4 years. It is interesting to note that although the respondents had been recently married for the first time, 50% of them had children ranging in age from 2 months to 19 years, while another 50% were childless.

Sampling

Potential subjects for the study were obtained from the files of the 1984 and 1985 marriage licenses of the County of Los Angeles. The sampling procedure was conducted in three stages. The first stage involved examining an alphabetized (by last name) computer printout that contained only basic data extracted from the most recently issued marriage licenses. This list is issued by the Los Angeles County Office of Public Records for internal office use. During this first stage a preliminary group of potential subjects was selected who met the following criteria: females, bearing a Spanish surname, and born in Mexico not earlier than 1950.

The second sampling stage involved examining the marriage licenses of potential subjects who met the first set of criteria in order to select only those who further met the next set of criteria: Both parents of the subject were born in Mexico or in the Southwest United States and bear a Spanish surname; and this marriage was the first for the potential respondent. Once these women were identified and the information recorded, the following additional information was obtained from the marriage certificates: (a) age of both spouses, (b) education and occupation, and (c) complete name and address of each marriage partner. This ended the record-screening stage.

The third and final sampling stage was conducted when the first contact with the respondents took place. At the time, only those females who immigrated at age 14 or older were asked to participate in the study.

The sampling procedure used in this study was selected because it allowed the researcher to perform as many screenings of potential subjects as necessary, particularly when subjects of the target group of study had to meet demographic criteria such as national origin of self and both parents, age, and previous marriages.

Instruments

A telephone survey was used for data collection, designed in Spanish since according to the selection criteria, Spanish was the respondents' primary language. The questionnaire assessed circumstances of the immigration experience, loyalty toward Mexican culture, self-esteem, social support networks, coping strategies, acculturative stress, depressive symptomatology, general satisfaction, and demographic information. The data collected in the original study were lengthy and complex (Salgado de Snyder, 1986). This article focuses only on the relationship of acculturative stress, social support and depressive symptomatology among these women.

Acculturative stress was conceptualized as a set of potentially stressful situations that an immigrant faces in an unfamiliar culture and environment. The acculturative stress scale was composed of 12 items derived from the original 172-item Latin American Stress-Inventory (LAS-I) that is currently being developed by the research group of the Spanish Speaking Mental Health Research Center (Cervantes, Padilla, & Salgado de Snyder, 1987). The 12 items assessed potential stressors in the familial, marital, social, financial, and environmental domains. Each item asked whether the respondent had experienced the potential stressful situation in the last three months. If the answer was affirmative, subjects were asked to further respond on a 4-point Likert-type stress appraisal scale, indicating the degree of stressfulness associated with each situation (0 = *not stressful at all* to 3 = *very stressful*). A check for internal consistency on this scale resulted in a Cronbach's alpha coefficient of .65.

Social support was explored using four newly developed items assessing availability of social support. In other words, having access to someone excluding their spouses (to eliminate the confounding effect of a good or bad marital relationship) on whom respondents could rely in specific situations requiring emotional, economic, or informational/practical types of support. An additional social-support item explored the respondents' perception of the degree of support (communication-intimacy) received from their spouses.

Depressive symptomatology was measured with the Spanish version of the Center for Epidemiologic Studies Depression scale (CES-D) (Radloff, 1977) used in the Hispanic Health and Nutrition Examination survey (HHANES). The CES-D has been used extensively with different ethnic groups to measure depressive symptomatology. Several studies have reported that the CES-D has high internal consistency and a similar factor structure and patterns of construct validity among whites, blacks and Mexicans (e.g., Roberts, 1981; Vernon, Roberts, & Lee, 1982). Furthermore, because of its adequacy, the Spanish version of the CES-D has been used by Vega and his colleagues in a large-scale study of Mexican immigrant women (e.g., Vega et al., 1986).

Procedure

The procedure for locating the potential subjects ($n = 853$) selected from the marriage records involved the mailing of four letters per subject (two mailed to the potential subjects' address and two mailed to their spouses' address). A letter directed to the current resident was mailed to both addresses identified in the marriage record as the last place of residence for the groom and the bride. This English/Spanish letter described the study in very general terms and requested that the receiver cooperate by calling collect a designated number to provide information on the whereabouts of the couple; the letter also indicated that \$5 would be paid for participation in the telephone survey. A second follow-up letter was sent to both addressees (both spouses) approximately three weeks after the first mailing.

When potential respondents made the requested contact, all telephone calls were answered by a bilingual female who explained in more detail the nature of the study and conducted the final screening by selecting only those women who immigrated to the United States at age 14 or older. The researcher requested the participation of the qualified respondents by answering the telephone survey immediately, or making an appointment for the telephone interview at the caller's convenience. It is important to point out that all the calls received were in Spanish, also; there were no refusals to participate in the study once the telephone contact with the respondent was made. The questionnaire took between 30 and 50 minutes to complete. Answers were recorded on the instrument using pre-coded response categories for easy computer entry.

Considering the total number of calls received ($n = 184$) and the total number of subjects to be reached ($n = 853$), the response rate was 21.5%. In the absence of knowing how many subjects in the contacted population actually met the eligibility criteria for inclusion in the study, 21.5% is the best estimate of the response rate.

The problem of locating subjects for the study reflects a multitude of factors. Immigrants are highly mobile and they may not have received our letters because of changes in address without leaving a forwarding address. Another limiting factor is the possibility that a large proportion of immigrants do not have telephones in their household because of their low socioeconomic status. Also, it is very likely that some of our potential subjects lacked legal residency in this country and feared the consequences of participating in the study. Some of these methodological problems have been addressed by Cornelius (1982) who specifically indicated that when doing research with undocumented immigrants a strict random sampling procedure is not possible because of their clandestine status. He further indicated that the response rate of undocumented populations is likely to be substantially smaller than in the conventional sample survey, regardless of the sampling procedure.

Needless to say, the sample of the present study is not representative of

the universe of Mexican immigrant women to the United States. Therefore, due to the limitations of our sampling criteria as well as the fact that the sample may reflect a self-selecting bias, the results of the present study must be interpreted with caution and limited to the population of married Mexican women immigrants to the United States after 1964.

RESULTS

Table 1 lists the 12 acculturative stress items in order of the proportion of subjects who indicated that they had experienced the described situation in the last three months and their appraisal of the stress associated with such experience. The acculturative stress scale scores for the entire sample ranged from 0 to 26 with a mean group score of 12. As for levels of depressive symptomatology, CES-D scores were high for the entire sample ($M = 14.5$).

Furthermore, 64 % of the women in the sample reached or exceeded the CES-D customary cut-off point of 16 points that indicates caseness, and 14 % had scores of 24 or more. These findings suggest that married Mexican immigrant women may be at high risk for the development of psychopathology.

A very strong and significant correlation between acculturative stress and depressive symptomatology was observed, $r = .40$, $p < .001$. Furthermore, acculturative stress by itself significantly predicted 16 % of the variance in depressive symptomatology, $r = .16$; $F(1, 138) = 25.8$, $p < .001$.

In terms of external mediators, it is interesting to note that among the respondents access to social support networks did not seem to have a buffering quality. The social support items both by themselves as well as combined were not correlated with either acculturative stress or depressive symptomatology. As for the respondents' perceived support (communication-intimacy) from their spouses, the results revealed that higher spousal support was related to lower depressive symptomatology, $r = -.28$, $p < .01$. However, no relationship was found between spousal support and acculturative stress.

Other analyses were conducted in order to identify variables related to high levels of depressive symptomatology. The variables explored were English language proficiency and each of the 12 items of the acculturative stress scale. The results indicated a negative relationship between CES-D scores and language fluency; lack of verbal proficiency in English was strongly correlated with higher levels of depressive symptomatology, $r = -.33$, $p < .001$.

As for each of the potential stressors, Table 2 lists the items describing stressful situations that accounted for significant differences in levels of depressive symptomatology. Also shown are the results of t-test analyses on CES-D scores between respondents who had experienced the stressful situ-

Table 1
Proportion of subjects and their rating of
acculturative stress items

| <i>Acculturative Stress Items</i> | <i>Proportion % Yes</i> | <i>Stress Rating^a M</i> |
|--|-----------------------------|--|
| Not having enough money to pay debts | 85.0 (<i>n</i> = 119) | 2.4 |
| Not being able to communicate in English | 69.3 (<i>n</i> = 97) | 2.2 |
| To think of the welfare of family and friends left in Mexico | 79.3 (<i>n</i> = 111) | 2.0 |
| To worry about having children because youngsters have too much freedom | 58.6 (<i>n</i> = 82) | 2.3 |
| Not being able to be a good Mexican wife because of unfamiliarity with new environment | 57.1 (<i>n</i> = 80) | 2.1 |
| To be discriminated against because of being Mexican | 52.1 (<i>n</i> = 73) | 2.2 |
| To lose contact with Mexico | 50.1 (<i>n</i> = 70) | 1.8 |
| To have accented speech in English | 34.3 (<i>n</i> = 48) | 2.0 |
| To understand the values and culture in the U.S. | 33.6 (<i>n</i> = 47) | 1.7 |
| To worry about having children because of lack of child care | 31.4 (<i>n</i> = 44) | 2.1 |
| To do something wrong when socializing with Americans | 22.8 (<i>n</i> = 32) | 1.6 |
| To have a Spanish surname | 2.1 (<i>n</i> = 3) | 2.0 |

^aStress ratings may range from 0 to 3.

ation in the last three months, and those who had not. As the table indicates, perceived discrimination ($M = 17.3$ vs. $M = 11.4$), $t(136) = -3.7$, $p < .001$, followed by the respondents' sense of inability to perform their role as good Mexican wives in an unfamiliar environment ($M = 16.5$ vs. $M = 11.9$), $t(122) = -2.7$, $p < .01$, and concern about starting a family in this country ($M = 16.3$ vs. $M = 12.0$), $t(117) = -2.5$, $p < .05$, were situations identified as important in placing this group of immigrant women at risk for the development of depressive disorders. Respondents who experi-

Table 2

T-test on CES-D scores between subjects who have and have not experienced acculturative stress

| Acculturative Stress Items | CES-D Scores Experienced Situation | | df | t |
|--|--|------------------|-----|---------|
| | Yes | No | | |
| To be discriminated against because of being Mexican | 17.3 (n = 73) | 11.4 (n = 67) | 136 | -3.7*** |
| Not being able to be a good Mexican wife because of unfamiliarity with new environment | 16.5 (n = 80) | 11.9 (n = 60) | 122 | -2.7** |
| To worry about having children in the U.S. because youngsters have too much freedom | 16.3 (n = 82) | 12.0 (n = 58) | 117 | -2.5** |
| Think about welfare of family and friends left in Mexico | 15.5 (n = 111) | 10.5 (n = 29) | 47 | -2.6** |
| Not having enough money to pay debts | 15.3 (n = 119) | 9.9 (n = 21) | 28 | -2.2* |

* $p < .05$; ** $p < .01$; *** $p < .001$.

enced any of these events had CES-D scores of 16 or higher, placing them at risk for the development of psychopathology.

Thinking about the welfare of family members and friends who were left behind in Mexico, ($M = 15.5$ vs. $M = 10.5$), $t(47) = -2.6$, $p < .05$, and not having sufficient money to pay debts, ($M = 15.3$ vs. $M = 9.9$), $t(28) = -2.2$, $p < .05$, were two factors that also contributed to placing the respondents at risk for psychological conflicts.

The 140 female subjects were divided into two groups: Those women who reported that they themselves made the final decision to migrate, ($n = 77$) and those who reported not taking an active role in the final decisionmaking process ($n = 63$). In other words, someone other than the subjects, made the final decision to immigrate to the United States.

Among the respondents who independently decided to migrate, the group's mean age at the time of immigration was 19.7 years ($SD = 4.2$). As for the immigrants who did not make the decision to migrate themselves, their mean age at the time of immigration was 16.6 years ($SD = 3.1$). The latter group immigrated at a significantly younger age than their counterparts, $t(136) = 5.0$, $p < .001$. Current age, however, did not differ significantly between the two groups of respondents ($Ms = 26.3$ and 24.9 respectively).

There were no significant differences in levels of acculturative stress

between the respondents who made the final decision to migrate themselves ($M = 11.2$) and the respondents who did not have control over the final decision to migrate ($M = 12.6$). However, CES-D scores differed significantly between the two groups. Women who migrated because of someone else's final decision to move, scored significantly higher in the CES-D ($M = 16.7$) than the group of autonomous immigrant women ($M = 12.7$), $t(135) = 2.41$, $p < .05$. No other differences were found between the two groups in levels of acculturative stress and depressive symptomatology after controlling for education, occupation, and presence or absence of children in the family.

Unfortunately, the methodology is unable to separate the effects of perception of control of decision to migrate, age at migration, and cohort effects (those not deciding to migrate independently, coming earlier than those who came independently). Thus the results of comparisons between the two groups are only considered as suggestive for further research.

In order to get a better understanding of the women's migration process, subjects were asked to identify their relationship with the person who initiated the idea to move to the United States. Among the respondents who made their own decision to migrate, 27.3% indicated that migration to the United States was an idea initiated by themselves and at the suggestion of no one else. Among this group, the major reasons for wanting to move to the United States were first economic concerns (31.2%) such as to make money and have a better paid job. The second most frequently given reason (25.9%) was that subjects wanted to be reunited and live with family members who already resided in the United States. Only 15.0% and 9.0% of the respondents of this group indicated that their original intentions for migrating were to visit this country and learn English, respectively. Other reasons for migration included to specifically provide economic help to family left in Mexico, to try a change of life in a new country, and only in two cases because of marriage.

As for the group of respondents who did not have control over the decision to migrate, only 7.9% of the women in this group said that they had initiated the idea of migration. In contrast to the more autonomous women described above, the majority of this group's respondents (61.0%) indicated that one or both parents first raised the idea of moving to the United States. The difference between the two groups was significant, $\chi^2(3) = 19.71$, $p < .001$, while it reflects the difference in age between the two groups. The reasons for moving to the United States were similar to those given by the more independent group.

Respondents were also questioned about their desire either to stay in the United States for the remainder of their lives or to return to Mexico. There were no significant differences between the two groups on this item, with the majority of women indicating that they wanted to stay in the United States for the remainder of their lives. The most frequently mentioned reasons were that they were happy in this country (32.9%) and that the

opportunities to improve their lives were better here than in Mexico (19.3%). On the other hand, a large proportion of respondents wanted to go back to Mexico because they missed and liked Mexico better (50.0%); wanted to be reunited with their family living in that country and wanted their children to be raised in Mexico.

Thus, most women in this sample wanted to remain in the United States and were satisfied overall with their lives in this country. Nonetheless, as we have seen, they had high acculturative stress and depressive symptomatology scores regardless of whether or not they had control over the final decision to migrate.

DISCUSSION

The findings of the present study with a sample of recently married, late immigrant women from Mexico reveal that the acculturative stress scores for the sample are high. Findings suggest that married Mexican women, as recent immigrants are exposed to similar acculturative stressors. Moreover, more similarities than differences exist between women who said they made the final decision to migrate to the United States and those who do not perceive themselves as controlling the final migration decision. Both groups of women indicated that their original motivations for moving to the United States were first a desire for economic improvement, followed by a desire to be reunited with other family members who already resided in the United States. Respondents' future plans involved in most cases remaining indefinitely in the United States because of the many opportunities to improve their living conditions in this country.

Significantly higher levels of depressive symptomatology as measured by CES-D scores were observed among respondents who immigrated because of someone else's decision to move, compared with those women who themselves had made the final decision to migrate. Greater depressive symptomatology among the former group may be due to the effects of lack of empowerment to control their own lives when migration to the United States took place. It should be noted that this group of women did not experience greater problems than their more independent sample counterparts in adjusting to life in the United States as indicated by the stress measure. Thus, the factors of moving at a younger age in life, and perhaps disrupting an important period in adolescence, may underlie this difference. These groups also came at different periods of history. Further research is needed to explore the specific contributions of these factors.

Interestingly, no relationship was found between access to social support networks and acculturative stress and depressive symptomatology in either group of respondents, perhaps because the sample consisted only of married women. According to the results, access to different sources of social support (other than spouse) by itself did not relate to the perception of less

stress nor to the expression of fewer depressive symptoms. The perception of support offered by the spouse through open communication and intimacy was the only type of support that ameliorated the expression of depressive symptomatology. The absence of a relationship between social support and acculturative stress and depressive symptomatology may be due to the limitations imposed by the social support measure which evaluated only access to social support networks. More recent studies have suggested that in addition to evaluating access to the network, the assessment of perceived effectiveness of the support received is an important approximation to, and perhaps more adequate measure of, social support.

Learning the language of the host country leads to faster and easier adaptation to that culture because it allows the immigrant a closer interaction with members of mainstream group. Only one-fourth of the sample of the present study spoke English well; the rest did not speak English at all or spoke at least some, but with limitations. Because of the high CES-D scores of the women and the significant relationship with specific stressful situations, it is quite possible that the levels of stress and depressive symptomatology associated with lack of English skills reflect feelings of social isolation. Our immigrant Mexican women may have limited participation in the socio-cultural life of the mainstream because of their perception of discriminatory practices due to their sex, national origin, and, for many, illegal immigrant status.

Because of the growing number of immigrant women from Mexico and other Latin American countries, there is a considerable need to study patterns of psychosocial adjustment among these populations. Such studies will provide researchers and service providers with much needed information concerning the life style of women before and after immigration, and the stress of the migration process.

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