

THE FACTS

September 1990

Reaching Hispanic/Latino Audiences Requires Cultural Sensitivity

The old adage, "Basically, people are all the same," may hold true. But when it comes to cultural backgrounds, people differ greatly. Therefore, all information intended to reach people of a particular culture must pass through *cultural filters* before it is received and acted upon. As information goes through these filters, it is colored by social norms, values, traditions, and history.

This filtering process is essential for information aimed at the *Hispanics/Latinos*, a diverse group of people of different origins living throughout the United States.

In working with this heterogeneous population, professionals and volunteers in prevention and treatment of alcohol and other drug problems must understand the Hispanic/Latino cultural filter, which influences comprehension and, ultimately, behavior. People who are sensitive to the values and traditions of the Hispanic/Latino community are more likely to overcome any barriers to prevention and intervention/treatment that may exist.

The original concept for developing this fact sheet was to give non-Hispanic and Hispanic/Latino professionals and volunteers an overview of some of the issues involved in working with this minority segment of the U.S. population. However, as information was gathered from various Hispanic/Latino leaders, it became increasingly clear that the transcultural understanding discussed in this fact sheet makes it *recommended reading* for a much wider audience.

Specifically, it will be well worth your time to read this fact sheet if you are a school teacher, Sunday school teacher, day-care worker, or student who has a Hispanic/Latino in the same class or program. This publication also will interest those who may have a Hispanic/Latino mate, co-worker, employer, neighbor, teacher, or friend.

Since cultural norms and ethnic nuances are usually not the focus of scientific research, much of the following information has been obtained directly from representatives of the Hispanic/Latino population who hold leadership positions in prevention. Their approaches to the sensitive issues that have implications for the prevention of alcohol and other drug problems will prove invaluable.

The general nature of this fact sheet has made it necessary to insert rather sweeping statements about cultural patterns, attitudes, and behaviors. Readers should recognize that there are always exceptions in dealing with any large population, and should use this document as a general guide for cultural exploration within the specific Hispanic/Latino subgroups with which they work.

This fact sheet begins with a question-and-answer section that highlights information for anyone who wants to develop a sensitivity to the values and traditions influencing Hispanics/Latinos in the United States. The second section comprises a list of

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organizations, agencies, and projects promoting the prevention of alcohol and other drug use among Hispanics/ Latinos. This listing includes brief descriptions, addresses, and telephone numbers. The third and final part of this fact sheet supplies a list of resources -- audiovisuals, tapes, posters, and publications -- for and about the Hispanic/Latino population. Addresses and ordering information are also provided.

Questions and Answers About Prevention For Hispanics/Latinos

Who are Hispanics/Latinos?

The Hispanic/Latino population in the United States includes Mexican Americans, Puerto Ricans, and Cuban Americans; recent immigrants from El Salvador, Nicaragua, and the Dominican Republic; and immigrants from other Central and South American countries. The American public tends to regard Spanish-speaking people in the United States as one group because of their common language. However, the people from each of the countries are quite different and do not regard themselves as a homogeneous group. Therefore, program planners can avoid resentment and unintentional insult by taking time to become familiar with the Hispanic/Latino conversational styles and rules of etiquette.

How are the various Hispanic/Latino subgroups different?

Here is an exercise that will help Americans understand the frustration Hispanics/Latinos feel when they are grouped together. Imagine living in a foreign country where English-speaking peoples from all origins and regions are assumed to be the same. In that foreign country, all the native citizens assume that English-speaking people from the northern part of the United States share the same habits, customs, traditions, and values as people from the deep South -- as well as people from the English-speaking countries of Ireland, Jamaica, England, India, Canada, Australia, and Scotland. Imagine being in a waiting room with a person from Ireland, and being told, "You two must have so much in common to chat about, we'll just leave you alone for a while." Imagine also, the irritation of a harried New Yorker, being associated with a Jamaican, as he is told, "We

didn't worry about being so late for our meeting with you because we knew that *you people* don't worry about time. Why, we heard that most of you don't even wear watches!"

Each Hispanic/Latino subgroup has brought from its native country a unique ethnic background -- history, culture, and religious beliefs -- that has evolved and endured over centuries. The people in each Hispanic/Latino subgroup have different needs and experiences that have shaped their attitudes toward health, family, and alcohol and other drug use. Lack of awareness and sensitivity to this fact can build formidable barriers in reaching Hispanic/Latino audiences.

How many Hispanics/Latinos are there in the United States?

According to the latest Census Bureau statistics, Hispanics/Latinos in the continental United States number nearly 20 million (not counting Puerto Rico's 3 million inhabitants). Approximately 62 percent are Mexican Americans; 13 percent, mainland Puerto Ricans; 5 percent, Cuban Americans; 12 percent, predominantly Central and South Americans; and 8 percent, of other Hispanic origins. These statistics do not include undocumented laborers and illegal immigrants in the United States.

Hispanics/Latinos constitute the second largest minority, after African Americans/blacks. They represent 8 percent of the total U.S. population and are expected to become the largest minority group early in the next century. The Hispanics/Latinos are increasing three times faster than the non-Hispanic U.S. population and may account for one-quarter of the Nation's growth during the next 20 years alone. Besides being the fastest-growing minority, they are also the youngest, with a median age of 25. About 40 percent are under 21. As a young minority, a large proportion of Hispanics/Latinos are at risk for alcohol and other drug problems.

Are Hispanics/Latinos underserved in prevention and intervention/treatment of alcohol and other drug problems?

Relatively high proportions of Hispanics/Latinos in areas like New Mexico, Texas, California, Arizona, and New York have used more drug treatment services than other segments of the population. Collectively, however, they have received only 12 percent of total services.

Hispanics/Latinos are difficult to serve for many reasons, but primarily because of language and cultural barriers. Unless program planners or counselors have been raised in a Hispanic/Latino community, they must learn Spanish and become sensitive to the myriad ethnic nuances that can make or break interpersonal relationships. These professionals should take into account that, although language tends to make the various subgroups more homogeneous, other important aspects differ for each subgroup – such as education, income level, health status, and degree of assimilation to mainstream American culture.

Another reason causing neglect of the Hispanic/Latino population is that money is often scarce. Roughly 26 percent of all Hispanic families in the United States live below the poverty line. A great number of them do not have the basic insurance to cover treatment.

Finally, as a rule, Hispanics/Latinos are very proud – and very private – when it comes to family problems. It is very difficult for any family of any culture to stop enabling a member having problems with alcohol or other drugs and seek external help. For Hispanic/Latino families, revealing secrets and looking for answers outside the strong family unit goes against the grain of their culture.

Alcoholism has long been called the *family disease*, and many experts have said that *prevention begins at home*. What are some of the Hispanic/Latino family traditions and values that have implications for prevention?

Traditionally, Hispanics/Latinos place utmost importance on family relationships. The *family* may include neighbors, owners of the small neighborhood grocery store down the street, godparents, grandparents, and close friends. The Hispanic/Latino family is group-oriented, even in decision making. All members may have a say in adopting family rules and solving family problems. Thus, the family is often very much extended.

The ideal Hispanic/Latino family works as a team, with their focus on the good of the whole or the good of another. The emphasis on family encourages members toward *interdependence*, rather than independence. This natural support has implications in promoting prevention programs and in developing printed materials. For example, prevention programs may attract more attendance if advertisements appeal to individual

members' commitment to the common good of the family. A print publication might start out with the appeal that "It will benefit your (husband, children, sister) if you learn more about alcohol and other drug problems."

How can family strength work in prevention and intervention/treatment for its children?

The strength of the family is valuable in coping with the stress that results from conflicts between mainstream American culture and Hispanic/Latino culture. Such conflicts, usually involving parents and children, may arise from negative messages like racism, low income, unemployment, poor school performance, peer value differences, and acculturation or adjustment to American culture. The family must counteract these negative messages in order to protect its members.

Traditional Hispanic/Latino family unity is important in dealing with conflicts between the value systems of parents and that of their children's peers. These acculturation problems may interplay with alcohol and other drug use.

What are other positive and negative implications for prevention among Hispanics/Latinos?

Many Hispanic/Latino families have the common bond of "*cariño*," a very deep sense of unqualified caring and protection. All family members are considered equal and unconditionally accepted. They are valued simply because they *are*, not because of what they have done or not done. A member is not usually expelled from the family as a result of unacceptable actions or attitudes.

However, *cariño* and protection can sometimes backfire in that some families are accepting of a family member even when he or she exhibits undesirable behavior. It may be harder for a Hispanic/Latino family to say to one of its members, "I will not accept/tolerate your use of drugs/alcohol." Such acceptance or tolerance, therefore, can interfere with setting effective limits on the members' behavior.

As a result of family *cariño*, Hispanic/Latino youth are more likely to live at home with their families longer. As one Hispanic/Latino expert put it, "Why leave home when you are so cherished?" It may be possible that *cariño*, when combined with strong family sanctions against alcohol and other drug use, may cause youth at home – under the loving-yet-firm

supervision of the extended family -- to be more likely to abstain. Because of later onset of use, the less likely one is to develop alcohol and other drug problems, living at home longer may be of further benefit. *Cariño*, strengthened by positive role modeling and firm family rules, may constitute a secret weapon for Hispanic/Latino parents in the war against drugs.

What is known about alcohol use among Hispanic/Latino youth?

First, it is important to note that obtaining significant information about the rates of alcohol and other drug use for Hispanic/Latino youth is difficult. Because of the practice of grouping all Hispanic/Latino subgroups into one category called Hispanic or Latino, major intergroup variances in use rates are lost -- one group's low use rate often cancels out another's high use rate. Also, adolescent Hispanic/Latino females in many subgroups appear to have quite different use rates from those of adolescent males. Most studies do not separate the data by gender and, when the rates are averaged, the figures tend to be misleading.

Researching the Hispanic/Latino population involves special problems. Many Hispanic/Latino youth cannot communicate well in English; others may mistrust "official questions" because of their U.S. immigration status. Such problems have limited the amount of useful data that could be obtained about alcohol and other drug use.

However, despite such research constraints, a general picture may be drawn. It appears that the alcohol use rate of Hispanic/Latino youth is similar to that of Anglo youth. But it also appears that the Hispanic/Latino youth who do drink, drink larger quantities as they grow older, subsequently causing more drinking problems.

Hispanic/Latino boys are more likely to begin drinking at a younger age and to drink more than girls. More Hispanic/Latino girls are learning to drink, so that the gender gap may shrink in the future.

In regard to alcohol use within the principal Hispanic/Latino subgroups, a major survey indicates that alcohol has been used by the age of 18 by 53 percent of Cuban Americans living in Dade County, Florida; 50 percent of Mexican Americans in the Southwest; and 46 percent of Puerto Ricans in the New York City area.

What about use of other drugs by Hispanic/Latino youth?

As with alcohol, the data are sparse for other drug use by young Hispanics/Latinos. It appears that for most other drugs the level of use is comparable to, or just below, that of Anglos. Also, as with alcohol, Hispanic/Latino youth are more likely than Anglos to experience problems related to drug use.

Nearly 3.7 million, or 18.5 percent, of Hispanics/Latinos have used an illicit drug at least once in their lifetimes, with the levels and patterns of use by youth varying in the different subgroups. Mexican-American and Puerto Rican youth are more likely to have used marijuana, inhalants, and sedatives than Cuban Americans. Puerto Rican youth, on the other hand, are nearly twice as likely as the other two groups to have used cocaine.

Hispanic/Latino youth aged 12-17 are more likely than Anglo or African American/black youth to have used cocaine at least once during their lifetimes. As with alcohol, there are important gender differences in the use of other drugs. Hispanic/Latino boys generally have higher use rates than girls, but this gap between genders, which is smaller among youth than among the Hispanic/Latino adult population, keeps narrowing.

Drug abuse among Hispanic/Latino youth has been found to be significantly associated with the high rate of school dropouts. In some localities, dropouts are estimated to have reached 45 percent, and at times as high as 85 percent. High school dropouts are more likely to use illicit drugs than high school graduates.

Program planners and care providers also should take into account traumas, such as being initiated into a different academic and cultural system and the experience of discrimination. Many Hispanic/Latino youth consider schools a second home and are accustomed to having relationships based on friendship with and respect for their teachers.

What role does gender play in Hispanic/Latino culture and drug use?

Machismo among Hispanics/Latinos is culturally expected conduct for men. Generally, men are expected to be dominant, strong, protective, brave, authoritarian, and good fathers. Although several of these cultural characteristics are positive, the ideal of *machismo* for many Hispanic/Latino males also includes drinking

large quantities of alcohol without showing ill effects – "holding your liquor like a man." Even though heavy drinking is often considered masculine by Hispanics/Latinos, alcoholism is usually viewed as a weakness in moral character when it entails a loss of self control. Thus, the man with machismo is encouraged to walk a shaky – if not impossible – line between alcohol consumption and alcoholism.

Conversely, Hispanic/Latino females are expected either to abstain or to drink very lightly if they drink at all. The cultural expectation for Hispanic/Latino females has been for them to act like virtuous ladies – to submit to the men in their lives and to serve their families selflessly. While Hispanic/Latino women are generally assumed to be somewhat subservient, they are very much respected and cherished in the family structure.

Traditionally, drinking has been seen as a behavior verging on impropriety. Since women are supposed to be very moral, it is not surprising that Hispanic/Latino women are more likely than their Anglo and African American/black counterparts to abstain from alcohol use. Of the Hispanic/Latino women who drink, the vast majority are light drinkers, regardless of their subgroup. This situation is changing as Hispanic/Latino women undergo acculturation or adjustment to U.S. society and achieve more years of education.

What are the Hispanic/Latino family's attitudes toward drinking?

For a Hispanic/Latino family, having an alcoholic son or father is embarrassing. But to have a mother or sister with an alcohol or other drug problem is a burning shame, because of the female ideal of purity, discipline, and self-sacrifice in body, mind, and spirit. Because of these strong cultural sanctions, it is possible that problems with alcohol and other drugs among Hispanic/Latino women may be seriously underreported. As a result, Hispanic/Latino women may be reluctant to seek help for alcohol or other drug problems, or even to admit they have such problems to researchers trying to gather anonymous data.

What implications do these traditional family and gender roles have for prevention and intervention/treatment?

Before the initiation of any prevention program, it is important to establish good rapport by listening to each subgroup's worries, needs, and questions that are part of their transcultural

adaptation process. Also, a brief report on American ways of reacting, behaving, and their attitudes about everyday life will inevitably help to restructure their own beliefs, fears, and even prejudices about American people.

Though research has not been completed on this topic, some general conclusions may be drawn:

- Prevention and intervention efforts, to be more effective, should be targeted to include the entire family, and if possible, its religious leaders. Counselors should work toward strengthening the bonds among family members and toward helping women, men, and children to interact better within the family. Prevention efforts will be most effective if counselors reinforce family units and value them as a whole.
- Prevention programs are needed to help Hispanic/Latino fathers recognize how important their role or example is to their sons' self-image regarding alcohol and other drug use. Since being a good father is a part of machismo, it is essential that the men become full partners in parenting. Mothers must be encouraged to learn strategies for drawing their mates into family interaction at home. Counselors should work to strengthen parents' self-esteem, as it may have suffered during the acculturation process.
- Educational efforts to reduce the shame associated with reaching out for help with alcohol and other drug problems could benefit the entire Hispanic/Latino community – especially the female members. Programs aimed at this goal are needed for mothers and their daughters.
- In developing print materials, the emphasis should be on the family as a unit. In special cases, it may be desirable to tailor separate versions for males and females. For organizations that have the capability, separate focus groups for each gender could be helpful in determining the need for gender-specific materials.
- Stress reduction and recreational programs should be emphasized to help Hispanic/Latino families adjust to the mainstream American culture without abandoning their own.
- Reaching Hispanic/Latino audiences through Spanish-speaking community-level

organizations and leaders can greatly simplify group interaction. Hispanic/Latino families thus will realize they are not alone in their struggle to prevent alcohol and other drug abuse among their members.

- Teachers, counselors, and other helpers must be aware of the effects that traditional gender roles play in prevention and intervention/treatment. They must study the special role perceptions of the subgroups they will be working with in order to build bridges of sensitivity and awareness.

Can the strong ties that many Hispanics/Latinos have to traditional religions help prevention planners reach their target population?

Recognition of the role of religion in the Hispanic/Latino community is crucial for program planners. By tying programs to the church in some fashion, planners may be more easily accepted and trusted within the community.

There are several ways to make the connection. Some program planners work closely with religious authorities, having them actively participate. Various religious authorities may bless a program or offer rooms to programs such as Alcoholics Anonymous or Narcotics Anonymous which often are held in meeting halls. Meetings or counseling sessions might also include prayer.

The Catholic, Jewish, Pentecostal, Seventh Day Adventist, Jehovah's Witnesses, and other religious institutions are on the front line of prevention for both Hispanic/Latino and Anglo youth. It appears that youth who are regularly involved in religious institutions are less likely to use alcohol and other drugs. When prevention program planners, parents, and churches or other religious organizations join forces to convey a clear, firm *no use by youth* message, and when they back up their message with drug-free alternative activities, they make an army that is hard to defeat.

What role do nontraditional religions play in Hispanic/Latino communities?

Nontraditional religions are much more powerful than most people think, especially in Puerto Rican and Cuban-American communities. There are two popular nontraditional religions that draw heavily from the traditions of the Catholic church, mixing the belief in saints with psychic powers and the spirit world. *Espiritismo* is more popular among Puerto Ricans, while

Santeria is more likely to be found in Cuban American communities.

Espiritismo and *Santeria* share some similarities: believers regularly follow spiritual leaders (*espiritistas* and *santeros/as*), who are supposedly born with or develop psychic powers and knowledge of spells, charms, and incantations.

Although *Espiritismo* and *Santeria* recognize saints and other tenets of Catholicism, the church does not recognize either religion. In the Christian faith, such "witchcraft" (*brujeria*) is believed to be an abomination to God.

There are many implications here for prevention program planners:

- Many followers of *Espiritismo* and *Santeria* are poor, uneducated, and at high risk for alcohol and other drug problems. In addition to this very significant target audience for prevention, there are wealthy, well-educated followers of these nontraditional religions. Community program planners would do well not to make socioeconomic judgments about the two without exploring the demographics or specific characteristics of the particular audience being targeted.
- Just as it is helpful to get the approval of religious authorities, it is important to get the approval of local *espiritistas* or *santeros/as*. They may tell their followers that the prevention program is good and should be supported – or they can destroy a community effort by withholding approval.
- Program planners who decide to seek the approval of religious authorities, *espiritistas*, and *santeros*, must remember that these three groups do not mix. Do not attempt to hold joint meetings, seminars, or fundraisers.
- If the population targeted for a prevention program is heavily Catholic, Jewish, Protestant, *espiritista*, or *santera*, make sure that learning about the particular religion is a part of the planning process. Insulting religious beliefs because of ignorance may be fatal for a community-based program.

Can music and folk expressions be a good way of reaching targeted Hispanic/Latino youth?

Most of the subgroups, particularly Hispanic/Latino youth in America, have their own folk and music expressions which give

them a sense of belonging and the chance to practice activities they would have experienced in their countries. These activities also allow them to release negative feelings and to restructure a sense of cultural and ethnic identity that can be useful tools in developing prevention programs. An example of the impact that music and folk celebrations have occurred with the 1990 Mexican Independence Party in Los Angeles organized by UNIVISION, which drew national recognition.

What is involved in translating print materials, public service announcements for radio, or dubbing videos in Spanish?

First, literal translation does not work. English and Spanish cannot be matched word for word, although many program planners are unaware of this fact. Also, a literal translation from English into Spanish can result in stilted words and stiff phrases that do not flow with the richness of the Spanish language. In addition, dialects of one of the subgroups (e.g., the Mexican Americans) may not be understood by other subgroups (e.g., the Puerto Ricans and Salvadoreans). Because Spanish usage patterns in the United States comprise at least seven Hispanic/Latino subgroups, it is advisable to adapt the text to a *neutral, universal, simple, and grammatically correct* language that can be understood by all or most subgroups.

Some people developing materials for Hispanic/Latino audiences use another method which offers a quality control check, known as "back translation." A translator will rewrite the text in Spanish, retaining the general content rather than the exact wording. Next, to ensure that the text carries the intended message, another writer will translate the text back into English.

Once a publication has been adapted to comprehensive Spanish, it must undergo testing with Hispanic/Latino focus groups (*a sample of the target audience*) to make sure the text does not unintentionally contain inappropriate language or, worse, expressions that might be insulting to a particular subgroup.

All the above underscores the importance of exploring the preferences, traditions, and cultural nuances of the particular subgroup that is targeted for prevention efforts.

What is the Office for Substance Abuse Prevention doing for the Hispanic community?

Through a partnership with the Coalition of Hispanic Health and Human Services Organizations (COSSMHO), OSAP has created a series of bilingual publications targeted to Hispanic/Latino parents, teachers, and children. Supplementary materials were produced to complement this national effort. Colorful posters and stickers were produced featuring Hispanic celebrities, including Linda Ronstadt, Gloria Estefan, Edward James Olmos, and other popular stars. The series emphasizes family solidarity, values, and practices of the Hispanic/Latino culture. In addition, these materials convey essential information on alcohol and other drugs.

This initiative includes outreach to Hispanic newspaper editors throughout the Nation and special packages of information for and about the Hispanic community as well as information about the services available from OSAP and NCADI that have been developed. OSAP encourages newspaper editors to use NCADI's database services in writing news stories, and hopes that their readers will have the opportunity to learn more about NCADI's free materials and services.

In 1987 OSAP and the National Institute on Alcohol Abuse and Alcoholism (NIAAA) launched a long-term "Stay Smart! Don't Start!" program aimed at youth aged 8-12. In the Fall of 1990, OSAP is launching the Dile Que No! "Piénsalo" (Stay Smart! Don't Start!) campaign, aimed at Hispanic/Latino youth and those who influence their knowledge, attitudes, and behavior. The purpose of the campaign is to reach Hispanic/Latino preteens with "Stay Smart! Don't Start!" (alcohol and other drugs) messages through intermediaries, including the media, as a way to prevent alcohol and other drug problems.

In addition, OSAP has available several bilingual items, particularly the publication series, the Drug-Free Community Series which includes *What You Can Do About Drug Use in America (Que Puede Hacer Usted Para Prevenir el Uso de Drogas en America)* and *What Your Community Can Do About Drug Use in America (Que Puede Hacer su Comunidad*

Respecto al Uso de Drogas en America). Also in the NCADI Inventory are *The 10 Steps Quick List (Guía Práctica: 10 Pasos Que Ayudarán a Su Hijo a Decir NO)* for parents, *My Baby...Strong and Healthy (Mi Hijo... Fuerte y Sano)*, *Taking Care of My Baby (Cuidando a Mis Hijos)*, and *A Newcomer's Guide to Prevention (Una Guía Nueva para la Prevención)*.

Many videotapes available from OSAP's free audiovisual loan program are targeted to Hispanic and Latino audiences. Also available are new, glossy, full-color posters of Hispanic role models, including Menudo, Edward James Olmos, and Gloria Estefan.

Grants and Other Funding Opportunities

OSAP offers a number of grants to communities and organizations interested in developing prevention programs. Each of the following funding programs has a Hispanic/Latino component.

Prevention Demonstration Grants Targeting Youth at High Risk

OSAP encourages applicants from community-based organizations to develop and test innovative models of prevention and treatment of alcohol and other drug use among high-risk youth, especially those that test primary prevention and early intervention models. Demonstration grants will be awarded to those community-based programs that develop and evaluate approaches addressing the following objectives:

- to decrease the incidence and prevalence of alcohol and other drug use among high-risk youth;
- to reduce the risk factors for using alcohol and other drugs as they impact on individual high-risk youth, and on the environments in which high-risk youths and their families function;
- to increase resiliency and protective factors within high-risk youth and within high-risk families and communities to reduce the likelihood that youths will use alcohol and other drugs;

- to coordinate and integrate the non-use messages and activities of the many human service systems and other social influences affecting high-risk youth into comprehensive, multilevel prevention communities;
- to increase the availability and accessibility of prevention, treatment, and rehabilitation services for these populations; and
- to reduce the severity of impairment and promote the rehabilitation of youths already using alcohol and other drugs.

For information on special Hispanic/Latino project grants, contact Dr. Stephen Gardner at (301) 443-0353.

Model Projects for Pregnant and Postpartum Women and Their Infants

In a joint effort, OSAP and the Office of Maternal and Child Health are funding service demonstration grant projects that focus on prevention, education, and treatment. Successful applicants will propose service projects that include promising models or innovative approaches toward the prevention of fetal exposure to alcohol and other drugs, as well as projects that coordinate existing community services with new or expanded services. OSAP seeks the development of a continuum of therapeutic programs that integrate comprehensive supportive services, which include health, education, voluntary, and other relevant community-based organizations and service systems. Proposed programs should also increase the availability of services, decrease alcohol and other drug use, and reduce the effects of maternal alcohol and other drug use on infants. Proposed projects should address one or more of the following objectives:

- to promote the involvement and coordinated participation of multiple organizations in the delivery of comprehensive services for alcohol- and other drug-using pregnant and postpartum women and their infants;
- to increase the availability and accessibility of prevention, early intervention, and treatment services for these populations;
- to decrease the incidence and prevalence of alcohol and other drug use among pregnant and postpartum women;

- to improve the birth outcomes of women who used alcohol and other drugs during pregnancy and to decrease the incidence of infants affected by maternal alcohol and other drug use; and
- to reduce the severity of impairment among children born to women who use alcohol and other drugs.

For more information on special Hispanic/Latino program grants, contact Marilyn Rice at (301) 443-4560.

Community Partnership Grants

OSAP has launched a Community Partnership Program to fight alcohol and other drug problems through community-based coalitions of public agencies and private organizations. The program is designed to demonstrate the effectiveness of providing long-term, multi-disciplinary resources to assist communities in planning and implementing coordinated, comprehensive, communitywide prevention systems. The initiative will support an estimated 150 demonstration grants ranging in value from \$100,000 to \$500,000. To be eligible, a partnership or coalition must ordinarily consist of at least seven organizations or agencies. Support may be requested for a period of up to five years.

For more information on special Hispanic/Latino demonstration grants, contact David Robbins at (301) 443-9438.

Resources

Organizations, Agencies, and Projects

National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345, Rockville, MD 20852, 1-800-SAY-NO-TO (DRUGS)

NCADI supplies information and services to anyone with questions or concerns about alcohol and other drug abuse problems. Special target groups for NCADI are community leaders, people working with youth, parents, health and human service providers, and persons with alcohol- and other drug-related problems. NCADI distributes publications to a wide range of audiences. Attractive, readable pamphlets, booklets, posters, fact sheets, directories, and other useful products answer questions, offer new prevention ideas, and help groups to conduct community programs. NCADI is bilingual and some publications are available in

Spanish.

National Coalition of Hispanic Health and Human Services Organizations (COSSMHO), Alcohol/Other Drug Programs, 1030 15th St., NW, Suite 1053, Washington, DC 20005, (202) 371-2100

This national Hispanic organization links community-based agencies involved in prevention of alcohol and other drug abuse and in AIDS. COSSMHO services Mexican-American, Puerto Rican, Cuban-American, and other Hispanic/Latino youth and their families. It publishes newsletters and educational and training materials, support material, media campaigns, and provides prevention/intervention training, materials, and technical assistance.

The Office of Minority Health Resource Center, Director of Information and Programs, P.O. Box 37337, Washington, DC 20013-7337, 1-800-444-6472 (toll free).

Established by the U.S. Department of Human Services' Office of Minority Health, the center provides health professionals with information aimed at minorities, including Hispanic/Latino youth and families. It maintains listings of prevention programs operating at the national, State, and community levels.

National Hispanic Family Against Drug Abuse, Rodolfo Balli Sanchez, Chairman and CEO, 1500 Farragut Street, NW, Washington, DC 20005, (202) 723-7227

This office supplies information about Hispanic families and runs annual conferences on drug abuse issues. It makes available a biannual newsletter (free of charge) and other reports and materials.

OSAP Community Prevention Assistance Services, Elaine Brady Rogers, Technical Assistance Systems Manager, 8201 Greensboro Drive, Suite 600, McLean, VA 22102, (703) 556-0212

This group's staff and regional consultants assist organizations and communities in developing, enhancing, or expanding efforts to prevent alcohol and other drug abuse. Its goal is to identify the most promising prevention initiatives and to assist organizations in implementing strategies aimed at prevention. Professional conference support and referrals are provided.

Center for Health Policy Development, Inc. (CHPD), Juan H. Flores, Executive Director, 2300 West Commerce, Suite 304, San Antonio, TX 78207, (512) 226-9743

CHPD is a Hispanic/Latino health resource and research organization. Its purpose is to promote and facilitate the health improvement of Hispanics/Latinos by providing technical assistance on AIDS and drug abuse prevention to community organizations serving Hispanics/Latinos.

National Council on Crime and Delinquency (NCCD), S.I. Newhouse Center, Orlando Rodriguez, East Coast Office Director, 15 Washington St., 4th Floor, Newark, NJ 07102, (201) 643-5805

NCCD is a criminal justice policy research organization that promotes alternatives to incarceration and delinquency as well as drug abuse prevention as a way of reducing imprisonment. It specializes in research and the causes of crime and other problem behaviors, with emphasis on providing school and job opportunities in its city communities. NCCD publishes booklets on Hispanics/Latinos.

Spanish Catholic Center (Centro Católico), Washington Archdiocese, Father Julio Alvarez-García, Executive Director, Mary Lynn Mercado, Social Services Coordinator, 2700 27th St., NW, Washington, DC 20008, (202) 483-1520 (8:30 AM-5 PM, Monday-Friday)

This is a national center that refers (Spanish-English) Hispanic/Latino parents to counselors and social services and assists Hispanic/Latino families seeking help for alcohol and other drug problems. The center also offers parental guidance on other issues. A brochure is available on the services, which include operation of Hispanic youth recreational and educational centers, teaching English as a second language and other subjects.

NCADI can provide a national listing of Diocesan Directors for Hispanic Affairs when requested.

Directory of Community Minority Organizations, NHLBI Minority Program Information Center, 4733 Bethesda Avenue, Suite 530, Bethesda, Maryland 20814, (301) 951-3260

This minority organizations directory has been created to support the dissemination of health information to minorities. NCADI has contacted the following Hispanic/Latino organizations, and has been authorized to include them in this fact sheet:

Hispanic Health Council
Dr. Cándida Flores
96-98 Cedar Street
Hartford, CT 06106
(203) 527-0856

Latino Caucus of the APHA
c/o José D. Arron, M.A.
Midwest Hispanic AIDS Coalition
1725 W. North Avenue, Room 4C
Chicago, IL 60622
(312) 772-8195

The purpose of the Midwest Hispanic AIDS Coalition is to prevent HIV infection and AIDS among Hispanics living in the Midwest.

Mujeres Latinas en Acción
c/o Susan Grettenberger
1823 West 17th Street
Chicago, IL 60608
(312) 226-1544

Hispanos en Minnesota
c/o Ricardo Flores
179 East Robae Street
Saint Paul, MN 55107
(612) 227-0831

Illinois Prevention Resource Center
c/o Steven Guerra
407 South Dearborn, Suite 1125
Chicago, IL 60605
(312) 663-3737

Selected Videos, Audio Visuals, and other Materials

Padre Kino Videolibrary, 5230 East Farness, Suite 106, Tucson, AR 85712, 1-800-922-8638

The Videolibrary has 17 videos on alcohol and other drug abuse available in Spanish. These videos can be purchased or rented.

Narcotics Education, Inc., 12501 Old Columbia Pike, Silver Spring, MD 20904-1608, (202) 680-6740, 1-800-548-8700 (toll-free orders).

This company specializes in audiovisuals, T-shirts, posters, books, and pamphlets dealing with drug prevention and health (including AIDS) for all ages. All materials (some in Spanish) are listed in a free catalog, "The Health Connection," which can be obtained by calling the toll-free number.

The National PTA, 700 North Rush Street, Chicago, IL 60611-2571, (312) 787-0977

The National Association Congress of Parents and Teachers publishes kits, guides, flyers, and booklets (some in Spanish) about alcohol and drug education for parents and teachers. A catalog and order forms can be obtained by mail.

Selected Readings

Alcoholism and Substance Abuse in Special Populations written by Gary W. Lawson and Ann W. Lawson. Rockville, MD: Aspen Publications. 370 pp., 1989.

This book examines the special issues involved in the causes, treatment, and prevention of alcoholism and other types of drug abuse among specific populations. The groups have been chosen either because of their high risk for abuse problems in relation to the general population or because of a lack of resources available to provide up-to-date, appropriate information. Existing literature is reviewed; information about demographics, drug abuse rates, and kinds of drugs abused by a particular population (including Hispanics/Latinos) is included.

Choices and Consequences: What To Do When a Teenager Uses Alcohol/Drugs by D. Schaefer, Johnson Institute Books, 1987.

Discusses teenage alcohol and drug use and ways to intervene.

Focus on Family and Chemical Dependency. Los Niños: Intervention Efforts with Mexican American Families by S. Rodriguez-Andrews, 1984.

This book outlines an alcoholism primary prevention program within the Mexican-American community. It contends that careful, culturally-sensitive planning with the context of the strengths of the Mexican-American family results in greater parent participation as well as the identification of both young and adult children of alcoholics.

Lo Que Todo el Mundo Debe Saber Sobre el Alcohol ("What Everyone Must Know About Alcohol") Pamphlet, 1980.

Channing L. Bete Co., Inc., 200 State Road, South Deerfield, MA 01371, (413) 665-7611.

This pamphlet uses a question-and-answer format to present the reader with information about alcohol. Discusses why people drink, what constitutes alcohol abuse, and how alcohol affects the drinker.

Breakthroughs in Family Therapy with Drug-Abusing and Problem Youth by Jose Szapocznik and William M. Kurtines, et. al., Springer Publishing Company, 1989

New family therapy techniques for working with families of drug-abusing and problem youth are presented in this book. The primary aim of the book is to make recent breakthroughs in the understanding of family functioning and treatment available to the practitioner. The authors have developed concepts and techniques called Brief Strategic Family Therapy (BSFT), which they apply to family assessment, treatment, engaging resistant families, working with one person, and research.

Family effectiveness training: An intervention to prevent drug abuse and problem behaviors in Hispanic adolescents by J. Szapocznik, A. Rio, A. Perez-Vidal, D. Santisteban, and W. M. Kurtines, *Hispanic Journal of Behavioral Sciences*, 11(1):4-27, 1989

Evidence is presented for the efficacy of Family Effectiveness Training (FET). FET is a prevention/intervention modality designed for use with Hispanic families of preadolescents who are at risk for future drug abuse. Seventy-nine Hispanic families meeting the criteria for at-risk families made up the subject population. Families were randomly assigned to either an FET condition or to Minimum Contact Control Condition. Families in the FET condition showed significantly greater improvement than did control families on measures of structural family functioning, problem behaviors as reported by parents, and on a self-administered measure of child self-concept. FET impact was generally maintained at six-month followup.

OSAP is dedicated to strengthening prevention efforts for all populations, especially youth at high risk for alcohol and other drug problems. NCADI, OSAP's information component, maintains a computerized listing of publications that have been created by public and private organizations throughout the country. Please help NCADI assist others to reach the Hispanic/Latino population by sending your ideas, suggestions, brochures, booklets, videos, posters, and other materials to:

*National Clearinghouse for Alcohol and Drug Information (NCADI), Publications Manager,
Department HFS, P.O. Box 2345, Rockville, MD
20852; (301) 468-2600.*