INSIGHTS INTO AN INVISIBLE COMMUNITY: A PHOTOVOICE PROJECT WITH LATINO IMMIGRANT MEN IN ALLEGHENY COUNTY

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Submitted to the Graduate Faculty of

the Graduate School of Public Health in partial fulfillment

of the requirements for the degree of

Master of Public Health

University of Pittsburgh

2011

UNIVERSITY OF PITTSBURGH

GRADUATE SCHOOL OF PUBLIC HEALTH

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Andrea Kamouyerou, MPH

University of Pittsburgh, 2011

Background: While the Latino immigrant male (LIM) population in Allegheny County is small, it is quickly growing. Previous studies have shown that men who immigrate without their families lack a sense of collective identity due to a socioeconomically diverse and geographically dispersed Latino population in Allegheny County. This reality may result in social isolation, and other associated negative health consequences. **Purpose**: This qualitative study sought to understand the social context of LIM in Allegheny County and describe how this context may impact their health. **Methods**: Photovoice was used, which is a community-engaged methodology in which participants document their lives in photographs, to understand community-level perspectives on participants' social context and relevant health topics. Participants were asked to take photographs about various topics, discuss the contexts related to photographs, and then relate the contexts with their experiences as immigrants. Seven LIM participated. Photograph "assignments" addressed the meaning of: (1) being an immigrant; (2) stress and related coping strategies; and (3) "fun" for the Latino community. All discussions were transcribed and analyzed using elements of grounded theory. **Results**: Three dominant themes emerged, which characterize the social context of participants: 1) the paramount role of the family leads immigrants to make sacrifices in order to provide for relatives abroad; 2) individual estimation of self-worth is affected by many factors, including workplace dynamics, pride and social discrimination; and 3) this community is marginalized, not able to retain close

ties with families in the former culture, yet not able to access and participate in society in the new culture. Participants also discussed the disconnected nature of the Latino population and high stress levels, influenced by excessive work hours, unstable housing situations and lack of healthy social outlets. **Conclusions & Public Health Relevance**: The contextual reality within which LIM live in Allegheny County is not sufficient to provide the social support needed for members of a collectivist culture. This lack of social support, compounded by a social and economic context hostile to immigrants, is resulting in negative health outcomes. Existing health infrastructure must take into account this reality, particularly when designing care, support and prevention programs.

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FOREWORD

I would like to thank the members of my thesis committee, Dr. Patricia Documét, Dr. Michael Yonas and Dr. Thomas Guadamuz, for their enthusiasm, constructive feedback and support during all stages of my thesis research. Dr. Documét in particular spent many hours with me discussing ideas, theories and analysis, and reviewed my transcripts and drafts, giving encouraging yet critical comments all along the way. I also would like to thank Alfonso Barquera for his investment in this project. His insights and assistance in the design of the project and during project meetings were invaluable, and I truly could not have completed this project without his support. Lastly, I want to thank the participants for sharing their lives with me. They made this process not only insightful and fruitful, but also enjoyable. It is my hope that this thesis will give an accurate voice to their experiences.

1.0 INTRODUCTION

Historically, immigrants have been an integral component of society in the United States because of the important roles they have played in labor and the economy. Due to a variety of socioeconomic and social factors, immigrants in the United States are at a greater risk for negative health outcomes, and disproportionately lack access to health coverage as compared to native-born citizens. The proportion of the total immigrant population in the United States that does not have health insurance in 2009 was almost two and a half times that of the U.S.-born population (U.S. Census Bureau, 2010). This is a significant disparity given the universal consequences that negative health outcomes have on communities and societies. Public health professionals, concerned primarily with the health of communities as a whole, have a vested interest in addressing such disparities in access and services. Two essential components of the social ecological framework of health are intra-personal and inter-personal factors that impact community health. Public health responses to the aforementioned disparities among immigrants must include tailored interventions that reflect the intra- and inter-personal influences on health, and target mechanisms of change at various levels of influence (Glanz, Rimer & Viswanath, 2008). This study seeks to better understand these influences by utilizing an innovative qualitative approach to elucidate the intra- and inter-personal dynamics in the social context of

Latino[1] immigrant men in the specific context of Allegheny County. The Photovoice methodology was used with seven Latino immigrant men, who were asked to share insights about their lives through photographs and discussions of those photographs during three two-hour sessions. Three dominant themes that characterize the social context of participants were found: 1) the paramount role of the family leads immigrants to make sacrifices in order to provide for relatives abroad; 2) individual estimation of self-worth is affected by many factors, including workplace dynamics, pride and social discrimination; and 3) this community is marginalized in Allegheny County, not able to retain close ties with families in the former culture, yet not able to access and participate in society in the new culture.

This thesis, therefore, will 1) provide an overview of the current literature related to Latino immigrant health issues and access, as well as dimensions of social context as they relate to health; 2) describe in detail the Photovoice methodology, as well as the reasons for its use for the purposes of this study; 3) analyze the emergent dominant themes from the photo-elicited discussions using elements of grounded theory; 4) discuss the emergent themes in the context of relevant theory and scientific literature; and 5) highlight the implications of the results of this study on future program planning that targets this population.

[1] The terms "Latino" and "Hispanic" are used interchangeably in this document. This study embraces the U.S. Census Bureau's definition, which defines a Latino as any person that classifies him/herself as Mexican, Mexican American, Chicano, Puerto Rican, Cuban, Hispanic, or Latino, without regard to race.

2.0 OBJECTIVES

In the larger context of immigrant health, this study serves to elucidate the unseen social dynamics of a small group of Latino immigrant men in a new growth community and the potential role that social context plays in health. New growth communities are places where the Latino immigrant population is small (below 5%) yet growing rapidly (Cunningham, Banker, Artiga & Tolbert, 2006). In such communities, the infrastructure of health and social services is not developed in a way that can accommodate the growing numbers of Latinos that live in the community. Given this definition, Allegheny County can be considered a new growth community, as the latest data on the proportion of self-identifying Latinos in the County is under 1.5% (U.S. Census Bureau, 2011). The origin of this study came out of results of previous but unpublished research with the same community, which showed depression, loneliness and social isolation as salient social issues in the Latino immigrant male community in Allegheny County, with particular focus on men who immigrate to the United States alone, without their families. Men in such situations have even greater potential risk of depression, loneliness and social isolation in new growth communities. Other researchers who have done previous work with the Latino population as a whole in Allegheny County (Documét, 2001; DeLuca, 2007) also report the existence of these issues. Based out of this previous knowledge, the objectives of this study are as follows:

(a) To understand the characteristics of the social context in which Latino immigrant men (LIM) live in Allegheny County.

(b) To identify sources of stress and mechanisms of stress management in this community.

(c) To understand social isolation and its impact on this community.

3.0 BACKGROUND

This chapter is a review of the literature, in which I examine current understandings of the experience of Latino immigrants in the United States, organized broadly by the topics of health and social context. My intent with this literature review is to provide a background and context into which this current study can be located. The first sections of the review examine in detail current demographics of Latino immigrants in the United States, as well as the complex set of barriers and facilitators to healthy living that Latino immigrants face. The second part of the review focuses in on the social context of Latino immigrants, with special focus on men, in order to understand how social context may impact issues of health. I then draw connections between social context and health, highlighting the need for this current study to contribute to further understanding. I conclude this review of the literature by briefly reviewing methodologies that have been utilized when examining this population, and focusing in more detail on Photovoice and its benefits and limitations.

3.1 LATINOS IN THE UNITED STATES

The Latino population in the United States is the fastest growing minority group, with 12.5% of the U.S. population self-identifying as Latino in 2000, and 15.7% self-identifying as Latino in 2009 (Pew Hispanic Center, 2011). The U.S. Census projects that this proportion will grow to

nearly a quarter of the population, 24.4%, by 2050 (U.S. Census Bureau, 2006). It is estimated that one in six individuals in the United States identify as "Hispanic" or "Latino." The percentage of foreign-born Latinos in this country increased 15.4% between 2000 and 2008 (Pew Hispanic Center, 2011). Regionally, Latinos comprise a portion of the population in all regions of the country, with predominance in southern and southwestern states. The southern region of the United States saw the greatest rate of change in proportion of Latinos in the population, experiencing a 31.2% change between 2000 and 2006 (U.S. Census Bureau, 2006). Males comprise 51.7% of the total Latino population in the United States; the median age of foreign-born male Latinos is 37 years old (Pew Hispanic Center, 2011). The four most common occupations of foreign-born Latinos in 2009 were construction (14.9%), maintenance and repair work (14.6%), building and grounds maintenance (13.6%), and food preparation and service (10%) (Pew Hispanic Center, 2011). Nearly half of this population, 49.1%, earns less than $20,000 per year as of 2009 (Pew Hispanic Center, 2011). Despite the rapid growth, disparities in health status and service utilization exist because of the unique challenges faced by Latino immigrants. This review of the relevant literature on Latino immigrant health issues and social context seeks to contribute toward a better understanding of the context within which this population lives, and how that context impacts the health of the population. By providing a thorough background of the Latino immigrant population both nationally and locally, the issues that they face, and the current literature regarding their social context, the following sections of this chapter make a strong case for the need for and significance of this current research about the social context of Latino immigrant men in a new growth community.

3.2 HEALTH AND HEALTH CARE ACCESS

3.2.1 Health Status and Disparities

Ethnic minorities experience significant health disparities with regard to health issues as well as access to health care services. Latinos in particular face considerable disparities as compared to non-Latino Whites in the United States (Weinick, Jacobs, Cacari Stone, Ortega & Burstin, 2004). Generally, Latinos report poorer health status, and experience higher prevalence and incidence rates of many chronic diseases than their non-Latino White counterparts (Centers for Disease Control and Prevention, 2011). Mexican Americans suffer disproportionately from diabetes than all other subgroups (Office of Minority Health and Health Disparities, 2009). From the Morbidity and Mortality Weekly Report (Centers for Disease Control and Prevention) in 2004, Hispanics of all races experienced more age-adjusted years of potential life lost before age 75 per 100,000 population than non-Hispanic Whites for the following causes of death: stroke (18% more), chronic liver disease and cirrhosis (62%), diabetes (41%), human immunodeficiency virus (HIV) (168%), and homicide (128%). In 2000, Hispanics had higher age-adjusted incidence for cancers of the cervix (152% higher) and stomach (63% higher for males and 150% higher for females). Between 1999 and 2000, Mexican Americans aged 20 to 74 years reported higher rates of overweight (11% higher for males and 26% higher for females) and obesity (7% higher for males and 32% higher for females) than non-Hispanic Whites.

While health disparities are narrowing between U.S. minorities and Whites, Latinos are falling farther behind (Stone & Balderrama, 2008). Many explanations have been proposed to account for these disparities. Among them are cultural factors and beliefs about health, economic factors related to use of the health care system, and a myriad of contextual factors that

may work in synergistic ways, such as acculturation, social isolation and fear (Weinick, Jacobs, Cacari Stone, Ortega & Burstin, 2004).

3.2.2 Health Care Seeking: Barriers and Utilization

If and when Latino immigrants decide to utilize health care services, they face many barriers to accessing those services in the United States. Some of these barriers include fear and lack of insurance, both mentioned above. Also, lack of financial resources to pay for services is a common barrier in this community, as well as language barriers (Peak, Gast & Ahlstrom, 2008; Sobralske, 2006). Cultural differences are another substantial factor, as both the Latino immigrants and the healthcare system in the United States have cultural norms and values that often are not the same. For example, research has shown that Latino immigrants desire more personalized care (Documét & Sharma, 2004), whereas the U.S. health care system prioritizes efficiency, often at the cost of a significant personal relationship between patient and provider. Cultural beliefs around health issues, particularly regarding the origins of sickness and the ways in which it can be cured, are not always in accordance with the beliefs of medical professionals in U.S. hospitals. This dissonance becomes a barrier to accessing care when Latino immigrants have a health concern that they do not believe should be treated in the way that the U.S. medical system would provide treatment (Sobralske, 2006). As a result of all of these individual-level factors, care is rarely sought (Apostolopoulos et al., 2006). Superseding these factors at play on the individual level are the societal and structural factors that further preclude Latino immigrants from obtaining care, such as lack of insurance, financial constraints, complexity of navigating the healthcare system, and social discrimination.

Potential access to health care refers to enabling factors that contribute toward a person obtaining care (Aday, Fleming & Andersen, 1984). Having health insurance and a primary care physician are examples of such factors. Realized access to care, on the other hand, is the care that an individual actually receives, as well as the evaluation that the individual gives of that care (Documét, 2001). Patterns of use of health care services in the Latino population are inconsistent, resulting in differences between potential and realized access to health care. In 2008, the proportion of self-identified Latinos who had not gone to the doctor in the past year was 24.3%; the proportion for Caucasians was 15.4% (U.S. National Center for Health Statistics, 2010). Immigration status is also known to play a role in health care service utilization. Undocumented immigrants, as compared to other Latinos and the U.S. population as a whole, obtain fewer ambulatory physician visits (Berk, Schur, Chavez & Frankel, 2000). Rates ranged from as low as 27 percent to as high as 50 percent of undocumented immigrants in four sites in Texas and California who had ever had a visit with a physician in the United States. These rates are notably lower than the equivalent national-level measurement (75%) and the Latino population (66%) (Berk, Schur, Chavez & Frankel, 2000). Among ethnic minorities, Latinos report lower rates of physician service utilization (Peak, Gast & Ahlstrom, 2008). One study utilizing a telephone survey of over 4,000 Latino adults from across the United States concluded that 58% of undocumented Latino immigrants report not having a usual source of care (Rodriguez, Vargas Bustamante & Ang, 2009).

Explanations for these lower rates of utilization of health care services are varied. Throughout the literature, fear is mentioned with regard to health care usage in this population (Berk & Schur, 2001; Shattell, Hamilton, Starr, Jenkins & Hinderliter, 2008), and its role cannot be understated. Latino immigrants have expressed a fear of deportation as a result of

immigration status, as well as fear of being rejected by the physician due to legal status (Berk, Schur, Chavez & Frankel, 2000). Even when undocumented immigrants believed that they needed care, the fear associated with their legal status was a significant deterrent from obtaining that care for the vast majority of participants (Berk & Schur, 2001). The lack of health insurance also plays a role in the low rates of health care usage for Latinos. In the United States, 51.4% of foreign-born Latinos lack health insurance (Pew Hispanic Center, 2011). Lastly, perceived social acceptance is another factor that has been shown to be a predictor of service use, particularly with preventive health services (Arcia, Skinner, Bailey & Correa, 2001).

3.2.2.1 The Role of Gender

Gender is another factor at play in the explanation of lower health care usage rates, specifically for Latino men. Men in general are less likely to attend to health concerns than women; Latino men are even less likely than non-Latino White men to do so (Sobralske, 2006b). Gender roles, specifically the cultural expectations associated with masculinity, impact men's views of health and their decision-making about health issues. While some studies have shown that men are the primary decision-makers about health-related issues in Latino homes (Sobralske, 2006b), other studies suggest this is a shared responsibility, or even the woman's primary responsibility (Peak, Gast & Ahlstrom, 2008).

Gender can also play a role in motivation for seeking health care. The Spanish word *machismo* is often used to describe "a set of attitudes and the identity associated with the [Latino] concept of masculinity and manliness" (Urrabazo, 1985; Sobralske, 2006). One component of a Latino man's conceptualization of his self-worth is his ability to fulfill the role of worker and provider (Sobralske, 2006). When sickness or an injury impedes his ability to fulfill that cultural expectation, he will be more inclined to seek health care to resolve the health

concern (Sobralske, 2004; Sobralske, 2006). In a sense, the threat to one's masculinity is a motivator for health care usage in this population. The interference that health problems cause with work demands for Latino immigrant men has been noted elsewhere as well (Apostolopoulos et al., 2006). Therefore, the cultural value of machismo and gender roles for males in Latino culture are both barriers to health care seeking as well as facilitators to seeking care when the fulfillment of the role of worker necessitates treating a sickness or injury.

3.2.3 Mental Health

As mental health is of particular interest to this study, inclusion of current literature regarding Latino immigrants and mental health is helpful. While rates of mental illness in Latinos are similar to those in other groups in the United States (Kessler et al., 1994; Agency for Healthcare Research and Quality, 2005), Latinos receive fewer services for mental illness than do other groups (Shattell, Hamilton, Starr, Jenkins & Hinderliter, 2008). Mental health among Latinos is compounded by socio-cultural issues, such as discrimination, social isolation and lack of educational and financial resources that impede access to care (Shattell, Hamilton, Starr, Jenkins & Hinderliter, 2008). Immigration status is a powerful source of anxiety and fear in this population, as are marginalization and stigmatization (Sullivan & Rehm, 2005). Latino men report higher levels of depression than do non-Latino men, and this rate is even more pronounced among those that live alone (Russell & Taylor, 2009). Polo and López found that depression is disproportionately more common among foreign-born Latino youth, who report significantly higher rates of loneliness, social anxiety and fear than do Latino youth born in the United States (2009). In that same study, higher acculturative stress and lower English proficiency led to higher risk for every form of internalizing distress evaluated (Polo & López, 2009). Cultural

perceptions of mental health impede the utilization of mental health services (Sobralske, 2006). Other barriers that keep Latinos from treating mental health problems are stigma, language, and unavailability of services that are compatible with their cultural needs (Sobralske, 2006).

3.2.4 Acculturation's Complicated Role

Acculturation has been defined in many ways in the literature regarding Latino immigrants in the United States and their health status and service usage. One definition that is helpful for the purposes of this review of the literature is that acculturation is the "process of social and psychological exchanges that take place when there are ongoing encounters between individuals of different cultures, with subsequent changes in either of both groups" (Caplan, 2007; Redfield, Linton & Herskovits, 1936). This concept of accommodating and adapting over time to a dominant culture has been studied in many academic disciplines. Measurement of acculturation has been a difficult task for researchers; language use in different social contexts is a common proxy by which to gauge acculturation levels (Caplan, 2007; Lara, Gamboa, Kahramanian, Morales & Hayes Bautista, 2005).

3.2.4.1 Acculturative Stress

The process of acculturation has been viewed by various researchers as the adaptation to new stressors and the development of coping mechanisms in response to those stressors (Berry & Sam, 1997). Decisions about the maintenance of cultural values and practices and ethnic identity must be made in the acculturation process. The term "acculturative stress" represents the many losses that occur in the process of adjusting to a new system or culture (Hovey, 2000). As such,

acculturative stress is a distinct phenomenon that does not necessarily correlate with acculturation.

In a concept analysis of acculturation, Caplan (2007) notes that there are three dimensions to acculturative stress: instrumental and/or environmental stressors, social and/or interpersonal stressors, and societal stressors. Undocumented immigrants have the highest levels of instrumental and/or environmental stressors. These stressors include the difficulties in accomplishing daily tasks, access concerns to social and health services, financial constraints and language barriers (Caplan, 2007). Again, the role of fear and stress due to immigration status is a substantial source of stress for many undocumented immigrants (Perez & Fortuna, 2005). Social stressors include the loss of social networks and supports, as well as loss of social status due to immigration. Some societal stressors include discrimination and a contentious political environment. High levels of acculturative stress have a negative impact on health (Caplan, 2007), and have been associated with aggressive behavior and other behavioral problems with Latino youth (Polo & López, 2009). The literature discusses some ways in which acculturative stress can be managed, such as the practice of one's religious beliefs, which has a protective effect on the individual (Caplan, 2007). The resources that immigrants bring to the United States, such as education and language skills, also may have a protective effect (Polo & López, 2009).

3.2.4.2 Acculturation's Relationship to Health

The process of acculturation has an interesting relationship to the health of an individual. Because acculturation is difficult to measure and made up of components that each affect health in distinct ways (e.g., legal status, language acquisition, discrimination, socioeconomic status), it is not easily understood how the acculturation process specifically impacts health. Each of these

components carries with it a level of stress for an individual that varies based on each person's particular experience and the resources that are available to him/her. All of the various life stressors that are part of the acculturation process accumulate over time as an individual is navigating from one culture and into a new. The consensus of the literature on this topic is that in some cases, higher levels of acculturation are associated with improved health outcomes, yet in others, acculturation leads to poorer health outcomes (Kaplan & Marks, 1990; Mikolajczyk, Bredehorts, Khelaifat, Maier & Maxwell, 2007; Finch & Vega, 2003). Depression and anxiety have been associated with less acculturated Latinos (Mikolajczyk, Bredehorts, Khelaifat, Maier & Maxwell, 2007; Polo & López, 2009). Age has been found to moderate the relationship between acculturation and levels of reported psychological distress, where higher levels of acculturation are associated with increased psychological distress in younger populations of Mexican immigrants, in this case, and similar acculturation levels are associated with less stress in the older populations (Kaplan & Marks, 1990). In a review of the literature on acculturation and Latino health that was done in 2005 (Lara, Gamboa, Kahramanian, Morales & Hayes Bautista), the effect of acculturation on health in Latinos was found to be "very complex and not well understood," with strong evidence pointing toward a negative impact of acculturation on substance abuse, diet and birth outcomes for Latinos in the United States. Acculturation is also known to impact health care utilization, in many cases reporting a relationship between lower levels of acculturation and lower than average service use (Moore & Hepworth, 1994; Arcia, Skinner, Bailey & Correa, 2001). More acculturated Latinos have higher rates of insurance coverage, access to health care, and use of preventative services (Lara, Gamboa, Kahramanian, Morales & Hayes Bautista, 2005).

Understanding the mechanisms by which acculturation can impact health is important in targeting health initiatives toward people in the acculturation process. One helpful way in which this relationship has been conceptualized comes from Berry and Sam (1997). They describe four strategies of acculturation that vary along a continuum of desire to maintain cultural norms and behaviors and/or adopt cultural norms and behaviors of the new culture (Caplan, 2007). The four strategies are integration, assimilation, separation, and marginalization (Berry & Sam, 1997; Cabassa, 2003). The fact that they are on a continuum is significant; individuals may move in and out of different strategies, and the strategies that they employ (consciously or not) may be influenced by societal and infrastructural factors as well. The strategy of integration is used by those who seek to both become part of the new culture yet maintain their old culture; assimilation puts more priority on the adoption of the new culture at the expense of losing the former; separation implies a stronger emphasis on maintaining the culture of origin and not adopting the new culture; and marginalized persons are those that have not become part of the new culture, yet are not supported by cultural ties to the former (Caplan, 2007). These four acculturation strategies relate to health because each one is associated with different levels of acculturative stress. Using the three categories of acculturative stress mentioned above, Figure 1 is helpful in understanding how acculturative stress, and the health impact that it has, can vary within the modes of acculturation.

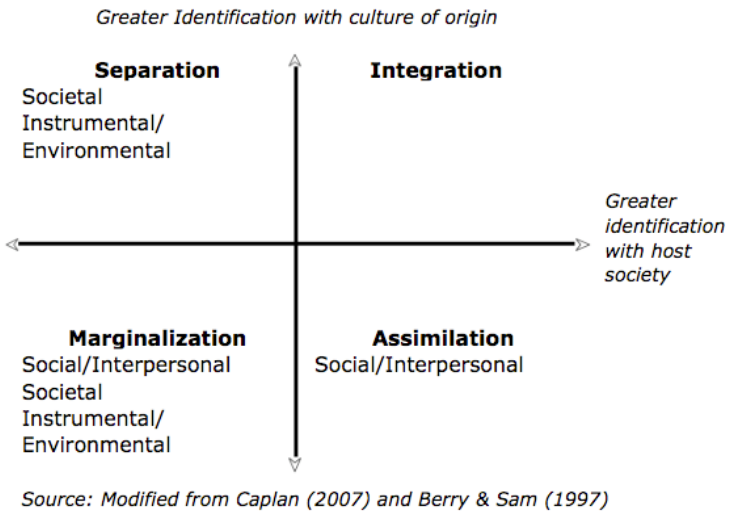

Figure 1. Modes of Acculturation & Associated Levels of Acculturative Stress

3.3 SOCIAL CONTEXT

Understanding the social context within which Latino immigrants live, work, and strive to meet their needs is essential in the development of initiatives that seek to connect them to services and resources. Individuals are embedded in various social contexts, each of which is comprised of diverse social relationships, both within the community and with those outside of the community; these contexts work together to influence an individual's experiences (Bronfenbrenner, 1989). Social contexts can represent environments that promote and facilitate healthy living, or those in which health is threatened or impeded.

3.3.1 Social Support

Social support is known to have protective effects on health. The protective effect of social support varies among population groups. For instance, higher levels of social support can result in larger resources of social capital, such as knowledge about healthy behavior and knowledge about accessing care (Finch & Vega, 2003). Healthy social relationships also improve mood and emotional stability, and serve as key factors in subjective well-being (Tomaka, Thompson & Palacios, 2006). Sources of social support can come from partners, spouses, family members, friends, neighbors, and coworkers, among others. Those more embedded in healthy social support systems tend to not engage in risky behaviors, such as substance abuse and high-risk sexual activity (Clark & Hofsess, 1998). Indeed, strong social ties and the social capital that results from those ties can serve as mediators that impede risk-taking behavior (Apostolopolous et al., 2006). Social support can also increase an individual's ability to cope with psychological and emotional stressors (Baum & Posluszny, 1999). Perceptions of social support have shown to be protective against depression in older Latino adults (Russell & Taylor, 2009). Support networks play an important role in decreasing the potential for loneliness, fear and depression in Latino immigrant men (Apostolopolous et al., 2006). Loss of social networks is known to be one of the greatest stressors for Latino immigrants (Caplan, 2007).

3.3.1.1 Cultural Nuances

The consideration of social support and its relationship to health is of unique importance to Latino immigrants in the United States given the collectivist framework that distinguishes Latino culture (Polo & López, 2009). Collectivism infers that an individual's identity is based on his/her identity as it relates to a collective, or group; one's self-identity is tied to being part of

a community (Caplan, 2007). Interdependence is given higher value than independence (Caplan, 2007; Polo & López, 2009). This framework is in contrast to predominant U.S. cultural values of individualism and independence, and can be a significant cause of stress for Latino immigrants who seek to find their identity as part of a collective. Familism is another cultural value in Latino culture that strongly emphasizes family orientation and closeness (Lugo Steidel & Contreras, 2003). Familism has remained a stable cultural construct in Latino culture over time (Cabassa, 2003). In concordance with familism, much social and economic support comes from extended family (Hurtado, 1995). The process of immigration, therefore, can be disturbing to Latinos who identify strongly with collectivism and familism. Particularly for Latinos who immigrate alone or without their families, the strongest sources of identity and social support are absent once they leave their countries of origin.

3.3.2 Social Isolation

Social isolation has been termed the "natural counterpart" to social support (Tomaka, Thompson & Palacios, 2006). Social isolation is typically understood as the physical separation from other people, either because of living alone or living/working in isolated locations (Tomaka, Thompson & Palacios, 2006). There is scarce literature on the effect that social isolation has on health. The most notable negative health outcomes that can be associated with social isolation or loneliness, a proxy often used in place of social isolation, include impact on cardiovascular and immune systems (Uchino, Uno & Holt-Lunstad, 1999), regulation of blood pressure and regulation of sleep patterns (Cacioppo et al., 2000). In a study with Latino immigrants, subjective loneliness proved to be a predictor for hypertension, heart disease and stroke; this relationship did not hold true in Caucasians (Tomaka, Thompson & Palacios, 2006).

3.3.3 Housing

As previously mentioned, the housing context in which Latino immigrants live is a pertinent component of their social context as a whole. The living conditions of Latino immigrants vary as they do with any population, from living alone, to group housing or living with their families. These living conditions can impact social relationships, acculturation, and stress management. For instance, living alone is strongly linked to social isolation and its accompanying health effects, particularly among Latinos (Russell & Taylor, 2009). Living alone is an independent risk factor for psychological distress for older Latino men (Russell & Taylor, 2009). Interestingly, living alone is significantly more distressing for Latino men than it is for Latino women (Russell & Taylor, 2009). Some other risks associated with living alone for Latino immigrants are decreased engagement with the larger community, slower acculturation processes, and increased difficulty in community integration (Russell & Taylor, 2009). Though Latino immigrants who live in camps, such as migrant workers in the southern United States, or who live in homes with several other Latino men, have the potential to have more social support given the shared housing environments where they live, they are often in settings where risk-taking behaviors such as illicit drug use and high-risk sexual activity are not only tolerated, but encouraged (Apostolopolous et al., 2006). It is important to consider the living arrangements of Latino immigrants and the impact that that has on mental and physical health.

3.3.4 Discrimination

The impact that discrimination has on the life of a Latino immigrant cannot be understated, though its definition and measurement are problematic. Discrimination can affect self-identity,

acculturation, health, and even the formation of a group identity (Shattell, Hamilton, Starr, Jenkins & Hinderliter, 2008; Kaplan & Marks, 1990; Johnson, 1998; Finch & Vega, 2003). Anti-immigrant and anti-Latino sentiment has grown significantly over the last decade as immigration has been increasingly politicized in the United States (Hainmueller & Hiscox, 2010). Public perceptions of Latino immigrants are often based on inaccurate understandings and generalizations. The housing arrangements of Latinos have been perceived to be "crowded, unhygienic, and a source of crime" (Chavez, 1990). Perceived discrimination can impact decisions that Latino immigrants make regarding where to go, whom to interact with, and what services and resources are accessible (Shattell, Hamilton, Starr, Jenkins & Hinderliter, 2008). Discrimination plays a significant role in the development of stress (Kaplan & Marks, 1990), and a relationship has been noted in the literature between high levels of perceived discrimination and behavioral problems with Latino youth (Vega, Khoury, Zimmerman & Gil, 1995). These negative stereotypes can be internalized in Latino immigrants, which has an important impact on the formation of self-identity as well as group-identity. Discrimination can forge cohesion among members of the discriminated group, or it can have the opposite effect, highlighting difference and divisions within a group (Johnson, 1998).

3.3.5 Identity

Identity is understood in many ways; for the purposes of this study, identity is understood as the conceptualization of self (Shinnar, 2008). The formation of self- or group-identity impacts the ways in which Latino immigrants integrate into society and interact with its institutions, including the health care institution. As mentioned previously, for Latino immigrant men, identity is closely linked to the gender roles assigned to males, notably, worker and provider. If

the ability to fulfill these roles is threatened, a man's identity itself is threatened as well. Also, an individual's definition of self-identity is often connected to the various groups to which that individual associates. Social identity theory (Tajfel & Turner, 1986) asserts that "people are motivated to maintain a positive self-concept," and that self-concept is largely derived from group identification (Shinnar, 2008). Discrimination can impact group identity formation. Negative social identity, for instance, forms when "individuals of a minority group come across and internalize negative stereotypes regarding their group" (Shinnar, 2008). These factors play an important role in understanding the social context and dynamics within which Latino immigrants live in the United States. The formation of Latino group identity faces significant challenges, such as high levels of migration to and from countries of origin, and unequal distribution of legal rights and social privileges within the Latino immigrant population, which can reinforce social distinctions and divisions (Johnson, 1998). Intra-group conflict and difficulty in establishing solidarity and cohesion are realities that are faced by many Latino immigrant communities in the United States.

3.4 PITTSBURGH'S UNIQUE CONTEXT

The Latino population in the state of Pennsylvania grew 61.2% between 2000 and 2009 (Pew Hispanic Center, 2011), and currently comprises 5.1% of the total state population. More specifically in Allegheny County, in the 1990 Census data for the County, 7,749 people reported to be Latinos. That number increased to 11,166 in 2000, and nine years later, in 2009, that number was estimated to be 18,818 (Barcousky, 2011). As of 2010, Allegheny County has a Latino population of 19,070, or just under 1.5% of the general population (U.S. Census Bureau,

2010). That represents a population change among Latinos in this county of 71% in ten years. The total population in Allegheny County, however, has decreased in that same time span by 5%. The national proportion of the U.S. population that self-identify as Latino is 15.1% (U.S. Census Bureau, 2009). This disparity is significant, because contexts like Allegheny County, where the Latino population is small but growing rapidly, pose unique challenges to Latino immigrants and service providers alike (Cunningham, Banker, Artiga & Tolbert, 2006). Due to the smaller Latino population, adequate culturally competent and linguistically appropriate services are not available.

The Latino immigrant population is very dispersed geographically, unlike in larger cities with Latino neighborhoods or districts (Documét & Sharma, 2004). This lack of a geographic and social center is not conducive to the formation of a cohesive community identity (Documét, 2001). Also, the Latino immigrant community is diverse in terms of education levels, years in the United States and socioeconomic status. This community also tends to socialize along socioeconomic lines (Documét & Sharma, 2004), which can further divide sub-groups through little to no interaction with members of other sub-groups. As referenced above, these factors may contribute to the difficulty of forming a group identity, which is an essential component of self-identity formation for collectivist cultures, as well as potentially fomenting intra-group divisions, social competition and discrimination (Shinnar, 2008; Documét & Sharma, 2004). Research that has been done about this population in Pittsburgh is scarce. Documét and Sharma (2004) conducted a study examining access to health care for Latino immigrants in Allegheny County, and the financial, cultural and linguistic factors that affect access. DeLuca (2007) conducted qualitative interviews with uninsured members of the Latino immigrant community in Pittsburgh, focusing on how health care and social service needs were being met. DeLuca also

examined the influence of community integration on access to health and social services. Through interviews with community members (both male and female), DeLuca found that access to health and social services is influenced primarily by legal status and the fear of deportation that is associated with it. DeLuca noted that access is also influenced by English proficiency, and the existence and strength of social networks available to an individual; these were also found to be associated with access to services by Documét and Sharma (2004). This current research seeks to contribute to the limited literature on this population in Allegheny County by providing insights about the social and cultural contexts from community members themselves. The exclusive population focus of this study on Latino immigrant men instead of women is based out of results from a currently unpublished study in Allegheny County that showed the salience of loneliness and social isolation in the Latino immigrant male community. That work needs to be expanded upon, and more knowledge generated regarding the unique characteristics of the social context of Latino immigrant men in a new growth community.

3.5 SOCIAL CONTEXT'S RELATIONSHIP TO HEALTH

It is clear that a variety of factors and characteristics of one's social context can impact one's quality of life. Supportive networks help to minimize the risk of loneliness and depression for Latino immigrant men, and conversely, lack of supportive social networks can be a strong source of stress (Apostolopolous et al., 2006). Immigration may result in a marginalization of immigrants due to lack of connectedness with their culture of origin, and also lack of belonging to their new culture (Caplan, 2007). The reality that many Latino immigrant men face is one of weak social support, if any at all, and loss of a sense of identity as part of a collective (Polo &

López, 2007). Stressors due to rigorous work conditions and schedules, discrimination and lack of English proficiency further complicate their experiences by isolating them from the larger society. Acculturation has been discussed previously as having both positive and negative impacts on health, and as varying depending on the resources available to an individual. The unique social contexts within which Latino immigrant men live in Allegheny County, particularly those who immigrate to the United States without family members, may be resulting in negative health and social consequences.

3.6 METHODOLOGICAL CONSIDERATIONS

Understanding the social context of any given community requires a qualitative approach. Social context and its relationship to the health of community members must be understood through the lens of the unique experiences and insights of community members. The scarce studies that exist on the Latino population in Pittsburgh have used both quantitative and qualitative research methods, but these studies are now outdated (Documét & Sharma, 2004) and have focused more generally on the population as a whole (DeLuca, 2007; Documét, 2001), not specifically on Latino immigrant men. This current research serves a distinctive role in its focus on men, as well as its focus on their social contexts from the perspective of community members themselves. The qualitative methodology chosen for data collection is Photovoice, described in detail below.

3.6.1 Photovoice

Photovoice is a relatively new qualitative research methodology, with its first documented use in 1994 (Wang & Burris, 1997). It is rooted theoretically in literature in the field of education about critical consciousness, feminist theory, and documentary photography (Wang & Burris, 1997). The Photovoice methodology places high value on the power of the visual image as a means by which to communicate community expertise and lived experience. The theoretical foundation of critical consciousness has been adapted and applied to health education development by Wallerstein and Bernstein (1988). This foundation comes out of the writings of Brazilian education theorist Paulo Freire (1973), who asserted that education that begins with a problem-posing component enables people to think critically about problems that they express as important and engage in dialogue about those issues (Wang & Burris, 1997). Theoretically, Photovoice methodology expands upon Freire's conceptual framework by utilizing the medium of photography as a means by which community members can dialogue in a group setting about their community and the social and environmental factors that influence their everyday lives (Wang & Burris, 1997). In Freirian terms, the photographs themselves become a sort of "code" that "reflect the community back upon itself, mirroring the everyday social and political realities that influence people's lives" (Wang & Burris, 1994).

Given the small and geographically dispersed character of the Latino immigrant population in Pittsburgh, the group dynamic and dialogue is an important component of this methodology that makes it an appropriate framework within which to engage this community. Underlying the development of the current research, and rooted in the theoretical foundation of Photovoice, paramount value is placed on the belief that community members are the experts on their community's strengths and weaknesses, as well as hopes and dreams for the future.

Community members have "an expertise and insight into their own communities and worlds that professionals and outsiders lack" (Wang & Burris, 1997). This insight is essential in order to develop and implement health education initiatives or programs that will resonate and prove effective on a community level. Photovoice engages community members in a way that allows them to choose the problems or issues that they perceive as relevant and significant, and dialogue with other community members about those issues.

3.6.1.1 Uses of Photovoice

Photovoice has three primary objectives, as stated by its developers: a) to enable individuals to record and reflect their community's strengths and concerns through taking photographs; b) to promote critical dialogue and knowledge about important issues through discussion of photographs; and c) to reach policy and decision makers through public forums and showings of their photographs (Wang, 1999; Wang & Burris, 1994). This methodology has been used with diverse communities around the world that are disenfranchised in some way or that have little influence over the policies that create the circumstances in which they live (Rhodes, Hergenrather, Wilkin & Jolly, 2008). It has been used to address diverse public health and social justice concerns (Catalani & Minkler, 2010), with diverse populations, such as ethnically diverse rural Chinese women (Wang & Burris, 1994), Mayan village women who survived the Guatemalan civil war (Williams & Lykes, 2003), and homeless African American women (Killion & Wang, 2000). Three Photovoice projects have been published that have been done with Latino immigrant populations in the United States: one with Latino adolescents in North Carolina (Streng et al., 2004), one with migrant workers (Rhodes & Hergenrather, 2007), and one with Latino men and women with intellectual disabilities (Jurkowski & Paul-Ward, 2007). Streng and colleagues (2004) conducted a Photovoice project with Latino high school students to

explore the influence that immigration has on their quality of life. Ten adolescents were recruited from a student-run Latino club in a rural North Carolina high school, and participants completed four rounds of photo-taking and discussion. Photo-assignments addressed the general experience of Latino immigrant high school students, including the social activities, celebrations, and challenges.

Streng et al. also utilized a technique called SHOWED to frame probing questions during discussions (see Table 1 below). This technique, used often in Photovoice projects, takes the group through a series of six questions about one or more photographs, with the goal of bringing the conversation to a level at which participants are thinking critically about the context within which their photos were taken, including the social and environmental factors that contribute to their lives as immigrants. Utilizing the SHOWED acronym to elicit responses to questions about the photographs also serves as a bridge between dialogue and subsequent action (Catalani & Minkler, 2010). Formatting the group discussions in this way has been shown in the literature to have a double yield: "producing valuable research data in the form of discussion transcripts and

Table 1. SHOWED Technique

SHOWED Technique	
S	What do you ***see*** in this photograph?
H	What is ***happening*** in the photograph?
O	How does this relate to ***our*** lives?
W	***Why*** do these issues exist?
E	How can we become ***empowered*** by our new social understanding?
D	What can we ***do*** to address these issues?

serving as an empowerment intervention that had immediate benefits" for participants and their communities (Catalani & Minkler, 2010). In Streng et. al's study with Latino high school students, the primary themes that emerged include feelings of rejection, institutional racism, valuing of Latino identity, and the importance of role models.

Rhodes and Hergenrather (2007) were interested in community-level insights into HIV prevention programming, and utilized Photovoice with Latino immigrants aged 18 to 29. They used a shortened version of SHOWED, asking only four questions instead of six, and had four cycles of photo-taking and discussion. Some of the resulting insights from that study were the utilization of informal social networks in HIV education, as well as including Latino nightclubs and local grocers as venues for education and condom distribution. Lastly, Jurkowski and Paul-Ward (2007) utilized Photovoice with a sample of four Latino immigrants with intellectual disabilities as part of a pilot study examining health beliefs and perceptions, as well as exploring the health priorities of this population. Participants were recruited from prior participation in the pilot study in focus groups. Only one cycle of photo-taking was conducted, and instead of group discussion of the photographs, the research team conducted one-on-one interviews with each participant to better fit the needs of the participants. Also, group perceptions had been explored during focus groups earlier in the project. SHOWED was not utilized during the interviews, as interviews had more of an unstructured nature. In discussing their results, the researchers noted the particular strength of the Photovoice method in including participants who are marginalized into the research process, and that Photovoice data resulted in additional information that supplemented other data collection methodologies.

The steps involved in the Photovoice process of data collection begin with introducing the methodology in a group setting, then selecting the photo assignments as a group, giving

instructions and guidance on camera usage and ethical implications, group discussion of photographs taken, and identifying influential leaders to include in the dissemination of results at the end of the project. The group discussions are critically important to this methodology, and are grounded in Freirean methods of utilizing critical dialogue in order to produce social change (Freire, 1970). The SHOWED technique is a common tool to guide these discussions, challenging participants to discuss the implications for social action that their photographs represent (Streng et al., 2004).

Photovoice has several advantages over other qualitative research methods. Participants, instead of the researchers, choose the issues and topics that they deem important to consider and discuss as a group. Though facilitated by the researcher, participants lead the group discussions, and topics for subsequent meetings are dictated by those discussions and consensus among participants. This unique methodological approach allows researchers to obtain critical insights into the community members' priorities, perceived needs, and assets. Photovoice does have disadvantages when compared to other qualitative approaches, including loss of control on the part of the researcher in the direction in which discussions move, dependence on community members to take photographs, and do so in a certain time period, as well as a significant time and resource cost. Despite those disadvantages, the potential for gaining community member perspectives and expertise made Photovoice the methodology of choice for this study.

4.0 METHODOLOGY

This chapter describes the process by which participants were recruited and data was collected throughout the course of the project. I also explain the methodological steps involved data collection and the theoretical framework through which I approached analysis of the data. Data collection was conducted during the month of February 2011 in four weekly meetings. The qualitative research design for this project received approval from the Institutional Review Board of the University of Pittsburgh (PRO11010348) (See Appendix A).

4.1 PHOTOVOICE

The data for this study were collected utilizing the qualitative research methodology of Photovoice. The strength of Photovoice at obtaining community level perspectives through the use of disposable cameras, combined with its history of use with marginalized populations made this the most appropriate methodology for the purposes of this study. Through discussion of the photographs, participants engaged in dialogue as a group about the social context within which the photographs were taken.

4.2 RECRUITMENT

I utilized already existing connections with the community to recruit participants for this study. I have two years of experience working with Latino immigrant men in Allegheny County on a community-based participatory research (CBPR) project at the University of Pittsburgh (manuscript in preparation). An advisory committee (Latino Engagement Group for *Salud*) formed out of that project, which consists of Latino immigrants and non-Latinos that come together every two months to discuss salient topics, future research opportunities, and other activities in the community. As a member of that committee, I am informed by the topics that are discussed in our meetings, and the community leader that aided in recruitment for this study is also on that committee. Through the experiences of working on that study and participation on the committee, I have established professional relationships with community members and community leaders. Through working on the CBPR project, I had high levels of interaction with community members through trainings and other project-related meetings. Recruitment of participants for the current research was made through those professional relationships that I had with community leaders, who aided in identifying potential participants. Inclusion criteria for participation in this study was being a self-identified Latino or Hispanic immigrant male, who speaks Spanish as his first language, lives in Allegheny County and is at least 18 years of age. The age cut-off is in accordance with the definition of an adult utilized by the University of Pittsburgh's Institutional Review Board. Further, a community leader helped greatly in the process of recruitment. This community leader has worked with the Latino immigrant community for several years and is very involved in advocacy work. Through my previous interactions with him and seeing how connected and involved with the community he is, I felt that he would be an ideal leader to aid in recruitment. I asked him to identify individuals from

more than one country of origin and who represented diversity in length of time in the United States. He initially contacted potential participants, and then put them in touch with me. Ultimately, seven Latino immigrant men participated in the project, including the community leader who aided in recruitment. The number of participants was smaller than I had anticipated, but given the time and resource constraints, this size was appropriate and provided sufficient data for this descriptive study.

4.2.1 Participation

Attendance to each of the four discussions was an essential component of the project. However, due to participants' job schedules that often required them to hold more than one job and/or work different hours each week, not all participants were able to attend all meetings. None of the participants missed more than one meeting. In the event that participants were unable to attend, I made sure to call them to tell them what the photo assignment was for the following week and ask if they needed another camera. I also assured them that I valued their participation in the project and hoped they were able to make the next meeting. Table 2 outlines the participation of each participant, labeled P1 through P7.

Table 2. Attendance Per Session

	Introductory Meeting	**Discussion 1**	**Discussion 2**	**Discussion 3**
Participants in attendance	P1 P2 P3 P4 P5 P6 P7	P1 P2 P3 P4 P5 P6 P7	P1 P2 P3 P4 P7	P1 P2 P3 P5 P6 P7

All project meetings were held on Monday evenings in a small conference room at the Graduate School of Public Health. This choice of location was carefully made in response to participants' usage of public transportation, as well as familiarity with the university. Through the CBPR project with the same community mentioned previously (manuscript in preparation), several participants in this current study had come to this building before for meetings, and choose to meet at the university over other public settings. Focus groups for that project were also conducted at the university at the request of the community members who facilitated them. Therefore, the university was a familiar and preferred location for the group discussions for this study. The first meeting had all seven men in attendance. This was an introductory meeting, at which details of the project were described, the Photovoice methodology was introduced, Photovoice training was conducted (described below), and informed consent was obtained from all participants (see Appendix B). I also emphasized at this meeting the protective measures that were in place to assure participants' anonymity: all data would be kept completely confidential and no identifiers would be attached to the data after it was transcribed. At the end of the first meeting, disposable cameras were distributed to all participants. The theme for the first round of photographs was "What does it mean to be an immigrant?" I intentionally chose this broad and general theme in order to allow participants to choose the most salient topics to their lives that characterize the life of an immigrant. I taped a post-it note on the back of each camera with the photo-assignment, as well as the "due date" for the pictures, and my telephone number. This same technique was used for the following meetings to ensure that participants remembered the assignment and had my contact information easily accessible.

Between weeks one and two, I coordinated with the community leader and participants to collect the cameras in order to develop all photos by the next meeting. The first data collection

meeting was held one week following the introductory/training meeting. Six out of the seven participants attended that meeting. Each of those six participants discussed their photographs, as described below. Between weeks two and three, I collected all cameras from participants, as well as delivered a camera earlier in the week to the participant who missed the previous meeting in order that he could continue to participate the following week. Due to work schedules as well as a snowstorm, two participants had to miss the second data collection meeting; therefore, their pictures were not part of the photograph discussion. Between weeks three and four, I again collected cameras throughout the community, and made phone calls to participants who had missed meetings to ensure that they knew they could continue to participate and that their participation and insights were important to the project. Six out of seven participants attended the third and final data collection meeting; the one who missed it became ill the day before the meeting. As compensation for their participation, participants received a gift certificate of $15.00 for each meeting attended (two for Giant Eagle, two for WalMart), as well as food and drinks at the meetings. The project meetings lasted an average of two hours per meeting.

4.3 PHOTOVOICE TRAINING

The training component of Photovoice generally entails training on basic documentary photography skills and knowledge. The depth and breadth that Photovoice training covers has great variability in the literature (Catalani & Minkler, 2010), from no training at all to several weeks long (Wilson, Minkler, Dasho, Wallerstein & Martin, 2006). Due to time and financial constraints, the training that participants received for this research was a one-hour session that covered the topics of basic photography, ethics of photography, and safety (Wang & Burris,

1994). The ethics component of the training included the topic of power, specifically how taking a photograph of someone else gives the photographer a degree of power "to create meaning about the subject of the photograph" (Wang & Redwood-Jones, 2001). The ethics training also set guidelines for taking photographs, including obtaining verbal consent from anyone whose identifiable image is in a photograph, and a guideline against having any faces appear in the photographs.

4.4 LOGISTICAL OBSTACLES

The structure of a Photovoice project introduces many opportunities for obstacles to present themselves. The first obstacle that I faced was the participation of the community leader. Because he was the primary contact and a familiar person to all participants, he came to the project meetings and participated in group discussions. He was not originally going to be a participant, and therefore did not sign an informed consent until the second discussion meeting. While he participated in the first meeting (commenting on the photographs and discussion of others), I could not use the data that he provided due to the lack of informed consent. I was then able to use his data from the second and third discussions. Also, as a community leader and therefore someone who is more connected and involved in the community, he does not represent the voice of an "average" Latino immigrant male. However, while unplanned, his participation was ultimately beneficial to group discussions, as he is seen as a trustworthy leader to five of the six other participants and therefore did not seem to affect what people shared.

Another obstacle for this project was the reliance on participants to take pictures and return cameras to me within a week's time. This proved to be a difficult task, given the busy

work schedules of participants. At the first meeting, the group agreed that the easiest way for me to collect cameras was for them all to give them to the community leader, from whom I would collect the cameras two days before our meeting (to allow time for development of photographs). This worked well the first week, but the subsequent weeks were more difficult. The Saturday before the second and third discussion meetings was spent driving to individual's homes and places of work to collect cameras. Also, not all of the participants took pictures by the Saturday before the next meeting, and therefore I could not collect their cameras until Sunday. This added extra financial cost for faster development of the photos, as well as more time spent collecting them. One of the participants preferred taking pictures on his cell phone to using the disposable cameras. He texted the pictures to my cell phone, which I then emailed to myself and printed for the meeting. This seemed to work better for him and did not present any logistical problems for me.

The final obstacle that I faced was the inclusion of identifiable faces/images in the photographs taken for the project. Although the participants were advised to avoid faces or identifiable images in their photographs, only one of the participants abided by this rule in all photographs. While this did not preclude discussion of those photographs, as that would not threaten the confidentiality of those individuals in the photos, it does preclude the inclusion of those photographs in reports and presentations about the project. I was able to blur the faces in nearly half of the images with faces in them in order to maintain the anonymity of the individual and still utilize the image for the project.

4.5 DATA COLLECTION

Each participant was asked to take three to five photographs for the project per week; the rest they could keep for their own use (many mentioned the desire to send photographs to their families). The number of photographs taken for the project ranged throughout the course of the project from one to seven photographs per participant per week. Photovoice methodology is valued for its unique ability to "uncover rich descriptive information" (Catalani & Minkler, 2010), with particularly useful application in the study of questions of identity and lived experience. That being said, it is also flexible with regard to the specific ways in which data is collected. The Photovoice process produces several types of potential data: the photographs themselves, the audio-recorded discussions of the photographs, and in some cases, participants' written reflections. In the case of this study, the only data source that was utilized and later analyzed was the transcript of the photo-elicited discussions with all participants. I conducted the transcription of all discussions, and because meetings were conducted in Spanish, the transcriptions remained in Spanish. No identifiable information was used in the transcriptions. Each photo-elicited discussion was guided by a three-stage process outlined by the first practitioners of Photovoice (Wang & Burris, 1997): selecting (choosing the photographs that each participant deems most salient or pertinent to that week's topic), contextualizing (telling stories about what the photographs mean to the photographer), and codifying (identifying the issues or themes that emerge from the discussion). At each photo discussion meeting, each participant chose photographs to share with the group and explained his reasons for taking the photograph(s), as well as what the photographs meant to him.

To further facilitate critical analysis, my intention initially was, after each group member shared their photographs and their significance to the photographer, to group photographs by

common themes, and analyze one or two photographs using the SHOWED method (see Table 1, page 27). However, working through each of these contextual questions for a given photograph was too time-consuming to carry out in the first two discussions. Therefore, in the third and last discussion meeting, I budgeted sufficient time to address these questions using just one photograph that participants chose after each participant had shared their photographs to the group.

Photovoice methodology encourages an iterative approach to subsequent weeks' photograph topics. Based on the direction that discussions took, group consensus guided the decision-making process regarding photograph topics for the second and third rounds of taking photographs. As this type of process could present the potential for bias towards the louder, more outspoken voices, I made every effort to ask individuals by name about their ideas or opinions for topics. I utilized a whiteboard on the wall of the meeting room to list every idea that was mentioned, and then we went through the ideas as a group to determine which one to choose. As mentioned above, the first photo-assignment was "What does it mean to be an immigrant?" Group consensus resulted in the following topics for photographs for weeks two and three, respectively: "How does the Latino male define stress?" and "Fun in the Latino community in Pittsburgh."

4.6 ANALYSIS

Elements of the grounded theory approach to analysis of qualitative data guided the analysis and coding of the data for this project. Grounded theory has been utilized for other Photovoice projects in the literature (López, Eng, Randall-David & Robinson, 2005). This approach begins

with an engagement with the data (i.e., reading and re-reading transcripts), and ultimately ends with a theory that comes out of that data (Hesse-Biber & Leavy, 2011). While the development of a theory was not an objective of this study, emerging themes that result from the study may contribute to the development of a theoretical framework that may be applied to program development targeting Latino immigrant men in new growth communities. Transcripts of group discussions were analyzed using paragraph-by-paragraph coding, based off of a list of codes that I developed after reading through the transcripts several times. In-vivo coding was utilized for three codes as well, which entails the development of codes that come out of the exact words of participants (Hesse-Biber & Leavy, 2011). Additionally, I discussed the codes with my advisor, who had read the transcripts. She made suggestions that we discussed, and through these discussions I continued to ask more critical questions. Codes were further analyzed and grouped into categories, and then further reduced into broad themes.

5.0 RESULTS

The data collection for this study took place over the course of four consecutive weeks with a total of seven Latino immigrant men participating. This chapter will detail the content of the photo-elicited discussions, which was initially categorized into codes and, more broadly, into dominant themes. I will first describe the demographic characteristics of the participants, summarize the photograph assignments and discussions, display most of the photographs taken by participants for the project, and then explain the coding system that came out of analysis of the meeting transcripts. Finally, I will describe each dominant theme in detail, using quotes from the transcripts and portions of corresponding photographs.

5.1 PARTICIPANT DESCRIPTION

Preliminary demographic information was collected at the first introductory meeting for all participants. The short questionnaire used to collect this information was modified from one that was utilized in the CBPR project on which I previously worked. This information is presented in Table 3. The average age of participants was 36.4 years, and notably, all but one participant live without their families. The average number of years in the United States was 7.6 years.

Table 3. Participant Demographic Information

Participant ID number	Zip Code	Age	Live with partner or spouse	Highest level of education completed	Country of Origin	Years in the United States
P1	15205	25	No	High school	Mexico	7
P2	15212	58	No	High school	Guatemala	4
P3	15213	22	No	Partial high school	Mexico	5
P4	15219	53	Yes	Elementary	Mexico	14
P5	15212	40	No	High school	Mexico	12
P6	15212	23	No	Elementary	Guatemala	5
P7	15216	34	No	University	Mexico	6

5.2 SUMMARY OF PHOTO ASSIGNMENTS AND DISCUSSIONS

Photovoice methodology suggests an iterative decision-making process for choosing the topic of photographs to be taken by participants for subsequent weeks. I provided the initial assignment for the first photo discussion session, which was "What does it mean to be an immigrant?" At that meeting, participants primarily took photographs of their homes and of their workplaces. A few photographs were taken of transportation and of friends as well. The discussion was heavily focused on the stressors of demanding work schedules and work relationships, as well as stressors from housing arrangements. Another focal point of the discussion was on the pride that participants felt in having followed a dream in order to provide for their families. Participants described the importance of their families and providing for them through working here, and also the transient lifestyle of many Latino immigrants. At the end of that discussion, the group came

to a consensus for the topic of the following week's photographs: How does the Latino male define stress?

The second discussion meeting was again strongly focused on work as a source of stress. Other than work, participants also took photographs of transportation, money and studying. Some participants photographed mechanisms of stress management, such as alcohol, parks and a church. Work was discussed not only as a source of stress, but also as an escape from loneliness. Participants went into more detail regarding the stress of their living arrangements, and the various new roles they must assume as being tenants in a home of several other men. Participants also discussed at this meeting the disconnected nature of the Latino community in Pittsburgh, and their desire for more unity. The group consensus process resulted in the following photograph topic for the third and final week: Fun/Recreation in the Latino community.

The third photograph discussion meeting focused on recreation and various social outlets that participants have in Pittsburgh. We again discussed the role of work in the life of a Latino immigrant male as a source of both stress and satisfaction. We discussed one photograph in detail using the SHOWED method. The photograph that was discussed was from a social gathering of community members in support of a young Latina woman whose husband was deported. While participants acknowledged class and social divisions within the Latino community in Pittsburgh, participants also discussed the benefits of social support and the strengths within the community to take care of its members.

5.3 CODES AND DEFINITIONS

The process of data analysis of meeting transcripts resulted in 35 codes. I initially created codes after reading and re-reading the transcripts, and then defined each code and went through the transcripts a third time. Table 4 provides a list of all codes and their definitions.

Table 4. Codes and Definitions

Code	Definition
Work stress	Any mention of stress directly related to work
Commitment to work	Commitment to one's job, including arriving to work on time doing the best job possible
Unappreciated at work	References to not being appreciated at work, or one's work not being valued
Excessive work hours	Working more than 8-hour long days, or references to double shifts
Transient lifestyle	Living in a place temporarily, or references to moving around frequently
Pride regarding following dream	Any mention of pride related to following a dream, often regarding immigration to the United States
Lack of Latino leadership	Absence of formal and/or informal leadership within the Latino immigrant community in Allegheny County
Obligation to family	The feeling of a sense of responsibility to provide financially for one's family
Worth connected to work	References of work as a source of self-worth
Disconnected community	References to the disconnected nature of the Latino community in Allegheny County, or individuals who are not connected to the rest of their community
Happiness tied to family	Any mention of happiness being connected somehow to the well-being of family in country of origin
Low participation in community	The low turnout of Latino immigrant men to functions or activities
Importance of family	Any reference to family of origin and the important role that family plays in the lives of participants
Pride regarding work	Being proud of one's work, or ability to work
Desire for community	References to the desire or potential benefits from a more cohesive Latino community
Worry about family	Any mention of worry or anxiety related to the well-being of family in one's country of origin
Loneliness	The feeling of solitude, or being alone, with or without the presence of others
Work as coping	Working longer hours in order to occupy one's mind and time

Table 4 continued

Housing stress	Stress or tension in the place where one lives
People not seeking help	References to Latino immigrant men not seeking or accepting help
Socialization	Any mention of socialization between Latino immigrant men
Mistrust in authority	Doubts expressed about those in authority
Fear due to legal status	Fear expressed as a result of immigration status
Ask for help	The need to ask others for help to complete daily tasks
Discrimination	Any reference to being treated differently due to Latino identity
Weather	Weather's relationship to mental/emotional well-being
Voz y voto	The desire for "voice and vote" in policy decisions regarding one's community
Alcohol	References to drinking alcohol alone or with others
Assume new roles	The need to assume roles traditionally assigned to women in the maintenance of a household, such as cooking, cleaning and shopping
Financial stress	Stress related to not having sufficient money
Self-worth	Perceived positive or negative value of self in society
Agachar la cabeza	Any reference to "bowing down one's head" as a sign of defeat
Gracias	Thankfulness for being listened to during discussion sessions
Access to recreation	Any reference to ability or inability to participate in recreational activities
Social support	Examples of social support in the community, or mentions of the benefits of potential social support

5.4 PHOTOGRAPHS PER SESSION

While the discussions that came out of the photographs were the primary sources of data collection, the photographs themselves are important and provide context for the discussions that they prompted. This section is organized by session, and then by participant, displaying the photographs that participants took for the photo assignments each week. I have also added a brief description of what they talked about to give context to the photographs. Not every photograph that was taken for the project is displayed, as many of the photographs that participants took had identifiable images in them, and therefore could only be discussed during the group discussions, and not displayed publicly.

Session 1: What does it mean to be an immigrant?

Participant 1:

Participant 1 only submitted one photograph for the first discussion, and talked primarily about the stressors of work in his life.

Figure 2. Work stressors, P1

Participant 2:

Participant 2 took four photographs for the first discussion, and primarily discussed where he lives as being a lonely place, and a place that makes him miss his family. He also brought a photograph of a mural that was painted by Latino immigrants, and discussed the pride he shares with other immigrants in following his dream and immigrating to the United States to pursue a better life for him and his family.

Figure 3. Housing, P2

Figure 4. Housing, P2

Figure 5. Housing, P2

Figure 6. Pride, P2

Participant 3:

Participant 3 took three photographs for the first discussion. All three were taken in his home. He discussed the difficulty in sharing space with so many people, tensions that arise in his home, and the stress that he has due to having to study for school along with working full-time.

Figure 7. Home Stresors, P3

Figure 8. Home Stressors, P3

Figure 9. School, P3

Participant 4:

Participant 4 took five photographs for the first session, which touched on several topics. He talked about the sometimes tense relationship between immigrants and police, the long hours of work that often characterize immigrants' lives, transportation and mobility being a source of stress for him, places of worship being sources of comfort, and hospitals being places of stress due to language barriers.

Figure 10. Relationship with Police, P4

Figure 11. Work Stress, P4

Figure 12. Transportation, P4

Figure 13. Comfort in Religion, P4

Figure 14. Access to Hospitals, P4

Participant 5:

Participant 5 took two photographs at a social event he attended, which was a boxing match in which a Latino immigrant was boxing. He discussed the joy he finds in socializing with friends after a stressful week of long hours of work.

Figure 15. Social Event, P5

Figure 16. Social Event, P5

Participant 6:

Participant 6 took three photographs for the first session. He discussed the prominent role that work plays in his life, and talked about the commitment of immigrants to getting to work on time and doing well at their jobs.

Figure 17. Work Life, P6

Figure 18. Pride in Work, P6

Figure 19. Dedication to Work, P6

Session 2: How does the Latino male define stress?

Participant 2:

Participant 2 took six photographs for the second discussion. He primarily discussed things that he does to alleviate stress in his life. He takes walks along the rivers, bridges and parks of the city. He also said that many people go to church and professional sports games to alleviate stress as well, although he does not do so.

Figure 20. Stress Relief: River Walk, P2

Figure 21. Stress Relief: Walk along Bridges, P2

Figure 22. Stress Relief: Walk in Parks, P2

Figure 23. Stress Relief: Walk in Parks, P2

Figure 24. Stress Relief: Church, P2

Figure 25. Stress Relief: Sporting Events, P2

Participant 3:

Participant 3 took four photographs for the second session. He discussed the stressors of working two jobs, and also going to school.

Figure 26. Work Stress, P3

Figure 27. Work Stress, P3

Figure 28. Work Stress, P3

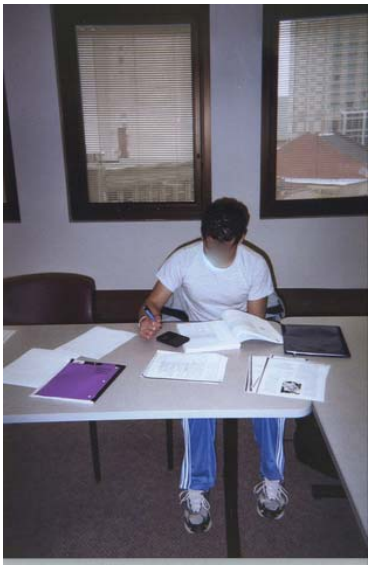

Figure 29. School Stress, P3

Participant 4:

Participant 4 took four photographs for the second discussion. He discussed the stressors of public transportation and the inability to access certain services in the city, and also discussed things in his life that help to alleviate his stress, such as pets, family and projects at his home, such as the fence in the photograph.

Figure 30. Transportation Stress, P4

Figure 31. Lack of access to Services, P4

Figure 32. Pets as Stress Relief, P4

Figure 33. Pride in Work, P4

Participant 5:

Participant 5 took four photographs for the second session. Topics included in his discussion of the photographs were the workplace and money as primary sources of stress, the office of his landlord as a reminder of the bills he has to pay each month, and alcohol consumption as one of the ways in which he copes with stress.

Figure 34. Source of Stress: Work, P5

Figure 35. Source of Stress: Money, P5

Figure 36. Source of Stress: Paying Rent, P4

Figure 37. Alcohol as Stress Relief, P5

Session 3: Fun/Recreation in the Latino community

Participant 2:

Participant 2 took six photographs for the third discussion. He discussed the snow as a way in which to have fun, and said that he goes for walks to enjoy the snow. He also mentioned the baseball stadium as an activity that he enjoys doing in the summer. Finally, he said that many people take walks with their families and go to see shows as a way to have fun, although he does not do those things.

Figure 38. Fun in the Snow, P2

Figure 39. Enjoyment of Snow, P2

Figure 40. Going to Baseball Games, P2

Figure 41. Walking Around the City, P2

Figure 42. Walking Around with Family, P2

Figure 43. Walking through the Cultural District, P2

Participant 3:

Participant 3 took two photographs for the third group discussion. His photographs also involved the snow, and the fun that he and his friends have playing in the snow during the winter.

Figure 44. Playing in Snow, P3

Figure 45. Playing in Snow, P3

Participant 5:

Participant 5 took one photograph for the third session. His photograph was taken at a community event where many community members gathered in celebration of someone's birthday.

Figure 46. Social Gathering, P5

5.5 EMERGING THEMES

After re-coding and writing analytic memos, data was further reduced into three dominant themes that collectively describe the social context of Latino immigrant men in Allegheny County as reported by participants in this study. Those themes are: 1) "*por la familia*" (for the family), 2) self-worth, and 3) marginalization. These three themes were dominant in all three photo-elicited discussions across the various photograph assignments. Table 5 illustrates the organization of the three dominant themes and their associated codes. Several codes fell under more than one theme, as noted by an asterisk in the table.

Table 5. Organization of Themes and Codes

Theme:	*Por la Familia*	Self-worth	Marginalization
Associated Codes:	Work stress* Commitment to work* Pride regarding following dream* Obligation to family Happiness tied to family* Importance of family Worry about family Loneliness* Pride regarding work* Excessive work hours*	Work stress* Unappreciated at work Excessive work hours* Worth connected to work Pride regarding work* Commitment to work* Work as coping Pride regarding following dream* Housing stress Transient lifestyle* Ask for help Happiness tied to family* People not seeking help* Loneliness* Mistrust in authority* Fear due to legal status* Discrimination* *Voz y Voto** Alcohol Assume new roles Financial stress Self-worth* *Agachar la cabeza** *Gracias*	Excessive work hours* Transient lifestyle* Lack of Latino leadership Disconnected community Low participation Desire for community People not seeking help* Socialization Mistrust in authority* Fear due to legal status* Discrimination* Weather *Voz y voto** Access to recreation Social support Self-worth* *Agachar la cabeza** Loneliness*

* Codes marked with an asterisk fell under more than one theme.

The remainder of this section will discuss in detail each of the three dominant themes with illustrative photographs and excerpts from transcripts.

5.5.1 *Por la Familia* (For the Family)

For the purposes of analysis of the transcripts, the theme of *por la familia* is defined as the prominent role that family plays in the life of participants, specifically the desire to provide for

one's family that motivated participants to immigrate in the first place, and continues to motivate them to persevere in the face of difficulties in their daily lives. In all three of the discussions, participants reported time and again the importance of family in their lives despite the physical separation between them. The dream of financially providing for one's family, or *sacar a la familia adelante* (move the family forward, literally translated), was the primary motivation for immigrating to the United States for all but one participant. A sense of obligation to one's family was noted in several participants' responses, as shown below:

> *La mayoría de nosotros está pensando en ganar el sustento diario, porque detrás de nosotros hay una familia que está en espera de algún dinero.*[2]
>
> ***The majority of us are thinking about earning a daily wage, because behind us is our family that is waiting on money.*** *[P2, Session 1]*
>
> *Cada persona que viene aquí, pues, todos traemos un propósito en la vida, sacar adelante la familia. Muchos vienen con un sueño de hacer una casa, porque no tienen, y muchos dicen, no por esto... por mis hermanos. Quizás yo no pude hacer mejor que ellos pero yo quiero una mejor vida para ellos.*
>
> ***Everyone that comes here, well we all bring a purpose in life, to move our families forward. Many come with a dream to build a house, because they don't have one, and many say, no, for this… for my siblings. Maybe I couldn't have it better than them, but I want a better life for them.*** *[P6, Session 1]*

Providing for family was not only a reason for coming to this country, but is also a daily motivator for the participants in persevering through hardships that they face here. The following quotes illustrate this point:

> *Cuando yo estoy trabajando, yo me siento alegre porque sé que es un… como se dice… para mí digo que es como un pan. Un pan más para mí y para mi familia, no?*
>
> ***When I am working, I feel joyful because I know that it is… how do you say it… for me, it is like bread. One more piece of bread for me and for my family, right?*** *[P6, Session 3]*

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[2] All quotes from participants were translated by the author. Each quote is followed by the participant identification number, and to which session the quote pertains.

Missing family was a significant part of daily life for participants. The desire to be near family was mentioned by several participants, yet was contrasted with the necessity of staying in the United States apart from family in order to provide for them, as exemplified below:

> *Bueno, pueden hablar por teléfono y todo eso, pero sí, sienten la necesidad de estar con ellos y disfrutarlos como familia. Pero por otro lado, también se ven, um, también se encuentra con el problema de que deben de estar aquí, y deben de aguantarse porque es la única manera de que ellos pueden mandar dinero a sus casas, familias, para seguir adelante.*
>
> ***Well, [men with children in their country of origin] can talk on the phone and all of that, but […] they feel the need to be with them and enjoy them as family. But on the other hand, they […] encounter the problem that they must be here, and must put up with life here because it is the only way that they can send money to their homes, families, so that they move forward.*** *[P3, Session 1]*

5.5.1.1 Worry about Family

All participants mentioned worrying about their families as a very common component of daily life. The following three quotes from the transcripts illustrate how heavy of a burden worrying about one's family places on participants:

> *Pero a veces, de esos 5 años muchas cosas pueden pasar. Muchas cosas como pueden ser enfermedades, se puede morir uno de su familia de uno y de cómo […] poder decir esa vez, que mira, o "lo siento." Solamente por teléfono. Digo que eso es difícil.*
>
> ***But sometimes, in those 5 years, things can happen. Many things, like illnesses, someone in the family may die, and how […] can you say in that instance, "I'm sorry." Just over the phone. I'm telling you, that is difficult.*** *[P6, Session 1]*
>
> *Lo difícil es, tal vez, saber cuando una de nuestras familias pues está enferma o le pasa algo. Para mí es difícil eso porque la familia está lejos de uno. Y lo difícil saber dice, "mira, a tu mama le pasó esto, a tu hermana le pasó esto." Yo creo que es ese punto a mí me preocupa como inmigrante. Pero pues, yo digo "yo no puedo hacer nada." Pero, pues, sí, para algo sigo el dinero, pues allí está. Y yo digo que esa es la, es un punto para mí en donde me preocupa […] ser inmigrante, porque no puedo ver [a] mi familia.*
>
> ***The difficult thing is, maybe, knowing when one member of our families is sick or something happens. For me that is difficult because family is far away. And it is hard when they say, "look, this happened to your mom, or this happened to your sister." I think it is at that point that I worry as an immigrant. But well, I say, "I can't do***

anything." But yes, for that reason I continue sending money, well there it is. And I'd say that that is the, it is a point where I worry […] as an immigrant, because I cannot see my family. *[P6, Session 1]*

5.5.2 Self-worth

The theme of self-worth is defined as the many factors that contribute to a positive or negative conceptualization of one's worth in society. Participants discussed their own self-worth in various ways throughout the photograph discussion sessions. Self-worth was often discussed as being highly related to participants' jobs or ability to work. Participants indicated a connection between recognition of work, wages earned and one's estimation of his own value:

> *Pero hay muchos de tus jefes que nunca ven lo que tu haces, o sea, nunca ven, a ellos no les importa a veces. Si tu le pides por más aumento de sueldo porque no te alcanza, todo está caro… por eso, uno siempre quiere ganar mas porque uno trata de demostrar el trabajo que el hace. Dice, "mi trabajo vale, entonces por qué no me quieres pagar mas?"*
>
> ***But there are many of your bosses that never see what you do, they never see it. It doesn't matter to them sometimes. If you ask them for a raise because you aren't making ends meet, everything is expensive… for that reason, one always wants to earn more because he tries to demonstrate the work that he does. He says, "my work is worth something, so why don't you want to pay me more?"*** *[P1, Session 2]*

Another participant noted that work is a strategy to combat perceived discrimination:

> *…o piensan burlarse de uno, pero uno, con trabajo, demuestra que no es como ellos piensan.*
>
> ***…or they make fun of someone, but that person, by his work, shows that he isn't how they think he is.*** *[P4, Session 2]*

5.5.2.1 Lifestyle Changes

Self-worth of participants was also reported to be affected by the various changes to their lifestyles as a result of immigrating to the United States. For example, one participant indicated that, due to lack of access to resources such as English fluency, cars, or money, Latino

immigrants have to ask for help and rely on others more than they had to in their countries of origin.

> *Muchas de las cuestiones de problemas también de ser inmigrantes significa que constantemente tenemos que estar pidiendo ayuda, ya sea, para pagar billes, para comprar comida…. Nos vemos forzados a pedir ayuda a las personas.*
>
> ***Many of the problems with being an immigrant mean that we constantly have to be asking for help, be it for paying bills, buying food… We see ourselves as forced to ask for help from others.*** *[P3, Session 1]*

Also, as a result of immigrating to a new country and living with other immigrants that are predominantly male, many participants noted a need to assume new roles and responsibilities that have been traditionally associated with women: cooking, cleaning, and other various household chores. To illustrate:

> *Aquí, bueno, uno tiene que hacer la de mujer y de hombre.*
>
> ***Here, well, one has to do the work of the woman and the man.*** *[P3, Session 1]*

All participants seemed to share this experience, although the way in which they talked about it, laughing and making jokes when people mentioned it, suggested a sense of embarrassment or shame associated with doing these types of activities.

5.5.2.2 Pride

Pride was mentioned by several participants in different contexts. Many participants discussed the pride they have in the work that they do, and the satisfaction that work brings to them personally:

> *Y qué bueno cuando yo paso ocupado en mi trabajo, y me siento contento haciendo lo que estoy haciendo, me siento feliz. Y algunas veces me hace necesitado por mi trabajo, y yo digo "Qué bueno tener trabajo!"*
>
> ***And it's so nice when I am busy at work, I feel content doing what I am doing, I feel happy. And sometimes I feel needed by my work, and I say "How wonderful to have work!"*** *[P2, Session 2]*

Para mí el trabajo es felicidad, alegría, poder trabajar, porque cuando uno tiene trabajo, uno lo tiene todo, no? Uno quiere algo, por medio de un trabajo, uno lo tiene.

For me, work is happiness, to be able to work, because when someone has work, he has it all, right? One wants something, and through work, he has that. *[P6, Session 3]*

Y sobre todo cuando somos nuevos, queremos trabajar lo más que se pueda porque no nada más estamos logrando que nos ofrezcan un trabajo, sino que además podemos apoyar a nuestras familias. Entonces, para uno como inmigrante esto es una felicidad o una diversión, que no lo ve a uno tan pesado. Es una manera de probarnos a nosotros mismos que sí podemos hacer las cosas, en el sentido de que… Muchas veces en nuestros países por la falta de trabajo o la falta de oportunidades, no tenemos esa posibilidad. Y cuando llega uno aquí, y se te ofreces una oportunidad, no lo ve mal; al contrario, lo ve como una oportunidad para poder trabajar incluso más, y poder producir lo que no has, por ejemplo, tenido como oportunidad en tu país.

And above all, when we are new, we want to work the most we can because there is nothing better to achieve than that they offer us work, because then we can support our families. So, for an immigrant, this is a joy or a diversion, that one doesn't see as so burdensome. It is a way to prove to ourselves that yes, we can do things, in the sense that… many times in our countries, for lack of work or opportunities, we don't have that possibility. And when we get here, and an opportunity is presented, we don't see it as bad; to the contrary, we see it as an opportunity to be able to work even more, and to produce what we, for example, haven't had the opportunity to do in our country. *[P2, Session 3]*

Apart from work, pride was also mentioned by one participant in the very fact of being an immigrant. He was proud of the journey that has brought him to this country, and proud of following his dream.

Pero a la vez, creo que [ser inmigrante] es un orgullo, porque nosotros no somos rateros, como nos tratan aquí. No somos matones…. Nosotros nos venimos acá con un sueño, quizás, para sacar a la familia adelante, y yo digo que ser inmigrante para mí no es verguenza, es un orgullo, es un sueño, es un esfuerzo. Porque sabemos que es la única forma en que podemos quizás mejorar nuestra forma de vida en nuestro pais.

But at the same time, I believe that being an immigrant is a source of pride, because we are not thieves, like they treat us here. We aren't bullies… We came here with a dream, maybe, to help our families move forward, and I say that to be an immigrant for me is not a shameful thing, it is a source of pride, it is a dream, it is an effort. Because we know that it is the only way we can improve the way of life in our country. *[P6, Session 1]*

5.5.2.3 *Agachar la Cabeza*

The phrase "*agachar la cabeza*," which literally means to bow down one's head, was used on several occasions to describe the manner in which participants or their friends left a situation in which they felt discriminated against. This phrase represents a devaluation of self-worth in the following situations. Both excerpts from the transcripts are about sports fields, to which participants (or their friends) did not have permission, but attempted to utilize anyway.

> *Y la cosa es que, llegan temprano primero porque se tienen que ir a trabajar como a las 9, y después porque ya está apartada la cancha, y los corren. Entonces ellos no hacen más que agachar la cabeza y salirse porque ya está reservada la cancha.*
>
> ***The thing is that, they got there early first because they had to go to work at 9, and also because the field was already reserved, and they were run off of it. So they just bowed down their heads and left because the field was already reserved.*** *[P7, Session 2]*
>
> *Ellos [americanos] juegan béisbol, y nosotros futból soccer. Y ellos toman una buena parte de la cancha. Y que tenemos que hacer? Agachar la cabeza y salir todos. Y nos ponemos a jugar allí entre los árboles en el parque para no perder la emoción, nos vamos allí al parque entre los árboles, jugando. Por qué? Porque los americanos están allá…. viera como se siente uno de triste, de humillado… y se ponen ellos en sus bases… y quién los va a sacar? Quién los va a tocar allí? Nadie. Nadie. No… pues… para qué los vamos a acercar? Nos vamos todos. Y entonces algunos ya no quieren jugar.*
>
> ***They [Americans] play baseball, and we play soccer. And they take up a good part of the field. And what can we do? Bow down our heads and leave. And we play between the trees in the park to not lose the motivation, so we go over to the park between the trees and play. Why? Because the Americans are there…. If you could see how sad the guys get, how humilliated… and the Americans play on the bases… and who is going to kick them off? Who is going to touch them? Nobody. Nobody. No… so… why would we approach them? We just left. And so now some of them don't want to play anymore.*** *[P2, Session 2]*

5.5.2.4 Mistrust in Authority

A low estimation of self-worth is reinforced by perceived discrimination on behalf of those in authority. A feeling of mistrust in authority and suspicion regarding the intentions of authority figures was reported by several participants. The accompanying photograph for this quote can be seen in Figure 2.

Esta foto la tomé con dos significados: tenerle miedo como inmigrante, y esperar que ellos hagan su trabajo, no contra uno, sino contra los delincuentes. Que a una persona, por tu apariencia hispana, dicen… Si a una persona le está robando y con tal de quedar bien con tu ciudad, agarran a la persona equivocada por agarrar un escaño más, y eso no… no me parece muy correcto.

I took this photo with two meanings: to fear the police as an immigrant, and to hope that they do their job, not against someone, but against delinquents. Because someone has a Hispanic appearance, they say… If someone is being robbed, in order to look good for the city, they grab the wrong person just to fill one more seat, and that doesn't… doesn't seem very correct. *[P4, Session 1]*

Figure 47. Mistrust in Police

This feeling of lack of trust and confidence in authority figures was reiterated by another participant:

El problema del inmigrante es que no tenemos confianza en nuestras – en las autoridades. No, físicamente o emocionalmente no estamos tranquilos porque carecemos de hablar el inglés, eh… es un factor indispensable para todos nosotros…. Aquí no tenemos a quien acudir. No tenemos confianza practicamente con nadie.

The immigrant's problem is that we don't have confidence in our – in the authorities. No, physically or emotionally we don't feel tranquil because we cannot speak English, eh… it is an indispensable factor for all of us…. Here we don't have anybody to turn to. We don't have trust practically in anybody. *[P2, Session 1]*

5.5.3 Marginalization

In the acculturation process, the concept of marginalization, as described in the review of the literature above, is characterized by the state of not yet being part of the new culture, and not supported by cultural ties to the former culture (Caplan 2007). For analysis purposes, marginalization is defined as not having an available culture with which one can identify; this theme also includes the various factors that contribute to the marginalization of participants. While participants never used the word "marginalized" themselves, they each spoke in different ways about how they are not accepted into the new culture in Pittsburgh, yet not able to participate in their former culture from another country.

5.5.3.1 Access to Pittsburgh's Society

Participants indicated difficulties and barriers to accessing various components of society in Pittsburgh. For example, when participants were discussing recreational activities in their community, two participants discussed activities that other people were doing, not they themselves. The specific activities mentioned were participation in church services, attending Steelers and Pirates games, and going to the movies. None of these activities were being done by the participant who was discussing them. That participant, while observing these social outlets, cannot himself attend church services on Sundays due to his work schedule, and cannot afford tickets to Steelers or Pirates games.

> *…la pregunta sería si uno, como inmigrante, tiene acceso a este tipo de eventos, como un estadio, o un juego de los Steelers. Quizás no para todos. Pero, sería bueno tener la oportunidad, porque como dice Julio, es una manera de desestresar un poco, no?*
>
> ***…the question would be if an immigrant has access to this type of event, like a stadium or a Steelers game. Maybe not for everybody. But, it would be nice to have the***

opportunity, because as Julio said, it is a way to de-stress a little bit, right? *[P7, Session 3]*

Participants also mentioned the difficulties they face in reserving soccer fields and a cultural misunderstanding of the rules and regulations that guide such reservations. Participants all noted significant obstacles (language, cost, not knowing the rules) that make accessing and participating in culturally appropriate recreational activities very difficult. One participant, noting the apparent need for immigrants in Pittsburgh in terms of the economy, indicated the legal barriers that stand in the way of Latino immigrants fully integrating into society:

Sobre todo en ciudades como la nuestra se necesita mucho al inmigrante, pero por leyes federales, no se le permite al inmigrante acceder a una comunidad necesitada de inmigrantes.

Above all in cities like ours the immigrant is very needed [for economic reasons], but due to federal laws, the immigrant is not allowed to access that community so in need of immigrants. *[P7, Session 3]*

Another factor that affects access to society in Pittsburgh is working long hours, which all participants reported to do. Working long hours, including double shifts, was mentioned by participants as an escape from their problems, or as a means by which to distract themselves from loneliness or sadness; however, it is not conducive to integration into a society. The photograph that was taken that prompted this section of the transcript can be seen in Figure 3; it is a photograph of the first of two 8-hour shifts that this individual works most days of the week.

Lo hacen [dos trabajos] porque de esa manera, ellos, uh, esa manera es una manera en la cual ellos se encuentran para distraerse, de no pensar tanto en la falta que les hacen su familia, o amigos…. Muchos de nosotros pensamos que teniendo doble trabajo, no vamos a – el tiempo se nos va a pasar rápido, y no vamos a pensar tanto en las preocupaciones que tenemos.

They work two jobs because in that way, they, uh, it is a way in which they can distract themselves, and not think so much about how much they miss their family or friends…. Many of us think that by having double work, we aren't going to – that time is going to pass by more quickly, and we won't think so much about the worries that we have. *[P3, Session 2]*

Figure 48. Work as Escape

5.5.3.2 Loneliness: *Nadie te espera*

Feelings of loneliness can result from marginalization and a lack of social interaction for participants in the study. Several participants mentioned feelings of loneliness. The phrase "*nadie te espera"* literally means "nobody is waiting for you," and was used by two participants. These participants discussed the idea of loneliness in the context of coming home to an empty house after being at work all day:

> *Pero a veces sí, te deprimes, la soledad, si estás solo… bueno, si tienes una novia, bueno, te vas para allá… pero regresas al rato a la casa y se te viene otra vez a la mente, porque nadie te espera. Estás solo allí en el cuarto. Y otra vez juegas con la depresión.*
>
> ***But sometimes yes, you get depressed, the loneliness, if you are alone… well, if you have a girlfriend, okay, you go there for a bit, but you return later to the house and the thoughts come back to your mind because nobody is there waiting for you. You are alone there in your room. And again you play with thoughts of depression.*** *[P1, Session 1]*
>
> *Pero, cuando llegamos o vamos para nuestro departamento, sabemos que nadie nos espera allá, que nadie, nadie… sólo tengo que abrir mi cuarto y ya… es allí donde nosotros inmediatamente ponemos nuestra mente a trabajar pensando en nuestros seres*

queridos, en nuestras familias, nuestra patria. Y bueno, llega el momento en que también nos estresamos por ese motivo, pues.

But, when we get back to our apartment, we know that nobody is waiting for us there… nobody. Nobody. I just have to open my room and already… it is there that our mind immediately begins to churn thinking about our loved ones, our families, our country. And well, the time comes when we also become stressed because of that. *[P2, Session 2]*

The following quote is in reference to Figure 4, and illustrates the essence of marginalization: both the inability to access parts of a society in which one lives and works, yet nostalgic feelings about one's family and inability to fully connect with family:

Aquí tengo una [foto] donde están entrando a una área de cines, y la alegría que se notaba en el rostro de las personas, quizás por el día que estaba muy bonito, para que la familia saliera a divertirse. Y, de veras, eso trajo a mi mente recordar a mi familia; que bonito es salir en familia. Nosotros, como inmigrantes, la mayoría casi siempre salimos solos. Solos. No hay más con quien acompañarnos. Y, de veras, es totalmente diferente a lo que nosotros estamos viviendo la alegría de ellos cuando salen en familia.

Here I have one [picture] where they are entering an area of movies, and you could see the happiness on their faces, maybe because the day was so pretty, so that families could go out and have fun together. We, as immigrants, the majority of us almost always go out alone. Alone. There isn't anyone who can accompany us. And, really, the happiness that they feel when they go out as a family is totally different than what we are living. *[P2, Session 3]*

Figure 49. Access to Recreation

Loneliness was also noted in the context of living arrangements for Latino immigrant men. Several participants discussed the frequent fighting over chores and payment of rent between housemates, and also the feeling of having no other options for housing. This setting results in feelings of loneliness even in the place where one lives.

> *Entonces, algunas de las veces, problemas surgen porque algunas personas no lo quieren hacer… no quieren cumplir con su deber... por ejemplo, limpiar la casa, o puede ser que no están de acuerdo en cuanto, uh, tienen que pagar de renta. Y a veces, aun con ese problema, tienen que estar comiendo en la mesa con ellos, aunque no quieras, te están viendo acá de reojo.*
>
> ***So some of the time, problems arise because some people do not want to do… they don't want to do their chores… For example, cleaning the house, or maybe there is disagreement about how much money they owe for rent. And sometimes, even with this problem, they have to be eating at the same dinner table, even though you don't want to, and they are looking at you out of the corner of their eye.*** *[P3, Session 1]*

5.5.3.3 Disconnected Latino Community

Participants all mentioned the lack of a cohesive Latino community in which they can participate. Two participants mentioned lack of leadership both within the community as well as outside of the community to reach out to Latino immigrants, such as service providers with a heart for this community. One participant, along with other Latino men, attempted to begin a Knights of Columbus group (a Catholic service organization) for Latino men in Pittsburgh. He said the process of trying to get it started was wrought with low participation and competition for power (holding high positions in the group). His closing remarks were indicative of a disconnected and competitive community:

> *Pero si cada quien agarra por su, como, tentáculo de pulpo, uno por aquí, otro por allá, nunca va a agarrar comida, se va a morir de hambre. Así es […]el latino.*
>
> ***But if each person grabs for his, like, octopus tentacle, one in this direction, another in that direction, the octopus will never get any food, and will die of hunger. That is how the Latino is.*** *[P4, Session 2]*

The disconnected nature of the Latino community here was also noted by one participant in particular who had only met one other participant in his five years in Pittsburgh. He discusses the idea of being invisible, and therefore non-participatory in either the old or new culture.

> *Es la primera vez que yo estoy en una reunión latina. Yo nunca he estado. Gracias a usted y a todos que están aquí, porque yo nunca había ido. Yo tengo 5 años acá, y mucha gente dice "Dónde vives? Nunca te he visto." A veces nadie sabe de su existencia.*
>
> ***This is the first time that I am in a Latino meeting. I have never been before. Thanks to you and all that are here, because I wouldn't have come. I have been here for five years, and many people say "Where do you live? I've never seen you." Sometimes nobody can know about your existence.*** *[P6, Session 3]*

The above comment can be interpreted as describing an individual who is socially isolated, living and working in a place where you are not connected to other members of your community. Another participant elaborated on this point, also noting the potential risks that being socially isolated can introduce to an individual.

> *Hay los dos casos, más o menos soy igual, siempre ando en todo, pero hay otros casos en que no salen, por el miedo, o por no tener la comunicación con la comunidad o con más gente. Entonces es peor, porque se deprimen, o no saben cómo sentirse mejor, estar solos.*
>
> ***There are the two cases, more or less I am the same [as another participant], I am always involved in everything, but there are other cases where people don't go out, because of fear, or because of lack of communication with the community or with other people. So it is worse, because they become depressed, or they don't know how to feel better, being alone.*** *[P7, Session 3]*

5.5.3.4 Desire for Sense of Community

Apart from the lack of ability to access non-Latino society in Pittsburgh and the loneliness and social isolation that results from marginalization, there is also a strong desire within the participants of this study for a sense of belonging to a community in Pittsburgh. In various ways, participants discussed wanting more cohesion and unity in the Latino community.

> *Entonces, sí es importante, no sé, hacer un club social o no sé, algo, no sé, algo! Para tener una actividad, para no estar pensando en otras cosas…. Ya teniendo un club social,*

o no sé, haciendo diferentes actividades entre nosotros mismos, vamos a poder sacar este estrés.

So yes, it is important, I don't know, to have a social club or, I don't know, something, I don't know, something! To have an activity, to not be thinking about other things…. Having a social club, I don't know, doing different activities among ourselves, we will be able to get rid of this stress. *[P5, Session 2]*

Siempre admiro los clubes de italianos como de alemanes, y aquí en Pittsburgh precisamente hay salones específicamente para ellos. Y qué bonito sería que algún día nosotros pudiéramos tener un club como hispanos. Cuanta gente hispana hay!

I have always admired the Italian and German clubs, and here in Pittsburgh there are buildings specifically for them. And how great would it be that one day we would have a club as Hispanos. How many Hispanics there are! *[P2, Session 2]*

Along with this desire for a unified Latino community, participants also reported that this project itself served as a source of social support:

Como, por ejemplo, salí del trabajo y preocupado porque ya era un poco tarde, pero contento porque sabía que iba a venir a saludarlos a cada uno de ustedes. Para mí este es… es bueno…. Aunque estamos cansados físicamente, esto nos relaja, nos alivia.

Like, for example, I left work worried because I was running a bit late, but happy because I knew that I was going to greet each one of you. For me this is… good… Even though we are physically tired, this relaxes us, this relieves us. *[P2, Session 3]*

Lastly, at the close of each person's time of sharing or contribution, on many occasions participants ended with the word "gracias." I counted these per session: during the first session, "gracias" was said four times; during the second, it was said six times; during the third session, it was said eight times.

6.0 DISCUSSION

The Latino immigrant population in Allegheny County is small but growing rapidly. The social landscape of this community has changed rapidly as well, and therefore the results of, and insights gained from the scarce research that has been done on this population in the past may not be applicable to the current population in Allegheny County today. This study examined specifically the social context of Latino immigrant men in order to better understand the health and social service needs of this population. To summarize, three dominant themes that characterize this social context emerged from this qualitative study: 1) the paramount role of the family leads immigrants to make sacrifices in order to provide for relatives abroad; 2) individual estimation of self-worth is affected by many factors, including workplace dynamics, pride and social discrimination; and 3) this community is marginalized in Allegheny County, not able to retain close ties with families in the former culture, yet not able to access and participate in society in the new culture. This chapter will: 1) discuss the results of this study as they pertain to findings in relevant literature; 2) describe in further detail the interconnected nature of the dominant themes; 3) discuss the results in the light of pertinent theoretical constructs; 4) discuss potential health implications of the social context described by participants; 5) highlight questions raised from this study; 6) note the strengths and limitations of the study; and 7) discuss implications that the results may have on future program planning.

6.1 RELATIONSHIP TO PREVIOUS RESEARCH

The results of this study correlate with many of the findings in the other two published studies with Latino immigrants in Allegheny County (Documét, 2004; DeLuca, 2007). The disconnected nature of the Latino immigrant community was described in Documét's dissertation research, where she found that Latino immigrants in Southwestern Pennsylvania do not constitute a cohesive community, but "rather a set of small overlapping communities connected to each other by ethnic networks, and many isolated small groups" (2001). DeLuca's study of Latino immigrants also indicated that the lack of community integration among Latinos was negatively affecting the lives of participants (2007). Also, the finding in this current research regarding excessive work hours correlates with results in Documét's study, which also found the tendency of Latino immigrants to use long hours of work as a means to forget about worries or problems. Participants in her study who worked outside the home reported that working long hours was a "temporal 'solution' to their problem, as being busy did not allow them to worry and feel nostalgic all the time" (2001). Further, the studies of both Documét and DeLuca indicated loneliness and social isolation as salient issues that Latino immigrants faced at the time of publishing (2001 and 2007, respectively), as well as the importance of family in the lives of Latino immigrants. Documét and Sharma (2004) discussed the disconnected nature of the Latino community, as well as the related lack of a cohesive group identity from which Latinos may derive their self-identity. This study provides further insight into the impact that this disconnectedness can have on some of the most vulnerable individuals in terms of social isolation and loneliness. Due to the nature of Photovoice methodology, participants were able to express their perspectives and feelings about topics that they deem important, such as the disconnected community, in a uniquely personal manner. The freedom that participants had in

documenting objects or events of their choice in response to photo assignments provided community-level expertise that other methodologies would not be able to access. Hearing participants discuss topics related to marginalization and discrimination in the context of their lived experiences adds another necessary perspective to the literature.

6.2 INTERCONNECTEDNESS OF THEMES

The three major characteristics of the social context of Latino immigrant men in Allegheny County that emerged in this study each may have potential impact on individuals separately, but also are interconnected in the ways in which they affect this population. One way in which they are interconnected is the relationship between *por la familia* and marginalization. The strong connection between Latino immigrant men and the families for whom they are providing financial support (*por la familia*) can potentially hinder emotional attachment to the "new" culture, contributing to the marginalization of this population. However, the reverse is also reflected in the results, insofar as the close emotional connection to family may be a mechanism by which Latino immigrant men buffer themselves against the potential social discrimination and rejection they may face in attempts to engage in American society. *Por la familia* is also an interconnected concept to self-worth. Participants discussed a degree of responsibility that they feel toward their families to provide for them. If they are unable to do so for some reason, or do not live in a way that their families may deem "correct," self-worth (and the pride that underlies it) may be threatened as it is tied so closely to family. The contrary may also be true, that being able to provide for one's family can increase self-worth. Similarly, the concept of self-worth is affected by, and also affecting the process of marginalization. Lower estimations of self-worth

can directly impact motivation to engage with a new culture; conversely, the loneliness and isolation that results from marginalization negatively impacts an individual's self-worth. Further, when participants discussed the places where they live, they talked about how much tension and fighting there is between housemates, which leads to feelings of loneliness even in the place that you live. This feeling of alienation in one's home may feed into marginalization. Thus, the results of this study, both the major themes as well as the various codes that support those themes, are interconnected. Figure 41 further illustrates the interconnectedness of the three dominant themes and the organization of the codes under those themes.

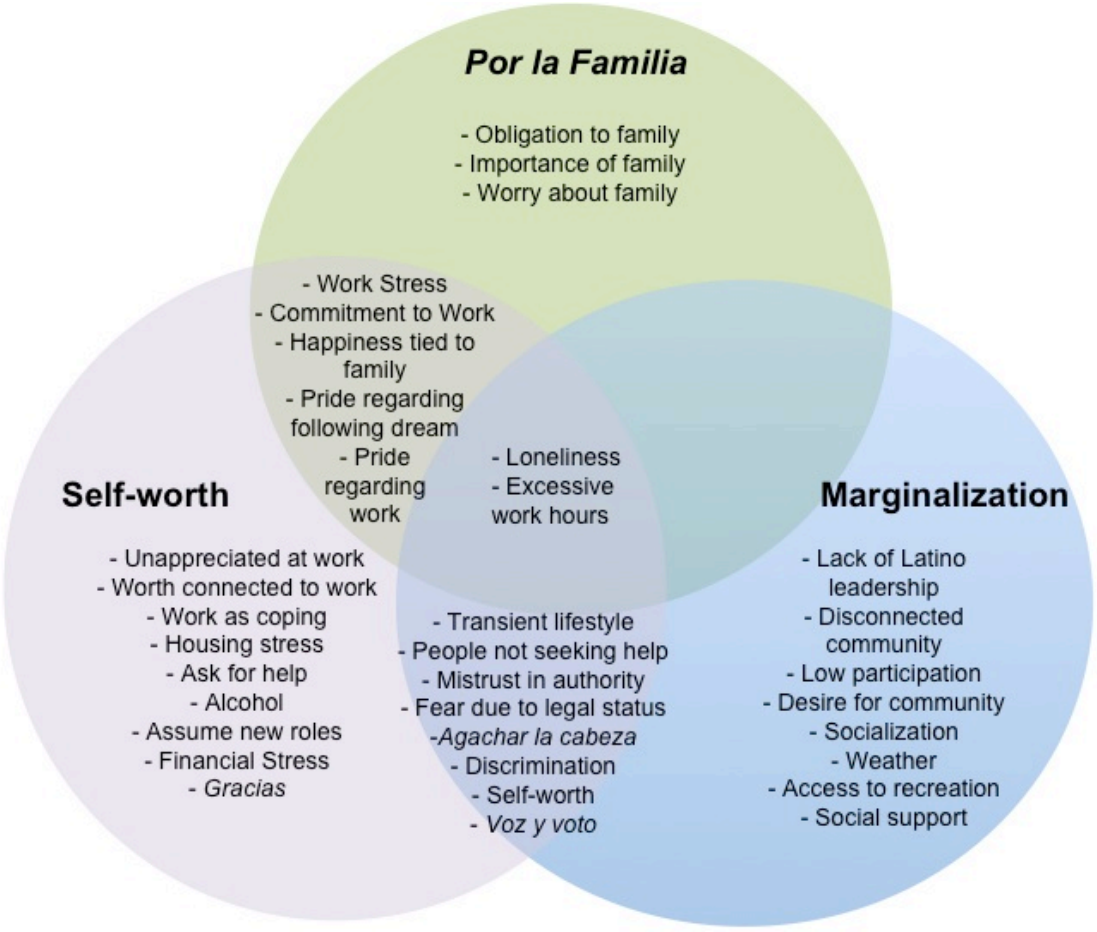

Figure 50. Organization of Codes and Themes

6.3 APPLIED THEORETICAL CONSTRUCTS

The results of this study can be better understood in the context of relevant theoretical constructs. Discussing the themes in various theoretical frameworks provides contextualization of the results in order to better understand how they may be impacting this population in a new growth community. This section will discuss constructs of social identity theory, social identity threat, the modes of acculturation and the social ecological framework as they pertain to this study's findings.

6.3.1 Social Identity Theory

Social identity theory, first developed by Tajfel and Turner (1986), seeks to explain the interactions among different groups in terms of categorization and social conflict, and provides a helpful framework through which to interpret the results of this study. The theory states that individuals are motivated to maintain a positive self-concept, which is rooted in identification with a larger group. The theory also describes the process of establishing positive self-concepts and group identities by favorably comparing one's "in-group" against an "out-group" (Padilla & Perez, 2003). Based on prior research and the results of this study, it is likely that Latino immigrant men derive their sense of individual self-concept from membership or belonging to a larger group. Due to low integration into the predominant culture in Allegheny County, as well as a disconnected Latino culture, Latino immigrant men do not have a positive collective group accessible to them from which they can base their self-concepts. Given the cultural value of collectivism, which asserts that an individual's identity is based on his/her identity as it relates to a collective, or group (Caplan, 2007), the lack of availability of a group identity may have even

greater impact on individual self-concept. The results of this study reflect low self-esteem and self-worth, which, under the theoretical framework of social identity theory, are a logical response to the social environment in which Latino immigrant men find themselves in Allegheny County. The process of acculturation may also be impacting the development of self and group identity, as each member of this community is acculturating in ways unique to him/her, and identifying to varying degrees to U.S. cultural values. Thus, an individual's concept of self-identity depends on the mode of acculturation (mentioned in previous sections) that he/she employs at a given time. Exacerbated by the fact that Allegheny County is a new growth community, where the community is small and does not have social services readily available to it, the lack of a collective group in which to find one's identity may be contributing to a negative self-concept for participants in this study.

6.3.2 Social Identity Threat

Taking social identity theory one step further, Scheepers (2009) investigated the concept of social identity threat with regard to status stability. Social identity threat is another helpful theoretical construct in the understanding of the results of this study. Threats to one's social identity cause individuals to defer to a higher-status group or shut down, whereas challenges, the "motivational opposite" (Scheepers, 2009) to threats, motivate individuals to confront and/or solve the problem at hand. The premise for Scheepers' study was a relationship between status stability and threats to social identity, such that stable inter-group status differences pose threats to the social identity of members of the low status groups. Conversely, unstable status differences pose threats to the identities of members of the high status groups (Scheepers, 2009). Social identity threat arises when the positive self-concept, which is based on comparisons with

out-groups, is undermined or threatened (Scheepers, 2009). Due to the very nature of a low status group lacking the positive distinctiveness from the higher status group, members of the low status group will be more affected by social identity threat. Scheepers describes the threat in terms of physiological manifestations of stress, such as increased blood pressure and ventricular contractility. In various ways, the participants in this current study describe themselves as members of a low status population group in Allegheny County. Due to factors such as legal status, socioeconomic status, lack of access to recreation, low levels of education and lack of English fluency, among others, the distinct categorizations of status within the Latino community and in the County as a whole that deem Latino immigrant men as being of low status are stable and not facing any threats to that stability. Therefore, according to Scheepers' framework, stress results from the constant threats to social identity experienced by Latino immigrant men by the very nature of being the lower status group. This framework can help to explain the high levels of stress reported by participants.

6.3.3 Modes of Acculturation

To further contextualize the results of this study, it is helpful to consider the four modes of acculturation proposed by Berry and Sam (1997): integration, assimilation, separation and marginalization (see Figure 1, page 16). The strategy of integration is used by those who actively seek to become part of the new culture, yet maintain their old culture at the same time; assimilation prioritizes adoption of the new culture; separation implies a stronger emphasis on maintaining the culture of origin and less interest in the new culture; and marginalization infers not becoming part of the new culture, yet not supported by cultural ties to the former (Caplan, 2007). Much of the content of the group discussions indicates that the participants are a

marginalized population, defined by Caplan (2007) as not being connected culturally to the country of origin yet not having cultural ties to the new society either. For example, participants mentioned that they do not have access to soccer fields, and therefore have no "place" to call their own that they may use for recreation. When discussing mistrust in authorities, one participant said that they [Latino immigrant men] do not have confidence or trust "practically in anybody," indicating that they have no advocates in authority to speak on their behalf. Not having a place in society and having no advocates may feed into both self-worth and marginalization. However, some findings may indicate that these men desire integration into the dominant culture in Allegheny County. For example, the frequency of ending their time of sharing with "gracias" is significant in that it may represent an expression of gratitude in belonging to this small community [the group of participants], and may reflect the desire for a sense of community that was explicitly stated at other times by participants. Participants also mentioned a desire to participate in recreational activities. One participant spoke with admiration for the Italian and Polish clubs that he sees around Pittsburgh, and desires to see the Latinos united to form a similar type of organization. Therefore, given that they are a marginalized population, there are indications in the data that they desire integration, but cannot integrate.

Acculturative stress was mentioned in the review of the literature as having three dimensions: instrumental and/or environmental stressors (difficulties in accomplishing daily tasks, accessing services, financial constraints, language barriers), social and/or interpersonal stressors (the loss of social networks, social supports and social standing), and societal stressors (discrimination, contentious political environment) (Caplan, 2007). Participants in this study discussed aspects of each of these three dimensions in the group discussions. The lack of

English was mentioned be several participants as a barrier to accessing services. Loss of social networks and nostalgia for those relationships was reflected in the comments of many participants, coupled with the inability to form social connections due to the disconnected nature of the Latino community. Discrimination and feelings of mistrust in authorities can lead to a contentious environment. Therefore, according to Caplan's conceptualization of acculturative stress, the participants in this study are experiencing acculturative stress, which brings with it associated health risks (Caplan, 2007).

6.3.4 Social Ecological Framework

The social ecological framework provides another helpful lens through which to interpret the results of this study. The social ecological framework asserts that the health of a population is influenced by various contexts: intra-personal, inter-personal, group/cultural, and structural/political (Sallis, Owen & Fisher, 2008). Social ecology is centered on the idea that health and healthy behaviors are "to be maximized when environments and policies support healthful choices, and individuals are motivated and educated to make those choices" (Sallis, Owen & Fisher, 2008). Thus, health involves more than behaviors on the individual level; the contexts in which people live, and the various dimensions that comprise those contexts, are influencing health and the ability of individuals and communities to pursue healthy behaviors. The results of this study reflect factors in each of these contextual dimensions that impact the experiences and lives of participants. On the intra-personal level, the findings regarding self-worth and the various factors that contribute to a negative conceptualization of one's worth may impact the motivation of participants to seek care when it is needed. Loneliness and negative self-worth may result in unhealthy behaviors, such as heavy alcohol consumption and high-risk

activities. On the inter-personal level, participants reported a home environment that is characterized by tension, conflict and loneliness. With regard to familial relationships, in which participants took pride, they also felt the sadness and difficulty of being far away from those closest to them and unable to easily maintain close relationships. The inter-personal dimension of the context in which participants find themselves lacks a supportive environment that promotes healthy behavior, and may result in unhealthy coping strategies for sadness and loneliness. On the group or cultural level, participants described a disconnected Latino community, and lack of unity among community members. This lack of cohesive community is significant for individuals who identify with collectivist culture, as it represents a lack of an important source of identity. Also relevant to this level, participants noted experiences of social discrimination, mistrust in authority figures, and difficulty participating in society, which may increase stress, isolation and unhealthy coping strategies.

The structural/political level of the social ecological framework addresses structural and political factors that influence the lives of participants. The participants in this study are part of an economic migration from Latin America to the United States, comprised of individuals and families who have left their countries of origin to pursue economic opportunities in the United States in order to provide for their families. The amount of money that immigrants send to their families, while small on an individual scale, is massive on an aggregate level: in 2008, $69.2 billion in remittances were sent to Latin America and the Caribbean from immigrants in the United States (Inter-American Development Bank, 2009). The economic needs of participants in this study that motivated their immigration to this country are an important part of the context that influences their ability to lead healthy lives. Further, the theory of political economy urges

the field of public health to examine more closely the economic context of populations to understand, and subsequently address, health issues:

> The "political-economy-of-health" approach … include[s] a macroanalytic, critical, and historical perspective for analyzing disease distribution and health services under a variety of economic systems, with particular emphasis on the effects of stratified social, political, and economic relations within the world economic system. (Morgan, 1987).

In this larger context, the economic factors that contribute to the underdevelopment of participants' countries of origin that make immigration a necessary option for them and their families, as well as the economic system in the United States that utilizes a low-wage labor force to increase productivity, all contribute to the nature of the social context described by participants in this study. Immigration laws in the United States are another relevant dimension of the political context in which participants live, in that immigration status directly impacts health insurance, cost of care, and access to services. Immigration status indirectly impacts health and access to care through the barriers of potential discrimination in seeking health care services and the fear of deportation that prevents many Latino immigrants from seeking care when it is needed (Berk, Schur, Chavez & Frankel, 2000; Berk & Schur, 2001; Shattell, Hamilton, Starr, Jenkins & Hinderliter, 2008). The structural/political level of the context of the participants in this study and the impact that it may have on the health of Latino immigrants is of significant public health consequence. All four dimensions together – intra-personal, inter-personal, group/cultural, and structural/political – are influencing the health of this population in positive and negative ways, and therefore must each be considered in the pursuit of long-term health promotion strategies for this population.

6.4 POTENTIAL HEALTH IMPLICATIONS

This study on the social context of Latino immigrant men in a new growth community points to potential health implications in the community. Many other studies have examined the prevalence of mental health concerns within the Latino immigrant population in the United States (Shattell, Hamilton, Starr, Jenkins & Hinderliter, 2008; Russell & Taylor, 2009; Sobralske, 2006). While that was not an explicit objective of this study, the findings about high rates of stress and social isolation suggest that mental health concerns could exist in this community. Cook, Alegría, Lin and Guo (2009) found that discrimination plays a significant role in the development of mood disorders, recommending interventions that combat discrimination in order to encourage the healthy maintenance of mental health for Latino immigrants. Another study examined the social integration process of Latino immigrants and its relation to the development of psychiatric disorders (Alegría et al., 2007). This study found that exposure to discrimination and perceived low social standing, among others, are risk factors for depression and anxiety disorders. Ultimately, the authors determined that "successful adaptation" into U.S. culture must include "maintenance of family harmony, integration in advantageous U.S. neighborhoods, and positive perceptions of social standing" (Alegría et al., 2007). In the context of a new growth community, the results of this current study in Allegheny County suggest that the Latino immigrant men in my sample lack each of those three components, to varying degrees: 1) participants reported the difficulty of being separated from their families, thereby not able to maintain family harmony; 2) through discussion of difficulty accessing recreational spaces and mistrust in authorities, participants are not able to integrate into neighborhoods that promote integration; and 3) the perceptions that participants have of their social standing in Allegheny County are largely negative, as described above under the theme of

self-worth. While this study in no way seeks to be generalized to all Latino immigrant males, it is significant that the responses of participants indicate a low perception of social standing (through discussion of topics related to marginalization) and contentious relationship with U.S. culture such that integration into that culture, if it is desired, is not accessible to them. According to the framework used by those authors, this context would put the participants at risk of depression and anxiety disorders if they are indeed pursuing integration into U.S. culture (this theory assumes that integration is the goal, not taking into account other modes of acculturation). Even though this study did not measure depression, the men used the word "depresión" themselves on many occasions. Literature has found that Latinos view depression as having social causes, not endogenous biochemical causes (Martinez Tyson, Castañeda, Porter, Quinoz & Carrion, in press; Lackey, 2008), which means that when some of the participants discussed issues such as stress and loneliness, these issues can be understood as signs of depression that they discussed as related to social situations. Outside of the realm of mental health, other physical health implications of the social context described by participants in this study include high levels of alcohol consumption, driving while intoxicated, and physical fights between members of the community.

6.5 QUESTIONS RAISED

This qualitative study of the social context of Latino immigrant men provided insights for further research and gave rise to many other questions regarding this population in new growth communities. In future endeavors, researchers should approach members of this population aware of the contexts that underlie their experiences: highly important ties to their families of

origin, their self-worth being determined by a variety of societal factors, and the reality of being a marginalized population. The results of this study indicate that social isolation is a reality for some Latino immigrant men. The ease with which this small group bonded over the course of four weeks and verbally communicated how much they enjoyed being a part of a group suggests that even small attempts at cohesion are worthwhile and beneficial to community members.

Questions that came out of this study and warrant further investigation include:

1.) How are Latino immigrant men managing the stress and loneliness that characterize their daily lives in the absence of social support?

2.) How is stress affecting Latino immigrant men physically?

3.) How do other Latino immigrants in Allegheny County view their relationship to the broader community?

4.) Why do Latino immigrant men not reach out for help in their community? And if they do, what motivates them to do so? And what is the result of that outreach?

5.) What impact does social isolation have on the physical, mental and social health of individuals over time?

6.) How do families of origin cope when family members emigrate and live abroad? Do family members suffer from similar manifestations of stress as the Latino immigrant men in this study?

7.) How is the identity of Latino immigrant men who immigrate without their families affected by the various new roles they must assume as immigrants (cooking, cleaning, shopping, etc.)? Does this change the nature and understanding of masculinity?

6.6 STRENGTHS AND LIMITATIONS

This study had significant strengths as well as limitations. The primary strength of the study is the depth of qualitative information obtained through the group discussions of photographs. The primary limitation was that all participants were recruited by the same individual. This could have introduced bias in the discussions and results. Another limitation is the small sample size that participated in the study. Due to the time and financial cost involved with Photovoice projects, a larger sample would have been unrealistic for me to conduct; however, the insights of seven Latino immigrant men, while important, are not generalizable to the community as a whole. Related to time constraints, another limitation of this study was the lack of time given to participants between meetings. Participants only had one week to take photographs, which is very short compared to other Photovoice projects in the literature, particularly in a context where participants are working double shifts most days of the week.

Regarding the methods of data collection, one limitation was the topics that might have not been addressed in group discussions because I am a woman. Prior research with Latino immigrant men has shown prevalence of sexual promiscuity and high-risk sexual behavior (Apostolopoulos et al., 2006). A health assessment conducted in Allegheny County with Latino immigrant men came to the same conclusion (manuscript in preparation). However, the participants in this study may have been uncomfortable discussing such topics with me. Also, the nature of the group discussions may have made some of these men uncomfortable at first, depending on their previous experiences with sharing stories from their lives in group settings. This type of setting may introduce bias in the results, as some of the answers may have been the "socially expected" response, given the group setting, instead of truth. However, the group discussion format also helped in building cohesion and openness in the group over the course of

the four weeks of the study, which may have facilitated more honest discussions as time passed. Lastly, the results of the study were driven by the method of group discussion of participants' photographs. A more comprehensive understanding of the social context of Latino immigrant men could have been obtained had I triangulated the data from the group discussions with another data source.

The personal background of the researcher in any study brings with it strengths and limitations. In many ways, I was well positioned to conduct this type of research with this community in Allegheny County. I have worked with the community for nearly two years, which has given me knowledge about their experiences as well as professional relationships with many community members. I developed this study as a result of that longstanding relationship with the community. Previous work experience on a CBPR study with the same population showed me the value and positive results of CBPR framework, which led me to design a participatory study. However, going into a study with ideas already in mind regarding the results may have introduced bias to the data analysis and discussion. Also, I lived in Central America for several years, which, along with fluency in Spanish, gives me a degree of cultural understanding that aided in the facilitation of group discussions, as well as the analysis and interpretation of the data. My personal background as a non-Latino middle-class woman pursuing a Master's degree and using this data for my thesis certainly introduces a power dynamic between myself and the participants of the study. While all attempts were made to negotiate this dynamic, and very good rapport developed between the group and myself rather quickly, the power dynamic may have affected the results. Also, knowing that this power differential existed when designing this project, I intentionally chose a methodological approach that puts power in the hands of participants to guide the direction of the project as a way to

negotiate that dynamic during the project design phase. Further, as someone who grew up utilizing the health care system in the United States, my assumptions about health and treatment of disease are reflective of a biomedical approach to health. These assumptions, likely not shared by participants, may have biased my facilitation of group meetings and interpretation of the data. Lastly, my personal interests in social justice and equality of opportunity for immigrants also impacts the ways in which I interpret what participants said. My personal bias is in favor the participants in this study, therefore I heard and interpreted what they were saying through that lens. The results presented in this thesis may reflect my personal biases and assumptions.

6.7 IMPLICATIONS FOR PROGRAM PLANNING

The results of this study indicate several potential negative health outcomes that result from a social context characterized in the way that participants described: high levels of internalized stress, heavy alcohol consumption as a means of stress management, depression, suicide, and high-risk behaviors. Planning and design of future programs that target this population should approach these health issues acknowledging the context of a social environment that has been described in this study. Programs must take into account social isolation and the individual and community impact it may have, marginalization and the paramount importance of family to individuals in this community as underlying contexts to health promotion and disease prevention. Particularly in the nuanced context of a new growth community, where services are not yet available that are able to meet the cultural and linguistic needs of this population, health and social service providers must consider the social dynamics that are at play in this community that

are impacting both health and access to services. The problems that this population faces, as described in the results of this study, are primarily social problems, and thus require social responses in order to address them. In its current state, the reality within which Latino immigrant men live in Allegheny County does not provide the social support and social network needed for members of a collectivist culture. Existing health infrastructure must take into account this reality, particularly when designing care, support and prevention programs.

APPENDIX A

INSTITUTIONAL REVIEW BOARD APPROVAL LETTER

University of Pittsburgh
Institutional Review Board

3500 Fifth Avenue
Pittsburgh, PA 15213
(412) 383-1480
(412) 383-1508 (fax)
http://www.irb.pitt.edu

Memorandum

To: Andrea Kamouyerou

From: Christopher Ryan, PhD , Vice Chair

Date: 2/1/2011

IRB#: PRO11010348

Subject: Images of an Invisible Community: A Photovoice Project with Latino Immigrant Men in Allegheny County

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The University of Pittsburgh Institutional Review Board reviewed and approved the above referenced study by the expedited review procedure authorized under 45 CFR 46.110 and 21 CFR 56.110. Your research study was approved under:
45 CFR 46.110.(6)
45 CFR 46.110.(7)

Approval Date: 2/1/2011
Expiration Date: 1/31/2012

For studies being conducted in UPMC facilities, no clinical activities can be undertaken by investigators until they have received approval from the UPMC Fiscal Review Office.

Please note that it is the investigator's responsibility to report to the IRB any unanticipated problems involving risks to subjects or others [see 45 CFR 46.103(b)(5) and 21 CFR 56.108(b)]. The IRB Reference Manual (Chapter 3, Section 3.3) describes the reporting requirements for unanticipated problems which include, but are not limited to, adverse events. If you have any questions about this process, please contact the Adverse Events Coordinator at 412-383-1480.

The protocol and consent forms, along with a brief progress report must be resubmitted at least one month prior to the renewal date noted above as required by FWA00006790 (University of Pittsburgh), FWA00006735 (University of Pittsburgh Medical Center), FWA00000600 (Children's Hospital of Pittsburgh), FWA00003567 (Magee-Womens Health Corporation), FWA00003338 (University of Pittsburgh Medical Center Cancer Institute).

Please be advised that your research study may be audited periodically by the University of Pittsburgh Research Conduct and Compliance Office.

APPENDIX B

INFORMED CONSENT IN ENGLISH & SPANISH

CONSENT TO PARTICIPATE IN A RESEARCH STUDY

TITLE: Images of an Invisible Community: A Photovoice Project with Latino Immigrant Men in Allegheny County

PRINCIPAL INVESTIGATOR: Andrea Kamouyerou, MPH Candidate
Graduate School of Public Health
University of Pittsburgh
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Pittsburgh, PA 15261
Telephone: 412-398-3184

RESEARCH MENTOR: Patricia Documét, MD, DrPH
Graduate School of Public Health
University of Pittsburgh
130 DeSoto St., Room 223
Pittsburgh, PA 15261
Telephone: 412-624-1601

Why is this research being done?
Latino immigrant men represent a relatively new and growing population group in Allegheny County. There are not many services offered to this community that are culturally and linguistically appropriate. It is important to understand the social and health-related context to be able to develop and offer appropriate and effective services that promote health in the Latino community in Allegheny County. This project will help us to better understand the social context and lived reality of this community.

Who is being asked to take part in this research study?
You are being asked to participate in this research project because you are a Latino immigrant male who is at least 18 years old and lives in Allegheny County.

What procedures will be performed for research purposes?
If you decide to participate in this research project, you will participate in 4 meetings with up to 5 other participating men. Each meeting will last 45-60 minutes and will be audio-recorded. The principal investigator will listen to the recording and transcribe it for purposes of analysis. The first meeting will be an introduction to the Photovoice project, and you will also be asked some questions about yourself, such as your zip code, age, and work. In the meeting you will be given a disposable camera and asked to take 3 to 5 photographs about your life as a Latino immigrant male. In the next meeting, you will be asked to share about the reasons that you took your photographs and what they mean to you. After the discussion of the photographs, we will decide as a group the topic for the next meeting's photographs. There will be three cycles of taking pictures and discussing them. All meetings will be in the language the group of participants prefers, either English or Spanish.

What are the possible risks or benefits associated with this research study?
Participation in the project and meetings could make some people feel uncomfortable. If a question makes you feel uncomfortable, you do not have to answer it. There are no direct benefits to you for participating in the project. We do not believe that it is a significant risk to participate in the meetings. However, the information you provide could contribute to better understanding of the Latino population. Breach of confidentiality is always a potential risk in research studies.

What are the costs and payments associated with this research study?
There is no cost for participating in this project. As compensation for your time, you will receive a gift certificate of $15 for participating in each 45-60 minute meeting.

Who will know about my participation in this research study?
The information that you give us will be kept confidential. All results will be kept under lock and key. Your name will not appear in any report or publication. In addition to the investigators of this study, authorized representatives from the University of Pittsburgh Research Conduct and Compliance Office may review your data for the purpose of monitoring the conduct of this study. In unusual cases, your research records may be released in response to an order from a court of law.

Is my participation in this research study voluntary? May I leave if I choose to do so?
Your participation in this research study is completely voluntary. You may leave the project at any time. Whether or not you take part in this research project or if you decide to leave the project after you have accepted to participate will not have any consequences whatsoever. If you do not want to respond to a topic during the photograph discussions, it will not affect your further participation in the project. If you choose to stop participating at any point during the study, you will be asked whether or not you permit the inclusion of the information you have provided up until that point in the study results. Your withdrawal from the study will have no negative consequences for you.

*****

VOLUNTARY CONSENT

All of the above has been explained to me and all of my current questions have been answered. I understand that I am encouraged to ask questions about any part of this research study during the course of this study, and that such future questions will be answered by the researcher listed on the first page of this form.

Any questions which I have about my rights as a research participant will be answered by the Human Subject Protection Advocate of the IRB Office, University of Pittsburgh (412-578-8570).

By signing this form, I agree to participate in this research study. A copy of this consent form will be given to me.

_____ _____

Participant's Signature Date

CERTIFICATION OF INFORMED CONSENT

I certify that I have explained the nature and purpose of this research study to the above-named individual, and I have discussed the potential benefits and possible risks of study participation. Any questions the individual has about this study have been answered, and we will always be available to address future questions as they arise.

_____ _____

Printed Name of Person Obtaining Consent Role in Research Study

_____ _____

Signature of Person Obtaining Consent Date

CONSENTIMIENTO PARA PARTICIPAR EN UN PROYECTO DE INVESTIGACION

TITULO: Images of an Invisible Community: A Photovoice Project with Latino Immigrant Men in Allegheny County

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Teléfono: 412-624-1601

¿Por qué estamos haciendo este proyecto de investigación?
Los hombres inmigrantes latinos representan un nuevo grupo creciente en el Condado de Allegheny. No hay muchos servicios ofrecidos que son apropiados para esta comunidad en cuanto al idioma y la cultura. Es importante entender el contexto tanto social como de la salud para poder desarrollar y ofrecer servicios apropiados y efectivos que promuevan la salud integral en la comunidad latina en este Condado. Este proyecto nos ayudará a entender mejor el contexto social y la realidad vivida de esta comunidad.

¿A quién se le pide que participe en este proyecto de investigación?
Se le está pidiendo que participe en este proyecto de investigación, porque usted es un hombre inmigrante latino que tiene por lo menos 18 años de edad, y que vive en el Condado de Allegheny.

¿Qué procedimientos son parte de este proyecto de investigación?
Si decide ser participante en este proyecto de investigación, usted participará en 4 reuniones con otros 5 hombres participantes. Cada reunión durará de 45 a 60 minutos y será grabada. La investigadora principal escuchará la grabación y la transcribirá para ser leída para análisis. La primera reunión será una introducción al proyecto de Photovoice, y también se le harán algunas preguntas sobre usted, como su código postal, edad, y trabajo. Se le dará una cámara desechable y se le pedirá tomar unas 3 a 5 fotos relacionadas a la realidad vivida de los hombres inmigrantes latinos. En la siguiente reunión, se le pedirá que comparta la razón por la cual tomó las fotos y lo que significan para usted. Después de la discusión, decidiremos como grupo el tema de las fotos para la siguiente reunión. Habrán tres ciclos de tomar fotos y discutirlas. Todas las reuniones serán en el idioma que el grupo participante prefiera, ya sea español o inglés.

¿Cuáles son los posibles riesgos y beneficios relacionados al proyecto?

La participación en el proyecto les pudiera quizá incomodar a algunos. Si una pregunta o tema de discusión le incomoda, no la tiene que contestar. No hay beneficios directos para usted por participar en el proyecto. No creemos que sea un riesgo participar en las reuniones. Sin embargo, la información que nos ofrezca podrá contribuir a entender mejor la población latina en el Condado de Allegheny. La violación de la confidencialidad es siempre un riesgo potencial en los proyectos de investigación.

¿Cuáles son los gastos y pagos relacionados al proyecto?
No hay ningún costo por participar en este proyecto. Como compensación por su tiempo, recibirá un cupón ("gift certificate") de $15 por participar en cada reunión.

¿Quién sabrá de mi participación en este proyecto de investigación?
La información que nos proporcione es confidencial. Todos los resultados se mantendrán guardados bajo llave. Su nombre no aparecerá en ningún reporte o publicación. Además de los investigadores de este estudio, los representantes autorizados de la Universidad de Pittsburgh y la Oficina de Investigación de Conducta y Cumplimiento podrá revisar los datos con el fin de supervisar la realización de este estudio. En casos excepcionales, sus registros de investigación puede ser puesto en libertad en respuesta a una orden de un tribunal de justicia.

¿Es mi participación en este proyecto de investigación voluntaria? ¿Puedo retirarme si lo deseo?
Su participación en este proyecto de investigación es completamente voluntaria. Se puede retirar cuando lo desee. El que participe o no en este proyecto o si decide no seguir adelante después de haber aceptado no tendrá consecuencia alguna para usted. Si no desea responder a cualquier tema en la discusión de las fotos, no afectaría su participación en el proyecto. Si decide dejar de participar en cualquier momento durante el estudio, se le preguntará si permite o no quiere permitir la inclusión de la información que ha proporcionado hasta ese momento en los resultados del estudio. Su retirada del estudio no tendrá consecuencias negativas para usted.

****

CONSENTIMIENTO VOLUNTARIO
Se me ha explicado todo lo anterior y todas mis preguntas han sido contestadas. Entiendo que durante este proyecto de investigación puedo hacer más preguntas sobre cualquier aspecto del proyecto, y que las preguntas que tenga me serán respondidas por la investigadora mencionada en la primera página de esta forma.

Cualquier pregunta que tenga sobre mis derechos como participante en un proyecto de investigación me será respondida por el Human Subject Protection Advocate de la Oficina del Comité de Etica, en la Universidad de Pittsburgh (412-578-8570).

Al firmar esta forma acepto participar en este proyecto de investigación y se me entregará una copia de esta forma.

_____ _____
Firma de Participante Fecha

CERTIFICACION DEL CONSENTIMIENTO INFORMADO

Certifico que le he explicado a la persona arriba mencionada la naturaleza y propósito de este proyecto de investigación, y que le he explicado los posibles riesgos y beneficios de su participación en él. Responderé a cualquier pregunta que la persona tenga acerca de este proyecto de investigación, y siempre estaremos disponibles para responder a preguntas que pudieran presentarse en el futuro.

_____	_____
Nombre de la Persona que Obtiene el Consentimiento	Rol en el Proyecto
_____	_____
Firma de la Persona que Obtiene el Consentimiento	Fecha

APPENDIX C

SUMMARY OF FINDINGS

This study utilized Photovoice methodology to elucidate characteristics of the social context of Latino immigrant men in Allegheny County. As a County in which the Latino immigrant population comprises under 1.5% of the population, very little information is known about the needs of this community. Through a small sample of Latino immigrant men, this study revealed the following predominant characteristics of their social context:

1.) The paramount role of the family leads immigrants to make sacrifices in order to provide for relatives abroad.

2.) Individual estimation of self-worth is affected by many factors, including workplace dynamics, pride and social discrimination.

3.) This community is marginalized in Allegheny County, not able to retain close ties with families in the former culture, yet not able to access and participate in society in the new culture.

Future program planning must take into account these underlying contexts that are at play in this population, as they may be influencing health and health care seeking behavior.

RESUMEN DE LOS RESULTADOS

Este estudio utilizó Photovoice, una manera de hacer investigaciones usando cámaras desechables y discusión en grupo, para explorar las características del contexto social de los hombres latinos inmigrantes en el condado de Allegheny. Como condado en el que la población inmigrante latina abarca menos de 1,5% de la población, la información se conoce muy poco acerca de las necesidades de esta comunidad. A través de un pequeño grupo de hombres latinos inmigrantes, este estudio reveló las siguientes características predominantes de su contexto social:

1.) El rol primordial de la familia lleva a los inmigrantes a hacer sacrificios con el fin de proporcionar a los familiares en el extranjero.

2.) Los hombres latinos inmigrantes ven su autoestima afectada por muchos factores, incluyendo el trabajo, el orgullo y la discriminación social.

3.) Esta comunidad es marginada en el condado de Allegheny, porque no se puede mantener estrechos vínculos con las familias en la cultura de su país de origen, y tampoco pueden acceder y participar en la sociedad en la nueva cultura.

La planificación de futuros programas debe tener en cuenta estos contextos que existen en esta población, ya que pueden influir la salud y la búsqueda de servicios de salud.

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