INDIGENOUS RESOURCES OF MEXICAN-AMERICANS:
PERCEPTIONS AND UTILIZATION

Rudolfo Borrego

Submitted in partial fulfillment of the requirements
for the degree of Doctor of Social Welfare
in the School of Social Work

COLUMBIA UNIVERSITY
1983

DSW converted to Ph. D. in 2011
INDIGENOUS RESOURCES OF MEXICAN-AMERICANS: PERCEPTIONS AND UTILIZATION

Columbia University

Copyright 1983 by Borrego, Rodolfo
All Rights Reserved

DSW converted to Ph. D. in 2011
ABSTRACT

INDIGENOUS RESOURCES OF MEXICAN-AMERICANS: PERCEPTIONS AND UTILIZATION
Rudolfo Borrego

Purpose

The purpose of the study was to examine the network of indigenous resources of the Mexican-American community. Further, it was the purpose of the study to explore the knowledge of the respondents regarding the issue of concern.

The objectives of this study were threefold. The primary objective was to contribute to the body of knowledge on Mexican-Americans and secondly to explore their network of indigenous resources. The final objective of this study was to contribute to theory development and provide recommendations for social work practice and intervention with Mexican-Americans.

Method

The study was exploratory-descriptive, and the setting for the research was Tulare County in the Central San Joaquin Valley, California.

The host agency for the study was Tulare County Headstart and Child Care Agency. Thirty-six couples, 18 first generation and 18 second generation were randomly selected as the sample of the study. None of the participants were past or present, a client of Mental Health Services, which was one of the criteria for the sample selection.
Respondents participated in interviews that were prearranged. The interviews were facilitated with a research instrument designed to explore the most salient elements of the network of indigenous resources. Analysis of the data collected was performed by qualitative and quantitative methods.

Conclusions

Generally the data revealed that a well defined and functioning system of indigenous resources exist among Mexican-Americans. On most aspects of the indigenous resources and utilization, no difference was determined between the first and second generation respondents.

It was found that the sample was youthful and involved in the life tasks of child rearing and family development. Their outlook on life is controlled by a well developed system of belief which is guided by belief in God and evil. Their overall family orientation was extended in nature and in some cases friends and compadres were considered as part or extension of the family. Finally, it was found that curanderos and priests/ministers have a significant role for the respondents in regard to provision of assistance/help for life problems.

Recommendations

The findings have implications for social work theory development and social work practice. Sensitivity and awareness
is necessary in relation to the cultural, social, and environment of Mexican-Americans. This is of critical importance in the provision of intervention and services. Further social work practitioners need to be cognizant that Mexican-American clients within their relationships and beliefs may possess a wealth of indigenous resources. And a concerted effort must be made to engage the indigenous resources as part of the helping system.
INFORMATION TO USERS

This reproduction was made from a copy of a document sent to us for microfilming. While the most advanced technology has been used to photograph and reproduce this document, the quality of the reproduction is heavily dependent upon the quality of the material submitted.

The following explanation of techniques is provided to help clarify markings or notations which may appear on this reproduction.

1. The sign or "target" for pages apparently lacking from the document photographed is "Missing Page(s)". If it was possible to obtain the missing page(s) or section, they are spliced into the film along with adjacent pages. This may have necessitated cutting through an image and duplicating adjacent pages to assure complete continuity.

2. When an image on the film is obliterated with a round black mark, it is an indication of either blurred copy because of movement during exposure, duplicate copy, or copyrighted materials that should not have been filmed. For blurred pages, a good image of the page can be found in the adjacent frame. If copyrighted materials were deleted, a target note will appear listing the pages in the adjacent frame.

3. When a map, drawing or chart, etc., is part of the material being photographed, a definite method of "sectioning" the material has been followed. It is customary to begin filming at the upper left hand corner of a large sheet and to continue from left to right in equal sections with small overlaps. If necessary, sectioning is continued again—beginning below the first row and continuing on until complete.

4. For illustrations that cannot be satisfactorily reproduced by xerographic means, photographic prints can be purchased at additional cost and inserted into your xerographic copy. These prints are available upon request from the Dissertations Customer Services Department.

5. Some pages in any document may have indistinct print. In all cases the best available copy has been filmed.

University Microfilms International
300 N. Zeeb Road
Ann Arbor, MI 48106
## TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>LIST OF TABLES</th>
<th>iv</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACKNOWLEDGEMENTS</td>
<td>v</td>
</tr>
</tbody>
</table>

### CHAPTER

#### I. INTRODUCTION
- Statement of Problem. ........................................... 2
- The Research Problem. .......................................... 8
- Objectives of the Study ......................................... 11
- Research Assumptions. ........................................... 11
- Significance of Study ........................................... 13

#### II. REVIEW OF LITERATURE
- Indigenous Resources of Mexican-Americans .................. 27
- General Systems Theory. ......................................... 44
- Summary .......................................................... 45

#### III. METHODOLOGY
- Introduction ..................................................... 49
- Research Design Assumptions .................................. 51
- Definition of Concepts ......................................... 54
- Selection of Study Population ................................ 59
- The Agency ....................................................... 60
- The Sample ...................................................... 62
- Sampling Procedure ............................................ 63
- Data Collection ................................................ 64
- Pilot Study ...................................................... 66
- Timelines of Data Collection .................................. 68
- The Interviewers ............................................... 69
- Reliability and Validity ....................................... 70
- Data Analysis .................................................. 71
- Structure of Study ............................................. 75

#### IV. DEMOGRAPHIC CHARACTERISTICS
- Ethnicity ......................................................... 77
- Primary Language ............................................... 79
- Average Age of Couples ........................................ 81
- Family Size .................................................... 83
<table>
<thead>
<tr>
<th>CHAPTER</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>86</td>
</tr>
<tr>
<td>Employment</td>
<td>88</td>
</tr>
<tr>
<td>Income</td>
<td>90</td>
</tr>
<tr>
<td>Summary</td>
<td>92</td>
</tr>
<tr>
<td>V. BELIEF SYSTEM.</td>
<td>94</td>
</tr>
<tr>
<td>Religion</td>
<td>94</td>
</tr>
<tr>
<td>Belief in God</td>
<td>99</td>
</tr>
<tr>
<td>Belief in Evil</td>
<td>105</td>
</tr>
<tr>
<td>Summary</td>
<td>110</td>
</tr>
<tr>
<td>VI. THE FAMILY, EXTENDED KIN, AND FRIENDS/COMPADRES AS A RESOURCE.</td>
<td>112</td>
</tr>
<tr>
<td>Introduction</td>
<td>112</td>
</tr>
<tr>
<td>Family and Extended Kin</td>
<td>127</td>
</tr>
<tr>
<td>Compadres and Friends</td>
<td>133</td>
</tr>
<tr>
<td>Summary</td>
<td></td>
</tr>
<tr>
<td>VII. CURANDEROS AND PRIESTS/MINISTERS AS HELPERS.</td>
<td>135</td>
</tr>
<tr>
<td>The Curandero</td>
<td>136</td>
</tr>
<tr>
<td>Priest and Minister</td>
<td>149</td>
</tr>
<tr>
<td>VIII. SUMMARY OF FINDINGS, INTERPRETATIONS AND IMPLICATIONS.</td>
<td>164</td>
</tr>
<tr>
<td>Introduction</td>
<td>164</td>
</tr>
<tr>
<td>Purpose and Objectives of the Study</td>
<td>164</td>
</tr>
<tr>
<td>Literature Review</td>
<td>165</td>
</tr>
<tr>
<td>Review of the Methodology</td>
<td>167</td>
</tr>
<tr>
<td>Review of the Assumptions</td>
<td>169</td>
</tr>
<tr>
<td>Summary of Findings</td>
<td>170</td>
</tr>
<tr>
<td>Demographic Characteristics</td>
<td>170</td>
</tr>
<tr>
<td>Findings</td>
<td>171</td>
</tr>
<tr>
<td>Belief Systems Findings</td>
<td>171</td>
</tr>
<tr>
<td>Family, Extended Kin, and Friends/Compadres Findings</td>
<td>174</td>
</tr>
<tr>
<td>The Curandero and Priests/Ministers Findings</td>
<td>175</td>
</tr>
<tr>
<td>Interpretation of Findings</td>
<td>179</td>
</tr>
<tr>
<td>Discussion of the Problems and Limitations</td>
<td>188</td>
</tr>
<tr>
<td>Limitations for Practice</td>
<td>190</td>
</tr>
<tr>
<td>Suggestions for Further Research</td>
<td>197</td>
</tr>
</tbody>
</table>
LIST OF TABLES

TABLE                                 PAGE
1. Ethnicity by Couples                 78
2. Dominant Language                   80
3. Average Age of Couples              82
4. Family Size                         85
5. Average Education of Couples        87
6. Employment                          89
7. Family Income                       91
8. Last Occasion of Assistance         119
9. Kind of Problems                    122
10. Reason for Providing Assistance     124
11. Assistance Provided by Compadres/Friends 130
12. Types of Curanderos                139
13. Utilization of Curandero           142
14. Path to a Curandero                145
15. Utilization of Clergy              152
16. Pathways to Priest/Minister        155
17. Kinds of Problems                  158
18. Assistance Provided                 160
ACKNOWLEDGMENT

I would like to gratefully acknowledge and thank the continued support, encouragement and assistance that my life partner, Margarita Prado Borrego, LCSW, MFCC gave me throughout the involvement of this project. Also, I acknowledge Dr. Samuel O. Miller for his patience and invaluable assistance.
CHAPTER I
INTRODUCTION

This is an exploratory, descriptive study on the network of indigenous resources that Mexican-Americans utilize. These indigenous resources appear to be a significant support or resource and needs to be examined in terms of its role among Mexican-Americans and its potential for social work practice, service and program development. Indigenous resources are those helping sources found within the family, community and network of relationships. These resources can be, but are not limited to folk medicine and psychiatry, indigenous counselors, religion, emotional/psychological support and material assistance.

1The Mexican-American people for the most part are a people that descended from Mexican Indian and Spanish settlers in Mexico. Hence, Mexican-Americans are predominantly mestizo. In this country, Mexican-Americans primarily reside in the Southwest Region. However, Mexican-Americans have migrated throughout the United States.
Statement of Problem

The idea for the study evolved from reports and studies that indicated a different experience regarding utilization of mental health services by Mexican-Americans in the Southwest,¹ and in specific, the Central San Joaquin Valley in California.² The findings and conclusions suggest that Mexican-Americans, for the most part, do not avail themselves of established mental health and social services. Hence, underutilization of community mental health services is the rule rather than the exception. Underutilization is defined to mean that a significant percentage of Mexican-Americans do not utilize mental health services in proportion to their population. Hence, the interest of studying the indigenous resources of Mexican-Americans evolved from the information on the underutilization of mental health services by this population. This serves as the background from which the research problem of this study evolved.


evolved. A brief elaboration on this background is presented below, followed by a discussion of the research problem.

A principal reason suggested for the underutilization of services by some Mexican-Americans is that existing mental health services are "irrelevant," that is, the conceptualization and development of the given services are based on the needs of the dominant racial socio-cultural group of this society. The results are services that are inconsistent and incongruent with the socio-cultural realities and way of life of most Mexican-Americans. Hence, a "lack of fit" between Mexican-Americans and community mental health services exists. This view is supported by many scholars and practitioners concerned with the delivery of services to Mexican-Americans.¹

With the foregoing premise in mind, several efforts to bridge the gap in the delivery of mental health services to Mexican-Americans are documented in the literature. In brief, the literature reviewed elucidates three factors that are necessary in order to provide services to Mexican-Americans. The three factors are the following:

(1) minority personnel, (2) service arrangements, and (3) treatment approaches. As already stated, discussion of these factors will provide the context from which the research problem of this study developed.

First, many critics of mental health services to minorities have pointed out that what is needed is personnel of minority background in order to appropriately reach out to the given minority population.\(^1\) The critics also state that without minority mental health professionals the important cultural factors of minority people will be overlooked in the development and delivery of services to them.\(^2\) However, the personnel most often recruited to provide services to the Mexican-American community have been predominantly individuals of a paraprofessional status. Although the reasons for this situation are complex, the main argument put forth is that there are insufficient numbers of minority professionals.

The recruited paraprofessionals have been delegated primarily the function of "go-between;" that is, they are expected to reach out to their respective communities and educate the target populations of the services available,

\(^1\)Torrey, "Irrelevancy of Mental Health Services to Urban Mexican-Americans," pp. 1-20.

\(^2\)Ibid.
and pave the way for the acceptance of mental health services provided by professional staff. While this is a significant role and function (and paraprofessionals are an important force in the delivery of services), the outcome has been poor.\textsuperscript{1} Paraprofessionals are the least trained, the least paid, and most crucial, have the least authority to influence how and what kind of services are provided.

There is an extensive literature speculating on the notion of needing minority personnel to provide services to minority people;\textsuperscript{2,3} however, there is a lack of empirically based research to confirm or refute the notion. The position is that Mexican-American professionals, as well as paraprofessionals, are needed to reach out to the Mexican-American community, because Mexican-American workers have a better understanding and knowledge of the needs of the Mexican-American clients than a worker from an alien culture. It is further suggested that such an "understanding" promotes a healthy attitude towards the prospective clientele. Most important, the "understanding"

\textsuperscript{1}ENKI Report, p. 1-20.

\textsuperscript{2}Torrey, "Irrelevancy of Mental Health Services," pp. 1-20.

and "knowledge" would generate services and treatment approaches that would be congruent with the Mexican-American culture.

The second factor is service arrangements. This includes decentralization of services (services made available in the community of the target population). Critics of mental health services state that the physical inaccessibility of services and facilities is a deterrent for Mexican-Americans to utilize such services.\(^1\)\(^2\) The solution to the inaccessibility issue has been to decentralize services and locate services and facilities within the target population's community. The solution is an excellent approach; however, in most cases the services offered continue to be alien to Mexican-Americans. That is, the service arrangements are not reflective of the realities of most Mexican-Americans, in that there are appointments to be made, long waiting periods in waiting rooms, office hours of nine to five, and means tests of eligibility.

A final element of the service arrangement is bilingual personnel. As already noted, professional personnel of bilingual status are often not available. This adds to the problem in respect to the kinds of actual services available

\(^1\) Torrey, "Irrelevancy of Mental Health Services, pp.1-20.

and to the question of what happens to those Mexican-Americans needing help but who are not reached by those programs supposedly available to them.

Finally, the services, or treatment, presents a major obstacle to Mexican-Americans in receiving help. That is, most services/treatment approaches are derived and based on the dominant culture and its values. This contributes to an incongruency between the services available and the Mexican-American culture. Hence, the services have built-in obstacles that make it difficult for Mexican-Americans to utilize them. The approach to solve this dilemma is for services/treatment approaches to evolve from the Mexican-American culture. This has been advocated by various writers on this issue, such as Torrey, 1 Romano, 2 Aguilar, 3 and others.

This brief review was provided in order to illustrate how the research problem of this study developed. From this

1 Torrey, "Irrelevancy of Mental Health Services," pp. 1-20.


background, several possibilities for research emerged. It was decided to study the indigenous resources that many American-Americans possess within their network of family and social relationships. This area of research was chosen for several reasons; the first being the present interest of the profession in the area of natural helping systems, and the second, and perhaps the most significant reason, the opportunity to gain insights and knowledge on Mexican-Americans by focusing on their indigenous resources.

The Research Problem

The question that prevailed was how and what resources most Mexican-Americans utilize in time of need. The literature alludes to the fact that the Mexican-American community and family possess a wealth of indigenous resources. Briefly defined, the network of indigenous resources is a source of help/treatment that may be provided by the immediate family, extended kin, compadres (co-parents), friends, curanderos (folkhealers), and religious leaders. The help may consist of counseling, social support, religious rituals, concrete help of materials, and culturally based folk medical and psychiatric treatment.

The network of indigenous resources of many Mexican-Americans has roots in the Mexican Indian, and medieval European medicine brought by the Spanish conquistadores. The isolation of the Mexican-American in this country has perpetuated its utilization. For example, the first mental hospital in the new world was found in Mexico centuries before Europeans even began to view mental illness as an illness.\(^1\) The accumulated knowledge has been transmitted through the generations as folklore and tradition, etc.

Isolation of the Mexican-American population from the mainstream of this society has forced them, out of necessity, to use their available resources, since public and private services for the most part are not psychologically and often not physically accessible to them.\(^2\) Then possessing a rich heritage of folk medical and psychiatric care knowledge, augmented by the influence of modern medicine, has served the need for care and treatment.

Therefore, this study took the question to the Mexican-American community and engaged their participation

---


\(^2\) Torrey, "Irrelevancy of Mental Health Services," pp. 1-20.
to explore their network of indigenous resources. In essence, the approach was an extension of the social work tenet of "client participation in the process of social work intervention." The rationale is that, since the client is a central figure in the act of service delivery, then he certainly should be a central figure in research activities regarding services and social work practice. Muluccio illustrates this postulate in his study of clients' perception of the client-worker relationship. Also, Silverman pursued the tenet with "clients who drop out," finding them to be highly articulate and insightful about their experience with social work services.

Similarly, it was the purpose of the study to explore the perceptions of a sample of Mexican-Americans. However, the writer extended or modified the professional tenet of "Client participation" to subjects who were not clients.

---


The study engaged the participation of Mexican-American subjects who were not affiliated with social work intervention and/or a mental health agency. Of course, this type of research is common with survey-type and social science such as participant/observer investigation.

Objectives of the Study

The objectives of this study were to examine particular social phenomena in depth to develop concepts and ideas to pose questions and to develop hypotheses for further research. The focus of the study also was to explore and identify the network of indigenous resources that Mexican-Americans utilize.

Research Assumptions

These assumptions guided the research: There is a viable helping network of indigenous resources utilized by some Mexican-Americans. If so, what is it? These assumptions are further delineated below:

1. There are differences in perception/knowledge of the indigenous network of resources between first and second generation Mexican-Americans.

2. There is a difference in the utilization of indigenous resources between first and second generation Mexican-Americans.
3. The extended family is a prevalent structure among Mexican-Americans.

4. Friends and compadres are an important resource for Mexican-Americans.

Aside from the aforementioned specific general assumptions, several other assumptions were needed. These assumptions were delineated from the literature and from the writer's practical experience and knowledge about the Mexican-American people. Hence, the general assumptions presented below also guided and directed this investigation.

1. Religion is a significant resource of help for Mexican-Americans.

2. The curandero (folkhealer) provides important health care services for Mexican-Americans.

3. The family and extended family is a viable resource among Mexican-Americans.

The assumptions are in general form, because the study was of an exploratory, descriptive nature. In this sense, the generality of the assumptions provided the flexibility needed to investigate the helping network of indigenous resources utilized by some Mexican Americans and under what conditions.
Significance of Study

The significance of the study lies with the potential contributions to the following areas: (1) the refinement of hypotheses, questions and concepts for further investigation, (2) contribution to the body of knowledge on Mexican-Americans, and (3) contribution to theory building and social work practice.

The first area needs no elaboration here since it is the overall goal of the study. However, a brief discussion on the other areas will be presented.

According to a number of scholars, the existing literature on Mexican-Americans (1940's - 1970's) is misleading and presents them in negative stereotypical terms. Weaver, for example, in his review of the literature, 1940's - 1970, on Mexican-Americans, found it to be distorted and biased.\(^1\) Romano, with a creative illustration, reaches a similar conclusion as Weaver. He states that if an "alien being was to come into contact with the literature on Mexican-Americans he would conclude that they are a people without a history, culture, etc.\(^2\)"

---


same scholars stated that there is insufficient research on the Mexican-American. Fortunately, this state of affairs is rapidly changing with Hispanic scholars actively contributing to the literature on Mexican-Americans. For example, the Spanish Speaking Mental Health Research Center at the University of Los Angeles is a main force in augmenting the scientific knowledge on Hispanics. The center's contributions have focused on investigating the Hispanic populations and providing recommendations, for example, in the provision of cross cultural counseling. Therefore, the objective is to seek findings of this study which may further contribute to the body of knowledge on Mexican-Americans and clarify some of the misconceptions about them.

Finally, the findings of this study could be of significance to practitioners involved in delivering services to Mexican-Americans. Since the study investigates the indigenous resources and their utilization, the findings could be used by practitioners in their assessment and intervention with Mexican-Americans. These practitioners would be able to address the total person-in-situation

---

gestalt in the process of assessment of Mexican-American clients. Practitioners could become aware of and sensitive to the cultural and social factors that influence the behavior and adjustment of Mexican-Americans. This would provide for a different picture of Mexican-Americans where psychosocial functioning would be understood in its total context. Perhaps this would guard against the too often uttered statements of negativism against a people who are little understood.

If Mexican-Americans, indeed, utilize indigenous resources, then such knowledge can aid the intervention, helping process. Practitioners could direct their efforts at three levels. The first level of intervention is the actual working with and encouraging a Mexican-American client to utilize his native resources. A second level would involve practitioners creating and stimulating dormant or non-existing resources in behalf of a client. Finally, collaboration with indigenous helpers and the social environment would be encouraged as Pancoast and Collins suggest in their recent book. Here, a practitioner could actively seek the collaboration of indigenous helpers as co-equals in the helping process. If such a resource is a viable one,

---

then a referral system of clients could possibly emerge.

Finally, social work is a practice profession.

Naturally, its research activity has been with clients and practice approaches, but this is not the only source of knowledge for theory building and practice development. This research reached out to a people who traditionally underutilize mental health-social work services; hence, it taps a source of knowledge that usually is not considered. Also, the study attempted to reverse the traditional trend of fitting people into our accepted theories and practices to one of evolving theories, practices, and service arrangements that flow from the needs and realities of people, in this case, Mexican-Americans.
CHAPTER II
REVIEW OF LITERATURE

The literature review is presented in three major sections. General background on the underutilization of mental health services by Mexican-Americans is presented first. This is followed by the review of literature on the indigenous resources of Mexican-Americans. The final section presents the theoretical framework and the major findings and recommendations for the study.

The issue of underutilization of mental health services by Mexican-Americans is well documented in the literature. This research is discussed here because it provides the background and impetus for this study. It appears that there are several conflicting reasons proposed in explanation of the underutilization of mental health services. These reasons range from the view that Mexican-Americans experience less mental illness to existing institutional barriers in the services which keep this ethnic group from utilizing them. Other explanations include the notion that Mexican-Americans have a culturally sympathetic folk health care system that rivals formal services, and finally, that Mexican-Americans define their problems differently from the dominant group.
If the latter is the case, then Mexican-Americans would utilize services that are congruent with their definition of problems and needs.

The notion that Mexican-Americans experience less mental illness is a powerful argument that the literature identifies, especially in early studies. Jaco, for example, postulated that the existence of a strong culture and family ties and closeness tended to prevent mental illness among Mexican-Americans.¹ This would seem to be the overall picture if data is accepted at face value. For example, Kamo and Edgerton found lower incidence of admissions for Mexican-Americans to California State mental hospitals in a 12 month period in proportion to their population.² Padilla and associates reported similar findings,³ and a more recent study in the state of California also obtained similar findings.⁴


Other research indicates that the services available have built-in barriers that block Mexican-Americans from receiving the help they may need. For example, Karno compared Black-Americans, Mexican-Americans, and Anglo-Americans with respect to social class characteristics, type of treatment provided, and length of treatment and found that minorities received fewer overall services. He suggests that the attitude of the personnel contributed to the discrepancy of minorities receiving significantly less treatment than Anglo-American patients.\(^1\) Mental health personnel appeared purposely to avoid ethnicity. This has also been documented by other researchers in studies of minorities receiving psychiatric care. For example, Hendric and Hanson formulated an important postulate that minority ethnic groups receive fewer services because of discrimination and prejudice of the staff.\(^2\) Thus, many mental health professionals may bring into a client-worker relationship the same negative attitude found among the general public.

---


Yamamoto and Quinton concluded that these prejudices motivate workers to "establish and maintain social distance" between themselves and minority clientele.\(^1\) In another study by Felsenburg, similar observations were made. She found that the preconceived notion of professional staff discouraged minority clients from receiving their full share of services.\(^2\)

Karno and Edgerton concluded that underutilization of mental health services was due to the inaccessible locations of mental health facilities, the lack of bilingual professional staff and the use of inappropriate treatment models.\(^3\)

The attitudes of personnel also seems to be a major barrier in the provision of services.

The notion that Mexican-Americans have an extensive network of indigenous resources has been documented in the literature. These resources are thought to assist Mexican-Americans as opposed to formal, Western-type services.

Torrey states that the lack of an interface between the


Mexican-American community and mental health services discourages Mexican-Americans from seeking treatment.¹ He argues that the Mexican-American community has its own viable health care system that needs to be incorporated within the mental health services.²

Further, it is believed that the treatment approaches of Western psychiatry are incongruent with the needs, the culture and social views of Mexican-Americans. Kiev, for example, in his study of folk health care among Mexican-Americans found that indigenous mental health resources are prevalent and widely utilized.³ He concluded that Mexican-Americans consulted folk healers, their family and extended relations when in need of mental health type of help.⁴ Other

²Ibid., pp. 1-20.
⁴Ibid., pp. 9-20.
researchers also support Kiev's findings, like Clark,1 Rubel,2 and Saunders3 in their studies on Mexican-Americans.

In contrast, Padilla and associates raised questions about the role of folk treatment as being a viable alternative for Mexican-Americans.4 They surveyed 666 Mexican-American households in three Southern California urban communities. The researchers found that most of the respondents were knowledgeable about mental health services within their communities, but they had not utilized them, even when the services were needed. Instead the researchers found that the subjects depended on physicians, relatives, compadres (co-parents), friends, and religious practitioners for mental health type of help. The folk health care practitioners (curanderos) were an insignificant resource for the subjects in the study.

1Margaret Clark, Health in the Mexican-American Culture (Berkeley: University of California Press, 1959).


Based on their descriptive data, the researchers concluded that "the most significant reason" for the underutilization of mental health services and facilities by many Mexican-Americans is their preference for "alternative resources." The conclusion is not completely at variance with the studies that support the role of folk care/curanderismo among Mexican-Americans; it nevertheless questions the significance of the role of folk healers among Mexican-Americans.

Social work research has also focused on the underutilization of mental health services by Mexican-Americans. But in contrast to other disciplines social work research activity for the most part has been conceptualized from the perspective of the client. In other words, social work research "begins where the individual is at." This conceptualization is in direct contrast to the previously reviewed studies where the research problem is formulated from services and practice needs.

Burrel-Gonzales argues that Mexican Americans define their mental health problems differently from the dominant group,1 hence the underutilization of formal services.

---

Further, according to Burrel-Gonzalez, the culture-social perspective determines how a people perceive and manifest their mental illness. She further states:

...the influence of cultural tradition in the family may predispose Mexican-Americans to attempt to handle the disturbed person within the context of the immediate and extended family before outside assistance is sought.¹

Burrel-Gonzalez described how Mexican-Americans define their mental health problems and the mental health resources utilized. She delineated the definition process into four stages which are: (1) noted differential behavior and affect; (2) interpretation of the problem; (3) handling of the problem; and (4) action, direct and indirect, to remedy the problem.²

It seems that the significant factor in Burrel-Gonzalez's description is the "Social Context." Mayer and Rosenblatt define the social context to be composed of two elements, one the "availability of alternative resources," and two, the influence of "relevant others."³ What relevant others think, feel, and support certainly persuades an individual to seek help, also the outlook of relevant others is important in

¹Ibid., p. 6.
²Ibid., p. 9.
defining the problem.

The indigenous resources that Burrell-Gonzales describes included curanderos (folk healers), home remedies, and family help. These resources may be utilized exclusively or in conjunction with modern medicine and psychiatry.

Chavez, in a similar study, focused on the effects that expectation of treatment by Mexican-Americans may have on utilization of mental health services. She concluded that the culture and the social context of Mexican-Americans influences their expectations of mental health treatment and their continuing with the services. If the expectations of the client and the worker are different, the client is more likely to drop out shortly after the initial contact.¹ Silverman made similar observations in her study of clients who drop out. She concluded that the discrepancy between client and worker resulted in conflict and early withdrawal from treatment.² Therefore, the perception of what constitutes "help" between client and worker influences the helping process.

¹Nelba Chavez, "Mexican-Americans Expectations of Treatment Role of Self and of Therapist: Effects on Utilization of Mental Health Services," unpublished dissertation, Denver University, August 1975, p. 150.

Finally, Chavez found that among the samples of the study an active alternative resource of immediate help was available. That is, curanderos (folk healers), family and kin, compadres (co-parents) and others are meaningful and readily available resources for the subjects of the study.

To recapitulate, Chavez's and Gonzales's social work doctoral dissertations provide a departure from the usual approach to studying the underutilization issue of mental health services. They researched the problem from the perspective of Mexican-Americans. The studies focused on how Mexican-Americans define their mental health problems and treat them and how the culture of Mexican-Americans effects their participation in mental health services.

Underutilization of mental health services by Mexican-Americans is a well-documented fact. The underutilization issue was the initial impetus for this study. Most of the research on this issue has been conducted in the southwest urban centers, and no consistent patterns between investigating different generations were noted. Finally, the literature on the underutilization issue allude to the notion that Mexican-Americans have a network of indigenous resources. These resources may fill the gap, or in some cases may be the preferred type of help. However, the literature did not identify the process of when and how such resources are utilized.
Indigenous Resources of Mexican-Americans

Literature on underutilization of mental health services by Mexican-Americans reveals that a possible system of indigenous resources exists among this population. Although the literature alludes to the existence of an indigenous natural support system, limited data is available to clarify the role and significance of this system. For example, Vega states that "current information is so varied that no consensus can be identified and no empirically derived model exists regarding natural supports..."¹ With this perspective in mind, the literature on indigenous resources is reviewed.

The indigenous resources of Mexican-Americans involves three overlapping elements: (1) folk healers (curanderos) practices and beliefs; (2) religion and artifacts; (3) the family, its extended kin, which includes compadres (co-parents). Indigenous resources, defined in general terms, is an arrangement influenced by culture and social position, is continued and maintained through transactions of help and treatment. Hence, utilizations have been transmitted from generation to generation, with slight modifications to fit the occasion, time and place. The indigenous resources may

consist of rival approaches to scientific-based treatment of medicine and psychiatry.

Literature on the indigenous resources of Mexican-Americans dates back to Saunders' research in the 1950's. Saunders' work has had significant influence on the following generations of social science research on Mexican-Americans. The significance of Saunders' 1950's work derives largely from his attempts to place the health care system and behavior of Mexican-Americans within a cultural perspective. Saunders established that five sources contribute to the health care knowledge and treatment of Mexican-Americans. The sources are: (1) folk medical knowledge of medieval Spain as introduced to Mexico; (2) native American Indian knowledge; (3) Anglo-American folk medicine; (4) scientific medicine and psychiatry, and (5) religion.

Saunders interprets the disadvantaged social-economic condition of many Mexican-Americans as their culture and way of life. Further Saunders work is the basis for his culturally determined folk health care model. He concluded that the folk medical practices and beliefs are congruent with the Mexican-American culture. For instance, Saunders states that

1Ibid., p. 5.

2Lyle Saunders, Cultural Difference and Medical Care, pp. 100-120.
Mexican-Americans "are present oriented and resign themselves to whatever destiny brings," which, according to him, is consonant with the view that disease is caused by supernatural forces of God or evil,¹ and treatment proceeds to oppose these supernatural forces.

Furthermore, curanderos (folk healers) are consulted for treatment by some Mexican-Americans, and only when culturally oriented treatments fail will Mexican-Americans consult a physician.² Rubel has a slightly different interpretation of Mexican-Americans health care behavior. He states that Mexican-Americans are pragmatic and use whatever means work.³

Clark, Madsen and Rubel expanded on Saunders' conclusions. They accept Saunders' model of culturally determined behavior and health care.

This model of health care is interdependent with and influential on their culture and vice versa. Clark (1950's), in San Jose, California, concluded in her ethnology of a Mexican-American community titled "Sal si Puedes" (escape if you can) that Mexican-Americans have their own system of

¹Ibid., pp. 118, 128, 141.
²Ibid., pp. 125-126.
³Rubel, Across the Tracks, pp. 194-200.
folk health care that rivals the scientific medical care of
the dominant group. She collected the data from 20 percent
of a population of 70 families. The significant findings
were: (1) witchcraft (Brujeria) is regarded as the cause of
many diseases which are treated by folk healers; (2) curanderos
(folk healers) are frequently consulted; and (3) Mexican-
Americans attempt to treat themselves before seeking outside
intervention.

Madsen and Rubel, like Saunders, describe the Mexican
culture and its values and link the culture and behavior with
the utilization and persistence of the indigenous health care
system. The authors conclude that it is the culture and its
behavior that keeps Mexican-Americans from utilizing public
health services.

Other studies on Mexican-Americans continue to support
Saunders' basic model of culturally determined behavior and
its indigenous health care approaches. Kiev's study

1Clark, Health in Mexican-American Culture, pp. 100-150.

2William Madsen, Mexican-Americans of South Texas (New

3Rubel, Across the Tracks, pp. 1-200.

4It should be noted that the single most important
research endeavor of the 1960's on Mexican-American, the
Grebler, Moore and Guzman study (quoted earlier), largely
ignores the issue of health care.
represents the typical research of this era and also one of the most quoted in the literature. Kiev confirms Saunders' model by stating that the parents are the main conveyers of the culture and behavior. He argues that the Mexican culture is not conducive to utilizing conventional psychotherapy because the culture espouses values that are contrary to the dominant culture of this society.

On the other hand, religion and utilization of indigenous resources have a high degree of interplay. Religious beliefs and rituals have a significant role in the treatment of all folk illnesses, or for that matter, all of the Western world to some degree believes in the omni-potence of God, especially when faced with uncertainty. Nall and Speilberg identified four areas of interplay between folk treatment and religion which are: (1) promise-making (promesas); (2) mandas, visiting shrines; (3) offerings to a particular saint or God; and (4) prayers.

These religious rituals aid the process of treatment and healing by actually compelling the ailing person or his

---

1 Kiev, Curanderismo: Mexican-American Folk Psychiatry, pp. 100-140.
2 Ibid., pp. 100-140.
family to participate. When a Mexican-American individual finds himself in need of help, he and/or his family may pledge a vow, "manda" "promesa," or other religious practice or preference, to a saint/God. Also, prayer is utilized and prescribed by curanderos when they are consulted.

These beliefs and practices have therapeutic value. Aguilar has documented the use of religious rituals in his treatment of mentally ill patients.¹ The act of confession is a good example of a technique he uses extensively with Mexican-Americans. The writer has also had the opportunity to refer mental health clients to their priest for confession; the process has aided the recovery. This religious ritual helps a person relieve himself of problems and "set himself right in the eyes of God."

Nall and Spielberg² and Rubel³ concluded that adherence to religious beliefs does not necessarily preclude Mexican-Americans from accepting and utilizing modern medicine; however. Believing in God and religious practice is a social phenomenon that most of the Western world adheres to. Through


religious beliefs, people find hope that man is not alone with his problems.

Recent research and review of the literature illustrate some differences regarding the role of indigenous resources. For example, Vega, in his review of the literature notes that earlier studies argue that a culturally determined system of indigenous resources is in place and is preferred in comparison to formal services by Mexican-Americans,¹ while on the other hand, the research of Padilla and Associates reflects less support to the foregoing notion. The position of the latter research is that indigenous resources are linkages to formal services. Further, they conclude that the significance of indigenous resources has been over-rated or exaggerated.² Still others assert that the viability of indigenous resources lies in the fact that formal services are not available to Mexican-Americans.

A special conveyer of the indigenous resources is the curandero. The curandero is a folk healer. Vega notes that

¹William Vega "Mental Health Research and North American Hispanic Populations" pp. 3-14.

utilizing the term curandero excludes many others who provide help and do not call themselves curanderos. He suggests the term "natural healer" instead. This term is all-inclusive, from the grandmother who prescribes a herb for a given ailment to the curandero who is well-known an identifiable institution in the community.

Natural healers, or curanderos, are part of the indigenous resources. For the most part, such healers practice folk medicine and psychiatry known as curanderismo. The practice of curanderismo is not limited to curanderos, but they possess the most expertise. By definition, curanderismo, or folk health care, as was discussed earlier, is a system that incorporates aspects of European medicine from the 15th and 16th centuries, modern scientific medicine, Mexican-Indian religion (Catholicism). Therefore, the body of curanderismo is (1) a set of traditional folk medical beliefs and practices; (2) a set of ritualistic acts traditionally considered to have favorable effects on health; and

---


2 Saunders, Cultural Differences and Medical Care, p. 141.
(3) the use of folk medical curers, curanderos.¹

Gonzales notes that the health care system of curanderismo does not make an artificial division between physical health and illness and mental health and illness.² It is a holistic view of the body and mind. Most writers view curanderismo as a system of care that has evolved from the culture and subsequently influenced how people determine, diagnose, and treat their physical and mental problems.³ Gonzales surveyed the literature on curanderismo and concluded that Mexican-American folk beliefs and practices encompass the traditional ways that many Chicanos have cared for and continue to care for their physical and psychological ills. Further, Gonzales adds that "Mexican-American beliefs represent a particular world view that has its own unique configuration of human values...understanding of this aspect of Chicano tradition and life may enhance the process of developing responsive and meaningful mental health models.


²Ibid., p. 265.

³Helen Mendes, Faculty Development Minority Content in Mental Health, Monograph III, 4. Some Religious Values Held by Blacks, Chicanos, and Japanese-Americans and their implications for Casework Practice.
and facilities for this ethnic minority.\textsuperscript{1} Still other writers view folk medicine and psychiatry to be widespread, not only among Mexican-Americans, but all Americans. Douglas cites newspaper astrology columns, the recent avalanches of books on occultism and mysticism, and the flourishing practice of fortune tellers and spiritual advisers as evidence of the popularity of folk healing in this country.\textsuperscript{2} He argues that it is important to recognize that many people utilize such services and the practice is part of their beliefs.\textsuperscript{3}

An article published by the Chicano Training Center in Houston, Texas (author unknown) supports the view that folk medicine in the Mexican-American community is an important aspect of its health care. The article states that in some instances the folk medicine is "just as good if not better than the scientific-based health practices of Western Societies."\textsuperscript{4} For example, acupuncture has been practiced in China for centuries, and psychotherapy is not

\textsuperscript{1}Gonzales, "Role of Chicano Folk Beliefs," pp. 263-281.


\textsuperscript{3}Ibid.

the sole domain of psychiatrists but also the turf of witchdoctors, shamans, folk healers, curanderos. According to the article, the existence of "curanderismo" lies in the neglect that the Mexican-American population has experienced in this society, hence they have had to rely on their own brand of health care.

There are those researchers who dispute the importance of the curandero in the scheme of indigenous resources. For example, Padilla and Associates state that curanderos have an insignificant role among Mexican Americans. However, Vega suggests a different approach to defining and viewing helpers such as curanderos. He conceptualizes the notion of "Natural Healers." This provides for a wider basis to examine helpers within the Mexican-American community. Further, this approach opens the door for folk practitioners as well as for consumers of their services to more readily acknowledge utilization of indigenous folk health care services.

---

1Ibid.
2Ibid.
4William Vega, "This Hispanic Natural Healer A Case Study:"

Perhaps such an approach in time would evolve into a model for interfacing and collaboration between folk health care services and formal services.

Finally, the family could be considered the "cornerstone" of the indigenous resources. There are several reasons why the family may be a significant element in the utilization of folk resources. First, the family has the undisputed role of socializing and transmitting the culture to its members. Kiev, in his research on curanderismo, concluded that the family is responsible for the continuation and utilization of their health care ways. He argues that the strong structure and culture of the Mexican-American family contributes to maintaining the status quo, or the continuation and utilization of their indigenous resources. Then the structure of the family and culture is conducive and instrumental in educating Mexican-Americans to their traditions and outlook on life. This position was espoused by Saunders in his cultural model of behavior and its influence on health care.

1 Kiev, *Curanderismo*, pp. 148-149.

2 Ibid.

The literature describes Mexican-Americans as being family-oriented. Jaco concluded that the strong family ties and cohesiveness act as a deterrent to mental illness.\(^1\) Other writers, like Penalosa\(^2\) and Sotomayer\(^3\) have made similar statements about the Mexican-American family and its strong ties. The Mexican-American family orientation theme is significant to maintaining the traditional folk indigenous resources and utilization, for as discussed above, such cultural conventions are transmitted by the family.

Finally, the literature also describes Mexican-Americans as having strong ties with their extended kin and compadres.\(^4,5\)


\(^4\)The writer classifies compadres (co-parents) as "near kin" because the relationship of compadrazgo is carefully selected, and compadres can rely on each other for help in times of need.

These relationships may be important in the utilization of their indigenous resources. For family members may possess special knowledge about diagnosis and treatment and may offer encouragement and linkage with the proper resources.

Extensive research has documented the existence of the extended family phenomenon. For example, Litwak has researched the issue extensively and concluded that families have viable relationships with their kinfolk.¹ Sussman also questioned the concept of the "isolated nuclear family," and found the concept to be a "myth."² Perhaps the research is applicable cross-culturally to Mexican-Americans. If this is the case, then the notion of extended family among Mexican-Americans is valid and viable.

The notion of extended family dovetails with the concept of social context previously discussed. The social context can consist of significant others, like kinfolk, whose roles may be critical in diagnosing and treating an individual afflicted with a social and/or mental problem. That is, the kinfolk may have resources not otherwise available to an individual and nuclear family.


In summary, the family and its extended kin has the important role of socializing its members to its indigenous resources. This function of the primary group has implications for the total system of help. Without this continuity which the family provides, the indigenous resources would disappear. Also, the family and its extended kin are an important source of help and may act as the first line of help before a family decides to seek consultation from a folk healer, religious leader, or physician. Therefore, the family is in a pivotal position in the utilization of the indigenous resources.

In final analysis, the primary theme of the literature is that there exists indigenous type of resources among Mexican-Americans. It is not known to what extent such resources are utilized by Mexican-Americans and to what extent the resources are an obstacle to seeking public social, medical, and mental health services. As noted, there are different views about the significance of indigenous resources among Mexican-Americans as quoted in recent research.

Finally, the literature on health care and indigenous resources does not speculate on specifics on how to engage them. This is of paramount importance for the development of service programs and models of practice that are syntonic with the Mexican-American community.

The review of the literature elucidated that indigenous resources are prevalent among Mexican-Americans. However, to date a model that is culturally based has not evolved according
to Vega. Though the review of literature relative to Mexican-Americans and mental health dates back some twenty years, it lacks comprehensiveness, cohesiveness, and is replete with unresolved issues, including any consensus or natural support systems and their role in the Mexican-American community. Hence, the various findings on the indigenous resources as described in the current literature, are not viewed holistically but as separate elements. Therefore, in carrying out this study a holistic perspective was its framework. This is articulated by a general system theory which is a framework which considers all aspects of the environment as well as person. Although the study did not test or illustrate a particular theory, a few words on the necessity to explicate the underlying theoretical framework for the study is in order. This is necessary for two reasons: (1) It is important to be aware of one's frame of reference because it influences the observations of a social phenomenon, and (2) a theoretical framework is the model by which data are organized and interpreted. Foley has a similar view when he states that the "function of theory... shows the observer where to look for data that might prove to be of value (and) the basic outlook will color all significant process."^2

---

^1 William Vega, Ph.D. "Mental Health Research and North America Hispanic Populations." pp. 3-14.

As stated above the study was guided by general systems theory. It seems that the foregoing provided the most appropriate framework to examine the indigenous resources in a holistic manner. For such resources are a complex web of interlocking elements of cultural, society, environment, and maintain through the process of transactions. Therefore, as Meyer states:

General systems theory, despite its mechanistic language, makes possible an organized view of the individual in his multiple interactions; it provides a convenient way so as to avoid fragmentation. She further states a ... systemic view there is no inner or outer, but rather an operational field in which all elements intersect and affect each other. 1

Meyer's description of System Theory is an appropriate research lens by which to observe the indigenous resources of Mexican-Americans. For the utilization of various resource by Mexican-Americans is influenced by external forces such as the community, extended relationships, and internal forces of the individual and his immediate environment.

In a similar application of System Theory to the family, Minuchin states that "families are open-socio cultural systems in transformation," 2 that are in constant


change and impacted by societal demands. That is the family is an open system that receives and transmits information with its environment. And in this manner the relationships and linkages become environmental instruments for helping people fulfill their adaptive needs. In other words, the family and individual are in constant interaction with its environment, hence influence the utilization of resources.

General Systems Theory

A brief description of general systems is in order.

General Systems Theory has been called "... a new approach to the unity of science problems which sees organization rather than reduction as the unifying principle, and which therefore searches for general structural isomorphism in systems."

Laszlo adds that:

The systems approach does not restrict the scientist to one set of relationships as his object of investigation; he can switch levels, corresponding to his shifts in research interest. As systems science can look at the organ, the organism, the family, the community, the nation, the economy, and the ecology as systems ... . A system in one perspective is a


sub-system in another. But the system's view always treats systems as integrated wholes of their subsidiary components and never as the mechanistic aggregate of parts in solable causal relations.\footnote{Ervin Lasslo, The Systems View of The World: The Natural Philosophy of the New Developments in the Sciences (New York: George Braziller, 1972), pp. 14-15.}

Lasslo further states that systems theory yields a perspective for viewing man and nature; that it is a mode of organizing existing findings in reference to the concept of systems, and systemic properties and relationships.\footnote{Ibid.} In other words, system theory was helpful to conceptualize and observe the indigenous resources of Mexican-Americans as an open system or subsystem in transaction. This formulation takes into account the forces and processes that are within the social context of the individual and his/her environment.

Summary

The literature review covered two major sections. The first section dealt with the underutilization of mental health services issue, and the other section focused on the indigenous resources. The latter section had several overlapping elements. A number of themes and questions evolved from the review process.
Underutilization of mental health services by Mexican-Americans research elucidated the following issues related to this study. First, the research on this topic agrees that underutilization of services is the rule rather than the exception. The area of disagreement is on what influences the underutilization to occur and remain unabated. The review of literature indicates different reasons for the underutilization, such as, the services are not congruent with the needs of Mexican-Americans, the services are not accessible, and institutional barriers, such as language, that deter certain individuals from utilizing services. However, a consistent finding (and the focus of this study) of the underutilization issue is the availability of resources indigenous to Mexican-Americans. These indigenous resources either are preferred or function as a parallel structure to formal services. That is, Mexican-Americans may utilize their resources and formal services simultaneously.

Despite the lack of clarity about the role of indigenous type of resources, there is evidence that these resources are present within the Mexican-American community.

In respect to the indigenous resources, the literature documents the existence of such help at several levels. These include folk health care, curanderos, religion/clergy, and the family.
The viability and relevance of such resources to the Mexican-American community could not be determined. For example, the literature search and review highlighted a need for research that "... include a description of what and how ... care is provided to Hispanic communities. ... how linkages develop between formal and informal care providers ..." Valle also shares a similar view. He states that a "close scrutiny of the natural support concept reveals gaps in both knowledge and application ..." In other words, much has been articulated and written about the indigenous resources of Mexican-Americans, but specific knowledge on how such a resource is utilized and maintained is not known. For example, the research reviewed described the indigenous resources, but the actual application, or a Vega states, the "what and how" is needed. Questions such as when are indigenous resources utilized as opposed to formal services? for what problems; how are referrals to natural helpers made? who is considered a helper; have remained unanswered.

Finally, it was noted that the variable of generation and setting were not given consistent consideration in the literature. The variable of generation may influence the


patterns of utilization of informal resources. Also, the variable of geographical setting of the cited research in the literature review indicates it has been conducted in Southwestern urban centers. These two variables, generation and setting, plus the questions, issues and themes that evolved from the literature, guided the development of this study. In this manner, the complex tapestry of the indigenous resources were explored.
CHAPTER III

METHODOLOGY

Introduction

The thrust of this study was to obtain data on the indigenous resources that Mexican-Americans utilize. The ultimate goal was twofold: to contribute to the advancement of social work theory and practice, and to contribute to the general social science knowledge of Mexican-Americans by clarifying concepts, identifying pertinent variables, and deriving questions and hypotheses for further study.

Research Design

This study's design was exploratory-descriptive which, according to Selitz, is needed "in the case of problems about which little is known,"\(^1\) and the descriptive design aims at accurately describing the characteristics of the community, as well as the prediction of the interactions of the elements present within the community.\(^2\)

Furthermore, the flexibility of an exploratory-descriptive design to implement qualitative and quantitative methods enhanced and strengthened the study. That is,


\(^2\)Ibid., pp. 90-91.
quantitative methods are able to delineate certain characteristics and trends in a sample, but such methods do not elicit in-depth data. Quantitative data collected in this study was achieved through close-end or structured questions. On the other hand, qualitative procedures were utilized in this study to elicit in-depth data and knowledge about the sample's experiences in relation to indigenous resources. Qualitative procedure refers to those research methods which produce descriptive data, for example, an individual's written or spoken words and observable behavior. Bogdan and Taylor state that qualitative procedures are those that "direct themselves at settings and the individuals within a study, be it an organization or an individual, is not reduced to an isolated variable or to a hypothesis, but is viewed instead as part of a whole."²


²Ibid., pp. 1-23.
Assumptions

This study assumed that the subjects' perception of their helping network of indigenous resources was accurate. Hence, the investigation engaged a sample of subjects that reported retrospectively on their experiences. Thus, the investigation stressed the subjects' point of view, assuming that an individual's frame of reference affects his behavior and perception of his life situation.¹ This is a phenomenological perspective where, in order to understand human behavior, it has to be viewed from the actor's own frame of reference.² This approach to research has been stressed by Maluccio and Silverman in previous studies.³

Another assumption is the social phenomena of "cultural continuity."⁴ This social phenomenon of "cultural continuity" is pivotal to the study, in that the concept espouses the notion that people of ethnic groups maintain a certain level of their native cultures, although they may experience

²Ibid.
³Anthony N. Maluccio, in his dissertation, "Searching for Determinants," elicited the perceptions of social work clients of services and the helping relationship; and Silverman, in her study, Clients Who Drop Out," engaged the perceptions of "clients who dropped-out" and found them to be astute in their views regarding their social work services encounter.
rapid integration into a dominant culture. This may be the case with many Mexican-Americans, particularly with those who continue to experience and practice their culture in various degrees, although there exists external pressure to acculturate into the dominant culture.

With the foregoing in mind, a Mexican-American scholar and educator, Manuel Guerra, argues that Mexican-Americans are "different from other immigrants" because Mexican-Americans continuously reinforce their cultural way of life.¹ Further, he concludes that the reason for the ongoing reinforcement of the culture is due to the closeness of the mother country, Mexico. This geographical closeness aids in reinforcing the Mexican element of the Mexican-American culture.² This process is accomplished through periodic trips to Mexico and ongoing contact with kinfolk and friends via visits, telephone and mail.

A second reason for "cultural continuity" among Mexican-Americans is the psychological and social phenomenon of pride of one's own background. It is the writer's opinion that the need to identify with one's culture is important,


² Ibid., pp. 1-15.
especially to a minority group who has not enjoyed full participation in the educational, economic, and social opportunities of this society as has the dominant group. Thus, a minority people will cling to their cultural identification and practices more fiercely.

The "cultural continuity" concept is a crucial assumption in this study, for it is assumed that the indigenous resources are a crucial element that continues to have a significant role in the lives of many Mexican-Americans and is maintained in the manner discussed above.

Finally, it is assumed that Mexican-Americans of lower socio-economic status may utilize indigenous resources more extensively than Mexican-Americans of middle class status. This assumption is based on class differences. The class difference evolves from three elements: economic status, education, and acculturation. Economically, lower-class Mexican-Americans, for the most part, do not have the financial resources to seek professional services as readily as middle-class Mexican-Americans, thus, when the need for service arises, lower-class Mexican-Americans may avail themselves of their indigenous resources. In terms of education, lower-class Mexican-Americans have been exposed less to the American education system, compared to their middle-class counterparts. Then the belief system of lower-class Mexican-Americans is fairly
intact; it has gone unchallenged due to this infrequent exposure to Western thought. Of course, the opposite is the case with middle-class Mexican-Americans whose education in the American way of life may facilitate the erosion of traditional beliefs.

The final notion is acculturation, which is a result of education and acceptance of the American way of life. Middle-class Mexican-Americans, it is assumed, are more acculturated than lower-class Mexican-Americans. The result is that the middle-class Mexican-Americans are trained and oriented to seek and utilize western psychiatric types of services as opposed to lower-class Mexican-Americans who have experienced less acculturation and who probably tend to depend on their own indigenous resources.

Definition of Concepts

The major concepts to be used in the study are briefly defined here.

Mexican-American/Chicano: Those individuals who were born in Mexico and reside in this country. Also, the concept applies to those individuals who descended from Mexican immigrants.

Kinship: Those relations of blood or marriage.

Compadres (compadrazo): In many families, compadres (God Parents) are considered to be related by ritual of the
Church; therefore, such relationships can be viewed as "near kinship." The compadre relationship is a system that originates with the sponsorship of a child, and the given compadres are committed with special responsibilities. Such a system is found in Catholic countries, but each culture gives the compadrazgo its own special meaning.

Compadres are an important element of help to many families. The relationship enhances a family's repertoire of friends and promotes strong bonds of mutual concern and aid. This study utilized the latter definition of the concept.

Network System: "The total relations field of a person which usually has space/time representation . . . a network has a low degree of visibility, but a high degree of information-exchange properties. A network has few formal rules but consists of relationships between many persons, some of whom are known to many others in the network, while others merely form a linkage between persons."1 A network system may act as a support system providing materials and emotional assistance. For the purpose of this study, networks and support systems was combined into one concept of network support systems.

Social Environment: The individual's social support which includes kin, compadres (co-parents), friends and neighbors.

Mental Health: This is a relativistic concept and almost impossible to define, for what is mental health in one culture may not be true in another. Jahoda reviewed and analyzed six approaches or criteria for positive mental health. These include (1) attitudes toward the self, that is, liking oneself; (2) to experience growth, development, and self-actualization; (3) integration, that there is a purpose and meaning to one's life; (4) autonomy, being able to act independently and have relative stability; (5) perception of reality, that is, ability to accept or exclude whatever is outside of oneself; and (6) environment mastery which includes a host of adaptability skills. Perhaps these criteria can be applied cross-culturally with moderate degrees of modification to have congruency with a given people. But unfortunately, we are left with nebulous terms for what is meant by autonomy. In a Western English-speaking society, autonomy may not have the same meaning to an individual who feels close ties to his family are important.

Therefore, for the purpose of this study, mental health simply means lack of severe psychopathology and the mental health system denoted those helping institutions and measures of Western psychiatry, social work, and psychology that aid in maintaining a person's "mental health."

Problem: Social, mental and emotional - any difficulty or set of difficulties faced by an individual, marriage, or family in such areas as interpersonal relationships, personal psycho-social development, social and material needs like housing and financial problems.

Treatment/Help: "Any measure designed to ameliorate or cure an abnormal condition."¹

Curandero: A person of either sex, usually of middle age or older status, who is recognized as a healer in the Mexican-American community. The healer status is bestowed by community people through words of mouth.

Indigenous Helper: Implies a person who is sanctioned by a particular culture or subsulture to perform psychotherapy and folk medicine even though he has not been trained by acceptable Western professional standards. The term therefore includes a wide range of individuals from

shamans, witch doctors, and curanderos (folk healers), to neighborhood residents and trusted friends, compadres (co-parents) and family.

**Generation**

As utilized in this study, this concept refers to the status of recent immigrants. Specifically two generations of respondents were included in the study, first and second. First generations denotes those individuals born in Mexico now residing in this country. Second generations refers to those individuals born in this country of parents who were born in Mexico and immigrated to this country.
Selection of Study Population

Setting

The setting for the research was Tulare County in the Central San Joaquin Valley in the State of California. It is predominantly a rural, agricultural country with approximately 300,000 population in a 5,000 square mile area. Mexican-Americans comprise 30 percent of the total population. There are two moderate population centers and numerous smaller agriculturally oriented communities.

This geographic area was selected for the research for the following reasons: First, the 30 percent Mexican-American population made it possible to select an adequate sample. Secondly, the significant size of the Mexican-American population provided for a sample of diversified levels of acculturation. This insured an adequate number of first and second generation Mexican-Americans, which was a criterion for the sample. Thirdly, Tulare County has an adequate number of urban and rural areas, which was another criterion for selecting the sample. Finally, the researcher's knowledge and familiarity with the county and its people, and especially his relationships with the various social agencies.

1 Evaluation of Tulare County Mental Health Services by ENKI Research Institute, Chatsworth, Ca., April 23, 1976, p. 15.
in the community facilitated the implementation of the research. The writer's involvement in the community as a social work practitioner has played a central role in his becoming knowledgeable about the setting.

The Agency

The study was carried out at the Tulare County Head Start and Child Care Agency, whose central office is in Visalia, California, and has program centers throughout the county. The agency is affiliated with the county educational system and is funded by federal and state government funds. It serves clientele of lower socio-economic status, with Mexican-Americans being the predominant group served. The agency has a number of slots for children of middle-income families as well. The agency provides educational services to pre-school children, ages 3-5, with emphasis on the involvement of the family in the education of their children. Hence, the program strives to provide comprehensive services, either directly or indirectly, as in the case of referrals to community social and medical agencies.

Therefore, the Head Start and Child Care Agency for Tulare County was selected for the following reasons:

a. The Head Start Agency provides mainly educational services and not mental health or social services.
This facilitated the opportunity to secure a sample that had no affiliation with mental health services. This was a methodological requirement of the study.

b. The agency serves a large population of Mexican-Americans who represent first and second generation, as well as urban and rural.

c. The population the agency serves is predominately of lower socio-economic status, another requirement of the study.

d. The accessibility of the agency and its clients facilitated data collection.

The writer approached the Tulare County Head Start Agency Administration in January 1978 to request their cooperation and participation. They responded positively and in turn advised the writer to present the request to their Board of Directors in a formal letter. A letter was drafted and sent to the Board, which acted on it in February of 1978 and granted permission for the writer to secure the needed sample from their clientele. (See Appendix for letter of consent).

The Agency and Board were informed that the writer was responsible for all costs and manpower to carry out the study. Hence, the role of the host agency for the Research was limited to permitting the researcher to contact their...
clientele to secure the study's sample. The host agency made available their confidential file for the research.

The Sample

The sample consisted of 36 couples who were selected randomly. Although the sample consisted of 36 couples, in actuality, the actual number of participants was 72 husbands and wives. This number was small enough to permit in-depth interviewing and large enough to get a sense of the range of differences in experience. Also, the small number is in keeping with the exploratory nature of the study where emphasis is on in-depth study or, as Silverman stated, "this in turn necessitates the use of a small sample, since considerably more time must be spent on each case in order to bring out all of the factors . . . ."1

The sample was derived from the total population of clients who utilized the agency. In arriving at the final sample, a total of 300 couples who did not meet the criteria were excluded in the initial screening. The final sample of thirty-six couples was selected from among approximately 100 couples who appeared to meet the criteria, providing for an equal representation of couples from urban and rural residential setting.

(1) Eighteen couples were from urban areas and the other 18 were of rural status.

(2) An equal distribution of first and second generation couples were strived for between urban and rural division.

(3) The respondents were representative of two-parent families with children. This methodological decision was implemented due to the writer's conviction that a two-parent family offers a better opportunity to obtain data on the actual helping behavior of a family, i.e., what is the role of the father, and what is the role of the mother. It was thought that such a requirement would be difficult to fulfill with the urban segment of the sample. The writer, in an interview with the Director of the Head Start Agency, revealed that the agency's urban families tended to be one-parent; this was not the case with the sample of the study.

(4) The couples, at the time of selection, were not associated with a mental health agency.

(5) The subjects, at the time of data collection, were required to be of legal document residence in this country.

(6) The subjects were residents of at least one year in the area, and in this country.

Sampling Procedure

For the purpose of the study, subjects were selected from urban and rural areas. Hence, a decision was made to
focus on two Head Start Centers. Thirty-six couples, or 18 from urban and 18 from rural settings, with half being first generation, and the other half being second generation Mexican-Americans, composed the sample.

Stratified random sampling was the procedure utilized to obtain this study's sample. The population was divided into two strata. The criteria for the two strata were the following variables of urban-rural and first generation and second generation Mexican-Americans with one year of residence. Then "a simple random sample was taken from each stratum and were then joined to form the total sample."¹

Data Collection

The data collection of this study was conducted by the utilization of an interview schedule. This research instrument was composed of closed-ended as well as open-ended questions. In this manner, all the participants of the study were asked the same question, thus elucidating quantitative data from the closed-end questions, and in-depth qualitative data from the open-end questions. The latter was an effort to go beyond simple reports of impressions and surface views of life experiences.

¹Seltiz, Research Methods in Social Relations, p. 256.
The research instrument was developed to reflect a comprehensive, exploratory process of the indigenous resources. It attempted to capture and explore all elements or helping resources that may exist in the Mexican-American family and community. This was accomplished by patterning the instrument to resemble Litwak's and Szelenyi's notions regarding the function of kin, neighbors, and friends. They hypothesized that aid flows from a low level of commitment to a higher level of commitment, in terms of time, emotional involvement and cost. For example, neighbors can best handle immediate emergencies, followed by friends and long-term commitments is the domain of family or kin.

Overall, the instrument focused on the following areas:

(1) Demographic data included baseline information consisting of age, occupation, religion, number of immediate family members, first or second generation, and number of years in the area.

(2) Areas of potential stress: These included personal and interpersonal stress such as extra-familial problems, parent-child difficulties, marital conflicts, depression, psychosis, anxiety reaction, and social difficulties of work and school.

(3) How a problem was identified and treated:
   (a) assessment and diagnosis: When and how the problem area were defined.
   (b) Intervention/treatment of the identified problem area: What is the role of the family?

(4) How did the family decide on the intervention; when and how did the family decide to seek outside intervention?

(5) What were the resources utilized, and what was the order of preference?

(6) Finally, questions regarding the implementation of the intervention were also addressed.

(7) What was the intervention from the perspective of the subjects? What did the helper do?

(8) What was the outcome of the intervention-help from the subjects perspective?

Pilot Study

Since the instrument was developed specifically for this research, a thorough testing and validation was undertaken. This process was undertaken in steps. Studying other instruments and reviewing the literature was the first step. Concomitantly, the developing of the instrument evolved. A rough draft of the instrument was tested on one subject. Primarily, this test focused on the length, type
of questions, language of the question, translation of English to Spanish, and the content. It was learned that the instrument was too long, some questions were repetitive, and some restructuring of the questions were needed. For example, sensitive or emotionally soliciting questions were introduced after preparing the respondents with less sensitive questions.

Therefore, a second draft of the research instrument was prepared. Before testing it, the instrument was reviewed by two experienced researchers.* These experts made important suggestions. For example, it was suggested that vignettes of a social situation could be substituted for a number of questions and obtain the same data. After the process was completed, a pilot study was conducted. Four couples, or four husbands and four wives were asked to participate in testing the instrument. Two couples were lay people and two other couples were para-professionals employed in social services. The lay couples were first generation and Spanish speaking, while the other two were third generation and predominantly English speaking.

*Dr. Helen Mendes, Professor, School of Social Work, University of Southern California, Los Angeles, California.

*Dr. Alex Gonzales, Professor (Social Psychology) California State University, Fresno, Fresno, California.
The actual testing of the instrument provided experience in conducting the interview and learning to remain objective during the process. That is, it was learned that care had to be exercised so as not to influence the responses by the researchers' interests and focusing on specific issues as they arose. Also, suggestions in respect to translations from English to Spanish were provided by the respondents. Further, the respondents thought that the restructuring and general content of the instruments achieved its purpose. Comment was also made about the duration of the interview; it was recommended that perhaps two or more sessions would be appropriate to collect the data.

Timelines of Data Collection

Data collection was initially planned to be an endeavor of about 4-6 months. It was undertaken in the Spring of 1980. However, it was soon learned that the timelines and season selected for the project were not conducive to completing the data collection phase of the research as originally planned. The actual experience of data collection was much longer; it took 12 months to complete the process.

Collection of data took longer than expected for a number of reasons. The most compelling factor was the selection of the Spring season to carry out the project.
Spring is the beginning of work for many seasonal farm laborers. This situation made the respondents not readily available, and this slowed down the data collection process. It would have been preferable to conduct data collection during the winter months when farm work ceases or slows down. Another contributing factor was the exploratory-descriptive nature of this study. That is, the research was extensive and exhaustive relative to the subject matter of the indigenous resources of the Mexican-Americans. Thus, each interview took longer than expected, on the average of three hours.

The Interviewers

A team approach of a female and male interviewers facilitated the process of data collection. The team consisted of a professionally trained social work female and the writer. Both interviewers are of Hispanic origin (Mexican-American) and speak Spanish. Aside from the bilingual abilities, the interviewers are also bicultural.

These attributes assisted the data collection process. First, the utilization of a Hispanic female was helpful in certain situations where a female respondent felt more comfortable in relating their experience in the presence of a woman. On the theoretical side, it is possible that a female interviewer may be able to "get closer" to the female respondent in eliciting insights and feelings. Further, the
bilingual abilities, as well as the bicultural perspective of the interviewers, provided for a consistent approach in the data collection, consistent in the sense that the interviewers asked the respondents directly and understood the responses, in terms of language and content.

Reliability and Validity

Issues of reliability and validity in this research were addressed at several levels which will be summarized here. First, stratified, random sampling procedures, as recommended by Seltiz, were implemented.¹ This insured that the eligible population of the Tulare County Head Start and Child Care Agency had equal opportunity to participate in the research schedule utilized. All questions of the schedule were consistent, and the open-end questions were all standardized. In other words, all the respondents were administered the same instrument or questions. The research schedule was also translated into Spanish and utilized with the Spanish speaking respondents. Prior to the pilot study, the research instrument was reviewed by two experts in the field of social work and social psychology research. These experts provided input in respect to structuring and the content of the instrument. Further, a pilot study was conducted where the research instrument was

¹Seltiz, Research Methods in Social Relations, p. 526.
field-tested in vivo, and the outcome of the experience was incorporated in the research instrument, as well as in the data collection process.

Finally, in the data collection process, the issue of reliability and validity were addressed in the following manner: The data collection was conducted by a team composed of two interviewers, male and female. Both interviewers are experienced social work practitioners with extensive experience as interviewers. This facilitated the consistency in gathering data. Also, the bilingual abilities and bicultural backgrounds of the team assisted in maintaining a consistent approach to the interviews, as well as for the collection of data.

The issues of reliability and validity were addressed at several levels, as already noted. Since the nature of the study was exploratory-descriptive, the efforts at achieving reliability and validity were precusory as opposed to absolutes.

Data Analysis

Since this was an exploratory-descriptive study, the analysis of the data sought . . . to demonstrate the

---

plausibility of . . . hypotheses and not "test or to prove" them.¹ This is the approach recommended by Bogdan and Taylor when conducting phenomenological research, where data is primarily qualitative. In keeping with this approach, the definition of the data analysis is . . . a process which entails an effort to formally identify themes and to construct hypotheses (ideas) as they are suggested by data and an attempt to demonstrate support for those themes and hypotheses.²

This study was facilitated by the collection of qualitative and quantitative data. Non-parametric statistics were utilized to analyse the quantitative data. These included measurements of central tendency such as averages, modes and percentages. Frequency distribution and chi square test of significance assisted in comparing and contrasting the sample on various research items. Such statistics summarized overall trends and tendencies of the responses to closed-end questions.

The analysis of qualitative data was undertaken or influenced by the methodologies of participant observer research. For example, the procedure of "Inspection,"³


²Ibid., pp. 80-83.

as described by Blumer, had particular relevance to this study because the data was obtained from "personal documents."¹ (Bogdan and Taylor define "personal documents" as that data derived from interviews regarding self-reporting and introspection about personal life events). Blumer states that inspection procedure is an intensive, focused examination of the empirical material relating to concepts and variably being studied. The procedure involves "examining the given concept by approaching it in a variety of different ways, viewing it from different angles, asking different questions of it, and returning to its scrutiny from the standpoint of such questions."²

Further, in order to study the data, it was organized along the lines suggested by Bogdan and Taylor. They describe the major steps in a process of organizing and analyzing qualitative data:

a. "Read your field notes."
   This step reacquaints the researcher with the data collected, and themes begin to emerge, both expected and unexplored.

¹Bogdan and Taylor, Introduction to Qualitative Research Methods: pp. 100-101.
²Herbert Blumer, Symbolic Interaction Perspectives and Methods, p. 44.
b. "Code important conversation topics."
   Certain topics occur and reoccur in the process of data collection with various respondents. For example, the notion of "envidia" in this research continuously emerged in the interviews.

c. "Construct typologies."
   Classification schemes may be constructed to sensitize the researcher to subtle aspects of the setting and respondents. For example, a classification scheme of believers in curanderos and non-believers assisted in determining differences.

d. "Read the literature pertinent to your interests and your setting."¹

   Bogdan and Taylor suggest comparing one's emerging findings with findings reported in the literature. Hence, the researcher begins to relate the findings to previous findings in a confirming or questioning manner.

   On reviewing the data, it was observed that the categories into which many responses fell were similar and that many cells had few or insignificant responses. Consequently, a decision was made to collapse responses into

¹Bogdan and Taylor, pp. 79–94.
fewer categories so as to provide for more careful analyses. Efforts were made to insure that this process was uniformly applied for the appropriate data.

Structure of Study

The study is reported in several chapters. The chapters reporting findings dovetail with the research instrument in presentation. There are eight chapters, with the last presenting the data and findings. Chapter 4 presents the demographic characteristics of the sample. Chapters 5 to 7 present the findings regarding the indigenous resources: Chapter 5 focuses on The Belief System, Chapter 6 on The Family, Extended Kin, and Friends/Compadres as Helpers, Chapter 7 on the Curandero and Priest/Minister as Helpers, and Chapter 8 reports the conclusion and recommendations.
CHAPTER IV

DEMOGRAPHIC CHARACTERISTICS

This chapter presents an analysis of the demographic characteristics of the sample population. The demographic characteristics included the following: generation/residence, ethnic identification, age of subjects, family size, dominant language, education, employment, and income. Such characteristics provided a descriptive background on the sample.

The major variable of the study was generation, and a minor variable of interest was the setting of residence at the time of the data collection. Hence, given the complexity of the data, the analysis was confined to comparison of the responses on the basis of frequency distribution, and where indicated, a chi square test of significance was utilized. Also where pertinent the total sample statistics is presented.

The sample consisted of thirty-six couples for a total of seventy-two individuals. As described in the methodology, the sample represented first and second generations, as well as equal representation from urban and rural settings. Hence, there were nine first generation urban couples and nine first generation rural couples. Of the second generation, there were nine urban and nine rural couples.
Ethnicity

Respondents were asked to identify their preference of ethnic designation between the following categories: Mexican, Mexican-American, Chicano, Spanish-American, and others. The choices are reported in Table 1. Further, the responses on this item are analyzed by the variable of generation.

Seventeen (94 percent) of the first generation couples identified their ethnic preference to be Mexican, and only one (.6 percent) first generation couple elected to identify themselves as Chicano.

The second generation respondents predominantly preferred to identify themselves as Mexican-American. For example, ten (56 percent) second generation couples preferred to be identified as Mexican-American. Four, or 22 percent wanted to be referred to as Mexican; and four (22 percent) couples identified themselves to be Chicano.

In examining the frequency distribution of the ethnic identification preference item several differences are noted. A majority of the first generation couples, seventeen identified themselves as Mexican, as opposed to only four second generation couples. No first generation couples identified with the Mexican-American ethnic category, while ten second generation couples identified with that category. Analysis of the data revealed a statistical difference
<table>
<thead>
<tr>
<th></th>
<th>Mexican</th>
<th>Mexican-American</th>
<th>Chicano</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>First Generation</strong></td>
<td>17</td>
<td>0</td>
<td>1</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>94 percent</td>
<td></td>
<td>6 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Second Generation</strong></td>
<td>4</td>
<td>10</td>
<td>4</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>22 percent</td>
<td>56 percent</td>
<td>22 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>21</td>
<td>10</td>
<td>5</td>
<td>36</td>
</tr>
</tbody>
</table>

Chi Square = 19.8 with 2 Degrees of Freedom at .05 level is significant
between the first and second generations with respect to their choices of ethnic designation. Further, a total of twenty-one couples of the entire sample preferred to be identified as Mexican, ten saw themselves as Mexican-Americans, and five preferred to identify themselves as Chicanos.

Primary Language

The primary language preferred by the respondents is reported in Table 2. Since language is a form of communication, responses for husbands and wives are reported jointly. Theoretically, there could have been a difference in individual choice of language, but this was not ascertained. Language preference includes three categories: Spanish, English, and a combination of English and Spanish.

Seventeen couples (94 percent) of the sample who were of first generation respondents reported Spanish as their primary language, and one (6 percent) couple identified English as its primary language. The variation in language preference was pronounced among the second generation. English was identified as the primary language by eleven (61 percent) second generation couples. A combination of English and Spanish was indicated as the primary languages by six (33 percent) of these couples. Within the sample the second generation respondents, only one (6 percent) identified Spanish as its dominant language.
<table>
<thead>
<tr>
<th></th>
<th>Spanish</th>
<th>English</th>
<th>English/Spanish</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>First Generation</strong></td>
<td>17</td>
<td>1</td>
<td>0</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>94 percent</td>
<td>6 percent</td>
<td></td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Second Generation</strong></td>
<td>1</td>
<td>11</td>
<td>6</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>6 percent</td>
<td>61</td>
<td>33 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>18</td>
<td>12</td>
<td>6</td>
<td>36</td>
</tr>
</tbody>
</table>

Chi square = 28.0 with 2 Degrees of Freedom at .05 level is significant.
A statistical significance was found between the first and second generations with respect to language preference. Language preference among the first generation was Spanish. Among the second generation, the primary language was English, with six second generation respondents identifying a combination of English and Spanish as their primary language preference.

**Average Age of Couples**

The ages of the couples are reported in Table 3. Range of the age categories was a six-year span beginning with the age of nineteen, and the analysis of the age variable is also reported in averages of the couples' ages. Individually, at the time of data collection, the youngest respondent was age twenty-one, and the oldest respondent was forty-three years of age.

Among the first generation couples, the following age breakdowns were noted. There were four (22 percent) couples in the age category of nineteen to twenty-five; and nine (50 percent) couples in the twenty-six to thirty-two category category; three (10 percent) couples in the thirty-three to thirty-nine category, and two (11 percent) couples in the forty or more age category. The second generation couples had similar ages. Five (24 percent) couples were reported in the nineteen to twenty-five age category; ten (56 percent) couples in the twenty-six to thirty-two category;
TABLE 3
Average Age of Couples

<table>
<thead>
<tr>
<th>Years of Age</th>
<th>19-25</th>
<th>26-32</th>
<th>33-39</th>
<th>40 or more</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Generation</td>
<td>4</td>
<td>9</td>
<td>3</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td>22 percent</td>
<td>50 percent</td>
<td>16 percent</td>
<td>11 percent</td>
<td>100 percent</td>
<td></td>
</tr>
<tr>
<td>Second Generation</td>
<td>5</td>
<td>10</td>
<td>2</td>
<td>1</td>
<td>18</td>
</tr>
<tr>
<td>27 percent</td>
<td>56 percent</td>
<td>11 percent</td>
<td>6 percent</td>
<td>100 percent</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>9</td>
<td>19</td>
<td>5</td>
<td>3</td>
<td>36</td>
</tr>
</tbody>
</table>

* Median age 37.5
** Minimum age 21
Maximum age 43
two (11 percent) couples in the thirty-three to thirty-nine category, and one (6 percent) couple in the forty or over years of age category.

There was no significant difference between the first and second generation couples in terms of their average ages, and the majority of the total couple respondents were between the ages of nineteen and thirty-two.

The analysis of the age range categories reveals that the total sample is predominantly of child rearing age, with all having young children. There were a few subjects, five, who reported forty or more years of age, with forty-three years of age being the oldest. However, over half (53 percent) of the total sample reported their ages in the twenty-six to thirty-two age range, and 25 percent of the couples reported their ages in the nineteen to twenty-five age range. This implies a population who, because of their child rearing responsibilities and relative youth, may be faced with similar life problems and needs regardless of their generation status, and hence may rely on the support systems of family and others for assistance. This assistance may not necessarily be solicited, but it is readily available as a function of the family relationships.

Family Size

Family size refers to the number of children per nuclear family. The data on family size for the respondents is
reported in Table 4. The data indicate that seven (19 percent) couples had two or fewer children, seventeen (47 percent) couples had between three and four children, while twelve (33 percent) had between five and six children. The largest family size was six children. Of the first generation families, ten (55 percent) reported five to six children. Five (28 percent) of the families stated they had three to four children, and three (17 percent) families reported one to two children.

The second generation reported the following family sizes: Two (11 percent) of the families had five to six children. Twelve (67 percent) had three to four children, while four (22 percent) of the second generation families had one to two children at the time of data collection.

The first generation couples had more children than second generation couples. Fifty-five percent of the first generation had five or more children, while only two (11 percent) families of the second generation reported five to six children. The second generation sub-sample reported a percentage of sixty-seven to have three to four more children. In the one to two category, the percentage of first generation was seventeen, and the percentage of the second generation was 22 percent.

Statistically, the chi square test of significance concluded that a difference between the first and second generation respondents existed in regard to the number of
<table>
<thead>
<tr>
<th></th>
<th>1-2</th>
<th>3-4</th>
<th>5-6</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>First Generation</strong></td>
<td>3</td>
<td>5</td>
<td>10</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>17 percent</td>
<td>28 percent</td>
<td>55 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Second Generation</strong></td>
<td>4</td>
<td>12</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>22 percent</td>
<td>67 percent</td>
<td>11 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>7</td>
<td>17</td>
<td>12</td>
<td>36</td>
</tr>
</tbody>
</table>

Chi Square = 8.34 with 2 Degrees of Freedom at .05 level is significant.
children, with the first generation having larger families than the second generation.

Education

Education is another dimension of the sample. The data are reported in Table 5. Educational levels of the couples are reported in averages and analyzed by the variable of generation. The data are reported in three categories, and the first two categories had a five year education grade span, and the last category was open-ended, beginning with the twelfth grade. The three categories covered the full range of possible educational levels. It was assumed that none of the respondents would report education beyond the twelfth grade, based on the selection criteria for the sample, and the host agency's criteria for provision of services.

The first generation couples had the following distributions: Twelve (67 percent) had five or less years of education, four (22 percent) had between six and eleven years of education, and two couples (11 percent) had twelve or more years of education. In contrast, the second generation couples had the following distribution in respect to education: eight (44 percent) couples had five years or less of education; four (22 percent) had between six to eleven years of education; and six (33 percent) couples had twelve or more years of education. Also of interest is that of
TABLE 5
Average Education of Couples

<table>
<thead>
<tr>
<th></th>
<th>0-5</th>
<th>6-11</th>
<th>12 years and over</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>First Generation</strong></td>
<td>12</td>
<td>4</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>67 percent</td>
<td>22 percent</td>
<td>11 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Second Generation</strong></td>
<td>8</td>
<td>4</td>
<td>6</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>44 percent</td>
<td>22 percent</td>
<td>33 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>20</td>
<td>8</td>
<td>8</td>
<td>36</td>
</tr>
</tbody>
</table>
the total sample 55 percent of the couples had five years or less of education, and 22 percent of the couples had between six and eleven years of education.

Employment

The type of employment of the respondents is presented in Table 6. In the analysis of the data, the variable of generation is utilized. Employment was divided into two categories: Farm worker, blue-collar/skilled worker. Employment here means the type of work activity from which the couple derived their major source of income. Therefore, the statistics are limited to reports of employment and do not address the number of housewives only category. As a matter of interest, there were two first generation wives and eight second generation wives who were not employed outside the home and identified themselves as housewives.

Farm labor work was the predominant employment status of the first generation couples. Fourteen couples (78 percent) first generation, identified this as their life work. Four couples (22 percent) reported themselves as blue collar/skilled workers.

In contrast, the second generation couples clustered in the blue collar/skilled worker employment category. There were a total of sixteen (89 percent) in this category. Two couples identified themselves as employed in farm labor.
TABLE 6
Employment

<table>
<thead>
<tr>
<th></th>
<th>Farmwork</th>
<th>Blue Collar/Skill</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Generation</td>
<td>14</td>
<td>4</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>78 percent</td>
<td>22 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Second Generation</td>
<td>2</td>
<td>16</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>11 percent</td>
<td>89 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Total</td>
<td>16</td>
<td>20</td>
<td>36</td>
</tr>
</tbody>
</table>

Chi square = 16 with 1 Degree of Freedom at .05 level is significant.
Analysis of the data revealed a statistical difference existed between the first and second generations in respect to the type of employment.

Income

Family income is reported in Table 7. Income was divided into three categories, beginning with $3,500.00 at the lower level. Each category has a $2,000.00 range. Income is reported as joint couples response. The reason for this division is that most families usually report their total income as a unit, especially for income tax and other business purposes. Also, the study focused on the total family system and its available resources, income being an important if not vital one. Income reported was for the previous year prior to the investigation.

A majority of the first generation couples reported income in the middle range. Three couples (17 percent) reported their income between $3,500.00 and $5,699.00; fifteen couples (83 percent) reported an income between $5,700.00 and $7,899.00. No first generation couples reported an income of $7,900.00 or more.

In contrast, the second generation couples had the following incomes: Eight couples (44 percent) had an income between $5,700.00 and $7,899.00, and ten (56 percent) reported an income of $7,900.00 or more, and no second generation couples had an income of $5,699.00 or less.
### TABLE 7

<table>
<thead>
<tr>
<th></th>
<th>First Generation</th>
<th>Second Generation</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$3500.00 to $5699.00</td>
<td>$5700.00 to $7899.00</td>
<td>$7900.00 and over</td>
</tr>
<tr>
<td>First Generation</td>
<td>3</td>
<td>15</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>17 percent</td>
<td>83 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Second Generation</td>
<td>8</td>
<td>10</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>44 percent</td>
<td>56 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Total</td>
<td>3</td>
<td>23</td>
<td>10</td>
</tr>
</tbody>
</table>

Chi square = 15.2 with 2 Degrees of Freedom at .05 level is significant.
The first generation respondents indicated lower incomes than the second generation respondents. For the second generation, the income range of $5,700.00 to $7,899.00 was the lowest reported, whereas, for the first generation, the range of $3,500.00 to $5,699.00 was the lowest. Also, the second generation indicated a higher income range than the first generation respondents. Ten families indicated incomes between the range of $7,900.00 and over, whereas, no first generation families reported income in this range. A statistical difference with respect to income between the first and second generation couples was revealed in the analysis.

Summary

This chapter examines and analyzes the demographic characteristics of the sample population of this research. The analysis provides an overall description of the sample. Differences were found in ethnic label identification among the first and second generation respondents with first generation respondents having a preference for Mexicans while the second generation respondents primarily identified themselves as Mexican-American. In the preference of language, a significant difference was found with the majority of the first generation respondents stating that Spanish as their language preference; while English and/or a combination of English and Spanish was preferred by the
second generation.

In the age category, no significant difference was noted. However, a significant difference was found in the family size category, with the first generation respondents having more children than the second generation respondents. A difference between the generations was noted in the education, with the second generation having more years of schooling in contrast to the first generation. In employment and income, two closely related categories, differences were found among the respondents. Second generation respondents were employed primarily in blue collar type work (farm related) while the first generation was primarily engaged in farm work. And in the income category, the second generation had higher income levels in contrast with the first generation respondents.

In respect to the demographic characteristics, significant differences were determined among the first and second generation respondents, except in the characteristics of age.
CHAPTER V

BELIEF SYSTEM

This chapter will present the findings on the Belief System of the subjects. In this study Belief System is used to refer to the respondents perception of or attitude toward the "supernatural" forces of God, evil and religion. The main research issue explored in this chapter was the significance of religion and related institutional practices as a resource for Mexican-Americans. Exploration of this issue was conducted by asking open and close ended questions. The data were essentially obtained in the following manner: an exploration about their religious orientation followed by an inquiry about their belief in God or their belief system. The rationale for reporting religion and belief system in the same chapter is based on the inter-relatedness between these two areas.

Religion

For the purpose of this study the role of religion was further explored in the context of its function as an indigenous resource. Generally religion is considered a demographic characteristic. However, religion can be considered as the impetus for the beliefs and practices that a people evolve. Therefore, the specific religion chosen by
a given group of people or individuals will influence their perspective of life, their perception regarding causation of problems, and as a consequence, will influence their views on the amelioration of problems.

First, the religious orientation of the respondents is reported. There were 17 (94 percent) first generation couples who identified Catholicism as their primary religion and only one (6 percent) first generation couple who identified themselves as Protestant. The second generation couples reported the following: Fourteen (77 percent) second generation couples indicated that they were Catholics, while four (23 percent) couples identified themselves as Protestants.

The following statements made by the respondents about their religious orientation further identifies their views and attitudes. For example, first generation Catholic couple stated that through the Ritual of Prayer, their faith was strengthened.

A second generation couple stated that "Faith in God helps with life problems."

Another point of view was shared by a Protestant respondent who indicated that believing in God is the "sole requisite for living," and that "one's faith in God would take care of all life's problems."

Finally, it was voiced that "One has to continuously pray and give thanks for one's existence and abundance in
life no matter how bad off you are."

Other non-categorized descriptive data in reference to religious orientation were observed and are documented here to further substantiate the pivotal role of religion with Mexican-Americans. For example, those respondents who identified themselves as Protestants readily shared how they converted to their religion.

They articulated strong religious beliefs in their faith and acknowledged the importance of the congregation in their lives. Congregation, as defined by the subjects, included a wide range of persons, the minister (Preacher), friends, and close relations on whom they could rely for help. For many families their network of relationships centered around the church which also provided a social outlet as well as ongoing contact for a variety of purposes. The central force bringing them together was the commonality of religion. Their relationship with God was also considered important. However, from this evolved a wide range of relationships. Several respondents noted that if they could not attend the church activities, their children were transported and cared for by some adult members. They indicated this practice was common among the members of the congregation in terms of being available for one another. Silverman refers to this type of interaction as mutual help whereby there is
the opportunity for members to take each other's place within
the structure of the network.¹ Their relationship and
interaction with congregation members provided an opportunity
for emotional sharing and also provided a network whereby
resources could be shared such as assistance of a monetary
nature and provision of other commodities.

Those subjects of Catholic religious orientation shared
information about their network of relationships in terms of
comprades (co-parents), the priest as the confidant and
religious rituals were also identified as important. Their network
of relationships included extended kin who participated when
religious rituals were celebrated. These individuals
accompanied family members, assisting as co-parent or by
attending the celebration of the religious rite. It is a
common practice to have a festive celebration when a
religious rite, such as the baptism of a newborn child takes
place, and to invite family and friends to share in the
experience.

Relationships stemming from the commonality of religious
backgrounds and interests was discussed by the respondents
in terms of how they were utilized when afflicted with a
crisis. For example, when a death in the family occurred,
concerned members (friends, comprades) rallied to assist the

¹Silverman, Phyllis, Mutual Help Groups: A Guide for
Mental Health Workers (Rockville, Md.: National Institute of
grieving family. The customary practice is to have a wake where a rosary is offered to the deceased member, afterwards to visit with the grieving family, and then accompany them on the day of the funeral. Following the funeral, food and beverages are brought by concerned others, and all gather at the residence of the grieving family. This experience provides an opportunity to share emotional support and allows interaction among those present. In essence, these types of religious activities provides both opportunities for continuously perpetuating and taking advantage of the network of relationships.

The two cited examples reflect how the co-parents, friends, and family participate in providing emotional support, the sharing of an experience and also in provision of other commodities such as food and money. It should be noted that family and others assist with monetary needs such as paying funeral expenses when needed.

Another area which was identified as being of importance in obtaining support on a daily basis was that of religious relics. Observation of the homes of those respondents, identifying themselves as Catholic revealed religious relics throughout the home. Some homes were observed to have small palm crosses in each doorway. Others had figures of religious saints in their main living room, and others had a designated area in their home which they referred to as an altar. The
purpose of the altar was to provide an area where religious rituals such as the reciting of a rosary, candle lighting, and prayer could take place. For others, the rituals were performed on their own without an altar. Religious relics were identified as providing "protection," and were referred to as "representing God." Once the religious orientation was determined, the belief system and practices were further explored by examining specific areas. The sample was asked questions that focused on God and evil. In this manner, the notion of the belief system acting as resource was further analyzed.

Belief in God

To ascertain their belief system, the subjects were asked questions which explored their belief in God. Initially, they were asked if they believed in God. All respondents indicated they believed in God. Therefore, a unanimous acknowledgment on one question was articulated.

Respondents were then asked "Do you believe that God causes or sends problems?" Thirteen (72 percent) of the first generation couples acknowledged that God caused or sent problems. Of the second generation, eleven (61 percent) indicated "yes" in response to this question.
Further explanations of their views of why problems were caused or sent by God are highlighted in the following excerpts:

Mr. and Mrs. R. (first generation), believed that problems were sent by God "when we get away from God, it's like a punishment."

On the other hand, Mr. and Mrs. G. (first generation) believed that problems sent by God were a means to "test our faith." A second generation couple, Mr. and Mrs. B believed "Our life is controlled by God," and added "We live like God wants us to." These responses, in general, reflect that God is responsible for many of the problems with which they are faced.

A total of five (28 percent) first generation couples indicated that they did not believe that God caused problems. Closely related seven (39 percent) second generation couples indicated that problems were not caused or sent by God. Their rationale for not believing that God caused problems was that problems were perceived as "man-made." For example, Mr. and Mrs. T. (second generation) gave their marital relationship as an illustration and shared some difficulties they had experienced. They acknowledged "It could have been easy to blame God, but we had to take responsibility for changing our relationship." A first generation couple stated, "Man is his worst enemy," and shared about a burglary they experienced.
The consensus among this grouping was that man was responsible for problems that he experienced. Although the individual may not have directly caused the problem, he was responsible for handling it.

Respondents were asked to reflect on the question: "What kind of problems are caused or sent by God? On the basis of theories and previous studies, it was anticipated that respondents would differentiate between such problems as physical illness, death, mental problems, combination of problems, No Answer.

The data indicated that 13 (72 percent) first generation couples stated that God caused a combination of problems. Specific problems identified by one family (first generation) were "illness for children and adults, accidents, frustrations and pre-occupations." Another family shared personal illustrations of problems experienced which were "money problems and marital discord." This family also identified "epilepsy" as a problem God sent and indicated, "You are destined from birth and cannot prevent this kind of problem." Five (36 percent) of the first generation couples gave no answer about their belief of how problems were caused.

Three (17 percent) second generation couples indicated God caused mental illness and 8 (44 percent) couples reported God caused a combination of problems. For example, Mr. and Mrs. L. discussed catastrophic illness in their family, and
in reference to its causation articulated, "Solo Dios sabe." (Only God knows). Family C and Family J shared feelings about family members afflicted with emotional illness. There was no history of such illness. However, they viewed the causation as a means of testing the family's faith in God. Another relevant theme was that they felt it was a means of having them "not take things for granted." Seven (39 percent) gave no answer to this question.

Those responding to this question believed God could inflict an individual with any type of problem. The perception of the type of problems sent or caused by God was varied. However, a significant theme in their responses was that God was "all-powerful" and "in control of their lives," hence, events were controlled externally (God's will). This strong belief about the external causation of problems or other life events influences how some Mexican-Americans view that mental, physical or social problems may be ameliorated.

To further clarify the subjects' belief system, they were asked, "What can you do to deal with or solve problems caused or sent by God?" Most of the first and second generations responding to this issue shared similar views and beliefs. Responses such as "There's nothing one can do," to "One should pray and believe in God," were articulated by the subjects. One subject related that the reason "God punishes" is because we do not lead "good lives." Another
young paralyzed man (quadraplegic) felt that it was his "fate and I have to accept it." He added that "no matter what kind of life I have lived, the accident would have happened anyway." The responsibility is thrust onto God who is "all-powerful" and will take care of the individual. Another theme in the responses was that the individual who is suffering "should expect" help from God and his family.

In respect to the foregoing issues, analysis of the descriptive data indicated no significant differences were found between first and second generations. It was concluded that those of the first and second generations who are "believers" shared similar views and practices. Hence, the belief system, as interpreted by most of the sample, was one where God had a central role in their lives. Those individuals who perceived God as "all-powerful" perceived problems as stemming from having been sent or caused by God. This view similarly influenced how individuals perceived the handling of these problems. On the other hand, another theme that emerged from the descriptive data was that man was responsible for the causation of problems and not God. God's role was acknowledged as an additional support system to assist in coping with reality.

Projecting responsibility onto God for problems experienced in their life situations appeared to be a passive gesture in the handling of life's problems. Although, in
essence, these individuals were actively engaged in seeking amelioration for their life situations. For example, Mr. and Mrs. B. shared that when they experienced a death in the family, they believed that "God sent it." Their reaction to this crisis was to pray to God for strength in coping with the death and to maintain close ties with the church. Hence, during a time of crisis they utilized their belief system for emotional support. Their means of dealing with this situation involved seeking concrete, pragmatic methods to cope with their emotional pain. On the other hand, Mr. and Mrs. G., in response to a death in the family, did not blame God, but viewed this crisis as inevitable. Their means of coping was to utilize prayer and they actively sought support from friends and family.

These two family situations are an example of how they viewed God's role in their lives, and this affected their reaction to a crisis. Based on their individual belief system, they actively utilized their support systems to cope. For the B family, their belief system provided the comfort and support they needed, and the G family utilized their belief system in conjunction with support from friends and family.

In summary, the individual's belief system may influence the kinds of resources sought and utilized in dealing with life situations. Hence, one's belief system
is a resource available that can be incorporated as a support system.

Believe in Evil

The subjects discussed protection in terms of warding off evil. Specifics in terms of how they defined evil will be discussed in the following paragraphs.

For years, religious philosophers have debated the issue of: How can the acknowledgment that there is evil and suffering in the world be reconciled with a belief in an all good and all powerful God? McPhearson proposed that one solution may lie in limiting God. In other words, "We might say that God exercises his omnipotence by placing restrictions upon Himself; or we might say that even supreme power does not need to be exercised all of the time."

To further explore this notion, one final question in exploring the respondents' belief system was: "Do you believe that evil exists?" The total sample responded affirmatively to this question. There was no difference in responses between the first and second generation, hence descriptive data are presented to further illustrate their views. For example: A first generation couple believed so intensely in evil, that they were reluctant to discuss their

---

views. They indicated that talking about such material would dignify the presence of evil.

Mr. and Mrs. G shared some information about evil and their views, about its function in problems, illness, and life in general. They shared a personal experience which affected their relationship a few months prior to being interviewed. Apparently, Mrs. G. had heard from her network of relationships that her husband was involved in an extra-marital relationship. Upon confrontation, Mr. G. vehemently denied the accusation, which created much tension between the couple. They sought counseling from the minister, and after much discussion, concluded rumors had been initiated by "someone." Their perception was that perhaps someone "envied our relationship" and through "rumors" evoked feelings that created "problems in our relationship." The couple's explanation of the concept, referred to as "envidia," was widely shared by other subjects.

"Envidia" is a social phenomena widely ascribed to in the Mexican culture. Loosely translated, the term means jealousy or strong envy. However, the implications of the concept are much deeper than the latter concept since it also implies actions actually negative or retaliation taken as a result of the sentiment. For example, several respondents shared personal experiences where the concept of "envidia" interfered in their social relationships. The
common situation experienced by several men was related to work and the possibility of a promotion. The illustration cited was how someone experiencing "envidia" could sabotage the possibility of one obtaining such a promotion. Perhaps the individual could negatively influence the mayordomo (boss) by giving misinformation, creating conflict or by competing for the same job. "Envidia" was perceived as a strong evil force which created emotional distress or upset which impeded an individual from achieving a potential positive experience. The concept was also perceived as a deterrent in regard to family relationships. Situations where familial bliss existed were often impeded (as perceived by the subjects) by an outsider, such as by rumors, gossip or other evil related methods. Several subjects articulated that the concept of "envidia" interfered with "Mexicans getting ahead in society." Also of importance was that "envidia" was perceived as a "real test" regarding those relationships that mattered and were truly important."

Other explanations in reference to evil and its effect on life problems are described in the following descriptive data analysis. One explanation was that evil and God always exist side by side, and when the individual becomes "weak" in his belief in God, he or she may succumb to evil. Another explanation was that "It is just the nature of the universe to experience evil at times." "One's relationship
with religion" was an explanation in understanding the etiology of life's problems. Some other explanations were "Human beings are basically evil," "An outside force that exists constantly interferes with one's relationship with God," and "Cuando uno esta agusto tiene que menter la pata el diabloe" (When one is content, the devil has to interfere). The last quote summarized the underlying thought experienced to some extent by most respondents. In many ways, this comment is closely related to "envidia" in that some external force has some effect on the outcome of a life situation. McPhearson makes a distinction between the different types of evil. "Moral evil is a suffering caused by men to each other; natural evil or physical evil, is a suffering caused to men not by other men, but by natural events over which men have no control, such as earthquakes."¹

A review of the verbal responses indicated that belief in evil was discussed primarily in terms of how it affects interpersonal relationships. An example of an individual seeking economic mobility was referred to as where evil intentions could jeopardize someone's situation. The causation of physical symptoms was another situation cited as

¹Ibid.
being triggered by an external force such as evil. In these situations consultation with a curandero (specific examples to be discussed in a later chapter) were in order. Analysis of the data regarding evil suggests that life's problems such as physical illness, personal symptoms or other life situations are believed to be caused by an external supernatural force. The belief in God and evil reflects the respondents' perceptions of what causes certain problems, and amelioration of such problems is explained within the belief system. Similarly religion is a source of help for some Mexican-Americans. The data indicate that religion is utilized on an ongoing basis in reinforcing the relationship with God.

Through the utilization of these rituals, along with adherence to religious relics (particularly Catholics), protection from evil was sought. Rubel suggests that a belief system helps the individual save face and provides the mechanisms to restore the equilibrium of the given situation.1

The data illustrated that religion had a central role in providing a linkage among members. Both Catholic and

---

1Rubel, A. Across the Tracks: Mexican-Americans in a Texas City, pp. 100-294.
Protestant respondents indicated that the commonality of religion linked them with a network of relationships. It is through the use of social networks that mutual aid allows the individual the opportunity to be recipients and sometimes helper. The assistance provided among respondents ranged from psychological and social support to that of economical assistance.

Summary

This chapter focused on exploring the belief system of the sample population. Several important themes resulted from the data analysis. A consistent pattern reflected in the data was that beliefs, religion and religious practices are an important system of assistance and a resource to the Mexican-American. Statistical data analysis revealed no significant differences between first and second generations in this chapter. Generally, all respondents, whether Catholic or Protestant, acknowledged that their belief systems assisted them in coping with life's problems. It was observed in the respondents that their belief systems provided explanations and answers to life's situations. Both Protestants and Catholics possessed a network of relationships. Hence, utilization of their significant others was incorporated into their beliefs and practices of amelioration of their life's problems.
Another issue explored in this chapter was respondents' beliefs in evil. Responses to this inquiry did not reveal any significant findings between the first or second generation. On one hand, evil was seen as a supernatural force as well as man-made. An important theme that evolved was that their perception of evil tended to influence the kinds of resources sought to deal with the situation. In summary, the data indicated a family's belief system will influence its perception of the etiology of the problem and what resources they utilize to ameliorate the situation.
CHAPTER VI

THE FAMILY, EXTENDED KIN, AND FRIENDS/COMPADRES AS A RESOURCE

INTRODUCTION

This chapter explores the resource of the family, extended kin and friends/compadres. It was thought that the shared relationship is the common denominator amongst this indigenous resource. Hence, the decision was made to present the findings in this chapter. The chapter is divided into two major sections. The first addresses the family-extended kin, and the second focuses on friends and compadres as a resource.

Family and Extended Kin

This section presents an exploration of family and extended kin as helpers. The literature on the Mexican-American family indicates that there exists a significant support system within this community and ethnic group. Ties beyond the immediate family are strong and extensive, and reciprocal rights and duties are connected with all relatives, including grandparents, aunts, uncles, and cousins.¹

Further, Madsen described the Mexican-American family as a "haven from threat and trouble,"¹ where one always finds cooperation and assistance in time of need. Similarly, Gonzales and Garcia found in their research that family members feel an obligation to help each other and actually do so in practice (irrespective of class).² The literature documents the importance of assistance in time of need. Therefore, the focus of this section was to explore under what conditions the family and extended kin assist an individual or family member(s).

To fully comprehend this notion of mutual help among family members, the first task explored whom the respondents considered as their family, by way of an open-ended question, "Whom do you consider to be your family?" The rationale for this question was to avoid a prior response and simple assumptions that both respondents and questions were talking about the same concept of family. Consequently, the subjects had the opportunity to identify the social structure of their families, nuclear or extended. Two types of family structures


are primarily identified in the literature. The first is known as a nuclear family, which includes two parents and children, while the extended family concept encompasses a much wider number of people, usually including grandparents from both sides of the conjugal pair, brothers and sisters, cousins, and significant others. Further, the literature states that Mexican-Americans have a predominant extended family structure.\(^1\) The response to this question is reported by generation only. The responses to the question reflected strong family convictions about the extended family structure which was identified as their family constellation by most of the respondents. Seventeen (94 percent) of the first generation couples stated the family orientation was of an extended nature. Only 1 (6 percent) first generation couples indicated they had a nuclear-type family. All 18 (100 percent) second generation couples identified that they had an extended family structure.

The following quotes describe some of the statements which reflect strong convictions about the extended family. Their views about whom they consider as family are based on their lives, social and cultural experiences as evidenced by the illustrations. Two case illustrations are presented

to illustrate how the subjects described their family orientation.

The G's, who are first generation Mexican-Americans, describe their family constellation in the following manner: Mrs. G. stated, "I consider my family to be those relatives who are important to me and my welfare, and who I keep in contact with." She included those family members as "my parents, brothers and sisters, my aunts and uncles, and cousins from my mother's and father's sides of the family." She added that the grandparents who reside in Mexico are part of her family, and she visits them at least twice a year. Finally, Mrs. G indicated her husband's children, and her husband's family are also a significant part of her family.

The boundaries of family stretched beyond blood or conjugal ties for Mrs. G, as she considered, to a lesser degree, some friends as part of her family. She indicated, "We act like a family with one another, and I feel close with them, so they are my family too."

On the other hand, Mr. G's view of whom he considered family was limited in comparison to his wife's. He stated, "My family includes my wife and children, her parents and my parents, brothers and sisters, some uncles and aunts and cousins. My grandparents are deceased."

Mrs. B, who is second generation Mexican-American, stated, "It is difficult for me to say specifically who all
are my family, because we are so many. I consider even second and third cousins as family, my husband, his parents, brothers, sisters, my children."

Mr. B shared his wife's view, stating that his family included his wife, his children, his parents, his brothers and sisters, uncles, aunts, and some cousins, those with whom he has contact, and also, "my in-laws."

These statements serve as an illustration of the nature of the responses made by first and second generation couples.

The data indicates that the extended family orientation is the predominant family structure among the sample. Based on the sample's definition of whom they considered family, several themes evolved about their views of the family. In reviewing the data, boundaries about whom they considered as family were not limited to blood relationships or conjugal ties. The definition of family includes all those individuals who have a significant role in the respondent's lives. In other words, those individuals identified as members of the family were included on the basis of their relationship and role within the family matrix. Thus, the quality of the relationship was an important attribute as articulated by the respondents. And quality of the relationship was summarized by a respondent as "Sharing, being understood, someone you can depend on, and one who stands by you through all weathers."
In other words, the emotional tie is the core linkage among individuals.

According to the sample, their network of relationship was extensive and, despite geographic distance, contact was maintained. This finding is similar to Litwaks' study which revealed that familial relationships were maintained through modern technology regardless of geographic distance.¹ Similarly, the sample identified that organized transportation, telephone, mail and telegrams aided in maintaining communication.

The previous question which asked, "Whom do you consider family?" provides a framework or mental set for the respondents for further investigation regarding their network of family relationships. The following inquiry explores when, how and what kind of assistance was provided or could be provided by the individual's family and extended kin.

Respondents in the study were asked: "Have you ever received assistance from your family and extended kin?" Responses were obtained from couples. A high reliance on family and extended kin is reflected in the responses. For

example, sixteen (89 percent) of the first generation couples answered, "Yes," indicating that the family had provided aid to them. Only two (11 percent) of the first generation couples responded, "No," to this question. Of the second generation couples sixteen (89 percent) stated that they had received some type of assistance from the family and extended kin. And two (11 percent) of the second generation couples reported that they had received no assistance from their families and extended kin.

Analysis of the data indicates no significant difference between the first and second generation with respect to receiving help from family and extended kin. A total of 90 percent of the sample reported that they had received assistance from their families and kin, and 10 percent stated that they had not been aided.

To further clarify the provision and receiving of assistance from their kin, the respondents were asked, "When was the last time you received assistance from family or extended kin?" These responses also provided an insight into the relevance and utilization of assistance from family and extended kin. Table 8 reports the responses of the sample. The issue was statistically analyzed by the variable of generation. The categories were 6 months, 1 year, 2 years, and not applicable.
<table>
<thead>
<tr>
<th></th>
<th>6 months</th>
<th>1 year</th>
<th>2 years</th>
<th>N/A</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>First Generation</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>8</td>
<td>2</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td>Percent</td>
<td>23</td>
<td>44</td>
<td>11</td>
<td>11</td>
<td>100</td>
</tr>
<tr>
<td><strong>Second Generation</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>13</td>
<td>3</td>
<td>0</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td>Percent</td>
<td>72</td>
<td>17</td>
<td>0</td>
<td>11</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>19</td>
<td>11</td>
<td>2</td>
<td>4</td>
<td>36</td>
</tr>
<tr>
<td>Percent</td>
<td>53</td>
<td>31</td>
<td>6</td>
<td>11</td>
<td>100</td>
</tr>
</tbody>
</table>
Statistically, six (23 percent) first generation couples stated that they had received aid from their kin within the last six months. Eight couples (44 percent) stated that they had received assistance within the last year, and two couples (11 percent) reported that they had received assistance within the past two years. Two (11 percent) first generation couples reported that the question was not applicable to them because they had not had the occasion to receive assistance from their relatives.

On the other hand, the second generation couples presented a somewhat different experience on the issue of when they had received assistance from their families. For example, 13 (72 percent) of the couples stated that they had received assistance from their families and extended kin within the past six months. Three couples (17 percent) reported that they had been provided assistance within the past year. Similar to the first generation couples, there were two (11 percent) second generation couples who reported that they had not received any type of assistance from family members and extended kin.

In comparing the first generation with the second generation on the issue of, "When was the last time you received assistance?" no statistical difference was noted.

However, it was noted that more than twice as many second generation couples reported receiving assistance from
their families within the last 6 months. The issue of proximity to families may account for this. One could assume that the elder members of first generation families, to whom the latter would naturally turn for help, were residing in Mexico. This would affect the time in which help is requested and provided if not the actual use of help.

The assumption that the family and extended kin are an important indigenous resource to Mexican-Americans is substantiated by the sample. For further exploration, other facets of family life were selected for observation and investigation of the helping process. An inquiry was made as to the kinds of problems for which the respondents sought help from family. There was a wide range of problems which were identified. However, they were categorized under two main sections. The first category was quasi-medical and folk-type illnesses, for example, minor physical illness, susto and depression, and the second category was psychosocial problems, for example marital child-parent problems, which included interpersonal and intrapersonal problems. Responses to these questions were reported by couples.

Statistical data is reported in Table 9. It is noted that two (11 percent) of first generation couples reported receiving help with problems that fall into the category of folk illness, while 16 (89 percent) couples reported receiving help with psychosocial problems. The second
<table>
<thead>
<tr>
<th></th>
<th>Folk Illness</th>
<th>Psycho Social</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>First Generation</strong></td>
<td>2</td>
<td>16</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>11 percent</td>
<td>89 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Second Generation</strong></td>
<td>3</td>
<td>15</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>17 percent</td>
<td>83 percent</td>
<td>50 percent</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>5</td>
<td>31</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>14 percent</td>
<td>86 percent</td>
<td>100 percent</td>
</tr>
</tbody>
</table>
generation reported three (17 percent) couples receiving help for folk illness related problems. Fifteen (83 percent) couples were reported in the second category. No significant statistical difference was between the first and second generation couples on this question.

Descriptive data provides some insight regarding the problems experienced by the first and second generation couples. The predominant type of problem described by the first and second generation couples was of a psychosocial nature. For the most part, they defined psychosocial problems to include child care services, transportation, financial assistance, interpersonal problems, and family problems.

To further explore the network of relationships the question was asked, "Why do family help?" The intent of the inquiry was to ascertain the dynamics of receiving help.

The data was reported in one of two categories. The first category pertains to personal responsibility (obligation) to help family and kin; and the second category denotes that help from family results from affectional or love relationships ties. Responses are reported by couples, and the main variable in the data analysis was generation. Table 10 reports the statistical findings.

With respect to the first generation couples, 11 (61 percent) stated that help was provided due to familial
### TABLE 10
REASON FOR PROVIDING ASSISTANCE

<table>
<thead>
<tr>
<th></th>
<th>Personal Responsibility</th>
<th>Affective</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>First Generation</strong></td>
<td>11</td>
<td>7</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>61 percent</td>
<td>39 percent</td>
<td>100</td>
</tr>
<tr>
<td><strong>Second Generation</strong></td>
<td>3</td>
<td>15</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>17 percent</td>
<td>83 percent</td>
<td>50 percent</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>14</td>
<td>22</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>39 percent</td>
<td>61 percent</td>
<td>100 percent</td>
</tr>
</tbody>
</table>

Chi square = 7.6 with 1 Degree of Freedom is significant at the .05 level.
responsibility or obligation. Seven couples (39 percent) noted that help is provided by family and extended kin due to one's affective ties of love. The situation with the second generation couples is the following: Three couples (17 percent) reported that help is provided because it is the responsibility of family members to help one another. Finally 15 (83 percent) second generation couples felt that family members help one another due to affective reasons. Statistical analysis revealed a significant difference between the first and second generation couples regarding their perception of why kin provide assistance.

Through their responses the sample predominantly agreed on the importance of family and extended kin as a source of help. The data in this section indicates a difference in what motivates family to help. The data indicates that among the respondents there are generational differences in their views regarding why help was provided by extended kin. Generally second generation couples reported help was given because of relationship ties. An opposite view, namely that help was provided by extended kin because of personal responsibility was articulated by the first generation couples. One rationale for the differing views may be influenced by the different economic situations of the two groups.

For example, the statistics reported in the demographic section regarding employment indicated that second generation
respondents tended to have higher paying jobs than first generation respondents. The two categories of employment were farm workers and blue collar workers. There were sixteen (89 percent) second generation couples that were employed as blue collar workers and four (22 percent) first generation couples employed in this line of work.

Agriculture work was the predominant employment among the first generation couples. This line of work is seasonal and is dependent on adequate weather conditions. Also mechanization has eliminated many jobs in agriculture. These factors are conducive to a precarious employment situation among the first generation respondents. In comparison to second generation couples there were fourteen (78 percent) first generation couples employed in farm work compared to two (11 percent) second generation couples.

The demographic factor of employment has a close relationship with income in that farm workers generally earn less money than blue collar workers. Thus, the income data indicates a discrepancy between first and second generations.

The three categories for income were (first) 3500-5699; (second) 5700-7899; and (third) 7900 and over. There were three (17 percent) first generation couples in the first category of income, 3500-5699, and no second generation couples. In the second category, 5700-7899, there were fifteen (83 percent) first generation couples and eight
(44 percent) second generation couples; and in the third category, 7400 and over, there were ten (56 percent) second generation couples and no first generation couples.

The data consistently indicates that in general the first generation couples were employed in a precarious line of work and earned less money. Their view of help was that it was an obligation thus discounting the relationship ties. On the other hand, the second generation's view of help was that it provided help because of affectional ties. It appears that the economic position of the couples may have influenced their perception of help from family.

Compadres and Friends

Aside from family and extended kin, compadres and friends are an important indigenous resource and an element of the network of relationships. Litwak and Szehenyi, in their research, included friends as a significant resource of help in time of need.¹ They concluded that friends become or are asked to become involved in assisting an individual when "prolonged aid and commitments are required." Among Mexican-Americans, friends are usually the people sought to serve as "compadres" in many instances. The network of friends is of

 paramount importance to some Mexican-Americans. Also important is the type of problems with which friends assist during the time of need.

Compadres (co-parents) is not an institution solely of the Mexican culture. Rather, those cultures influenced by the Catholic Church have evolved the institutions of compadres. Therefore, the process of becoming a compadre is religious in nature, and is sanctioned by religious rituals of serving as a sponsor of a given child. The compadres are selected by the child's parents carefully, from one's network of relationships. Consideration is given to an individual who can make a long-term commitment such as raising the child if the parents should be unable to do so due to illness or death. There is a tacit understanding that god parents will assist in the upbringing of the child, providing guidance and financial assistance if necessary. Similar to what Litwak and Szehenyi stated about "prolonged aid and commitment" is a pre-requisite in the selection of friends and compadres, especially the latter.

In the collection of data, an effort was made to inquire to what extent friends/compadres are a prevalent resource. The couples were asked: "Have your friends/compadres ever

\[1\] Ibid.
assisted you with a life problem?"

Seventeen (94 percent) of the first generation couples responded "yes" and one couple (6 percent) stated "no." All eighteen second generation couples reported "yes," to this question regarding having received assistance from friends/compadres. The data indicates that assistance from friends/compadres was almost universal, with the exception of one couple reporting not having benefited from this resource.

A majority of the respondents had received assistance from a compadre or friends. Subsequently, the respondents were asked to identify the kind of assistance or aid was provided by a compadre or friend. The responses were grouped and analyzed into the following categories: The first category entitled "folk treatment" included those responses that described home remedies, application of religious rituals for specific problems and folk medical treatment. Problem solving was identified as the second category and included a variety of services, such as provision of food, transportation, employment, and intervention of a counseling nature, such as advice and listening. The third category was not applicable which encompassed responses that did not fit the other two categories.

Table 11 reports the statistics relevant to the responses on this question. The responses were analyzed by the variable of generation. The data indicates 86 percent of the sample received assistance in problem solving, and 11 percent received
<table>
<thead>
<tr>
<th></th>
<th>Folk Treatment</th>
<th>Problem Solving</th>
<th>N/A</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Generation</td>
<td>17</td>
<td>17</td>
<td>1</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>94 percent</td>
<td></td>
<td>4 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Second Generation</td>
<td>4</td>
<td>14</td>
<td></td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>22 percent</td>
<td>78 percent</td>
<td></td>
<td>50 percent</td>
</tr>
<tr>
<td>Totals</td>
<td>4</td>
<td>31</td>
<td>1</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>11 percent</td>
<td>86 percent</td>
<td>3 percent</td>
<td>100 percent</td>
</tr>
</tbody>
</table>
information on or tangible folk treatment and 3 percent identified not applicable. Seventeen (94 percent) first generation couples reported that they received help in problem solving, and for one couple the question was not applicable. The following statistical data was reported by second generation couples: Four (22 percent) received folk treatment and fourteen (78 percent) of the couples received problem solving assistance from friends/compadres.

Data analysis determined that there was no significant difference between the first and second generation in relation to type of assistance received from friends and compadres. None of the first generation couples received assistance with folk remedies. This may reflect the fact that they were knowledgeable about these remedies or resources, having brought them from Mexico they would serve as helpers in the event this resource is needed by this family or friends.

The data presented concludes that friends/compadres are an important group in the network of relationships for the sample. Although the needs varied among the subjects, they utilized their network in similar ways.

The following case vignettes were obtained from the data collection and are presented here to illustrate the role of friends/compadres as described by some subjects. For example, the R's, a first generation couple, stated: "Our friends and compadres are readily available to them when help is needed."
Also, "They do not get upset like our families would if they knew we were having marital problems."

The R's shared that they had experienced marital problems, and their preference was to consult with a compadre. Their preference stemmed from feeling that their compadres would be "more objective" than their families in this type of matter. Mrs. R stated "I would have asked for advice from my mother, but she would have been biased in her views and would have become very upset." Further, she added "She (mother) does not need this kind of worry.

Another couple, Mr. and Mrs. B, second generation, concurred on the availability of friends and compadres and their objectivity regarding intimate problems, such as marital discord. They stated "Besides, our friends would have easily referred us to somebody else if they could not be of assistance." On the other hand, "our relatives would have made efforts to keep the problem quiet." These two case vignettes indicate a preference in seeking compadres and friends in regard to counsel for marital discord.

Additional case vignettes provide descriptive data which portrays friends and compadres as significant resources. A first generation couple, the G's, stated "Problems got worse in the winter, since agriculture practically ceases for farm workers." If not for the generosity of friends and the close relationship with their compadres, such a time would be even
worse. Mr. G stated "My friends sometimes provide financial assistance," and at other times he returns the favor. He further stated that his circle of "conocidos" (Acquaintances) is a very helpful group. "We act like a family, and we talk about everything and give help to one another."

A second generation couple, the Gomez', had a similar report. However, the type of help received from friends/compadres was less tangible than the help Mr. G's described. The Gomez couple reported usually receiving "good advice" on life problems. Mrs. Gomez shared having experienced marital discord and feeling unable to confide in her relatives; hence, she sought a girl friend. According to Mrs. Gomez, the friend suggested that she confront her spouse and offered to mediate if needed. The issue of marital discord was agreed on as one area where usually friends/compadres were sought for counseling as opposed to family. There seemed to be a consensus that family could not be "objective" or would perhaps "worry." One couple summarized "My friends are good counselors, and they understand me," hence their counsel is sought.

Summary

The data analysis of this chapter concurred with previous theoretical position and empirical research on the importance of the family among Mexican-Americans and the extended family.
Data analysis revealed that the family and extended kin are important in the network of relationships. It was found that the family and extended kin were actively involved in providing ongoing assistance. The perception of why family provided assistance differed between first and second generation. For example, the first generation couples had a strong position that it was "one's responsibility to do so" as opposed to the second generation couples who identified that assistance stemmed from affective love relationships. As previously discussed, perhaps an influencing variable in the differing perception is related to the respondents' economic and employment situations.

Many of the first generation couples noted that their families were in Mexico. It was found that the first generation utilized their friends and compadres extensively. In the case of second generation, it was found that they sought and received slightly different assistance from friends/compadres for such as folk treatment. And, first generation couples tended to received assistance for problems related to everyday living such as transportation, child care, and other related services. No significant difference was determined in the overall type of assistance provided or reviewed by the respondents.
CHAPTER VII
CURANDEROS AND PRIESTS/MINISTERS AS HELPERS

This chapter presents descriptive and statistical data on curanderos and priests/ministers as helpers. It was the researcher's decision to group these two religious oriented systems in the same chapter. The rationale is that: (1) Both systems, folk healer and priest/minister represent a supernatural force, which is God; (2) Both systems utilize the role of God and prayer in its healing process; (3) Both systems have and utilize similar rituals as a means of helping; (4) Both systems are readily available in the Mexican-American community. Priests and ministers were grouped together because of similarities of their roles and their established position as religious leaders. In the data analysis, the role of these helpers will be described and analyzed in terms of its availability and utilization by Mexican-Americans.

The chapter is divided into two sections. The first focuses on the curandero, while the second addressed priests and ministers. Data analysis took into consideration the variables of generation (first and second). In the analysis of the data, the sample size was thirty-six couples. Responses were elicited from the respondents through open and closed ended questions. The goal was to explore the utilization of
curanderos, priests and ministers among the sample population.

Two main research assumptions are discussed in this chapter. The first assumption pertains to the section of the curandero; "the indigenous resource of the curandero (folk healer) provides psychosocial assistance to first and second generation Mexican-Americans." In the second section, regarding priests and ministers, the assumption is, "the indigenous resource of priests and ministers provides psychological assistance to first and second generation Mexican-Americans."

The Curandero

In order to ascertain the belief and practice of folk health care, the sample was asked several questions related to this issue. The first question inquired if they believed certain people had the ability to be helpers, or as it was defined, had supernatural abilities. In response to the question, categories were: "yes," "no," and "do not know."

Analysis of the data in reference to this question revealed that the variables of setting and generation reflected no significant difference. Data analysis indicated that 18 (100 percent) of the first generation couples responded "yes" to this question. Similarly, 18 (100 percent) of the second generation couples reported "yes" to this inquiry.
The first question of this section was general in its inquiry. However, the following question specifically focused on exploring their views about the curandero as a resource. The sample was asked "Do you believe that a curandero is a resource for life problems?" Categories of responses for this question were "yes," "no," and "do not know."

Fourteen (78 percent) first generation couples reported "yes." They believed a curandero was a resource. Two (11 percent) stated "no" and two (11 percent) responded that they did not know.

Second generation couples reported the following responses: Sixteen (89 percent) were affirmative, and one couple (6 percent) stated "no" to this question, and one couple (6 percent) did not know.

As indicated by the statistical findings, the majority of the sample reported a belief that curanderos are a resource for life problems. Eighty-three percent of the sample stated that they "believe a curandero is a resource." There was no significant difference.

Among the respondents that believed a curandero to be a resource, a typology evolved that identified and defined different types of curanderos. Since the literature identifies different types of folk healers among hispanics, the sample was asked a question exploring this issue.
The question was open-ended hence providing an opportunity for the respondents to elaborate and conceptualize on this topic. Several types of curanderos evolved and were identified by the respondents which are: doctor de Rancho, folk healers with expertise in psychological and spiritual matters, expertise in treating problems or ailments caused by evil experiences, and a folk healer only interested in making a financial profit, hence, is labeled by the writer as a "commercial folk healer."

Statistically, the following was reported: Two (11 percent) first generation couples identified a folk healer as a doctor de Rancho, and 12 (67 percent) stated that a curandero is an expert who deals with psychological and spiritual problems. For four (22 percent) of the first generation couples, the question was not applicable and none of the couples identified with the commercial folk healer.

Sixteen (89 percent) of the second generation couples identified the folk healer whose expertise is in psychological and spiritual problems. And for two (11 percent) couples the question was not applicable.

No significant difference among the sample was found. Table 12 reports the statistics for the total sample. However, 78 percent of the responses identified with the curandero with expertise in psychological-physical areas of human functioning. Therefore, a brief presentation/
<table>
<thead>
<tr>
<th>Types of Curanderos</th>
<th>Doctor de Rancho</th>
<th>Emotional Spiritual</th>
<th>Commercial</th>
<th>N/A</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Generation</td>
<td>2</td>
<td>12</td>
<td>0</td>
<td>4</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>11 percent</td>
<td>67 percent</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second Generation</td>
<td>0</td>
<td>16</td>
<td>0</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>67 percent</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Totals</td>
<td>2</td>
<td>28</td>
<td>0</td>
<td>6</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>6 percent</td>
<td>78 percent</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

100 percent
The doctor de Rancho, according to the respondents, is that of quasi-medical doctor. Generally, the doctor de Rancho acquires his knowledge and expertise in the treatment of physical ailments from his/her life experience. Practice is limited to physical ailments such as headache, stomach ache, strain and sore muscles, and various minor illnesses. The usual treatments are prescriptions of popular medicinal herbs, some of which have pharmacological properties, massages and other simple physical manipulation of the body such as "cupping."

Another type of curandero is the folk healer-practitioner who treats the total person, that is, psychological and physical problems. For example, psychological problems may include susto, mal ojo, mal puesto (hex) nervous and physical ailments include a wide range of illnesses and bodily malfunctions, such as empacho. A third type of folk healer found within the Mexican-American community is a product of commercialism. That is the commercial folk healer who operates for a profit.

A commercial folk healer claims to have ability and expertise to treat given problems and usually recruits clientele through advertisement of services in local Spanish newspapers, magazines, and radio.
The literature on curanderos identifies the utilization of curandors and their functions. But no clear delineation of specific typologies of curanderos were found in the literature. Hence, the findings of this study were not conceptualized in the terms outlined by earlier studies of Mexican-Americans in the Central San Joaquin Valley in California, in which various types of curanderos with differentiated tasks were identified.

This study was exploratory, hence the scope was to explore to what extent curanderos were utilized by Mexican-Americans. Thus, the sample was probed about utilization of the curandero.

To explore the utilization of the curandero, the following question was asked of the sample: "Have you or a number of your immediate family ever utilized the services of a curandero?" This question is general, inquiring about their experience personally or family related. There were two response categories of "yes" and "no" for this question. Data were analyzed by the variables of generation.

Table 13 reports the responses of the first and second generation couples. Ten (56 percent) first generation couples stated that a curandero provided assistance to them,
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First generation</td>
<td>10</td>
<td>8</td>
<td>18</td>
</tr>
<tr>
<td>56 percent</td>
<td></td>
<td></td>
<td>100 percent</td>
</tr>
<tr>
<td>Second generation</td>
<td>12</td>
<td>6</td>
<td>18</td>
</tr>
<tr>
<td>66 percent</td>
<td></td>
<td></td>
<td>100 percent</td>
</tr>
<tr>
<td>Total</td>
<td>22</td>
<td>14</td>
<td>36</td>
</tr>
<tr>
<td>61 percent</td>
<td></td>
<td></td>
<td>100 percent</td>
</tr>
</tbody>
</table>
and 8 (44 percent) stated "no" that a curandero had not assisted them or a member of their immediate family. Of the second generation couples, twelve (66 percent) responded "yes" to this question, and six (33 percent) stated "no" that they had not been assisted by a curandero.

This question was asked to obtain a general impression of their personal experience or family related experience about their utilization of a curandero. The data indicates that more than half of the respondents acknowledged assistance from a curandero. For example, 61 percent of the total sample acknowledged past assistance from a curandero. Statistical data revealed no significant difference between the first and second generations in the utilization of curanderos. The data suggest that for some individuals a curandero is a valued resource. For others, 38 percent, a curandero is not utilized as a resource.

The foregoing determined the utilization of folk healers by the respondents. However, left unanswered, is the question of how the respondents were referred to a curandero. That is, who made the referral to the curandero? Hence, the respondents were posed a general question which asked "How did you find the curandero?" Categories for this question were family, friends, compadres, and not applicable. Generation was the variable by which the data were analyzed.
Of the first generation couples nine (50 percent) stated that they were referred by family relations, and one (6 percent) couple was referred by a friend or compadre. For eight (44 percent) of the first generation couples the question was not applicable. The second generation couples had similar statistics. Eleven (61 percent) reported that their contact with a curandero was facilitated by a family referral. Only one (6 percent) couple was referred by a friend/compadre. And for six (33 percent) second generation couples, the question was not applicable. There was no significant difference between the first and second generation couples on this issue. Table 14 reports the statistics.

Of those who utilized a curandero, the predominate referral pattern was family. Fifty-six percent of the respondents were referred by family, and 6 percent were referred by friend/compadre, and as noted, for 38 percent of the sample, the question was not applicable.

To further discern the respondents' knowledge and adherence to folk medicine they were asked to identify for which type of problem they consulted a curandero.

First, a brief presentation on the beliefs underlying curanderismo is in order to illuminate the responses. Kiev states "The curandero and his patients view illness in a religious and social context, not in the medical scientific
<table>
<thead>
<tr>
<th></th>
<th>Family</th>
<th>Friend/Compadre</th>
<th>N/A</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First generation</td>
<td>9</td>
<td>1</td>
<td>8</td>
<td>18</td>
</tr>
<tr>
<td>50 percent</td>
<td></td>
<td>6 percent</td>
<td>44 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Second generation</td>
<td>11</td>
<td>1</td>
<td>6</td>
<td>18</td>
</tr>
<tr>
<td>61 percent</td>
<td></td>
<td>6 percent</td>
<td>33 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td></td>
<td>20</td>
<td>2</td>
<td>14</td>
<td>36</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>6 percent</td>
<td>38 percent</td>
<td>100 percent</td>
</tr>
</tbody>
</table>
one of Anglo society." He further states that the under-
lying belief system is: "The acceptance of both good and
evil influences, which is that matter can pass through matter,
and that mind can influence matter." This belief is rein-
forced in that words and wishes are perceived as having
creative power; that communication with the dead is possible;
and that the dead can influence life on earth. Finally, these
folk beliefs are based on the assumption that "there are
mysterious forces in the world which can enable certain
individuals to cause and cure illness."2

In other words, the cultural and social framework
influence the practice and beliefs of a given people. And
within this framework that is possible within the
reality of Mexican-Americans.

The types of problems were reported in three categories.

Folk illness was the first category. This category includes
all problems which are sought to be "purely Mexican," such
as "susto," and "mal ojo," and nerves." The second category
was family problems, and this included family related problems
such as parent-child and marital problems. The third

1Kiev, Ari. Curanderismo: Mexican-American Folk

2Ibid.
category was designated as "not applicable" for those respondents who did not utilize the services of a curandero.

The responses were analyzed by the variable of generation. Statistically, ten (56 percent) of the first generation couples reported that they consulted a curandero for folk illness type of problems and for eight (44 percent) of these couples the question was not applicable. The second generation couples had the following statistics: eight (44 percent) of the couples consulted a curandero for folk illness, and seven (39 percent) generation couples the question was not applicable. No significant difference was determined on this question between the first and second generation couples.

Since no significant difference was found, several quotes from the respondents are reported here as examples of problems for which they consulted a curandero. The following excerpt describes personal viewpoints about the type of problems brought to a curandero. A second generation couple, the B's, indicated that they consulted a curandero when they believed they were suffering from a "bad omen" — salado. Their description of the situation was related to their inability to prosper, which they perceived as a function of an outside force. For example, when their life situation appeared in order, a life crisis would occur, such as illness, job layoff, or other family difficulties. This couple also
consulted a curandero for "susto," and other health related ailments. Their orientation to life was regulated by the belief that outside forces of a "supernatural" origin cause illness and discord in life. Their belief system was congruent with the notion that supported utilization of a curandero.

Another couple, the A's, sought a curandero for treatment of "nervios." Nervios (nerves) which is a common term used by Mexican-Americans to describe an emotional reaction to a psychosocial stressor and encompasses a wide range of symptoms. Mrs. and Mrs. A described a situation when Mrs. A experienced heart palpitations, feeling shortness of breath, as though she were choking, episodes of uncontrollable perspiration, and feeling "nerviosa" -- nervous. They consulted the curandero for what was described as an anxiety disorder. The A's acknowledged that a curandero could assist with "all problems of life." This couple would more likely turn to a curandero when needing aid because of their views of his expertise.

A final case example is the R's, a first generation, rural couple who consulted a curandero for "nervios." They were of the opinion that the abilities of a curandero were limited to that of an indigenous psychotherapist. The curandero's role was viewed as being concerned with spiritual and psychological well-being of a person.
Finally, no significant difference on the kind of problems was found between the first and second generation couples for which they consulted curanderos. However, it was noted that 50 percent of the respondents consulted a curandero for folk illness type of problems, and only 11 percent of the respondents consulted a curandero for family problems.

Priest and Minister

This section explores the role of the priest/minister as a helper within the Mexican-American community. The findings of this research confirm the importance of priest/minister as a resource and support system as presented in the theoretical and Research Literature, (E.N.K.I. Report), hence, it assumes that the clergy has a pivotal role in the provision of assistance with problems of living among Mexican-Americans. This section focuses on the extent of acceptance of the priest-minister as a resource of assistance, and the kinds of problems with which a priest/minister assists, the source or referral to a priest/minister, the kinds of assistance provided by a priest/minister, and the rate at which respondents would return to a priest/minister in the future.

First, the sample was prepared for the investigation regarding priest/minister as an indigenous resource and support system. The preparation was initiated by the introduction of
the following question: "Do you believe that a priest/minister can assist with the life problems?" Four categories were available to document the responses for the above question. The categories were as follows: Yes, no, do not know, and not applicable.

The majority of the couples agreed that the priest/minister can assist with life problems. Specifically, 17 (94 percent) of the first generation couples responded "yes," and one couple (6 percent) stated that they did not know. Seventeen (94 percent) of the second generation couples also responded affirmatively to the foregoing question, with one (6 percent) couple stating that they did not know whether a priest/minister could be of assistance with life problems.

Respondents were unanimous in agreement that a "priest/minister" can assist with problems. This finding definitely concurs with the finding of the E.N.K.I. Report. The E.N.K.I. Report was a survey undertaken by the Tulare County Health Department to document the needs and native resources of Mexican-Americans in Tulare County, California. The report found a high reliance on priests and ministers as a resource in time of need among Mexican-Americans.

Since the majority of the respondents believed that a priest/minister could assist with life problems, they were then probed regarding utilization of such a resource. They were asked "Have you or a member of your immediate (nuclear) family utilized the services of a priest/minister?" The objective of this question was to ascertain the actual utilization of assistance from a clergy member. And the sample was thirty-six first and second generation couples.

There were two possible responses to the question which were "Yes" and "No." Data from this question were analyzed by the variable of generation. It was found that 17 (94 percent) of the first generation couples stated that they had utilized the services of a priest/minister in relation to a life problem. Only one (6 percent) first generation couple responded "no" to the question. The second generation couple responded the following experience: Eleven (61 percent) of the second generation couples responded "yes" and 7 (39 percent) stated "no" to this question.

Table 15 reports a significant statistical difference between the first and second generation couples in respect to utilization of the priest/minister resource.

No conclusions could be derived from the quantitative findings. However, an explanation for the two assumptions is advanced here as possible explanation for the difference.
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First generation</td>
<td>11</td>
<td>1</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>94 percent</td>
<td>6 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Second generation</td>
<td>11</td>
<td>7</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>61 percent</td>
<td>39 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Total</td>
<td>28</td>
<td>8</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>78 percent</td>
<td>22 percent</td>
<td>100 percent</td>
</tr>
</tbody>
</table>

Chi Square - 6.00 with 1 degree of freedom is significant at .05 level.
The first explanation offered is based on the factor of longevity. In effect the second generation couples, because of time, have evolved a much more extensive support system than their first generation counterparts. Therefore, it seems that the second generation may utilize other, more personal elements of their support system more extensively, hence, utilize priests/ministers less than the first generation. Another assumption is based on acculturation. That is, the first actual experience of first generation couples in this country is less with respect to time and certainly different from that of the second generation. Hence, the former may continue to function with or governed by more traditional beliefs and values about the Mexican culture. These values support the clergy as easily identifiable and available in any given community and available as a resource when in need of help. This means that a first generation family may not have a connection with other networks, while the church is one resource known to most individuals.

Longevity and acculturation were two assumptions that were considered as accounting for the differences between the two groups. Further, each community has a number of churches that function in the religious realm of life. Thus, the visibility of a church and the availability of religious leaders may have influenced the first generation to utilize such a resource. Also, the clergy and their respective
churches are a linkage to other support systems within the community. For example, the congregational social and recreational activities. For some, the church and its religious leaders may serve as a linkage to other support systems with the community.

Generally, the sample, except for a very small percentage, readily agreed that a priest/minister is a resource of assistance as it was observed above. If this is so, what is the referral process? Who refers? What are the pathways to a priest/minister? Hence, the respondents were asked the question, "Who referred you to the priest/minister?" The responses reflected and documented those who had the occasion to utilize such a resource.

The data were analyzed by the variable of generation, and the analysis of the data were reported in three categories. The categories were self-referral, referred by friend/compadre and not applicable. The latter category related to those respondents who had not had the opportunity or need to utilize a priest/minister.

Table 16 reports the responses of the first and second generation couples. Fifteen (83 percent) first generation couples were self-referred, and two (11 percent) couples were referred by friend/compadre, and for one (6 percent) first generation couple, the question was not applicable. The
<table>
<thead>
<tr>
<th></th>
<th>Self-Referral</th>
<th>Friends/Compadre Referral</th>
<th>N/A</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Generation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>15</td>
<td>2</td>
<td>1</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>83 percent</td>
<td>11 percent</td>
<td>6 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Second Generation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>1</td>
<td>7</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>56 percent</td>
<td>6 percent</td>
<td>39 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Total</td>
<td>25</td>
<td>3</td>
<td>8</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>69 percent</td>
<td>8 percent</td>
<td>22 percent</td>
<td>100 percent</td>
</tr>
</tbody>
</table>
statistics for the second generation couples were the following: Ten (56 percent) were self-referred; one (6 percent) couple was referred by a friend or compadre. For seven (39 percent) second generation couples, the question was not applicable.

For both the first and second generation respondents there was a pattern of self-referral. Referral by friend or compadre was only 8 percent for the respondents in contrast to the former which was 69 percent. This finding probably means that the respondents are knowledgeable of the clergy as a resource, hence are more likely to refer themselves. Statistically, no significant difference was found between the first and second generation couples in respect to referral source to the services of a priest or minister.

The foregoing explored the experience of the respondents regarding their utilization of priest-minister for life problems. Therefore, the kinds of problems for which the respondents utilized the clergy are presented here. The categories for their responses for the question on "The Kinds of Problems," were: the first category was family problems, which included child-parent, marital, and psychological problems. The second category was in relation to religious concerns, and the final category denoted those respondents for whom the question was not applicable.
Table 17 presents the statistical findings on the question of "Kind of Problems." The first generation couples will be discussed first. Sixteen (89 percent) of the first generation couples reported seeking help from the clergy with family problems, and one couple (6 percent) utilized the clergy for religious problems. One couple (6 percent) responded that the question was not applicable. The kinds of problems reported by the second generation couples were: Eleven (61 percent) couples stated family problems, and for seven (39 percent) couples, the question was not applicable. No statistical significance was found between the first and second generation couples on the question on "Kinds of Problems."

No significant difference was observed on the issue of the "Kinds of Problems," for which the first and second generation couples utilized their priest/minister. There is a similarity between the respondents. The similarity is in respect to the nature of problems for which the respondents utilized the priest/minister. For example, 78 percent of the first and second generation couples utilized their clergy for family related problems.

Now that the utilization ratio and the kinds of problems for which clergy were utilized have been discussed, a discussion on what type of actual assistance was provided to the respondents is in order. Here the emphasis was on moving
TABLE 17
KINDS OF PROBLEMS

<table>
<thead>
<tr>
<th></th>
<th>Family Problems</th>
<th>Religion</th>
<th>N/A</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Generation</td>
<td>16</td>
<td>1</td>
<td>1</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>89 percent</td>
<td>6 percent</td>
<td>6 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Second Generation</td>
<td>11</td>
<td>0</td>
<td>7</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>61 percent</td>
<td></td>
<td>39 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td>Total</td>
<td>27</td>
<td>1</td>
<td>8</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>75 percent</td>
<td>3 percent</td>
<td>22 percent</td>
<td>100 percent</td>
</tr>
</tbody>
</table>
from the kinds of problems reported by the respondents to what was actually done about them by the priest/minister.

The data collected on the question regarding "type of assistance" provided for those respondents who utilized the priest/minister resource was analyzed by the variable of generation, and the responses were tabulated under four categories which were: Advice, which included specific recommendations or directions and counseling. Another category was religious rituals specific to the Catholic or Protestant religions, for example, prayer, confession. The third category was referral to another helping agent, and the final category was for those respondents for whom the question was not applicable.

Table 18 presents the statistical findings on the "types of assistance." The data reveals that the first generation couples received the following type of assistance: Ten couples (56 percent) of the sample received advice, six (33 percent) received prayer or other religious rituals, one (6 percent) couple was referred; and for one (6 percent) couple the question was not applicable. On the other hand, the second generation couples had a slightly different experience in relation to assistance given to them. The analysis revealed the following: First, in the advice category three (17 percent) were tabulated. Two couples (11 percent) were provided with prayer. Six (33 percent) were referred
<table>
<thead>
<tr>
<th></th>
<th>Advice/Consejo</th>
<th>Prayer</th>
<th>Referral</th>
<th>N/A</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>First</strong></td>
<td>10</td>
<td>6</td>
<td>1</td>
<td>1</td>
<td>18</td>
</tr>
<tr>
<td>Generation</td>
<td>56 percent</td>
<td>33 percent</td>
<td>6 percent</td>
<td>6 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Second</strong></td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>7</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>17 percent</td>
<td>11 percent</td>
<td>33 percent</td>
<td>39 percent</td>
<td>100 percent</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>13</td>
<td>8</td>
<td>7</td>
<td>8</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>36 percent</td>
<td>22 percent</td>
<td>19 percent</td>
<td>22 percent</td>
<td>100 percent</td>
</tr>
</tbody>
</table>

Chi square = 13.4 with 3 degrees of freedom is significant at .05 level.
elsewhere for services, and for seven (39 percent), the question was not applicable.

Statistically, there is a significant difference between the first generation and second generation couples in respect to the question of assistance provided. Several differences were noted. First, in relation to the types of assistance provided it is observed that the first generation couples received more advice and prayer than the second generation couples. Second, the second generation couples received predominately more referrals, there were more second generation couples for whom the question was not applicable. These are interesting findings in light of the fact it was established that the priest/minister is thought to be important indigenous resource by the respondents. This was confirmed when a majority of the respondents stated that a priest/minister "could assist with life problems."

Why then the difference on assistance received between the first and second generation couples? As noted above, two notions were advanced as explanations for the differences in respect to utilization and type of assistance received. These notions are the social phenomenon of longevity or length of time in the community and acculturation.

It is assumed that longevity impacts what resources and life problems a person experiences. For example, the second generation couples, because of a longer life experience
in the community, in contrast to the first generation couples, have a greater developed support system and knowledge of resources. This, of course, influences what indigenous resources will be utilized, and in the case of the second generation couples they may have more choices.

Another possible explanation for the difference on the type of assistance may be a function of the need determined by the clergy. For example, it may be that the specific cleric consulted by the first and second generation respondents provided differential type of assistance after assessing the consultee's needs, beliefs, and values. Therefore, matching the type of assistance with needs and values of the consultee hence in effect is influencing the difference found by this study among Mexican-Americans.

In the previous question on the kind of problems for which the respondents consulted a priest or minister, the analysis revealed no difference. The primary problem was family related, however, as discussed a difference was determined on the type of assistance received by the respondents. Further research is needed on this issue to determine how potential helping agents, as in the case of priests/ministers, decide on the kind of assistance for Mexican-American clients.

A majority of the respondents acknowledged that the curandero is a viable resource, and 61 percent had actually
utilized the services of a curandero for either folk related illnesses or family problems. A typology of folk healers evolved. The typology describes three major categories of curanderos which are: Doctor de Rancho, the curandero, who specialize in psychological and folk illness, and the folk healer who is motivated by profit. Finally, in terms of referral patterns no significant difference was found between the first and second generation respondents. The predominate pattern was family referral.

Further, the majority of the respondents agreed that a priest or minister can assist with problems, and 78 percent of the respondents had utilized the services of such a resource. In terms of the referral patterns there was no significant difference between the first and second generation couples. And with respect to the kind of problems for which the clergy were utilized, there was no significant difference. The primary pattern was self-referral. A significant difference was noted with respect to the type of assistance received by the first and second generation couples.

Therefore, it was found that the curandero and the priest/minister are a resource within the Mexican-American community. This indigenous resource is utilized for varying psychosocial problems.
CHAPTER VIII

SUMMARY OF FINDINGS, INTERPRETATIONS
AN IMPLICATIONS

INTRODUCTION

In this chapter the implications are discussed, as well as the conclusions derived from the data analysis. The chapter is divided into three major sections. The first section reviews the purpose, objectives, literature, and methodology of the study, the second section presents the most salient findings and interpretations. Finally, the third section discusses the limitations of the research, the implications for practice, and recommendations for future research.

Purpose and Objectives of the Study

The study is exploratory/descriptive, with the purpose of examining the network of indigenous resources of the Mexican/American community. These resources include, but are not limited to, assistance and services by the immediate family, extended kin, compadres, friends, curanderos, and religious leaders. The assistance and services consist of counseling, social support, religious rituals, concrete help of materials, and culturally based folk medicine and treatment of emotional problems. Further, it was the purpose of the study to explore the knowledge of the subjects regarding the
issue of concern. This was accomplished by reaching out into the community and interacting with the sample in their own natural habitat to inform the research and the reader about their resources and its utilization. Thus, the objective of this study were threefold. The primary objective was to examine a particular social phenomena and second to contribute to the body of knowledge on Mexican-Americans and explore their network of indigenous resources from their unique perspective. The final objective of this study was to contribute to theory development and provide recommendations for social work practice and intervention with Mexican-Americans.

Literature Review

The review of the literature eluciated several themes about Mexican-Americans and their utilization of indigenous resources. The literature indicates that there exists a highly developed system of health care among Mexican-Americans.\textsuperscript{1,2} For some Mexican-Americans, utilization of indigenous resources is preferred in contrast to the use of

\begin{itemize}
  \item \textsuperscript{1}Lyle Saunders, \textit{Cultural Difference and Medical Care: The Case of the Spanish-Speaking People of the Southwest}, New York: Sage Foundation, 1954.
  \item \textsuperscript{2}Margaret Clark, \textit{Health in the Mexican-American Culture}. Berkeley: University of California Press, 1959.
\end{itemize}
formal (i.e., traditional) services. The theme of religion and its influence on the folk health care system is well documented, for example, Nall and Spielberg. And the curandero is considered a viable resource of help among some Mexican-Americans. The knowledge of their existence and the immediate availability of these indigenous resources undoubtedly influence their utilization by some Mexican-Americans.

In reviewing the literature, several important factors, not fully addressed, were identified and contributed to formulating the impetus of the study. For example, the documented research has primarily focused on samples and/or populations in urban areas of the southwest parts of the United States. In most of the reported research, the sample populations were clientele of existing services, i.e., mental health agencies or settings. In contrast, the sample of this study consisted of subjects who had not utilized such services and represent first and second generations, with respect to their tenure in the Southwest United States.

The existing literature identified the family and its extended network among Mexican-Americans as an important resource of helpers. However, the differences and commonalities

between generations of Mexican-Americans related to those institutions that have not been explored extensively. This research investigated these aforementioned areas.

**Review of the Methodology**

The research designed for this study was exploratory/descriptive which, according to Seltiz, is needed ... "in the case of problems about which little is known."¹ Also, such a design provides for flexibility or the ability to shift from qualitative to quantitative methods of research or ... "vice versa." This approach suited the needs of the study well in the sense that the investigation dealt with a subject about which little is known, and which required the flexibility to engage a sample population to identify and document their views and perceptions.

The setting for the research was Tulare County in the Central San Joaquin Valley, California, a predominantly rural agricultural country, with two moderate sized population centers. Also, thirty percent of the population is Mexican-American.

The Tulare County Headstart and Child Care Agency was approached by this researcher, and their participation

requested. Permission was sought to select a sample from the families to which the agency provides educational services. Once permission was granted, a pool of the agency's clientele was obtained. From this pool, 36 couples-families were randomly selected that met the following criteria:

(1) Eighteen couples from urban areas and 18 of rural geographic status.

(2) An equal distribution of first and second generation subjects.

(3) Subjects representative of two-parent families with children.

(4) Subjects not associated in the past or present with mental health services.

(5) At least one year of residence in this geographic area.

This sample participated in interviews, pre-arranged in the following manner: Initially, each couple was contacted by letter, subsequent to which follow-up was made to schedule appointments. Interviews were facilitated with a research instrument designed to explore the most significant elements of the sample's network of indigenous resources. The analysis of the data collected was performed by qualitative and quantitative methods. The qualitative methods included measurements of central tendency, frequency distributions, chi-square test of significance where appropriate, and the qualitative data was incorporated into the
the analysis to elaborate the findings.

**Review of Assumptions**

This study was designed to explore and describe the resources possessed and utilized by Mexican-Americans in coping with life events and problems. To implement this research, several general assumptions were conceptualized as a guide and provided the parameters for the study. The assumptions are restated here:

1. There are differences in knowledge of the indigenous network of resources between first and second generation Mexican-Americans.
2. There is a difference in the utilization of indigenous resources between first and second generation Mexican-Americans.
3. The extended family is a prevalent structure among Mexican-Americans.
4. Friends and compadres are an important resource for Mexican-Americans.
5. The family and extended family is a viable resource among Mexican-Americans.
6. Religion is a significant resource of help for Mexican-Americans.
7. The curandero (folk healer) provides health care services for Mexican Americans.

Summary of Findings

Demographic Characteristics Findings

Since the task of the study was to explore the indigenous resources of and utilization by Mexican-Americans, the investigation examined various dimensions. First, the most salient findings of the demographic characteristics are discussed here as a point of departure and description of the sample. In general, the first and second generation respondents of the study were statistically different on most dimensions except age. In respect to the latter, at the time of data collection, the youngest respondent was age 21, and the oldest respondent was 43 years of age.

On other characteristics, significant differences were determined. Difference was determined with respect to ethnicity identification preference. It was found that the first generation respondents predominantly identified themselves as "Mexican," while the second generation respondents identified themselves as Mexican-Americans.

With respect to language preference and education, the findings indicate a difference between the first and second generation respondents. Language preference among the first generation was Spanish, while English was the language preference
among the second generation respondents. And educationally, the second generation had significantly more education than the first generation respondents.

Significant differences were noted between the first and second generation on the characteristics of family size, employment and income. With respect to family size, the first generation couples had more children from the second generation. And on the characteristic of employment the first generation respondents were primarily engaged in farm work, while the second generation had employment in blue collar types of endeavors. Hence, the first generation had lower incomes than the second generation respondents.

Belief System Findings

Another aspect of indigenous resources of Mexican-Americans is their belief system. Included in this system are such elements as the individual beliefs and practices, religion and its practice. Generally, the statistical analysis revealed no significant differences between the first and second generation on this issue. It was found that a strong belief in God as all-powerful existed for both the first and second generation. For example, the sample stated that God could and did cause or send problems to them, but within the causation lies the "cure."
That is, the outlook of the respondents appeared to be one of passivity on the surface, but such an interpretation is erroneous. An example is the "B" couple who had experienced a recent death of a family member. There explanation was "God sent it," but along with appearing resigned and passive to accepting their situation, they were actively engaged in pragmatic approaches to cope with their loss and emotional pain. First, the "B" couple accepted death as inevitable; second, they utilized prayer and sought the closeness of their network of relationships for emotional support and sharing of their feelings. For the actors, in this case, the respondents, were very actively involved in seeking amelioration of their life problems. This was accomplished through active prayer, religious rituals, and the reaching out to support systems among the church congregation.

Religion and its practice were found to be an important resource to the sample. For example, religious relics and rituals were utilized on an ongoing basis by those of Catholic religious orientation. The Protestant respondents utilized prayer. Respondents of Catholic and Protestants faith tended to seek the social network of relationships that their congregations provided. The observations noted in existing literature, that religion was a significant resource of help for some Mexican-Americans, were affirmed by the sample of this research.
Aside from an all-powerful God, both the first and second generation respondents believe that "evil" existed and had to be dealt with at every turn of life, be it in social relationships, employment, or physical and mental health. Most though that evil was caused by "supernatural forces" while a minority of the respondents felt that man was his own greatest cause of evil. As with their belief in God, the belief in evil as a source for life problems influenced the view of how such problems were ameliorated. Resources for diagnosis and treatment were congruent with their belief system and consisted of prayer, "mending one's ways," religious rituals, and in some cases, consultations with folk healers.

A concept that emerged as important during the investigation is the notion of "envidia." This concept is a social phenomena that connotes jealousy or envy as defined in the English language. However, the concept has deeper meaning that its English equivalent. The notion of the concept "envidia" emerged during the process of researching the respondents on their belief system. This concept was specifically mentioned by the respondents during the discussion of evil as part of their belief system. According to the respondents "envidia" a pivotal explanation for negative feelings among people. It is also another cause or contributor for life problems.
The Mexican-American community has an extensive network of family, extended kin, friends, and relationships among compadres. This network of relationships describes a support system of resources readily available to Mexican-Americans. It functions strategically as a support system through transactions of mutual aid or provision of services, where as Silverman states, individuals can be sometimes recipients and sometimes helpers.\(^1\)

The respondents in this study, both first and second generation, had strong convictions in and utilized widely their extended family relationships. In some cases, family inclusion went beyond blood relations or conjugal ties. This extension of kinship included friends and compadres. It was found that kinship status appeared to be based on the role of the individual within the family matrix, rather than the actual existence of blood relationship.

Extended kinship among the respondents was found to extend over great distances. In some cases, the respondents had family ties with kin residing in different areas of the continental USA, and in other cases, the respondents continued to have on-going contact with kin residing in Mexico.

Geographic distances and international boundaries were no obstacles for the respondents in maintaining their family relationships. The extended family is a prevalent and extremely viable phenomena among Mexican-Americans and was fully confirmed by this study.

The data indicated that a total of 90 percent of the first and second generation respondents had received assistance from their families and extended kin. For 53 percent of the respondents, the assistance from family had been a recent event at the time of data collection.

Although 90 percent of the sample had received assistance from their respective families (relationships) a difference was found among the respondents with regard to their reasoning on "why family and extended kin provide help." For the most part, first generation respondents were of the opinion that the provision of help or assistance was "an obligation." In contrast, second generation respondents expressed the opinion that help from family was a function of the relationship and affectance ties.

Friends and compadres have been viewed repeatedly as an important element or resource to Mexican-Americans. They are part of the network of relationships; in some cases, as was reported by the respondents, such individuals, although not blood relatives were considered as part of the family. It was found that friends and compadres were identified
as an important resource of help or services among the respondents. Both the first and second generation respondents had sought and received assistance from friends and compadres. Among respondents friends and compadres were generally preferred as a resource, as opposed to immediate family, in consultation about marital problems.

The Curandero and Priests/Ministers Findings

Another support system or resource valuable to the Mexican-American community is the curandero and religious leaders, such as priests and ministers. The majority of respondents believed that a curandero could assist with problems. For example, it was first noted that the respondents universally believed that there are some people who are "naturally gifted" to be helpers or act as a resource. And in relation to curanderos, 83 percent of the respondents believed that a curandero is a resource to assist with life problems. The descriptive data elucidated several findings in relation to the foregoing question. One finding qualified the affirmative responses to the question "Do you believe a curandero can help with problems?" They added that one has to possess faith in order for such a healer to be of help. (This notion is amplified in the work of Frank, who stated that "The apparent success of healing methods compels the conclusion that the healing power of the faith resides in
patient's state of mind).\textsuperscript{1} Distinctions made by the respondents giving emphasis to their functions, suggest an evolving or potential classification or typology of curanderos. For example, respondents suggested one category of "Doctor De Rancho," whose primary responsibility was to provide simple treatment recommendations. Another group of curanderos were identified who exclusively treated psychological problems such as "susto," and problems causal by evil; for example, "mal puesto." A third group constitutes those who were commercially oriented and primarily interested in making a profit.

In terms of actual utilization of the curandero there was no significant difference among respondents. Over one half of the respondents, or 61 percent, stated that they had utilized a curandero. And the predominate referral source among the sample were family members.

There was no significant difference in the type of problems for which the respondents consulted a curandero. Fifty percent of the respondents consulted the curandero for folk type illnesses, and 11 percent of the respondents consulted a curandero for family-related problems. The

\textsuperscript{1}Frank Jerome, \textit{Persuasion and Healing}, Baltimore: Johns Hopkins Press, 1961, pp. 1-300.
findings are supported by descriptive accounts of the types of folk illnesses the problems and services received by the respondents.

The priest/minister was considered to be a resource of services by a majority of the respondents. In terms of actual utilization of the priest/minister, a significant difference was found between the first and second generation respondents. The first generation respondents made greater use of the priest/minister than the second generation couple-residents. However, among those first and second generation couples who did in fact utilize the priest/minister, no differences was determined in how they were linked with this resource. Predominantly, they represented self-referrals.

There was no significant difference with respect to the kind of problems for which the respondents sought consultation from the priest/minister, the primary problem for which consultation was sought being family problems. However, a difference was found regarding the type of assistance received by the sample. For instance, the first generation respondents primarily received advice or counsel while the second generation were provided with referrals to other services.

For the population studied, the overall findings on indigenous resources indicate unequivically that both first
and second generation respondents have similar knowledge and utilization. These resources, at the same rate, with the same commitment, and for the same problems, albeit with different results or responses from the helpers.

Interpretation of Findings

Since the study was exploratory, the interpretation of the findings on the topic of indigenous resources is a point of departure for further research.

In relation to the demographic characteristics, the sample appeared to be significantly different on every dimension except age. Based on these findings, it seems logical to assume that the first and second generation respondents would present differences in knowledge and utilization of indigenous resources. Yet, the overall findings of the study do not support the foregoing statement. Rather, the respondents were more alike than different in respect to most issues concerning a indigenous resource.

The overwhelming similarity among respondents warrants an explanation. In the opinion of the writer, the lack of age difference and relative youth of the sample was the major explanatory factor, with respect to the findings of the study. That is, the relative youthfulness of the respondents made them more alike than different. The respondents were involved in similar life cycle tasks such as establishing
families and child rearing responsibilities. As a result they experienced similar needs and life problems, and influenced by their culture sought and utilized the same resources, and had similar perceptions regarding their availability.

The belief system of Mexican-Americans is influenced by adherence to God and that evil exists. First and second generation respondents of this study confirmed this view. Kiev, in his study of curanderos, concluded similar findings that the forces of God and evil played an important part in shaping the views of Mexican-Americans in regard to causation and amelioration of life problems.¹

Hence, the belief system of Mexican-Americans provides a frame of reference or mental set of what is possible within their reality. That is, the belief system is the structure that dictates what causes life problems and the specific cultural-religious remedies that are practiced among Mexican-Americans. Religious practices such as "mandas,' 'promesas,' 'prayer,' 'lighting of candles,' applied folk treatments are influenced by the belief system. Nall and Sperling state that there is a strong interplay between folk treatment and religion,² and in the writer's opinion,


the belief system structure is, in fact, the anchor of Mexican-American folk medicine, psychiatry, and the underpinning causation of life problems.

Also, the belief system of Mexican-Americans suggest that the source and ultimate solution of life problems lie within themselves and simultaneously propel them to seek assistance within that source. This statement represents the ethos of a pragmatic and involved people.

The data regarding the family, extended kin, friends, and compadres has several interpretations. First, the data indicates that Mexican-Americans are predominantly extended family oriented. The research approach, requested that respondents define their family structure, and to indicate who they included as family members revealed that in some cases the respondents identified friends and compadres as a part of their extended relations.

While existing literature states that Mexican-Americans are extended family oriented, this definition has systematically emphasized conjugal and blood relations. This definition does not include other "near kin" as reported by the respondents. Near kin are relationships that evolve from friendship or from individuals being raised by someone who is not related (hijos de crianza) and evolve into being considered family members. The classic definition of the extended family structure seems
to be limited to members residing within an immediate geographic area such as a community or neighborhood. This study’s findings provide for a slightly different interpretation of the family structure and orientation of Mexican-Americans. To incorporate into the network of family, other than blood relatives, a conceptual definition is needed which describes the extended family and includes friends and compadres and the clear implication that geographic distance and/or separation is not considered an obstacle to the development of critical relationship.

The definition of such a family structure is a set of relationships that maintain a system by blood relations which systematically include relationship developed from conjugal religious rituals such as compadres, and friends, and exists over time and geographic distance.

Galarza in an article about the Mexican-American extended family made similar suggestions, as above, and he recommended the alternative concept of the 'extentuated' family in lieu of extended.\(^1\) The former concept according to Galarza identifies the modified nature of the Mexican-American family that has been impacted by modernization and technology.\(^2\)


\(^2\)Ibid.
In other words, Mexican-American families have been influenced by our technological advances of travel and electronic communication to continue a modern version of the extended family. Hence, locale of either urban or rural is not an important factor in the practice of extended family relations. Therefore, as delineated above, a modified definition for the extended family appears to be necessary and relevant.

It was documented by the study that the extended family is a very important resource, as 90 percent of the respondents had received assistance from them. This means that as a resource the Mexican-American extended family is readily available and can provide numerous types of assistance to its various members. In view of the family’s roles and function as an indigenous resource, it can be considered a support-system as conceptualized by Caplan. That is, the Mexican-American extended family is an indigenous resource that assists with life crisis and ongoing life problems of material, social, psychological, and in the case of Mexican-Americans with folk, physical and medical treatment needs.

Finally, it was observed that while the majority of the respondents had received assistance from family, a significant difference was observed in their view of "why the family provided assistance." It is speculated that the difference is due to the economic status of the respondents. For example, it was found that the first generation respondents who had significantly lower incomes thought that assistance from family was mandatory. In contrast, first generation respondents who enjoyed a more improved economic situation, perceived the relationship and affection as crucial rationale for the assistance which flowed from one family member to another. Thus, the respondents' view about assistance they received from family was co-related to their economic status.

The literature documents that the Mexican-American family is an important resource of support and help. Madsen, for example, stated that the Mexican-American family is a retreat or haven for help in the Mexican-American community.¹ A more recent study by Mindel suggests that a very close relationship exists between parents and siblings with a high level of exchange of aid and support.

with this kin. This is consistent with the findings of this exploratory research which examined the family and its ability to provide support and help. The findings note that the Mexican-American family continuously provides assistance ranging from emotional psychological support to that of survival services such as food, money, and transportation.

Another resource link is friends and compadres. That is, the findings of this study indicated that friends and compadres are a primary source of help to Mexican-Americans, and in some instances, friends/compadres were considered part of the extended family network of relationships. It appears that friends-compadres fulfill a special role of mediators in marital related problems.

A majority of the respondents believed that a curandero and the priest/minister could assist with life problems, and over half of the first and second generation respondents had actually utilized a curandero as well as a cleric member although not simultaneously. It seems that the utilization of these resources is influenced by the belief system of the respondents as well as their lower socioeconomic status. In other words, limited economic

---

resources propels individuals to utilize those services and resources that are accessible and congruent with their belief, values and culture.

It was found that various types of folk healers exist among the Mexican-American community. This differential is of significance in relation to the task and function of each folk healer in the type and kinds of problems each is qualified to help with. Also, this effects the type of assistance that is provided to those consulting a curandero. Hence, ability and knowledge on the part of the referring source is important in linking the appropriate resource with need.

Although there was no significant difference in the referral patterns to curanderos and priest/ministers, it was noted that two different referral patterns emerged. The predominate referral pattern to curanderos was by a family member, while for priest/minister was a self-referral. Such data seems to indicate that contact and utilization of folk healers is maintained by knowledgeable family members who are willing to refer. These family members are important in the continuation of the folk care system which includes curanderos. On the other hand, self referrals to priest/ministers was the predominate pattern. This may mean that individuals are knowledgeable and willing to refer themselves, also, it may mean that the priest/minister is
visible and readily available. Therefore, the network of family relations are the most important referral source to curanderos.

From the foregoing there appears to be a seemingly incongruence in the referral pattern to the minister in comparison to the curandero. One consideration is that the availability of the minister/priest is apparent; however, through linkages in the network of relationship referral to the curandero is facilitated. The visibility of the priest/minister is facilitated by the fact they reside in the community, partake in community events, and thus there is contact between the Mexican-American community and the priest/minister. The visibility of the curandero is less apparent. Those familiar with folk health care are likely to have knowledge of the curandero, thus facilitating and encouraging utilization of this resource. Factors contributing to this incongruence noted by this study warrants further exploration for future research.

In summary, although there was no significant difference in the referral patterns to curanderos and priest/ministers, it was noted that two different patterns emerged. The predominant referral pattern to curanderos was by a family member, while referral to the priest/minister was made by self.
Discussion of the Problems and Limitations

A number of problems and limitations were encountered in the process of implementing this research study which should be considered when interpreting the data. First of all, the focus of the study was too extensive. While such an approach is instrumental in the assessing the nature of human problems, for example environment, social and psychological elements, it presents a monumental problem for research design and actual data collection. That is, attempting to investigate a total system of resources has shortcomings that often times preclude rigorous scientific investigation. Since it is not possible to do an indepth research, all elements of the indigenous resources findings presented may be affected. It seems that the most appropriate approach to investigate such a phenomenon would be to select a specific conceptual area and carry out the research. For example, concentrating only on the curandero and his/her role in the provision of services would allow for more thorough investigation.

Another area of concern was the instrument used in this study. The instrument developed proved to be too extensive and lengthy. The obvious solution is a briefer, clearer, and more concise instrument; a result which would automatically evolve selecting a smaller area of study
as opposed to the broad based ecological focus of this research.

A third area of concern is the sample. Several problems are noted with respect to the sample. The sample was too regionalized, although respondents were selected from urban and rural areas, all respondents were from the same geographic area. The sample was predominantly young and represented two generations—first and second. Another potential limitation is that the sample only represented lower socioeconomic status Mexican-Americans. These limitations effect the interpretation of that data in its generalization to the Mexican-American population as a whole.

The solution or methodological decision to address the foregoing limitations lies in the selection of the sample population. Selection of the sample needs to include a wider range of respondents in terms of age and generation. For example, age of respondents should be at several crucial life cycle stages, and the sample needs to represent several generations. If possible, the sample needs to be selected from different areas in the Southwest and represent the whole spectrum of socioeconomic statuses. With these requirements it is thought that the major limitations of the study could be addressed and the findings then could be generalized to a wider range of Mexican-Americans.
Implications for Practice

There were a number of findings derived from the study which have practical implications for social work practice with Mexican-Americans and their network of indigenous resources. The resources can be conceptualized as an important element in the time honored person-situation paradigm of social work practice. The resources are part of the situation, interfacing with the individual. In most cases, the practitioner is concerned with the transactional aspect of the paradigm, where the practitioner can assert maximum leverage in facilitating the processes or establishing the linkage between the person and the situation. That is, within the social and physical environment of the person lies a considerable resource than can be engaged as part of the helping system, as in the case of Mexican-Americans. The critical points here are when to reach out to the social context of a Mexican-American client and how to engage that resource to be an active, helping system.

Several general and specific implications and recommendations for social work practice evolved from this research. A social situation described by the literature and which merits restating here is that Mexican-Americans are a heterogenous group of people as opposed to being homogenous. The primary reason for this state of affairs is the sociological process of acculturation. Mexican-
Americans are found at all levels of the acculturation continuum from those who have experienced relatively minor changes to those who have completely assimilated. Sensitivity and ability to discern the differences are implied requirements, for what may be a fact and a way of life for one Mexican family or individual may not be the case with another family. The latter is also of relevance to the utilization of the findings of this study in the provision of services to Mexican-Americans.

The sensitivity and awareness may be achieved by encouraging the client-system to educate the practitioner of his or her background. The client would act as a guide in exploring his or her uniqueness. In essence, such an approach would avoid a-prior position, thus guarding against stereotypes, assumptions and myths of Mexican-Americans and biases of a given practitioner.

The engaging of the indigenous resources or support systems in effect operationalizes the professions commitment to the person-situation formulation. This operationalization is enhancing the interface for transactions between the individual system and his or her environment. Such a task is conceptualized into two main areas which are:

(a) Engaging existing indigenous resources and seeking to enhance their functioning;
(b) and creating or attaching a formerly isolated individual or family with an existing indigenous community resource.

The assessment phase of professional intervention is critical. Here the worker will determine, with the guidance of the client, what is appropriate for the person or family. A review of the individual's belief system will provide clues on causation and possible treatment of problems being faced. Also, such assessment would determine what efforts have already been made to alleviate a problem situation. This is paramount for those social workers practicing in mental health settings. In essence, the belief system of the Mexican-American will provide the knowledge of what resources are available for that person aside from standard social or mental health services. Therefore, the implication for practice lies in the fact that exploration with extreme sensitivity is required to understand those from a different culture, in this case, Mexican-Americans. Implied in this is the ability to establish cultural uniqueness inasmuch as already stated, Mexican-Americans are not a homogeneous group.

The study reconfirmed that the family, extended kin, compadres and friends are an exceptional resource of help for Mexican-Americans. This network of relationships is a rich resource of help from folk remedies to advice, from
emotional support to referrals, from encouragement to financial assistance. As for social work practice, a thorough assessment as to the viability and extent of contact with relatives, friends, and compadres, a Mexican-American client may have is needed in order to provide appropriate intervention. Prado-Borrego stated in her article on "Network Intervention" that at times the problem for which help is sought may be a lack of fit between the person and his environment. Thus, the task of the practitioner is to discern the social environment, in this case the family, friends, and compadres, for potential natural allies and engaging them as part of the helping system.

Implications for practice are plural. First, most of the research, including this study, agree that for most Mexican-Americans the family and extended kin are an important element and resource. Also, this research found that among Mexican-Americans, friends and compadres are significant relationships, in some cases, even considered members of the family. Therefore, social workers as a

---

matter or rule need to evaluate the role of significant others and involve such relationships in the helping process.

Secondly, sensitivity to the culture is a must, for there are some problems that Mexican-Americans prefer not to share with family members. Hence, in planning for family treatment, it would be necessary to assess the clients' willingness to consider the specific type of problems with other family members.

The final element of the indigenous resources explored in this study was the curandero and priest/minister as a helping system among Mexican-Americans. It was found that both the curandero (folk healer) and the priest/minister are viable and active resources among the sample of first and second generation Mexican-Americans.

The implication of this finding for practice is that professionals and especially for those social workers of non-Hispanic backgrounds have to be aware of this fact; both the existence and the importance of curanderos and priest/ministers as helpers. This awareness will serve as the impetus for practitioners to explore the world views and perspectives of Mexican-Americans' clients as well as their network of resources.

A practitioner must be able to differentiate among Mexican-Americans with respect to his/her appreciation and actual utilization of curanderos and folk health care
systems. For example, there are Mexican-Americans who have not had the occasion to consult a curandero, but who nevertheless utilize folk health treatments and rituals. Thus, utilization is either direct or indirect as in the situation where a grandmother or aunt insists on providing a specific remedy or treatment.

The picture is further complicated by the fact that many Mexican-Americans will not readily disclose knowledge or utilization of such a resource. This was observed with some of the subjects of the study who initially reacted to the subject with humor or with statements like "It is a practice of the old ones," or "It is for women and children." In many situations, the issue is one where a Mexican-American will utilize his own indigenous resources and simultaneously seek services from formal resources. One respondent indicated that utilizing both systems may assist the process of amelioration. This, in fact, is a pragmatic approach where a people blend two approaches to solving problems.

The implications for practice are at several levels:

(1) A practitioner must possess sensitivity and awareness of cultural and social differences among Mexican-Americans;
(2) A practitioner should encourage those individuals who profess a belief in such resources to reach out to it;

(3) Belief and interest in the viability of curanderos provide clues for the practitioner to encourage and assist clients in developing this network of social relations;

(4) A practitioner should strive to integrate such resources with his/her intervention strategies.

Finally, perhaps the major significance of curanderos and folk health care system lie with the psychological and social support that such resources provide, within the web of family relationships, friends, compadres and community, plus their existence as a natural ally of helping and therapeutic value to Mexican-Americans.

The priest/minister is a significant resource among the Mexican-American community. The implication for practice lies in the conscious effort by practitioners to delineate with the client about his views and utilization of such a helping system.

Priest/ministers represent the church and a linkage to the supernatural forces of God that are significant to many Mexican-Americans. Such a resource is readily available within the community, and it was determined by this study that Mexican-Americans perceive priests/ministers
as a viable helping system in time of need for psychological, emotional, and spiritual problems. Linking and referring Mexican-Americans to a priest/minister may be appropriate and, in some situations, collaboration with such a system may also be needed. Also of significance is that Mexican-Americans readily seek help or refer themselves to this resource.

Suggestions for Further Research

The scope of this study was exploratory in nature. Hence, a number of areas for future research emerged in the process of conducting this study. These will be presented in this section.

Since the study focused on two generations and a youthful sample, it would be interesting to explore the findings of this study among other age groups and socioeconomic status Mexican-Americans. The results of such a study would permit us to compare and contrast difference, and to identify areas of similarities among the diversified sample. This, of course, is of importance to practitioners for development of intervention strategies.

Another research possibility is the difference between the sexes with respect to knowledge and utilization of indigenous resources. This would identify the role of
male versus that of the female Mexican-American in the overall adherence to culture and social ways.

Of interest for practitioners is the referral patterns of who refers who, to what specific indigenous resource such as the curandero and priest/minister. This issue needs to be further studied among Mexican-Americans.

A closely related issue is what type of resource or assistance is provided to different generations of Mexican-Americans. Here, the emphasis needs to be on examining the life problems Mexican-Americans experience and what is done about them by their network of indigenous resources.

An interesting finding of the study was delineation of several types of curanderos which need to be researched further. That is it would be useful to determine those problems or needs for which a given curandero is consulted, and how the need of a referral to each practitioner is determined. These and related questions about the role, type, and utilization of curanderos among Mexican-Americans will contribute equally to theory development and adequate service provision to Mexican-Americans.

Finally, it would be of interest to compare Mexican-Americans who are clients of mental health services with a sample of Mexican-Americans who were non-mental health clients with respect to utilization of indigenous resources.
BIBLIOGRAPHY
BIBLIOGRAPHY


"Health Perceptions in the Chicano Community," Mano a Mano Houston, Chicano Training Center, January 1974.


Mendes, Helen. Faculty Development Minority Content in Mental Health, Monograph No. 4. Some Religious Values Held by Blacks, Chicanos and Japanese Americans and their Implications for Casework Practice. Los Angeles: University of Southern California, 19


Valle, Ramon and William Vega (eds.). *Hispanic Natural Support Systems: Mental Health Promotion Perspective,* State of California, Department of Mental Health, 1980.


APPENDIX A

Letter of Request to Obtain the Sample
Letter to the Potential Respondents
Dear Mrs. Garcia and Tulare County Head Start Advisory Board:

I am a doctoral candidate at Columbia University School of Social Work in New York City. As part of the requirement for the doctorate degree, I have to complete an original research study that focuses on a significant social issue.

There is great concern by mental health programs that Mexican-Americans do not utilize their services extensively. The issue most researched addresses is the "underutilization" phenomenon. This research focus has not concerned itself with alternatives for remedy of the situation. I, on the other hand, propose to investigate not the so-called "underutilization issue", but the alternatives Mexican-Americans possess that keep them from utilizing mental health services; what are the strengths that Mexican-Americans possess to cope with life stresses and problems? In this regard, I am requesting your cooperation by permitting me to contact a selected number of Mexican-American families that your agency provides services to. Your cooperation will assist in carrying through a much needed study.

Therefore, the trust of this study is to select a sample of Mexican-American families (one parent or two parents) to provide knowledge of their culture, heritage, social tradition, and psychological strengths. This knowledge will augment social work practices with Mexican-Americans and assist in the development of mental health services provided to them.

I am requesting your agency's (Head Start) assistance in this study for two reasons: One is that the Head Start program serves a large number of Mexican-American, hence providing a good opportunity to select an adequate sample. The second reason is that your agency enjoys a good working relationship with the population it serves. This, of course, would enhance participation in my study.

If permission is granted to contact your agency's clientele, preliminary work will begin in the spring of 1978, approximately in April. This work will consist of selection of the sample and the testing of the research instrument, this is the verbal questions and the questionnaire to be used. The actual data will be collected during the summer of 1978. I will be the principal investigator.

The interviews will be conducted in Spanish or English. Also, the questionnaire will be in both languages. The duration of the interviews will be from one and one half to two hours, and participants selected will be contacted by letter and a personal contact. If the selected individual does not wish to participate, another name will be picked from your agency until the required number of forty families is secured.

A final consideration is the issue of confidentiality. No names will be used in the final written report, which will assure anonymity to the participants; and I assure the participants, your agency, and its advisory board that the knowledge gained will be used in a strict professional manner (the final report will be available to your office.

If you or the advisory board wish further clarification of my research endeavor, I am most eager to comply. I can be reached at 732-1394 or 732-6631, ext. 52. Thank you for your consideration.

Sincerely,

[Signature]

[Name]

Doctoral Candidate
Sr. Rodolfo Borrego
1830 S. Hooney Blvd. (trabajo)
3038 E. College (residencia)
Visalia, Calif. 93277

Fecha:

Estimado

Soy un candidato para el título de doctor en la Escuela de Trabajo Social de la Universidad de Columbia en la ciudad de Nueva York. Estoy solicitando su participación en un estudio científico tocante los recursos de ayuda que muchas familias de habla españa tienen y utilizan.

Su nombre y domicilio fue obtenido de la oficina de Tulare County Child Care and Educational Program (dónde su niño atiende clase). También la mesa directiva de padres del ya mencionado programa dio permiso para tener contacto con usted.

La sabiduría obtenida de usted dará una importante contribución al desarrollo de servicios sociales. Y también esta sabiduría asistirá a profesionistas de servicios humanos para más bien entender y ayudar familias de habla españa.

En unos cuantos días una persona que habla español y inglés va tener contacto con usted para poner cita para la entrevista. Su participación es totalmente voluntaria. La decisión es suya si desea participar.

Si al caso tiene preguntas serán contestadas durante el primer contacto. Y toda la información que nos de y su nombre es confidencial. Muchas gracias por su asistencia y cooperación.

Sinceramente,

Rodolfo Borrego
Candidato para título de doctor
APPENDIX B

Research Instrument
PART I

1. Note by interviewer:
   a. Both husband and wife ( ); wife only ( );
      husband only ( )
b. Others in the interview: Adult relative ( )
      Adult Non-relative ( )

2. How old are you?
   Husband ______________________
   Wife ______________________

3. Where were you born?
   Husband: Mexico ( ); U. S. ( ); Other ( )
   Wife: Mexico ( ); U. S. ( ); Other ( )

4. Where were your parents born:
   Husband's parents: Mexico ( ); U. S. ( );
                      Other ( )
   Wife's parents: Mexico ( ); U. S. ( );
                  Other ( )

5. What is your ethnic identification?
   Husband: Mexican ( ); Mexican-American ( );
            Chicano ( ); Spanish-American ( );
            Other ( )
   Wife: Mexican ( ); Mexican-American ( );
         Chicano ( ); Spanish-American ( );
        Other ( )

6. How long have you lived in this community?
   0-1 years ( ); 2-3 years ( ); 4-5 years ( );
   6 or more years ( )

7. How many children do you have?
   a. In common: 0-1 ( ); 2-3 ( ); 4-5 ( );
      6-7 ( ); 8 or more ( )
   b. Children from previous marriages (cite number):
      Husband: ______________________
      Wife: ______________________
   c. Adopted children
   d. Ages: 1-5 years ( ); 6-10 years ( );
      11-15 years ( ); 16-20 years ( )
   e. Number of children at home
   f. Number of children married ______________________
8. Besides your children, are there other people living with you? Yes ( ); No ( )

9. What was the last grade you completed in school:
   Husband
   Where? U.S. ( ); Mexico ( ); Other ( )
   Wife
   Where? U.S. ( ); Mexico ( ); Other ( )

10. Which language do you most frequently speak:
   Husband: Spanish ( ); English ( );
   English-Spanish combination ( )
   Wife:
   Spanish ( ); English ( );
   English-Spanish combination ( )

11. Which language do you most frequently read:
   Spanish ( ); English ( );
   English-Spanish combination ( )

12. What is your employment:
   Husband ____________________________
   Wife ______________________________
   a. If unemployed is disabled, identify source of assistance
   b. Other source of income ____________________________

13. Approximately what was your total family income in 1978? Here is a card showing yearly income. Next to each amount is a letter. Would you tell me what letter represents your income? (Interviewer show card and note letter). ______

14. When did you marry?
   a. Date ____________________________
   b. Where __________________________
   c. Type of wedding ceremony:
   Civil ( ); Religious ( ); Common-law ( )

PART II

THE FAMILY AND EXTENDED KIN

Now I am going to ask you about your family and relatives, and how you keep in touch with them.

15. Who do you consider as your family:
   Husband's perspective:
   Wife's perspective

16. Have your relatives (wife's and husband's) ever provided help to you: (Yes) ______ (No) ______
a. When was the last time they helped you?
b. What was the problem?

17. Why do family or relatives provide help?

PART III

KNOWLEDGE OF INDIGENOUS RESOURCES

Some people are gifted with abilities to provide help/treatment for nervous depression, anxiety, marital problems, susto and other problems. I wonder if you know such people or if you or a relative has such abilities. I am going to ask you some questions regarding this topic.

18. Do you believe that some people possess abilities to provide help?
   Yes ( ) No ( ) Don't know ( )

Curandero/Folk Healer

19. Do you believe that a curandero can help with problems?
   Yes ( ) No ( ) Don't know ( )

If yes, answer the following question:

20. What are the kinds of problems that a curandero can help with? (Interviewer list separately for each respondent)

21. What kind of helpers or curanderos are you familiar with?

22. Has a curandero ever helped you or a member of your immediate family?
   Yes ( ) No ( ) Don't know ( )

If yes, answer the following questions:
   (Note respondent)
   a. When?
   b. What was the problem?
   c. What did the curandero do to help?
   d. What was the result of the help?
   e. How did you find the curandero?
Priest/Minister

23. Do you believe that a Priest/Minister can help with problems?  
   Yes ( )  No ( )  Don't know ( )

   If yes, answer the following questions:

24. What are the kinds of problems that a Priest/Minister can help with?

25. Has a Priest/Minister ever helped you or a member of your immediate family?  
   Yes ( )  No ( )  Don't know ( )

   If yes, answer the following questions:
   a. What was the problem?
   b. What did the Priest/Minister do to help?
   c. How did you find the Priest/Minister?

Friends/Compadres

26. Do you believe that some of your friends/compadres have the ability to help with problems?  
   Yes ( )  No ( )  Don't know ( )

   If yes, answer the following questions:

27. What are the kind of problems that friends/compadres can help with?

28. Have any of your friends/compadres ever helped you or a member of your immediate family?  
   Yes ( )  No ( )  Don't know ( )

   If yes, answer the following question:
   a. When did this occur?
   b. What did the friend/compadre do to help?

PART IV  BELIEF SYSTEM (SPIRITUAL ASPECTS)

29. What is your religion?  
   Catholic ( )  Protestant ( ) (specify)  
   Other: ________________
30. How long have you been a member of this religion?
   a. Probe if a recent convert. Why?

31. Church
   Do you attend church services: Yes ( ) No ( )
   If yes, answer the following questions:
   A. How often do you attend church services?
      Monthly ( ) Weekly ( ) Yearly ( ) Other (specify) __________

32. Do you attend church services when you are experiencing problems:

   Yes ( ) No ( )

GOD
33. Do you believe in God?
   Yes ( ) No ( ) Don't know ( )

34. Do you believe that God sends or causes problems?
   Yes ( ) No ( ) Don't know ( )

35. What kind of problems are caused or sent by God?

36. What can you do to deal with/solve problems caused or send by God?

EVIL/SATAN
37. Do you believe that evil/satan exist?
   Yes ( ) No ( ) Don't know ( )

38. What kind of problems are caused or sent by evil/satan?

PART V
Now I am going to read to you four (4) brief paragraphs that present different types of life-problems. After I read the problem I would like for both of you to solve it together. Please answer like it is you who is involved in the problem. There is no right or wrong solution to the problems.
Instructions to the Interviewer:

Note difference of opinion between each set of subjects (husband and wife) and all behavior involved in solving the problem presented by each vignette. The main interest is on a joint answer that focuses on the utilization of indigenous resources of the subjects.

**PROBLEM #1** (Intrapersonal)

39. One of you is complaining of depression (tristeza). The accompanying symptoms are headache, weight loss, lack of energy, crying spells, easily angered (irritable). The depression is affecting your job performance and your relationships with your family and friends.

What would you do to handle this situation?

**PROBLEM #2** (Social)

40. Your car broke down and is in the repair shop. According to the mechanic, it may be a week to ten days before it will be repaired. However, you lack the necessary funds for the repairs needed by your car or to purchase another car. Your problem is twofold. The immediate concern is what to do about transportation to get to work and meet the needs of your family. The second part of the problem is what to do about securing the necessary money.

**PROBLEM #3** (Marital)

41. Recently you have been experiencing problems with your spouse. Your wife complains that you spend too much time away from the family and home, and you complain of her appearance. Both of you are irritable with each other, and you are not sleeping together. Both of you have had thoughts of separation. The problem is what to do about your marriage.

What could you do to solve your marital problem?

**PROBLEM #4** (Parent-Child)

42. Your child is having difficulties in school, his school work is poor and he is fighting with his classmates. The child is not obeying you. For instance, when he refuses to go to school, this upsets and angers you. Your problem is what to do about your child's behavior.

What could you do to solve the problem presented by your child?