

An Ecological Understanding of Alcohol-Specific Parenting Practices in Humboldt Park

BY

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THESIS

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LIST OF ABBREVIATIONS

ASP	Alcohol-specific parenting
ATOD	Alcohol, tobacco, and other drugs
PRCC	Puerto Rican Cultural Center
PACHS	Dr. Pedro Albizu Campos High School

SUMMARY

This study applies an ecological perspective to inquire how alcohol-specific parenting (ASP) strategies are experienced and interpreted by Latino youth in the Humboldt Park community. Although underage drinking continues to decline, it is associated with numerous health and safety risks both in adolescence and adulthood. Substantial evidence demonstrates parental influence on underage drinking behaviors through both general and alcohol-specific parenting (ASP) strategies. However, ASP strategies are rarely investigated with respect to their ecological context, and even less often in specific ethnic or geographic communities. The purpose of this study is to explore how a critical ecological understanding of ASP strategies, as interpreted by youth, challenges the current body of theoretically decontextualized underage drinking and ASP research and prevention efforts, by answering the following questions: *1) How do Latino youth describe and experience ASP strategies used in Humboldt Park? 2) How does the ecological context inform Latino youths' appraisals of ASP strategies?* This study used focus groups and grounded theory methods, including purposeful sampling, initial and focused coding, memoing and member validation. Findings indicate that Latino youth perceive that parents in the target community frequently prioritize harm-reduction strategies to reduce alcohol-related risks over prohibiting teen drinking itself. These strategies represent an adaptation to the local environment, including both local and cultural norms and perceived risks. Additionally, youth interpret parenting strategies as rooted in family and migration history. Youth report a potential misalignment between the historical context ASP strategies are designed for, and the current setting in which they are applied. These discrepancies may compromise the effectiveness of ASP strategies in the target population. Implications for ASP research and corresponding interventions are discussed.

I. OVERVIEW

Underage drinking, the consumption of alcohol by adolescents under the age of 21, contributes substantially to both adolescent health and safety risks and substance use in the general US population (U.S. Department of Health and Human Services, 2015). Because of this, Healthy People 2020 identifies lowering underage drinking as an objective both for adolescent health and adult substance abuse prevention. Two major national studies of adolescent health behavior, Monitoring the Future and the Youth Risk Behavior Surveillance Survey, report a steady decline over the last decade in both reported binge drinking in the last 30 days and the percentage of high school students reporting initiation to alcohol younger than 13 (Center for Disease Control, 2014; Johnston, Bachman, O'Malley, & Schulenberg, 2014). This progress may be further supported through family-based interventions.

Parenting strategies to prevent adolescent drinking, referred to as alcohol-specific parenting (ASP), have received increasing attention as both predictors of underage drinking behavior and as modifiable targets in preventive and intervention efforts. However, ecologically framed studies of underage drinking have found that the relationships between risk and protective factors, including family-level factors, and underage drinking vary significantly across communities (Feinberg, Jones, Cleveland, & Greenberg, 2012). Recent studies suggest that ASP, and its effect on young people, is shaped by families' ecological settings. For example, one study found that African American and Latino youth living in dangerous neighborhoods (e.g. high rates of violent crime) benefit from more punitive parenting styles which incorporate practices such as hitting, threatening, and scolding, whereas the same parenting style is associated with higher rates of drinking in safer neighborhoods (Roche, Ensminger, & Cherlin, 2007). However,

little research exists on how youth, particularly Latino youth, experience and interpret the relationship between alcohol-specific parenting processes and their social ecology.

Interventions targeting ASP strategies must reflect experiences specific to Latino families (Resnicow, Soler, Braithwaite, Ahluwalia, & Butler, 2000). For example, exposure to multiple cultural settings, each with its own distinct demands, may create generational differences in cultural adaptation styles, referred to as *acculturation gaps*, between parents and children that weaken ASP processes (Cox Jr, Roblyer, Merten, Shreffler, & Schwerdtfeger, 2013). Parents may also be pressed to find ways to attenuate the impact of risk factors to which Latino youth are disproportionately exposed, such as high concentrations of alcohol outlets or greater incidence of discrimination (Kulis, Marsiglia, & Nieri, 2009; Maimon & Browning, 2012). To date, it is unclear what aspects of Latino families' ecology, including culture, are most relevant to understanding ASP in this population.

A better understanding of how Latino parents' ASP strategies are shaped by context is needed to create relevant interventions to reduce underage drinking. Because the relevance of risk and protective factors may vary by neighborhood (Feinberg et al., 2012), it can be beneficial to first explore this relationship in one specific community in order to inform strategies targeting the local context. This grounded theory study focuses on the experiences of students from Pedro Albizu Campos High School (PACHS), an alternative school in the Humboldt Park community in the city of Chicago that has recently implemented strategies to reduce underage drinking and substance use among their student body.

The purpose of this study is to explore how an ecological understanding of ASP strategies, as interpreted by youth, challenges the current body of theoretically decontextualized

underage drinking and ASP research, and its associated interventions, by answering the following questions:

- 1) How do Latino youth describe and experience ASP strategies used in Humboldt Park?*
- 2) How does the ecological context inform Latino youths' appraisals of ASP strategies?*

II. CONCEPTUAL FRAMEWORK

This study is framed by an ecological perspective. The ecological lens applied to this study has been additionally influenced by principles of Critical Race Theory (CRT). Community psychology's ecological perspective approaches developmental processes as inextricably linked to an individual's settings (Trickett, 2009). This perspective interprets human behaviors as adaptive responses to settings, maintaining that human development can only be understood in context, and psychologists must consider the processes linking behaviors to their setting. Articulating these processes requires an appreciation of the "ecology of lives" (Trickett, 2009). Life unfolds across multiple settings, each with its own demands. Furthermore, individuals are active agents in their own development within these settings—coping with, and adapting to, circumstances specific to each setting (Kelly, 1979). The diverse domains of social ecology produce a range of human behaviors, as what is adaptive for some people under some circumstances is not necessarily adaptive for all.

Key concepts that inform community psychologists' understanding of the "ecology of lives" are the principles of adaptation, cycling of resources, interdependence, and succession (Kelly, 1979; Trickett, 1996; Trickett, 2009).

The principle of adaptation posits that individuals adapt their behavior to meet the demands of their setting. Forces such as social norms, policies, and attitudes shape behaviors in ways that may not be consistent across all settings; behaviors that lead an individual to thrive in one setting may not be useful in another setting. For example, many young immigrants, or children of immigrants, must navigate and adapt to multiple cultural settings as part of the acculturation process. Certain cultural norms such as language use or forms of gender expression may be reinforced in one setting, such as the home, but penalized in another setting, like school.

The second principle, cycling of resources, acknowledges local interpretations of what resources are, how they are distributed, and how they are mobilized. Resources include not only goods, services, and economic capital, but also relationships, events, and settings that may support positive adaptations.

The third principle refers to the interdependence of different aspects of a setting. Events in one setting may have both intended and unanticipated consequences across multiple settings. For example, changes in the neighborhood may ripple through students' schools, peer groups, and families, for better or for worse. Interdependence is closely related to the cycling of resources principle because of its influence over how resources are distributed and shared within a system.

Finally, the principle of succession recognizes that individual and community history influence individual behaviors. The meaning assigned to events in one system may be quite different than similar events in another system according to the historical persons and events that contextualize these moments in each community. It is important to note that the role of succession, as applied to this study, is significant at various levels of proximity to the individual. For example, in the present study, historical processes of domination such as the intentional introduction of distilled alcohol to Latin America as a tool of colonization (Carey, 2015) is part of one's developmental context as much as the death of a classmate in an alcohol-related crash in this decade.

The ecological perspective also holds a deep appreciation for the omnipresent influence of culture across life domains (Trickett, 1996). Communities adapt to settings in ways that are congruent with their own cultural beliefs, values, traditions, and shared history. Not only does culture shape behavior in every domain of an individual's life, but each setting also exerts its

own forces on cultural expression. Culture not only emerges as an adaptation to settings, but also manifests itself in distinct ways according to these settings.

Following the example of (García Coll et al., 1996) the ecological framework used in this study is further shaped by principles of CRT. CRT posits that race, and white supremacy specifically, though socially constructed, are foundational to our society at both a national and global level (Mills, 1999). In addition to calling attention to the pervasiveness of racism, CRT also promotes an intersectional framework through which we understand human diversity (Crenshaw, 1989). This framework proposes that individuals have unique experiences of marginalization based not only on race, but on the convergence of their multiple identities—such as gender, ability, immigration, and economic status—within the social hierarchy that shapes daily life. These multiple social hierarchies are embedded into the economic, political, social, and interpersonal fabric of everyday life such that they are assumed and therefore “invisible” in everyday life due to their normativity.

In the field of psychology García Coll et al. (1996) have noted that ecological frameworks have reinforced this invisibility by failing to acknowledge the role of social hierarchies in the developmental context. This oversight has made social scientists accomplices in systems of marginalization in two ways: First, by defining the experience of dominant groups as normative, they may generate “universal” descriptions of developmental processes that either ignore or problematize the experiences of marginalized communities (Delgado Bernal, 2002). Second, they may locate the root of pathology in specific identities (e.g. “Latino”, “gay”, “female”, “immigrant”) rather than in the daily experiences of marginalization underlying disparate developmental and health outcomes. That is, by failing to address an individual’s position in the social hierarchy as part of their developmental context, psychologists risk

problematizing membership to a marginalized group rather than the experience of marginalization itself (García Coll et al., 1996; Hylton, 2012).

Despite frequent failure to unite the two frameworks, ecological paradigms and CRT are in fact compatible given that structural oppression—including racism, classism, sexism, and other “isms”—form part of the “ecology of lives” under scrutiny in the ecological framework. Furthermore, both frameworks challenge positivist approaches to understanding human behavior that seek to erase contextual factors such as history, oppression, and marginalization. The Eco-developmental model proposed by García Coll et al. (1996) challenges psychologists to center on the features of the developmental context specific to minority children including manifestations of discrimination and segregation. This model may be interpreted as a discipline-specific answers to CRT’s call to “center on the margins.” Centering on the margins means to give primacy to (rather than systematically masking) the experiences of marginalized groups in our study of human experience and behavior (Delgado Bernal, 2002).

Applying ecological frameworks to alcohol-specific parenting requires that investigators recognize that parenting practices, and their effect on adolescent drinking behavior, are informed by the settings in which these processes take place. Furthermore, these settings, and cultural expression within these settings, are influenced by pervasive social hierarchies based on identities (and their intersections) such as race, gender, and immigration status. Despite strong evidence that ASP practices are indeed culturally and contextually informed, these processes have not been explicated sufficiently. Some research confirms that parenting practices and their effects on underage drinking vary across populations, communities, and settings. However, why and how certain ASP practices function for different communities continues to elude us. A more

nuanced understanding of how ASP is shaped by Latino families' "ecology of lives" is necessary to develop locally relevant interventions.

Although this study is not explicitly focused on experiences of oppression, it rejects the tradition of problematizing marginalized identities in order to explain behavior that deviates from the dominant group, and instead applies a critical interpretation of the ecological framework to explore how culture and context interact to influence health behaviors in a specific community. Through this process, it seeks to draw attention to the contribution of knowledge, meaning making, and forms of health promotion indigenous to local, historically marginalized communities.

III. LITERATURE REVIEW

Although many studies have targeted parental influence on underage drinking, the relationship between alcohol-specific parenting practices and adolescents' ecological settings has often been overlooked. In this literature review I will establish parents' role in preventing underage drinking through Alcohol Specific Parenting (ASP) strategies, and describe how ASP research has overlooked the context in which parenting and adolescent drinking decisions take place. I will then discuss the need for research and intervention specific to Latino families by summarizing previous research findings that indicate deep-structure cultural differences impacting underage drinking and ASP practices in Latino families. These observations include how Latino youth are unique in their drinking behaviors, are differentially exposed to risk and protective factors, and may be impacted differently than their peers by these factors. Each of these observations indicate environmental and cultural processes relevant to ASP strategies and their effectiveness which have not yet been thoroughly understood. To inform the development of effective interventions we must use an ecological perspective to better understand how parent-child interactions in Latino families relate to the larger context of alcohol use in both Humboldt Park and the Latino community.

A. Underage Drinking and Alcohol Specific Parenting

In 2013, 26% of tenth grade students and 39% of twelfth grade students reported consuming alcohol in the last 30 days (Johnston et al., 2014). Alcohol use by Latino adolescents reflects national rates; 29% of 10th grade and 39% of 12th grade Latino students reported drinking in the previous 30 days. According to the Surgeon General's Call to Reduce and Prevent Underage Drinking (United States. Public Health Service. Office of the Surgeon General, 2007), underage drinking is associated with multiple health risks including injury and death due to

accidents, abuse of other substances, and alterations to the developing brain. In agreement with extensive research, partially summarized below, linking underage drinking outcomes with parenting practices, this call to action also emphasizes the role of caregivers in preventing teen alcohol use.

1. **The role of parents**

Health and behavior researchers have identified strong relationships between general parenting and family characteristics and adolescent alcohol and substance use. For example, authoritative parenting, characterized by effective rule-setting and a high degree of responsiveness to children, predicted lower rates of underage drinking and substance use than authoritarian or permissive parenting styles in multiple studies (Clausen & Sten-Erik, 1996; Cohen & Rice, 1997; Piko & Balázs, 2012). Parental monitoring also shows a promising impact on underage drinking. Adolescents with parents who set and enforce rules, and are aware of where their children are, what they are doing, and with whom, are less likely to drink or use drugs (Beck, Boyle, & Boekeloo, 2004; Clark, Shamblen, Ringwalt, & Hanley, 2012). Family environment, including indicators like parental warmth, family cohesion, and parental conflict, is also a strong predictor of underage drinking and substance use (Barnes & Farrell, 1992; Mogro-Wilson, 2008). In addition to these general family characteristics, parenting practices may specifically target teen drinking.

2. **Alcohol-specific parenting**

Alcohol-specific parenting (ASP) refers to strategies used by parents of adolescents to prevent, or reduce the consequences of, underage drinking. Examples of these strategies, many of which have strong protective effects on underage drinking, include parental

modeling, enforcing rules about drinking, and alcohol-specific communication (Ryan, Jorm, & Lubman, 2010).

ASP represents a promising intervention pathway to prevent underage drinking. Although the effect of individual risk and protective factors on underage drinking varies considerably by community, the role of parents may be more consistent than other factors in peer networks and neighborhoods (Feinberg et al., 2012). Other studies support the conclusion that some protective parenting factors buffer the impact of multiple neighborhood-level risk factors (Gartstein, Seamon, & Dishion, 2014; Nargiso, Friend, & Florin, 2013).

Consistent with the ecological principle of interdependence, family processes and ASP may also have indirect positive effects on other settings. For example, there is some evidence that students reporting greater family cohesion were also more connected to their school and less susceptible to negative peer influence (Chun, Devall, & Sandau-Beckler, 2013). The same pattern was found in an all Hispanic sample (Yan, Beck, Howard, Shattuck, & Kerr, 2008). Effective ASP may also transform adolescents into agents of positive peer influence. After communicating with parents about the consequences of underage drinking, Mexican-heritage youth were more likely to discourage their friends from drinking (Kam, Potocki, & Hecht, 2014; Kam & Yang, 2014). ASP's potential positive effects on other settings is another reason to focus on strengthening protective parenting processes.

However, not all parents and caregivers feel prepared to employ ASP strategies in their families. A longitudinal study showed that parents who feel less effective at preventing their child from drinking employ fewer protective parenting strategies over time, even if they reported worrying about their child's proclivity in early adolescence (Koning et al., 2013). Parental efficacy may be improved by interventions and educational resources relevant to the daily

experiences of teens and their caregivers. This requires an improved ecological understanding of how ASP practices are informed by the context in which they are applied (Cleveland, Feinberg, & Greenberg, 2010).

3. **Oversight of context in ASP research**

Research on alcohol-specific rules is one example of how oversight of context has compromised our understanding of ASP. In a review of longitudinal studies on parenting and underage drinking alcohol-specific rules rarely predicted teen drinking behavior (Ryan et al., 2010). Measures used in these studies often treated all alcohol-specific rules as universal, transcending context. These measures ignored the settings in which rules are formed and enforced, using a single dichotomous item such as “Is it a rule at your house that you are not allowed to have drinks with alcohol?” (Jackson, Henriksen, & Dickinson, 1999). Other instruments assess the frequency of communication about alcohol-specific rules (Ennett, Bauman, Foshee, Pemberton, & Hicks, 2001), but do not specify what these rules are or in what settings they are applied. These measures were unable to detect a relationship between ASP strategies and drinking behavior.

The principle of adaptation assumes that parents make and enforce rules according to their protective value in specific settings. Therefore rules may not be uniform across all settings. For example, teens may be allowed to drink in their home with parental supervision, but not in a peer’s home. Of the four longitudinal studies included in the aforementioned review, only one measured contextualized rules (van der Vorst, Engels, Meeus, & Dekovic, 2006). In this study, a ten-item scale asked parent and child participants to what degree children would be permitted to drink alcohol in certain situations, such as at a friend’s birthday party or supervised by family at home. This contextualized approach was the only study included in the review whose findings

support a relationship between alcohol-specific rules and delayed drinking initiation (Ryan et al., 2010).

Qualitative research suggests that contextualized measures of alcohol-specific rules may be more externally valid than single-item measures (Bourdeau, 2012). In a study of primarily White families living in the San Francisco Bay area, teens and their parents described the underage drinking rules in their home. Some parents described explicit rules: overt statements about what they considered acceptable/unacceptable regarding alcohol use by their teen. These included “zero tolerance” rules that may fit the previously described dichotomous measures. However, parents more frequently described adapting rules according to drinking settings. They might allow adolescents to consume alcohol on family vacations, while traveling abroad, or when teens were “tasting” while supervised by adults. These rules were created and enforced in much more nuanced ways than decontextualized measures could detect. Through the ecological framework, we understand these nuances to be adaptations of parenting strategies to the local environment.

How and why ASP strategies in Latino families in a given urban community are adapted to the ecological context of underage drinking remains to be determined. The influence of context and culture on ASP strategies in the Latino community must be explicated more thoroughly through rigorous study before exploring their effect, protective or harmful, on underage drinking and its associated health outcomes.

B. Applications of ecologically framed ASP research

To inform interventions that adequately serve specific communities, ASP research must attend to cultural and contextual influences on ASP behaviors. Health interventions have traditionally been adapted to minority communities in two ways: cultural targeting and cultural

tailoring (Resnicow et al., 2000). Targeting reflects “surface structure” characteristics of culture such as music, brand preferences, language, and significant holidays. By adjusting superficial characteristics of the intervention to reflect surface structure traits, it is more likely to be accepted in a community. Cultural tailoring, however, increases its salience. Cultural tailoring reflects deep structure differences between racial and ethnic groups including beliefs, values, norms, resources, etc.

A strong example of deep vs. surface structure tailoring is the Substance Abuse and Mental Health Service Administration’s (SAMHSA) series of resources for caregivers, *Keeping Your Teen Drug Free* (SAMHSA, 2005a). An edition created specifically for African American families (SAMHSA, 2005b) accounts for deep-structure cultural differences in a few ways: by dedicating several pages to marijuana use, to which African American youth are particularly vulnerable (Johnston et al., 2014) and more likely to be penalized for (Nguyen & Reuter, 2012; Ramchand, Pacula, & Iguchi, 2006); by affirming stricter parenting practices frequently used in African American families; and by including a section about working together with extended kin networks and community members who, compared to white communities, are often more involved in adolescents’ lives. In contrast, the guide for Hispanic families only reflects surface-structure cultural differences. It is a bilingual English-Spanish version of a booklet created for the general population (SAMHSA, 2005c) It reflects surface aspects of Hispanic culture (i.e. language, pictures of Hispanic youth) but not deep-structure differences in beliefs, values, and practices related to substance use or family life.

Resnicow et. Al. (2000) highlight three observations that indicate deep structure differences underlying substance use behaviors: (1) substance use behaviors differ between populations, (2) risk and protective factors are not equally represented across all populations, and

(3) risk and protective factors function differently for different populations. Latino youth demonstrate deep-structure cultural differences underlying underage drinking and ASP by satisfying all three observations.

1. **Substance use behaviors differ between populations**

Despite some similarities to their peers, Latino youth display distinct patterns in their drinking behavior. According to the national survey Monitoring the Future, the rate of white and Hispanic twelfth graders who had taken their first drink in 2013 was nearly equal—70.6% and 70.5% respectively (Johnston et al., 2014). However, Hispanic youth reported earlier drinking initiation. By eighth grade 36.3% of Hispanic eighth graders had already had their first drink, compared to 22.5% of white and 27.8% of African American students. Unfortunately, cultural differences underlying this early initiation were not further explicated.

In addition, drinking behavior may also vary by country of origin. In a survey of 8-12 grade students, the rate of Hispanic adolescents who reported drinking in the last 30 days was equal to the national average (15%), but rates by country-of-origin ranged from 13.8% among Puerto Rican youth, to 19.2% among Cubans. Alcohol use was also significantly higher among adolescents born in the US (16.6%) than those born outside of the US (12.3%). Early drinking initiation may also correspond with differential outcomes in adulthood (Caetano, Mills, Vaeth, & Reingle, 2014). For example, Puerto Ricans who began drinking by the age of 14 were 1.5-5 times more likely to report binge-drinking in adulthood than early drinkers of other nationalities. This study suggests that processes underlying underage drinking in the Latino population differ between ethnocultural subgroups and may have particularly meaningful consequences for Puerto Rican and Mexican American adolescents.

2. **Risk and protective factors are not equally represented across all populations**

Latino youth are disproportionately exposed to multiple underage drinking risk factors. For example, Latino youth are more likely to live in neighborhoods with more alcohol outlets per square mile than other neighborhoods (Maimon & Browning, 2012). Latino youth may also experience unfair treatment and racial discrimination, which have been associated with drinking consequences and dependence symptoms over time (Kulis et al., 2009; Zemore, Karriker-Jaffe, Keithly, & Mulia, 2011). Acculturation is also linked to underage drinking in the Latino community, but is often approached simplistically as a determinant of alcohol use rather than a complex social process.

Acculturation. In the ecological perspective, acculturation is the process of adapting to the demands presented by new cultural settings. Different settings, such as home and school, may present unique demands that elicit different forms of cultural expression. Acculturation in the Latino population in the US is drawing attention as a significant predictor of health outcomes. Some studies suggest that a stronger association with American culture may increase the risk of negative health behaviors like underage drinking (Miller, 2011). However, the relationship between culture, acculturation, and health outcomes is complex. One study of Latino youth found that American and ethnic cultural behaviors, values, and identity had distinct, and sometimes contradictory, relationships to underage drinking (Schwartz et al., 2014). Furthermore, the predictive value of each acculturation dimension varied by gender. These findings highlight potential gender differences in the relationship between culture and alcohol, and also suggest that classifying culture as inherently protective or risky may be overly simplistic. Rather, something about the process of acculturation (rather than dimensions of

culture alone) has a distinct effect on health. It may also be that the effects of acculturation are not isolated to the adolescents in question, but play a role in the family dynamics that contribute to adolescent health. For example, protective knowledge and health practices may be altered or lost in the acculturation process or hold unique meaning for individual family members in response to generation-specific demands of the cultural context. How adolescents in The Humboldt Park community experience the effects of acculturation on ASP strategies, and how this relationship is influenced by local contextual factors, remains to be identified.

3. **Risk and protective factors function differently for different populations**

Risk and protective factors may impact groups differently as a result of deep structure cultural differences. These differences indicate that what is adaptive for certain groups depends on specific contextual circumstances. For example, a study of delinquency and in Latino and African American families found that punitive parenting (risky in many studies of white adolescents) was protective in dangerous and disorganized neighborhoods, but predicted delinquency in safe neighborhoods (Roche et al., 2007). Parenting styles are adapted to the environmental demands of each neighborhood. Family dynamics, but also history, neighborhood resources, and other contextual factors shape the cultural processes underlying these differences. ASP strategies may impact Latino families differently *as a function of ecological circumstances that disproportionately impact these groups*.

4. **Beyond cultural tailoring**

While Resnicow's model helps us to establish the presence of deep-structure cultural differences, we must avoid compartmentalizing culture and the context it is expressed in. Note in the final example that the effectiveness of punitive parenting strategies was related not to racial or ethnic identity alone (an imperfect proxy for cultural identity), but to the interaction between

these categories and the neighborhood context they are expressed in. It would be incorrect to assume that punitive parenting is a universal cultural practice within Latino and African American families, and an intervention broadly encouraging such practices may ultimately do more harm than good depending on other elements of the social context. While cultural tailoring has its merits, researchers like Ryerson Espino & Trickett (2008) and Netto, Bhopal, Lederle, Khatoon, & Jackson (2010) encourage community-specific interventions centered on the knowledge and experience of the community rather than adapted from outside. Such interventions are more likely to situate cultural determinates of health within the broader social ecology of ASP.

C. **Social Ecology of ASP**

Parents must adapt to multiple circumstances unique to each community to protect their children from alcohol. For example, an increase in alcohol outlet density by one standard deviation may increase the probability of underage drinking by up to 25% (Maimon & Browning, 2012). At the neighborhood level, density of alcohol outlets like bars and liquor stores, local crime indices, access to transportation, availability of alcohol, perceived community approval, etc. are all associated with higher rates of underage drinking (Chen, Grube, & Gruenewald, 2010; Ennett et al., 2008; Feinberg, Ridenour, & Greenberg, 2007; Lipperman-Kreda, Grube, & Paschall, 2010; Nargiso et al., 2013; Yan et al., 2008). However, not all of these indicators are equally reliable predictors of underage drinking across communities.

The assumption that risk and protective factors function similarly in all communities underlies models like Communities that Care (Communities That Care, 2017) and is rarely challenged. One multilevel analysis of students enrolled in over 1,000 schools across the US tested whether commonly considered risk and protective factors predicted underage drinking

equally well across communities (Feinberg et al., 2007). Findings showed considerable variability in the relationships between individual, school, community, and family risk and protective factors and underage drinking outcomes. That is, each factor varied across communities in its ability to predict underage drinking. Some indicators, such as protective school environments, were even inconsistent in the *direction* of their relationship to underage drinking. Parents not only contend with different risk and protective factors in each community, but such factors may function quite differently in one community compared to another. Parents in specific communities, like Humboldt Park, are likely obliged to adapt to environmental circumstances differently than families in other communities.

The same study demonstrated that, consistent with the ecological principle of interdependence, the effects of protective factors on underage drinking tended to covary (Feinberg et al., 2012). For example, family-level factors had a stronger relationship with underage drinking in more protective school environments. This relationship is supported by Lipperman-Kreda et al. (2010) who found correlations between adolescents' perceptions of parent disapproval, community disapproval, and enforcement of underage drinking laws. Overall, ecologically-framed research suggests processes throughout the ecological setting may reinforce or undermine ASP efficacy, but these relationships have only recently begun to be explored.

Consistent with this literature, Humboldt Park teens noted in field observations have identified multiple settings such as their neighborhood, school, peer groups, and even virtual environments such as social media as strong influences on their drinking decisions. A thorough analysis of how youth appraise the impact of caretakers and their ASP practices in response to

these extra-familial influences can help situate these strategies in the larger context of underage drinking in the community.

D. **Culture, Ecology, and Intersectionality**

The intersectional lens applied to this study calls attention to the possibility of diverse experiences of both culture and social ecology based on gender (Crenshaw, 1989). At a national level, adolescent boys report more frequent binge drinking and higher drinking quantity than girls, although this gap has reduced over time (Johnston et al., 2014). Drinking rates specifically in the Latino community reflect these trends, with Latino boys reporting more alcohol consumption than Latina girls, though neither group reporting significantly greater alcohol consumption than white peers at a national level. While this trend may or may not apply in the target community, there is reason to believe the ecological context of underage drinking and ASP may be experienced differently by young men and women.

For example, in migrant families, expressions of culture, and the adaptation of culture to new social settings through the acculturation process, are often distinctly gendered experiences. For example, (Suárez-Orozco & Qin, 2006) find consistency in research findings that daughters in immigrant families often assume more household responsibilities and experience greater parental restrictions and monitoring than sons, which may contribute to both positive and negative outcomes. On the other hand, young men experience more freedom, but consistently report higher rates of delinquency. Each of these trends have links to the relationship between culture and environment, including systems of oppression. Culturally defined distribution of household chores by gender may become more sharply defined when economic hardship forces both parents out of the home for work. The real or perceived threat of violence against women in the local community may motivate parents to adopt stricter rules. Young men may adopt

delinquent behaviors as an alternative path to social status when their socio-economic mobility is restricted. The relationship between gender, cultural identity, and contextual experiences related to one's position within a social hierarchy (e.g. discrimination) may influence substance use behaviors (Molina, Little, & Rosal, 2016). Overall, ethnic identity and gender, and their expression in the face of certain contextual realities, must be examined together to understand the experiences of youth of immigrant families and subsequent health behaviors.

E. **Summary**

Although ASP research has expanded in the last decade, ecologically framed research may enhance our ability to support Latino families through culturally-sensitive interventions. Some studies have challenged the “one size fits all” approach to measuring ASP practices and drinking behavior and demonstrated that ASP strategies are often adapted according to the context of alcohol use. While they represent an important advance in ASP research, such measurement has not been applied specifically to the Latino community. Observable differences in underage drinking behaviors, risk and protective factors, and the relationship between the two in the Latino community are evidence of underlying deep-structure cultural differences that influence Latino adolescents' drinking behaviors. How these deep-structure differences may also impact ASP strategies in the Latino community is not adequately understood. Despite the evidence that drinking behaviors and ASP strategies are shaped by the reciprocal relationships between context and culture, little research exists to clarify how this informs adolescents' experiences and perceptions of ASP. Applying an ecological perspective to ASP research in the Latino community may strengthen our understanding of this topic to inform how we measure ASP practices and their relationship to drinking outcomes. Subsequent advances in ASP research may enhance family-oriented interventions to help keep Latino youth healthy.

IV. THE PRESENT STUDY

The purpose of this study is to explore how an ecological understanding of ASP strategies, as interpreted by youth, challenges the current body of theoretically decontextualized underage drinking and ASP research, and its associated interventions, by answering the following questions:

- 1) *How do Latino youth describe and experience ASP strategies used in Humboldt Park?*
- 2) *How does the ecological context inform Latino youths' appraisals of ASP strategies?*

These research questions are best answered through qualitative methods. Qualitative methods are most appropriate for identifying *how* certain processes take place or how they are understood by particular populations (in contrast, quantitative methods answer questions of *how many*, *how much*, or test *causal* hypotheses) (Patton, 2002). Furthermore, qualitative epistemology acknowledges personal and contextual realities that may not be captured through quantitative methods. This is particularly relevant to our study, which places great epistemological value on the perceptions of Latino youth derived through their lived experience. More specifically, this qualitative study uses grounded theory to understand how ASP in the Latino community is influenced by local context.

Grounded Theory is used to generate a description or theory of a social phenomenon or process that is “grounded” in the data from the field (Creswell, 1998). Rather than generating assertions that are then tested against data, grounded theory constructs a general schema of how a process functions for a specific group based on the actions and interactions of people in real life. In this case, the observations of Latino youth in Humboldt Park will be used to generate a proposed description of Latino youths' lived experiences of ASP practices in Humboldt Park.

A. **CRT epistemologies and Grounded Theory**

Many scholars have proposed that applying a CRT framework in social science research (criminology, education, sociology, etc.) requires careful consideration of epistemological and methodological approaches. Through a Eurocentric lens pervasive in academic research, the experiences of European- (white) Americans are normalized, and their experience becomes the standard against which the behavior and outcomes within other racial groups are evaluated (Delgado Bernal, 2002). For example, in ASP research, questions in national surveys may be designed to capture information specific to parenting practices normative in white families while neglecting variations in cultural attitudes towards alcohol, historical events influencing perceptions of risk and safety, and family structure that incorporates broader kin networks. Results that generate descriptions of parenting practices or adolescent drinking behavior may also be interpreted and disseminated without accounting for structural factors such as differential exposure to alcohol outlets in minority communities, the role of community violence or local policing, etc. As previously noted, exclusion of social hierarchy from the understanding of social context may lead to the problematization of youth of color (Hylton, 2012)

In response to these concerns, Bernal proposes a “Chicana feminist” or “raced-gendered” epistemology centered on the experiences of Latino/a youth rather than comparing these experiences to more privileged groups. This approach is intersectional in nature and values the perspectives emerging from gender, class, migration history, and other intersectional identities. Latino/a youth are considered valued sources of knowledge about their own experiences and communities. Although Bernal’s Chicana feminist framework was developed specifically for education research, her explicit goal that “Chicanas and Chicanos become agents of knowledge who participate in intellectual discourse that links experience, research, community, and social

change” (Delgado Bernal, 2002) may be incorporated into community psychology and public health research like the present study.

It is important to note that CRT does not endorse specific research methods. However, CRT provides a framework to guide the research process that necessarily influences the relationship between the researcher and community and the types of tools researchers select for data collection and analysis (Solorzano & Yosso, 2002; Yosso & Solorzano, 2005). In this case I have chosen a qualitative approach, specifically Charmaz's (2006) approach to grounded theory, as the most appropriate method of answering the research questions within both an ecological and CRT framework.

While classical grounded theory is focused exclusively on behavioral processes, Charmaz's approach offers an application of grounded theory within a constructivist framework (Charmaz, 2006). Charmaz's grounded theory maintains that participants, in this case youth of color, are not just passive sources of behavioral data, but valid (and valued) sources of insight and appraisal of social processes. Participants are cocreators of knowledge capable of interpreting their experiences together with the researcher. This approach to grounded theory also makes the researcher, and her relationship to the community, visible in the data collection and analysis processes, a key feature of CRT methodologies identified by Hylton (2012). Constructivist grounded theory is framed as a (sometimes confrontational) dialogue between historically marginalized voices and the traditional canon of academia. The study setting helps create a processes through which participants “talk back” to biases present in the academy which are openly acknowledged in Charmaz's grounded theory rather than “bracketed” away as in classical grounded theory.

In this case, the observations of Latino youth in Humboldt Park were used to construct a proposed description of Latino youths' lived experiences of ASP practices, in relationship to their ecological setting, in Humboldt Park.

A. **Study Setting**

This study took place in the Dr. Pedro Albizu Campos High School (PACHS), an alternative charter school located in the Humboldt Park community. PACHS serves youth who, for many reasons, find that traditional schooling settings do not meet their needs. This may be attributed in part to interruptions in students' educational trajectories such as the demand for full-time employment, family separation, early parenthood, incarceration, or homelessness. The school has a history of fostering critical thinking, strong cultural identity, and active participation in local health and wellness issues through critical pedagogy frameworks (Dr. Pedro Albizu Campos High School, 2016; Freire & Ramos, 1970). The school received a grant from a private foundation in 2015 to begin a 3-year initiative to reduce student substance abuse. Collaborating to complete this study in the school was seen as mutually beneficial, as study findings could inform planning for family-based interventions to address alcohol, tobacco, and other drug (ATOD) use, in addition to contributing to a broader understanding of ASP in the scientific community.

At the conclusion of the study, 200 students between the ages of 16 and 21 were enrolled in the school. Of these, 56% identified as female, and 44% as male. Seventy percent of the student body identified as Latino/a.

B. **Positionality**

As a white researcher from outside the community it is important to recognize the limitations of my insight into family processes in the Latino and Humboldt Park communities

(Muhammad et al., 2015). I must be attentive to how my identity as an outsider may influence the research process. I have taken great care to reduce the degree of “strangeness” between the community and me (Schutte, 1991). Over the last two years I have been present as a participant observer (Case, Todd, & Kral, 2014) at the Puerto Rican Cultural Center, a well-known community-based organization (CBO) in the local community whose founders were also instrumental in establishing PACHS. I began attending PRCC events and meetings in 2013, first in order to learn about PRCC as an exemplary community-based organization, and later as part of a year-long practicum experience. My frequent presence there has helped me to reduce the dimensions of strangeness described by Schutte (1991) by learning about the community’s historical context, adopting appropriate communication norms within the community, and by framing this study in terms of its practical value to the community in addition to its contribution to theory.

Another important dimension of my positionality is my previous involvement (2013-2015) in an underage drinking prevention coalition convened by PRCC. The coalition was supported by a Partnerships for Success grant under a federal initiative to reduce underage drinking and substance use. During my two years of involvement in the coalition, coordinators and participating high school students expressed tension between intervention strategies, media campaigns, and survey instruments introduced by funders, and characteristics of their neighborhood and the families that live there. They suggested that many examples of past successful community strategies presented during their trainings did not fit deep-structure cultural differences in their community. The coalition members expressed that ASP practices may be unique in both the Latino community and Humboldt Park. Although both adults and adolescents in the community alluded to cultural differences underlying parental monitoring,

communication, and rules about alcohol, I found no literature or local data to clearly define how or why ASP practices may differ for Latino families in an urban context comparable to Humboldt Park.

Throughout all steps of the research process, I took care to ensure my identity and experiences did not influence the analysis and interpretation of the data by temporarily “bracketing” my personal preconceived assumptions and impressions of the community and the topic of ASP (Patton, 2002). This also includes my own adolescent experiences regarding ASP strategies in my family and local community. However, as Charmaz notes, these concepts cannot and should not be entirely ignored from the research dialogue between researcher and participants. Both my exploration of ASP literature and field experiences provided “sensitizing concepts” to be attentive to throughout the research process; however, neither existing theory nor statements heard in the field prior to the study were assumed to be valid and both had to “earn their way” into the analysis by proving themselves consistent with the data provided by participants (Charmaz, 2006).

V. METHODS

A. **Participant Recruitment**

Consistent with grounded theory methods, I used purposeful sampling to include knowledgeable individuals able to offer rich data (Charmaz, 2006). Participants were recruited from PACHS through in-person recruitment visits to the school. School staff assisted recruitment by referring participants to the study. Staff identified potential participants with strong critical thinking skills and/or past positive participation in leadership or discussion groups. Staff helped distribute flyers to potential participants, and encouraged them to talk with me during in-person recruitment visits to the school during lunch time. In some cases, staff encouraged specific students to inquire about the study immediately prior to a focus group meeting in order to participate that same day. Staff were reminded that a student's known drinking behaviors, or relationship to peers and family members who drink, are not part of the sampling criteria.

Teens who expressed interest in the study during in-person recruitment visits had the option to call or email the researcher, or to complete and submit a screening tool during the visit. All participants chose to complete the screening tool during my visit. The screening tool was used to identify whether participants met the inclusion criteria: self-identify as Latino or Latina, be between the ages of 15 and 20, currently live with at least one parent or adult family member (aunt, uncle, grandparent), and speak English fluently.

Parents of teens under 18 found eligible to participate received informed consent documents in the mail explaining the study, its risks, benefits, and what their child's voluntary participation would entail. A stamped, addressed postcard was included for parents to return in the mail if they did not consent to their child's participation. No parents returned the form nor

contacted the researcher to request their child's exclusion from the study, therefore all students were scheduled to participate in a group.

1. **Protection of Human Subjects**

This study was approved by the UIC Institutional Review Board under exempt status prior to participant recruitment. Participants over the age of 18 completed the informed consent process, including written documents of study purpose, risks, and benefits, prior to beginning their respective focus groups. Parents of participants who indicated during the screening process they were under the age of 18 received informed consent documents through the mail prior to scheduling participants for focus groups. These parents provided "passive consent" for their child's participation by choosing not to contact the researcher upon receiving the informed consent documents. No parents contacted the researcher to request their child's exclusion from the study. These participants completed the informed assent process before beginning their scheduled focus groups.

B. **Data Collection**

Six focus groups were held during April and May 2016. Focus groups gathered in a vacant classroom at the school during students' lunch period and were provided lunch upon arriving. Focus groups were organized by gender, with male and female groups held separately at different times, with the exception of one group strategically organized to further explore gender differences. When participants arrived I, as the moderator, explained the purpose of the study and informed them of their rights as participants. Participants 18 and older completed the informed consent process, and participants under 18 the informed assent process, before beginning the focus group. Participants served themselves lunch before the discussion began. Each focus group lasted approximately one hour. At the end of the focus group participants

completed a brief demographic survey. When I returned for subsequent visits, I distributed a certificate of appreciation to previous participants. The certificate was signed by myself (representing UIC) and the director of the Puerto Rican Cultural Center, and acknowledged participants' contribution to understanding a health issue in their community.

1. **Instruments**

Each focus group followed a predetermined focus group guide. The focus group guide consisted of open-ended questions to elicit conversation about adolescents' interpretations and appraisal of alcohol-specific parenting in their community. The guide followed established instructions for question sequencing (Krueger, 1998). It had also been drafted with input from members of the target population who are active in the underage drinking prevention coalition and young adult leaders who work closely with local Latino high school students. Questions were carefully worded to inquire about participants' observations of their community, rather than their personal family experiences. Questions also referred generally to adults, families, and adult family members rather than parents specifically to account for other caregiver arrangements. A demographics survey was distributed at the end of the focus group to collect participant age, gender, grade level, racial and ethnic identity, and the racial and ethnic identity of adult family members.

2. **Moderator**

I personally moderated each focus group. Although the original protocol called for an assistant moderator, IRB delays were resolved only after the approved assistant moderator was unavailable, and there was not sufficient time to approve her replacement. As the moderator I assumed the role of the "enlightened novice," presenting myself as somewhat informed about the topic but in need of greater assistance from the participants as local experts (Krueger, 1994).

C. **Data Management and Analysis**

Focus groups were recorded using a digital recorder and transcribed by the researcher. Names and identifying information were removed during the transcription process. Bracketed notes indicated nonverbal interactions, interruptions, and other events that occurred during the group. Text data was then analyzed using Atlas.ti software on a password-protected computer in the same research office (Muhr, 1997).

Data were collected and analyzed simultaneously. This is an important characteristic of grounded theory that allows emerging codes to be further probed in the following focus groups (Charmaz, 2006).

This method, also referred to as the “constant comparative method” (Glaser, 2008; Glaser & Strauss, 1967), compares data with data throughout the coding process to identify similarities and distinctions between key phenomena. This method also allowed me to make adjustments to my focus group guide to further probe emerging themes, such as gender differences described by participants, and the relationship between parenting practices related to alcohol and marijuana.

To allow theory to emerge from the data, I made every effort to prevent my own assumptions from influencing coding and analysis. Although some grounded theorists discourage reviewing relevant literature prior to collecting and analyzing data, I allowed the previously elaborated literature to provide only “sensitizing concepts” (Charmaz, 2006). Sensitizing concepts allow the researcher to be alert to certain constructs that may be represented in the data. However, these constructs should not be imposed on the data but must “earn their way” into developing frameworks by their presence in the data.

1. **Initial coding**

During the initial coding process I worked through the text of each of the six focus groups in the order they were held, starting with the first group held in April. I began with line-by-line coding, using gerund verbs and in vivo coding (Glaser, 1978) as much as possible to stay close to the data as described by Charmaz (2006). Following guidance by Miles, M.B., Huberman, A.M., & Saldana, J., (2015) I attempted to move quickly through the data, creating the first codes that came to mind and avoiding censoring or over-thinking. After reviewing the codes generated during line-by-line coding of the first focus group (a men's group) I continued the same process with the second group (a women's group), but by the end found myself coding larger "chunks" of data as processes described in the first group reappeared in the second group. After completing the second group I exported a list of all the codes I had generated and reviewed my memos to look for any similar codes being used frequently that could be merged for consistency in the future (e.g. "providing alcohol" and "giving alcohol" became one code). I continued initial coding for the remaining four groups using these new merged codes, in vivo codes, and new codes to describe any emerging processes.

2. **Focused coding**

Frequent or significant codes that emerged in the initial coding process were organized into codes representing key phenomena. These new codes were applied to larger segments of the data during the focused coding process. Like Strauss and Corbin's Axial coding method, categories of codes identifying major concepts were developed, followed by subcategories describing characteristics of these concepts (Strauss & Corbin, 1998). Certain families of cooccurring codes were developed to identify the primary actors and contexts of processes identified in focused coding. Rather than applying predetermined codes, which can

risk leading the researcher to interpret data in a way that supports technical frameworks (Charmaz, 2006), categories, subcategories, and their relationships were continually reshaped through careful comparison. Codes, categories, and subcategories were organized into a codebook that was continuously revised throughout the coding process to accurately represent concepts emerging from the data.

D. **Interrater Reliability and Member Validation**

The validity of the study findings were supported through both measurement of interrater reliability and member validation. Deidentified quotes from the final focus group, along with the analysis code book, were provided to another community psychology graduate student for coding. Data from the final focus group was selected because, as one of six focus groups, it represented approximately 15-20% of the text data, and because both men and women were present in the final focus group. This was important because some codes were underrepresented in men's or women's groups specifically according to previously described gender differences in underage drinking and ASP experiences. After the second coder had coded the selected data, the level of agreement between the researcher and second coder was calculated using Fleiss's Kappa formula (Fleiss, 1971; Fleiss & Cohen, 1973) with the assistance of an online tool (Texifter, 2016). After calculating a Kappa score of 0.53, both coders discussed particular codes and passages that showed disagreement, and made clarifications in the codebook when necessary. Kappa was then recalculated with an acceptable score of 0.84.

In the month of October the researcher returned to PACHS to meet with students for member validation of the study findings (Patton, 2002). A group of 12 students, some original participants in the study and some not, and one staff member met to discuss the study findings. Findings were presented to the group, with the assistance of PowerPoint slides, with frequent

breaks for discussion. Group members were asked at several points if they agreed or disagreed with the reported findings, or if they felt anything was missing from the reported findings. Students enthusiastically agreed to all study findings, often making comments such as “that’s so true” and “I agree with everything you just said.” On several occasions, students initiated discussions that preempted future slides, sometimes making statements that matched the text of future slides almost verbatim. This was interpreted as strong confirmation of the validity of study findings. Group members did wish to clarify that, while the study findings fit their overall experiences and observations in their families and communities, there are always some families that may fall outside these descriptions. This observation was not interpreted as a contradiction or correction to the study findings, which identify certain normative patterns within a diverse range of experiences.

VI. SAMPLE DESCRIPTION

Twenty-seven students, including 14 women and 13 men, participated in 1 study focus group each. All participants were between the ages of 17 and 20. Specifically, 7 were age seventeen, 12 were age eighteen, 5 were age nineteen, and 3 were age twenty. Although school grade level data was collected, it is not reported here because some participants had difficulty identifying their grade level. Within the alternative school system grade levels are less informative, as they may or may not correspond to conventionally associated parameters of age, years of schooling, or time to graduation.

Students were provided with a list of all ethnic and racial categories included in the US Census questions on race and ethnicity. Rather than obliging participants to identify both their ethnicity and race, participants had the opportunity to indicate any categories they identified with. Research indicates that many Latinos/as in the US experience racialization, leading them to classify their race as Hispanic/Latino rather than white when given the opportunity (Hitlin, Brown, & Elder, 2007). In one single question, participants were asked to select any of the racial or ethnic categories that described them. Participant racial/ethnic identity is summarized in Table I. All students indicated they identify as Mexican and/or Puerto Rican. Twelve participants identified themselves only as Mexican. Six participants identified themselves only as Puerto Rican, and nine participants identified themselves as Puerto Rican and some other racial or ethnic identity, including 3 participants who identified as both Puerto Rican and Mexican.

TABLE I
PARTICIPANT RACIAL/ETHNIC IDENTITY

	Mexican	Puerto Rican	Mexican and Puerto Rican	Total
No other race/ethnicity identified	12	6	2	20
Other Hispanic/Latino origin		2		2
Black		1	1	2
White		1		1
Black and White		1		1
Other		1		1
Total	12	12	3	27

Students were also asked to use the same set of options to describe the adults in their household. Adult racial/ethnic identity is summarized in Table II. Eleven participants identified their household as exclusively Mexican, 5 as exclusively Puerto Rican, and 3 as Exclusively Mexican and Puerto Rican. Seven participants identified the adults in their home as Mexican and/or Puerto Rican, and some other racial or ethnic identity.

TABLE II
CAREGIVER RACIAL/ETHNIC IDENTITY

	Mexican	Puerto Rican	Mexican and Puerto Rican	Total
No other race/ethnicity identified	11	5	3	19
Other Hispanic/Latino origin		1		1
Black			3	3
White	1	2		3
Black and White				
Other				
Black and Other			1	1
Total	12	8	7	27

VII. FINDINGS

This section will begin with a description of the ecological setting of underage drinking and ASP as characterized by Latino youth in the target community, then answer both research questions: *1) How do Latino youth describe and experience ASP strategies used in Humboldt Park?* and *2) How does the ecological context inform Latino youths' appraisals of ASP strategies?* Consistent with the ecological principle of succession, historical elements of the ecological setting described by youth include family migration history, generational differences in youth drug and alcohol behavior including access and prevalence of both alcohol and other drugs, and personal family history. In their current setting, youth describe an extremely risky underage drinking environment with a strong emphasis on contextual risks (harm inflicted by the environment while one is drinking) over internal risks (direct impact of alcohol on the individual). Reflecting the ecological principle of adaptation, Latino youth report that parents in the community generally apply harm-reduction strategies focused on reducing alcohol-related risks rather than preventing underage drinking entirely. However, parenting strategies are often gender-specific, with young women reporting more restrictive rules and stronger parental monitoring. Youth assess ASP strategies in terms of their adaptation to the current ecological setting they experience, including both local and cultural norms and perceived risks. Harm reduction strategies were almost unanimously endorsed as an adaptation to the prevalence of exposure to alcohol, ease of access in the community, and perceived contextual risks of underage drinking. This relationship may also be understood through the principle of interdependence, as circumstances in multiple settings have ripple effects throughout the parenting practices applied in the community. Additionally, youth interpret parenting strategies as rooted in family and migration history and identify a potential misalignment between the historical context ASP

strategies are designed for, and the current setting in which they are applied. These gaps may compromise the effectiveness of ASP strategies applied in the community.

A note about selected quotations: Each selected quotation used to illustrate study findings provides the participant number of the speaker in parentheses (p.#) or, in the case excerpts from group exchanges, at the beginning of each line (P.#:). In an effort to preserve the authentic voice of participants, expletives have not been censored. It is important to note that these expressions were often used casually, and do not necessarily indicate heightened emotion. Participants never expressed any apparent discomfort over expletives used by their peers. Although audio recordings were transcribed verbatim, quotations selected to illustrate findings are presented here with some modifications for clarity. Grammar and word choice have been left unedited, while the following extraneous words and phrases have been eliminated for continuity:

- Affirmative listening cues: expressions like “yeah” and “mmhmm” used by the moderator or other participants to demonstrate attentive listening, unless preserved as evidence of participant consensus.
- Filler words: Words used to break into conversation, to end a sentence, or as placeholders while a participant forms their thoughts such as “um,” “like,” and “you know.”
- False starts: When participants begin a phrase only to restart their thought. For example “When she- when you said that...”

A. **The ecological setting of caregiver decisions**

As previously described in the theoretical framework, the ecological principal of succession demands attention to historical processes at the individual, family and community level. Therefore a complete understanding of the ecological context of ASP includes changes

over time from parents' underage drinking setting to youths' current experiences. Participants also provided an extensive description of risk in the current underage drinking setting.

1. **Migration history and alcohol policies**

Youth explained how policies in their countries-of-origin shaped parents' perspective on underage drinking—"they go by the rules they lived by back then" (p. 15). As previously noted, all participants identified as Mexican or Puerto Rican, and lived with Mexican and/or Puerto Rican adults (however their generational migration status is unknown). They observed that many parents raised in these places were subject to a younger, and often weakly enforced, drinking age as adolescents. Although now in a new setting with different policies, parents often apply the rules they experienced as teens because "that's how they grew up I guess" (p. 10). Participants identified this phenomenon generally for Latino families, and as specific to both Mexican and Puerto Rican families:

You know, because back in Mexico—most Mexican families back in their country—they're allowed to drink at a young age. And they find that like a cultural norm for kids to be drinking. (p. 5)

Well in Puerto Rico you're allowed to drink publicly when you're eighteen. So if you're from Puerto Rico, they'll be like 'you're eighteen already.' It has to do with your culture too. Even though it's illegal, you hear it's legal in your country so they do it. (p. 33)

2. **Generational differences in underage drinking**

Several participants speculated that underage drinking in their parents' adolescence was associated with fewer risks and problematic behaviors than in the present setting—"The generation how it was back then is nothing how it is now. Nowhere near" (p. 29). Some referred to adult family members who confirmed these perceptions: "Well my dad said it was way different from then to now because then it wasn't so worse as it is today. So he said he used to do

it with his brothers and them. He wasn't crazy outside and stuff. So...he said now everything's really different” (p. 19).

Access. Counterintuitively, some participants felt that they and their peers had greater access to alcohol than previous generations: “Like it was legal for them, but it was also harder to get... but now it's illegal but so easy” (p. 9). Although previous generations, in many cases, had freedom to purchase alcohol at a younger age, youth perceive more unrestricted use in the current generation. Some participants suggested that improvements in families’ financial status have created more access to alcohol. More money is available to the current generation for purchasing alcohol compared to times when, as one participant speculated, alcohol was a “luxury” for his father (p. 6). In addition, participants theorized that their freedom from the burden of full-time employment, in contrast to their parents’ adolescent responsibilities, creates more opportunities for underage drinking. “Maybe it wasn't such a big issue...Cuz back then our parents had to work when they were young. They had to leave school to work. Or *my* parents had to leave school to work. So they didn't really have time for it” (p. 33).

Marijuana and other drugs. The biggest generational difference in access emphasized by participants is their increased exposure to, and less restrictive attitudes towards, marijuana and other drugs in drinking settings. This is not to imply that marijuana and other drugs were obsolete in previous decades; some participants described parental marijuana and other substance use, but participants reacted to these cases as anomalies. On the whole participants saw parents as disapproving of marijuana and other drugs. However, participants themselves had a casual attitude towards marijuana and perceived it as safer and healthier than alcohol. Here a group of five young men express their shared confusion over parents’ strong objections to marijuana compared to alcohol (note that “smoking” in this example refers to smoking marijuana).

P. 26: That's fucked up because smoking is better than drinking though
P. 27: Yeah, I guess in their generation they were always told that it's bad.
P. 24: Yeah, like they think it's like a drug that's gonna kill you or something.
P. 24: They prefer us drinking.
P. 27: When drinking kills you more than smoking.
P. 25: Yeah, I don't get it.
P. 27: Smoking doesn't kills you.
 ...
P. 24: Smoking is I guess healthier.
 ...
P. 25: Drinkin is gonna mess up your kidneys and liver, bro.
P. 4: There ain't never been one death cuz of weed.

Note that these young men perceive that parents grew up in a generally “anti-marijuana” setting where “they were always told that it’s bad.” In contrast, they express a unanimous perception that marijuana is in fact healthier and less risky than alcohol. Shortly after they reiterated the disparate exposure to marijuana now compared to during their parents’ adolescence

P. 24: I don't think a lot of Latino parents before used to smoke.
P. 4: Probably drink.
P. 24: Yeah, yeah they were more drinkers.
P. 26: Yeah
P. 25: Yeah
P. 24: That's what I'm sayin', they grew up like that.
P. 26: This generation's different though.
P. 4: Yeah

Participants also suggested that this increased access to alcohol and marijuana in their generation applies to other drugs as well. Here a group of young women discuss this change:

P. 21: I think now [teens] abuse it more and they kinda started with one thing like alcohol and they kind of moved to stronger things like...
P. 28: cocaine
P. 21: yeah, and drugs...I think the adults now, when they were children, they just did it to kind of have fun and do it behind their parents' backs. But I don't think they did it as much as kids do it now.
P. 29: yep. That's so true.

Even when not discussing parents’ perceptions or generational differences directly, participants offered multiple examples of the accessibility of substances. In addition to declaring

the merits of marijuana, participants over the course of the study described exposure and access in their community to “Lean” (alcohol mixed with codeine cough-syrup), “bars” (Xanax used recreationally), “Molly” (MDR), ecstasy, and cocaine. Although they generally disapproved of these substances (with the exception of Lean), it was apparent that access and social pressure to use drugs were high in some peer settings. These exposures are not limited to peer settings, and some participants also described witnessing drug use outside in the neighborhood: “You can see people shoot up and all that at [Humboldt Park]. In broad daylight. Like eight o'clock they be shootin up” (p. 25).

3. **Parents’ personal histories**

In addition to underage drinking histories, other aspects of parents’ personal histories enter youths’ decision-making processes. Many participants described parents as resilient people who overcame many obstacles throughout their lives. From their perspective parents in this community have experienced financial hardship, were forced to choose between employment and education, navigated unplanned pregnancies, lost loved ones to violence, traversed addiction, and other adversities. Participants described ways in which these obstacles influenced parenting strategies in both positive and negative ways.

Some participants identified a lack of social support and parental guidance as a defining ecological characteristic of parents’ adolescence and young adulthood. “I feel like now it's easier for you to go and talk to people about problems...to people that you might know that they can help you. And I feel like back then it wasn't” (p. 34). Participants identified substance abuse as cyclical within families, but also described parenting practices as cyclical. Here, a participant explains that parents who did not experience protective parenting strategies in their own adolescence fail to provide this support to their own children.

But I feel like parents from the generation that our parents are from didn't have guidance. Didn't have that influence, you know? Didn't have that structure that we need. They didn't have people to prevent them from getting pregnant or to teach them about safe sex, or to teach them to not do drugs. They didn't have that. Because they didn't have that, it trinkers down to us and they don't give us that. And sometimes our parents don't have the mentality to change that cycle. To break the cycle and start something else. (p. 14)

4. **Risk in the present context**

The present day context of underage drinking in Humboldt Park is described, overall, as full of danger and risk. The risks reported by youth as most relevant to parents' strategies may be categorized as internal (or inherent), or external (or environmental). The descriptions here incorporate both parent perceptions (as described by youth) and youth perceptions. It is important to note that even if parents do not communicate directly about these risks, they are still present in the environment as circumstances to which caregivers must adapt their strategies. For example, as previously described, the increased access to marijuana and other drugs may go unnoticed by caregivers, but still shapes youths' experience of ASP strategies and should be incorporated into our ecological understanding of ASP processes. For this reason, any risks described by participants were coded, regardless of whether or not parents explicitly acknowledged these risks in their communication with teens.

Internal risks. Internal risks include risks of damage done directly by alcohol to the individual, such as organ damage or weight gain, alcoholism, and the subsequent derailing of educational and professional goals. These things can happen as a result of drinking regardless of where or with whom youth are using alcohol.

Long-term health risks. Participants made several references to long-term health risks of alcohol consumption. While a small number mentioned specific outcomes such as weight gain,

or STIs transmitted while under the influence, participants more often made ambiguous references to health complications such as “messin’ up your insides” (p.15).

Alcoholism and addiction. According to participants, the primary internal risk that motivated caregiver strategies was the risk of alcoholism and addiction. Warnings against dependence were often offered early in the groups. Comments such as “they teach you, if you *are gonna drink, drink in moderation, because they really care that you don't become an alcoholic*” (p. 5) were common across all groups. When asked why adults say and do the things they do about drinking, these young men responded:

P. 4: They just don't want you to be a bum, just depending on alcohol.

P. 25: I don't think it's like that though. I think they just don't want you to, you know-

P. 26: Get into that bad habit

P. 25: Yeah. So like, you know, drinkin's gonna be what? You get home from school, you gonna drink. Next day morning, you gonna drink. They don't want you to live that life-

P. 4: You're gonna be dependent on it.

P. 25: You're their kid, you know?

P. 26: They don't want you to be a junkie.

External risks. External risks include any potential harm done by the environment (including other people) on the individual that becomes more likely when alcohol is involved. The risk is posed by the environment, but heightened by alcohol

Motor vehicle injuries. Participants identified the dangers of drinking and driving, and associated risk of car crash, frequently throughout the focus groups. Many expressed their disapproval of drinking and driving and emphasized their parents’ focus on preventing related injuries. This topic appeared to be the most consistently agreed-on topic of ASP communication. When asked for their initial thoughts on underage drinking in the opening focus group question, almost all groups mentioned car crashes or drinking and driving. “Don’t drink and drive” was

also one of the first rules youth identified in each group. Additionally, participants describe the importance of preventing others' drinking and driving. Concern for others' safety can factor into parents' rules and communication. One participant explained that his friends are allowed to drink in his home with one condition: "They just can't leave the crib, they gotta stay there and spend the night. Stay over. Cuz me as a friend I wouldn't want one of my friends to leave the crib when they're drunk. Somethin' happens to them that's gonna be on me because I let them leave... don't even get in the car if you're drunk bro" (p. 25).

Other injuries. Participant only identified non motor-vehicle-related injuries on a few occasions. However, these accounts are noteworthy because they represented extreme cases that had a strong impact on teens and parents alike. When participants did identify these injuries, they described serious or fatal incidents that occurred within the neighborhood or family. These events motivated parents to discuss safety with their children. For example, one participant's mother approached her children after hearing of a neighbor who had died from alcohol poisoning at a weekend party and been left outside her mother's home. Another family discussed safety after a relative drowned while drinking with peers at the lake.

Risk posed by others: "Can't trust nobody, to be honest" (p. 18). Participants described other people, particularly other young people and strangers, as potential sources of harm. When asked what adults say to young people about drinking, one participant offered "Be careful who you're with when you're doing it. Cuz you know your intentions but you don't know other people's intentions" (p. 33). Another participant described advice she received from her mother. "She says watch who you're with. Cuz you can't really sit there and act like you know how that other person gets, cuz we don't know how they get when they're drunk, you feel me? You don't know if they're gonna be okay or they're gonna get reckless" (p. 18). Fighting and violence,

particularly gender-based violence, featured prominently and consistently in focus group discussions of risk associated with others.

Fighting and violence. The potential for fights was associated frequently with peer and non-familial drinking settings. One participant explained teen parties like this: “There’s plenty of fights, like where the one that don’t know they name gets really really drunk and they start fighting with everyone” (p. 29). These instances were discussed more often by male participants, and one person identified this as a specifically male behavior. “Well men sometimes get mad and then they start trying to fight people. Women too, but I think it’s mostly men” (p. 34). The association between alcohol, gender, and violence was more explicitly manifest in descriptions of gender-based violence.

Gender-based violence. Gender-based violence was mentioned even more frequently than non-specific fighting and violence. Unwanted touching and rape were identified as risks in all focus groups that included female participants. These risks made non-familial drinking settings appear particularly risky for young women, “Because we’re more at risk. You know? Like guys could go ahead and get wasted if they want. They’re just gonna do dumb stuff and then black out and not remember the next day. And then if that happens with us a lot of stuff could happen to us. We’ll get robbed, we could get raped” (p. 31). These topics often dominated alcohol-specific communication between young women and their caregivers. Some struggled to identify alcohol-specific communication with parents that was not related to guarding one’s drink and being wary of men. These added risks to young women motivates stricter rules around their behavior, which will be discussed in a later section.

Arrest and incarceration. Some participants mentioned the risk of arrest or incarceration, though this was associated with marijuana use and rarely with alcohol specifically. Concern over

arrest was mainly associated with peer and outdoor drinking contexts. For example, two female participants explained that one risk of drinking with others was that their peers could be carrying illegal substances, which would then create legal problems for the whole group. Though the police, arrest, and incarceration code was less frequently endorsed than other risk codes, these instances were supported by strong agreement from other participants within the discussion. These concerns sometimes revealed a negative and suspicious view of law enforcement. For example, these two young men explained what they would tell teens if they were parents:

P. 26: make sure you're somewhere safe. Like not outside cuz usually the cops will run up on you.

P. 24: mmhmm

P. 26: ...and arrest you. Just for, you know-

P. 26: Even though it's a little joint and you guys don't have nothing else on you, they'll still arrest you for that.

P. 24: They'll fuck you up too.

P. 26: Yeah

P. 24: They'll put like a bag of cocaine in your pocket.

P. 26: Yeah

P. 25: They did that to [boy's name], right?

Despite the general agreement about these risks, only two occasions were identified where participants specifically described communication with caregivers about the risk of arrest. However, some participants did suggest that parents communicate “zero tolerance” rules by referring to the legal drinking age, though not specifically to legal consequences.

Having described the setting in which both parents and youth make their decisions about alcohol use, we now have a foundation to explore our first two research questions.

B. Research Question One

How do Latino youth describe and experience ASP strategies used in Humboldt Park?

Participants described three different types of ASP strategies in the Humboldt Park community:

“silence” on the part of adults, zero-tolerance, and harm reduction approaches which include

both context-specific rules and communication for risk-management. In addition, participants described communication strategies that incorporated personal and family history, and hopes for teens' futures. Participants also observed that multiple adults within families participate in alcohol education, although not always with the same outcomes in mind. Despite agreement on overall strategies observed in their community, male and female youth have sharply contrasting experiences of ASP strategies in many Latino households.

1. **ATOD-specific silence**

One observation shared by participants across groups was that some parents in the community don't appear to apply any conscious strategies to influence underage drinking—"They don't tell me nothing" (p. 7). While youth are inevitably exposed to alcohol within their homes or in the community, parents may not communicate about alcohol or articulate rules and expectations about teen drinking.

Sometimes families don't do that, they don't give them that talk ... because it's just a normality, or it's just always been there. So it's just like those families don't really say anything, they just do and when those people have to figure out what it really is or the outcome of it, they have to learn it the hard way versus somebody who gives them a pep talk. (p. 14)

Participants in each group often criticized this "hands-off" approach. As in the previous example, parental silence on the topic of alcohol was regularly associated with learning "on your own." While this may include observing others or media examples of alcohol-related risks, participants also warned that parental silence often leads to learning "the hard way" by personally experiencing negative outcomes. "They learn the hard way as a lesson. But that's not a lesson. That's a lesson for the parent because they're the ones that are gonna end up suffering with the child too" (p. 33).

2. **Zero-tolerance**

Some participants mentioned zero-tolerance rules against alcohol, such as a straightforward “If you drink I’ll whoop your ass” (p. 4). These rules might apply until teens turned eighteen, twenty-one, or as long as they lived in their caregiver’s home. Zero-tolerance approaches were in the minority and many participants reacted with surprise when their peers described experiencing zero-tolerance parenting strategies. However, many agreed that young women were more likely to experience zero-tolerance drinking rules than young men, which will be discussed in more detail in a later section.

3. **Harm Reduction Strategies**

The majority of parenting strategies described by youth were intended to reduce negative outcomes associated with underage drinking. These strategies included context-specific rules and communication intended to reduce alcohol-associated risks.

Context-specific rules. Context-specific rules refer to rules that permit drinking in some contexts but not others. For example, one participant explained to the group, “Yeah my dad don’t let me drink with my friends, and to go out. He don’t do that. He’s like ‘you’re either inside the house, and drink with the family, or you get nothing and go back upstairs in your room’” (p. 18). Like this participant, most youth described rules about where, when, and in whose presence teens are permitted to drink. In contrast to zero-tolerance policies, context-specific rules were described as normative in the community. These rules formed the center-piece of harm-reduction strategies.

When participants discussed the rules governing teen drinking in their community, they contrasted acceptable and unacceptable drinking settings on the basis of safety and appropriateness.

In the house versus outside. One of the rules most consistently identified by participants was, as participant 6 summarizes, “If you're gonna drink, drink at home.” Allowing minors to drink in the home provides parents the peace of mind of knowing their children are safe from the many risks previously described.

P. 7: Some parents say like "oh, yeah you could drink, just in my house.

P. 19: mmhmm

P. 7: that too.

P. 18: As long as they're not doing stupid shit outside, you know? That's what they prefer.

The qualities of the home that make it a safe space—being enclosed, supervised, and populated only by known and trusted people—were sometimes applied to other settings like a relative’s home or private event space. One participant explained that a quinceñera at a private hall was a potentially acceptable space for teen drinking because “...it's in a controlled environment, so if some kid were to get super drunk, he's in a box” (p. 2). On the other hand, drinking “outside,” referring to outside the home, was often strictly prohibited. “Outside” was described as a setting where youth would be exposed to a variety of risks, such as altercations with police, violence, or motor vehicle crashes as youth made their way home.

With the family versus with friends. Participants also described being permitted to drink in the presence of family members--either at family gatherings or when accompanied to parties by family members. As previously identified, other people (particularly strangers and peers) were considered one of the greatest alcohol-associated risks to young people. Family members, on the other hand, can be trusted. Even in “outside” contexts, the presence of family members was considered protective, as family members could look out for one another and protect each other, particularly young women. In contrast to family settings, drinking in peer settings was more frequently prohibited by parents. Participants consistently described being able to drink in

peer settings 3-5 years after initiation in family settings, if at all. Participants themselves described peer drinking settings as potentially more dangerous. Risks posed by others (e.g., fighting, sexual assault) were almost exclusive to peer settings. They also noted that binge drinking, or mixing alcohol with other substances, was more likely in peer settings.

I personally think that when you're with your family it's more of like a chill down setting thing-unless you're with your cousins cuz your cousins are like your friends. But, I feel like when you're with your friends you wanna do adventure. You're with your friends so you're gonna sometimes act reckless, you guys are gonna do certain stuff, and be more crazy, be more wild. You guys are not gonna really care about what's going on cuz right now it's just like, me, my niggas, and we're having a good time. (p. 14)

Special occasions versus “just to drink.” Many participants described being initially allowed to drink only on special occasions like birthdays and holidays. Alcohol is perceived as having a normative and positive role in celebrations, therefore allowing teens to participate in these celebrations with moderate alcohol consumption is seen as an initiation to appropriate and moderate drinking. Several participants described themselves as not drinking or not being allowed to drink at all, then later referenced experiences of drinking on special occasions. This suggests that drinking on special occasions is, for many families, compatible with reportedly “strict” alcohol rules. On the other hand, drinking without any celebratory or social motive was seen as problematic. Multiple participants said that “drinking just to drink” would be seen by both teens and parents as an indicator of problematic or unhealthy drinking.

Family parties. One specific context emerged consistently in participants’ descriptions of underage drinking: family parties. Family parties represented a convergence of all three sanctioned drinking contexts: home, family, and special occasions—thus, in the eyes of Latino adults in the community, they provide three criteria for an acceptable underage drinking environment: a controlled space, safe companions, and appropriate motivation. Because of this,

family parties were seen as a safe and controlled environment to expose youth to alcohol and begin teaching healthy social drinking behavior before transitioning to independence: “you're at the level where you start learning a little bit more about responsibility. You're about to become an adult, go off to college in a bit. You're gonna have to learn how to handle yourself” (p. 5). Some participants specifically identified family parties as contexts where they learn safety practices, such as taking extensive precautions to prevent guests’ drinking and driving when hosting a family party.

4. **Communication about underage drinking**

Rooting strategies in personal/family experience. Youth described learning from observing family experiences, and in particular from conversations with adults that referred to personal and familial history. Learning about past family experiences was considered an opportunity to discuss the potential risks of drinking. For example, when asked what parents do that is helpful, participants 14 and 17 explained:

P. 14: sharing their experiences. No matter if we can relate to them or not, it's always good to have that in the back of your head. Cuz I'm gonna wanna know that my aunt got into a car accident because she was drunk. I'm gonna wanna know that somebody jumped off of a building because they thought that they could land on their feet. I'm gonna wanna know those things-

P. 17: yeah so you could learn a lesson from that

P. 14: right!

P. 17: be like, now I know, when I do drink, not to get behind the wheel-

P. 14: I don't wanna do that.

Participants also expressed that understanding caregivers’ personal history with alcohol could increase their receptivity to parents’ messages. Participants recognized many parenting strategies used by adults in the community were rooted in personal experience. When asked how adults decide what’s good and bad for young people, one participant said “Probably been through it. Probably seen it happen. Probably put two and two together. Yeah, Most of my family

been through it. I can just tell you that off the bat” (p. 29). Youth perceive that parents have more knowledge and experience, either first hand or through relationships with others, as a benefit of age. If parents imposed rules or initiated communication based in this knowledge, they were doing so to avoid their child experiencing similar hardship. For example, one participant explained that, when talking with a parent, a teen should “actually try to understand, or try to listen to what their parents have to say. Cuz they've been through it, we haven't, they know a little bit more to it” (p. 14)

Focusing on the future. Reiterating positive expectations for teens’ futures can motivate them to make positive decisions, including abstaining from alcohol. When asked what parents do that is helpful, one participant explained “My parents tell me ‘do more than what I did. And provide more for your kids than what I was able to provide for you.’ So it really opens my eyes, like damn some people have it worse than what I do. And I wanna do better so I can help people like that in the future” (p. 34). For young men, communication about alcohol was often closely connected to employment and economic gain, which will be discussed in more detail in a later section. It is important to note that participants contrasted their future goals with the hardships experienced by their parents, emphasizing again that drawing on family history is a potentially effective parenting strategy in this population.

5. **Conflicting strategies within families**

Questions about adult influence over underage drinking were intentionally phrased to inquire about “families” and “adults” to acknowledge alternative family structures. In response to this word choice, all groups consistently identified aunts, uncles, and cousins as important influences on teen decision making. However, it became clear that not all family members were working towards the same outcome. Cousins were described as similar to youths’

friends and peers. Aunts and uncles, while sometimes confidants and sources of important information about health and safety, were consistently described as initiating teens into alcohol and providing alcohol for minors. This often happened without explicit parent permission, though parents seemed not to intervene when this occurred at family parties: “well I mean if they know, they know. They're allowing it too because they're not stopping it” (p. 33). However, sometimes the provision of alcohol by aunts and uncles happened in secret and in clear defiance of parents’ intentions.

I know my brother always goes to my uncle. Cuz my brother's only seventeen. He goes to my uncles and be like "can you give me this? Can you give me that?" and they probably give him like an extra ten dollars, five dollars for getting them the bottle or whatever. And my mom goes off with him. Sometimes my mom doesn't know. (p. 29)

6. **Alcohol-specific parenting and Gender**

Both male and female participants unanimously endorsed reports that young women experience more rules and restrictions than young men in Latino families. Two things appear to underlie the difference in parenting strategies for teen boys and girls: cultural norms on gender and drinking, and perception of greater health and safety risks for women.

Culture, gender, and alcohol. Participants identified culturally-based perspectives on gender and alcohol use that discourage women from drinking. Adult family members perceive women drinking as unfeminine and inappropriate. These expectations are often explicitly communicated: “My mom says it's not classy or female. Drinking—you just catch it in a dude, you don't catch that in a female” (p. 18). In the same way that safety, responsibility, and appropriate alcohol use is modeled and practiced in the family setting, gender expectations are also passed on to younger generations in this setting. Although, as previously described, Latino

teens often experience alcohol initiation in the family context, teen girls reported that this frequently begins earlier for their brothers, cousins, and male friends.

P. 33: I mean alcohol for guys, it's like, "you can do it." I have cousins that were drinking when they were thirteen. It's a normal thing.

P. 33: I have friends that like, at family parties kids that are like thirteen fourteen, they're drinking they're getting drunk. But it's okay because "they're a guy, they know how to handle themselves." But for a girl it's more like "you're more gentle."

P. 35: Like "Oh. That looks very wrong, it's not lady-like."

In addition to rules and direct communication, gender differences are also implicitly modeled to youth by adult actions and interactions. One participant described an instance at a family party in which her uncle abandoned his intoxicated wife to the care of other women in the family “Cuz he said he didn't wanna be with her like that” (p. 34). Even when participants are not explicitly analyzing gendered behaviors, differences are evident in the examples they use to illustrate their overall perceptions of ASP in the community. Reviewing coded mentions of specific adult family members, participants identified fathers’ and uncles’ drinking as problematic (for reasons of accidents, intoxication, alcoholism, or associated substance use) much more frequently than mothers’ and aunts’ behavior. It is important to note that this is not necessarily evidence of quantitative differences in problematic drinking by men and women. However, after two participants in an all-female group described experiences of adult males’ alcoholism in their family, I asked if women in Latino families ever demonstrated similar behavior, to which all participants responded negatively and one offered, “you don't really see that. You see them serving the drinks to their husbands.” (p. 33).

Heightened risk for women: “Mostly everything just fall on the girl” (p. 15). Youth expressed that caregivers are comparatively restrictive with girls’ behaviors because of fears of sexual assault and sexual health risks. In one group of young women, participants repeatedly

alluded to parents' general fear and worry. When pressed to name these fears, they specified that parents' primary fear was rape. Even young men had no trouble identifying these concerns:

I believe in a woman it's more different because you know on a beer it says you gotta watch it if you're pregnant for a woman. And for guys, well they basically don't care about guys and beer though. There's guys out there they get the other woman drunk or drugged up and they abusin' them. And for a guy it could go that way too but, you know, a guy is a guy. (p. 15)

Internalized gender norms. Comments by male and female participants suggest that each has internalized cultural expectations about the other's behavior. Here, for example, a male (p. 15) and female (p. 10) participant discuss their expectations for girls at a party.

P. 10: For me, let's say you go to a party and you see a girl drunk, they're obviously gonna look worse than a guy because they always expect the girl to look better-

P. 15: Like calm.

P. 10: Yeah calm. And then, for the guys they expect to get drunk and all that kind of stuff. So there's always like expectations for each other.

P. 15: Mostly everything just fall on the girl. I believe that cuz it looks wrong if you see a girl that's alcoholic than a dude. It looks wrong in my opinion.

On the other hand, young women in particular saw young men as less responsible when drinking. The same "boys will be boys" attitude they criticized in adults came across in statements like "I think that girls have more power over themselves. They know how to control things. And guys don't. They just drink to the point that they go lay down" (p. 32).

Men, work, and alcohol: "As long as you gettin' shit done..." (p. 2). Although not explicitly identified by participants as a gender-specific phenomenon, a relationship between money, work, and alcohol was explored exclusively, and repeatedly, in groups of young men. The relationship between alcohol and fulfilling responsibilities was expressed in two different ways. First, both men and women talked about abstaining or moderating their drinking to fulfill their responsibilities as students, sons, daughters, and parents. For example, male and female

participants expressed sentiments such as “So, I shouldn't be drinking cuz then I gotta go to school” (p. 6) and “...if I'm drunk or something it's like how are you supposed to be there for your child if you're not even all there...” (p. 28). However, the inverse relationship, alcohol as a reward, or at least permissible, if one fulfills their responsibilities, was only discussed by men and almost exclusively in relationship to employment and financial attainment.

Some young men felt that drinking was perceived as problematic only if it interfered with one's employment.

P. 2: I feel like, at least in my family, as long as you got money comin' in, you're not constantly fuckin' up, then it doesn't really matter what you do. Like you can smoke and drink and whatever.

P. 14: It's just like "be good"

P. 2: Yeah. But as long as you gettin' shit done, it's like...

P. 17: Yeah as long as you know you on track in life

P. 14: yeah-

P. 2: yeah...

P. 14: Okay, is this an accurate thing to say? In Latino families, as long as your shit's together, it's okay.

P. 2: yeah

Similarly, some young men perceived an implicit policy that if one can afford to purchase alcohol himself, he's old enough to drink. In one group, when participants were asked what adults tell young people about alcohol, a male participant stated “if you got the money for it then go ahead” (p. 6). Another described being allowed to drink with his uncles once he could contribute money for alcohol. In addition, alcohol was perceived by some as a reward for hard work. One young man was told “Work for your things...[alcohol] will be a reward for you but later on in life” (p. 15). Many young men appeared to have internalized this perspective. In one group, two participants doubted a father's claim that he didn't drink until age 25. The story seemed implausible to them because of their view that drinking is the natural reward, or perhaps coping response, for hard work.

P. 24: and he said that he had to work all his life when he was younger. I still find that a lie though, about the drinking.

P. 25: (laughing) let me tell you bro, if I'm working my whole life I'mma have some beers.

P. 24: Yeah, some beers, right?

P. 25: I'mma have some alcohol. Even when I'm under twenty-one. And if I'm working my ass, I'mma drink.

Although discussion of this topic was limited, and never identified explicitly by participants as gender-specific, it is noteworthy that each of these examples emerged from independent focus groups, and that these sentiments were expressed in every focus group that included male participants. In contrast, no endorsements of the code “alcohol and fulfilling responsibilities” in women’s groups were associated with money or employment, and all promoted abstaining from drinking.

C. **Research Question Two**

How does the ecological context inform Latino youths’ appraisals of ASP strategies?

Overall, youth endorsed harm-reduction strategies as an adaptation to an environment where both alcohol exposure and contextual risks run high. Latino youth in the Humboldt Park community were also able to clearly articulate that some of the strategies they observed in their community were adapted from the previous generation’s environment. Many identified a disconnect between “old” strategies and this “new” environment. Others had negative reactions to hearing about parents’ past behaviors that conflicted with U.S. underage drinking policies. The strongest critiques of parenting strategies were centered around changing perceptions of gender roles and alcohol. The overarching recommendation by youth was persistent and reciprocal communication with adults, which they observed was lacking in their community.

1. **Youth endorsement of harm reduction strategies**

In a context where underage drinking seems both inevitable and extremely risky, youth widely endorse harm reduction ASP strategies over prevention strategies.

The case against prevention. Prohibiting the use of alcohol was consistently framed, with very few exceptions, as futile in the local community given the pervasiveness of alcohol in general, and underage drinking in particular; as one participant succinctly stated, “one way or another it’s always gonna happen” (p. 18). Her assessment was supported by similar statements throughout each of the focus group meetings. The idea that a parent could outright prevent a child from drinking was seen as naïve and underage drinking as inevitable despite caregivers’ attempts to prevent it—“I mean cuz you can sit there and enforce rules all you want and your kid’s gonna do what your kid’s gonna do” (p. 28).

Youth explained that the neighborhood environment itself renders prevention strategies ineffective. The pervasiveness of alcohol, and in some cases tobacco and other drugs, were seen as an unavoidable influence on teens’ decisions, “It’s always gonna be there...and it’s always gonna be around us, regardless. We go to the store, you guys are gonna see people smoking, you’ll see alcohol in the store. So you can’t sit there and act like we’re not gonna wanna try it” (p. 18). These neighborhood characteristics thwart parents’ attempts at prevention, as these participants discuss:

P. 6: I think that ... even if the adults didn't drink around us younger people tend to see it somewhere else anyways so they learn it either way.

M: Where else do you think they see it?

P. 6: Outside, in schools

P. 29: Parks

P. 6: Yeah, everywhere...So, I don't know-I just think that there's nothing that you could do about it. Cuz, cuz they're gonna do it anyway...That's what I think.

In addition to the prevalence of alcohol and other substances in the neighborhood, youth insisted that alcohol was easy to access in their regular environments, as previously discussed in terms of generational differences in the alcohol environment. When asked for their initial reactions to the words “underage drinking” participants in several groups made reference to the ease of accessing alcohol. Their consensus was that liquor stores rarely require ID from visibly underage customers, “old men always get carded. Always. Like ‘do you have your ID?’ But when it's younger people, they never card them” (p. 29). In addition to the ease of retail purchase, alcohol is easily available in social settings.

P. 32: Nowadays any party you go to they're gonna have liquor.

P. 33: Yeah.

P. 32: No matter what. Especially at high school parties.

P. 33: And you're gonna be able to just go and grab it.

Finally, caregivers themselves can thwart one-another’s prevention attempts. While caregivers may object to their child’s alcohol use, many participants describe receiving alcohol from aunts, uncles, cousins, or grandparents at family parties.

Perceptions of internal vs. external risk. Not only are prevention strategies perceived as ineffective, but the way risk is perceived in the community may also be a strong push towards harm-reduction strategies. As previously described, participants identified both internal and external risks of underage drinking, but discussed external risks with much more nuance and emphasis. External risks were perceived as more imminent and pervasive in the community. One of the key differences between the two categories, from the perspective of alcohol-specific parenting, is that external risks can be moderated simply by controlling the environment of underage drinking. The underage drinking environment that youth describe sounds extremely dangerous and it’s no wonder that families’ attention would be directed toward preventing

incidents of sexual assault, arrest, car crash, etc. On the other hand, youth generally demonstrated little awareness of the relationship between internal risks and age of initiation. Potential health risks, including alcoholism, had little relationship in their eyes to their age and were instead related to learning appropriate drinking behavior. According to youth, parents may also believe that internal risks such as alcoholism can also be controlled by restricting contexts of underage drinking. For example, youth expressed that parents believed they can reduce the possibility of youth alcoholism by restricting teens' drinking to appropriate social occasions (in contrast to the problematic habit of "drinking just to drink") and to the home where drinking quantity and frequency can be monitored.

According to youth, parents focus on external risks over internal risks, and feel that only the former can be influenced by ASP strategies. If underage drinking is confined to controlled environments (in the house) with safe individuals (family), external risks are effectively eliminated, and the remaining internal risks are beyond adults' control. Under this belief, there is little motivation to adopt "zero-tolerance" approaches once the majority of perceived negative consequences are eliminated by restricting teen drinking to certain contexts. As previously discussed, this view may be reinforced both by parents' own adolescent experiences of drinking in the home, and the policies still in place in families' countries of origin. However, the impact of community-specific risks should not be underestimated as a driving force on parental decision-making.

(Reluctantly) letting kids drink. Given the perceived limitations of prevention efforts, and the high risk of many drinking settings specific to this community, participants maintained that parents do or should employ harm-reduction strategies that include provisions for drinking in

certain contexts. Despite their strong argument for the effectiveness of these strategies, some participants were careful to clarify that this decision was a reluctant compromise for parents.

When applying harm-reduction strategies that permitted drinking, parents weren't opting *for* underage drinking, so much as avoiding the potential dangers of unsupervised use, which appear heightened in the study setting. Parents are forced to adapt to heightened instances of violence, sexual assault, exposure to other substances, and police abuse. Sometimes this means compromising their ideal ASP strategies. In one group, after young men explained parents' attitudes towards underage drinking like this: "well it's not *okay*, but you're gonna do it anyways so you might as well do it in the crib" (p. 25). In another group one participant reiterated the pressure on parents to provide a safe outlet for teen drinking: "I mean if they don't allow you to do it and they allow you to leave they're like setting you up" (p. 33). Some parents make these provisions only after prevention strategies are found ineffective. One participant describes this course of events between her mother and brother, "She let my brother know that he wasn't supposed to drink but he still did it and she found out. So it's like, if you're gonna drink just do it here at least...but don't be outside doing stupid shit" (p. 25).

Initiating teens as a protective strategy: "Drink with me." More specifically, many participants endorsed a "drink with me" strategy in which parents introduce teens to alcohol by drinking with them in a one-on-one setting. While few participants described being initiated to alcohol in a private setting by a parent (versus a large family gathering), they often proposed this scenario as a positive hypothetical strategy or one they would adopt with their own children. These hypothetical exchanges were usually described as warm and supportive interactions intended to increase trust and dispel curiosity.

In practice, participants had mixed reactions to drinking specifically with parents. While most described being allowed to drink under parents' supervision, or in the presence of parents at larger gatherings, few had actually experienced the intimacy of the "drink with me" setting. Here a participant expresses his discomfort with the idea in practice: "when I'm twenty-one yeah, but I'm talkin about right now. Right now that shit sounds weird as hell. Drinkin with my parents?" (p. 26).

2. **ASP strategies are subject to succession**

Consistent with the ecological principle of succession, Latino youth interpret ASP strategies as a reflection of their family history, in particular their family migration history. That is, parents apply strategies that fit their country-of-origin and cultural expectations in this new setting with varying degrees of success.

Recognizing and adapting to the current context of underage drinking. Youth demonstrate a sharp awareness of generational differences in the underage drinking context. For example, many doubted parents' awareness of the drug and alcohol landscape their children find themselves in. Conflicting understandings of the current ecological setting of underage drinking can create a barrier to effective parenting strategies. For example, when asked how parents respond to the increased accessibility of alcohol and other drugs, participants were doubtful that parents understood the current alcohol and drug environment they live in.

P. 21: Maybe they know what's going on, but they don't think that their own child's doing it.

P. 29: Or know how to address it.

P. 28: mmhmm.

This limited understanding of teens' current experiences can fail to provoke adequate protective strategies, and may also feed youth resistance to ASP strategies. When youth feel that

ASP strategies are not connected to their current reality they may dismiss caregivers' attempts to influence their drinking.

Obviously all of us have different lives, different things that we go through, different things that we feel, different things that we see. So a lot of the times our parents probably can't relate to some of the things that we do now. So when they talk it's more like "dude you're talking for no reason because, I'm still gonna do what I wanna do because you don't understand me right now." you know? "You don't get me right now". (p. 14)

When asked if they felt parents noticed these generational differences, or how they responded to them, some participants expressed disapproval towards parents who apply ASP strategies adapted to policies in their country-of-origin rather than to teens' current context. "I see the problem with Latino families is their parents are really stuck in the past and they don't really care much for the rules of this generation. They follow their own rules and that's how they treat their kids. With those rules" (p. 5). Another participant (p. 31) described such parents as "stuck." Overall, youth felt that permissive attitudes, and "hands-off" approaches in particular, towards underage drinking may have been appropriate in their parents' youth when (according to participants) alcohol and other drugs were less acceptable, teens were less likely to drink in peer settings, and both the local alcohol policies and relationship between the police force and the community precluded negative encounters with the law. In the current, reportedly much riskier, context of underage drinking, youth saw these strategies as outdated.

Contextual differences or "hypocrisy?" To further complicate parents' adaptation to the current context of underage drinking, caregivers who conformed to new policies and restricted teen drinking were sometimes described as "hypocrites" by participants. Youth generally responded positively to parents using their personal or family histories to communicate about

alcohol. However, youth reacted negatively when they heard stories of parents' teen drinking, but then were told not to drink themselves.

I don't get it, my parents are hypocrites bro. They be tellin' me stories about they used to drink with their friends or whatever when they were younger...and they recently be like, "oh when I was younger...oh you don't-you can't drink." But you be tellin' me all the stories you have with your friends...but you don't want me to do it? But you're doin' it to! (p. 25)

To reconcile this conflict, participants encouraged caregivers to name and discuss the contextual factors that influence their parenting decisions. They recommended parents explain the rationale behind rules, particularly rules that appear to contradict parents' own actions or drinking histories. *"I think they should talk about their difference in culture. Like why it was okay for them to do something, and why it's really not okay for you to be doing something here. Because with that difference you think it's okay for you but it was only okay for them at their time"* (p. 5). Another participant elaborated on this recommendation with an example of contextual differences extending beyond laws and policies: *"Yeah cuz my dad didn't go to school and I gotta go. So, I shouldn't be drinking cuz then I gotta go to school"* (p. 6).

Generational differences in perceptions of gender and alcohol. Generational differences in perceptions of gender roles represent a clear example of how strategies that were effective for one generation may no longer fit the current context of underage drinking. Gender norms that associate masculinity with drinking and recklessness, and femininity with decorum and vulnerability were perceived as universally accepted in previous generations. Adult caregivers—at least in the participants' eyes—adhered to these gender roles in their youth. Multiple participants recalled being told their mothers began drinking relatively late in life and almost always in strict moderation. However, the current generation of young Latinas is sharply critical of this perceived "double standard." The practice of applying disparate rules and expectations to

sons and daughters was unanimously criticized by young Latina participants with words like “sexist” and “bullshit.”

Gender norms were a clear source of intergenerational conflict between girls and caregivers. Although young women described feeling more confident in their knowledge of responsible drinking behavior, they also suggested that these norms now have the potential to backfire. When asked how gender differences in parenting affected young women, participant 32 said succinctly, “Sometimes people tend to do what they're told not to do. So they're gonna do it.” In a separate group, a young woman described how, frustrated by her limited freedoms, she stayed out all night long when she was allowed to attend a party for the first time. Here she (p. 10) and a male participant (p. 15) discuss the incident:

P. 10: “You can't do that. Cuz you're a girl. You don't know what could happen to you.” So it would be like, you're always gonna stay home. The first time I went out I didn't go home. And then my mom went crazy. Did a police report of it and everything. Cuz I didn't get home. But I was like “you never let me do anything.” you know?

P. 15: Sort of like, you took it out right there.

P. 10: yeah

P. 15: You're like “fuck it, might as well get in trouble.” and enjoy yourself.

P. 10: I mean I guess. That's what I-I think that that's what I did because I was like, okay I have the opportunity to do this, so might as well just take-

P. 15: enjoy it. You know?

P. 10: enjoy it, yeah.

Furthermore, a desire to defy gender roles perceived as antiquated can exacerbate social pressure on girls, once outside of caregivers’ supervision, to drink.

P. 32: It's not fair.

P. 34: It gets me mad because it makes it seem like we're weak. Like they're so more like better than us.

P. 33: yeah

P. 34: It's like, no it's not, we're all the same so what's the problem? So what if we're a girl?

P. 33: or when you're drunk they be like “oh you can't hang.” My cousins will tell you “oh you can't hang” But it's like, no, I choose not to drink.

Men had few critiques of gender-specific ASP strategies. However, young women raised concerns about how caregiver assumptions compromised alcohol education for daughters and sons. First, the emphasis on gender-based violence has the potential to frame male drinking as comparatively low risk. This is illustrated in the following two examples:

This is just more of a protection thing. They don't want the girl taken advantage of. Cuz that's the biggest fear when it comes to women drinking. And for the guy it's just like, okay, just don't get wasted because then everyone has to take care of you while you're drunk. But for the girl it's like, be careful what you're drinking because we don't want anything to happen to you. For the guy it's just whatever.
(p. 5)

P. 32: Boys are allowed to do it more than girls.

P. 34: yeah

P. 32: because (making air quotes) "it's not a danger for them." I don't know in what way though.

P. 33: (mocking) "they're more manly."

P. 32: Right, (mocking) "they can control it."

One group of young women raised concerns that permissiveness around boys' drinking could lead to more alcoholism among their male peers. When asked how parents should treat sons and daughters, they advocated for stronger prevention strategies for sons, rather than fewer restrictions for daughters.

M: ...How do you think they should teach sons and daughters?

P. 33: Not drink until you're twenty one...

P. 32: Yeah

P. 33: And be able to drink and take decisions on your own.

P. 34: Be wise about what you take in.

P. 34: Acknowledge what you're drinking, and-

P. 32: And then what you do and who you're with...

P. 33: Cuz something bad could happen to you.

Second, multiple participants suggested that gender norms lead to parents' assumptions that teen girls either don't drink or are innately more responsible and conservative in their drinking behaviors. "I don't know, I feel like they don't see it-they don't see girls drinking that

often, so they wouldn't expect somebody to drink that much” (p. 7). This may explain why the majority of alcohol-specific communication described by women was focused on sex and sexual assault to the possible neglect of other topics.

Third, female participants observed that there is no comparable effort directed towards teen boys to prevent sexual assault involving alcohol. “If they do talk to us, it's mostly girls. They talk to girls [about] how to act, with who, but do they tell the guys? How to act? With who? No...I just feel like they don't tell the guys ‘okay, you're gonna drink, and don't touch girls.’ Or, you know ‘don't be too friendly.’ They don't tell them that” (p. 7). While men acknowledged the reality of sexual assault and sexual health risks for women, none of the male participants described any caregiver strategies on the same topic directed at boys, even regarding the risks of disease and parenthood which impact both parties.

3. **Additional recommendations by youth**

Overall, regardless of the specific strategies applied by parents, youth saw any attempt by parents to influence teen drinking as positive. Even enforcing strict rules was interpreted as a sign of caring. As one participant summarized, “I respect the fact that we have parents that actually give a shit about us. Then you have parents that don't give a fuck what the fuck you do. I got some friends that...don't have parents and they do what they want. Just be appreciative for your parents. (p. 25) Another young man expressed gratitude “that we have parents that are on our ass, not like some other kids don't” (p. 26).

The most clear and consistent recommendation expressed by youth was for “open” communication between parents and youth. “I see that everybody agrees with communication with their parents. Because some they do have it and some don't. And it really works out” (p. 10). The ideal communication was described as warm, honest, and reciprocal. Youth wanted to

be able to present their questions and concerns to adults, and hear honest, nonjudgmental responses from adults. When asked what they considered the most important topic we had addressed during the discussion, these participants identified alcohol-specific communication, but also clarified that such conversations may occur with multiple adult family members and may even be initiated by teens themselves.

P. 5: I think we learned a good way to like start communicating with our parents if we want to drink or not. Like how to get a good conversation with them.

P. 15: What they just said, the communication and the age we're allowed to start drinking.

P. 6: Being safe or acting right while drinking.

M: Whose job do you think it is to start a conversation about those things?

P. 6: Should be the parents.

P. 15: it could start out like grandpa, grandma.

P. 6: yeah

P. 15: Or like a close relative, close cousin.

P. 15: Close aunt.

P. 31: I think it should be us because if we're the ones who wanna experience it, we should like you know be open to talk with our parents about it.

P. 10: Cuz we're the ones I guess that have the questions.

It is important to note that, to many participants, their ideal communication requires adults to withhold punishment or criticism if youth are considering or already using alcohol.

“...you wanna have that comfortability with them. So they can come to you, they can be honest with you, you feel like you don't have to hide it from your back” (p. 28).

VI. DISCUSSION

This section will examine how the ecological framework guiding this study provides a richer understanding of ASP processes in a given community. Research on teen alcohol use is often generously described as “ecological” when it incorporates any number of predictors outside the individual. Therefore the attention to parenting practices in underage drinking research, along with peer groups, school environment, and neighborhood characteristics, may be described as “ecological” in a basic sense, as parents do in fact form part of a child’s social ecology. However, the particular ecological framework applied to this study, with its emphasis on adaptation, cycling of resources, interdependence, and succession highlights the setting the family unit itself is embedded in, and how this relationship shapes ASP practices in a specific population. Two examples will be used to challenge the assumptions of theoretically decontextualized ASP research: the role of acculturation gaps in ASP, and investigator attitudes towards harm-reduction strategies. I will follow this analysis with study limitations, and conclude with recommendations for applying study findings to future research and intervention efforts.

A. **Succession and Acculturation Gaps**

One of the main contributions of the present study is a deeper understanding of how youth perceive parents’ responsiveness to their adolescent children’s current drinking context. As previously described, youth perceive parents as having drastically different teen and young adult drinking experiences as youth today encounter. Succession situates ASP processes applied today in a broader history of cultural, familial, and personal drug and alcohol policies, attitudes, and experiences. Through this lens, the findings of this study highlight how ASP research frequently

neglects history when considering teens' ecological settings. Succession helps us to clarify the reported relationship between certain intergenerational processes and teen drinking outcomes.

Youth characterize their current alcohol environment as distinct from parents' own adolescent experiences, resulting at times in a mismatch between the environment strategies are designed for, and the environment they are actually applied in. One related factor recently introduced into the ASP literature is the role of generational acculturation gaps in teen drinking outcomes. Acculturation, as previously described, refers to the response of an individual or group when exposed to the culture of a new individual or group. Acculturation gaps refer to a mismatch between the acculturative response of parents and their children.

Research on acculturation gaps and drinking outcomes in Latino families consistently finds that acculturation gaps predict or correlate with higher adolescent drinking (Cox Jr et al., 2013). This relationship may be mediated by general family processes such as family cohesion, stress, or conflict (Martinez, 2006; Schofield, Parke, Kim, & Coltrane, 2008; Unger, Ritt-Olson, Wagner, Soto, & Baezconde-Garbanati, 2009). That is, acculturation gaps lead to greater discord in the family, which in turn predicts increased youth alcohol and substance use.

Measuring acculturation gaps in the present moment in relationship to teen drinking, also in the present moment, fails to adequately situate both in their social and historical context. These relationships are still only a "freeze frame" in the longer story of how these acculturation gaps came to be, and their possible relationship to teen drinking. The present study provides a much deeper understanding of how acculturation gaps impact ASP.

One example of how acculturation gaps influences teen drinking is the phenomenon of gender-based parenting strategies. In a study of Latino adults that spanned five major US cities, acculturation (characterized by the authors in terms often associated with cultural assimilation, a

specific type of acculturative response) predicted higher volume of drinking and higher rates of binge drinking more consistently for women than for men. Similar results were found in studies of Mexican-American adolescents. Using a three dimensional acculturation scale that measured identification with both US and ethnic actions, values, and identity, (Schwartz et al., 2014) found that high endorsement of US actions predicted higher frequency of drinking and rates of binge drinking for Latina girls but not boys. Although literature exploring the role of ASP in this relationship is extremely limited, Nagoshi, Marsiglia, Parsai, & Castro (2011) found that Latino ethnic identity moderated the relationship between parental monitoring and substance use for girls specifically. Overall, parental monitoring was protective for both boys and girls. However, parental monitoring was particularly effective for girls reporting high ethnic identity, but had no effect on substance use for girls with the lowest reported ethnic identity.

Nagoshi et al. proposed that the limited impact of monitoring for these young women was a result of declining values of familismo. They speculated that lower ethnic identity indicated less concern with family loyalty and harmony, rendering parental voice less relevant for culturally assimilated teens. While this is certainly a possible explanation for the observed interaction, youth perspectives in the present study offer another interpretation. In the present study, youth explain that their understanding of gender roles departs sharply from the traditions their own parents and adult family members were raised in. Their observations of an environment where teen drinking by both genders is reportedly normative, and both genders can easily access alcohol at parties and local liquor stores, feeds resentment and subsequent rebellion for young women who do not subscribe to traditional gender roles. Incorporating an ecological framework reveals how gender-specific ASP strategies are transformed in the historical context of both familial and cultural events.

Research on both youth and family-level acculturation processes has recently made advances in situating these process in their social context. For example, Berry, Phinney, Sam, & Vedder (2006) found that youth acculturation styles may be influenced by experiences of discrimination and neighborhood ethnic composition. At the family level, Molina (2016) has found that family cultural conflict, that is, family conflict attributed to cultural differences between family members, is associated with experiences of discrimination. Consistent with Suárez-Orozco & Qin's (2006) conclusion that experiences of children of immigrant families are gender-specific, Both Barry et al. and Molina note that these processes are distinctly gendered. The role of discrimination in the relationship study participants describe between generational acculturation processes and ASP strategies deserves further attention.

While these relationships require further investigation, this study does draw attention to inadequacies of historically decontextualized approaches to the relationship between acculturation gaps and adolescent health. It identifies specific ways in which youths' attitudes, beliefs, and perceptions regarding alcohol and other substances differ from caregivers' perceptions in this community. While youth report strong agreement with caregivers on safety risks such as car crashes and violence, other topics such as attitudes towards marijuana use, gender-based parenting strategies, and perceptions of access create conflicts that potentially weaken ASP strategies. Furthermore, study results clearly point to centrality of gender-based experiences in the ecological context of health behavior. However, youth themselves recommend increased and improved communication on the generational differences and familial histories that shape parent perspectives.

B. **Adaptation and Harm Reduction**

Descriptions of parenting practices in the present study are consistent with findings from survey research of Latino families in the US, but provide a deeper understanding of how and why these practices take shape in a specific historical, cultural, and geographic setting. Many of the harm reduction practices identified in the present study are frequently criticized in ASP research in the US. However, the present study finds that these strategies are (often conscious) responses to the environment in which families are situated. In the ecological framework, they represent adaptations by families to the environmental demands of their setting. The influence of peer groups, neighborhood characteristics, etc. on parental decision-making also represents the principle of interdependence. Youth appraisal of these practices adds to emerging research indicating that controversial ASP strategies, such as parental permission to drink and parental provision of alcohol, may be protective in certain circumstances. Testing whether youth-endorsed harm-reduction strategies are effective requires further investigation. Unfortunately, assumptions that such practices are universally harmful create a barrier between health researchers and practitioners and local communities, compromising the effectiveness of local interventions.

As previously described in the literature review, overall alcohol consumption by Latino youth is comparable to their white peers (Center for Disease Control, 2014). However, they are more likely to begin drinking earlier and to receive alcohol from a family member (Caetano et al., 2014). The experience of ASP described in this study supports these findings. Consistent with national surveys of Latino youth, PACHS students describe alcohol initiation in their early teens and receiving alcohol from parents or, more often, aunts and uncles in family settings as normative experiences. Situating these two phenomena ecologically, as in the present study,

provides a richer understanding of how these processes occur. Without careful consideration of how, why, and under what circumstances Latino teens experience being initiated to alcohol in the family setting, these knowledge gaps may be filled in by premature assumptions.

The concept that family provision of alcohol and drinking under parental supervision leads to negative health outcomes is accepted almost without question in many current studies of underage drinking. At a population level, this relationship has some level of empirical support. Studies find a relationship between parental tolerance of underage drinking and increased adolescent drinking behavior (Jackson et al., 1999). It is important to note that assumptions about the effects of drinking in the home or with parents are often extrapolated from studies reporting the impact of strictness, consistency, and communication of rules. However, as previously described, many measures of alcohol specific rules are decontextualized and provide no clear information about where and under what circumstances rules are applied. Parents may be extremely strict about drinking outside the home, or fail to enforce stated “zero-tolerance” rules. Another basis for concern is that these parenting practices are logically connected to other risk factors, such as earlier age of initiation, which in turn predicts problematic drinking in adulthood (Caetano et al., 2014). This relationship raises a concern that adult provision of alcohol and adult supervised drinking indirectly contribute to problematic drinking through moderating risk factors.

However, findings from the present study contribute to an emerging body of research that examines these practices in their ecological context. Contextualized approaches to ASP research suggest that drinking with parents and adult provision of alcohol may not impact all communities equally. Research outside the US, in countries with arguably more tolerant policies and cultural norms towards teen drinking, report positive outcomes related to the same practices under

scrutiny in the US. Australian adults reported that teens who received their first drink from a parent reported more responsible drinking behaviors and lower rates of episodic drinking than their peers later in life (A. Kelly, Chan, & O'Flaherty, 2012). A study of Norwegian students found that drinking with parents predicted problematic drinking only when it occurred frequently, was accompanied by parental drunkenness, or was paired with sub-optimal parenting strategies (Pape, Rossow, & Storvoll, 2015). Infrequent or moderate drinking with parents, when accompanied by other positive parenting strategies, was not associated with more negative drinking outcomes compared to Norwegian students who did not drink with their parents. It is possible that the ASP practices described in the present study are indeed effective in parents' countries-of-origin in Latin American, and could even be effective in their current neighborhood.

Even within the US, recent investigations suggest that the presumed negative impact of parent provision or permission may not apply to all groups equally, and may even be protective under certain circumstances. In a longitudinal study of teen drinking behavior, the relationship between parental permission to drink in the home and future drinking behavior found that this parenting strategy functioned differently based on family structure (Levitt & Cooper, 2015). While youth with no permission to drink in the home generally reported moderate levels of alcohol involvement regardless of family structure, drinking in the home was protective for teens in "intact" families but predicted the highest levels of drinking in "nonintact" families. The effect of drinking with parents may also depend on the local context outside each teen's individual home. Reboussin, Song, & Wolfson (2012) found that drinking with peers predicted more negative drinking outcomes for teens, while drinking with parents predicted fewer. Furthermore, the protective effect of drinking with parents grew stronger according to a clustering effect. The possible protective effect of drinking with parents was stronger in schools like PACHS where

drinking with parents was more normative (i.e. where a higher rate of students reported drinking with parents). Finally, these strategies may have different effects within the same population depending on the context in which they are applied. (Foley, Altman, Durant, & Wolfson, 2004) found that adult provision of alcohol in the home was protective, while adult provision at parties predicted higher rates of binge drinking.

Findings from the present study further challenge the assumption that harm-reduction approaches that conflict with traditionally encouraged “zero-tolerance” approaches are universally detrimental. A key contribution of this study is the recognition that the controversial and frequently-criticized parenting practices described in this community are not haphazard or accidental. They are understood by youth as an adaptation to the ecological setting families find themselves in. Parents of Latino youth in the Humboldt Park community apply context-specific rules, which often permit drinking in certain settings, in response to circumstances such as local normative attitudes towards teen drinking, family migration history, increased access to alcohol in the community, and heightened safety and legal risks outside the home as a result of youths’ marginalized status.

Understanding the risks specific to each community that underlie ASP decision-making provides new insight into the relevance of state and national policies intended to reduce underage drinking. SAMHSA's (2013) report to congress on underage drinking details these interventions extensively. In addition to many policies targeting restaurants and retailers, the report highlights policies targeting youth and families directly. However, closer scrutiny shows that policies in these categories are primarily punitive in nature, such as social host liability laws or “zero tolerance” youth blood alcohol content laws. In both these examples the primary face of the intervention, from the perspective of the youth and families they target, is that of law

enforcement. In communities of color where the threat of police abuse and disproportionate criminal sentencing are heightened, these policies have different implications than they might in comparatively privileged communities. As participants describe, law enforcement represents a situational risk parents must account for rather than an ally in their child's health and safety. This relationship may unintentionally contribute to parents' provision of alcohol in the home to reduce contextual drinking risks, which ultimately runs counter to the intended outcome of these policies.

The effectiveness of parenting strategies described by youth in the present study has yet to be thoroughly investigated. This study calls attention to the importance of situating parenting decisions in the ecological context parents must adapt to. Highlighting the goals of parenting strategies with respect to their context, as in the present study, is a necessary first step towards evaluating their effectiveness. Harm-reduction strategies like those used in Humboldt Park may not reduce age of alcohol initiation or past 30 day consumption—common indicators of underage drinking in school-based surveys (Johnston et al., 2014). However, in a cultural setting that appears less likely to problematize occasional teen drinking, that's not their purpose. Indicators of risks such as car crashes, alcohol-related assault, school/work attendance, etc. both now and in the future may correspond more appropriately to the ASP goals identified in the present study. Unfortunately, drinking consequences (as opposed to drinking behavior) are rarely used as indicators in cross-sectional or longitudinal studies of parenting efficacy. Holding all communities to a prescribed set of prevention outcomes based on flawed measurement standards draws unfair scrutiny to parents and communities actively and thoughtfully working towards harm-reduction outcomes.

The misalignment between the outcomes desired within a community, and the outcomes they are externally evaluated on, has real implications for places like Humboldt Park. During my field experiences in the community from 2013 through 2015, the coordinator of a local coalition for underage drinking prevention expressed concerns about this very issue. The success of a grant-funded initiative to reduce underage drinking, which contained both youth and parent-focused components, would be evaluated after a five-year period based on past 30-day drinking rates among students in local schools. What if, the coordinator worried, students take the survey right after the holidays, when Mexican and Puerto Rican teens are often permitted to share a toast with their families? Had the intervention design and evaluation criteria been informed by research comparable to the present study, they might have focused instead on reductions in alcohol-related consequences, drinking in peer contexts, improved communication between parents and teens, or even greater agreement between adult family members on rules teens are subject to.

This study also challenges the poorly dissimulated tone of accusation and shaming directed at parents who do not apply zero-tolerance strategies. In a poll of US parents of children aged 12-20, 26% agreed, like many of the parents described in the present study, that teens should be permitted to drink in their own home under adult supervision. In response, the president of the AMA described the results as “disturbing” in a 2005 press release

The AMA applauds parents who discourage and disallow underage drinking. We hope that such parents willing to stand up for their children’s health will be more vocal in their communities, letting children and other parents know that no adult should substitute their judgment for a teen’s own parents. Drinking is not a rite of passage. Fatal car accidents, injuries and assaults, and irreversible damage to the brain are not rites of passage for any child. (American Medical Association, 2005)

In this comment Hill correctly identifies an issue relevant to the population of this study: provision of alcohol by non-familial adults (parents of friends and peers). However, his language draws a crude line between “us” and “them”—those who discourage underage drinking and those who provide alcohol to teens—even going so far as to commend the former for “stand[ing] up for their children’s health” and implicating the other in serious, sometimes fatal, outcomes. The present study finds that the line between those two groups is not as sharply defined as current ASP research assumes. Many parents who provide alcohol to their children also have strict rules about where and when underage drinking will and will not be accepted. Even permitting drinking in the home may be a strategy adopted very reluctantly by parents who feel obligated by contextual circumstances to provide a safe drinking outlet for their teen children. Finally, as previously described, associating supervised drinking in the home with serious injuries and negative health outcomes is poorly supported by ASP research, and even refuted by studies applying an ecological approach.

While such comments may be well-intended, they have the potential to generate discord and suspicion in communities where parents are struggling to adapt their past experiences of ASP to the context their children are confronted with today. Consequences of these paternalistic attitudes have already manifested in the same community where the partner school is located. In 2014, during a meeting of the aforementioned coalition, a group of parents reacted very strongly to a set of sample posters discouraging parents from providing alcohol to teens. One Latina mother argued that a group of white people (presumably those who designed the materials) had no place criticizing alcohol practices present in her culture for centuries. The group decided to throw out the posters and instead distribute home-made leaflets to neighboring parents outlining Illinois laws related to serving alcohol to minors in a private residence and encouraging parents

to ensure that minors who have been drinking stay in their homes for both legal and safety reasons.

As participants describe, ASP decisions in this setting are complicated, even for parents. Perhaps a more effective role for health researchers is to support families, rather than indiscriminately condemn and criticize them, as they develop strategies that honor their cultural practices and family history while adequately answering to the demands of the present context.

C. **Study Limitations**

It is important to note that the participants recruited from Pedro Albizu Campos High School provide insight into the specific experiences of the community served by the school, which should be extended only with great caution to broader populations. Their experiences are not necessarily representative of all Latino youth, or even all Latino youth in the Humboldt Park community. While youth in this study provide certain insights into what they perceive as typical patterns in Latino families, or families in the local area, it is important to recognize that the study population is distinct in several ways. As previously described PACHS students have experienced a range of life circumstances that have interrupted their studies in conventional high schools. These circumstances indicate a shared state of heightened vulnerability and marginalization that must be acknowledged. On the other hand, youth themselves highlighted a range of assets unique to their community such as family resilience through challenging migration processes, attentiveness to one another's safety learned from exposure to violence, peer relationships that cross racial and ethnic barriers that allow them to situate their own cultural identities, etc.

PACHS students, and the perspectives represented in this study, are unique. Qualitative methods are appropriate to provide deep insight into a specific populations' experiences, and

illuminate processes that may be relevant to other groups, not necessarily to produce universally generalizable findings (Patton, 2002). The present study with PACHS students is, first and foremost, intended to inform interventions applied within the same school through current grant-funded initiatives to address alcohol and substance use. Findings may also be cautiously extended to similar alternative schools serving Latino students in comparable urban ethnic-enclave neighborhoods. Family processes described in the findings present many opportunities for follow-up study both within PACHS, in the growing population of first, second, and third generation Latino youth, and in communities similar to Humboldt Park. These processes must be carefully investigated in larger populations rather than being applied indiscriminately outside the school community.

One of the primary limitations of this study is its focus on youth perceptions of ASP practices without incorporating additional adult or parent perspectives. Youth perspectives are particularly helpful for understanding their experiences and interpretations of these family processes. Indeed this population comprises the ideal pool of experts on their experiences in various settings, their opinions on various parenting strategies, and their understanding of how these strategies have impacted them. However, there is the possibility that youth inaccurately interpret parents' intentions, motivations, and reasoning. Furthermore, not all claims about the previous generations' underage drinking context are verifiable. For example, youth perceive less access to marijuana in specific Mexican and Puerto Rican neighborhoods during their parents' youth, which may or may not be accurate.

Incorporating parent perspectives may also help to identify the resources parents incorporate into their decisions regarding ASP strategies. The reader may note that cycling of resources is poorly represented among the four ecological principles. In part, cycling of

resources is present throughout, as parents and other adult family members are, in effect, tremendous resources in the community to address underage drinking. However, as an explicit theme of analysis it is overshadowed by adaptation, interdependence, and succession. This is in part due to the strong insight of youth into the circumstances parents must adapt ASP strategies to, and more limited knowledge of resources parents are relying on as they made these decisions.

Although focus group methodology was identified as the most appropriate methodology for reasons previously described, it does introduce a greater risk of social desirability effects (Krueger, 1994). For example, male and female participants might have responded in ways that fit gendered social expectations of their drug and alcohol use. Indeed, young men seemed to be more forthcoming about their personal alcohol use, sometimes disclosing drinking experiences before the focus group even began. In contrast, young women often spoke generally about their peers and community and offered personal examples of drinking behavior only after the focus group discussion was well underway. In response to this possibility, the moderator made an effort to phrase questions in a way that could be answered through reference to personal experiences or observations of the community. It was also imperative to keep groups on task and focused on the questions in the guide to avoid men's groups lapsing into aimless storytelling about parties and alcohol use that suggested posturing. Prompts such as "do you think adults know about situations like that?" or "how do you think a parent in this community would respond to that" were successful at bringing the focus back to the research questions in such instances.

One limitation specifically impacting women's focus groups was that the majority of female participants had the unique status of young mothers. This was not an intentional recruitment strategy, but occurred naturally as a result of focus groups meetings being

compatible with the schedules of young women participating in parenting support groups or using on-site childcare services. Young men did not comment on whether or not they had children. Participants' status as young mothers may compound the existing gender-based pressures to obscure personal alcohol and substance use. Young mothers may have feared judgment from adults, particularly those from outside their community like myself, if they disclosed illegal or potentially unsafe/unhealthy activities. In response to this concern, young mothers were grouped together whenever possible to increase the comfort level of the participants. Many young women were candid about their personal experiences as their familiarity with me and one another increased throughout the group.

Having young children may give these participants a unique perspective from their peers. Several acknowledged that becoming pregnant had caused them to assess their underage drinking environment and decisions more critically. To address the possibility that mothers' insights could not be generalized to the target population, young women without children were intentionally recruited to later focus groups. Their statements were consistent with the emerging findings from previous groups that included young mothers, suggesting that Latina youths' observations of their community were generally consistent regardless of their status as parents. Mothers' groups did, however, spend more time discussing their intended future parenting practices. In this way they became an unexpected asset to the study because their statements about their hypothetical future parenting decisions are a glimpse into both youth and parent rationale at once.

D. **Recommendations**

The present study provides important information that may be used to inform interventions specific to PACHS, as well as further research on a larger scale. Given that the impact of harm reduction strategies endorsed by participants has not been adequately researched

in this community, it would be irresponsible on the part of the researcher to endorse these practices. However, findings indicate that these practices are widespread in the community and closely tied to multiple cultural and contextual factors. It is unlikely that an intervention endorsing “zero-tolerance” approaches would be adopted by parents in the community in the short-term. However, this study points to multiple opportunities for enhanced research practice:

1. Emphasize adult-child communication in interventions targeting parents. Youth in the present study called for better communication within families about alcohol and other drugs. Parents may be surprised to hear that youth value communication about alcohol. However, youth are clear to specify that delivery of these messages impacts how they are received. Honesty about one’s personal and familial drinking history, encouraging teens’ questions and personal disclosure, and emphasis on hopes and desires for teens’ futures were all described as important components of successful communication. More frequent and better quality communication may help reduce the impact of acculturation gaps by helping parents to understand the current underage drinking ecology young people experience, and youth to understand the rationale behind parents’ ASP strategies.

2. Expand intervention efforts to include other adult family members. While conflicts between adults sometimes thwarted parents’ prevention efforts, youth valued the support and guidance of aunts, uncles, grandparents, and cousins. Increasing consensus between adults, either through direct messages to these adults or by encouraging parents to discuss the topic of alcohol education with other adults in the family, may maximize these adults as potential resources for health promotion.

3. Emphasize internal (or inherent) risks of alcohol use in alcohol education targeting youth and adults. Youth have a strong grasp of situational risks of alcohol use such as car

crashes, exposure to violence, and encounters with law enforcement. They attribute this understanding to successful harm-reduction strategies in their home, which is an important asset for prevention. However, a failure to recognize the risks of underage drinking that impact youth regardless of drinking context, such as reduced brain development, liver damage, and increased risk of alcoholism in adulthood, leaves youth vulnerable to these outcomes. Helping parents to understand these risks may encourage stronger prevention efforts on behalf of adults, while youth education of these risks may compensate for incomplete education on behalf of adult family members.

4. Encourage critical reflection on gender-specific experiences of drinking and ASP. Young women in particular in this study have raised important concerns over the impact of gender-based parenting strategies. Critical reflection may help young women to respond to perceived unfair treatment constructively rather than resorting to rebellion. Similarly, critical reflection may help young men to challenge messages of toxic masculinity that encourage reckless behavior in drinking contexts and downplay both risks to young men and responsibilities regarding risks perceived as specific to young women (e.g. issues of consent, intimate partner violence, safe sex, etc.).

Results of this study highlight specific intergenerational processes shaped by local environments which young men and women experience differently. Systematic investigation is required to determine the extent to which these processes apply in other communities.

Recommendations for further research are as follows:

1. Apply an ecological framework to future ASP research. Results of this study demonstrate a clear influence of both historical and present factors on parents' decision-making, and the ultimate outcome of ASP strategies. Greater attention to community-specific processes

rather than “one size fits all” understandings of ASP may lead to more nuanced understandings of how adults protect the health of young people. History in particular has been underrepresented in ASP research and provides much deeper insight into how or why ASP strategies succeed or fail, particularly in families where acculturation gaps may exist.

2. Incorporate local understandings of underage drinking and ASP into survey design.

Survey research is the most common method of collecting data on both underage drinking and ASP practices. However, surveys of health behavior, and drug and alcohol use in particular, often fail to represent constructs as they are experienced by the target population (Johnson et al., 2006; Johnson, 2012). Decontextualizing both adolescent and caregiver behaviors may compromise the validity of survey items of dichotomous measures of rules, communication, etc. In addition, the efficacy of ASP strategies are often evaluated in terms of underage drinking rates and age of initiation, regardless of the intended outcome of local ASP strategies. Outcomes appropriate for evaluating parenting strategies in communities like Humboldt Park may include long-term problematic drinking outcomes as well as indicators of injury, crime victimization, and encounters with the judicial system.

3. Acknowledge the prevalence of gender-based parenting strategies in both research and interventions in the Latino community. Despite its dominance in the minds of youth participants in the present study, gender is surprisingly absent in many studies of ASP in Latino families. Researchers must take care to measure and report the effects of underage drinking and ASP in the many survey-based research endeavors taking place each year throughout the US. Similarly, interventions and resources targeting Latino parents that assume sons and daughters are treated equally are incomplete.

VII. CONCLUSION

This study used grounded theory and focus group methods to examine the relationship between Latino youths' experiences and appraisal of ASP strategies in the Humboldt Park community and their ecological context. Recognition that teen drinking behavior emerges from a specific setting has lead alcohol researchers to investigate ASP and other family processes. However, we must remember that the same applies to ASP strategies themselves. Kelly's ecological framework (Kelly, 1979; Trickett, 1996; Trickett, 2009), with its focus on adaptation, interdependence, succession, and cycling of resources, was adapted for this study using principles of Critical Race Theory. This enhanced framework resulted in a better understanding of how ASP strategies, and their impact on underage drinking, are uniquely intertwined with the contextual factors that shape each community. Both ASP strategies and their outcomes are shaped by present and historical circumstances at multiple levels. Findings indicate that parents of the target population prioritize harm-reduction strategies over prevention strategies in response to local and cultural norms and perceived risks. Youth interpret these parenting strategies in their historical context, including migration history and adults' own adolescent experiences of underage drinking. Youth identify a potential weakness in ASP strategies in Latino families occurring when parents apply strategies that are incongruous with teens' experience of the underage drinking environment. These findings challenge assumptions that discourage certain harm reduction practices, and provide a deeper understanding of how acculturation gaps contribute to underage drinking. These findings provide guidance to improve both measurement of ASP strategies and their relationship to underage drinking outcomes, and interventions tailored for Latino families.

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APPENDICES

APPENDIX A

Screening Tool

The Greater Humboldt Park Coalition to Prevent Underage Drinking is trying to learn more about how parents and other adults teach teens about alcohol. We need your help to understand this better! If you are chosen to participate in the study, you will meet with other students your age for about an hour and a half at La Estancia for refreshments and a discussion about what you've heard adults say and do to teach teens about alcohol. We will *not* ask you about your personal activities or family. We will only ask you what you think about what you have seen and heard in your community.

At the end of the study you will receive a certificate from the Coalition and University of Illinois at Chicago recognizing your contribution towards healthy families in the Humboldt Park community.

To see if you are able to participate, please complete the following questions.

1. Name: _____

2. Date of birth: (month/day/year): _____

3. Do you identify as Latino or Latina? ☐ Yes ☐ No

4. Do you live with at least one parent or adult family member (mom, dad, stepparent, aunt, uncle, grandparent, etc.)?

☐ Yes ☐ No

If you are eligible for this study, someone from the study will call you to schedule your focus group

5. Phone number: _____

6. Are there any days you are *not available* after school from 3:30-5:00pm?

I am *not* available:

- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday

In addition, **if you are under the age of 18**, we need to send some information about the study to your parent or guardian to make sure they agree to your participation. We must have a parent or guardian's name and contact information for you to participate.

APPENDIX A (continued)

7. Parent/Guardian's name: _____

Mailing address: _____

City, state, and zip code: _____

9. Finally, how did you hear about this study? _____

APPENDIX B

Focus Group Guide

Background Information: My name is Amber and I'm a researcher from UIC, and also part of the Underage Drinking Prevention Coalition in Humboldt Park. The coalition is trying to understand what things we can do in this neighborhood to keep teens safe and healthy. Today I'm hoping to hear what you think about how Latino families influence their kids' decisions about drinking, especially in Humboldt Park. I'm going to ask you about Humboldt Park and Latino families in general, but not about your own activities or your own family because I understand that may be very personal. If you want to tell me about your own family you can, but just hearing your observations about your neighborhood would be very helpful.

When I transcribe our conversation I will take out any names or identifying information so nobody will know who participated or said what. Because this is a group discussion, I cannot guarantee that everything said here will remain confidential. However, to create a safe environment and respect the privacy of everyone here today, I ask you all to agree not to share this discussion with others outside the group after you leave.

APPENDIX B (Continued)

Question Type	Question	Time
Opening	Let's go around the circle and say your name and something you like to do outside of school just for fun, like a hobby or a sport.	1 min
Opening	The last thing before we begin is to make a short list of guidelines for our focus group. What are some things we can agree on to make a safe and respectful space for our discussion? Give me some ideas and I'll write them up here. I'll start with this one (write on poster) turn off all our cell phones so we won't be distracted. Who else has some ideas? (write group guidelines on poster)	2-3
Introductory	When you think about underage drinking what comes to mind?	2-3
Transition	What are some things that parents or other adults tell young people in Humboldt Park about drinking?	3-5
Key (Research Q 1)	What are some rules that Latino families have for their kids about drinking?	10-15
Follow-up	Are there ever exceptions to these rules?	
Follow-up	Are there any other things adults in Latino families do or say to influence teens' decisions about drinking?	
Key (Research Q2)	These adults probably have their reasons for these rules/ exceptions. Have you ever heard them say why teens can or can't drink in certain situations? What do you think their reasons are?	10-15
Follow-up	In Latino families, what do you think adults think is good or bad, or healthy or unhealthy for teens?	
Follow-up	When we talk about underage drinking, what do you think is good or bad, or healthy or unhealthy?	
Follow-up	How do you think you learned about what was good or bad, or healthy or unhealthy?	
Key (Research Q2)	So far we've talked about rules and some other things like [strategies participants have named]. How well do these things work to keep teens safe and healthy?	10-15
Follow-up	What makes them work or not work?	
Key (Research Q 2)	What are some things parents or other adults could do or say about alcohol that would be most helpful for teenagers in Humboldt Park?	5-10
Follow-up	Do adults in Latino families say or do anything specifically about [name any influences participants have mentioned, e.g. Facebook, peers, school]	
Follow-up	Are there any things adults and other family members should know about this topic that you think they don't know?	

Ending	Our goal today was to talk about how Latino parents and other adults in Humboldt Park teach their kids about alcohol. Is there anything about this topic we haven't talked about yet?	5-10
Ending	What do you think is the most important thing we've talked about today?	

APPENDIX C

Demographic Survey

Date of birth (month/day/year): _____

Gender: _____

School (current or most recent): _____

Grade (current or the last grade you were enrolled in)

☐ 7th ☐ 8th ☐ 9th ☐ 10th ☐ 11th ☐ 12th ☐ College

Check any of the words that describe your race or ethnicity:

- | | |
|--|--|
| <input type="checkbox"/> Mexican | <input type="checkbox"/> Central American (Specify: _____) |
| <input type="checkbox"/> Puerto Rican | <input type="checkbox"/> South American (Specify: _____) |
| <input type="checkbox"/> Black | <input type="checkbox"/> Caribbean (Specify: _____) |
| <input type="checkbox"/> White | <input type="checkbox"/> American Indian or Alaskan Native |
| <input type="checkbox"/> Asian/ Pacific Islander | <input type="checkbox"/> Biracial (Specify: _____) |
| <input type="checkbox"/> Other: _____ | |

Check any of the words that describe the race or ethnicity of the adult(s) you live with (parents, step-parents, grandparents, aunts and uncles, etc.):

- | | |
|--|--|
| <input type="checkbox"/> Mexican | <input type="checkbox"/> Central American (Specify: _____) |
| <input type="checkbox"/> Puerto Rican | <input type="checkbox"/> South American (Specify: _____) |
| <input type="checkbox"/> Black | <input type="checkbox"/> Caribbean (Specify: _____) |
| <input type="checkbox"/> White | <input type="checkbox"/> American Indian or Alaskan Native |
| <input type="checkbox"/> Asian/ Pacific Islander | <input type="checkbox"/> Biracial (Specify: _____) |
| <input type="checkbox"/> Other: _____ | |

Is there anything else you would like to say about today's discussion?

APPENDIX D

Coding Guide

Coding notes: Because participants were not explicitly asked to share personal experiences, and were also asked to describe hypothetical positive or negative behaviors and interactions, codes are applied to all accounts, real or hypothetical. That is, codes are applied equally to a description of something a participant actually experienced, something they say another person experienced, something their community in general experiences, as well as something that could, should, or might [not] occur.

Code/family name	Description	Excludes	Notes
Family members: Specific family members (instead of “family” or “parents”) identified by participants as influencing underage drinking behaviors.			
Mother	Mother, stepmother, “O.G”	Descriptions of family members, or their behavior, not explicitly associated with ASP strategies or youth decision-making. For example, a descriptions of a cousin’s drinking that does not explicitly influence another young person.	Roles are coded with respect to the young person being influenced. That is, if a participant describes their uncle’s rules for a teenage cousin, this would be coded as <i>father</i> . Note that real or hypothetical drinking in the presence of family members, with or without identifying specific family members, is coded using the context family of codes.
Father	Father, stepfather, “pops”		
Grandparent			
Aunt			
Uncle			
Sibling			
Cousin			
Local influences: Contextual factors, besides individual family members, that influence youth ATOD use or ASP strategies.			
School	Drug/alcohol education, communication, and rules provided or enforced in school or by school staff.	School as a responsibility (<i>fulfilling responsibilities</i>) or goal (<i>looking to the future</i>)	
Neighborhood/city	Exposure to drug/alcohol use, or associated risks, in the neighborhood setting or city of Chicago		

APPENDIX D (continued)

Peers	Influence over drinking behaviors by peers (peer pressure, peers providing ATOD, etc.)	Descriptions of drinking with peers that don't explicitly describe how peers encourage/discourage ATOD use (<i>Context: friends/peers</i>)	
Media	Messages about ATOD from advertising, pop culture, digital social media		Includes exposure to peer ATOD use via social media
Liquor Stores	References to liquor stores in the neighborhood	References to liquor stores in families' countries-of-origin	
Gangs	References to gang members, presence of gangs, or risks associated with gangs	Violence not specifically identified as gang-related	
Access	References to the perceived ease/difficulty of accessing alcohol	Provision of alcohol by family members. Descriptions of drinking not intended to illustrate access.	
"It's just normal"	A normative attitude in one's community, culture, or family towards ATOD use, underage or otherwise.	Insistence that underage drinking will occur in spite of preventive strategies (<i>"it's gonna happen"</i>)	

APPENDIX D (continued)

ATOD use: Descriptions of real or hypothetical teen ATOD use			
Smoking/marijuana	References by participants to recreational use of non-alcoholic substances. This includes descriptions of personal or observed use, perceptions of access and safety, comparing substances, etc.	References that do not distinguish between alcohol and other substances (e.g., “when parents talk about all that stuff...”)	Code is applied when participant identifies marijuana specifically, or refers to unspecified “smoking.”
Other drugs			(e.g., LSD, MDR, pharmaceuticals)
learning “on your own”	Youth learning about ATOD use from experience or observation rather than direct orientation from adults or other sources	Experiences of ATOD use or exposure not identified as educational or formative	
ATOD and caretaking	Caring for others who are drinking (e.g., serving drinks, preventing drunk driving, cleaning vomit, protecting each other)	Caregiver monitoring (<i>monitoring</i>)	
ATOD initiation	Descriptions of real or hypothetical first ATOD use or period of ATOD initiation (e.g., “when I first started drinking...”)	Descriptions of ATOD use at a specific age (<i>age</i>) not explicitly identified as first use	Initiation to non-alcoholic substances co-occur with <i>smoking/ marijuana, or other drugs</i> codes.
ATOD-specific rules: Rules indicated by adults about whether, and under what circumstances, ATOD use is permitted			
Zero-tolerance rules	When parents or other adults do not allow teens to drink under any circumstances before a certain age		Zero-tolerance rules may permit underage drinking after a certain age still legally considered underage (e.g., 18)
Context-specific rules	When parents or other adults allow teens to drink only under specific circumstances		co-occurring context codes are used to identify spaces where underage drinking is allowed

APPENDIX D (continued)

ATOD-specific communication: Communication between adult caregivers and youth about ATOD other than setting and enforcing rules. All codes describe real or hypothetical adult communication (i.e., what adults do, and what adults could, should, or should not do).			
Integrating personal history	Communication about caregivers personal history, or familial history, of alcohol/substance use		
Risk management	Identifying and discussing risks of ATOD use, giving instructions about safe/responsible ATOD use	<i>Zero tolerance or context-specific</i> rules intended to manage risk without accompanying communication about risk.	
Looking to the future	Caregivers' appeals to teens' futures intended to influence teens' ATOD use. References to improvements over previous generations' experiences.	Alcohol as a reward for fulfilling responsibilities, abstaining from alcohol to fulfill immediate responsibilities (<i>fulfilling responsibilities</i>)	
ATOD-specific silence	Participant claims that parents do not communicate or define rules about ATOD. (e.g., "they don't say anything.") This silence may be attributed to parental absence or indifference (e.g. "she wasn't around to teach me")	Passive absence of communication in participants' accounts	
Being open	Communication described by participants as open, honest, and/or mutual and in which teens disclose their ATOD experiences to caregivers.	Instructional, one-sided, or critical communication	

APPENDIX D (continued)

Being persistent	Participant recommendations to continue to approach teens about ATOD use despite uncertainty or resistance		
Explaining contradictions	Caregivers explaining rules or apparent contradictions between communication and behavior (e.g. explaining rules that contradict adults' own drinking behaviors).		
Criticism and ridicule	Adult criticism, ridicule, or humiliation of youth. May be communicated to youth or to other adults about youth.		
Other ATOD-specific caregiver processes: Actions by caregivers that youth explicitly identify as influential on youth ATOD use, but fall outside the categories of rules or explicit communication			
Modeling	Adult ATOD use that participants explicitly identify as influential on their or other teens' ATOD decisions	Descriptions adult ATOD use not explicitly identified as influential or intended to influence youth	
Monitoring	Caregivers' attempts to know where youth are, with who, and what they are doing	ATOD use with family or in the home not specifically identified as monitored use	
"Do it with me"	Intentionally initiating teens into alcohol or marijuana in a setting where parents and teens drink/smoke together.	ATOD use around parents (<i>context: family</i>) not as an initiation strategy	

APPENDIX D (continued)

Caregiver disagreement	Conflict between caregivers about what is considered appropriate ATOD use for teens, contradictory rules or communication about ATOD use-with or without caregivers' awareness	Family conflict not related to ATOD use	Caregiver disagreement is applied when an adult's strategies are in conflict with another adults'; caregiver compromise is applied when an adult's strategies are in conflict with his or her own ideals.
Caregiver compromise	Participant descriptions of rules or strategies that conflict with adults' own parenting ideals (i.e., a parent who would prefer a zero-tolerance approach, but instead only discusses risk after a child's rebellious response)		
Providing ATOD	Descriptions of caregiver provision of ATOD to minors by serving or selling ATOD or purchasing ATOD for them	Passive references to contexts of ATOD use that don't explicitly identify caregivers as serving or purchasing alcohol for minors. Liquor stores selling to minors (<i>liquor stores</i>)	
Caregiver strategies and age	Descriptions of real or hypothetical rules and strategies applied to specific age groups	Ages of ATOD initiation (<i>ATOD initiation</i>) or other identified age of use (<i>age</i>) independent of adult permission or other strategies	Frequently co-occurs with other communication and caregiver process
Gender and caregiver strategies	Descriptions of ATOD strategies applied specifically to males and females. Differential treatment between sons and daughters.	Descriptions of strategies by male and female participants not described as gender-specific	
Youth reactions: Youth behaviors provoked by, or in response to, caregiver strategies			

APPENDIX D (continued)

Rebellion	ATOD use in defiance of caregiver rules. Hiding ATOD use in response to caregiver prevention strategies. Teens using ATOD specifically in reaction to caregiver strategies to prevent it	ATOD use against caregivers' rules that is not explicitly motivated by a reaction to these rules	
Respect	Descriptions of youth respect and adherence to caregivers' rules	Parents' listening, respect, and deference to youths' decisions (<i>listening</i>)	May also be described by participants as youth "listening" to caregivers
Youth Appraisal: Explicitly stated youth opinions and assessment of caregiver strategies—endorsement or criticism of specific strategies			
Positive appraisal	Affirmation, endorsement, and recommendations of specific caregiver strategies. Participant descriptions of what they would do as parents.		
Hypocrisy	Teens' perceptions of parents as hypocritical in their own ATOD practices. Criticism of strategies that contrast with adult behaviors.		
"It's gonna happen"	Expressions of the inevitability of underage drinking despite caregivers' efforts to prevent it	Descriptions of ATOD use without reference to caregivers' prevention efforts.	
"You don't get me"	Youth discrediting caregiver strategies on the basis that adults don't understand teens' personal or generational experiences. Perceiving strategies as ineffective because they occur after teens' exposure to ATOD or ATOD initiation		

APPENDIX D (continued)

Other Negative appraisal	Criticism of specific caregiver strategies that is unspecific or does not fit other appraisal codes. Participant descriptions of what they would not do as parents.	<i>Hypocrisy, it's gonna happen, you don't get me</i>	
Contexts of ATOD use: Circumstances (location, social setting, and occasion) surrounding real or hypothetical ATOD use.			
Location: "in the house"	In a private residence		Note than when used to code context-specific rules, the acceptable location is coded. Family parties are a convergence of location, social setting, and occasion.
Location: Outside	Outdoors or in a public uncontrolled space		
Social Setting: Family	ATOD use in the family's home or accompanied by family members		
Social Setting: Friends/peers	ATOD use with friends or peers		
Occasion: Party	ATOD use at peer parties or unspecified parties	<i>Family party</i>	
Occasion: Special occasion	ATOD use on special occasions such as holidays, birthdays, etc. ATOD use motivated by out-of-the ordinary positive circumstances	<i>Family party</i>	
Occasion: "Just to drink"	ATOD use outside a celebration or social gathering. ATOD use without clear external motivation or corresponding social occasion		
Family Party	ATOD use at family parties		
Risks and consequences: participant-identified risks of ATOD use to teens			
Long-term health risks	Long-term risks identified by participants such as organ damage, weight gain	Health risks associated specifically with <i>Sexual health, drinking and driving, or acute injury</i>	

APPENDIX D (continued)

sexual health	Health risks associated with sexual activity: pregnancy and STIs		
Drinking and driving	References to drinking and driving or ATOD-related crashes		
Acute injury	Non vehicle-related injuries and medical emergencies, including death, such as falls, overdose, and alcohol poisoning		
Police, arrest, incarceration	Real or hypothetical encounters with law enforcement, acknowledgement of legal consequences of substance use or underage drinking		
"We don't know how they get"	Identifying other people as a source of risk when drinking or using other substances. Lack of trust in others while drinking.	Specific references to <i>fighting/violence</i> or <i>sexual assault/harassment</i>	
Fighting/violence	Physical fights and violence in drinking contexts	Fighting and violence unrelated to ATOD use	
Sexual assault/harassment	Rape, unwanted touching, or other forms of sexual assault/harassment in drinking settings or while using alcohol or other substances		
Addiction/dependence	Alcoholism or other substance addiction identified as a risk of ATOD use	Adult addiction/dependence unless used as an example of possible outcomes of underage drinking	
Regret	Regretting things done while drinking or using other substances that are not specified by other risk/consequence codes		

APPENDIX D (continued)

Intergenerational contexts: Present or historical circumstances that shape parent behavior, thereby indirectly impacting youth experiences of ASP			
Generational differences	Comparing and contrasting current contexts of ATOD use with previous generations' context in adolescence (e.g. "it was legal for them", "they didn't have money for alcohol")		
Caregiver resources and capacity	Participants' speculation about adults' parenting preparation and resources (or lack thereof) and its influence on their ATOD-specific strategies (e.g. "they don't know how to talk about it" "my mom had me too young")	Hardships described by participants not explicitly related to their ATOD-specific strategies or youth decision-making	
Intergenerational cycles	Intergenerational cycles of ATOD use/abuse. Instances of youth repeating parents' behaviors		
"they were young once"	Participants' perceptions of caregivers as empathetic to the experience of young people. (e.g., "I'm sure they were curious too." "They probably remember what it was like to feel left out")	Descriptions of previous generations' contexts of underage drinking (<i>generational differences</i>)	
Other family processes			
Cultural identity	Attributing beliefs, behaviors, and attitudes to a cultural group (e.g. "Latino parents always..."). References to personal or familial cultural identity or country of origin (e.g. Mexico, Puerto Rico).		

APPENDIX D (continued)

Family support	Descriptions of feeling supported by family members. Positive, warm relationships between family members	Interactions and communication specifically related to ATOD	
Appraisal of youth ATOD use: Participant perceptions of acceptable/unacceptable youth ATOD use			
"Handle it"	Participant perceptions of responsible drinking behavior. "handle your drink" "know when to stop" "act right."		
Excessive use	Youth ATOD use characterized as problematic by its quantity (binge drinking), or frequency (every day, "all the time"). Participants' negative descriptions of drunkenness and intoxication.	Descriptions of alcohol or substance use not identified as problematic. Behavior specifically identified as <i>alcoholism/ dependence</i> .	
"acting crazy"	Behavior under the influence of alcohol or other drugs described by participants as "crazy," "reckless," "stupid," etc.	Descriptions of binge drinking or drunkenness (<i>excessive use</i>) without accompanying reckless behavior. Risks of <i>fighting/violence, sexual assault</i>	
Fulfilling responsibilities	Appraisal of drinking behavior in relationship to a person's current responsibilities. Parenthood, school, employment, financial gain, etc. as a gauge for whether or not ATOD use is acceptable. (e.g., not drinking to be able to parent effectively, drinking because you work hard)	Communication with caregivers focused on future goals and responsibilities.	

APPENDIX E

IRB approval

UNIVERSITY OF ILLINOIS AT CHICAGO

Office for the Protection of Research Subjects (OPRS)
Office of the Vice Chancellor for Research (MC 672)
203 Administrative Office Building
1737 West Polk Street
Chicago, Illinois 60612-7227

Approval Notice

Initial Review (Response To Modifications)

December 18, 2015

Amber Kraft (Castellon)

Psychology

1007 West Harrison Street

M/C 285

Chicago, IL 60607

Phone: (808) 321-0578

RE: **Protocol # 2015-1049**

**“An Ecological Understanding of Latino Youths Description and Appraisal of
Alcohol-Specific Parenting Practices in Humboldt Park”**

Dear Ms. Kraft (Castellon):

Your Initial Review (Response To Modifications) was reviewed and approved by the Expedited review process on December 17, 2015. You may now begin your research

Please note the following information about your approved research protocol:

Protocol Approval Period: December 17, 2015 - December 16, 2016

Approved Subject Enrollment #: 45

Additional Determinations for Research Involving Minors: The Board determined that this research satisfies 45CFR46.404', research not involving greater than minimal risk. Therefore, in accordance with 45CFR46.408', the IRB determined that only one parent's/legal guardian's permission/signature is needed. Wards of the State may not be enrolled unless the IRB grants specific approval and assures inclusion of additional protections in the research required under 45CFR46.409'. If you wish to enroll Wards of the State contact OPRS and refer to the tip sheet.

Performance Sites: UIC

Sponsor: None

PAF#: - Not applicable

Research Protocol:

- a) Alcohol-Specific Parenting, Research Protocol; Version 1, 09/28/2015

Recruitment Materials:

- a) Screening Tool: Participant Submitted; Version 1, 09/28/2015
- b) Flyer 2 (tear-off); Version 2, 11/09/2015
- c) Flyer 2, Version 2, 11/09/2015
- d) Screening Tool: Telephone; Version 2, 11/09/2015
- e) In-Person Recruitment Script; Version 3, 12/08/2015

Informed Consent:

- a) Informed Consent; Version 2, 11/09/2015

Assent:

- a) Youth Assent Form; Version 2, 11/09/2015

Parental Permissions:

- a) Parent-Guardian Informed Consent; Version 2, 11/09/2015
- b) Parent-Guardian Informed Consent (Spanish); Version 2, 11/09/2015
- c) A waiver of parental permission has been granted under 45 CFR 46.408(c); minor risk, parents will give passive consent; those parents who do not want their child to participate will sign the opt-out form

Your research meets the criteria for expedited review as defined in 45 CFR 46.110(b)(1) under the following specific categories:

(6) Collection of data from voice, video, digital, or image recordings made for research purposes., (7) Research on individual or group characteristics or behavior (including but not limited to research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies.

Please note the Review History of this submission:

Receipt Date	Submission Type	Review Process	Review Date	Review Action
10/12/2015	Initial Review	Expedited	10/13/2015	Modifications Required
11/16/2015	Response To Modifications	Expedited	11/19/2015	Modifications Required
12/09/2015	Response To Modifications	Expedited	12/17/2015	Approved

Please remember to:

→ Use your **research protocol number** (2015-1049) on any documents or correspondence with the IRB concerning your research protocol.

→ Review and comply with all requirements on the OPRS website under:

"UIC Investigator Responsibilities, Protection of Human Research Subjects"
(<http://tiger.uic.edu/depts/ovcr/research/protocolreview/irb/policies/0924.pdf>)

Please note that the UIC IRB has the right to seek additional information, require further modifications, or monitor the conduct of your research and the consent process.

Please be aware that if the scope of work in the grant/project changes, the protocol must be amended and approved by the UIC IRB before the initiation of the change.

We wish you the best as you conduct your research. If you have any questions or need further help, please contact OPRS at (312) 996-1711 or me at (312) 996-9299. Please send any correspondence about this protocol to OPRS at 203 AOB, M/C 672.

Sincerely,

Anna Bernadska, M.A.

IRB Coordinator, IRB # 2

Office for the Protection of Research Subjects

Enclosures:

- 1. Informed Consent Document:**
 - a) Informed Consent; Version 2, 11/09/2015
- 2. Assent Document:**
 - a) Youth Assent Form; Version 2, 11/09/2015
- 3. Parental Permissions:**
 - a) Parent-Guardian Informed Consent (Spanish); Version 2, 11/09/2015
 - b) Parent-Guardian Informed Consent; Version 2, 11/09/2015
- 4. Recruiting Materials**
 - a) Screening Tool: Participant Submitted; Version 1, 09/28/2015
 - b) Flyer 2 (tear-off); Version 2, 11/09/2015
 - c) Flyer 2, Version 2, 11/09/2015
 - d) Screening Tool: Telephone; Version 2, 11/09/2015
 - e) In-Person Recruitment Script; Version 3, 12/08/2015

cc: Michael E. Ragozzino, Psychology, M/C 285
Michele Kelley, Faculty Sponsor, Psychology, M/C 923

VITA

AMBER KRAFT
AKRAFT3@UIC.EDU | 808-321-0578

EDUCATION

EXPECTED 2017

M.A. UNIVERSITY OF ILLINOIS AT CHICAGO
Community and Prevention Research, Psychology

2009

B. A. WHITWORTH UNIVERSITY
Psychology

RESEARCH EXPERIENCE

**RESEARCH ASSISTANT, NEIGHBORHOODS AND HEALTH
RESEARCH (PI: Shannon Zenk, Ph.D., UIC College of Nursing)**

05/2015 – PRESENT

Activity Spaces and Measuring Environmental Exposure: Supported multiple phases of the research process, including instrument design, data collection, and statistical analysis, for an investigation comparing multiple methods for measuring activity spaces and environmental exposure.

Early Adoption of 606 Bloomingdale Trail: Coordinated data collection team and lead data analysis for a longitudinal study of health benefits and early adoption of the local 606 Bloomingdale Trail.

OFICINA DE PROYECTOS PARA BOLIVIA, Cochabamba, Bolivia
07/2011 – 07/2013

Directed original research to orient youth services within the Zona Sud of Cochabamba, an interface between impoverished rural and urban districts in the city's periphery

Coordinated members of multi-disciplinary team to develop instruments, methodology, and data collection training program to evaluate Salesian projects in multiple cities (schools, orphanages, technical schools, parishes, etc.)

TEACHING EXPERIENCE

TEACHING ASSISTANT: UIC

09/2013-PRESENT

Psychology 100 (Fall 2013) discussion section leader, **Psychology 231:** Community Psychology

Public Health 360 (Spring 2014): Local Citizenship and Community Health Initiatives

Coordinated and supervised student practicum experiences in Humboldt Park schools and community health organizations

COMMUNITY ENGAGEMENT

COMMUNITY PARTNERSHIP: PUERTO RICAN CULTURAL CENTER (PRCC)

06/2014-PRESENT

Community Intervention Practicum (09/2014-05/2015): Humboldt Park Coalition Against Underage Drinking

Lead interactive dialogues with high school students participating in PRCC Summer programs to reflect on local influences and community consequence of underage drinking

Provided data interpretation support to help coalition member understand and apply local Illinois Youth Survey data to local prevention strategies

Evaluation and Research Consultant (06/2015-Present): Communities as a Campus (CAAC)

Designed evaluation plan for college mentorship program serving students at Roberto Clemente Community Academy

Conducted needs assessment at Pedro Albizu Campos High School to inform college and career transition services for recent alumni

Ongoing program development and grant writing support of CAAC initiatives

PRESENTATIONS

Kraft, A., Dombrowski, R., & Kelley, M.A. (2016, November). Lessons learned from a community partnership for an undergraduate public health promotion course. American Public Health Association, Denver, CO.

Kraft, A. (2016, October). An ecological understanding of Latino youths' description and appraisal of alcohol-specific parenting practices in Humboldt Park. Midwest ECO Conference, Chicago, IL.

Suarez-Balcazar, Y., Hernandez, S.G., Bray, E., **Kraft, A.,** & Gomez, L. (2016, October). Incorporating the voices of diverse stakeholders to conduct culturally-anchored evaluations through mutually beneficial partnerships. Midwest ECO Conference, Chicago, IL.

Matthews, S.M., Zenk, S.N., Li Z., Xiang, A., **Kraft, A.,** & McKinnon, K. (2016, September). New methods for describing and measuring spatial-temporal exposure to multiple places: Developments from the Activity

Space and Contextual Measures of Environmental Exposures (ASCMEE) Study. Conference on Geospatial Approaches to Cancer Control and Population Sciences, Bethesda, MD.

Zenk, S.N., Matthews, S.M., Li, Z., **Kraft, A.**, Wyrwa, A., Nunez, J., & Xiang, A. (2016, September). Days and timepoints of GPS tracking needed to capture usual activity spaces for cancer prevention and control research: Results from the Activity Space and Contextual Measures of Environmental Exposures (ASCMEE) Study. Conference on Geospatial Approaches to Cancer Control and Population Sciences, Bethesda, MD.

Castellon-Kraft, A. (2016, May). Synthesizing Alternative Qualitative Research Training Through the Master's Thesis Project. International Congress of Qualitative Inquiry, Urbana-Champaign, IL.

Kelley, MA, Estrella, M, and **Castellon-Kraft, A** (2015, March). Sociopolitical Development and Community Well-being among Puerto Rican/Latino Activist Youth in Chicago, USA. Presented at the 4th Global Congress for Qualitative Health Research, Universidad Autónoma de Yucatán, Mérida, Mexico.

Kraft & Cloutier (2013, November). Community psychology abroad. Roundtable discussion presented at the Midwest ECO Conference, University of Illinois at Chicago.