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Acculturative Stress: The Experience of the Hispanic Immigrant

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Acculturative stress is the psychological impact of adaptation to a new culture. For Hispanics who come to the United States, there are a number of significant stressors that are likely to be pervasive, intense, and lifelong. Counselors need to learn the reality of the Hispanic immigrants and help them adapt to these stressors. This article defines and describes these aspects of acculturative stress.

The United States is becoming increasingly more multicultural as diverse racial and ethnic groups move to this country. Counterbalanced against the hopes and aspirations that draw people to this country is the inevitable cost of acculturative stress that taxes the psychological and physical resources of the newcomers. The adaptation process is indeed demanding as those unfamiliar with the dominant culture must master new social customs and a new language, and must learn to negotiate a complex bureaucratic system. These unrelenting demands inevitably take their toll.

This article attempts to present the topic of acculturative stress among Hispanic immigrants and outline possible implications for both practice and research. There has been considerable study on the broad, general topic of acculturation (Adler, 1975; Burnam, Telles, Karno, Hough, & Escobar, 1987; Clark, Kaufman, & Pierce, 1976; Cuellar, Harris, & Jasso, 1980; Garcia, 1981; Griffith & Villavicencio, 1985; Hall, 1973; Kunkel, 1990; Mainous, 1989; Marin, Sabogal, Marin, Otero-Sabogal, & Perez-Stable, 1987; Mendoza & Martinez, 1981; Miranda, Andujo, Caballero, Guerrero, & Ramos, 1976; Montgomery & Orozco, 1984; Olmedo, 1979; Olmedo, Martinez, & Martinez, 1978; Olmedo & Padilla, 1978; Padilla, 1980; Padilla, Olmedo, & Loya, 1982; Ponce & Atkinson, 1989; Rogler, Cortes, & Malgady, 1991; Romero, 1981; Sanchez & Atkinson, 1983; Smart & Smart, 1993; Szapocznik & Kurtines, 1980; Szapocznik, Scopetta, Kurtines, & Arnalde, 1978). Indeed, the study of acculturation has evolved to the point at which there are statistically reliable and valid measures of acculturation now avail-

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able. These instruments offer quantifiable indexes of both behavioral and psychological acculturation. In contrast, there has been little discussion of the lifelong, pervasive, and intense demands of the acculturation experience on the individual, which, for the purposes of this article, we label acculturative stress.

Therefore, it seems reasonable to explore both the sources and the results of these stresses. Naturally, not every Hispanic immigrant will experience intense acculturative stress as there are distinct and unique patterns among individuals. Nor is every Hispanic an immigrant. However, according to Suazo (1990), the large number of immigrants account for over 50% of this country's Hispanic population. Also to be noted are the great differences among the various subgroups of Hispanics, such as Mexican Americans, Cuban Americans, Puerto Ricans, Central and South Americans, and Spanish Americans. We anticipate that future articles will discuss the acculturative stresses of each of these Hispanic subgroups.

At this particular time in U.S. history, a combination of geopolitical, economic, and demographic trends has combined to bring an unusually high number of Hispanic immigrants to the United States. From 1983 through 1992, 8.7 million legal immigrants entered the United States, the highest number in any 10-year period since 1910. Whereas immigrants in previous generations came mainly from Europe, markedly greater numbers now come from Mexico and Central and South America. Illustrating this trend is the fact that in 1940, 70% of immigrants entering the United States came from Europe; in 1992, 15% came from Europe, 37% from Asia, and 44% from Latin America and the Caribbean (Aikman & Jackson, 1993). A record 1.8 million immigrants were granted permanent residence in 1991. Of these, some 22% were from Mexico, the leading country of origin of those who immigrated to the United States. No one knows exactly how many illegal immigrants are in the United States, but the Immigration and Naturalization Service estimates that between 200,000 and 300,000 arrive each year; the greatest number come from Mexico, El Salvador, and Guatemala. Thus some 790,000 legal and 200,000 illegal immigrants have entered this country from Latin American countries (primarily Mexico) each year during the past several years.

The United States has a rich and honored tradition of providing newcomers with opportunities for education, wealth, and upward social mobility. Immigrants have, in turn, added immeasurably to the national life of this country. Since 1901, 30% of U.S. Nobel Prize winners have been immigrants. In recent years, however, newcomers to the United States have been less well educated and have brought fewer resources. Thomas and Murr (1993) re-

ported that the 19.3 million legal, illegal, and amnestied aliens accepted into the United States since 1970 used \$50.8 billion in government services in 1992. These newcomers were estimated to have paid \$20.2 billion in taxes, imposing a net burden of \$30.6 billion in social and welfare costs on the United States. These authors further estimated that an average cost of \$50 billion per year in outlay for services to immigrants will continue for the next 10 years. These estimated costs arise, at least in part, because of a decline in the skills and educational level of recent immigrants. Wright (1993) noted that Mexican-born immigrants have the lowest educational attainment of all immigrants from the 38 different countries of origin listed in a recent U.S. Department of Commerce report. Only one in four Mexican immigrants had a high school diploma, a far lower percentage than that achieved by Greekborn or African-born Americans, who reported high school completion rates of 74% and 47%, respectively.

As can be seen from this thumbnail sketch of statistics, heavy demands for counseling services will be placed on America's educational, employment, medical, and social service agencies as the attempt is made to integrate Hispanic immigrants into the mainstream of American life. Counselors will play a major role in helping Hispanic immigrants cope with the acculturative stress imposed by the move to the United States.

Stress is created when environmental or internal demands tax one's ability to cope and adapt (Dohrenwend & Dohrenwend, 1969, 1974). Acculturation, the process of adapting to the rules and behavioral characteristics of another group of people, brings many challenges (Berry, 1980; Cervantes & Castro, 1985; Golding, Burnham, Timbers, Escobar, & Karno, 1985; Rogler et al., 1991; Romero, 1981). Acculturative stress varies depending on the differences between the cultures. For Hispanics who come to the United States, there are a number of significant stressors that are likely to be pervasive, intense, and lifelong (Argueta-Bernal, 1990). Coping with loss is central to the acculturation of most Hispanic immigrants because immigration to the United States means leaving behind a way of life that is familiar (Griffith, 1983).

Smart and Smart (in press) identified six distinctive characteristics that differentiate Hispanic immigrants from their White, Protestant, Northern and Western European counterparts. These differences are the Hispanic immigrants' (a) tendency to accept and integrate with people of varying skin color, (b) emphasis on social and family ties, (c) illegal immigration, (d) geographic proximity to the United States, (e) legacy of armed conflict, and (f) reliance on physical labor. These distinctive differences suggest that there may be unique needs for understanding and responding to the acculturative stress experienced by Hispanic immigrants.

Moyerman and Forman (1992), in a meta-analytic study that included an analysis of 49 studies of acculturation and adjustment, found that "stress and anxiety may be acute at the very beginning of the acculturation process, and it appears to become less pronounced for Asian Americans and those with sufficient economic resources" (p. 176). That Hispanic immigrants may have a more difficult adjustment is also implied in the following statement by Ponterotto and Casas (1991):

Demographic studies indicate that overall, the Hispanic population is younger, less educated, poorer, and more likely to live in inner-city neighborhoods than the general population. These life stressors, coupled with their linguistic minority status, make Hispanics particularly vulnerable to psychological problems requiring counseling services. (p. 18)

Immigration is included in the *Diagnostic and Statistical Manual-III* Revised (American Psychiatric Association, 1980) as an example of a possible pervasive stressor. Including immigration on the Adaptation to Stress scale is evidence of the recognition that the experience of moving to a new culture is, indeed, stressful. Using the conceptual framework of acculturative stress, this article lists and discusses seven aspects of the adaptation process and the resulting psychological costs to the individual.

1. ACCULTURATIVE STRESS AFFECTS PHYSICAL HEALTH

A good deal of research has linked sociocultural factors to disease etiology (Lazarus, 1974; Thoits, 1982). Three factors can be identified that have been empirically shown to precipitate physical illness. These themes that are associated with the causation of illness are sociocultural mobility, behavior patterns, and stressful life events. According to Syme (1984), a common denominator of these themes is disrupted social ties. By definition, acculturation carries with it the notion of disrupted social ties as one enters a new dominant culture (Vargas-Willis & Cervantes, 1987). Hence it is reasonable to expect greater risks for physical illness because of the psychosocial stress imposed by acculturation (Kobasa, 1979; Syme & Berkman, 1981).

The idea that stressful life events are linked to physical illness is borne out by Rabkin and Streuning (1976), who reported that "life events may account for at least 9 percent of the variance in illness" (p. 1015).

Smith (1985) has hypothesized that racial minorities from lower socioeconomic backgrounds experience a greater number of stressful life events than a comparable group of majority Americans from the same social class. The major contributing factor would be stressor stimuli from racial sources.

As Cleghorn and Streiner (1979) have observed, stress produces a heightened awareness of symptoms and a greater focus on physical illness than would otherwise be the case. Such a preoccupation with symptoms of physical illness reduces the level of health and slows the recovery from disease and injury. An understanding of acculturative stress is therefore of great importance to counselors who are concerned about the psychological and physical well-being of their clients (Pape, Walker, & Quinn, 1983). Recovery is slowed when clients are under stress, and, in the interest of successful counseling, levels of acculturative stress must be monitored and managed.

Also of interest to counselors is the fact that there are culturally patterned ways of responding to stress. Cultures that tolerate very little direct expression of feelings and complaints tend to express their psychopathology in terms of somatic complaints (Arce & Torres-Matrullo, 1982; Smith, 1985). Because there are a variety of cultural responses to stress, it becomes important for counselors to understand the role of culture if they are to meet the challenges of acculturative stress.

2. ACCULTURATIVE STRESS AFFECTS DECISION MAKING

People who experience high levels of stress and anxiety tend to narrow the range of options that they perceive as viable. As pressures mount, "tunnel vision" restricts the perception of the choices available, and hence some otherwise workable options are excluded from consideration. An extreme example of such restricted options has been observed in clinical work with clients with suicidal ideation. For such individuals, suicide may begin to loom as the only available way out or solution to a problem when fear, depression, or anxiety blot out other solutions to the stressful situation. At such times, it becomes the counselor's responsibility to help push back the self-imposed restriction of options that has blinded the client to a whole range of possible solutions. The fact that acculturative stress is often pervasive, intense, and of long duration can markedly cloud the decision-making process. Hinkle (1974) and Mechanic (1974) reported that people who experienced a high intensity or frequency of illness saw their environment as demanding, frustrating, and challenging, and decreased their ability to cope effectively. It is such stress that impairs one's ability to make decisions with clarity and resolution and to carry them out effectively.

3. ACCULTURATIVE STRESS IMPAIRS OCCUPATIONAL FUNCTIONING

In a competitive labor market, skills must be developed to a high degree to secure and hold a job. Hispanic immigrants who must cope with constant acculturative stress are at a disadvantage when competing with a nonstressed colleague for job entry and job maintenance. Improved psychosocial functioning is correlated with improved vocational functioning. Racial and ethnic minorities who endure the rigors of acculturative stress are also likely to be the very ones who already face the considerable challenge of language barriers and lack of education. As the U.S. economy becomes more tradesensitive to world markets, layoffs in vulnerable sectors of the economy will become more common. Likewise, as technology drives greater and greater portions of the economy, more restrictive educational requirements will be imposed on workers in America. Unskilled immigrants will be under more and more acculturative stress to meet these higher standards. As stress increases, already strained work capacity is in danger of further erosion. Loss of work then threatens to cycle underprepared Hispanic immigrants into chronic underemployment or unemployment, which, in turn, maintains high levels of stress.

4. ACCULTURATIVE STRESS CONTRIBUTES TO ROLE ENTRAPMENT AND STATUS LEVELING

Another aspect of acculturative stress that counselors must take into consideration is that of role entrapment. This phenomenon occurs when minority persons become caught in the web of stereotypes and expectations imposed by the dominant culture. Role entrapment can be an insidious but powerful force in "keeping minorities in their place." Negative stereotypes are often pervasive and deeply ingrained in the dominant culture, and it is not surprising that minority persons succumb to role entrapment. As Royce (as cited in Smith, 1985) stated,

It is often easier to accept the false classification than to insist on being recognized as an individual with many aspects. Fighting role entrapment elicits anger and resentment on the part of the dominant group members. No one likes having to revise categories or to relinquish beliefs, and no one appreciates being put in the awkward position of being wrong or appearing to be a bigot. Finally, the dominant who is challenged in this way might easily resolve the

dilemma by saying that the token is "uppity" and "doesn't know his/her place." (p. 547)

The hopes and aspirations for a rewarding life that bring Hispanic immigrants to this country are in danger of erosion when newcomers succumb to role entrapment. This phenomenon occurs when members of the dominant culture categorize immigrants according to widely held, but demeaning, stereotypes. Stereotypes based on such characteristics as limited language ability, skin color, speech, and lower educational level tend to stigmatize immigrants as less competent (Kanter, 1977).

A second aspect of role entrapment—status leveling—also creates problems for minorities (Royce, 1982). Status leveling is the tendency for dominant group members to be oblivious to valid differences between various members of the minority group and to assign characteristics of the lowest common denominator to all minorities. Thus the token minority person in the work or social setting is automatically perceived to fit the same stereotypes that are associated with the token's stereotype in the population at large.

Role entrapment and status leveling have been documented by the authors in their work with minorities in a midwestern community in which members of the dominant culture had a tendency to stereotype Mexican immigrants as primarily suited for agricultural labor, unskilled construction, or janitorial and maintenance work. Again and again, those of the dominant culture questioned attempts to place Hispanics in jobs that were not in line with common stereotypes. Reluctance, detailed questioning, and even anger were shown when attempts were made to place these newcomers in a broader range of positions than those that were the usual practice.

Role entrapment and status leveling bring with them a heightened emotional strain for the minority person. It is therefore understandable when minorities begin to adopt a "what's the use?" attitude and to settle for postponement or abandonment of job advancement. Those discriminated against may acquiesce to such feelings as "things will be better for the next generation" and "my job success was not meant to be." Hispanics may be particularly prone to such fatalistic thinking (Ross, Mirowsky, & Cockerham, 1983; Smart & Smart, 1991).

Because counseling theory and practice have always advocated strong support for the highest possible level of community adaptation and integration, role entrapment stands in direct contrast to the aims of the profession. Such stereotyping has a tendency to force a lowest-common-denominator sameness on minority persons and to push them into social, if not physical, barrios that tend to isolate and mitigate against integration.

5. ACCULTURATIVE STRESS MAY CONTRIBUTE TO STRAINED AND INEFFECTIVE COUNSELOR-CLIENT RELATIONS

In cases in which Hispanic immigrants do come in contact with counseling service providers, successful outcome is less likely when differences between counselor and client are greatest. The demarcation between counselor and client is more vivid and explicit in interethnic and interracial relationships than is otherwise the case, and bridging the differences puts additional stress on the relationship (Atkinson, 1983; Kunkel, 1990; Pomales & Williams, 1989; Ponce & Atkinson, 1989; Sanchez & Atkinson, 1983; Wampold, Casas, & Atkinson, 1981).

For their part, Hispanic immigrants may approach social service agencies with suspicion and mistrust, regardless of the ethnic or racial background of the counselor (Acosta, 1979). There may be a testing period when the client seeks to determine whether the counselor is genuinely interested in creating a therapeutic alliance. Likewise, from the perspective of the counselor, it can be a tenuous or even unpleasant encounter when forced to look at the hardship and pain that unjust social practices perpetuate (Casas, Ponterotto, & Guitierrez, 1986; Vander Kolk, 1977). Counselors may feel overwhelmed by the myriad of problems and needs presented by their clients. Further, it is difficult, if not impossible, for the counselor to understand fully the Hispanic client's lifestyle and the decisions and actions that the client undertakes.

If counselors' efforts seem half-hearted or in some way muted because of the complexity and pervasiveness of the problems that are presented, clients, in turn, may sense this discouragement and feel alienated or brushed off by an uncaring and unresponsive system.

Because Hispanics are accustomed to closer familial and societal relationships (Keefe, 1980), Anglo culture may appear to be cold, uncaring, and bureaucratic. This social distance may tend to draw Hispanics together in their own barrios but may have the simultaneous effect of isolation from mainstream American culture, including any attempts to involve them in counseling interventions. As Hispanics seek the comfort and familiarity of their own personal style of interacting, support from Anglo-dominated schools, work settings, health care, and other support agencies is reduced.

Because of the Hispanic belief that *la vida es dura* (life is hard), it is more common for Hispanics to retreat from what might be genuinely helpful psychosocial support services and, without such help, go it alone. Such a retreat is the Hispanic expression of courage and dignity in the face of what

is seen as unavoidable hardship and suffering. Such resignation and acceptance of stressful situations may, however, impede and prolong or, worse yet, intensify otherwise treatable mental and physical health problems.

Hispanic men may have an added barrier to building successful therapeutic relations because of what Rivera (1983) identified as a macho attitude of independence. Hispanic males are taught by cultural traditions to shoulder a great deal of responsibility for providing all of the resources for the family. With this strong sex-role expectation comes a deep sense of failure when the Hispanic male cannot be a successful wage earner. The fear of being seen as weak or inadequate during the difficult circumstances of immigration may keep Hispanic men from seeking the very help that could aid in ameliorating acculturative stress. Unfortunately, this fear of losing respect causes Hispanic males to postpone or forego proper treatment for physical, mental, or emotional problems. Lack of treatment, in turn, prolongs and intensifies acculturative stress.

Another hindrance to the formation of a therapeutic alliance may be due to differences in religious beliefs between the Hispanic immigrant and the counselor. Because of strong religious beliefs, psychosocial stressors may be seen as punishment for real or imagined sin or wrongdoing and may be seen as an expression of God's will. A religious interpretation of mental and physical problems may also lead to a heavy reliance on propitiatory religious rituals that may take the place of medical or psychotherapeutic intervention (Garza, 1986). In extreme cases, a religious view of psychosocial stressors may impede or replace the counseling process, because to seek such secular treatment may be seen as thwarting God's will or, even worse, playing God and courting God's vengeance. Counselors must be sensitive to the immigrant's belief system that may provide an important framework for the understanding of pain and suffering. Efforts should be made to integrate such a belief system into the therapeutic process rather than to challenge or ignore these aspects of the immigrant's conceptual framework.

Instead of a tenuous and fragile commitment to counseling and at the other end of the continuum of intensity in the relationship-building process, Hispanic immigrants may have a tendency to become overly compliant, bestowing exaggerated respect as a consequence of culturally based deference toward perceived authority figures (Kunkel, 1990). Both counselor and client become engaged in a dimly perceived interaction that ranges from mistrust and noncompliance on one hand to overinvolvement and stultifying dependence on the other hand.

As Comas-Diaz (1990) has commented,

We can assume life as a lower socioeconomic minority requires an expanded repertoire of coping mechanisms as compared with the mainstream of American society. Sorting out the pathological defenses from adaptive coping may hinder the process of understanding the client's lifestyle. (p. 421)

Avoidant strategies that the immigrant client may employ as a protective device in day-to-day interaction are counterproductive when the client engages in the job hunt or seeks medical care. In such situations, the client must generate enough strength and assertiveness to meet the public in an adaptive fashion.

6. ACCULTURATIVE STRESS IS RELATED TO LACK OF ROLE MODELS

Because of the pervasive, intense, and long-term nature of acculturative stress and because of society's ingrained discrimination, relatively few Hispanic immigrants rise to positions as role models. Without role models, the hopes and aspirations for social and career success take on an artificial and masquerade quality. As Bandura (1977) has shown, modeling is a powerful teaching-learning paradigm, and without the immediacy and power of real-life, flesh-and-blood heroes and heroines, acculturating immigrants are relegated to a world in which success remains more hoped for and make-believe than real.

When role models are available to the rank and file and can be seen and spoken with on a daily basis as parents, teachers, and work supervisors, another aspect of acculturative stress can be set aside. In the absence of role models, minority persons are left without living examples and must rely on secondhand attempts that must feel more like an awkward imitation of success than the easy and natural adoption of speech, mannerisms, and work habits that are a free-flowing expression of one's native culture.

Another aspect of the lack of role models concerns the gender role reversal that occurs in some Hispanic immigrant families. Many Hispanic families, especially those from rural areas, consider the husband to be the sole provider of support and the wife to be a full-time homemaker and mother (Espin, 1987). On arriving in the United States, women are often able to find employment using their cooking, sewing, and other domestic skills, whereas their husbands remain unemployed (Comas-Diaz, 1990). If the wife has received more education than the husband, she might have also received more English language training, thus making her a more marketable job applicant. Gender roles that were well defined, environmentally adaptive, and well

accepted in the native country may be forced to undergo changes because of the demands of the American job market.

However, there is growing evidence that sex roles are not as well defined as previously thought. Indeed, Ginorio (1979) empirically demonstrated that whereas males tend to acculturate at a faster rate than females, women tend to acculturate faster when it comes to changing gender roles.

Another type of role reversal, which has potential for family conflict, is the use of children as interpreters and translators for their parents. Not only is this a violation of privacy and an imposition of inappropriate responsibility on children, but it reverses the role of parent and child (Plata, 1989). In a culture that places great value on respect for one's elders and parents, family roles are thus violated. When this role reversal is added to the distress that the parents may be feeling about their children's rapid Americanization and concurrent loss of the traditional culture, basic, fundamental, everyday role expectations and loyalties are thrown into chaos.

7. ACCULTURATIVE STRESS MAY BE INCREASED WHEN THERE ARE MINIMAL REWARDS FOR LEARNING ENGLISH

Hispanic immigrants demonstrate a remarkable language loyalty and have shown the propensity to maintain Spanish as the primary language long after immigration to North America. The Spanish language forms a central part of Hispanic identity, and there are estimates that by the year 2000 (Weyr, 1988), Spanish will be as common as English in the United States. As evidence of the importance of the Spanish language, there are now 311 Spanish-speaking radio stations in the United States, with an additional three Spanish-language television networks and 350 Spanish-language newspapers.

The following *corrida* (traditional epic ballad), of which there are hundreds, has a theme of love of homeland and its language, songs, and customs. Broadcast over Spanish radio across the United States and Mexico, these ballads attest to the widespread use of the Spanish language in the United States (Davis, 1990).

Recordando A Mexico No se fijen, amigos, si grito, si a veces suspiro, si canto or si lloro, es que estoy recordando a Mexico mi patria bendita, mi fe y mi tesoro. Remembering Mexico
Pay no attention, friends, if I shout,
If at times I sigh, sing, or cry,
It's because I'm remembering Mexico
My blessed homeland, my faith, my treasure.

Because of Mexico's geographic proximity to the United States, Mexican immigrants regularly travel back and forth across the border. This constant contact tends to reinforce the continual use of the Spanish language and invokes the "lollipop principle." According to this folk adage, before one is willing to give up one's lollipop (something at hand), something better must be offered in exchange. As applied to Hispanic immigrants, the question must be raised as to what rewards can be offered to those who expend the time and energy to master a second language. If little can be offered, then Spanish will continue to be the primary, if not exclusive, language for many Hispanic immigrants. Unfortunately, when English is not learned, job opportunities and full integration into the dominant culture remain out of reach.

IMPLICATIONS FOR COUNSELING AND RESEARCH

There is a growing body of literature that addresses the theory and practice of counseling Hispanic clients. No clearly defined set of techniques that specifically applies to Hispanic immigrants has yet been defined, but the recent work of Atkinson, Thompson, and Grant (1993) is a major step forward. Opinion runs the gamut from those who hold that various counseling techniques can be universally applied (Fukuyama, 1990) to those who believe that techniques must be specifically adapted to the client's culture (Atkinson, Morten, & Sue, 1989; Atkinson et al., 1993; Palacios & Franco, 1986; Pedersen, Draguns, Lonner, & Trimble, 1989; Sue & Sue, 1990). The great majority of those who do research and write on the topic of cross-cultural counseling hold the view that counseling techniques should be modified to match the specific culture of the client. This is borne out by Ponterotto and Sabnani (1989), who identified the most frequently cited books, book chapters, and articles in the literature of multicultural counseling. A main theme that runs through these classics is the need for cultural sensitivity in counseling persons of racial/ethnic minority backgrounds.

Such sensitivity is necessary in counseling immigrants, as is clear from Atkinson, Morten, and Sue (1989) and Atkinson, Thompson, and Grant (1993), who have taken the needs of Hispanic immigrants into account in the development of their cube model of counseling interventions. Both works

cite the need for a variety of counseling roles that go beyond that of traditional counseling and psychotherapy. The latter work proposes a three-dimensional model of counseling that incorporates the factors of (a) acculturation, (b) locus of problem etiology, and (c) counseling goals. This framework, we believe, addresses the needs of Hispanic immigrants who must often deal with everyday stresses of survival at the more basic level of Maslow's hierarchy of needs. Using the model of Atkinson et al. (1993), the issues raised in the present article can be addressed if counselors assume the roles identified in the cube model: advisor, advocate, facilitator of indigenous support systems, facilitator of indigenous healing systems, consultant, change agent, counselor, or psychotherapist. For example, the cube model calls for the role of advisor, advocate, and facilitator of indigenous support systems when the client is low on the acculturation dimension, as many immigrants are.

Atkinson et al. (1993) justified the role of advisor, a role that they claimed is "not sanctioned by the profession and eschewed by most practitioners" (p. 263) as one which is often necessary as a preventive, helping role for external problems experienced by the unacculturated person. The following quotation illustrates an application of the model:

Discrimination and oppression, however blatant and pervasive, may not be easily recognized by those who have limited experience dealing with American mainstream culture. This is often true of low-acculturated individuals. . . . Very often, recent immigrants will be unaware of the potential problems that they are likely to encounter. Frequently, they have idealized views about what immigration to the United States means. To prevent (or reduce the impact of) the problems that may develop, low-acculturated clients need to be advised as soon as possible of their source and likely impact. (pp. 264-265)

A counseling intervention in the role of advisor would thus be an example of an intervention for a problem that is low on the acculturation continuum, oriented toward prevention on the remediation-prevention continuum, and oriented toward external on the locus-of-the-problem-etiology continuum.

Atkinson et al. (1993) gave examples of other problems specifically encountered by less acculturated Hispanic immigrants and explained how the cube model of interventions would address such issues. A strength of this model of counseling is the fact that it is a broad one, addressing problems that have their locus in society at large as well as problems that have their origin with personal deficits. Of all theories available at this time, this one appears to have the most potential for dealing with acculturative stress experienced by Hispanic immigrants.

A number of implications for research flow from the concept of acculturative stress of Hispanic immigrants. One of the most important of these

research issues is the heterogeneity of the group of people classified as Hispanic. The term has had a blanket application, stemming largely from the U.S. Census Bureau's use of this census category since 1970. Such a broad-brushed application of the term has had the effect of blurring distinctions between the wide variety of peoples and cultures that hold in common the Spanish language and an identity with the cultural traditions of Spain. Research must be done that will recognize the rich individual and national differences within the overarching, overly inclusive term Hispanic.

Gender and age differences with reference to acculturative stress must also be investigated. Gender issues and sex roles in the American society and the work place, in particular, continue to draw national attention. Acculturation into the ever-changing milieu will not be easy, and research must be undertaken to help explain its dynamics. Likewise, American sociodemographic changes with regard to age are striking. The integration of a set of relatively young Hispanic immigrants into a society that has been unmistakably molded by a large cohort of now-aging baby boomers raises questions regarding work roles and identity for both host society and newcomers. The nature and intensity of stress for different age groups should be studied.

Investigation of the effectiveness of traditional stress management techniques with immigrant populations should be undertaken. Interventions with such techniques as cognitive restructuring, assertiveness, social skills, and wellness training need to be studied with immigrants who represent a variety of levels of acculturation.

Different research methodologies including both quantitative and qualitative designs should be used to investigate stress reduction interventions. Guidelines for research methodology in racial/ethnic minority counseling, as given by Ponterotto and Casas (1991), should be followed.

The negative effects of stress as well as the possible benefits of adaptive coping, psychological hardiness, and eustress should be investigated. The adaptive, healthy coping techniques of immigrating Hispanics should be catalogued and studied so as to teach better coping styles to members of the host culture.

Lastly, research hypotheses that test Atkinson et al.'s (1993) cube model for counseling racial/ethnic minorities should be identified and tested. At a minimum, measures of each of the three counseling dimensions (acculturation, goals of helping, and locus of problem etiology) should be designed and tested. In addition, a more specific and, when possible, operationally defined set of characteristics for each of the eight counseling roles should be devised and tested for outcomes with immigrant groups.

The work of the counselor must be done in harmony with and as a reflection of the society in which it is embedded. The emerging reality of U.S.

society is that of cultural diversity and rapidly increasing numbers of Hispanics. Reality for many Hispanic immigrants includes the challenge of acculturative stress. The challenge for the counseling profession is to find, and apply, counseling techniques that will ameliorate acculturative stress.

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