ABSTRACT

Data shows that length of stay in the U.S. and acculturation predict worse overall health among Latino immigrants. Childhood trauma (CT) has not been studied among Mexicans, although this possibly worsens the effects of immigration on health outcomes.

OBJECTIVES: To determine the prevalence of CT among patients in primary care (PCC) and mental health (MHC) clinics in border cities in Mexico and the U.S; to document the characteristics of parental bonding (PB) and the reactions of caregivers to the disclosure of maltreatment; and to study the relationship between immigration and acculturation and the prevalence of CT and PB.

METHOD: This is a cross sectional study involving 502 adult participants from PCC and MHC between U.S. and Mexican sites. Participants filled out self report questionnaires, which included the Childhood Trauma Questionnaire (CTQ), the brief Short Acculturation Scale for Hispanics, the Parental Bonding Instrument (PBI) accompanied by five questions regarding disclosure of trauma, and demographic data.

RESULTS: Multiple regression analysis involving 11 predictor variables (sex, nation, clinic type, age, income, education, PBI: father and mother PBI care and protect subscales (SC) and acculturation) were performed for each of the five CTQ SC and for the abuse and neglect composite CTQ scales. Significant predictors for abuse were family income; father and mother PBI care SC and a quadratic effect of acculturation. Significant predictors for neglect were education and the father, mother PBI care SC. Sex was a significant predictor for the sexual abuse SC. Income was a significant predictor for the abuse composite SC only. Acculturation was a significant predictor when treated as a quadratic predictor for the abuse composite SC only.
CONCLUSION: These preliminary results emphasis that childhood trauma in Latino Immigrants is importantly prevalent and has many predictive factors that can be targeted Through culturally competent MH services in both countries.