

ACCULTURATION AND ITS ASSOCIATION WITH HEALTH-RISK BEHAVIORS IN A RURAL LATINA POPULATION

Purpose: To evaluate the performance of proxy measures of acculturation and to examine the association between acculturation and selected health-risk behaviors.

Methods: Participants were 1062 Latina pregnant women who received prenatal care at clinics in San Joaquin County, California between 1999 and 2001. We used the receiver-operating characteristic (ROC) curve to characterize the sensitivity and specificity of proxy measures and regression analysis to examine health-risk behaviors.

Results: Using the ARSMA-II short version scale as a reference, age at immigration had the highest percentage of correctly classified individuals. Acculturation was significantly associated with a lifetime history of substance use, risky sexual behavior, low fruit consumption, and high fast-food meal consumption.

Conclusions: Acculturation is an important predictor of health-risk behavior among women. Further research is needed to better understand the phenomenon and to avert associated adverse health consequences. (*Ethn Dis.* 2005;15:733–739)

Key Words: Acculturation, Health-Risk Behaviors, Latinas

From the Department of Public Health Sciences, University of California, Davis (OCK*, LAB, BE-K, JWB, MBS); Department of Maternal and Child Health, University of California at Berkeley School of Public Health, Berkeley (JAW); Department of Internal Medicine and Center for Health Services Research in Primary Care, UC Davis School of Medicine, Sacramento (PSR, JAG); California.

*Dr. Kasirye is currently affiliated with Sacramento County Department of Health and Human Services, Sacramento, California.

Address correspondence and reprint requests to Marc B. Schenker, MD, MPH, Professor and Chair; Department of Public Health Sciences; University of California, Davis; One Shields Avenue, TB 168; Davis, CA 95616-8638; 530-752-5676; 530-752-3239 (fax); mbschenker@ucdavis.edu

Olivia C. Kasirye, MD, MS; Julia A. Walsh, MD; Patrick S. Romano, MD, MPH; Laurel A. Beckett, PhD; Jorge A. Garcia, MD, MS; Brenda Elvine-Kreis, MA; Jeffrey W. Bethel, BS; Marc B. Schenker, MD, MPH

INTRODUCTION

Acculturation is associated with higher rates of certain health-risk behaviors.^{1–3} Regional and national data show lower rates of smoking,^{4–9} alcohol consumption,^{10–13} and substance abuse^{14–18} among recent Latino immigrants compared to US-born Latinas and non-Hispanic Whites.

In the current study, we employed the short version of the ARSMA-II^{14,19–21} and the receiver-operator characteristic (ROC) method to compare the performance of different proxy measures of acculturation (ie, nativity, age at immigration, and length of US residence) in a sample of 1062 Latinas attending prenatal clinics in rural northern California and sought to determine whether the performance improved when these measures were combined. We also examined the association between the level of acculturation and selected health-risk behaviors that affect reproductive outcomes.

METHODS

We analyzed data from interviews conducted as part of the Study for Hispanic Acculturation, Reproduction, and the Environment (SHARE) a longitudinal study of pregnant Hispanic women. Participants for the study were recruited from obstetrics and gynecology clinics affiliated with San Joaquin General Hospital, a regional center that serves a largely rural population of Latinos of Mexican descent. Women

were contacted to inform them about the study, invite them to participate, and obtain informed consent. Fewer than 2% of the women contacted refused to participate. Women who agreed to participate in the study had a 45-minute personal interview with a trained bilingual/bicultural field worker. Interviews were offered in English or Spanish, depending on the participant's preference, between August 1999 and February 2001. Approximately 13% ($n=166$) of those who agreed to participate did not complete the required interview and were excluded from the study. All protocols were reviewed and approved by the University of California institutional review board. In the current analysis, we focused on information pertaining to acculturation and health-risk behaviors.

In addition to questions about demographic information, participants were asked to describe the occupation in which they had worked the longest. Responses were categorized into "farm work," "other work (not farm work)," or "never worked." Participants were also asked about their health habits and health-risk behaviors, including lifetime use of tobacco, alcohol, and illicit drugs; age at first sexual intercourse; lifetime number of sexual partners; and intake of fruits, vegetables, and fast-food meals in the previous month. Interviewers asked participants the total number of years they had lived in the United States. For women born in the United States, we set this variable equal to their age at interview. We estimated a woman's age at immigration to the United States as