Collective Efficacy for Community Change in Response to Immigrant Stigma Stress

Andrea J. Romero, Monica Moreno Anguas, Anna O'Leary, and Rebecca Covarrubias

ABSTRACT: *Many studies have discussed the stress and stigma created by immigration enforcement policies such as Arizona SB 1070. Yet few studies have examined sources of resilience to immigrant stigma stress among low-income Mexican-descent communities. In two recent studies, we examined how community members in a low-income ethnic enclave in Arizona experienced stress from SB 1070 and the mitigating role of perceived collective efficacy (i.e., the belief that a community can come together for the common good), in combination with factors such as confidence in local police enforcement, neighborhood safety, and neighborhood cohesion. Study 1 was conducted in 2010, immediately after approval of SB 1070, and Study 2 was conducted two years later. In Study 1, more immigrant stigma stress was associated with less confidence in police among adults, but more confidence in police among youth. In both Study 1 and Study 2, higher collective efficacy was associated with the lowest levels of immigrant stigma stress across all levels of neighborhood safety and neighborhood cohesion. We discuss the importance of collective efficacy for the resilience, health, and well-being of Mexican-descent communities.*

US immigrant enforcement policies are contributing to systemic unfair treatment and stigmatization of immigrants and their descendants (Powers 2013; Tseng and Yoshikawa 2008). Stigma that is associated with one's social position has been linked to pervasive stress and worse health (Allport 1954; Clark et al. 1999; Díaz et al. 2001; Dressler et al. 2007; Gee et al. 2006; Krieger 2000, 2003; Meyer 2003; Noh and Kaspar 2003; Pearlin 1999; Romero et al. 2007; Romero, Martinez, and Carvajal 2007; Williams, Neighbors, and Jackson 2003). Yet there is evidence of an immigrant paradox of resilience insofar as immigrants in the United States on average report better health, better educational achievement, and more hope for the future than US-born individuals (García Coll and Marks 2012; González de Bustamante 2012; Hill and Torres 2010; McGuire and Martin 2007; Stoddard and Garcia 2011). Mirsad Serdarevic and Krista M. Chronister (2005) argue that supportive community and family contexts help individuals navigate risks in the hostile, anti-immigrant environment of the United States. While enforcement of US immigration policy continues to create new barriers for immigrants and their families, immigrant communities are finding new ways to disrupt and dismantle this enforcement.

Collective efficacy, the belief that a community can come together for the common good, has been identified as a key factor in community capacity for activism and community change (Sampson, Raudenbush, and Earls 1997). Indeed, research within Chicana/o studies offers many relevant examples of how activism, organizing, and collective efficacy have contributed to improved community outcomes for youth education

Andrea J. Romero is Fitch Nesbitt Professor in Family Studies and Human Development at the Norton School for Family and Consumer Sciences at the University of Arizona. She is also director of the Frances McClelland Institute for Children, Youth, and Families. Romero has focused her research career on understanding the social and cultural factors that influence adolescent development and adolescent health. Her research findings demonstrate that although discrimination has a negative impact on mental health and risky behaviors, adolescents with a strong ethnic identity seem to fare better. A central element of Romero's methodological approach is that of participatory action research, which is done in dialogue and collaboration with community members. She has recently published *Youth-Community Partnerships for Adolescent Alcohol Prevention* (Springer, 2016). Romero may be reached at romeroa@email.arizona.edu.

Monica Moreno Anguas is doctoral student at the University of Arizona, where her research focuses on language and culture.

Anna O'Leary is an associate professor of Mexican American studies at the University of Arizona. She is co-editor of *Unchartered Terrain: New Directions in Border Research Method and Ethics* (University of Arizona Press, 2013) and editor of *Undocumented Immigrants in the United States Today: An Encyclopedia of their Experiences* (ABC-CLIO/Greenwood Press, 2014). Her current research interests include education, culture, and urban politics of Mexican and US-Mexican populations, the political economy of the US-Mexico border, and gender issues.

Rebecca Covarrubias is an assistant professor in the Department of Psychology at the University of California, Santa Cruz, where she also directs the Culture and Achievement Collaborative. As a social-cultural psychologist, Covarrubias examines how delegitimizing learning contexts undermine educational, social, and mental health outcomes for marginalized students, and how culturally grounded interventions can reverse these effects. Her most recent work examines how familial relationships shape the cultural transition to college for working-class, first-generation college students of color, and the positive (e.g., resiliency) and negative (e.g., achievement guilt, parentification) consequences of this transition. She may be reached at rebeccac@ucsc.edu.

and neighborhood infrastructure (Delgado Bernal 1998; Cammarota and Romero 2014; Muñoz 1989; Pardo 1990). However, only a few Chicana/o studies scholars have examined how activism and community organizing can improve psychological outcomes, such as by reducing stress (Flores 2013; O'Leary and Romero 2011; Romero and O'Leary 2014). To a certain degree, collective efficacy is built upon the concepts of transformational resistance that describe how Latino students use critical consciousness to push back against oppressive institutional systems (Solorzano and Delgado Bernal 2001; Yosso 2005). Collective efficacy is especially critical in low-income communities that have access to fewer resources, because it demonstrates their agency to create new resources.

We advance the current literature by investigating how collective efficacy may enhance the resilience of low-income Mexican-descent individuals in the face of stress due to a hostile social environment created by anti-immigrant policies. Specifically, we examine how people in an ethnic enclave of Mexican-descent families in Arizona experienced stress from the state's draconian immigration enforcement law, SB 1070, and the mitigating role of perceived collective efficacy in combination with factors such as neighborhood cohesion and confidence in police. We hypothesize that higher collective efficacy will be associated with lower immigrant stigma stress. This essay first discusses the existing literature that has identified collective efficacy as a source of resilience and activism among immigrants and low-income communities. We then examine our hypothesis in two community-based studies with youth and adults, the first conducted immediately after passage of SB 1070 in 2010, and the second in 2012. Lastly, we summarize our findings and discuss the implications of collective efficacy for immigrant stigma stress and immigrant health in general.

Collective Efficacy as a Source of Resilience

National groups such as the American Psychological Association have been calling for researchers to use resilience frameworks, as opposed to deficit models, to study the experiences of immigrants in the United States (APA 2012). Resilience—the ability to overcome adversity—is no longer conceptualized only as an individual factor, but is seen instead as the dynamic interaction between the individual and the environment (Ungar et al. 2007; Walsh, DePaul, and Park-Taylor 2009). Angela Fielding and Judi Anderson (2008) describe how collective aspects of resilience are created through protective factors found in family, school, and community contexts.

In fact, some researchers argue that protective social networks are the reason that Latinos and immigrants on average have better health outcomes than native-born white Americans (Ruiz et al. 2016). For example, living in low-income ethnic enclave neighborhoods may enhance community agency, particularly for immigrants and their families, because they may be more likely to find others who share a common language and experience (Bathum and Baumann 2007). These social bonds may serve as a multi-pronged survival mechanism, particularly for unauthorized immigrants, who often rely on social networks to find employment or other social resources (Granberry and Marcelli 2007; Lara-Cinisomo, Xue, and Brooks-Gunn 2013; Valdez, Valentine, and Padilla 2013). Ethnic enclaves may, in part, create a bubble of safety and belongingness that helps shield individuals from the often-hostile context of white mainstream society. In these ways, a protective neighborhood context may help the person interact with his or her immediate environment in a manner that promotes resilience to adversity (Bronfenbrenner 1979; Serdarevic and Chronister 2005).

Despite the benefits of ethnic enclaves, there are challenges when it comes to building hope in poverty-embedded communities that are dealing with the accumulation of historical trauma and generations of lack of support for structural equity (Kirmayer, Gone, and Moses 2014). For example, the lack of existing resources in low-income neighborhoods is often emphasized as a barrier to resilience (Ebersöhn 2014); however, this argument ignores evidence that community agency can increase resources by changing existing infrastructure (Vigil 2002; Wandersman and Nation 1998). Moreover, when such change is led from within by local community members, they can be architects of recovery and transformation of their own communities (Chaskin 2008). Thus, we argue that it is not only social connectedness that helps alleviate stress but also community organizing for change in response to policies that target families and communities.

One pathway to creating community change is through collective efficacy (Sampson, Raudenbush, and Earls 1997; Wandersman, and Nation 1998). Collective efficacy is the root of community coordination and cooperation that can lead to transformation of the community structure. It implies that community members feel capable of taking collective action on shared community issues of social, economic, or political relevance (Collins, Neal, and Neal 2014). Social connectedness within a neighborhood contributes to collective efficacy through a positive sense of belonging, increased social support, increased participation in community activities, and a sense of trust (Kelly et al. 2010; Mulvaney-Day, Alegría, and Sribney 2007). However, collective efficacy is a distinct concept from neighborhood cohesion; it is the sense of critical consciousness and the belief in community capacity that leads to empowerment to create change (Collins, Neal, and Neal 2014; Gutiérrez 1995).

Immigration Enforcement Policy in Arizona

Immigrant stigma in the United States is not new (Aguila 2013; Powers 2013). Throughout the country's history, nativist politics have drawn a contrast between those who are native-born and those who are foreign-born, discriminating especially against immigrant groups perceived to be markedly different from white Anglo-Saxon Protestants, such as Southern Europeans, Irish, Japanese, Chinese, and Mexican Americans (FitzGerald and Cook-Martín 2014; Johnson 1997; Kilty and Vidal de Haymes 2000; McWilliams 1968; Ngai 2004; Weber 1973; Zolberg 2006). Especially since 9/11, nativist sentiments have reemerged in the tense national debates on immigration enforcement policies (Esses, Dovidio, and Hodson 2002; Hines 2002; Magaña 2013; Puar 2007). For example, Michal Kohout (2012, 146) reported that "from 2005 to 2010, over 6,600 immigration-related measures were considered throughout the nation"; 976 of these measures became law.

A large proportion of the proposed bills have focused on US-Mexico border enforcement and other measures directly targeting Latino immigrants of Mexican descent (Johnson 1997). The state of Arizona has been at the forefront of the heated immigration enforcement debate with an overabundance of such bills, some enacted into law, that tighten requirements for proof of immigration status and restrict immigrants' access to resources (London 2010). Laws passed in Arizona include Proposition 200 (2004), which requires documentation of US citizenship when voting; HB 2592 (2005), which restricts day labor employment; HB 2448 (2006), which restricts access to health care; Proposition 300 (2006), which restricts educational access; the Legal Arizona Workers Act (2007), an employer sanctions law; and the widest-reaching bill, SB 1070 (2010), dubbed the "show me your papers" law, which contained a host of anti-immigrant provisions.

The official title of SB 1070, the Support Our Law Enforcement and Safe Neighborhoods Act, publically conveyed powerful (although unfounded) anxiety-inducing messages about the purported criminality of Latinos and danger of their neighborhoods. Signed into law in April

2010, SB 1070 required local police to investigate the immigration status of persons stopped on suspicion of other violations. It also expanded the power of state law enforcement personnel by requiring them to demand proof of immigration status from anyone at any time. Moreover, by threatening lawsuits and additional fines, SB 1070 made it impossible for any state official or agency to limit or restrict the enforcement of federal immigration laws. It also went beyond previous legislation in explicitly allowing for civil suits against law enforcement personnel for not enforcing immigration laws.

This law also created new crimes, some of which are unprecedented in federal or state law, including "willful failure to complete or carry an alien registration document" and "transporting, moving, harboring, or concealing noncitizens" (Chin, Hessick, and Miller 2012, 78–79). With the latter provision, the law cast a wide net, stigmatizing and criminalizing not only undocumented individuals but also their families, friends, allies, and supporters (Androff and Tavassoli 2012; Magaña 2013). In this way, the stress and stigma from the punitive law spilled over into a community that is much broader than undocumented immigrants themselves. Family networks, including adults and children, are especially likely to be affected by immigration enforcement laws such as SB 1070 (Capps et al. 2007; O'Leary and Sanchez 2012; O'Leary, Gómez, and Montoya-Zavala 2014). This is nowhere more true than in mixed-immigration-status households, that is, households where the immigration status of at least one family member is different from the others (O'Leary and Sanchez 2011; Romero 2008; Talavera 2008). Overall, this law legitimized the differential treatment of all people in Arizona, not only those who were trying to access citizen's rights or public services but also the allies and families of unauthorized individuals (O'Leary and Sanchez 2011).

In the years following passage of SB 1070, various provisions were struck down, including the one that would have brought criminal charges against someone who harbors a person who is present unlawfully. Yet the ability of police officers to request papers, which was initially blocked by a US District Court judge's preliminary injunction on July 29, 2010, was upheld by the US Supreme Court on June 25, 2012. This was a critical decision, because local police enforcement of immigration law is the core of SB 1070. It is also arguably the portion of the law that has caused the most stigma and stress, although it is possible that the feeling of stigma may be higher or lower depending on a local community's relationship with police.[1]

Immigrant Stigma Stress among Youth and Adults

When immigrants are stigmatized, it is not merely the negative attitudes or prejudice that affect them, but the systematic alienation from society. Stigma and expectations of rejection that arise from exclusionary policies are associated with stress due to a complex interaction of structural inequalities, discriminatory experiences, and personal attributions of minority status (Goffman 1963; Meyer 2003). Stigmatized groups that are alienated from social processes, institutions, and structures are likely to suffer more social disconnectedness, which is likely to have negative health consequences (Pearlin 1999). Therefore, anti-immigrant bills like SB 1070, which codify exclusion, can be expected to increase stress among Mexican-descent youth and adults.

Since the approval of SB 1070, scholars report an increase in hate rhetoric in Arizona, including anti-immigrant and anti-Latino sentiment (Santa Ana and González de Bustamante 2012). Lisa J. Hardy and colleagues (2012) found that after the law's passage, there was a perception among Latino communities that they were less safe and had decreased access to services. Border communities are vulnerable to unique forms of stress, rooted in discrimination and a fear of deportation and other enforcement actions that may lead to family separation; these fears are associated with worse mental health outcomes (Carvajal et al. 2013). Adults reported that border and immigration enforcement pressures on family or friends had a negative impact on their own psychological well-being, irrespective of their own immigration status, level of acculturation, or socioeconomic status (Carvajal et al. 2014). A significant component of the stigma based on the laws passed in Arizona is the criminalization of undocumented immigrants and, by extension, their families, other immigrants, and indeed all people of Mexican descent, who are readily assumed to be foreign-born and unauthorized (Androff and Tavassoli 2012; O'Leary 2009; Romero 2008). For instance, one study found that Latino adults who felt personal ramifications of immigration enforcement policies reported greater fear of deportation for themselves or someone they loved, less hope for the future, and lesser quality of life (Becerra et al. 2013; White et al. 2014).

However, understanding the psychosocial impact of wide-ranging immigration enforcement bills like SB 1070 requires more investigation among adults and young people, particularly those who live in mixed-status households. Carlos E. Santos and Cecilia Menjívar (2013) reported diminished self-esteem and an increase in risky behaviors as consequences of SB 1070. In a qualitative study of immigrants and children of immigrants in Arizona after the law's passage, Lorraine Moya Salas, Cecilia Ayón, and Maria Gurrola (2013) found that the constant vigilance necessary to avoid deportation was linked to fear and chronic stress. Children in that study described feeling anxious when their parents go to work or leave the house for another reason because they might not return. Families became "prisoners in their own homes," not leaving the house unless necessary, as a precaution to avoid interaction with police or border patrol (see also Núñez and Heyman 2007). Immigration enforcement policies have widespread implications not only in Arizona but throughout the United States. In a recent study of children of Mexican immigrant parents in the Midwest, children reported that they feared not only family separation but also any contact with police (Dreby 2012). Previous empirical studies have found that stress associated with fear of family separation, concern over family members' immigration issues, and immigration enforcement pressures is associated with worse physical and mental health outcomes among immigrant and US-born Latino adolescents (Becerra et al. 2013; Carvajal et al. 2014; Romero and Roberts 2003; Romero, Martinez, and Carvajal 2007; Romero et al. 2007). However, these studies have not investigated the ways in which targeted groups may find sources of resilience in this hostile climate.

The Current Studies

Given the rise of modern nativist politics that have increased the number of immigrant enforcement policies in Arizona and across the United States, immigrant stigma stress continues to be a pressing issue for which there are few immediate solutions. To address the issue of adverse effects of immigrant enforcement policies such as SB 1070, we examine how the perception of collective efficacy, defined here as the belief that one's community can come together to intervene for the common good, can help lessen the stress of immigrant stigma. A resilience approach stems from historical Chicana/o studies research on the positive effects of community organizing, which often leads to greater empowerment and confidence (Muñoz 1989; Pardo 1990). In the current studies we examine the associations between immigrant stigma stress and perceived collective efficacy in an ethnic enclave neighborhood of Mexican-descent immigrants in Arizona, looking at both youth and adults. We also examine other factors that may contribute to immigrant stigma stress, including perceptions of neighborhood safety and confidence in police. Study 1 was conducted in 2010, immediately following the passage of SB 1070, and study 2 was conducted two years later, in 2012. We hypothesize that higher collective efficacy will be associated with lower immigrant stigma stress, independent of the degree to which neighborhood safety and cohesion may account for differences in stress.

Study 1

Sample

The sample (*N* = 143) included 91 adults and 52 teens. Adolescents ranged in age from 13 to 18 years old; age information was not available for adults. The survey was conducted in a small city in Arizona near the border with Mexico, with a population that is 79 percent Mexican-descent, 11 percent Native American, and 27 percent foreign-born. In Arizona statewide, approximately 31 percent of the population is Latino, mainly of Mexican descent, and 14 percent of the state population is foreign-born. The community sample thus represents a Mexican immigrant ethnic enclave within Arizona. The community has a median income of $18,830, with an overrepresentation of extreme poverty.

Procedure

The data were collected within an ongoing community-based participatory action research project aimed at improving adolescent mental health. SB 1070 was approved two months prior to an already scheduled community survey. As usual in this project, community members (adults and youth) were involved in the development of survey items. The community members called for including questions about SB 1070, and also about collective efficacy. The items about SB 1070 were discussed within the community-based group, and the question format was finalized through a discussion with community members. The one-page survey was developed in English and Spanish, and community members reviewed and provided additional editing to both versions. The majority of respondents, 121, chose to complete their surveys in English, with 22 surveys completed in Spanish.

Measures

The survey consisted of self-report measures that emphasized the individual respondent's perception of his or her reality. This is a common and reliable approach to understand how individuals understand and interpret their own experiences, particularly when examining a phenomenon such as individual stress.

Immigrant stigma stress was measured with one item: "Has SB 1070 changed the way that you and your family live your daily life (not going to church, school, doctor, or using federal/state/local resources)?" Responses ranged from 1 (not at all) to 4 (a lot).

SB 1070 rights information was measured with one item: "Would you like to know more information about SB 1070 and your rights?" The responses were "yes" or "no."

Neighborhood safety was assessed with one item: "How safe is your neighborhood?" Responses ranged from 1 (not very safe) to 4 (very safe).

Confidence in police was measured with one item: "How confident are you that local police will enforce SB 1070 fairly?" Responses ranged from 1 (not at all confident) to 4 (very confident).

Collective efficacy was measured with one item designed to determine the individual's perception of the capacity to create community change: "Do you believe that you can make this a better place?" Responses ranged from 1 (not at all) to 3 (definitely).

Results and Discussion

Based on *t*-test analyses, we found that participants who completed the survey in Spanish reported significantly higher rates of immigrant stigma stress and were significantly more likely to want to learn about their rights.[2] There were no statistically significant differences by language for responses on neighborhood safety, confidence in police, or collective efficacy.

Multiple linear regression models were used to examine how multiple factors (adult/youth status, confidence in police, collective efficacy, SB 1070 rights, neighborhood safety) contributed to immigrant stigma stress. The overall model (with all variables included) predicting immigrant stigma stress was statistically significant ($F(5,138) = 4.43$, adjusted $R^2 = .17$, $p < .001$). More immigrant stigma stress was associated with wanting more information about SB 1070 rights (β *(beta weight effect size)* $= .26$, $p < .01$). As shown in figure 1, the interaction between confidence in police and adult/youth status was statistically significant ($\beta = .40$, $p < .01$).

Adults with least confidence in police reported the highest levels of immigrant stigma stress, whereas youth with most confidence in the police reported more immigrant stigma stress. There was also a significant

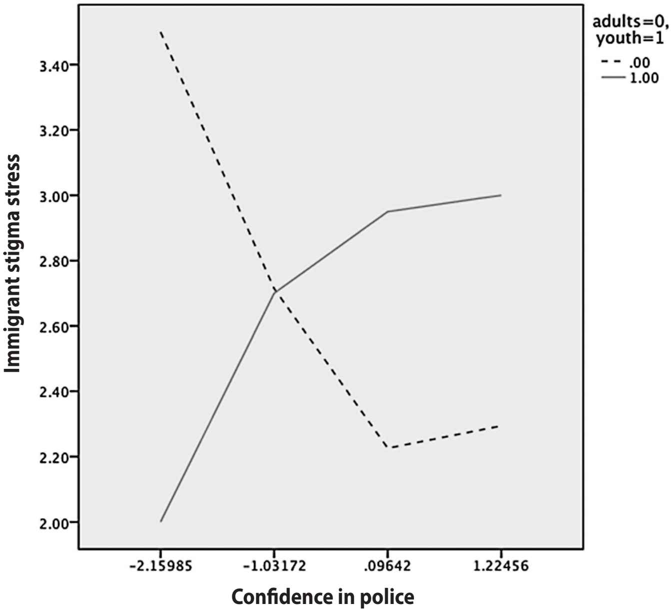

Figure 1. Interaction between Police Confidence and Immigrant Stigma Stress by Adult/Youth Status, Study 1.

interaction between safe neighborhood and collective efficacy (β = .18, *p* <.05). Individuals who felt a strong sense of collective efficacy were protected from immigrant stigma stress, even when they reported a less safe neighborhood (fig. 2). Moreover, individuals with higher levels of collective efficacy consistently had the lowest levels of immigrant stigma stress at all levels of neighborhood safety.

As a component of the community-based participatory action research approach, the results of study 1 were reported to the community partners, local government officials, and local police. The community was very responsive to the findings and continued to engage in discussion about the impact of SB 1070. The community also initiated a discussion on how to enrich the original survey in order to have more items with which to measure variables hypothetically associated with immigration stigma stress. This effort gave rise to study 2.

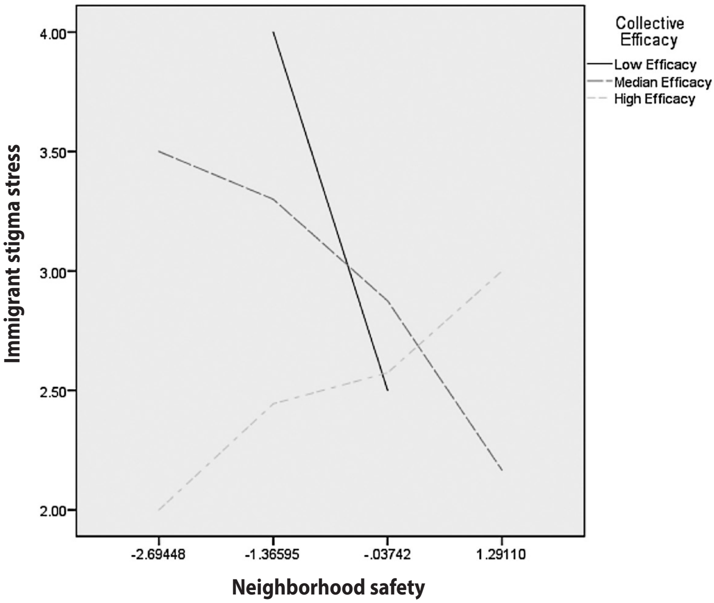

Figure 2. Interaction between Neighborhood Safety and Immigrant Stigma Stress at Different Levels of Collective Efficacy, Study 1.

Study 2

Sample

The sample (N = 311) comprised 184 adults and 127 teens. Adolescents ranged in age from 11 to 18 years old (M = 15.7, SD = 2.06), and 53 percent were female. Of the youths, 80 percent self-identified as Mexican American, 15 percent as Mexican national, and 5 percent as some other ethnicity. The youth sample consisted of 16 percent immigrants (n = 20), 37 percent children of immigrants (n = 47), and 47 percent later generation (n = 60), proportions broadly representative of the local community. Adults ranged in age from 16 to 79 years old (M = 30.68 years, SD = 2.06); 62 percent were younger than 40 and 38 percent were older than 40. The adult sample was 79 percent female and self-identified as 49 percent Mexican American, 44 percent Mexican national, 4 percent Native American, and 3 percent Central American. Among the adult participants, 52 percent identified as immigrants (n = 95) 14 percent as children of immigrants (n = 26), and 34 percent as later generation (n = 63).

Procedure

This study was an extension of the original community-based participatory research project of study 1. As mentioned above, after two years of successful collaboration, the community wanted to include more questions. Otherwise, the same procedure was used. The survey was enriched with the new items discussed and agreed on by the community. In consequence, some of the original measures included additional items in order to better capture their conceptual essence.

Measures

Immigrant stigma stress was measured with four items. Two sample items were: "I have been worried about family members or friends having problems with immigration" and "I have had problems at school/work because English is my second language." Responses ranged from 0 (not at all stressful) to 4 (very stressful). In order to determine the degree of internal consistency between these four items, we ran a Cronbach's alpha for the scale, and the value was within the acceptable range of α= .78, with a value above .65.

Neighborhood safety was measured with seven items. One sample item was: "How much of a problem are the following things in your neighborhood: (a) crime, (b) gangs, (c) traffic." Responses ranged from 0 (not really a problem) to 3 (a serious problem). Cronbach's alpha was .88.

Neighborhood cohesion was measured with fourteen items. One sample item was: "People in your neighborhood help their neighbors/can be trusted/cooperate with each other." Responses ranged from 1 (strongly disagree) to 4 (strongly agree). Cronbach's alpha was .96.

Collective efficacy was measured with one item: "People in your neighborhood can make it a better and safer place." Responses ranged from 1 (strongly disagree) to 4 (strongly agree).

Results and Discussion

The overall multiple linear regression model predicting immigrant stigma stress was statistically significant (F (6,285) = 4.86, adjusted R^2 = .14, p <.001) when including age, collective efficacy, neighborhood cohesion, and neighborhood safety. The interactions between neighborhood safety and collective efficacy (β = .14, p < .05) and the interactions between neighborhood cohesion and collective efficacy (β = -.13, p <.05) were statistically significant. As expected, immigrant stigma stress was highest

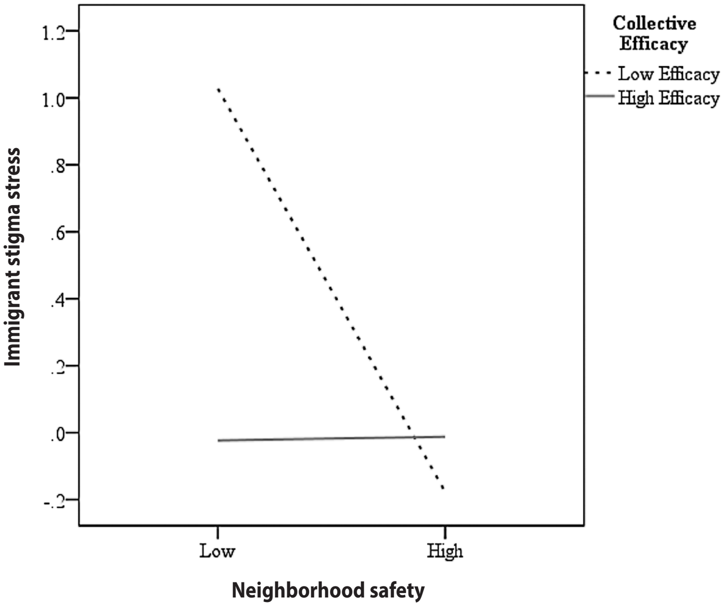

Figure 3. Interaction between Neighborhood Safety and Immigrant Stigma Stress at Different Levels of Collective Efficacy, Study 2.

among those who reported that their neighborhood was not safe and those who reported the lowest levels of collective efficacy (fig. 3). Also, as expected, immigrant stigma stress was highest among those who reported low collective efficacy, even at high levels of neighborhood cohesion (fig. 4). Higher collective efficacy was associated with the lowest levels of immigrant stigma stress at all levels of neighborhood cohesion and safety.

General Discussion

The purpose of the research was to examine how collective efficacy was associated with immigrant stigma stress in a low-income ethnic enclave of Mexican-descent youth and adults. Study 1 demonstrated generational differences in views of police and immigration stress, finding that stress was higher among adults who did not have confidence in police, but higher among youth who *did* have confidence in police. Both study 1 and study 2 found that higher collective efficacy protected individuals against immigrant stigma stress at all levels of neighborhood safety and neighborhood cohesion. Collective efficacy seems to be a dimension of social networks that goes beyond that of neighborhood cohesion.

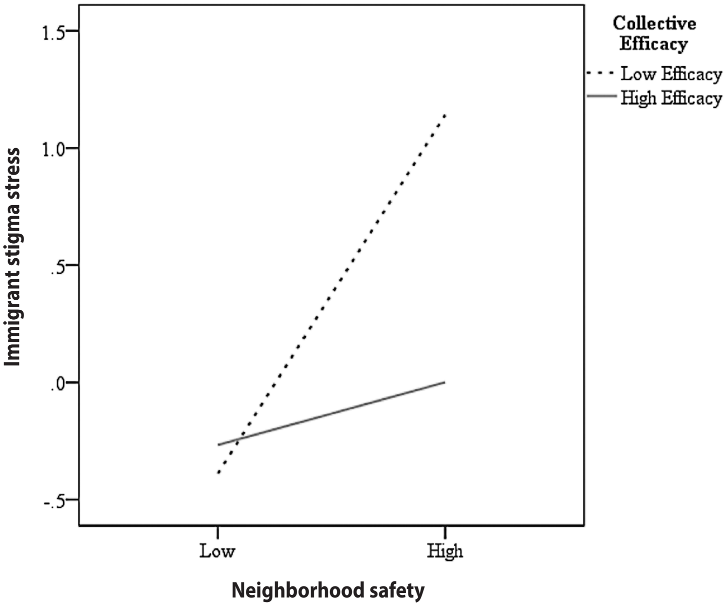

Figure 4. Interaction between Neighborhood Cohesion and Immigrant Stigma Stress at Different Levels of Collective Efficacy, Study 2.

Implications of Police as Immigration Enforcers

Lack of confidence in local police played a significant role in boosting immigrant stigma stress for adults; however, adolescents reported the opposite effect. This appears to point to key differences in generational perceptions, and perhaps in lived experiences with police officers. These findings may suggest that Mexican-descent youth are likely to disengage from the US structures because they may begin to fear interactions with authority figures. Previous research has also found increased vigilance to avoid deportation and interactions with police (Dreby 2012; Salas, Ayón, and Gurrola 2013; Núñez and Heyman 2007).

Overall, SB 1070 legitimized the differential treatment of all people in Arizona and the marginalization of allies and families of unauthorized individuals. Even before the law was approved, there was a rise in the frequency of interactions with border patrol and police among Latinos, not just in Arizona, but also in other states bordering Mexico and across the nation (O'Leary 2009). This is particularly true for individuals with obviously Mexican rather than Anglo ethno-racial characteristics. Indeed, research confirms that policing authorities are more likely to mistreat individuals who exhibit a Mexican rather than Anglo phenotype, and that citizenship, socioeconomic class, and education level offer Latinos little protection from police mistreatment (Goldsmith et al. 2009; Romero 2008). Future research is warranted on how police interactions and immigrant stigma stress are experienced among Mexican-descent youth and adults.

Conflating immigration with crime and threats to national security is likely to create norms that legitimize unfair harsh treatment and policing of immigrants, further criminalizing a large segment of the US population (Gilbert and Kolnick 2012; Haney López 2014). In the current studies, Spanish speakers reported feeling more immigrant stigma stress than English speakers, and they also desired more information on their rights. While the current studies were not able to assess documentation status, other work has found an association between fear and stress and being undocumented (Capps et al. 2007; O'Leary and Sanchez 2012; O'Leary, Gómez, and Montoya-Zavala 2014). There were an estimated 11.2 million unauthorized immigrants living in the United States in 2010 (Passel and Cohn 2011). The majority of unauthorized individuals entered the country through legitimate means and in controlled settings, but overstayed the term limit of their visa (Passel and Cohn 2011). Some unauthorized immigrants have lived for many years in the United States and have built new lives and families from which they do not wish to be separated. Reports have indicated that undocumented immigrant children also experience maltreatment by US immigration authorities, and that usually there are no specific holding or deportation practices or policies for children under the age of 18, which may further endanger them (Capps et al. 2007; CPPP 2008).

Implications of Stigma for Health and Well-being

When minority group members are sent the message that they do not belong and when they are treated unfairly, this can have serious negative effects, including depression, low self-esteem, high blood pressure, and chronic and acute diseases (Allport 1954; Clark et al. 1999; Dressler 1991; Dressler et al. 2007; Gee et al. 2006; Krieger 2003; Marchevsky and Theoharis 2008; Noh and Kaspar 2003; Williams, Neighbors, and Jackson 2003). However, despite these risk factors, there is evidence of a "Hispanic health paradox" insofar as US Hispanics overall have better health outcomes than non-Hispanic whites. For example, Kenneth Dominguez et al. (2015), in a study published by the US Centers for Disease Control and Prevention, analyzed four national data sets and found that Hispanics had better outcomes than whites on most analyzed health factors, except diabetes, liver disease, homicide, and obesity. Moreover, foreign-born Latinos had generally better health than later-generation US-born Latinos. John M. Ruiz, Patrick R. Steffen, and Timothy B. Smith (2013) conducted a meta-analysis of the prospective literature to examine mortality differences. Across fifty-eight studies representing 4.6 million participants, Hispanics were 17.5 percent more likely than whites to be alive at the end of the study. Ruiz and colleagues (2016) argue that cultural processes (values, social behaviors, etc.) facilitate larger and more cohesive social networks (family, community), which in turn confer health advantages. In this way, they say, social networks mediate the so-called Hispanic health paradox. Our findings add an important new dimension to this argument by suggesting that immigrants and people of Mexican descent utilize collective efficacy as a unique dimension of social networks to increase their resilience to stress and improve their overall well-being.

Understanding the factors that buffer against discriminatory practices, such as levels of collective efficacy, is important in shaping the well-being of Latinos. Research has demonstrated that US-born youth with immigrant parents demonstrate high levels of resilience (González de Bustamante 2012), which also suggests an inherent motivation to achieve positive outcomes. For immigrant parents, the primary motivation for immigrating to the United States is to create opportunities for their children that are better than those they experienced in their country of origin (Valdez, Valentine, and Padilla 2013). Moreover, families with high levels of resilience and hope are more likely to stay in the United States despite anti-immigration messages and policies (Valdez, Valentine, and Padilla 2013). Thus, immigrant families and youth living in ethnic enclaves may be particularly motivated to band together to create change, because compared to later-generation Latinos, they are less likely to have endured generations of oppression in the United States. Charles R. Collins, Jennifer Watling Neal, and Zachary P. Neal (2014) found that collective efficacy and social bonding capital were linked to higher rates of civic engagement (e.g., voting, volunteerism, and activism). Thus there is the likelihood that perceptions of collective efficacy may lead to action for social change; this will need to be further studied in modern Mexican-descent communities in the current content of anti-immigrant messages.

Although collective efficacy was a positive buffer against immigrant stigma stress for both youth and adults, the negative implications of stigma stress cannot be ignored. Latino adolescents and adults experience discrimination in their neighborhoods, with police, and with service agencies. While adults may experience discrimination in the workplace (Dietz 2010) or health services (White et al. 2014), youth are likely to experience discrimination in their schools, which may negatively affect their academic achievement (Rumbaut 2005; Stone and Han 2005). Discrimination has also been shown to hinder optimal functioning in childhood and adolescence, to negatively affect future adjustment, and to have long-lasting effects on the well-being of youth (García Coll et al. 1996). Given the current mental health disparities for Latino youth at national levels—among other things, Latino youth indicate high levels of depressive symptoms and suicide attempts (Dominguez et al. 2015)—there is an urgent need for research on how immigrant stigma stress may be associated with mental health among Latino adolescents.

Conclusion and Future Research

To date, SB 1070 has been the farthest-reaching of the immigration policy enforcement bills across the country and has provoked the largest public reaction at local, state, and national levels. Critics argue that SB 1070 has not reduced the rate of migration but rather has exacerbated existing human rights crises by contributing to the suffering of migrants and their families (Androff and Tavassoli 2012). The new immigration enforcement policies are also likely to further marginalize undocumented immigrants and their family members, which is associated with greater physical and mental health risks (McGuire and Martin 2007). A greater understanding of how public policies affect the well-being and health of immigrants and their surrounding communities is essential in order to humanize and transform migration policies at the state, national, and global levels.

Our findings show that in a low-income Mexican-descent ethnic enclave, both youth and adults reported that collective efficacy to create change was associated with resilience to immigrant stigma stress. Given these findings, community mobilization, including both adults and youth, is an important strategy for responding to immigrant enforcement policies. Perhaps if smaller contexts such as neighborhoods provide support, cohesion, and collective efficacy that enable people to organize, then neighborhood groups may be more likely to mobilize for changes in policies. Neighborhoods may serve in the role of social agents of preservation that strengthen the inner cohesion and safety of the community (Enchautegui 1997). This study has taken one step toward understanding positive factors within ethnic enclaves and how they may foster psychological well-being as well as community engagement for change. In terms of limiting the negative consequences of policies such as SB 1070, neighborhood-level mobilization may be a strategic starting point for immigrant communities.

Notes

1. In a new settlement reached in September 2016, Arizona ended its practice of requiring police officers to demand the papers of people they suspect of being in the country illegally. They are still allowed to ask for papers, however.

2. Participants who completed the survey in Spanish were significantly more likely to report higher levels of immigrant stigma stress ($M = 3.68$, $SD = .78$) than those who completed the survey in English ($M = 2.55$, $SD = 1.13$), $t = 5.77$, $p < .001$. Those who completed the survey in Spanish ($M = 2.00$, $SD = .00$) were also more interested in learning about their rights ($M = 2.00$, $SD = .00$) than those who completed the survey in English ($M = 1.70$, $SD = .46$), $t = 7.14$, $p < .001$. (Abbreviations: M = mean value; *SD* = standard deviation; *t* = *t*-value; *p* = probability.)

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