



FRAGILE FAMILIES RESEARCH BRIEF

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The Hispanic Paradox and Breastfeeding: Does Acculturation Matter?

Background

The "Hispanic Paradox" refers to the fact that Hispanics, especially recent Hispanic immigrants, have remarkably good health outcomes despite their low socioeconomic status and other risk factors. Among the health outcomes that have been shown to fit the Paradox are low birth weight, infant mortality, and adult mortality. In all three areas, Hispanics have better outcomes than blacks and whites once socioeconomic status differences are taken into account. Outcomes differ by Hispanic group, however, with Mexicans tending to have the best health outcomes as compared to other Hispanic groups. For this reason, studies of the Hispanic Paradox often focus on Mexicans.

One explanation for the Hispanic Paradox is the acculturation hypothesis. According to this argument, Hispanic culture promotes positive health practices, which new immigrants bring with them to the U.S. Over time, however, as immigrants have more and more contact with American culture, they give up their traditional practices and adopt the behaviors of their new country. This process of acculturation is believed to have a negative effect on health outcomes.

Breastfeeding is a health behavior that could fit the pattern of the Hispanic Paradox. Breastfeeding provides a number of benefits to infants. For example, breastfed children are less likely to suffer from ear infections, bronchitis, meningitis, allergies, or problems with vomiting or diarrhea and may develop higher IQs. Breastfeeding also has a large effect on infant mortality. It may protect against Sudden Infant Death Syndrome (SIDS). Further, infants who are breastfed are 80 percent less likely to die before the age of one than never-breastfed infants. Breastfeeding also benefits the mother - it burns calories, builds bone strength, protects against certain types of cancers, speeds the contraction of the uterus to its pre-pregnancy size, and delays the return of the menstrual period.

While breastfeeding has increased in the U.S., rates still fall short of the Department of Health and Human Services Healthy People 2010 goal of 75 percent. In 1998, 64 percent of infants were breastfed - 68 percent for whites, 45 percent for blacks, and 66 percent for Hispanics. In the U.S., higher rates of breastfeeding are associated with education, age, and urban residence. Given the racial, ethnic and socioeconomic status disparities, coupled with the potential benefits, understanding the determinants of breastfeeding is of paramount importance, not only to public health researchers, but also to researchers who are interested in inequality and differences in life chances.

This research brief uses data from the Fragile Families Study to see if the Hispanic Paradox applies to breastfeeding, and, if so, to see whether the Paradox can be explained by acculturation to the American lifestyle. [See Box on Back]

Figure 1: Percent Breastfeeding, by Race/Ethnicity and Immigrant Generation

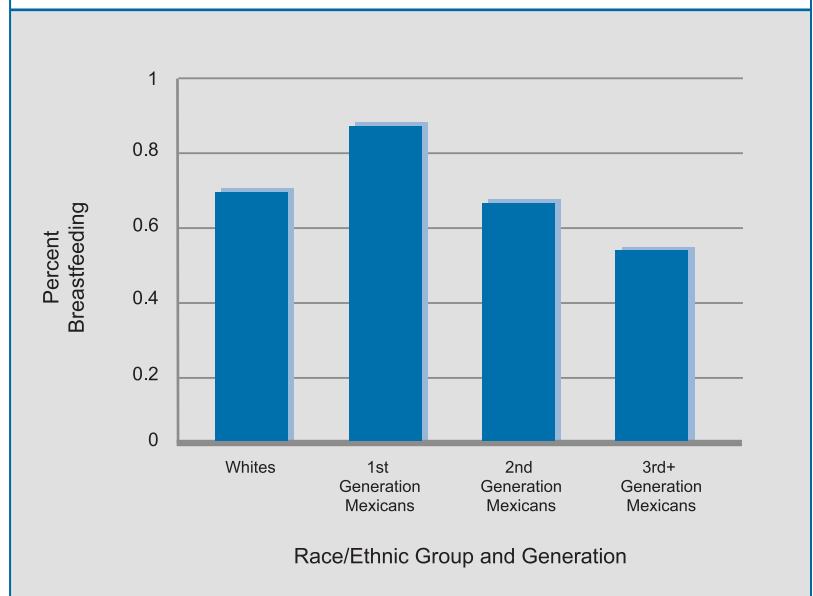
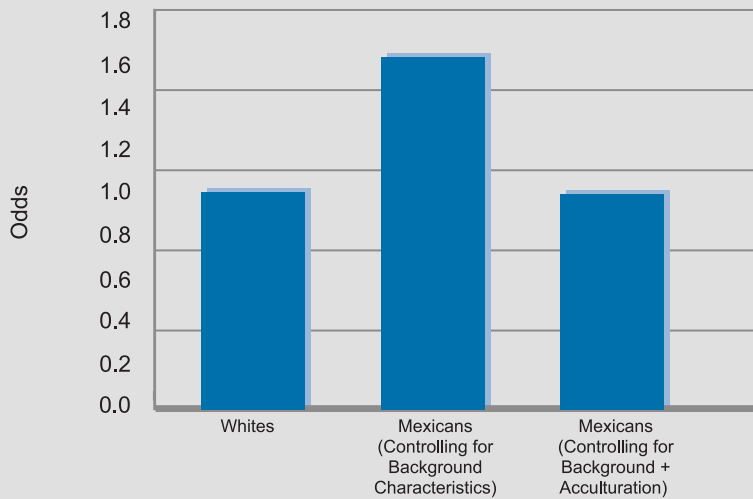


Figure 2: Odds of Breastfeeding, Compared to Whites, After Controls for Background Characteristics and Acculturation



being foreign-born. Approximately 46 percent of our Mexican mothers are first-generation immigrants (they were born in Mexico and then migrated to the U.S.) while approximately 17 percent are second generation (U.S.-born, but had one or both parents born in Mexico) and approximately 37 percent are third generation or higher (U.S.-born, as are their parents).

The samples of white and Mexican mothers differ on many characteristics. Mexican mothers are, on average, younger, less likely to live with the father of their child, and more likely to have more than one child than white mothers. Mexicans have half as much family income as white mothers. The groups also differ on rates of high school graduation: 82 percent of white mothers have graduated from high school, as compared to only 43 percent of Mexicans. Finally, Mexican mothers score lower than white mothers on the acculturation scale (indicating less acculturation), with an acculturation average of 14 versus 18 for white mothers.

Findings

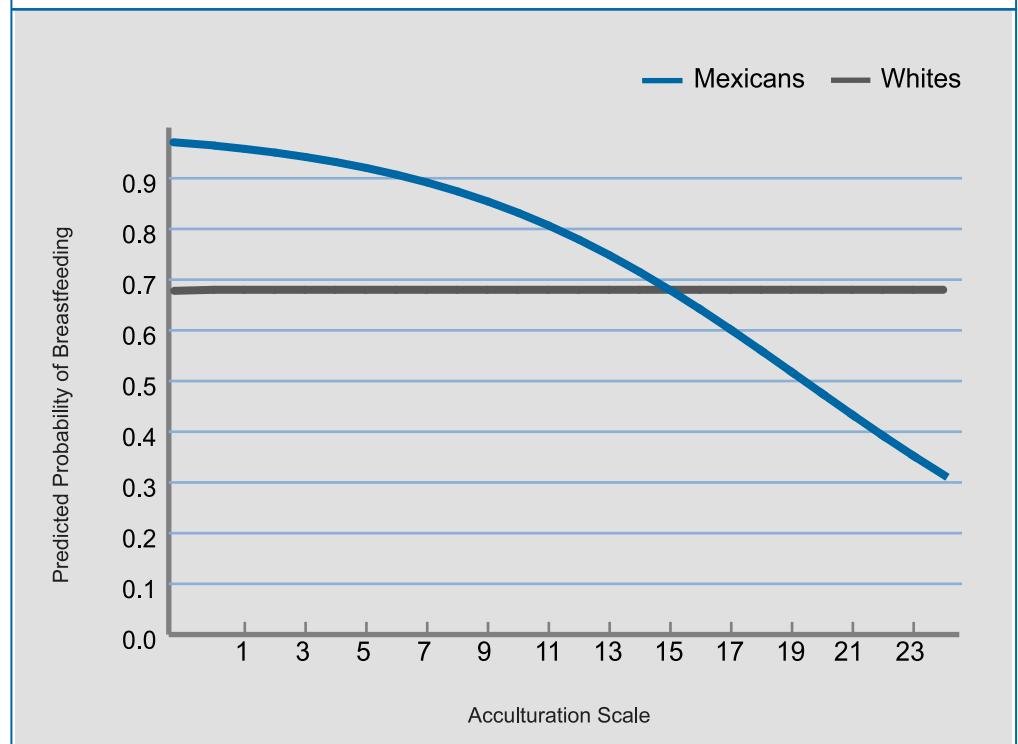
Due to their lower socioeconomic status, we might expect rates of breastfeeding to be lower among Mexican mothers than among whites. In fact, the data show that rates of breastfeeding are very similar for these two groups of mothers, 70 percent versus 68 percent (Figure 1). Moreover, once socioeconomic status and other background characteristics are taken into account, Mexican mothers are far

Data and Methods

Our data come from the Fragile Families one-year follow-up. Breastfeeding is measured by a question that asks "Did you ever breastfeed this child?" Acculturation is measured by a seven-item scale that includes questions about traditional values, attachment to one's ethnic group, religiosity, language of interviewee, and immigrant generation. We measure traditional values with two questions about gender roles: "It is better for everyone if the man earns the main living and the woman takes care of the home and family," and "The important decisions in the family should be made by the man of the house." We measure attachment to one's ethnic group with two questions about cultural engagement: "I feel an attachment towards my own racial or ethnic heritage," and "I participate in cultural practices of my own group, such as special food, music, or customs." Both the traditional values and cultural attachment questions are rated from one (strongly agree) to four (strongly disagree).

Whites comprise 59 percent of our sample, while Mexicans make up the other 41 percent. Twenty-one percent of the sample are immigrants, with four percent of our white mothers

Figure 3: Predicated Probability of Breastfeeding for Mexicans at Varying Levels of Acculturation



more likely to breastfeed than white mothers.

Figure 1 also shows the rates of breastfeeding among Mexicans by generation status. First generation mothers breastfeed at very high rates; second-generation mothers breastfeed at a lower rate, and third-generation mothers breastfeed at an even lower rate. These findings hold up even after we have controlled for differences in socioeconomic status, age, parity, and relationship status. These findings are also consistent with the argument that time in the U.S. (or contact with U.S. culture) dampens the high rates of breastfeeding among Mexican mothers.

Higher rates of breastfeeding among Mexican mothers can be almost totally explained by acculturation to American society. After controlling for acculturation, the odds of breastfeeding for Mexicans and whites are virtually the same (Figure 2). Figure 3 shows the predicted probability of breastfeeding for Mexican mothers at varying levels of acculturation. As accul-

turation increases, the predicted probability of breastfeeding declines.

Conclusion

This paper shows that the Hispanic Paradox extends to breastfeeding. It also shows that a lack of acculturation to mainstream society accounts for a substantial part of the Hispanic Paradox. Studying the determinants of health behaviors is important for understanding how to improve them. Little is known about the determinants of health behaviors for immigrants, particularly breastfeeding. This study adds to the Hispanic Paradox literature by identifying a new health behavior for future study that fits the pattern. Understanding why breastfeeding rates decline as time in the U.S. increases could help to better understand both how the cultural transmission of health behaviors works and how to target breastfeeding promotion programs for poor women.

Recent Working Papers

The following comprises a list of the most recent Working Papers authored by the Center for Research on Child Wellbeing (CRCW) faculty and research associates. A complete list of Working Papers is also available for viewing and downloading on the CRCW web site:
crw.princeton.edu/fragilefamilies

2004-01-FF Rachel Kimbro, Scott Lynch, Sara McLanahan Feb 2004 "The Hispanic Paradox and Breastfeeding: Does Acculturation Matter? Evidence from the Fragile Families Study"

2003-22-FF Julien Teitler, Nancy Reichman, Lenna Nepomnyaschy Dec 2003 "The Effects of State Policies on TANF Participation"

2003-21-FF Nancy Reichman, Hope Corman, Kelly Noonan Dec 2003 "Effects of Child Health on Parents' Relationship Status"

2003-20-FF Hope Corman, Nancy Reichman, Kelly Noonan Dec 2003 "Mothers' Labor Supply in Fragile Families: The Role of Child Health"

2003-19-FF Kelly Noonan, Nancy Reichman, Hope Corman Dec 2003 "New Fathers' Labor Supply: Does Child Health Matter?"

2003-17-FF Nancy Reichman, Julien Teitler, Marah Curtis Dec 2003 "Hardships Among Sanctioned Leavers, Non-Sanctioned Leavers, and TANF Stayers"

2003-16-FF Sara McLanahan Dec 2003 "Fragile Families and the Marriage Agenda"

2003-15 Angela Fertig Nov 2003 "Healthy Baby, Healthy Marriage? The Effect of Children's Health on Divorce"

2003-14-FF Marcia Carlson, Frank Furstenberg, Jr. Oct 2003 "Complex Families: Documenting the Prevalence and Correlates of Multi-Partnered Fertility in the United States"

2003-13-FF Nancy Cohen Oct 2003 "Unmarried African American Fathers' Involvement with Their Infants: The Role of Couple Relationships"

2002-17-FF Angela Fertig, Sara McLanahan, Irwin Garfinkel Oct 2003 "Child Support Enforcement and Domestic Violence Among Non-Cohabiting Couples"

2002-10-FF Marcia Carlson, Irwin Garfinkel, Sara McLanahan, Ronald Mincy, Wendell Primus Oct 2003 "The Effects of Welfare and Child Support Policies on Union Formation"

2003-12-FF Ariel Kalil Oct 2003 "Fathers' Perceptions of Paternal Roles: Variations by Marital Status and Living Arrangement"

2003-11-FF Catherine Kenney Sept 2003 "Hardship in Marriage and Cohabiting Parent Households: Do Cohabiting Parents Underinvest in Household Public Goods?"

2001-06-FF Marcia Carlson, Sara McLanahan, Paula England Aug 2003 "Union Formation and Dissolution in Fragile Families"

2003-10 Anne Case, Angela Fertig, Christina Paxson Jun 2003 "From Cradle to Grave? The Lasting Impact of Childhood Health and Circumstance"

2002-05 Leonard Lopoo, Sara McLanahan, Irwin Garfinkel Aug 2003 "Explaining the Trend in Teenage Birth Rates from 1981-1999"

2001-14 Leonard Lopoo Aug 2003 "The Effect of Maternal Employment on Teenage Childbearing"

2001-17-FF Wendy Sigle-Rushton, Sara McLanahan Jul 2003 "For Richer or Poorer?: Marriage as Poverty Alleviation in the United States"

2003-09-FF Cynthia Osborne, Sara McLanahan, Jeanne Brooks-Gunn Jul 2003 "Is There an Advantage to Being Born to Married versus Cohabiting parents? Differences in Child Behavior"

2003-08-FF Cynthia Osborne Jul 2003 "Differences in Mothering Behaviors in Stable and Unstable Families"

2003-07-FF Cynthia Osborne Jul 2003 "Do All Unmarried Parents Marry and Separate for the Same Reasons? Union Transitions of Unmarried Parents"

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Inside...

This research brief uses data from the Fragile Families and Child Wellbeing Study to examine whether the Hispanic Paradox applies to breastfeeding, and, if so, whether the Paradox can be explained by acculturation to the American lifestyle.

The Fragile Families and Child Wellbeing Study is following a birth cohort of nearly 5,000 children, including 3,712 children born to unmarried parents and 1,186 children born to married parents. The data are nationally representative of births in cities with populations of 200,000 or more. For more information about the study, visit the Web site of The Center for Research on Child Wellbeing, <http://crcw.princeton.edu/fragilefamilies> or email the CRCW at crw@opr.princeton.edu

This research brief was adapted from "Breastfeeding and the Hispanic Paradox: Does Acculturation Matter?" by Rachel Tolbert Kimbro, Scott M. Lynch and Sara McLanahan. To download a copy of the paper on which this brief was based, visit <http://crcw.princeton.edu>, go to the *Fragile Families* link, click on *Publications*, then click on *Working Papers Series*.

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