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Latina Mothers’ Awareness of Their Children’s Exposure to Community Violence

Francheska Alers-Rojas1, Rosanne M. Jocson2, James Cranford1, and Rosario Ceballo1

Abstract
This study examines (a) the degree of agreement between mother-reported child community violence exposure and children’s self-reports and whether agreement changes over time; (b) whether child gender is associated with mother-child agreement; and (c) whether greater mother-child agreement is concurrently and longitudinally associated with children’s psychological well-being. We conducted secondary data analyses using longitudinal data with a socioeconomically diverse sample of 287 Latino adolescents (M_ageW2 = 11.2, 47% girls) and their mothers (M_ageW1 = 35.3) from the Project on Human Development in Chicago Neighborhoods. Mother-child agreement about nonexposure to violence was high. However, for violence-exposed children, mothers overestimated exposure in early adolescence and underestimated it in middle adolescence. Mothers had higher violence agreement scores with daughters than with sons. Greater mother-child agreement about witnessing community violence in early adolescence was associated with lower externalizing problems in early and middle adolescence. Agreement about children’s victimization was only concurrently associated with lower externalizing and internalizing behaviors in early adolescence. Developmental changes in adolescent

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disclosure and parental knowledge of children’s community violence may provide an important point of intervention for addressing the psychological sequelae of violence exposure in early adolescence.

**Keywords**
adolescence, community violence, Latino/a, parental knowledge, parenting

Ethnic and racial minority youth are disproportionately exposed to severe or chronic levels of community violence, in part, because they are overrepresented in urban, low-income neighborhoods where violence is most prevalent (Cooley-Strickland et al., 2009; Kennedy & Ceballo, 2014). Community violence refers to being personally victimized by or a witness to interpersonal harm or threats of harm in one’s neighborhood (Kennedy & Ceballo, 2014). As many as 74% of Latino middle schoolers in one study reported being exposed to three or more distinct types of violent events in their lifetime (Aisenberg et al., 2008), while nearly three quarters of ninth-graders in another study reported seeing someone holding a gun or knife, 21% had witnessed a shooting, and 65% had witnessed someone getting beaten up or mugged (Epstein-Ngo et al., 2013; Kennedy & Ceballo, 2013).

Numerous psychological and behavioral problems are associated with chronic community violence exposure (CVE), including anxiety, delinquent behavior, depressive symptoms, and post-traumatic stress disorder (PTSD) symptoms (Fowler et al., 2009). Relatively little research has focused on ways to address the psychological fallout of CVE, although there is evidence that CVE is associated with greater depressive and PTSD symptoms among Latino youth (Aisenberg et al., 2007; Kennedy & Ceballo, 2013).

The negative effects of CVE highlight the importance of identifying malleable protective factors for violence-exposed Latino youth, yet few longitudinal studies of Latino adolescents’ exposure to violence exist. Our analysis focused on Latina mothers’ awareness of their children’s CVE as a means of improving child psychological well-being. We used data from the Project on Human Development in Chicago Neighborhoods (PHDCN; Earls et al., 1994–2002) to conduct this secondary data analysis. The PHDCN is one of the few longitudinal data sets with a large sample of Latino adolescents and their caregivers and with self- and caregiver-reported data for children’s CVE. When the PHDCN was completed in 2001, the violent crime rate in Chicago proper was 1,601 per 100,000 residents. Although crime rates have declined nationwide (Friedman et al., 2017), crime and violence in many urban neighborhoods remain alarmingly high and continue to impact youth
and families. In 2017, for example, the violent crime rate in Chicago was 1,096 per 100,000 residents. Within Chicago, violent crimes have been concentrated in poor and working-class neighborhoods (Fessenden & Park, 2016; Papachristos, 2013). Moreover, Latino families may be reluctant to report crime due to fears of detention and deportation, something police chiefs across the United States fear accounts for decreases in crime victimization statistics for this group (Bever, 2017).

**Mother-Child Agreement About CVE**

Past studies indicate that parents often underestimate their children’s exposure to community violence (Ceballo et al., 2001; Dinizulu, Grant, & McIntosh, 2014; Goodman et al., 2010; Thomson et al., 2002; Zimmerman & Pogarsky, 2011). In one study of mostly Latina inner-city mothers of elementary school children, Ceballo and colleagues (2001) found that 44% of children reported being threatened with serious physical harm, compared to only 18% of mothers who reported this type of exposure for their children (Ceballo et al., 2001). Similarly, Aisenberg and colleagues’ (2007) study of Latino middle school children found that 43% of mothers reported their children had not been exposed to violence at all, as opposed to only 19% of children. In rare instances, parents may report that their adolescent children are more exposed to violence than adolescents reported themselves (Goodman, 2013).

Several reasons may explain parents’ underestimation of children’s CVE. Adolescents exposed to violence may be reluctant to share their experiences for fear of losing autonomy or eliciting negative reactions from caregivers (Ceballo et al., 2001; Dinizulu, Grant, Bryant, et al., 2014; Dinizulu, Grant, & McIntosh, 2014). Alternatively, adolescents may not wish to burden their parents and some parents may not wish to hear or fail to understand their children’s experiences. Goodman (2013) suggests that adolescents victimized by community violence may have feelings of shame and, thereby, employ coping mechanisms like denial or avoidance which lead to underreporting. Nondisclosure by youth, in turn, may hinder caregivers’ ability to provide support and decrease psychological distress associated with CVE.

Not only do parents routinely underestimate their children’s CVE, but many may not understand the impact that violent and traumatic events have on their children’s psychological well-being (Smith Stover et al., 2010). This is concerning since parents’ underestimation of their child’s CVE has been associated with child internalizing and externalizing behaviors (Dinizulu, Grant, Bryant, et al., 2014; Goodman, 2013; Zimmerman & Pogarsky, 2011). By contrast, parents’ accurate awareness of their children’s CVE has been positively associated with youth’s psychological well-being (Ceballo et al.,
Thus, parent-child agreement about children’s CVE may be a potentially malleable protective factor for Latino youth.

**Gender and CVE**

Several reviews have contradictory findings on gender differences in rates of CVE and its ensuing psychological and behavioral consequences (Fowler et al., 2009). Some researchers found greater CVE among boys than girls (Taylor et al., 2007). In response to CVE, boys also tend to report more externalizing symptoms, while girls tend to report more internalizing symptoms (Fowler et al., 2009; Zona & Milan, 2011). Others have found no gender differences in levels of psychological distress after CVE (Lambert et al., 2012).

Gender may also play a role in youth’s disclosure to parents or parents’ awareness of their children’s CVE. In one study, boys reported higher CVE levels than girls when examining children’s self-report, but there were no gender differences based on parent reports (Kuo et al., 2000). In another study using data from the PHDCN, gender differences in adolescents’ CVE were also more prevalent in adolescents’ self-reports, but absent in parent reports (Zimmerman & Farrell, 2013). Disagreement between parents and children about children’s CVE may be associated with externalizing behaviors in both boys and girls, but girls may be disproportionately at risk of developing internalizing problems (Zimmerman & Farrell, 2013). These discrepancies about children’s CVE point to an important construct that is currently underexplored among Latino family research (Goodman et al., 2010).

Latino cultural norms about gender could also explain these differences or further exacerbate parents’ underestimation of children’s CVE. Prior research suggests that Latina mothers may have greater awareness of their daughters’ CVE (Ceballo et al., 2001). There is limited research on Latino parents’ gendered rearing practices, but a retrospective study of Latino young adults revealed that girls reported stricter rules about curfews, interacting with boys, dating, participation in after-school activities, and when they could get a license or job (Raffaelli & Ontai, 2004). These gendered practices suggest that Latino parents attempt to protect their daughters by keeping them close to home, which may also reduce their CVE.

**The Current Study**

In this study, we examine (a) the degree of agreement between mother-reported child CVE and children’s self-reports and how agreement changes over time, (b) whether there are gender differences in mother-child agreement, and (c) whether greater agreement about children’s violence exposure
is cross-sectionally and longitudinally associated with child psychological outcomes. We examine intragroup variations in a socioeconomically diverse sample of Latino adolescents and their mothers to better understand how mothers’ awareness of their children’s exposure to community violence may buffer against exposure’s negative consequences. We hypothesize that mothers will underestimate their children’s violence exposure during both early and middle adolescence (Ceballo et al., 2001). Further, we expect that mothers will agree more with their daughters than with their sons about child CVE because of Latino parents’ gendered rearing practices (Raffaelli & Ontai, 2004). Finally, we hypothesize that greater mother-child agreement will be cross-sectionally and longitudinally related to fewer child internalizing and externalizing behaviors (Goodman, 2013).

Method

Participants and Design

The data for this secondary analysis were drawn from the Longitudinal Cohort Study (LCS) of the PHDCN (Earls et al., 1994–2002). Three waves of data from seven randomly selected cohorts (i.e., birth, 3, 6, 9, 12, 15, and 18 years) were collected (1994-1997, 1997-1999, and 2000-2001) from a sample of over 6,000 children, adolescents, young adults, and their primary caregivers residing in Chicago neighborhoods. Detailed collection procedures are provided by Earls and Buka (1997).

Sample. We used Age 9 Cohort data from Latina/o children and their female primary caregivers. Demographic data only collected in W1 and focal predictors and dependent variables reported in Waves 2 (W2) and 3 (W3) were included in the analyses. Age 9 Cohort was chosen because (a) the violence exposure measures were administered to both caregivers and their children at W2 and W3; (b) these measures asked parallel questions that allow for item-by-item comparisons; and (c) the Latino sample was large enough to conduct our analyses.

The Age 9 Cohort had 821 participants at W1, of which 360 (48.1%) children and 376 (45.8%) primary caregivers were Latina/o. At W1, Latina/o primary caregivers were overwhelmingly female (91.6%) and biological mothers (89%). By W2, there were 294 (93.3%) Latina primary caregivers. We retained 287 Latina female primary caregivers that participated in W1 and W2 since there were too few Latino male primary caregivers (29 and 4, respectively) to conduct meaningful analyses. Most primary caregivers are biological mothers (97.2%) and are hereafter referred to as “mothers.”
Forty-five mother-child dyads were lost to attrition at W3. The final sample for this study consisted of 226 Latino children and their mothers who participated in all waves of data collection. No statistically significant differences in key demographic variables were found for children or mothers lost to attrition at W2 or W3.

**Child, mother, and family characteristics.** Children had mean ages of 11.22 (SD = 0.59) and 13.69 (SD = 0.55) years at W2 and W3, respectively, while mothers had a mean age of 35.30 years (SD = 6.09) at W1. There were slightly less female (47%) than male (53%) children in this sample. The majority of mothers were Mexican (73.5%) and foreign-born (76.7%). Most children were born in the United States (80.5%). At W1, immigrant children had spent, on average, 5 years in the United States (M = 1991, SD = 2.34) and immigrant mothers 15 years (M = 1981, SD = 8.00). Most mothers had not graduated from high school (60.7%). Children lived in households with an average of 5.90 members (SD = 1.94). Over three-quarters of the sample (78.8%) lived in households below the median household income in 1998 (US$38,885); almost a third (28.2%) lived in households with incomes between US$10,000 and US$19,999.

**Procedure.** Survey measures were administered in person or by phone separately to mothers and children. Latina mothers preferred to be interviewed in Spanish (61.7%), while their children were mostly interviewed in English (86.4%). Participants were given a small cash or other incentive (e.g., passes to the museum; Earls & Buka, 1997).

**Measures**

**Demographic variables (W1).** Comprehensive demographic information was collected from mothers at W1. A single item asked if mothers were of Hispanic or Latino origin, while mother-reported child race or ethnicity (0 = Hispanic) was used for children. Children’s sex (0 = female), child age (in years), mother age (in years), total household income (7-point scale, 1 = <US$5,000 to 7 = >US$50,000), and family size were included as covariates.

**Mother-child agreement about children’s CVE (W2 and W3).** Mother-child agreement about CVE refers to the degree to which mothers and their children report that children have been exposed or not to the same violent events in their community during the year prior to the interview. The instrument used in W1 is different from the ones in W2 and W3, which impeded its use.
in this study. At W2 and W3, youth in the Age 9 Cohort completed the “My Exposure to Violence” instrument, while mothers completed the “My Child’s Exposure to Violence” instrument (Selner-O’Hagan, Kindlon, Buka, Raudenbush, & Earls, 1998). Each measure had 25 items that asked about exposure to different types of violent events over the past 12 months. Only interpersonal violent events witnessed or personally experienced by children in the past 12 months occurring in or outside their neighborhood were used in this study.

Following recommendations by Brennan, Molnar, and Earls (2007), we created scales for witnessing violence and personal victimization. Eight items were included in the witnessing violence scale (e.g., “Now just thinking about the past 12 months, have you [or your child] seen someone else get chased?”). Six items were included in the personal victimization scale (e.g., “. . . have you [or your child] been shot?”). Children could be exposed to a total of 16 witnessing events (eight events in or outside neighborhood) and 12 personal victimization events (six events × two locations).

We calculated mother-child agreement about child’s CVE by comparing mother and child responses to each of the 16 or 12 violent events in the witnessing and personal victimization scales and created two scores: Agreement (1), both the mother and child agreed that the child was/was not exposed to the event; Disagreement (0), only one member of the dyad reported exposure. Items were summed to create two agreement measures per wave, one for child witnessed violence and another for child personal victimization. CVE agreement scores ranged from 3 to 16 for children’s witnessing community violence, and 4 to 12 for children’s personal victimization.

Child internalizing and externalizing symptoms (W2 and W3). The Youth Self-Report (YSR) protocol is derived from the 1991 Child Behavioral Checklist (Achenbach, 1991.). The YSR assesses internalizing (e.g., anxiety, depression) and externalizing (e.g., aggression, delinquency) problems and is a reliable and valid measure of adolescent problem behaviors. Cronbach’s alphas for the internalizing scales were .87 and .88 for W2 and W3, respectively. Cronbach’s alphas for the externalizing scales were .81 and .82 for W2 and W3, respectively. Higher scores represented greater internalizing or externalizing problems. Child-reported YSR scores at W3 were used as outcome variables, with W2 scores included as covariates when appropriate.

Results

Children and mothers reported that, on average, children experienced less than one violent event in the year prior to the interview, except that children
at 14 years of age (W3) reported witnessing slightly more than one violent event.

**Bivariate Correlations**

Demographic variables were, for the most part, not correlated with each other or with focal variables (Table 1). In general, higher levels of agreement were significantly correlated with lower rates of concurrent and longitudinal child-reported internalizing and externalizing problems.

**Mother-Child Agreement About Children’s Exposure to Community Violence**

Our first objective was to examine the degree of agreement between mothers’ reports of their children’s CVE and children’s self-reports. Mean scores for mother-child agreement were 13.33 (SD = 2.74) and 13.26 (SD = 2.28) for child witnessing community violence at W2 and W3, respectively, and 11.55 (SD = 1.15) and 11.50 (SD = 1.11) for personal victimization at W2 and W3, respectively. The results suggest that mothers and children had very high rates of agreement since scores ranged from 3 to 16 for witnessing community violence and from 4 to 12 for victimization (higher scores represent more agreement). High rates were driven by agreement about nonexposure. Almost a quarter (23.9%) of all mother-child dyads at W2 agreed that children had not witnessed any of the violent events in the previous year. Mothers and children had even higher rates of agreement for children’s personal victimization, with 82.3% and 77.4% of mother-child dyads agreeing that children had not been personally victimized at W2 or W3, respectively. Total CVE agreement scores ranged from 7 to 28, with mean scores of 24.89 (SD = 3.49) and 24.76 (SD = 2.85) at W2 and W3, respectively.

Our second objective was to examine whether mother-child agreement about children’s CVE changes between early and middle adolescence. Paired-samples t tests revealed statistically significant differences between W2 and W3 child- and mother-reported CVE. When children were 11 years old (W2), mothers reported higher rates of child witnessing community violence (M = 0.69, SD = 0.10) than children (M = 0.40, SD = 1.07), t = −3.25, p = .001. When children were 14 years old, however, mothers’ reports of child witnessing community violence (M = 0.23, SD = 0.65) were lower than children’s self-reports (M = 1.41, SD = 1.48), t = 11.39, p < .001. Similarly, mother-reported child personal victimization scores at W3 (M = 0.01, SD = 0.20) were lower than children’s self-reports (M = 0.15, SD = 0.42), t = 4.23, p < .001. Mother- (M = 0.04, SD = 0.21) and child-reported
## Table 1. Intercorrelations Among Covariates, Community Violence Exposure, Mother-Child Agreement, and Child-Reported Well-Being.

<table>
<thead>
<tr>
<th>Wave</th>
<th>Covariates</th>
<th>Sex</th>
<th>W2 child CVE</th>
<th>W2 agree</th>
<th>W2 well-being</th>
<th>W3 child CVE</th>
<th>W3 agree</th>
<th>W3 well-being</th>
</tr>
</thead>
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<tr>
<td>1.</td>
<td>Child age</td>
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<td>—</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>2.</td>
<td>Mom age</td>
<td>.06</td>
<td>—</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Family size</td>
<td>.02</td>
<td>−.04</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Household income</td>
<td>.02</td>
<td>−.00</td>
<td>−.09</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>5.</td>
<td>Child gender</td>
<td>−.02</td>
<td>−.00</td>
<td>−.05</td>
<td>.18**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>W2</td>
<td>Child witness</td>
<td>−.04</td>
<td>−.04</td>
<td>−.07</td>
<td>−.06</td>
<td>.08</td>
<td></td>
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</tr>
<tr>
<td>6.</td>
<td>Child victim</td>
<td>−.09</td>
<td>.01</td>
<td>−.03</td>
<td>.00</td>
<td>.09</td>
<td>.32**</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Mom witness</td>
<td>−.01</td>
<td>−.06</td>
<td>−.04</td>
<td>−.06</td>
<td>.07</td>
<td>.17**</td>
<td>.07</td>
</tr>
<tr>
<td>8.</td>
<td>Mom victim</td>
<td>−.01</td>
<td>−.01</td>
<td>−.01</td>
<td>.08</td>
<td>−.00</td>
<td>.32**</td>
<td>.16*</td>
</tr>
<tr>
<td>9.</td>
<td>Witness agree</td>
<td>−.02</td>
<td>−.01</td>
<td>−.09</td>
<td>.18**</td>
<td>−.13*</td>
<td>−.07</td>
<td>−.05</td>
</tr>
<tr>
<td>10.</td>
<td>Victim agree</td>
<td>−.03</td>
<td>.01</td>
<td>−.04</td>
<td>.13</td>
<td>−.10</td>
<td>.09</td>
<td>−.09</td>
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<tr>
<td>11.</td>
<td>Internalizing</td>
<td>−.04</td>
<td>−.14*</td>
<td>.07</td>
<td>−.14*</td>
<td>−.11</td>
<td>.05</td>
<td>.14</td>
</tr>
<tr>
<td>12.</td>
<td>Total behavior</td>
<td>−.01</td>
<td>−.09</td>
<td>−.06</td>
<td>−.10</td>
<td>−.07</td>
<td>−.07</td>
<td>.15*</td>
</tr>
<tr>
<td>W3</td>
<td>Child witness</td>
<td>−.09</td>
<td>.03</td>
<td>.06</td>
<td>−.12</td>
<td>.03</td>
<td>.05</td>
<td>.14*</td>
</tr>
<tr>
<td>13.</td>
<td>Child victim</td>
<td>−.05</td>
<td>.15*</td>
<td>−.04</td>
<td>.05</td>
<td>.10</td>
<td>.05</td>
<td>.29**</td>
</tr>
<tr>
<td>14.</td>
<td>Witness agree</td>
<td>−.04</td>
<td>−.07</td>
<td>−.00</td>
<td>−.06</td>
<td>−.06</td>
<td>.10</td>
<td>24**</td>
</tr>
<tr>
<td>15.</td>
<td>Victim agree</td>
<td>−.09</td>
<td>.01</td>
<td>.00</td>
<td>.01</td>
<td>.06</td>
<td>−.03</td>
<td>−.01</td>
</tr>
<tr>
<td>16.</td>
<td>Internalizing</td>
<td>−.04</td>
<td>−.12</td>
<td>.05</td>
<td>−.12</td>
<td>−.17*</td>
<td>−.00</td>
<td>20**</td>
</tr>
<tr>
<td>17.</td>
<td>Total behavior</td>
<td>−.02</td>
<td>.08</td>
<td>−.03</td>
<td>−.06</td>
<td>−.06</td>
<td>.04</td>
<td>.27**</td>
</tr>
<tr>
<td>18.</td>
<td>Total behavior</td>
<td>−.04</td>
<td>−.05</td>
<td>.01</td>
<td>−.10</td>
<td>−.15*</td>
<td>.02</td>
<td>.25**</td>
</tr>
</tbody>
</table>

Note. CVE = community violence exposure; W2 = second wave of data collection, W3 = third wave of data collection; $M_{childage_{W2}} = 11.22$ (SD = 0.59), $M_{childage_{W3}} = 13.69$ (SD = 0.55); 0 = female, 1 = male. aPast year child-reported witnessing or personal victimization CVE. bPast year mother-reported child witnessing or personal victimization CVE. cPast year mother-reported child witnessing or personal victimization CVE. dMother-child agreement about children’s witnessing or personal victimization CVE. eYouth Self-Report internalizing, externalizing, or total problem behavior score. 

*p < .05. **p < .01. ***p < .001.
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$M = 0.03$, $SD = 0.19$) personal victimization scores at W2 were not statistically significant, $t = -0.58$, $p = .565$. Mothers reported more child violence exposure when their children were early adolescents, while children reported greater exposure in middle adolescence.

**Child Gender and Mother-Child Agreement About Children’s CVE**

Hierarchical multiple regressions were conducted to examine whether child gender was associated with mother-child agreement about children’s CVE, after controlling for demographic covariates. In Step 1, variables for child age, mother age, past year household income, and family size were entered. In Step 2, child gender ($0 = \text{female}$) was included. The model predicting mother-child agreement about children’s witnessing community violence at W2 was statistically significant ($B = -0.92$, $p = .014$). Mother-daughter pairs had higher agreement about children’s witnessing violence than mother-son pairs.

**Associations Between Mother-Child Agreement and Child Behavioral Outcomes**

A series of hierarchical multiple regressions were conducted to investigate the association of W2 mother-child agreement scores with W2 and W3 child-reported internalizing and externalizing behaviors, after controlling for demographic covariates and W2 well-being scores, if appropriate. At Step 1, variables for child age, mother age, past year household income, family size, and child sex were included as covariates. W2 child internalizing or externalizing behavior scores were included in Step 2 when predicting W3 child-reported well-being. Mother-child CVE agreement scores were included in Step 2 or 3. Results appear in Table 2.

Agreement about witnessing violence at W2 significantly predicted lower child-reported externalizing symptoms at W2 ($B = -0.47$, $p < .001$) and at W3 ($B = -0.29$, $p = .018$), after controlling for covariates and W2 externalizing symptoms in the model. Higher agreement about witnessing violence at W2 predicted lower child-reported internalizing symptoms at W2 ($B = -0.93$, $p < .001$). Agreement about children’s witnessing community violence was not longitudinally associated with child-reported internalizing behaviors.

Mother-child agreement about children’s personal victimization significantly predicted concurrent lower externalizing ($B = -0.83$, $p = .004$) and internalizing behaviors ($B = -1.13$, $p = .033$) at W2. Agreement about children’s personal victimization did not significantly predict W3 child-reported externalizing or internalizing behaviors.
Table 2. Hierarchical Multiple Regression Analyses Predicting W2 and W3 Child Well-Being from W2 Witnessing and Personal Victimization Agreement.

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Child-reported well-being</th>
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<tr>
<td></td>
<td>Externalizing W2</td>
<td>Internalizing W2</td>
<td>Externalizing W3</td>
<td>Internalizing W3</td>
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<tr>
<td></td>
<td>B (SE B)</td>
<td>β</td>
<td>ΔR²</td>
<td>B (SE B)</td>
<td>β</td>
<td>ΔR²</td>
</tr>
<tr>
<td>Mother-child agreement about child witnessing community violence scores</td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Step 1</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Child age</td>
<td>0.39 (0.95)</td>
<td>.03</td>
<td>-0.44 (1.72)</td>
<td>-0.02</td>
<td>0.03 (0.95)</td>
<td>.00</td>
</tr>
<tr>
<td>Mother age</td>
<td>0.02 (0.05)</td>
<td>.02</td>
<td>-0.21 (0.09)*</td>
<td>-0.15*</td>
<td>0.05 (0.05)</td>
<td>.06</td>
</tr>
<tr>
<td>Household income</td>
<td>-0.15 (0.18)</td>
<td>-.06</td>
<td>-0.57 (0.33)</td>
<td>-0.12</td>
<td>0.11 (0.18)</td>
<td>.04</td>
</tr>
<tr>
<td>Family size</td>
<td>0.08 (0.16)</td>
<td>.03</td>
<td>0.12 (0.30)</td>
<td>.03</td>
<td>-0.13 (0.16)</td>
<td>-.05</td>
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<tr>
<td>Child gender</td>
<td>-0.60 (0.66)</td>
<td>-.06</td>
<td>-2.32 (1.19)</td>
<td>-0.13</td>
<td>-0.96 (0.65)</td>
<td>-.10</td>
</tr>
<tr>
<td>Step 2</td>
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</tr>
<tr>
<td>YSR W2*</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>0.44 (0.07)***</td>
<td>.43***</td>
</tr>
<tr>
<td>Step 3</td>
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<tr>
<td>Witness agree W2</td>
<td>-0.47*** (0.12)</td>
<td>-.27</td>
<td>-0.93*** (0.22)</td>
<td>-.28***</td>
<td>-0.29* (0.12)</td>
<td>-.17*</td>
</tr>
<tr>
<td>Total R²</td>
<td>.06***</td>
<td>.12***</td>
<td>.23*</td>
<td>.21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>N</td>
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<td>183</td>
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(continued)
### Table 2. (continued)

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<tr>
<th>Predictor</th>
<th>Externalizing W2</th>
<th>Internalizing W2</th>
<th>Externalizing W3</th>
<th>Internalizing W3</th>
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<tr>
<td>B (SE B)</td>
<td>β</td>
<td>ΔR²</td>
<td>B (SE B)</td>
<td>β</td>
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<tr>
<td>Mother-child agreement about child personal victimization scores</td>
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<tr>
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<td>Household income</td>
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<td>.04</td>
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<td>.03</td>
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<tr>
<td>Child gender</td>
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<td>-.03</td>
<td>-1.62 (1.21)</td>
<td>-.09</td>
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<tr>
<td>Step 2</td>
<td>.21***</td>
<td>.17***</td>
<td></td>
<td></td>
</tr>
<tr>
<td>YSR W2</td>
<td>-</td>
<td>-</td>
<td>-</td>
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<td>Step 3</td>
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<tr>
<td>Victim agree W2</td>
<td>-0.83** (0.29)</td>
<td>-.20**</td>
<td>-1.13* (0.53)</td>
<td>-.15*</td>
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<tr>
<td>Total R²</td>
<td>.03**</td>
<td>.06*</td>
<td>.21</td>
<td>.21</td>
</tr>
<tr>
<td>N</td>
<td>208</td>
<td>208</td>
<td>183</td>
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</table>

Note. YSR = Youth Self-Report.

*Child-reported internalizing or externalizing behaviors.

*p < .05, **p < .01, ***p < .001.
Mothers and children exhibited very high rates of agreement about children’s exposure to violence, driven by high rates of agreement about nonexposure. The low rates of violence exposure in our sample contrasts with prior research with Latino youth (e.g., Kennedy & Ceballo, 2013). The sample of Latino families in the PHDCN, unlike other studies of community violence, was not solely drawn from poor neighborhoods which may explain the reported low rates of violence exposure. The high rates of agreement we found in this study differ from cross-sectional analyses conducted by Zimmerman and Pogarsky (2011) using PHDCN data. A majority of parents (66%) of 12- and 15-year-olds underestimated their children’s lifetime CVE. We did not use these older cohorts because parent-reported child CVE was not collected at Wave 3. We also limited our CVE variables to violence that happened in the year preceding the interviews to address recall biases and errors and limit CVE that may have happened in different contexts or, in the case of immigrant Latino families, outside the United States. Further, families may have exerted greater control and supervision over the youth in this sample, given that children were around 11 years old at W2 when compared to older cohorts (Antunes & Ahlin, 2014; Zimmerman and Pogarsky, 2011).

In line with prior research, however, we found that Latina mothers of violence-exposed youth underestimated their children’s exposure to community violence by almost one violent event when children were older and more exposed (Ceballo et al., 2001; Zimmerman & Farrell, 2013). When children were younger, mothers modestly overestimated their children’s exposure. These findings should be interpreted with caution as we did not account for the severity of the discrepant events. A child might have witnessed someone being chased or someone being shot, and this occurrence was counted equally in our study. The support required by a child experiencing either one of these events may be different and mothers’ awareness may be more important for children exposed to more severe forms of violence. A way to address this issue in future studies is to examine item-by-item parent-child agreement to see if there are patterns of nondisclosure based on event-specific characteristics (e.g., severity or proximity).

We purposely focused on mother-child agreement at two different time points during an important transition for children (i.e., from middle school to high school). Had we only looked at mother-child agreement at one point in time, we would not have seen a change in the direction of disagreement for the violence-exposed youth (Ceballo et al., 2001). It should be cause for concern that children reported more violence exposure than their mothers were aware of as they grew older. Perhaps mothers in our sample were less able to supervise their violence-exposed children as they become more independent.
and spend more time outside their homes (Goodman et al., 2010). It is also possible that as children grow up, they are less inclined to share their experiences of community violence for fear of losing their independence or autonomy (Dinizulu, Grant, Bryant, et al., 2014). The transition to high school may be an important point of intervention to ensure caregivers continue to be accurately aware of their children’s CVE, especially in contexts were children are more frequently exposed.

We also investigated the relations between child gender and mother-child agreement about children’s CVE. At around 11 years of age, mothers of daughters were, on average, aware of more violence that their daughters had been exposed to in the previous year when compared to mothers of sons. This finding is in line with a qualitative study of Dominican and Puerto Rican mothers in which mothers engaged in culturally driven parenting practices as a function of their adolescent children’s gender (Guilamo-Ramos et al., 2007). Mothers discussed how the Latino cultural norms of male liberty and female submissiveness meant that boys should be given more freedom and girls strongly encouraged to participate in home-based activities (Guilamo-Ramos et al., 2007).

Ceballo et al. (2012) identified a culturally specific parenting strategy that Latina mothers used in challenging neighborhood contexts: siempre pendiente. Siempre pendiente (“always aware”) refers to being acutely aware of children’s whereabouts, as well as their emotional and psychological states (Ceballo et al., 2012). The mostly Mexican mothers in our sample may have adhered to similar cultural norms, but to different degrees for their daughters and sons. Mothers may have given their sons more freedom to engage in activities outside the home with less parental supervision (Raffaelli & Ontai, 2004). These cultural norms may also manifest themselves, not in how much violence children are exposed to, but in how much parents know about their children’s experiences with violence. Parents may be more vigilant and ask more questions about their daughters’ activities outside the home.

Another possible explanation is that by the time Latino adolescents reach high school, they are less likely to reveal experiences with community violence to their parents, irrespective of their gender (Jäggi et al., 2016). Prior research using PHDCN data for older cohorts of youths revealed that parent-child discord about CVE was associated with negative outcomes for young men and women, but young women may be at increased risk of internalizing problems (Zimmerman & Farrell, 2013). Future research should directly examine whether there are gender differences in how much Latino children disclose to their parents about their CVE and whether disclosure is related to cultural gender norms. Additional studies that include large samples of Latino fathers are also greatly needed. Perhaps Latino boys are more willing to share
their experiences with violence with their fathers rather than their mothers. Culturally informed interventions that specifically target gender norms may be important in providing tools for parents to encourage disclosure and support for violence-exposed Latino youth.

Externalizing and internalizing behaviors exhibit strong stability during adolescence (Snyder et al., 2017). In our study, mother-child agreement about children’s witnessing violence at age 11 was concurrently and longitudinally related to a modest decrease in externalizing behaviors, even after controlling for previous externalizing behaviors. Not surprisingly, mother-child agreement about violence was only concurrently related to child-reported internalizing behaviors when children were younger (Hardaway et al., 2016). It is possible that delinquent or aggressive behaviors in children signal to mothers that something is wrong. In response, mothers may ask questions that help them become more aware of their children’s experiences with violence.

Our finding of a reduction in child-reported externalizing behaviors associated with increased mother-child agreement scores provides some evidence that mother-child agreement is an important predictor of child behavioral outcomes and warrants greater attention in future work (Goodman et al., 2010). Moving forward, it will be important to test whether this association is present in larger samples of violence-exposed Latino youth over time. Parental awareness of children’s CVE may increase the resources, material or psychological, available to children in coping with the aftermath of violence (Hardaway et al., 2016). However, mothers with more violence-exposed children may also live in more violent neighborhoods, increasing their stress and hindering their ability to recognize and handle their children’s psychological and behavioral problems. Efficacious interventions aimed at increasing parent child communication about sexual behaviors (Sutton et al., 2014), for example, may be adapted as a way to buffer the negative effects of CVE, especially by paying particular attention to Latino cultural norms and gendered rearing practices.

Several limitations to this study should be noted. First, we were only able to use two waves of data for the focal variables. Longitudinal studies of CVE are needed in order to model trajectories of exposure and conduct “person centered” analyses (Kennedy & Ceballo, 2014). Using two waves of data allowed us to detect change and stability over time in mother-child agreement about CVE and, thereby, also allowed us to identify changes present during the transition from early to middle adolescence. Furthermore, we were able to detect a positive association between mother-child agreement and decreased externalizing behaviors in children, which would have been lost had we relied on a single wave of data.
The community violence measures in this study relied on informants’ recall of past events and such memories are susceptible to biases and errors (Kennedy & Ceballo, 2014). Other methods of data collection, such as daily diary studies, can reduce recall biases in gathering information about youth’s CVE (Richards et al., 2015). To help reduce bias and error, we limited our study to community violence that happened in the previous year and in children’s neighborhoods. In doing so, we addressed the confounding effects of violence that may happen in children’s homes or schools. We also used both mother- and child- reported CVE. Agreements and discrepancies were not relegated to measurement error, but were rather conceptualized as a distinct construct that revealed something important about the mother-child relationship (Goodman, 2013). Future instruments for assessing community violence should include items about adolescent disclosure, as well as their motivations for disclosing or not. The results of this study point to potential developmental changes over time about parental knowledge and adolescent disclosure of violent events. While caution in the interpretation of these results must be exercised, given the small subsample of violence-exposed adolescents, the findings reiterate the need to study CVE using large-scale, longitudinal studies with diverse samples of Latino youth.

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