

Traditional Machismo and Caballerismo as Correlates of Posttraumatic Stress Disorder, Psychological Distress, and Relationship Satisfaction In Hispanic Veterans

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ABSTRACT

“An online survey was used to examine 45 Hispanic male veterans’ traditional machismo and caballerismo as correlates of posttraumatic stress disorder (PTSD), psychological distress, and relationship satisfaction. Higher traditional machismo was associated with higher PTSD severity and distress and lower relationship satisfaction. Psychometric properties of the Traditional Machismo and Caballerismo Scale were explored.”

RESEARCH HIGHLIGHTS

- The percentage of self-identified Hispanic soldiers on active duty in the Army doubled from 1995 to 2005. It is expected that the number of Hispanic soldiers will continue growing, but there is little research on the needs and multicultural aspects of Hispanic service members and veterans. To address this gap, this study explored aspects of masculinity unique to Hispanic culture (machismo and caballerismo) as they apply to Hispanic veterans symptoms of PTSD, psychological distress, and relationship satisfaction.
- Traditional machismo attitudes and beliefs, including strict sex roles within a household and emotional restriction, were associated with greater PTSD symptoms, more psychological distress, and lower relationship satisfaction. For traditional machismo, items involving emotional restriction and guardedness had the highest correlation with poor adjustment.
- Several characteristics associated with both machismo and caballerismo are consistent with military culture and may impact the adjustment of many veterans. Therefore, it is important that clinicians understand how machismo and military experience can interact to impact clients’ clinical presentations and attitudes towards treatment or therapy.

IMPLICATIONS

FOR PRACTICE

Clinicians and counselors should understand how cultural differences relate to military service and mental health. Since traditional machismo is associated with restricted emotional expression, as well as greater PTSD symptoms and distress, clinicians, counselors, and family members should encourage their veteran to express their emotions. Increased emotional expression could reduce PTSD symptoms and distress levels, and improve relationship satisfaction. Clinicians and family members may not realize that service members or veterans are distressed because Latino men who ascribe to traditional machismo values are more likely to inhibit emotions and avoid appearing vulnerable. As a result, family members should remain supportive of their veterans, especially when discussing how they feel. Clinicians should help their clients explore personal attitudes and beliefs that make emotional expression difficult. Additionally, clinicians must develop a trusting relationship before jumping into emotional treatments. Given that some male Latino veterans might be less likely to partake in therapy if they view it as emasculating, therapists should consider referring to therapy as “skills training” so that the process is not presented as the opposite of masculine ideals. Clinicians should focus on culturally acceptable values, like nurturing, providing for family, and maintaining a strong ethical code, to improve client functioning rather than framing masculinity or mental health symptoms as weaknesses.

FOR POLICY

The DoD might incorporate “skills training” activities, tasks, or information that focuses on emotional training in its Transition Assistance Programs (TAP). The DoD and the VA might provide information for all service members regarding masculine ideals and treatment seeking or postdeployment integration. The DoD and the VA might use campaigns or public service announcements to encourage characteristics of caballerismo (caretaking, chivalry, and family involvement) in military culture and messages, rather than masculinity and machismo. The VA might consider administering assessments, like the Traditional Machismo and Caballerismo Scale (TCMS), to locate and help veterans who might be at risk for restricted emotional expression, poor adjustment, and will not seek help on their own. Policymakers might allocate funds to further study Latino veterans and service members, particularly regarding mental health outcomes, to provide culturally sensitive programming and care.

FOR FUTURE RESEARCH

This study was limited by a small sample size (N=45), it being conducted online, and the reliance on participants completing the survey. Future researchers should recruit more participants to increase sample size and should consider comparing the symptoms, attitudes, and demographics of non-respondents and respondents. The current study included veterans from multiple service eras, with differing deployment experiences. Such a diverse group of veterans could have resulted in unknown influences on the variables in this study. Future studies should test for and control confounders and analyze the data by era of service or number of deployments. Further research is needed to better understand the relationship between machismo, caballerismo, military service, mental health outcomes, and relationship satisfaction. Another limitation of this study is that causality cannot be established with the current data. Future researchers should employ different statistical methods to study the association between culture and mental health. The psychometric properties of the Traditional Machismo and Caballerismo Scale (TMCS) should be tested in larger veteran populations. Researchers should also examine the differences in TMCS scores across demographic variables like age, type of service, relationship status, and level of acculturation. Since components of caballerismo and machismo can be applied to military culture, future researchers should compare the scores of Hispanic and non-Hispanic service members and veterans on measures of machismo, caballerismo, and mental health outcomes.

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