Language Brokering and Mental Health Outcomes

Lisa M. Hooper, Guest Editor

I am pleased to introduce this special issue of the *Journal of Mental Health Counseling* dedicated to language brokering and mental health. The United States Census Bureau reported that in 2012, 85% of foreign-born individuals reported speaking exclusively a language other than English at home, and only 35% reported speaking English "very well" (Gambino, Acosta, & Grieco, 2014). With immigration rates continuing to rise in the United States and in other countries, a special issue focused on language brokering is timely. Although there is a body of literature linking language brokering and educational outcomes, there is an urgent need to advance an understanding of the extent to which language brokering is related to mental health outcomes, culturally tailored clinical practices that may be used with individuals who serve as language brokers, and the ever-increasing need for human helpers to serve as language brokers. This special issue was composed to address these important research and practice topics.

I am pleased to introduce this special issue of the *Journal of Mental Health Counseling* dedicated to language brokering and mental health. The diversity of language in the United States is substantive and attributed—in part—to immigration (Mier-Chairez, Arellano, Tucker, & Hooper, 2018). In 2014, approximately 42.2 million immigrants were living in the United States (Zong & Batalova, 2016), with children of immigrants projected to represent one in three children in the United States by 2050 (Passel, 2011). The United States Census Bureau reported that in 2012, 85% of foreign-born individuals reported speaking exclusively a language other than English at home, and only 35% reported speaking English "very well" (Gambino, Acosta, & Grieco, 2014). With immigration rates continuing to rise in the United States and in other countries, a special issue focused on language brokering is timely.

Language brokering is defined as "facilitating communication between two linguistically or culturally different parties" (Tse, 1996, p. 485). Although the idea of language brokering has long been discussed in diverse literature bases (Mier-Chairez et al., 2018), there has been scant attention to the relation between language brokering and mental health issues and outcomes (Kam, Gasiorek, Pines, & Steuber Fazio, 2018; Mier-Chairez et al., 2018; Oznobishin & Kurman, 2016). Overwhelmingly, the research and practice literatures have focused on the link between language brokering and academic achievement and other select educational outcomes (see Buriel, Perez, DeMent, Chavez, & Moran, 1998; Cline, Crafter, & Prokopiou, 2014; Dorner, Orellana, & Li-Grining, 2007; Niehaus & Kumpiene, 2014; Tse, 1995), although the need to focus on different domains (e.g., mental health) across developmental stages (childhood through adulthood) is critical to understanding the range of outcomes that may emerge from language brokering (Motti-Stefanidi & Coll, 2018). Thus, this special issue was composed to highlight both culturally tai-
lored clinical practices (see Delgado-Romero et al., 2018; Thompson, Green, Taylor, & Corey, 2018; Tuttle & Johnson, 2018) and research that proffers ideas and findings from diverse perspectives and undergirded by varied methodologies (see Arellano, Mier-Chairez, Tomek, & Hooper, 2018; Morales & Wang, 2018; Weisskirch, 2018). Clinical mental health counselors and other healthcare providers, educators, researchers, and policy makers who are not aware of the criticality and relevance of language brokering can garner timely information from the practice- and research-based recommendations that appear in this special issue.

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Weisskirch (2018) expands on his contribution to the language-brokering literature base (see Weisskirch, 2005, 2007, 2017; Weisskirch & Alva, 2002; Weisskirch et al., 2011) with an empirical study that examines the deleterious and positive outcomes of language brokering in emerging adults with two foreign-born parents. This study is noteworthy because unlike retrospective accounts of language brokering among adults, Weisskirch considers the implications of current language brokering and mental health outcomes. In addition, Weisskirch’s (2018) focus on well-being enables readers to understand how competencies and positive outcomes may coexist with negative outcomes commonly considered in empirical investigations on language brokering (Motti-Stefanidi & Coll, 2018).

Because of the concomitant trauma and acculturative stress that may coexist with immigrating and thus language brokering, prevention, intervention, and treatment modalities that enable individuals to express themselves in creative ways (e.g., art, music, and dance therapy; American Psychological Association [APA], 2017), in addition to “traditional” ways (talk therapy), are paramount. Toward this end, Thompson et al. (2018) comprehensively outline an expressive therapeutic framework (i.e., use of shoes and mixed media) for working with refugees who engage in language brokering. Their work highlights the combined and differential effects of immigrant identity and paradox, trauma, and acculturation and how expressive therapy can be effective, inclusive, and culturally responsive for children who engage in language brokering.

The accumulated research shows that a significant amount of what is known about language brokering is derived from studies composed of individuals who identify as Latinx. Morales and Wang (2018) add to this literature by discussing the differential effects of types of language brokering in their study composed of Latinx college students. Specifically, they consider the relations among language brokering, parent–child relationships, and mental health. This study is important because it helps to clarify how the different people for whom individuals language broker and the contexts of their brokering may be associated with varied outcomes. This study can inform future studies composed of other racial, ethnic, and cultural groups.

The act of language brokering occurs in diverse contexts (e.g., health care settings, banks, churches, and schools; Motti-Stefanidi & Coll, 2018; Tse, 1995). The school context has been discussed as a setting that may serve as an effective prevention and intervention point for varied academic, mental, and physical health outcomes. Given that youth who language broker spend a sig-
significant amount of time at school, schools are an important context to consider in research and practice related to language brokering. Tuttle and Johnson (2018) describe how language brokering may be evinced in K–12 school systems and how teachers, other school officials, and mental health providers can navigate this family systems process. Additionally, Tuttle and Johnson (2018) use a case study to illustrate how language brokering emerges, the possible consequences, and culturally relevant counseling strategies. They underscore the dearth of research focused on how school counselors create and evaluate school-based initiatives going forward.

Delgado-Romero et al. (2018) highlight a university-based counseling program implemented with bilingual mental health counselors serving in the role of language brokers for Spanish-speaking clients. Importantly, they discuss the competing ethical and professional issues that emerge for some bilingual providers who create and work in programs directed toward multilingual clients. They also discuss the challenges and institutional barriers that they experienced in sustaining such a program. Delgado-Romero et al. (2018) conclude with recommendations regarding ways to monitor and evaluate the effectiveness and benefits of such a program. This novel program provides a road map for others who may have an interest in implementing a similar program. This article is noteworthy in that it focuses on human helpers serving as language brokers.

Language brokering may be similar to or a form of parentification—when a child takes on adult- and parent-like roles and responsibilities in the family system (Arellano et al., 2018; Kam, Marcoulides, & Merolla, 2017). Specifically, there is a strand of research that suggests the act of language brokering places children and adolescents in a position of power in the family and other systems, is abnormal and age inappropriate, and that it compels children to carry out adult-like roles and responsibilities to maintain homeostasis and functioning in the family system (Hooper, 2018; Kim, Hott, & Gonzalez, 2017; Mier-Chairez et al., 2018; Motti-Stefanidi & Coll, 2018). In their cross-sectional investigation composed of emerging adults, Arellano et al. (2018) investigate the extent to which parentification and language brokering are similarly related to mental health outcomes in theoretically expected ways. Specifically, they investigate the predictive ability of parentification and language brokering for self-reported depressive, anxiety, and somatic symptoms and self-reported psychological distress. Adding to the literature base, Arellano et al. (2018) measure the outcome variables both continuously and dichotomously to determine differences in gradient versus threshold effects.

**CONCLUSION**

Taken together, the six articles in this special issue were selected to highlight the diverse aspects of language brokering and its relevance to mental health outcomes among children, adolescents, and adults. Given the changing demography of the United States (Passel, 2011), clinical mental health counselors, educators, researchers, and policy makers can benefit greatly from having knowledge, skills, and awareness about language brokering (APA, 2017; Mier-Chairez et al., 2018). I hope that this special issue will stimulate conversations, curricula, policies, and practices focused on the antecedents, correlates,
and outcomes related to language brokering. In addition, the articles in this special issue may stimulate directions for future research and produce implications for services that may be piloted and evaluated for their ecological validity, cultural responsiveness, and sustainability.

REFERENCES


