

Individual, Institutional, and Environmental Determinants of Social Capital, and its Influence on the Earnings and Health of Mexican Immigrants in Los Angeles County

With 9.2 million Mexican immigrants residing in the United States representing 3.3 percent of the total population according to the 2000 Census, Mexican immigrants make significant contributions to the United States. With no end to this immigration stream in the foreseeable future, their successful integration into society is important to lessen social inequalities. No agreement exists as how to accomplish this. Both private markets and government have failed to monitor economic development as many would like to see. In response a community governance model based on social capital has gained support as an acceptable social intervention. However, few studies examine the individual level determinates of social capital. By parsimoniously defining social capital as interpersonal reciprocal relationships, this proposal uses data from a vulnerable population, recent Mexican immigrants in Los Angeles County, to examine the individual demographic, labor market, institutional, and neighborhood determinates of social capital.

In subsequent chapters this social capital variable is employed to estimate models of Mexican Immigrants earnings and self rated health outcomes. Mexican immigrants, many of whom have unauthorized status, have low income. The retrenchment of public assistance programs could encourage Mexican immigrants to be more dependent on social capital. Increasing stocks of social capital might facilitate more successful participation in the United States labor market. The labor market chapter estimates a model how Mexican immigrant wages are related to social capital, immigrant integration, and human capital variables.

Mexican immigrants have surprisingly positive health outcomes. The Latino Health Paradox posits that Latino immigrants, especially Mexicans, have health outcomes similar to non-Latino whites than other lower socio economic groups. Social capital is theorized to offer social support and enhance social cohesion, which are factors in positive health outcomes. Social capital has not been tested as an explanatory variable for the paradox. This health chapter estimates a model of the relationship of self reported health to social capital, individual, labor market, and neighborhood characteristics.

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