¡Hola! Cómo estás? Speaking Spanish May Protect Your Heart





What if your spoken language affected your health?

Some 30 years ago, researchers found that Hispanic individuals are less likely to die from heart disease than their non-Hispanic White counterparts, despite having higher risk factors—a pattern they dubbed the "Hispanic paradox." New research suggests that cultural characteristics affecting how Spanish speakers appraise and accumulate stress might explain this paradox. Compared to English, the Spanish language has specific characteristics that might minimize the impact of negative mood and experiences on cardiovascular responses, and thus protect Spanish-speaking individuals from the effects of stress.

In a recent <u>article in Perspectives on Psychological Science</u>, María Magdalena Llabre of the University of Miami focuses on features of the Spanish language that may promote emotional expression, expand emotional concepts, and influence the appraisal of stress. These features may protect against stress-related illnesses.

| Additional research on the psychological science of stress. |
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Despite many individual and group differences, Hispanic communities share language as a consistent cultural component. Language may also influence the way people think. For example, Spanish speakers can say, in effect, that "a vase broke itself," whereas English speakers are directed to say who broke it. Thus, when describing accidental events, English speakers are more likely than Spanish speakers to ascribe blame and remember the agents at fault (Fausey & Boroditsky, 2011).

Language can not only affect basic perception but also shape emotions and stress appraisal. The characteristics of Spanish can thus lead its speakers to evaluate stress differently, reducing their cardiovascular reactivity and, by extension, their mortality due to cardiovascular disease.

"Healthy" language features

The Spanish language has several features, shared with other Romance languages, that foster the use of a wider range of emotions in common speech than English does.

Unlike English speakers, Spanish speakers can specify the **permanence of emotions**. This is because the verb "to be" has two forms in Spanish: the trait (permanent) ser and the state (transitory) estar (e.g., "I am sad" can be soy triste or estoy triste, respectively). This distinction affects the representation of emotions, situations, conditions, and characteristics. For example, Spanish speakers can choose to say estoy gordo instead of soy gordo for "I am fat." This can lead to a different appraisal of the situation that includes the possibility for change.

Spanish appears to **promote the use of "happy" words** because it has a larger lexicon for positive affect than English. This availability of positive words might encourage optimism. More broadly, Spanish has a **larger emotional lexicon**, which allows for more heterogeneity in the emotions articulated by Spanish speakers compared to English speakers. In difficult circumstances, the ability to express varied emotions has been linked to improved psychological and physical health.

Spanish speakers can **exaggerate or minimize emotion words by using suffixes**. The addition of suffixes such as -ísimo or -ísima can maximize an emotion (e.g., tristísimo is very sad), whereas suffixes such as -ito or -ita can minimize an emotion—and possibly diminish the magnitude of a stressor (e.g., cansadito as a little tired).

Greater use of the subjunctive mood, which can add information about possibilities, contextual factors, or emotions to the infinitive form of any verb (e.g., Me alegro de que seas mi amigo for "I am happy that you are my friend"). Spanish speakers' more frequent use of the subjunctive mood means they have more opportunities to explore alternative or hypothetical possibilities or convey their attitude toward events or actions.

By providing wider access to emotion words, creating the potential for more optimism, and enhancing social relations, all of these features of Spanish may influence how individuals build emotion schemas and appraise stress. Ultimately, those effects of language may influence cardiovascular reactivity and recovery.

The relationship among language, emotion, and culture remains a subject to be studied.

"Whether language reflects a culture's view of emotion or influences that view may be impossible to parse. The effects are likely reciprocal and evolved over time," Llabre wrote. She added that future work should seek not only to improve understanding of the role of language in disease and the Hispanic paradox but also to identify practices that may improve cardiovascular health in a population.

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Works cited

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