

Mediators of the Relationship Between Acculturation Gap and Mental Health of Immigrant Children: A Review of the Literature

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ABSTRACT

Immigrant families face hardships as a byproduct of acculturation. The purpose of this study is 1) to evaluate the relationship between the acculturation gap and the mental health outcomes of immigrant children; 2) to profile the mediators of this relationship and to shed light on future intervention and research. Current research identified three main mediators, namely, intergenerational conflict, supportive parenting, and adolescent reported family functioning. These findings guide future interventions to focus on identifying acculturation gaps and strengthening intergenerational ties. Future studies might investigate both enculturation and acculturation gaps, as well as the impact of paternal-child acculturation gaps on the well-being of immigrant children, to fill in gaps in the current knowledge.

Keywords: *acculturation gap, mental health, immigration, immigrant families*

1. INTRODUCTION

Adjusting to a new culture and living environment can be challenging. Acculturation is a bidimensional process in which immigrants experience new values, behaviors, languages, and other aspects of the host society and balance them with their own native culture [1]. Previous studies have found that in immigrant families, parents and their children tend to have different rates of acculturation [2]. Although parents adapt to host cultures slowly, their children acculturate more quickly through their experiences in school and social interactions with peers. Meta-analysis indicates that this mismatch in acculturation has deleterious effects on the mental health of children of immigrants [3].

Currently, reviews of the mediators of the relationship between the acculturation gap and mental health outcomes among immigrant children are scarcer. Clarifying the mediators sheds a light on understanding and implementation of interventions for immigrant families and mental health problem prevention. The purpose of this paper is to review the relationship between the acculturation gap and mental health outcomes in children of immigrants, identify the mediators of this relationship, and provide insights for immigrant family interventions and future research.

2. LITERATURE REVIEW

2.1. Acculturation Gap and Mental Health Outcome

Previous studies supported the acculturation-gap distress theory proposed by Szapocznik and Kurtines [4], suggesting that a high level of acculturation gap between parents and their children was linked to poor mental health in children of immigrants. Specifically, greater discrepancies between children's and parents' cultural orientation were associated with more depressive symptoms [5], more alcohol abuse, more aggressive behavior, low self-esteem, and low optimism [6]. Moreover, Zhou discovered that children with a larger acculturation gap had lower academic achievement [7]. In addition, Ying and Han identified a longitudinal effect of the early acculturation gap on later mental health outcomes [2]. They indicated that a greater acculturation gap in early adolescence would predict increased depressive symptoms in later developmental stages.

2.2. Mediators

There are a few mediators identified by the current research. Because acculturation has such a complex

impact on immigrant families' lives, it's important to understand how it specifically affects the mental health of immigrant children. Understanding mediators can help to elucidate the link between the parent-child acculturation gap and mental health outcomes in immigrant children [8].

2.2.1. Intergenerational Conflict

According to Sluzki, intergenerational conflict is particularly acute to immigrant families due to the acculturation mismatch between parents and children [9]. Cultural differences can undermine the harmony of immigrant families in a variety of ways [10].

Conflicting values between parents and children during acculturation can exacerbate family conflict and alienate parents from their offspring [11]. Research studying Latino immigrant families indicated that less acculturated parents prioritize harmonious relationships, and would have more conflict with their more acculturated children who may prefer direct communication [11]. In Chinese immigrant families, the conflict between individualism and collectivism leads to family conflict. Chinese culture values filial piety and collectivism whereas western culture emphasizes individual achievements [12].

Previous research has discovered a link between acculturation and an increased risk of mental health disorders in immigrant children. Nonetheless, limited studies have looked into whether intergenerational conflict acts as a mediator. Pioneer research done by Gonzales et al. identified the mediation effect of family conflict within Latino immigrant families [11]. They suggested that family conflict mediated the relationship between acculturation and Latino youth's conduct problems and depressive symptoms [11]. Families with more acculturation had more conflict, leading to increased behavior issues and depressive symptoms.

The mediator of acculturation gap and mental health problems was also investigated in a study by Ying and Han [2]. In this longitudinal study, intergenerational conflict fully mediated the link between the acculturation gap reported in early adolescence and depressive symptoms in late adolescence. Manzo, et al. recently examined the acculturation gap specifically between mother and youth [13]. They reported that the value discrepancy between mother and youth-related to mental health problems in immigrant children and this relationship was mediated by mother-youth conflict. These findings suggested that a mismatch in acculturation rates between parents and their children frequently leads to increased intergenerational conflict, which in turn leads to a long-term impact on the mental health problems among immigrant children [13].

2.2.2. Supportive Parenting

Immigrant families face numerous obstacles as a byproduct of acculturation. Discrepancies in value and behavior between parents and their children often result in children losing emotional support from their parents. Parental warmth, inductive reasoning, and monitoring are three components of supportive parenting that are measured to reflect parental warmth and affection [12].

When researching the acculturation gap, prior studies preferred to take a variable-centered approach [12]. Weaver and Kim were the first to use a person-centered research method to study whether supportive parenting mediates the relationship between the acculturation gap and depressive symptomatology in immigrant children [12]. This longitudinal study took into account the interaction of numerous variables to depict a whole-person acculturation orientation and the multifaceted influence of acculturation. Results indicated that the acculturation gap was related to depressive symptoms through the mediating effect of supportive parenting. Families with bicultural orientation tended to report more supportive parenting and less depressive symptoms. Nevertheless, parents who were more enculturated gave less supportive parenting to their more acculturated children, leading to more depressive symptoms among children [12].

2.2.3. Adolescent Reported Family Functioning

Previous research suggested that a mismatch in acculturation direction within immigrant families was linked to poor family functioning [14]. Schwartz, et al. designed a longitudinal study to investigate the mediating role of Family Functioning [6]. This study explored how teenagers perceived their family cohesion and relationships, and whether this mediated the link between acculturation and drinking habits in Hispanic immigrant families. Their findings suggested that the greater the acculturation gap between parents and adolescents, the more alcohol abuse and depressive symptoms adolescents reported in family functioning.

3. IMPLICATIONS

3.1. Intervention Implications

Firstly, interventions that support immigrant families' mental health should focus on solving intergenerational conflict and strengthening intergenerational relationships as it directly predicts immigrant children's mental health results [2]. Service providers could assess intergenerational discrepancies in cultural values, behaviors, and rates of acculturation to understand deeper the underlying reasons for their client's family conflicts [3]. Furthermore, it is crucial for therapists to instruct immigrant parents and children to improve their communication and conflict solving skills

as intergenerational conflict directly predicts immigrant children's well-being. Gonzales et al. pointed out the need to help immigrant families to understand the process of acculturation and the related changes in their families [11]. This might be even more important for families who have adolescents [11]. Moreover, it would be beneficial for parents to learn positive family interactions and behavioral management skills [11]. This would help to create a supportive parenting style which was found to mediate the relationship between the acculturation gap and depressive symptoms [12].

Secondly, promoting biculturalism in immigrant families might decrease the acculturation gap between parents and children. Previous studies indicated that a greater acculturation gap is often associated with more mental health problems [3]. Service providers may consider not only facilitating immigrant families' knowledge and awareness of the host culture but also promoting cultural strength in their native culture [11].

3.2. Research Implications

Previous studies on the acculturation gap mostly focused on discrepancies in the host culture. However, acculturation is a two-dimensional process, future research should look into disparities in both the host and indigenous cultures [11]. Furthermore, the majority of research on this topic has focused on the mother-child acculturation gap. Variance in acculturation between fathers and children may have a distinct impact on immigrant children's well-being. Kim et al. reported that the father-child acculturation gap is associated with more externalizing problems among Mexican and Chinese families [15]. Future research can consider expanding this understanding of paternal variables and their impact on other mental health outcomes among immigrant children.

4. CONCLUSION

This review examined the relationship between the acculturation gap and immigrant children's mental health, clarified mediators of this relationship, and provided insights for future intervention and research. Greater acculturation gap is associated with more mental health problems through intergenerational conflict, supportive parenting, and adolescent perception of family functioning. These mediators guide future interventions to focus on intergenerational relationships and promote biculturalism. To fill in gaps in current literature, future research should look into both enculturation and acculturation gaps, as well as the impact of paternal-child acculturation gaps on the well-being of immigrant children.

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