Chapter 6

Parental Psychological Functioning and Immigrant Children’s Psychological and Socio-cultural Adjustment

Abstract

This study examines parental psychological functioning and child psychological and socio-cultural adjustment, comparing immigrant and non-immigrant groups. The sample consisted of 347 children aged 7 to 12 years, of whom 121 were immigrant (30 Russian, 38 Serbian and 53 Albanian) and 226 non-immigrant (162 Italian and 64 Slovene). Both parents provided data on their self-esteem, optimism, depression and parental distress. Children were tested regarding variables of emotional instability, prosocial behavior, aggression and depression. The results revealed that immigrant compared to non-immigrant parents presented lower levels of psychological well-being, exemplified by lower self-esteem and higher depressive symptoms, parental distress and dysfunctional parent-child interaction. In general, parental psychological well-being variables were particularly linked to child adjustment in the immigrant group. These results denote immigration as an important factor, undermining both mothers’ and fathers’ psychological functioning and their children’s adjustment.

6.1 Introduction

Immigration implies negative consequences for immigrant parents who are often faced with the complex task of parenting their children within a host culture. In addition, parenting roles are interrelated with socialization practices within both one's own and the dominant culture. Understanding immigrant parents’ specific experiences in socializing their children has significant implications for their adjustment. Little attention has been paid to better understanding the ways in which immigration affects parental psychological functioning and the consequent psychological and socio-cultural adjustment among immigrant children in Italy. Most research has focused on African American or ethnic minority single-parent families (Brody et al., 2002). Such investigations do not acknowledge the diversity of children and families from different immigrant backgrounds, nor the variety of their responses to migration stress. No
studies have focused on psychological adjustment pathways in immigrant families and their children, particularly those living in two-parent households in Northern Italy.

The present study was designed to address this gap, by testing the hypothesized pathways through which parental well-being and functioning are linked to children’s psychological and socio-cultural adjustment. On cultural and methodological grounds, we also wished to study groups of immigrant compared to non-immigrant families living in the same culture. This design also takes into account whether such hypothesized paths determine different outcomes for families from different immigrant (Albanian, Russian and Serbian) and non-immigrant (Italian and Slovene) backgrounds.

Immigrant parents have to raise their children within a predominant Italian society, with limited social supports and cultural structures – a situation which may account for a compromised parental well-being. This study explores the similarities and differences in the influence of immigration on parents’ own psychological functioning and their ability to adequately interact with their children. Finally, the impact of both mothers’ and fathers’ variables on child psychological and socio-cultural adjustment was investigated.

Over the past decade, our understanding of the link between stress-related factors in immigrant families and child behavior problems has been enhanced through a focus on the impact of such stressful circumstances. It is commonly hypothesized that cultural change due to immigration can be stressful for parents because of difficulties in reconciling the dissonances of the two cultures (Garcia Coll & Szalacha, 2004). Consequently, the stress of cultural change affects the psychological adjustment of their children.

However, to date, most of the research has focused on establishing the relationship between intergenerational immigrant family dysfunction, culturally related family conflict and poor mental health (Lee, Su, & Yoshida, 2005; Su, Lee, & Vang, 2005; Ying, Lee & Tsai, 2004). Research findings suggest increased risk of family conflict among many immigrant families in terms of the problematic distancing that occurs between immigrant parents and children as a consequence of the differences in adaptive processes and cultural change. For example, evidence supports the thesis that immigrant children present greater family conflict than non-immigrant, due to the presence of a greater parent–child maladjustment (Ying, Lee, Tsai, Lee, & Tsang, 2001). Moreover, difficult parent–child relations and family functioning were shown to be associated with depressive symptoms among immigrant populations (Crane, Ngai,
Immigrant Parents and Children

Larson & Hafen, 2005). Such studies examine parent–child relations as a composite variable as it relates to the child, masking our understanding of how parents’ psychological functioning and well-being may each relate to child adjustment outcomes (Kim et al., 2006). More empirical research needs to be conducted to validate these links and to determine how prevalent such parental and child problematic functioning is in immigrant communities.

The present study was designed to elucidate these relationships within a sample of immigrant families in Northern Italy. Relatively little is known about parent-child interactions among immigrant families, nevertheless the number of immigrants into Italy has continuously increased in recent years. Moreover, the unique aspects of the immigrant community in the area considered, make it a particularly relevant sample in which to explore cross-cultural dimensions of parent-child stress and support models.

Specifically, a conceptual model developed by Brody et al. (2002) has been implemented in the present research design. Their theoretical framework identifies important links between parental well-being, family process and child psychological and socio-cultural adjustment. Numerous studies had validated the model, providing persuasive results that positive parental well-being, adequate family interactions and parent-child relationships are associated with greater adjustment in children (Brody et al., 1994; 2002). In particular, parental psychological functioning such as higher self-esteem, greater optimism and lower depressive symptoms lead to greater involvement in parent-child relationships. Supportive parenting facilitates the development of satisfactory child adjustment. By contrast, high levels of parental depression, low self-esteem and low optimism cause more negative family relations, which in turn leads to negative outcomes for the child. This process leads to less supportive parent-child relationships and less adaptive functioning for both parents and their children.

According to the conceptual model that guided the study, we consider the psychological well-being of both parents as variables strongly related to child adjustment through their association with parenting processes. The psychological functioning of both mothers and fathers is viewed as a proximal factor that differently affects parents with and without immigration experience. Therefore, both factors were expected to be linked to child adjustment.
Numerous studies of parent-child well-being indicate that immigration is associated with less positive parenting behavior and more child problems (Short & Johnson, 1997). Given the acknowledged stress of immigration, it appears to be inevitable that immigration has a negative impact on parenting and, subsequently, on child adjustment. We predicted that experience of immigration would be associated with lower levels of parental psychological well-being.

Lower levels of self-esteem and optimism and higher depressive symptoms have been found to negatively mediate supportive parent-child relations in ethnic minority families (Brody et al., 1994; 2002). Conversely, others suggest that self-esteem and optimism are positively associated with feelings of self-worth and capacity to take care of children (Scheier & Carver, 1992). Research has also suggested that high levels of depression are related to more hostile and problematic family relationships and that interacting with a depressed and less involved parent may result in less support and communication in parent-child relationships (Fabes & Eisenberg, 1992). Thus, parental immigrant background was hypothesized to be associated with compromised psychological functioning, including less positive sense of self, less optimism, more depressive symptoms and parental distress.

Finally, we expected that immigration-related parental psychological functioning would exhibit different relations among parents and their children. This hypothesis stems from the fact that in many cultures childrearing is prevalently a woman’s role. Studies report parent gender differences with males being less involved in childrearing than females (Deater-Deckard, Atzaba-Poria & Pike, 2004; Brody et al., 2002). Also, as fathers seem to spend less time with their children based on studies previously reported, we suggest that maternal variables are more strongly associated with children’s adjustment, particularly in the immigrant group. In the current study, these parental and affective components were measured for both mothers and fathers.
6.2 Method

6.2.1 Participants

The sample consisted of 347 children with an average age of 8.96 years (SD = 1.46). All children were students enrolled from first to fifth grades at nine different schools in the Friuli-Venezia Giulia area. The experimental group was comprised of 121 immigrant children (30 Russian, 38 Serbian and 53 Albanian). The control groups were represented by 162 Italian and 64 Slovene children.

Immigrant children eligible to participate were Albanian, Russian and Serbian because they belong to the major immigrant ethnic groups in the region. Also, these children were born in their home countries and emigrated to Italy with both biological parents. Both mothers and fathers were immigrants and not refugees, which was considered an important distinction because it is known that psychological difficulties affect parenting with the presence of refugee status (Berry & Sam, 1997; Suarez-Orozco & Suarez-Orozco, 2002). For the purposes of this study, we considered Italian and Slovene ethnicity as non-immigrant, when born and resident in this region.

6.2.2 Measures

*Rosenberg Self-Esteem Scale* (RSE, Rosenberg, 1979) is the most common tool for assessing self-esteem. It consists of 10 items with a four-point response scale, from *strongly agree* to *strongly disagree*. The RSE has excellent psychometric properties with Cronbach’s alpha of .74 (Kernis, Grannemann & Barclay, 1989; Rosenberg, 1979). Studies confirmed the validity of the Italian translation of the scale and its adequate factorial structure and construction validity (Miretta et al., 1997; Ghaderi, 2005).

*Life Orientation Test* (Scheier & Carver, 1992) is a widely used scale in the field of behavioral psychology. In order to capture the self-regulating processes underlying behavior, Scheier and Carver (1992) constructed the Life Orientation Test (LOT), which is defined as a measure of generalized outcome expectancies or dispositional style. Positive correlations between LOT and coping have been established as well as between LOT and various illnesses (Scheier et al., 1989; Friedman et al., 1992). LOT scores correlated positively with self-esteem and negatively with measures of hopelessness,
Immigrant Parents and Children

depression, perceived stress, alienation, social anxiety, and symptoms of physical illness (Scheier & Carver, 1985, Terrill et al., 2002). The LOT, as described earlier, is a measure of generalized positive outcome expectancies that has shown adequate internal consistency (Cronbach’s alpha = .76) and 4-week .79 (Scheier & Carver, 1985) and 13-week .72 retest reliability (Carver & Gaines, 1987).

Center for Epidemiological Studies-Depression Scale (CES-D) developed by Radloff (1977) and validated in Italy (Fava, 1983) to measure parents’ depressive symptoms was used. The scale consists of 20 items that cover affective, psychological, and somatic symptoms. The respondent specifies the frequency with which the symptom is experienced (that is: a little, some, a good part of the time, or most of the time). The scale includes items such as "I felt depressed" and "People were unfriendly." The maximum obtainable score is 60. The response categories for the scale range from: “rarely or none of the time” to “most or all of the time”. The clinical cutoff point for possible clinical depression is a score of 16 meaning that a score higher than 16 indicates the presence of depression. However, research suggests that cutoff scores on the CES-D have inadequate specificity and sensitivity (Cho et al., 2003). That is, the CES-D is not a good measure of major depression as described in the clinical literature; thus, we use the term to refer to elevated levels of depression symptoms to avoid implying pathology (Dohwenrend & Dohwenrend, 1969).

This scale has proved to be stable with a high degree of reliability. For many different samples Cronbach’s alpha coefficient scores of 0.80 or higher have been reported (Radloff, 1977). The measure indicated high internal consistencies for adolescents (.89), mothers (.80), and fathers (.89) (Kim et al., 2006). Numerous studies were carried out in Italy in order to examine the validity of the CES-D self-rating scale for depression. The results show that CES-D is a valid measure which sensitively discriminates between depressed patients and controls (Fava, 1983).

Parent Stress Index-Short Form (PSI-SF, Abidin, 1993) is a parent self-report, 36-item questionnaire, designed to identify potentially dysfunctional parent-child systems. The PSI-SF focuses on high stress areas and predicts children's future psychosocial adjustment. The PSI-SF was developed for use with parents of children 6 to 13 years of age. Internal consistencies for the form were very good to excellent. Confirmatory factor analysis (CFA) indicated a 3-factor model comprised of Parental Distress,
Difficult Child, and Parent-Child Dysfunctional Interaction subscales, providing support for the generalizability of a 3-factor model of parenting stress. The results of numerous studies appear to support the use of the PSI-SF with lower socioeconomic, primarily ethnic minority and immigrant families (Reitman et al., 2002). The PSI-SF Italian version confirms its high validity with Cronbach’s alpha of .91 (Golombok, et al., 1996).

*Emotional Instability Scale, Prosocial Behaviour Scale and Physical and Verbal Aggression Scale* (Caprara et al., 1992) and *Children’s Depression Inventory* (Kovacs, 1988) previously described were used to measure child adjustment (see pages 46 and 48).

### 6.2.3 Procedure

Permission was obtained from headmasters and teachers. In order to select suitable respondents, all participants were nominated by school staff according to age, ethnicity and immigrant background.

Prior to data collection, letters were sent to parents via school staff. All parents received copies of the consent letters. They were required to send back these forms and to confirm whether they would permit their child to participate in this study. Signed consent was obtained from all parents.

Children were requested to complete all self-reported measures. Concurrently, the questionnaires regarding each family were sent separately to mothers and fathers, who could complete them at home. All information provided by the participants was kept confidential. Names of both children and parents were not disclosed and were recorded with a code number.

### 6.2.4 Data Analyses

In order to achieve this study’s main purposes, the following analyses were undertaken. First, the hypothesized negative immigration influence on parental psychological well-being was tested by MANOVA design with group as independent variable (immigrant vs. Slovene vs. Italian) and parental well-being as dependent
variable (mothers’ and fathers’ self-esteem, optimism and depression measured by RSE, LOT, CES-D and PSI-SF).

Second, to examine possible group differences on parental distress, a multivariate analysis of variance was performed with group as independent variable (immigrant vs. Slovene vs. Italian) and Parent-Stress Index subscales (parental distress, parent-child dysfunctional interaction, difficult child and total stress) for both mothers’ and fathers’ scores.

Finally, in order to provide evidence regarding the hypothesized relationship between parental functioning and child adjustment, the variables of child (emotional instability, prosocial behavior, aggression and depression) and mothers’ and fathers’ psychological well-being (self-esteem, optimism, depression and parental distress) were entered in a Structural Equation model and a maximum likelihood estimation of parameters was calculated. An MX structural equation modelling package was also applied, because of its flexibility to fit our conceptual model, thus allowing us to define its own fit functions and optimization to linear equality and boundary constraints (Neale, Boker, Xie & Maes, 2007). The adequacy level of our model was tested through Chi-Square statistics ($\chi^2$), Akaike’s Information Criterion (AIC) and Root Mean Squared Error Approximation (RMSEA).

6.3 Results

The results of this study are presented in the order the hypotheses were tested. The multivariate analysis of variance 3 x 6 with group as independent variable (immigrant vs. Slovene vs. Italian) and parental dependent variables (mothers’ and fathers’ self-esteem, optimism and depression) yielded significant results. In both mothers’ and fathers’ comparisons, strong evidence suggested the negative immigration influence on parental psychological well-being. Immigrant mothers showed lower self-esteem, $F(1, 145) = 5.98, p < .001$; immigrant $M = 30.08, SD = 3.92$ vs. Italian $M = 32.65, SD = 3.81$ and Slovene $M = 32.39, SD = 3.73$, and higher depressive symptoms, $F(1, 145) = 10.37, p < .001$; immigrant $M = 15.78, SD = 6.92$ vs. Italian ($M = 10.98, SD = 6.39$) and Slovene mothers ($M = 8.74, SD = 5.82$). There were no significant group differences on optimism for immigrant ($M = 16.57, SD = 2.41$) and non-immigrant mothers (Italian, $M = 17.14, SD = 2.91$ and Slovene $M = 17.91, SD = 2.06$).
Similar results emerged in the fathers’ group comparisons, indicating different psychological functioning with less positive self-esteem for the immigrant participants. Immigrant fathers reported lower levels of individual self-esteem $F(1, 145) = 7.87, p < .001$; ($M = 30.41, SD = 2.73$) as compared to non-immigrant Italian ($M = 33.35, SD = 4.24$) and Slovene ($M = 31.57, SD = 3.92$) fathers. There were no significant group differences in fathers on optimism (immigrant $M = 17.49, SD = 2.57$, Italian $M = 17.56$, $SD = 2.66$ and Slovene fathers $M = 17.43, SD = 2.95$) and depressive symptoms (immigrant $M = 12.92, SD = 4.98$, Italian $M = 10.86, SD = 6.84$ and Slovene fathers $M = 10.04, SD = 7.48$).

Next, we examined parental distress differences in their dyadic interaction with the child. A 3 x 8 analysis of variance with group as independent variable (immigrant vs. Slovene vs. Italian) and Parent-Stress Index subscales (parental distress, parent-child dysfunctional interaction, difficult child and total stress) for mothers’ and fathers’ showed significant results. Immigrant compared to non-immigrant mothers scored higher on parental distress scale, $F(1, 145) = 5.28, p < .001$, parent-child dysfunctional interaction, $F(1, 145) = 5.72, p < .001$ and total stress scale, $F(1, 145) = 3.39, p < .001$.

The same outcome was found for dyadic father-child interaction, with immigrant fathers reporting higher scores on parental distress scale, $F(1, 145) = 5.96, p < .001$, parent-child dysfunctional interaction, $F(1, 145) = 12.08, p < .001$ and total stress scale, $F(1, 145) = 7.93, p < .001$. No group differences emerged for the difficult child scale in both mothers’ and fathers’ ratings.

Finally, the conceptual model proposed (Fig. 1 and 2) was analysed via structural equation modelling (SEM), using Mx software (Neale, Boker, Xie & Maes, 2007). The analyses were performed separately in both groups of immigrant and non-immigrants in order to explore the hypothesized parent-child adjustment influences.

Figure 2 represents the loadings of the observed variables with structural equation coefficients testing our hypotheses as to the construction of relationships between immigrant parents and children. The data presented confirm that parental psychological well-being and children’s adjustment are positively correlated. The adjustment model indexes ($\chi^2 = 1.178, p > .5$; AIC = -126.000; RMSEA = 0.5) indicate a good fit of the model to the data. As hypothesized, there is a strong correlation between psychological variables of self-esteem, optimism and depression of mothers and fathers. A direct relationship that was predicted emerged, with the psychological construction of both parents leading to causal relations with children’s adjustment.
Consistent with the conceptual model, parental psychological functioning was directly linked to child psychological and socio-cultural adjustment variables. Moreover, this relationship is stronger in the mother-child than in the father-child comparison.

Figure 1.

*Conceptual Model Linking Immigrant Parental Psychological Functioning and Immigrant Child Adjustment*

A second model was tested to determine the relationship between parental psychological constructs and child adjustment in the non-immigrant group. Accordingly, the standardized coefficients presented in the SEM model show the existence of positive correlation between parental psychological well-being and children’s adjustment. The adjustment model indexes ($\chi^2 = 39.743, p > .5; \text{AIC} = -90.257; \text{RMSEA} = 0.00$) indicate a good fit of the model to the data.

As expected, there is a strong correlation between the psychological functioning of non-immigrant parents (.46) and its direct influence on child adjustment via mothers’ (.30) and fathers’ (.11) well-being variables. Parental psychological functioning was directly linked to child psychological and socio-cultural adjustment, but the strength of this relationship was less than in the immigrant group (immigrant mothers’ .93 vs. non-immigrant mothers’ .30 and immigrant fathers’ .27 vs. non-immigrant fathers’ .11). Moreover, consistent with the conceptual model proposed, a stronger mother-child correlation emerged in both immigrant and non-immigrant participants and in particular in the immigrant in respect of the non-immigrant group comparison.
6.4 Discussion

Three main purposes guided the present study. The first goal was to determine whether the different types of parental psychological well-being of immigrant and non-immigrant participants considered in the present investigation are significantly related to the self-esteem, optimism, and depressive symptoms of both fathers and mothers. The types of well-being that would be significant for immigrants were expected to be different from those of non-immigrant parents.

The second goal was to determine which parental distress types via parent-child interaction, if any, emerged as being uniquely related to the family members’ immigration experience. Specifically, immigrant parental distress as related to parental well-being was expected to be present at higher levels in these parents. The third goal of the study was to examine how immigrant and non-immigrant parental well-being may be related to child psychological and socio-cultural adjustment as reflected in levels of emotional instability, prosocial behavior, aggression and depressive symptoms in children.
With respect to parental psychological functioning, our results demonstrate that immigrant parents differ from parents in their host culture. Previous research has suggested that ethnic minority parents tend to present difficulties in well-being and parenting in their host culture (Bornstein & Cote, 2004; Berry, 1990). Similarly, our results confirm that parental difficulties may extend further and consequently may deteriorate more easily if these families have experienced immigration.

A vast body of literature claims that immigration brings forced adjustment in all domains of parents’ lives. These domains include adapting to a new social context, language, culture, home and occupation (Roer-Strier et al., 2005). Such changes undermine socio-economic and family support, which negatively affects parents’ psychological health, self-image, coping abilities and parental functions. The decline in self-esteem and loss of social status in immigrant parents is frequently linked to depressive symptoms, social isolation and marginalization (Szapocznik & Kurtines, 1993).

The results of our study are in line with the findings reported above. Moreover, both mothers and fathers in the immigrant group showed more parental difficulties in relationships with their children. Such problems were reflected in higher levels of parental distress, parent-child dysfunctional interaction and stress-related parenting. These results add to previous findings on the negative consequences of immigration for parents.

The contributions of parental psychological functioning variables – self-esteem, optimism, depression and distress – to children’s adjustment were also consistent with the anticipated model: the mothers’ and father’s psychological functioning was strongly associated with children’s adjustment. As hypothesized, this relationship was stronger in the immigrant rather than in the non-immigrant group and specifically for mother-child rather than father-child influences. These findings confirm the results of studies in which such links were examined, by indicating that the pathways to child psychological and socio-cultural adjustment remain robust across immigrant populations (Garcia Coll & Szalacha, 2004; Garcia Coll et al., 1996; Deater-Deckard et al., 2004; Roer-Strier et al., 2005; Smith, Lalonde & Johnson, 2004; Suárez-Orozco & Suárez-Orozco, 2002). It also shows that parental psychological functioning is linked to differences in self-esteem, optimism, depression and distress, which in turn are associated with child adjustment parameters.
Despite the importance of the results emerging from our data, some limitations need to be discussed. The model tested in this study is not intended to be exhaustive, thus models that include different parameters than those proposed here could also account for differences in parent-child outcomes. Moreover, our findings are limited in their generalizability to other immigrant communities. Although the results of this study indicate that immigration experiences significantly influence the psychological well-being of both parents and children, future studies should include measures of the social support provided by different immigrant communities, which may vary in their characteristics and adjustment processes.

In conclusion, the outcomes of this study provide a more comprehensive understanding of immigrant parenting experiences, and also of the social and family contexts that surround those experiences. Family systems mediate the adjustment of immigrant children and the detection of these influences plays an important role in the definition of risk and of the need for intervention for immigrant parents and their children living in Italy.