

California State University, San Bernardino

CSUSB ScholarWorks

Theses Digitization Project

John M. Pfau Library

2000

Effects of acculturative stress and coping on academic self-concept in minority children

Timothy Wayne Short

Follow this and additional works at: <https://scholarworks.lib.csusb.edu/etd-project>



Part of the [Family, Life Course, and Society Commons](#), and the [Multicultural Psychology Commons](#)

Recommended Citation

Short, Timothy Wayne, "Effects of acculturative stress and coping on academic self-concept in minority children" (2000). *Theses Digitization Project*. 1700.

<https://scholarworks.lib.csusb.edu/etd-project/1700>

This Thesis is brought to you for free and open access by the John M. Pfau Library at CSUSB ScholarWorks. It has been accepted for inclusion in Theses Digitization Project by an authorized administrator of CSUSB ScholarWorks. For more information, please contact scholarworks@csusb.edu.

EFFECTS OF ACCULTURATIVE STRESS AND COPING
ON ACADEMIC SELF-CONCEPT IN MINORITY CHILDREN

A Thesis
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Arts
in
Psychology:
Life-Span Development

by
Timothy Wayne Short


June 2000

EFFECTS OF ACCULTURATIVE STRESS AND COPING
ON ACADEMIC SELF-CONCEPT IN MINORITY CHILDREN

A Thesis
Presented to the
Faculty of
California State University,
San Bernardino

by
Timothy Wayne Short
June 2000

Approved by:



David Chavez, Advisor

6/15/00
Date



Eugene Wong



Laura Kamptner

ABSTRACT

The current study was an exploratory examination of the relationship among acculturative stress, coping skills, and academic self-concept in minority children. A sample of 66 Hispanic children ages 8 - 12 in a Southern California elementary school responded to a battery of tests including the SAFE-C (a modified version of the SAFE scale of acculturative stress; Mena, Padilla & Maldonado, 1987), the A-COPE (Patterson & McCubbin 1987), and the Self-Perception Profile for Children (Harter, 1985). Three hypotheses were proposed. First, acculturative stress on its own was not expected to be significant predictor of academic self-concept. Second, stress and coping together were expected to be significant predictors of academic self-concept. Third, academic self-concept was expected to decrease when emotion-focused coping is used, and to increase when problem-focused coping is used. All three hypotheses were supported. Results indicated that acculturative stress and coping partially explains the variance associated with academic self-concept. Explanations of results, relevance to the literature, expected reasons for findings, directions for future research, and applications of results are discussed.

ACKNOWLEDGMENTS

I would like to thank the members of my thesis committee for their help and encouragement along the way. Thank you Dr. David Chavez for your willingness to help me with the topic area, the data, and getting through every little bump and blockade along the road to completion! Also, I could not have navigated the return to Cal State and the completion of the Life-Span Developmental Program without the kindness and understanding guidance of Dr. Laura Kamptner. The statistics, overall design, and resolution of many difficult issues would have been impossible without the gracious and knowledgeable contributions of Dr. Eugene Wong.

As for encouragement and patience, no one deserves more appreciation than my wife, Cherie, for her enduring love, tolerance, and support. She has been there through the many late nights and skipped work days needed to complete this project, and has been nothing but loving, accommodating, and encouraging. Also many thanks to Diane, Steve, Donell, Mike and Judie, Justin, Daniela, Lisa, Scott, Yvonne, Kathy and Gladys for their patience, support, and belief that I could actually someday finish this!

In Memoriam

Donald V. Short

1/18/1932 - 12/06/1999

Whose patience, love, and guidance

Enabled this thesis,

And will be with me always

TABLE OF CONTENTS

ABSTRACT iii

ACKNOWLEDGMENTS iv

LIST OF TABLESviii

CHAPTER ONE: INTRODUCTION 1

 The Concepts of Stress and Coping 2

CHAPTER TWO: STRESS AND COPING IN CHILDHOOD 6

 Specific Stressors 6

 Terrors and Catastrophes 7

 Abuse 9

 Ecological Stressors and Poverty 9

 School Related Stressors 10

 Familial Stressors 12

 Effects of Multiple
 Co-occurring Stressors 15

 Coping Strategies 16

 Risk and Resilience 21

 Theoretical Implications 24

CHAPTER THREE: STRESS AND COPING
IN MINORITY CHILDREN 25

 Stressors of Ethnic Minority 26

 Poverty and Living Conditions 26

 Racial Discrimination and Prejudice 26

 Acculturation 30

 Coping Strategies in

Ethnic and Minority Children	31
CHAPTER FOUR: ACCULTURATIVE STRESS	33
Defining Acculturation	33
Leaving the Culture of Origin	34
Entering Into a New Culture	34
Two Cultures in Conflict	35
Bicultural Conflict	36
Racism and Discrimination	38
Coping with Acculturative Stress	39
Expected Results of Present Study	41
Hypotheses	42
CHAPTER FIVE: METHOD	43
Subjects	43
Materials	43
Acculturative Stress	43
Coping Strategies	44
Academic Self-Concept	45
Procedure	45
Statistical Analyses	46
CHAPTER SIX: RESULTS	47
Data Screening and Coding	47
Demographic Variables	47
Gender	47
Grade and Primary Language	48

Bivariate Associations	48
Linear Regression Analysis	49
CHAPTER SEVEN: DISCUSSION	52
APPENDIX A: Full Set of Bivariate Correlations	58
APPENDIX B: Demographic Questionnaire	59
APPENDIX C: Safe-C	60
APPENDIX D: A-COPE	62
APPENDIX E: Teacher's Rating Scale of Child's Actual Behavior	63
APPENDIX F: What I am Like (Self Report)	64
REFERENCES	66

LIST OF TABLES

TABLE 1: Gender Comparisons	48
TABLE 2: Bivariate Correlations	49
TABLE 3: Linear Regression Model Summary	51
TABLE 4: Linear Regression Coefficients	51

CHAPTER ONE: INTRODUCTION

In January of 2000, the Los Angeles Times reported that a Chinese boy had been taken away from his parents by a social worker (Corwin, 2000). The marks and minor burns on his body lead the emergency room physician to believe that his parents had abused him. The parents were then handcuffed and taken to jail, with no chance to explain anything, and no control over what was to happen to their son. What actually had taken place, however, was not child abuse. It was a misunderstanding between two cultures.

Several Chinese officers on the L.A. police force learned of the misunderstanding, and the parents were released, and their son returned. The officers recognized that what had actually taken place was an ancient Asian healing technique called coining, wherein heated coins are lightly dragged across the skin of the child, in order to alleviate fever. The marks on the child were superficial, and would disappear in a day or two. In China, this technique is considered as normal as parents tying a loose tooth to a door and slamming it shut. However, the Chinese couple did not anticipate the violent reaction that would take place by American authorities, because this would not be expected in China. This is just one example of what

happens when the culture of one ethnic group collides with another. The differences in values, norms, expectations and behaviors of two cultures can cause people with minority status to experience what is referred to as "acculturative stress" (Padilla, Wagatsuma, & Lindholm, 1985). Individuals belonging to ethnic minority groups in the U.S. commonly experience this type of stress (Leong & Tata, 1990).

The Concepts of Stress and Coping

Social scientists in the latter part of the twentieth century have ascertained that stress of all sorts is an obligatory component at all stages of the life span (Folkman & Lazarus, 1984; Selye, 1982; Strack & Feifel, 1996). From the first moments of life to its closing, the individual is faced with a perpetual parade of stressors with which he or she is challenged to overcome.

Stress and coping have become popular buzz-words in the past few decades, and a wealth of research has ensued on the two constructs. With the wide array of methodologies and disparate theories that have grown around these labels, the actual meaning of the words have become ever more blurred (see Garmezy, 1996; Parker & Endler, 1996; Selye, 1980). Stress has been defined in terms of both stimuli (events occurring in the environment that we

react to) and responses (internal reactions to stressful events). In his theoretical discussion of stress and coping in childhood and adolescence, Compas (1987) defined stress as "potentially threatening and challenging situations that require action and adaptation" (p. 393). More often stress has been described in terms of particular physiological responses to difficult situations (Selye, 1982).

Research on the ways in which one copes with stress has also presented an abundance of perspectives and theories. Many have explored and developed frameworks around *styles* of coping, such as "emotion focused" and "problem solving" (Folkman & Lazarus, 1984), "helpless" and "mastery oriented" (Dweck & Licht, 1980), "Type A" and "Type B" behavior patterns (Mathews, 1981), and "monitoring" vs. "blunting" (Miller, 1981). Other studies have dealt with personal and environmental resources related to coping such as temperament (Davis & Emory, 1995), social support (Skinner & Wellborn, 1994), and perceived controllability of the event (Compas, Banez, Malcarne, & Worsham 1991). Still other research has focused on the important area of "invulnerability" or resilience to stress (Haggerty, Sherrod, Garmezy, & Rutter, 1996).

Childhood, far from being exempt from this reality, often is an extremely stressful period in one's life (Sandler, Wolchik, MacKinnon, Ayers, & Roosa, 1997). In addition, researchers have observed that one's style of coping with stressors is largely learned in childhood and maintained throughout the life span (e.g., Dweck & Licht, 1980; Krohne, 1979; Mathews, 1981; Steinberg, 1985). For children with particular social hardships, e.g., belonging to an ethnic minority group, the number and type of stressors can be especially extensive (McLoyd, 1998). The increased exposure to multiple stressors that ethnic minority children face may disproportionately predispose them to maladaptive psychological outcomes and social problems (Allen & Mitchell, 1998).

One of the many formidable tasks that ethnic minority children must face is the process of acculturation. Acculturation has been generally defined as the "process of adapting to and adopting a new culture" (Padilla, Wagatsuma, & Lindholm, 1985, p 296). A burgeoning area of research focuses specifically on the stresses associated with the acculturation process in the adult population (Born, 1970; Hovey & King, 1996; Williams & Berry, 1991). However, there is little research available on the effects of acculturative stress in childhood.

In order to more fully interpret the context in which a child may experience acculturative stress, a general review of stress and coping in children of ethnic minority groups is first necessary. This review will focus on three main components: general stress and coping in childhood, coping with stresses unique to minority children, and finally an examination of stresses to children brought about by the acculturation process.

CHAPTER TWO: STRESS AND COPING IN CHILDHOOD

There is a growing body of research that has begun to recognize that stress and coping are major issues in childhood. To aid in organization and to bring together the many diversified areas of investigation, this review will focus on five areas of research: specific stressors, coping strategies, risk and resilience, theoretical implications, and finally theory based interventions.

Specific Stressors

Throughout the 1970's and 80's the bulk of the research on the constructs of stress and coping in childhood was focused primarily on specific stressors and their associated psychological outcomes (Rutter, 1979). More recent studies tend to examine the effects of multiple stressors on multiple outcomes, thus providing a more complex and comprehensive picture of the relationships between many variables. However, each individual stressor that a child may experience has weight and importance on its own. Therefore, this review will focus on individual stressors that are often encountered during childhood and adolescence, while keeping in mind that coexistence of multiple stressors increases the likelihood of negative outcomes multiplicatively (Garmezy, 1994).

There has been an abundance of research dealing with specific stressors and their psychological outcomes. These studies usually take on the arduous task of exploring one of the many various vicissitudes of childhood and adolescence. Their importance is not to be overlooked because they allow us valuable insight into the wide variety of childhood stressors, and their particular associated antecedents and consequences.

Terrors and Catastrophes

Traumatic catastrophes or terrors are major potential stressors in childhood and adolescence (Figley & McCubbin, 1983). For instance, Green and Kocijan-Hercigonja (1998) presented a chilling report of the devastating stressors and aftereffects on children during the war in Bosnia and Croatia. Some of the catastrophic situations brought about by the war included separation and loss of parents, physical injury and disease, forced participation in violent acts, exposure to rape, and displacement as refugees. Adding further to the problems are post-war situations such as reunification with family members that have been physically and/or mentally disabled, and resettlement into still hostile territory and annihilated homes and neighborhoods. The authors found the most common problems in the children of this war to be posttraumatic

stress disorder (PTSD), phobic anxiety, depression, and alienation. Many of the children became extremely disorganized after exposure to traumatic events. Adolescents tended to become aggressive and engage in antisocial behaviors. Therapists during this time were able to assist children in coping with the wartime adversity by "speaking the unspeakable." Children who could process the traumatic memories, talk them through, and assimilate them into a personal narrative had superior chances of positive improvement and the elimination of presenting symptoms (Green & Kocijan-Hercigonja, 1998).

Another catastrophic event for children is hospitalization or chronic illness. Nineteen percent of children experience a chronic illness or physical disability either personally or in a close family member or friend (Nowachek & Stoddard, 1994). Hospitalization is often required for children or their family members. This adds stress from being plunged into a strange place with sick people (Rutter, 1979), and in young children (6 months to 4 years) there is an added factor of separation anxiety (Honig, 1986a). Congruent with findings of other types of stressors in childhood, the stress from hospitalization or chronic illness is exacerbated by the coexistence of other stressors (Figley & McCubbin, 1983).

Abuse

Another calamity that can occur in childhood is abuse.

Honig(1986b), in a review of stress and coping in childhood, asserts that there are four kinds of abuse: 1) physical abuse, 2) psychological unavailability of the mother, 3) neglect, and 4) hostility. Each type of abuse carries with it its own specific set of symptoms and repercussions. However, when one type of abuse exists, it is likely that at least one other type of abuse is co-occurring, thus intensifying the effects of the abuse (Egeland & Sroufe, 1981). In children who are abused, their ability to cope depends on the existence of other variables. Rutter (1979) terms factors that compound the stress as *vulnerability variables*. These include low socioeconomic status (SES), poverty, less education, first birth and larger numbers of children. Rutter labels conditions that buffer or mediate the stress of abuse *protective factors*, e.g., a good relationship with one parent or caregiver.

Ecological Stressors and Poverty

Another set of specific stressors comes from variables in a child's environment such as socioeconomic status, housing, and neighborhood. By far, the most widespread environmental stressor facing children today is poverty.

Approximately 22% of children in the United States are affected by poverty (Knitzer & Aber, 1995). Impoverished children are more likely to live in crowded apartments or homes, be subjected to neighborhoods ridden with crime, trash, and violence (Honig, 1986a).

School Related Stressors

In addition to terrors, catastrophes, and poverty conditions, there are other stressors in childhood and adolescence that are experienced to varying degrees by the majority of children. School-related stressors such as test anxiety, peer problems, and academic failure are customarily encountered by children, and are often the "high on the list of concerns of young people" (Violato & Holden, 1988).

Another area of common stress brought about by school involves peer relations (Repetti, McGrath, & Ishikawa, 1999). Positive peer relations have been found to be related to a stronger self-concept and better social skills (Asher & Coie, 1990), whereas poor peer relations are related to loneliness (Parker & Asher, 1993) and negative psychological outcomes such as depression in childhood and later in life (Parker & Asher, 1987).

One more pervasive stressor found in the area of scholastics (and one that is central to the focus of the

current study) is academic failure (Repetti, McGrath, & Ishikawa, 1999). The psychological literature to date tends to recognize two distinct aspects of academic failure: 1) *actual* experienced failure, i.e., failing test grades, poor homework and project ratings, and 2) *perceived* academic failure, i.e., the child's perception of poor performance regardless of what the actual results are. A child's perception of academic failure is generally regarded as a stronger predictor of negative outcomes than actual experiences (Meece, Wigfield, & Eccles, 1990).

Dweck and her colleagues (see Dweck & Wortman, 1982, for review) conceptualize coping with academic failure as falling into two categories: "helpless" and "master oriented". The difference is primarily in the child's perceived ability to control the outcome of academic tasks.

Helpless children tend to view academic failure as being an unchangeable event caused by their inability to perform academically. These children tend to cope with such failure by avoiding situations that may bring about failure, focusing on other non-academic activities, or by giving up all together. Mastery-oriented children, on the other hand, perceive academic failure as caused by the particular situation, or their own temporary lack of

effort. They tend to cope with academic failure by focusing on problems and trying harder.

Familial Stressors

Adding to the numerous stresses one must cope with in childhood and adolescence are those caused within the family. These stressors include births and deaths, separation and divorce, sibling problems, intra-familial conflict, and moving (Pollari & Bullock, 1989). The stresses caused within the family structure of a child often set the stage for how a child will cope with other stresses.

Births and deaths within the family can be particularly traumatizing events for a child. The birth of a child can bring about sleeping difficulties (Dunn & Kendrick, 1980), disturbed mother-child relationships, and acting out (Moore, 1975). Children have been found to cope better with additions to the family when there is an understanding adult or family member to provide positive attention (Honig, 1986).

Although births of new siblings can be stressful to children, this stress typically pales in comparison to that caused by the death of a family member. Loss of parents is particularly traumatic for children, and has been studied intensively in war time situations such as World War II

(Burlingham & Freud, 1944), and in the recent war in Bosnia and Croatia (Green & Kocijan-Hercigonja, 1998). Signs of stress in children who have lost one or both parents can manifest in physical symptoms, such as eye-blinking ticks and physical illness, and mental symptoms such as phobic anxiety, posttraumatic stress disorder (PTSD), denial, rage against the world, depression and alienation (Green & Kocijan-Hercigonja, 1998; Adams-Greenly & Moynihan, 1983). In war situations, children frequently are faced with the death or permanent disappearance of one or more family members. Green and Kocijan-Hercigonja (1998) found that bereavement and mourning is unequivocally essential in coping with the death of a family member. In circumstances in which a child has not witnessed the death or body of the deceased, then it is necessary for a parent, caregiver, or other caring individual to aid in providing near certainty of the death before the mourning process can begin.

Much like the death or loss of a family member, separation and divorce can be a major stressor for a child. Divorce is rated (along with death of a family member) as being one of the two most stressful life events (Hetherington, 1984). Separation and divorce often cause mental trauma that can last throughout the entire life span (Wallerstein & Kelly, 1980).

In a longitudinal study of the effects of divorce on children, Wallerstein and Kelly (1980) found that children of divorced or separated parents are likely to experience pervasive sadness, loneliness, grieving for the lost parent, anger, anxiety, and feelings of rejection. The authors posited six primary tasks children must fulfill in the process of coping with divorce. First, the child must acknowledge the marital disruption, which is very difficult for very young children. Second, a sense of direction must be regained, allowing freedom to pursue normal activities. Third, feelings of loss and rejection must be recognized and worked through. Fourth, the authors contend that the child must come to forgive or pardon the parents. Fifth, the child must then accept the permanence of the divorce. Finally, relationship issues must be resolved.

Separation from the mother also causes stresses related to the attachment of the infant to the mother. Moreover, any separation from the mother may be an infant's first experience in coping with stress (Compas, 1987). Ainsworth's "Strange Situation" (Ainsworth, 1979) has highlighted several coping responses in regards to attachment. In this well-known situation, the infant is observed in a laboratory setting with the mother, without the mother, with a stranger and with a stranger and the

mother. The securely attached infant (somewhat upset by the mother's absence, and being calmed easily by her return) copes with a situation that is seen as mildly stressful (Compas, 1987). The insecurely attached infant however, may see the separation as much more stressful, and thus protests much more vehemently. The avoidant child, who does not appear to be disconcerted at all by the mother's absence, may not perceive the incident as stressful, and thus not be incited to cope (Compas, 1987).

Effects of Multiple Co-occurring Stressors

This review of individual stressors in childhood and adolescence has to this point explored the many disparate areas of life affected by stress. Each individual stressor has its own influences and outcomes, and has influence on its own in child and adolescent development. However, according to Rutter (1979), children who experience only a single stress are unlikely to experience negative outcomes. However, adverse effects increase multiplicatively with each added stressor, whether it is within a series or among multiple simultaneous stressors.

According to Norman Garmezy (1996), "A focus on specific stressors as antecedent to disordered behavior now has an old-fashioned ring to it." He urges researchers to focus on "cumulated adversities" because they are more

informative in regards to behavioral outcomes and interventions.

Perhaps most important in research on stress in childhood and adolescence is to examine the ways in which we cope with stress. Furthermore, we must take into account the interaction between stressful events and trait coping styles, along with the existence of other stressors and variables. An examination of coping strategies common in children and adolescents is fundamental to understanding the overall portrait of stress and coping in childhood.

Coping Strategies

Since life presents a continuous stream of stressors starting with our own birth, coping responses are observed from the moment we arrive into the world. Early coping resources include crying, screaming, tears and tantrums (Honig, 1986a). Later resources include thinking skills, absorption into play with peers, ability to ignore unpleasant situations, finding compromise to conflicts, and finding substitutes for unattainable wants (Honig, 1986a). Less adaptive responses may also include aggression, behavioral outbursts, or avoidance of others. As children become older, emotions become more evident to the child, and thinking skills increase rapidly. Young children

quickly begin to learn coping styles which resemble adults' approaches to coping with stress.

Originally, coping in school-aged children was not examined in the psychological literature. The study of adult coping strategies, however, has provided a basis from which to begin the study of coping in childhood and adolescence. Folkman and Lazarus (1980) divided coping into two factions, those that focus on eliminating the emotions that result from stress (*emotion focused*) and those that focus on solving, reducing or eliminating the stressful problem itself (*problem focused*).

Studies thus far have indicated that both emotion focused and problem solving styles of coping are to some extent necessary in childhood (Compas, Banez, Malcarne, & Worsham, 1991). For example, emotion focused coping has been found to be of benefit in situations where there is no perceived controllability of the event. Miller and Green (1984) studied coping responses related to dental or medical procedures. They found that cognitive reframing and distraction (*emotion focused coping styles*) are the most effective strategies in coping with such stressors.

Problem focused coping, on the other hand, appears to be the most effective coping style for events that are perceived as controllable. Compas and Worsham (1991)

surveyed 128 children and adolescents coping with the diagnosis of cancer in one of their parents, and found that when the children perceived more control over their parent's condition, that problem-focused coping was higher, and emotional distress lower. Those that were rated higher in emotion-focused coping were also more likely to have high levels of emotional distress. This suggests that a greater sense of control over life events is associated with using problem solving coping styles, which reduces stress. Emotion focused coping on the other hand, when used in situations which really are controllable, does not reduce stress; it, in fact, creates more stress.

Congruent to the emotion focused/problem-solving framework is the work done by Dweck and colleagues on helpless/mastery-oriented children (e.g., Dweck & Bush, 1976; Dweck & Licht, 1980). Differences on this dimension may not appear until after the occurrence of academic failure (Dweck & Licht, 1980). Helpless children are high on emotion-focused coping. Once an academic failure, such as a low score on an examination, has been experienced, children identified as "helpless" see the cause of the failure as a lack of ability. They also tend to view any successes that occur as a stroke of luck, or due to a powerful other.

Mastery-oriented children differ in their response to academic failure by perceiving the cause of the failure based on changeable variables, such as a lack of effort. They believe that they have the ability to succeed, and had they put more effort into studying, their grade would have been higher. Mastery-oriented children tend to cope with the stress of academic failure by trying harder, focusing more, and persisting in the face of failure. Therefore, overall emotional distress is lower for mastery-oriented children.

Other conceptualizations of coping styles focus on personality styles or traits. Mathews (1981, 1982) has looked at Type A (Coronary Prone) behavior pattern in relation to coping behaviors. Type A coping behaviors include competitiveness, impatience, and aggressiveness. This conceptualization adds depth to the emotion-/problem-focused dimension of coping. Type A children, while seeming to focus on the problem, score lower on empathy for other children, and tend to focus more on winning than on solving problems. Furthermore, their hostility and aggression toward others is aimed primarily at eliminating their own feelings of inadequacy, therefore emotion-focused coping would be high as well.

Another personality trait-based framework is that of the bipolar personality characteristic of repression-sensitization (e.g., Krohne & Rogner, 1982). Repressors tend to deal with a problem by avoiding, escaping, or neglecting the situation. Sensitizers tend to cope with problems by focusing on negative aspects of the situation, and they tend to be more aggressive and hostile. Adaptive coping is seen as a midpoint between these two extremes. S. M. Miller (1981) has identified similar personality styles that she terms "monitoring" or "blunting". Monitoring involves always expecting or being on the look out for danger in situations, whereas blunting involves avoidance of the problem.

Coping styles and behaviors become more pronounced in adolescence. In a study on coping strategies in adolescence, Windle and Windle (1996) surveyed 733 middle adolescents. Subjects responded to items on coping strategies, drinking motives, stressful life events, stressful daily events, behavioral problems and GPA. They found that emotion-oriented coping is strongly associated with depression. Avoidance coping is associated with alcohol problems and low GPA. Task-oriented coping is negatively associated with alcohol use, alcohol problems, and depressed affect, and positively associated with GPA.

They also reported that predictors of delinquent activity included coping drinking motives, social drinking motives, major stressful life events, and daily stressors.

While individual stressors each take their toll on the developing child or adolescent, the way in which one copes seems to ultimately affect psychological outcomes. Examination of the types, amounts, and intensity of stressors, along with coping strategies and personality variables, will tell us much about how much risk a child may be in. However, we must look even further at other risk factors and mediating variables in order to get a more complete picture.

Risk and Resilience

While some children may experience relatively few stressors, his or her coping style may create added stress, and increase the likelihood of negative outcomes. On the other hand, many children experience enormous amounts of stressors, but turn out to be quite well adjusted. What draws these types of children apart may be the existence of other factors that either accentuate or inhibit disease and deficiency states (Garmezy, 1996). Variables associated with an increase in healthy outcomes are sometimes known as *protective factors*, leading to *resiliency*. Those factors

associated with negative outcomes are seen as *risks*, and lead to *vulnerability* (Gore & Eckenrode, 1996).

The term "risk" originates from epidemiology, the study of causes, distribution, and control of disease. Each individual stressful life event, such as those covered earlier in this review, is a potential risk in child and adolescent development. With the addition of each stressor in simultaneous occurrence with one another, the risk of negative outcomes increases dramatically. Garmezy (1996) notes that "if a child or an adult is subjected to stressor upon stressor, negative consequences will follow... there are few 'giants' in the land" (p. 12).

In addition to stressful minor daily and major life events, personal factors within the child can also constitute risk. Prematurity, for example has been found to cause severe stress in infants (Honig, 1985). Gender can also be a risk factor, for instance male children are prone to enuresis (bed-wetting), dyslexia, delinquency, and abuse (Conger, McCarty, Yang, Lahey, & Kropp, 1984). In helpless/mastery oriented research (Dweck & Bush, 1976; Dweck, Davidson, Nelson, & Enna, 1978; Dweck, Goetz, & Strauss, 1980) girls were much more likely than boys to fall into the "helpless" category of coping. In Matthews' and colleagues' research on type A behavior pattern, boys

were more likely than girls to fall into "type A" (Matthews & Angulo, 1980). Temperament patterns, as described by Thomas and Chess (1977), can also pose risk for a child. Children start out as easy-to-adapt, slow-to-warm-up, or irritable/irregular, and have been found to maintain this temperament throughout adulthood. Other personal variables that increase risk include age, intellectual capacity, poor nutritional status, low birth weight, organic brain damage, and physical handicap (see Garmezy, 1994 for review).

Just as there are variables that constitute risk in development, there are also factors that mediate stress. Garmezy (1994) lists six broad categories of protective factors that are common in the focus of study in resilience: stable care, problem-solving abilities, attractiveness to peers and adults, manifest competence and perceived efficacy, identification with competent role models, and planfulness and aspiration. Furthermore, protective factors also increase in effect when multiple factors coexist (Gore & Eckenrode, 1994).

As with risk factors, personal characteristics can also play a role in protectiveness from stress. Typical behavior characteristics in children who cope well with stress include creative thinking, good verbal skills,

frustration tolerance, having a sense of humor, being personable, and having a well-developed value system (Blom, Cheney & Snoddy, 1986).

Theoretical Implications

Individual stressors, coping styles, along with risk and protective factors, intersect to form an overarching theory that runs through the psychological literature on stress and coping in childhood and adolescence. The common thread that runs through stress and coping research is the *interrelatedness* of risk, resilience, and development. Gore and Eckenrode (1994) define interrelatedness as "the linkages among variables that yield a holistic understanding of context, and the interplay of risk, protective factors, and mental health over time" (p. 54).

CHAPTER THREE: STRESS AND COPING IN MINORITY CHILDREN

While research on stress and coping in childhood and adolescence has been quite extensive in recent times, stress and coping in ethnic minority children is a topic that has been less researched. This is surprising, given that the number of ethnic minority children in the American population is increasing at a rapid rate (McLoyd, 1998), and that minority children are at elevated risk for mental health and behavioral problems (Barreto & McManus, 1997; Phinney & Chavira, 1995, Steinberg & Fletcher, 1998).

Indeed, minority status itself can be a stressor, due to racism, discrimination, and the experience of being caught between two sometimes very different cultures (Phinney, Lochner, & Murphy, 1991).

Children of majority groups have been found to favor members of their own group, whereas children of minority groups tend to also hold more favorable attitudes toward members of the majority group than members of their own group (Corenblum, Annis & Young, 1996).

In the United States, minority status is also positively correlated with exposure to poverty. Unfortunately, much of the research on outcomes of stress in ethnic minority groups is often confounded by lack of control for socioeconomic status. Such mental health

outcomes as depression and behavioral problems that have been attributed to ethnic minority status would be questionable at best if the poverty variable were controlled for (Gonzales & Kim, 1997). The following review of stress and coping in children of ethnic minority groups explores this and the many other problems that minority children and adolescents face in the course of development.

Stressors of Ethnic Minority

Children and adolescents of an ethnic minority experience most of the same stressors as the general population of children and adolescents. However, they may experience many of these stressors to a heightened degree. The following review will briefly examine the areas of poverty, living environment, racial discrimination, migration, and acculturation.

Poverty and Living Conditions

As previously mentioned, poverty is the most widespread problem that children experience today, regardless of ethnicity. However, according to the U.S. 1995 Census, ethnic minority populations are more likely to experience poverty. In addition to lack of resources to pay for food, services, medical care, quality childcare, and other necessities, many psychological factors are

strongly impacted by poverty, e.g., quality of parenting, parents' mental health and intrafamilial conflict. In addition, studies have found that development in poverty stricken children tends to be delayed across many dimensions, such as infant-mother attachment, language development and cognitive reasoning (Elmer, 1978; Vaughn, Egeland, Sroufe, & Waters, 1979).

These and other problems caused by poverty are often exacerbated by poor environmental conditions. The most recent census information indicates that the vast majority of poor ethnic minority families reside in poverty areas as compared to only 30% of whites. These areas are usually beset with a plethora of social problems including overcrowding, crime, violence, drugs and gangs. These conditions are associated with many poor psychological outcomes in adolescence such as cognitive delays, poor academic performance, teenage pregnancies, poor health conditions and delinquency (Aber, 1994; Barreto & McManus, 1997; McLoyd, 1998).

Racial Discrimination and Prejudice

In their conceptual model of the study of child development in minority populations in the U.S., García-Coll and colleagues (1998) described four mechanisms of social stratification. These are racism, prejudice,

discrimination, and oppression. First, racism describes a force at play in society that assumes the superiority of certain races. Individuals who are not members of the majority race (referred to in their writings as Caucasoid) are treated differently, and considered to be in an inferior class. Racism is expressed both institutionally (wherein minorities may be discriminated against based on assumptions of "the good old boy network"), and symbolically, where it is expressed in subtle and complex manners (such as the general lack of support for minority political candidates).

Secondly, prejudice is described as opinions or judgments about an individual based solely on their membership to a particular group. Prejudice can be seen in children as early as pre-school age, where they begin to make certain decisions based on in-group or out-group status (Corenblum, Annis, & Young, 1996). People are affected by prejudice in society not only on the basis of ethnicity and race, but also a wide variety of group based variables including gender, social status and community.

Thirdly, discrimination refers to the actual behaviors that enforce racism and prejudice, and deny people equality. A common form of discrimination today is employment discrimination, which although now illegal,

continues to affect individuals because of their ethnicity or gender (Haberfeld & Shenav, 1990). Students in high school are known to discriminate regularly based on minority group status (Miller, 1989).

Finally, oppression is described as "the systematic use of power or authority to treat others unjustly" (Garcia-Coll, et al, 1998). Oppression usually involves a group of individuals who find themselves in an inescapable inferior position. All of these mechanisms are at work in society to preserve the stratification that presently exists. Minority children and adolescents often face a long hard battle in overcoming these social problems. Racism, discrimination, prejudice and oppression in childhood and adolescence have been shown to lead to several psychological problems, including depression, suicidal ideation, anxiety, aggression and behavioral problems (Barreto & McManus, 1997; Biafora et al, 1993; Hovey & King, 1996;)

Migration

Migration, the sometimes instantaneous and quick transition from one culture to another, symbolizes a significant disturbance for families and their children (Gonzales & Kim, 1997). The migrant must leave behind social support systems, along with familiar and well-known

societal norms, and face the arduous task of surviving and hopefully thriving in a strange and foreign territory. Some of the difficulties that a new migrant may encounter include language barriers, dissimilarities in culture and race, and entrance into the new culture in a low socioeconomic level (Csapo, Liiceanu, & Lazar, 1999; Green & Kocijan-Hercigonja, 1998; Kunz, 1981). Researchers have found that children who are exposed to extreme situations during migration such as war-time terrors or refugee camps are at particular risk for subsequent psychological difficulties (e.g., Green & Kocijan-Hercigonja, 1998).

Acculturation

As migrants enter into a new culture, the process of acculturation begins. Although it starts when one culture first comes into contact with another, it is known to continue for several generations (Rogler, Cortes, & Malgady, 1991). As with migration, acculturating individuals face learning a new language, adapting to a new culture, and leaving friends and family (Berry & Kim, 1988). However, the effects of acculturation are much more extensive and pervasive. Both immigrant and native minorities often experience employment and educational barriers, individual and institutional racial discrimination, and pressure to fuse two different systems

of social norms, values, beliefs and customs (Chavez, Moran, Reid, & Lopez, 1997; Fuertes & Westbrook, 1996; Williams & Berry, 1991). Stress attributable to the acculturation process will be discussed further in the third section of this review.

Coping Strategies in Ethnic Minority Children

Numerous studies have indicated that although childhood is often a treacherous journey fraught with legions of dangerous stressors (e.g., Egeland & Sroufe, 1981; Green & Kocijan-Hercigonja, 1998; Nowachek & Stoddard, 1994), certain coping strategies are associated with resilient and healthy outcomes in children. However, there is a dearth of information when it comes to coping skills in ethnic minority children. In their review of children's stress and coping in a minority context, Gonzales and Kim (1997), concluded that there are three major gaps in the literature. First, very few studies have examined coping strategies across ethnic groups. Second, coping in relation to the specific and unique stressors encountered by ethnic minority children and adolescents has not received much attention. Third, not much attention has been given to children's cultural or ethnic framework, including values and behavioral norms, and what relation this has on coping with ethnic minority specific stressors.

For example, some cultures may have extensive belief systems or techniques in place for coping with such stress. The literature that does exist on coping in ethnic minority children and adolescents deals primarily with cultural adaptation, and is therefore discussed further in the following section on acculturative stress.

CHAPTER FOUR: ACCULTURATIVE STRESS

Defining Acculturation

The process of acculturation has been defined in broad general terms as the transitional process of change that occurs when members of one culture come into contact with another (Burnam, Telles, Karno, Hough & Escobar, 1987; Hovey & King, 1996; Padilla, Wagatsuma, & Lindholm, 1985). This process extends far beyond the initial migration and continues for several generations (Mena, Padilla, & Maldonado, 1987; Padilla, Alvearez, & Lindholm, 1986). It has also been defined in more specific terms as follows:

"Acculturation is the total adaptive process that occurs in cultural patterning and value systems, group alignments, systems of control, social organization and economy, and in the psychological structures and functions of individuals, as adaptations are made to the changing conditions of existence created by the impact of populations and their cultures upon each other" (Spindler, 1950 p 4).

Stressors resulting from the acculturation process include those of leaving one's culture and "comfort zone" behind, coming into a new unfamiliar culture, and the adjustments that must be made in situations where the two cultures clash. The following review of acculturative stress covers the stressors associated with the three areas of 1) leaving one's culture of origin, 2) entering into a new culture, and 3) the ongoing conflicts through

generations that result from the two cultures being in contact with another.

Leaving the culture of origin

The loss of residing within one's culture of origin, caused when individuals emigrate from their own culture to a new place, can produce considerable psychological stress. This is often considered the beginning of the acculturation process (Mena, Padilla, & Maldonado, 1987). Often stress can begin with the reasons migration, which can include poverty, war, oppression, or slavery (Garcia Coll et al, 1996). Even in less extreme situations, transitions of any sort, especially moving, have been shown to lead to difficulties because of the disruption of one's routines, social support systems, and familiarity with surroundings (Taft, 1977). Often friends and relatives are left behind, causing feelings of loss, grief and loneliness. In essence, emigrants leave life as they know it, and are challenged to prepare for a mysterious new life in a unusual and strange place.

Entering Into a New Culture

Upon entering into a new culture the migrant is now faced with many obstacles and barriers. A major barrier that is often encountered is that of language differences (Padilla, Alvarez, & Lindholm, 1986). The inability to

communicate with others leads to problems in all areas of daily life. It hinders both academic and social adjustment (Babiker, Cox & Miller, 1980). Mena, Padilla, and Maldonado (1987) administered a shortened version of the SAFE scale (Padilla, Wagatsuma, & Lindholm, 1985) of acculturative stress to 214 undergraduate university students. They found that second and third generation immigrants experienced less acculturative stress, which was attributable primarily to the fact that they could communicate better and therefore were more likely to have a social support system in place, in which they could talk about their problems.

Other barriers that become immediately evident to immigrants are economic and housing environment obstacles. Immigrants entering into a culture at the bottom of the social class structure presents problems due to lack of opportunity, immobility, difficulty in finding ways and means of supporting a family, hardships in establishing oneself in the new society, and difficulty in securing quality education and medical care (Kunz, 1981).

Two cultures in Conflict

The majority of acculturative stress comes about from the process of having to incorporate the ways and customs of two often extremely dissimilar cultures (Burnam et al,

the parking of babies in strollers outside of cafés is a socially accepted occurrence in Denmark.

Especially for new immigrants, the colliding of two disparate cultures can be remarkably difficult. First generation immigrants do not usually have the communication skills or social support systems in place to cope adequately with such cultural differences (Mena et al., 1987). For children under the age of twelve, Mena et al. (1987) reported that acculturative stress tends to be experienced to a lesser degree, however there is no other research in the psychological literature to support this notion. After age twelve, with the entrance into adolescence, peer group acceptance and the acquisition of autonomy from parents begins to gain importance.

Ethnic minority children may also find that there are many conflicts with their parents and grandparents, who hold on more tightly to traditions and customs of the culture of origin. Children may experience opposition from their parents when they assimilate into the dominant culture, adapting values and beliefs that are not congruent with their native culture. Children may wish to eventually date members of the majority culture, learn the language better and more quickly than their parents, become more integrated into the mainstream society, and may wish to

reject many of the values and beliefs of their culture of origin. A lack of family support is associated with high levels of acculturative stress in children and adolescents (Hovey & King, 1996).

Racism and Discrimination

One needs to go no further than the history books to recognize that discrimination and prejudice have long been a major problem for ethnic minorities. Through every means possible, history is replete with examples of slavery, oppression, "ethnic cleansing" and genocide. Racial discrimination remains a common problem experienced by ethnic minority youth today (McLoyd, 1998).

Even when laws change, and societies begin to value equality, actual change is often very slow. Miller (1989) surveyed 69 students from five Connecticut desegregated schools. It was found that busing African American students to White schools did little to foster positive race relations. It was also reported that students rarely sought out friends outside of their own ethnic group, and continued to segregate themselves by hanging around members of their own group during lunch, and sitting separately in classes. Although African American students often saw desegregation as a positive experience, the majority of them did not create social new social networks, and

believed that their real friends were back in the areas they had been bused away from.

Coping with Acculturative Stress

Researchers have shown that psychological outcomes resulting from acculturative stress can include depression, anxiety, feelings of separation and alienation, psychosomatic symptoms and identity confusion (Hovey & King, 1996; Velasquez Colomba, Santiago, & Rosselli, 1999). Hovey and King (1996) found that in a study of 40 female and 30 male students from a bilingual southern California high school, acculturative stress, as measured by the shortened version of the SAFE (Mena et al., 1987), was significantly and positively correlated with depression.

Acculturative stress also appears to affect academic performance, however there is a lack research into this area. Mena, Pidilla and Maldonado (1987) found that self esteem, a variable well known to be associated with academic performance (Edwards & Trimble, 1992; Ethington, 1991), is negatively correlated with acculturative stress, with the correlation being much stronger for first generation immigrants. Acculturative stress is therefore likely to predict academic performance. Patterson, Kupersmidt, and Vaden (1990) found that ethnicity is the strongest predictor of achievement test scores, although

income level was also strongly associated with academic performance. The causes of these differences, however, were not addressed.

Although acculturative stress may put one at a higher risk for academic problems, lowered self esteem, and other psychological problems, many ethnic minority children experience little to no detrimental effects of the acculturative process. These resilient children may be less vulnerable to acculturative stress due their use of effective coping styles. For example, Velasquez Colomba et al. (1999) conducted a study on a sample of 51 Puerto Rican adolescents. Using the Adolescent Coping Orientation for Problem Experiences (A-COPE; Patterson & McCubbin, 1981), found that nondepressed students were more likely to use the coping strategy of developing positive perceptions about life situations and less likely to cope with stress by relieving tension through diversions or substance use.

One's pattern of responses to acculturative stress can be identified as a "cultural adaptation" pattern. Gonzales and Kim (1997) point out four primary strategies in cultural adaptation: assimilation, separation, deculturation, and biculturalism. Assimilation involves adopting all of the values, beliefs, and behavioral norms of the dominant culture, often to the detriment of one's

own native cultural values. Separation describes an attempt to exist as a minority completely separate from the dominant society. Deculturation is likely the most maladjustive response, leading to the rejection of both one's culture of origin, and rejection of the dominant culture as well. The most adaptive and healthy response seems to be what is called biculturalism. Bicultural individuals have successfully integrated both cultures into their lives. They survive and thrive within the dominant culture, while maintaining a sense of pride and belonging to their own origins and ethnic identity. Biculturalism has been shown to lead to more healthy outcomes for ethnic minority children (Phinney, Lochner, & Murphy, 1991).

Expected Results of the Present Study

The effects of acculturative stress and coping on academic self concept have not been addressed directly in the psychological literature. The current study, therefore is an exploratory work intended to advance our knowledge in these particular areas. Based on past research which shows that acculturative stress is associated with variables that are known to affect academic functioning (i.e. self esteem and depressive symptomatology), a model that attempts to understand academic self-competence as a function of acculturative stress and coping strategies is proposed.

Although acculturative stress may be an important factor in determining a child's academic self-concept, this effect is not meaningful unless we consider the way in which that child copes with that stress. Therefore, this study hypothesizes a model in which academic self concept will vary as a function of both stress and coping. We would expect that on its own, acculturative stress will not be a meaningful predictor of academic self-concept, but that coping styles will have a mediating effect. This model is presented below in the following hypotheses:

Hypotheses

First, acculturative stress on its own is not expected to be significant predictor of academic self-concept. Second, stress and coping together are expected to be significant predictors of academic self-concept. Third, academic self-concept will decrease when emotion-focused coping is used, and will increase when problem-focused coping is used. Exploratory analyses will also examine differences in gender, grade, and generation of immigration.

CHAPTER FIVE: METHOD

Subjects

The sample was composed of 66 Hispanic students 28 males and 29 females (9 subjects with missing gender data), ages 8 to 12, from a culturally diverse grade school in Southern California. The sample used is a subset of data collected as part of the ongoing SAFE-C research at California State University, San Bernardino (Chavez, Moran, Reid, & Lopez, 1997).

Materials

Subjects responded to interview questions regarding demographic variables, including gender, birth date, school, teacher, grade, ethnic background, language usage, and birthplace of the child, parents, and grandparents.

Acculturative Stress

An adaptation of the shortened SAFE scale of acculturative stress (Mena et al. 1987) called the SAFE-C was used to measure acculturative stress. Subjects responded to 36 items, measured on 6 point Likert-type scale from "doesn't bother me" to "bothers me a lot". The items measure two domains: general social stressors (16 items) and ethnic minority specific stressors (20 items).

Reliability has been demonstrated for the SAFE-C scale, with a reliability coefficient which is consistent

with the shortened versions of the adult SAFE ($\alpha = .89$). Latino subjects consistently scored higher on all domains of acculturative stress than Euramericans. This is consistent with Mena et al's (1987) findings, and the assumption that a valid measure will show that the minority group has significantly higher amounts of acculturative stress, thus construct validity for this measure is supported.

Coping Strategies

Coping strategies were measured by the Adolescent Coping Orientation for Problem Experiences Inventory (A-COPE: Patterson & McCubbin (1987)). Although this scale is has not yet been widely used, its reliability and validity have been established. Velasquez Colomba et al. (1999) have shown that the A-COPE instrument has high internal reliability ($\alpha=.91$) The scale has been shown to be a valid measure of adolescent coping skills in a longitudinal study of 709 adolescents on health-risk behaviors (Schwarzer & Schwarzer, 1996).

The 54 coping behavior items load on the following 12 factors: 1) Ventilating Feelings, 2) Seeking Diversions, 3) Developing Self-Reliance and Optimism, 4) Developing Social Support, 5) Solving family Problems, 6) Avoiding Problems, 7) Seeking Spiritual Support, 8) Investing in Close

Friends, 9) Seeking Professional Support, 10) Engaging in Demanding Activity, 11) Being Humorous, and 12) Relaxing.

For this study, however, many of these factors were not appropriate for this age sample, and were not significant indicators of coping (see Appendix A for a full set of correlations). Therefore, one appropriate factor was used to represent each of the two major coping styles. "Being humorous" was considered to be a valid measure of emotion-focused coping ($r = -.253$, $p < .05$). "Solving family problems" was used to represent problem-focused coping ($r = .266$, $p < .05$).

Academic Self-Concept

Academic self-concept was measured using the scholastic competence subscale for teachers ratings from the Self-Perception Profile for Children (Harter, 1985). This measure has strong test-retest reliability (.69 to .87). The measure also shows strong convergent, construct, and discriminant validity (Harter, 1992).

Procedure

Students were invited to participate in the survey, and bilingual research assistants interviewed the volunteers. Teacher ratings on the Self-Perception Profile for Children were obtained from teachers on a voluntary basis.

Statistical Analyses

Exploratory ANOVAs will examine differences in gender and generation of immigration. Support for the three hypotheses of this study was determined using a hierarchical multiple regression. Step one included the total acculturative stress score for the SAFE-C, step two entered emotion-focused and problem-focused coping. The outcome variable was academic self concept, as measured by the scholastic subscale for teachers ratings on the Self-Perception Profile for Children (Harter, 1985).

CHAPTER SIX: RESULTS

Data Screening and Coding

The data were screened for errors and normality. Missing values for items were replaced with the mean score for that item. Items in each of the two utilized A-COPE subscales were summed to determine total factor scores. The scores for Academic Self Concept were obtained by calculating the mean of items 1, 6, and 11 from the teacher's rating measure in the Self-Perception Profile for Children (Harter, 1985).

Demographic Variables

Gender

A one-way ANOVA within this Hispanic sample found no significant differences in gender on acculturative stress, coping, or academic self-concept. The mean scores are summarized in Appendix B. Girls reported lower levels of use for both emotion-focused and problem-focused coping strategies, and higher levels of acculturative stress than boys. Boys reported lower scores on academic Self Concept. These differences, however, were not found to be statistically significant.

Table 1
Gender Comparisons

SEX		Emotion- focused coping	Problem- focused coping	SAFE-C Total	Academic Self- Concept
Girls	Mean	4.72	6.79	92.52	3.06
	Std. Dev.	1.58	3.84	23.41	.83
	N	29.00	29.00	29.00	29.00
Boys	Mean	5.68	7.32	88.25	2.71
	Std. Dev.	2.26	4.36	34.50	.81
	N	28.00	28.00	28.00	28.00
Total	Mean	5.19	7.05	90.42	2.89
	Std. Dev.	1.97	4.08	29.20	.83
	N	57.00	57.00	57.00	57.00

Grade and Primary Language

One-way ANOVAs were run for both grade and primary language on coping, acculturative stress, and academic self-concept. No significant main effects were found for these variables.

Bivariate Associations

The two measures of academic self concept (self report and teacher's report) showed a moderate positive correlation ($r=.44$). For this study, it was assumed that teacher's ratings were a more accurate measure of scholastic competence.

Pearson product-moment correlations among the 4 variables used in this study are shown in Table 1. Significant correlations for teacher's ratings of academic

self-concept were significantly associated with Solving Family Problems ($r = .27$) and Being humorous ($r = -.25$).

TABLE 1
Bivariate correlations

		Solving Family Problems	Being Humorous	SAFE-C Total	Academic Self-Concept
Solving Family Problems	Pearson Correlation	1.000	.307	.131	.266
	Sig.	.	.012	.296	.031
	N	66	66	66	66
Being Humorous	Pearson Correlation		1.000	.319	-.253
	Sig.		.	.009	.040
	N		66	66	66
SAFE-C Total	Pearson Correlation			1.000	-.058
	Sig.			.	.642
	N			66	66
Academic Self-Concept	Pearson Correlation				1.000
	Sig.				.
	N				66

* Correlation is significant at the 0.05 level (2-tailed).
** Correlation is significant at the 0.01 level (2-tailed).

Linear Regression Analyses

To test the proposed relationship between acculturative stress, type of coping, and academic self competence, a hierarchical multiple regression was used. Step 1 of the analysis included the SAFE-C total score, Step 2 included Emotion and Problem focused coping. These were regressed upon the dependent variable, Academic Self Concept (teacher's ratings). Results for this analysis are shown in tables 2 and 3.

Step 1, in which the total SAFE-C score was entered, yielded no significance for this sample. This supports the first hypothesis, which proposed that acculturative stress,

on its own would not be a meaningful predictor of academic self-concept.

Step 2, which entered the two styles of coping, increased explained variance significantly ($R^2 = .194$, R^2 change = .191, $p < .01$). The second hypothesis, which expected that acculturative stress and coping would be a significant predictor of academic self concept, was supported.

Overall, this model accounts for 19% of the variance on teacher's rating lending partial support to a model in which academic self-competence varies as a function of acculturative stress and coping strategies.

The third hypothesis, which expected that emotion-focused coping would be associated with lower academic self concept, and problem-focused coping would associated with higher academic self-concept scores, was supported. As shown in Table 3, the beta weights of the regression analysis showed that emotion-focused coping was negatively associated with academic self-concept (-.372). Problem-focused coping is positively associated with academic self-concept (.378).

Table 3

Linear Regression Model Summary.

Step	R	R ²	Adj. R Square	Std. Error of the Estimate	Change				
					R ² Change	F Change	df1	df2	Sig. F Change
1	.06	.01	-.01	.8536	.003	0.22	1	64	.642
2	.44	.19	.16	.7800	.191	7.33	2	62	.001
Step 1: Predictors: Acculturative Stress (Constant)									
Step 2: Predictors: Acculturative Stress (Constant), Solving Family Problems, Being Humorous									

Table 4
Linear Regression Coefficients.

	Std. Error	Beta Weights	t	Sig.
1 (Constant)	.340		8.734	.000
Acculturative Stress	.004	-.058	-.467	.642
2 (Constant)	.374		8.264	.000
Acculturative Stress	.004	.011	.093	.926
Solving Family Problems	.026	.378	3.156	.002
Being Humorous	.057	-.372	-2.970	.004

Note: Dependent Variable: Academic Self-Concept

CHAPTER SEVEN: DISCUSSION

The linear regression analysis used in this study indicated that the proposed model, which attempts to understand academic self-competence as a function of acculturative stress and coping strategies, accounts for 19% of the variance. Although this leaves much of the variance unaccounted for, this result does indicate that coping styles, which may be used to buffer acculturative stress, are indeed associated with academic self-concept.

According to the beta weights of the regression analysis, emotion focused coping tends to be associated with lower academic self concept, and problem focused coping is associated with higher academic self-concept scores. The association of emotion focused coping with lower levels of academic self-concept is consistent with the generally accepted features of emotion focused coping, as first presented by Folkman and Lazarus (1984). Emotion focused coping styles can lead to a greater likelihood of negative mental health and behavioral consequences, including depression, anxiety, and delinquent behavior. These negative symptoms can be expected to have a negative impact on one's academic self-competence.

As expected, acculturative stress in and of itself, did not seem to contribute directly to academic self-

concept. This result indicates that the amount of acculturative stress that a child is experiencing does not directly affect academic functioning. The non-significant first step of our model confirms this notion. This result is also in line with the general psychological understanding of stress and coping. The amount of stress a child is under, in and of itself is not enough to determine outcomes. Of greater importance is how a child copes with that stress. Thus, the significant increase of explained variance when adding coping styles in the second step of the model is to be expected.

The weakness of this study lies in the degree of unaccounted variance left by the model. There are several probable causes for this. First, a greater number of subjects would have increased the power of this study. Due to the archival nature of the data used, several missing values damaged our ability control for likely confounding variables, including socio-economic status, language, and generational effects in the analyses.

The most important variable to control for a study of minority individuals is socio-economic status (Garmezy, 1994). The results of this study therefore are not to be generalized beyond this sample. The majority of respondents are from a working-class neighborhood in

Southern California. Future studies should seek parental report of socio-economic status, perhaps at the same time consent for the child's participation is secured. Both a cross-section of socioeconomic class within each sample, and samples that are derived from diverse areas are needed to determine the contribution of this important factor.

Another important variable that did not differ significantly in this sample is language of preference, and years spent speaking English. One's academic self-confidence and acculturative stress levels can be greatly tied to the ability to communicate to others in a predominantly English speaking classroom. Again, due to the archival nature of this data, these variables could not be controlled.

Lastly, generation in the country needs to be further examined. It is expected that first generation immigrants will have higher levels of acculturative stress, may have less English speaking ability, and often start out in the new location with no or very low income. It is expected that further examination of the aforementioned, as well as a larger pool of subjects will greatly enhance the results of this study.

Fruitful areas of future research on acculturative stress include concentration on diversity. Cross-cultural

validation is needed for both the SAFE-C and the construct of acculturative stress. For instance, in Asian culture academic discipline is strongly emphasized. Therefore, acculturative stress and coping may have less effect on academic self-concept for that population.

Studies in different areas of the United States, where different ethnic groups are concentrated, as well as studies in different countries, can greatly add to our knowledge of how acculturation affects children.

Future research into coping with acculturative stress should also incorporate alternative measures of coping. Since the A-COPE was originally developed for adolescents, it may not have been the best choice for measuring coping styles in this age group (ages 8-12). However, the A-COPE has been shown to be a valid measure of coping in adolescence. The measures used in this study would be appropriate for studies involving older children.

Different experimental designs are needed to further understand the influences and effects of acculturative stress. Longitudinal designs will aid in determining outcomes of acculturative stress and coping. Cross sectional designs across time will also aid in determining historical and cohort influences.

With more research into the effects of acculturation on children, we can better arm our schools and teachers with insight and methods to facilitate minority students. This and other research into the area of acculturative stress can serve to heighten sensitivity to problems that arise due to cultural differences. Through the dissemination of this research, school counselors and will be better prepared to be of assistance minority students in both individual and group counseling.

Researchers must strive to build a strong theory-based framework of knowledge surrounding acculturation. This framework can reduce misunderstandings due to differences in culture. Researchers focusing on minority individuals should take into account the construct of acculturative stress. Furthermore, members of the general population from all walks of life can benefit by understanding what acculturative stress is, how children can successfully cope with this stress, and what benefits or detriments may be associated with both emotion-focused and problem-focused coping strategies.

Finally, through education and general public service programs, immigrant families can benefit from being aware of and understanding acculturative stressors and successful coping strategies. Minority children will benefit as we

begin to recognize the coping styles and methods that aid children in buffering against acculturative stress. We can encourage them to use and refine these successful coping styles, such as focusing on the problems, and seeking familial support. These and other future theory-based applications of acculturation research in schools, in the classroom, and at home, will aid in the education and enrichment of our children in this exciting time of increasing diversity.

APPENDIX A

Full Set of Bivariate Correlations

		Ventilating Feelings	Seeking Diversion	Developing Self-Reliance	Developing Social Support	Solving Family Problems	Avoiding Problems	Seeking Spiritual Support	Investing in Close Friend	Seeking Professional Support	Engaging in Demanding Activity	Being Humorous	Relaxing	Acculturative Stress	Self Perception Profile - Scholastic Competence	Teacher's Rating - Scholastic Competence
Ventilating Feelings	Corr.	1.000	.030	-.018	.022	-.015	.301*	.137	.048	-.271*	.045	-.002	.152	-.030	.029	.152
	Sig.		.814	.885	.860	.903	.014	.273	.704	.028	.717	.990	.223	.813	.814	.224
	N	66	66	66	66	66	66	66	66	66	66	66	66	66	66	66
Seeking Diversion	Corr.		1.000	-.161	.281**	.391**	.200	.217	.213	-.168	.421**	.136	.197	.261*	-.024	-.039
	Sig.			.196	.022	.001	.108	.080	.085	.177	.000	.278	.113	.034	.849	.754
	N		66	66	66	66	66	66	66	66	66	66	66	66	66	66
Developing Self-Reliance	Corr.			1.000	.320*	.199	.152	.017	.252*	-.043	.299*	.222	.285*	.218	-.123	-.085
	Sig.				.009	.109	.222	.895	.041	.729	.015	.073	.020	.078	.326	.498
	N			66	66	66	66	66	66	66	66	66	66	66	66	66
Developing Social Support	Corr.				1.000	.658*	.341*	.296*	.121	-.121	.637*	.179	.432*	.258*	-.009	.026
	Sig.					.000	.005	.016	.335	.334	.000	.150	.000	.036	.943	.838
	N				66	66	66	66	66	66	66	66	66	66	66	66
Solving Family Problems	Corr.					1.000	.368*	.215	.120	-.154	.641*	.307*	.413*	.131	.077	.266*
	Sig.						.002	.083	.337	.217	.000	.012	.001	.296	.539	.031
	N					66	66	66	66	66	66	66	66	66	66	66
Avoiding Problems	Corr.						1.000	.070	.065	-.257*	.499*	.062	.378*	.018	-.030	.215
	Sig.							.575	.606	.037	.000	.621	.002	.885	.811	.083
	N						66	66	66	66	66	66	66	66	66	66
Seeking Spiritual Support	Corr.							1.000	-.087	.145	.218	.199	.094	.162	-.065	-.114
	Sig.								.487	.244	.078	.110	.454	.194	.606	.361
	N							66	66	66	66	66	66	66	66	66
Investing in Close Friend	Corr.								1.000	-.163	.208	.094	.081	-.087	.025	-.177
	Sig.									.190	.094	.455	.518	.487	.844	.156
	N								66	66	66	66	66	66	66	66
Seeking Professional Support	Corr.									1.000	-.119	.048	-.145	.336*	-.104	-.156
	Sig.										.341	.703	.245	.006	.406	.211
	N									66	66	66	66	66	66	66
Engaging in Demanding Activity	Corr.										1.000	.411*	.668*	.340*	-.049	.087
	Sig.											.001	.000	.005	.694	.490
	N										66	66	66	66	66	66
Being Humorous	Corr.											1.000	.332*	.319*	-.168	-.253*
	Sig.												.006	.009	.177	.040
	N											66	66	66	66	66
Relaxing	Corr.												1.000	.330*	-.240	.124
	Sig.													.007	.052	.321
	N												66	66	66	66
Acculturative Stress	Corr.													1.000	-.219	-.058
	Sig.														.078	.642
	N													66	66	66
Self Perception Profile - Scholastic Competence	Corr.														1.000	.442*
	Sig.															.000
	N														66	66
Teacher's Rating - Scholastic Competence	Corr.															1.000
	Sig.															
	N															66

*Correlation is significant at the 0.05 level (2-tailed).

**Correlation is significant at the 0.01 level (2-tailed).

APPENDIX B

Demographic Questionnaire:

Date of Interview: _____ Interviewer: _____

Child's Gender: M ___ F ___ Birthdate: _____

School: _____ Teacher: _____ Grade: _____

Ethnic Background: (Check all that apply)

Caucasian African American Mexican American
 Latin American Korean American Japanese American
 Filipino American Chinese American American Indian
 Jewish American Native American/
American Indian Other _____

Language(s) spoken at home:

Parents to you: _____

Parents to each other or
to other adults at home: _____

Which language are you
most comfortable with? _____

How long has the child been in the United States (yrs) _____

Birthplace of:

Child _____

Mother _____

Maternal Grandmother _____

Maternal Grandfather _____

Father _____

Paternal Grandmother _____

Paternal Grandfather _____

APPENDIX C

SAFE-C: Choice of responses to following items:

0 Doesn't Apply	1 Doesn't Bother me	2 Almost never bothers me	3 Sometimes bothers me	4 Often bothers me	5 Bothers me a lot
-----------------------	------------------------------	---------------------------------------	---------------------------------	-----------------------------	--------------------------

1. I feel bad when others make jokes about people who are in the same culture group as me.
2. Talking to new kids..
3. I have more things that get in my way than most people do.
4. It bothers me that people in my family who I am close to don't understand the things that I think are important that are new to them.
5. People in my family who I am close to have plans for when I grow up that I don't like.
6. When someone in my family is very sick..
7. When my parents argue..
8. It's hard for me to tell my friends how I really feel.
9. I don't have any close friends.
10. Asking questions in class..
11. I worry about what other kids think about me.
12. Many people believe certain things about the way people in my culture group act, think, or are, and they treat me as if those things are true.
13. Having to take test in school..
14. I don't feel at home here in the United States.
15. People think I am shy, when I really just have trouble speaking English.
16. I worry about being sick.
17. The thought of my family and I moving to a new place.
18. I often feel that people purposely try to stop me from getting better at something.
19. I worry that other kids won't like me.
20. It bothers me when people purposely try to stop me from getting better at something.
21. I worry that other kids won't like me.
22. It bothers me when people force me to be like everyone else.
23. I worry that other kids are making fun of me.
24. I often feel like people who are supposed to help are really not paying any attention to me.
25. When I am not with my family..
26. Getting my report card..

27. It bothers me that I have an accent.
28. It's hard to be away from the country I used to live in.
29. I think a lot about my group and its culture.
30. When some countries of the world don't get along..
31. Talking with my teacher...
32. Because of the culture group I am in, I feel others don't include me in some of the things they do, games they play, etc.
33. It's hard for me to "show off" my family.
34. People think badly of me if I practice customs or I do the "special things" of my culture group.
35. I have a hard time understanding what others say when they speak.
36. I worry about having enough money.

APPENDIX D

A-COPE: Choose a response to the following items:

1 Never	2 Hardly ever	3 Sometimes	4 Often	5 Most of the time
------------	---------------------	----------------	------------	--------------------------

When you are bothered by some of the things we just talked about, how often do you...?

1. Try to be funny and make light of it all.
2. Listen to music - stereo, radio, etc.
3. Eat food.
4. Get more involved in activities at school.
5. Talk to a teacher or counselor at school about what bothers you.
6. Go shopping; buy things you like.
7. Try to improve yourself, like get your body in shape or get better grades.
8. Cry.
9. Try to think of the good things in your life.
10. Be with a boyfriend or girlfriend.
11. Get angry and yell at people.
12. Joke and keep a sense of humor.
13. Talk to a minister/priest/rabbi.
14. Go to church.
15. Use drugs not prescribed by a doctor.
16. Organize your life and what you have to do.
17. Say mean things to people; be sarcastic.
18. Blame others for what's going wrong.
19. Be close with someone you care about.
20. Try to help other people solve their problems.
21. Talk to your mother about what bothers you.
22. Try, on your own, to figure out how to deal with your problems or tensions.
23. Get professional counseling not from a school teacher or counselor.
24. Go to a movie.
25. Daydream about how you would like things to be.
26. Do things with your family.
27. Smoke cigarettes.
28. Pray.
29. Drink beer, wine, or liquor.
30. Sleep.
31. Talk with your father about what bothers you.
32. Talk to a friend about how you feel.
33. Do a strenuous physical activity like jogging/biking.

APPENDIX E

Self-perception profile for children:
Teacher's rating scale of child's actual behavior.

Scholastic competence items (1,6,11)

For each child, please indicate what you feel to be his/her actual competence on each question, in your opinion. First decide what kind of child he or she is like, the one described on the left or right, and then indicate whether this is just sort of true or really true for that individual. Thus, for each item, check one of four boxes.

	Really True	Sort of True		OR		Sort of True	Really True
1.	<input type="checkbox"/>	<input type="checkbox"/>	This child is really good at his/her schoolwork		This child can't do the schoolwork assigned.	<input type="checkbox"/>	<input type="checkbox"/>
6.	<input type="checkbox"/>	<input type="checkbox"/>	This child often forgets what she learns		This child can remember things easily.	<input type="checkbox"/>	<input type="checkbox"/>
11.	<input type="checkbox"/>	<input type="checkbox"/>	This child has trouble figuring out the answers in school		This child can almost always figure out the answers.	<input type="checkbox"/>	<input type="checkbox"/>

APPENDIX F

Self-perception profile for children:
 What I am Like (self-report).

Scholastic competence items (1,7,13,19,25,31)

Script:

We have some sentences here and we are interested in what you are like, what kind of person you are like. This is a survey, **not** a test. There are no right or wrong answers. Since kids are very different from one another, each of you will answer something different, and that's OK.

Let me explain how these questions work. I will be reading two different statements that describe two kinds of kids. First, I want to know which statement is most like you. Then, I want you to tell me if that statement is Really True for you, or only Sort of True for you. Let's try one out for practice (read sample and have subject respond accordingly). Do you understand now? Let's continue.

	Really True for me	Sort of True for me			Sort of True for me	Really True for me	
1.	<input type="checkbox"/>	<input type="checkbox"/>	Some kids feel that they are very <i>good</i> at their school work	BUT	Other kids worry about whether they can do the school work assigned to them.	<input type="checkbox"/>	<input type="checkbox"/>
7.	<input type="checkbox"/>	<input type="checkbox"/>	Some kids feel like they are just as smart as other kids their age	BUT	Other kids aren't so sure and wonder if they are as smart.	<input type="checkbox"/>	<input type="checkbox"/>
13.	<input type="checkbox"/>	<input type="checkbox"/>	Some kids are pretty slow in finishing their schoolwork	BUT	Other kids can do their schoolwork quickly.	<input type="checkbox"/>	<input type="checkbox"/>

19. Some kids often forget what they learn **BUT** Other kids remember things easily.
25. Some kids do very well at their class work **BUT** Other kids don't do well at their class work.
31. Some kids have trouble figuring out the answers in school **BUT** Other kids can almost always figure out the answers.

REFERENCES

Aber, J.L. (1994). Poverty, violence and child development: Untangling family and community level effects. In C.A. Nelson (Ed.), *Threats to optimal development: The Minnesota Symposium on Child Psychology* (pp. 229-272). Hillsdale, NJ: L. Erlbaum Associates.

Aboud, F.E. & Ruble, D.N. (1987). Identity constancy in children: Developmental processes and implications. In T.M. Honess & K.M. Yardley (Eds.), *Self and identity: Individual change and development* (pp. 95-107). London: Routledge and Kegan Paul.

Aboud, F.E. (1987). The development of self-identification and attitudes. In J.S. Phinney & M. J. Rotheram (Eds.), *Children's ethnic socialization* (pp. 32-55). Newbury Park, CA: Sage.

Adams-Greenly, M., & Moynihan, R.T. (1983). Helping children of fatally ill parents. *American Journal of Orthopsychiatry*, 53, 219-229.

Ainsworth, M.D.S. (1979). Infant-mother attachment. *American Psychologist*, 34, 932-937.

Asher, S.R., & Coie, J.D. (1990). *Peer rejection in childhood*. New York: Cambridge University Press.

Aspinwall, L.G. & Taylor, S.E. (1992). Modeling

cognitive adaptation. A longitudinal investigation of the impact of individual differences and coping on college adjustment and performance. *Journal of Personality and Social Psychology*, 63, 989-1003.

Babiker, F.E., Cox, J.L., & Miller, M.C. (1980). The measurement of cultural distance and its relationship to medical consultations, symptomatology and examination performance of overseas students at Edinburgh University. *Social Psychiatry*, 15, 109-116.

Barerra, M. (1981). Social support in the adjustment of pregnant adolescents: Assessment issues. In B.H. Gottlieb (Ed.), *Social networks and social support* (pp. 69-96). Beverly Hills, CA: Sage.

Barreto, S. & McManus, M. (1997). Casting the net for "depression" among ethnic minority children from the high-risk urban communities. *Clinical Psychology-Review*, 17, 823-845.

Bernal, M.E., & Knight, G.P., Garza, C.A., Ocampo, K.A., & Cota, M.K. (1990). The development of ethnic identity in Mexican American children. *Hispanic Journal of Behavioral Sciences*, 12, 3-24.

Bernal, M.E., Saenz, D.S., & Knight, G.P. (1991). Ethnic identity and adaptation of Mexican American youths in

school settings. *Hispanic Journal of Behavioral Sciences*, 13, 135-154.

Biafora, F.A., Jr., Warheit, G.J., Zimmerman, R.S., Gil, A.G., Aposori, E., & Taylor, D. (1993). Racial mistrust and deviant behavior among ethnically diverse black adolescent boys. *Journal of Applied Social Psychology*, 23, 891-910.

Blankstein, K.R., Flett, G.L., & Watson, M.S. (1992). Coping and academic problem solving ability in test anxiety. *Journal of Clinical Psychology*, 48, 37-46.

Blom, G.E., Cheney, B.D., & Snoddy, J.E. (1986). *Stress in childhood: An intervention model for teachers and other professionals*. New York: Teachers College Press, Columbia University.

Born, D.O. (1970). Psychological adaptation and development under acculturative stress: Toward a general model. *Social Science and Medicine*, 3, 529-547.

Bryant, B.K. (1998). Children's coping at school: The relevance of "failure" and cooperative learning for enduring peer and academic success. In L.H. Meyer, H.S. Park, et al (Eds.), *Making friends: The influences of culture and development. Children, youth & change: Sociocultural perspectives, Vol. 3* (pp. 353-367). Baltimore, MD: Paul H. Brookes Publishing Co.

Burnam, M.A., Telles, C.A., Karno, M., Hough, R.L., & Escobar, J.I. (1987). Measurement of acculturation in a community population of Mexican Americans. *Hispanic Journal of Behavioral Sciences*, 9, 105-130.

Canino, I.A. (1995). Coping with stress through art: A program for urban minority children. In H.W. Harris & H.C. Blue (Eds.), *Racial and ethnic identity: Psychological development and creative expression* (pp. 115-134). New York: Routledge.

Carty, L. (1993). Grouping counseling and the promotion of mental health. *Journal for Specialists in Group Work*, 18, 29-39.

Chavez, D.V., Moran, V.R., Reid, S.L., & Lopez, M. (1997). Acculturative stress in children: A Modification of the SAFE Scale. *Hispanic Journal of Behavioral Sciences*, 19, 34-44.

Compas, B.E. (1987). Coping with stress during childhood and adolescence. *Psychological Bulletin*, 101, 393-403.

Compas, B.E., & Worsham, N. (1991). *When mom or dad has cancer: Developmental differences in children's coping with family stress*. Paper presented at Society for Research on Child Development meeting, Seattle, WA.

Compas, B.E., Banez, G.A., Malcarne, V., & Worsham, N. (1991). Perceived control and coping with stress: A developmental perspective. *Journal of Social Issues*, 47, 23-34.

Conger, R.D., McCarty, J.A., Yang, R.K., Lahey, B.B., & Kropp, J.P. (1984). Perception of child, child-rearing values, and emotional distress as mediating links between environmental stressors and observed maternal behavior. *Child Development*, 55, 2234-2247.

Corenblum, B., Annis, R.C., & Young, S. (1996). Effects of own group success or failure on judgements of task performance by children of different ethnicities. *European Journal of Social Psychology*, 26, 777-798.

Corwin, M. (2000). Column one: Cultural sensitivity on the beat. *Los Angeles Times*, Jan 10, pp. 1 & 12.

Csapo, B., Czachesz, E., Liiceanu, A., & Lazar, S. (1999). Being a minority: Hungarian adolescents in Transylvania, Romania. In F.D. Alsaker & A. Flammer (Eds.), *The adolescent experience: European and American adolescents in the 1990s. Research monographs in adolescence* (pp. 145-164). Mahwah, NJ: Lawrence Erlbaum Associates, Inc., Publishers.

Dunbar, E., Liu, J.F., & Horvath, A.M. (1999). Coping

with culture based conflict: Implications for counseling research and practice. *Cultural Diversity and Ethnic Minority Psychology*, 1, 139-148.

Dunn, J., & Kendrick, C. (1980). The arrival of a sibling: Changes in the pattern of interaction between mother and first-born child. *Journal of Child Psychology and Psychiatry*, 22, 1-18.

Dweck, C.S., & Bush, E.S. (1976). Sex differences in learned helplessness: I. Differential debilitation with peer and adult evaluators. *Developmental Psychology*, 12, 147-156.

Dweck, C.S., & Licht, B.G. (1980) Learned helplessness and intellectual achievement. In J. Garber & M.E.P. Seligman (Eds.), *Human helplessness: Theory and applications* (pp. 197-221). New York: Academic Press.

Dweck, C.S., & Wortman, C.B. (1982). Learned helplessness, anxiety, and achievement motivation: Neglected parallels in cognitive, affective, and coping responses. In H. W. Krohne & L. Laux (Eds.), *Achievement, stress, and anxiety* (pp. 93-125). Washington, DC: Hemisphere.

Dweck, C.S., Davidson, W., Nelson, S., & Enna, B. (1978). Sex differences in learned helplessness: II. The

contingencies of evaluative feedback and III. An experimental analysis. *Developmental Psychology*, 14, 268-276.

Dweck, C.S., Goetz, T.E., & Strauss, N.L. (1980). Sex differences in learned helplessness: IV. An experimental and naturalistic study of failure generalization and its mediators. *Journal of Personality and Social Psychology*, 38, 441-452.

Earls, F. (1986). A developmental perspective on psychosocial stress in childhood. In M.W. Yogman, T.B. Brazelton, et al (Eds.), *In support of families* (pp. 29-41). Cambridge, MA: Harvard University Press.

Edwards, J.M. & Trimble, K. (1992). Anxiety, coping and academic performance. *Anxiety, Stress and Coping: An International Journal*, 5, 337-350.

Egeland, B., & Sroufe, A. (1981). Developmental sequelae of maltreatment in infancy. *Directions for Child Development*, 11, 77-92.

Eisenberg, N., Fabes, R.A., & Guthrie, Ivanna K. (1997). Coping with stress: The roles of regulation and development. In S.A. Wolchik, I.N. Sandler, et al (Eds.), *Handbook of children's coping: Linking theory and intervention*. *Issues in clinical child psychology* (pp. 41-

70). New York: Plenum Press.

Elmer, A. (1978). Effects of early neglect and abuse on latency age children. *American Journal of Orthopsychiatry*, 53, 668-676.

Ethington, C.A. (1991). A test of a model of achievement behaviors. *American Educational Research Journal*, 28, 155-172.

Festinger, L. (1954). A theory of social comparison processes. *Human relations*, 7, 117-140.

Figley, C.R., McCubbin, H.I. (Eds.). (1983). *Stress and the family. Vol. 2: Coping with catastrophe*. New York: Brunner/Mazel.

Forman, S.G. (1992). *Coping skills interventions for children and adolescents*. San Francisco: Jossey Bass, Inc, Publishers.

Fuertes, J.N. & Westbrook, F.D. (1996). Using the Social, Attitudinal, Familial, and Environmental (S.A.F.E.) Acculturation Stress Scale to assess the adjustment needs of Hispanic college students. *Measurement and Evaluation in Counseling and Development*, 29, 67-76.

Garcia Coll, C., Lambery, G, Jenkins, R., McAdoo, H.P., Crnic, K., Wasik, B.H., & Garcia, H.V. (1998). An integrative model for the study of developmental

competencies in minority children. *Child Development*, 67, 1891-1914.

Garnezy, N. (1983). Stressors of childhood. In N. Garnezy & M. Rutter (Eds.), *Stress, coping and development in children* (pp. 43-84). New York: McGraw-Hill.

Garnezy, N. (1994). Reflections and commentary on risk, resilience, and development. In Haggerty, R.J., Sherrod, L.R., Garnezy, N., & Rutter, M. (Eds.). *Stress, risk, and resilience in children and adolescents: Processes mechanisms and interventions* (pp. 1-18). New York: Cambridge University Press.

Gonzales, N.A. & Kim, L.S. (1997). Stress and coping in an ethnic minority context: Children's cultural ecologies. In S.A. Wolchik & I.N. Sandler (Eds.), *Handbook of children's coping: Linking theory and intervention. Issues in clinical child psychology* (pp. 481-511). New York: Plenum Press.

Green, A.H. & Kocijan-Hercigonja, D. (1998). Stress and coping in children traumatized by war. *Journal of the American Academy of Psychoanalysis*, 26, 585-597.

Haberfeld, Y., & Shenav, Y. (1990). Are women and blacks closing the gap? Salary discrimination in American science during the 1970s and 1980s. *Industrial and Labor*

Relations Review, 44, 68-82.

Haggerty, R.J., Sherrod, L.R., Garmezy, N., & Rutter, M. (Eds.). (1994). *Stress, risk, and resilience in children and adolescents: Processes mechanisms and interventions*. New York: Cambridge University Press.

Hamers, J.H.M., Hessels, M.G.P., & Pennings, A.H. (1996). Learning potential in ethnic minority children. *European Journal of Psychological Assessment*, 12, 183-192.

Harter, S. (1985). Manual for the self-perception profile for children. University of Denver.

Harter, S. (1992). The perceived competence scale for children. *Child Development*, 53, 87-97.

Hetherington, E.M. (1984). Stress and coping in children and families. *New Directions for Child Development*, 24, 7-33.

Honig, A.S. (1984). Risk factors in infancy. *Early Child Development and Care*, 16, 1-2.

Honig, A.S. (1986a). Stress and coping in children: I. *Young Children*, 41, 50-63.

Honig, A.S. (1986b). Stress and coping in children: II. Interpersonal family relationships. *Young Children*, 41, 47-59.

Hovey, J.D. & King, C.A. (1996). Acculturative stress,

depression, and suicidal ideation among immigrant and second-generation Latino adolescents. *Journal of the American Academy of Child and Adolescent Psychiatry*, 35, 1183-1192.

Knitzer, J., & Aber, J. (1995). Young Children and Poverty: Facing the facts. *American Journal of Orthopsychiatry*, 65, 174-176.

Krohne, H.W. (1979). Parental child-rearing behavior and the development of anxiety and coping strategies in children. In I.G., Sarason & C.D. Spielberger (Eds.), *Stress and anxiety* (Vol. 7, pp. 233-245). Washington, DC: Hemisphere.

Krohne, H.W., & Rogner, J. (1982). Repression-sensitization as a central construct in coping research. In H.W. Krohne & L. Laux (Eds.), *Achievement, stress, and anxiety* (pp. 167-193). Washington, DC: Hemisphere.

Kunz, E.F. (1981). Exile and resettlement: Refugee theory. *International Migration Review*, 15, 42-51.

Lazaus, R., & Folkman, S. (1984). *Stress, appraisal and coping*. New York: Springer.

Leong, F.T. & Tata, S.P. (1990). Sex and acculturation differences in occupational values among Chinese-American children. *Journal of Counseling Psychology*, 37, 208-212.

Masten, A.S., Hubbard, J.J., Gest, S.D., Tellegen, A., Garnezy, N., & Ramirez, M. (1999). Competence in the context of adversity: Pathways to resilience and maladaptation from childhood to late adolescence. *Development and Psychopathology*, 11, 143-169.

Matthews, K.A. (1981). Antecedents of the Type A coronary-prone behavior pattern. In S.S. Brehm, S.M. Kassin, & F.X. Gibbons (Eds.), *Developmental social psychology* (pp. 235-248). New York: Oxford University Press.

Matthews, K.A. (1982). Psychological perspectives on the Type A behavior pattern. *Psychological Bulletin*, 91, 293-323.

Matthews, K.A., & Angulo, J. (1980). Measurement of the Type A behavior pattern in children: Assessment of children's competitiveness, impatience-anger, and aggression. *Child Development*, 51, 466-475.

McLoyd, V.C. (1998). Changing demographics in the American population: Implications for research on minority children and adolescents. In V.C. McLoyd & L. Steinberg, et al (Eds.), *Studying minority adolescents: Conceptual, methodological, and theoretical issues* (pp. 3-28). Mahwah, NJ: Lawrence Erlbaum Associates, Inc., Publishers.

Meece, J.L., Wigfield, A., & Eccles, J.S. (1990). Predictors of math anxiety and its influence on young adolescents' course enrollment intentions and performance in mathematics. *Journal of Educational Psychology*, 82, 60-70.

Mena, F.J., Padiklla, A.M., & Maldonado, M. (1987). Acculturative stress and specific coping strategies among immigrant and later generation college students. *Hispanic Journal of Behavioral Sciences*, 9, 207-225.

Miller, R.L. (1989). Desegregation experiences of minority students: Adolescent coping strategies in five Connecticut high schools. *Journal of Adolescent Research*, 4, 173-189.

Miller, S.M., & Green, M.L. (1984). Coping with stress and frustration: Origins, nature, and development. In M. Lewis & C. Saarni (Eds.), *The socialization of emotions*. New York: Plenum Press.

Moore, T. (1975). Stress in normal childhood. In L. Levi (Ed.) *Society, stress, and disease: Childhood and adolescence* (Vol. 2). London: Oxford Univ. Press.

Nowachik, PA, & Stoddard, J.J. (1994). Prevalence and impact of multiple childhood chronic illnesses. *Journal of Consulting and Clinical Psychology*, 59, 692-703.

Padilla, A., Alvarez, M., & Lindholm, KI.J. (1986).

Generational and personality factors as predictors of stress in student. *Hispanic Journal of Behavioral Sciences*, 8, 275-288.

Padilla, A., Wagatsuma, Y., & Lindholm, K.J. (1985). Acculturation and personality as predictors of stress in Japanese and Japanese-American. *Journal of Social Psychology*, 125, 295-305.

Parker, J.G., & Asher, S.R. (1993). Friendship and friendship quality in middle childhood: Links with peer group acceptance and feelings of loneliness and social dissatisfaction. *Developmental Psychology*, 29, 1-11.

Parker, J.G., & Asher, S.R. (1987). Peer relations and later personal adjustment: Are low-accepted children at risk? *Psychological Bulletin*, 113, 35-389.

Parsons, A., Frydenberg, E., & Poole, C. (1996). Overachievement and coping strategies in adolescent males. *British Journal of Educational Psychology*, 66, 109-114.

Patterson, C., Kupersmidt, J.B., & Vaden, N.A. (1990). Income level, gender, ethnicity, and household composition as predictors of children's school-based competence. *Child Development*, 61, 485-494.

Patterson, J.M. & McCubbin, H.I. (1987). Adolescent coping style and behaviors: Conceptualization and

measurement. *Journal of Adolescence*, 10, 163-186.

Phinney, J.S. & Chavira, V. (1995). Parental ethnic socialization and coping with problems related to ethnicity. *Journal of Research on Adolescence*, 5, 31-53.

Phinney, J.S., Lochner, B.T., & Murphy, R. (1991). Ethnic identity development and psychological adjustment in adolescence. In A. Stiffman & L. Dairs (Eds.), *Advances in adolescent mental health, Vol. V: Ethnic Issues* (pp. 53-72). Greenwich, CT: JAI Press.

Plancherel, B. & Bolognini, M. (1995). Coping and mental health in early adolescence. *Journal of Adolescence*, 18, 459-474.

Plancherel, B., Bolognini, M., Nunez, R., & Bettschart, W. (1993). Comment les pre-adolescents font-ils face aux difficultes? Presentation d'une version francaise du questionnaire A-Cope. / How do early adolescents face the difficulties? A French version of the A-Cope questionnaire. *Schweizerische Zeitschrift fuer Psychologie*, 52, 31-43.

Pollard, D.S. (1989). Against the odds: A profile of academic achievers from the urban underclass. *Journal of Negro Education*, 58, 297-308.

Pollari, J. & Bullock, J.R. (1998). When children move: Some stresses and coping strategies. *Early Child*

Development and Care, 41, 113-121.

Prillerman, S.L., Myers, H.F., & Smedley, B.D. (1989).
Stress, well-being, and academic achievement in college.
In G.L. Berry, J.K. Asamen, et al (Eds.), *Black students:
Psychosocial issues and academic achievement. Sage focus
editions, Vol 109* (pp. 198-217). Newbury Park, CA: Sage
Publications, Inc.

Repetti, R.L., McGrath, E.P., & Ishikawa, S.S. (1999).
Daily stress and coping in childhood and adolescence. In
A.J. Goreczny & M. Hersen (Eds.), *Handbook of pediatric and
adolescent health psychology* (pp. 343-360). Boston, MA:
Allyn & Bacon, Inc.

Rotheram, M.J., & Phinney, J.S. (1987). Introduction:
Definitions and perspectives. In J.S. Phinney & M.J.
Rotheram (Eds.), *Children's ethnic socialization* (pp. 73-
91). Newbury Park, CA: Sage.

Rutter, M. (1979). Protective factors in children's
responses to stress and disadvantage. In M.W. Kent and J.E.
Rolf (Eds.), *Primary prevention of psychopathology. Vol. 3.*
Hanover, NJ: University Press of New England.

Rutter, M. (1994). Stress research: Accomplishments
and tasks ahead. In R.J. Haggerty, L.R. Sherrod, N.
Garmezy, & M. Rutter (Eds.), *Stress, risk and resilience in*

children and adolescents: Processes mechanisms and interventions (pp. 355-385). New York: Cambridge University Press.

Schwarzer, R. & Schwarzer, C. (1996). A critical survey of coping instruments. In M Zeidner & N.S. Endler (Eds.), *Handbook of coping: Theory, research applications* (pp. 107-132). New York: John Wiley & Sons.

Selye, H. (1982). History and present status of the stress concept. In L. Goldberger & S. Breznitz (Eds.), *Handbook of stress: Theoretical and clinical aspects*. New York: The Free Press.

Semaj, L (1980). The development of racial evaluation and preference: A cognitive approach. *Journal of Black Psychology*, 6, 59-79.

Steinberg, L. (1985). Early temperamental antecedents of adult Type A behaviors. *Developmental Psychology*, 21, 1171-1180.

Taft, R. (1977). Coping with unfamiliar cultures. In N. Warren (Ed.), *Studies in cross-cultural psychology* (Vol. 1). New York: Academic Press.

Thomas, A., & Chess, S. (1977). *Temperament and Development*. New York: Brunner/Mazel.

Vaughn, B.E., Dean, K.E., & Waters, E. (1985). The

impact of out-of-home care on child-mother attachment quality: Another look at some enduring questions. In I. Bretherton & E. Waters (Eds.), *Growing points of attachment theory and research. Monographs of the Society for Research in Child Development*, 50.

Velasquez, Colomba, M.V., Santiago, E.S., & Rossello, F. (1999). Coping strategies and depression in Puerto Rican adolescents: An exploratory study. *Cultural Diversity and Ethnic Minority Psychology*, 5, 65-75.

Verma, S. & Gupta, J. (1990). Some aspects of high academic stress and symptoms. *Journal of Personality and Clinical Studies*, 6, 7-12.

Violato, C. & Holden, W.B. (1988). A confirmatory factor analysis of a four-factor model of adolescent concerns. *Journal of Youth and Adolescence*, 17, 101-113.

Wallerstein, J.S., & Kelly, J. (1980). *Surviving the breakup: How children and parents cope with divorce*. New York: Basic Books.

Williams, C.L. & Berry, J.W. (1991). Primary prevention of acculturative stress among refugees: Application of psychological theory and practice. *American Psychologist*, 46, 632-641.

Windle, M. & Windle, R.C. (1996). Coping strategies,

drinking motives, and stressful life events among middle adolescents: Associations with emotional and behavioral problems and with academic functioning. *Journal of Abnormal Psychology*, 105, 551-560.

Wolters, C.A. & Pintrich, P.R. (1998). Contextual differences in student motivation and self-regulated learning in mathematics, English, and social studies classrooms. *Instructional Science*, 26, 27-47.

Wolters, C.A. Yu, S.L., & Pintrich, P.R. (1996). The relation between goal orientation and students' motivational beliefs and self regulated learning. *Learning and Individual Differences*, 8, 211-238.

Wong, P.T. & Recker, G.T. (1986). Stress, coping, and well-being in Anglo and Chinese elderly. *Canadian Journal on Aging*, 4, 29-37.