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*Promoting the Well-Being of Immigrant Youth*

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# ***Promoting the Well-Being of Immigrant Youth***

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## ***1. Introduction***

The well-being of immigrant youth – of the first or second generation - is intimately tied up with their socio-economic status and success; in turn, their success and how immigrant youth relate to the society around them are important elements of social cohesion and well-being for those societies. Institutional settings, in relation to immigrants and to Welfare State structures more broadly, as well as the policies adopted within those settings, vary greatly from one developed country to the next. This opens up the potential for studying key outcomes for immigrant youth in a comparative perspective, and learning about which settings and policies appear to be more versus less effective in promoting their well-being and capitalizing on their potential.

This paper sets out a framework for such an analytical exercise, drawing on recent research and monitoring efforts in the related areas of multidimensional well-being, social inclusion/exclusion, and child well-being. It then seeks to place some key findings from the disparate social science research literature on immigration and youth (principally drawing on economics and sociology) within that framework. This serves to bring out both the potential and the difficulties associated with this approach to teasing out “what works” for immigrant youth. In conclusion, the paper points to the major gaps in knowledge and what is required to make progress in learning from disparate country experiences about how best to promote the well-being on immigrant youth.

## ***2. Coverage and Definition***

What precisely is meant by “immigrant youth” needs discussion before one can proceed. Migration involves moving from one place to another, but does that have to involve crossing an international border, or is internal migration – for example from rural to urban - to be included? The broader scope that goes with inclusion of internal migration comes at a very real cost in terms of difficulties in focus and coherence, as well as major measurement and empirical challenges, so a strictly cross-border focus has major advantages and is the one adopted here. The next issue is whether the individuals

concerned must have migrated from one country to another themselves, or whether those born in the country of current residence but whose parents (or grandparents) migrated are to be included. This again depends on the issues one wants to address, and second-generation immigrants are explicitly included in the scope of this conference. How such immigrants are defined and measured then matters: having one parent who has migrated is the approach employed in the conference concept paper and in much of the empirical research on the topic, but for some purposes one might want to restrict the focus to where both parents have migrated. Finally, “youth” is also a somewhat imprecise term, denoting those between childhood and full maturity but captured crudely by looking at those in a specific age range; in addition, in examining the well-being and potential of immigrant youth it will be important to incorporate both earlier circumstances in childhood and later outcomes in adulthood.

Having defined the broad group of interest, it may also be useful to note some distinct sub-groups across which the key policy concerns might differ. These might include, for example, such categories as:

- Youth who have migrated legally with parent/parents;
- Illegal undetected migrant youth
- Illegal migrant youth in detention
- Youth who have migrated without family, legally and willingly;
- Youth who have migrated without family illegally
- Youth who have migrated without family unwillingly – i.e., been trafficked.

### ***3. Capturing Well-being***

To be able to properly assess the well-being of immigrant youth, one needs a clear conceptual underpinning and empirical framework, setting out what one means by well-being and its core dimensions. There is now a substantial body of research, activity and data which focuses on capturing and monitoring well-being in developed countries, including on a cross-country comparative basis. A great deal can be learned from these exercises in terms of identifying the key dimensions of well-being, what it has proved possible to monitor for the general population and for specific groups such as children,

and the uses to which the output have been put. This can provide a general framework within which to set the assessment of the situation of immigrant youth, supplemented by specific features or aspects of particular relevance for that group.

This is not the place for a lengthy discussion of the concept of well-being, but some important features about how it is generally now employed in such monitoring exercises may be noted. First, the focus on well-being is seen as moving beyond narrow or one-dimensional views of the human personality or of socio-economic circumstances towards a many-sided and more encompassing view, which identifies a number of dimensions that are key to a rounded human life. (It is recognized that such concepts of human well-being are culturally relative and essentially normative in character). Secondly, as well as reflecting resources and living conditions, a central element is now seen to be the extent to which people are enabled, as far as possible, to attain their own ends. This reflects for example the focus in Swedish welfare research on ‘level of living’ (see for example Erikson and Aberg, 1987). Level of living is defined in terms of access to resources in the form of money, possessions, knowledge, mental and physical energy and social relationships, through which an individual can control and consciously direct his living conditions. This represents a very substantial broadening beyond purely economic resources to include knowledge and skills, and also goes beyond resources alone to include essential conditions such as health, quality of work environment or amenities in the home are important for an individual’s well-being. The core notion is that it is not simply *outcomes* that matter – because these can be affected by the different choices people make – but rather the capacity to affect those outcomes in a purposive way.

This has much in common with Sen’s influential concept of “capabilities” (see Sen 1993, Erikson (1993). Sen defines functionings as the various things a person manages to do or be in leading a life - such as being adequately nourished and in good health, having self-respect and being socially integrated, and their capability then reflects the alternative combination of functionings he or she can achieve. It is freedom or ability to achieve rather than simply outcomes that we care about:

“If our paramount interest is in the lives that people can lead – then it cannot but be a mistake to concentrate exclusively only on one or other of the *means* to such freedom. We must look at impoverished lives and not just depleted wallets” (Sen, 2000:3).

While empirically ‘capabilities’ has proved to be an elusive concept, the emphasis on the processes linking resources and outcomes, the concern with the manner in which outcomes combine to constitute particular life-styles, and the emphasis on empowerment, freedom and expansion of choice are important contributions. So too is the emphasis on the fact that individuals are not atomized, their lives are intertwined with others in their household, community and beyond, and the nature of those relationships, and the institutions and policies in place, are fundamental influences on wellbeing.

Well-being then reflects not only living conditions and control over resources across the full spectrum of life domains, but also the ways in which people respond and feel about their life in those domains. Research on “quality of life” (developing from the 1960s principally in the USA, (see for example Campbell *et al* 1976) has concentrated very much on subjective well-being as the focus of interest, relying for the most part on responses to questions asking people to evaluate their own conditions. This research draws heavily on psychology and social psychology, and distinguishes for example between happiness and life satisfaction, the former being seen as more of an affective state whereas the latter represents more of a cognitive state (see for example McKennel and Andrews, 1980). More broadly, though, both objective and subjective aspects and indicators are generally incorporated into efforts to monitor wellbeing.

While different studies and statistical systems use different categorizations of domains or dimensions of wellbeing, there is a reasonably high degree of overlap or commonality between them. Fahey, Nolan and Whelan’s (2003) review for the European Foundation for the Improvement of Living and Working Conditions, which underpinned subsequent

surveys on the quality of life in Europe, concluded that the dimensions commonly employed<sup>1</sup> included:

- Employment and working conditions
- Economic resources
- Knowledge, education and training
- Health and health care
- Families and households
- Community life and social participation
- Housing
- Local environment and amenities
- Transport
- Public safety and crime
- Recreation and leisure activities
- Culture and identity, political resources and human rights

It is also worth noting the core dimensions employed in studies and monitoring exercises focused specifically on the wellbeing of children and youth (on which see Ben-Arieh *et al.*, 2001, Ben-Arieh and Frones eds., 2009). For example, the study by Bradshaw and colleagues for UNICEF (2007) bringing together data for 21 developed countries on 40 separate indicators identified six core dimensions of well-being for children and youth:

- material deprivation,
- health and safety,
- education,
- family and peer relationships,
- behaviour/lifestyles and risks, and
- subjective well-being.

In the USA, since 1997 the Federal Interagency Forum on Child and Family Statistics (building on Hauser, Brown and Prosser, eds. 1997) publishes an annual report on the

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<sup>1</sup> Examples discussed in detail included the Swedish welfare tradition, German social accounts, UK Social Trends, and the New Zealand Social Report.

well-being of children and families, in which the indicators are organized into the following sections:

- Family and Social Environment,
- Economic Circumstances,
- Health Care,
- Physical Environment and Safety,
- Behavior,
- Education, and
- Health.

Another of broad outcome domains used in the USA (see Hair *et al*, 2001) and focused on youth distinguishes educational achievement and cognitive attainment, health and safety, social and emotional development, and self-sufficiency. Self-sufficiency is broadly defined to include economic, social, and personal elements, and its inclusion brings out the importance of trying to capture not only wellbeing in the present but also prospects for the future. It is also worth noting a tendency for measures of child well-being to focus more on negative outcomes and problems, behaviors that adults wish to prevent, rather than positive development and outcomes (see for example Moore, Lippman and Brown, 2004), and also that there are generally far more measures available in the educational and health/safety domains than in the social and emotional domain.

### ***Learning from Diversity***

Institutional settings, in relation to immigrants and to Welfare State structures more broadly, as well as the policies adopted within those settings, vary greatly from one developed country to the next. This opens up the potential for studying key outcomes for immigrant youth in a comparative perspective, and learning about which settings and policies appear to be more versus less effective in promoting their well-being and capitalizing on their potential. This is the standard way economists, sociologists and social policy analysts try to learn about “what works” for groups regarded as “vulnerable” in our societies – for children, older people, those with disabilities etc. It is a challenging enterprise in general, but even more so when applied to immigrants as a vulnerable group, for reasons that are worth teasing out.

To be able to assess which institutional settings and policies are most effective, we need to look at how similar immigrants fare in different countries, but all too often the information available does not allow this to be done satisfactorily. As Heath and Cheung (2007) make clear, such comparative investigation, to be reliable, requires standardised analyses using nationally representative samples, standardised coding of variables, and standardised statistical models. Identifying migrants in the first place is often problematic, with differences in practice from one country to the next in how this is done – and, importantly, an unwillingness in some countries (notably France) to distinguish second-generation migrants in standard statistical instruments. The outcome variables of interest must also be measured in a comparable fashion, which can be problematic when making comparisons across for example different education systems or with inadequate information on income, occupation or indicators of broader well-being. Finally and crucially, the heterogeneity of the immigrant population itself needs to be taken into account: a wealth of reliable, truly comparable information about them and their background is needed if we are to be able to measure how immigrants do compared to natives with the same characteristics, and how truly “similar” immigrants fare in different countries. Capturing social background in order to filter out its effects is a challenge in dealing with any population, but for both first and second-generation immigrants it is particularly problematic.<sup>2</sup>

Abstracting from these difficulties, given satisfactory measures of key outcomes and individual and background characteristics, teasing out the role of institutions and policies in producing observed differences across countries is far from straightforward. Even focusing on one country, it is difficult to disentangle the impact of a specific institutional structure or policy innovation from broader economic and social trends, and to be sure that changes in the composition of the immigrant population are not what is driving observed changes in outcomes. (Randomised controlled trials (RCTs) are becoming

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<sup>2</sup> For first-generation immigrants, education or social class position relative to others in their country of origin, as well as destination, may be relevant. For the second generation, their parents may not have achieved a social class position that reflects their education or aspirations for their children, so social class of origin may not mean the same as it would for others.



fashionable in the social sciences and may play a useful role, but are generally informative about specific interventions rather than broader social structures.) Even if we are fairly sure that a particular policy measure or intervention has “worked” in improving outcomes for immigrant youth in a particular setting, it can be hazardous to generalise, in that it might be less successful elsewhere in a different institutional context and to what may be a rather different immigrant group.

The comparative perspective also opens up the potential for alternative perspectives on what we mean by “doing well”. The obvious and common approach to investigating how immigrants or ethnic minorities are doing in a particular society is to compare their situation with others there in terms of what are regarded as key outcomes – in relation to education, employment, living standards, health etc. Measuring what is often called the “immigrant/ethnic penalty” in this way is clearly central, but the question “do immigrants do better in country A versus B” could also be approached in a different way, against some common standard – in which country do immigrants attain higher levels of education, income or health on average? Apart from anything else, this might be an important factor in the way a potential migrant thinks about their options (where both the average standard of living available and the probability of reaching or exceeding it should influence the choice of destination). For the second generation, by contrast, it may be the host country rather than the country of origin or potential alternative destinations that provides the main frame of reference in evaluating their own well-being. From a policy perspective the primary focus is also on supporting and facilitating immigrants to do well compared with others in the country in question, but the broader question remains in the background in thinking about migration more generally.

We now go on to focus on some of the key dimensions of well-being for migrant youth, starting with education and going on to discuss the labour market, economic resources/poverty, health, housing, and social integration and cohesion.

## ***Education***

Educational attainment is a key determinant of subsequent earnings and occupational attainment, and differences in educational outcomes across social classes and income groups have been intensively investigated by sociologists and economists for many years. Explanations for the major differences observed (in all Western societies) generally focus on the different costs and benefits in progressing through the education system facing families at different points in the income distribution or class hierarchy, and cultural factors such as familiarity with the system and what it demands of students. This is also an area where a substantial body of research has been done on the position of migrants, both first-generation and second-generation. This serves to bring out both the importance of the “traditional” explanations for relatively poor outcomes when applied to migrants, and the need to go beyond them.

This can be seen when considering the position of both first and second-generation migrants. Among the first generation - and here we are thinking of those who migrate and enter the education system of the host country – a high proportion may face both structural and cultural deficits. The occupation and family income of their parents may be low, their parents will be unfamiliar with both the education system and probably the broader cultural setting, and the children/youth themselves may have to learn the language. For the second generation, born in the host country of immigrant parents, those parents are on average still disadvantaged in the labour market and thus in income and class terms – as discussed below. Although language acquisition may be much less of an issue than for the first generation, their parent’s lack of exposure to the educational system, and perhaps broader cultural dissonance, may still represent significant handicaps.

The key analytical challenges that must be faced in seeking to apply those standard frameworks, and in trying to identify “what works” for immigrant youth via comparative research, are highlighted in a set of co-ordinated country studies of ethnic inequalities in educational attainment among the children of migrants who came to Europe and North America in the second half of the 20<sup>th</sup>. century, who are now completing their education

and entering the labour market. Many, but by no means all, these migrants come from less-developed countries such as Pakistan, Turkey, North Africa or Mexico as migrant workers. The country studies<sup>3</sup> provide a wealth of information about the educational attainment of the second generation, and all have information that allows them to examine simultaneously ethnic origins and social background.<sup>4</sup>

Some clear patterns emerge across the countries. There are large overall differences between ethnic groups before taking account of their socioeconomic background, with a number having substantially lower educational attainment than the majority groups in the country, with some others doing less badly but still lagging behind the majority, and with a few out-performing the majority group. When the socio-economic position of the parental generation (in terms of occupation, income, and/or education) is taken into account, this is sufficient to explain the educational outcomes for many of the groups studied – notably those of European ancestry. Among those from developing countries, educational disadvantage sometimes exceeds that predicted by parental socioeconomic position, but the results differ from country to country and group to group – for example, in Germany social background explains all the Turkish disadvantage in obtaining the *Abitur* on completing second-level as well as the North African disadvantage in test scores in France, whereas it explains only half the Mexican disadvantage in high-school graduation in the USA and little of the disadvantage in exam performance of boys of Caribbean origin in Britain.

The conclusion reached is that traditional explanations emphasizing social background work rather well in explaining ethnic minority disadvantage, and that parental socioeconomic status stratifies ethnic groups in much the same way as majority groups.<sup>5</sup>

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<sup>3</sup> The countries (and ethnic groups) covered include Belgium (Turkish, Moroccan and Italian ancestry), England and Wales (Indian, Caribbean and Pakistani), France (North African and Portuguese), Germany, (Turkish, Italian, Yugoslav, Greek, Spanish/Portuguese), the Netherlands (Moroccan, Turkish and Surinamese/Antillean ancestry), Norway (Turkish, Pakistani and Indian) and Sweden (Turkish, Chinese, Sub-Saharan Africa, Finnish, East Asian). More limited results are also included for the USA (Hispanic).

<sup>4</sup> Initial findings were brought together in a set of papers in *Ethnicities* in 2007, with an overview by Brinbaum and Heath (2007), and more recent results are summarised in the presentation by Heath (2009).

<sup>5</sup> Difficulties in properly capturing parental background for the second generation must be noted, since for example occupational status or position in the income distribution in the host country may not reflect that in the country of origin.

However, where they do not suffice, several additional factors specific to migrants may be at work. Cultural dissonance, such as the lack of required cultural capital and limited parental language fluency, may affect children's school performance. Van de Werfhorst and van Tubergen's (2007) findings for the Netherlands show that parental cultural resources (such as usage of the Dutch language and knowledge of the educational system) are positively associated with test scores.<sup>6</sup> On the other hand, migrant children's drive and ambition may be promoted by their parents, who may be "positively selected" in those terms by the decision to migrate in the first place – though the extent to which parents can effectively transmit such aspirations to their children may depend on the strength of family structures and vary across groups.

Crul and Vermeulen (2003) presents the findings of another cross-national collaborative effort, this time focused on Turkish second-generation immigrants in six European countries (Sweden, Germany, the Netherlands, Belgium, France, and Austria) and comparing their outcomes with for example Moroccan immigrants. They make the important point that "Turks" in different countries cannot automatically be taken as the same group – there may be significant differences in ethnicity, first-generation education levels, and religion – but find in fact that the socioeconomic backgrounds of Turkish labour migrants turn out to be fairly similar in all the receiving countries. This socioeconomic background is extremely low compared with the native populations of these countries, and combined with a traditional Muslim background this means that Turkish immigrants are widely considered to be one of the toughest groups to integrate. The education level of the first generation immigrants was particularly low, reflecting their rural subsistence farming background.

For the second generation, major differences across countries in educational trajectories were found. A much higher proportion of the children of Turkish immigrants are channelled into a vocational track at lower secondary level in Germany and Austria than

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<sup>6</sup> Language cannot account for the disadvantage of those from Caribbean ancestry in Britain, and black resistance to and rejection of schooling, partly in response to racism within the system, has been put forward as an explanation. However, since test scores for young people of Maghrebian ancestry in France and of Moroccan, Tunisian or Caribbean ancestry in the Netherlands can be explained without recourse to such factors, if valid this would need to reflect some features specific to Britain.

France, Belgium and the Netherlands, and far more entered the preparatory track for higher education in France and Belgium. However, the drop-out rate is also highest in France, with a much higher proportion leaving secondary school with no diploma at all, so there is a price to be paid for the high proportion getting to university. Those channelled into the German and Austrian apprenticeship system also benefit when it comes to transition into the labour market, as discussed below. One striking finding reported by Timmerman, Vanderwaeren and Crul (2003) from this project relates to Belgium: whereas the Walloon region is strongly focused on the French republican model of integration, the Flemish region is more inspired by the Dutch multicultural model. At the same time, the education system is the same all over Belgium, and so are the school achievements of the Turkish second generation. As Crul and Vermeulen (2003) conclude, “This remarkable outcome is perhaps the most compelling evidence yet that integration models do not have the impact they are often purported to have” (p. 978). More broadly, the results of this comparative project do not point to any clear effect of integration policies that specifically target migrants, but some generic national institutional arrangements do seem to matter.

Compensatory education programmes aimed at migrants may potentially play an important role in educational outcomes. Fase (1994), in an analysis of the history of introduction of such programmes in different European countries, brings out the differences between them – in terms for example of whether they were integrated into the school curricula versus separate classes for migrants. Interestingly, though, the conclusion is drawn that such differences had few consequences for the educational status of immigrant children in the various countries.

Among the many studies focused on individual countries, it is worth noting Esser (2006), who provides evidence that language difficulties play a significant role in Turkish disadvantage in German schools. Language proficiency is even more likely to be an issue for the “1.5” generation of migrants who arrived during their school years, Kristen (2008) also focuses on those of Turkish background in Germany and explores school choice processes and how they contribute to ethnic school segregation. The results show that

Turkish children are more likely than German children to enter a school with a relatively larger proportion of foreign nationals, a pattern that in the aggregate seems to contribute to an increasing ethnic separation at the school level. However, rather than originating from ethnic differences in evaluation or school access, parents' perception are seen as primary importance - unfamiliarity with the system means Turkish families frequently pay attention to only the school that accommodates more foreign nationals.

Such studies and findings shed some light on the question of "what works" for immigrant youth in education. Identifying the critical role of parental socio-economic background, and that it operates for second-generation migrants in a generally similar fashion as for others, clearly has the important implication that institutions and policies that promote labour market success for the first generation can be expected to have direct effects in reducing educational disadvantage for their offspring. The structure of the educational system also matters. The general understanding from studies of social class inequalities in educational attainment is that early selection is associated with greater inequalities, whereas educational systems that delay selection are more egalitarian (see e.g. Breen and Jonsson, 2005). Some countries which have early selection and "tracking" (such as the Netherlands and Germany) do appear to have relatively high minority disadvantage at age 15. The availability of second chance entry routes make it easier for minorities to progress (while also benefitting disadvantaged majority youth).

In predominantly comprehensive systems with delayed selection (such as Britain and the USA), however, particular problems may arise for comprehensive schools in neighbourhoods with high concentrations of migrants and socio-economic disadvantage, which may reduce ethnic minority opportunities. Programmes directing additional resources to such schools, such as the French Zones d'Education Prioritaire which go back to 1982, may have some impact although evaluation results are mixed.<sup>7</sup>

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<sup>7</sup> While for Heath (2009) ZEPs may reduce disadvantage for ethnic minority students, Bénabou, Kramarz and Prost (2005) found no impact on student achievement generally.

The nature and availability of tertiary education also has implications for ethnic minorities. Countries such as Germany with relatively small tertiary sectors with strong linkage between school performance and entry have lower ethnic minority participation than the US system of mass higher education with its relatively loose linkage to school performance, although ethnic minorities are over-represented in lower-prestige institutions there (Karen, 2002). Similarly the case of France suggests that educational systems that allow many majority children into higher education are more accessible to ethnic minority groups as well – though of course a third-level qualification may then be less valuable in the labour market.

Crul and Vermeulen (2003) point to factors in national education systems that either hinder or facilitate the school careers of second-generation Turks. National educational systems differ in school duration, face-to-face contact hours with teachers, selectivity, and supplementary help available to children and youth inside and outside school. One significant difference between countries is in the age education begins, which ranges from  $2\frac{1}{2}$  in Belgium and France to 6 in Germany and Austria, so second-generation immigrant children in the former have much greater opportunities to learn the majority language in that crucial developmental phase. Contact hours are also much lower in Germany and Austria, and there is more emphasis on homework where help at home may be scant. School selection is then early, at about 10, which combined with a late start and limited contact hours puts second-generation students at a particular disadvantage. The later age of selection facilitates immigrant youth in France and Belgium getting into the more academic stream, though as already noted many falter in that higher track.

Countries also differ in the extent of special assistance and support provided to youth with learning problems, and to migrant children in particular, notably language training. There may be some correlation, with countries that provide extra support for students generally also devoting more resources to immigrants, and the former may well be more important. The language problems of the “1.5” generation clearly need to be addressed, but this is not a panacea and will not solve the problems of the second generation - not compensating for the impact of differences in starting age, for example. As far as

language programmes are concerned, there is considerable debate about the best method for improving proficiency, for example transitional bilingual programmes versus intensive instruction in the host country language, and integration into mainstream school programmes versus outside school (see e.g. Westin, 2003).

In concluding this section, it is important to emphasise that policies aimed at improving school standards generally by increasing parental information and choices may increase ethnic (and other) inequalities, since minority parents are likely to be less knowledgeable about the available choices. The fact that minorities may do particularly poorly early on but the gap tends to close as educational careers progress provides some grounds for optimism, as well as illustrating the resilience and potential of such groups. This has a less benign interpretation, however, in that prospects in the labour market may also play a role: discrimination on entry into the labour market may work to reduce the opportunity cost for migrant youth of continuing in education (though any subsequent discrimination reducing the return to a given level of education for migrants will work the other way). In the current economic environment where unemployment is rising dramatically, the labour market prospects for immigrant youth may be particularly poor, and it is to employment and earnings in the labour market that we now turn.

### ***Employment and Earnings***

There are many reasons why first generation immigrants might fare badly in the labour market. Firstly, their foreign qualifications may not be recognised. Secondly, their lack of language fluency may hinder their opportunities to get desirable jobs. Thirdly, their lack of experience in the destination labour market may prevent them from getting the kind of work they would have wanted or were qualified for. However, these reasons will not apply with the same force to the second generation, among whom we should see reduced disadvantage. Despite this, a range of studies finds that ethnic minorities are disadvantaged in the labour market with respect to employment and occupational attainment. Furthermore, this has been found to reflect but also to go beyond what would be predicted on the basis of those second-generation immigrants' own educational attainment.



While there have been many informative studies of the employment experiences of migrants and their earnings vis-a-vis natives, here our main focus is once again on learning from cross-country studies. Heath and Cheung (2007) report on a collaborative study by a team of sociologists covering the main Western countries where there have been large numbers of immigrants in the second half of the twentieth century - including the classic immigrant countries such as Australia, Canada and the USA, a group of developed countries in Western Europe: Austria, Belgium, France, Germany, the Netherlands, Sweden and Great Britain, and South Africa, Israel and Northern Ireland which can be regarded as 'settler' societies built on migration. They highlight the importance of distinguishing the gross disadvantages that ethnic minorities typically experience in the labour market from the net disadvantages, or 'ethnic penalties', after controlling for educational qualifications and experience in the labour market. A clear pattern of ethnic stratification is found in each country which continues, although often with reduced magnitude, in the second generation. The hierarchy is broadly similar, with groups from North-West European origins at the top, followed by those from other European countries, with immigrants from non-European origins towards the bottom. Most groups of non-European ancestry experience substantial ethnic penalties in terms of unemployment and occupational attainment (having controlled for their education levels), even in the second and later generations. In a few countries, notably Australia and Canada, the second generation of European ancestry do not experience any ethnic penalties while groups of non-European ancestry experience moderate ethnic penalties but only for employment. Those fortunate enough to be in work get jobs commensurate with their qualifications. This is also true in the case of Britain, Sweden and the USA. In contrast, in many western European countries such as Austria, Belgium, France, Germany and the Netherlands, ethnic penalties are quite substantial for non-European minorities both with respect to securing employment as well as in gaining access to salaried jobs. Ethnic minorities in Belgium and France are particularly disadvantaged.

There are a number of possible explanations for greater ethnic penalties being experienced in Western Europe than in North America or Australia. First of all, the state

of the labour market, for example, the level of unemployment and the flexibility of the local labour market, may be responsible. Secondly, prejudice against ethnic minorities and exclusionary or xenophobic attitudes may also in part explain these cross-national differences. Finally 'inclusivity', such as the ease of obtaining citizenship, and 'selectivity', such as immigration legislation that restricts entry to highly qualified migrations, may also explain the different fortunes of ethnic minority groups in western countries. The largest ethnic penalties, found in Austria, Belgium and Germany, seem to be a legacy of guest worker programmes in these countries which attracted mostly immigrants from a rural peasant background.

We have already noted Crul and Vermeulen's (2003) emphasis on the effectiveness of the German and Austrian apprenticeship system in ensuring a relatively smooth transition to work for immigrant youth who follow that track. Strikingly, unemployment among second-generation Turks in those countries is only one-quarter to one-third as high as in France, Belgium or the Netherlands. The apprenticeship system seems to give young people with low vocational diplomas a start on the job market, a step which is much harder to accomplish in countries without such a system, where absence of work experience is a severe handicap. France and Belgium, and to a lesser extent the Netherlands, thus display more polarization: while a substantial group of second-generation Turks are reaching white-collar or professional positions, many qualified and unqualified workers suffer serious unemployment as a result of their difficult transition to the labour market. Of course, the overall level of unemployment in the country is a critical contextual factor affecting outcomes for migrant youth.

As already noted, there has been a wide range of studies of migrants in individual countries, notably the USA, Canada, UK, France, Netherlands, Sweden, and Australia, and these support the conclusion from such comparative studies that while it is essential to distinguish among different migrant groups and education plays a central role in labour market outcomes for migrants as for others, some migrant groups experience substantial and sustained disadvantage in the labour market in terms of time spent unemployed and earnings when in work. It is unlikely that the disadvantages of migrants in the labour

market will disappear of their own accord, but what government action will help? Clearly, improving the educational performance of migrant youth should translate into better labour market outcomes, so the structural and compensatory issues discussed above in relation to education are highly relevant. It is also important to note that some labour market structures have much wider divergence in outcomes between the more versus less skilled or educated than others: those that are most will also work to the advantage of migrants with relatively low skills. As in other domains, institutions and policies that effectively incorporate the disadvantaged, broadly defined, may be at least as important as ones directed specifically towards migrants.

Going beyond that, though, several other areas appear likely to be potentially important in narrowing gaps between (some) migrant groups and others in labour market outcomes. One is the way post-education training, both when aimed at those in work and at re-integration of the unemployed, is structured, and the extent to which it seeks to meet the particular needs of immigrants and ethnic minorities. Major advances have been made in the way the impact of training and re-integration programmes are evaluated, with increasingly sophisticated statistical methods and use of randomized trials being used. This research provides a basis for designing more effective intervention, which is all the more important in the current economic crisis. The same may be said of programmes aimed at re-generating deprived urban areas, in which disadvantaged ethnic minorities are often concentrated.

The other area is perhaps the most obvious: discrimination and how to tackle it. Field studies in various countries have amply demonstrated the existence of substantial discrimination in hiring that disadvantages visible ethnic minorities (as well as those living in what are perceived to be areas of concentrated disadvantage, which may also affect those minorities). Recognising the pervasiveness of discrimination in the labour market is the first step towards addressing it. Many countries have implemented both stringent anti-discrimination legislation and education programmes aimed at changing attitudes (among both employers and employees), which do seem to have an impact; vigorous implementation on both fronts seems essential if labour market outcomes for

migrants in particular minority groups are to be improved. A particularly contentious issue, of course, is whether it is to go further and introduce affirmative action for minority groups. Heath (2009), for example, points in this context to the example of Northern Ireland, where the 'Troubles' of the 1970s led to affirmative action policies that appear to be associated with a gradual reduction in Catholic disadvantage. However, generalizing from that very specific case seems hazardous, and the conditions under which affirmative action does more good than harm for ethnic minorities need careful study.

### ***Economic Resources and Poverty***

Disadvantage in the labour market for immigrants translates directly into lower household income and a heightened risk of poverty. For some, this is compounded by other risk factors – notably family size and a higher probability of falling through gaps in the social safety-net, not least due to limited entitlements. Thus a wide variety of national and comparative studies have found immigrants to have above-average poverty rates and, often, poverty rates that are higher than otherwise similar individuals and households. As in other domains, though, immigrants cannot be sensibly seen as a homogenous group, with a great deal of variation in income and poverty outcomes not only across different countries of origin but also within ethnic groups.

The USA is unusual in having an official income poverty line, and immigrants are much more likely to be below that line than native U.S. citizens (based on annual income in the previous year). The poverty rate for immigrants and their U.S.-born children is two-thirds higher than that of natives, and as a consequence immigrants and their children account for almost one in four persons living in poverty. Recent immigrants have a particularly high poverty rate, over twice that of U.S. natives, with a much lower rate for those who entered in for example the 1970s or 1980s. There is an enormous variation in poverty rates among immigrants from different countries, with those from for example Mexico or the Dominican Republic having much higher rates than those from Poland or the Philippines. Trends over time also vary across these groups and with date of arrival, though it is noteworthy that during the “Clinton boom” of the 1990s the poverty rates of recent immigrants fell about four times as fast as for U.S. natives. In Canada, immigrants

are consistently over-represented among the poor, their poverty rates are particularly high in larger cities which have larger concentrations of immigrants, and poverty rates are particularly high for visible minorities, who are mostly recent immigrants (Kazemipur and Halli, 2001). The poverty rate for recent immigrants of working age is more than twice that of native-born Canadians, though migrants who have been in Canada for longer have poverty rates close to those of the native-born (Fleury, 2007). Recent immigrants are over-represented among both working poor and non-working poor. Different studies have produced different findings in relation to second-generation migrants, with some suggesting that they have not improved on the poverty rates of the first generation and others that they have done much better.<sup>8</sup>

In Europe, above-average poverty risk for immigrants has been frequently noted across a wide range of countries. As comparative data from EU-SILC becomes available, it is now also possible to carry out more soundly-based comparisons of immigrants' economic status across EU countries, though there are still problems in doing so in sufficient depth. Migrants can be distinguished as persons born outside their current country of residence, or not citizens of that country – the latter comprising a smaller group. On the basis of data for fourteen countries from the first round of EU-SILC in 2004, Lelkes (2007) shows that with either definition migrants have higher poverty rates<sup>9</sup> than others in most of those countries (though Portugal is an exception). However, the gap varies a great deal from one country to another, and also between migrants from other EU countries versus those from outside the EU (the only information about country of origin obtained). Migrants from other EU countries consistently have lower poverty rates than those from outside the EU, and in certain countries (including Portugal, Greece and Ireland) their poverty rates are no higher than the native population. Those from outside the EU face very much higher poverty rates than others most countries, with the gap being particularly wide in for example Denmark, Sweden, France and Belgium. While EU-SILC has significant potential in further exploring the situation of migrants in Europe and how this varies across countries, it is a major limitation that country of origin is not known.

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<sup>8</sup> See for example Kazemipur and Halli's (2001) negative findings but Boyd's (1998) more positive ones.

<sup>9</sup> Poverty in this case is measured vis-à-vis relative income poverty thresholds set at 60% of median income in the country in question, the most widely-used approach in Europe.

Excess poverty for immigrants clearly reflects a number of distinct but inter-related factors, most importantly lower education and disadvantage in the labour market as already discussed, as well as family size and structure. When education and labour force status (as well as age and gender) are taken into account, though, migrants as a group are still seen to face an excess poverty risk. In the EU, for example, the EU-SILC study by Lelkes finds that migrants have a poverty risk that is 6-15% higher than others with similar characteristics, depending on how migrants are distinguished. (The number of migrants in the sample does not allow differences across countries in this respect to be robustly estimated.)

As well as lower earnings and higher unemployment/inactivity rates, the higher poverty rate for immigrants may reflect inadequacies and gaps in social security structures, both ones that apply generally and ones that are specific to immigrants. Migrants may be particularly likely to find themselves relying on safety-net schemes, while differential access/rights in relation to income support may leave some migrants without support or with lower levels than a native in the same circumstances would receive.

What can be done to address the high poverty rates, and limited economic resources more broadly, that face significant groups of immigrants? The key areas for policy certainly include seeking to promoting economic success via education and labour market policies along the lines discussed above. These are the classic responses of liberal market economies to disadvantage: improve earnings capacity so that people can become self-sufficient. However, it is also clear from extensive comparative research on poverty that welfare state structures, and the social protection system in particular, also play a central role. Thus financial and other supports for families, in addition to employment and earnings, have been seen to be key components of “what works” for child poverty generally.<sup>10</sup> Such supportive frameworks would be particularly important for immigrant families, but some further measures targeted specifically at them also have a role. This could include, for example, seeking to ensure that immigrants have the information

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<sup>10</sup> See Addema and Whiteford (2007), UNICEF (2007), European Commission (2008)

required to avail of their entitlements and that factors underlying non-take-up of benefits are addressed. The position of immigrants with limited entitlements – either because they are illegally present or because entitlements are limited for non-citizens or in other ways that affect legal immigrants – also needs to be addressed, but there are often perceived to be political obstacles to more generous treatment by the social welfare system.

### ***Health***

The health and health services utilisation and needs of first- and second-generation immigrants has been the topic of a very substantial research literature, though much of that literature is focused on very specific migrant groups, conditions and locations, from which it is difficult to draw any more general conclusions. As Jasso, Massey, Rosenzweig and Smith (2004) point out, the ethnic health disparities observed at any point in time reflect the average healthiness of the original immigrants and the diversity among them, and the health trajectories following immigration and also of subsequent generations. A typical though by no means uniform or consistent pattern is for the first generation to display better health on average than the population of the host country, but for substantial convergence to have taken place by the second generation. Much of this literature relates to the USA and Canada, and takes as point of departure the observation that the foreign-born population there have much lower rates of chronic conditions than the native born, across a wide range of different conditions.<sup>11</sup> (It is worth noting that this is particularly pronounced in the younger age groups, with some evidence of a reversal among older households, and that there is considerable variation across migrant groups.) The gap in some other immigrant-receiving countries is in the other direction, though, with the main immigrant groups in for example The Netherlands having significantly worse health on various indicators than the native-born population. There is clearly substantial variation in health across different immigrant groups within and across countries, and as in other areas it is not appropriate to treat immigrants as a homogenous group.

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<sup>11</sup> See for example Jasso et al (2004), Singh and Miller (2004), McDonald and Kennedy (2004).

Health selectivity of migrants – the “healthy migrant” effect – clearly plays an important role in producing the North American pattern, and this has been a very important theme in the research literature.<sup>12</sup> Another important theme is the use of migrants in order to identify the role of environment, by comparison of health among migrants with others in the sending and receiving country (with Japanese in the USA a much-cited example). A third is the role of culture, and in particular whether some immigrant groups benefit from cultural norms (for example in relation to diet and risky behaviours) that serve as a protective factor for health, with this buffering generally reducing from one generation to the next. Finally, the act of immigration may itself directly affect health, since it may be stressful with negative psychosocial impacts, potentially impacting on for example heart disease.

Focusing on children and youth, US research also suggests that those in immigrant families have fewer specific acute and chronic health problems, as well as lower prevalence of accidents and injuries. Rates of low birthweight and infant mortality are also lower among children born to immigrant women than to US-born women, despite their lower socioeconomic status. Among adolescents, overall immigrants are less likely than US-born youth to consider themselves in poor health or have school absences due to health or emotional problems. First-generation immigrant adolescents are also less likely to report that they engage in risky behaviours. However, this is less true of the second generation and by the third and later generations risky behaviours approach or exceed US-born white adolescents. Adolescents in immigrant families appear to experience overall levels of psychological well-being and self-esteem that are similar to, if not better than, adolescents in US-born families, but the former do report feeling less control over their own lives (Hernandez and Charney, 1998). So high levels of poverty and other socioeconomic and demographic risk factors for children in immigrant families do not always lead to the negative outcomes overall that might be expected.

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<sup>12</sup> This may sometimes be reinforced by a further selection of the healthy among migrants, for example Mexican immigrants who return to Mexico may be less healthy than those who stay in the USA.



There are also many reasons why immigrants, and children of immigrants, might be distinctive in terms of access to and utilisation of health services. Specific patterns of healthcare use may be observed among recent immigrants in particular, with greater reliance on “walk-in” services such as accident and emergency departments rather than regular primary care providers.<sup>13</sup> The most obvious factor distinguishing some immigrants is that they do not have the same entitlement to health services as others. Illegal/undocumented immigrants are most likely to be in this situation, but it may also be the case for refugees and asylum seekers, recent migrants who have not yet established residence, and sometimes other migrants depending on the intricacies of how entitlement is framed. Even where their legal entitlement is the same as the native-born, immigrants may be more likely to be uninsured in systems where health insurance plays an important role. Apart from entitlement, a range of other considerations may also influence immigrants’ use of health services, and once again this continues to be the subject of a substantive research literature. Those who have limited proficiency in the language of the host country face particular barriers in accessing services, but lack of knowledge about what is available and appropriate, and of the social support networks that help in acquiring it, may handicap others. Discrimination on the part of service providers could also be at work, either overtly or in the implicit assumption that the “alien” culture is inferior and the patient’s behaviour inappropriate.

In terms of access, the situation of undocumented immigrants is a clear concern and different countries have responded in different ways – not always in a positive direction. (Welfare reform in the USA in 1996 greatly restricted the provision of many federal, state and local publicly-funded services to the undocumented.) Undocumented immigrants are often distinctive (from other migrants and the native-born) in health status and needs, for example in terms of prevalence of communicable disease and immunizations on arrival and the conditions in which they then live and work. Limited access to health services and unwillingness to use them can then exacerbate the problem, with obvious risks not just to the immigrants themselves but in public health terms to the broader community. There may be an important distinction between policy and practice, with care actually

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<sup>13</sup> See for example Leduc and Proulx (2004).

being provided on the basis of need as presented even where the rules say otherwise (see for example Kullgren, 2003), but this can hardly be regarded as satisfactory – apart from anything else, in the ethical dilemmas it creates for providers.

Some first-generation immigrant youth face particular health challenges, with refugees and asylum seekers and youth migrating without their families the most obvious examples. The situations from which they have come in their country of origin may have traumatic effects on psychological well-being, while migration itself and the conditions in which they are often forced to live in the receiving country while their legal situation is clarified are often additional stressors. Therapeutic interventions may well be required to meet immediate mental health needs, and in the longer term specially-designed mental health services may also be required (see for example Pumariega *et al*, 2005).

For second-generation immigrant youth, the issue of acculturation and its potential impact on health is of particular salience. While much discussed and investigated, the way in which key variables are measured varies so much from one study to another that it is very difficult to draw broad conclusions. As Salant and Lauderdale (2003) bring out, the way acculturation is conceptualised and measured in the research literature is both highly variable and open to criticism, with efforts to reduce such a complex phenomenon to a single measure (such as language spoken) or scale particularly questionable.

More generally, meaningful conclusions about the circumstances and causal processes affecting first and second-generation immigrants, and children and youth in particular, require first their identification in general samples of the population large enough to support statistical inference, distinguished by ethnic group or origin; they then require that both the factors relevant to healthy development for everyone, and the specific factors in relation to migrant experience, context and culture that may be relevant to health, be measured. This is a tall order, and so it is not surprising that rigorous comparative studies – where all this has to be available across a number of countries, and with the variables measured in the same way – are rare. Most look at specific conditions, often with small samples or relying on administrative data, and make inferences without

being able to control adequately for the composition of the populations involved or other factors.

Bollini and Siem (1995) for example look at the entitlements of migrants in a range of developed countries, and then at perinatal/infant mortality and the frequency of occupational accidents and disability distinguishing various ethnic groupings (which differ from one country to the next), together with research on these outcomes. They point to the importance of controlling for social class but the studies on which they rely may or may not have done so adequately. Thus, while they argue for the importance of differences in entitlement, it is unclear how much weight can be placed on that. It is of interest, nonetheless, that two broad categories of countries are distinguished in terms of attitude to health care provision for migrants:

- Those displaying a “passive” attitude, in which migrants are expected to make use of the existing health system without any major modification or the provision of special programmes and services; and
- Those with an “active” attitude, in which the special health needs of immigrant communities are acknowledged and steps are taken to minimize linguistic and cultural barriers, by organizing specific services for different ethnic groups, and by organisational changes within mainstream services to accommodate ethnic diversity.

It is argued (see also Bollini, 1993) that an active attitude, translated into the adoption of a specific health policy for migrants and ethnic minorities, could remove many economic, administrative and linguistic barriers to access to health care – while acknowledging that it is not clear (at an overall level) how much impact such policies have on differences in health outcomes. [some tentative inferences can be drawn from cross-country comparisons, even without having been able to control adequately for differences in the characteristics of the immigrants themselves] While in the USA recent immigrants seem much less likely to receive timely health care than others, in Canada there seems to be relatively little difference between the health services utilisation patterns of immigrants and native-born, and that any differences for recently-arrived migrants disappear quite quickly (see for example Gluberman, 1998, Laroche, 2000, McDonald and Kennedy,

2004). Even in the USA, it is noteworthy that for those who have been in the country for 10 years or more, any remaining differences have been found to be attributable (at least in statistical terms) to age at immigration and language used. In The Netherlands, to take another example, the health care system contains few financial barriers, and both quantitative and qualitative studies have shown that the accessibility of curative health care for the main immigrant groups (including Turks, Moroccans and Surinamese) is high. Nonetheless, studies conclude that it is likely that even there, due to cultural and communications barriers migrants benefit less from health services than most indigenous patients.<sup>14</sup>

In terms of what makes a difference in the domain of health for migrants and migrant youth in particular, then, key considerations are:

- 1) The structure of health care and its accessibility for the general population, especially the poor and disadvantaged;
- 2) The entitlements of different types of immigrant, including the undocumented in particular;
- 3) The extent to which special provision is made, within and alongside mainstream services, for the special needs of particular immigrant communities. These may be nested within broader programmes targeting disadvantage (poor urban areas, for example), or aimed at health conditions that are particularly prevalent in specific migrant groups (such as infectious diseases).
- 4) The extent to which the needs of specific types of immigrants such as refugees and asylum seekers are met by the provision of specially-designed and culturally and therapeutically appropriate services.

As well as thinking about policies and institutions that “work” in terms of improving immigrant health, it is worth noting that the evidence on immigrant health has implications for policy in relation to immigration itself. A common theme in popular debate is that immigrants represent a “burden” on the health services of the host country, and this feeds into demands for restricting access to those services (as recently seen in the

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<sup>14</sup> Venema, Garretsen and van der Maas, (1995)

UK, for example).<sup>15</sup> The fact that immigrants are on average healthier is an important point that often gets lost in this debate, but does not always effectively counter the argument for screening and selecting migrants explicitly on the basis of health status.<sup>16</sup>

### ***Housing and Physical Environment***

There is a large amount of research which demonstrates that the housing experiences (in terms of housing choice, quality, affordability and location) of recent immigrants are generally, though not uniformly, worse than those of the native population, and for certain ethnic groups this can persist over several generations.<sup>17</sup> Finding a suitable place to live is the first step towards successful integration, but immigrants face specific disadvantages in accessing adequate housing, in addition to those associated with socio-economic status; these have potentially serious implications for the second generation. Over and above the constraints imposed by their often limited financial resources, finding appropriate housing may be made more difficult for the first generation by lack of knowledge, high housing costs in the urban areas where migrants often concentrate, shortage of suitable housing (especially for rental), and discriminatory practices by landlords and sellers. Immigrants frequently report serious problems in accessing housing, and may have to devote a high proportion of their incomes to meeting housing costs. At the extreme, immigrants (and especially refugees) may be particularly vulnerable to homelessness.<sup>18</sup>

For the second generation, rather than access *per se* the more salient issues are the quality of housing and the neighbourhood in which it is set. While many immigrant families do manage to move up the housing ladder, spatial concentration is common – reflecting reliance on ethnic ties for information and other advantages of co-location, as well as

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<sup>15</sup> “East European immigrants with cancer ‘could swamp the NHS’” is an example of the newspaper headlines generated by this issue.

<sup>16</sup> The Conservative Party in Britain, for example, promised in 2005 to introduce mandatory HIV/AIDS and tuberculosis testing for prospective immigrants

<sup>17</sup> For example, Carter (2005) reports that in Canada immigrants are likely to be in housing need; Harrison (2005) reports that in the United Kingdom ethnic minority households are significantly more likely to live in overcrowded housing than is the rest of the population.

<sup>18</sup> Harvey (1994) for example estimated that 10-20% of homeless persons in the EU were migrants or refugees; see also Carter (2005), Harrison (2005), Edgar *et al.*, 2004.

discrimination in the housing market. Spatial polarisation along ethnic lines has been a major preoccupation in the USA, and also in the UK, and to a lesser extent in for example The Netherlands and Sweden (Harrison, 2005; Musterd and Ostendorf, 1998). While it is not always the case that these neighbourhoods are relatively deprived, that is also common, adding another potential layer of neighbourhood effects to those associated with ethnic concentration. Housing and housing policy are thus potentially critical for the environment in which the second generation of immigrant youth grow up.

It is important not to overstate the extent of such immigrant polarisation generally or its impact.<sup>19</sup> The negative socio-economic effects (on e.g. unemployment, income and poverty) often assumed to flow from living in a disadvantaged neighbourhood are often difficult to pin down statistically. This is because it is very hard to be sure one has adequately controlled for individual and family characteristics and for the implications of selection/sorting by area, including in terms of characteristics that are very difficult to capture empirically such as effort and ambition. (There are of course similar difficulties in estimating the effects of migration itself on such outcomes). Furthermore, the impact of living in an ethnic enclave may not be unambiguously negative. A substantial US research literature does link living in segregated areas with poorer employment and earnings prospects for blacks, (see for example Cutler and Glaeser, 1997), reflecting *inter alia* the migration of jobs from inner-city to outer suburbs (the “spatial mismatch” hypothesis). However, living in an enclave may also have advantages in accessing jobs: a valuable Swedish study was able to take advantage of a natural experiment whereby government policy shifted to distribute refugee immigrants across areas, and concluded that when sorting is taken into account, living in enclaves actually improves labour market outcomes (Edin *et al*, 2000). This result – like the others – may not be generalisable to other immigrant groups and contexts, but serves as a cautionary note in thinking about ethnic “enclaves”.

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<sup>19</sup> For example, Musterd and Deurloo (2002) stress that ethnic concentrations in the Netherlands are relatively small especially when compared to US cities and generally contain a mix of minority ethnic groups and a sizeable native Dutch component, whereas in the USA they are often overwhelmingly dominated by the single ethnic community.

Housing market structures and policies vary widely across countries, most obviously in the extent of owner occupation but also in the way the state intervenes to assist low-income households in particular. Studies such as Musterd and Ostendorf (1998) conclude that in countries like Sweden and the Netherlands, where government spending on housing and social security are high, minority ethnic populations are likely to be less excluded than in the UK where levels of public investment in housing and social security are lower (and the extent of spatial segregation may be less). So improving social housing provision and other measures to meet the housing needs of low income households generally are of central importance for immigrants. In the same vein, broadly focused neighbourhood renewal policies which help to combat the development of stigmatised low income urban districts may be very important for immigrant youth in particular though not targeted specifically at them.

Going beyond that, though, the evidence suggests an important role for measures targeted specifically at immigrants and ethnic minorities to include

- Improving access of recent immigrants in particular to rental or social housing;
- Improving the restricted access to rights for some migrants which is an important factor in their poorer housing conditions (Edgar *et al* 2004);
- Encouraging the development of mixed tenure estates;
- Implementing anti-discrimination legislation and procedures in rented and social housing; and
- Encouraging and facilitating the involvement of minority groups in the management and provision of social housing

Finally, policy with respect spatial settlement of immigrants is linked to broader debates both about social mixing between the social classes, and also about how the goals of social policy in terms of integration or assimilation are framed to which we return briefly below.

### ***Family and Peer Relationships, Social Integration and Cohesion***

While widely recognised as central to the well-being of youth, it is commonly the case that quantitative indicators of family and peer relationships, social participation and integration are much sparser than for the other domains discussed above. For migrant youth this may be particularly important, since they face challenges over and above those of other young people, but for the most part the available studies relate to specific countries, and often specific migrant or ethnic groups. Some are even more specific in relating to types of immigrants with very particular problems – such as refugees and asylum seekers or unaccompanied minors. It is clear that exposure to traumatic conditions prior to migration, coupled with difficulties in acculturation in a new environment, can lead to severe psychological and behavioural problems.<sup>20</sup> More generally, though, even without such exposure migration itself is often a stressor, and the different pace of acculturation of first-generation migrants and their children in the destination country – with the children usually doing so more rapidly - can put a strain on family relationships (see for example the review by Suarez-Orocco and Qin, 2006).

Research has explored the ways in which immigration can lead to family roles being renegotiated, which can be associated with stress and discord. This can include a change in power relationships and the role of women outside the household, which may conflict with patriarchal expectations on the part of men. Lack of language proficiency among parents may mean children and youth take on responsibilities for dealing with the outside world, and the division of work within the household may also be a source of strain (impacting differently on young men versus women). Parental efforts to exercise discipline over their children, particularly where the host society is seen as a threat to their native culture, may be a source of conflict. This may centre on risky or problem behaviours in the case of boys, but on patterns of socialising for girls. “Dissonant acculturation” between parents and children can lead to serious problems within the family. It is important to note, though, that “problem cases” may be more visible to researchers and those providing social and health services support, giving rise to a

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<sup>20</sup> See for example Hyman, Vu and Belser’s (2000) study of young people in Southeast Asian refugee families who resettled in Canada, and McKelvey and Webb’s (1995) study of unaccompanied minors migrating from Vietnam to the USA.



tendency to over-estimate the scale of such difficulties among immigrants relative to others.<sup>21</sup>

Immigrant youth may find forming a coherent identity during adolescence particularly challenging if they have to inhabit different worlds at home and in school, with potential cultural dissonance, and this may be exacerbated by discrimination and negative images of their ethnic group in the dominant culture. A variety of sources in the host society, including school, media, and police, may convey messages about such negative stereotypes, affecting the individual's sense of self-worth – with important differences between young men and women, and across different ethnic groups. Conflicting messages from home versus school may also pose problems in identity formation, particularly for girls. It appears that the ability to move easily across cultural contexts – rather than rapidly leaving behind their culture of origin – is the most adaptive for immigrant youth's development (see for example Portes and Zhou, 1993).

Despite the particular challenges that they face, international research on migrant adaptation suggests that children and young people from immigrant backgrounds generally show satisfactory levels of psychological and social adjustment; indeed, some studies have shown them to be less involved in negative behaviours than their national peers and having at least as high levels of psychological well-being – an aspect of the “immigrant paradox”. There have been many studies by psychologists and sociologists focused on the development of immigrant youth from different backgrounds and in different countries and settings, and it is clear that institutions and attitudes in the host country matter: patterns of identity, language and value retention, for example, are influenced by the social and political context, including perceived discrimination and fear of assimilation (Ward, 2008). However, more rigorous cross-country studies with standardised approaches and measures are needed to clarify the causal processes and key influences at work. The International Comparative Study of Ethno-Cultural Youth organised in 13 immigration-receiving countries, for example, suggests that first

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<sup>21</sup> A comparison of Mexican immigrant and white Americans by Suarez-Orozco and Suarez-Orozco, 1995, for example, found that immigrant and second-generation youth displayed *less* family conflict than their white counterparts.

generation migrant youth were generally equal to or better than their non-migrant peers in psychological well-being (life satisfaction, self-esteem, mental health) and school adjustment and behaviour; second-generation youth were largely indistinguishable from their national peers except for example in New Zealand, where they reported better school adjustment and fewer behavioural problems. (Berry, Phinney, Sam and Vedder, 2006; Sam, Vedder, Ward and Horenczyk, 2006; Ward, 2008). The strong policy conclusion presented by the authors, that integration is the best orientation for immigrants in terms of psychological and socio-cultural adaptation and should be promoted by public policy, can be questioned – not least on the basis of methodological concerns about the measurement of acculturation (see Rudmin, 2009) - but the conclusion that discrimination experiences diminish well-being and should be discouraged by policies and by law seems harder to dispute.

So it is particularly difficult at this stage to identify institutional settings and policies that promote wellbeing of immigrant youth in the domain of family and peer relationships, despite many valuable studies in specific contexts and settings. More open and less discriminatory attitudes and practices in the host country may be important in facilitating adaptation by immigrant youth, but it not easy to pin down their precise role, much less how policy might best be directed to bring about change.

### ***Conclusions***

Institutional settings and policies in relation to immigrants and to more broadly vary greatly across industrialised countries, so comparative analysis can seek to identify which settings and policies are most effective in promoting the well-being of immigrant youth. This paper first highlighted the need for an analytical framework for such an exercise, and pointed towards recent studies and monitoring procedures in relation to well-being, social inclusion/exclusion, and child well-being. Critically, the focus on well-being represents a shift away from a one-dimensional focus on a particular aspect of development or socio-economic circumstances towards a more encompassing concept, which incorporates a range of dimensions key to a rounded human life. The paper then sought to place some key findings from the disparate social science research literature on

immigration and youth within that framework, dealing in turn with the domains of education, employment and earnings, economic resources and poverty, housing, and family and peer relationships and integration.

It was made clear from the outset that learning from diversity through such a comparative perspective faces serious challenges, both in general and especially in studying “what works” for migrants and migrant youth. To be able to assess which institutional settings and policies are most effective, one needs to look at how similar immigrants fare in different countries, but that is very demanding in terms of information, in relation to institutions and policies, to outcomes, and perhaps most importantly to the migrants themselves and their backgrounds. If there is one clear lesson from the extensive research literature on how migrants fare, it is that treating them as a homogenous group is likely to be highly misleading – and even taking a specific group such as “Turks” may mask significant differences in composition from one country to another.. What counts as “doing well” also needs careful consideration – a focus on how migrant youth are doing in terms of key outcomes in one country versus another could give quite different answers to one on the “migrant/ethnic penalty”, that is the gap in outcomes between migrant or ethnic youth and otherwise similar non-migrant youth.

While the paper goes into some detail in reviewing findings across the various domains covered, in concluding are there general conclusions that may be tentatively advanced across them? In discussing educational outcomes in particular depth, it was concluded that traditional explanations emphasizing social background work rather well in explaining ethnic minority disadvantage, and that targeted programmes aimed at migrants do not appear to be responsible for much of the difference in outcomes for migrant youth across countries, with the way the education system is structured in the first place being much more important. This broad conclusion may perhaps hold across other domains as well, though the comparative research available to support it is less well-developed. Structures that are unfavourable for the disadvantaged are also likely to handicap many immigrants, and strategies to improve the situation of those with limited educational and skills – for example directing resources towards schools in deprived neighbourhoods or

towards re-training and re-integration of the unemployed - will also benefit ethnic minorities without targeting them explicitly.

Structures and policies that work for the disadvantaged generally are likely to be most accommodating to second-generation immigrants, but first generation migrants (and the “1.5” generation) may still face particular obstacles across the various domains, due for example to limited entitlements to social protection and to language and other socio-economic and cultural barriers to integration. This provides a clear rationale for targeted support in language acquisition and schooling, for health and social services directed towards the special needs of migrants and aimed at promoting and facilitating appropriate utilisation patterns, and for housing policies that prioritise access of recent migrants to rental or social housing.

While targeted support and policies are still relevant for some second-generation migrant youth, anti-discrimination policies may be at least as important. Recognising the pervasiveness of discrimination in the labour market is the first step towards addressing it. Many countries have implemented both stringent anti-discrimination legislation and education programmes aimed at changing attitudes, and vigorous implementation on both fronts seems essential if outcomes for migrants from particular minority groups are to be improved. Whether to go further in the direction of affirmative action is inevitably contentious, and the conditions under which affirmative action does more good than harm for ethnic minorities need careful study.

There is a significant literature on the immigration policy of developed countries focused on how many are admitted and on what basis, including in Europe at EU level, which we have not discussed here (see for example Sainsbury, 2006). As well as how welfare states are structured and treat people generally, and how extensive and effective specific policies aimed at migrants are, it seems likely that policies in relation to which migrants to accept and how illegal entrants are treated play a central role in determining the observed variation in outcomes for migrants across countries. However, one would wish

for a much clearer view of the relationship between immigration policy and how immigrants fare.

We may conclude with the major gaps in our knowledge more generally, and what is needed to make progress in learning from disparate country experiences about how best to promote the well-being of immigrant youth. Our discussion across the various domains brings out that arriving at meaningful conclusions about the circumstances and causal processes affecting first and second-generation immigrants, and youth in particular, is very demanding in terms of data. It requires first that first and second-generation migrants be identified in general samples of the population large enough to support statistical inference, distinguished by ethnic group or origin. It requires that key outcomes be measured in a reliable and comprehensive fashion. Finally, both the factors hypothesised to affect those outcomes for everyone, and the specific factors in relation to migrant experience, context and culture, need be measured. This is a tall order, and so it is not surprising that rigorous comparative studies – where all this has to be available across a number of countries, and with the variables measured in the same way – have only begun to emerge in recent years. They demonstrate both the resources and time that must be devoted to getting such comparative studies right, and the benefits of doing so: they now provide us with a template for similar studies within the various domains and across them in the future.

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