

The Mediating Role of Parent-Child Bonding to Prevent Adolescent Alcohol Abuse Among Asian American Families

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Abstract

The purpose of this paper is to describe unique culturally-based factors that may increase the vulnerability of Asian American adolescents to engage in alcohol use and abuse and the role of parent-child bonding as a protective factor. In particular, this paper addresses the interactions among acculturation, alcohol use, and parent-child bonding and the challenges Asian American families face in strengthening parent-child bonds. We begin by examining likely causes for alienation that occur as a result of immigration to the United States. We then present the cultural context of Asian American families that can also serve to create distance between parent and child, including the contrasting cultural orientations of individualism and collectivism, Asian traditional values, differences in Eastern and Western parenting styles, and intergenerational cultural dissonance. Next, we present a review of the research that has examined acculturation as a risk factor for alcohol use and abuse among Asian American adolescents, with special attention to the mediating role of parent-child bonding. Finally, we conclude with recommendations for future research on the risk and protective factors for adolescent substance abuse, as well as other risky health behaviors among the growing population of Asian Americans in the United States.

Keywords: Asian American adolescents, alcohol, parent-child bonding, culture, intergenerational cultural dissonance, immigrant families, acculturation, parenting

INTRODUCTION

Alcohol is the most widely abused substance by adolescents in the United States (Substance Abuse and Mental Health Services Administration, 2007). Hawkins, Catalano and Miller (1992) define adolescent substance abuse as the frequent use of alcohol and other drugs, or use that is related to trouble and dysfunction between the ages of 12 to 17 years old. The U.S. Centers for Disease Control and Prevention (CDC) identified excessive alcohol consumption, which includes heavy drinking, binge drinking, or both, as the third leading preventable cause of death in the nation, responsible for 75,766 deaths and 2.3 million years of potential life lost in 2001. Of these alcohol-attributable deaths, six percent involved individuals under 21 years old, the legal drinking age in all 50 states (CDC, 2004). Notwithstanding major advances in knowledge, increasingly sophisticated theories, and multi-component prevention programs, underage drinking remains a significant public health problem (Office of the Surgeon General, 2007).

Although the majority of adolescents who initiate using alcohol do not become problem drinkers, early initiation of alcohol use during adolescence powerfully predicts abuse of alcohol and illegal substances later in life (Hingson, Heeren, & Winter, 2006; Hawkins et al., 1997; Buchmann et al., 2009; DeWit et al., 2000). Adolescents who continue to engage in substance abuse into adulthood often experience or perpetrate violent crimes, child abuse and neglect, decreased quality of life, destruction of families, sexual assault, loss of work productivity, unemployment, and significant morbidity and mortality (Caetano, Schafer, & Cunradi, 2001; Abbey et al., 2001; Greenfield & Henneberg, 2001; Widom & Hiller-Sturmhofel, 2001; Rehm et al., 2003; Jones & Richmond, 2006; McCoy, Comerford, & Metsch, 2007; Webster et al., 2007).

Risk and Protective Factors for Adolescent Substance Abuse

Over the past 30 years, researchers have identified factors that promote or reduce adolescent substance abuse in their social and environmental contexts such as peer groups, families, schools, and communities (Catalano et al., 2002). Precursors to early substance use and abuse that consistently predict and increase the probability for these behaviors are called risk factors (Hawkins, Catalano, Miller, 1992; Masten et al., 2008). Protective factors, on the other hand, moderate the effects of exposure to risk (Hawkins et al., 1992). They decrease the likelihood of problem behaviors among those at risk through positive effects that directly counter the negative influences of risk factors, or by providing a buffer against the negative effects themselves (Catalano et al., 2002). Risk and protective factors tend to cluster and reinforce one another, and can be classified as interpersonal factors that include individual, family, peer groups, school, and neighborhood environments; and broad contextual factors at the societal and cultural levels (Hawkins, Catalano, & Miller, 1992). This framework (Hawkins et al., 1992) has been widely accepted and applied among various racial/ethnic groups to explain diverse adolescent behaviors (Szapocznik et al., 2007).

During early adolescence, exposure to risk factors through deviant peer associations and problem behaviors, both of which are key risk factors for alcohol use, escalates (Masten, et al., 2008). Parental monitoring, a protective factor, often declines as adolescents spend increasing amounts of time with peers (Masten et al., 2008). Parents can play a powerful role in preventing their children from engaging in antisocial activities. A literature review that investigated family risk and protective factors for adolescent behaviors found that family influence may protect against smoking, substance abuse, unprotected sexual intercourse, violence, poor school attendance and grades, and suicidal ideation and suicide attempt (Kington & O'Sullivan, 2001).

Open and honest communication, parent-child bonding, expressing high expectations and disapproval for use of alcohol and other substances, and effective parenting practices have been shown in other studies to be protective as well for healthy adolescent development (DeVore & Ginsburg, 2005; Hawkins et al., 1992; Fulkerson et al., 2008; Kingon & O'Sullivan, 2001). On the other hand, there exist several family-related risk factors that can encourage adolescent drug abuse such as family members' use of alcohol and drugs, poor and inconsistent family management practices, family conflict, and low bonding to the family (Hawkins et al., 1992).

Family/Parental Bonding & Attachment

Low bonding or attachment to the family is a family-related risk factor for adolescent substance abuse (Hawkins et al., 1992). According to the Social Development Model (SDM), bonding to prosocial others such as peers, family, and school, is regarded as a protective factor, comprised of both attachment and commitment (Catalano et al., 1998). Bonding is defined as “the attachment to others in the social unit, commitment to or investment in lines of action consistent with the socializing unit, and belief in the values of the unit” (Catalano & Hawkins, 1996, p.157). The concept behind the term, “prosocial”, used in this context indicates an individual's trust and respect for society's normative rules, which lead to his or her actions that comply with a shared understanding of the “rules of the game” (Catalano & Hawkins, 1996).

Although growing alienation between parents and children commonly occurs during adolescence, it can be pronounced among immigrant families. Asian American parents often face significant cultural challenges in raising their children in the United States. A study by Qin (2006) found that in 17 case studies of Chinese families residing in the U.S., twelve demonstrated signs of alienation characterized by growing conflict; and the lack of meaningful

interactions, exchanges, and communication about academic and personal concerns between parents and their children.

According to the U.S. Census Bureau, the population of Asians grew 43% between 2000 and 2010, greater than any other major racial/ethnic group. Nevertheless, research on the factors that influence risk for substance abuse among Asian American adolescents is limited. Generally, Asian American adolescents engage in lower drug use and abuse compared with other racial/ethnic populations (Wu, et al., 2011; Lowry, et al., 2011; Wallace et al, 2002; Shih et al., 2010). However, the use of *Asian* as a broad category for over sixty distinct groups may conceal wide variations in the degree of substance use and abuse by ethnicity, and encourage the misleading label of Asian Americans as a “model minority” (Harachi, et al., 2001; Price, et al., 2002). In fact, the few studies that have been conducted suggest that for certain Asian subgroups, use of alcohol, cigarettes, and some illicit drugs may be comparable to or even surpass rates for their racial/ethnic counterparts (Harachi, et al., 2001). For example, Price and colleagues (2002) analyzed data from four large-scale national surveys and found that among Japanese American adolescents, rates for drinking and smoking cigarettes in the past year (51.5% and 36% respectively) were close to those of White adolescents (55.5% and 39.1% respectively), and even exceeded them in a few classes of illegal substances.

Moreover, in a study by Wong, Klinge, & Price (2004), results revealed from analyses of two statewide surveys that while use among the Asian ethnic groups studied were generally lower than the comparison group of White adolescents, usage rates were not modest by any means. In California, 37% of Chinese American adolescents and 46.8% of Japanese American adolescents reported ever drinking. In Hawaii, 63.8% of Japanese American adolescents reported

having used alcohol in their lifetime, compared to 76% among Whites (Wong, Klinge, & Price, 2004).

We assert that while the cultural context unique among Asian American adolescents may multiply their vulnerability to alcohol use and abuse, parent-child bonding may be sufficiently protective to mediate this risk (Shih et al., 2010; Fang & Schinke 2011; Harachi et al., 2001; Kim, Zane, & Hong, 2002; Hahm, Lahiff, & Guterman 2003). The purpose of this paper is to describe unique culturally-based factors that may increase the vulnerability of Asian American adolescents to engage in alcohol use and abuse and the role of parent-child bonding as a protective factor. In particular, this paper addresses the interactions among acculturation, alcohol use, and parent-child bonding and the challenges Asian American families face in strengthening parent-child bonds. We begin by examining likely causes for alienation that occur as a result of immigration to the United States. We then present the cultural context of Asian American families that can also serve to create distance between parent and child, including the contrasting cultural orientations of individualism and collectivism, Asian traditional values, differences in Eastern and Western parenting styles, and intergenerational cultural dissonance. Next, we present a review of the research that has examined acculturation as a risk factor for alcohol use and abuse among Asian American adolescents, with special attention to the mediating role of parent-child bonding. Finally, we conclude with recommendations for future research on the risk and protective factors for adolescent substance abuse, as well as other risky health behaviors among the growing population of Asian Americans in the United States.

IMMIGRATION-RELATED RISK FACTORS

Immigration removes families from a familiar environment and social support network of extended family members and friends. Acculturative stress can result from the need to learn a new language, culture, as well as learning to navigate new health, education, and other social institutions (Hernandez, 2004; Qin, 2006).

Unique social, cultural and economic challenges can create discord and alienation between immigrant parents and their children, and hinder efforts to promote strong bonds (Qin, 2006). Immigration can often disrupt traditional family roles. For example, children commonly serve as language or cultural translators or brokers for adult family members. Language brokering is the practice of translating and interpreting (Morales & Hanson, 2005), which can involve a variety of activities such as translating and filling out documents and forms for schools, financial institutions, job applications, and government agencies; making appointments with medical and social service organizations; visiting hospitals and doctors; and answering telephones. Children in immigrant families are expected to provide assistance to their parents in situations that may not be developmentally appropriate (Trickett & Jones, 2007; Morales & Hanson, 2005).

Whether or not cultural brokering negatively affects family cohesion and the parent-child relationship among immigrants is unknown. Currently, there exist two perspectives on this issue at the opposite ends of the spectrum. The first perspective opposes children serving as cultural brokers, believing that this type of experience negatively affects the normal dynamics of the parent-child relationship through unhealthy role reversals as a result of the dependence parents place on their children. Other studies have demonstrated that the experiences associated with

cultural brokering can help children develop stronger bonds with their parents through their participation in family responsibilities and decision-making (Morales & Hanson, 2005).

Trickett and Jones (2007) found that both first and second generation Vietnamese adolescents reported serving as cultural brokers for their families, with the second generation adolescents to a lesser degree. Parents of the second generation adolescents had lived in the United States for a longer period of time. The authors also showed that the amount of adolescent cultural brokering was unrelated to family cohesiveness. They argue that the children understood the challenges their immigrant families faced, and viewed cultural brokering as a necessity regardless of their relationships with their parents. While cultural brokering did not adversely affect family functioning, the study revealed that it contributed to family disagreements reported by adolescents, although not by parents (Trickett & Jones, 2007).

Linguistic barriers can often become a prominent issue within immigrant families. Many children in immigrant families speak a language other than English at home, and live in linguistically isolated households (Hernandez, 2004). As immigrant children gain proficiency in English, they slowly lose their native tongue, particularly those words that describe more complicated thoughts, ideas, feelings, and emotions. While most parents and children can effectively communicate about their day-to-day experiences, the more meaningful and profound personal communication that contributes to emotional intimacy tends to diminish. When this type of communication is gradually lost in families over time, alienation may occur (Qin, 2006).

Hahm, Lahiff, Guterman (2003) revealed that the most acculturated Asian American adolescents who spoke only English at home and were born in the United States engaged in higher rates of alcohol use than the less acculturated Asian American adolescents who spoke a language other than English at home. The authors hypothesized that the use of an ethnic

language at home prevents adolescents from engaging in unhealthy and problem behaviors. One reason may be that speaking an ethnic language at home indicates parental involvement in transmitting and sharing cultural information and traditions to their children, given that language and culture are deeply intertwined (Hahm, et al., 2003).

Other possible immigration factors that can cause emotional distance within families include parent-child separation and parents' work demands outside the home. In many immigrant families, one parent might have first arrived in the United States and then sometime later, bring the rest of the family over. The resulting long separation between parent and child can lead to emotional detachment, and contribute to an estranged relationship (Qin, 2006).

Work demands on parents commonly increase after migration to the United States (Hernandez, 2004). Immigrant parents' work schedules of long hours such as in restaurants or other service jobs allow only for a negligible amount of time parents and children can spend together and share their experiences, which greatly reduce the opportunities for families to connect emotionally, a critical issue especially among working-class families (Qin, 2006).

ASIAN AMERICAN CULTURE & PARENTING

Individualism/Collectivism

Especially among immigrant families, culture is key to understanding the trajectory of adolescent development. Adolescents develop within complex cultural environments in which families socialize their children into their values, goals, and norms (Szapocznik, et al., 2007).

Although definitions of culture abound, it is widely agreed upon that culture comprises of key elements, which are shared within a given social group. These elements include "a shared language, set of norms, values, beliefs, expectations, and life experiences" (Johnson, 2007,

p.307), which are passed on from one generation to the next (Triandis, 1996). Two significant dimensions of culture that directly oppose one another, collectivism and individualism, are labeled as cultural syndromes by Triandis (1996). A cultural syndrome is an arrangement of collective attitudes, beliefs, self-definitions, norms, defined roles, and values that are clustered around a theme identified among a group within geographic boundaries that share a common language during a specified period of time (Triandis, 1996). Four main aspects that are related characterize collectivism and individualism– relationships to others, definition of self, behavior, and formation of goals (Triandis, 1995).

Relationships are central and interdependent in collectivist cultures. Collectivist cultures emphasize interpersonal relatedness, whereby individuals belong to groups (family, community, nation, etc.) as a matter of right through birth or marriage. In individualistic cultures, group membership is earned and interpersonal relatedness less valued. Self is defined through individual identity, independence, self-expression, and uniqueness (Chuang & Su, 2009). The *definition of self* in collectivist cultures is interdependent with members of groups. Collectivists prefer methods of conflict resolution such as mediation to maintain social harmony in relationships (Triandis, 1995).

Others in the group are strongly influential to members of collectivistic cultures. Shared norms among individuals in a group significantly shape *behaviors*. Alternatively, attitudes and anticipated consequences from behaviors primarily drive individualists' actions. Personal *goals* assume greater importance than the ambitions of the collective. In collectivist cultures, goals of the group take precedence over individual aims. Expectations of the group dictate moral behavior in terms of identifying a person's responsibilities, as well as the demands from families, communities and society (Triandis & Suh, 2002). If an individual deviates from such

expectations for behavior, “loss of face” or dishonor, occurs for the individual and his or her entire family (Triandis & Suh, 2002). Aspects of collectivism are shared among the majority of the world’s population. Traditional cultures and East Asian countries are largely collectivist, whereas Western societies like the United States are more individualistic (Kagitcibasi, 2005).

Asian Values

Significant cultural differences between Eastern and Western societies can create conflict within immigrant families from Asia, especially between parents and their American-born children.

In a study by Tsai-Chae and Nagata (2008), researchers found that Asian American college students perceived themselves as having lower adherence to Asian cultural values than their parents, as measured by the Asian Values Scale (AVS). The AVS developed by Kim, Atkinson, and Yang (1999) assesses individual adherence to Asian traditional cultural values. In developing this instrument, Kim et al. (1999) identified six broad categories or cultural value dimensions: *Collectivism*, *Conformity to Norms*, *Emotional Self-Control*, *Family Recognition Through Achievement*, *Filial Piety*, and *Humility*.

The value called *Collectivism* is defined as the importance of considering the group before self and the needs of others ahead of individual needs. *Conformity to Norms* refers to complying with familial and societal expectations and norms, fulfilling familial role expectations from gender and position in the hierarchy, avoiding bringing disgrace upon the family reputation, and reciprocating gifts from others. *Emotional Self-Control* means the ability to control emotions and resolve emotional issues without external assistance, understanding unspoken love and not openly expressing it. *Family Recognition Through Achievement* describes the importance of not

causing family shame or “loss of face”, and bringing family recognition through achievement both academically and professionally. *Filial Piety* is characterized by the responsibility of caring for an individual’s elderly parents and not placing them in retirement homes, as well as recognizing that elders have more wisdom. *Humility* is being humble, modest, and not boastful (Kim, et al., 2001).

In Tsai-Chae and Nagata’s study (2008), results suggest that measuring perceptions in upholding traditional cultural values are critical to include in models for explaining conflict among immigrant families. A specific cultural value, *Conforming to Family Norms*, was found to be positively related to parent-child conflict. This collectivist value clashes with the individualistic culture of the U.S., and can negatively affect daily interactions between parents and their children. Other cultural values, *Respecting Elders* or formerly known as *Filial Piety* and *Education and Career Issues* or known as *Family Recognition Through Achievement*, on the AVS scale were also found to be sources of conflict within families. *Respecting Elders* portrays obligations to respect the wisdom and authority of elders so that differing views on this value can cause discord if disagreement with parents and self-assertiveness are considered disrespectful behaviors (Tsai-Chae & Nagata, 2008).

The value *Education and Career* is highly relevant to the parent-child conflict due to the expectations that Asian American parents commonly have for their children to achieve academic and occupational accomplishments (Tsai-Chae & Nagata, 2008). Although high hopes may contribute to children’s educational achievement, they may also play a part in decreasing communication and emotional closeness between parent and child (Qin, 2006). In one of the families studied by Qin (2006), parental attention was focused substantially on the educational performance and achievement of their only son. These demands along with disagreements over

his future career choice caused conflict within the family so the child began to share less and less about his experiences at school with his parents (Qin, 2006).

Values held by immigrant parents may also begin to change as they adapt to a different society, creating greater culturally complex family environments in which their children are raised. In a research study conducted by Chuang and Su (2009), goals and values held by Chinese parents in China and Canada were concurrently examined, revealing that they did not significantly differ. Surprisingly, the Confucian value of obedience was regarded as least significant among the parents. Fathers who had lived longer in Canada were more likely to value independence in their children. Other highly regarded traits included both individualistic such as creativity and independence, and collectivistic characteristics like persistence and concentration, perhaps indicating that inculcation of global qualities along the individualism-collectivism orientation may oversimplify the values that are held among Asian families. The researchers hypothesize that perhaps through living, working, and gaining a greater understanding of the Canadian way of life, parents see these traits as necessary for their children to achieve success in a Western society (Chuang & Su, 2009).

Parenting Style – East vs. West Differences

Through *parallel dual frames of reference*, differences in Eastern and Western parenting styles can develop into a source of tension between parents and children within Asian American immigrant families. This concept builds upon the idea of *dual frame of reference* (Qin, 2006, p.163), which refers to immigrants comparing their experiences in the United States with their own experiences growing up or those of their peers in their countries of origin (Ogbu, 1987, p.328). Qin (2006) proposes that immigrant parents and their children develop different and

parallel dual frames of reference. In a case study of two Chinese families, while the parents were inclined to compare their children's behaviors with those of adolescents in their native countries or with their own experiences growing up, their children tended to compare their parents with those of their friends or parents portrayed in U.S. media whose parenting consisted of greater two-way communication, freedom, and autonomy. Findings revealed that discord, conflict, and disconnection subsequently resulted among the families studied (Qin, 2006).

Values and goals parents have for socializing their children shape parenting styles, which then influence the parenting practices that are employed, as proposed by Darling and Steinberg (1993) in their framework, *The Contextual Model of Parenting Style*. For example, the Asian cultural value of emotional self-control may hinder the ability or exercise of parenting practices to express warm feelings and love to foster parent-child bonding.

Parenting style is defined by Darling and Steinberg (1993) as "a constellation of attitudes toward the child that are communicated to the child and that, taken together, create an emotional climate in which the parent's behaviors are expressed," (p.488). Parenting styles can advance or obstruct efforts to socialize children through moderating the effectiveness of parenting practices, and encourage or inhibit the child's willingness to become socialized (Darling & Steinberg, 1993).

Baumrind (1966, 1967, 1968, & 1971) identified three main parenting styles: authoritarian, authoritative, and permissiveness. Characteristics of an authoritarian parent include efforts to influence the behavior and attitudes of the child through a set standard of conduct. Punitive measures are often used to gain compliance and obedience of the child. Obedience is highly valued and viewed as a virtue; other highly regarded values include respect for authority, hard work, and the importance of upholding order and tradition. Authoritarian parenting lacks

reciprocal communication. Parents of this parenting style believe that children should unconditionally accept the authority of adults (Baumrind, 1968).

In contrast, the authoritative parent shares with the child the reasoning behind his or her rules, guidelines and decisions, and encourages verbal give and take. Parents value the expressions and active involvement of their children in the family, as well as both autonomous self-will and obedience in their children. While children are granted independence, firm parental control is exerted when children misbehave or deviate from parents' criteria for behavior. In brief, authoritative parenting includes emotional support, high standards, two-way communication, and self-determination at appropriate levels during a child's development (Darling & Steinberg, 1993).

The third type of parenting style, permissiveness, is characterized by parental behaviors that are nondisciplinary, accepting, and affirmative toward children's impulses, desires, and actions. Decisions, rules, and guidelines for the family are not only explained, but also consulted with the children. Permissive parenting makes few demands on children to assume household responsibilities and chores, or perform obedient and disciplined behaviors. Rather than behaving as an authority figure responsible for influencing a child's ongoing and future actions, a permissive parent acts only as an available resource. The parent avoids the exercise of control, and his or her child is not required to respect familial and societal standards and expectations for behavior and conduct. Permissive parenting attempts to use reason and not authority to accomplish compliance and obedience (Darling & Steinberg, 1993).

Researchers are increasingly directing their attention to parenting styles and practices beyond samples of White, predominantly middle-class families to various racial/ethnic minority and immigrant families. Historically, East Asian parenting styles are predominantly authoritarian

(Chuang & Su, 2009). In a recent study, Chuang and Su (2009) conducted a cross-national comparison of parenting styles between samples of Chinese parents residing in Canada, and Chinese parents in China. Findings from this study revealed that parents from China rated their parenting behaviors as more authoritarian and Chinese Canadian parents were more likely to endorse authoritative behaviors, demonstrating that family socialization processes such as acculturation to Western societies become more complex as families immigrate to other countries (Chuang & Su, 2009).

In another research study, Chinese parents scored significantly higher than European Americans on measures for parental control and authoritarian parenting style, but not for authoritative parenting style (Chao, 1994). Chinese mothers also scored significantly higher on a scale composed of only Chinese child-rearing principles including the concept of *chiao shun* or training. For the European American mothers in this study, the term *training* carried a negative connotation that was associated with concepts that were militaristic, whereas for the Chinese mothers - this word was interpreted positively (Chao, 1994).

Chiao shun or training is therefore distinctive concept separate from Baumrind's classification of parenting styles (1971), indicating that it developed from the socio-cultural milieu unique to the Chinese culture. *Chiao shun* is a Chinese term and represents the idea that parents train children to behave appropriately, and act according to the expectations and standards of conduct through teaching and education. This responsibility falls on the parent as defined by specific role requirements that have evolved from Confucian principles. These principles require that children must demonstrate loyalty and respect to their elders. Also, elders must instruct children through examples of proper behaviors, and inhibit exposure and access to inappropriate ones (Chao, 1994).

Dissonant Acculturation & Intergenerational Conflict

Acculturation gaps develop over time between parents and children of immigrant families as a consequence of dissonant acculturation, which is defined by Portes (1997) as a pattern of varying rates of assimilation to mainstream U.S. society. After migration, children often learn English and absorb mainstream culture at a faster rate than their parents, resulting in an acculturation gap at home (Portes, 1997). This gap itself can lead to growing parent-child separation through intergenerational conflict or intergenerational cultural dissonance (Birman, 2006; Choi, He, & Harachi, 2008).

Intergenerational cultural dissonance (ICD) is the clash between parents and children over cultural values, which commonly occurs among immigrant families due to the faster rates of assimilation by adolescents, or the adoption of values and behaviors of the new culture (Choi, et al., 2008; Berry, 2005). ICD can intensify the problems resulting from the generation gap that is normally present during adolescence (Choi, et al., 2008). Tsai-Chae and Nagata (2008) found that among Asian American college students, an acculturation gap in values, or the perception that parents more strongly adhered to traditional cultural values, predicted conflict. Moreover, the wider the values acculturation gap, the higher the perceived conflict with one's parents (Tsai-Chae & Nagata, 2008).

Similarly, through the development and validation of a new measure of conflict specifically for Asian American families in a study by Lee, et al. (2000), researchers revealed that highly acculturated Asian American children who perceived their parents to be less acculturated reported greater discord than children who perceived their parents to be correspondingly acculturated. The measure, the Asian American Family Conflict Scale (FCS), assesses conflict from disagreements in values and practices in a variety of family situations due

to generational differences, as well as from discrepancies in acculturation between parents and their late adolescent and young adult children (Lee, et al., 2000).

Unfortunately, the presence of an acculturation gap between parents and their children can serve as a risk factor for adolescent delinquency by intensifying alienation and conflict. Choi and colleagues (2008) conducted research whose results revealed that among the Asian American adolescents surveyed, if they perceived differences in cultural values with their parents, they reported higher rates of quarreling. The stronger the degree of conflict in turn led to weaker perceptions of parent-child bonding and greater engagement in problem behaviors. ICD therefore indirectly encouraged antisocial behaviors including carrying a weapon to school, initiating a fight, and shoplifting through heightening parent-child conflict (Choi, et al., 2008).

ACCULTURATION & ASIAN ADOLESCENT ALCOHOL USE AND ABUSE

Acculturation

Researchers are increasingly examining acculturation and its relationship with adolescent outcomes as a risk factor, including the use and abuse of substances due to the rapidly growing diversity of the U.S. population (Yu et al., 2003; Blake, et al., 2001; Chen, Unger, Johnson, 1999; Georgiades, et al., 2006; Gfroerer & Tan, 2003; Le, Goebert, Wallen, 2009; Unger, et al., 2000). Recent immigrants make up significant proportions of racial/ethnic minority groups so that grasping the complexities of acculturation has become a foremost concern (Smokowski, David-Ferdon, & Bacallao, 2009).

Acculturation itself can add risk for adolescents to engage in antisocial activities. As immigration may remove or lessen the protective effect of parent-child bonding against adolescent substance abuse and other problem behaviors, adolescents of immigrant families

themselves undergo significant internal changes as a result of acculturation during an otherwise critical and transitional period of time in life. They are struggling to establish their own identity and autonomy (Steinberg & Morris, 2001). Along with the normative social, emotional and physical development-related stressors that occur during adolescence, further strain can result from navigating, adapting and adjusting to a new culture (Smokowski et al., 2009).

Acculturation & Asian American Alcohol Use and Abuse

Acculturation has shown to be positively related to adolescent problem behaviors, including substance abuse, among Hispanic immigrant adolescents (Saint-Jean, Martinez, & Crandall, 2008; Szapocznik, et al., 2007). Similarly, this relationship has also been found among Asian adolescents of immigrant families.

Cook and colleagues (2009) found that acculturation was positively associated with the total number of drinks during the past month. Findings revealed that Korean American adolescents who associated with non-Korean peers were more likely to consume alcohol with a greater quantity of drinks than those who socialize with Korean American peers ($\beta = 3.29$, $p < .05$). (Cook et al., 2009)

In a second study by Hahm, Lahiff, and Guterman (2004), higher acculturation was discovered to significantly increase the likelihood of binge drinking among Asian American adolescents ($OR = 1.34$, $p < 0.05$). However, when use of substances, alcohol and tobacco, by best friends was added to the model, the significant association between acculturation and binge drinking was no longer noteworthy. Therefore, close friends' substance use mediated the relationship between acculturation and binge drinking. The researchers additionally observed no gender differences among the adolescents in their engagement in binge drinking. The authors

hypothesize that this may be due to the acculturation effects of weakening traditional cultural gender norms around alcohol use (Hahm, et al., 2004).

Hendershot and colleagues (2005) found that the level of acculturation was significantly related to alcohol use in the past 30 days, with each unit increase in level of acculturation associated with a greater likelihood of using alcohol in the past month among Asian American college students (OR=1.70, $p<0.017$). Additionally, a one-unit increase in level of acculturation was related to an approximately two times greater likelihood of heavy episodic alcohol use (OR=1.94, $p<0.017$), defined as consuming four or more drinks for women and five or more drinks for men on one occasion in the past two weeks. Higher levels of acculturation were then significantly related to a greater likelihood of current and heavy episodic use (Hendershot et al., 2005).

Lastly, Thai, Connell, and Tebes (2010) conducted research that revealed that the more acculturated adolescents had a 17% higher likelihood of drinking (OR=1.17, $p<0.01$). Acculturation was demonstrated to no longer predict drinking, however, after peer substance use and academic achievement were included in the model. Results from the study suggest that a significant factor, peer substance use, partially mediated the effects of acculturation on use of difference substances such as cigarettes, marijuana, and lifetime use of alcohol. Compared to the other racial/ethnic groups studied – Whites, Hispanic, African Americans, and others – acculturation was a more relevant factor in alcohol use among Asian American adolescents (Thai, et al., 2010).

Mediating Role of Parent-Child Bonding

In a research study by Hahm, Lahiff, and Guterman (2003), the level of acculturation to mainstream U.S. society among Asian American adolescents was examined to determine if acculturation predicted behaviors related to alcohol use. The study further assessed whether or not highly acculturated Asian American adolescents with strong parental attachments drink less than highly acculturated Asian American adolescents with weak parental attachments. Using data from the National Longitudinal Study of Adolescent Health, a stratified nationally representative sample of all public and private high schools in the U.S. were collected with a total of 714 Asian American adolescents included in the sample size for the study's analyses (Hahm, et al., 2003).

The study found that the most acculturated Asian American adolescents had the highest risk of using alcohol in both Waves I and II, and in fact, were three times more likely to have been involved in alcohol use compared with the least acculturated group ($OR=3.17$, $p<0.01$). When parental attachment was reported to be at its lowest level, the odds of alcohol use were 11.27 times greater in the most acculturated than the least acculturated group ($p<0.001$). For adolescents with high levels of perceived parental attachment, no evidence was found that the most and the least acculturated adolescents were different in their risk for alcohol use.

Acculturation therefore was not a risk factor for alcohol use among Asian American adolescents unless they perceived low attachment to their parents. Furthermore, parental attachment was only significant for Group 1, or the most acculturated, and shown to serve as a protective factor, but showed no interaction effects for the rest of the groups. For every one unit increase in parental attachment among Asian American adolescents in Group 1, the odds for drinking decreased by a factor of 0.85 ($p<0.01$) (Hahm, et al., 2003).

RECOMMENDATIONS FOR FUTURE RESEARCH

We propose several recommendations for future research on substance abuse among Asian American adolescents. First, more studies are needed to obtain critical information on the prevalence and incidence of alcohol and other drug use and abuse among this often neglected racial/ethnic minority group. A greater understanding is required to determine the scope of this public health problem, and its developmental timing that directs to when initiation and escalation occur.

These studies should disaggregate the broader category of Asians to include various ethnic groups to reveal those that are at greatest risk. For example, the challenges that immigrants face, arriving primarily from countries in East Asia and the Philippines, may be different from those encountered as refugees from Vietnam, Cambodia and Laos (Ying & Han, 2007). While these two groups are often lumped together in the same category, refugees are forced from their homelands. Most first sought asylum in neighboring countries, and arrived indirectly to the United States. Many fled with no prior planning, few belongings, and suffered horrible atrocities such as persecution, deprivation, and abuse (Segal & Mayadas, 2005). Mental health problems such as depression and greater use of substances to self-medicate may occur as a result of traumatic events that occurred in the past, which in turn can lead to child maltreatment and neglect (Chang, Rhee, & Berthold, 2008).

Thirdly, acculturation scales should unfailingly be included in research with Asian Americans, and move beyond the commonly used measures of language use and number of years of living in the U.S. to more effectively assess the complexities of acculturation effects on adolescent substance abuse (Tsai-Chae & Nagata, 2008; Abe-Kim, Okazaki, & Goto, 2001).

Findings about acculturation can identify points to target in the development or cultural adaptations of comprehensive programs, possibly leading to greater effectiveness.

Research is needed to on family-related risk and protective factors for substance abuse among Asian American adolescents, or on the validity of applying risk and protective factors identified for the majority U.S. population to this group. Other family-related protective factors besides parent-child bonding may prove critically important such as parental monitoring and other parenting practices that are effective for other populations. Lastly, an exploration of the socio-cultural context of these risk and protective factors including those discussed in this paper is essential to develop or culturally adapt family-based preventive interventions for healthy adolescent development among Asian American families.

CONCLUSION

Unfortunately, Asian Americans are underrepresented in research. This review demonstrates the significance of examining the cultural context of risk and protective factors on adolescent substance abuse, which can lead to the development or cultural adaptations of interventions that incorporate a thorough understanding of these relevant precursors. At a minimum, family-based prevention programs for Asian American adolescents should account for acculturation effects and involve culture-specific strategies such as reducing intergenerational cultural dissonance between parents and their children to strengthen families.

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