

HHS Public Access

Author manuscript *J Health Soc Behav.* Author manuscript; available in PMC 2016 March 01.

Published in final edited form as:

J Health Soc Behav. 2015 March ; 56(1): 2-18. doi:10.1177/0022146514567896.

Behavioral Functioning among Mexican-Origin Children: Does Parental Legal Status Matter?*

Nancy S. Landale^a, Jessica Halliday Hardie^b, R. S. Oropesa^a, and Marianne M. Hillemeier^a ^aThe Pennsylvania State University

^bHunter College, City University of New York

Abstract

Using data on 2,535 children included in the Los Angeles Family and Neighborhood Survey, we investigate how the legal status of immigrant parents shapes their children's behavioral functioning. Variation in internalizing and externalizing problems among Mexican youth with undocumented mothers, documented or naturalized citizen mothers, and U.S.-born mothers is analyzed using a comparative framework that contrasts their experience with that of other ethnoracial groups. Our findings reinforce the importance of differentiating children of immigrants by parental legal status in studying health and well-being. Children of undocumented Mexican migrants have significantly higher risks of internalizing and externalizing behavior problems than their counterparts with documented or naturalized citizen mothers. Regression results are inconsistent with simple explanations that emphasize group differences in socioeconomic status, maternal mental health, or family routines.

Previous research on ethnoracial diversity in mental health outcomes in the United States has shown that Mexican-origin adults, especially immigrants, have a lower risk of depression than do non-Latino Whites (Delgado et al. 2006; Marin, Escobar and Vega 2006). In contrast, Mexican-origin children have relatively high risks of anxiety, mood disorders, and behavior problems compared to their non-Latino White peers (Canino and Alegría 2009; Flores 2013). These divergent patterns are often explained in terms of intergenerational shifts in the balance of risk and protective factors. Adult immigrants typically are more insulated from possible negative consequences of socioeconomic and environmental risk factors by their strong ethnic identities, collectivist and familistic values, and continued use of Mexico as a point of comparison for assessing their lives. Their offspring experience the erosion of protective cultural factors and greater awareness of barriers to full inclusion in American society (Flores 2013).

At the same time, there is evidence of variation in mental health among Mexican-origin youth by parental nativity, with children of immigrants exhibiting better outcomes than children with U.S.-born parents (Gonzales et al. 2008; Gonzales, Fabrett and Knight 2009; Flores 2013). However, prior research has not systematically considered the legal status of immigrant parents as a potential source of heterogeneity among the former group. Given the

^{*}Address correspondence to: Nancy S. Landale, The Pennsylvania State University, Department of Sociology, 211 Oswald Tower, University Park, PA, 16802 (nsl3@psu.edu).

high prevalence of unauthorized migrants among foreign-born Mexicans (Passel and Cohn 2011), parental legal status may be a critical element of children's lives that affects their immediate and long-term well-being. Thus, scholars increasingly recognize immigration status as a central but understudied dimension of stratification in the United States (Glick 2010; Massey and Bartley 2005; Viruell-Fuentes, Miranda and Abdulrahim 2012).

We extend the literature on children's mental health by considering this important dimension of stratification as a factor in children's internalizing and externalizing behavior problems. Although our primary interest is in the roles of parental nativity and legal status among Mexican-origin youth, we place their experience in comparative perspective by considering their outcomes in comparison with those of non-Latino White, non-Latino Black, non-Latino Asian, and other Latino children.¹

Several issues guide our analysis. First, we provide new evidence on differences in children's behavioral functioning by parental legal status. Because legal status is intertwined with both ethnicity and nativity, groups defined by these three characteristics considered jointly are compared. The second issue is whether group differences in behavior problems can be explained by socio-demographic risk factors that vary with ethnicity and immigration status. The implications of the severe disadvantages that undocumented migrants face are largely unknown due to the absence of direct measures of legal status in most representative surveys. Third, we assess the roles of several key family and neighborhood attributes in the relationship between parental legal status and children's behavioral functioning, net of socio-demographic risk factors. These issues are addressed with data from the Los Angeles Family and Neighborhood Survey (LA FANS), one of the few representative surveys with measures of legal status.

BACKGROUND

The steady growth of the foreign-born population in the United States has stimulated widespread interest in immigrants and their children. The Census Bureau estimates that in 2012, there were 40.8 million immigrants—or roughly 13 out of every 100 U.S. residents. Immigration has shaped the child population even more dramatically. Currently, 25% of U.S. children have at least one foreign-born parent and most of those children (88%) are native-born citizens (Nwosu, Batalova, and Auclair 2014). Among both immigrants and their offspring, Mexicans are of great importance because they are the largest single national-origin group. In 2012, fully 41% of the children of immigrants were of Mexican origin (Child Trends 2013).

Immigration scholars have rapidly expanded knowledge about distinct migration streams, the characteristics of migrants relative to both their origin populations and diverse U.S. subgroups, and the challenges of incorporation that unfold over time. However, less progress has been made in understanding the critical role of legal status in shaping outcomes. This is not due to a lack of interest. The potential impact of undocumented status on both children

¹For ease of presentation, we refer to non-Latino Whites, non-Latino Blacks, and non-Latino Asians as Whites, Blacks, and Asians in the remainder of this article. Along with Mexican and other Latino youth, these groups are referred to collectively as "ethnic" or "ethnoracial" groups. At times, we use the term "immigration status" to refer to distinctions based on both nativity and legal status.

J Health Soc Behav. Author manuscript; available in PMC 2016 March 01.

and their parents is at the forefront of the national debate on immigration (Menjívar and Kanstroom 2013; Motomura 2014). Rather, progress has been impeded by the lack of information on the legal status of immigrants in the vast majority of large-scale surveys. Legal status is an unmeasured source of heterogeneity in most empirical studies of immigrants and their children, and this could lead to inaccurate conclusions about the role of nativity. As Massey and Bartley (2005: 481) note, "Given the very different prospects for social, economic, and political incorporation experienced by naturalized citizens, legal resident aliens, legal nonimmigrants, and undocumented migrants, in combination with the marked shifts in the distribution of immigrants among these categories, to be truly valid studies of immigrant adaptation and incorporation must control directly for legal status." This is particularly the case for immigrants from Mexico since approximately half of Mexican immigrants are undocumented and Mexican-origin children comprise 70% of children with unauthorized immigrant parents in the United States (Gonzalez-Barrera and Lopez 2013; Passel and Cohn 2011).

Parental Legal Status and Behavioral Functioning

Much of what is known about the challenges faced by undocumented migrants and their children comes from ethnographic studies. These studies provide rich description, but are limited with respect to sample size and representativeness (e.g., Abrego and Menjívar 2011; Dreby 2010; Menjívar and Abrego 2009; Zavella 2011). Other studies are based on proxy measures rather than direct measures of documentation status (Yoshikawa 2011). Despite these drawbacks, this research reveals common difficulties among undocumented migrants, including limited resources, exploitation by employers, living with the threat of deportation, marginalization, and adjustment to a new culture (Yoshikawa and Kholoptseva 2013). Such circumstances may foster high levels of stress among undocumented migrants and their children, leading to heightened vulnerability to physical and mental health problems.

An alternative view is that the well-known immigrant health advantage characterizes undocumented as well as documented immigrant parents (Cunningham, Ruben and Narayan 2008). Positive selection on mental health could be even stronger for undocumented migrants, given that they have overcome very high barriers to settle in the United States. If positive selection is present and sufficiently strong to override the unique disadvantages associated with undocumented status, children with undocumented parents might have similar or even better physical and mental health than children with documented parents. However, the likelihood of observing this pattern seems low at the outset given the disadvantaged profile, limited opportunities, and residential contexts of undocumented migrants. Immigrants with few resources, dark skin, or legal status barriers have elevated risks of poor outcomes, especially if they live in disadvantaged areas with limited receptivity to immigrants (Portes and Rumbaut 2001).

In addition to the external stressors shared by parents and children alike, having an unauthorized parent may present other difficulties for children. Family routines and positive parenting practices that promote children's development may be disrupted if the challenges mentioned above lead to high levels of psychological distress among undocumented parents. Thus, the structural position of undocumented migrant parents, in combination with parental

psychological well-being and family practices, may greatly influence children's development.

Children's behavioral functioning is generally regarded as a significant developmental outcome that has implications for adjustment later in life. Behavioral functioning typically is partitioned into internalizing and externalizing problems (Gutmannova et al. 2008). Internalizing problems involve expressions of anxiety, depression, and low self-worth, as well as social withdrawal, excessive need for attention, and dependency (Cicchetti and Toth 1991). Such behaviors in childhood are linked to later adverse outcomes, such as major depression during adolescence, poor school performance, high school dropout, and illegal substance use (King, Iacono, and McGue 2004; McLeod and Kaiser 2004). Externalizing behavior problems include rule breaking and displays of irritability and aggression. These problems are precursors of illegal substance abuse, antisocial outcomes, poor school achievement, and high school dropout (Hinshaw 1992; King et al. 2004; McLeod and Kaiser 2004; Moffitt 1993).

Although some evidence suggests that Mexican-origin youth have higher levels of distress and behavior problems than their White counterparts (Canino and Alegría 2009; Flores 2013), less is known about differences by parental nativity and legal status. One analysis of parental concerns about their children's development based on the California Health Interview Survey found that Mexican children with undocumented parents have higher levels of developmental risk than both Mexican and White children with citizen parents (Ortega et al. 2009). Yet, the subjective measure of parental concerns used in the study did not identify the specific behaviors or domains of functioning that were cause for concern. Another small-scale study of 281 Latino immigrant youth in a new destination state found that undocumented adolescents had a higher risk of anxiety than documented adolescents (Potochnick and Perreira 2010). Unfortunately, differences among all Latino adolescents by parental nativity and documentation status could not be examined because the sample was limited to foreign-born youth. Reflecting the general state of the literature, the Handbook of U.S. Latino Psychology (Villarruel et al. 2009) includes no systematic discussion or empirical analysis of the role of parental legal status in children's mental health outcomes, despite its otherwise comprehensive treatment of conceptual and empirical issues.

Family Socioeconomic Status and Family Routines

If parental legal status plays a role in children's behavioral functioning, it does so in tandem with other risk and protective factors. Children are exposed to multiple environments, including their families, schools, and neighborhoods, but the family is often viewed as the principal and most immediate social context for children's development. Because children are dependents, many sources of risk and resilience stem directly and indirectly from their families.

A voluminous literature has established that children's well-being is strongly associated with indicators of their family's structural position within the larger society (for reviews, see Bradley and Corwyn 2002; Conger, Conger and Martin 2010). However, some scholars argue that families with similar socioeconomic characteristics may utilize their resources in distinct ways in their everyday lives to mitigate risks (Christiansen 2004). This ecocultural

approach (Weisner 2002) emphasizes families' daily routines as distinct from their socioeconomic resources and argues that the former are critical to children's development. In line with this approach, Fuller and García Coll (2010) identify culturally-bounded family practices that may influence child development, such as having a steady dinner hour, consistently reading to a child, and regular church attendance. Parental socialization goals, which may differ by race-ethnicity or nativity, are enacted through such family routines. Values supporting the centrality of the family, for example, are reinforced by children's consistent participation in family meals (Fuller and García Coll 2010). An implication of this perspective is that the disruption of family routines and disorder within the home may be problematic for children's functioning.

In general, prior studies indicate that immigrant families often operate in ways that protect children's well-being (Flores 2013; Van Hook, Landale and Hillemeier 2013). The primary explanation of the health advantages of Mexican immigrants and their children is that immigrants are resilient in the face of vulnerabilities associated with poverty and low education because they retain healthy aspects of their origin-country lifestyles. These include health-promoting daily routines and strong family ties. Still, these protections may fade with acculturation and exposure to the United States. An alternative perspective suggests that immigration adds to the risks that are associated with socioeconomic disadvantage. It entails adjusting to unfamiliar communities and establishing new household living arrangements, which may be complex, transient, and less than ideal. Chaotic home environments may result from unstable household composition, irregular parental work schedules, and low supervision and monitoring (Brooks-Gunn, Johnson and Leventhal 2010; Evans and Wachs 2010). Such disruptions of established routines and parental roles may be particularly common for children when their immigrant parents are undocumented.

The literature is largely silent on whether the protective effects of origin cultures operate similarly for children of undocumented and documented migrants. It is clear that the former group faces a unique set of social and economic disadvantages that may influence their behavioral functioning, but the extent to which these risk factors overshadow protective family practices has not been investigated with representative survey data.

Parental Stress and Depression

Some scholars argue that the immigrant experience includes considerable acculturative stress emanating from the dual challenges of dealing with separation from the origin country and adapting to life in a new destination (Berry 2003; Flores 2013; Schwartz et al. 2010). Although this characterization has considerable face validity, it is inconsistent with studies that find lower levels of distress among immigrants who arrived as adults compared to their U.S.-born counterparts and immigrants who arrived as children (Breslau et al. 2009). Still, acculturative stress might be higher for undocumented migrants than for documented migrants.

Sullivan and Rebm (2005) conclude that undocumented Mexican immigrants have a unique risk profile. The psychological burden of immigration is amplified by dangerous border crossings, isolation from family members in Mexico due to the danger of cross-border travel, helplessness in the face of exploitation, marginalization, and high levels of stress.

Although there is little empirical research comparing the psychological well-being of undocumented and documented Mexican immigrants, Yoshikawa and Kholoptseva (2013) argue that parental psychological stress and economic hardship are risk factors for children with unauthorized parents. Flores (2013) draws a similar conclusion about the risks to all children of immigrants when their parents experience acculturative difficulties, chronic economic problems, trauma, or abuse of alcohol or drugs. To the extent that undocumented migrants are more likely to face such problems than documented migrants, her argument implies that undocumented parents are especially likely to have high levels of distress. Moreover, access to ameliorative mental health care is limited for undocumented migrants, who are less likely to be insured and to use health services than documented immigrants (Ortega et al. 2007). Lastly, Suarez-Orozco and her colleagues (2011) note that stressed and depressed parents have compromised parenting abilities, which may contribute to behavior problems among their children.

Neighborhood Social Closure and Control

The neighborhood environment may be an additional source of risk or protection. Neighborhood structural characteristics and social organization have received particular attention. Sampson, Morenoff and Earls (1999) argue that collective efficacy, or the activation of social ties to attain some intended result, is a major dimension of neighborhoods that influences children. Positive child outcomes may be enhanced by intergenerational closure (ties between the adults and children in a neighborhood) and informal social control (the active involvement of adults in a neighborhood to protect children). These aspects of collective efficacy may vary by parental legal status. In particular, undocumented migrants live in neighborhoods with relatively few social and material advantages where the cost of living and the perceived chances of detection are low (Hall and Greenman 2013).

Current Study

This research addresses the understudied issue of how parental legal status affects Mexicanorigin children's behavioral functioning. This topic is important because Mexican-origin children are an increasingly large segment of the child population, a large share of this group has immigrant parents, and Mexican youth comprise seven out of every ten children with unauthorized immigrant parents in the United States (Passel and Cohn 2011). Prior studies conclude that Mexican children with immigrant parents exhibit lower rates of mental health problems than Mexican children with U.S.-born parents (Flores 2013), but this conclusion may be biased by unmeasured heterogeneity among the former group vis-à-vis parental legal status. Using one of the few representative data sources that ask direct questions on the legal status of immigrants, we examine whether and how children's behavioral functioning varies by ethnicity, nativity, and legal status. In so doing, we evaluate several potential explanations for the observed associations.

DATA AND METHODS

Our analysis is based on the first wave of the Los Angeles Family and Neighborhood Survey (LA FANS). Conducted in 2000–2002, this survey was administered to families living in

Los Angeles County. LA FANS employed a stratified random sample of 65 neighborhoods (identified via census tract), with 50 households within each neighborhood evenly distributed across blocks. Houses, apartments, mobile homes, and converted garages were eligible for inclusion as a household. Poor neighborhoods and households with children were oversampled. Within each selected household, one adult was sampled at random to answer an adult survey and one child was sampled at random if children were present. To report on sampled children, a primary caregiver (almost always the mother) was selected to answer the primary caregiver and parent modules. These individuals also completed the adult survey if they had not already done so as the randomly selected adult in the household. In addition, one sibling of the focal child was randomly selected for inclusion among those in the household who were under age 18 and had the same mother and primary caregiver. All survey components were available in both English and Spanish.

A total of 2,308 households included children, with 3,687 children selected for inclusion as focal children (N=2,308) or siblings (N=1,379) (Peterson et al. 2004). Our analytic sample is limited to focal children and siblings who were matched to a primary caretaker who completed an adult questionnaire, a parent questionnaire, and a primary caregiver questionnaire (N=3,122). We excluded those missing on the sample stratification indicator (N=66), those under the age of 3 (N=514), and children of undocumented White and Asian parents (N=7). We deleted this final group because they are too few in number to analyze separately and too distinct to combine meaningfully with other categories. The final sample includes 2,535 focal children and siblings.

Proc MI in SAS was used to impute missing data. Twenty-five imputed datasets were created to take the uncertainty of imputed values into account (see Rubin 1987). Results were generated for each imputed dataset with the appropriate adjustments for the complex sample design and then combined to arrive at the correct parameter estimates and standard errors.

Measures

Behavioral functioning—Children's behavioral functioning was measured with the internalizing and externalizing subscales of the Behavior Problems Index, which are widely used measures developed from the seminal work of Parcel and Menaghan (1988). The questions that form the basis for these measures ask parents whether specific behaviors are often, sometimes, or never true of their child. The *internalizing subscale* reflects responses to 11 questions (alpha=.73) indicating sad or withdrawn behavior on the part of the child, such as "has been too fearful or anxious", "has felt worthless or inferior", and "has cried too much." The *externalizing subscale* indicates problems such as aggressiveness that are directed outward toward others. It is measured using 17 questions (alpha=.87), including whether the child "has argued too much", "has been impulsive or acted without thinking", and "has demanded a lot of attention." To compute the internalizing and externalizing behavior scales, the LA FANS reversed coded the component items so that higher scores reflect more behavior problems (i.e., 2=often true; 1=sometimes true; 0=not true). For each subscale, responses were summed so that higher numbers indicate more behavior problems

(Peterson et al. 2004). The internalizing behavior problems scale ranges from 0 to 22 and the externalizing behavior problems scale ranges from 0 to $33.^2$

Race-ethnicity, nativity, and legal status—The primary independent variable is constructed from information on parental nativity and documentation status. Parental status is emphasized because 90% of the offspring of immigrants in our sample were either born in the United States or arrived before age 13 (the 1.5 generation, often considered part of the 2nd generation). Given the small number of immigrant youth who arrived as teenagers, we do not separately control for the youth's nativity or documentation status.

All foreign-born adult sample members were asked a series of questions that can be used to determine their legal status at the time of the survey. The first was whether they were naturalized citizens. Those who were not citizens were then asked whether they had a "green card" or legal permanent residence. Immigrants who were not citizens and did not have a green card were next asked whether they had refugee, asylee, or temporary protected status. Finally, those who did not have one of these statuses were asked if they had a valid visa for temporary residence. These questions were used to identify those who were authorized (naturalized citizen or documented) and those who were not authorized (undocumented) to live in the United States. Immigrants who were not naturalized, not permanent residents, not refugees/asylees and not in possession of a valid visa were coded as undocumented. Bachmeier, Van Hook and Bean (2014) demonstrate that respondents to the LA FANS were willing to answer these questions and the profile of undocumented immigrants resulting from these procedures is consistent with profiles produced from other sources.

The design of the survey ensured that all primary caregivers (i.e., mothers) completed the adult interview. However, when the sampled adult was the mother, no adult interview is available for resident fathers. Thus, we measure ethnicity/immigration status jointly with a categorical variable indicating whether the mother was one of 12 categories: (a) Mexican undocumented migrant, (b) Mexican naturalized or documented immigrant, (c) Mexican U.S. born, (d) other Latino undocumented, (e) other Latino naturalized or documented, (f) other Latino U.S. born, (g) White naturalized or documented, (h) White U.S. born, (i) Black naturalized or documented, (j) Black U.S. born, (k) Asian naturalized or documented, and (l) Asian U.S. born. After excluding two undocumented White immigrants and five undocumented Asian immigrants, all undocumented parents in our analytic sample are Mexican or other Latino. Additional measures. Other demographic, family, and neighborhood characteristics are included as explanatory or control variables. Sex (1=female, 0=male) and age (ranging from 3 to 17) are demographic control variables. Socioeconomic circumstances and family structure are measured with *maternal education*, poverty, and single parenthood. Maternal education is coded '1' if the mother did not complete high school and '0' if she completed high school or more. Family poverty is measured using the federal poverty thresholds for 2001.

 $^{^{2}}$ We also examined the internal consistency of the Internalizing and Externalizing Behavior Problems Indexes within each of the ethnoracial groups in our data. The Cronbach's alpha values suggest a high degree of internal consistency within each group.

J Health Soc Behav. Author manuscript; available in PMC 2016 March 01.

Maternal depression is a dichotomous variable that was constructed from scores on the Composite International Diagnostic Interview Short-Form (CIDI-SF) depression inventory. The CIDI-SF yields a score that ranges from 0.0 to 1.0 and represents the probability that a respondent would meet the criteria for major depression if they were given the full CIDI interview. Respondents are coded as depressed (1) if their probability of depression was greater than .5, and not depressed (0) otherwise.³

A measure of *family routines* was constructed using questions about the number of days per week (from 0 to 7) that four activities occurred at a regular time: children's breakfast, family dinner, household chores, and children's bedtime. Scores on these variables were summed to create a scale that ranges from 0 to 28.

Lastly, we created an index of the mother's perceptions of the neighborhood. Two dimensions of collective efficacy that are specific to children form the basis of our measure of child-centered closure and social control. Following Sampson, Morenoff, and Earls (1999), *intergenerational closure* is ascertained by the mother's level of agreement with statements about whether: (a) there are adults in the neighborhood that children can look up to, (b) adults watch out to be sure that children are safe, (c) parents in the neighborhood know their children's friends, (d) neighborhood adults know the local kids, and (e) parents in the neighborhood know each other. *Child-centered social control* is based on agreement with statements about whether: (a) neighbors would do something if children were skipping school and hanging out on a street corner, (b) neighbors would scold a child who was showing disrespect to an adult. Each question was answered on a scale that ranged from 1 to 5, and responses to all of these questions were summed to create an index that ranges from 1 to 40.

Analysis

We use ordinary least squares regression to estimate the relationships between parental legal status and children's internalizing and externalizing behavior. A series of four models is estimated for each dependent variable. Using Mexican children with undocumented mothers as the reference group, we first examine the association between group membership and internalizing behavior problems, controlling only for child sex and age. Subsequent models sequentially add: (a) family background measures, including maternal education, poverty, and family structure; (b) maternal depression; and (c) family routines and child-centered closure/social control. These models allow us to assess whether family and neighborhood processes alluded to in the literature explain the relationship between parental legal status and children's internalizing behavior. This sequence of four models is repeated for externalizing behavior. All analyses are weighted using the child sample weight. Standard errors are adjusted for the complex sample design and for the clustering of children within households.

³There are eight values for the probability of major depression: 0, 0.0001, 0.0568, 0.2352, 0.5542, 0.8125, 0.8895, and 0.9083. We tested the sensitivity of our results to the cut-point used in the LA FANS (.5) by re-running all analyses using a more stringent cut-point of .8. The results did not differ substantively from those presented here. Although some scholars prefer to measure depression using a continuous scale, the distribution of the eight-value probability measure is highly skewed. Moreover, 82% of cases have a value of 0). We therefore elected not to run models using a continuous measure of depression.

J Health Soc Behav. Author manuscript; available in PMC 2016 March 01.

FINDINGS

Descriptive Statistics

Table 1 provides descriptive statistics for all variables by ethnoracial group. Significant differences are identified at p<.05 for contrasts between each group and both Mexicans (^a) and Whites (^b). The mean scores for internalizing behavior problems suggest a distinction between Mexican and non-Latino children. Specifically, Mexican children (3.6) have higher scores than White (2.2), Black (2.6), and Asian (2.2) children. Moreover, the differences among the non-Latino groups are not significant. In contrast, Mexican, White, and Black children are similar on externalizing behavior problems with scores between 6.5 and 7.0. The only significant differences for this dimension are between Mexicans (6.9) and other Latino (6.0) and Asian (5.1) youth.

These results show considerable variation in potential explanatory factors across ethnoracial groups. A salient difference is in the distribution of mother's immigration status. Among the Mexican-origin children, about 27% had an undocumented mother, 49% had a naturalized citizen or documented immigrant mother, and 24% had a U.S.-born mother. Among other Latino youth, the comparable figures are 16% undocumented, 64% naturalized citizen or documented immigrant, and 21% U.S. born. The vast majority of White (82%) and Black (91%) children had U.S.-born mothers. Mothers of Asian children were primarily naturalized citizens or documented immigrants (77%).

Another striking difference across groups is in maternal education. About 61% of Mexican youth and 44% of other Latino youth had a mother who did not complete high school, compared to 7% of Whites, 20% of Blacks, and 9% of Asians. Differences in family poverty are ordered similarly, but are less pronounced. About half of Mexican and other Latino youth lived in a poor family, compared to 29% of Whites, 39% of Blacks, and 31% of Asians. Only Whites and Asians had significantly lower poverty rates than Mexicans. In contrast, Mexican children were significantly less likely to live in a single-parent family (40%) than other Latino (52%) and Black (82%) youth, but significant more likely than White (30%) and Asian (24%) youth.

The likelihood of having a depressed mother is similar for Mexican, White, and Black children, but the differences between other Latinos and Mexicans (20% versus 12%) as well as Asians and Whites (7% versus 16%) are significant. Despite these variations in maternal depression, the means for family routines do not differ across groups. Further, Mexican-origin youth differ only from their White counterparts in maternal perceptions of neighborhood child-centered closure and social control.

Table 2 presents means for the behavior problems indexes by mother's immigration status for each ethnoracial group. Mexican youth show a clear pattern of differences in internalizing behavior: The mean score is highest for children of undocumented migrants (4.7), intermediate for children of citizen/documented immigrants (3.4), and lowest for children of U.S.-born mothers (2.6). A very similar set of differences is evident for other Latinos. This contrasts with results that show that nativity matters less for other ethnoracial groups, if it matters at all. The nativity difference is relatively small for Whites and not

significant for Black and Asian children. Still, the pattern for Whites is intriguing because it suggests that children of native-born mothers (2.3) have greater difficulties than children of naturalized citizen or documented mothers (1.8).

There are fewer differences in externalizing behavior within ethnoracial groups by the mother's immigration status. Among Mexican youth, the mean for externalizing problems is significantly higher for children with undocumented mothers (7.9) than for the other two groups (6.4, 6.7). This is not evident for other Latino youth. In addition, White and Asian children with U.S.-born mothers have higher mean values for externalizing problems than do their co-ethnic counterparts whose mothers are naturalized citizens or documented immigrants.

Multivariate models

More comprehensive analyses of the roles of ethnicity and immigration status in behavioral functioning are presented in Tables 3 and 4. Here we focus on the categorical variable that jointly measures maternal ethnicity, nativity, and legal status. Children of Mexican undocumented migrants are used as the reference group to allow us to determine whether they have uniquely problematic outcomes with respect to internalizing and externalizing problems.

Table 3 presents unstandardized coefficients from OLS regression models of internalizing behavior problems. A simple and pronounced pattern is evident in Model 1, which controls only for the child's sex and age: The children of Mexican undocumented mothers have significantly higher rates of internalizing problems than all other children except other Latino youth with undocumented mothers. Among Mexican youth, there is a difference of 1.20 between children of undocumented and documented mothers and a difference of 2.07 between children of undocumented and U.S.-born mothers. Expressed in terms of the standard deviation of the internalizing problems scale, the scores of children with documented mothers are about .38 standard deviations lower than those of children with undocumented mothers; scores of children with U.S.-born mothers are about .66 standard deviations lower.⁴ Similarly, the coefficient for White children of U.S.-born mothers (–2.28) corresponds to about .72 standard deviations.

The coefficients for all groups (except other Latino youth) remain significant, but are attenuated with controls for maternal education, family poverty, and family structure in Model 2. As expected, children living in poor families and single-parent families are more likely than other children to exhibit internalizing problems. Model 3 adds a measure of maternal depression. Youth with depressed mothers are substantially more likely to have internalizing problems than other youth. However, because undocumented Mexican mothers are *less* likely to be depressed than the mothers in almost all other ethnoracial groups,

⁴Since the Behavior Problems measures are additive indexes based on items that range in value from 0-2 (2=often true; 1=sometimes true; 0=never true), the OLS regression coefficients reflect both the *number* of behavior problems and their *intensity*. To illustrate, additional analyses showed that the average *number* of internalizing problems was almost one greater for Mexican children with undocumented mothers than for their counterparts with documented mothers and slightly more than one greater than for those with native-born parents. Such differences are nontrivial given that the mean *number* of internalizing behavior problems in the overall sample is 2.4. Furthermore, the *intensity* of some problems was greater for the children with undocumented parents.

J Health Soc Behav. Author manuscript; available in PMC 2016 March 01.

inclusion of maternal depression in Model 3 results in wider group differences than in Model 2. The final model shows that family routines and living in a neighborhood with a relatively high level of child-centered intergenerational closure and social control are associated with lower levels of internalizing behavior. Nonetheless, differences between Mexican children of undocumented migrants and others remain in Model 4.

A parallel analysis is provided for externalizing behavior in Table 4. The group differences in Model 1 are similar in some ways to those for internalizing behavior even though they are less consistent overall. With one exception, Mexican children of undocumented migrants have significantly higher levels of externalizing behavior problems than the children of naturalized or documented immigrants, regardless of their ethnicity. The coefficients range from -1.41 (.25 standard deviations on the externalizing problems scale) for Mexican children with naturalized/documented parents to -3.51 (.62 standard deviations) for White children with naturalized/documented parents. The exception is the nonsignificant coefficient for Black children of naturalized or documented immigrants. The sign of this coefficient is consistent with the others and the failure to achieve significance may reflect the small number of such children in the sample. At the same time, Mexican children with undocumented mothers do not differ on the externalizing index from children with U.S.-born mothers in any ethnic group except other Latinos.⁵ Model 1 also shows that girls are less likely to have externalizing problems than boys, and older children are less likely to have such problems than younger children.

In Models 2 and 3, the pattern for the mother's immigration status is highly similar to that in Model 1. As was the case for internalizing behavior, however, once the relatively low level of depression of Mexican undocumented mothers is controlled in Model 3, the ethnoracial differences become larger than in Model 2. In the full model, living in a single-parent family and having a depressed mother are positively associated with externalizing behavior problems, while family routines appear to be protective.

Further consideration of the Hispanic health paradox

A persistent puzzle in studies of Mexican immigrants is that they are able to achieve positive health outcomes in the presence of high levels of socioeconomic disadvantage. The existence of this paradox for mental health among the Mexican mothers in our sample is illustrated by the contrast between family poverty and depression. About 71% of the undocumented Mexican mothers in our sample were poor, compared to 48% of naturalized citizen or documented mothers and only 27% of U.S.-born mothers. In contrast, parental depression was lowest for undocumented mothers (10%) and naturalized or documented mothers (12%) and considerably higher for U.S.-born Mexican mothers (16%). These contrasting patterns indicate that one cannot assume that the hardships associated with undocumented migration to the United States necessarily translate into elevated levels of psychological distress.

To illustrate how these risk and protective factors intersect to influence youth behavior problems, the two panels in Table 5 provide mean scores for internalizing and externalizing

⁵Because the other Latino group is a heterogeneous residual category, we do not attempt to interpret this pattern here.

J Health Soc Behav. Author manuscript; available in PMC 2016 March 01.

problems within categories of maternal depression and poverty. The top panel (Panel A) provides actual values and the bottom panel (Panel B) provides predicted values calculated from models equivalent to the full multivariate models in Tables 3 and 4, with the sample restricted to Mexicans.⁶

Focusing first on internalizing behavior problems, both the actual and predicted values show parallel patterns by maternal immigration status regardless of family poverty or maternal depression: Youth with undocumented mothers consistently have the highest mean values. Although these are also the poorest youth, there are relatively small differences in internalizing behavior by family poverty within categories of immigration status. Focusing on the majority of youth whose mothers were not depressed, for example, the predicted values in Panel B for those who were not poor and poor, respectively, are 4.0 versus 4.5 if the mother is undocumented, 3.0 versus 3.6 if the mother is documented, and 2.3 versus 2.9 if the mother is U.S. born. In contrast, the predicted (and actual) values for internalizing problems differ substantially by maternal depression, regardless of poverty status. For example, the mean predicted scores for impoverished youth with nondepressed and depressed mothers, respectively, are 4.5 versus 6.6 for those with undocumented mothers, 3.6 versus 5.7 for those with documented mothers, and 2.9 versus 4.9 for those with U.S.-born mothers.

Turning to externalizing behavior problems, poverty again plays a less prominent role than maternal depression. The predicted values show a difference of .3 in the scores for not poor and poor children, regardless of maternal depression, but youth with depressed mothers have substantially higher scores for externalizing than youth whose mothers are not depressed. The mean predicted scores among poor youth with nondepressed and depressed mothers, respectively, are 6.7 versus 10.5 for those with undocumented mothers, 5.5 versus 9.3 for those with documented mothers, and 5.6 versus 9.4 for those with U.S.-born mothers.

Overall, these results indicate that it is too simplistic to assume that because Mexican youth with undocumented parents concurrently experience high socioeconomic disadvantage and elevated risks of behavior problems, the two phenomena are necessarily strongly connected. Parental human capital is lower and family poverty higher in families with undocumented mothers than in other families. However, other family resources do not follow suit. In fact, a key indicator of maternal mental health—depression—suggests that undocumented Mexican parents may have greater psychological resources to bring to parenting than other Mexican mothers, especially U.S.-born mothers.

DISCUSSION

A major challenge to progress in understanding the health of children of immigrants is the lack of systematic attention to the legal status of their parents. Due to data constraints, this major source of heterogeneity within the immigrant population is regularly ignored, threatening both the accuracy of findings and knowledge of how barriers to immigrant

 $^{^{6}}$ We also tested for interactions between poverty and depression, immigration status and poverty, and immigration status and depression. None of these interactions were significant.

J Health Soc Behav. Author manuscript; available in PMC 2016 March 01.

incorporation may impact children's outcomes. We addressed this challenge in a study of behavioral functioning among Mexican-origin youth, relative to youth in four other ethnoracial groups. Using data from the LA FANS, one of the few representative surveys with direct questions with which to measure immigrants' legal status, we compared youth with undocumented mothers, documented or naturalized citizen mothers, and U.S.-born mothers. Among the Mexican children of immigrants in our sample more than one in every three (36%) had an unauthorized mother, attesting to the significance of this issue.

Our findings for Mexican youth reinforce the call for recognition of parental legal status in studies of health among children of immigrants. Mexican-origin youth with undocumented mothers have significantly higher levels of internalizing and externalizing behavior problems than their co-ethnic counterparts with documented or naturalized citizen mothers. Thus, treating Mexican children with immigrant parents as a single undifferentiated group masks important differences in outcomes by parental legal status. Moreover, Mexican children with unauthorized mothers exhibit higher levels of internalizing behavior than children in all other ethnoracial/legal status groups except children of unauthorized migrants from other Latin American countries.

The disadvantage of Mexican youth with undocumented mothers is less sweeping for externalizing behavior. Such youth are similar to Mexican, White, Black, and Asian children of U.S.-born mothers in having higher levels of externalizing behavior than their peers with legal immigrant parents. Although prior studies have not distinguished youth with undocumented and documented immigrant mothers, a pattern of elevated risk of externalizing behavior for children of native-born mothers relative to children with foreignborn mothers has been documented in other studies (Gonzales et al. 2008; Gonzales et al. 2009; Harris 1999). The usual explanation of this elevated risk is the loss of protective aspects of the home culture, an explanation that is not applicable to children with undocumented immigrant parents. Thus, we may observe similar behaviors among Mexican youth with undocumented parents and U.S.-born parents, but these behaviors may be spurred by distinct circumstances in each group.

Our overall conclusions regarding the risk and protective factors considered in our analysis are multifaceted. Clearly, socioeconomic resources are fundamental to children's health and Mexican youth with undocumented parents have fewer such resources than other youth. Still, socioeconomic status plays only a small role in the relatively poor behavioral functioning of Mexicans who have undocumented mothers. The findings also suggest that undocumented parents are able to at least partially offset their lack of material resources with other types of resources, such as better-than-expected maternal mental health and family routines that are comparable to those of more advantaged groups. The Hispanic health paradox is evident in nativity differences in maternal depression, but we extend the story by showing that depression is even less common among undocumented Mexican mothers than among documented Mexican mothers. Undocumented mothers exhibit traits that are consistent with positive selection on mental health or strong retention of protective aspects of the home culture. Still, these traits cannot fully protect their children from the hardships associated with living with one or more undocumented parents.

Although we were able to include measures reflecting many important intervening processes, there is ample room for further research. In particular, the LA FANS did not include measures of perceived discrimination, acculturation and enculturation, or coping strategies employed by youth or their parents. This limited our ability to consider some possible mechanisms through which maternal documentation status may influence youth behavior problems. In addition, this study was based on cross-sectional data because of high attrition for children across the two waves of the LA FANS. The use of longitudinal data in future studies could more explicitly rule out the possibility that child behavior problems may have contributed to maternal depression or disruption of family routines. This seems unlikely for Mexicans, though, because depression and irregular family routines were not more common in the families of undocumented immigrants.

An additional avenue for future research is investigation of these issues in other geographic areas. Los Angeles County is typical of the largest counties in the United States in that it is a majority-minority county, meaning that more than half of the population self-identifies as being in a racial-ethnic category other than non-Hispanic White alone. Currently, about 11% of all counties and 75% of the largest counties in the United States are majority-minority counties, and this demographic profile is becoming more common across America (U.S. Census Bureau 2013). Our analysis of children's behavioral functioning sheds light on what it means to grow up as a racial-ethnic minority in a multiethnic environment. Future research is needed to determine whether associations observed for children in Los Angeles are similar in other types of residential environments, such as new destination counties that are not heavily populated with co-ethnic residents or other minority groups (Singer 2009).

This research also suggests a challenge that is relevant to public policy. Specifically, children of undocumented mothers are relatively likely to experience behavior problems that have implications for their life chances (e.g., via performance in school). These children also live in families that often have insufficient discretionary resources and limited access to private health insurance. These limitations potentially restrict their access to outside assistance with their problems. Undocumented mothers may also lack awareness of outside resources or be unwilling to seek assistance from publicly-funded programs because they fear detection and deportation (even though eligibility is a function of the child's status, not the parent's status). Thus, a challenge for future research is to assess the extent to which there is an unmet need for services among those who are most vulnerable and an awareness of unmet needs among teachers, health professionals, and other who might be in a position to help.

Overall, our research makes new contributions to the literature by examining the critical role of parental legal status in the health of Mexican children of immigrants. Most notably, our finding that parental legal status matters for mental health among youth with immigrant parents reinforces the recent call for making this distinction in future research (Glick 2010; Massey and Bartley 2005; Viruell-Fuentes et al. 2012). Further, the fact that no facile explanation was found for the relatively high risks of behavior problems among Mexican youth with undocumented mothers suggests that additional research is needed to unravel how legal status influences children's everyday lives and perceptions. Hopefully, the next

comprehensive review of the literature on Latino mental health will be able to include a growing body of scholarship on this increasingly critical topic.

Acknowledgments

This study was supported by NICHD grants 5P01HD062498-04 and R24HD041025.

References

- Abrego, Leisy; Menjívar, Cecilia. Immigrant Latina Mothers as Targets of Legal Violence. International Journal of Sociology of the Family. 2011; 37(1):9–26.
- Bachmeier, James D.; Van Hook, Jennifer; Bean, Frank D. Can We Measure Immigrants' Legal Status? Lessons from Two Surveys. International Migration Review. 2014; 48:538–566. [PubMed: 25525285]
- Berry, John W. Conceptual Approaches to Acculturation. In: Chun, Kevin M.; Organista, Pamela B.; Marín, Gerardo, editors. Acculturation: Advances in Theory, Measurement, and Applied Research. American Psychological Association; 2003. p. 17-37.
- Bradley, Robert H.; Corwyn, Robert F. Socioeconomic Status and Child Development. Annual Review of Psychology. 2002; 53:371–399.
- Breslau J, Borges G, Hagar Y, Tancredi D, Gillman S. Immigration to the USA and Risk for Mood and Anxiety Disorders: Variation by Origin and Age at Immigration. Psychological Medicine. 2009; 39:1117–1127. [PubMed: 19000338]
- Brooks-Gunn, Jeanne; Johnson, Anna D.; Leventhal, Tama. Disorder, Turbulence, and Resources in Children's Homes and Neighborhoods. In: Evans, Gary W.; Wachs, Theodore D., editors. Chaos and its Influence on Children's Development: An Ecological Perspective. Washington, DC: American Psychological Association Books; 2010. p. 155-170.
- Canino, Glorisa; Alegría, Margarite. Understanding Psychopathology among the Adult and Child Latino Population: An Epidemiologic Perspective. In: Villarruel, Francisco A.; Carlo, Gustavo; Grau, Josefina M.; Azmitia, Margarita; Cabrera, Natasha; Jaime Chahin, T., editors. Handbook of Latino Psychology: Developmental and Community-Based Perspectives. Los Angeles, CA: SAGE; 2009. p. 31-44.
- Child Trends. Immigrant children. 2013. Retrieved September 19, 2014 (http://www.childtrends.org/? indicators=immigrant-children
- Christiansen, Pia. The Health-Promoting Family: A Conceptual Framework for Future Research. Social Science and Medicine. 2004; 59:377–387. [PubMed: 15110427]
- Cicchetti, Dante; Toth, Sheree L. A Developmental Perspective on Internalizing and Externalizing Disorders. In: Cicchetti, Dante; Toth, Sheree L., editors. Internalizing and Externalizing Expressions of Dysfunction. Hillsdale, NJ: Erlbaum; 1991. p. 1-19.
- Conger, Rand D.; Conger, Katherine J.; Martin, Monica J. Socioeconomic Status, Family Processes, and Individual Development. Journal of Marriage and Family. 2010; 72:685–704. [PubMed: 20676350]
- Cunningham, Solveig; Ruben, Julia D.; Venkat Narayan, KM. Health of Foreign-Born People in the United States: A Review. Health & Place. 2008; 14:623–635. [PubMed: 18242116]
- Delgado, Peter L.; Alegría, Margarita; Cañive, José M.; Diaz, Esperanza; Escobar, Javier I.; Kopelowicz, Alex; Oquendo, Maria A.; Ruiz, Pedro; Vega, William A. Depression and Access to Treatment among U.S. Hispanics. Focus. 2006; IV(1):38–47.
- Dreby, Joanna. Divided by Borders: Mexican Migrants and their Children. Berkeley and Los Angeles: University of California Press; 2010.
- Evans, Gary W.; Wachs, Theodore D., editors. Chaos and Its Influence on Children's Development: An Ecological Perspective. Washington, D.C: American Psychological Association; 2010.
- Flores, Yvette G. Chicana and Chicano Mental Health. Tucson, AZ: University of Arizona Press; 2013.

- Fuller, Bruce; Coll, Cynthia García. Learning from Latinos: Contexts, Families, and Child Development in Motion. Developmental Psychology. 2010; 46:599–565.
- Glick JE. Connecting Complex Processes: A Decade of Research on Immigrant Families. Journal of Marriage and Family. 2010; 72:498–515.
- Gonzales, Nancy A.; Germán, Miguel; Kim, Su Yeong; George, Preethy; Fabrett, Fairlee C.; Millsap, Roger; Dumka, Larry E. Mexican American Adolescents' Cultural Orientation, Externalizing Behavior and Academic Engagement. American Journal of Community Psychology. 2008; 41:151–164. [PubMed: 18085435]
- Gonzales, Nancy A.; Fabrett, Fairlee C.; Knight, George P. Psychological Impact of Latino Youth Acculturation and Enculturation. In: Villarruel, Francisco A.; Carlo, Gustavo; Grau, Josefina M.; Azmitia, Margarita; Cabrera, Natasha; Jaime Chahin, T., editors. Handbook of Latino Psychology: Developmental and Community-Based Perspectives. Los Angeles, CA: SAGE; 2009. p. 115-134.
- Gonzalez-Barrera, Ana; Lopez, Mark Hugo. A Demographic Portrait of Mexican-Origin Hispanics in the United States. Washington, D.C: Pew Hispanic Center; 2013 May. Retrieved September 19, 2014 (http://www.pewhispanic.org/2013/05/01/a-demographic-portrait-of-mexican-originhispanics-in-the-united-states/
- Guttmannova, Katarina; Szanyi, Jason M.; Cali, Philip W. Internalizing and Externalizing Behavior Problem Scores: Cross-Ethnic and Longitudinal Measurement Invariance of the Behavior Problem Index. Educational and Psychological Measurement. 2008; 68:676–694.
- Hall, Matthew; Greenman, Emily. Neighborhood and Housing Quality among Undocumented Immigrants. Social Science Research. 2013; 42:1712–25. [PubMed: 24090862]
- Harris, Kathleen Mullan. The Health Status and Risk Behaviors of Adolescents in Immigrant Families. In: Hernandez, Donald J., editor. Children of Immigrants: Health, Adjustment and Public Assistance. Washington, D.C: National Academy Press; 1999. p. 286-347.
- Hinshaw, Stephen P. Externalizing Behavior Problems and Academic Underachievement in Childhood and Adolescence: Causal Relationships and Underlying Mechanisms. Psychological Bulletin. 1992; 111:127–155. [PubMed: 1539086]
- King, Serena M.; Iacono, William G.; McGue, Matt. Childhood Externalizing and Internalizing Psychopathology in the Prediction of Early Substance Use. Addiction. 2004; 99:1548–1559. [PubMed: 15585046]
- Marin, Humberto; Escobar, Javier I.; Vega, William A. Mental Illness in Hispanics: A Review of the Literature. Focus. 2006; IV:23–37.
- Massey, Douglas S.; Bartley, Katherine. The Changing Legal Status Distribution of Immigrants: A Caution. International Migration Review. 2005; 39:469–484.
- McLeod, Jane D.; Kaiser, Karen. Childhood Emotional and Behavioral Problems in Educational Attainment. American Sociological Review. 2004; 69:636–658.
- Menjívar, Cecilia; Abrego, Leisy. Parents and Children across Borders: Legal Instability and Intergenerational Relations in Guatemalan and Salvadoran Families. In: Foner, Nancy, editor. Across Generations: Immigrant Families in America. New York: New York University Press; 2009. p. 160-189.
- Menjívar, Cecelia; Kanstroom, Daniel, editors. Constructing Immigrant "Illegality": Critiques, Experiences, and Responses. Cambridge: Cambridge University Press; 2013.
- Moffitt, Terrie E. Adolescence-limited and Life-Course-Persistent Antisocial Behavior: A Developmental Taxonomy. Psychological Review. 1993; 100:674–701. [PubMed: 8255953]
- Motomura, Hiroshi. Immigration Outside the Law. New York: Oxford University Press; 2014.
- Nwosu, Chiamaka; Batalova, Jeanne; Auclair, Gregory. [Accessed September 19, 2011] Frequently Requested Statistics on Immigrants and Immigration in the United States. Migration Information Source. 2014 Apr 28. (http://www.migrationpolicy.org/article/frequently-requested-statisticsimmigrants-and-immigration-united-states)
- Ortega, Alexander N.; Horwitz, Sarah M.; Fang, Hai; Kuo, Alice A.; Wallace, Steven P.; Inkelas, Moira. Documentation Status and Parental Concerns about Development in Young US Children of Mexican Origin. Academic Pediatrics. 2009; 9:278–282. [PubMed: 19394914]
- Ortega, Alexander N.; Fang, Hai; Perez, Victor H.; Rizzo, John A.; Carter-Pokras, Olivia; Wallace, Steven P.; Gelberg, Lillian. Health Care Access, Use of Services, and Experiences among

Undocumented Mexicans and Other Latinos. Archives of Internal Medicine. 2007; 167:2354–2360. [PubMed: 18039995]

- Parcel, Toby L.; Menaghan, Elizabeth G. Measuring Behavior Problems in a Large Cross-sectional Survey: Reliability and Validity for Children of the NLS Youth. Columbus: Ohio State University, Department of Sociology; 1988. http://www.nlsinfo.org/site/childya/nlsdocs/otherdocs/other/ ParcelMenaghanBPI1988.pdf [Accessed September 19, 2014]
- Passel, Jeffrey S.; Cohn, D'Vera. Unauthorized Immigrant Population: National and State Trends, 2010. Pew Hispanic Center; 2011. http://www.pewhispanic.org/files/reports/133.pdf [Accessed April 11, 2014]
- Peterson, Christine E.; Sastry, Narayan; Pebley, Anne R.; Ghosh-Dastidar, Bonnie; Williamson, Stephanie; Lara-Cinisomo, Sandraluz. The Los Angeles Family and Neighborhood Survey Codebook. 2004
- Portes, Alejandro; Rumbaut, Rubén. Legacies: The Story of the Immigrant Second Generation. Berkeley: University of California Press; 2001.
- Potochnick, Stephanie R.; Perreira, Krista M. Depression and Anxiety among First-Generation Immigrant Latino Youth: Key Correlates and Implications for Future Research. Journal of Nervous and Mental Disease. 2010; 198(7):470–477. [PubMed: 20611049]
- Rubin, Donald B. Multiple Imputation for Nonresponse in Surveys. New York: John Wiley and Sons; 1987.
- Sampson, Robert T.; Morenoff, Jeffrey D.; Earls, Felton. Beyond Social Capital: Spatial Dynamics of Collective Efficacy for Children. American Sociological Review. 1999; 64:633–660.
- Schwartz, Seth J.; Unger, Jennifer B.; Zamboanga, Byron L.; Szapocnik, José. Rethinking the Concept of Acculturation: Implications for Theory and Research. American Psychologist. 2010; 65:237– 251. [PubMed: 20455618]
- Singer, Audrey. The New Geography of United States Immigration. Washington, D.C: Brookings Institution; 2009.
- Suarez-Orozco, Carola; Yoshikawa, Hirokazu; Teranishi, Robert T.; Suarez-Orozco, Marcelo M. Growing Up in the Shadows: The Developmental Implications of Unauthorized Status. Harvard Educational Review. 2011; 81:438–472.
- Sullivan, Margaret M.; Rebm, Roberta. Mental Health of Undocumented Mexican Immigrants: A Review of the Literature. Advances in Nursing Science. 2005; 28:240–251. [PubMed: 16106153]
- U.S. Census Bureau. [Accessed August 14, 2013] Six More Counties Become Majority-Minority. 2013. (http://www.census.gov/newsroom/releases/archives/population/cb13-112.html)
- Van Hook, Jennifer; Landale, Nancy S.; Hillemeier, Marianne M. Is the United States Bad for Children's Health? Risk and Resilience among Young Children of Immigrants. Washington, DC: Migration Policy Institute; 2013.
- Villarruel, Francisco A.; Carlo, Gustavo; Grau, Josefina M.; Azmitia, Margarita; Cabrera, Natasha; Jaime Chahin, T., editors. Handbook of US Latino Psychology: Developmental and Community-Based Perspectives. Los Angeles: Sage Publications; 2009.
- Viruell-Fuentes, Edna A.; Miranda, Patricia Y.; Abdulrahim, Sawsan. More than Culture: Structural Racism, Intersectionality Theory, and Immigrant Health. Social Science and Medicine. 2012; 75:2099–2106. [PubMed: 22386617]
- Weisner, Thomas S. Ecocultural Understanding of Children's Developmental Pathways. Human Development. 2002; 45:275–281.
- Yoshikawa, Hirokazu. Immigrants Raising Citizens: Undocumented Parents and their Young Children. New York: Russell Sage Foundation; 2011.
- Yoshikawa, Hirokazu; Kholoptseva, Jenya. Unauthorized Immigrant Parents and Their Children's Development: A Summary of the Evidence. Washington, D.C: Migration Policy Institute; 2013.
- Zavella, Patricia. I'm Neither Here nor There: Mexicans' Quotidian Struggles with Migration and Poverty. Durham: Duke University Press; 2011.

Biographies

Nancy S. Landale is Liberal Arts Research Professor of Sociology and Demography at The Pennsylvania State University. Her research focuses on the intersection of immigration, family processes and health. She is currently working on a study of the health and development of Mexican-origin children in the United States and Mexico. A key issue in this research is the role of parental legal status in shaping family circumstances and children's well-being.

Jessica Halliday Hardie is Assistant Professor of Sociology at Hunter College, CUNY. Her program of research focuses on the intergenerational transmission of disadvantage. She is particularly interested in the role of families and schools in explaining inequality among young people, and how this contributes to patterns of attainment in adulthood. Recent published work has examined adolescent future plans and social capital, the role of economic hardship in young adults' romantic relationships, and the association between maternal health and child wellbeing.

R. S. Oropesa is Professor of Sociology and Demography at The Pennsylvania State University. His research focuses broadly on issues related to the assimilation of Latin American immigrants and their descendants in the United States. Currently, he is investigating the role of legal status in the health and health care of Mexican-origin children in California.

Marianne M. Hillemeier is Professor of Health Policy and Administration and Demography at The Pennsylvania State University. Her research interests focus on socioeconomic, racial/ethnic, and geographic disparities in health and healthcare for infants and children.

Table 1

Descriptive Statistics for Dependent and Independent Variables. by Race-ethnicity

	Total	Mexican	Other Latino	White	Black	Asian
Behavior Problems Index						
Internalizing (X)	2.98	3.56^{b}	3.38^{b}	2.24 ^a	2.64 ^a	2.18 ^a
Externalizing $(\mathbf{X})^{-}$	6.48	6.88	5.99 ^a	6.48	7.01	5.13 <i>a</i>
Child Characteristics						
Female (%)	49.56	50.38	50.38	47.88	48.97	49.53
Age (X)	9.67	9.36^{b}	9.47	10.10^{a}	9.91	10.02
Mother/Family Characteristics						
Mother's Immigration Status						
Undocumented (%)	13.59	27.42	16.00	0.0	0.0	0.0
Naturalized citizen or documented (%)	42.52	48.84b	$63.50^{a,b}$	17.53^{a}	8.78 ^a	76.55a,b
U.S. born (%)	43.89	23.74 ^b	20.51^{b}	82.47 <i>a</i>	91.22 ^a	23.45 ^b
Mother's education < high school (%)	36.13	61.28 ^b	$44.30^{a,b}$	6.79 ^a	$19.74^{a,b}$	9.03 <i>a</i>
Poor family (%)	42.09	51.03^{b}	48.23b	29.39 <i>a</i>	39.02	30.91 ^a
Single parent (%)	41.54	39.62^{b}	$51.51^{a,b}$	29.97 <i>a</i>	82.29 <i>a</i> ,b	24.40 ^a
Mother depressed (%)	14.05	12.42	19.86 ^a	15.74	17.45	6.63 ^b
Family routines (X)	20.10	20.15	20.11	20.37	10.01	20.33
Perceived Neighborhood Characteristics						
Child-centered closure and control (X)	25.66	25.12^{b}	24.92^{b}	26.93 <i>a</i>	25.90	25.73
Unweighted N	2535	1217	387	506	212	213
Weighted %	100.00	41.76	13.40	23.50	10.09	11.25

J Health Soc Behav. Author manuscript; available in PMC 2016 March 01.

^aSignificantly different from Mexicans

Analysis based on weighted data.

 $b_{{
m Significantly}}$ different from Whites

Internalizing and Externalizing Behavior Problems, by Race-ethnicity and Mother's Immigration Status

	Total	Mexican	Other Latino	White	Black	Asian
Mother's Immigration Status			Internalizing (X)	X		
Undocumented	4.62^{b}	4.66^{b}	4.46b			
Naturalized citizen or documented	$3.01^{a,b}$	$3.43^{a,b}$	$3.52^{a,b}$	1.75b	2.17	2.22
U.S. born	2.44 ^a	2.59 <i>a</i>	2.10 ^a	2.34	2.69	2.07
			Externalizing (X)	X		
Undocumented	7.57b	7.87b	6.02			
Naturalized citizen or documented	5.74a,b	6.42 ^a	6.20	4.21b 5	5.02	4.48^{b}
U.S. born	6.86 ^d	6.68 ^a	5.32	6.96	7.20	7.23

Analysis based on weighted data.

^aSignificantly different from undocumented

b Significantly different from U.S. born

Table 3

OLS Regression Analysis of Children's Internalizing Behavior Problems

Variable	Model 1	Model2	Model 3	Model 4
Ethnicity/Mother's Immigration Status				
Mexican undocumented	(ref)	(ref)	(ref)	(ref)
Mexican naturalized/documented	-1.20 ***	94 **	-1.02 ***	-1.04 ***
Mexican U.S. born	-2.07 ***	-1.60 **	-1.79 ***	-1.90 ***
Other Latino undocumented	21	22	49	45
Other Latino naturalized/documented	-1.10 **	81 *	-1.04 **	-1.08 **
Other Latino U.S. born	-2.58 ***	-2.19 ***	-2.33 ***	-2.43 ***
White naturalized/documented	-2.86 ***	-2.19 ***	-2.49 ***	-2.42 ***
White U.S. born	-2.28 ***	-1.64 ***	-1.84 ***	-1.82 ***
Black naturalized/documented	-2.52 *	-2.82 *	-2.66 *	-2.75 *
Black U.S. Born	-1.93 ***	-1.63 ***	-1.84 ***	-1.87 ***
Asian naturalized/documented	-2.40 ***	-1.72 ***	-1.77 ***	-1.78 ***
Asian U.S. born	-2.57 ***	-1.99 **	-2.09 **	-2.16 **
Child Characteristics				
Female	0.08	.06	.06	.06
Age	-0.03	–.04 <i>a</i>	04 *	05 **
Mother/Family Characteristics				
Mother's education < high school		.42 <i>a</i>	.32	.29
Poor family		.55 *	.51 *	.48 *
Single parent		.55 **	.46 *	.42 *
Mother depressed			$1.73 \ ^{***}$	1.71 ***
Family routines				04 **
Perceived Neighborhood Characteristics				
Child-centered closure and control				03 *

Author Manuscript

Author Manuscript

Landale et al.

Data Source: Los Angeles Family and Neighborhood Survey

Analysis is based on weighted data.

a p<.10

* p<.05 ** p<.01

*** p<.001 (two-tailed tests)

Table 4

OLS Regression Analysis of Children's Externalizing Behavior Problems

Variable	Model 1	Modelz	Model 3	
Ethnicity/Mother's Immigration Status				
Mexican undocumented	(ref)	(ref)	(ref)	(ref)
Mexican naturalized/documented	-1.41 **	–1.02 ^a	-1.15 *	-1.24 *
Mexican U.S. born	-1.18	56	86	-1.23
Other Latino undocumented	-1.92 *	-1.99 *	-2.44 **	-2.41 **
Other Latino naturalized/documented	-1.61 *	-1.23 ^a	-1.61 *	-1.74 **
Other Latino U.S. born	-2.52 ***	-2.05 *	-2.26 *	-2.59 **
White naturalized/documented	-3.51 ***	-2.38 **	-2.87 ***	-2.72 ***
White U.S. born	86	60.	22	30
Black naturalized/documented	-3.12 ^a	-3.78 ^a	-3.53 ^a	-3.99 *
Black U.S. Born	57	32	66	87
Asian naturalized/documented	-3.32 ***	-2.24 **	-2.31 **	-2.34 **
Asian U.S. born	54	.29	.14	21
Child Characteristics				
Female	74 *	77 **	78 **	74 **
Age	* 60'-	10 **	11 **	14 ***
Mother/Family Characteristics				
Mother's education < high school		.71	.55	.49
Poor family		.58	.51	.48
Single parent		1.26 **	1.11 **	1.05 **
Mother depressed			2.80 ***	2.76 ***
Family routines				13 ***
Perceived Neighborhood Characteristics				
Child-centered closure and control				04
Unweighted N	2535	2535	2535	2535

J Health Soc Behav. Author manuscript; available in PMC 2016 March 01.

Analysis is based on weighted data.

-
<u> </u>
_
_
_
_
-
()
<u> </u>
_
<
\leq
\leq
≤a
Mai
Mar
Man
-
Manu
Ĕ
-
SDI
IUS
IUSC
IUSCI
IUSC
IUSCI
IUSCI
IUSCI

Table 5

Child Behavior Problems by Maternal Depression, Poverty, and Mother's Immigration Status, Mexican Children

	Mother Not Depressed	Mother Depressed	Mother Not Depressed	Mother Depressed
Not Poor				
Undocumented	4.4	7.1	7.6	12.7
Naturalized/documented	2.7	5.2	5.8	10.1
U.S. born	1.9	3.6	4.9	9.6
Poor				
Undocumented	4.3	7.9	7.5	11.2
Naturalized/documented	3.7	5.6	6.1	9.9
U.S. Born	3.5	4.2	8.5	11.2
	Child Internalizing Behavior (X)	g Behavior (X)	Child Externalizing Behavior (X)	g Behavior (X)
	Mother Not Depressed	Mother Depressed	Mother Not Depressed	Mother Depressed
Not Poor				
Undocumented	4.0	6.0	6.4	10.2
Naturalized/documented	3.0	5.1	5.2	9.0
U.S. born	2.3	4.4	5.3	9.0
Poor				
Undocumented	4.5	6.6	6.7	10.5
Naturalized/documented	3.6	5.7	5.5	9.3
U.S. Born	2.9	4.9	5.6	9.4

J Health Soc Behav. Author manuscript; available in PMC 2016 March 01.

equation sets all cases to: Female child; Mother less than high

Data Source: Los Angeles Family and Neighborhood Survey

Analysis is based on weighted data.