

Adolescent Risk Behaviours and Psychological Distress across Immigrant Generations

Hayley A. Hamilton, PhD,^{1,2} Samuel Noh, PhD,^{1,2} Edward M. Adlaf, PhD¹⁻³

ABSTRACT

Objective: To examine disparities in hazardous and harmful drinking, illicit drug use, delinquency, and psychological distress among three immigrant generations of youth.

Methods: Data on 4,069 students were derived from the 2005 cycle of the Ontario Student Drug Use Survey, a province-wide school-based survey of 7th to 12th graders. The survey employed a two-stage cluster design (school, class). Analyses include adjustments for the complex survey design, specifically stratification, clusters, and weights.

Results: Both drug use and hazardous and harmful drinking increase across immigrant generations. First-generation youth report significantly less use than second-generation youth, who in turn report less use than third and later generations. Generational differences in the levels of hazardous and harmful drinking increase with age. Delinquency is significantly less among first-generation youth relative to youth of other immigrant generations. Symptoms of psychological distress are highest among first-generation youth compared to youth of other immigrant generations.

Conclusion: The nature of differences between foreign- and native-born adolescents varies across behaviours. As such, it is important to gain knowledge about the adjustment levels of these two groups with regard to specific components of well-being. Such knowledge is necessary for developing policies and programs to promote emotional and behavioural health.

Key words: Immigrants; adolescents; substance use; delinquency; psychological distress; Ontario

La traduction du résumé se trouve à la fin de l'article.

Can J Public Health 2009;100(3):221-25.

Foreign-born children and children with foreign-born parents represent an estimated 20% of individuals under the age of 18 in Canada, with a projected increase to 25% by 2016.¹ These figures suggest that identifying and addressing differences in health and behaviour between foreign-born and native-born children are critical to public health. It is well known that the adolescent years are a precarious developmental stage during which psychological difficulties and health risk behaviours can influence an individual's future life success. These years may be particularly dramatic for foreign-born youth and native-born youth with foreign-born parents as many are caught between upholding the traditional values from home countries that are often stressed by parents, and engaging in behaviours that will hasten their acceptance into a particular peer group.

Research suggests that as immigrants become more acculturated, they adopt the attitudes, social norms, and behaviours of the mainstream or a social reference group within their new country.^{2,3} Whether increased acculturation results in positive or negative outcomes, however, remains unknown to a large extent because of inconsistent findings. Some early studies indicated that the foreign-born were at increased risk for psychological and behavioural difficulties,⁴⁻⁷ suggesting that with time and increased acculturation, such difficulties would decline to that of the mainstream. More recent studies, however, have often challenged that view with findings that foreign-born children are often at similar^{8,9} or reduced risk of psychological and behavioural difficulties relative to their native-born counterparts.¹⁰⁻¹⁴ A more nuanced view coincides with indications that health and behavioural differences between foreign-

and native-born children are complex and thus may vary, for example, across health outcomes and between multiple immigrant generations.

The main objective of this study is to examine differences in psychological distress symptoms, hazardous and harmful drinking, illicit drug use, and general delinquency between three immigrant generations. The study focuses on adolescent students in Ontario, the province of residence for 54.9% of the foreign-born population in Canada and 38% of the overall Canadian population.¹⁵ This study also examines the moderating effects of age and sex in the association between immigrant generation and each outcome given that norms associated with adolescent behaviour are often driven by age and sex. This may be particularly so for first-generation youth who are often from countries with more traditionally defined roles. Alternatively, sex and age differences may be more evident among second and later generations because of greater acculturative influences.

METHODS

Data

Data were derived from the 2005 Ontario Student Drug Use Survey (OSDUS), a province-wide survey of 7th to 12th grade students with-

Author Affiliations

1. Centre for Addiction and Mental Health, Toronto, ON
2. Department of Psychiatry, University of Toronto, Toronto, ON
3. Dalla Lana School of Public Health, University of Toronto, Toronto, ON

Correspondence and reprint requests: Hayley Hamilton, Social Equity and Health Research, Centre for Addiction and Mental Health, 455 Spadina Ave., Suite 300, Toronto, ON M5S 2G8, E-mail: hayley_hamilton@camh.net

Table 1. Variable Means/Percentages, Overall and by Immigrant Generation

	First Generation	Second Generation	Third Generation	Overall Sample
Age	15.2 ^a (14.7-15.6)	14.8 ^b (14.6-15.1)	14.9 (14.8-15.1)	14.9 (14.8-15.1)
Female	46.4 (39.3-53.7)	47.0 (42.5-51.6)	50.7 (47.4-54.0)	48.9 (45.8-52.0)
Two biological parents	73.3 (67.2-78.6)	74.0 (70.1-77.6)	69.4 (66.4-72.3)	71.5 (69.1-73.7)
Urban residence	99.3 ^a (97.7-99.8)	93.8 ^b (90.0-96.2)	75.5 ^c (67.4-82.2)	85.0 (79.3-89.4)
<i>Parental education</i>				
University degree	55.6 ^a (48.5-62.5)	38.1 ^b (33.9-42.5)	38.2 ^c (34.6-42.0)	41.0 (37.6-44.5)
Less than university	33.1 (27.5-39.2)	47.5 (43.5-51.5)	52.8 (49.2-56.4)	48.0 (44.8-51.1)
Don't know	11.3 (8.2-15.2)	14.4 (11.9-17.4)	8.9 (7.4-10.8)	11.0 (9.6-12.6)
N	564	1130	2322	4016

Note: 95% confidence intervals are shown in brackets below means. Across a single row, means and percentages with different superscript letters indicate a statistically significant group (generation) difference at $p < 0.05$ level.

in regular public or Catholic schools.¹⁶ The survey was administered in classrooms through anonymous, student-completed questionnaires. Conducted every odd year since 1977, OSDUS employs a two-stage cluster design involving a random selection of classes from within a random selection of schools (probability proportional to size) stratified by region and school type (elementary/middle or secondary). The 2005 total sample was 7,726 students from 42 school boards, 137 schools, and 445 classrooms. Completion rates were 94% and 72% for schools and students, respectively. Absenteeism (12%) and lack of parental consent (16%) were among the reasons for non-completion. Specific items important to this analysis (e.g., delinquency) were only asked of a random half sample of 4,078 students, and thus this half sample is the basis for analyses. A total of nine respondents who were younger than 12 or older than 19 years of age were excluded from analyses. The Research Ethics Board of the Centre for Addiction and Mental Health approved this study. Further details regarding the study design are available at: http://www.camh.net/research/population_life_course.html¹⁶ (Accessed March 17, 2008).

Measures

Health risk behaviours examined are hazardous and harmful drinking, illicit drug use, and delinquency. Hazardous and harmful drinking is based on the Alcohol Use Disorders Identification Test (AUDIT), an instrument developed by the World Health Organization.¹⁷ AUDIT assesses drinking behaviour that increases the likelihood of current or future physical health problems (e.g., accidents, alcohol-related injuries). *Psychological distress* is based on the General Health Questionnaire, a general measure of emotional distress or malaise.¹⁸

The independent measure, *immigrant generation*, is represented by dummy variables contrasting three groups. First-generation immigrants are foreign-born youth. Second-generation immigrants are native-born youth (i.e., Canadian-born) with at least one foreign-born parent. Third- and later-generation immigrants are native-born youth with native-born parents.

Analyses control for biological sex, respondents' age, family structure, parental education, and urbanicity. "Don't know" responses on parental education are included because they represent 10% of the sample. Analysis indicates that don't know respondents on this measure tend to be younger (61% are age 12-14 and 73.5% are age 12-15) than those who know their parents' educa-

tion. Further descriptions of variables used in analyses are provided in the appendix.

Analyses

Given the complex sample design, Taylor series methods within Stata are used to compute unbiased variances, standard errors, and point estimates.¹⁹ Analyses are weighted to adjust for the unequal probability of selection.¹⁶ Ordinary least squares (OLS) regression is used to examine the relationship between immigrant generation and each of hazardous and harmful drinking, delinquency, and psychological distress. Logit regression is used to examine the relationship between immigrant generation and illicit drug use. Separate multiplicative interactions involving immigrant generation and age, and immigrant generation and sex are examined for each outcome. Only significant interactions are presented in the regression table.

Both linear and quadratic age terms are included in the OLS models to control for the possible nonlinear effect of age on the dependent variables. Age variables are centered in order to reduce the correlation between the linear, quadratic, and interaction terms.²⁰ OLS regressions are based on square-root transformations of drinking and delinquency scores.

RESULTS

Descriptives of the sample are provided in Table 1. First-, second-, and third-generation immigrant youth represent 16.3%, 30.9%, and 52.8% of the sample, respectively. A greater proportion of the first-generation sample resides in urban rather than rural areas, and has parents with a university degree.

Table 2 outlines the mean or percentage level of harmful drinking, drug use, delinquency, and distress by immigrant generation and control variables. There are statistically significant variations in hazardous and harmful drinking and illicit drug use across the three immigrant generations. First-generation youth report less harmful drinking on average and are less likely to use illicit drugs than second-generation youth, while second-generation youth report less drinking and drug use than their third-generation counterparts. In contrast, the main difference in delinquency and distress across immigrant generations is between first and second generations, with no significant difference between second-generation and third-generation youth. However, whereas mean delinquency is lower, symptoms of psychological distress are greater among first-generation than second-generation youth.

Table 2. Variable Means/Percentages by Adolescent Outcomes

	Harmful Drinking Mean (95% CI)	Illicit Drug Use % (95% CI)	Delinquency Mean (95% CI)	Distress Mean (95% CI)
Immigrant generation				
1 st generation	1.9 ^a (1.4-2.3)	17.1 ^a (13.2-21.7)	.06 ^a (.04-.07)	.20 ^a (.18-.23)
2 nd generation	2.7 ^b (2.3-3.1)	24.7 ^b (20.7-29.1)	.08 ^b (.07-.09)	.17 ^b (.15-.18)
3 rd & later generation	4.1 ^c (3.6-4.5)	33.2 ^c (30.5-36.0)	.08 ^b (.07-.09)	.16 ^b (.15-.17)
Age 15	3.3 (2.8-3.8)	30.8 (27.0-34.7)	.09 (.07-.11)	.17 (.15-.19)
Sex				
Female	3.1 (2.8-3.5)	27.4 (24.6-30.3)	.09 ^a (.08-.11)	.22 ^a (.20-.23)
Male	3.4 (2.9-3.9)	28.5 (25.0-32.2)	.06 ^b (.05-.07)	.13 ^b (.12-.14)
Parental structure				
Two biological parents	3.0 ^a (2.7-3.4)	25.4 ^a (23.0-27.9)	.07 ^a (.06-.08)	.16 ^a (.15-.17)
Other	3.9 ^b (3.2-4.5)	34.3 ^b (29.5-39.4)	.10 ^b (.09-.12)	.21 ^b (.19-.22)
Area of residence				
Urban	3.2 (2.7-3.6)	27.6 (24.5-31.0)	.08 (.07-.09)	.17 (.16-.18)
Rural	3.9 (3.3-4.5)	29.8 (24.3-36.0)	.08 (.07-.10)	.17 (.14-.19)
Parental education				
University degree	3.0 ^a (2.5-3.4)	24.5 ^a (20.9-28.4)	.07 ^a (.06-.08)	.16 ^a (.14-.17)
Less than university	3.9 ^b (3.4-4.3)	34.7 ^b (31.4-38.1)	.09 ^b (.08-.10)	.19 ^b (.17-.20)
Don't know	1.6 ^c (1.2-2.0)	11.3 ^c (8.5-15.6)	.05 ^c (.03-.06)	.15 ^a (.12-.17)
N	3882	4012	3938	3999

Note: Within a given column and category of predictor variable (e.g., sex), means and percentages with different superscript letters indicate a statistically significant group difference at p<0.05 level.

Results from multivariate regression analyses are outlined in Table 3. Results for harmful drinking indicate significant differences between immigrant generations in levels of drinking after adjustments for select socio-demographic factors. Such differences, however, are moderated by age as evident by the statistically significant coefficient for the age by first-generation interaction term. An illustration of this interaction (Figure 1) shows there are increasing differences in drinking between generations with increasing age, particularly between first and second generations. The curvilinear nature of the relationship is also evident as there is some tapering off in drinking in late adolescents, particularly among the first generation.

As with harmful drinking, the odds of illicit drug use increase across immigrant generations. Compared to second-generation youth, the odds of drug use are actually 1.5 times greater among third and later generations and .51 times less among first-generation youth after adjusting for socio-demographic factors. Unlike harmful drinking, however, the relationship between immigrant generation and drug use did not significantly vary by age, although age has an influence on drug use.

Results for delinquency and distress indicate that first-generation youth engage in less delinquent activities and report greater symptoms of psychological distress than second-generation youth, controlling for socio-demographic characteristics. In addition, there are no significant differences in delinquency or distress between second- and third-generation youth. Neither age nor sex is a significant moderator.

DISCUSSION

The main objective of this study was to examine differences in psychological and behavioural outcomes among adolescents of diverse

immigrant generations in Ontario. A particular strength of this study is that the data represent a school-based sample of adolescent students in a region with the highest concentration of immigrants (approximately 55%) in Canada. Given the high concentration of immigrants within the country, and particularly the province of Ontario, the well-being of first- and second-generation immigrant students is of particular importance on multiple levels. Results of this study highlight the complex nature of the relationship between immigrant generation and health and behavioural outcomes. Although foreign-born adolescents, relative to their native-born counterparts, report more symptoms of psychological distress, they report fewer health risk behaviours. This suggests that the nature of differences between foreign- and native-born adolescents varies across outcomes. Also significantly, results indicate that psychological and behavioural outcomes do not consistently improve or deteriorate across immigrant generations.

Findings with regard to symptoms of psychological distress are consistent with some earlier studies that found greater psychological distress among the foreign-born.^{9,21} There are other studies, however, that found less distress among the foreign-born^{10,11,14,22} or no difference in distress between foreign- and native-born.⁸ Although studies by both Ali²² and Beiser et al.¹⁰ involved Canadian data on a national level, the ages of the sample were different, with the former focusing on individuals 15 and older and the latter focusing on 4-11 year olds.

Findings indicating greater delinquent activities among the native-born are generally consistent with earlier studies,^{8,12,23} although this study indicates little difference in delinquency between native-born youth, specifically those with foreign-born compared to native-born parents. Results with regard to substance

Table 3. Psychological and Behavioural Outcomes Regressed on Immigrant Generation and Socio-demographic Factors

	Hazardous and Harmful Drinking ^a (n=3882) b (s.e.)	Illicit Drug Use (n=4012) O.R. (95% CI) ^b	Delinquency ^a (n=3938) b (s.e.)	Psychological Distress (n=3999) b (s.e.)
Immigrant generation ^c				
1 st generation	-.343*** (.067)	.51 (.37-.71)	-.038** (.014)	.035** (.012)
3 rd & later generation	.328*** (.070)	1.5 (1.2-1.8)	.015 (.009)	-.013 (.009)
Female	-.027 (.053)	.93 (.78-1.1)	-.061*** (.009)	.089*** (.010)
Age ^d	.287*** (.022)	1.6 (1.5-1.7)	.016*** (.002)	.018*** (.003)
Age ^d -squared	-.021** (.006)		-.005*** (.001)	-.003* (.001)
Two biological parents	-.171**	.70	-.050***	-.045***
Parental education ^e	(.059)	(.59-.83)	(.011)	(.009)
University	-.047 (.050)	.79 (.65-.96)	-.017 (.010)	-.021* (.010)
Don't know	-.326*** (.055)	.40 (.28-.56)	-.055*** (.013)	-.016 (.015)
Interactions				
Age x 1 st generation	-.113** (.035)			
Age x 3 rd generation	.044 (.028)			
Constant	1.429		.253	.182
R ²	.261		.064	.073

*** p<0.001; ** p<0.01; * p<0.05.

Rural residence is non-significant and is excluded from table. Unstandardized coefficients.

a Square root transformed measures.

b Odds ratios with 95% confidence intervals in brackets.

c Reference category is second generation. As such, the hazardous and harmful drinking predicted score of 15 year old students is .12 (.343²) less among first-generation than second-generation youth adjusting for socio-demographic factors.

d Age is centered.

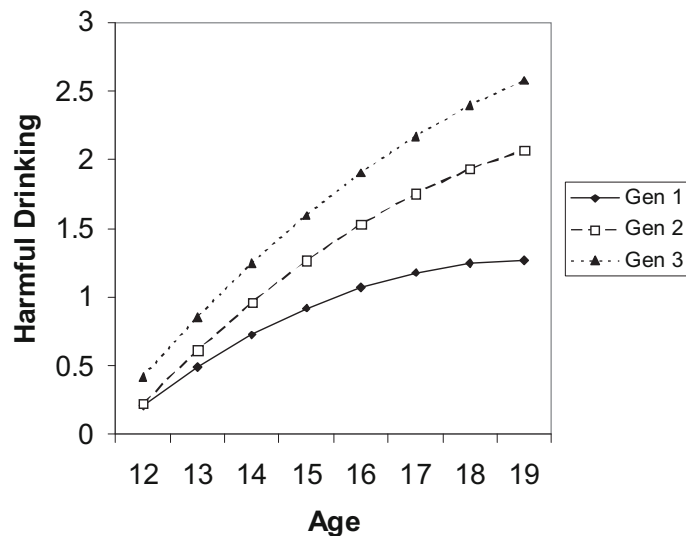
e Reference category is less than university education.

use are generally consistent with other studies indicating greater prevalence rates of substance use among the native-born.²⁴⁻²⁷

Important limitations of the study should be noted. First, data are unavailable on respondents' length of residence or age at arrival in Canada, thus an important aspect of acculturation cannot be considered in analyses. Second, data are unavailable on the race or ethnicity of the sample. The ethnic diversity of the population, especially in urban areas of the province, and the likely differences in racial and ethnic composition of the different immigrant generations suggest that unobserved differences in composition may account for some of the generational differences reported. Third, the sample was restricted to students within the regular school systems and, therefore, does not represent approximately seven percent of students.¹⁶ Additionally, the student non-completion rate due to absenteeism and lack of parental consent may have biased the sample to some degree.

The increasing proportion of first- and second-generation immigrant youth in middle and high schools means an increase in the proportion of students adapting to a new country, struggling with identities, and struggling between old and new values and ways of life, at the same time that they are challenged by the usual barrage of issues encountered during the adolescent years. Given that a successful transition into adulthood is dependent on successfully maneuvering through adolescence, it is important to acquire knowledge about the adjustment levels of these two important population groups. Such knowledge is necessary to develop policies and programs aimed at curbing and preventing maladjustment and promoting the health of individuals, families, and the systems upon which they depend.

Figure 1. Age variations in the association of immigrant generation and hazardous and harmful drinking



REFERENCES

1. Canadian Council on Social Development. The Progress of Canada's Children and Youth. Ottawa, ON: CCSD, 2006.
2. Gil AG, Vega WA, Dimas JM. Acculturative stress and personal adjustment among Hispanic adolescent boys. *J Community Psychol* 1994;22:43-55.
3. Vega WA, Amaro H. Latino outlook: Good health, uncertain prognosis. *Annu Rev Public Health* 1994;15:39-67.
4. Portes A, Rumbaut RG. *Immigrant America: A Portrait*. Berkeley, CA: University of California Press, 1996.
5. Malzberg B, Lee ES. *Migration and Mental Disease: A Study of First Admissions to Hospitals for Mental Disease, New York, 1939-1941*. New York, NY: Social Science Research Council, 1956.

Appendix Description of variables used in analyses

Variable	Description	Coding
Immigrant generation	First generation Second generation Third and higher generation	Dummy variable (1=yes, 0=no) Reference category Dummy variable (1=yes, 0=no)
Age	Age in years (12-19)	Mean centred
Sex	Biological sex	Female=1, male=0
Family structure	Current living arrangements	Two biological/adoptive parents=1, other=0
Parental education	At least 1 parent with a university degree No parent with a university degree Don't know education of parents	Dummy variable (1=yes, 0=no) Reference category Dummy variable (1=yes, 0=no)
Urbanicity	Residence in urban or rural area	Rural residence=1, urban=0
<i>Dependent measures</i>		
Hazardous and harmful drinking	Alcohol Use Disorders Identification Test used to identify problem drinkers with the least severe alcohol use. Higher scores indicate more harmful drinking	Summed responses to 10 items (0-34, median=1)
Illicit drug use	Use of any of 11 illicit drugs (excluding inhalants, meds, and club) during a 12-month period	Use of at least 1 illicit drug (1=yes, 0=no)
Delinquency	Participation in 13 delinquent acts (e.g., damaged property, theft, assault, breaking and entering, carrying a weapon). Higher scores indicate greater delinquency	Score derived by averaging responses across at least 7 of 13 delinquency items
Psychological distress	12-item General Health Questionnaire. Higher scores indicate higher distress	Responses to at least 6 items were averaged to derive a score

6. Rutter M, Yule W, Berger M, Yule B, Morton J, Bagley C. Children of West Indian immigrants: Rates of behavioral deviance and psychiatric disorder. *J Child Psychol Psychiatry* 1974;15:241-62.

7. Bagley C. Deviant behavior in English and West Indian school children. *Res Educ* 1972;8:47-55.

8. Hamilton HA. *Health and Well-Being Among Immigrant Youth*. New York: LFB Scholarly, 2005.

9. Kao G. Psychological well-being and educational achievement among immigrant youth. In: Hernandez DJ (Ed.), *Children of Immigrants: Health, Adjustment, and Public Assistance*. Washington, DC: National Academy Press, 1999;410-77.

10. Beiser M, Hou F, Hyman I, Tousignant M. Poverty, family process, and the mental health of immigrant children in Canada. *Am J Public Health* 2002;92:220-27.

11. Harker K. Immigrant generation, assimilation, and adolescent psychological well-being. *Social Forces* 2001;79:969-1004.

12. Harris KM. Health status and risk behaviors of adolescents in immigrant families. In: Hernandez DJ (Ed.), *Children of Immigrants: Health, Adjustment, and Public Assistance*. Washington, DC: National Academy Press, 1999;286-347.

13. Rumbaut RG. Paradoxes (and orthodoxies) of assimilation. *Sociol Perspect* 1997;40:483-511.

14. Rumbaut RG. Ties that bind: Immigration and immigrant families in the United States. In: Booth A, Crouter AC, Landale N (Eds.), *Immigration and the Family: Research and Policy on U.S. Immigrants*. Mahwah, NJ: Lawrence Erlbaum Associates, 1997;3-46.

15. Chui T, Tran K, Maheux H. Immigration in Canada: A Portrait of the Foreign-Born Population, 2006 Census (Statistics Canada, Catalogue 97-557-XIE). Ottawa, ON: Statistics Canada, 2007.

16. Adlaf EM, Paglia-Boak A. Drug Use Among Ontario Students, 1977-2005: Detailed OSDUS Findings (CAMH Research Document Series No. 16). Toronto, ON: Centre for Addiction and Mental Health, 2005.

17. Saunders JB, Aasland OG, Babor TF, De La Fuente JR, Grant M. Development of the Alcohol Use Disorders Identification Test (AUDIT): WHO collaborative project on early detection of persons with harmful alcohol consumption. *Addiction* 1993;88:791-804.

18. Goldberg DP. *The Detection of Psychiatric Illness by Questionnaire*. Oxford, UK: Oxford University Press, 1972.

19. StataCorp. *Stata Statistical Software: Release 9.0*. College Station, TX: StataCorp, 2005.

20. Aiken LS, West SG. *Multiple Regression: Testing and Interpreting Interactions*. Newbury Park, CA: Sage, 1991.

21. Rumbaut RG. The crucible within: Ethnic identity, self-esteem, and segmented assimilation among children of immigrants. *Int Migration Rev* 1994;28:748-94.

22. Ali J. Mental health of Canada's immigrants. Supplement to Health Reports (Statistics Canada, Catalogue 82-003), 2002;13.

23. Gibson MA, Ogbu JU. *Minority Status and Schooling: A Comparative Study of Immigrant and Involuntary Minorities*. New York: Garland Publishing Inc., 1991.

24. Gfroerer JC, Tan LL. Substance use among foreign-born youths in the United States: Does the length of residence matter? *Am J Public Health* 2003;93:1892-95.

25. Vega WA, Gil AG, Zimmerman RS. Patterns of drug use among Cuban-American, African-American, and white non-Hispanic boys. *Am J Public Health* 1993;83:257-59.

26. Blake SM, Ledsy R, Goodenow C. Recency of immigration, substance use, and sexual behavior among Massachusetts adolescents. *Am J Public Health* 2001;91:794-98.

27. Canadian Council on Social Development. Immigrant Youth in Canada, 2007. Available online at: <http://www.ccsd.ca/subsites/cd/docs/iy/index.htm> (Accessed May 24, 2007).

Received: April 11, 2008
Accepted: January 9, 2009

RÉSUMÉ

Objectif : Examiner les disparités entre la consommation alcoolique dangereuse et dommageable, l'usage illicite de drogues, la délinquance et la détresse psychologique pour trois générations de jeunes immigrants.

Méthodes : Les données relatives à 4 069 étudiants ont été dérivées du Sondage de 2005 sur la consommation de drogues parmi les élèves de l'Ontario, une enquête scolaire provinciale réalisée auprès d'étudiants de la 7^e à la 12^e année. Le sondage a utilisé une méthode de grappes à deux étages (école, classe). Les analyses comprennent des ajustements pour la conception de sondage complexe, et plus particulièrement une stratification, des grappes et des pondérations.

Résultats : L'usage des drogues et la consommation alcoolique dangereuse et dommageable sont en hausse dans toutes les générations d'immigrants. Les jeunes de première génération présentent un usage beaucoup moins marqué que ceux de la deuxième génération qui, à leur tour, consomment moins que les jeunes de la troisième génération et des générations suivantes. Les différences entre les générations sur le plan des niveaux de consommation alcoolique dangereuse et dommageable augmentent en fonction de l'âge. La délinquance chez les jeunes de la première génération est beaucoup moins marquée que chez les jeunes immigrants des générations suivantes. Les symptômes de détresse psychologique chez les jeunes de la première génération sont beaucoup plus fréquents que chez les jeunes immigrants des générations suivantes.

Conclusion : La nature des différences entre les adolescents étrangers et les adolescents nés au pays varie selon le comportement. À ce titre, il est important de mieux connaître les niveaux d'ajustement de ces deux groupes à l'égard des composantes particulières du mieux-être. Ces connaissances sont nécessaires pour élaborer les politiques et les programmes qui favoriseront la santé émotive et comportementale.

Mots clés : immigrants; adolescents; consommation d'alcool et de drogues; délinquance; détresse psychologique; Ontario