Creating an Index of Civic Marginalization as a Predictor of Well-Being

among Immigrant Young Adults

Cultural Studies

CL105

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Abstract

First generation immigrant young adults often face challenges in accessing social, civic, and economic opportunities. These challenges are especially common among undocumented individuals and include lack of information about social and economic systems, lack of eligibility to receive social services or obtain employment, and fear of stigma or legal consequences. While engagement with social and civic systems (i.e. civic engagement) among this population has been studied descriptively (Barber, Torney-Purta, &Wilkenfield, 2007; Perez, Espinoza, Ramos, Coronado, & Cotes, 2010), it has not been studied as a predictor of well-being or a protective factor against the risks associated with immigrant/undocumented status. The present study uses sample of 109 non-citizen young adults from the National Longitudinal Study of Adolescent to Adult Health (Add Health) (Harris &Udry, 2014) to descriptively increase understanding of the extent to which non-citizens face marginalization from important systems that could aid them in their transition to early adulthood, and the extent to which a lack of civic marginalization might be a protective factor against some of the risks associated with immigrant and undocumented status. A quantitative index of civic marginalization was created to measure the degree to which non-citizens in the sample are not accessing civic rights and opportunities which are available to documented citizens. Regression was used to test for a relationship between the civic marginalization index and outcomes in five domains of well-being (mental health, future expectations, economic well-being, educational attainment, and drinking behaviors). Results show that higher levels of civic marginalization significantly predict worse economic outcomes, but do not significantly predict outcomes in the other four domains. These findings have important implications for the development of services specifically for immigrant young adults and their families which can improve their access to economic opportunities or

provide economic assistance to them (especially to those who are not eligible for existing economic services), while still being mindful of the specific challenges and risks of potential legal consequences they may face.

Introduction

Young people who are first generation immigrants face a large number of challenges as they transition from adolescence to adulthood. While this developmental time period is thought to be challenging for any individual, it is more so for immigrant young adults. In addition to other challenges such as facing stigma against one's immigrant status or dealing with issues of cultural acclamation, having first generation immigrant status can also present logistical and practical challenges. For example, this specific group of young adults may have less knowledge about, experience with, or access to some of the civic and social systems with which they must learn to engage to become functional adults (e.g. job market, higher education systems, insurance market, banking industry). Thus, as immigrant young adults seek to transition to adulthood, as defined economically, and socially, they are often at a disadvantage compared to their non-immigrant peers. These challenges stand out even more for undocumented immigrants.

There are approximately 1.1 to 1.5 million undocumented students in the United States (Martinez, 2014), with 17% of undocumented immigrants under the age of 18. In 2008, there were 4 million children who were citizens of undocumented immigrants (Martinez, 2014). These statistics are thought to be fairly unreliable because these people are not very open to revealing their status. Undocumented immigrants have even less access to social, civic, and economic systems, because they are explicitly forbidden from participating in some forums (e.g. voting, obtaining a driver's license, receiving many social services), and they often have even less

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information and knowledge about the opportunities and services that they could access. Even those who have knowledge about services and civic and economic activities in which they could engage feel restricted from engaging with them due to fear of exposing their immigrant status and facing legal ramifications. These factors, in combination with prejudice and stigma against their undocumented status, and constant fear of discovery, can often lead to isolation, marginalization, and stress. The stress of this kind of isolation, stigma, and fear of exposure could be detrimental to their mental and emotional well-being or even lead to engagement in risk behaviors (e.g. excessive drinking or drug use) (Unger, Baezconde-Garbanati, Shakib, Palmer, Nezami, &Mora, 2004), while the isolation and exclusion from social services, job markets, health insurance policies, and other social systems could lead to poor economic and physical outcomes.

There has been a fair amount of qualitative research done on feelings of restriction among undocumented youth. Abrego (2008; 2011) has qualitatively studied the concept of "legal consciousness" and the extent to which undocumented immigrants are fearful of consequences of their status, finding that first generation undocumented individuals are very fearful, while 1.5 generation individuals are more concerned with stigma and with their inability to access certain rights and privileges available to others. Those undocumented young people who are students have found their school life difficult (Gonzales, 2010; Gonzales, 2011). They feel ashamed of their immigration status. Some students reported qualitatively:''I hate how they call us illegal aliens.'' "They call us 'illegals' and they think we're committing crimes all the time and we're not.'' (Gonzales, 2010) In tracked education systems, the consequences of undocumented status are often greater, as undocumented students are far more likely to be put into less advanced or even remedial tracks. Qualitative research finds that the experiences of negatively tracked

students stand in direct contrast to their positively tracked peers. Most of these "negatively tacked" undocumented students reported feeling disconnected to school, not having significant relationships with teachers (Gonzales, 2010). Students reported that this disconnection occurred for a variety of reasons. Among the general or lower tracks, students felt as though they were negatively labeled, left to fall through the cracks and shut out of many important services. They received no attention and felt that there was bias against them (Gonzales, 2010).

According to a qualitative study of resilience among undocumented students,the unique psychosocial stressors these students face (e.g. poverty, invisibility, isolation stigma, inadequate preparation for college, limited employment opportunities, and lack of awareness and recognition of their status by educators) were thought to be risk factors both for short term mental health issues and a lower likelihood of attaining higher education (Parker, 2009). Other studies have found similarly that undocumented and first generation immigrants are at higher risk for mental health problems (e.g. Garrisona, Roya, &Azara, 1999; Gonzales, Suárez-Orozco, &Dedios-Sanguineti, 2013; James, 1997; Sullivan &Rehm, 2005; Yearwood, Crawford, Kelly, & Moreno, 2007) and for lower educational attainment (e.g.Chan, 2010; Collins & Reid, 2009; Crosnoe& Lopez Turley, 2011;Guyll, Madon, Prieto, &Scherr, 2010; Pérez, Cortés, Ramos, & Coronado, 2010; Perez, 2009; Potochnik, 2014).

A lack of isolation, such as in the form of social support (Parker, 2009) or parental support (Kao, 2004) has been reported in qualitative literature to serve as a protective factor against poorer mental health outcomes, suggesting that marginalization and isolation are important constructs to understand in assessing risk. While engagement with social and civic systems (i.e. civic engagement) among immigrant and undocumented young adults has been studied descriptively (Barber, Torney-Purta, &Wilkenfield, 2007; Gill, Gallay, Flanagan,

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&Cumsille, 2007; Perez, Espinoza, Ramos, Coronado, & Cotes, 2010), it has not been studied as a potential predictor of well-being or protective factor against the risks associated with immigrant or undocumented status. This is a significant gap in the literature given the great deal of theoretical attention given to the idea that isolation and marginalization (i.e. lack of civic, social, and economic engagement) contributes largely to the risk for poorer outcomes faced by first generation and undocumented immigrants.

The present study addresses this gap in the literature by creating a new index of civic marginalization (i.e. lack of engagement with social, civic, and economic systems and opportunities) and using it to predict the well-being of a nationally representative sample of non-citizen immigrant young adults in the United States. It aims to descriptively increase understanding of the extent to which non-citizens do face marginalization from important systems that could aid them in their transition to early adulthood, and of the extent to which a lack of civic marginalization might be a protective factor against some of the risks associated with immigrant and undocumented status. The present study will pose and answer the following research question: Among a nationally representative sample of non-citizen immigrant young adults, does higher civic marginalization predict poorer outcomes in the domains of educational attainment, economic outcomes, risky or problematic drinking behaviors, psychological well-being, and expectations for the future?

Methods

Data from this study comes from the National Longitudinal Study of Adolescent to Adult Health (Harris &Udry, 2014), 1994-2008, which collected data from a nationally representative sample of adolescents in grades 7-12 in the United States during the 1994-1995 school year. The

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individuals in Add Health cohort have been followed for 14 years (through 2008, when the

sample was 24-32) into young adulthood. Add Health combines data on the respondents'

socioeconomic, physical, and psychological background with data on their families,

neighborhoods, communities, schools, friendships, peer groups, and romantic relationships to

study how social environments and behaviors in adolescence correlate to health and achievement

outcomes in young adulthood.

The public use Wave 3 data set includes 4882 participants. Of these, 109 indicated that

they were not born US citizens and had not become US citizens. Only these 109 non-citizens

were utilized for the present study. The age range of the full Wave 3 sample was 18-28, but the

age range of the present sample of 109 people was 19-28.

In order to assess the degree to which immigrant young adults are civically marginalized,

an index of marginalization was created. It is intended to measure the degree to which non-

citizens in the sample aren't accessing civic rights and opportunities which are available to

documented citizens. It is therefore an imperfect proxy for undocumented status, as it capture the

degree to which these individuals are shut out of rights and activities which require at least

documentation, and sometimes also permanent resident status. A survey was first made to create

the index. There are a total of 8 constructs that were included in the index.

1. Is not trying to become a US citizen

2. Is not registered to vote

3. Did not file a tax return during the last 12 months

4. Do not know if they are conservative, liberal, or middle of the road OR Do not identify with political party or don't know if they do

5. Does not drive (has not driven since 1995) OR Does not have a car

6. Has had health insurance 0 months out of the last 12 months OR Said "I have no health insurance" best describes their current situation

7. Household Income less than $20,000 but does not receive food stamps or other government assistance

8. Does not have any financial accounts at all (including checking, savings, and credit card accounts)

Eight dichotomous variables were created indicating whether or not each of the aboves was true for each participant. These variables were then summed, such that the values of the index could range from 0-8. However, the civic marginalization scores ranged from 1-6 for the present sample, indicating that no one within the sample participated in all these activities, but also no one was excluded from all of them.

The "Center for Epidemiologic Studies- Depression Scale (CES-D)" (Sawyer, 1977) was used to measure self-reported depression. This well-cited and validated scale is comprised of 9 items from the questionnaire which ask respondents to rate, using a 4-point Likert scale, the extent to which they felt depressed and bothered during the past 7 days. Two of the 9 items were worded in the reverse direction, so they were reverse coded, such that their values would indicate depression in the same direction as the other items. The respondents' mean responses to these items were utilized for the present study. Reliability analyses revealed a high internal consistency rating among the 9 items for the present sample (Cronbach's $\alpha = .807$).

The negative future expectations scale is comprised of 6 items from the questionnaire which ask respondents to rate, using a 5-point Likert scale, their life expectancy, their future marital status, their future economic status, and the future chances of contracting HIV or AIDS. Two of the 6 items were worded in the reverse direction, so they were reverse coded,

such that their values would indicate negative expectations in the same direction as the other items. The respondents' mean responses to these items were utilized for the present study. Reliability analyses revealed a poor internal consistency rating among the 9 items for the present sample (Cronbach's α = .313).

Economic stability was measured using 9 items from the questionnaire of Wave 3. For these items, respondents indicated whether or not they had certain assets. They also indicated, in the past 12 months, if there ever was a time they were financially unable to support themselves. These items were reverse coded such that high values would indicate greater stability. The respondents' mean responses to these items were utilized.

Personal income was measured using 1 item from the Wave 3 questionnaire. As part of the questionnaire, respondents indicated their total personal income before taxes for the previous year, which spanned 2000-2001.

Highest education level was measured using a set of 7 items from the questionnaire of Wave 3. As part of the questionnaire, respondents indicated whether they received any academic degrees or diplomas. The respondents then indicated, using dichotomous items which specific degrees they had obtained. Dichotomous items were recoded on an ordinal scale where 0 indicated no degrees and 7 indicated the highest possible degree (PhD or professional degree).

Problem drinking was measured first as a comprehensive index of variety of drinking behaviors, using a set of 6 items from the Wave 3 questionnaire. Six dichotomous variables were created indicating whether or not respondents reported behaviors indicative of problem drinking. These variables were then summed, such that the values of the index could range from 0-6. A higher score meant that they had done more behaviors indicative of problem drinking, with 0

indicating no problem drinking behaviors and 6 indicating report of all problem drinking behaviors.

Specific drinking behaviors were also used as individual measures and analyzed as specific outcomes. Specifically, drinking frequency, drunkenness, and number of drinks at a time were measured using 3 items from the questionnaire of Wave 3. As part of the questionnaire, respondents indicated, on a Likert scale of frequency, how often they had consumed alcohol or had been drunk in the last 12 months. Respondents reported a numeric open-ended response indicating the number of drinks they usually had a time when drinking during the past 12 months. The respondents' mean responses to these items were utilized. High numbers meant that they reported drinking more frequently.

Drinking which caused problems in the respondents' lives was measured using 3 items from the questionnaire of Wave 3. As part of the questionnaire, respondents indicated, on a scale of 0-4, how many times drinking caused problems in a certain area of their lives (e.g. in their relationships, at work or school). A dichotomous item was created such that a score of 0 indicated drinking did not cause any problems, and a score of 1 indicated that drinking caused problems in at least one of the three life areas measured by the 3 items.

Results

Descriptive statistics for all study variables can be found in Table 1. Individuals in the present sample of non-citizens score between 1 and 6 on the civic marginalization index. The mean score on this measure was 2.75 (S.D. = 1.08). The range of scores on the depression scale was from 0 to 2, with a mean of 0.51 (S.D. = 0.43). The range of score on the negative future expectations scale was from 0.50 to 3, with a mean of 1.41 (S.D. = 0.60). Individuals in our

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sample spanned the full range of possible education attainment values (0-6), with a mean 1.81

(S.D. = 1.21). Income among the sample ranged from no income to $41,000, with a mean of

$13,440.94 (S.D. = $11,013.32). The range of scores on the economic stability scale was from

0.33 to 1, with a mean of 0.79 (S.D. 0.13). The range of problem drinking index was from 0 to 3,

with a mean of 0.45 (S.D. 0.75). Please refer to Table 1 for descriptive statistics for the other

specific measures of drinking.

Simple linear regression was used among the sample of 109 non-citizens to test for a

relationship between civic marginalization and each of five domains (mental health, economic

well-being, future expectations, educational attainment, and drinking behaviors) of adult well-

being. For each indicator of well-being within these domains, the following regression equation

was used: $Y = \beta_0 + \beta_1 + \varepsilon$, where β_1 = civic marginalization, ε = the error or unexplained variance,

and Y = the specific measure of well-being used for each outcome. Regression findings are

reported by domain below.

To test for a relationship between civic marginalization and mental health, a regression

model was tested in which the civic engagement index was used as an independent variable, and

the measure of depression was used as the outcome variable. The regression coefficient for civic

marginalization, predicting depression, was not statistically significant ($\beta = 0.100$; S.E. = 0.039;

$p = 0.305$), indicating that civic marginalization does not significantly predict depression. This

finding is contrary to my hypotheses based on the literature.

To test for a relationship between civic marginalization and future expectations, a

regression model was tested in which the civic engagement index was used as an independent

variable, and the measure of negative future expectations was used as the outcome variable. The

regression coefficient for civic marginalization, predicting negative future expectations, was not

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statistically significant ($\beta = 0.098$; S.E. = 0.065; p = 0.431), indicating that civic marginalization does not significantly predict future expectations. This finding is contrary to my hypotheses based on the literature.

To test for a relationship between civic marginalization and educational attainment, a regression model was tested in which the civic engagement index was used as an independent variable, and the measure of education level was used as the outcome variable. The regression coefficient for civic marginalization, predicting educational level, was not statistically significant ($\beta = -0.107$; S.E. = 0.108; p = 0.267), indicating that civic marginalization does not significantly predict education level. This finding is contrary to my hypotheses based on the literature.

To test for a relationship between civic marginalization and drinking behaviors, four different regression models were used, each with a different specific outcome variable measuring a different component of alcohol use or problem drinking, and each which used the civic engagement index as an independent variable. First, a regression model was tested in which the problem drinking index was used as the outcome variable. The regression coefficient for civic marginalization, predicting the problem drinking index, was not statistically significant ($\beta = 0.081$; S.E. = 0.067; p = 0.400), indicating that civic marginalization does not significantly predict problem drinking. Next, a regression model was tested in which drinking frequency was used as the outcome variable. The regression coefficient for civic marginalization, predicting drinking frequency, was not statistically significant ($\beta = 0.096$; S.E. = 0.110; p = 0.414), indicating that civic marginalization does not significantly predict drinking frequency. Then, a regression model was tested in which drinking caused problems was used as the outcome variable. The regression coefficient for civic marginalization, predicting drinking caused problems, was not statistically significant ($\beta = -0.134$; S.E. = 0.016; p = 0.165), indicating that

civic marginalization does not significantly predict drinking frequency. Finally, a regression model was tested in which the number of drinks typically consumed at one time was used as the outcome variable. The regression coefficient for civic marginalization, predicting the number of drinks typically consumed at one time, was not statistically significant ($\beta = 0.140$; S.E. $= 0.301$; $p = 0.152$), indicating that civic marginalization does not significantly predict the number of drinks typically consumed at one time. These findings are contrary to my hypotheses based on the literature.

To test for a relationship between civic marginalization and economic well-being, two different regression models were used, each with a different specific outcome variable measuring economic status, and each which used the civic engagement index as an independent variable. First, a regression model was tested in which the continuous measure of personal income was used as the outcome variable. The regression coefficient for civic marginalization, predicting personal income, was statistically significant ($\beta = -0.305$; S.E. $= 1152.309$; $p = 0.003$), indicating that there is a significant negative relationship between these two variables. Specifically, higher levels of civic marginalization significantly predict lower personal income amounts. Next, a regression model was tested in which economic stability was used as the outcome variable. The regression coefficient for civic marginalization, predicting economic stability, was statistically significant ($\beta = -0.250$; S.E. $= 0.011$; $p = 0.009$), indicating that there is a significant negative relationship between these two variables. Specifically, higher civic marginalization significantly predicts less economic stability. These findings support my hypotheses based on the literature.

Discussion

The present study of civic marginalization among immigrant young adults represents an

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important first step towards addressing a gap in the literature on this population. The extant literature contains qualitative research studies which have shown that first generation immigrant young adults, and especially undocumented young adults, feel stigmatized and isolated from civic activities (Barber, Torney-Purta, &Wilkenfield, 2007; Gill, Gallay, Flanagan, &Cumsille, 2007; Perez, Espinoza, Ramos, Coronado, & Cotes, 2010). However, no extant studies have developed a way to quantify this marginalization as it manifests in multiple form in the lives of immigrant young adults. So, in order to address this gap and to assess the degree to which immigrant young adults are civically marginalized, the present study created a new index of civic marginalization. This index measured the degree to which non-citizens in the Add Health sample were not accessing civic rights and opportunities which are available to documented citizens and in some cases, to documented immigrants. It is therefore an imperfect proxy for undocumented status, as it captures the degree to which these individuals are shut out of rights and activities which require at least documentation, and sometimes also permanent resident status.

The present study also addressed a gap in the literature by using civic marginalization as a predictor of outcomes assessing well-being in multiple domains. Results show that there are significant relationships between the index and some of the outcomes. Although the work was a bit exploratory, since these relationships have not been previously tested, a priori hypotheses were not made about the specific direction of the hypothesized relationships. However, the general hypothesis was that the index would significant predict some of all of the outcomes, based upon the extant qualitative literature describing the challenges that immigrant young adults face (e.g. higher risk for mental health problems) (e.g. Garrisona, Roya, &Azara, 1999; Gonzales, Suárez-Orozco, &Dedios-Sanguineti, 2013; James, 1997; Sullivan &Rehm, 2005; Yearwood, Crawford, Kelly, & Moreno, 2007) and for lower educational attainment (e.g.Chan, 2010;

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Collins & Reid, 2009; Crosnoe& Lopez Turley, 2011;Guyll, Madon, Prieto, &Scherr, 2010;

Pérez, Cortés, Ramos, & Coronado, 2010; Perez, 2009; Potochnik, 2014), and based upon

theoretical logic. Findings of the present study were partially consistent with this non-directional

hypothesis, with civic marginalization index significantly predicting the outcomes in the

economic domain, but not significant predicting outcomes in any of the other domains.

Specifically, higher scores on the civic marginalization index predicted lower personal and less

economic stability. These findings are consistent with the non-directional hypothesis based on

the literature and on the theoretical idea that not being able to engage in certain social and

economic opportunities based on one's immigrant status could lead to a reduced ability to earn

and maintain a sufficient income.

These finding have important implications for policy and interventions. Given that civic

marginalization predicted economic well-being, policy makers and prevention scientists should

consider developing support services that can be provided to assist young adult immigrant

families. A large proportion of individuals in the present sample who had very low incomes

werenot accessing economic services for which they were eligible. This suggests that the best

support services might include helping these individuals access such services, in case in which

they are eligible. In cases in which they are not eligible, due to lack of documentation, for

example, interventions and services should be created which can help provide alternative sources

of economic and material assistance for individuals and their families. Such services should

account for the legal risks to and fears of undocumented families, and could, for example,

emphasize trust-building through community outreach in order to do so..

Future direction and Limitations. While this study is an important first step in developing

a quantitative index of the isolation and marginalization limiting social, economic, and civic

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opportunities and activities among immigrant young adults, it has a few important limitations that should be considered when interpreting its findings. First, there are other constructs that might be good measures of civic marginalization,which perhaps could or should be included in the civic marginalization index, but which were not available in the present data. While this is a limitation, the present study nonetheless provides guidance to future research on some important indicators to include in such an index. Future studies should include a fuller set of indicators of marginalization based upon theory, rather than on the availability of measures in a given data set, and should test whether the addition of new indicators to the present index improves its ability to predict outcomes among immigrant adults. A second important limitation of the present study is that the data set that was used, Add Health, was collected from 1994-2008. This data is therefore not up to date and cannot provide a clear picture of what is currently going on among immigrant young adults. This is a particularly important limitation because some of the laws about the exclusion or inclusion of individuals based on immigrant and documentation status have changed since the Wave 3 data used in the present study were collected. This limitation provides an opportunity for future research to replicate the present study with more recent data.

An additional important limitation of the present study is that some of the specific measures that were used to assess the indicators which made up the civic marginalization index were not the best possible measuresof those constructs. There may be other components that could give significant insight into civic marginalization. For example, one of the components of the index is access to driving. This indicator was measured in the present data set using information on whether or not the individuals in the data set reported owning a car and whether or not they indicated that they had not driven in the past two years. This construct would likely be more accurately measured if it did not depend upon car ownership, which is often highly related to

financial status. Additionally, a number of the participants reporting on car ownership and driving history could have been living in a metropolitan area where a car was no needed due to public transportation, and where not driving would not necessarily be an indicator of marginalization. It would therefore likely be better measured using data on whether or not individuals who wanted to drive were able to drive, or even by data on whether or not individuals had valid drivers' licenses. Future research should attempt to develop and utilize measures of the components of the marginalization index which are specific to the purpose of creating the index, so that they can be measured as accurately as possible, to reflect marginalizationor a lack of wanted or needed access.

Conclusions

Research on immigrant young adults is quite important because of the challenges (e.g. stigma, economic hardships, isolation) faced by this population. These challenges are likely to create disparities between immigrants and nonimmigrants in terms of their well-being. Specifically, the present study found a specific relationship between civic marginalization and economic outcomes. This has important implications for creating improved access to existing services or alternative economic support services for immigrant young adults and their families which can address the economic difficulties that are associated with marginalization and isolation. The present study made an important first attempt at creating a quantitative index to try to measure the isolation and marginalization of this population. Although it therefore addressed an important gap in the literature, it is still an exploratory attempt to do so. Future research should expand and improve upon both the index and the set of outcomes it can be used to predict.

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Table 1. Descriptive Statistics for All Study variables (N=109)

	Minimum	Maximum	Mean	Std. Deviation
Civic Marginalization	1.00	6.00	2.75	1.081
Medical Care for Mental Health	0.00	2.00	0.38	0.74
Depression	0.00	2.00	0.51	0.43
Negative Future Expectations	0.50	3.00	1.41	0.60
Personal Income	0.00	41000.00	13440.94	11013.32
Economic Stability	0.33	1.00	0.79	0.13
Education Level	0.00	6.00	1.81	1.21

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Table 2. Results of Simple Linear Regression Analyses using Civic Marginalization as an

Independent Variable Predicting Each of the Following Outcomes

	Independent Variable: Civic Marginalization		
Outcome Variables:	***B***	***S.E.***	***p-value***
Mental Health			
Depression	0.040	0.039	0.305
Future Expectations			
Negative Future Expectations Scale	0.052	0.065	0.431
Educational Attainment			
Highest Education Level	-0.120	0.108	0.267
Drinking Behaviors			
Problem Drinking Index	0.057	0.067	0.400
Drinking Frequency	0.090	0.110	0.414
Drinking Which Caused Problems	-0.023	0.016	0.165
Number of Drinks Consumed at A Time	0.434	0.301	0.152
Economic Well-Being			
Personal Income	-3462.500 **	1152.309	0.003
Economic Stability Index	-0.030**	0.011	0.009

*Note. *** p< .001.   ** p< .01.   * p< .05*