

## The Influence of Parental Support, Knowledge, and Authoritative Parenting on Hmong and European American Adolescent Development

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### **Abstract:**

This study used a community-wide survey of adolescents to compare adolescent perceptions of parental support, knowledge, and authoritative decision making in samples of Hmong and European Americans. Additional analyses considered variation in parental influence on adolescent outcomes across these groups. The results suggested that Hmong American youth perceived less parental support and knowledge and were less likely to report authoritative decision making with parents. Parental support and knowledge were associated with higher self-esteem and grade point average (GPA) and lowered risky health behaviors in both samples. Results also suggested that authoritative decision making by mothers was a more important predictor of adolescent GPA and risky behaviors for the European American adolescents.

**Keywords:** Hmong; parenting; adolescent development; cultural socialization

### **Article:**

Demographers estimate that by the year 2050 Americans of European descent will no longer constitute a statistical majority of the U.S. population. Demographic changes, the result of unprecedented immigration from Latin America and Asia, have led to a need for greater understanding of family process and adolescent development in families from diverse cultures. Studies are especially needed to examine family relations in groups that have not been the traditional focus of family studies, such as refugees from Southeast Asia. The purpose of the current study, therefore, was to conduct a secondary data analysis of a community-wide survey of adolescents and to compare adolescent reports of parenting practices in European and Hmong American families. Moreover, a goal of the current study was to examine potential variation in the associations between parenting practices and adolescent outcomes by cultural group.

Numerous studies suggest that parenting characterized by high levels of warmth, behavioral control, and autonomy granting positively predicts a variety of desirable developmental outcomes in adolescents such as high self-esteem, academic performance, and self-reliance (Herman, Dornbusch, Herron, & Herting, 1997; Peterson, Bush, & Supple, 1999; Robinson, 1995; Steinberg, Lamborn, Dornbusch, & Darling, 1992). Parental support and control are also found to serve as protective factors that reduce the likelihood of problematic behaviors such as drug and alcohol use, delinquency, and depression (Ary et al., 1999; Barnes & Farrell, 1992; Herman et al., 1997). Parenting that encourages the development of autonomy, such as joint decision making between parents and adolescents, is frequently cited as particularly important for adolescent psychosocial development (Grotevant & Cooper, 1986; Steinberg, Lamborn, et al., 1992). Parental control characterized as excessively coercive, autocratic, and lacking in warmth, on the other hand, is typically associated with poor adolescent outcomes (such as drug use and antisocial behavior) and decreased likelihood that an adolescent develops desirable outcomes (e.g., lowered self-reliance, self-esteem, school performance; Barber, Olsen, & Shagle, 1994; DeBaryshe, Patterson, & Capaldi, 1993; Lamborn, Mounts, Steinberg, & Dornbusch, 1991; Patterson & Stouthamer-Loeber, 1984). Although a consistent body of evidence exists regarding the positive

influence of parental support and authoritative styles of control and the negative influence of authoritarian control on adolescents, some recent studies suggest that these effects are not universal across cultural groups.

Scholars question the external validity of research concerning parental influence on adolescent development when attempts are made to generalize results to families from non-Western cultures or American ethnic minority groups (Chao & Sue, 1996; Lam, 1997; Parke, 2000); that is, although aspects of authoritative parenting, such as parental warmth, autonomy granting, and democratic decision making are consistent with Western orientations emphasizing the promotion of individualism and independence, parents with more collectivistic orientations may place more emphasis on characteristics in children that emphasize group harmony and interdependence (Bush, Peterson, Cobas, & Supple, 2002; Lam, 1997; Triandis, 1989).

Parenting styles and behaviors that occur in families of Asian heritage, for example, may be more oriented toward strict, restrictive, or authoritarian control. Studies have suggested, for example, that Asian American parents are more likely to be classified as authoritarian (Dornbusch, Ritter, Leiderman, Roberts, & Fraleigh, 1987), are more controlling (Chao, 1994), and more likely to value characteristics indicative of collectivistic orientations (Julian, McKenry, & McKelvey, 1994) than parents from the majority culture. Some studies suggest that despite exposure to relatively high levels of authoritarian or controlling parenting, Asian American adolescents thrive, especially in reference to their academic achievement (Chao, 1994; Steinberg, Dornbusch, & Brown, 1992). Although these studies seem to suggest that associations between parenting and adolescent outcomes may not be generalizable to individuals of Asian descent, more recent research with samples from Hong Kong suggests that parenting measures representing key Western constructs (e.g., responsiveness, demandingness, parenting style) are associated in an expected direction with a variety of adolescent outcomes including psychological well-being, involvement in deviant behaviors, and parent-adolescent conflict (Shek, 2000, 2002, 2003). Consequently, there is mixed evidence regarding the potential generalizability of available research on parental influence and adolescent outcomes to Asian individuals.

### **Theoretical Models Positing Cultural Variation in Parenting and Parenting Effects**

Potential cultural variations in parenting and parenting effects among Asian Americans are consistent with cultural ecological models of family life (Garcia Coll, Meyer, & Brillion, 1995; Harrison, Wilson, Pine, Chan, & Buriel, 1990; Ogbu, 1981). Cultural ecological models suggest that ethno-cultural groups develop unique parental socialization strategies as a result of ancestral worldviews, adaptations to environmental conditions, and experiences living in the United States (e.g., prejudice and discrimination, economic marginalization, living in high-risk areas). Parenting practices of ethnic minority parents that may differ from Western perspectives on child rearing are considered adaptive when greater sociocultural factors and child socialization goals are considered. These arguments are particularly salient when applied to parents who emigrated to the United States as refugees. Xiong (2000), for example, argued that Southeast Asian refugees, as a result of living through life-threatening experiences, adjusting to a foreign culture, and frequently living in high-crime areas, adopt a highly restrictive parenting strategy. From the perspective of cultural ecological models, such a parenting style is considered adaptive in the context of life circumstances and cultural traditions.

### **Parental Socialization and Hmong Families**

The Hmong,<sup>1</sup> a cultural group residing in the United States primarily via emigration as refugees from Southeast Asia, have been studied by historians, anthropologists, and social workers, but not, to our knowledge, in reference to parental influence on child outcomes. Hmong parents are believed to emphasize socialization goals related to interdependence and respect for and deference to elders (Chan, 1994; Lee, 1997; Rick & Forward, 1992; Xiong, 2000). The repertoire of Hmong parental control strategies tends toward physical punishments, verbal admonishments, and a “one-way communication process” from the parent to the adolescent (Xiong, 2000). Although a few studies suggest that Hmong American parents are restrictive and autocratic with their children, these socialization practices may be viewed as adaptive strategies developed prior to emigration to the United States (Chan, 1994) and reinforced by experiences related to life as a refugee in Thailand and the United

States (Xiong, 2000). As a result, in comparison to the parenting experienced by European American adolescents, Hmong American adolescents are expected to experience parenting that is more restrictive, less open to adolescent input, highly engaged in control attempts, and less warm and supportive. These characterizations are illustrated by the following quote from a young Hmong American woman (as reported in Chan, 1994):

The kind of physical affection and words of praise that many American parents express are unknown in my family. My parents seldom converse with my sisters, brothers, and me. . . . They never tell us they love us, nor do they congratulate us when we accomplish something. They believe strongly that people should not show their feelings and emotions. (p. 125)

Although Hmong parenting is expected to be more similar to the parenting styles of other Asian American groups, data are unavailable to examine this assertion. Given the unique nature of their emigration to the United States, studies are needed to develop accurate descriptions of parental socialization processes in Hmong families.

### **Hmong American Adolescents**

Few empirical data are available regarding developmental outcomes in Hmong American adolescents. Although some popular descriptions label the Hmong as part of a larger collective of Asian model minorities (a phrase often used to depict Asian American adolescents who are high academic achievers and demonstrate low levels of delinquency), Hmong American youth are also characterized as being at risk for truancy, delinquency, and gang activity (Lee, 1997). Some scholars argued that these latter problems are more frequent among second-generation Hmong because of a process of “Americanization” or “going native,” where adolescents conform to a peer-group style that is less traditionally Hmong and more American ethnic minority (Lee, 1997; Tobin & Friedman, 1984). Hmong parents in the United States also express concerns regarding their children’s development of an “Americanized” identity, negative attitudes toward school, parents, and traditional Hmong values, and loss of parental authority over children (Faderman, 1998; Xiong, 2000). To date, no studies have compared Hmong American adolescents with European American adolescents to establish the extent to which the Hmong Americans may be considered more or less “at risk” than other racial–ethnic groups.

### **Hypotheses**

Ecological models of parental socialization suggest that as a result of their origination in more collectivistic cultures, and as a result of experiences related to life as refugees, Hmong parents should be less expressive and more controlling of their children. Based on these arguments, we hypothesize that Hmong adolescents will report lower levels of parental support, higher levels of parental knowledge, and lower rates of authoritative decision making when compared to their European American peers.

Previous research suggests cultural variation in the relationship between parenting styles and adolescent outcomes favoring authoritative styles of control for European American adolescents compared to Asian Americans. Studies examining specific parenting dimensions (i.e., support and monitoring), on the other hand, have found limited variation in the associations between these parenting behaviors and adolescent outcomes (Amato & Fowler, 2002; Herman et al., 1997; Shek, 2002). The few studies that have examined race-by-moderator variables with samples of Asian American adolescents have found that the positive effect of parental support and/or warmth on academic outcomes is similar when comparing European and Asian American adolescents (Chen, Greenberger, Lester, Dong, & Guo, 1998; Herman et al., 1997).

Studies consistently found that parental monitoring and knowledge of adolescent activities and spending is negatively associated with problem behaviors in adolescence including negative peer orientation; decreased alcohol, tobacco, and drug use; and improved academic performance (Barnes & Farrell, 1992; Baumrind, 1991; Brown, Mounts, Lamborn, & Steinberg, 1993; Herman et al., 1997), and these effects are generally found to be

invariant across cultural groups (Amato & Fowler, 2002; Herman et al., 1997). Cultural comparisons tend to be most striking when researchers compare the influence of authoritative versus nonauthoritative parenting styles on adolescent development. Recent studies suggest, for example, that authoritative parenting, operationalized as joint decision making between adolescents and parents, positively influences European American adolescents but has no influence on a range of outcomes for Asian American adolescents (Lamborn, Dornbusch, & Steinberg, 1996). Although the scientific knowledge base on Hmong families is limited, what is known leads us to hypothesize that the relationship between parental support and knowledge and adolescent outcomes will be invariant across the European and Hmong American adolescents in this sample. We do hypothesize, on the other hand, that the positive influence of authoritative decision-making styles will be stronger for the European American adolescents than for the Hmong.

We have no formal expectations regarding possible differences in adolescent outcomes between the European and Hmong American samples. The popular media have often labeled Hmong American adolescents as part of a model minority, suggesting that Hmong American youth would excel in school and score low on measures of risky health behaviors. However, other observers have noted that Hmong American adolescents, especially those living in high-risk areas, are at risk for delinquency and dropping out of school. Given this inconsistency in the literature and the lack of empirical data on the nature of risk for Hmong American adolescents, there is no clear basis for making predictions regarding differences in outcome variables for the current study.

## **Method**

### **Sample**

Data for the current study were from the 1997-1998 Teen Assessment Project (TAP), a countywide survey of adolescents in Grades 7 to 12 in a mid-western state. Adolescent self-report data were collected via questionnaire from all students in attendance on the day that researchers visited the school. This strategy resulted in a sample of 4,209 adolescents. European American (3,657 respondents) and Hmong (200 respondents) adolescents were selected from the larger sample for the current study. The sample is evenly distributed by gender and grade. The majority of the adolescents in the sample live with both biological parents (71%), and Hmong and European American adolescents are equally likely to live with two biological parents. European American adolescents more frequently live in stepfamilies and single-parent homes compared to Hmong adolescents (12% of European American adolescents report living with a stepparent vs. 4% for Hmong adolescents; 15% of European American adolescents live in a single-parent home compared to 7% of the Hmong), and Hmong adolescents are more likely to report living with adult relatives in the home or with relatives that are not biological parents. Hmong refugees have been randomly resettled throughout the United States (typically going where sponsors are located), thus the current sample likely shares cultural characteristics similar to Hmong elsewhere in the United States. The experience of Hmong adolescents and families in the United States may vary by residential location (state of residence, urbanicity), however. The sample in the current study, therefore, is most likely representative of Hmong adolescents in small cities and large towns in the Midwest.

### **Procedures**

Students completed a 148-item survey during a scheduled class period in school. Trained research staff assisted in implementing the survey, and confidentiality and anonymity guarantees were read to the students. The survey was designed to collect data on a range of risk and protective factors and developmental outcomes for adolescents and was designed by a collaborative group of “stakeholders” from the community. As a result, the measures in the questionnaire often include single-item indicators or alterations to existing measurement scales that fit the needs of the community. Items in the survey were not specifically designed to assess aspects of Hmong culture. For the current study, we selected items designed to measure adolescent perceptions of parental support, knowledge of free-time activities, decision-making style, and items assessing adolescent self-esteem, problem behaviors, school performance, and demographic controls. Questions regarding adolescent substance

use included the name of a fictitious drug (“alatrix”), and any students reporting that they are users of this “drug” were omitted from analyses reported in this article. Preliminary analyses using a confirmatory factor analysis approach demonstrated a high degree of cross-cultural equivalence for the measurement strategies of each construct in this study.

## Measures

*Parental support.* Parental support was assessed by six items designed to reflect adolescent perceptions of supportive behaviors from mothers and fathers (Small & Rodgers, 1995). A sample item included “My mother (father) is there when I need her (him).” Response options ranged from never to very often, and scores were averaged across items to create individual scores ranging from 0 to 4. This summary score demonstrated good internal consistency with Cronbach’s alpha statistics over .90 for the Hmong and European American adolescent respondents.

*Parental knowledge.* Parental knowledge was measured with eight items that assess the extent to which parents possess knowledge regarding the adolescent’s whereabouts, friends, and spending and if the adolescent is required to telephone the parents when late (Small, 2001; Small & Kerns, 1993). Response options ranged from 0 (never) to 4 (always) and are scored as a summed average across responses so that the summary variable has this same range. The Cronbach’s alpha for the knowledge variable was .88 for the entire sample and similar for the Hmong and European Americans.

*Authoritative decision making.* Authoritative decision making is operationalized with a single item that asked, “In general, how are most important decisions made between you and your mother (father) or other adult female (male) at home (e.g., what time you need to be home at night or where you can go with friends)?” Based on responses to this question, adolescents were classified as having a mother or father who was authoritative (when responses indicated that there is discussion between parent and adolescent over decision making), authoritarian (when parent tells the child exactly what to do), permissive (child decides on his or her own), or neglectful (child indicates that parent does not care what child does, so child makes all own decisions). This strategy has been employed in previous studies and results in four dichotomous variables (where a 1 would be indicative of that child’s being classified as having parents with the parenting style associated with that variable; i.e., each adolescent would be a 1 for one of four variables, authoritative, authoritarian, permissive, or neglectful; Lamborn et al., 1996; Radziszewska, Richardson, Dent, & Flay, 1996). This strategy led to a relatively small number of cases for the permissive and neglectful categories (especially among Hmong respondents); and as a result, the three nonauthoritative parenting styles were collapsed into one category and a single dichotomous variable (0 for nonauthoritative parenting, 1 for authoritative parenting) was used in the analyses.

*School performance.* Adolescent school performance was measured by a single item, self-reported grade point average (GPA). Students indicated what letter grades they typically receive in school, and these letter grades were converted into a 4-point scale. Although adolescent self-reported grades are the only measure of school performance available, previous research suggests that such reports are equally valid as school reports of grades (Dornbusch et al., 1987).

*Self-worth.* Adolescent self-worth is assessed by one item in a section of the survey designed to tap adolescents’ feelings on a variety of topics, including the self. This item reads, “I feel good about myself,” and is scored using a Likert-type scale format ranging from strongly agree to strongly disagree. This item is reverse coded so that higher scores indicate greater agreement.

*Risky health behaviors.* Several survey items were combined to create a summary score of risky health behaviors. Consistent with other studies, we computed a variable that measures the number of times an adolescent indicates her or his involvement in a particular risky behavior or activity. This summary variable, then, is a count of the number of risky activities the adolescent is involved in. Behaviors included in this measure were the following: smoked cigarettes in the past week, ever used crack or cocaine, used marijuana in

the past month, ever used steroids, ever used prescription stimulants without a prescription (i.e., Ritalin), binge drank in the past month (defined as five or more drinks in one sitting), carried a weapon to school in the past month, rode with a drunk driver in the past month, and engaged in risky sexual intercourse (defined as using no contraception during last sexual intercourse).

*Control variables.* Control variables in the analyses included the gender (females coded 1) and age of the adolescent (grade in school) as well as a measure of family structure (1 = the adolescent lives with both parents, 0 = adolescent does not live with both parents). These measures were included as controls because of their likely association with the predictor and outcomes variables and their potential to operate as confounding variables. An important variable to consider for these analyses is parental level of education as a control variable. The item included in the survey, however, allowed for a “don’t know” response option that resulted in a substantial proportion of missing data for the Hmong adolescents (56% responded don’t know regarding mother’s education and 43% for father’s education). As a result, it is difficult to include this measure of parental education in regression models. This circumstance is highly unusual, but understandable given that many Hmong adults living in the United States had limited or interrupted educational opportunities in their home country (Chan, 1994). Individuals growing up in Laos in the 1960s and 1970s were unlikely to be continuously enrolled in school, and few were likely to have obtained a formal high school degree. Consequently, it is unlikely that many Hmong adolescents are knowledgeable about the educational history of their parents.

To address the issue of missing data for the Hmong sample, we ran regression analyses with and without parental education as a control variable. The inclusion of the parent education variables results in an obvious diminishment in sample size for the Hmong adolescents. However, the substantive nature of the results did not change. There was only one exception where the inclusion of the parental education variables altered the nature of the results. In models predicting adolescent GPA, any Hmong–European American differences in GPA are reduced to nonsignificance with measures of parental education in the models. Inclusion of parental education did not alter the relationships between the parenting variables and the adolescent outcomes, nor did it alter any significant interactions. In addition, we conducted preliminary analyses to examine how Hmong American adolescents who reported “don’t know” for parental education may have differed from others in the sample. Results suggest very little variation for either father or mother education. The results presented below, therefore, are based on analyses with parental education omitted.

## **Results**

Table 1 presents means and standard deviations for the variables of interest in the current study. Mean-level comparisons suggested that European American adolescents received more support from mothers and fathers when compared to their Hmong American classmates (see Table 1). European American adolescents also reported higher levels of parental knowledge than did the Hmong Americans in this sample, and European American adolescents were more likely to classify their parent–adolescent decision-making style as authoritative. In terms of the adolescent outcome variables, there were no group differences in adolescent self-esteem or risky behaviors. There was, however, a significant difference in adolescent reports of GPA, with European Americans having a higher average GPA than the Hmong American adolescents. Taken together, these results suggest variation in adolescent perceptions of parenting practices by groups; however, little variation in the adolescent developmental outcomes of interest in the current study.

## **Correlational Analyses**

Correlations among all three outcomes variables and each of the parenting behaviors are presented in Table 2. In general, correlational relationships are consistent with previous research where parental support, knowledge (monitoring), and authoritative decision making are positively associated with one another and with adolescent self-esteem and GPA. In addition, these positive parenting behaviors were negatively associated with adolescent risky behaviors. The pattern of results in the correlational analyses was similar between the European and

Hmong American samples with one notable exception being that the authoritative decision-making style was not significantly related to the adolescent outcome variables for the Hmong adolescents.

**Table 1**  
**Mean Values for Total Sample, Hmong Adolescents, and European American Adolescents (Standard Deviations in Parentheses)**

	Total	Hmong American	European American
Maternal support	3.14 (.828) <i>d</i> = .68	2.58 (.932)	3.17 (.811)***
Paternal support	2.95 (.962) <i>d</i> = .50	2.46 (1.07)	2.97 (.948)***
Parental knowledge	2.76 (.802) <i>d</i> = .39	2.44 (.959)	2.78 (.789)***
Mother authoritative	.65 (.478) <i>d</i> = .54	.40 (.491)	.66 (.472)***
Father authoritative	.57 (.494) <i>d</i> = .22	.47 (.500)	.58 (.494)**
Self-esteem	2.13 (.706) <i>d</i> = .01	2.14 (.845)	2.13 (.698)
Grade point average	3.18 (.808) <i>d</i> = .34	2.89 (.953)	3.19 (.796)***
Risk behaviors	1.35 (1.99) <i>d</i> = .05	1.42 (.845)	1.35 (1.98)

Note: *d* = Cohen's *d*.

\*\**p* < .01. \*\*\**p* < .001.

## Parental Behaviors Predicting Adolescent Self-Esteem

To examine the relationships between the parenting behaviors of interest and the adolescent outcomes, we conducted a series of hierarchical regressions separately for each outcome variable. In the first step of each regression, we entered the three control variables, gender of the adolescent, grade in school, and family structure along with the Hmong–European dummy variable (Hmong coded 1). In the second step of the regression models maternal and paternal support, parental knowledge, and maternal and paternal authoritative decision making were entered. In the final step of the regression models, interaction terms were added into the model. Nonsignificant interaction terms were dropped from the final models and are not presented in the regression tables (see Table 3).

**Table 2**  
**Correlations Among Parenting Constructs and Outcome Variables for European American and Hmong Samples Separately**

	1	2	3	4	5	6	7	8
1. Risk behaviors	1.00	-.323*	-.396*	-.362*	-.219*	-.501*	-.032	-.118
2. Self-esteem	-.197	1.00	.181*	.315*	.251*	.220*	.033	.026
3. Grade point average	-.406	.112	1.00	.222*	.152*	.374*	.042	.096
4. Mother support	-.311	.269	.257	1.00	.677*	.481*	.220*	.092*
5. Father support	-.300	.268	.231	.537	1.00	.376*	.095	.247*
6. Parental knowledge	-.475	.190	.337	.464	.411	1.00	.167*	.126
7. Mother authoritative	-.188	.060	.220	.286	.153	.270	1.00	.420*
8. Father authoritative	-.158	.070	.175	.138	.327	.222	.438	1.00

Note: Correlation coefficients below the diagonal correspond to the European American subsample and are all statistically significant at the *p* < .001 level. Coefficients above the diagonal correspond to the Hmong adolescents and the asterisks indicate statistical significance at least at the *p* < .05 level.

In reference to adolescent self-esteem, results suggested that mother (beta = .188, *p* < .001) and father supportive behaviors (beta = .124, *p* < .001) were positive predictors as was parental knowledge (beta = .098, *p*

< .001). We found no significant relationship between authoritative decision-making style and adolescent self-esteem. These results support previous research showing that parental support and knowledge are positively associated with self-esteem in adolescents. An examination of interaction terms revealed that there were no differences in the pattern of associations between the parenting variables and adolescent self-esteem.

### Parenting Behaviors Predicting Adolescent GPA

Results suggested that maternal support (beta = .070,  $p < .01$ ), paternal support (beta = .062,  $p < .01$ ), parental knowledge (beta = .215,  $p < .001$ ), and maternal (beta = .091,  $p < .001$ ) and paternal (beta = .043,  $p < .05$ ) authoritative decision-making styles all demonstrated a positive association with adolescent self-report grades.

**Table 3**  
**Regression Models Predicting Adolescent Outcomes:**  
**Standardized Regression Coefficients**

	Risk Behaviors			Self-Esteem			GPA		
	Model I	Model II	Model III	Model I	Model II	Model III	Model I	Model II	Model III
Demographic controls									
Hmong	-.004	-.062***	-.086***	.006	.057***		-.062***	-.012	-.004
Gender	-.044**	-.007	-.007	-.221***	-.218**		.157***	.131***	.131***
Grade in school	.229***	.165***	.165***	-.086***	-.061***		-.048**	-.005	-.004
Two parent	-.175***	-.098***	-.098***	.019	-.039*		.211***	.151***	.151***
Parental behaviors									
Father authoritative		-.015	-.015		-.020			.044*	.043*
Mother authoritative		-.033 <sup>†</sup>	-.040*		-.015			.083***	.091***
Father support		-.073***	-.074***		.124***			.061**	.062**
Mother support		-.085***	-.084***		.188***			.071**	.070**
Parental knowledge		-.352**	-.352***		.098***			.215***	.215**
Hmong x Mother authoritative			.037*						-.040*
$R^2$	.083	.275	.275	.057	.159		.076	.184	.185

Note: GPA = grade point average.  
<sup>†</sup> $p < .10$ . \* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ .

These results suggest that adolescents with mothers and fathers who are supportive, possess knowledge of their children's activities and whereabouts, and are open to adolescent input in decision making report higher grades than adolescents reporting less support, knowledge, and involvement in decision making. In these models we found a significant Hmong-by-authoritative-mother interaction suggesting that the positive association between maternal authoritativeness and GPA was stronger for the European American sample.

### **Parenting Behaviors Predicting Adolescent Risky Health Behaviors**

In the current study, we found that mother (beta =  $-.085$ ,  $p < .001$ ) and father (beta =  $-.074$ ,  $p < .001$ ) support, as well as parental knowledge (beta =  $-.352$ ,  $p < .001$ ), were negatively associated with problem behaviors in adolescents. Authoritative decision making by mothers was negatively associated with risky behaviors (beta =  $-.040$ ,  $p < .05$ ), whereas a similar association was not found for fathers. These results suggest that adolescents who feel close to mothers and fathers, are allowed input into decision making by mothers, and who perceive a high degree of supervision from parents are less likely to report involvement in a variety of health-compromising behaviors. These associations were found, for the most part, to be similar between the Hmong and European American samples. We did find, however, a significant Hmong-by-mother- authoritative interaction suggesting that the relationship between authoritative parenting and risky behaviors is less strong for the Hmong adolescents.

### **Additional Results From Regression Models**

In an examination of mean-level differences in adolescent outcomes, we found an interesting suppression effect. As reported earlier, no significant differences between the Hmong and European American adolescents were found for risky behaviors or self-esteem; however, there was a significant difference in GPA in favor of the European American adolescents. Although these results were confirmed in regression models, in the second step of the hierarchical regression model, when parenting behaviors are added in, these mean-level differences are altered. With parenting behaviors controlled, there are significant differences in risk behaviors (beta =  $-.062$ ,  $p < .001$ ) and in self-esteem (beta =  $.057$ ,  $p < .001$ ), both in favor of the Hmong American adolescents. Furthermore, the previously significant difference in GPA favoring European American adolescents is reduced to nonsignificance.

### **Discussion**

The current study provides important information on Hmong adolescents, a population of American adolescents on which there are few reliable data. Results suggested that Hmong American adolescents reported less support from mothers and fathers and were less likely to perceive an authoritative decision-making style by either mothers or fathers when compared to European Americans. In reference to adolescent perceptions of parental knowledge, European American youth reported greater knowledge by parents compared to the Hmong adolescents. Taken together, these results suggest that Hmong American adolescents, as a group, have parents who are less likely to express warmth, are less likely to share decision making with the adolescent, and monitor their children less.

These results support and contradict our expectations. We expected Hmong American adolescents to report less parental support and to be less likely to experience an authoritative decision-making style—expectations that were corroborated by these results. In reference to parental behavioral control, however, we had expected Hmong adolescents to report higher levels of parental control, operationalized here as knowledge. Previous studies frequently conclude that adolescents from Asian American families experience a greater degree of behavioral control. These data, conversely, suggest that Hmong adolescents reported lower parental awareness of their activities and whereabouts. Future studies should consider how experiences that are unique to Hmong families (refugee status, loss of parental authority) may lead to lowered control or knowledge of children's daily life.

When considering mean-level group comparisons on developmental outcomes, European American adolescents had slightly higher GPAs than the Hmong American adolescents; however, no differences were found for self-esteem or risky health behaviors. These results contradict popular arguments characterizing Hmong youth as either at risk for negative outcomes (school failure, deviance) or part of a “model minority” of Asian American adolescents (Lee, 1997). When the parenting variables were considered in the regression models, however, these results were altered: Hmong adolescents reported higher self-esteem, less involvement in risky behaviors, and no difference in GPA compared to the European American adolescents; that is, when differences in parenting are controlled for, Hmong American adolescents seem to fare better in terms of self-esteem and risky behaviors and have similar GPAs to the European Americans. The implications of these results suggest that Hmong adolescents, as a group, do not appear particularly at risk for a variety of negative outcomes, especially for those youth who experience a high degree of positive parenting behaviors.

Consistent with previous studies, we found that parental support, knowledge, and an authoritative decision-making style were positively related to adolescent outcomes such as self-esteem and school performance, while also protective against adolescent risky health behaviors. Although we found similar associations between parental support and knowledge across European and Hmong adolescent outcomes, there were differences in the associations between maternal authoritative parenting and adolescent risky behaviors and GPA. Parenting that is open to input from the adolescent is more strongly associated with lowered involvement in risky behaviors and higher grades for European American adolescents than for the Hmong. This overall pattern of results is consistent with the body of research suggesting that parental support and knowledge of adolescent activities have universal positive benefits for adolescents regardless of cultural group membership. Variation in parenting styles, however, (i.e., authoritative or authoritarian) may vary in their influence on adolescent outcomes. In these data, then, it appears that maternal use of an authoritative decision-making style with adolescents is more of a protective factor for risky health behaviors among European American adolescents.

### **Limitations and Future Directions**

Limitations associated with the current study are common to secondary data analyses: The intent of the survey was not specifically linked to the current research questions, and many factors were represented by single items. Several issues that should be addressed in future research, consequently, could not be considered in the current study. The sample in the current study, furthermore, is likely only representative of Hmong adolescents living in small cities in the Midwest. Taken together, future research on Hmong youth should consider family socioeconomic status, neighborhood risk, urban residence, generational status, and experiences related to acculturative stress. Moreover, studies of within-group variation may yield important insights into potential divergent experiences for a broader range of Hmong youth.

Although we found acceptable validity using single-item indicators, future studies should examine the validity of different measures of parenting and adolescent outcomes for Hmong samples. The cross-sectional nature of the data in the current study precludes us from inferring causal relations between the parenting and adolescent outcomes. Studies are needed to consider bidirectionality in parent–adolescent relations in Hmong families. A further limitation related to measurement is that the items included in the survey assess what can be more accurately described as parental knowledge and not monitoring. As other researchers have noted, when conceptualizing parental control as the extent to which parents are aware of adolescent’s free-time activities and whereabouts, active parenting behaviors by parents may be indicative of a different parent–adolescent relationship rather than mere parental knowledge (Stattin & Kerr, 2000). Future research on Hmong adolescents should consider not only parental knowledge but also parenting behaviors that are intended to monitor teens.

Researchers frequently argue that studies are needed to examine cultural variation in parenting and in parental influence on adolescent development. To date, however, few studies have investigated these issues with samples of adolescents from families that emigrated to the United States as refugees. As a result, the current study makes an important contribution to the body of knowledge regarding cultural variation in parenting and parental influences on adolescent development as it provides evidence regarding the positive influence of

parental support and knowledge on adolescent self-worth, academic achievement, and risky behaviors for Hmong adolescents.

## Note

1. The Hmong are a primarily highland people who populate regions of southern China, Vietnam, Laos, and Thailand. Hmong culture is largely characterized by self-sufficiency with many families depending on an agricultural-based economy. During the Vietnam conflict, the United States recruited many Hmong men to assist in efforts to defend Laos, especially in areas surrounding the Ho Chi Minh Trail, a strategic geographic area on the Laos–Vietnam border. After the Vietnam conflict ended, many Hmong felt threatened by North Vietnamese forces occupying Laos and fled to Thailand as refugees. In the 1970s and early 1980s the U.S. government allowed Hmong refugees to emigrate to the United States. Currently there are an estimated 300,000 Hmong living in the United States with the majority residing in California, Wisconsin, and Minnesota (Chan, 1994; Lao Human Rights Council, 2001).

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