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Acculturation, Identity Formation, and Mental Health-Related Issues Among Young Adult Ethiopian Immigrants

Sam A. Wolde
Walden University

Walden University

College of Social and Behavioral Sciences

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Samuel Wolde

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Review Committee
Dr. Susana Verdinelli, Committee Chairperson, Psychology Faculty
Dr. Carolyn Davis, Committee Member, Psychology Faculty
Dr. Barbara Chappell, University Reviewer, Psychology Faculty

Chief Academic Officer
Eric Riedel, Ph.D.

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Abstract

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Abstract

Immigration is a contributing factor to population growth in the United States. Ethiopian immigrants who are residing in the United States constitute the second-largest African immigrant group next to Nigeria. The effect of immigrants' identity formation and acculturation process on their social and emotional wellness has drawn behavioral and social scientists' attention. Still, limited research has been devoted to exploring Ethiopian immigrants' acculturation and identity formation processes and how these processes shape 1.5- and second-generation immigrants' perceptions of mental health-related issues. This phenomenological study explored identity formation, acculturation processes, and mental health beliefs in 1.5- and second-generation Ethiopian immigrants. Face-to-face semi-structured interviews were conducted with 12 participants. Inductive analysis was used to determine the emergence of 4 themes: (a) participants' acculturation struggle, (b) ethnic identity challenges, (c) protective factors that helped participants to sustain and overcome the challenges and difficulties they faced through the acculturation and identity formation processes, and (d) heritage-based mental health perceptions. These findings have the potential to generate multicultural awareness among immigrants' parents, social workers, educators, policy makers, and mental health providers regarding the challenges young immigrants encounter during the acculturation and ethnic identity formation processes.

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Dedication

This dissertation is dedicated to my late sister Abeba Wolde (AKA, Abebi, Mammalia), whose beautiful mind and soring genius were wrapped in down to Earth-genuine humility. My Abebi, you were measured in your words, deeper in your reflections, generous with your love, resolute in your commitment, an old soul in your wisdom, and impactful in your deeds. In the short years that you have been with us, you set the standard to marry knowledge with wisdom, to value the long lasting, to give without expecting, to love the unlovable, and to be excited about simple things of our circumstances. I still wonder how a mother of many and an educator of the multitude is departed this soon without witnessing her own two sons grow into the destiny they are created for. Gone too soon. We all miss you. However, the thought and memories of you still inspire me to be like you when I grow up.

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I will always be grateful for my wife, Tsion Koomsa, for her continued support throughout the dissertation process. I thank my wife for assuming most of the household responsibilities while I was completing this long project successfully. My wife's sacrificial act to give me a space to get through the process is incomprehensible. I would not have done this without her.

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I would like to thank my study participants for their willingness to be part of this exploration. If it were not for their vulnerability and transparency to share their experiences, this dissertation would never have come to fruition. I thank them for trusting me with their stories. I truly hope the experiences and the stories they shared will be a sources of knowledge and encouragement for others with similar circumstances. At last but not the least, I would like to acknowledge both of my parents, Wolde Abere and Zenebech Ali. I thank my parents for instilling in me the hanger for eternal life and curiosity for knowledge. The ultimate acknowledgment belongs to God, my heavenly father for his sustaining grace throughout my rigorous dissertation journey.

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Chapter 1: Introduction to the Study

Poverty, war, and political unrest are the main factors for immigration increases in recent decades (Rothe, Pumariega, & Sabagh, 2011). According to Rothe et al. (2011), the foreign-born population in the United States increased by 57% in the past decade compared with only 9.3% growth of the U.S. native population. The 2000 U.S. Census (2003) also indicated foreign-born immigrants constituted 12% (33.5 million) of the total U.S. population. Ethiopians are among the growing immigrant communities that entered the country exponentially in the 1980s and 1990s (Chacko, 2003). These two decades were marred by oppressive sociopolitical conditions. Many Ethiopians were forced to flee out of the country in search of peace and stability. Those immigrated to the United States have stablished family and raised second-generation immigrants children.

As indicated by Pumariega, Rothe, and Pumariega (2005), second-generation immigrants tend to be prone to high risk for mental health crisis because of the social and cultural challenges they face during their identity formation and acculturation processes. Misperception of mental health issues and negative cultural biases against mental health conditions present challenges for second-generation immigrants to seek mental health interventions (Gee, Spencer, Chin, Yip, & Takeuchi, 2007). Early adulthood is filled with emotionally, socially, and biologically driven developmental changes that further complicated second-generation immigrants' identity formation process (Schwartz, Montgomery, & Briones, 2013). Second-generation and 1.5-generation immigrants encounter stress due to the need to navigate simultaneously through the cultural divides

between the generation and the majority culture in the course of the acculturation processes.

Crocetti et al. (2011) also suggested the need for further studies to describe second-generation immigrants' identity formation and acculturation process. The same study proposes a recommendation for the mental health professionals (clinicians) to be aware of divergent and conflicting worldviews that may exist among family members, which include first- and second-generation immigrants when they treat second-generation adolescents and their parents. It is important for service providers, including mental health professionals who work with first- and second- generation immigrants to pay close attention to numerous variables that challenge and inform second-generation immigrants' acculturation and identity formation (Roth et al., 2011). For a clinical encounter with 1.5- and second-generation immigrants to be effective, service providers enhance the outcome of the treatment by tailoring their approach based the immigrants' unique cultural needs.

Background of the Problem

In a study that explored the lived experiences of the Ethiopian refuges living in United Kingdom, Papadopoulos, Lees, Lay, and Gebrehiwot (2004) purported the effect of the acculturation process on the health of refuges. The stigma of being a refugee or immigrant, difficulties accessing the way in which an immigrant or refugee might secure a high-paying job, poor living accommodations, social isolation, and poor cultural commands are noted as the social and personal variables that affect the health of the refuges (Papadopoulos et al., 2004).

Socioeconomic disparity and limited access to mental health intervention among the immigrant community are persisting social realities. According to Kaltman, Paul, and Alter (2011), in most cases, low-income immigrants, whether first-, 1.5- or second-generation immigrants are burdened by depressed economical standing, poverty, and exposure to physical and emotional trauma that make them vulnerable to mental health problems. In the current study, I identified 1.5-generation immigrants as individuals who immigrated to the United States before or during their early teenage years.

As Gulv and Kolb (2009) indicated, immigrants' ability to formulate a bicultural identity, and their ability to adapt to the host country's social norm, are key elements to healthy mental status. Fostering mental health providers' multicultural awareness about the immigrant community's social, psychological, and cultural struggle faced during the acculturation process is necessary to establish a productive clinical engagement when working with the immigrant community.

Researchers suggested the importance of encouraging second-generation immigrants to develop a healthy self-identity based on their family of origin's cultural heritage (Berry, Phinney, Sam, & Vedder, 2006). According to Berry et al. (2006), the effectiveness of second-generation immigrants' ethnic identity formation and integration process is determined by the degree to which the second-generation immigrants are able to retain aspects of cultural heritage, while establishing a strong tie with the macro culture.

Second-generation immigrants' fluency and familiarity with the family of origin's customs and cultural value systems, such as language, religion, and food preferences,

serve as a foundation to establish a healthy sense of self at home (Goitom, 2015). Goitom also acknowledged the importance of adapting the host culture's value system such as fluency in the English language and academic advancement that leads immigrants to be successful within the larger sociocultural framework. Immigrants' success is linked to their ability to garner a sense of belonging within the larger community and maintain loyalty to their ethnic cultural heritage (Chacko, 2003). As Chacko underlined, understanding this range of issues that influences the acculturation and identity formation process is vital to social service agencies and mental health professional to ease the tension and establish a strong working relationship with the immigrant's community based on knowledge and empathy.

Statement of the Problem

The immigrants' level of acculturation affects their psychological well-being (Rhee, Chang, & Rhee, 2003). When compared with first-generation immigrants, second-generation immigrants are identified as the immigrant groups more likely to encounter mental health-related conditions such as depression, anxiety, and psychosomatic disorders (Gee et al., 2007). According to Gee et al. (2007), second-generation immigrants tend to be reluctant to seek mental health intervention, whereas the third-generation immigrants demonstrate tendencies to seek mental health services adequately.

Dr. Welansa Asrat, an Ethiopian psychiatrist at New York Hospital of Medical Center of Queens, indicated cultural and socioeconomic conditions as factors limiting immigrants' participation in the mental health treatment (Asrat, 2012). According to Dr. Asrat (2012), even though the negative stigma associated with mental illness is prevalent

throughout the world, it remains particularly strong among people of Ethiopian background. In explaining the prevalent nature of the negative stigma associated with mental health issues, Biftu and Dachew (2014) indicated the stigmatization of mental health conditions among Ethiopian people is attributed to being possessed by demonic forces, bewitchment by evil spirits, stricken by ancestors' spirits, or punishment by God for evil deeds.

This kind of traditional and cultural understanding of mental health issues influences Ethiopians who are affected by mental health conditions to seek help from religious healers and traditional medicine men (Biftu & Dachew, 2014). In addition to attributing mental health issues to angry spiritual forces, many people in the Ethiopian immigrant community consider mental health issues as signs of lack of personal will and internal weakness (Asrat, 2012). High risk factors, including immigrants' new minority status in the new culture, lack of adequate social support, misperception of mental health treatment, and lack of culturally relevant intervention approaches, make first-, 1.5-, and second- generation Ethiopian immigrants vulnerable to mental health-related issues.

In the first study that looked at mental health among Ethiopian immigrants living in Canada, authors Fanta, Hyman, and Noh (2004) detected the increased frequency and intensity of depression among the Ethiopian immigrant population when compared with participants from the macroculture. For example, the rate of depression among Ethiopian immigrants living in Toronto, Canada, was three times higher than the general Canadian population (Fanta et al., 2004). The need to understand 1.5- and second-generation Ethiopian immigrants' struggles with mental health ideas persists, given the population's

perception of mental health-related issues and the psychological effect of the acculturation process on immigrants' well-being (Biftu & Dachew, 2014; Fanta et al., 2004).

Experiencing mental health problems is prevalent among immigrants (Gee et al., 2007; Pumariega et al., 2005; Schwartz et al., 2013). The problem is more pronounced among 1.5- and second-generation Ethiopian immigrants. This is not only because of the acculturation and identity formation processes, which are considered anxiety-triggering experiences (Schwartz, Kim et al., 2013), but also because of negative perceptions the members of the immigrant community attach to mental health issues (Asrat, 2012; Biftu & Dachew, 2014; Fanta et al., 2004; Gee et al., 2007). To date, no researcher has examined or explored 1.5- or second-generation Ethiopian immigrants' identity formation and acculturation processes and how they may relate these processes to their perceptions of mental health-related issues (Asrat, 2012; Biftu & Dachew, 2014, Fanta et al., 2004). In sum, Ethiopian immigrants suffer high levels of mental health problems when compared with the mainstream population. This phenomenon has been linked to their cultural beliefs about mental health, acculturation issues, and their particular identity formation process as immigrants. However, as of today, no empirical studies have explored their perceptions of mental health-related issues and how those may relate to acculturation and identity formation processes.

The knowledge gleaned through the exploration of 1.5- and second-generation immigrants' lived experience may generate a multicultural knowledge about the phenomenon that may serve as important pieces of information, such as what to look for

and how to communicate when working with this specific population regarding mentalhealth-related issues. A knowledge gap exists in understanding how 1.5- and second-generation Ethiopian immigrants' identity formation and acculturation processes may shape their perceptions about mental health-related issues (Asrat, 2012; Biftu & Dachew, 2014, Fanta et al., 2004).

Ethiopians shy away from seeking mental health intervention because of the stigma and unfavorable perception attached to mental health illness (Biftu & Dachew, 2014; Fanta et al., 2004). An objective exploration was needed to establish knowledge of whether the same perceptions are persisting among 1.5- and second-generation Ethiopian immigrants. This knowledge is necessary to understand the community's view of mental health–related issues.

The knowledge obtained from participants in this study is important for two reasons. First, the knowledge that I gather could be used to create outreach materials that community mental health providers and policy makers may use to understand and address the prevalence of mental health-related issues (Asrat, 2012; Bhugra & Becker, 2005; Gee et al., 2007; Schwartz et al., 2013). Second, the knowledge that I gather may help mental health providers acquire a multicultural awareness about participants' perceptions of mental health-related issues. This study may play a crucial role in closing the gap between mental health providers and the Ethiopian immigrant community by highlighting the perceptions of mental health-related issues shaped by the acculturation and identity formation processes. The study may also increase information about possible clinical issues prevalent among young 1.5- and first-generation Ethiopian immigrants. I expect

this to shed light onto participants' beliefs about their mental health-related issues within the context of their acculturation and identity formation processes.

Chacko (2003) and Goitom (2015) explored the practices and processes of ethnic identity formation and assimilation of second-generation Ethiopian and Eritrean immigrants. Chacko's study was instrumental in describing the patterns of preferred categorization of second-generation Ethiopian immigrants' ethnic identity. In a similar study, Goitom also explored the role of first-generation immigrants played on second-generation Ethiopian and Eritrean youths' identity formation processes. Goitom's research has added knowledge to our understanding about the immigrants' identity formation processes and the factors, such as parental and sociocultural forces, in informing and shaping the identity development.

Chacko's (2003) and Goitom's (2015) works did not directly address the psychological and clinical aspects of the acculturation and identity formation process. Encountering mental health challenges such as depression and anxiety along the journey of acculturation and assimilation is not an uncommon phenomenon for many in the immigrant community (Asrat, 2012; Gee et al., 2007). In the current study, I explored the unique experiences among 1.5- and second-generation immigrant that inform the ethnic identity and acculturation process. I also considered how these processes may shape 1.5- and second-generation immigrants' current mental health perceptions and beliefs. I expected that to the study's outcome would shed light onto how participants perceived mental health-related issues. The study may not decrease the high levels of mental health-related issues in the immigrant Ethiopian population; however, it will help understand

personal, social, and contextual factors that may be affecting the high level of mental health problems experienced by this population.

Considering Ethiopian immigrants' traditional and cultural perceptions of mental health-related issues, it was necessary to gain insight into how the identity formation and acculturation processes informed the participants' belief system about mental health-related issues. The importance of this study was in the knowledge accessed through this exploration to help mental health providers and policy makers to tailor their understanding of mental health-related issues in this community. While acknowledging the contribution made by Chacko (2003) and Goitom (2015) about ethnic identity formation and acculturation process is important, a study was needed to unearth how these processes may inform participants' perceptions and beliefs about mental health-related issues.

My study involved 1.5- and second-generation immigrants and the experiences that these immigrants go through during the identity formation and acculturation processes (Chacko, 2003; Goitom, 2015). Even though studies have explored immigrants' identity formation and acculturation processes (Chacko, 2003; Goitom, 2015), only few studies were designed to explore and understand 1.5- and second-generation Ethiopian immigrants' perceptions of mental health-related issues during the identity formation and acculturation processes (Asrat, 2012; Biftu & Dachew, 2014, Fanta et al., 2004). I explored participants' perceptions of mental health-related issues, including mental health challenges, and how the family of origin's cultural views of mental health informs participants' beliefs of mental health issues and mental health

services. The following research questions guided the exploration process as they were instrumental in generating subjective knowledge from the participants' perspectives.

Research Questions

I used the following research questions (RQs) to guide my study:

RQ1. What are the experiences of second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area?

RQ2. How do 1.5- and second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area describe their identity formation processes?

RQ3. How do 1.5- and second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area explain their acculturation processes?

Subquestion 3.1: How do 1.5- and second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area explain their experiences of their parents' culture?

Subquestion 3.2: How do second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area explain their experiences of the majority culture?

RQ4. What are 1.5- and second-generation Ethiopian young adults' beliefs about mental health-related issues?

Subquestion 4.1: How do 1.5- and second-generation Ethiopian young adults relate their acculturation and identity formation processes to their beliefs about mental health-related issues?

Purpose of Study

In this qualitative phenomenological study, I explored identity formation, acculturation processes, and beliefs about mental health-related issues in 1.5- and second-generation Ethiopian immigrants. I also aimed to explore how Ethiopian immigrants related these processes to their perception of mental health-related issues. In this study, I conceptualized mental health-related issues as participants' views and familiarity with mental health services, and mental health conditions including depression, anxiety, and sensitivity to stress triggers.

This study involved 1.5- and second-generation young adult male and female Ethiopian immigrants in Phoenix, Arizona, ages 18 to 30 years. The second-generation Ethiopian immigrants were immigrants born in the United States from Ethiopian parents who emigrated from Ethiopia. Ethiopia is a sovereign country with rich cultural and religious history located in the Eastern part of the continent of Africa.

It was important to understand the dynamic continuums that immigrants of such distinct cultural and religious heritage undergo during ethnic identity formation process. According to Phinney (1993), 1.5- and second-generation immigrants commonly encounter three ethnic identity formation stages. The first ethnic identity development stage involves immigrants' unexamined ethnic identity diffusion, where feelings and attitude regarding the family of origin's ethnicity is ignored (Phinney, 1993). In the case of the second ethnic identity formation, known as ethnic identity search, immigrants exhibit increasing awareness in terms of cultural heritage and begin to immerse themselves into learning about the cultural heritage through reading, exploration of

cultural artifacts, and participating in cultural events (Phinney, 1993). The third ethnic identity formation stage involves ethnic identity achievement, where immigrants develop deeper understanding and appreciation of their ethnicity (Phinney, 1993). In this study, I adopted the concept of ethnic identity formation from Phinney's (1990) assertion, who argued that ethnic identity formation occurs when immigrants come to understand the implication of their ethnicity and make decisions about its role in their lives.

The issue of acculturation is another significant concept that requires a brief discussion. As Schwartz et al. (2013) indicated, acculturation is conceptualized as a process in which second-generation immigrants learn how to maintain the balance between the influence of the dominant culture and their cultural heritage. Stepick and Stepick (2010) stated, assimilation is immigrants' ability to acquire fluency in the majority culture's spoken language and achieve residential integration versus segregation considered as secondary factors that influence their academic and economic success.

Historically, assimilation was understood as a form of initiation in which immigrants go through the adaptation process to integrate with the majority cultural milieu (Stepick & Stepick, 2010). In the classical assimilation sense, immigrants were expected to blend into the general public to achieve a way of life common to the general public. According to Stepick and Stepick (2010), the two prominent factors that facilitate immigrants' upward social mobility beyond assimilating into the host culture are economic and educational successes.

The contemporary assimilation view focuses on immigrants' economic and educational success to underline the quality and effectiveness of immigrants' adaptation

process. This is a shift from the early view of assimilation that measures immigrants' assimilation success by evaluating their ability to blend into the cultural and social framework of the larger American society (Stepick & Stepick, 2010).

Theoretical Framework

I operated from the framework of the segmented assimilation model. As stated by Chacko (2003), the traditional assimilation model predicts a linear assimilation process. However, immigrants' assimilation process is believed to be more fluid and oriented toward the immigrants' unique experiences (Chacko, 2003). The segmented assimilation model was preferable for my study because it acknowledges the diverse assimilation experiences that the classic assimilation model fails to take into consideration. An in-depth discussion about the segmented assimilation theoretical orientation follows in the next chapter.

Operational Definitions

Acculturation: I perceived acculturation as the cognitive and behavioral change that immigrants go through to adopt the worldview of the dominant culture (Berry, 1997).

Acculturation process: I understood acculturation process as the process of cultural adaptation as a result of coming into contact with another culture.

Ethnic identity formation: I understood identity formation as immigrants' development of distinct ethnic characteristic or personality as individuals acceptable to their cultural heritage.

First-generation immigrants: Individuals who immigrated to the United States in their adult years.

1.5-generation immigrants: Individuals who immigrated to the United States before or during their early teenage years

Second-generation immigrants: I considered second-generation immigrants as children of immigrants who were born in the United States. Children of immigrants' parents born in the receiving country are known as second-generation immigrants (Portes & Rumbaut, 2001).

Mental health-related issues: This term refers to participants' views about mental health conditions, such as depression and anxiety; treatment approaches; and cultural perceptions of mental health problems. The description "mental health-related issues" depicted participants' views about mental health conditions, treatment approaches, and cultural perceptions of mental health problems.

Mental health services included (a) therapeutic interventions with a professionally trained counselor, therapist, or psychologist; (b) psychiatric medication management with a psychiatrist; and (c) case management services with a social worker or case manager.

Assumptions

I acknowledged four categorical assumptions. First, I assumed that research participants maintain honesty in the course of the recruiting process about their eligibility. Second, I assumed that participants exhibit sincerity and transparency in the way in which they respond to the interview questions. Third, I assumed the researcher's possible cultural and social bias would be addressed through adequate self-disclosure and

incorporation of a peer review. Fourth, given participants' 1.5- and second-generation immigrants' status and exposure to the larger culture, I assumed that the potential participants would able to describe their perceptions and beliefs about mental health-related issues.

Limitations

My study had four limitations. First, participants' reluctance to disclose information that participants may perceive would paint the community in unfavorable light and may have limited the depth of the interview process. Second, lack of transparency by the participants may have been a limitation. Lack of transparency would occur when participants decided not to disclose some information to protect family's honor and identity. Third, the outcome of this study might not be generalized to the general population. Finally, my bias, value, or expectations may have interfered with the study. I addressed this by clarifying bias in the form of self-reflection and providing full disclosure about my personal and professional identity, as well as second-generation immigrant status. I provided the disclosure to potential participants during the initial communication that I carried out to establish understanding about the intent and purpose of the study.

Scope

I explored 1.5- and second-generation young adult Ethiopian immigrants' ethnic identity formation and acculturation processes. By using face-to-face semistructured interviews, I generated data about participants' lived experiences in the course of the

acculturation and ethnic identity formation processes. The greater Phoenix metropolitan area represented participants' current residency.

Delimitations

My study had four delimitations. First, this study involved only 1.5 and second-generation Ethiopian young adult immigrants' acculturation and ethnic identity processes. Second, 1.5- and second-generation young adult Ethiopian immigrants who were living outside of the greater Phoenix metro area were excluded from the scope of the study. Third, 1.5- and second-generation Ethiopian immigrants who lacked proficiency in English language did not participate. Fourth, participants did not undergo mental health treatment at the time of the interview.

Upon receipt of the contact, I cross-checked each participant's details against the inclusion criteria to verify their relevance. Once verified, I sent out the requirements for participants, the provisions for assuring confidentially, and the informed consent process details. Those not selected received an email of gratitude for their interest, along with an explanation that their profile did not match the criteria.

Significance of the Study

The Ethiopian immigrant community remains the least explored cultural group in the United States, despite the growing number of 1.5- and second-generation immigrants living in various U.S. cities, including in Phoenix, Arizona (Chacko, 2003). The 1.5-immigrant generation was understood as children born outside of the receiving culture but raised in a new or hosting culture (Rumbaut & Ima, 1988). Even though studies have been carried out to describe the immigrant communities' experiences in the United States

(Alba, 2005; Bhugra, & Becker, 2005; Chacko, 2003; Crocetti et al., 2011), limitations exist in explaining second-generation Ethiopian immigrants' identity formation and acculturation processes and how the processes may inform immigrants' perception of mental health-related issues. The scarcity of scientific research with regard to the identified phenomenon was more magnified when considering that 13,000 1.5- and second-generation immigrants live in the greater Phoenix area.

Lack of understanding of the Ethiopian immigrants' culture in general and the second-generation Ethiopian immigrants' identity formation specifically creates confusion and misunderstanding among service providers who represent the larger U.S. population (Chacko, 2003). Many first- and second-generation Ethiopian immigrants tend to be misunderstood by service providers, including medical personnel, psychiatrists, psychologists, and social workers because of the immigrant community's distinct cultural variations unfamiliar to the larger American population.

Implications for Social Change

The current study was necessary to bridge the knowledge gap on 1.5- and second-generation Ethiopian immigrants' perceptions of mental health-related issues that they formulate during the identity formation and acculturation processes. My study's findings may be valuable to mental health providers and policy makers to develop a culturally relevant outreach to the community about the mental health intervention. Clinicians also use the qualitative knowledge about the identified population to develop rapport when working with 1.5- and second-generation Ethiopian immigrants. Explorations that have been conducted in the past, such as Chacko's (2003) study and Goitom's (2015) study

focused only on identifying 1.5- and second-generation young Ethiopian immigrants' preferred ethnic identity and how the first-generation (parents of second-generation immigrants) shape the acculturation process.

I went beyond identifying immigrants' ethnic identity to generate a qualitative understanding about how immigrants may relate these processes to their perceptions of mental health-related issues. This study may provide valuable background information to mental health providers and policy makers about 1.5- and second-generation Ethiopian immigrants' cultural practices and perceptions of mental health-related issues. The qualitative information that this study generated may be beneficial to health care providers in enhancing the intervention process whenever they encounter the identified population.

The findings of this study also may provide an introductory knowledge to individuals such as policy makers, teachers, and court officials about the first-, 1.5-, and second-generation Ethiopian immigrants and issues relevant to this cultural group. The knowledge includes descriptions of immigrants' unique experiences and challenges they encounter during the identity formation and acculturation processes and how these processes may influence their perceptions of mental health-related issues. Because 1.5- and second-generation Ethiopian immigrants encounter unique experiences during the acculturation and identity formation processes, service providers must engage the first- or 1.5-generation of Ethiopian immigrants to be sensitive to provide culturally relevant interventions to the immigrant's community. Where there is lack of multicultural understanding between mental health providers and the immigrants' community,

misunderstanding is bound to arise to complicate and minimize the effectiveness of the interaction (Beyene, 1992). For example, in an incident that involved Ethiopian an immigrant and her primary care physician, Beyene (1992) illustrated the need for multicultural sensitivity among service providers when dealing with Ethiopian immigrants.

According to Beyene (1992), the incident occurred due to the provider's lack of understanding of the immigrants' cultural practice, which discourages the disclosure of "unfavorable news" directly to the individual in question. In this particular situation, the primary care physician, despite the patient's husband insistence not to disclose patient's medical prognosis, decided to inform his patient that she was diagnosed with cancer. To find out the miscommunication and misunderstanding that occurs between Western-oriented medical or clinical service providers and first-, 1.5-, and sometime second-generation Ethiopian immigrants due to service providers' lack of multicultural competency, is common (Beyene, 1992). The example illustrates the importance of developing a multicultural awareness to provide culturally relevant services. The proposed study may generate understanding about how 1.5- and second-generation immigrants perceive mental health-related issues.

As Beyene's (1992) story indicated, direct communication with a patient about his or her prognosis of the deteriorating medical condition can be considered as inconsiderate and inappropriate by first-, 1.5-, and sometime second-generation Ethiopian immigrants (Beyene, 1992). The common cultural practice to the Ethiopian immigrants when unfortunate news occurs with regard to individuals' personal health or that of their loved

ones is, first, to locate immediate family members, close friends, or church leaders to

reveal the sad news. Understanding this cultural norm helps service providers to be

sensitive when dealing with Ethiopian immigrants in crisis situations (Beyene, 1992).

In the case of the patient in the case study (Beyene, 1992), the outcome of

communicating directly with the patient had devastating consequences (Beyene, 1992).

As described by Beyene (1992), two unfortunate situations occurred as the result of the

physician's insistence not to yield to the recommendation provided by patient's husband.

First, the patient collapsed right in the doctor's office with no family members nearby to

provide customary support in a situation like that. Second, right from that moment, the

entire family started to struggle to trust service providers, marking the incident as a land

mark moment even in the face of legitimate medical concern (Beyene, 1992).

My findings may enhance medical and behavioral health service providers'

multicultural awareness toward 1.5- and second-generation Ethiopian immigrants.

Multicultural awareness is one of the crucial professional competencies that are believed

to facilitate mental health providers' effectiveness when dealing with individuals' diverse

cultural backgrounds, including people of Ethiopian descents (McCabe, 2011). As

indicated by McCabe (2011), multicultural competency enhances one's ability to (a)

recognize and value differences, (b) teach and learn about differences, and (c) bridge

differences through the establishment of personal friendship and organizational alliances.

As societies are becoming increasingly diverse, openness to interact with others toward

the development of shared meaning is a key to societal harmony. Isolationist and

dogmatic tendencies do not reflect the reality of the contemporary era.

My study yielded additional information about prevalent mental health-related issues common to 1.5- and second-generation Ethiopian immigrants. Adequate multicultural awareness enhances service providers' effectiveness when working with culturally diverse population. First- and second-generation immigrants encounter mental health crises resulting from social and cultural challenges that they faced during the identity formation and acculturation process (Pumariega et al., 2005). Fanta et al. (2004) emphasized risk factors that contribute to mental health crises, including depression and posttraumatic stress disorder (PTSD) among first- and second-generation Ethiopian immigrants that resulted from preimmigration trauma and postimmigration stress. I identified these preimmigration and postimmigration factors that contribute to the immigrant community's struggle with mental health conditions.

Mental health service providers, including clinicians and policy makers, will benefit from the study's findings, as the current research will provide important insight into the second-generation Ethiopian immigrants' struggles with the acculturation and identity formation processes. The current study will also play a significant role in enhancing multicultural understanding among community members because the study will give a voice to this underresearched cultural group.

Summary and Conclusion

The increasing number of Ethiopian immigrants electing to relocate in the greater Phoenix area presents both opportunities and challenges to the mental health treatment providers. Immigrants may add new perspectives on life, value, and texture to the dominant culture. Immigrants can help to expand mental health providers' worldviews

and value systems by introducing new way of thinking and way of living. Yet, their mental health need may challenge clinicians' multicultural competency. If counselors and psychologists lack the competence to address 1.5- and second-generation immigrants' unique sets of psychological and clinical issues because of limitations in this area of multicultural awareness, immigrants' mental health issues could continue to linger.

The current study may contribute to the knowledge pool concerning acculturation, identity formation, and mental health beliefs in 1.5- and second-generation immigrants. This chapter is followed by a review of literature relevant to the current study in Chapter 2. Chapter 3 follows with a description of the study design, participants, procedures, and assessment that I used and how I assessed the qualitative information gathered.

Chapter 2: Literature Review

Introduction

A casual observer and consumer of the mainstream news would attest to the significant coverage on immigration. Immigration as a national and international phenomenon has captured leaders' agendas around the globe. This is true to the United States. Both the general public and elected leaders have come to realize that issues related to immigration need to be addressed squarely. Both the public and private debate about immigration and its presenting challenges circles mainly in terms of the economic and demographic effect of the increase in immigration. Even though the influences that first-, 1.5-, or second-generation immigrants have on the U.S. economic and demographic structure cannon be ignored, 1.5- and second-generation immigrants' behavioral health needs cannot be ignored.

Few studies have explored 1.5- and second-generation Ethiopian immigrants' psychological and psychiatric challenges that they face during the ethnic identity and acculturation process. I attempted to bridge the gap by providing relevant qualitative data that will enhance the quality of the social and clinical encounter when dealing with individuals of this particular population. I explored young adult Ethiopian immigrants' acculturation and identity formation processes and how these processes may shape their perceptions of mental health-related issues. To accomplish this task, it was necessary first to review relevant articles about the proposed topic.

To carry out this important aspect of scientific exploration, I begin this chapter by introducing research strategies that I used to locate articles for future reference. Once

establishing the type and strategies of search engines that I used for identifying relevant articles that informed my study, I focus on reviewing materials that discussed issues such as the immigrant community's relationship with the macroculture, the social and economic status related to 1.5- and second-generation immigrants' identity formation, and the acculturation process.

Literature Search Strategy

I used several sources of search engines, including PsychINFO, psychARTICLE, Google Scholars, ERIC, and psycINFO to access relevant articles to conduct the literature review. I used PsychINFO by entering general search terms such as *immigration and identity formation, second-generation immigrants and mental health, 1.5-generation immigrants and mental health, acculturation and second-generation immigrants,* and *Ethiopian immigrants and mental health*. With these terms, I used other search words such as *Ethiopians*; *Phoenix, Arizona*; *socioeconomic standing*; *Ethiopian community*; *social* and *cultural support* to narrow the search. These search strategies were important in directing the review process by connecting to additional references that previous authors used, which the general search did not discover. The Walden online library provided many of the needed articles for this review. The University of Phoenix and Arizona Christian University libraries have also provided help in locating additional resources.

Theoretical Foundation

The segmented assimilation theoretical framework that emphasizes immigrants' diverse assimilation process served as the theoretical foundation of this study. It is

important to identify the reason why the segmented assimilation theoretical model is preferred over the classical assimilation theory to orient the current study. The classical or linear assimilation theory emphasizes the fact that immigrants develop cultural norms, value systems, and characteristics that help them to identify with the majority culture through time. The expectation is that the more immigrants stay with the host culture, the better they develop identity similar to members of the host culture (Gordon, 1964). The classic assimilation theory assumes that immigrants follow a "straight line" to the point of divergent into the majority culture (Gordon, 1964). Classic assimilation operates from the assumption that the United States is a melting pot (Gordon, 1964). However, as indicated previously, the segmented assimilation facilitated my study in exploring the second-generation Ethiopian immigrant young adults' unique identity formations and acculturation journeys from their own perspectives.

Gratton, Gutman, and Skop (2007) described segmented assimilation by identifying the two trajectories distinct to segmented assimilation. According to the Gratton et al. (2007), the first one features upward assimilation, which facilitates the establishments of immigrants' socioeconomic status and family structure similar to the majority culture. The second assimilation trajectory, known as downward assimilation (Gratton et al., 2007), involves assimilation movement toward the socioeconomic and family structure common to marginalized social groups in society.

The segmented assimilation acknowledges that every immigrant does not follows the same acculturation path. Gans (1992) described the path as bumpy rather than smooth. The process is not uniform. Some members of immigrant communities achieve

the economic mobility by following a straight line while others find success through various ways depending upon their family of origin, access to beneficial network, and financial resources (Portes & Zhou, 1993). Portes and Zhou (1993) underlined two factors that determine immigrants' upward or downward mobility.

According Portes and Zhou, the factors that cause the downward mobility include structural barriers. Examples of structural barriers that influence immigrants' downward mobility are inefficient urban school structures, lack of employment, and limited networking opportunities that paves the way to improved economic progress (Portes & Zhou, 1993). Such structural barriers impede immigrants' social and economic upward mobility. Immigrant children that come from a family that faces economic and social stagnation tend to develop attitude considered to be oppositional toward the majority culture (Portes & Zhou, 1993). It is important to identify and address possible structural barriers that hinder second-generation immigrants' successful acculturation (Portes & Zhou, 1993). Since immigrants of Ethiopian origin go through the assimilation process in line with the segmented assimilation track (Chacko, 2003), this theoretical conceptualization will relate to the proposed study and will also provide an adequate framework to pattern research questions.

Literature Review

Immigrants of African descent, particularly Ethiopians, have difficulty grasping the concept of race based on one's skin color, such as being identified as African American because of black skin color (Darboe, 2003). This is because for most immigrants of African descent, one's identity is embedded in one's nationality (Darboe,

2003). For example, in spite of the immigration status, whether first, 1.5 or second-generation of immigrants, Ethiopians tend to be comfortable to identify themselves as Ethiopians. Moran (1996) attributed this phenomenon to the fact that Ethiopians find their true identity in relation to their home country. The pride that the Ethiopian immigrants have based on their home country's historical and cultural heritage begins to be tested when they experience racial classification and racial discrimination in the host culture (Chacko, 2003).

Strong cultural alliance that the first and second-generation Ethiopian immigrants demonstrate to their original cultural heritage clashes with the new reality of identifying their race based on their skin color (Chacko, 2003). This presents a challenge whether or not to accept the new reality and develop a cultural identity acceptable by the host culture (Chacko, 2003). This post-immigration tension and stress to explore the concept of identity has emotional, psychological, and social consequences (Bhugra & Becker, 2005).

Bhugra and Becker (2005) hypothesized the idea that immigrants' possible predisposition to various type of mental illness conditions that may be caused because of the complex adaptation and acculturation process. Navigating through intricate social and cultural realities of the new country can be overwhelming and stressful process. As indicated by Bhugra and Becker, a good number of immigrants who face the challenge of going through the intense adaptation and acculturation process in the new culture without meaningful social and clinical support encounter emotional and psychological disturbances.

Bhuga and Becker (2005) indicated that social isolation, lack of social support, racism, unemployment, poverty and lack of appropriate access to medical care contribute to the increased rates of mental illness among immigrants. The unstable emotional and psychological conditions that some immigrants face during the acculturation process minimize immigrants' ability to work through circumstances considered to be a challenging identity formation process (Bhuga & Becker, 2005). Preimmigration trauma and postimmigration stress that first and second-generation immigrants encounter during the identity formation and acculturation process are considered risk factors for mental health crisis (Fenta et al., 2004). Preimmigration and postimmigration are not the only mental health illness triggering experiences. The ability to successfully navigate through the majority culture's expectation while working through one's self-identity can be a stressful task for immigrant youth to achieve.

As Song (2010) indicated, mastering a cultural identity while developing a healthy self-identity is a challenge that second-generation immigrants face during the acculturation and identity formation process. Reconciling second- or 1.5-generation immigrants' newly acquired sense of self with that of their parents' cultural identity creates existential tension and emotional stress. It is important to understand the identity formation and acculturation process that 1.5 and second generation immigrants go through in the host country.

Identity Formation and Acculturation Process

The identity formation process is a complex process, which can be affected by the socio-economic climate in which the second-generation immigrants find themselves

(Chacko, 2003). Chacko (2003) explored the ethnic and racial identities of children of

first-generation Ethiopians living in the Washington, D.C. metropolitan area to determine

factors that inform second-generation Ethiopian immigrants' identity formation. Chacko

concluded that in spite of the continuous efforts that parents of second-generation

demonstrated to instill the ethnic and cultural foundations associated with their homeland,

the identity of second-generation Ethiopians immigrants is shaped even more by the fact

that they live as a minority group and its implication of being Black in a racially diverse

society.

Haregewoyn (2007) agreed with Chacko (2003) regarding the effort that

Ethiopian immigrant parents demonstrate toward their second-generation immigrant

children to find their true cultural identity in their parents' cultural heritage. Many

second-generation Ethiopian immigrants continue to struggle to strike a balance between

their American and Ethiopian cultural identity (Haregewoyn, 2007).

Chacko (2003) argued that these young second-generation Ethiopian immigrants'

assimilation process indicates the assimilation interest into the mainstream of

Americanized culture for a better social mobility, instead of integrating into the native

Black community. Second-generation Ethiopian immigrants' identity formation is

believed to be fluid, as this cultural group's identity formation process moves

continuously from creation and re-creation to align their identity to their current lived

experiences and desires (Chacko, 2003). Berry et al. (2006) underlined the fact that the

ways in which young 1.5 and second-generation immigrants engage the acculturation

process predicts the way in which they adapt to their new cultural setting (Berry et al.,

2006). According to De La Rosa (2002), immigrants' acculturation process can be viewed in a continuum. The first one involves immigrants' low level of cultural identification with both parents' cultural heritage and mainstream culture (De La Rosa, 2002).

The second continuum indicate second-generation immigrants' tendency to demonstrate a low level cultural affinity to their family of origin while exhibiting a strong tie to the host country's cultural values (De La Rosa, 2002), In the third acculturation continuum, immigrants demonstrate a strong bond with their parents' cultural heritage while showing a low level of cultural link to the host country's culture (De La Rosa, 2002). In the fourth acculturation continuum, immigrants exhibit a strong cultural affinity to both their family origin and the majority culture (De La Rosa, 2002).

Immigrant youth who were able to integrate with the host culture had the best psychological and socio-cultural adaptation outcomes than those with a diffuse profile (Berry et al., 2006). According to Berry et al. (2006), a recommendation for immigrant youth is to be encouraged to retain a sense of their cultural heritage while integrating and nurturing multicultural skills for better social mobility. As Segal and Mayadas (2005) also indicated, maintaining a healthy connection with one's cultural heritage is important for 1.5- and second-generation immigrants to garner meaningful social support and guidance during the acculturation and identity formation process.

Achieving acceptable social status within the macro cultural context, while striving to maintain one's own cultural heritage presents a challenge. In most cases, the challenges that second and 1.5-generation immigrants' experience are associated with the

acculturation and identity formation process (Schwartz, Montgomery, & Briones, 2006). As Schwartz et al. (2006) indicated, the process of navigating through the host country's cultural milieu while trying to be true to one's cultural heritage affects second and 1.5 immigrants' psychological and emotional self. Researchers Kopola and Esquivel (1994) and Rumbaut (1994) acknowledged the risk that the young immigrants face during their identity formation and acculturation process for mental health problems.

Immigrants with 1.5- and second-generation immigration status are often presented with different and conflicting messages that come from different sources, including parents, friends from the majority culture, and media outlets about what is acceptable identity within different cultural contexts (Phinney, Horenczyk, Liebkind & Vedder, 2001). For example, young adult immigrants can be perceived as outsiders or different by their peers of the majority culture because of their immigration status and family of origin. At the same time, the 1.5 and second-generation immigrants are viewed by their parents as Americanized because of some of the adopted characteristics these young immigrants demonstrate (Tang, 2001). The disconnect that immigrant youth experience in terms of their cultural heritage, or parents' expectation, and the marginalization that they face from the host culture engender isolation, depression, anger, and aggression toward the macro culture (Marcia, 1993).

It is not uncommon for second and 1.5-generation immigrants to encounter social and economic realities that present significant challenges in the course of the acculturation and identity formation process. For example, experiencing mental health issues, such as anxiety and depression, are some of the challenges that second-generation

immigrants encounter in the course of the identity formation process (Pumariega et al., 2005; Chacko, 2003). Schweitzer et al. (2006) point out the adverse psychological and emotional experiences that immigrants face during the identity and acculturation process causes some second and 1.5-gernation immigrants to develop low self-esteem, stress, and uncertainness to thrive in the major cultural context.

Issue regarding the acculturation and identity formation of the second-generation non-White immigrants has drawn a scholarly interest (Portes & Zhou, 1993; Segal & Mayadas, 2005; Ward, Bochner, & Furnham, 2001; Waters, 1995; Zhou, 1997). Recent scholarly works in the area of non-White second-generation immigrants and the acculturation process indicate the issue of racial discrimination and economic structure in shaping and affecting immigrants' assimilation experience (Neckerman, Carter, & Lee, 1999). According to Neckerman et al. (1999), recent non-white immigrants' assimilation process is different from that of earlier European immigrants that followed a linear acculturation and assimilation path into the host culture's upward economic mobility.

It is important to understand that the acculturation and identity formation process is not a uniform process. Rothe et al. (2011) identified the process of immigration and acculturation as a fluid process that may vary even among family members. Mental health professionals (clinicians) are recommended to be aware of divergent and conflicting worldview that may lay underneath among family members when they treat second-generating adolescents and their parents.

It is necessary to address the process of acculturation and what the term acculturation entails. According to Gibson (2001), acculturation is a process that involves

two concepts significant to the immigrants' experiences. The first one is the process of cultural change that immigrants experience in the course of their attempt to integrate into the mainstream society (Gibson, 2001). The second element of acculturation is adaptation to the cultural norms of the host culture (Gibson, 2001). Adaptation has two aspects. The first one involves adaptation to the host's culture ideals, values and social norms (Gibson, 2001) while the second one deals with the retention of values, ideals and belief system of immigrants' cultural heritage.

Factors Influencing the identity and Acculturation Process

It is important to be aware when dealing with second-generation immigrants about the crucial role immigrants' socio-economic context plays in determining the quality of their acculturation and identity formation process. Immigrants' family environment plays a significant role in shaping and informing the identity and acculturation process (Killian & Hegtvedt, 2003). Second-generation immigrants' alliance, whether to their parents' cultural heritage or the U.S. cultural milieu, will be influenced by their parents' cultural practices (Killian & Hegtvedt, 2003).

Socioeconomic factors. Killian and Hegtvedt (2003) identified factors that increase the likelihood of adult children of Vietnamese descents' motivation to participate in their parents' cultural behaviors. According to Killian and Hetvedt, children whose parents choose to model ethnic behavior would engage in more cultural skills than children whose parents do not model cultural behaviors true to their heritage. Children whose parents demonstrate ethnic behaviors were also found to be more involved in ethnic social networks than children whose parents did not model these behaviors (Killian

& Hegtvedt, 2003). Ultimately, second-generation immigrants' acculturation and identity formation process cannot be fully understood without considering their parents' cultural views and practices.

Second-generation immigrants' socioeconomic status and parents' attitudes, views, and cultural practices are not the only factors that shape and inform second-generation immigrants' identity formation and acculturation process. Haller and Landolt (2005) identified how second-generation immigrants' access to resources and meaningful networks determine the nature of the identity formation process. Immigrants' sense of belongingness interwoven with various integration, such as immigrants' ability to access a meaningful social network and opportunities provided by parents, affects how well second-generation immigrants cope with challenges along the way.

Mental health issues. The challenges that second-generation immigrants face during the identity formation and acculturation process include encountering mental health issues (Pumariega & Roth, 2005). Clinical risks surround immigrants and refugees' mental health wellness, which calls for adequate multiculturally competent mental health clinicians and services (Pumariega & Rothe, 2005).

The psychological trauma that second-generation immigrants experience through the adjustment process, depending on their proximity and exposure level to trauma, may vary in terms of creating urgency (Pumariega & Rothe, 2005). Mental health service providers must be aware of the underlying factors that affect second-generation immigrants' emotional well-being. For example, as indicated by Pumariega and Rothe

(2005), second-generation and 1.5 immigrants may be at a higher risk for mental health crisis if they face chronic stressors.

Results of a study conducted by Kaing, Witkow, and Champagne (2013) indicated the fact that second generation immigrants who are effectively socialized into the main stream demonstrated fewer struggles with depressive mood. Crocetti, Fermani, Pojaghi and Meeus (2011) strongly recommend the importance of providing additional social and educational intervention to adolescents from migrant families to alleviate cultural identity problems and the corresponding clinical conditions that second and 1.5 immigrants may develop during the acculturation and identity formation process.

Language. Ethnic identity and healthy in-group relationship among second-generation immigrants and their parents are linked to ethnic language proficiency (Phinney, Romero, Neva, & Huang, 2001). As indicated by Phinney, Romero et al. (2001), ethnic language proficiency is not only an indicator of a strong cultural alliance between the second-generation immigrants and their parents but also a predictor of second-generation immigrants 'commitment to maintain cultural heritage valuable to their parents. In a similar study, Kim and Chao (2009) purported the significant role heritage language proficiency plays in the development of ethnic identity and belongingness within family of origin cultural milieu.

In the study conducted on a cultural phenomenon similar to the proposed study, Goitom (2015) also acknowledged the role of ethnic language fluency in shaping participants' identity formation. Apart from the Amharic language, which is the official language of the land, Ethiopia is known to consist of diverse ethnic groups with 81

spoken languages. The four widely spoken ethnic languages that most first-generation Ethiopian immigrants utilize include Oromo, Amharic, Somali, and Tigrigna.

Goitom (2015) underlined the importance of heritage language fluency. Such fluency, according to Goitom, was vital in validating one's ethnic identity as well as serving as a means to transmit cultural awareness from the first-generation (parents) to the second-generation Ethiopian and Eritrean immigrants. First-generation immigrants engage in explicit and implicit attempts to embed pride in their children in regard to the family of origin's cultural heritage (Chako, 2003). One of the ways by which the socialization and transmission of these cultural heritages occur is through parents' effort in teaching the ethnic language to 1.5 and second-generation immigrants (Chacko, 2003).

History of Ethiopian Immigrants in the United States

In the past 15 years, more than 10 million immigrants have been granted permanent resident status in the United States (Kibour, 2001). The U.S. Census Bureau report, which was published in 2014, put the overall foreign born immigrants' who resided in the United States to 39.8 million. Out of the 39.8 million, 1.6 million of the immigrants constitute immigrants of African descent. According to the 2000 Census, one out of every five children born in the United States is born of immigrant parents. Landale and Oropesa (1995) have also extended the discussion on first and second-generation immigrants by stating that the first and second-generation immigrants' children are the rapidly growing segment of the U.S. population.

The same trend of population growth is also observed among immigrants of Ethiopian descents. According to the Migration Policy Institute report (2014), 180,000

Ethiopian immigrants who are residing in the United States constitute the second-largest African immigrants group next to Nigeria. Even though the Ethiopian immigrants constitute only 0.5% of the overall foreign-born immigrants' number, according to the Migration Policy Institute (2014) report, the size of Ethiopian born first and second-generation immigrants is noted growing rapidly.

Ethiopia, a country from the region known as the Horn of Africa, consists of Ethiopia, Somalia, Eritrea, Djibouti, and Sudan has long held a special place in the African American society. This historical linkage between the two countries can be traced back to the 17th century when Ethiopia was considered as the beacon of black pride and independence among African slaves because of the country's unique cultural and historical significance as the only African country that has never been colonized (Carretta, 2011). Some educated blacks of the American Revolution era, including poets Phillis Wheatley and Jupiter Hammon, were recorded as referring to themselves as Ethiopians (Carretta, 2011). The arrival of Ethiopian immigrants and their cultural presence was yet to be felt in the later years: the 1980-1990s (Checko, 2003).

According to Lyon (2007), the history of Ethiopian immigrants' arrival to the United States involves three waves. The first wave occurred between 1959-1974 when the country's highly educated elites, fluent in English or French or both, and government-sponsored university students arrived (Lyon, 2007). The second wave occurred between 1975-1991 when government officials, high-ranking military personnel, their families, and relatives fled Mengistu Hailemariam's authoritarian military regime to migrate to the United States as refugees (Chacko, 2003; Lyon, 2007). The third wave occurred from

1991-2007 through family reunification and the Diversity Visa Program. The 1980 Refuge Act and the Diversity Visa Program are attributed to the immigrant populations' growth in the United States in last three decades (Chacko, 2003; Lyon, 2007).

History of Ethiopian Immigrants in Metropolitan Phoenix

Well-established Ethiopian communities exist among U.S metropolitan cities, including Washington, D.C.; Los Angeles, California; Dallas, Texas; New York City, New York; Chicago, Illinois; and Boston, Massachusetts. Since the arrival of few Ethiopian immigrant families 31 years ago, Phoenix, Arizona, has become an attractive destination for Ethiopian immigrants coming directly from Africa or relocating from other U.S. cities, including Los Angeles, Denver, and Chicago. According the *New York Times* article published in October 2008 (Deparle, 2008), Arizona has become a haven to immigrants of various cultural heritage.

The author of the New York Times article (Deparle, 2008) attributed the increased number of the immigrants' population in the Phoenix metropolitan area to the state's refugee friendly policies. According to Deparle (2008), Arizona accepted nearly twice as many refugees per capita as its liberal neighboring state of California. Arizona's lower cost of living up to the time of the 2008 recession was the other factor for immigrants' influx into the Phoenix metropolitan area.

According to the Ethiopian community leaders, Mr. Ouldu and Captain Wigayheu (2015), there are thousands Ethiopian immigrants currently residing in the greater Phoenix metropolitan area. The focus of this exploratory study will be on 1.5 and second-generation young Ethiopian immigrants' identity formation and acculturation processes

and how these individuals processed may influence potential participants' perception of mental health-related issues. Various researchers have conducted studies to uncover the nature of immigrants' acculturation and identity formation processes (Chacko, 2003; Goitom, 2015).

The need remained for a study to explore how these processes shape 1.5- and second-generation immigrants' perception about mental health-related issues. Given the psychological and social influence the acculturation and identity formation processes have on immigrants (Kaing et al., 2013; Pumariega & Roth, 2005), to carry out a study to explore how these processes shaped participants' perception of mental health-related issues is necessary. My study involved research questions designed to generate knowledge about participants' acculturation and identity formation processes and how these processes may influence their understanding of mental health-related issues. The previously highlighted concepts such as segmented assimilation, acculturation and identity formation processes, factors influencing the acculturation and identity formation processes, mental health-related issues, historical background about Ethiopian immigrants in the United States, and history of Ethiopian immigrants in Phoenix were relevant exploration areas to my study. The purpose of the literature review was to review and synthesize studies, as the reviewed concepts relate to the research questions that the my study set to explore.

Summary and Conclusions

For 1.5- and second-generation young adult immigrants to experience stress, tension, and identity conflict in the course of the acculturation and identity formation

process is not uncommon. The desire to hold on to the traditional cultural values and pressure to confirm to the norms of the macro culture cause stress, tension, and sometime identity conflict. The 1.5- and second-generation immigrants with stronger ties to their parents' cultural heritage experience considerable personal, interpersonal, and psychosocial consequences. The identity formation process is a complex undertaking. Service providers, including mental health workers, policy makers, and advocacy groups, need to understand the contributing factors that make the identity formation and acculturation process a complex process.

My study, unlike that of Chacko's (2003) research, expanded the exploration beyond the categorization of ethnic identity. Chacko's work on the assimilation and identity formation of young Ethiopian immigrants in the Washington D.C. area focused on participants' preferred ethnic identification. My study involved research questions to guide the phenomenological exploration to unearth participants' unique experiences that helped to usher the development of their current cultural and ethnic awareness. This study did not only identify participants' preferred cultural and ethnic identity but also explored how these processes may inform participants' perception of mental health-related issues.

By employing the qualitative methodology, my study explored 1.5- and second-generation young Ethiopian immigrants' identity formation and acculturation processes and how these processed informed their understanding of mental health-related issues. This methodology is preferable to acquire a deeper subjective understanding about the phenomenon. The purpose of this study was to generate qualitative data necessary to describe young immigrant Ethiopians' social, cultural, and psychological experiences

encountered during the acculturation process to learn how these experiences shape their

perception of mental health issues. To accomplish the stated purpose, a clearly defined

research design was necessary. The following chapter introduces the research design,

identify the participants of the study, state the research questions, and define the

procedure that my followed to accomplish the purpose.

Chapter 3: Research Method

Introduction

In the first two chapters, I detailed the persisting emotional and psychological challenges that 1.5- and second-generation immigrants encounter in the course of their ethnic identity formation and acculturation processes. Navigating through the macrocultural norms during the acculturation and identity formation process can be a stressful and anxiety-provoking experience for some in the immigrant community. Eurocentric conceptualization of mental health issues might not be the correct treatment approach when working with 1.5- and second-generation Ethiopian immigrants because of the Ethiopian immigrants' traditional and cultural views of mental health issues.

A contextualized treatment approach, which considers the community's unique perceptions of mental health-related issues, is necessary to maximize the outcomes of mental health outreach to 1.5- and second-generation Ethiopian immigrants. To provide a culturally relevant mental health service or develop a community outreach to educate the community about the importance of mental health treatment, it is necessary to obtain knowledge from the participants' perspective. No better research methodology exists than a qualitative methodology that can be employed to explore participants' lived experiences and perceptions about phenomena such as immigrants' identity formation and acculturation processes.

I used a qualitative methodology to learn how these processes shaped participants' perceptions of mental health-related issues. Identifying the research methodology compatible to the research interest was fundamental to the success of my

study. Obtaining qualitative information about the immigrants' unique social and cultural experiences in the course of the acculturation and identity formation processes was necessary to reach out to this particular segment of the U.S. population. This chapter includes an outline of the qualitative method used in this research project.

Research Methodology

Conducting a scientific study was a daunting task. One of these daunting tasks that confronted my intellectual pursuit in the course of the research process was the ability to identify a research methodology appropriate to the research idea. To establish knowledge about the proposed phenomenon's unique processes of identity formation and acculturation and how these processes may influence participants' perceptions about mental health-related issues required appropriate methodology. It was necessary to understand the issues to describe 1.5- and second-generation Ethiopian immigrants' identity formation and acculturation processes and how the processes influenced their understanding of mental health issues or propose policy or a treatment approach. Those issues must be acquired from the participants' perspectives, limiting the types of research methodology available to accomplish this goal.

I used a qualitative methodology to explore 1.5- and second-generation immigrants' acculturation and identity formation processes and how these processes may inform their perception of mental health-related issues. According to Hatch (2002), by using a qualitative approach, a researcher can learn what is happening within a particular cultural phenomenon under exploration. With qualitative research, the investigator can also gain insight about what needs to be done to trigger the social, political, and

economic changes within a given cultural phenomenon (Hatch, 2002). The qualitative

method fit my research interest because the topic depended on information generated

about a particular phenomenon from the participants' perspectives (Creswell, 2009).

Exploring second-generation Ethiopian immigrants' identity formation and acculturation

processes is a complex issue.

As Trochim (2006) indicated, the qualitative research method is an effective

method when trying to investigate complex and sensitive issues. The qualitative method

was effective because it affords the researcher the opportunity to establish a deep

understanding of how participants think about the subject using in-depth interviews

(Tochim, 2006). In the qualitative research method, data were also gathered through

direct (natural) observation whereby the researcher becomes a research instrument

because of the undertaking of the researcher's direct involvement with participants'

social and cultural setting.

Research Design: Phenomenological Study

It is important to establish clarity about the purpose and method the study at an

early stage of the research process (Creswell, 2003). Because the purpose of this study

was to explore the cultural and psychological phenomenon of 1.5 and second-generation

Ethiopian immigrants' identity and acculturation processes, and understand how these

processes influenced their perception of mental health-related issues, the

phenomenological research design was selected as an appropriate methodology.

The goal of a qualitative researcher that employs the phenomenological design is

to identify the social and psychological realities of individuals or groups from their own

experiences (Groenewald, 2004). Moustakas (1994) posited that research would be enriched when the researcher take participants' whole experience into consideration. According to Moustakas, individuals' whole experiences and behaviors are inseparable aspects of the social phenomenon. Moustakas also provided a helpful procedure to carry out the phenomenological exploration. The outline included immersion whereby the researcher is involved in the world of the experience while incubation signifies the importance of establishing a space to develop awareness and understanding about the research interest (Moustakas, 1994).

The immersion process is vital to the researcher in clarifying the purpose of the research question and developing an intimate awareness about the purpose of the research question (Moustakas, 1994). As indicated by Moustakas (1994), incubation is not a period when the researcher would put the research work aside to engage in something else. Incubation is the process by which the researcher retreats from the intense intentional focus to inner implicit processing (Moustakas, 1994). According to Moustaka, the inner working of the implicit processing helps to develop a deeper understanding about the research interest.

Illumination, explication, or reflective actions, and creative synthesis are necessary steps that the researcher follows to accomplish a meaningful phenomenological exploration (Moustakas, 1994). For example, in the case of illumination, new interpretation, meaning, or insight may penetrate the researcher's consciousness because of receptiveness to the inner workings of the implicit processing (Moustakas, 1994). Explication is an important step that the research takes to reflect upon the new

interpretation, meaning, and insight gained through the process of immersion, incubation, and illumination (Moustakas, 1994). The creative synthesis occurs when the researcher assists as midwife with the birth and expression of a story.

The phenomenological study is instrumental in providing opportunities for a researcher to (a) gain insight about the lived experiences of participants, and (b) capture the meaning, structure, and essence relevant to the phenomenon (Pereira, 2012). To learn the kind of experiences unique to the phenomenon and the commonly shared meanings linking the population, a phenomenon should be seen through the eyes of the group's lived-out experiences (Patton, 2002). According to Patton (1990), the purpose of phenomenological research was deeply rooted in understanding the subjective experiences of participants and describing the phenomenon in the way in which it depicts individuals' lived-out experiences. When elaborating on the elements of essence in relation to a phenomenological approach, Patton indicated that the shared experiences that provide the core meaning acceptable to the population will yield a defining characteristic about the phenomenon.

Participants of the Study

According to Hatch (2002), the primary screening method to determine the exclusion or inclusion of participants in the study was a shared experience. Because using a large number of participants may not necessarily produce more insight into the experience of a phenomenon under exploration, 12 participants were recruited to provide information to achieve the saturation point to identify emerging themes. The current study incorporated 1.5 and second-generation Ethiopian immigrants between the age of

18 and 30 as participants. Individuals with active mental health conditions or history of mental health treatment were excluded from the study.

Sampling of participants was purposeful, criteria based, and voluntary (Creswell, 2003). Sampling was purposeful because the approach helped the researcher to explain the purpose of the study to willing participants (Creswell, 2003). Once four potential participants were secured, this study applied a snowball effect by utilizing the identified potential participants to establish access to willing research participants.

Measures

The purpose of the proposed study was to generate qualitative data necessary to describe young immigrant Ethiopians' social, cultural, and psychological experiences encountered during the acculturation process to learn how these experiences shape their perception of mental health issues. To achieve this, study participants were identified based on the criteria discussed earlier. The research questions guided the interview process to generate the subjective experiences true to the population under study (see Appendix A).

Research Questions

I used the following research questions (RQs) to guide my study:

RQ1. What are the experiences of second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area?

RQ2. How do 1.5- and second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area describe their identity formation processes?

RQ3. How do 1.5- and second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area explain their acculturation processes?

Subquestion 3.1: How do 1.5- and second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area explain their experiences of their parents' culture?

Subquestion 3.2: How do second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area explain their experiences of the majority culture?

RQ4. What are 1.5- and second-generation Ethiopian young adults' beliefs about mental health-related issues?

Subquestion 4.1: How do 1.5- and second-generation Ethiopian young adults relate their acculturation and identity formation processes to their beliefs about mental health-related issues?

Ethical Protection of Participants

Study participants were adult male and female volunteers who were free to decline participation invitation and cognitively sane to provide consent for the study. There was no known of harm that may cause concern to participants. Participants were assured that they were not required to answer the questions and may pass on any question that makes participants feel uncomfortable. The informed consent also assured the right to discontinue participation in the study at any time with no penalty. The researcher also checked in with participants at least twice during the interview process to verify their emotional and psychological well-being.

Participants were given option to take a break in between in case of the need to take time for refreshment. Phoenix emergency crisis lines such as 602-222-9444 was identified as a crisis line to be utilized in case of emotional/behavioral crisis to seek immediate intervention. The researcher's scientist-practitioner position in the community was emphasized and reemphasized during the course of the study to maintain a clear boundary between the research and research participants. Participants' identity and their self-disclosure was treated as confidential information. Participants' identifying information, research files, audiotapes, and transcripts were stored in a locked cabinet in the researcher's home office. Participants' voice or self-report data was protected throughout the data analysis and interpretation process. Only the researcher, dissertation committee members, and authorized individuals identified to assist in validating results had access to the transcripts.

Researchers, including Field (1984), have long indicated that one of the difficulties that researchers utilize a qualitative method face is obtaining and maintaining an adequate access into the participants' world. As Pajres (2007) emphasized, the best way in which a researcher can recruit voluntary participants is through personal contact. It is important to note that I am both a mental health provider and first-generation Ethiopian immigrant who was also a member of the community. I had to be mindful of my own influence so as not to coerce participants. I avoided including participants that I had interacted with in a clinical setting.

Procedures

Upon the Walden University's IRB approval, I sought permission from the Ethiopian Community leaders to attend the community's outreach meeting to introduce the purpose of the proposed research and provide contact information for potential participants to contact the researcher. The Ethiopian Community Organization is a non-political organization, which was set up in 1992 to promote cultural heritage and cultivate a social support system for Ethiopian immigrants living in Phoenix area. The organization coordinates cultural exchange events, conducts yearly town house meeting to discuss the immigrants' need, and organize the Ethiopian New Year celebration every September.

The Ethiopian Community Organization Chairman assisted in the recruiting effort. The Ethiopian Community provided the student researcher with a letter of cooperation to grant the student researcher access to the community events to introduce the intention of the proposed study and to recruit potential participants. A community event, particularly the Ethiopian New Year celebration, occurs every year in September 9 and this event was targeted as potential venue to introduce myself and the current study for potential study participants. The opportunity was not presented for me to accomplish the stated goal because the Ethiopian New Year celebration event was cancelled this year.

Once the Ethiopian community leaders' permission was obtained, the student researcher approached potential participants to introduce self and explain the purpose of the current study. No benefit or status is promised or given to potential participants and/or community stakeholder, as participation in the study is voluntarily based with no

benefit attached. Ethiopian Community or religious leaders did not receive any benefit or status for assisting in identifying an individual for possible participation.

This plan of involving the religious leaders to assist with recruiting efforts was not triggered as the student research did not face difficulty to obtain the required number of participants using the above-mentioned approaches. Because the 12 study participants were obtained by utilizing suggestions from the Ethiopian Community leadership and existing friends to cause the snowball effect, a need did not arise for the researcher to tap into the Ethiopian religious leaders in the community for a recruiting effort.

The following procedures served as a sequential guide to recruit and inform participants, collect and analyze data, and validate findings.

- Two existing friends from the community were approached for initial meeting to describe the intent of the study and trigger a snowball effect to recruit 12 research participants that meet the inclusion criteria. The two existing friends were members of the Ethiopian Community Organization. They assisted the student researcher in the recruiting efforts.

- Based on the contact information obtained from the two existing friends, an informative letter about the intent and nature of the study was sent to potential participants via email or mail box (see Appendix B).

- The suggestion list about potential study participants obtained from the Ethiopian Community leaders was utilized to contact potential participants to create a snowball effect.

- Email communication with potential participants was conducted to establish understanding about the proposed study. A letter describing the nature of the study was provided to potential participants via an attachment.

- Interested female and male participants were requested to contact the researcher to schedule an initial interview.

- During first individual interview, each participant was given a copy of the letter describing the proposed study and sign the consent form. The interview lasted for an hour.

Potential participants were screened for mental health-related issues during the initial interview session to establish participation eligibility (see Appendix C). Potential participants were asked whether they had encountered mental health problems or had a history of receiving mental health treatment.

- The interview was conducted in a conference room at Phoenix Public library. Each of the study participant was involved in one time face-to-face interview. The duration the interview varied from 35 minutes to an hour.

- In case an unforeseen inability for potential participants was present preventing an in-person for the interview, a phone interview was considered an alternative means. A phone interview was not needed as all study participants in this study participated in a face-to face interview.

- Audiotaped interviews were transcribed verbatim and analyzed according to steps outlined at the end of this chapter.

Researcher's Role

In qualitative studies, the researcher is considered as an instrument (Denzin & Lincoln, 2003). This means the process of data gathering, whether conducting the semistructured interview or observing the phenomenon is facilitated by the researcher (Denzin & Lincoln, 2003). In the current study, the researcher engaged in roles that are not apparent in quantitative research. First, I involved in the recruiting activities as underlined in the previous section to secure potential participants. Second, I had a direct role in communicating with the potential participants to establish adequate awareness about the intent of the study and coordinate schedules to conduct the interview. Third, I conducted the interview. Fourth, I kept a research journal indicating personal reactions and reflections. Finally, I engaged in data analysis and verification of findings.

Data Collection

My study used a face-to-face interview to generate subjective data about the phenomenon. Data collection protocol included conducting an unstructured, open-ended interview, and taking interview notes. My role was conducting an interview.

Data Analysis

The context of the study and participants' subjective experiences can make the qualitative study fluid (Frechtling & Sharp, 1997). The process of data analysis in terms of a qualitative study includes exploration, transcription, identification, and interpretation of emerging themes (Frechtling & Sharp, 1997). The first step of qualitative data analysis involves developing a clear understanding about what the gathered data communicate about the phenomenon (Moustakas, 1994). Reading the entire interview transcript more

than once to make sense of participants' self-report was critical. This objective was achieved during the transcribing process and after the completion of transcription of all the raw data.

The second step included identifying and highlighting statements meaningful to the phenomenon. The identified statements are what Moustakas (1994) referred to as horizons, which are statements extracted from the text. These two steps were necessary to begin labeling to categorize individuals and group themes with psychologically sensitive expressions (Giorgi & Giorgi, 2003, p. 252). The psychologically sensitive expressions would portray emotional experiences such as sadness, depression, anxiety, and stress that participants experience during the processes of ethnic identity formation and acculturation. The steps of Moustakas were valuable in obtaining detailed and essential descriptions about participants and their perceptions. The current study implemented the qualitative data analysis process to classify, sort, and organize emerging themes.

Verification of Findings

True to the qualitative inquiry tradition, my study employed three verification methods instead of validating. The first verification step involved members checking. This is a verification method where the researcher involves participants to test the analytical categories that underline the interpretation of the raw data and the conclusions about the research interest (Creswell, 2009).

Member checking to ensure the accuracy of the decoded data took place in the course of the interviewing process. Second, participants were also contacted to verify the manuscript once the data gathered through interview are transcribed. Third, in the case of

peer examination, two doctoral students from Walden University with substantial knowledge of the qualitative data analysis served as peer examiners (Creswell, 2009). Doctoral students enrolled in the dissertation course were given the opportunity to participate in the peer review.

As indicted by Creswell (2009), clarification of researcher bias is critical to maintain the integrity of the proposed study. As the second-generation Ethiopian immigrant, my personal lived experiences in the course of the acculturation and identity formation process needs to be communicated to the readers to verify possible biases (Creswell, 2009). The verification steps were employed providing a detailed and comprehensive description of the phenomenon.

According to Creswell (1998), providing a detailed description of the phenomenon allows the reader to determine whether the finding can be transferred to a different setting based on commonly shared characteristics. Finally, because mt study dealt with complex emotional and social issues that 1.5 and second-generation immigrants encounter during the course of the acculturation and ethnic identity formation process, the complexity of the data were welcomed that may contradict from the main body of evidence (Patton, 2002). In this case, the use of negative case analysis was necessary to search for the unexpected or discrepant data to refine the data analysis and arrive at an alternative explanation.

Summary and Conclusion

The trustworthiness of qualitative exploration is determined by the way in which the researcher protect, respect, and represent participants' voice. In this chapter, I defined

the nature of the methodology that served as the best instrument to explore the current phenomenon. Because the purpose of the proposed study was to generate qualitative data necessary to describe young immigrant Ethiopians' social, cultural, and psychological experiences encountered during the acculturation process to learn how these experiences shaped their perception of mental health issues, phenomenological exploration was necessary. My study incorporated 12 participants recruited through multiple sampling strategies, including purposeful and snowball. The research questions provided clarity and parameters for the interview questions to generate the subjective knowledge about participants' experiences regarding the proposed phenomenon. To maintain the integrity, dependability, credibility, and transferability of the proposed research, clearly defined measures, data collection and analysis procedures, and verification of findings were employed. A careful observation about my study's cultural phenomenon and honest reporting of the outcomes were significant elements of my study that were only achieved through the implementation of the stated procedures.

Chapter 4: Results

Introduction

The purpose of this phenomenological study was to explore identity formation, acculturation processes, and beliefs about mental health-related issues among 1.5- and second-generation Ethiopian immigrants. I also aimed to explore how Ethiopian immigrants related these processes to their perception of mental health-related issues. In this study, I conceptualized mental health-related issues as participants' views of and familiarity with mental health services, and mental health conditions including depression, anxiety, and sensitivity to stress triggers. I conducted 12 face-to-face interviews to explore participants' lived experiences.

I used the following research questions (RQs) to guide my study:

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Subquestion 3.2: How do second-generation Ethiopian immigrant young

adults in the metropolitan Phoenix area explain their experiences of the

majority culture?

RQ4. What are 1.5- and second-generation Ethiopian young adults' beliefs about

mental health-related issues?

Subquestion 4.1: How do 1.5- and second-generation Ethiopian young

adults relate their acculturation and identity formation processes to their

beliefs about mental health-related issues?

In the subsections of this chapter, I discuss the setting, demographics, data

collection, data analysis, evidence of trustworthiness, results, and summary of the study.

Setting

I conducted the interviews at the Phoenix Public Library private/group study

rooms. I recruited participants of the study in two ways. The first recruiting strategy

involved using the Ethiopian Community Chairman's suggestion to approach four

potential participants. Upon securing the telephonic contact information from the

Ethiopian Community Chairman, I reached out to each participant separately. I completed

the coordination of securing these four potential study participants in the span of the first

2 weeks of August of 2016. Once verifying the availability and eligibility of these

potential participants, I provided copies of the informed consent form to all study

participants to sign and return.

The other recruiting step that I took included spending the following week to

approach the two existing friends from the Ethiopian community to expand the recruiting

process using a snowball effect. Two of my friends from the Ethiopian community helped

me to obtain the names and contact information of two other potential study participants.

I screened these two potential participants later to determine their appropriateness to

participate in the study.

The recruitment phase was concluded in August 22, 2016, after securing all the 12

study participants. My first face-to-face interview was conducted in August 27, 2016, at

2:00 p.m. at Phoenix Public Library. No psychological or medical issue was noted by

participants during the interview process. All 12 face-to-face interviews were conducted

at Phoenix Public Library. Phoenix Public Library was chosen because of its centrality to

all the study participants' residence/work area and its neutrality. I spoke with the Phoenix

Public Library manager to provide information about the nature of the proposed study

and to inquire about the use of study rooms for conducting the research. The manager

informed me that the private study rooms were free to use, but I needed to book the

rooms in advance to ensure room availability Participants did not raise any issues

concerning the location or convenience of the setting.

Participants did not report any life-altering adverse conditions, such as personal

injury, trauma, loss of loved ones, loss of job, or living standard change due to a budget

cut during the data- collecting process. The participants of the study were not

experiencing any negative life-altering events while participating in the data-gathering

process.

Demographics

All 12 study participants completed the demographic and mental health data indicators designed to help screen participants' eligibility for this study. The demographic and mental health data incorporated information on participants' age, where they were born, how old they were when immigrated to the United States, if they were not born in the United States, where they lived, their history of mental health condition, whether they currently receive mental health treatment, and their English language proficiency. The study incorporated three second-generation, young, Ethiopian immigrants and nine 1.5-generation young Ethiopian immigrants who lived in the Phoenix area.

I collected data in the metropolitan Phoenix area from July through August 2016. Twelve 1.5- and second-generation young adult Ethiopian immigrants participated in the study. Eight females and four males ranging in age from 19 to 29 years ($M = 24.08$, $SD = 3.13$) participated in this study. The study participants' detailed information is listed below in Table 1. I used pseudonyms to ensure confidentiality and conceal the study participants' identity.

Table 1

Profile of Participants

Pseudonym	Age (y)	Country of origin	Immigration status	Arrival to the United States	Mental health treatment history
Bella	24	Ethiopia	2nd-generation immigrant	Born in the United States	None
Tia	27	Ethiopia	1.5-generation immigrant	Arrived to United States at age 2 y	None
Michael	28	Ethiopia	1.5-generation immigrant	Arrived to United States at age 3 y	None

Table continues.

Tasha	19	Ethiopia	1.5 generation immigrant	Arrived to U.S. at age 4	None
Britney	23	Ethiopia/Eritrea	2nd generation immigrant	Arrived to U.S. at age 5	None
Lue	22	Ethiopia	1.5 generation immigrant	Arrived to U.S. at age 6	History of anxiety
Shannon	21	Ethiopia	2nd generation immigrant	Born in the U.S.	History of anxiety
Dan	29	Ethiopia	1.5 generation immigrant	Arrived to U.S. at age 8	None
Alexus	22	Ethiopia	1.5 generation immigrant	Arrived to U.S. at age 9	None
Brandon	28	Ethiopia	2nd generation immigrant	Born in the U.S.	None
Tabitha	23	Ethiopia/Eritrea	2nd generation immigrant	Born in the U.S.	None
Amy	23	Ethiopia/Eritrea	1.5 generation immigrant	Arrived to U.S. at age 12	None

Having secured the contact information of the identified potential participants, I initiated contact with each of the 14 contacts over the phone to introduce myself and the purpose of my phone call. I also scheduled a preliminary face-to-face meeting to provide an overview about the proposed study, supply the study's sample questions, and conduct the demographic and mental health status screening. Twelve out of 14 potential participants expressed interest and signed the consent form. At this time, I provided copies of the consent forms for each of the 12 participants and secured an appointment time according to their availability and convenience.

Data Collection

The current study incorporated 12 young adult Ethiopian participants to conduct a face-to-face semi-structured interview about their lived experiences. The interview was conducted to explore 1.5 and second generation immigrants' lived experiences that they

encountered during the acculturation and identify formation processes. All study participants were recruited from the Phoenix area by incorporating a snowball sampling through the Ethiopian community leadership's suggestion and the two existing friends from the Ethiopian community.

Participant Demographics

Each study participant signed informed consents to participate in audio recorded interviews, which lasted an hour long with the exception of one participant who completed the face-to-face interview within 33 minutes. Each of study participants took part in a single audio recorded interview session. Phoenix Public Library was utilized as a convenient location and venue to conduct the audio recorded face-to-face interviews. The phenomenological data gathering or the face-to-face interviews processes took place from August 28, 2016, through October 8, 2016. The same data collection protocol was implemented throughout the interview process. No variation in data collection from the plan presented in Chapter 3 was encountered.

Summary of Participants' Profiles

Bella. Bella was a 24-year-old, single female, and second generation Ethiopian immigrants who is a full-time banker and graduate school student. Participant 1 was born from 1.5 and first-generation Ethiopian immigrants parents and raised in Phoenix, Arizona. Participant 1 involved in a romantic relationship with 1.5 Ethiopian immigrant.

Tia. Tia was a 27-year-old and 1.5 single female immigrant. Tia immigrated to the United States through the Diversity Visa Lottery (DV) at the age of 11 with her mother, two brothers, and sister. Tia was a registered nurse who stated plans to go back to school

for graduate studies. Tia had been living in the United States for the last 16 years.

Michael. Michael was a 28-year-old single male. Michael immigrated to the United States with his family through the DV when he was 3 years old. Michael is the youngest of four siblings. Michael is a full-time airline employee who is trying to become involved in an inter-ethnic romantic relationship.

Tasha. Tasha was a 19-year-old single female who was immigrated to the United States through the DV when she was 2 years old. Participant 4 had three siblings, one older sister, older brother, and younger sister. Tasha is a first- year nursing student at Arizona State University.

Britney. Britney was a 23-year-old second generation Ethiopian immigrant. Britney was a recent college graduate who is single and working as an elementary educator. Participant 5 was born from first-generation Ethiopian immigrant parents who were raised in the greater phoenix area. Britney had three siblings, an older brother, younger sister, and younger brother.

Lue. Lue was a 22-year-old 1.5 generation immigrant Ethiopian single male. Participant 6 was immigrated to the United States of America through the DV with the rest of the family when he was 3 years old. Participant 22 was in his final college years studying in the field of electronic engineering.

Shannon. Shannon is a 21-year-old recent college graduate female who immigrated to the United States of America through the DV with she was 3 years old. Shannon had two older sisters whom participant identified as support and inspiration in her academic pursuit. Shannon reports as being active socially and planning to go to

graduate school to become a lawyer specializing in an international law.

Dan. Participant 8 is a 29-year-old 1.5 Ethiopian single male immigrant. Dan arrived to the United States of America as a refuge from Kenya with the rest of his family at the age of 5. Dan was the second oldest of four siblings who was living in one of the refugee camps in Kenya with his family. Dan's parents had fled Ethiopia to Kenya to seek political asylum during Ethiopia's socialist regime. Dan was fluent in English, Amharic, and Swahili, the national language of Kenya. Dan was in a committed long-term inter-racial romantic relationship with a Caucasian female.

Alexus. Alexus was a 22-year-old second generation single Ethiopian immigrant female. Alexus is the youngest of four older siblings. Participant works as full-time loan consultant while completing college education in the area of accounting.

Brandon. Brandon was a 28-year-old second generation single Ethiopian immigrant male. Brandon had three older and one younger sibling. Brandon works as paramedic and planning to go to nursing school the following year. Brandon has visited Ethiopia twice since coming to in 1993. Brandon reported that he would like to get involved in an inter-ethnic marital relationship.

Tabitha. Tabitha was a 23-year-old second generation Ethiopian female immigrant. Participant was born in San Francisco, California, from first-generation Ethiopian immigrants. Participant 11 and her family moved to Phoenix, Arizona, when Tabitha was 5 years of old. Participant 11 was the oldest of three siblings. Tabitha was in a committed long-term inter-ethnic romantic relationship planning to get married in 2017. Participant 23 was a college graduate who was working as a human resource consultant.

Amy. Amy is a 23-year-old 1.5 generation single Ethiopian immigrant. Amy arrived to the United States of America with the rest of the family through DV when she was 5 years of age in 1999. Amy was a second-year medical student at University of Arizona. Amy had three siblings.

Data Analysis

Upon the completion of data collection, I took the role of a transcriber, a role I took upon myself instead of utilizing a third part for two important reasons. The first reason was that the transcribing duty would provide me with an added opportunity to familiarize and internalize myself with participants' interview responses. Despite the time and undivided attention to details the transcribing effort required, transcribing the audio taped interview responses word by word into written format proved to be beneficial to the quality of data analysis.

The effort helped me hear the responses again as I was transcribing, which was instrumental in assisting me to formulate a deeper understanding about each participant's experiences and their meanings (Moustakas, 1994). Engaging in the transcribing effort was also beneficial as I was familiar with some of the ethnic words and sayings few of the participants utilize to describe their experiences. During the transcription process, I had to focus on a single interview before moving to the next transcription effort. This approach was consistent with the interpretation of phenomenological analysis.

The second reason why I embarked on the effort of transcribing the audio recorded interviews instead of incorporating a paid third-party transcriber was for a financial reason. It became apparent after multiple attempts how difficult and time-

consuming it was to find an affordable transcriber in the time table in which I wanted to see the transcription was completed. It turned out tasking myself in the transcription process was both beneficial in cost cutting and familiarizing myself with the data. This aspect of the transcriber's role would be discussed below when I discuss the issues of dependability and confirmability.

Once I completed the transcription's task, first, I took time to read and review each transcript in its entirety more than once. The goal here was not only to familiarize myself with participants ' self-reports but also to develop a deeper understanding about participants' lived experiences with regard to the phenomenological research questions under explorations (Moustakas, 1994). Second, I noted and highlighted expressions and statements from the text, which I found to have relevance to participants' acculturation and ethnic identity formation processes, as well as how these processes may have affected their perception of mental health-related issues.

Third, I completed the line-by-line coding and focused coding for each of the 12 interviews (See examples on Tables 2 & 3). As Smith and Dunworth (2003) discussed, engaging in the process of coding each interview separately assisted in gaining the necessary insight about each participant's lived experiences. This process was important in helping me to identify emerging themes or trends from the qualitative data. The line-by-line coding was important in guiding the data analysis because it helped to clarify my decision regarding the kind of data I need to focus to begin to distill the qualitative inquiry (Charmaz, 2004). The focused coding process was necessary in narrowing my inquiry on data that were relevant and meaningful in conceptualizing emerging themes

(Charmaz, 2004). I also practiced memo writing, which I found to be important in

helping me reflect upon participants' responses and lived experiences.

Fourth, based on the focused coding paved the way to formulate subsequent

categorizations to highlight common themes, depending on their "overriding

significance" in relation to the collected data (Charmaz, 2004, p. 509). The coding

process, including the line-by-line coding and focused coding was an essential aspect of

data analysis because the coding effort helped me to identify emerging trends or themes

from all 12 interviews (Dcuir-Gunby, Marshall, & McCulloch, 2011). Fifth, I constructed

a codebook to indicate a list of codes to describe and define emerging themes based on

generated data. In this stage, in addition to identifying specific themes, I utilized a

codebook for each of the interviews to list specific codes and emerging trends by

providing examples through direct quotes from each participant (see example in Table 4).

The lengthy coding process was necessary because the coding process, including the

distilling and categorization of data to formulate an informed conceptualization about the

phenomenon based on the collected data, was the foundation for theme identification.

Sixth, I constructed comparison tables to formulate understanding about the way

in which participants' responses compare. As Gibbs (2009) indicated, integrating a

comparison table as part of the data analysis was important since a comparison table was

"a convenient way to make comparisons across different subgroups (Gibbs, 2009, pp.

78). This process was carried out by coding, which served as a shorthand synthesis of

relevant data. Seventh, at the stage I distilled specific codes and emerging themes from

the data. To complete this task, I used a table to indicate the migration of specific codes

into emerging themes and subthemes. I did not take into consideration themes that occurred in only one of the interviews.

The analysis process was geared toward identifying emerging themes based on their communality and shared awareness. Having provided the above description to highlight the steps taken to analyze the qualitative data, the following description introduced the specific codes and themes that emerged from the data. Below are samples of the line-by-line coding and focused coding (see Tables 2 & 3) and coding book (see Table 4).

Table 2

Sample of Interview Excerpt Line-by-Line and Focused Coding

Raw data	Line-by-line coding	Focused coding
Q. Tell me as to what kind of language do you speak in your household A. I speak *Tigirgna.* But I mean mainly we speak English. So, I would say English is the main language but Tigrigna is prominent as well. With my mom, the most as probably I speak is Tigrigna to her. With my sister, I speak mainly English unless the situation calls for us to speak Tigrigna for whatever reason. But it is very minimal we just go to speak Tigrigna first.	Bilingual Consider English as a main language Use Tigrigna to communicate with mother Use Tigrigna when the situation calls for	Bilingual English as primary language Bilingual

Table 3

Sample of Interview Excerpt Line-by-Line and Focused Coding

Raw data	Line-by-line coding	Focused coding
Q. What do you consider the personal, cultural, and social barriers that my trigger mental health issues? A. A lot of issues. You grow up in the American culture but you have to go home and live like as an Ethiopian with total submission to your parents. There are a lot of expectations from your parents to be the best at school work. That might not be your thing especially you see other kids coming from American family don't take their school work seriously. You live in this constantly changing and tensioned world. You want to please your parents and live according to their expectation based on their cultural view. You also live in the culture where you feel like you are encouraged to do things makes you happy. So, I guess, I can say competing expectation and different social and cultural message you get may trigger you to experience stress and other mental health issues.	The tension between living in America as an Ethiopian Parental high expectation for success at school -Other students who come from American family take school work lightly Desire to please parents in the world that is constantly changing Parental expectation based on their cultural view Acknowledging how living in two competing cultures may trigger mental health issues	Struggle due to the tensions between two cultures High Ethiopian parent's expectation Less pressured American students' expectations Desire to please parents Living in two competing cultural expectations

Table 4

Sample of Coding Book With Interview Excerpt

Code	Description	Example
Protective factors (Theme 3)	Siblings support	"I go to my siblings rather than my parents because there is no communication. They are very one sided when it comes to "this is how I am going to raise my kids." There is no really that understanding, "no, things don't work like this in America." I think the presence of my siblings helped their adaptation to America." "But it could be hard, one if you don't have any siblings. May be, emotionally you become very closed off and if you don't have you can talk to, you can get depressed" "I see how someone who is not mentally strong, young, or someone who is not, especially when you live with all females or women and you know, you think you do staff outside just to fit in." (Alexus). "As I said, my initial social interaction was around Ethiopians that went to the same church my parents went. I met up other Ethiopians who also were my age." (Michael).

Evidence of Trustworthiness

Credibility. All the study participants appeared transparent, willing, and free of coercion during the screening session to determine their eligibility for the study. The study participants were notified of the freedom they have to refuse to answer any question at any time during the course of the interview process. The study participants also were reminded of the freedom they have to walk away from the interview process at

any time with no consequences. To enhance the credibility of the phenomenological exploration, the Ethiopian Community Leadership received the research questions for their review and feedback. The Ethiopian Community Leadership reviewed the research purpose, methodology, including the research questions before stating their support and approval of the study. The other measure that I took to strengthen the credibility of the inquiry was to provide potential study participants with samples of the research questions during the recruiting phase to review the clarity and appropriateness of the questions.

Transferability. Transferability refers to the degree in which particular study findings can be generalized or applicable to a different setting (Patton, 2002). Study findings are considered to have a transferable quality when researchers conduct a similar inquiry in a new or different setting and obtain an outcome consistent with the original study (Patton, 2002). These participants' subjective experiences may or may not be transferred to individuals of a different setting. To be cautious when attempting to transfer the principles discovered in this study to a different setting is necessary. Even if the current study may generate insight about 1.5 and second generation young adult Ethiopian immigrants' acculturation and ethnic identity formation, as well as understanding how these processes influence immigrants' perception on mental health-related issues, future researchers must build upon current findings to expand the study's transferability.

Dependability. To remain consistent throughout the inquiry to increase the degree of dependability is also important. One of the ways by which I attempted to ensure the dependability of the study is to make sure that I maintained an audit trail through the

research process. Two reasons why I maintained an audit trail were, first, to create an audit trail to report on the progress of the study to the dissertation research team. The other reason I maintained an audit trail was to report in detail the processes of data gathering and interactive qualitative analysis to future inquirers so they may repeat this inquiry in the format this study was conducted. Because the issue of dependability involves the attempt to examine and ensure the process of the qualitative inquiry in the way in which there is consistency overtime under different conditions (Lincoln & Guba, 1985).

The files of my audit trails include transcripts, coding texts, specific and themes, and the comparison tables that I created during data analysis phase. I have also utilized a transcriber (identified in Chapter 3) to verify the consistency between the raw data or transcripts and identified themes. These steps are important as ensuring consistency enhances the possibility of the findings of this study will be replicated in a different setting.

Confirmability. Confirmability is the extent in which the researcher maintains neutrality so that participants' responses dictate the outcome of the study (Bloomberg & Volpe, 2008). The purpose of this study was to explore 1.5 and second-generation Ethiopian immigrants' identity formation, acculturation processes, and how these processes influence their beliefs on mental health-related issues. The steps taken to ensure the minimization of personal bias diluting the quality of the study include ongoing self-reflection or checking throughout the inquiry. This is very necessary as I am part of the Ethiopian community under exploration who might have similar experiences with

participants with regard to the acculturation and identity formation processes. The other step utilized to address concerns of confirmability involving documenting data collection and steps of analysis.

Research Results

This phenomenological exploration was conducted to find out the lived experiences of 12 young adult Ethiopian immigrants' acculturation and ethnic identity formation processes and how these processes inform their perception of mental health-related issues. In this study, 1.5 and second generation young adult Ethiopian immigrants who lived in greater Phoenix, Arizona, area were presented with semi-structured open ended questions to share their experiences. Twelve study participants were willing to sit down for an hour-long, face-to-face, audio recorded interview. All of the study participants indicated interest in becoming involved in a kind of discussion that tackles the experiences 1.5 and second generation immigrants may encounter while living in the United States.

Participants' firsthand accounts were clustered under four themes. By utilizing the qualitative data analytical procedures as stated earlier, four themes emerged: (a) immigrants' acculturation struggle, (b) immigrants' ethnic identity challenges, (c) protective factors and coping mechanisms, and (d) heritage based mental health perceptions. The data analysis also facilitated the emergence of 13 subthemes that helped to unpack the identified themes. Table 5 indicates these four themes with their corresponding subthemes derived from the interviews.

Table 5

Themes and Subthemes Derived from the Interviews

Themes	Subthemes
Theme I: Immigrants' Acculturation Struggle	a) Parental lack of acculturation • communication difficulty with parents • living with parents who are not well acculturated • high academic expectation • confronted with initial culture shock b) Living in two worlds • struggle to live in two worlds • navigation through gender roles • tension to satisfy the demands of two cultures • two sets of personalities c) Feeling like an outsider • struggle to adapt or to fit in • struggle to be accepted at school/work
Theme II: Ethnic Identity Challenges	a) Denying or running away from ethnic identity • rejection of cultural heritage • identifying self as African American or American • preferring to associate with While Americans only b) Being self-conscious about ethnic heritage • being conscious of ethnicity/physical attribute • being ashamed of parents' accent • refusing to associate with individuals of the same ethnicity c) Struggle to master ethnic culture/language • inadequacy to master ethnic cultural awareness • declining to identify self as an Ethiopian
Theme III: Protective Factors/Coping Mechanisms	a) Family support • parental commitment to educate about cultural heritage • siblings' support • presence of cultural heritage in the household and visiting home land b) Ethnic based community support and social support • ethnic based churches • ethnic based community organization • having a sense of community • having Ethiopian friends • peer support during high-school years identity exploration • socializing with other 1.5 and 2nd generation Ethiopians • Inter-ethnic mating

Table continued.

c) Cultural events
  • attending ethnic based festivities (Ethiopian New Year)
  • eating ethnic foods
  • maintaining ethnic language
d) Being born in or early arrival to United States
  • Being born in the United States
  • arriving early
  • bi-culturalism and bi-lingual
  • researching about cultural heritage

Theme IV: Heritage Based Mental Health Perceptions	a) Lack of open communication
	  • do not talk about mental illness
	  • do not ask about mental illness
	  • scared to talk about mental illness
	  • do not know about mental illness
	b) Cultural mental health belief
	  • demonic and a sign of spiritual force
	  • prayer is the answer
	  • a taboo
	  • shame
	  • a sign of weakness
	  • not Ethiopians sickness
	c) Perception of mental health services
	  • not aware of mental health services
	  • do not need mental health services
	  • don't believe in mental health services

Theme 1: Immigrants' Acculturation Struggle

Participants acknowledged the struggles they faced during the acculturation process. These major acculturation struggles were identified and grouped into three subthemes, depending on the issues they represented. The three major struggling issues were parental lack of acculturation, living in two worlds, and feeling like an outsider. The following section is devoted to unpack the struggles the study participants encountered during the acculturation phase.

Parental lack of acculturation. The subtheme parental lack of acculturation refers to the major struggles the study participants encountered in the course of their

acculturation due to parents' lack of acculturation. Participants reported that they struggled with acculturation because of parents' lack of acculturation demonstrated through communication breakdowns. The study participants attributed the communication breakdowns they experienced during the acculturation process to parents' lack of skills in the English language. As reported by participants in this study, parents' lack of acculturation to United States' cultural norms also contributed to the struggle they faced in the course of their own acculturation process.

> *Bella.* My mother's English language was not good when she arrived here. My father grew up here. He had an American wife. But that marriage ended in divorce. Then after few years, he wanted to get married to an Ethiopian woman. That is how my mother came to the U.S. so communicating with mother was difficult when my sister and I were growing up. For sure, we had a lot of communication breakdowns with my mother growing up. You know I was born and raised here. My Amharic was not good to talk to my mother in Amharic either.

According to several participants in this study, parents' initial cultural shock was one of the issues that caused participants to struggle during the acculturation process. The study participants indicated the added responsibility placed on their shoulders to help and guide their parents to become stabilize and move through the initial cultural shock. For example, Michael had to assume "the parental role helping in comforting" his mother because of the cultural shock that affected his mother the first year the family relocated to the United States.

Michael reported that prior to relocating to the United States; the family lived comfortably with the income his father used to generate as a commercial pilot. Michael's mother, who was a full-time housemaker back in Ethiopia and who had never worked outside of the home, had a hard time facing the new reality and demand in America working outside of the home to support the family. Michael's mother struggled due to working outside of the home and lacking English language fluency. As Michael stated, his mother's initial culture shock was caused by the new demand for the mother to work outside of the home while struggling with inadequate English language proficiency.

When describing the initial acculturation struggle, participants described the experience by utilizing contrasting terms. According to Tia, the initial cultural shock was attributed to her mother's lack of acculturation.

Tia. The cultural shock was real and difficult. This is because the way you grow up in Ethiopia is very different from here but when you come here, it was a struggle. It was a shock. My mother struggled to adjust to the American culture as she was forced to work outside of the home to support the family.

According to Tia, her mother struggled to adjust to the American culture as she was forced to work outside of the home to support the family.

Tia. My mother did not speak English prior to coming to America. Witnessing her confusion and struggle because of her lack of knowing what is acceptable here in American and not having the English language proficiency to let people know about her feelings and thoughts was difficult.

While study participants acknowledged the struggle and challenges they

encountered because of their parents' lack of acculturation, several participants in this study attributed some of the struggles to their own lack of acculturation. For example, encountering a cultural shock was one of the struggles Tia and most of the study experienced. Tia indicated the economic pressure she experienced as a struggle she faced during the initial acculturation phase as the most shocking realization of living in the United States.

For Tia and other study participants, including Michael and Lue, it was unimaginable to have their mothers and unmarried older siblings to be forced to work outside of the home to support the family. "My mother never worked all her life back home . . . my dad was the provider," reported Tia. The cultural shock triggered by witnessing mothers and older siblings who have not left the home yet being tasked to work outside the home was a phenomenon identified as a contributing factor to the struggle participants faced during the acculturation process. The difficulties parents of the participants encountered due to the cultural shock and lack of acculturation were not isolated phenomena. Several participants in this study also acknowledged their own experiences due to culture shock.

For example, the participants reported encountering cultural shock by witnessing their mothers being subject to work outside of the home. This particular cultural shock was caused due to the fact the study participants came from a cultural background where fathers were considered as sole breadwinners for the entire family.

Tia. You come here, it was a struggle for a year and after that my older brother who was 19 starts working and my mom starts working. It was a new thing, a

cultural shock to see the family's initial struggle happening but that struggle

helped to adapt to new things and after that things started to look good

The study participants and their family struggled because of lack of the English

language proficiency. Tia continued to share the difficulty she experienced mainly due to

lack of language proficiency.

Tia. You know the language barrier and you have to get a ride to get to the places

in Arizona at that we did not have that much *Habbasha (a common word used to*

describe people from Ethiopian and Eritrean heritage) during that time to get

apartment, to go buy shopping for food. It was bad first.

The study participants reported the struggle they faced during the acculturation

process due to parents' high academic expectations and the demands of the new culture.

Michael stated the struggle he went through due to the high expectation his parents set for

him early on without considering the kind of pressure he encountered when he was

outside of home.

Michael. We were supposed to go to school and, you know expectations are set

for us early on. It can be challenging, especially, kids at the time asking us how

thing was back home. Why we were here? You know, I would say it was in fact

difficult as far as trying to fit in, make friends, and learn the American culture.

Tasha acknowledged how her parents' set high expectation for her. As first-

generation immigrants, parents put a pressure on her to the point she was unable to

process her feelings with her own father. Most of the participants in this study talked

about the pressure and stress they experienced because of the fear of disappointing their

parents.

   Tasha. I remember one time, which I really talked to my dad was in high school

   me getting a bad grade and that was when I was at my breaking point and upset.

   According to the qualitative data gathered in this study, facing extra pressure and

stress due to parents' demand and expectation for academic excellence was a commonly

shared phenomenon. Tasha also reported the struggle she faced because of her parents'

lack of acculturation and culturally motivated high expectations.

   Tasha. My parents, they don't really, they try to adapt to American culture. It is

   the Ethiopian culture in our house, most of the time. My parents always push me

   very hard in school. I would be the one they push a lot. Bad grade or things like

   that for me were really, really hard. I couldn't talk to them about it because I did

   not want to upset them.

   Living in Two Worlds. It was not only high academic expectation, initial cultural

shock, and communication breakdown due to parents' lack of English language

proficiency that presented difficulties during the acculturation period. Several participants

in this study acknowledged the struggle they faced during the acculturation process due

to parents' strong attachment to their cultural heritage. Parents' increased imposition for

the rest of the household to be extremely loyal to the ethnic heritage and cultural norms

put extra pressure on 1.5-and second-generation immigrant.

   Living between two cultural expectations where constant switching between roles

at home and outside of the home was one of the most struggling points the study

participants pointed out. For example, Tasha discussed her struggle to live in two separate

cultural norms at home and outside of home.

> *Tasha*. My parents would always say 'we are as if we are living in Ethiopia still, but in America,' that is how our house is a lot. Because they brought the culture with them and always we have the culture in our home.

Even if the study participants acknowledged the importance of having ethnic cultural presence at home as a valuable asset in the course of ethnic identity development, several participants in this study indicated feeling pressured by their parents to hold on to their cultural heritage and not adapt to the norms of the majority culture.

This parental pressure included dressing or grooming style and communication patterns. For example, Lue stated that one of the conflicts that he has had with his father involved his dressing styles. According to Lue, his father tends to take offense over his dressing styles. This was due to how the first-generation immigrant parent viewed Lue's dressing styles as a style or behavior, which did not confirm to ethnic cultural value. "I butt-headed with my father mostly because of the way I dress," reported Lue. Putting on ripped jeans with baggy sweater was a style acceptable to the culture where Lue grew up while the same style was despised at home by Lue's father.

The study participants acknowledged the disparities they see in the way in which their peers from the majority culture interact with their parents compared to their own communication and relational patterns they had with their immigrants' parents. For example, Britney stated, "you see American interact with their parents and completely different than you interact with your parents. They say certain things but you can't say those things." According to Britney, there is expectation by the immigrant parents for 1.5-

and second-generation immigrants to take upon household responsibilities, experiences may not commonly shared by their counterparts from the majority culture. Following is a direct quote utilized by Britney to describe her lived experience:

> They are expected to do not as much but we are expected to help a lot, especially at home to do things. So it took times for me to say, 'Ok it is cultural differences,' you have to understand and work around it.

Brandon also discussed the struggle of living in two worlds because of two sets of cultural norms at home and outside of the home. According to Brandon, there were times where he was forced to carry on two different personas to meet the cultural demands of the home culture and the majority culture. "This is difficult. I think to this day, I am not fully, 100% where I take that part of the culture bring it to my home. I just can't act the same way. It is two different cultures," stated Brandon.

The participants identified the dissonance they experienced due to parents' refusal to allow them to participate in one of the most common practices in the United States. "My parents did now want me to have a sleepover," was a common complaint. "You have your own home to sleep. Why do you want to go to somebody's house?" was the response Shannon said received from her mother. According to Shannon's mother, to have a sleepover at friend's house is a sign of poor parenting. This culturally motivated refusal to allow young immigrants to experience a sleepover caused stress on participants' interpersonal relationship with their peers from the dominant culture. Brandon said: "friends from the American family do not understand how a parent refused a sleepover."

In a case like this, several participants in this study had to be aware of living in two worlds sometime forced them to carry competing agendas. The participants had to remain respectful and loyal to their parents who sometimes refuse to provide permission for the study participants to take part in common cultural practices, including sleepovers. The same 1.5- and second-generation immigrants were also expected to educate members of the majority culture on their ethnic background and customs.

According to several participants in this study, maintaining relationship with members of the majority culture required extra work, including educating friends about ethnic cultural values. Attempting to switch between roles and behaviors to maintain relevancy to the two worlds was an issue that caused an ongoing acculturation struggle to 1.5- and second-generation immigrants. Most of the study participants including Brandon reported the struggle they faced to explain to their friends from the majority culture about immigrant parents' refusal of these common cultural practices such as sleepovers., "Sometimes my friends can't understand why I couldn't go somewhere or couldn't do something just because like for them is mind boggling, just it is disrespectful to my parents," reported Brandon.

Brandon said that things like this such as being denied of sleepovers or going to places with friends after school were difficult concepts for individuals from the majority culture to understand. "My friends say no way that is true but I like no, you don't understand. I can't I need to go home," reflected Brandon on his struggle. Brandon continued:

My friends say no way that is true but I like no, you don't understand. I can't I

need to go home. It is sleepovers or 'let's go to the party' stuff like that. We did

not grow up going to parties. We don't do that. You know what I mean.

In describing the changes in the way the Ethiopian culture and the American

culture views after school extracurricular activities, Brandon added the following

observation:

So, once you come here, it is like after high-school game and they are like, 'Oh

yea, we go please' I say Oh it is 11 o'clock I need to go home and stuff. They get

amazed when I say, 'I have to go home.' They can't understand that because to

them, that is normal.

The participants indicated the struggle they faced due to parents' lack of

acculturation to understand the majority culture's norms such as allowing their children to

socialize with friends. Almost all the study participants reported the struggle they

encounter to explain their parents' refusal to allow them to socialize with friends. "I

couldn't hang out with my friends after school. And I couldn't explain this to my friends.

They don't understand why a parent refused to allow me to have good time with my

friends," stated Brandon.

The participants expressed concern as to whether their first-generation immigrant

parents understood the pressure they faced to fully adapt to the norms of the majority

culture to be successful. For example, Lue reported his parents' reluctance in letting him

to fully acculturate to the American culture. Here following is Lue's self-report:

My parents have a strong affinity to the Ethiopian culture. In more than one

occasion they reminded me that I have to stay true to my cultural roots. It is as if

they were worried that I may end up abandoning my ethnic culture. So I have to

keep that in mind and take things slow about becoming Americanized.

For parents of the participants in this study, demonstrating a strong affinity toward

ethnic customs was highly valued. According to several participants in this study, any

deviation from ethnic culture norms and values considered be a behavior that

demonstrated lack of respect to one's cultural root. For example, Alexus pointed out the

frustration she experienced due to her mother's perceived lack of acculturation as

follows:

My mother's cultural roots are highly connected to the Ethiopian culture.

Anything that does not look and sound Ethiopian is suspected. This is in part

because 'I fear I may lose my little girl if she becomes too Americanized.' What

she does not understand is that I am still her little girl growing up in America

under different cultural views.

The participants expressed their frustration as their parents failed to understand

the world outside of the home or the larger cultural context where these 1.5 and second

generation immigrants spent most of their time interacting with individuals from the

majority culture.

Michael. You are growing up, you are going to school for 8 hours. It seems

immigrants' parents do not understand this fact. I love my parents' culture but I

live in America where things are governed in a cultural expectation that

sometimes in contrast with what my parents would like to see me hold on to.

The first-generation immigrant parents tend to impose a strict rule and expectation

on the 1.5 and second generation immigrants. The study participants acknowledged the strictness motivated because of their parents' strong tie to their cultural heritage. Parents' strong alliance to their cultural heritage and expectations caused relational problems and frictions between the two generations. For 1.5- and second-generation immigrants, abiding to some of those ethnic cultural norms was challenging.

> *Lue.* The Ethiopian culture is very strict in a sense because have different expectation than American culture so it is strict sometime that can cause kids be completely rebellious. I mean, in a certain case [with] little things where I did not want to do certain things, where I wanted to do certain things, and then what they expected me to do or wanted me to do.

Britney also took time to acknowledge the cultural differences that existed between her parents and herself, as a second-generation immigrant contributed to the struggle she faced during the acculturation process. Britney added that "Sometimes there are kind of frictions and misunderstandings between my parents understanding and my American understanding." She continued to attribute parents' lack of acculturation as one of the sources of her struggle. "I wanted to do things, they don't understand, they tell me no, whereas all my friends are doing it and that becomes a struggle between understanding each other," said Britney.

Facing dilemmas in behaving in culturally relevant ways was one of the experiences described by the study participants. This is because the study participants needed to switch back and forth between the two cultural contexts they live. This means that they are expected to behave in certain ways in line with the cultural background

when they are at home with their family. The same young adult immigrants are also expected to behave in the way in which congruent to the majority culture in order for them to be successful.

Alexus reported the struggle she faced during the acculturation process because of the need for switching her communication style back and forth depending on the context. "I did not know who I was because when I come home I have to speak Amharic because my parents are going to talk to me in Amharic," reported Alexus. Alexus acknowledged the acculturation struggle intensified because of language barrier at the result of parents' lack of acculturation. "There is that language barrier so I have to speak Amharic," stated Alexus. However, Alexus is expected to behave and communicate with American friends in a format that is different from the way in which she communicates at home.

> *Alexus.* When I go to school, I got jumped right into English. Not necessary the language but the whole behavior. It is more so how you act. I have to be aware of the constant back and forth in relationship, basically your behavior changes from school to home. So, you have to know how to balance those two. It was stressful. But as I said with time it got better.

For the study participants, the constant back and forth between two cultures was consequential in many aspects of their lives. For example, Alexus articulated the struggle she faced due to her immigration status that made her vulnerable to be exposed to confusion and stress. The stress resulted due to the need for constant role switching at home and outside of the home. For example, the communication pattern, including the non-verbal pattern varied depending whether one communicates at home or outside of the

home. For participants who grew up in the American culture being assertive is acceptable. However, the same kind of behavioral and communication patterns were not encouraged when participants communicate with their parents and older siblings. Alexus articulation about the struggle resulted from living in two cultural contexts was commonly shared by all of the study participants.

> *Alexus.* In the beginning, it was confusing because I am like, "Am I supposed to this way? Am I supposed to that way?" There were times literally I did know what language to speak because I would mix them up more so, trying to figure out what I needed to do and when I needed to do it.

The constant alertness to behave in the way in which the cultural norm required was a source of stress that peers from the American culture do not get to be tasked. Participant understood the cultural differences between their parents' ethnic origin and the American culture. This means not behaving according to the expected cultural norms might expose them to be vulnerable for ridicule and misunderstanding.

Several participants in this study also reported struggling to understand culturally motivated gender roles. For example, Shannon expressed her frustration regarding her father's lack of engagement in normal household chores. According to Shannon, her father claimed that household chores such as helping the family with laundry duty, grocery shopping, and child care belong to the mother and the rest of females in the household. Shannon expressed her experience as follows:

> I did not understand why my father remove himself from all the household chores claiming he is a man. I did not get it. I did not understand why he was not

comfortable to help with a child care, by this I mean feeding and changing my younger siblings. He even became more defiant about helping my mother and us the girls at home when we have visitors from the community. I did not understand why he expected us to give him water and other things while he was able to get them for himself. This was my frustration until I went to Ethiopia for a visit and saw how all men acted around the house. It was a gender role thing.

Britany also stated her confusion over the rigid gender role the informed her father's behavior around the house. "It seems that when he comes home he has no household obligation. He expects to be served. He does not do anything around," said Britany. Michael stated that in spite of his desire to help the family in the kitchen, his mother used inform him that he does not have to be in the kitchen as the kitchen is exclusively designated area for women. "You do not need to be in the kitchen while your sisters and I are around. You will also marry one day a woman who will take care of you," reported Michael. According to Michael, his mother justified this gender based restriction by indicating the Ethiopian traditional cultural practices that encourages rigid gender roles.

Finding the balance and determining the appropriateness of the behaviors the study participants carry out in the context they find themselves was a constant presence in their through process. Most of the study participant described the situation as confusing as they were forced to switch between different cultural settings and distinct cultural norms. For example, Alexus reported the times she asked herself "what and how she is supposed to act in certain settings."

Despite the challenges identified in responding to two sets of cultural norms, several participants in this study identified the benefits of being bicultural. For example, Bella stated living in two cultural contexts increased her multicultural awareness and pride when compared to individuals from the mainstream culture.

Bella. Having additional cultural heritage gave me advantage over my American friends who have no clue about cultures outside of the mainstream culture. I know about a way of life outside of the American main culture. I have a root and that makes me feel proud.

Brandon also acknowledged how living in two worlds made him to feel good about the additional layers of cultural competencies that most of his Americans might not share.

Brandon. When people from the American culture know that I am bicultural they ask me how I manage living in two cultures. This fact gave me additional layer about who I am as a person. I am glad that I am not one dimensional when it comes to culture. Living in two cultures requires the skill to switch back and forth depending where and who I am talking to. Most of my Americans friends do not have this skill.

Feeling like an Outsider. Experiencing sense of being an outsider was one of the difficulties participants encountered during the acculturation process. Several participants in this study acknowledged feeling outside of the majority culture's norms due to their ethnic and cultural heritage. For example, Michael reported his experiences of going through "hurdles" due to the rejection he experienced at school. Michael said he recalled times when "children that were American that did not necessarily accept me because of

where I am from and it was difficult." This was a frightening experience to go through because of its implication on one's self-worth or self-esteem. "You always wonder why I am different and also it was, you know, frustrating on many levels." The pressure of explaining oneself to individuals from the majority culture left a stress mark on the study participants such as Michael who said, "You know, having to explain yourself, understanding yourself you have to have guidance not only from your parents. The transitions were, challenging."

The same adverse experience of feeling "an outsider," which happened during the acculturation process, was shared by Dan. Dan acknowledged the difficulty of the acculturation process exacerbated by the perception that he was an outsider because he looked different. "It was difficult to go through the cultural change in a school setting. I was only 5 at that time, and I found out that I was different from the other kids in the neighborhood and even in KG," reported by Dan.

"In my experience feeling as an outsider get worse with age," stated Brandon. According to Brandon, the more awareness he gained about his ethnic heritage the greater his feeling of otherness persisted. "I know who I am as an Ethiopian American living in America," reported Michael when sharing instants such as feeling pressured by his friends from the dominant culture to confirm to the American way of life with no reservation. For the study participants such as Michael, the overt or explicit message they received from members of the majority culture about their otherness was part of the acculturation difficulty they encountered.

Shannon also shared her feeling of loss during her college years as she

experienced rejection by students from the African Community. According to Shannon, she always felt as a part of the African American community. This assumption had never been questioned until Shannon arrived to the college campus. That was when African American students started to point out her otherness by pointing out her Ethiopian cultural heritage. Tabitha also reported her feeling of an outsider when she described her acculturation experience. "I always knew that I was different," reported Tabitha. Her ethnic background and physical attributes easily marked her otherness when she was growing up in a White-dominated middle class neighborhood.

Theme 2: Ethnic Identity Challenges

Data analysis of participants' firsthand accounts revealed several challenges the study participants encountered during the ethnic identity development process. All of study participants reported encountering challenges during their ethnic identity development process. The challenges participants experienced in the course of ethnic identity formation process included reluctance to identify oneself as an Ethiopian, a preference to associate with Americans, being ashamed of parents' mannerisms and accent, resistance to socialize with other Ethiopians, and identifying self as American or African. The identified ethnic identity challenges are grouped under three major subthemes: (a) denying or running away from ethnic identity, (b) being self-conscious about ethnic heritage, and (3) struggling to master ethnic culture/language. The following discussion highlights the three major challenges the study participants encountered during the ethnic identity formation process.

Denying or running away from Ethiopian ethnic identity. The challenge of running away from one's cultural heritage by clinging or associating with non-Ethiopian individuals was well reported by most of the study participants. For example, Alexus discussed the patterns of her interpersonal relationship as follows. "I associated myself with Americans. I did not care hanging out with Ethiopian friends," reported Alexus. Alexus' refusal to identify herself as an Ethiopian was intentional. This practice was more pronounced when she discussed the motivation behind specific relationship patterns she pursued. "I did not care or practice my culture, I did not practice my ethnicity," said Alexus, reasoning why she chose to associate only with individuals from the dominant culture. For Alexus, associating with non-Ethiopians was convenient and easy since associating with other Ethiopians may require mastery of the ethnic culture or language.

Alexus noted, "I did not like seeing with Ethiopians because all they do is talk in Amharic and ask you these basic questions." According to the study participants, including Alexus, socializing with other Ethiopians represented a challenge of speaking the ethnic language and behaving in the way in which mirrors the cultural heritage. Like most of the study participants, including Tasha, Brandon, and Michael, Alexus came around later in her high-school years to open herself to reengage her cultural heritage.

Alexus. Early on, I had a hard time associating with Ethiopians. All of my friends were Americans and that was easy. Getting myself out of this comfort zone and starting to associate with [Ethiopians] was a challenge early on 'till my high school years.

Michael also acknowledged the challenges he faced during the early stages of the

ethnic identity development phase. According to Michael, running away from one's ethnic identity was part of the survival strategy. "It was not easy to have pride in your ethnic background and still expect acceptance from the Americans," reported Michael. Even if Michael acknowledged the multicultural growth rooted in his -self-awareness that he said he has shown since the early years, he was quick to report the challenges he faced during the ethnic identity development process. The following excerpt underlines Michael's lived experience in terms of the challenges he faced during his ethnic identity development phase.

> *Michael.* I would say in the beginning, especially early in my younger years, I was trying really, really hard to become the norm, be American, and fit in. I know, thinking back, hindsight is 20/20; I kind of steered away a little bit from my culture. Thinking back, it was more so that I wanted just to be accepted. Now you know, now being 28 years old, being an adult, I am much aware of my Ethiopian heritage and my culture.

The study participants' reluctance to identify with the Ethiopian identity, at least initially during the ethnic identity formation phase, was also demonstrated by their tendency to identify with the African American community. "I had to introduce myself as African American or American depending on the situation I find myself in since such kind of labeling made it easy to fit in," reported Michael.

Tabitha also agreed by stating that early on her ethnic development she used to identify and introduce herself as American or African American. Several participants in this study acknowledged referencing or introducing themselves as African American or

American to avoid the question or embarrassment they thought their ethnic heritage may trigger. For example, Tasha reported that she "used to get embarrassed when people find out" she was from Ethiopia. Participants attributed this to the negative stereotypes that people from the majority culture attached to someone with African or Ethiopian roots.

Tabitha also indicated a similar conceptualization of early ethnic identity, which was dominated by denial of family's cultural heritage. "In my younger years, I did not want to do anything being referred as not American or African American," Tabitha reported. According to Tabitha, the fundamental motivation for this intentional act of running away from one's cultural heritage and ethnicity was the need to fit in. Most of the study participants touched upon the uncomfortable and sometime anxiety triggering feeling of being seen or considered as others they tried to avoid. For the study participants, acknowledging their ethnicity early on was a challenge because of its implication in magnifying the study participants' sense of otherness.

The dilemma that the study participants faced in either acknowledging their cultural heritage or moving away from any kind of ethnic identity to avoid being perceived as others was a constant presence during the ethnic identity development process. Most of the study participants would say, "I love my culture. I love my people" but they also reported the dissonance they experienced because they spent most of their time with individuals who did not know or may not have appreciated the participants' ethnic culture.

Several participants in this study reported the confusion and dilemma they encountered while attempting to sort her ethnicity in light of their place toward the larger

American culture. For example, Shannon reported that she used to "associate" with African American through her high school years. "Since I was originally from Africa, I thought I have the right to claim that as my identity," reported Shannon. This conceptualization of ethnic identity was "confronted" when Shannon arrived to college. Brandon also explained the rejection he experienced due to his ethnic background. "I used to shy away from anything Ethiopian. This is very true especially in a public setting," reported Brandon.

Michael indicated "doing everything American to fit in" was a coping mechanism early on. Shannon said she had gone through phases where she was confused about her true ethnic identity. Like Shannon, Brandon, and Michael, participants' effort to run away or attempted to discount their ethnic identity for most was motivated from a desire to fit in and conform to the mainstream cultural norm. Explaining the efforts Michael demonstrated to fit in, he said the following.

> *Brandon.* I was orienting myself with anything considered hip and cool among my friends. I was watching movies and television programs my American friends watched. I developed a sporting interest in football and basketball, the kind of sports not common or popular among Ethiopians. I was doing everything to fit in and to be Americanized to avoid rejection.

The tendency to run away from Ethiopian cultural heritage was common early on. As participants developed a strong ethnic cultural awareness, they embraced their cultural heritage. Several participants in this study reported embracing their ethnic identity as they learned more about their family's cultural heritage. For example, Alexus reported that she

started to learn more about Ethiopian culture once her mother arranged for her to go to visit Ethiopia.

       Alexus. I went to visit Ethiopia and spend time with relatives from Ethiopia. The first visit was short. I did not get much opportunity to sock in everything about Ethiopia. When I went back, I had an extended stay. I used that time to learn about my Ethiopian culture. The more I learned about Ethiopia and its culture, the better I became aware of things. Now I am proud of my Ethiopian side of who I am. I love seeing myself as an Ethiopian American.

       Several participants expressed a similar view regarding their ethnic identity development that evolved through the years as their exposure to the Ethiopian culture expanded further. The participants acknowledged the importance of learning about their cultural heritage and visiting Ethiopia to have a firsthand cultural experience in shaping their ethnic identity formation. In time, the switching between the Ethiopian culture and American culture became fluid.

       The participants acknowledged the considerable easiness they had behaving differently, depending on the cultural context they found themselves. For example, Lue said that he knew what to say and what not to say when he communicates with his father. "You stay away from any kind of argument when it comes to your father," reported Lue. Agreeing with Lue's experience, Britney also said that "you do not question your father even if you know he is wrong." The participants acknowledged the need to be assertive to get their point across.

       Lue. You have to switch your communication pattern when you are with

individuals from the majority culture. Nobody would take you seriously if you don't speak your mind loudly. You have be assertive no matter who you are talking to.

Being self-conscious about ethnic heritage. The study participants identified the parents' thick accent as something that presented a challenge for them to accept. First-generation Ethiopian parents do speak the English language with a thick accent that signifies their status as immigrants. Some of the study participants also reported the public embarrassment they suffered during the ethnic identity development process. For example, Tasha reflected on her experience of this challenge:

Tasha. My parents have a very strong accent because we speak Amarigna. So parent teacher conferences, talking on the phone with different companies, we have to call and help them. That would be, oh, when they come to school, like, they act differently, Ethiopian in their culture in the front with their cameras loud and you know, just being Ethiopian, at the time I would be embarrassed especially in middle school, because then I did understand. "Why do they keep embarrassing me? Why don't they learn English, and that stuff?

Alexus indicated, "One of the reasons why I did not like to identify myself as an Ethiopian early on was because of the embarrassment." *Brandon* also said, "they don't care how they sound, but they sound funny when they speak the English language." As indicated by several participants in this study, the source of this embarrassment was partially the result of the parents' lack of proficiency in the English language and their thick accent.

The participants reported the uneasiness they felt when they were with their parents in public places. Lue also acknowledged the effort he "used to put up to avoid" being seen with this first-generation immigrant in a public area. Most of the study participants indicated developing the comfort level and acceptance of their parents' "Ethiopianized" mannerism and thick accent as they progressed with their ethnic identity development. Tasha articulated this beautifully when she said the following statement. "Imagine if I was raised here and, all of a sudden, I go to Ethiopia and try to act, you know completely Ethiopianized; I know that will be difficult," said Tasha.

Struggle to master ethnic culture/language. Bella reported the root of her lack of self-identification as an Ethiopian or a person with Ethiopian cultural heritage was the result of a lack of cultural and emotional connection with home country. As a second-generation immigrant, Bella felt she has no obligation to align with her parents' cultural heritage. Comments of the participants follow.

Bella. I am American, I was born here. I don't even know where they are from. I don't know Amarigna (the Ethiopian national language).

For several participants in this study, the cultural and ethnic identity crisis, as Michael described it, resulted due to lack of ethnic culture mastery. "I did not feel comfortable with some of the customs what makes one a member of certain ethnic group," reported Brandon. According to Brandon, some of these cultural customs that may signify one's ethnic membership are speaking an ethnic language and participating in cultural festivities. Michael also reflected on a similar challenge he faced because of his fear rooted in his less fluency in culture issues and the Amharic language.

For all the study participants acquiring or maintaining the ethnic language was necessary as a sign of their connection to their cultural root. However, the participants acknowledged experiencing sense of disconnection with their cultural root at times due to ethnic language deficiency. As Lue and Brandon articulated, a certain kind of challenge exists for the study participants because of speaking the Amharic language with an accent.

According to Amy, it is not uncommon to encounter a stereotype even within the Ethiopian community because of their ethnic language capacity and the way in which they speak. "Your parents and other from the Ethiopian community do not take you seriously if you don't know the ethnic language," reported Amy. The study participants noted being self-conscious of their ethnic language usage when they are with their parents and other adults from the Ethiopian community. Michael also indicated the challenge he encountered in terms of mastering the necessary ethnic cultural intricacies while living in the United States.

> *Michael.* Definitely, my ethnicity is Ethiopian living in America--living in America where I am able to function and live a certain life style. However, I can't escape at the same time necessarily not having, you know, cultural identity crisis because I am not sure about some of the things from my cultural roots.

Parents' expectations for the study participants to be fluent in the native language and master the ethnic cultural norms at times caused stress and challenges for several participants in this study. As much as some of the study participants liked to fulfil their parents' desire and expectation of perfecting the ethnic cultural competency, some

limitations they could not master. For example, Brandon touched on this dissonance

between parents' cultural expectation and the reality he lived day-to-day.

> *Brandon.* I spend most of my day outside of the home where there is no need for
>
> me to speak in Amharic or behave in a certain way. Living in America, the
>
> majority of my time is spent with people who are not Ethiopians. I do not think
>
> my parents sometime understand that. I know I would like to improve my
>
> Amharic language and spend time with as many Ethiopians as I can, but the larger
>
> aspect of my life is dictated by the culture I live in America.

Theme 3: Protective Factors and Coping Mechanisms

As discussed earlier, the current study uncovered the kinds of difficulties and

challenges the participants in this study encountered during the acculturation and ethnic

identity formation processes. The participants also acknowledged the resources that

helped them to sustain and overcome the challenges and difficulties they faced through

the acculturation and identity formation processes. As the study participants reflected

back on their journey, they highlighted factors and resources that proved to be crucial to

their ethnic identity development and acculturation successes.

This section of the result is devoted to highlight the protective factors and coping

mechanism as reported by participants of the study. The participants in this study shared

the factors or coping mechanisms they utilized to survive the struggles and challenges

they faced during the acculturation and ethnic identity development processes. There are

four subthemes that emerged from the reports of the study participants. The protective

factors that were identified by several participants in this study are: (a) family support,

(b) ethnic based community and social support, (c) ethnic cultural events, and (d) being born in the United States and early arrival to the United States.

Family support. Several participants in this study acknowledged the crucial role family support played in the course of the acculturation and ethnic identity formation processes. According to the participants, the acculturation and ethnic identity development processes occurred within the context of the support they accessed in the family unit. For example, Alexus acknowledged the role that siblings played in sustaining her during the difficult season of the acculturation process. "To be honest, I think the presence of my siblings helped a lot," reported Alexus when reflecting on the importance of family support.

For Alexus, the family or siblings support was decisive during the acculturation phase. Alexus reported that her family's expectation for her to remain connected to her ethnic heritage helped her to stay grounded in her cultural heritage during the acculturation process. "I did not like my parents' high-expectations and demand for me to be true to my culture at the beginning, but looking back that helped me to stay grounded," reported Alexus. Alexus also expressed appreciation for the kind of support she received from her older siblings. Alexus stated the following remarks when expressing the kind of support she received from her siblings.

They were my link between my parents and me. They helped my parents to understand the culture I was growing up in. And they helped me to understand where my parents are coming from on things from ethnic culture aspects.

For participants of the study such as Alexus living in two worlds was inevitable.

Alexus was living in two, sometimes opposing cultural norms. All of the study participants encountered dilemma and confusion because of the imposed need to constantly switching between two cultural norms. Alexus said, "If it was not for my older siblings, I did not know where I end up by now." It was the presence of older siblings that took upon the responsibility to bridge the cultural gap between their younger siblings and first-generation parents. Alexus explained:

So, my parents, mom and dad obviously, I think they did ok but the fact that my siblings were there helped tremendously because they were to say 'No, that is not how it works here in America,' because they had an idea how things work in Ethiopia too. They kind of were there to tell them, 'No, she can't do this.'

While reflecting on a similar experience, Michael also reported about his older siblings as his support system that played a crucial role in stabilizing his confused mood during the acculturation and ethnic identity development processes. "I had a lot of confusion. There was certain expectation at home, and I had different expectation when I am outside. My older siblings were there for me when I come home with confusion." According to Michael, the only support system that he relied on was his siblings. The family support in the form of siblings helped Michael to sort or sift through competing demands the home culture and majority culture: "I came home in many occasions discouraged because of some kids at school treating me bad because of my ethnicity."

Several participants in this study indicated the role the family played in helping them to remain stabilize during the emotionally stressful stage of the ethnic identity development process.

Alexus. I became more comfortable with my ethnicity looking at my older siblings and the way they navigated their *Ethiopianness* while maintaining their American side. My older siblings were my inspiration in cultivating a healthy relationship with our cultural heritage. Even now I am thinking to only marry Ethiopian. I was not thinking to marry an Ethiopian for a long time until I saw my older siblings marrying Ethiopians and be happy with their marriages.

Several participants in this study identified parents' commitment to introduce them to the cultural heritage as significant contribution in immigrants' ethnic identity development. For example, Tasha discussed the importance of her parents' willingness to talk and maintain a strong cultural heritage presence in the household as a factor for her to develop a healthy affinity toward the ethnic culture as bicultural. Lue, Tia, and Tasha acknowledged the intentional decision their parents made to make sure that they grew up with the knowledge of the home culture. "Our parents always made sure we speak the native language and get connected with our root," stated Tasha when reflecting on the types of family support that helped her with her ethnic identity development process.

Several participants in this study also acknowledged the parental support in facilitating ways by which the young immigrants explore their cultural heritage. For example, Tasha, Alexus, and Lue said that they appreciated the opportunities their parents created for them to go back to home country to have a direct cultural experience. Alexus said, "Thanks to my mother, I have been to Ethiopia four times in the past 4, 5 years. Every time I go there, I come back with deeper love to my ethnic origin." Tia also said that she is "thankful for being raised with the ethnic culture presence." According to Tia,

her early exposure to the ethnic heritage was consequential as she "developed pride" in terms of her ethnic background. Tasha noted, "They raised us with Ethiopian culture being present in our household. They used to tell us the good about our cultural heritage."

According to several participants in this study, such kind of intentional upbringing with ethnic cultural awareness was instrumental in the course of healthy development of biculturalism. I conclude this section of my discussion with the following excerpt from the interview:

> *Tasha.* We were raised in a way, which it was apparent in our household that we had a sense of pride in our culture in. I think for that is what it was like. I am not ashamed of being Ethiopian or anything. My parents raised us with that. They always have told us good things about culture.

Ethnic-based community and social support. Several participants in this study acknowledged the crucial role ethnic based community and social support played in the course of the acculturation and ethnic identity formation processes. The qualitative data analysis indicated the availability of ethnic based community resources were helpful protective factors for the participants' utilization as coping mechanisms during the stressful and sometimes anxiety triggering acculturation and ethnic identity formation processes. The ability to access ethnic based community support, whether it was attending the ethnic based church services or participating in ethnic based community organization was important for participants in this study. For example, Brandon reported how he was looking forward to Sundays knowing that this would be the place and time where he would see others with similar background and experiences. Brandon shared his

lived experience in terms of the stabilizing factor the ethnic based church had on his life.

> *Brandon.* My family and I did go to an Ethiopian church. So there I got to meet
> kids my age. So, that part helped, even though they spoke English, they
> understood a little bit Amharic. So, and then I just used whatever English I knew,
> you know what I mean. That part helped, definitely helped to be around other
> *Habbeshoch* (Ethiopians)*,* especially my age. But, that part was nice. It helped. I
> was free and myself there. School was torch I hated going to school.

The same lived experience was reflected by Dan, as he said he was glad for the socializing opportunities the Ethiopian church provided for him and other young 1.5 and second-generation immigrants to establish and carry out a lasting friendship with each other. Michael also acknowledged the place the Ethiopian church played as a protective factor during his ethnic identity development phase. Ethnic based churches were not only places of worship where congregants, including several participants came for spiritual nourishment. These churches also play a vital role in providing the setting and environment where these young immigrants socialize and support one another. The following excerpt highlights his lived experience.

> *Michael.* Seeing my fellow Ethiopians on Sunday at church was the highlight of
> my week. So, it was pieces, you know where I was kind of being more aware of
> you know, I guess I am trying to find the most accurate of articulating this like,
> understanding where I am and who I am and at the same time not knowing or
> forgetting where I came from, not knowing my African/Ethiopian heritage.
> The local ethnic based churches played a vital role in helping several participants

in this study to be introduced to the customs and cultural norms of the ethnic heritage. "I used to go to the Ethiopian Orthodox Church and the church was more of a cultural resource for me," reported Shannon. For participants of the study, including Amy, Shannon, and Bella, attending ethnic based churches provided them with the opportunity to learn as to how the Ethiopian people behave and act in social gathering. Shannon shared, "I learned more about my people by seeing how they interact with each other in public by attending Ethiopian churches."

As Shannon reported, the ethnic based church provided the participants with a setting where the participants work through and actualize their ethnic identity development. For example, Dan added how the ethnic church provided him with an initial social setting where he was able to connect with other Ethiopians. "As I said, my initial social interaction was around Ethiopians that went to the same church my parents went. I met up other Ethiopians who also were my age," said Dan. Lue also identified the important role the Ethiopian or ethnic-based church played in providing him and other 1.5- or second-generation immigrants a place to socialize.

It was not only the ethnic based church that provided the participants with a social context for networking and work through their ethnic identity development. Several participants in this study identified other ethnic based organizations as resources and support systems beneficial to their identity development. The North American Ethiopian Soccer Association was one of ethnic-based agencies noted by the participants as contributing factor in enhancing the ethnic identity development. For example, Brandon also recalled the important role the North American Ethiopian Soccer Association played

in the course of his ethnic identity development process. "This was an event that we, younger Ethiopians gather once a year. It was a weeklong fun time." According to Brandon, this yearly event facilitated several cultural opportunities for 1.5- and second-generation immigrants to come and experience ethnic culture by meeting others with similar situations, eating ethnic food, exchanging experiences, learning more about ethnic heritage, visiting ethnic bazars, and attending plays or ethnic musical concerts. "I used to attend these events every year for a long time. That was my introduction to my root," reported Brandon.

Several participants in this study also highlighted the important role a peer support played in the course of their ethnic identity development. For example, Bella reported how socializing with other Ethiopians helped her to cope with her dilemma and sometimes confusion about her ethnic identity. As second generation Ethiopian immigrants who did not have any firsthand experience or knowledge about cultural background, Bella identified her relationship with other Ethiopians as a turning point in regard to nurturing a strong ethnic identity.

> *Bella.* I grew up. I started to see more of the culture I guess. I went to high school
> with an Ethiopian friend so I kind of being more around like elementary school,
> middle school I had all American friends and going high-school I had my
> Ethiopian friend, me and her went to high school, there were other two, three
> Habessha (Ethiopian) people, we kind of hang out together. It is kind of having
> that back bone was nice.
>
> According to the participants' report, the social and peer support they received

during their high school years noted as significant in enhancing and anchoring their sense of belongingness to their ethnic heritage. The participants indicated how the high-school years proved to be pivotal years not only for their personality development, but also for the development of their ethnic identity. For example, Alexus said that she did not care about her Ethiopian ethnic identity until she reached to her high school years.

According to Alexus, those were the years that she was able to grapple with the questions of ethnicity within the context of other 1.5- and second-generation Ethiopian immigrants. Britney also acknowledged the crucial role a peer support played in her high school years in working out her ethnic identity development. Community and peer support were not the only support systems acknowledged as important protective factors. Nine out twelve participants in this study indicated the crucial role engaging in an inter-ethnic romantic relationship played in the development of their ethnic identity.

This was due to participants' consideration that an inter-ethnic mating was an important factor in enhancing and stabilizing their ethnic identity formation. For example, Tabitha who reported carrying on a long-term inter-ethnic romantic relationship acknowledged the cultural benefits that the relationship brings to her ethnic identity. "I do not have to teach him how to behave around my parents," reported Tabitha. A similar reflection was referenced by Alexus, Tia, Bella, Michael, and Brandon. For example, Brandon said that he is not going to "be bothered by marrying someone outside of" his ethnic background since such kind of mating requires educating and orienting the other person about Ethiopian culture.

Brandon added, "I know marrying a girl from my country would reduce some of

the stress the marriage brings, and we can also teach our kids one cultural heritage."

Alexus also said she is encouraged by her older siblings' interethnic marriage. Witnessing

the marital success her older siblings experiencing by marrying Ethiopian men influenced

Alexus's desire to get involved in an interethnic romantic relationship. She said, "I see

how they are happy and their children are happy. I also see how their spouses connect

with my family easily."

Cultural events. Several participants in this study indicated the importance of

participating in ethnic cultural events to experience and increase their awareness

regarding the Ethiopian ethnic norms. The ethnic cultural events such as celebrating the

Ethiopian national holidays follow the Julian calendar. Ethiopia utilizes the Julian

calendar as opposed to the Gregorian calendar to count the months of the year.

This means Ethiopians who are living outside of the country, even if they do not

consider the Julian calendar as their official calendar while living abroad; they follow the

calendar to remain in accordance with the major events happening in Ethiopia. Ethiopians

living in North America and Europe are known for celebrating holidays twice per year.

For example, Ethiopians living in America observe the New Year on the first day in the

month of January based on the Gregorian calendar while observing the Ethiopian New

Year according to the Julian calendar in September 9/8 depending where a leap year falls.

The participants identified how attending these Ethiopian ethnic events helped

them to observe how Ethiopians behave toward one another in a public setting. For

example, Bella, who is a second-generation immigrant, reported attending the Ethiopian

holidays, including the Ethiopian New Year, Christmas, and Easter provided her with a

template to gather information about how Ethiopians interact with each other in a public setting.

Bella. I was born and raised here in Arizona. My parents were the only Ethiopians I knew and interacted with. I did not have any knowledge how Ethiopians act and behave when they see each other in a larger public setting. My mother made sure that we attend all these Ethiopian holidays where Ethiopians in Phoenix are come to celebrate. I am glad for people who organize such cultural events because it opened my eyes to a lot of cultural issues that I needed to be aware of.

The participants reported how the cultural events helped them to get introduced to traditional attires, food types unique to the Ethiopian people, and musical expressions.

Brandon. It is kind of hard to claim your Ethiopian ethnic background without knowing how to enjoy the Ethiopian spicy food. One thing you can be sure about what you are going to find when you come to the Ethiopian New Year celebration or Christmas or Easter is feasting on the Ethiopian ethnic dishes. You also get to meet other Ethiopians and enjoy the traditional Ethiopian music.

Several participants in this study reported the importance of attending Ethiopian wedding celebrations. For example, Tabitha said, "coming to attend Ethiopian weddings were one of the times you get to meet others in your age and connect with them while learning about your culture." While reflecting on the importance of being exposed to ethnic based ceremonies and foods in the course of the ethnic identity formation process, Alexus said, "I always enjoy attending Ethiopian weddings. It is different. The food is different. The whole experience is different from the American weddings."

The study findings indicated all of the study participants liked Ethiopian ethnic dishes. They also acknowledged the important role eating ethnic food played in drawing them closer to the cultural heritage. According to several participants in this study, eating Ethiopian dishes was a significant cultural practice, which helped them to remain connected to their cultural heritage. "How come you do say you are Ethiopian and don't like Ethiopian food," stated Shannon. Lue also said that "enjoying that spicy home cooked Ethiopian food is a mark of being Ethiopian." The study participants also identified how maintaining their ethnic language helped them to strengthen their sense of "Ethiopianness" during the course of the ethnic identity development. Brandon said, "I do not want to forget speaking Amarigna (Ethiopian national language) because I feel that is one thing that gives me sense of Ethiopianness or a confirmation that I am still Ethiopian too."

Being bilingual was one of the qualities identified as a source of pride in participants' cultural heritage while living in America. Several participants in this study reported as to how their biculturalism and bilingual status enhanced their self-confidence. "How many Americans claim that they are bilingual?" asked Brandon. Tia also stated the sense of pride draw from knowing she her diverse cultural and the ability to speak two languages. "How many of my American friends say they speak more than one language," wondered Tasha expressing her delight in her bilingual status. Lue also reflected on the advantage of maintaining the Amharic language in enhancing his relationship with family members who do not speak the English language.

Lue. I am so grateful for my parents who made sue I know how speak the

Amharic language. I appreciated this more when I went to Ethiopia this year to visit with my family members. Most of them did not speak Amharic. I would not have had the quality time I had if I was not able to communicate with my relatives in Amharic. Maintaining my ethnic language also made me feel good about myself.

The participants also acknowledged how learning and embracing their ethnic cultural heritage enhanced their relationship with their own parents. Their curiosity to research and learn about their cultural root brought them closer to their family and cultural heritage. For example, Michael said, "I started to research on my own about my cultural toot in my high school years. That helped me to get closer to my parents." Alexus also took the time to highlight the importance of learning about cultural heritage to develop a strong connection to her ethnicity. "The more I learn about my cultural root, I understood understanding of my parents and the way they do things," reported Alexus.

The study participants acknowledged the privilege their immigration status afforded them with regard to being exposed to multiple cultural norms while growing up in America. Several participants in this study reflected on the benefits of living in two cultures.

Alexus. It was difficult initially to embrace my Ethiopian ethnic side. But I worked myself through the process to arrive to a place where I am as far as my pride about my ethnic identity concerned. Now I use my ethnic identity as a sign of pride that makes me stand out from my American friends with only one cultural experience.

Brandon also touched on the important function of his multicultural status. "I use my ethnic identity to break the ice when I meet new people," said Brandon. According Brandon, coming to terms with his ethnic identity and considering his biculturalism as a source of additional layer in his identity enhanced his pride in his ethnic heritage. Amy, who was in a medical school, identified her multicultural value system that engineered her personal and academic successes.

> *Amy.* I benefited from having first-generation immigrants who pushed me to excel in my academic work. They instilled in me the value of hard work. Whatever I became now, including my academic success is attributed to my immigrant parents and my multicultural status.

Being born in or early arrival to the United States. Being born in the United States and early arrival to the United States were protective factors that the participants pointed out as playing a significant role in minimizing the difficulties and challenges the acculturation and ethnic identity formation might have caused. The study participants such as Bella and Tabitha also reported the role their second-generation immigration status played in minimizing the struggle the acculturation process might have caused. For example, Tabitha said, "I did not have to learn how the American culture is all about" discussing how being born and raised in America provided her with exposure and experience when it came to the mainstream culture.

Bella also identified how being born helped her to not worry about the acculturation process like "some of the Ethiopians who come here in their teenage years." According to the participants in this study, being born in the United States might have

helped them since they did not face similar challenges, including English language deficiency and mastering the norms of the majority culture that other immigrants who were not born in the United States faced during the acculturation process.

Michael also took time to reflect on the important role his early arrival to the United States played in the acculturation process. "I can't imagine how the acculturation process would have been difficult for the ones who came here in their teen or late teenage years," said Michael. Michael said immigrants who arrived after their formative years would have been more vulnerable for "much cultural shocks."

> *Michael.* Let's say, I arrived here in my late teen years. This means that I already have views and cultural experiences highly rooted in my original culture. I assume how difficult it would be for to learn the English language and make sense of my new environment. I believe I would be exposed to much cultural shocks.

"I was not subjected to learn a new culture because I grew up here," reported Alexus. According to Alexus, having growing up in America reduced the learning curve as she did not have to be subjected to learn the English language from a scratch. For the study participants such as Alexus, Michael, Tasha, and Shannon, the acculturation struggle involved resolving the tension between what they know to be their culture (the dominant) and their parents' cultural heritage. The findings suggested that for the study participants who were born in the United States and arrived in the United States at early age developing ethnic identity was more challenging than the acculturation process.

Theme 4: Heritage-Based Mental Health Perception

Data analysis of participants' firsthand accounts revealed participants' study understanding and perception of mental health-related issues. The analysis indicated how participants' parents and the Ethiopian community at large transferred mental health beliefs to the newer generation. Three sub-themes emerged as part of this theme: (a) lack of open communication about mental health, (b) cultural mental health belief, and (c) mental health service perception. The section below is devoted to describe these subthemes.

Lack of open communication about mental health. The study participants reported the negative connotation parents and individuals from the Ethiopian community associated with issues related to mental health illness. It is because of this negative connotation that the study participants received ethnic based message from their family of origin or the Ethiopian community at large about avoiding addressing mental health issues. This lack of communication about mental health-related issues was addressed by Alexus, as she reflected on her mental health perception. According to Alexus, the issue of mental health illness among members of the Ethiopian community was not an issue openly discussed. "When it comes to mental health problem, it is very hash, hash. You don't talk about it at all." The participants acknowledged the negative perception the Ethiopian community attached to mental health-related issues.

Several participants in this study also noted the community's tendency to shy away from engaging in an open communication in regard to mental health-related issues. The communication gap regarding mental health issue was demonstrated through lack of

openness to ask or explore mental health issues. "Don't ask about it," reported Alexus when describing the community's attitude toward mental illness. This attitude, which stressed communication restriction about mental health, affected the study participants' knowledge about issues related to mental health illnesses.

All the study participants reported having a lack of understanding or awareness regarding mental health-related issues. According to them, this lack of awareness of mental health-related issues esteemed from their family and community attitude, which discouraged an open communication of mental health illnesses among family or community members. For example, Alexus said, "we did not know about it because we couldn't even ask about it." This fear to openly ask and talk about mental health-related issues may have prevented participants such as Shannon and Lue from seeking help for their own struggle with mental illness.

The study participants acknowledged how the message they received from their family and the Ethiopian community conditioned them to hold on to the distortion in terms of avoiding an open discussion about mental health-related issues. "The only communication I got from my family about mental health related issue was that I don't need to talk about it," said Dan. Britney also reported that, "I don't think people in our community have any knowledge about mental health. I think that is why they don't want to talk about it."

When addressing the communication gap regarding mental health-related issues, Dan provided an explanation as to why mental health issue is not openly talked about or talked in a distorted manner. "You don't talk about mental health issues even if that is

happening in your family," reported Dan. According to Dan, this was due to "people thinking that talking about it will bring shame to the family." Alexus also speculated that part of the reason why there is no open communication about mental health illness is because "people are scared to talk about it." The lack of open communication that surrounded mental health-related issues included the unwritten rule of "do not talk about it, do not ask about it, and you don't have to know about it," said Alexus.

"I feel like it is a taboo. Mental health is a taboo in the community and by the culture," stated Shannon. According most of the participants, mental health illness is perceived as something that brings shame to the community and the family. This kind of ethnic based perception led several participants in this study to consider mental health as a sign of weakness. For example, Dan reported that "If someone struggles with mental health in the family, the family keeps it in the family."

This is because of others may attribute the family members' struggle with mental health illness to "parental weakness." According to Dan, there was either hesitance to acknowledge struggling with mental health or attempt to cover up so that others outside of the family may not discover a family member's mental health condition. The reason was that "parents may feel that it is their fault that somebody in the family is struggling with mental health issues," added Dan.

It was not only that parents or community members perceive mental health illness as a sign of weakness. Shannon stated that her mother refused to accept Shannon's struggle with anxiety claiming that "mental health problem is not Ethiopian people's problem. It is white people's sickness" Lue also reported that his parents refused to

accept his struggle with mental health condition for a long time by saying, "he was just being worked up. There is no such a thing like mental illness in Ethiopia."

Cultural mental health belief. Beliefs regarding mental health-related issues may vary from culture to culture. Discussion regarding mental illness reveals the participants' culturally rooted deep-seated attitudes and beliefs. This section underlines the information the participants provided when describing familial and communal influences in shaping their belief about mental health-related issues.

According to several participants in this study, the issue of mental health illness among the Ethiopian community is associated with spiritual force. "Mental health is considered to be a sign of curse," stated Dan. Amy also described the negative connotation attached to mental health illness, as the condition that may bring a bad reputation to the particular family whose member was struggling with the condition.

According to Amy, "when one comes across someone with some type of mental health issues, it is often, a sense of feeling sorry for that person" due to the belief this someone is under spiritual force. "You feel sorry for the entire family because of the spiritual attack they are under," reported Amy when discussing how she or the community perceives individuals struggling with mental health condition. Shannon also reflected on the community's perception that attributes the condition to demonic forces.

Shannon. People assume that mental health is from the devil and people who are struggling under a spiritual attack. I know that is not something the community like talk about. They see it as the thing of either taken as a spiritual, some spiritual warfare, or I, don't know, like it is a taboo.

This culturally based belief system identified mental health illness as a curse. Since some of the belief system attributed the issue of mental illness to spiritual forces, a spiritual intervention was indicated by the participants as the intervention alternative. For example, Tasha shared her parents' view regarding the best intervention mechanism when it comes to mental illness as follow, "I heard my parents saying that what all the people struggling with mental illness need is prayer. That is the way they get freed. They think you will be healed, if you pray about it." Alexus also said that "prayer is the answer," when discussing the etiology and intervention of mental health. According to Alexus, other treatment options to address mental health concerns were not encouraged to be explored among most of the community members. The participants' view about mental health services is discussed in detailed in the following section.

Perception about mental health services. This section uncovered the participants' conceptualization regarding mental health services. The findings in this study suggested that several participants' perception regarding mental health services and interventions was shaped by the messages they received from their parents and community. These messages are discussed as follows. As the qualitative data analysis indicated, the community understood mental health issues as issues that did not require professional intervention. According to the participants reports, struggling with mental health illness only garnered a kind of attention from the community members to feel sorry for individuals being affected by mental illnesses. As Amy stated, "people feel sorry for individuals who struggle with mental health illness. Shannon added:

I just really, they talk about amongst themselves, like "poor her," they say *Chinket*

Yizotal (suffering from extreme worry). It is interesting how they respond to mental health. I don't think they see it as something you have medicine; I don't think they see it as medical issue at all.

Several participants in this study highlighted their observation regarding how seeking a professional mental health intervention was not part of the community's decision making patterns. This was in part due to the community's perception that categorized mental health condition as a sign of weakness. According to the message that participants received from the community, one of the ways by which individuals overcome the perceived weakness was by staying strong. "Individuals with that kind of problem do not need an intervention but be strong to stand the situation," reported Brandon. While highlighting the community's lack of seeking behavioral or psychiatrically intervention, Bella also stated the following remarks:

B*ella*. If your car has a problem and if you are not a mechanic, you take it to a mechanic to work on it. But when it comes to mental health issue, I know a lot of people in the Ethiopian community are left to suffer alone. They suffer alone rather than seeking professional help. This is because seeking professional help is not encouraged or talked among the community's members. All what the family or individuals struggling with mental illness hear is instruction to pray about it. "Pray and you will be alright." There is no encouragement about seeking counseling or a therapy.

Tia, who is a registered nurse acknowledged her own reservation of seeking medical or behavioral intervention. "I do not believe most of the medications prescribed

for mental health issues are necessary," reported Tia. Tia said that the conditions considered as mental health issues, such as Attention Deficit Hyperactivity Disorder (ADHD), Attention Deficit Disorder (ADD), and Bipolar are conditions that do not require medical intervention.

> *Tia.* Look when you have a kid who is hyperactive and running with endless energy back home, you don't take him to the doctor seeking medicine. You just accept the kid that he or she is hyper and you discipline him or her accordingly. You let them these kids to be kids and play outside. They will grow out of that. I see how medicine takes these kids soul out here in America. We make them zombies because they were hyperactive.

As the study participants indicated, the issue of mental health was not an issue that affected the Ethiopian people or if it did, all one needed to know was about a spiritual intervention not professional help.

> *Tabitha.* They do not see it as that could be a problem or it could affect them. I think they move on and don't stop to think about it. Maybe it is the shame. Maybe embarrassment they don't want to acknowledge they have a problem with them, or their son, or their daughter. Maybe it is not something they used to understanding or emphasizing mental health.

Alexus said that she "did not pay attention about professional services" since her understanding was that "you do not need professional" help to address mental health issue. "Prayer is the answer," reported Alexus. Alexus reported that she was changing her stand about perceiving prayer as the only way since she started working in the agency

that she was working during this interview.

Brandon also stated that there was no "knowledge about mental health services and interventions" since there was no open communication about mental health issue in the Ethiopian community. Brandon also indicated the importance of organizing and conducting "a community outreach to create mental health awareness." According to Brandon, it is through this kind of community outreach that people come to realization that mental health is a real issue that requires professional intervention.

In addition to underlying the community's perception in terms of mental health intervention, the study participants such as Tabitha and Alexus reported their own hesitance to seek professional help. "I do not struggle with mental illness, so I do not need that kind of help," stated Alexus. Alexus also said that if she would have struggled with mental issues, including "depression or anxiety, I will pray for me to be healed." Tabitha indicated her willingness to seek professional intervention under one condition: "I will never see a psychologist or a psychiatrist as long as I live in the same city with my parents." Tabitha's refusal to seek mental health intervention while she lives in the same city with her family is due to perceptions indicated earlier and the negative connotation attached to mental illness. Tabitha did not want to shame her parents by seeking mental health services.

For study participants such as Shannon and Tabitha, seeking medical or behavioral intervention for mental health issues was going against the cultural norms. "The things we heard growing up affects our decision," said Tabitha. Shannon also acknowledged her hesitance to consider psychiatric intervention because of the negative

message she received from her family and community members growing up about mental health.

As Tabitha indicated, parents and family members in the Ethiopian community may not recognize mental health as an issue. However, not all participants lacked mental health awareness. A number of participants in this study indicated being aware of issues related to mental illness and the community mental health prior to coming to participate in the study. For example, Tabitha indicated how she became aware of issues related to mental health. "My mom is a nurse she mentioned it. I know I am aware of it, she is aware of it." As a medical school student, Amy also pointed out that she was aware of mental health-related issues. However, according to Tabitha, the larger Ethiopian population may not consider mental health issue as a serious health issue. "I don't think they see it as a problem; but in the general community, they don't pay attention to it or acknowledge it," stated Tabitha.

Summary

The phenomenological inquiry paved the way for the emergence of four themes: (a) immigrants' acculturation struggle, (b) ethnic identity development struggle, (b) protective factors, what participants described as coping mechanisms that sustained them during the acculturation and identity formation processes, and finally (d) heritage based mental health perception. The participants discussed their lived experience as to how lack of parents' acculturation, high academic expectations, and communication difficulties caused them to struggle during the acculturation process. According to participants' explanation, the initial culture shock, lack of English proficiency, facing stereotypes,

feeling unfit to adapt, sense of being outsiders, and living in two sets of cultural norms increased their struggles during the acculturation process. In the case of the ethnic identity process, participants shared challenges they encountered initially in terms of showing tendencies in running away from ethnic identity, identifying self as African American, American or, African to fit in, declining or hiding their ethnic origin, and struggling to master ethnic culture/language.

The outcome of the phenomenological inquiry also generated insights about the way in which 1.5- and second-generation immigrants coped with the struggles and challenges that they faced during the acculturation and identity formation processes. Based on the qualitative analysis, protective factors were identified. The protective factors included the presence of siblings in the households, socializing with other immigrants, ethnic-based religious organizations, and parents' willingness to engrain pride in the cultural heritage. Participants reflected on how their perceptions of mental health-related issues were influenced by the message they receive from their parents and Ethiopian community.

As reported by study participants, mental health issues were the least acknowledged topic within the Ethiopian community and Ethiopian households. Some participants indicated that their lack of awareness about the issues of mental health was due their parents' unwillingness to talk about it. In the case of some of the experiences where participants were aware of mental health issues either in the family or in the Ethiopian community, the message they received included "let us not talk about it." Heritage mental health issues were considered taboo, a sign of weakness, or the result of

spiritual (evil) forces. In Chapter 5, I discuss the findings, limitations of the study,

recommendations, and implications that may facilitate social change.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The purpose of this phenomenological inquiry was to explore 1.5- and second-generation young adult Ethiopian immigrants' acculturation and ethnic identity formation processes, as well as mental health-related issues.

I used the following research questions (RQs) to guide my study:

RQ1. What are the experiences of second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area?

RQ2. How do 1.5- and second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area describe their identity formation processes?

RQ3. How do 1.5- and second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area explain their acculturation processes?

Subquestion 3.1: How do 1.5- and second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area explain their experiences of their parents' culture?

Subquestion 3.2: How do second-generation Ethiopian immigrant young adults in the metropolitan Phoenix area explain their experiences of the majority culture?

RQ4. What are 1.5- and second-generation Ethiopian young adults' beliefs about mental health-related issues?

Subquestion 4.1: How do 1.5- and second-generation Ethiopian young adults relate their acculturation and identity formation processes to their beliefs about mental health-related issues?

I conducted face-to-face audio recorded interviews to generate phenomenological driven data. Data collection protocol included conducting a semistructured, open-ended audio recorded interview and taking interview notes. I recruited 12 participants who were living in Phoenix, Arizona. I used purposeful, criteria based, and voluntary based sampling strategy.

Four themes emerged from the analysis:

- Immigrants' acculturation struggle: Participants reported the emotional and social struggle they faced during the acculturation process. Most participants struggled to meet parents' high academic expectations and the constant demands of living in two worlds and two sets of cultural norms.

- Ethnic identity challenges: Participants discussed the challenges they faced, including the initial resistance to accept their ethnic background, running away from cultural roots, and master ethnic cultural norms and language.

- Protective factors/coping mechanisms: Participants identified and explained how they coped with the emotional and social struggles and challenges they encountered during the acculturation and ethnic identity formation processes.

- Heritage-based mental health perceptions: Participants discussed the perceptions they received from their parents and the Ethiopian community about mental health-related issues.

Interpretation of the Findings

In this section, I interpret the findings on each of the four common themes of the study. Each of the four themes emerged from the participants' response to the interview questions. In the following subsections, I interpret findings related to each of the four common themes and their corresponding subthemes.

Theme 1: Immigrants' Acculturation Struggles

The acculturation process touches on immigrants' cultural and psychological changes. As Berry (2005) argued, as immigrants encounter more than one cultural group, they develop behavioral and social changes during the acculturation process. The acculturation process is a dynamic process that may trigger unfavorable behavioral, emotional, and cultural changes at the individual or group levels among the immigrants' community (Berry, 2005). Research indicates that young immigrants encounter acculturative stress during the adaptation process (Wei, Liao, Heppner, Chao, & Ku, 2012). Several participants in this study reported the emotional and interpersonal stress they encountered during the acculturation process. According to the findings of this study, immigrants' acculturative stress and struggle were related to (a) parental lack of acculturation, (b) constant need for frame switching to adhere to living in two sets of cultural norms, and (c) feeling like an outsider.

Parental lack of acculturation. Parental lack of acculturation, which is conceptualized as acculturation gaps (Hwang, Wood, & Hwang. 2011), is identified as discrepancies between parents and children in adopting the cultural practices of the mainstream. These acculturation gaps between first and second-generation immigrants

have been linked to increased intergenerational family conflict and decreased family cohesion. Even though intergenerational conflict is a typical conflict between adolescents and their parents, research indicated the high intensity nature of intergenerational conflicts among second-generation immigrants and their parents generated by cultural differences (Fonner, 2009; Foner & Kasinitz, 2007; Suarez-Orozco, 2008). This intergenerational conflict is a result of the ongoing clash between parents' ethnic cultural values and the dominant American culture, to which 1.5- and second-generation immigrants tend to adapt quickly.

Portes and Rumbaut (2001) conceptualized the intergenerational cultural clash as generational dissonance. This generational dissonance emerges when first-generation immigrants do not perceive their children's adaptability to the dominant cultural values as a healthy psychological and sociological phenomenon. Myfidnings indicated that parents' tendency to remain loyal to their cultural heritage and their resistance to adapt to the new culture caused tension and misunderstanding among 1.5-and second-generation immigrants.

Marsiglia, Nagoshi, Parasai, Booth and Castro (2014) identified young immigrants' acculturation struggle due to parents' lack of acculturation. They underlined the struggle first-generation immigrant parents faced in adapting to the new culture; and how this lack of parents' adaptation causes an interpersonal conflict and communication breakdown between the generations. Participants of this study acknowledged communication breakdowns they experienced with their parents. This is not uncommon as previous research findings indicated a similar phenomenon (Hwang et al., 2011). As Hwang et al.

(2011) pointed out, 1.5 and second generation immigrants face communication difficulties with first-generation immigrant parents that lack English language proficiency. Participants in this study also described the emotional strain they experienced because of the additional responsibility placed on them to serve as cultural brokers and English language translators. Corona et al. (2012) indicated that experiencing emotional stress and interpersonal difficulties are psychological phenomena that 1.5 and second generation immigrants encounter due to language brokering responsibilities. As Corona et al. (2012) indicated these negative emotional and psychological experiences get intensified when language brokering occurs in business and health-related settings.

Experiencing stress and anxiety due to culturally motivated parental high academic expectation was a phenomenon the majority of participant shared. "You want to meet their expectation and at the same time you have your own preferences that you would like follow," was a remark that several participants repeated. Many participants touched upon the unspoken expectation of excelling academically that their parents placed on them. First-generation immigrants may not verbalize their expectations, but participants indicated that the pressure to leave up to parents' high academic expectation was prevalent. This perception was informed by the assumption that one of the main purposes of parents' relocation was that their children receive a better education and make progress in life. Participants acknowledged how parents' high expectations caused them stress and frustration. Several participants indicated that parents viewed their children's school achievement as a sign of good parenting.

Participants acknowledged the interpersonal conflicts they experienced with their parents due to adapting the mainstream cultural norms and value systems, including adopting their peers' clothing styles (Foner & Kasinitz 2007). For the most part, parents did not appreciate or approve their children's new behavioral habits or dressing styles. The participants' assertiveness in their communication, which included attempting to have a two-way communication with their parents, was also perceived as lack of respect. As Hwang et al. (2011) pointed out, immigrants' traditional communication pattern asserts parents' unquestioned authority in dictating the type of communication pattern. The first-generation immigrant parents' traditionally rooted view as to what was acceptable or not became a source of interpersonal discord, conflict, and rebellion for the participants. They tried to emulate their peers' lifestyles as an attempt to fit in.

Living in two worlds. Participants discussed the need to switch between two personalities to act accordingly to their families' norms at home and to the mainstream cultural norms in public. Struggling to fit in, encountering negative stereotypes due to their ethnic background, feeling like outsiders, and going through culture shock marked some of the acculturation struggle of living in two worlds. This phenomenon of switching back and forth between two different cultural norms is described as frame switching (Gigue, Lalonde, & Evelina, 2010). The constant switching back and forth between the different cultural norms can cause a feeling of ambivalence. The participants reported finding themselves in a place where they could not fully articulate their cultural belongingness. "Who am I? What am I?" were some of the questions the participants raised in terms of their cultural alignment. It is not unusual for 1.5 and second-generation

immigrants to report being torn between two cultural norms and two opposing ways of perceiving the world. A study conducted by Benet-Martinez, Leu, Lee, and Morris (2002) indicated the dissonance and confusion second-generation immigrants experience when they get pressured to describe their cultural alignment and choose between parent's cultural heritage and the majority culture.

The confusion and dissonance are more pronounced among young immigrants with limited cross-cultural competency (Benet-Martinez et al., 2002). The participants in this study acknowledged frustrations caused by parents' implicit or explicit pressure to abide to the cultural heritage norms. The same phenomenon was articulated in Dusi's (2015) study, in which the effect of first-generation immigrants' cultural heritage on second-generation immigrants was explored. The inevitable struggle and conflicts 1.5 and second-generation immigrant go through during the acculturation process include facing psychological and social dissonance. Attempting to marry two incompatible cultural norms triggers behavioral and interpersonal conflicts (Gigue et al., 2010).

Participants' constant struggle to simultaneously remain true to both the majority and minority cultural norms created conflict. For example, participants struggled with the conceptualization of gender roles that the two cultures portray. Participants acknowledged being confused and frustrated with their first-generation immigrant fathers, as they observed how their fathers would not help their mothers and the rest of the family with household chores. Participants obtained more understanding of the traditional gender role as their ethnic cultural awareness increased. According to the traditional culture, men are responsible for tasks outside home. In a patriarchal culture,

such as the Ethiopian culture, the roles wives and children play may include attending to

the father's physical need when the father comes home. The assumption is that men are

bread winners and wives are expected to accomplish household chores. The tension the

participants reported caused by the clash of gender roles' perspectives was not an unusual

phenomenon. Kruzykowski (2011) reported the intergenerational tension that exists

among immigrants and their children due to variation in the way in which they view

gender roles. According to Kruzykowski, 1.5 and second-generation immigrants who live

between two cultures get confronted with constantly adjusting their perception of gender

roles depending on the cultural context they find themselves in. It was described that 1.5

and second-generation immigrants reported feeling comfortable in participating in

household activities (Kruzykowski, 2011). However, second-generation immigrants'

household participation tends to abide to traditional gender roles around parents who

follow strict traditional gender roles (Kruzykowski, 2011). While the first-generation

immigrants tend to retain the traditional gender roles, the findings of this study indicated

that 1.5 and second-generation immigrants held a less rigid gender role perspective and

they reported participating in household activities.

Several participants in this study also acknowledged the benefits of living between

two cultures. The findings in this study indicated that living in two worlds exposed the

participants to diverse cultural experiences. This exposure gave the participants more

tools to make sense of their environment. "How many of my American friends can say

they are bi-cultural?" asked one of the participants when articulating the positive aspects

of living between two cultures as a 1.5 generation immigrant. Several participants in this

study noted that living in two worlds increased their cultural awareness, gave them more creativity in solving problems, and made them accommodate better to different worldviews.

Feeling like an outsider. Participants of this study reported they struggled due to not feeling at home in the mainstream culture in which they grew up and lived their early years. Developing a sense of belonging and comfort in the new culture is an integral part in the adaptation of immigrants groups (Black, 2002). According to Duncan and Lambert (2004), for 1.5 and second-generation immigrants, feeling comfortable within the majority culture is defined as the emotional, individual, social, and spiritual identity they develop during the identity formation process.

As Amit and Bar-Lev (2015) indicated, this feeling of comfort is linked to both private and public awareness derived from immigrants' shared social and cultural experiences. Feeling as part of the majority culture is necessary for 1.5 and second-generation immigrants to develop this experience based on private and public awareness (Amit & Bar-Lev, 2015). To consider the fact that the acculturation and ethnic identity formation processes are dynamic and based on the individuals' pace is important. This means that the acculturation and ethnic identity formation processes are not linear and uniform to all the immigrants. They are individually oriented and they are unique to each immigrant as a person. Assuming the acculturation and ethnic identity formation processes as linear processes ignores each immigrant's pace and engagement in the process. The ethnic identity development may differ from one individual to another. It also varies from generation to generation. A previous study indicated that the process of

ethnic identity development is complicated by acculturation challenges and intergenerational conflicts (McGoldrick, Giodano, & Garcia-Preto, 2005). The situation is more pronounced during 1.5 and second-generation immigrants' adolescence years as young immigrants tend to reject or run away from the cultural heritage (McGoldrick et al., 2005). Participants of this study were challenged in understanding their place in the majority culture during the acculturation and ethnic identity formation processes.

The participants also acknowledged the struggle they encountered during the acculturation process due to their lack of English language proficiency. Consistent with this finding, Orijako (2014) indicated that proficiency in the host culture's language is linked to protective factors in high education attainment and healthy social adaptive skills. In the same study, Orijako indicated that the lack of mastery of the host culture's language is associated to increased stress and other mental health conditions such as depression.

Results of this study indicated that participants encountered difficulties at school due to lack of English proficiency. In the same trend, previous studies articulated how the individual's level of competency in the language of the majority culture has been identified as a significant predictor of acculturative stress (Bean & Tienda, 1987; Duru & Poyrazli, 2007). As participants of this study reported, lack of English proficiency was identified as a predictor of acculturation-triggered stress and anxiety (Duru & Poyrazli, 2007).

Theme 2: Ethnic Identity Challenges

Ponterotto and Park-Taylor (2007) stated that 1.5- and second-generation immigrants encounter emotional and social challenges during the ethnic identity formation process. These challenges occur because ethnic identity exploration is a gradual, complicated, and multilayered process that causes *storm and stress* to immigrants undergoing acculturation (Ponterotto & Park-Taylor, 2007). One of my objectives was to explore how the participants perceived this gradual, complicated, and multilayered acculturation and ethnic identity formation process. In this subsection, I discuss the challenges the participants encountered during the ethnic identity formation phase.

The theme e*thnic identity challenges* emerged from the participants' reports that highlighted the challenges they faced during the acculturation and identity formation processes. Participants' challenges included (a) denying or running away from ethnic identity, (b) identifying themselves as African American, American, or African, (c) declining to identify oneself as an Ethiopian, (d) being self-conscious of ethnic heritage, including physical attributes, (e) feeling inadequate in ethnic culture mastery, including language, (f) preferring to socialize with Americans, and (h)being ashamed of parents' accents.

Running away from ethnic heritage. The findings indicated that participants in this study acknowledged the challenges they encountered during ethnic identity development. Declining to identify themselves as Ethiopians, being conscious of their racial or physical attributes, and lacking interest in socializing with other Ethiopians were

the challenges the participants faced. This tendency to disengage from one's cultural heritage was shying away from cultural heritage early on the acculturation process. The findings in this this indicated second generation participants rationalized their sense of disconnection and lack of alignment with cultural heritage by indicating where they were born. "I am African American. I am American. I was born here, not like my parents. I don't even know where they are from, and I don't know Amarigna," was a common justification used to rationalize lack of ethnic engagement.

Consistent with Cross's (1991) classic discussion of ethnic identity development, the participants indicated feeling a lack of ethnic group membership. The participants considered accepting their cultural heritage and ethnicity as a challenge. Several participants reported tendencies to decline ethnic group association and a lack of interest in exploring their cultural heritage (Cross, 1991).

The findings from this study reaffirmed Cross's (1991) earlier findings regarding the tendency of many second generation and 1.5-generation immigrants to disassociate themselves from their cultural heritage in the effort to fit in with mainstream American culture. Several participants in this study indicated that part of their effort in running away from their cultural heritage early on in their ethnic identity development was attributed to their desire to associate individuals with better economic status. Their dissociation was related to the fact that several participants in this study were raised by parents with service-oriented jobs. Patterns that some 1.5 and second-generation immigrants exhibit in declining to identify with their ethnic heritage in the effort to fit in

with the majority culture have been previously discussed (Alba & Islam, 2009; Duncan & Trejo, 2015).

According to Duncan and Trejo (2015), the decline of ethnic identification is exacerbated when the younger immigrants come from first-generation parents with diminished socioeconomic status related to economic mobility, language proficiency, and community visibility (Duncan & Trejo, 2015). The idea of immigrants' comfort level in embracing their ethnic identity depending on their family's socioeconomic status and the host country's receptiveness to the immigrants' community is consistent with the segmented assimilation conceptualization. According to segmented assimilation theory, the theoretical framework on which this study was based, there are two factors that influence immigrants' ethnic identity formation (Portes, Fernandez-Kelly, & Haller, 2009). These two influencing factors are (a) human capital, such as immigrant parents' educational and economic standing and (b) the social context of the host country, which includes policies, biases, and stereotypes regarding the immigrants' community.

Consistent with previous analyses (Duncan & Trejo, 2015; Portes, Fernandez-Kelly et al., 2009), my findings indicated that participants were inclined to deny their ethnic identity because they felt the need to fit in with members of the host country while simultaneously experiencing shame regarding their parents' socioeconomic status. This was true to several participants in this study, as they acknowledged a sense of discomfort when seen with their parents in public because of the perceived negative connotations associated with their parents' appearance, socioeconomic status, and English language proficiency.

Being conscious of ethnic identity. Several participants' in this study reported being conscious of their unique physical and cultural attributes while growing up. The findings in this study showed that participants were conscious of their otherness and struggled to locate their place in society while living in a White-dominant neighborhood and school. "I know I was different. That was obvious because of the way I look and that at times was interesting, but made me conscious most of the times," was a common observation made by several participants.

Most of the participants discussed how they were conscious their distinct physical appearance presented a stark contrast to individuals from the majority culture. Many participants reported feeling out of place in terms of their role in the larger society because of their ethnic heritage. According to the findings of this study, it was not uncommon for the study participant to experience feeling being out of place in terms of their role in the larger society because of their ethnic heritage.

Many participants acknowledged the uneasy feeling they had at times when they were out in public with their parents. One reoccurring reason that emerged in the course of this study about some of the participants' uneasiness to be seen in public with their parents involved the parents' thick accents. Several participants reported declining a public appearance with their parents because of parents' thick accents. Prior researchers have asserted that the kind of negative stereotypes the majority culture holds against the ethnic group affects immigrants' willingness and boldness to publicly embrace their ethnic identity (Appel, Weber, & Kronberger, 2015). This is consistent with several participants who reported variation in their ethnic identification would vary according to

who raised curiosity about their ethnic background and, and the circumstances of the curiosity.

The findings in this study indicated that the participants used to tailor their responses about their ethnic background to the party who was raising the question. The participants acknowledged identifying as Ethiopian Americans if the person asking about participants' ethnicity was exposed to multiculturalism. The assumption was that for a person who is well versed in cultural diversity, participants' ethnic background would not be an issue. When the participants perceived the situation to be one in which the questions of ethnicity would lead to undesirable conclusion, the participants felt uncomfortable using my ethnicity as part of my identity. In this case the default identification was "I am American or African American."

Participants' tendency to tailor their responses in regard to ethnic identity is consistent with Chacko's (2003) findings. Chacko's study was based on the second-generation Ethiopian immigrants' ethnic identification preferences. According to Chacko, immigrants have shown to adopt different ethnic identities, such as identifying themselves as Ethiopian American, African American, or Ethiopian depending on the circumstances where the question of ethnic identity being raised. The alteration of ethnic identity was realized in accordance with immigrants' needs and sense of self.

Struggle to master ethnic heritage/language. Participants also reported the challenges they faced during the ethnic identity development phase due to lack of ethnic language mastery. Matsungaga, Hecht, Elk, and Nidaye (2010) indicated that one of the indicators of ethnic identity development is mastery of the ethnic language. This is

because the ability to use ethnic language signifies 1.5 and second-generation immigrants' deeper cultural orientation and identification with their ethnic cultural group.

My findings indicated that the participants encountered challenges in communicating with their first-generation immigrant parents. According the evidence in this study, this interpersonal communication challenges resulted due to the participants' lack of fluency in the ethnic language. Second generation immigrants struggled the most with their communication with their first-generation immigrant parents due lack of ethnic language proficiency. The difficulty was exacerbated since some of the first-generation immigrant parents were not fluent enough in English to have a deeper conversation with their children over the issues unique to young immigrants' ethnic identity development.

The lack of mastery of the ethnic language is a serious issue because fluency in one's ethnic language is believed to enhance younger immigrants' sense of belongingness among members of the ethnic community (Matusunaga et al., 2010). Mastery of the ethnic language provides a solid signification about immigrants' ethnic identity status (Matusunaga et al., 2010). Consistent with the findings of Matusunaga et al., several participants expressed feelings of incomplete ethnic identity due to lack of ethnic language proficiency. Specifically, participants demonstrated a tendency to avoid interpersonal or group interactions with Ethiopians who were not fluent in English. I found that avoidance was not generated because of hate or contempt participants had toward individuals of the same ethnic background. Rather, the avoidance resulted from

the participants' own embarrassment regarding their inability to speak with members of their own community in Amharic.

Ethnic language maintenance is linked with ethnic pride (Matusunaga et al., 2010). Several participants in this study indicated the challenges they experienced in demonstrating their ethnic pride in a setting where the Amharic language was used predominantly to communicate with one another. The participants reported the sense of shame they experienced when speaking Amharic with an English accent. In sum, lack of command of Amharic was a source of embarrassment that in return appear to prevent the participants from socializing with first-generation Ethiopian immigrants.

Theme 3: Protective Factors/Coping Mechanisms

The acculturation process presents a significant challenge for 1.5 and second-generation immigrants (Romero & Roberts, 2003; Suarez-Orozco & Suarez-Orozco, 2001). The ongoing attempts to navigate between an immigrant's home culture and the host culture present a significant challenge to the immigrant's community (Suarez-Orozco & Suarez-Orozco, 2001). Acculturation involves negotiating between the ethnic culture's and the dominant culture's norms, and sorting through two sometimes opposing worldviews.

Theme 3 emerged from four subthemes that participants discussed during the interviews. These four subthemes are protective factors or coping mechanisms that I have group as follows: (a) family support; (b) community/social support; (c) cultural events and multiculturalism, and (d) being born in, or having arrived early to, the United States. The findings in this study showed that these protective factors played a pivotal role in

anchoring participants in this study during the difficult acculturation and ethnic identity formation processes.

Family support. Participants reported the important role their family, including siblings, played in normalizing the acculturation process. This is consistent with findings from previous studies. Leong, Park, and Kalibatseva (2014) indicated that high levels of immigrant family cohesiveness and support were relevant in fostering young immigrants' healthy adjustment to the dominant culture. Findings in this study indicated that family support played an important role in regulating and enhancing participants' emotional well-being during the acculturation and ethnic identity processes. Several participants in this study reported the crucial role family support played in fostering ethnic pride. "I'm glad for my ethnicity. That is where your pride is. That is where your root is. I am happy because of that," were remarks several participants repeated during the interviews. My finding in regard to the vital role family support played in the course of 1.5-and second-generation immigrants' acculturation and ethnic identity formation was consistent with Goitom's (2015) findings. In a study that explored Ethiopian and Eritrean immigrants' pre and postimmigration experiences and identity formation processes, Goitom indicated parental influences in shaping young immigrants' ethnic identity. My study and that of Goitom's indicated the significant role that immigrant parents' affiliation and attitude toward their cultural heritage play in influencing immigrant youths' ethnic identity perceptions.

Gil, Wagner, and Vega (2001) argued about the importance of healthy family orientation and cohesion as protective factors for youth immigrants' interpersonal and

social development. According to Gil, Wagner, and Vega (2001), family support helps 1.5-and second generation immigrants embrace their own cultural heritage. Family support is considered a protective factor because it helps young immigrants achieve a healthy acculturation process. Several scholars highlighted the influence of familism in the development of healthy acculturation and ethnic identify formation (Cooley, 2001; Gil, Wagner, & Vega, 2000; Jones, Cross, & DeFour, 2007). According to Cooley (2001), familism is perceived as the degree in which immigrants deepen their behavior, attitude, identity, and relationship into their immediate and extended family. The presence of familism is considered a protective factor as it minimizes young immigrants' psychological and social crisis.

Youth immigrants with solid family support encountered less acculturation-related mental health issues when compared to youth immigrant who experienced lack of family support (Hurwich-Reiss, Eliana, & Gudino, 2016). The presence of family and community support provides 1.5 and second-generation immigrant a sense of connection and stability (Hurwich-Reiss et al., 2016). Consistent with previous findings, participants in this study wondered how they could have coped with the emotional, psychological, and social difficulties they encountered during acculturation and ethnic identity formation processes without family support. The findings in my study indicated the important role family support played in helping study participants to achieve emotional stability and deal with rejection from the majority culture.

Community and social support. The findings in this study indicated that socializing with Ethiopian friends and participating in community support systems, such

as ethnic-based church services, Ethiopian weddings, and Ethiopian holidays, helped

participants to maintain individual, interpersonal, and social wellbeing. This is consistent

with previous research findings that identified the significant role local ethnic churches

play in assisting young immigrants in their acculturation and identity formation processes

(Hirschman, 2004; May, 2012; Park, 2011). According to Park (2011), youth immigrants

utilized local ethnic churches to improve their ethnic language proficiency, advance their

ethnic cultural awareness, and socialize with other young immigrants with similar ethnic

heritage.

Several participants in this study indicated the local Ethiopian church facilitated a

social gathering platform to socialize and learn about cultural norms that dictated the

patterns of Ethiopians' interpersonal and social behaviors. Participants in this study

acknowledged the ethnic local church as a venue for the community's spiritual and social

experiences. For many participants in this study, the Ethiopian local church provided the

cultural context to process their ethnic identity. Hirschman (2004) identified local ethnic

churches as important social, emotional, spiritual, and economic support systems for 1.5-

and second-generation immigrants during acculturation and ethnic identity formation

processes. My study indicated that ethnic identity formation processes required a social

context where participants felt safe to socialize and exchange experiences with other 1.5-

and second-generation immigrants. This is consistent with a study that identified the role

of local ethnic churches in serving young immigrants as a source of stability and

networking center (Tsang, 2015). Parental, social, and cultural forces are significant

protective factors that shape and sustain young immigrants' identity development (Goitom, 2015).

Cultural events and multiculturalism. Participants in my study identified the importance of developing healthy ethnic identities. They realized that developing their ethnic identities increased their social and interpersonal wellness. Previous research underlined the importance of this factor (Fisher et al., 2014; Jones et al.; Phinney & Ong, 2007). According to Fisher et al. (2014) ethnic identity development serves as a protective factor from negative psychological and social experiences that may affect 1.5 and second-generation immigrants during identity formation process.

Participants reported that their ethnic identity development was nurtured through ethnic cultural resources. Several participants in this study indicated that embracing their ethnic heritage emboldens their self-esteem and sense of worth. References such as, "I am proud of who I am. I now understand my cultural heritage is part of my identity," reflected the participants' comfort level in embracing their cultural heritage. Many participants indicated that they became vocal about their cultural heritage once they resolved the tension regarding their ethnic identity. Similar sense of pride and comfortableness with ethnic identity was reflected by participants' self-reports such as, "I am proud of my ethnic heritage. My *Ethiopianness,* my *Habesshaness,* my blackness. This frees me to be who I am without hiding my real identity."

Many participants indicated their immigration status and biculturalism made them responsive and sensitive to multicultural issues. While acknowledging the difficulties they encountered during the acculturation and identity formation processes, participants

in my study acknowledged the cultural versatility they developed as a result of interacting with the Ethiopian and American cultures. My findings indicated that cultural alignment to the majority and ethnic cultures promoted participants' emotional, personal, interpersonal, and social wellbeing. This is consistent with Wei et al. (2012) findings, which highlight the importance of feeling comfortable with a bicultural ethnic identity.

Cultural alignment, especially with one's cultural heritage, shown to be important to minimize stress associated with the ethnic identity formation process (Oh & Fuligni, 2010). Consistent with Oh and Fuligni's (2010) findings, several participants in this study reported the enhanced sense of pride and achievement they felt when communicating with their parents in Amharic. My findings indicated participants' ability to communicate with their parents in Amharic strengthened the intergenerational bond and unity; and it made their parents to be proud. Even if the quality and level of the acculturation and ethnic identity development may vary among 1.5 and second-generation immigrants, the protective value that biculturalism brings to these immigrants' emotional and relational wellness cannot be ignored (Sirkantraporn, 2013).

Biculturalism facilitated adaptation and increased social adjustment between one's family of origin and the majority culture (Bacallao & Smokowski, 2005; Sirkantraporn, 2013). Several participants in this study considered their multicultural competency as a necessary ingredient to their educational and professional successes. For example, one of the participants said, "My status as 1.5 generation immigrant, the rich culture I came from, and the drive I adapted fueled my successes." Several participants' bilingual and

bicultural statuses were considered assets that added value to their successes at home and outside of the home.

Being born in or early arrival to the United States. Leaving one's home country to relocate in a new culture is a daunting task (Pumariega, Chang, & Rhee, 2005; Schwartz et, Montgomery, & Briones, 2013). Learning to adapt to a new environment and gain insight to identify acceptable cultural norms present stress and emotional turmoil (Pumariega et al., 2005; Schwartz et al., 2013). Several participants in this study considered that *being born in or having arriving early to the United States* was a protective factor that helped them ease the acculturation struggle. Previous findings have also indicated the significant effect one's immigration status plays in the course of acculturation and ethnic identity formation processes (Kasinitz, Mollenkopf, Waters, & Holdway, 2008). Being born in the United States soil or immigrated to the United States during the developmental years affect how fast and well immigrants adapt to the American way of life (Kasinitz et al., 2008). According to Kasnitz et al., second-generation immigrants who arrive early in their developmental years seem to be more adaptive to the majority culture due to their early cultural exposure to the American culture and acquisition of English language proficiency.

In a previous study that explored second-generation immigrants and their ethnic identity and acculturation, it was found that second-generation immigrants appeared to be more educated than their first-generation immigrant parents (Dustmann, Frattini, & Theodoropoulos, 2010). The same study also identified the fact that second-generation immigrants tend to be more educated than their peers from the majority culture

(Dustmann et al., 2010). Consistent with these findings, participants in my study acknowledged the protective factor their immigration status afforded them during the acculturation process. Second-generation immigrants reported that they did not go through the pressure of learning English or forced to adapt to the new culture since they were born and raised in the United States. For participants with a second-generation immigration status, the acculturation process was easier when compared to the 1.5-generation immigrants' acculturation process or among those who arrived later in their developmental years to the United States.

Theme 4: Heritage-Based Mental Health Perception

This theme emerged from three subthemes that participants indicated during the qualitative exploration: (a) lack of open communication patterns, (b) cultural mental health beliefs, and (c) perception of mental health services.

Lack of open communication. Several participants in this study identified lack of open communication about issues involving mental health conditions as a reason for their lack of an in-depth mental health awareness. Several studies indicated the prevalence of mental health problems among immigrants (Gee et al., 2007; Pumariega et al., 2005; Schwartz, et al., 2013). Seemingly, participants in this study reported lack of mental health awareness among the Ethiopian community. This lack of awareness about mental health related issues was attributed to the messages participants received from their parents and the larger Ethiopian community.

Parents and the Ethiopian community avoided open communication about mental health related issues. The underlying message participants received from their parents

include, "do not to ask about mental health condition or acknowledge the issue publicly."

The findings in this study also indicated that the stigma the community attached to mental

health illness prohibited an open discussion about the problem. This is consistent with

Bryne's (2000) findings that acknowledged the stigmatization of mental health conditions

among the Ethiopian community members. As Bryne indicated, social stigma may

preclude members of the immigrants' community from having an open dialogue about

the condition. This lack of openness about mental health illness also causes individuals

with mental health issues to withdraw, isolate, and marginalize to avoid being the subject

of community members' marginalization or judgment. According to participants in this

study, parents may feel that having a child with mental health conditions could be seen as

a sign of poor parenting.

Cultural mental health beliefs. Participants of the study indicated that the

Ethiopian community explained mental health illness as the effect of a spiritual force.

The participants acknowledged that the community's narrative associated mental health

problems with one's lack of willpower. Several participants believed that mental health

was a non-Ethiopian phenomenon. Many participants in this study acknowledged that the

perception they adopted from their parents and community included an assumption that

mental health was the outcome of Western world's social construct. This perception was

adapted from the claim the first-generation immigrants parents made regarding the rarity

of mental health conditions back in the country of origin.

This culturally based mental health beliefs indicated in this study are consistent with

previous studies (Asrat, 2012; Bifitu & Dachew, 2014; Fanta et al., 2004). In these

studies, researchers identified culturally based mental health beliefs as prevalent operational standards among the Ethiopian community (Asrat, 2012; Bifitu & Dachew, 2014; Fanta et al., 2004). Traditionally, mental health issues are perceived as a sign of weakness, lack of willpower, taboo, demonic affliction, and as a non-Ethiopian phenomenon (Asrat, 2012; Bifitu & Dachew, 2014). Even though evil powers were suggested as sources of mental health illnesses, the participants also reported the importance of spiritual forces in deliverance from mental health illness.

Culturally based perception regarding the nature, symptomology, or etiology of mental health illness is what Suarez-Orozco et al. (2013) referred to as a sociocultural barrier that foreign or U.S.-born immigrants encounter during the acculturation and ethnic identity processes. According to Suarez-Orozco et al., social-cultural barriers occur in the way in which 1.5- and second-generation immigrants perceive mental illness symptoms and the origins they attribute to mental illness. This sociocultural barrier influences the way in which immigrants address the issue of mental health conditions.

Perception of mental health service. The findings in this study suggested participants were hesitant to seek professional help when they encountered mental health issues. This hesitancy was based on the message about mental health-related issues that they received from the Ethiopian community. Seeking professional mental health was not considered a viable option to address mental health issues. Several participants in this study preferred to deal with the stress and challenges they faced during acculturation and ethnic identity processes in their own way instead of being vocal about the issues. This is consistent with previous findings about immigrants who come from collectivistic cultural

backgrounds. According to Wei et al. (2012), individuals within a collectivistic cultural heritage are encouraged to conceal or minimize their problems for the betterment of the community. Individuals from collectivistic cultural background are reluctant to seek help individually.

My study identified the community's lack of awareness about available community and government mental health services. "Mental health services are not something that you become aware as an Ethiopian," was a reoccurring observation participants made. Many participants did not pay attention about professional services since the message they received from the community was that one does not need professional help to address a mental health issue. The participants who perceived to be struggling with mental health were encouraged to prayer away their issues. The study participants considered engaging in spiritual activities, such as praying to be the acceptable intervention method.

Consistent with this finding, Suarez-Orozco et al. (2013) indicated that immigrants may consider self-help or concealing their mental health issues from the rest of the family or community as the best means of dealing with mental health problems. Incorporating religious help and avoiding seeking professional intervention was the preferred cultural way of dealing with mental health (Suarez-Orozco et al., 2013). Several participants in this study indicated their preference for incorporating their faith in God when dealing with emotional and psychological issues.

Limitations of the Study

The procedures taken to recruit participants in this study were considered a limitation to this study. I recruited participants that were accessed through two existing friends who triggered the snowball effect and through a recommendation obtained from the Ethiopian Community Leadership. Potential participants may have been excluded from the study due to limited social network. The other limitation is that, even though I have conducted several clinical interviews in work related assignments, these were my first face-to-face research interviews. My own limitation in conducting this interview may have affected the depth and quality of the data collection process. My own bias, value, and expectations as a researcher were considered factors that could have interfered with the interview process. This concern was addressed by clarifying bias in the form of self-reflection and by providing full disclosure to participants about my personal and professional identity as well as second-generation immigrant status.

Another limitation revolved around the participants. Since the data collection process involved a face-to-face interview, the approach may have affected the participants' responses. This may have caused the participants to either underreport or exaggerate their responses about their own lived experiences. In my analysis, I believe that participants appeared to engage in the interview process with demonstrative ease. Considering the stated limitations, I set protective measures in place during the data gathering and interpretation phases to enhance the credibility, trustworthiness, and transferability of the study.

Recommendations for Further Research

Based upon the results, three recommendations follow. First, future researchers should expand the sample size to explore a similar phenomenon. The current study was conducted by recruiting 12 1.5- and second-generation Ethiopian as the participants to explore their lived experience in the Phoenix, Arizona, area. Both the small sample size and the targeted location limited the scope of the current exploration. Future researchers should not only enlarge the sample size but also incorporate potential participants from other major metropolitan U.S. cities. Expanding the sample size and scope would increase the probability of the current study's transferability.

Future researchers should utilize a quantitative methodology to investigate the correlation between the variables that emerged in the current study. For example, an interesting investigation would be to determine the relationship or lack of a relationship between 1.5- and second-generation immigrants' effective acculturation and the presence of siblings. Future researchers might be interested in quantifying the effect of ethnic local churches on second-generation immigrants' ethnic identity development.

Future research may concentrate in understanding what it means for first-generation Ethiopian immigrants to raise 1.5- and second-generation immigrants in the United States. Future researchers might be interested in exploring how first-generation immigrant parents facilitated or did not facilitate, or contributed or did not contribute to the young immigrants' acculturation and ethnic identity formation processes.

Implications for Positive Social Change

Cultivating multicultural awareness of mental health is one of the potential positive changes that the current study would facilitate. The outcomes of my study yielded information to expand the understanding of 1.5- and second-generation immigrants that various community service providers, including educators, elected officials, medical and behavioral health professionals, and members of ethnic-based community organizations may possess. This means that individuals who encounter 1.5- and second-generation immigrants would understand the immigrants' struggle and challenges that they face during the acculturation and ethnic identity formation processes. As the primary implication of the study, the knowledge established in this phenomenological exploration would advance the awareness between the immigrant's community and individuals from the dominant culture.

My study has a potential for a positive social change by serving as a bridge between first-generation parents and their 1.5- or second-generation children. As the emerging themes and subthemes of the current study indicated, 1.5- and second-generation immigrants are likely to experience challenges, struggles, and mental health conditions, including depression and anxiety. Part of these challenges, struggles, and mental health conditions resulted from miscommunication and parents' high expectations rooted in the norms of the parents' home culture. This study would be a starting point for first-generation immigrant parents to hear and learn about their children's unique social and interpersonal needs.

The potential positive social change affecting each immigrant family in the Phoenix area is higher if knowledge is communicated to first-generation immigrant parents using the findings of the current study as a scientific source. Research-based information may enhance first-generation immigrant parents' receptivity to understand the effect their expectations and parental style might have on their children who are growing up in the United States. The potential positive change that the current study may trigger includes shaping and informing government and community organizations about the importance of establishing and supporting ethnic-based community centers.

This is important in the current political climate where the thought of ethnic-based community centers may trigger unbiased fear and suspicion. The current study has yielded the important role that ethnic-based community organizations, including ethnic local churches, played as protective factors during immigrants' acculturation and ethnic identity formation processes. Based upon previous studies (Fisher et al., 2014; Gil et al., 2000; Hurwich-Reiss & Gudino, 2016; May, 2012;), effective acculturation and ethnic identity development have significant implications on young adult immigrants' social and emotional well-being. This study would provide policy makers, social, and religious leaders with empirical data about the importance of ethnic-based community organizations to enhance immigrants' interpersonal, social, and emotional well-being.

Reflection

The dissertation journey was filled with range of emotional experiences. I was close to abandon the effort of completing the task off due to increasing personal, family, and professional burdens. The thought of giving up on the whole dissertation project became

a real option at the news I received a year and half ago about the sudden passing of my beloved older sister. My sister was my inspiration and singular force behind my academic success up to that time. Losing my cheerleader caused me, at times, to lose hope of pushing through the process of completing the project. Feeling lost in the Arizona desert in search of a drop of water while contemplating whether to carry on with the dissertation was part of the experience that marked my journey. When hope returned and energy was restored to forge through the process, I was constantly wondering where the dissertation journey would lead me at the end.

The two thoughts that revived my motivation and determination to stay the course in the face of countless difficulties were the voice of my deceased (I cannot believe I am saying this) sister and the curiosity that drove me to consider the current research topic as the goal of my exploration. "It is not time for you to give up. Keep marching to the finishing line," were some of the encouraging words my sister used to send my way whenever she thought I needed a push forward. I heard my sister's voice.

I became interested in the current research theme because of my own personal experience as an Ethiopian American immigrant and the realization of the increasing number of 1.5 and second generation Ethiopian immigrants living in the United States. I took time to review existing scientific literature on the topic of 1.5 and second generation immigrants' acculturation and ethnic identity journey. I was curious if there were any publications that examined or explored how the acculturation and ethnic identity-formation process informs immigrants' perception of mental health-related issues. I found out, over all, that the immigrants' acculturation and ethnic identity experiences, as

an area, is well-researched. I also found out the phenomenon is under examined in the case of 1.5 and second generation Ethiopian immigrants. I found only two peer-reviewed articles about issues concerning Ethiopian immigrants' and their acculturation experiences. These two articles did not yield information on any attempt to explore or examine the link between immigrants' acculturation and ethnic identity-formation processes and mental health-related perceptions. My curiosity coupled by the knowledge gap birthed the current research topic as my final doctoral level project at Walden University.

Enduring the exploration process and the ups and down of the dissertation journey seem worthwhile now considering the discovered qualitative data. Accomplishing the task of gathering raw data on my research interest and later conducting the qualitative data analysis to determine the outcome of the study was an academic experience I will cherish. The study helped me to understand the qualitative research process. The findings of this study enriched my knowledge about my research interest. Reflecting upon the current research process and the outcome the study served as a catalyst for me to recall the interaction that I had with my graduate school philosophy professor.

This professor was a philosopher and a household name in Christian Apologetics. The professor was arguing against ethnic-based churches as unorthodox practices that do not conform to Christian theology. The only defense that I had to counter my professor's claim was to point out the necessity of ethnic-based local churches because of the congregants' possible English language deficiency affecting their ability to participate in mainstream congregations. The findings of this study make me wonder how my argument

would have been deeper if I had known what I know now about the importance of ethnic-based churches. Such churches are not only places of worship but also social contexts where young immigrants work through their acculturation and ethnic identity-formation processes.

I realize now that my professor's argument and his theological view were oriented by the theoretical framework that propagated the linear form of assimilation process. This view assumes the success of every immigrant depends on the ability to abandon the cultural heritage to adopt the host culture's practices completely. For my professor, immigrants needed to assimilate to the American culture, including learning the English language and attend English-speaking congregations for them to demonstrate a sound theological understanding of their faith. My own research would have been a great scientific point of discernment to illustrate the distortion in my professor's argument.

The study helped me to appreciate the commitment the study participants must have relative to their cultural heritage. Appearances can be deceiving. This adage was true with the participants in the current study. Some were second generation immigrants, and most of them grew up in the United States. A superficial glance at the participants may indicate that they do not care about their ethnic heritage and cultural heritage. Their fluency in the ethnic language (Amharic) might not be up to their parents' and Ethiopian community's expectations. They might not behave according to the standards their first-generation parents accepted when they grew up in Ethiopia.

One reality that the findings of this study yielded for me was the unshakable love and burning desire the participants had to be true to their cultural heritage. I did not

expect this would a universal attitude among the participants. The other realization that I learned from this project was the level of influence first-generation parents had on their young immigrant children. Parents and family members' influence was strong, whether in strengthening 1.5 and second generation immigrants' interest about the cultural heritage, serving as anchor during immigrants' tremulous acculturation and ethnic identity-formation processes, or influencing their perception in the matter of mental health issues.

The discovery of the current research work also led me to reflect more upon the practical needs ahead about reaching out to the community to expand the discussion regarding mental health-related issues. The community has built-in protective factors in enhancing immigrants' social, emotional, and personal lives. The vibrant family and community dynamics serves younger immigrants as protective factors during the acculturation and ethnic identity formation processes. The lack of openness to address mental health-related issues is concerning the possible risk involved in not seeking the timely necessary intervention for community members with legitimate mental health issues. It is my hope that the findings of this study would facilitate the opportunity among community members and mental health providers to start to approach the issues in a culturally sensitive way.

Conclusion

The current phenomenological study was designed to explore 1.5- and second-generation young adult immigrants' acculturation, identity formation, and mental health-related issues. Themes emerged in this study indicated the kind of struggles and challenges the participants encountered during the acculturation and ethnic identity

formation processes. Important data on how these processes may have shaped the participants' perception about mental health-related issues are generated. In the current study, participants also unearthed the mechanisms they had identified as protective factors to help sustain them during the treacherous phases of the acculturation and ethnic identity formation processes.

The themes that emerged from this study will yield important clues about 1.5- and second-generation Ethiopian immigrants' struggle, challenges, ethnic-based mental health perception shaped by experiences and messages received from the community. The themes involving protective factors will yield the mechanisms that helped sustain young immigrants during 1.5- and second-generation immigrants' acculturation and ethnic identity development processes. The findings of the current study will enhance first-generation immigrant parents' understanding regarding the unique personal, interpersonal, social, and emotional needs that their immigrant children may have growing up in the United States. My fidnings yielded important support for 1.5- and second-generation immigrants.

The involvement of ethnic-based community organizations in providing a safe environment for young immigrants to socialize and network during the acculturation and identity formation processes was noted. Regarding mental health-related issues, the findings of my study indicated the imperative nature of carrying out a community mental health outreach targeting first-generation Ethiopian parents. The perception of mental health-related issues that the participants reported can be traced to the messages they received from their parents and community leaders. The findings of the current study

indicated the success of 1.5- and second-generation immigrants' acculturation and ethnic identity formation processes rely on parents' understanding and support of immigrant youths' unique personal, social, and emotional needs.

References

Alba, R. (2005). Bright vs. blurred boundaries: Second generation assimilation and

exclusion in France, Germany and the United States. *Ethics and Racial Studies*,

28(1), 20-49. DOI:10.1080/0141987042000280003

Alba, R., & Islam, T. (2009). The case of the disappearing Mexican Americans: An

ethnic-identity mystery. *Population Research and Policy Review, 28*(2), 109-121.

DOI:10.1007/s11113-008-9081-x

American Psychological Association. (2013). Crossroad: The psychology of immigration

in the new contrary. Retrieved from

http://www.apa.org/topics/immigration/immigration-report-professionals.pdf

Amit, K., & Bar-Lev, S. (2015). Immigrants' sense of belonging to host country: The role

of life satisfaction, language proficiency, and religious motives. *Social Indicators

Research*, *124*(3), 947-961. DOI:10.1007/s11205-014-0823-3

Asrat, W. (2013). Mental health taboo in the Ethiopian community. *Tadias*, *20*(1), 1-3.

DOI:10.15640/jeds.v2n4a2

Bean, D., & Tienda, M. (1987). *The Hispanic population of the United States*. New York,

NY: Russell Sage Foundation.

Benet-Martinez, V., Leu, J., Lee, F., & Morris, M. (2002). Negotiating biculturalism:

Cultural frame switching in biculturals with oppositional versus compatible

cultural identities. *Journal of Cross-Cultural Psychology, 33*(5), 492-516.

DOI:abs/10.1177/0022022102033005005

Berry, W. (2005). Acculturation: Living successfully in to cultures. *International Journal of Intercultural Relations*, *29*(2005), 697-712. DOI:org/10.1016/j.ijintrel.2005.07.013

Berry, W. (1997). Immigration, adaptation, and acculturation. *Applied Psychology*, *46*(1), 5-34. DOI:0.1111/j.1464-0597.1997.tb01087.x

Berry, W., Phinney, S., Sam, L., & Vedder, H. (2006). Immigrant youth: Acculturation, identity, and adaptation. *Applied Psychology*, *55*(3), 303-332. DOI:10.1111/j.1464- 0597.2006.00256.x/pdf

Beyen, Y. (1992). Cross-cultural medicine a decade later: Medical disclosure and refugees telling bad news to Ethiopian patients. *The Western Journal of Medicine*, *157*(3), 328-332. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1011288/

Bhugra, D., & Becker, M. (2005). Migration, cultural bereavement and cultural identity. *World Psychiatry*, *4*(1), 18-24. Retrieved from http://www.wpanet.org/uploads/Publications/WPA_Journals/World_Psychiatry/P ast_Issues/English/wpa-02-2005.pdf#page=20

Bifftu, B., & Dachew, B. (2014). Perceived stigma and associated factors among people with schizophrenia at Amanuel Mental Specialized Hospital, Addis Ababa, Ethiopia: A Cross-sectional institution based study. *Psychiatry Journal*, *2014*(2014), 2-8. DOI:10.1155/2014/694565

Black, R. (2002). Conceptions of "home" and the political geography of refugee

    repatriation: Between assumption and contested reality in Bosnia-Herzegovina.

    Applied Geography, *22*, 123-138. DOI:org/10.1016/S0143-6228(02)00003-6

Carretta, V. (2011). *Phillis Wheatley: Biography of a Genius in Bondage*. Athens, GA:

    The University of Georgia Press.

Chacko, E. (2003). Identity and assimilation among young Ethiopian immigrants in

    metropolitan Washington. *Geographical Review*, *93*(4), 491-506.

    DOI:0.1111/j.1931-0846.2003.tb00044.x

Choi, Yoonsun., & You, Kim. (2010). Acculturation and the family: Core Vs. peripheral

    changes among Korean Americans. *Asian American Journal of Psychology*,

    21(2010), 135-190. Retrieved from

    https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3148822/

Cooley, C. (2001). The relationship between familism and child maltreatment in Latino

    and Anglo families. *Child Maltreatment, 6*(2), 130-142.

    DOI:abs/10.1177/1077559501006002005

Corona, R., Steven, L., Halfond, R., Shaffer, C. Reid-Ounones, K., & Gonzalez, T. A

    Qualitative analysis of what Latino parents and adolescents think and feel about

    language brokering. *Journal of Child and Family Studies*, *21*(5), 788-798.

    DOI:10.1007/s10826-011-9536-2

Creswell, J. (2009). Research design: Qualitative, quantitative, and mixed methods

    approaches (3rd ed.). Thousand Oaks, CA: Sage.

Creswell, J. (2003). *Research design.* Thousand Oaks, CA: Sage.

Crocetti, E., Fermani, A., Pojaghi, B., & Meeus, W. (2011). Identity formation in adolescents from Italian, mixed and migrant families. *Child Youth Care Forum*, *40*, 7-23. Retrieved from https://eric.ed.gov/?id=EJ914790

Cross, E., Jr. (1991). *Shades of black: Diversity in African-American identity.* Philadelphia, PA: Temple University Press.

De La Rosa, M. (2002). Acculturation and Latino adolescents' substance use: A research agenda for the future. *Substance Use & Misuse, 37*(4), 429-456. DOI:10.1081/JA-120002804

Denzin, K., & Lincoln, Y. (Eds.). (2003). *The landscape of qualitative research: Theories and issues* (2nd ed.). London, England: Sage.

Duncan, B., & Stephen, T. (2014). Assessing the socioeconomic mobility and integration of U.S. immigrants and their descendants. *The ANNALS of the American Academy of Political and Social Science, 657*(1), 109-135. DOI:10.1177/0002716214548396?journalCode=anna

Duncan, S. & Lambert, D. (2004). Landscape of home. In J. S. Duncan, N. C. Johnson, & R. H. Schein (Eds.), A companion of cultural geography (pp. 382–403). Malden, MA: Blackwell.

Duru, E., & Poyrazli, S. (2007). Personality dimensions, psychosocial-demographic variables, and English competency in predicting level of acculturative stress among Turkish international students. *International Journal of Stress Management*, *14*(1), 99-110. DOI:10.1037/1072-5245.14.1.99

Dusi, P. (2015). Belonging: Growing up between two worlds. *Social and Behavioral Sciences*, *171* (16), 560-568. DOI:10.1016/j.sbspro.2015.01.161

Dustmann, C., Frattini, T., & Theodoropoulos, N. (2010). Ethnicity and second generation immigrants. Retrieved from https://core.ac.uk/download/pdf/6229295.pdf

Erikson, H. (1950). *Childhood and society*. New York, NY: Norton.

Erikson, H. (1968). *Identity: Youth and crisis.* New York, NY: Norton.

Fanta, H., Hyman, I., & Noh, S. (2004). Determinants of depression among Ethiopian immigrants and refugees in Toronto. *Journal of Nervous & Mental Disease, 195*(5), 363-372. DOI:10.1097/01.nmd.0000126729.08179.07

Fisher, S.; Reynolds, L.; Hsu, W.; Barnes, J.; & Tyler, K. (2014). Examining multiracial youth in context: ethnic identity development and mental health outcomes. *Journal of Youth and Adolescence, 43*(10), 1688-1699. DOI:10.1007/s10964-014-0163-2

Foner, N, ed. (2009). *Across Generations: Immigrant Families in America*. New York: N. Y. Univ. Press.

Foner N., & Kasinitz P. (2007). The second generation. In *The New Americans: A Guide to Immigration Since 1965*, ed. MC Waters, R Ueda, pp. 270–82. Cambridge, MA: Harvard

Frechtling, J., & Sharp, L. (Eds.). (1997). User-friendly handbook of mixed method evaluation. *Division of Research Evaluation and Communication: National*

Science Foundation (NSF). Retrieved from http://www.nsf.gov/pubs/1997 /nsf97153/start.htm

French, S., Seidman, E., LaRue, A., & Abe, L. (2006). The development of ethnic identity development during adolescence. *Developmental Psychology, 42*(1), 1-10. DOI:10.1037/0012-1649.42.1.1

Gallo, C., Penedo, J., Espinosa, M., & Arguelles, W. (2009). Resiliency in the face of disadvantage: Do Hispanic cultural characteristics protect health outcomes? *Journal of Personality*, *77*(6), 1707-1746. DOI: 10.1111/j.1467-6494.2009.00598.x

Gans, J. (1992). Comment: Ethnic invention and acculturation: A bumpy-line approach. *Journal of American Ethnic History, 11*(1), 42-52. Retrieved from http://eds.a.ebscohost.com.ezp.waldenulibrary.org/eds/detail/detail?sid=15e4b262 -e1d0-49bd-9680-cb0f33832875%40sessionmgr4007&vid=47&hid=4202&bdata=JnNpdGU9ZWR zLWxpdmUmc2NvcGU9c2l0ZQ%3d%3d#AN=edsgcl.13087085&db=edsgea

Gee, G., Spencer, M., Chen, J., Yip, T., & Takeuchi, D. (2007). The association between self-reported racial discrimination and 12-month DSM-IV mental disorder among Asian Americans nationwide. *Social Science $ Medicine*, *64*(10), 1984-1996. Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2577289/

Gergen, K. J. (1991). The saturated self: Dilemmas of identity in contemporary life. New York, NY: Basic.

Gibson, A. (2001). Immigrant adaptation and patterns of acculturation. *Human Development, (44),* 19–23. DOI:org.ezp.waldenulibrary.org/10.1159/000057037

Gigue, B., Lalonde, R., & Lou, E. (2010). Living at the crossroads of cultural worlds: The experience of normative conflicts by second generation immigrant youth. *Social and Personality Psychology Compass*, *4*(1), 14-29. DOI:10.1111/j.1751-9004.2009.00228.x

Gil, G., Wagner, F., & Vega, A. (2000). Acculturation, familism and alcohol use among Latino adolescent males: Longitudinal relations. *Journal of Community Psychology*, (*28*), 443–458. DOI:10.1002/1520-6629(200007)28:4<443::AID-JCOP6>3.0.CO;2-A

Goitom, M. (2015). "Living in our own world": Parental influence on the identity development of second-generation Ethiopian and Eritrean youth during their formative years. *Journal of International Migration and Integration.* DOI:10.1007/s1234-015-0462-9

Gordon, M. (1964). Assimilation in American life: The role of race, religion, and national origins. New York, NY: Oxford University Press.

Groenewald, T. (2004). A phenomenological research design illustrated. *International Method of Qualitative Method, 2*(1), 1-26. Retrieved from http://journals.sagepub.com/doi/full/10.1177/160940690400300104

Gtatton, B., Gutman, M., & Skop, E. (2007). Immigrants, their children and theories of assimilation: Family structure in the United States, 1880-1970. *History of the*

Family: An International Quarterly, *12*(3), 203-222. DOI:

10.1016/j.hisfam.2007.10.003

Haller, W., & Landolt, P. (2005). The transnational dimensions of identity formation:

Adult children of immigrants in Miami. *Ethnic and Racial Studies*, *28*(6), 1182-

1214. DOI: 10.1080/01419870500224554

Haregewoyn, M. (2007). The Ethiopian Orthodox Church: Its role and influence on the

Ethiopian community in Columbus, Ohio. (Doctoral dissertation). Ashland

University. Retrieved from

http://digitalscholarship.tsu.edu/cgi/viewcontent.cgi?article=1007&context=assr

Hatch, J. (2002). *Doing qualitative research in education settings*. Albany, NY: State

University of New York Press.

Hwang, W., Wood, J., & Hwang, F. (2011). Acculturative family distancing (AFD) and

depression in Chinese American families. *Journal of Consulting and Clinical

Psychology*, *78*(5): 655–667. DOI:10.1037/a0020542

Hirschman, C. (2004). The role of religion in the *origins* and adaptation of immigrant

groups in the United States. *The International Migration Review*, *38*(3), 1206-

1233. Doi:10.1111/j.1747-7379.2004.tb00233.x

Hurwich-Reiss, E., & Gudino, O. (2016). Acculturation stress and conduct problems

among Latino adolescents: The impact of family factors. *Journal of Latina/o

Psychology*, 4(4), 218-231. DOI:org/10.1037/lat0000052

Jones, L.; Cross, W., & DeFour, C. (2007). Race-related stress, racial identity attitudes, and mental health among Black women. *Journal of Black Psychology*, 33, 208–231. DOI:pdf/10.1177/0095798407299517

Kaltman, S., Pauk, J., & Alter, C. (2011). Meeting the mental health needs of low-income immigrants in primary care: Community adaptation of an evidence-based model. *The American Journal of Orthopsychiatry, 81*(4), 543-551. DOI:10.1111/j.1939-0025.2011.01125.x

Kasinitz, P., Mollenkopf, J., Waters, M., & Holdway, J. (2008). Inheriting the city: The children of immigrants come of age. *The Annals of the American Academy of Political and Social Science*, *620*, 307-310. DOI:10.1111/j.1468-2427.2012.01216.x

Kaing, L., Witkow., & Champagne, M. (2013). Normative change in ethnic and American identities and links with adjustment among Asian American adolescents. *Developmental Psychology*, *49*(9), 1713-1722. DOI:10.1037/a0030840

Killian, C., & Hegtvedt, K. (2003). The role of parents in the maintenance of second generation Vietnamese cultural behaviors. *Social Spectrum*, *23*, 213-245. DOI:10.1080/02732170390132217

Kim, S., & Chao, R. (2009). Heritage language fluency, ethnic identity, and school effort of immigrant Chinese and Mexican adolescents. *Cultural Diversity and Ethnic Minority Psychology*, *15*(1), 27-37. DOI:10.1037/a0013052

Landale, S., & Oropesa, S. (1995). Immigrant children and the children of immigrants:
Inter- and intra-ethnic group differences in the United States changing (Population
Research Group Research Paper No. 95-2). East Lansing, MI: Michigan State
University.

Leong, F., Park, Y., & Kalibatseva, Z. (2014). Disentangling immigrant status in mental
health: Psychological protective and risk factors among Latino and Asian
American immigrants. *American Journal of Orthopsychiatry*, *83*(2-3), 361-371.
DOI:10.1111/ajop.12020

Lyons, T. (2007). Conflict- generated diaspora and transnational politics in Ethiopia.
Conflict, Security & Development, 7(4), 529-549.
DOI:10.1080/14678800701692951

Marcia, E. (1993). The relational roots of identity. In J. Kroger (Ed.), *Discussions on ego
identity* (pp. 101-120). Hillsdale, NJ: Erlbaum.

Mai, F. (2012). "Selective Acculturation: How Ethnic Churches Influence New Chinese
Americans" *Paper presented at the annual meeting of the American Sociological
Association Annual Meeting, Colorado Convention Center and Hyatt Regency,
Denver, CO Online* <APPLICATION/PDF>. 2014-12-12. Retrieved from
http://citation.allacademic.com/meta/p565228_index.html.

Marsiglia, F., Nagoshi, J., Parsai, M., Booth, J., & Castro, F. (2014). The Parent-child
acculturation gap, parental monitoring, and substance use in Mexican heritage
adolescents in Mexican neighborhood of the Southwest U.S. *Journal of
Community Psychology*, *42*(5), 530-543. Retrieved from

http://eds.b.ebscohost.com.ezp.waldenulibrary.org/eds/pdfviewer/pdfviewer?vid= 1&sid=8e67f358-23eb-4e40-99f3-aa528307148d%40sessionmgr103&hid=126

Matsunaga, M., Hecht, M., Elek, E., & Ndiya, K. (2010). Ethnic identity development and acculturation: A longitudinal analysis of Mexican-Heritage Youth in the Southwest United States. *Journal of Cross Cultural Psychology*, *41*(3), 410–427. DOI:10.1177/0022022109359689

McCabe, J. (2011). Doing multiculturalism: An intuitionist analysis of the practice of multicultural sorority. *Journal of Contemporary Ethnography, 40*(5), 521-529. DOI:10.1177/0891241611403588

McGoldrick, M., Giordano, J., & Garcia-Preto, N. (2005). Overview. In M. McGoldrick, J. Giordano, & N. Garcia-Preto (Eds.), *Ethnicity and family therapy* (pp. 1-42). New York: The Guilford Press.

Moustakas, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage

MPI. (2014). *The Ethiopian diaspora in the United States.* Washington, DC: Migration Policy Institute. [MPI is an independent, nonpartisan think tank in Washington, DC, dedicated to the study of the movement of people worldwide.

Neckerman, K., Carter, P., & Lee, J. (1999). Segmented assimilation and minority cultures of mobility. *Ethnic and Racial Studies*, *22*(6), 945-965. Retrieved from http://eds.b.ebscohost.com.ezp.waldenulibrary.org/eds/pdfviewer/pdfviewer?vid= 1&sid=9f0152c7-5ca3-44a4-aa5e-c3699af5299f%40sessionmgr103&hid=126

Oh, J., & Fuligni, A. (2010). The role of heritage language development in the ethnic identity and family relationship of adolescents from immigrant backgrounds.

Social Development, *19*(1), 202-220. DOI:10.1111/j.1467-9507.2008.00530.x

Orrellana, F. (2009). *Translating Childhoods: Immigrant Youth Language and Culture*. New Brunswick, NJ: Rutgers Univ. Press.

Orellana, F., Dorner, L., & Pulido, L. (2003). Accessing assets: immigrant youth's work as family translators or para-phrasers. *Social. Problems, 50*, 505–24. DOI:10.1525/sp.2003.50.4.505

Park, M. (2011). The role of ethnic religious community institutions in the intergeneration transmission of Korean among immigrant students in Montreal. *Language, Culture, and Curriculum*, *24*(2), 195-206. DOI:10.1080/07908318.2011.585239

Ponterotto, J., & Park-Taylor, J. (2007). Racial and ethnic identity theory, measurement, and research in counseling psychology: Present status and future directions. *Journal of Counseling Psychology*, *(54)*3, 282-294. DOI:10.1037/0022-0167.54.3.282

Papadopoulos, I., Lees, S., Lay, M. & Gebrehiwot, A. (2004). Ethiopian refugees in the UK: Migration, adaptation and settlement experiences and their relevance to health. *Ethnicity and Health, 9*(1), 55-73. Retrieved from http://eds.b.ebscohost.com.ezp.waldenulibrary.org/eds/pdfviewer/pdfviewer?vid=1&sid=0970a391-7b00-480f-9255-33caf31748c3%40sessionmgr102&hid=126

Patton, Q. (1990). *Qualitative evaluation methods* (2nd ed.). Thousand Oaks, CA: Sage.

Patton, Q. (2002). *Qualitative research & evaluation methods* (3rd ed.). Thousand Oaks, CA: Sage.

Pereira, H. (2012). Rigor in phenomenological research: Reflection of a novice nurse

    researcher. *Nurse Researcher*, *19*(3), 16-19. Retrieved from

    http://eds.b.ebscohost.com.ezp.waldenulibrary.org/eds/pdfviewer/pdfviewer?vid=

    4&sid=b6148f6e-026b-40b9-92de-b8277abec0ed%40sessionmgr104&hid=126

Phinney, J., & Ong. D. (2007). Conceptualization and Measurement of Ethnic

    Identity: Current Status and Future Directions. *Journal of Counseling Psychology*

    54(3), 271–281. DOI:10.1037/0022-0167.54.3.271

Phinney, J., Horenczyk, G., Liebkind, K., & Vedder, P. (2001). Ethnic identity,

    immigration, and well-being: An interactional perspective. *Journal of Social*

    Issues, *57*(3), 493-510. Retrieved from

    http://eds.b.ebscohost.com.ezp.waldenulibrary.org/eds/pdfviewer/pdfviewer?vid=

    1&sid=b2085ea1-9482-4e01-b38c-65204cdc4358%40sessionmgr103&hid=126

Phinney, J., Romero, I., Nava, M., & Huang, D. (2001). The role of language, parents,

    and peers in ethnic identity among adolescents in immigrant families. J*ournal of*

    Youth and Adolescence, *30*(2), 135-153. DOI: 10.1023/A:1010389607319

Phinney, J. (1993). A three-stage model of ethnic identity development. In M. Bernal &

    G. Knight (Eds.), *Ethnic identity: Formation and transmission among Hispanics*

    and other minorities (pp. 61–79). Albany, NY: State University of New York

    Press.

Phinney, J. (1990). Ethnic identity in adolescents and adults. Review of research.

    Psychology Bulletin, *108*(3), 499-514. Retrieved from

    http://eds.a.ebscohost.com.ezp.waldenulibrary.org/eds/detail/detail?vid=2&sid=a0

70f168-7b51-475d-a888-

6599a7b74a58%40sessionmgr4006&hid=4202&bdata=JnNpdGU9ZWRzLWxpd

mUmc2NvcGU9c2l0ZQ%3d%3d#AN=2270238&db=mnh

Phinney, J.S. (1993). A three-stage model of ethnic identity development in adolescence.
In M.E. Bernal & G. P. Knight (Eds.), Ethnic identity: Formation and
transformation among Hispanics and other minorities (pp. 61-79). New York:
State University of New York Press.

Portes, A., Fernandez-Kelly, P., & Haller, W. (2009). The adaptation of the immigrant
second generation in America: Theoretical overview and recent evidence. *Journal
of Ethnic and Migration Studies, 35*(7), 1077-1104.
DOI:10.1080/13691830903006127

Portes, A., & Zhou, M. 1993. The new second generation: Segmented assimilation and its
variants. The Annals of the American Academy of Political and Social Science,
Interminority Affairs in the U.S.: Pluralism at the Crossroads, *530*, 74-96.
Retrieved from
https://web.stanford.edu/group/scspi/_media/pdf/Reference%20Media/Portes_Zho
u_93_Immigration.pdf

Portes, A., & Rumbaut, G. (2001). Legacies: The story of the immigrant second
generation. Berkeley, CA: University of California Press.

Pumariega, J. A., Rothe, E., & Pumariega, B. J. (2005). Mental health of immigrants and
refugees. *Community Mental Health Journal, 41*(5), 581-597. DOI:10.1007
/s10597-005-6363-1

Rhee, S., Chang, J., & Rhee, J. (2003). Acculturation, communication patterns, and self-esteem among Asians and Caucasian American adolescents. *Adolescence*, 38(152), 749-768. Retrieved from http://eds.a.ebscohost.com.ezp.waldenulibrary.org/eds/pdfviewer/pdfviewer?vid= 1&sid=07061edd-11ee-4785-ad76-cb00d8bdef3f%40sessionmgr4007&hid=4202

Rothe, E., Pumariega, J., & Sabagh, D. (2011). Identity and acculturation in immigrant and second generation adolescents. *Adolescent Psychiatry*, *1*(1), 72-81. DOI:10.2174/2210676611101010072

Rumbaut, G., & Ima, K. (1988). The Adaptation of Southeast Asian Refugee Youth: A Comparative Perspective, San Diego, CA: San Diego State University

Schwartz, J., Kim, Y., Whitbournue, K., Zamboanga, L., Weisskirch, S., Fothun, F., &.Luyckx, K. (2013). Converging identities: Dimensions of acculturation and personal identity status among immigrant college students. *Cultural Diversity and Ethnic Minority Psychology*, *19*(2), 155-165. DOI: 10.1037/a0030753

Schwartz, J., Montgomery, J., & Briones, E. (2006). The role of identity in acculturation among immigrant people: Theoretical propositions, empirical questions, and applied recommendations. *Human Development*, *49*(1), 1-30. DOI:10.1159/000090300

Segal, A., & Mayadas, S. (2005). Assessment of issues facing immigrant and refugee families. *Child Welfare*, *84*(5), 563–583. Retrieved from http://eds.b.ebscohost.com.ezp.waldenulibrary.org/eds/pdfviewer/pdfviewer?vid= 1&sid=03818d21-e403-4aec-9863-ddf3e18a0f1f%40sessionmgr120&hid=126

Song, S. (2010). Finding one's place: Shifting ethnic identities of recent immigrant

children from China, Haiti and Mexico in the United States. *Ethnic and Racial*

Studies, 33(6), 1006–1031. DOI:10.1080/01419870903121340

Steinglass, P., Denour, A., & Shye, S. (1985). Factors influencing psychosocial

adjustment to forces in geographical relocation: The Israeli withdrawal from the

Sinai. *American Journal of Orthopsychiatry, 55,* 513–529. DOI:10.1111/j.1939-

0025.1985.tb02702.x

Stepick, A., & Stepick, C. D. (2010). The complexities and confusions of segmented

assimilation. *Ethnic and Racial Studies*, *33*(7), 1149-1167.

DOI:10.1080/01419871003599518

Suarez-Orozco, C.; & Suarez-Orzco, M. (2001). *Children of Immigration: The*

Developing Child Serious. Cambridge, MA: Harvard University Press.

Suarez-Orozco, C., & Suarez-Orozco M, Todorova I. 2008. *Learning in a New Land:*

Immigrant Students in American Society. Cambridge, MA: Harvard Univ. Press

Suarez-Orozco, C., Sirin, S., Ryce, P., Katsiaficas, Dalal., &, Rogers-Sirin, Lauren.

(2013), Understanding the role of social support in trajectories of mental health

symptoms for immigrant adolescents. *Journal of Applied Developmental*

Psychology, 34 (5), 199-207. Retrieved from

http://eds.a.ebscohost.com.ezp.waldenulibrary.org/eds/detail/detail?vid=1&sid=ae

ba5f2a-a998-4bc8-a19f-

05f18c17ba39%40sessionmgr4008&hid=4202&bdata=JnNpdGU9ZWRzLWxpd

mUmc2NvcGU9c2l0ZQ%3d%3d#AN=000322687000001&db=edswss

Tadmor, C., Galinsky, A., & Maddux, W. Getting the most out of living abroad: Biculturalism and integrative complexity as key drivers of creative and professional success. *Journal of Personality and Social Psychology*, *103*(3), 520-542. DOI:10.1037/a0029360

Tang, M. (2001). Counseling immigrant children in school settings: What school counselors should do? In D. Singh (Ed.), *Elementary school counseling in the new millennium* (pp. 209-222). Alexandria, VA: American Counseling Association.

Tsang, W. (2015). Integration of Immigrants: The role of ethnic churches. *Journal of International Migration and Integration*, *16*(4), 1177-1193. DOI:10.1007/s12134-014-0380-2

Trochim, M. (2006). *Research methods knowledge base*. Retrieved from http://www.socialresearchmethods.net/kb/index.php

Victoria, J. (2008). Unlocking the benefits of diversity: All-inclusive multiculturalism and positive organizational change. *The Journal of Applied Behavioral Science 44*(1):116-133. DOI:10.1177/0021886308314460

Vignoles, L., Schwartz, J., & Luyckx, K. (2011). Introduction: Toward an integrative view of identity. In S. J. Schwartz, K. Luyckx, & V. L. Vignoles (Eds.), *Handbook of identity theory and research* (pp. 1–27). New York, NY: Springer.

Viruel-Fuenes, E. & Schultz, A. (2009). Toward a dynamic conceptualization of social ties and context: Implications for understanding immigrant and Latino health. *American Journal of Public Health, 99*(12), 2167–2175. DOI:10.2105/AJPH.2008.158956

Ward, C., Bochner, S., & Furnham, A. (2001). *The Psychology of Culture Shock. (*2nd Ed.). London and New York: Routledge.

Waters, M. 1995. *Globalization*. London and New York: Routledge.

Wei, M., Liao, Y., Heppner, P., Chao, R., & Ku, T. (2012). Forbearance, coping, identification with heritage culture, acculturative stress, and psychological distress among Chinese international students. *Journal of Counseling Psychology*, *59*(1), 97-106. DOI:10.1037/a0025473

Zhou, M. (1997). Growing Up American: The Challenge Confronting Immigrant Children and Children of Immigrants. *Annual Review of Sociology, 23*(1997): 63–95. Retrieved from http://eds.a.ebscohost.com.ezp.waldenulibrary.org/eds/pdfviewer/pdfviewer?vid=1&sid=62f8d1b0-ca32-412b-b5e9-51f26055fbf8%40sessionmgr4008&hid=4202

Appendix A: Interview Protocol

Date:_____

Location:_____

Name of

Interviewer:_____

Name of

Interviewee:_____

Interview Number: One

Research Questions (RQ) and Interview Questions (IQ)

RQ1. What are the experiences of second-generation Ethiopian immigrants' young adults in the metropolitan Phoenix area?

IQ 1. Tell me about your parents' immigration journey to the United States?

• Please tell me how you see your parents' adaptation to living in the U.S.

IQ 2. Where were you born? Where did you grow up?

   • Tell me about your experience growing up or living in the greater Phoenix area as 1.5 or second-generation Ethiopian immigrant.

IQ 3. How do you describe your social and interpersonal experiences as 1.5 or second-generation immigrant?

RQ2. How do 1.5 and second-generation Ethiopian immigrant young adults in metropolitan Phoenix area describe their identity formation process?

IQ 1. How do you describe your ethnic identity at this time?

IQ2. If you do get involve in a romantic relationship, do you prefer to get involved with someone with similar cultural background?

- What language do you use to communicate if you get involved with a person of Ethiopian descent?

IQ 3. Which one of the demographic descriptions do you think fits you best? "Ethiopian American," "African American," "Ethiopian," "American," or "Other"

IQ 4. Explain how you arrived at this conclusion?

RQ3. How do 1.5 and second-generation Ethiopian immigrant young adults in metropolitan Phoenix area explain their acculturation process?

SQ3.1. How do 1.5 and second-generation Ethiopian immigrant young adults in metropolitan Phoenix area explain their experience of their parents' culture?

SQ3.2. How do second-generation Ethiopian immigrant young adults in metropolitan Phoenix area explain their experience of the majority culture?

IQ 1. How do you describe your cultural preferences as 1.5 or second-generation immigrant living in the greater phoenix area?

- What language do you speak?

- What language do you use to communicate with your parents?

- What kind of food do you prefer?

- Do you attend Ethiopian gatherings? If yes, what kind of gathering?

- Do you attend cultural and religious gathering unique to the Ethiopian people?

- How do you describe your religious affiliation (if any)? Does your family of origin have the same religious affiliation?

- Have you been to Ethiopia? If so, how do you describe your experiences?

IQ 2. What is your understanding of your parents' (first-generation immigrants) cultural experiences?

IQ 3. How do you describe the cultural differences between you and your parents?

RQ4. What are 1.5 and second-generation Ethiopian young adults' beliefs on mental health-related issues?

SQ1: How do 1.5 and second-generation Ethiopian young adults relate their acculturation and identity formation process to their beliefs of mental health-related issues?

IQ1. What do you consider the personal, cultural, and social barriers that may trigger mental health challenges?

IQ2. What is your view of utilizing mental health services?

- How do you cope when you experience extreme stress and emotional turmoil?

- What kind of resources do use when faced with emotional difficulties such as extreme stress, depression, and anxiety?

- Who do you consult when you experience emotional challenges such as depression and anxiety?

- What massages have you heard in your community about using mental health services?

IQ3. How do you describe your emotional wellness growing up in an Ethiopian household living in Phoenix?

IQ4. Do you have anything else you would like share?

Appendix B: Letter to Participant

Name of Participant   Date:

Address

Dear (Name),

My name is XXXX XXXXXX, and I am a doctoral candidate at Walden University. I am conducting dissertation research on 1.5 and second-generation young adult Ethiopian immigrants' ethnic identity and acculturation process. The existing scientific study on the proposed cultural group is very limited. Considering the growing immigrant population in general and Ethiopian immigrants in particular in the greater Phoenix area, more studies are crucial to gain insight about what it means to go through the identity formation and acculturation process from the individuals who had firsthand experience.

I realize that your time is important to you, and I appreciate your consideration to participate in this study. In order to fully understand your experience, we need to meet on three separate occasions for approximately one hour each meeting. Meetings can be held at a location of your choosing and will not require you to do anything you do not feel comfortable doing. All information gathered during our meetings will be kept strictly confidential.

Please contact me at your earliest convenience to schedule a date and time when we can meet. My telephone number is (XXX) XXX-XXXX. You can also email me at name@waldenu.edu. I look forward to hearing from you.

XXXX XXXXXX

Doctoral Candidate

Walden University

Appendix C: Brief Demographic and Mental Health Screening Questions

1. Would you please tell me how old you are?

2. Where were you get born?

3. If you were not born in the United States, how old were you when you immigrated to the United States?

4. Where do you live?

5. What is your primary language?

6. Do you speak, read, write, and understand the English language?

7. Do you have a history of mental health condition?

8. Do you receive behavioral/mental health treatment for example for depression, anxiety, or bipolar condition currently?

9. Do you have any question about the proposed research or reservation not to participate?

Appendix D: Transcriptionist Confidentiality Agreement

I, ___ transcriptionist, agree to maintain full confidentiality in regards to any and all audiotapes and documentations received from student researcher Samuel Wolde related to his/her research study on the researcher study titled *Phenomenological Exploration of Acculturation, Identity Formation, and Mental Health-Related Issues among 1.5- and Second-Generation Young Adult Ethiopian Immigrants.*

Furthermore, I agree:

1. To hold in strictest confidence the identification of any individual that may be inadvertently revealed during the transcription of audio-taped interviews, or in any associated documents.

2. To not make copies of any audiotapes or computerized titles of the transcribed interviews texts, unless specifically requested to do so by the researcher, (name of researcher).

3. To store all study-related audiotapes and materials in a safe, secure location as long as they are in my possession.

4. To return all audiotapes and study-related materials to (researcher's name) in a complete and timely manner.

5. To delete all electronic files containing study-related documents from my computer hard drive and any back-up devices.

I am aware that I can be held legally responsible for any breach of this confidentiality agreement, and for any harm incurred by individuals if I disclose

identifiable information contained in the audiotapes and/or files to which I will have access.

Transcriber's name (printed) _____

Transcriber's signature _____

Date July 1, 2016_____