

Stressors, Coping Resources, and Mental Distress  
among Korean Canadians

by

Manseung Yang

A Thesis  
Presented to the University of Manitoba  
in Partial Fulfillment of the Requirements  
for the degree of

Master of Arts

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University of Manitoba  
Winnipeg, Manitoba

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STRESSORS, COPING RESOURCES, AND MENTAL DISTRESS  
AMONG KOREAN CANADIANS

BY

MANSEUNG YANG

A Thesis submitted to the Faculty of Graduate Studies of the University of Manitoba in partial fulfillment of the requirements for the degree of

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## ABSTRACT

The primary goal of the current study was to understand socio-psychological factors which contribute to or hinder migrants' mental health. Instead of accepting the general assumption found in a number of migration studies that migration is essentially related to high rates of mental disorder, this study attempted to identify some of the significant socio-psychological explanatory factors that influence migrants' mental health status. Consequently, this study paid considerable attention to migrant's personality traits and their social support networks in the host society, as well as migratory stress.

This research assumed that socio-psychological coping resources contribute to the mental well-being of Korean immigrants, while acculturative stress and stressful life events were associated with an increased level of depression. Based on this theoretical perspective, four major hypotheses were formulated. This research analyzed data collected from 858 Korean immigrants in Toronto to test the four hypotheses.

The results of zero-order correlation analysis and stepwise regression analysis suggest that acculturative stress, stressful life events, Korean social support, and personal feelings of mastery were all significant explanatory factors of psychological distress. Four stress process

variables in the regression analyses accounted for 33% of the variance in depression among Korean immigrants. Of the stress process variables, acculturative stress had the greatest explanatory power. Contrary to expectations, buffering effects of socio-psychological coping resources were not found in this study. In conclusion, the implications of the findings reported in this study for the migration and stress process models were discussed.

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This thesis is dedicated to my wife and son. They have become more precious persons to me, especially since we have been living apart during the whole process of this thesis. I would like to thank my wife, Jinjoo Yang, for providing me with strong motivation to continue studying and encouraging me to achieve my full potential through countless letters, phone calls, and E-Mails.

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## CHAPTER 1

### INTRODUCTION

Canada and the United States are nations of immigrants. Immigration played a significant role, not only in the growth of the population, but also in the socio-economic development of North America. In 1962 the emphasis of Canadian immigration policy was shifted from country of origin and racial restrictions to education, training, and skills (Keely and Elwell, 1981). Since then, the composition of the immigrant influx has dramatically changed. There has been a rapid increase in the number of Asian immigrants, and a decrease in European immigrants. While the percentage of immigrants from Great Britain decreased from 27.6 percent in 1946-55 to 8.5 percent in 1981-86, during the same period, Asian immigrants to Canada increased to 42.6 percent from 2.1 percent (Moore, Ray, and Rosenberg, 1990: 2). Today, Asian immigrants are the most rapidly growing immigrant group in North America.

With the rapid increase of Asian immigrants, the number of Korean immigrants to North America has significantly increased over the last 35 years (Hurh & Kim, 1990b). More specifically, the influx of Korean immigrants to Canada has rapidly increased since the 1970s. In 1975, when immigration

reached its peak, Canada alone received more than 4,500 Korean immigrants (Shin, 1991). Recently, the number of new Korean immigrants to Canada is increasing again (Immigration Canada, 1989). In the United States, Koreans are also one of the most rapidly increasing immigrant groups (Hurh & Kim, 1990a). The total number of Korean immigrants living in North America reached close to three quarters of a million in 1991 (The Korea Times, 1992).

Despite this rapid increase in the number of Korean immigrants, little systematic research on the mental health of these migrants has been carried out in North America. Research focused upon Korean immigrants and their mental health is relatively rare, compared to research on other Asian immigrant groups such as Japanese and Chinese (Hurh, Kim, and Kim, 1979). Furthermore, many studies of migrants and their mental health have focused on earlier European peasant migrants and internal migrant group experiences (Kuo, 1976; Kuo & Tsai, 1986). As a result, there is a serious lack of understanding of Korean immigrants' mental health.

There have been two contradictory assertions about Korean immigrants' mental health. The first assertion is that, like Japanese immigrants, Korean immigrants are a minority 'free of antisocial tendencies.' That is, Korean immigrants do not possess high rates of crime and do not show high rates of mental health problems during their acculturation process. They are not usually considered to be a 'problem minority' in

North American communities. Moreover, it is recognised that during their short history in North America, Korean immigrants have achieved a good measure of economic success after starting life in North America with virtually nothing. For instance, more than 80% of corner stores in Toronto are managed by Koreans. It is also known that most Koreans in Winnipeg buy a house within 3 or 4 years of immigration (Moon, 1982).

However, there is also an opposite assertion about Korean immigrants and their mental health. It has been suggested that although Korean immigrants have apparently succeeded in adjusting to life in Canada, especially in the economic context, they have suffered from poor working conditions, long working hours, inter-generational conflicts, and language difficulties in the process of achieving their economic success (Kim, 1986). Based on interviews with six helping professionals (ie., four medical doctors and two ministers), Kim (1986) argued that mental health problems among Korean immigrants tend to be masked, when Korean immigrants experience mental disorder, especially depression. It has often been claimed that certain groups such as the elderly and women suffer from more serious mental distress (Kim, 1986; Kim & Hurh, 1988).

Moreover, Asian immigrants utilize public mental health facilities less frequently than the general population, since the expression of mental disorder and help-seeking behaviour

tend to be affected by the migrants' culture for a number of reasons (Hurh & Kim, 1988; Kuo, 1984; Liu, 1986; Marsella & Dash-Scheuer, 1988; Noh, Avison, and Church, 1989; Noh, 1992a). First, It has often been reported that Asian immigrants are likely to express depression by somatization of symptoms. Second, new immigrants like Asian immigrants seldom use mental health services, not only because they cannot afford it, but also because they tend to be faced with opposition from family, friends, or relatives who may view mental disorder as stigmatizing. As a result, it is very doubtful that the estimates of mental health problems based on official statistics, such as hospital records, adequately indicate the mental health status among Korean immigrants. It may be possible that hospital records seriously underestimate the extent of the mental health problems experienced by Asian immigrants, including Korean immigrants. Therefore, it is hard to determine how many Korean immigrants suffer from mental health problems, until more systematic investigation based on community populations has been carried out.

The purpose of this study is to explore, not only the prevalence of mental disorder among the Korean community in Toronto, but also the socio-psychological factors that influence their mental health. Eventually, studies of mental health status among Korean immigrants may provide researchers and immigration service providers with needed information concerning the impact of the migration process on the mental

health of new Canadians.

## CHAPTER 2

### THEORETICAL REVIEW OF MIGRATION AND MENTAL DISTRESS

It has been recognized that the change arising from the migration process plays a significant role in migrants' lives. Migration affects not only migrants' mental health status, but also their biological and physical functioning (Hull, 1979). Due to the significant impact of migration, the relationship between migration and health has attracted the interest of a number of researchers. In many migrant studies, however, negative aspects of migrants' mental health have been stressed, and the diverse situations that various immigrant groups experience, during different periods of migration, have often been overlooked. Few consistent theoretical models, comprised of the various relationships between changing environment and migrants' mental health, have been developed to guide this research. By taking into account significant changes in migration environment, this research casts doubt on the often pessimistic perception of migrant' mental health seen in earlier research. Such research tended to consider migrants and the migration process respectively to be high risk individuals and a high risk situation.

## 2.1 Two Models of Migration and Mental Distress

A number of studies have shown that immigrants, even interstate migrants, experience higher rates of mental health problems than native-born populations (Bagley, 1971; Pope, Pioggia, and Urgelun-Todd, 1983; Kleiner & Parker, 1959; Morrison, 1973; Odegaard, 1973a, 1973b). The important hypotheses related to these findings are whether individuals predisposed to mental disorder are likely to emigrate, or whether the higher rates of mental health problems among immigrants are due to the difficulties of adjustment to their new environment (Bagley, 1971; Morrison, 1973; Stroller and Krupinski, 1973; Bhaskaran, Seth, and Yadav, 1973; Odegaard, 1973a, 1973b). The former is known as the migration model and the latter as the stress model (Bagley, 1971, Gallagher, 1980; Boker, 1981).

The migration model treats migration as a negative selection process suggesting that high risk persons or those pre-disposed to mental disorder tend to migrate. That is, the migration model claims that migrants themselves are high risk persons for mental disorder, so that some forms of mental disorder exist before migration. Migrants were often portrayed as isolated and deeply traumatized individuals, who are drifters, escapists and troublemakers (Pfister-Ammende, 1973).

Odegaard (1973a) found in a 1936 study that Norwegian immigrants in America had rates of schizophrenic psychoses

twice as high as non-migrants, while manic-depressive illness among migrants was lower than non-migrants. Odegaard interpreted this phenomenon by focusing on the nature of pre-schizophrenic and schizophrenic individuals who tend to have poor and fragile social relationships. According to Odegaard, schizophrenic individuals, frustrated by their social life in their home country, may find migration to a new country especially attractive. In contrast to Odegaard's findings, Pope, Pioggia, and Urgelun-Todd (1983) discovered that depressed individuals are more likely to migrate than schizophrenics. However, they agreed with Odegaard that migration is not the cause, but the result of psychiatric illness. That is, the main explanation of a high prevalence of mental disorder among migrants should not be attributed to the difficulties of migration, but rather to the high risk personality of migrants.

On the other hand, the stress model is based on the assumption that adjustment difficulties associated with migration are stressful for migrants, and that these stressful experience makes migrants vulnerable to mental disorder. That is, migration itself is a high-risk situation for psychological distress.

In many studies, migration has been considered to be an isolating and uprooting process. Migration disrupts attachment to social networks in the society of origin. The reconstruction of social support in a new and different socio-

cultural environment is a difficult process. Socially isolated migrants may experience negative feelings such as loneliness and alienation. Migrants must accept an entirely new, unfamiliar, and unpredictable set of values and social order in their new environment. Abrupt changes associated with migration can cause a cultural shock, which may result in intolerable stress for the migrant. Furthermore, limited opportunities for migrants in the host society often lead to a glaring discrepancy between their aspirations and actual achievement (Kleiner & Parker, 1959; Bagley, 1971). Factors such as racial discrimination, language problems, and poor living conditions place migrants in an underprivileged position. Thus, migrants are subjected to the same low social status that American blacks, women, and the elderly endure (Turner, and Roszell, 1992).

In these earlier models of migration, the negative aspects of the migration process, such as the selection of migrant groups with mental health problems and the difficulties of uprooting, were over emphasized. Migration as a rerooting process and the benefits of successful migration have been neglected in the study of migrants' mental health.

Furthermore, empirical findings regarding migrants' mental health are inconsistent. While a large number of studies support either one or both of these models that migrants have a higher prevalence of mental disorder, there are an equal number of studies that challenge the findings of

the early migration studies (Kuo & Tsai, 1986; Moore, Ray, and Rosenberg, 1988). For instance, Murphy (1973a, 1973b) found that various migrant groups, such as Swedish and Danish immigrants in Norway, European immigrants in Israel, and immigrants in Canada and Singapore, had similar or better mental health status than the general population. Murphy (1973a) also indicated that even in Odegaard's Norway data, migrants showing higher prevalence rates of mental disorder than non-immigrants occurred in one city, Oslo, and only during specific periods.

## 2.2 Factors Affecting the Migration Process

Recently, the pessimistic assumptions with regard to migrants' mental health, treating migrants either as deviant individuals who have failed to adapt to the requirements of the original society, or as passive actors influenced by the negative impact of migration and experiencing poor mental health, have been questioned. More recent migration studies have realized the importance of various pre- and post-migratory variables that significantly influence migrants' mental health (Morrison, 1973; Hull, 1979; Kuo & Tsai, 1986; Eitinger, 1981; Berry & Kim, 1988). These studies claim that attention should not focus on whether or not migration correlates highly with mental disorder, but on how various pre- and post-migratory variables affect the mental health of various migrant groups in different ways (Morrison, 1973).

The relationship between migration and mental health cannot be treated as a unitary phenomenon, since numerous migratory factors associated with socio-cultural, economic, political, and historical migration circumstances significantly affect migrants' mental health status. These migration circumstances are diverse and vary at different periods. Even when the migration period is the same, migrant groups are not homogeneous people but heterogeneous ones having different religious, political, ethnic, national, emotional and motivational backgrounds. Defining all these various people by a single category, as migrants, can cause significant problems of over-generalization. Instead of the broader concept of 'migrant,' the present investigation focused upon Korean immigrants as post-industrial migrants.

The migration environment has changed greatly since the early colonial migration period (Eitinger, 1981). The entire environment of migration for postindustrial migrants is different from that of earlier migrants in pre-industrial and industrial eras. In particular, the characteristics of immigrant cohorts, the nature of the socioeconomic structure of America, and the political economy of the world system in the post-industrial period have all significantly changed from the situation of early migrants who arrived before the Second World War (Kuo & Tsai, 1986). Unlike peasant migrants from Europe at the turn of this century, many immigrants in the post-industrial period tend to be more mobile, more urbanized,

and better educated than the general population (Eric, Ray and Rosenberg, 1990). These days, migrants are likely to work in the tertiary sector and manufacturing industries. Moreover, some possess considerable professional and technical skills which are in demand even in times of recession (Richmond, 1981).

The acculturation process might become easier for these post-industrial migrants, not only because they are highly educated and well qualified, but also as a consequence of the development of the world economic system, increasing political interaction, and technological development. The world consists more and more of mobile societies. Every day, thousands of families move from one nation to another for a variety of reasons. In the post-industrial epoch, migration has become a part of life.

Migrants are able to maintain aspects of their original culture such as food, music, and language in many host societies. Due to improved communications and transportation systems, furthermore, immigrants can relatively easily retain close ties with their original social networks by means of telephone, television, newspaper, films, mail, and air travel. Thus migration does not necessarily mean complete uprooting from their homeland. More and more ethnic communities are not dependent upon face to face contact in a specific location, but are becoming somewhat more detached from geographical territory.

As a consequence, it is not necessary for a minority group to be integrated or assimilated into the host society. Unlike previous assimilation theorists who predicted that minority groups, over time, will give up their identities and be assimilated into the host society, a number of ethnic studies recognize that assimilation is the least preferable mode of acculturation (Berry & Kim, 1988; Kim, 1986; Hurh & Kim, 1988). Driedger (1989) suggested several examples of minorities in Canada isolating and segregating themselves from the major society and maintaining their identities as distinct groups. He cited examples, such as first generation immigrant groups like Italians, Greeks, and Ukrainians, as well as French population in Quebec, religious minorities like Hutterites on the prairies and Jews in Montreal, and non-urban aboriginals. Ukrainians in North Winnipeg and Jewish and Italian groups in Toronto separate themselves from the major society, living within a given territory and maintaining their ethnic school, churches, associations, language and culture within a tightly knit community.

Instead of earlier approaches which concentrated on the general relationship between migration and mental health, alternative theoretical and empirical approaches reflecting the changes in the migratory environment among post-industrial migrants are greatly needed in order to understand their psychological well-being. Significant pre- and post-migratory variables which affect changes in the migration environment

are numerous, and to consider them all is outside the scope of this study. Rather, attention will be focused on two specific areas: the conditions in the receiving society, and the characteristics of Korean immigrant groups.

### 2.2.1 Conditions in the Receiving Society

Many researchers (Canadian Task Force, 1988; Kim, 1986; Kuo & Tsai, 1986; Murphy, 1973a, 1973b; Pfister-Ammende, 1973) considered social and political conditions in the host society to be crucial structural factors affecting migrants' mental health. The conditions in the host society are extremely important in evaluating the mental health of new Korean immigrants, not only because the number and types of migrants are dependent upon political and administrative control of the host society, but also because successful acculturation relies on the mutual relationship between migrants and inhabitants of the host society. If the host society rejects and maintains distance from migrant groups, successful acculturation would not be possible (Berry & Kim, 1988; Berry, Kim, Minde, and Mok, 1987)<sup>1</sup>. Forced assimilation, and emotional and

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<sup>1</sup>Berry & Kim (1988) proposed a comprehensive model of acculturation, using two criteria: 'whether migrant groups retain their own cultural identity and values,' and 'whether migrants seek positive relations with the dominant society.' Dichotomizing these two criteria as 'yes' or 'no,' Berry and his colleague produced four modes of acculturation: assimilation, integration, separation, and marginalization.

Assimilation is a mode of acculturation in which ethnic groups are absorbed and merged into the dominant group, losing their identities. Integration takes place when minority groups want to maintain their cultural identities, while

institutional discrimination against minorities may damage the successful adjustment of migrants, and result in a high level of stress and mental disorder among them. Currently, North America, as a receiving society, has changed from a strongly anti-immigration social climate with overt hostility in the first three decades of this century to a pluralistic society which exhibits a relatively high tolerance of cultural difference.

First of all, socio-economic conditions in the receiving society may be a most important factor in understanding responses of the host society toward migrant groups. Perhaps, the fact that the number of migrants is directly dependent on the condition of the Canadian economy reveals the importance of these socio-economic factors. During a period of recession, the number of new immigrants allowed to enter Canada has been significantly reduced, and more discrimination against minorities has been reported. However, an influx of

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participating in the host society. Separation takes place when minority groups withdraw from the host society in order to maintain their cultural identity or when the host society distinguishes itself from minority groups, keeping distance from them. Finally, marginalization is a mode of acculturation in which groups are completely alienated from both the host society and their heritage identities.

Berry, Kim, Minde, and Mok (1987) investigated the relationship between the modes of acculturation and mental health. Of these modes of acculturation, integration (i.e., combining selectively both original and host society culture), was related to lowest rates of mental disorder among migrants, while marginalization (i.e., keeping distance from the host society and losing one's own cultural identity and values), was associated with negative impacts on migrants' mental health.

new migrants is generally believed to be a necessity for the socio-economic development of Canada (Howith, 1988). It is well known that new immigrants contribute to manpower needs for Canadian economic development. According to a report from Health and Welfare Canada, Canada must increase the number of immigrants to prevent serious socio-demographic problems associated with a decreasing population (Korea Times, 1991). With the social, economic, and demographic demand for new immigrants, no policies designed to exclude migrant groups from full participation in the host society exist in Canada.

Moreover, it might be argued that Canadian immigration policy is influenced not only by economic and demographic interests, but also by Canada's humanitarian tradition. Humanitarian traditions in Canada are often expressed by the policy of multiculturalism. Immigration policy in Canada based on multiculturalism aims to welcome immigrants arriving into the new society, to encourage their settlement, to maintain immigrants' heritage cultures and harmonize their culture with that of the host country, and eventually to encourage their active participation in Canada society. Although some investigations have reported that visible minorities are overtly discriminated against in employment, housing, and other areas in Canada, and sometimes, the expression of racism is more subtle<sup>2</sup>, Canada has been

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<sup>2</sup>The All-Party Parliamentary Special Committee on Participation of Visible Minorities in Canadian Society reported that "15 percent of Canadians exhibit blatantly

recognized as having a relatively high tolerance level for minorities. Pluralistic social conditions based on multiculturalism in Canada may help new immigrants to have a feeling of security, to develop their full potential, and enjoy good mental health. Murphy (1973a) claimed that pluralistic cultural values in Canada resulted in lower levels of mental disorder among immigrants, compared to the United States and Australia, which emphasize a monistic melting-pot type of assimilation.

### 2.2.2 The Characteristics of Migrants

While migrants' characteristics are an important factor in understanding the relationship between migration and mental health (Weinberg, 1973; Hull, 1979; Berry & Kim, 1988), little attention has been given to the immigrants's personality factors in previous studies (Kuo & Tsai, 1986). Among numerous variables associated with the characteristics of migrants and their mental health, this paper primarily focuses on immigrants' sociodemographic background and motivation for migration. There is good evidence that Korean immigrants in the post-industrial era are not a population who have failed to adjust in their original society, but rather a group who are highly motivated to succeed and secure improved living conditions.

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racist attitudes and an additional 20 to 25 percent have racist tendencies" (Canadian Task Force, 1988)

#### 2.2.2.1 Sociodemographic Background

In forming a picture of a typical Korean immigrant, first of all, the strict immigration regulations in Canada should be considered (Pryor, 1981; Stroller, 1981; Burnam, Hough, Karno, Escobar, and Telles, 1987). Immigration regulations in the host society play an extremely important role in determining the number of migrants, their qualifications, motivation, patterns of flow, as well as the consequences of the migration process. The degree of ease or difficulty of migration to a host society might be the most important factor influencing the characteristics of immigrants. The more difficult it is to migrate, the more stable migrants tend to be. The strict point system, which is a part of Canadian migration regulations, is built upon the belief that migrants have to possess the potential for successful acculturation.

Unlike earlier European migrants to North America who were able to move with relative ease, migration from Korea currently involves a difficult and complicated process. According to Resenthal, Goldberg, and Jacobsen (1974, cited in Pope, Pioggia, and Urgelun-Todd, 1983:158-159) "emigration is a complicated matter, requiring contacting embassies, dealing with staff there, handling funds, arranging passage, and obtaining a place to live and employment at one's destination." Regulations governing immigration to Canada and the United States from Korea are actually stricter than Pope's description, and those selected must satisfy stringent demands

that require long term planning and a considerable financial commitment. Thus, it is argued in this study that while migration is a selective process, as migration theory asserts, this process favours migrants with positive rather than negative attributes.

As a consequence, migration to North America from Korea has occurred among Koreans who have a relatively high socioeconomic status and who have planned for immigration for a long time<sup>3</sup>. Contrary to a negative view of the selection of migrants, Korean immigrants, as a post migration group, rate very positively in the areas of education, occupation, religion, and urbanism. Criminals and the mentally ill would not be considered serious candidates for immigration, and the option to migrate is most often the choice of the urban upper middle classes (Kim, 1986; Hurh & Kim, 1988).

In the absence of data describing Korean Canadians, this study relies mainly on a migrant group included in a Chicago study by Hurh and Kim (1988), which is similar in many respects to the demographic characteristics of Korean Canadian immigrants. In Hurh and Kim's research, 80 percent of the respondents indicated that they had lived in Seoul, the

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<sup>3</sup>Recently immigration to Canada has tended to become more selective. The fact that 40 % of total Korean migration to Canada in 1989 involved cases of investment immigration reflects this tendency (Immigration Canada, 1989). Investment immigration requires immigrants to invest a quarter million dollars and to have at least three years of employment related experience. It is generally known that investment immigration takes one and a half years (The Korean Times, 1991).

capital city of Korea, and only 5 percent came from rural areas. Among urban dwellers, migrants were generally well educated people. About half of the Korean immigrants to Canada completed a college education in Korea (Immigration Canada, 1989). Hurh & Kim (1988) also note a link with religious affiliation. While about 25 percent of Koreans described themselves as Christians, more than half of the Korean immigrants in their research (52.6%) professed Christianity. Among the 68.9 percent of male respondents and 44.4 percent of female respondents who reported having occupational experience in Korea, a large portion of male respondents (85%) were employed in white-collar occupations. Only 13.9 percent of male respondents were farmers and service/manual workers in Korea. The majority of female respondents (57.8%) were nurses and other professional or technical workers, while 26.6 percent and 9.4 percent of female respondents were respectively office workers and business owners. Very few of the female respondents were farmers or service/manual workers (6.2 %).

High socio-demographic status among Korean immigrants may better equip them to adjust to their new society. High levels of education, capital, and employment experience may provide them better insight and control over their situation, enabling them to function more effectively in the process of their resettlement (Berry & Kim, 1988). High levels of education and similarity of religion also engender cosmopolitan values

among Korean immigrants which ease their adjustment process in Canada.

#### 2.2.2.2 Motivation

The motivation of Koreans migrating to North America should also be understood in the context of positive selection. It is important to note that Korean immigrants may have different psychological characteristics than those who remain in their native country, avoiding the risks of migration. While migration itself may not be appropriate to account for the characteristics of non-immigrants, it is pertinent to note that migrant groups might have different characteristics from non-migrant groups. It seems highly plausible that Korean immigrants to Canada are not individuals who leave their destiny in the hands of fate, but rather seek to control it by themselves. Migrants are individuals who relish the challenges and opportunities offered by the new society, rather than being satisfied with the status quo. This study assumes that Korean immigrants in the post-industrial epoch are active beings rather than negatively selected passive people who succumb to the stress of migration.

Those Korean immigrants who are willing to take risks for a better life and goal achievement may be those who believe in their own problem solving ability. The importance of this type of psychological resource for mental health has been demonstrated by several researchers (Ferguson, 1984; Kuo &

Tsai, 1986; Kobasa, 1979; Kobasa, Maddi, and Kahn, 1982; Noh, Chandarana, Field, and Posthuma, 1990; Pearlin and Schooler, 1978; Turner and Noh, 1988; Turner and Roszell, 1992). According to these authors, those who have favourable personal resources are able to tolerate immediate difficulties in the pursuit of a bright socio-economic future. Since they have a sense of invulnerability and strong personal coping resources, these individuals will not be discouraged by failure, in contrast with fatalists. Rather, failure provides an opportunity to try harder to avoid the similar experiences in the future. In the context of immigration, those who have personal resources may not experience a significant sense of vulnerability due to strange values and norms in the new environment, but may interpret the risks of migration as worthwhile for potential future benefits. Although discouraged by disconnection of the social ties with their homeland, these resourceful individuals can build new social ties actively in a strange land and successfully adapt to a new life style.

According to the Chicago study by Hurh and Kim (1988), the major factor which lured Koreans immigrants to North America was a high standard of living (31.2%). The second most frequently given reason was that respondents wanted to be reunited and live with family members who already resided in the United States (25.9%). The third reason was education for themselves and their children (20%). Therefore, the

desire for a better life or opportunities for further education were the most important motives for migration to the United States (Hurh & Kim, 1988; Kim, 1986). Kuo and Tsai (1986) found that motives for migration correlated with the characteristics of migrants. In their investigation of four Asian peoples (Chinese, Japanese, Korean, and Filipino), they found that those who migrated for the purpose of further education, better jobs or work opportunities, or achieving a higher standard of living had more 'hardy personalities' than those who migrated for the purpose of joining their families or for marriage. Therefore, it seems that the majority of Korean migrants might be positively selected people who are willing to take risks in order to improved their lives through migration. Migration itself, in short, suggests a desire for better living conditions and a willingness to pursuit this goal aggressively.

Kim (1986) also arrived at a similar conclusion. "In general, Korean in Toronto are well-educated, hard-working, and energetic people actively involved in their community and in the larger Canadian society" (Kim, 1986: 204). He attributed the hardy personality of Korean immigrants to modern Korean history. Many Korean immigrants have experienced in their life time the forced colonial rule of Japanese imperialism, rampages of the Korean War, and political and economic upheavals. Through dramatic and difficult historical experiences, they have accommodated

themselves to patient, flexible, and resilient life attitudes.

#### 2.2.2.3 Other Characteristics

In addition to sociodemographic characteristics and motivation for migration, other characteristics may significantly affect Korean immigrants' mental health. A number of migration and mental health studies have demonstrated that migrants who become familiar with their new culture and language; who achieve a better social status in the new society and a higher educational standing; and who were well prepared for migration and moved voluntarily, will be less likely to have feelings of loss and will be more likely to retain good mental status (Ferguson, 1984; Hurh & Kim, 1988; Lin, Masuda, and Tazuma, 1982; Murphy, 1973b).

Some researchers (Hurh & Kim, 1988; Kuo & Tsai, 1986) have suggested that Korean immigrants, who have a relatively short history of migration, experience more adjustment problems than other Asian migrants with regard to the loss of social status, and cultural and language differences in the host society. Although such negative experiences may adversely affect migrants' mental health, other positive characteristics for successful adaptation must not be dismissed.

First of all, the advantages of voluntary migration should be considered. Korean immigrants, as a voluntary migrant group, will experience better mental health than refugees forced to migrate under life threatening conditions

with no choice about their departure (Makowsky, Cook, Berger, and Powell, 1988). It is recognised that forced migration leads to greater difficulty in adjusting to the new society. Forced migrants will tend to develop negative attitudes towards the new society and consequently isolate themselves (Pfister-Ammende, 1973).

The difference in preparedness for change between migrants and refugees should also be considered. Unlike refugees who are surrounded by uncertainty regarding their destination, Korean immigrants as voluntary immigrants may anticipate and prepare for life in the new society (Weinberg, 1973). A voluntary migrant is able to weigh the costs and benefits of migration for him and his family prior to migration. In order to prepare for their new life, many migrants will try to gather realistic information about the host society through various methods and all possible social ties. Some gain pertinent information from their friends or relatives in Canada or may visit Canada to assess the situation before migration. In preparation, many migrants learn the new language and customs of the host society, and some migrants look for a job and a residence through possible social ties in the host society. These preparation behaviors give them an opportunity to reduce the initial negative impact of migration. Hurh and Kim's (1988) findings are consistent with this argument. According to them, the majority of Korean respondents in their Chicago study held the same occupations

anticipated in the new country prior to migration. A large number of Korean migrants responded that they also obtained realistic information and help needed for their preparation for immigration and subsequent settlement prior to migration.

It has been argued that the relationship between migration and mental health varies at different times and with different migrant groups. The various pre- and post-migration variables discussed here raise questions about the way in which the migration process is associated with increased risk of mental disorder. The mental health status of Korean immigrants in the post-industrial epoch will differ greatly from that of early migrants who migrated in the late nineteenth century and early twentieth century. It might be concluded that the migration environment for Korean immigrants has changed for the better, rendering pessimistic approaches to migrants' characteristics and the migration process no longer tenable. The migration process for Korean immigrants may not only represent stressful circumstance but also opportunities for a better life. In short, considering the changes in the general conditions of migration, the conditions of the host society, and the characteristics of migrants, it may be anticipated that Korean immigrants will experience less uprooting and fewer adjustment difficulties than did earlier migrants; and that migration is no longer a negative selection process, but a positive selection process for well-motivated and able Koreans.

While the present investigation does not intend to offer an exhaustive list of the changes in the migration environment for Korean immigrants, this research represents an effort to connect significant changes in the migration environment to the mental health status of Korean immigrants. Since the relationship between the migration process and mental health is so extensive, this study turns from a macro perspective on changes in the migration environment and instead concentrates on a micro analytical perspective on the socio-psychological factors affecting migrants' mental health. This study focuses on selected socio-psychological variables which may play a significant role in the mental health status of Korean immigrants who are experiencing the impact of migration.

## CHAPTER 3

### RESEARCH MODEL: STRESS AND COPING RESOURCES

While the loss, stress, and uprooting of the migration process have been the primary issues addressed in research on migrants' mental health problems, little attention has been given to possible gains and successful rerooting, and the socio-psychological coping factors affecting successful migration. Even though the migration process inevitably entails stress at the socio-psychological level, and it is clear that stress adversely influences migrants' mental health, migration stress constitutes only one element affecting migrants' mental health. Models that suggest that the stress of migration will inevitably correlate highly with mental disorder are based on notions too simplistic to be accepted. Migration stress does not necessarily threaten all migrants' mental health.

Recently, a large number of researchers have focused attention on the coping resources which may modify the effects of stress. This study supports the argument that the migrants' coping ability, which helps to overcome the difficulties of migration, is a more powerful predictor of mental health than the difficulty of migration itself (Canadian Task Force, 1988). Thus this study examines not

only the stress of migration, but also the positive aspects of socio-psychological coping factors which may moderate the effects of migration stress.

The influence of coping responses on mental health are well explained by the stress process model according to a number of researchers (Pearlin, Lieberman, Menaghan, and Mullan, 1981; Noh, Chandarana, Field, and Posthuma, 1990; Noh, Avison, and Church, 1989; Noh and Turner, 1987; Turner, 1981; Turner and Noh, 1988; Turner, Grindstaff, and Phillips, 1990; Turner and Roszell, 1992). The stress process model describes the mechanisms which link stressful events and mental health by focusing on three major components of the stress process: the sources of stress, mediators, and mental health outcomes (Pearlin and Schooler, 1978; Pearlin et. al., 1981). This model concentrates on how coping resources, as mediating factors or intervening variables, help people to cope with stress and to gain mental well-being. While undesirable life events experienced by individuals are related, to some extent, to mental disorder, this view considers coping resources as inversely affecting mental disorder. Therefore, mental disorder does not only stem directly from stressors, but also from the lack of coping resources. According to stress process research conducted by Pearlin and Schooler (1978), stress erodes coping resources so that persons become vulnerable to the impact of stressful events. Individual coping resources result in different degrees of ability to

handle difficult conditions and stressful events. The study of coping behaviour explains why there are such great differences in the way people react to stressful problems (Pearlin & Schooler, 1978; Thoits, 1982a). While some individuals who are exposed to a serious stressful circumstance do not become distressed, others who experience little stress exhibit significant psychological distress (Hinkle, 1974 cited in Thoits, 1982a). In fact, the relationship between stress and psychological distress does not show a strong positive correlation when coping resources are controlled. Rather there is a moderate positive correlation between stress and mental health, ranging in value from 0.17 to 0.35 (Thoits, 1982a; Turner, 1992). Therefore, recent researchers have attempted to consider the coping resources that may modify the effects of stress, as well as the sources of stress (Turner and Roszell, 1992).

Whereas coping itself is a universal resource for human evolution and survival (Marsella & Dash-Scheuer, 1988), the concept of 'coping' may be particularly relevant in understanding Korean immigrants' mental health status. This assertion is based on the fundamental assumption in the present study, that Korean immigrants are active, healthy beings. This is contrary to the image of migrants in earlier migration research as those who were ill-equipped to achieve success and status in their native country. In contrast, current evidence suggests that Korean migrants are highly

motivated, able individuals who endeavour to reduce the negative impact of migration difficulties through positive feelings of self-esteem and mastery, and by actively constructing a social network in their new environment. Although this underlying assumption does not preclude the possibility that some Korean immigrants may be predisposed to mental disorder, the conceptualization of healthy, resourceful, and adventurous migrants will guide this investigation of mental health among Korean immigrants in the postindustrial epoch. It is apparent that with changes in migration environment, Korean immigrants as postindustrial migrants might have different migration stress, coping resources, and mental health status from that of early migrants at the turn of this century. It is anticipated that changes occurring in the migration environment of Korean Canadians will lessen the negative impact of stressors, increase social and psychological coping resources, and eventually positively affect these migrants' mental well-being.

Although the stress process model employed in the study of various populations has turned out to be useful in exploring differences among individuals in the effects of stressors, it is surprising that so few researchers have applied this model to the study of mental health among immigrant groups. Only one study, that by Kuo and Tsai (1986), employed this model in the study of mental health

status among Asian immigrants. Thus very little is known about how immigrants cope with the pressures of living in a new society. In the present study, the stress process model will be used to explore mental health status among Korean immigrants. This study proposes that the stress-coping model may provide an essential framework for conceptualizing and exploring mental health among Korean immigrants. Thus, this study will consider the socio-psychological coping resources that affect the stress which Korean immigrants experience in adjusting to life in Canada.

### 3.1 Sources of Stress

The negative correlation between stress and psychological well-being is not new. Many researchers (Dohrenwend and Dohrenwend, 1978; Snyder, 1987) have concluded that individuals who experience certain life difficulties have a higher level of psychological distress.

Pearlin et al. (1981) found that stress generally arises out of two broad circumstances: the occurrence of discrete events and the presence of relatively enduring problems. This study examines two sources of stressors that the Korean Canadian may experience: stressful problems arising from the migration process and difficulties unrelated to migration.

One source of stress stems from the problems that can occur during adjustment process to the new culture and environment. It is not surprising that migrants and non-

migrants experience different life strain. Living in Canada might prove to be stressful for Korean immigrants who have a short history of migration. Korean immigrants originated from a different culture than that of Canada and will feel the cultural shock associated with this change. In turn, this feeling of cultural difference has the potential to engender a sense of marginality and isolation. Berry and Kim (1988) called these difficulties experienced during the process of acculturation, 'acculturative stress.' Acculturative stress includes poor communication arising from a lack of language skills, family problems created by the loosening of family bonds, feelings of being discriminated against by the host population, feelings of marginalization and isolation (a stranger in a strange land), and homesickness. Acculturative stress might be, to some extent, structured and enduring problems for Korean immigrants, rather than temporary and randomly distributed problems. Thus acculturative stress in this study describes a chronic strain. Korean immigrants will suffer from these problems until they become acclimated to their environment. It is also expected that these problems will gradually be alleviated as the length of residence and degree of acculturation increase.

The alternative source of stress involves stressful life events, which are not directly related to the migration process, such as divorce, legal suits, job changes, and accidents. This study focuses on the extent to which Korean

immigrants experience these types of events. Like problems of adjustment, stressful life events may have negative impacts on mental health.

Although it is not easy to separate them and in the real world they are interrelated, distinguishing between these different sources of stress should enhance our analytical ability. Comparing the impact of different types of stressors on mental health will provide some important theoretical and empirical insights into the nature of the stress experienced by Korean immigrants. The respective importance of each stressor will be analyzed by identifying the relative predictive powers of each stressor on Korean immigrants' mental well-being. Moreover, some researchers (Pearlin, et. al., 1978; Marsella et. al., 1988) found that coping strategies were closely associated with specific types of stressors. Analysing these two different sources of stressors and various amounts and types of coping resources should contribute to a better understanding of the nature of these psychosocial factors and their relationship to migrants' mental well-being.

This study hypothesizes that **both adjustment problems and stressful life events are positively related to mental distress among Korean immigrants.** Whereas some investigators (Noh, et.al., 1989) assumed that the adjustment problems associated with the migration process are major sources of life strain for migrants, this study hypothesizes that

adjustment problems will have a weaker association with Korean immigrants' mental distress, than stressful life events, due to changes in the migration environment.

### 3.2. Coping Resources

Although stressors are a good predictor of a wide range of disorders, many researchers (Andrews, Tennant, Hewson, and Vaillant, 1978; Dohrenwend & Dohrenwend, 1978; Liu, 1986; Billings & Moos, 1981; Gallagher, 1980) found that stressors may not only directly affect migrants' mental health, but also do so indirectly by reducing migrants' socio-psychological resources. They have speculated that the way in which people handle stressors may be a more crucial factor for mental health than the stressors themselves. However, the coping resources of Korean immigrants, as post-industrial migrants, and their effects on mental well-being have not been clearly demonstrated.

"Coping is the promotion of human growth and development through the active utilization of biological, psychological, and social resources which assist in controlling, mastering, and preventing the distress imposed by external and/or internal demands experienced by the organism" (Marsella & Dash-scheuer, 1985, p.7 cited in Marsella & Dash-Scheuer, 1988). Coping resources in this study are categorized as social and personal (Ensel & Lin, 1991).

### 3.2.1 Social Resources

In this investigation, social coping resources refer to the social supports that buffer the negative effects of stress on mental health (Ensel & Lin, 1991). Social support is measured by quality and frequency of assistance obtained from the social network of individuals, such as significant others (spouse, relatives, friends, etc.) and institutions (church, social organizations, etc.). Social support may take the form of material, informational, appraisal, and emotional assistance (House, 1981, cited in Thoits, 1982a).

Previous migration studies have viewed migrants as a group destabilized by the uprooting of their social support system during the migration process. This study argues that the emphasis placed on the uprooting of social networks is not appropriate in analysing the mental health status of post-industrial immigrants, like Korean immigrants. Migration for post-industrial migrants does not always involve the total uprooting of their social support system. Although many migrants may not be able to find exactly the same social support network they enjoyed in their original society, migrants may find alternative social support networks among the members of their minority group and the host society. The rerooting process and the establishment of new social support systems should be considered in studying migrants' mental health.

As mentioned, improvements in transportation and

communication enable migrants to maintain, to some degree, their old social networks (Kuo & Tsai, 1986). Even after migration, migrants can retain old social networks through indirect interaction such as letters and telephone calls, and sometimes through direct personal visits. Within the changed environment of the host society, many minority groups today are able to construct and manage their own socio-cultural institutions such as churches, schools, newspapers, broadcasting, and their own cultural centres. Moreover, large numbers of Korean immigrants migrate to a setting where established social networks already exist. Examples include chain migrants who came to Canada to reunite with their families and relatives, and former students who had lived in Canada for a long period before migration. According to Hurh and Kim's findings (1988), 77.3 % of respondents had immediate family members or other relatives in the United States when they migrated. Further, a large number of immigrants are aware of the necessity for a social network in the new society and try to construct new social networks using all possible methods prior to migration. If immigrants do not have close relatives in the host society prior to migration, they tend to attempt to construct new social ties by contacting those with whom they may have no direct relationship, such as a friend's friend or relative's acquaintance (Kuo & Tsai, 1986). Although rerooting is certainly a difficult process for immigrants, the way in which many immigrants reconstruct

adequate social support systems in the host society should not be underestimated.

Many studies have examined the buffering (interaction) or direct effects of social support on psychological distress. A number of studies of social support have shown that individuals with strong social support are better able to cope with major life changes. On the contrary, those with little or no social support may be more vulnerable to life changes. Although social supports do seem to provide buffering or direct effects, some critics have raised questions about the nature of this relationship. Thoits (1982a) criticized the lack of theoretical and methodological elaboration in studies of social support. Although studies often try to discover whether or not social support has a negative relationship with mental distress, there is little research into the effectiveness of different amounts, types and sources of social support. Efforts to operationalize coping strategies at the multidimensional level are required to know how social support, life events, and psychological distress are related to each other (Thoits, 1982a). This study will examine how different types of social support mediate stress and depression.

Immigrants are exposed to two different socio-cultural groups, that is their own ethnic group and that of the host society. Thus, in an attempt to identify the various dimensions of social support that may relieve mental

depression of Korean immigrants, this investigation compares two sources of social support categorized as being assistance received from Korean-Canadians or that received from non-Korean Canadians.

While some studies (Canadian Task Force, 1988) suggested that those who are able to forge links with the host society, as well as their own ethnic community, will have a better chance of overcoming the stress of migration than those without such links, the impact of social support on migrants' mental health is not consistent. According to Kuo and Tsai (1986), while social support from one's ethnic group improves the minority group member's mental stability, it is possible that strong ethnic ties may become unnecessary barriers for successful acculturation. Strong ethnic ties may hamper information exchange and support from the host society and ultimately result in the marginalization of the minority group.

While an understanding of the acculturation process might be essential in appraising the influence of social networks on immigrants's mental health, the acculturation mode which Korean immigrants employ has not been clearly identified either empirically or theoretically. Nevertheless, some studies may provide clues regarding acculturation among Korean immigrants. While social interaction with members of the host society and socioeconomic status are positively associated with length of residence, according to Hurh and Kim (1988),

ethnic attachment is always significant to Korean immigrants. Korean immigrants, to some extent, add American culture and social networks without replacing or modifying Korean culture and social networks. Korean immigrants might be likely to choose the type of acculturation that will help to preserve their identity as a distinct cultural group. Korean immigrants maintain close social ties with members of their own ethnic group, even with those in Korea. Hurh and Kim (1988) reported that among Korean immigrants, around 75 percent remained in touch with their kin; 90 percent of the respondents stated that they have close Korean friends; and nearly 70 percent participate in the Korean ethnic church. Hurh and Kim (1988) suggested the possibilities that immigrants' ethnic attachment provides a shell to protect them from frustration and dissatisfaction with the new society. This study expects that this type of acculturation might also be possible in Canada's multicultural atmosphere. This study hypothesizes that **social support received from Koreans is more important for the mental health of immigrants than that received from non-Koreans.** Kurzeja, Koh, and Liu's (1986) findings support this hypothesis. They found that while Korean elderly have very favourable attitudes toward both Koreans and Americans, their attitude toward Koreans is statistically more significant than that toward Americans.

### 3.2.2 Personal Resources

Social support alone is not sufficient to explain the way in which coping resources may modify the negative impact of stress. In addition to the role of social support, the role of personal resources in ameliorating the psychological impact of life stressors are considered in this study. Psychological resources refer to the personal characteristics which help people manage, comprehend, and control their environment. Psychological resources have been expressed in various terms by different researchers; locus of control (Rotter, 1966), hardiness (Kobasa, 1982), fatalism and inflexibility (Wheaton, 1883), and mastery (Pearlin and Schooler, 1978). In spite of different emphasis, these concepts are essentially similar. According to Noh and his colleague (1990: 274), these concepts commonly describe "the belief in one's personal ability to control one's life environment." Turner and Roszell (1992: 6) suggested that these concepts may "represent alternative labels for the same personal attitude or resources."

In this study, personal mastery and self-esteem are regarded as the most critical types of personal resources (Pearlin and Schooler, 1978; Turner and Roszell, 1992). According to Pearlin and his colleagues (1978, 1981), the key point of mastery is the belief that individuals see life change as being under one's own control, in contrast to a fatalistic perspective. Mastery is "an intrapsychic resource that influences, and is influenced by, one's ability to

competently manage life's challenges" (Turner, Noh, and Levin, 1992). Thus, mastery is similar to that of locus control and hardiness. Self-esteem refers to people's positive attitude toward themselves (Pearlin, 1978). These psychological resources by themselves are fundamental life goals (Pearlin, et. al., 1981). Like social support, a sense of mastery and self-esteem are associated with lower rates of mental disorder. These personal coping resources may determine one's ability to control life's difficulties competently.

In contrast to the passive and fatalistic beings described in previous studies, this study characterizes Korean-Canadians as hardy and resourceful migrants. As Maddi and Kobasa (1991) suggested, these personal variables are developed by one's past history. As mentioned earlier, this study asserts that many Korean immigrants, as voluntary post-industrial migrants, are adventurous individuals, high achievers with a desire to enjoy better living conditions and who possess a strong sense of personal mastery, self-control and self-esteem. Immigrants possessing feelings of mastery and self-esteem are those who want to control their fate by planning, evaluating, and preparing for the future. Migrants with good coping skills tend to change a given situation meaningfully, in accordance with their values. For these individuals, migration is a choice which assists in the achievement of their life plans. Such migrants may retain a sense of control, even when they face unexpected and difficult

problems. A positive attitude toward life lessens the perception of migration difficulties as threatening, and instead enables one to view them as challenges to be accepted. In short, migrants are not victims of the migration process, but are active determinants of the consequences of this process. Thus, in contrast to the pessimistic view taken by previous studies, personal resources will be considered as one of the most important coping resources for overcoming the difficulties of the migration process and for maintaining mental well-being among Korean immigrants.

Kuo et al. (1979) reported that among Chinese immigrants, those with a greater sense of personal resources are less susceptible to mental depression, than those with poor socio-psychological resources. They concluded that locus of control, as a personality characteristic, is an important determinant of Chinese-Americans' mental well-being. This study hypothesizes that **Korean immigrants who have strong positive feelings of self-esteem and personal mastery have lower levels of mental depression.**

This study examines Korean immigrants' mental distress by focusing on social support and personal resources as coping factors. To summarize, the following hypotheses were formulated to guide this research: 1) Those subjects reporting a history of many adjustment problems and stressful life events have higher levels of mental depression than people experiencing fewer stress-inducing problems; 2) stressful life

events are more highly correlated, than migration adjustment problems, with Korean immigrants' mental distress; 3) social support received from Koreans is more highly correlated with the mental distress of immigrants, than that received from non-Koreans; 4) Korean immigrants who have strong positive feelings of self-esteem and mastery have lower levels of mental distress.

## CHAPTER 4

### RESEARCH DESIGN

#### 4.1 Sample And Data Collection<sup>4</sup>

This study deals with Korean immigrants who were residents of Toronto and vicinity in 1990. This area has the largest Korean settlement in Canada, with a population of approximately 20,000 (Shin, 1991)<sup>5</sup>. Respondents were drawn from the directory published by the Korean Society of Toronto in 1989, which lists over 4,100 Korean households. Although the Korean Directory of Toronto might exclude recent immigrants, new movers, those without phones, and those who are not connected to the Korean community at all, the directory was considered to be a reasonably representative sampling frame for the adult Korean population in Toronto and vicinity.

A total of 1,039 households were systematically drawn

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<sup>4</sup>This study uses data from research on the Korean community in Toronto conducted by Samuel Noh in 1990 and 1991. The analysis in this study is based on selected items among the first interview data collected in 1990.

<sup>5</sup>It might be possible that Shin's data underestimated the actual number of Korean immigrants in Canada for various reasons, such as refugees, students and short-term visitors who subsequently acquire resident status, and those who come from third countries (Lehmann and Lee, 1986). For instance, Kim (1986) estimated that there were around 30,000 Korean immigrants in Toronto in 1986.

from a non-repeated, alphabetically-ordered directory, using a simple random sampling method. Data were collected between March and mid July, 1990 by trained bilingual interviewers. Prior to data collection, a general explanation of this research project was announced through a major Korean newspaper in Toronto, the *Hankuk Ilbo*. A letter of introduction, explaining the purpose of the study, method of interview, and confidentiality of responses, was sent to each household before interviewers made contact with the respondents. Each household was then contacted on the telephone by interviewers to arrange an interview with a respondent aged 18 or over who was selected from each household. Those who migrated at an early age were excluded, since they would have experienced a different adjustment process from those who migrated when they were adults (Hurh & Kim, 1988).

The interview was about one and a half hours in length and respondents were asked to indicate their basic demographic characteristics, acculturation problems, stressful life events, coping behaviours, personal and social coping resources, and mental health status. In most cases, respondents were personally interviewed in the Korean language in their home, business place, or a coffee shop. However, a few respondents were interviewed by telephone, when the respondents declined a face-to face-interview. Among the sample of 1,039, 150 households could not be contacted due to

TABLE 1. DEMOGRAPHIC CHARACTERISTICS OF THE SAMPLE

	Total (858)	Male (455)	Female (403)
Sex: Male	455 (53%)		
Female	403 (47%)		
Age: 18-35	25.5%	26.5%	24.4%
36-45	32.0%	27.1%	37.6%
46-55	23.3%	26.3%	19.9%
55-84	19.2%	20.1%	18.1%
Years in Canada:			
0-6 years	28.9%	30.0%	27.8%
7-12 years	21.4%	19.8%	23.1%
13-18 years	39.4%	39.6%	39.2%
19 years or over	10.3%	10.6%	9.9%
Marital Status:			
Single	10.3%	11.9%	8.4%
Married	82.5%	86.8%	77.7%
Separated/Divorced	2.4%	.9%	4.2%
Widowed	4.8%	.4%	9.7%
Employment Status:			
Unemployed <sup>6</sup>	22.6%	16.1%	31.1%
Employed	72.7%	80.5%	67.6%
Students	2.3%	3.4%	1.3%
Income:			
\$15,000 or less	16.0%	13.7%	18.6%
\$15,001 to \$30,000	22.4%	25.1%	19.2%
\$30,001 to \$45,000	22.4%	22.8%	21.9%
\$45,001 to \$60,000	20.5%	21.4%	19.5%
\$60,001 or more	18.7%	17.0%	20.8%
Education in Korea			
Grade 9 or less	14.7%	12.4%	17.3%
Grade 10 to 12	32.8%	27.7%	38.5%
Community College	13.2%	11.6%	15.1%
University graduate	39.3%	48.3%	29.1%
Education in Canada			
None	81.0%	77.6%	85.1%
High School	2.9%	3.5%	2.2%
Community College	8.6%	8.4%	8.7%
University	7.5%	10.5%	3.9%

<sup>6</sup>Homemaker was included in unemployment category.

wrong address or a long period of absence. A total of 871 respondents participated in the study, with a resulting response rate of 84 percent. Thirteen of these interviews were discarded because of incomplete data on substantial number of questions, yielding an effective sample size of 858.

Table 1 lists some socio-demographic characteristics of respondents. The table discloses that the sample included 455 males (53%) and 403 females (47%). Respondents ranged in age from 20 to 84 years, with a median age of 43 years. Length of residence varied from several months to 27 years, with an average length of stay of 12 years. Nearly 30% (28.9%) of respondents had been in Canada for 6 years or less, while about 10% (10.3%) of the sample had lived in Canada for 19-27 years. The majority of the respondents (82.5%) were married at the time of interview, while the others were single (10.3%), divorced/separated/widowed (7.2%). While seventy-three percent (72.7%) of the respondents were employed, more males (80.5%) tend to be employed than females (67.6%). Women's employment status presented here is consistent with that (67.9%) of Korean American women in Hurh and Kim's (1988) Los Angeles study. About forty percent (39.2%) of the respondents reported \$40,000 or higher annual family incomes. The sample was highly educated: 13.2% of the respondents had community college education, and 39.3% of the sample had completed undergraduate or graduate university education in Korea. The overall sample is characterized by a middle class

socio-economic status.

#### 4.2 Measurement

For the purposes of this study, the investigation focused on the relationships between demographic factors, adjustment problems, stressful life events, social support, self-esteem, personal mastery, and one aspects of mental health status, i.e., depressive symptomatology.

Eight sociodemographic variables were employed in this study: sex, age, years of residence in Canada, marital and employment status, education in Korea and Canada, and income. Sex was scored as a dichotomous variable: 1 if male, 2 if female. Age and years of residence in Canada were measured in years. Marital status was classified into four categories: 1 if never married, 2 if married or common-law, 3 if separated or divorced, 4 if widowed. Occupation was measured as a dummy variable: 1 unemployed, 2 employed. Education in Korea and Canada was measured as an ordinal-level measure: 1 if grade 9 or less, 2 if grade 12, 3 if community college, 4 if baccalaureate or university graduate. Annual family income was also an ordinal variable (1 if less than \$10,000, 2 if \$10,001-15,000, 3 if 15,001-20,000, 4 if 20,001-25,000, 5 if 25,001-30,000, 6 if 30,001-35,000, 7 if 35,001-40,000, 8 if 40,001-45,000, 9 if 50,001-60,000, 10 if 60,001 or more).

#### 4.2.1 Center for Epidemiologic Studies Depression (CES-D) Scale

The dependent variable (mental distress), operationalized as psychological depression, was measured by the Center for Epidemiologic Studies Depression (CES-D) scale (Radloff, 1977).

The CES-D scale has high reliability and clinical and discriminant validity in "black and white English-speaking American populations of both sexes with a wide range of age and socioeconomic status for the epidemiologic study of the symptoms of depression" (Radloff, 1977: 400). This scale demonstrated high reliability and validity in assessing the depressive symptomatology among various Canadian populations (Barnes, Currie, and Segall, 1988; Noh and Turner, 1987; Noh, Chandarana, Field, and Posthuma, 1990; Turner and Noh, 1988). The CES-D scale has also been used extensively with different ethnic groups to measure depressive symptomatology (Kuo & Tsai, 1984; Roberts and Vernon, 1984). Although Asian immigrants tend to express their mental distress as somatic complaints, Kuo & Tsai (1986) in their Asian-American study of Chinese, Japanese, Korean, and Filipinos confirmed the appropriateness of the CES-D scale for examining the amount of depression in Asian immigrants. They reported an acceptable level of reliability of the CES-D scale ( $\alpha = .63$ ) for this population. In this study, Cronbach's alpha score for the CES-D scale was .89.

This scale consists of 20 items which measure an

individual's current level of depressive symptomatology. Although a large number of studies have extensively reported high reliability and validity for the CES-D scale, Noh and his colleagues (1992a) found that Koreans tend to interpret some of the scale items in a manner different from Euro-Americans and suggest omitting four items of positive affect. Thus, the present study employed 16 CES-D items. Respondents were asked to indicate how often during the previous two weeks they experienced a list of symptoms, such as depressed mood, feelings of guilt and worthlessness, feelings of helplessness and hopelessness, psychomotor retardation, loss of appetite, and sleep disturbance. Response categories ranged from 0 for *rarely or none of the time* to 4 for *most or all the time*. All symptom responses were summed to construct a single index. All scores were then multiplied by 1.25, since this study used only 16 items, instead of 20. High scores indicate a higher level of depressive symptomatology. This scale provides a cut-off score (16 or greater) to screen high risk groups and problem individuals who have a clinically significant level of symptoms of depression.

#### 4.2.2 Sources of Stress

This study examined two main sources of stressors which Korean immigrants might experience in Canada: acculturation problems and stressful life events. The first source of stress is adjustment problems that Korean immigrants

experience in the new social environment. A 28-item scale of adjustment problems composed of six dimensions was used to measure the extent of difficulties associated with the acculturation process: feelings of homesickness, social isolation, discrimination, marginalization, family problems, and language problems. Feelings of homesickness were measured by the following three items: (1) lack of opportunity to visit Korea; (2) living apart from friends, family and relatives; (3) unable to do things you used to enjoy when you were in Korea. Three items were utilized for social isolation: (1) not able to find someone to confide in; (2) not having real friends; (3) being mistreated by fellow Koreans. Five items were employed to measure discrimination: (1) having a job far below your experience or qualification; (2) job experience you had in Korean is not recognized in Canada; (3) your education in Korea is not recognized at work; (4) not being able to find any social ground in Canada; (5) being a target of discrimination. Five items were used for the measurement of marginalization: (1) being treated as an alien by other Canadians; (2) not understanding school or educational system in Canada; (3) having little opportunity to participate in Canadian politics; (4) being constantly reminded about minority status (5) and feeling helpless in political decisions. Six items were used to measure family problems, which may be triggered by the adaptation process: (1) thinking that your relationship with your spouse would be better if you

were living in Korea; (2) worrying about the future of your children; (3) feeling anxious about your children not respecting their parents; (4) worrying about losing family cohesion that you might not have to worry about if you were living in Korea; (5) having frequent arguments or quarrels with your spouse; (6) feeling that the relationship between your spouse and your parents has gotten worse since you came to Canada. Finally, six items were used to measure the extent of difficulties in speaking and understanding English when respondents are talking to children, reading newspapers /magazines, understanding official documents (e.g. tax form), doing shopping (e.g. talking to sales person), understanding TV or radio, and at work.

Response categories for the questions about adjustment problems ranged along a four point Likert-type scale from *never* (1) to *very often* (4). High scores represent more difficulty in adjustment. An attempt was made to combine all of the items into a single scale of adjustment difficulties, using mean scores ( $\alpha=.91$ ).

A life event checklist was used to detect the occurrence of life crises similar to those listed in the life events scales used by Turner and Noh (1988). A set of twenty-two items was used to measure the number of discrete life events. Respondents were asked to indicate whether they or their family had experienced the following events during the previous one-year period: changed residence, death of a

relative, close friend, or family member, problem with children, spouse, parents, or neighbourhood, end of engagement, being divorced or separated, troubles with others in business, changed job, experiencing a threat of lay off or business failure, employment losses by being fired, laid off, quitting, retiring, or taking a less desirable job, financial difficulty, depending on welfare, legal problem, pregnancy, abortion or miscarriage, and health events including serious physical illness and serious injury or accident. Responses were dichotomized: 1 Yes to 2 No. A score for stressful life events was obtained through aggregating the number of events reported by respondents, with high scores indicating more stressful life events.

#### 4.2.3 Social Support

Of various types of social support, emotional support was assessed by measuring the extent of perceived social support received from significant others. The extent of emotional social support that respondents received from three potential sources (family, relatives, and friends) was measured by an eight item scale with regard to care, encouragement of personal values, feelings of confidence and trust. Questions consisted of (1) Listen to you when you need to talk about any problems you might have?; (2) Get on your nerves?; (3) Make too many demands on you?; (4) Express interest in your well-being?; (5) Create tensions or arguments while you are around

them?; (6) Comfort you when you need it?; (7) Make you feel that they care about you?; (8) Make you feel like they are taking advantage of you? As mentioned earlier, for analytical purpose, social support was classified as support received from Koreans and non-Koreans. Korean social support included support from family members, relatives, and friends, while non-Korean support was restricted to support from friends. For each item, respondents were asked to answer on a five-point scale ranging from "1 = *never or almost never*" to "4 = *often*." A social support score was obtained by summing the scores for these eight items. The internal reliability of this eight item scale, assessed by Cronbach alpha, was .78.

#### 4.2.4 Personal Coping Resources

Two measures were utilized for assessing personal coping resources: Pearlin and Schooler's (1978) mastery scale, and Rosenberg's self-esteem scale (cited in Noh, Avison, and Church, 1989). These scale have been used in a number of studies and have shown an acceptable level of reliability (Noh and Turner, 1987; Turner and Noh, 1988; Noh, Avison, and Church, 1989).

The mastery scale consists of seven questions regarding personal belief in control of life events. Respondents were asked to indicate whether they feel relatively certain that life is working out in the way he/she wants. The extent to which they agree was assessed by seven items: (1) I have

little control over the things that happen to me; (2) There is really no way I can solve some of the problems I have; (3) There is little I can do to change many of the important things in my life; (4) I often feel helpless in dealing with problems of life; (5) Sometimes I feel that I am being pushed around in life; (6) What happens to me in the future mostly depends on me; (7) I can do just about anything I really set my mind to.

The self-esteem scale addressed the respondent's perceived sense of self worth. The self-esteem measure consists of the following six items: (1) I feel that I have a number of good qualities; (2) I feel that I'm a person of worth at least equal to others; (3) I am able to do things as well as most other people; (4) I take a positive attitude toward myself; (5) On the whole I am satisfied with myself; (6) All in all, I'm inclined to feel that I'm a failure.

Each response in the mastery and self-esteem scales was coded on a five-point Likert scale, ranging from "1 = *strongly agree*" to 5 = *strongly disagree*." Each scale was respectively summed so that the higher the score, the higher the level of psychological coping resources. Internal consistency reliability scores for the mastery and self-esteem scales, measured by Cronbach's alpha, were respectively .76 and .79.

#### 4.3 Methodological Issues in Measurement: Reliability and Validity of Korean Version of the Scales

There are some methodological difficulties in this study,

partially due to the lack of research carried out on Korean immigrants' mental health. This investigation relies upon measurement scales of psychopathology developed for Euro-Americans and translated into Korean. Applying Western criteria to culturally different groups requires extreme care. Although careful attention to reliability and validity should be required in all ethnic studies, most of the epidemiological studies have been based on faith in clinical training and experience, rather than on adequate evidence of reliability and validity (Dohrenwend & Dohrenwend, 1974). In order to interpret universally the results of this cross-cultural survey and to identify whether these measurement scales are relevant for the study of Korean immigrants, the reliability and validity of the Korean versions of the scales must be examined.

This study utilized the CES-D scale as translated and used in surveys of Korean immigrants by Hurh and Kim (1988). Other scales, however, had never been used in the Korean language and were translated for this study. The scales were carefully translated through a sophisticated procedure. The original English scales were translated into Korean, and the Korean version of the scales were again back-translated into English. Finally the Korean versions of scales were pretested bilingually.

Reliability of these scales was confirmed by measures of internal consistency (Cronbach coefficient alpha), which

indicates "the tendency of an individual to answer all questions in the same positive or negative) direction" (Radloff, 1977:391). The Korean versions of the scales appeared to be highly reliable. All Korean scales show high Cronbach alpha coefficients, ranging from .91 to .76.

TABLE 2. INTERNAL RELIABILITY (CRONBACH'S ALPHA) COEFFICIENT OF MENTAL DISTRESS (CES-D), SOURCES OF STRESSORS AND COPING RESOURCES MEASUREMENTS

Instruments	No.Items	Cronbach's Alpha
CES-D	16	.89
Adjustment Difficulties	28	.91
Social Support	8	.78
Mastery	7	.76
Self-Esteem	6	.79

Reliability coefficients for the Korean version of the scales were compared to those of original English scales, if it was possible. Reliability refers to the replicability of the measurement scale. Radloff (1977) reported the internal reliability of CES-D in four separate field tests, ranging from .84 to .90. Barnes, Currie, and Segall (1988) found that alpha values of CES-D scale applied to a Canadian urban sample was .87. These values are similar to that of the Korean version of the CES-D scale in the current study. Turner and his colleagues (1988, 1992) and Noh and Turner (1987) reported alpha values of .70~.85 for the mastery scale in their Canadian studies. These values are also consistent with the alpha value for the Korean mastery scale. An alpha of .79 for the self-esteem scale in the present study was similar to

those values reported by Noh and his colleague (Noh and Turner, 1988; Turner and Noh, 1988). Thus, it can be concluded that reliability for the Korean version of the scales in this study was highly acceptable and was not negatively affected by the process of translation.

Validity is generally recognized to be a more serious problem than that of reliability (Dohrenwend & Dohrenwend, 1974). This paper establishes concurrent validity and criterion-related validity of the Korean scales, mainly depending upon Noh and his colleagues' work (Noh, Avison, and Church, 1989; Noh, Avison, and Kaspar, 1992). Concurrent validity involves the ability of a scale to separate one group from another group. In order to investigate concurrent validity of the Korean scales, Noh and his colleagues (1989) applied the Korean version of scales to two groups that have different characteristics: a patient group who were identified as experiencing mild psychological disorders by a psychiatrist and a general population sample. They found that the mean score of the 20 item CES-D scale for the patient group was significantly higher than that of the general population sample. Mean difference for the CES-D scale between the patient group and the general population sample was statistically significant ( $P \leq .0005$ ). While the patient group had a mean score of 23.1, the general population sample mean was only 14.7.

However, Noh and his colleagues (1992a) found that among

four symptom clusters on the CES-D scale (negative affect, positive affect, interpersonal problems, and somatic retarded activity), four items measuring positive affect inflated total CES-D scores of Korean immigrants. North American men scored 4.1 times higher on these positive items than Korean men, while North American women scored 3.4 times higher than Korean women. Furthermore, these positive items were actually unable to separate the patient group from the general community Korean population. That is, no substantial differences in mean scores were found between the patient group and community sample on these four positive affect items. Noh and his colleagues (1992a) concluded that compared to Euro-Americans, Koreans were unwilling to express emotional feelings related to positive experiences (i.e., enjoyed life, feeling as good as other people, happy and hopeful about the future). Therefore, they suggested excluding these four positive scale items to avoid an over-estimation of the level of depressive symptoms among Korean immigrants.

In addition to the Korean CES-D scale, Noh and his colleagues (1989) observed the concurrent validity of psychological coping resources. It was expected that the patient sample would get lower mean scores on the psychological coping resources than the general population sample. In fact, the mean scores for mastery and self-esteem were significantly higher for the general population sample than for the patient sample.

In addition to current validity, self-report criterion validity in which the validity of a scale is judged by correlation to other similar measurement was used. The scales were compared with other similar scales. For example, the Korean version of CES-D was compared to the Korean version of the 90 item self-report psychiatric symptom inventory (SCL-90), which consists of nine symptom dimensions (depression, somatization, compulsive/obsessive, interpersonal sensitivity, anxiety, hostility, phobic anxiety, paranoid ideation, and psychoticism). Of the nine symptom dimensions on the SCL-90 scale, highest correlation was observed between CES-D and depressive symptoms of the SCL-90 scale, although the CES-D scale correlated well with other dimensions of the SCL-90 scale. Highly positive correlations with the depressive dimension of the SCL-90 scale indicate that the Korean version of the CES-D scale may be adequate to measure depressive symptomatology.

In conclusion, highly acceptable concurrent validity and self-report criteria validity were found for the depression scale (CES-D). High self-report criteria validity was also reported for the mastery scale, self-esteem scale, adjustment difficulty scale, and social support scale. Furthermore, Korean scales showed high internal consistency coefficients, which is consistent with those of the original English versions. It might be reasonable, therefore, to conclude that the Korean scales are highly acceptable for the analytical

purpose of the present study.

CHAPTER 5  
ANALYSES AND RESULTS

5.1. Descriptive Analyses

Prior to examining the relationship between the stress process variables chosen for testing the hypotheses, some descriptive results regarding these variables will be presented.

5.1.1 Acculturative Stress

The frequency distributions and percentage of acculturative stress measured by the six dimensions of this scale are reported in Table 3. The overall findings reveal that language difficulties and occupational discrimination, compared to other acculturative problems, are the more severe adaptation problems faced by a fairly large number of Korean immigrants in Canada.

For example, Table 3 shows that about 40% of Korean immigrants (42.8%) often or very often encountered language difficulties when they communicated with their children and customers, when they read newspapers/magazines and official documents (e.g. tax forms), when they shopped, or when they watched/listened to TV/radio. On the other hand, a similar proportion of the respondents (45.3%) reported that they

TABLE 3. ACCULTURATIVE STRESS OF KOREAN IMMIGRANTS.

	Very Often		Often		Rarely		Never		Total (N)
	f	(%)	f	(%)	f	(%)	f	(%)	
Language Problems	86	(10.0%)	280	(32.7%)	388	(45.3%)	102	(11.9%)	856
Homesick	41	(4.8%)	206	(24.1%)	315	(36.8%)	294	(34.3%)	856
Occupational Discrimination	72	(8.5%)	498	(58.7%)	271	(31.9%)	8	(0.9%)	849
Marginality	21	(2.5%)	101	(11.9%)	310	(36.5%)	418	(49.2%)	850
Isolation	19	(2.2%)	184	(21.5%)	297	(34.8%)	354	(41.5%)	854
Family Conflicts	51	(6.0%)	90	(10.5%)	296	(34.5%)	420	(49.0%)	857

TABLE 4. MEAN SCORES OF ADJUSTMENT DIFFICULTIES  
BY THE LENGTH OF STAY IN CANADA

Years in Canada	Language problems	Homesick	Isolation	Occupational discrimination	Marginality	Family Conflict
1-6	1.58	1.38	1.19	2.35	0.71	1.10
7-12	1.35	1.12	0.83	2.19	0.61	0.61
13-18	1.22	0.78	0.71	2.19	0.60	0.55
19-27	0.92	0.50	0.53	2.08	0.42	0.45

rarely experienced language difficulties, and an additional 12% of Korean immigrants (11.9%) reported that they did not experience language problems.

The most prevalent acculturative stress that Korean immigrants experienced stemmed from discrimination related to their occupation. Approximately two-thirds of the respondents (67.2%) felt that they are often or very often discriminated against occupationally, while less than 1% of the respondents (0.9%) did not experience any occupational discrimination.

While large numbers of Korean immigrants perceived frequent language difficulties and occupational discrimination, relatively few respondents experienced acculturative stress related to homesickness, isolation, marginality and family conflicts. None of these problems were experienced very often by more than 6% of the respondents. For example, 4.8% stated that they feel homesick very often. On the other hand, most of the respondents (71.2%) reported that they do not or rarely experience the feeling of homesickness. Only 2.2% of respondents experience the feeling of isolation very often, while over three-quarters of the Korean immigrants (76.3%) reported that they never or rarely experience it. Similarly, a small proportion of respondents (2.5%) said that they are faced with the feeling of marginality very often, whereas roughly 85% of the respondents (85.6%) rarely or never endured this problem. Family problems related to living in Canada, such as losing family cohesion,

were also only rarely or never experienced by the majority of Korean immigrants (83.6%). Only a few of the respondents (5.9%) experienced family conflicts very often.

As expected, each of the six dimensions of acculturative difficulties is reported more frequently by new immigrants (Table 4). New immigrants tend to have higher mean scores on the measure of acculturative stress than established immigrants and the level of acculturative stress tends to decrease progressively, as the length of time the resident has been in Canada increases. The largest difference between new immigrants and established immigrants was found in the subscale of homesickness. Those who had only been in Canada for one to six years scored 2.7 times higher on the homesickness subscale, than those who had lived in Canada for 19 to 27 years. On the other hand, less dramatic differences were found between new and established immigrants in the marginality, language problems and occupational discrimination subscales. The lowest level of change over time was found in occupational discrimination. Individuals who had lived in Canada for 19 to 27 years experienced only 12% less occupational discrimination than those who had lived in Canada for 1 to 6 years. In other words, for many Korean immigrants, occupational discrimination is a more ongoing, constant source of stress than other acculturative problems.

In short, the evidence in Table 3 and 4 indicates that occupational discrimination is not only the most frequently

experienced adjustment problem, but also the most chronic one for a large number of Korean immigrants.

### 5.1.2 Stressful Life Events

TABLE 5. FREQUENCY DISTRIBUTION OF STRESSFUL LIFE EVENTS

Score	N	%
0	236	27.5
1	180	21.0
2	170	19.8
3	121	14.1
4	56	6.5
5	37	4.3
6	26	3.0
7	18	2.1
8	6	0.7
9	5	0.6
10	1	0.1
11	2	0.2
Total	858	100.00

Table 5 shows the frequency distributions and percentage of stressful life events that the respondents have experienced during the last year. As noted earlier, the scores on the stressful life events scale ranged from 0 to 22 and each score indicated the number of stressful life events experienced by the respondents. Approximately half of the respondents (48.5%, n = 416) reported that they had experienced only one or no stressful life events during the previous 12 months. In addition, approximately 20% of the respondents (19.8%, n = 170) experienced two stressful life events. Only approximately 1% of the respondents (0.9%, n = 8) stated that

they suffer from nine or more stressful life events. On average, respondents faced two stressful life events during the previous 12 month period (Mean=1.98, S.D=1.978)

### 5.1.3 Korean and Canadian Social Support

Table 6 presents the distribution of Korean and Canadian social support scale scores. Each social support scale consists of eight items concerning four positive social support questions and four negative ones. Each score for the positive and negative items ranged from 1 to 4, and -1 to -4, respectively. In order to examine the balance of social support, all scores obtained for these eight items were directly summed, resulting in a social support scale with a range of -16 (minimal negative social support) to 16 (maximum positive social support).

TABLE 6. FREQUENCY DISTRIBUTION OF SOCIAL SUPPORT

Scores	Korean Social Support		Canadian Social Support	
	N	%	N	%
-6~-10	15	1.7	189	22.0
-1~-5	104	12.0	85	9.9
0	69	8.0	150	17.5
1~5	411	48.0	317	37.1
6~10	201	23.4	106	14.4
11~12	34	4.0	11	1.3
Total	834	100.00	858	100.00

Data in Table 6 demonstrate that the majority of respondents (56%) scored between 0 and 5 in Korean social

support, suggesting that the study sample receives little or moderate positive social support from their ethnic group. Comparably, a similar proportion of the respondents (54.6%) scored from 0 to 5 in Canadian social support. However, it should be noted that more respondents are inclined to report quite strong negative social support from Canadians, compared to Koreans. Over one fifth of the respondents (22%) scored between -6 and -10 on the Canadian social support scale, which indicates that a number of Korean immigrants have seriously poor social relationships with non-Korean Canadians. In contrast, a small proportion of respondents (1.7%) achieved the same scores on the Korean social support scale. As a result, the mean score of Canadian social support is lower than that of Korean social support (Mean = 0.1, S.D = 5.1 vs. Mean = 3.3, S.D = 3.97). The data generally disclosed that respondents are more likely to receive favourable social support from members of their own ethnic group.

#### 5.1.4 Mastery and Self-Esteem

The data presented in Table 7 are the frequency distribution and percentages for the mastery and self-esteem scales. Findings show that a majority of Korean immigrants (61.3%, n = 526) mildly or strongly agreed with the belief that they are able to master their own problems by themselves, while only 36 respondents (4.2%) mildly disagree. The remaining respondents (31.5%, n = 270) neither agree nor

disagree with the belief in personal control of life events. The mean score for the mastery scale, ranging from 0 to 35, was 23.8 (S.D = 5.6).

Turning to the self-esteem scale, most of the Korean immigrants either displayed a moderate (47.4%, n = 407), or a strong (35.9%, n = 308) sense of self-worth. Only a small proportion of respondents (1.3%, n = 11) moderately disagree, while about 13% neither agreed or disagreed. The mean score on the self-esteem scale, ranging from 0 to 30, was 23 (S.D= 4).

TABLE 7. FREQUENCY DISTRIBUTION OF MASTERY AND SELF-ESTEEM SCALES

	Mastery		Self-Esteem	
	F	%	F	%
Strongly Disagree	0	0	0	0
Mildly Disagree	36	4.2	11	1.3
Neither Agree Nor Disagree	270	31.5	109	12.7
Mildly Agree	342	39.9	407	47.4
Strongly Agree	184	21.4	308	35.9
Total	832	3.0	835	2.7

It is difficult to evaluate whether the level of these psychological coping resources among Korean immigrants is high or low because there are no standardized scores with which to compare them. However, when considering the possible range of these scales, an assumption in the migration literature that those who are in poor mental health or are at risk of developing a major psychiatric disorder are likely to migrate may not be empirically supported. Rather, the findings in

Table 7 seem to indicate that immigrants with good psychological coping resources are likely to migrate.

#### 5.1.5 CES-D

As mentioned previously, Radloff (1977) found that all subjects who scored 16 or above on the CES-D scale were diagnosed to be depressed. Although this cutoff point may result in some false positives or negatives, Kuo (1984) showed that a cutoff score of 16 can be effectively used to screen cases who are depressed among Asian immigrants. In this study, a cutoff point of 16 or higher is applied to identify those subjects with clinically significant depression. Among the possible range of scores from 0 to 60, the mean score on the CES-D scale for the Korean immigrant sample was 11.13 (S.D = 8.94).

Table 8 indicates that among the total sample, approximately 22% of the respondents reached or exceeded the CES-D cutoff score of 16. This finding is compared to other populations reported in previous studies to identify whether or not Korean immigrants have an elevated risk for depression. Studies of depressive symptoms have reported a fairly similar prevalence rate for North American community populations, which ranged from 15% to 21% (Barnes, Currie, and Segall, 1988). The findings in Table 8 indicate that Korean immigrants experience slightly increased levels of depression, when the depression level on the CES-D is compared to an urban

Canadian population sample. Barnes, Currie, and Segall (1988) reported that 17% of the community population in Winnipeg had scores of 16 or higher on the CES-D scale. If a score of 16 or higher on the CES-D scale is an objective screening device to identify cases of depression, Korean immigrants have 1.3 times higher risk of depression than the general Winnipeg population. On the other hand, Korean immigrants have a lower risk for depression than a physically disabled group. Turner, Noh and Levin (1992) reported that 35% of physically disabled persons were screened as having a high risk of depression.

TABLE 8. LEVELS OF DEPRESSION AMONG KOREAN IMMIGRANTS AND OTHER COMPARISON GROUPS

	Korean Immigrants	Canadian Population <sup>7</sup>	Physically Disabled <sup>8</sup>
Sex: Male	18.5%	15%	26%
Female	26.2%	19%	42%
Age: 18-44	24.4%		41%
45-64	18.9%		34%
65+	17.2%		32%
Total	22.1%	17%	35%

Consistent with findings reported in previous studies, empirical evidence in Table 8 demonstrates that the extent of risk for depression varies according to age/sex categories.

<sup>7</sup>The prevalence rate of depression among the Canadian population is derived from Barnes, Currie, and Segall's study (1988).

<sup>8</sup>The data are based on Turner, Noh and Levin's 1992 study.

Female and younger persons appear to have elevated levels of depression, e.g., 18.5% of men compared to 26.2% of women. The lowest risk of depression was observed among those who were over 65 years old. Table 8 showed that 24.4% of the respondents under the age of 44 suffered from clinically significant levels of depression, while 17.2% of respondents over 65 years old endured depressive symptoms.

## 5.2 Correlation Analyses

Bivariate correlation analysis (e.g., Pearson product-moment correlation coefficient) was conducted, not only to advance the descriptive analyses of stress process variables, but also to explore factors that may influence the level of depression of Korean immigrants. Prior to correlational analysis, the six subscales of adjustment difficulties were combined into a single scale of acculturative stress using mean scores.

### 5.2.1 The Zero-order Correlation Coefficients of Acculturative Stress and Stressful Life Events

Table 9 presents correlation coefficients of eight demographic variables with acculturative stress and stressful life events. When eight demographic variables were correlated with acculturative stress, five of these variables were significantly and inversely associated with the acculturative stress measure. Older persons, and persons with high levels of income and Canadian education are less likely to experience

acculturative difficulties, than younger persons and those with low levels of income and education. As expected, the strongest correlation coefficient was found between the levels of acculturative stress and number of years lived in Canada ( $r = -.35, p \leq 0.01$ ). The longer the respondent had lived in Canada, the less he/she reported acculturative stress. Interestingly, no significant correlation was found between education in Korea and the level of adjustment difficulties. This finding seems to support two opposite claims of migration theory that education in the original society might be not only a benefit but also a disadvantage for adjusting in the new environment. That is, although a high level of education in the homeland may furnish immigrants with considerable insight and competence in adjusting to a new society, those educated in Korea may also tend to experience relatively lower entry social status in the new society.

TABLE 9. ZERO-ORDER CORRELATION COEFFICIENTS BETWEEN SOCIO-DEMOGRAPHIC CHARACTERISTICS AND TWO TYPES OF STRESSORS

Variables	Acculturative stress	Events
Sex (male)	.01	-.01
Age	-.14**	-.13**
Years in Canada	-.35**	-.11**
Marital Status	-.12**	-.01
Employment Status	-.00	.05
Income	-.18**	-.04
Korea Education	.07	.06
Canada Education	-.19**	-.01

\*  $p \leq 0.05$

\*\*  $p \leq 0.01$

Compared to the correlation results for acculturative stress, stressful life events are not as closely related to the demographic characteristics of Korean immigrants. Only two demographic variables were significantly, but weakly associated with the stressful life events scale. A high level of stressful life events was found among younger persons ( $r = -.13$ ,  $P \leq 0.01$ ), and among those who migrated recently ( $r = -.11$ ,  $P \leq 0.01$ ). No other significant associations between stressful life events and demographic variables were found. Acculturative stress was moderately and positively associated with stressful life events ( $r = .22$ ,  $P \leq 0.01$ ).

#### 5.2.2 The Zero-order Correlation Coefficients of Korean and Canadian Social Support

Table 10 presents the zero-order correlations between demographic variables and Korean and Canadian social support. A systematically opposite pattern was found between Korean and Canadian social support with respect to demographic characteristics. For example, while employment status and income were positively related to Canadian social support ( $r = .14$ ,  $P \leq 0.01$  and  $r = .17$ ,  $P \leq 0.01$ ), inverse associations were found between these factors and Korean social support ( $r = -.14$ ,  $P \leq 0.01$  and  $r = -.09$ ,  $P \leq 0.01$ ). Similarly, a higher level of education in Korea is inversely related to Korean social support ( $r = -.09$ ,  $P \leq 0.05$ ), while it is positively associated with Canadian social support ( $r = .12$ ,  $P \leq 0.01$ ). Older persons are likely to report higher levels of Korean social support

and lower levels of Canadian social support. Marital status was significantly associated only with Korean social support ( $r=.15$ ,  $P\leq 0.01$ ), while no significant relationship was found between marital status and Canadian social support. Males also tend to report lower levels of Korean social support than do females ( $r=-.07$ ,  $P\leq 0.05$ ), whereas sex is not associated with the Canadian social support scale ( $r=.00$ ,  $P>0.05$ ).

TABLE 10. ZERO-ORDER CORRELATION COEFFICIENTS BETWEEN SOCIO-DEMOGRAPHIC CHARACTERISTICS AND TWO SOURCES OF SOCIAL SUPPORT

Variables	Korean Support	Canadian Support
Sex (male)	-.07*	.00
Age	.23**	-.13**
Years in Canada	.02	.15**
Marital Status	.15**	-.06
Employment Status	-.14**	.14**
Income	-.09*	.17**
Korea Education	-.09*	.12**
Canada Education	.03	.22**

\*  $p\leq 0.05$   
 \*\*  $p\leq 0.01$

It is important to note that length of residence and level of education in Canada do not affect the level of Korean social support, while these variables are significantly related to the level of Canadian social support. These findings seem to support Hurh and Kim's (1988) 'additive adjustment.' That is, the progress of the acculturative process (for example, education in host society, having Canadian friends, and so forth) has not reduced the extent of Korean social support. In other words, Korean social support

seems to be significant throughout the whole process of acculturation for most Korean immigrants, regardless of the level of adjustment. No significant correlation score was found between Korean and Canadian social support ( $r=.02$ ,  $P \leq 0.05$ ).

### 5.2.3 The Zero-order Correlation Coefficients of Mastery and Self-Esteem

TABLE 11. ZERO-ORDER CORRELATION COEFFICIENTS BETWEEN SOCIO-DEMOGRAPHIC CHARACTERISTICS AND PERSONAL COPING RESOURCES (MASTERY AND SELF-ESTEEM)

Variables	Mastery	Self-Esteem
Sex (male)	.21**	.11**
Age	-.13**	-.14**
Years in Canada	.03	.08*
Marital Status	.06	.06
Employment Status	.19**	.18**
Income	.25**	.25**
Korea Education	.15**	.18**
Canada Education	.14**	.19**

\*  $p \leq 0.05$   
 \*\*  $p \leq 0.01$

Table 11 provides correlation coefficients between personal coping resources (mastery and self-esteem) and demographic variables. A fairly comparable correlation pattern was found between mastery and self-esteem with respect to demographic characteristics. Those who have a higher family income, and those who received higher levels of education in Korea and Canada are likely to possess a greater sense of personal mastery and self-esteem, than do their

counterparts. Males, younger persons, and those who are employed tended to have a higher score on the mastery and self-esteem scales than females, older persons, and those who are unemployed. Marital status was not significantly related to either sense of mastery or self-esteem. Length of residence in Canada was the only socio-demographic characteristic that was differently associated with mastery and self-esteem. While length of residence in Canada was not related to level of mastery ( $r=.03$ ,  $P>0.05$ ), it was significantly correlated to self-esteem ( $r=.08$ ,  $P\leq 0.05$ ). However, the relationship was not very strong. A fairly strong positive relationship was found between personal mastery and self-esteem ( $r=.57$ ,  $P\leq 0.01$ ).

#### 5.2.4 The Zero-order Correlation Coefficients of CES-D

In Table 12, the results of zero-correlation analyses of CES-D, demographic variables, and the six stress process variables are presented. Five demographic variables were significantly but moderately correlated to the level of depressive symptoms. For example, increased length of residence in Canada was negatively correlated ( $r=-.16$ ,  $P\leq 0.01$ ) with the level of depression, as was being male ( $r=-.17$ ,  $P\leq 0.01$ ). As expected, age was inversely related to the extent of depression ( $r=-.12$ ,  $P\leq 0.01$ ). Regarding marital status, the lowest level of depressive symptoms was found among those who are married ( $r=-.20$ ,  $P\leq 0.01$ ), compared to single,

divorced/separated, or widowed persons. In addition, depression rates decreased as the income of respondents increased ( $r = -.14$ ,  $P \leq 0.01$ ). These results are consistent with widely reported findings in previous studies (Turner, Noh and Levin, in press; Turner and Roszell, 1992; Thoits, 1982b). However, not as anticipated, the level of education in Korea, education in Canada, and employment status were not significantly linked to the level of depression.

TABLE 12. ZERO-ORDER CORRELATION COEFFICIENTS OF CES-D BY SOCIO-DEMOGRAPHIC CHARACTERISTICS AND STRESS PROCESS VARIABLES

Variables	CES-D
Sex (male)	-.15**
Age	-.12**
Year in Canada	-.16**
Marital Status	-.20**
Employment Status	.02
Income	-.14**
Korea Education	.00
Canada Education	.06
Acculturative Stress	.42**
Stressful life Events	.34**
Korean Support	-.34**
Canadian Support	-.07
Mastery	-.42**
Self-Esteem	-.39**

\*  $p \leq 0.05$   
 \*\*  $p \leq 0.01$

Both sources of stress (acculturative stress and stressful life events) were correlated with higher depressive symptom scores among Korean immigrants. The findings in Table 12 indicate that the zero-order correlation coefficients of CES-D with acculturative stress and the stressful life events

are respectively 0.42 ( $P \leq 0.01$ ) and 0.34 ( $P \leq 0.01$ ). Although these findings seem to support the first hypothesis, the magnitudes of correlation scores do not seem to support the second hypothesis that stressful life events are more strongly associated with a high level of depression than acculturative stress.

Turning to social support, only Korean social support was significantly related to the level of depressive symptoms ( $r = -0.34$ ,  $P \leq 0.01$ ). Although Canadian social support was negatively associated with CES-D scale scores, the relationship was not statistically significant. These findings support the third hypothesis that social support received from Koreans is more significantly related to psychological well-being than is Canadian social support.

A fairly strong magnitude of correlation coefficients was found between psychological resources and CES-D score. The correlation coefficients for the CES-D with mastery and self-esteem were respectively -0.42 and -0.39. Thus, the fourth hypothesis that people who have better personal coping resources are less likely to experience high levels of depression was supported.

### 5.3 Multivariate Analyses

Results of the correlational analyses presented in Table 12 revealed that along with some socio-demographic characteristics (sex, age, years in Canada, marital status,

and income), two dimensions of stressors, Korean social support, and personal coping resources were significantly correlated to the mental well-being of Korean immigrants. Multiple regression analyses were performed to explore these relationships in more detail.

As an extension of the bivariate analyses, the primary purpose of multiple regression analyses is to assess the extent to which a set of independent variables simultaneously predict the outcome variables. Multiple regression analyses are also able to illustrate accurately the extent to which each of the independent variables is uniquely related to mental distress, by controlling for other independent variables. Thus, multiple regression analyses provide a way of determining whether or not the relationships identified by a simple zero-order correlation analyses hold after controlling for other significant variables.

Prior to running multiple regression analyses, the data were examined to ensure that basic assumptions of multiple regression, such as normality, linearity, homoscedasticity, and multicollinearity were not violated. Normality refers to normal distribution of the values of the dependent variable for each value of independent variables. The assumption of linearity means that the sample distributions should fall on a straight line. Regression techniques also require homoscedasticity, which indicates that the standard deviations of errors of prediction should be roughly the same with all

predicted dependent variable levels (Tabachnick & Fidell, 1983:95). To visually examine the normality, linearity, and homoscedasticity of the data, partial scatterplots of residuals against observed and predicted values were drawn by standard multiple regression. The overall shape of partial scatterplots of residuals illustrated that there were no significantly skewed variable distributions, so that the assumptions of normality, linearity, and homoscedasticity were considered to have been met.

In regression analyses, the independent variables should be uncorrelated with one another. When the variables are too highly interrelated with each other, multicollinearity problems occur. There are a couple of indicators of multicollinearity problems among variables. To identify collinear variables, first of all, a correlation matrix was used. High coefficient scores between variables may indicate multicollinearity. The variables suspected of having a multicollinear problem were simultaneously entered into a step-wise regression analysis. If a pair of variables suffers from the problem of multicollinearity, only one variable is able to increase significantly the explanatory power of the regression equation.

For example, mastery and self-esteem were suspected to be multicollinear due to a high correlation coefficient ( $r=.57$ ,  $P \leq 0.01$ ). To test whether mastery and self-esteem have a problem of multicollinearity, a step-wise regression analysis

including other stress process variables was performed. Only mastery was included as a significant predictor in the regression equation. The results of the step-wise regression analysis demonstrated that self-esteem and mastery were too highly correlated with each other. To solve the multicollinearity problem, self-esteem was excluded from further multiple regression analysis<sup>9</sup>.

The relationship between acculturative stress and stressful life events was also suspected to be affected by multicollinearity. Although the correlation coefficient between acculturative stress and stressful life events was only moderate ( $r=.22$ ,  $P\leq 0.01$ ), it might be theoretically feasible that acculturative stress is significantly associated with stressful life events. For example, Kuo and Tsai (1986) suggested that language problems migrants experience are likely to provoke stressful life events in the workplace and in school. In addition, occupational discrimination in acculturative stress may be closely related to occupational problems in the stressful life events scale. To inspect the possibility of multicollinearity between acculturative stress and stressful life events another stepwise regression including other stress process variables was performed. The

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<sup>9</sup>As noted earlier, the personal mastery scale was more significantly associated with the CES-D scale than the self-esteem scale. Moreover, personal mastery is the preferred scale in examining personal coping resources in mental health research. Consequently, these factors suggest that among the two dimensions of personal coping resources measured, it was appropriate to delete the self-esteem scale.

results of the step-wise regression analysis showed that neither acculturative stress nor stressful life events were excluded from the regression equation. This demonstrated that multicollinearity does not seem to be a potential problem between acculturative stress and stressful life events. It is reasonable to conclude that acculturative stress and stressful life events have actual independent effects on CES-D scores. A crucial assumption in this study that acculturative stress (a source of a chronic stress) can be distinguished from stressful life events (a source of acute stress) was supported.

There are also some other potential problems that have to be considered for a confident analysis of the data: e.g., level of variables, missing data, outliers, and sample size. Nominal variables, such as sex, marital status, employment status, and education in Canada, were coded as dichotomous variables, since all the variables in regression analysis should be measured on an interval or ratio scale.

Missing data do not seem to be a serious problem in the present analyses, since the number of missing data in the overall study was negligible. However, income has a fairly high rate of missing data (n=63, 7.3%). In order to examine whether or not there is a pattern to the missing income data, the mean differences between people who reported their income and those who did not were examined. No significant mean differences between two groups with regard to all independent

variables were found. Since there were only a few cases with missing data, and since no pattern of missing data was found, a listwise deletion method of missing data was used, which computes only the valid data.

Among 858 cases employed in this study, nine outliers, cases with extreme values on one or a combination of variables, were found by using CASEWISE subcommand in SPSS. Although these outlier cases had tabled values in excess of the standardized score of  $\pm 3.00$ , they did not seem to influence the size of correlation coefficients. Therefore, these nine outlier were retained.

Sample size in this research is well above the ideal requirement of sample size for stepwise regression (40 cases per independent variable).

After meeting the basic assumptions and resolving potential data problems, multiple regression analyses were run to explore the association between all selected independent variables and CES-D scale scores. In the current multiple regression analyses, Korean and Canadian social support, a personal feeling of mastery, and two types of stressors (adjustment difficulties and stressful life events), were included in assessing the level of depressive symptoms among Korean immigrants. Additionally, eight demographic variables (sex, age, years in Canada, marital status, employment status, income, education in Korea and Canada) were employed to control the potential influence of demographic variables.

The entry method of step-wise was used to explore which variables were significant predictors of the dependent variable. The variables were progressively and selectively added into the proposed regression analyses, until all significant predictors entered into the regression model. Thus, the stepwise regression presented in each step of the analysis is considered to be provisional until the final step of regression analyses was executed. At each step, an independent variable was selectively added into the regression equation and increased the explanation power of the regression model. The rank of the best predictors with regard to depressive symptoms was identified by the order of entry. More powerful predictors entered into the regression equation first.

Table 13 presents the results of the stepwise regression analyses. Included are the value of  $R^2$ , adjusted  $R^2$ , standard regression coefficients (*Beta*), and the level of significance. The  $R^2$  in multiple regression indicates the proportion of the variability of the dependent variable explained by a set of independent variables. The adjusted  $R^2$  prevents the danger of overestimation and underestimation by adjusting random fluctuations. The extent to which an independent variable explains the dependent variable was identified by investigating the amount of change in adjusted  $R^2$  when the independent variable was added into the regression equation. The standardized regression coefficient (*Beta*) indicates the

TABLE 13. STEPWISE REGRESSION ANALYSES OF CES-D

	Step 1 Beta	Step 2 Beta	Step 3 Beta	Step 4 Beta	Step 5 Beta	Step 6 Beta	Step 7 Beta
Acculturative Stress	.44**	.34**	.33**	.28**	.25**	.24**	.24**
Mastery		-.30**	-.29**	-.28**	-.25**	-.27**	-.25**
Married			-.18**	-.18**	-.18**	-.17**	-.17**
Korean Support				-.19*	-.16**	-.15**	-.16**
Events					.16**	.15**	.15**
Age						-.08*	-.07*
Male							-.07*
R <sup>2</sup>	.20	.28	.31	.34	.36	.37	.37
Adjusted R <sup>2</sup>	.19	.27	.30	.34	.36	.36	.36

\* p≤0.05

\*\* p≤0.01

amount of change in the dependent variable by the addition of a single independent variable, when the effects of the remaining independent variables are held constant.

The results of Table 13 demonstrate that among five stress process variables, four predictors contributed significantly to the CES-D scale score: acculturative stress, mastery, Korean social support, and stressful life events. Canadian social support was eliminated from the final regression equation. Acculturative stress was the first independent variable to enter, followed by mastery, marital status, Korean social support, stressful life events, age, and sex (male).

The total variance explained by the variables included in the regression analysis was .36 (adjusted  $R^2$ ). Four stress process variables and three demographic characteristics accounted for 36% of the variability in depressive symptoms (CES-D). The results presented in Table 13 also illustrate the proportion of explained variance, which refers to the relative importance of each of the stress process variables in predicting depressive symptoms. Acculturative stress was by far the best predictor of depressive symptomatology. About one-fifth of the variability in CES-D scores was accounted for by acculturative stress alone (adjusted  $R^2$  = .19). As expected, immigrants who experience acculturative stress tend to report higher rates of depression ( $Beta$  = .24,  $P \leq 0.01$ ). Apparently, socio-psychological resources, such as Korean social support

and the perception of mastery are also powerful predictors of depressive symptoms. The analysis indicated that a personal feeling of mastery contributes to 8% of the explained variance ( $Beta = -.25$ ,  $P \leq 0.01$ ). When Korean social support was incorporated into the model, the explained variance increased from 30% to 34% ( $Beta = -.16$ ,  $P \leq 0.01$ ). The stressful life events scale was a statistically significant predictor, but quite modestly explained the level of depression. The total proportion of variance explained in the dependent variable increases to 36% from 34% when the stressful life events scale was included into the model ( $Beta = .15$ ,  $p \leq 0.01$ ).

Consistent with the findings of the correlation analyses, being married, older, and male were significantly and inversely associated with the level of depressive symptoms ( $Beta = -.17$ ,  $P \leq 0.01$ ;  $Beta = -.07$ ,  $P \leq 0.05$ ;  $Beta = -.07$ ,  $P \leq 0.05$ ). In other words, single, younger, women had the highest rates of depression in this sample of Korean-Canadians. However, the data in Table 13 reveal that there was no substantial increase in the prediction of depression by demographic variables. Of the three predictors (marital status, age, and male), only marital status contributed to the variability explained in depressive symptoms. The variance explained was improved 3% (from 27% to 30%) by the addition of marital status to the regression equation.

In conclusion, the present multivariate analyses demonstrated that two dimensions of stressors, a personal

feeling of mastery, and Korean social support are salient factors in predicting depressive symptoms, even after controlling for socio-demographic characteristics. Acculturative stress, Korean social support, mastery, and stressful life events collectively accounted for 33% of the depressive symptoms among Korean immigrants. These findings might indicate that stress process variables have substantial independent effects on depressive symptoms.

However, prior to accepting these results, which are based on main effects, it is important to examine the interrelationships between the two dimensions of stressors and socio-psychological resources. Testing interaction effects will contribute to a more comprehensive understanding of the stress process. In this study, interaction effects mainly refer to the buffering effects of socio-psychological resources on the negative impact of stress. According to the buffering effects hypothesis, the combination of low socio-psychological resources and high levels of stress increase the level of depressive symptoms. In other words, stress may produce more depressive symptoms for individuals who lack socio-psychological resources, than for those who have better resources. The following four buffering effects were investigated: acculturative stress by Korean social support, stressful life events by Korean social support, acculturative stress by personal mastery, and stressful life events by personal mastery.

To ascertain the buffering effects of socio-psychological resources (Korean social support and personal mastery) on acculturative stress, respondents were divided into two groups based upon mean scores of acculturative stress: those who have an acculturative stress score greater than the mean, and those who have an acculturative stress score less than the mean. Standard regression analyses, using the same variables, were then carried out separately for these two types of stress groups. If socio-psychological resources produce more significant effects in reducing depressive symptoms for the higher acculturative stress group than for the lower stress group, it would indicate that socio-psychological resources buffer Korean immigrants against the negative impacts of acculturative stress. The regression results revealed that Korean social support is more effective in reducing depressive symptoms (CES-D) for the high acculturative stress group ( $Beta = -.16$ ,  $P \leq 0.01$ ) than for the low stress group ( $Beta = -.13$ ,  $P \leq 0.01$ ). On the contrary, a personal feeling of mastery has less significant effects on depressive symptom (CES-D) for the high acculturative stress group ( $Beta = -.22$ ,  $P \leq 0.01$ ) than for the low stress group ( $Beta = -.31$ ,  $P \leq 0.01$ ).

The same procedures used in investigating the buffering effects of socio-psychological resources on acculturative stress were applied to the stressful life events measure. The regression coefficients of Korean social support and personal mastery for CES-D scores were slightly higher for the high

stress group ( $Beta = -.18$ ,  $P \leq 0.01$  and  $Beta = -.28$ ,  $P \leq 0.01$ ), than for the low stress group ( $Beta = -.11$ ,  $P \leq 0.05$  and  $Beta = -.24$ ,  $P \leq 0.01$ ).

Although socio-psychological variables generally produced more effects in the high stress group, than in the low stress group, the observed coefficient differences may not be sufficient to demonstrate clear buffering effects. Furthermore, contrary to the assumption of buffering effects, personal mastery was more effective for the lower acculturative stress group than for the higher acculturative stress group. Thus, these empirical data do not consistently demonstrate that socio-psychological variables buffer the negative impact of stressors in high stress condition.

In order to reconfirm these results, four possible interaction effects between two types of stressors and two dimensions of socio-psychological resources (Korean social support  $\times$  acculturative stress, Korean social support  $\times$  stressful life events, personal mastery  $\times$  acculturative stress, and personal mastery  $\times$  stressful life events) were computed and entered into a simple regression equation using the same set of predictors. Neither statistically significant regression slopes, nor  $R^2$  change were observed to support interaction effects. It appears from this analysis that there are no stress buffering effects for socio-psychological resources on the two types of stressors in this analysis.

## 5.4 Hypotheses Tests

Since no interaction effects were found, it might be reasonable to conclude that the main effects of the stress process variables on depressive symptoms seen in the stepwise regression analyses in Table 13 are valid. To examine the four hypotheses proposed in this study, the findings of zero-order correlation coefficients analyses in Table 12 and stepwise multiple regression analyses in Table 13 were utilised.

### 5.4.1 Hypothesis 1

The expected relationships were observed between two dimensions of stress and depression. Both correlation coefficient scores and *Beta* scores in regression analyses consistently demonstrated that both acculturative stress and stressful life events were associated with higher levels of depression. As can be seen in Table 12, findings of zero-order correlation showed that those who report high scores on the stressful life events and acculturative difficulties tend to experience a higher level of mental depression ( $r=.34$ ,  $P\leq 0.01$ ;  $r=.42$ ,  $P\leq 0.01$ ). Congruent with the findings of zero-order correlation analysis, the direction of the correlation coefficients between these two dimensions of stressors and CES-D scores was maintained in stepwise regression analysis, even when the other stress process variables and demographic variables were held constant. The *Beta* weight scores in Table

13 illustrated that as one unit of acculturative stress and the stressful life events increased, 0.24 and 0.15 units of the CES-D scale respectively increased, when other variables were held constant. Two dimensions of stressors, such as acculturative stress ( $R^2=.19$ ) and the stressful life events ( $R^2=.02$ ), aggregately contributed to 21% of the variance in predicting depressive symptoms among Korean immigrants.

The results of the analyses support the first hypothesis that both adjustment problems and stressful life events are positively related to mental distress among Korean immigrants.

#### 5.4.2 Hypothesis 2

Although the evidence presented in this study consistently indicated that stressors have negative impacts on immigrants' mental health, the second hypothesis that stressful life events play a more significant role in increasing the level of depression than does acculturative stress was not confirmed. Contrary to the second hypothesis, the findings of the correlation analysis showed that the correlation coefficient score for the CES-D scale was higher with acculturative stress than with stressful life events. Similarly, Table 13 showed that when CES-D scores are regressed on the two stressors, along with other independent variables, the rank orders of the correlations did not change. Moreover, acculturative stress was the most powerful predictor, explaining approximately one fifth of the

variability on depressive symptoms (adjusted  $R^2=.19$ ), whereas stressful life events accounted for only 2% of the variability in depression. The second hypothesis that adjustment problems have a weaker association with Korean immigrants' mental distress, than stressful life events was not supported in this study. Rather, the results suggest that the adjustment process to Canada is a more significant source of chronic stress for Korean immigrants, than other types of discrete stressful life events.

#### 5.4.3 Hypothesis 3

If the third hypothesis is correct, there should be a higher correlation coefficient between Korean social support and CES-D scores, than between Canadian social support and CES-D. In fact, zero-order correlation analyses showed that only Korean social support is significantly associated with the CES-D scale ( $r=-.34$ ,  $P\leq 0.01$ ). Although Canadian social support is negatively related to the level of depressive symptoms, it was not statistically significant ( $r=-.07$ ,  $P>0.05$ ). Additionally, comparable findings were found in the multiple regression analyses. The regression analysis findings consistently illustrated that only Korean social support has a strong and independent relationship with depression ( $Beta=-.16$ ,  $P\leq 0.01$ ), while Canadian social support was excluded from the stepwise regression equation. Thus, these empirical data conclusively provide support for the

third hypothesis that social support received from Korean is more important for the mental health of immigrants than that received from non-Koreans. It seems that Korean immigrants who have a sufficient amount of social support from members of their own ethnic group enjoy better mental health status than do those who have a close non-Korean social network.

#### 5.4.4 Hypothesis 4

Since the self-esteem scale was deleted from multivariate analyses due to multicollinearity problems with a personal feeling of mastery, only findings regarding mastery were utilized for testing the fourth hypothesis. Consistent with the fourth hypothesis, there was a significant (and inverse) link between mastery and depressive symptoms ( $r = -.42$ ,  $P \leq 0.01$ ). In addition, the effects of a personal feeling of mastery were further examined by step-wise multiple regression analysis. Even after holding several demographic variables constant, the direction of the correlation between mastery and the CES-D scale remained statistically significant ( $Beta = -.25$ ,  $P \leq 0.01$ ). A feeling of personal mastery was a salient predictor in step-wise regression analysis. When the mastery scale was entered into a regression analysis, the explained variability of depression increased from 19% to 27%. These findings support the fourth hypothesis that Korean immigrants who have strong positive feelings of mastery have lower levels of mental depression. In other words, those who believe that they are

able to control their own lives and problems tend to report a lower level of depression than those who do not possess a personal feeling of mastery.

In conclusion, as hypothesized, the findings of this study clearly demonstrated that the two dimensions of stressors are directly and positively related to depressive symptoms, whereas Korean social support and personal mastery are directly and inversely associated with depressive symptoms. Thus, hypotheses one, three, and four were adequately supported. The second hypothesis, however, was not validated.

## CHAPTER 6

### DISCUSSION AND CONCLUSIONS

#### 6.1 General Discussion of Findings

This study focused on the extent to which stress and socio-psychological coping resources were associated with mental distress among Korean immigrants. The implications of the findings reported here will now be discussed. First, the findings indicate that respondents who experience high levels of stress had a significantly increased level of depressive symptoms. This finding is consistent with that of previous epidemiological studies, which state that the stresses induced by varying sources of life conditions have a direct impact upon mental health. Of the two sources of stressors investigated, the findings clearly indicated that acculturative stress has a more significant impact on migrants' mental health, than stressful life events. The potential chronic stress arising from the migrants' role as a member of a minority group in the host society emerged as the most significant explanatory factor of Korean immigrants' mental health. While the findings of this study are not completely consistent with the hypotheses, they are quite similar to Avison and Turner's findings (1988) that chronic strain is more likely to be a significant predictor of

psychological distress than acute stress.

In addition to the negative impacts of stressors upon psychological well-being, the findings of this study also indicated that there are socio-psychological resources which serve to maintain positive mental health status among Korean immigrants. The analyses presented in this study revealed that those who obtained strong social support from members of their own ethnic social network, and those who have a strong feeling of mastery are more likely to maintain good mental health than other immigrants.

Unexpectedly, however, the buffering effects of these coping resources were not demonstrated by the empirical evidence in this study. The present study showed that socio-psychological resources have only direct main effects upon psychological well-being. That is, ethnic social support and personal mastery were important variables for psychological well-being, regardless of the degree of stress. Ethnic social support provides immigrants with emotional assistance, and a personal feeling of mastery provides immigrants a sense of confidence and purpose in living on their own in a new country. That is, these socio-psychological conditions in themselves may help individuals to retain psychological well-being by protecting against emotional problems and by sheltering them from the uncertainty of life and a sense of hopelessness.

While the buffering effects of the socio-psychological

resources on stress have been a primary topic in research guided by the stress process model, the buffering hypothesis has not been confirmed in most empirical studies. On the other hand, main effects of socio-psychological resources on psychological distress have been extensively verified in a large number of studies (Turner, 1981; Thoits, 1982b). Nevertheless, little theoretical effort has been made to comprehend systematically the nature of direct effects of socio-psychological resources upon psychological well-being. Since researchers confined their attention largely to buffering effects of socio-psychological resources that may mediate the impact of life strain, important knowledge about these variables has been left for future studies to discover. The results of this study suggest that in order to understand the full impact of socio-psychological resources, more theoretical attention must be paid to the nature and effects of socio-psychological resources which directly contribute to psychological well-being.

The test of the third hypothesis conclusively demonstrated that ethnic social support is a more important source of assistance for immigrants' mental health, than support received from non-ethnic group members. The presumption that strong ethnic social ties have negative effects on immigrants' mental health by prohibiting acculturative procedures was not evident in this analysis. Strong social support received from ethnic group members

played an important role in reducing the level of depression. On the other hand, non-ethnic social support had little association with depressive symptoms among Korean immigrants. This evidence seems to indicate that separation from the main society does not necessarily lead to severe mental problems for Korean immigrants. These findings may lead to the inference that those immigrants who succeed in reestablishing strong Korean ties may enjoy better mental health status, regardless of some degree of separation from the larger society. Despite this inference, however, it is not clear that these findings have the same implications through all age groups, since different age groups have substantially different social networks. For example, aged Korean immigrants are likely to depend heavily upon ethnic interaction and social support, whereas younger persons tend to have relatively strong social ties with non-ethnic group members. Thus, it is uncertain that isolation from the non-ethnic group exerts similar adverse effects on different age groups. This consideration indicates the need for further research to define fully the diverse effects of ethnic or non-ethnic social support on the mental health of Korean immigrants in different age groups.

## 6.2 Appraisal of Migration and Stress Process Model

The relevance of stress process variables was verified by the quantitative analyses carried out in the present study.

In stepwise regression analyses, different sources of stress (i.e., acculturative stress, stressful life events) and coping resources (i.e., social support and a personal feeling of mastery) accounted for about 33% of the variability in the level of mental distress among Korean immigrants in Toronto. Although these findings are preliminary, they may be used to evaluate the relevance of the migration and stress process models reviewed in Chapter Two and Three.

As migration theory assumes, migration in itself means an additional significant source of stress for a large number of Korean immigrants. Unlike the general population, Korean immigrants are exposed, not only to stressful life events, but also to excessive life strain and hardship stemming from the migration process itself. As a comparatively new immigrant group, Korean immigrants often experience minority status in Canada socially, economically, politically, and culturally. Adjustment in new sociocultural circumstances, in itself, presents a structured disadvantage or problem which constitutes a significant source of chronic stress. As noted earlier, some adjustment problems, such as language difficulties and occupational discrimination, were especially serious sources of chronic stress requiring lengthy resolution. Adjustment problems were also certainly a far better explanatory factor contributing to the high prevalence rates of depressive symptoms among Korean immigrants, than the other variables examined in this study. This evidence

conclusively supports the assumption in migration theory that migrant status in itself in a new society, where immigrants experience cultural and racial minority status, is accompanied by excessive risk for migrants' mental health.

Nonetheless, immigrants' mental health status cannot be properly understood without looking beyond the level of life strain provoked by the migration process. Although acculturative stress is a significant variable in understanding migrants' psychological well-being, migrants' personal traits and assistance received from an ethnic social network played a significant role in reducing the level of psychological distress. Social support and a sense of personal mastery collectively explained 12% of the depressive symptoms among Korean immigrants. These results support the assumption in the present study that those immigrants who have supportive social interaction and hardy psychological resources enjoy better mental health status. By emphasizing migration difficulties, however, the fact that migrants' socio-psychological resources contribute positively to their mental health has been overlooked in a large number of migration studies. The over-emphasis on acculturative stress in migration theory has led to an overall misunderstanding of migrants' mental health status. Unlike the general expectation of migration theory that migrants are more vulnerable to depression than the general community population, the observed data demonstrated that Korean

immigrants have only a slightly higher risk for depression than the general population in Canada. Although there are a number of possible explanations for these findings, the results of this analysis suggest that to understand migrants' mental health, research must focus not only on negative impacts and the difficulties of the migration process, but also on the positive effects of the socio-psychological resources which migrants possess and utilize.

In view of the fact that levels of psychological well-being rest not only on the extent to which people experience stress, but also on the efficacy of their coping resources, the stress process model has provided better insights into Korean immigrants' mental health than migration theory. The stress process variables were important explanatory factors in understanding Korean immigrants' mental health. However, it should be noted that there are some empirical findings that do not fit the presumptions of the stress process model.

In the stress process perspective, stress has often been regarded as having only a modest relationship with psychological distress. This assumption has led a number of researchers to focus attention on socio-psychological resources directly or indirectly influencing levels of psychological distress. Coping resources have often been treated as major determinants of mental health. A number of studies based on the stress process model have claimed that it is only under circumstances in which individuals cannot handle

the situation, that they experience psychiatric problems.

The findings of this study are in disagreement with the underlying assumption of the stress process perspective regarding the relative significance of stress and coping resources. The evidence indicates that the stress process model has underestimated the significance of stress. Psychological distress among Korean immigrants was primarily explained not by coping resources, but by the level of acculturative stress experienced. Acculturative stress was a more substantial and powerful predictor of depression, than the combined effect of social support and personal feelings of mastery.

This finding suggests that the stress process model should take into account the fact that potential relationships between stress, coping resources and mental health outcomes may vary depending upon the nature of the population being studied. It is not surprising to find that immigrants have different sources of stressors, social networks, and psychological resources than non-immigrants. It might also be reasonable to expect that acculturative stress has the most significant effects for Korean immigrants' mental health, who have a relatively short migration history in North America. However, the major purpose here is not to argue whether acculturative stress is always the most significant predictor of psychological distress for all new immigrant groups. The basic concern is that the extent to which individuals are

exposed to stress and the extent to which they utilize socio-psychological coping resources to reduce the impacts of life strain, may be influenced more by the social and cultural context in which they are embedded than the stress process perspective presumed.

In conclusion, the overall empirical evidence presented in this study offers only limited support for both the migration and stress process perspectives. The findings do not precisely fit either the migration model or the stress process model. It might be reasonable to conclude that both migration theory and the stress process model should be regarded as complementary interpretations that may provide an improved explanation of migrant's mental health. Reconciling both theoretical models may help us to gain a more meaningful understanding of the mental health status of migrants.

### 6.3 Limitations and Considerations for Further Studies

Although the measures used in the present study provided a strong exploratory model for understanding Korean immigrants' mental health, it is important to note that there are some limitations related to measurement. For example, it is widely claimed in epidemiological studies that social support is an interpersonal transaction that cannot be clearly understood by a unidimensional concept. According to Thoits (1982a), social support is broadly defined as having four dimensions: emotional concern, instrumental aid, information,

and appraisal. Of these dimensions of social support, emotional concern and appraisal were measured in this study. As a result of using secondary data, other dimensions of social support were simply unavailable in this study. It might be possible that no buffering effects, or a relatively weak direct relationship between Korean social support and depression can be explained in part due to the disregard of other dimensions of social support. In addition, different effects of social support by various types of social networks (such as family, friends, neighbours, kin, and coworkers) were not assessed in this study. Thoits (1982a) claimed that until the multidimensional nature of social support is examined, little will be understood about the effects of social support on psychological distress. In future research, it would be worthwhile to examine the independent and combined effects of other dimensions of social support in order to produce more convincing evidence of the relationships between social support and mental distress.

In order to produce a more general understanding of Korean immigrants' mental health, it might also be valuable to employ other dimensions of psychological distress and to compare them with the outcome of the CES-D scale. As mentioned earlier, it is commonly reported that Asian immigrants tend to manifest their psychological distress as somatized complaints. Thus, comparing the findings in this study with a comprehensive measure of somatic distress, such

as the 90 item self-report psychiatric symptom inventory (SCL-90), may help to avoid possible mistaken conclusions based on relying exclusively on a single outcome measure.

This research used cross-sectional data to evaluate potential main-effects and interaction effects of stressors and socio-psychological variables on depressive symptoms. The most significant problem of cross-sectional research is that it is not sufficient to examine fully causal inferences. The relationships between stress, coping resources, and mental distress should be understood as an ongoing process. Individuals' current stress and socio-psychological resources can be not only a cause of psychological distress, but also a product by prior psychological distress (Pearlin and Schooler, 1978). For example, serious depression may make it difficult to maintain a solid social network, and in turn this could produce more stress. Thus, there can be a systematic bias in the testing of causal relationships using cross-sectional data, because it measures the on-going stress process at only a single point in time. Due to the weakness of cross-sectional data in studying interaction effects, a number of researchers have emphasized the need to be extremely cautious in interpreting the results of cross-sectional data. With regard to this methodological problem, some researchers (Thoits, 1982a; Pearlin and Schooler. 1978) have recommended the use of longitudinal data for more reliable results. Considering the theoretical and practical implications of the

findings of this study, further research employing longitudinal data and more developed measurement is necessary for a fuller understanding of the stress process.

Due to the cross-sectional nature of the data and the methodological limitations of this study, it is difficult to comment on all the potential causal relationships between stressors, socio-psychological resources, and psychological distress. Nevertheless, it is believed that the findings of this study may provide a general empirical basis for understanding the mental health status among Korean immigrants, and the socio-psychological variables which significantly influence their psychological well-being.

#### 6.4 Summary and Conclusions

Despite the rapid increase in the size of the Korean population in North America, little is known about their mental health. The primary purpose of this study was to investigate socio-psychological factors which may significantly affect Korean immigrants' mental health status.

In early migration studies, the negative relationship between migration and mental health was often underscored. Migrants were usually viewed as a high risk group and migration was considered to be high risk situation. Instead of accepting these assumptions in the early migration studies, this study paid attention to the significance of various pre- and post-migratory variables which may influence Korean

immigrants' mental health. A broad transformation of the migration environment for Korean immigrants' mental health was discussed, especially focusing on overall conditions of migration, the condition of the host society, and the characteristics of migrants. With regard to the general changes in the migration environment, this study expected that Korean migrants may experience different migration stress, coping resources, and mental health status from that of earlier migrants. This study viewed migrants as competent, motivated people, who actively strive to overcome adjustment problems and who energetically reconstruct social networks in their new socio-cultural environment.

Particular psychological impacts (especially depression) of migration among Korean immigrants was investigated by applying a stress process model. According to the stress process model, socio-psychological coping resources as mediating factors or intervening variables help people to modify the negative impact of stress and to gain mental well-being. This study explored the extent to which two sources of stressors (adjustment problems and stressful life events) and two dimensions of socio-psychological coping resources (social support and personal a feeling of mastery) affect migrants' mental health (depression). Based on the stress process model, four hypotheses were formulated: 1) Those Korean immigrants reporting a history of many adjustment problems and stressful life events will have higher levels of mental

depression than migrants experiencing fewer stress-inducing problems; 2) stressful life events are a more serious source of stress than migration adjustment problems for Korean immigrants' mental health; 3) social support received from Koreans is more important for the mental health of immigrants than that received from non-Koreans; 4) Korean immigrants who have strong feelings of self-esteem and mastery will report lower rates of mental depression. For testing these four hypotheses, this research investigated data collected from 858 Korean immigrants in Toronto and vicinity in 1990.

The results of zero-order correlation analysis and stepwise regression analysis clearly indicated that acculturative stress, stressful life events, Korean social support, and personal feelings of mastery were all significant explanatory factors in accounting for psychological distress. These four stress process variables accounted for 33% of the variance in depression among Korean immigrants. Contrary to expectations, however, buffering effects were not empirically confirmed in this study. Acculturative stress and stressful life events are directly and positively related to depressive symptoms, whereas personal mastery and Korean social support are directly and inversely associated with them.

The results of the analyses demonstrate that although those who experience more acculturative stress and stressful life events tend to report higher levels of mental depression, the rates of depression also differ depending on the nature of

migrants' personal traits and the extent to which they received support from their own ethnic group. This finding may challenge the pessimistic assumption in migration research that immigrants are highly susceptible to depression. The results of this study illustrate the probability of successful migration. If immigrants who have strong personal feelings of mastery receive sufficient social support from their own ethnic group, they may have lower mental depression rates than the general host population.

Although the present study provided a significant empirical basis for understanding Korean immigrants' mental health, it is important to note that further study must pay more attention to measurement issues. This study investigated the extent to which stress process variables influence migrants' mental health during the post migration phase. Some significant migratory factors at the pre-migration phase (e.g., motivation to migrate, preparation for adjustment) may be of equal importance to examine. As a result, the mental health impact of migration has not been fully evaluated. In order to understand the overall psychological impact of the migration process, further research needs to investigate various dimensions of psychological coping resources and social support networks in both pre- and post-migration phases among immigrant cohorts.

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