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Acculturative Stress and Depressive Symptomatology Among Mexican and Mexican American Students in the U.S.: Examining Associations with Cultural Incongruity and Intragroup Marginalization

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Abstract

This study examined associations of intragroup marginalization and cultural incongruity with acculturative stress and depressive symptoms among 155 undergraduate U.S. college students of Mexican heritage. Findings indicate that perceived interpersonal distancing by the family (intragroup marginalization) and perceived lack of cultural fit between the respondent and academic institution (cultural incongruity) had statistically significant direct and indirect effects on depressive symptoms via acculturative stress. Results also show that 39.7 % of the variance corresponding with depressive symptoms was accounted for by intragroup marginalization, cultural incongruity, acculturative stress, and other exogenous variables.

Keywords

Mexican; Depressive symptoms; Stress; Cultural incongruity; Marginalization

According to the National College Health Assessment survey (American College Health Association 2012), depression is among the most prevalent psychological conditions experienced by college students in the United States (U.S.). Findings from this survey indicate that approximately 30 % of college students attending two- and four-year institutions in the U.S. experienced depressive symptoms that had interfered with functioning at some point during the past year. The increase in depressive symptoms among college students was also observed in university counseling centers where university staff had noted an upsurge in the number of students seeking psychological services (Castillo and Schwartz 2013).

Among U.S. college students of Mexican heritage, the largest Hispanic subgroup attending two- and four-year institutions of tertiary education (Fry 2002), the prevalence of depression is not known. Yet, one study found that Hispanic college students reported a higher degree of depressed symptomatology than non-Hispanic White college students, even after controlling for socioeconomic factors (Gore and Aseltine 2003). Despite having a higher prevalence of depressed symptomatology, Hispanic college students seem to seek counseling services at lower rates than non-Hispanic White students (Kearney et al. 2005).

Counseling scholars have suggested that low service utilization by students of Mexican heritage may be due to factors such as minority students perceiving that mental health services are unrelated to their needs (Ramos-Sánchez, and Atkinson 2009) and because of counselors lacking adequate training in culturally sensitive therapy models (Kearney et al. 2005). Furthermore, many college counselors may not be knowledgeable in Mexican (or Hispanic) values and cultural norms and have a limited understanding of ethnocultural determinants of depressive symptomatology (Castillo 2009). Thus, to provide culturally competent services and address the mental health needs of college students of Mexican heritage, it is necessary to identify cultural determinants and the mechanisms through which they exert their influence to improve the understanding and treatment of depressive symptoms with this population.

Guided by the *Transactional Model of Stress and Coping* (TMSC; Lazarus and Cohen 1977; Lazarus and Folkman 1984) and *Marginality Theory* (Dickie-Clark 1966; Park 1928; Stonequist 1935), the aim of this study was to: i) identify culturally-relevant transactions (e.g., ethnocultural marginalization) that may be associated with depressive symptomatology in a sample of Mexican and Mexican American college students; and ii) identify a potential mechanism (e.g., mediator) that may explain those associations.

Existing research on potential psychosociocultural determinants of depressive symptomatology suggests that *acculturation*, a process encompassing changes in attitudes, values, beliefs, and behaviors when an individual from one culture comes in contact with a new culture (Williams and Berry 1991), may be a source of stress associated with depressive symptomatology among Hispanics (Torres 2010). However, various systematic literature reviews show there is no consensus regarding the associations of acculturation with depression and depressive symptomatology. For instance, some studies have found a positive association while others have found a negative association, or no association (Lara et al. 2005; Rogler et al. 1991). One explanation for these mixed findings is that the

construct of “acculturation” is too broad and abstract; therefore, researchers cannot rely on direct associations with acculturation. Instead, researchers need to examine various transactions that might account for the fit between an individual and environmental circumstances (Lazarus 1997).

The Influence of Ethnocultural Transactions

Scholars suggest that the acculturation process may include pressure to acculturate from members of the host culture, as well as pressure from members of the heritage culture against acculturation (Mena et al. 1987; Rodriguez et al. 2002). Consequently, some individuals of Mexican heritage in the U.S. may experience a “double-bind” whereby they are perceived as being “too American” in intracultural interactions with their heritage culture, and “too Mexican” in intercultural interactions with the host culture. Colloquially, this experience has been captured by the phrase *ni de aquí, ni de allá* (nor from here or there). This experience has been articulated by *Marginality Theory* (Dickie-Clark 1966; Park 1928; Stonequist 1935), which proposes that individuals of ethnic minority groups may experience marginal situations, such as being excluded from social interactions among individuals within the heritage or host culture. In turn, marginal situations may generate vulnerability for psychological problems. As such, a point of interest for this study was to examine if and how intracultural and intercultural transactions are associated with depressive symptomatology and with *acculturative stress*; the stress that occurs during the acculturation process (Berry 1998).

Intracultural Transactions

To examine intracultural transactions (i.e., in this case, interactions with other Hispanics) the study tested the effects of *intragroup marginalization*, the perceived interpersonal distancing exhibited by members of the heritage culture when the acculturated individual takes on distinctive characteristics of the host culture (Castillo et al. 2007). According to scholars (Castillo et al. 2007; Tajfel 1981), when a member of a cultural group does not behave in accordance with that group’s norms, the individual is perceived as a threat to the cultural group’s social identity. For instance, a Hispanic person that deviates from Hispanic cultural norms may be marginalized by other Hispanics (Castillo et al. 2007). Experience of intragroup marginalization may be subtle, such as being accused of acting like a member of the host culture or being criticized for not speaking well the language of the heritage culture. However, the experience of being marginalized, particularly by family members who may pressure an individual to demonstrate loyalty to the heritage culture, can be stressful (Castillo et al. 2007; LaFromboise et al. 1993).

Prior research has shown that intragroup marginalization can be a source of stress among immigrant Hispanic college students in the U.S. After controlling for acculturation level and generation status, a study with 188 Hispanic college students showed that a higher perception of familial intragroup marginalization was associated with more acculturative stress (Castillo et al. 2008). Although no empirical studies have been found on intragroup marginalization and its specific association with depressive symptoms, it could realistically be expected that more perceived intragroup marginalization would be associated with a higher degree of depressive symptoms. This association is hypothesized because greater

intergenerational parent–child gaps in acculturation have been linked with elevated depressive symptoms among Asian Americans (Ying and Han 2007), and because of the likely links theoretically between stress and depressive symptomatology. One explanation for these associations is that as a child acculturates to the host culture he or she may adopt norms, beliefs, and practices that compete with those of the heritage culture, and the intergenerational acculturation gaps that follow from this may affect family cohesion and increase stress and depressive symptoms (Fang and Wark 1998; Szapocznik and Kurtines 1993; Tseng and Fuligni 2000).

Intercultural Transactions

To examine intercultural transactions (i.e., interactions with the host culture) this study tested the effects of *cultural incongruity*; the perceived lack of cultural fit between respondents' personal values and the values of their respective academic institutions (Gloria and Robinson Kurpius 1996). It has been suggested that academic environments in the U.S. often reflect the values, beliefs, and behaviors of Eurocentric culture (Castillo et al. 2004, 2006). In turn, some Hispanic students in such settings may feel they have to conceal their heritage culture or adopt the values, beliefs, and behaviors of the Eurocentric culture of the academic environment in order to succeed at higher education in the U.S. (Castillo et al. 2006; Cervantes 1988). Therefore, some Hispanic students may also feel unwelcomed, isolated and more prone to experience cultural incongruity in the academic environment (Cervantes 1988; Gloria and Robinson Kurpius 1996).

Although no empirical studies have been found on associations of cultural incongruity with acculturative stress and depressive symptomatology, research on related constructs suggests that cultural incongruity could be a risk factor. For instance, ethnic minority students, including Hispanics attending academic institutions that are predominantly composed of non-Hispanic White students, may experience the academic environment as being a strain or stressful (Castillo et al. 2004; Ponterotto 1990). Also, Gloria et al. (2012) make the case that stress rooted in challenges within the academic environment (e.g., discrimination and lack of support) may create vulnerability for depression among Hispanic college students. To this end, cultural incongruity has been associated with poor mental health outcomes (Bhugra and Arya 2005). It has been proposed that mismatches in cultural values and expectations between the students' heritage culture and the academic environment can be emotionally taxing and may lead to psychological distress (Castillo and Hill 2004).

Balancing Two Cultures

Intragroup marginalization and cultural incongruity are deemed relevant to the understanding of ethnocultural determinants of depressive symptoms among college students of Mexican heritage in the U.S. Some individuals of Mexican heritage may have to negotiate two sets of cultural expectations; those of their Mexican culture when interacting with family and those of Eurocentric culture when interacting within the academic environment. Although, adopting characteristics of Eurocentric culture may diminish the experience of cultural incongruity in the academic environment, doing so may come at the expense of creating strain in parent–child relationships, which may manifest as intragroup marginalization. This phenomenon may occur more frequently in children of immigrants

(e.g., second generation status) because they typically acculturate at a faster rate than their immigrant parents (Miranda et al. 2006).

The Role of Acculturative Stress

Although a large proportion of studies on acculturative stress among Hispanic populations in the U.S. have focused on immigrant samples, more recent research indicates that it is also experienced by later generations, including U.S.-born Hispanic college students (Castillo et al. 2008). Further, as it has been delineated in a previous section, acculturative stress is a multifaceted construct that is not contingent on one predisposing factor. As such, acculturative stress can be rooted in transactions with both the heritage culture and the host culture (Berry 2006).

On the one hand, acculturative stress may increase as a function of ethnocultural transactions. On the other the hand, the risk of adverse mental health outcomes, such as depression, are hypothesized as likely to increase with greater acculturative stress (Williams and Berry 1991). This proposed association of acculturative stress with depression and depressive symptomatology among Hispanics has been repeatedly supported in empirical research (cf., Hovey and Magaña 2002; Thoman and Surís 2004; Torres 2010), including with college students (Crockett et al. 2007). For instance, one study (Saldaña 1994), found that after controlling for college-related stressors, greater acculturative stress continued to be a statistically significant predictor of psychological distress among Hispanic college students in the U.S. In light of these associations it is logical to hypothesize that acculturative stress may mediate the association between ethnocultural transactions and depressive symptomatology.

Present Study

In the present study, associations of ethnocultural determinants with depressive symptomatology were examined among college students of Mexican heritage in the U.S. The hypothesized associations depicted in Fig. 1 were informed by Marginality Theory and the TMSC. According to Marginality Theory, a negative inter- or intra-cultural transaction will lead directly to a negative adaptational outcome. In contrast, the TMSC, proposes that a person will evaluate the significance of the transaction and determine its personal status as a stressor. The evaluative component of this process is referred to as primary appraisal. TMSC posits that the perception of a transaction as stressful, will lead to a negative adaptational outcome.

Two independent variables were identified as distinctive person-environment transactions in the context being considered. As depicted in Fig. 1, the first of these is an intracultural transaction dynamic in the form of intragroup marginalization, and the second is an intercultural transaction dynamic in the form of cultural incongruity. Acculturative stress is identified as a mediator variable, because it is indicative of stress appraisal that may arise from a cultural transaction (Berry 1998; Rodriguez et al. 2002; Romero and Roberts 2003). Finally, depressive symptomatology is identified as the negative adaptational outcome.

- Hypothesis 1** *Direct Effects* It was hypothesized for the study that greater perceptions of intragroup marginalization, cultural incongruity, and acculturative stress would be associated with more depressive symptomatology. Also, greater perceptions of intragroup marginalization and cultural incongruity would be associated with more acculturative stress.
- Hypothesis 2** *Indirect Effects* Similarly, it was hypothesized that the indirect effects of intragroup marginalization and cultural incongruity would be associated with more depressive symptomatology. However, these associations were hypothesized to be mediated by acculturative stress.

Method

Participants

Participants were recruited in 2008 via an email announcement that provided details of the study's purpose and procedures. The announcement also contained an Internet hyperlink where participants could voluntarily consent and complete an anonymous online survey. Eligible participants had to be enrolled in an institution of tertiary education in the U.S. and self-identify as Hispanic or Latina/o. Of the 341 respondents that completed the survey only participants that self-identified as Mexican or Mexican American ($n=155$) were included in the analyses.

Measures

Demographics—Self-report demographics on academic level, generation status, and gender were used as covariates in the inferential analysis. Academic status options were based on the four-year U.S. system. Respondents identified their generation status by self-selecting one of the following options: *first generation* (born in a Latin American/Ibero American country), *second generation* (born in the U.S.; either parent born in a Latin American/Ibero American country), *third generation* (born in the U.S.; both parents born in the U.S.; and all grandparents born in a Latin American/Ibero American country), *fourth generation* (student and both parents born in the U.S.; at least one grandparent born in a Latin American/Ibero American country; the remainder of the grandparents born in the U.S.), or *fifth generation* (student, parents and all grandparents born in the U.S.). Gender was dummy coded as follows: male=0 and female=1.

Depressive Symptoms—Symptoms of depression were measured with the *Center for Epidemiological Studies Depression Scale* (CES-D; Radloff 1977). While the CES-D alone is not a diagnostic instrument for depression, it reliably measures depressive symptomatology across diverse ethnic groups, including Mexican Americans (Roberts 1980). The 20-item measure, asks respondents to report how they have felt during the past week on a 4-point Likert-type scale, with anchor points of *Rarely or none of the time* (0) to *Mostly or almost all of the time* (3). A sample item is, "I felt sad." Higher scores are indicative of greater depressive symptoms. The coefficient alpha of the CES-D in this study was .92.

Acculturative Stress—Acculturative stress was measured with the *Social, Attitudinal, Familial, and Environmental Acculturation Stress Scale* (S.A.F.E.; Mena et al. 1987). Composed of 24 self-report items, the S.A.F.E. uses a 5-point Likert-type scale ranging from *not stressful* (1) to *extremely stressful* (5). Higher scores indicate higher levels of acculturative stress. A sample item is, “People look down upon me if I practice customs of my culture.” The S.A.F.E. has been found to be a reliable and valid measure of acculturative stress among Hispanic college students (Fuertes and Westbrook 1996). The coefficient alpha of the S.A.F.E. in this study was .90.

Intragroup Marginalization—Perceived intragroup marginalization was measured using the *Intragroup Marginalization Inventory-Family Scale* (IMI-Family; Castillo et al. 2007). The IMI-Family consists of 12 self-report items assessing the degree to which an individual perceives interpersonal distancing by the family. The IMI-Family uses a 7-point Likert-type scale ranging from *never or does not apply* (1) to *extremely often* (7). Higher scores indicate greater perceptions of intragroup marginalization. A sample item is, “Family members tell me that I ‘act White’.” The IMI-Family has been validated with Hispanic undergraduate and graduate students (Castillo et al. 2007). The coefficient alpha in this study was .85.

Cultural Incongruity—Perceived lack of cultural fit between the respondents’ personal values and values of their respective academic institution was measured using the *Cultural Congruity Scale* (CCS; Gloria and Robinson Kurpius 1996). The CCS uses a 7-point Likert-type scale ranging from *not at all true* (1) to *very true* (7). A sample item is, “As an ethnic minority, I feel as if I belong on this campus.” Summed scores range from 13 to 91; however, items were reverse scored in order to interpret higher score as cultural incongruity and conceptualize the construct as a potential stress event. The measure has been validated with Hispanic undergraduate students (Gloria and Robinson Kurpius 1996). The coefficient alpha of the CCS in this study was .87.

Data Analysis

The current study utilized path analysis as the primary data analytic strategy. Preliminary analyses were conducted to ensure data met the requirements of homoscedasticity, normality, linearity, outliers, and multicollinearity. The path analysis was tested using *Full Information Maximum Likelihood* (FIML; Muthén and Muthén 2012), which accounted for missing data. The model was evaluated using five model fit indices (Hu and Bentler 1995; Kline 2005): (a) chi-square test of model fit (χ^2)>.05, (b) comparative fit index (CFI)>.90, (c) Tucker-Lewis Index (TLI)>.90, (d) root mean square error of approximation (RMSEA)<.08, and (e) standardized root means square residual (SRMR)<.08. The RMSEA and SRMR were used as measures of absolute fit, while the CFI and TLI measured incremental fit (Hu and Bentler 1995). Associations tested in the path analysis controlled for academic level, generation status, and gender.

Results

Preliminary Analysis

The sample was composed of men (34.8 %) and women (65.2 %) with a mean of 22.64 ($SD=6.44$) years of age. The distribution of academic level was as follows: freshmen 28.4 %, sophomores 20.6 %, juniors 25.8 %, and seniors 25.2 %. With regard to generation status, 26.5 % were born outside of the U.S., 48.4 % were second generation born in the U.S., 10.3 % third generation, 8.4 % fourth generation, and 6.5 % fifth generation. Table 1 presents the means, standard deviations and bivariate correlations for all variables used in the path analysis. Symptoms of depression had statistically significant correlations with acculturative stress ($r=.56, p=.01$), intragroup marginalization ($r=.37, p=.01$), cultural incongruity ($r=.46, p=.01$), and gender ($r=.21, p=.01$).

Path Analysis

Chi-square test of model fit was not statistically significant, suggesting that the model did fit the data, $\chi^2(n=155, df=2)=3.25, p>.05$. The CFI, TLI, RMSEA and SRMR (0.975, 0.955, 0.059, and 0.04, respectively) all indicated good model fit. As such, it was determined that path coefficients could be interpreted appropriately.

All direct and indirect path coefficients appear in Table 2. Highlighted below are the direct effects that were statistically significant. Higher scores of intragroup marginalization were associated with greater acculturative stress ($\beta=.18, p<.05$) and symptoms of depression ($\beta=.16, p<.05$). Similarly, higher scores of cultural incongruity were associated with greater acculturative stress ($\beta=.43, p=.001$) and symptoms of depression ($\beta=.20, p=.01$).

Consistent with prior research, this study found that higher scores of acculturative stress were associated with higher depressive symptoms ($\beta=.38, p=.001$). Although generation status did not have a statistically significant association with symptoms of depression, results indicate that later generations experienced less acculturative stress ($\beta=-.20, p=.01$).

Indirect Effects

The indirect effects of intragroup marginalization ($\beta=.07, p<.05$) and cultural congruity ($\beta=.17, p=.001$) on depressive symptoms were statistically significant, adding to the total effect of each of these constructs on depressive symptoms ($\beta=.23, p=.01$ and $\beta=.37, p=.001$, respectively). Lastly, the additive effects of all exogenous variables showed that the model accounted for 33.2 % of the variance in acculturative stress and 39.7 % of depressive symptoms ($R^2=.33.2, .39.7$, respectively).

Discussion

This study examined associations of familial intragroup marginalization and cultural incongruity with depressive symptoms among college students of Mexican heritage in the U.S. A key objective of the study was to test if acculturative stress mediated the associations of intragroup marginalization and cultural incongruity with depressive symptoms. As predicted in the first hypothesis, higher scores of cultural incongruity and intragroup marginalization were associated with higher scores of acculturative stress and depressive

symptoms. Also, participants with higher scores of acculturative stress reported having greater symptoms of depression. Data also supported the second hypothesis, which showed that acculturative stress mediated the associations of intragroup marginalization and cultural incongruity with symptoms of depression.

Findings from the mediation analysis suggest two pieces of information. First, Mexican and Mexican American students that perceived more distancing by family members were more likely to experience higher levels of acculturative stress. In turn, that association was related to more symptoms of depression. To our knowledge, this is the first study that empirically links intragroup marginalization with symptoms of depression. Second, students that perceived a greater lack of fit between their personal cultural values and the values of the academic environment reported more acculturative stress. In turn, that association served as a pathway for higher symptoms of depression.

Implications for Counselors

To help college students of Mexican heritage in the U.S. meet their psychological needs, counselors and other mental health service providers need to recognize that this population may experience culturally related stressors not only from the host culture, but also from the heritage culture. Counselors in university settings are encouraged to be aware of competing values, cultural norms, and expectations between the academic environment and Mexican culture; and how attempting to balance the demands of both cultures can lead to stress or other adverse effects on mental health.

Intervention Strategies in Regard to Intragroup Marginalization—Mental health service providers at U.S. universities may consider a formal assessment of intragroup marginalization when working with students of Mexican heritage that present with elevated symptoms of depression. Following the assessment, providers can implement evidence-based treatment interventions such as the *Family Effectiveness Training* (Szapocznik et al. 1989). This intervention goes beyond addressing just the student acculturating more rapidly than the parent(s). Instead, it deals with differential acculturation as a systemic family issue that needs to be addressed at a family interactional level.

Interventions can also work on cognitive restructuring of beliefs that the student is being disloyal to their heritage group. Such methods have been found to be effective with Hispanic clients (Organista and Muñoz 1996). Students may also benefit from learning positive coping strategies to manage intragroup marginalization and prevent potential conflicts. For instance, research with college students suggests that using affiliative humor (i.e., a response to teasing that makes a joke out of the source of the teasing) when encountering teasing is more effective than ignoring or using aggressive humor (Bias et al. 2005). Lastly, mental health service providers may benefit from becoming familiar with current recommendations to address intragroup marginalization and acculturative family distancing (see Bacallao and Smokowski 2005; Castillo 2009; Hwang 2006).

Intervention Strategies in Regard to Cultural Incongruity—Mental health service providers are also encouraged to assess cultural incongruity with the academic institution. One practical strategy to address difficulties associated with cultural incongruity is to

introduce students to on-campus Hispanic organizations that may help integrate them into the academic environment. Similarly, service providers can enhance students' social support networks in the academic institution by helping to find personnel on campus that can serve as mentors (Gloria and Rodriguez 2000). Mental health service providers can address cultural incongruity directly by asking students questions on issues they encounter when interacting with the academic environment and familiarizing themselves with detailed recommendations to manage cultural incongruity (see Bacallao and Smokowski 2005; Gloria and Rodriguez 2000). Gloria (1997) also points out that institutions of tertiary education in the U.S. may target perceptions of cultural incongruity among students of Mexican heritage by creating an academic environment that is more welcoming, supportive and culturally relevant. One strategy is to create a stronger sense of community through access to other students and faculty of Mexican heritage. Another strategy is to develop or tailor exiting programs that help students of Mexican heritage meet their needs through the office of residential life, tutoring services, and the office of admission and retention.

Strengths, Limitations and Future Directions

Despite some limitations, the current study is strengthened by its use of the TMSC and Marginality Theory to guide the proposed associations. Second, the use of a path analysis allowed each hypothesized path in the model to be tested simultaneously while controlling for the effects of other paths included in the model. Third, intracultural and intercultural transactions were context specific. For instance, the perception of intragroup marginalization was specific to familial interactions and cultural incongruity was specific to perceptions of the academic environment.

It is also important to recognize the study's limitations to guide future research in this field of study. First, due to the cross-sectional design, a causal or directional order of the associations found cannot be made. Arguably the most effective strategy to address this limitation is to implement a longitudinal research design that examines the effects of intragroup marginalization and cultural congruity in relation to depressive symptoms across time.

Second, although gender was not a focus of the study, scholars suggest that the acculturation process may differ for men and women (Castillo et al. 2010). As such, future research may examine the moderating role of gender in the associations found in this study. Given that a significant majority of the sample in this study was female, the potential moderating effect of gender could not be tested.

Third, Hispanics are a heterogeneous panethnic group; as such the study only included participants of Mexican heritage living in the U.S. Consequently, findings from this study may not generalize to other Hispanic subgroups or to Hispanics living outside of the U.S. Lastly, the study did not account for available coping resources (e.g., social support) that may have influenced the degree of depressive symptoms. Therefore, future studies may examine the moderating role of coping resources that may buffer the effect of stress on symptoms of depression (Cohen 2004).

Conclusion

This study adds to the literature on mental health among college students of Mexican heritage in the U.S. because it demonstrates that transactions with both the Hispanic culture and Eurocentric culture are potentially associated with stress; consequently creating two paths that may lead to higher symptoms of depression. These findings lend empirical support to the notion of a cultural “double bind”, meaning that college students of Mexican heritage in the U.S. may feel pressure to exhibit values, beliefs, and behaviors of both the heritage and host cultures; yet perceive that they are not meeting the cultural expectations of either.

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Fig. 1.

Conceptual model of acculturative stress mediating the associations of cultural incongruity and intragroup marginalization with depressive symptoms. All paths in the model are hypothesized to be positive

Table 1Intercorrelations, Means, and Standard Deviations for Variables Used in Path Analysis ($n=155$)

Variable	1	2	3	4	5	6	7
1. Depressive symptoms	–	.21**	-.10	-.09	.56**	.37**	.46**
2. Gender		–	-.05	-.06	.17*	.08	.09
3. Academic level			–	-.08	-.02	-.09	.09
4. Generation status				–	-.18*	.14	-.02
5. Acculturative stress					–	.33**	.51**
6. Intragroup marginalization						–	.38**
7. Cultural incongruity							–
<i>M</i>	16.92	1.65	2.48	2.20	31.04	15.66	32.66
<i>SD</i>	12.26	.48	1.15	1.15	18.36	13.22	14.56

* $p < .05$ ** $p < .01$

Table 2Standardized coefficient estimates of variables included in the path analysis ($n=155$)

	S	SE
Direct effects on depressive symptoms		
Gender → Depressive symptoms	.11	.06
Academic level → Depressive symptoms	-.09	.06
Generation status → Depressive symptoms	-.03	.07
Acculturative stress → Depressive symptoms	.38***	.07
Intragroup marginalization → Depressive symptoms	.16*	.07
Cultural incongruity → Depressive symptoms	.20**	.08
Direct effects on acculturative stress		
Gender → Acculturative stress	.10	.07
Academic level → Acculturative stress	-.06	.08
Generation status → Acculturative stress	-.20**	.07
Intragroup marginalization → Acculturative stress	.18*	.07
Cultural incongruity → Acculturative stress	.43***	.07
Indirect effects on depressive symptoms		
Intragroup marginalization → Depressive symptoms	.07*	.03
Cultural incongruity → Depressive symptoms	.17***	.04
Total effects on depressive symptoms		
Intragroup marginalization → Depressive symptoms	.23**	.08
Cultural incongruity → Depressive symptoms	.37***	.07

*
 p .05**
 p .01***
 p .001