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## Feeling Unsafe at School: Southeast Asian American Adolescents' Perceptions and Experiences of School Safety

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### Abstract

School safety impacts mental health and educational attainment particularly among vulnerable populations such as refugee youth. Using data from the Children of Immigrants Longitudinal Study (CILS), this study examines the mental health impact of perceptions and experiences that compromise school safety among Southeast Asian American adolescents ( $N = 645$ ). Higher rates of perceptions and experiences that violated students' feelings of safety at school were associated with decreased self-esteem and increased levels of depressive symptoms. Hierarchical regressions indicate that in light of perceptions and experiences of feeling unsafe at school, bicultural orientation, importance of identity, and family cohesion have an additive effect in predicting self-esteem and family cohesion has an additive effect with depressive symptoms though no moderation effects were found.

Violence and bullying in schools contributes to lasting mental health repercussions and suicidality and has elicited increased attention by media, policy makers, school administrators, educators, psychologists, and parents. Fears of being bullied and feeling unsafe at school are leading causes of students missing school (Kearney, 2008) and can have psychological consequences enduring through the lifespan (Turner, Finkelhor, & Ormrod, 2006).

Though all students may be at risk of feeling unsafe at school, some populations such as refugees may be more vulnerable to these experiences. Southeast Asians including Vietnamese, Cambodians, Laotian, Hmong, and Iu Mien sought refuge in the U.S. beginning in 1975 with the fall of Saigon and the uprising of oppressive regimes in Southeast Asia (Chung & Okazaki, 1991; Hsu, Davies, & Hansen, 2004; Takaki, 1998). Southeast Asian Americans' experiences are framed within the context of war and enduring trauma. Often swept under the umbrella of the "model minority," their unique stressors are often overshadowed by perceptions of their inherent intelligence and success (Cooc & Gee, 2014; Ngo & Lee, 2007). Factors such as premigration trauma, intergenerational transmission of trauma, and disrupted familial and community relationships associated with the war and subsequent migration have a lasting impact on mental



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health, educational, and socioeconomic outcomes of Southeast Asian Americans (Chung & Bemak, 2007; Ying & Han, 2008; Kim-Ju, Maeda, & Maffini, 2009; Marshall, Schell, Elliott, Berthold, & Chun, 2005). According to the U.S. Community Survey (2014), poverty rates among Southeast Asian American groups are higher than the national average and educational attainment is lower.

This study aims to better understand factors that contribute to Southeast Asian American students feeling unsafe at school and how those experiences impact mental health. Furthermore, this study examines the protective roles of culturally salient variables—bicultural orientation, ethnic self-identification, and family cohesion. Greater understanding of experiences of school safety can better inform policy and prevention programs addressing the specific needs of Southeast Asian American youth.

### School Safety

Though sent to school to focus on their education, many students have experiences that cause them to feel unsafe on campus. Bullying, victimization, and witnessing or engaging in violence or other physical acts of aggression may contribute to students feeling unsafe at school. According to the National Center for Education Statistics (2014), youth experience more victimization and violence at school than off-campus (Robers, Kemp, Rathbun, & Morgan, 2014). In 2011, 28% of students ages 12-18 reported being the victim of bullying at school which includes: (a) verbal harassment such as being made fun of, the subject of rumors, intentionally excluded from activities, having property intentionally destroyed, and (b) physical harassment such as being pushed, shoved, or spit on. Rates of bullying are highest during middle school (6<sup>th</sup>-8<sup>th</sup> grades) and decrease through high school. Despite the steady decline in bullying with maturity, coping skills are often underdeveloped in adolescence leaving students more susceptible to negative mental health outcomes that can persist through adulthood (Brooks, Harris, Thrall, & Woods, 2002; Elias & Zins, 2003; Macmillan, 2001; Macmillan & Hagan, 2004; Turner et al., 2006).

Feeling unsafe and fearing experiences of violence and victimization at school impact many students' mental health and well-being. A recent study found that students who feel unsafe at school are more likely to have mental health issues than students who feel safe (Nijs et al., 2014). Similarly, a study by Glew, Fan, Katon, and Rivara (2008) found that students who reported engaging in bullying behaviors, those who were victims of bullying, and those who endorsed both (bully-victims) were more likely to feel unsafe at school and reported more sadness than those who denied any involvement (bystanders). Students who self-identified as victims and bully-victims had lower self-esteem than students who were identified as bullies or bystanders (Glew et al., 2008). Furthermore, students who experience victimization report higher rates of anxiety, depression, anger, suicidal ideation, and are more likely to engage in behaviors involving harm to self and others than those who do not (Boney-McCoy & Finkelhor, 1995; Christiansen & Evans, 2005; Flannery, Singer, & Wester, 2001; Flannery, Wester, & Singer, 2004; Hawker & Boulton, 2000; Swearer, Song, Cary, Eagle & Mickelson, 2001). Likewise, students who witness violence at school report greater trauma symptoms than those who experience minimal or no amounts of violence at school (Flannery et al., 2004). Exposure to school violence can elicit enduring fear of subsequent experiences of victimization and violence, which can impact students' academic and social attainment (Peguero, 2009). Though particular groups may be perceived as being more at-risk for feeling unsafe at school, this experience transcends all groups.

Asian Americans are often stereotyped as high achievers and may be misperceived as being exempt from negative school experiences such as victimization and feeling unsafe. One study examined national trends of victimization and found that Asian American adolescents were less likely to experience victimization at school than other racial groups; however, they were more likely to experience race- or ethnicity-related relational aggression than other groups (Cooc & Gee, 2014). Peguero (2009) explored experiences of victimization among Asian American and Latino students using the Education Longitudinal Study of 2002 (ELS) and found that first generation respondents were more likely to feel afraid at school than U.S.-born students. Additionally, first and second generation Asian American students were more likely to experience victimization than later generations. In a follow-up study focusing on Asian American and White students in the ELS dataset, Koo, Peguero, and Shekarkhar (2012) found that when they controlled for gender and immigrant status, Asian American youth were more likely to experience violent victimization at school than the White students. Findings regarding gender differences in experiences of victimization among Asian Americans remain conflicted with some finding that females experience more victimization (Koo et al., 2012), some reporting males have more experiences of victimization and harassment due to their perceived weakness and small stature (Qin, Way, & Rana, 2008); and others finding no gender differences (Cooc & Gee, 2014). Similarly, the research on victimization among high achieving Asian Americans is mixed with some reporting that high achieving Asian American students are more likely to be bullied (Peguero & Williams, 2013), and others finding they are less likely (Cooc & Gee, 2014). The conflicting findings reflect the heterogeneity of Asian Americans and the need to understand the nuanced experiences of Asian American subgroups.

Research specifically examining Southeast Asian American students' experiences of victimization and exposure to violence is limited. Le and Wallen (2009) examined violent victimization (e.g., being threatened, physically harmed, shot, or stabbed) among three Southeast Asian American groups (Vietnamese, Cambodian, Lao/Mien) and Chinese American youth. They found that rates of emotional and physical victimization among Southeast Asian youth were three times higher than among Chinese youth whose statistics are congruent with national averages of victimization among Asian Americans. Furthermore, they found that family engagement decreased the risk of victimization; males and those who were highly acculturated were more likely to experience victimization. Ho (2008) studied the experiences of Southeast Asian adolescents who witnessed community violence and found that those who were exposed to violence had higher rates of trauma symptoms and externalizing behaviors. This study also examined the role of cultural orientation in relation to violence exposure and trauma symptoms and found that when respondents had a higher bicultural orientation, they reported fewer trauma symptoms and externalizing behaviors regardless of the amount of trauma or stress they had experienced.

As reviewed, extensive research demonstrates how feeling unsafe can impact students' mental health and well-being; however, the literature examining experiences of school safety among Southeast Asian American youth is sparse. Greater understanding of the experiences of this vulnerable population as well as the psychological and systemic factors that may reduce pernicious mental health outcomes associated with negative school experiences may help inform prevention and intervention strategies.

## Developmental-Systemic Theory

When exploring the experiences of refugee youth, it is important to consider both intrapersonal pieces associated with their psychological and cultural development as well as interpersonal and contextual factors such as their family and community. The developmental-systemic theory (Cairns, 1979; Ford & Lerner, 1992; Magnusson, 1988) conceptualizes these two pieces as interconnected and conjointly influential and can serve as a framework to understand school safety among Southeast Asian American youth. Previous research has applied this theory to bullying and victimization to capture both internal and external experiences of adolescent development (Maffini, Wong, & Shin, 2011; Pepler, 2006). For the purpose of this study, the developmental piece will capture bicultural orientation. Family cohesion will be used to examine the systems dimension.

**Bicultural orientation.** Immigrants and refugees navigate between the receiving culture (e.g., mainstream U.S. culture) and their culture-of-origin. Acculturation refers to the psychological and cultural adaptation to the receiving culture (Redfield, Linton, & Herskovits, 1936). Conversely, enculturation describes preserving one's culture-of-origin amid the receiving culture (Herskovits, 1948). The intermixing of the two cultures is referred to as biculturalism and impacts behaviors, relationships, psychological, and affective processes (LaFromboise, Coleman, & Gerton, 1993). Many immigrants and refugees preserve their culture-of-origin at home and in their communities; thus, their children and even later generations continue to navigate two cultures and may identify as bicultural.

Previous research has shown that biculturalism is associated with positive outcomes across several domains. In terms of psychological well-being, biculturalism is associated with positive psychological adjustment, higher self-esteem, life satisfaction, prosocial behaviors, and reduced depressive and anxiety symptoms (Chen, Benet-Martínez, & Bond, 2008; David, Okazaki, & Saw, 2009; Schwartz, Zamboanga, & Jarvis, 2007). Furthermore, bicultural individuals also have greater cognitive complexity than their monocultural counterparts (Benet-Martínez, Lee, & Leu, 2006). In terms of education, Feliciano (2001) found that bicultural students have lower dropout rates than their monocultural counterparts. Bicultural individuals who are able to utilize strengths and resources from both their community and mainstream culture experience better educational and socioeconomic success than those who are solely acculturated or enculturated (Feliciano, 2001; Portes & Rumbaut, 2001). The research on Southeast Asian American youth supports these findings. Evidence demonstrates that U.S. cultural capital associated with acculturation help families understand and navigate the U.S. education system, which contributes to academic success for Southeast Asian American youth; however, greater levels of enculturation promote more positive behaviors and reduce negative behaviors such as delinquency (Ngo, 2006; Ngo & Lee, 2007; Yang, 2004; Zhou & Bankston, 1998). Therefore, optimal success in the U.S. education system requires both high acculturation and enculturation—otherwise considered a bicultural orientation.

Among Southeast Asian American youth, research has demonstrated that having a bicultural orientation is a protective factor particularly related to violence. One study found that Southeast Asian American adolescents with a bicultural orientation were more resilient than those who were either highly acculturated or highly enculturated after witnessing domestic violence (Sirikantraporn, 2013). Similarly, Ho (2008) found that for Southeast Asian American youth who were exposed to community violence, having a bicultural orientation was associated with lower

trauma symptoms. Positive outcomes associated with biculturalism may serve as protective factors in light of challenges associated with school safety.

**Family cohesion.** Historically, many Southeast Asian cultures were influenced by Confucius values where one's identity is defined in the context of the family and an individual's success directly reflects upon the family (Kibria, 1993; Xiong, Detzner, & Retting, 2001). The preservation of these values continues in the U.S. for many Southeast Asian families. Despite immense stress associated with refugee experiences, researchers note that family connectedness and cohesion and adherence to family values are associated with improved outcomes among Southeast Asian American youth (Ngo & Lee, 2007; Zhou & Bankston, 1998). Previous research found that for Southeast Asian American adolescents, family cohesion was associated with adolescents' increased levels of adolescent self-esteem and decreased depression (Ying & Han, 2008). In light of negative experiences associated with victimization, violence, and feeling unsafe at school, family cohesion may serve as a protective factor reducing negative mental health outcomes among Southeast Asian American youth.

## **Present Study**

The literature reviewed demonstrates the pernicious and enduring impact of violence and victimization on students. Using the second wave of data from the Children of Immigrants Longitudinal Study (CILS) collected in 1995, the study aims to provide more insight into experiences related to school safety among Southeast Asian American youth. Specifically, this study examines how perceptions of the school environment and experiences that make students feel unsafe at school impact mental health outcomes as well as how cultural factors may moderate these relationships. Based on the extant literature, it was hypothesized that higher rates of perceptions and experiences that contribute to students feeling unsafe at school would be associated with increased reports of mental health difficulties (e.g. lower rates of self-esteem and higher rates of depressive symptoms). Additionally, having a bicultural orientation, ethnic self-identification, and family cohesion were hypothesized to serve as protective factors for Southeast Asian American adolescents making the effects of negative school environment less detrimental to their psychological well-being.

Though the data were collected 20 years ago, school violence continues to be a problem and contributes to enduring mental health repercussions. The variables examined (school safety, mental health outcomes, bicultural orientation, importance of identity, and family cohesion) continue to be relevant among today's youth. Examining a large sample of Southeast Asian American youth may provide insights into the experiences of this population so as to better inform future research and intervention programs.

## **Method**

### **Participants and Procedures**

The Children of Immigrants Longitudinal Survey (CILS) was conducted in three waves from 1991 to 2001. The study targeted youth with at least one parent who was foreign-born or youth who were born abroad and came to the U.S. at a young age. Participants resided in California or Florida

during the first wave of data collection (Portes & Rumbaut, 2001). Experiences of school safety were measured in Wave II collected in 1995.

From the larger sample, 646 participants (50.3% female) were selected based on culture-of-origin and age to capture the experiences of Southeast Asian American teenagers rather than young adults. Participants reported their cultural origin to be Vietnamese ( $n = 358$ ), Laotian ( $n = 146$ ), Cambodian ( $n = 89$ ), and Hmong ( $n = 53$ ). Birth years ranged from 1976 and 1979; thus participants were 16 to 19 years of age ( $M = 17.91$ ,  $SD = .76$ ) at the time of the survey. Examining the proportion of their lives spent in the U.S. (0 = newly arrived to the U.S., 1 = entire life spent in the U.S.), most participants had spent more than half their life in the U.S ( $M = .73$ ,  $SD = .22$ ).

## Measures

**School safety.** Two components are used to capture school safety—perceptions and experiences that violated feeling safe at school. The variable ‘perceptions of school safety’ aims to capture the perceived experience of the school environment rather than specific physical acts; students may feel unsafe at school though they are not directly victimized or engage in violence themselves. The variable was created using a mean score of four items examining the extent to which students: *did not feel safe at school*, *other students caused disruptions in learning*, *presence of gangs*, and *inter-racial violence*. Responses consisted of a 4-point Likert-type scale ranging from *agree a lot* (1) to *disagree a lot* (4). Items were reverse coded such that higher mean scores indicated that students felt more unsafe at school. Experiences that compromised feelings of school safety included four items measuring the frequency that participants were *offered drugs*, *had something stolen*, *were threatened*, or *engaged in a physical fight while at school*. Respondents indicated the number of times in the past year they had these experiences (never, once or twice, or more than twice). Higher mean scores indicate greater rates of experiences that compromised school safety. All items examining perceptions and experiences of school safety were positively and significantly correlated with the item “*I don’t feel safe at this school.*”

**Bicultural orientation.** Two items assessing bicultural orientation and strength of ethnic identification were used. Bicultural orientation was created from an item where students were asked to write-in their ethnic self-identification. Respondents who provided a hyphenated response (e.g., Vietnamese American or Vietnamese-American) were coded as having a bicultural orientation ( $n = 152$ ; Portes & Rumbaut, 2001). Regardless of their ethnic self-identification, participants were asked “*And how important is this identity to you that is what you call yourself?*” Their choices were *not important*, *somewhat important*, or *very important*. Responses were dichotomously coded to compare those whose identity was ‘*very important*’ to others.

**Family cohesion.** Family cohesion was created using the mean of three items examining how close the respondent feels to his/her family. Questions were prefaced with, “*How often is each of the following true about your immediate family (the people you live with)?*” A sample item is, “*Family members like to spend free time with each other.*” Responses ranged from *Never* (1) to *Always* (5). The Cronbach’s alpha for this scale was .83.

**Mental health.** Self-esteem and depressive symptoms served as criterion variables. Self-esteem was assessed through a mean score of the 10-item Rosenberg Self-Esteem Scale (Rosenberg 1965). Items were assessed using a four-point Likert-type scale ranging from *agree a lot* (4) to *disagree a lot* (1). A sample item is “*I feel that I have a number of good qualities.*”

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Higher scores indicate higher self-esteem. The reliability score for this scale was .81. Previous studies have found the Rosenberg Self-Esteem Scale to be valid for use with Asian Americans (Ross, Xun, & Wilson, 2002; Yanico, & Lu, 2000). Depressive symptoms were measured using the mean score of four items from the Center for Epidemiologic Studies-Depression (CES-D) (Melchior, Huba, Brown, & Reback, 1993). Items examined frequency of symptoms ranging from *rarely* (1) to *most of the time* (4). A sample item is “*I felt depressed.*” Cronbach’s alpha for this scale was .75. Previously, Ying and Han (2007) used this abbreviated CES-D with Southeast Asian American adolescents and found that higher rates of perceived intergenerational and intercultural conflict with parents was associated with greater depressive symptoms. In previous analyses by Portes and Rumbaut (2001), Southeast Asians were found to have lower self-esteem and higher rates of depression than the other immigrant groups assessed in this dataset.

### Data Analysis

A hierarchical regression was employed to examine the relationship between school safety and mental health as well as the possible moderating roles of bicultural orientation, importance of identity, and family cohesion. Separate models were run for the criterion variables, self-esteem and depressive symptoms. In step 1, significant demographic variables in the preliminary analyses were entered. Examining multicollinearity (Allison, 1999), proportion of life was removed from the final models because it was too closely related to age and bicultural orientation. Step 2 contained perceptions and experiences of issues related to school safety; and step 3 included bicultural orientation, importance of identity, and family cohesion. Finally, in step 4, the interaction effects between the main study variables in steps 2 and 3 were entered. All continuous predictor variables were standardized to reduce multicollinearity (Frazier, Tix, & Barron, 2004).

### Results

Means, standard deviations, and intercorrelations of continuous variables are presented in Table 1. Results showed that 60% of respondents reported having had at least one experience contributing to reduce school safety (e.g., were offered drugs, had something stolen, were threatened, or engaged in a physical fight). Bivariate correlations demonstrated that age was not significantly associated with perceptions or experiences of school safety; however, those who had spent more of their life in the U.S. reported having more experiences that compromised school safety than newer immigrants. Respondents with greater family cohesion reported significantly lower rates of negative experiences at school than students with lower family cohesion.

Using one-way ANOVAs to examine dichotomous variables, males were significantly more likely to perceive ( $M = 2.57, SD = .64$ ) issues related to school safety than females ( $M = 2.45, SD = .65$ ),  $F(1, 570) = 5.11, p < .05$ . Males were also more likely to experience issues compromising school safety ( $M = .40, SD = .42$ ) than females ( $M = .20, SD = .26$ ),  $F(1, 571) = 47.48, p < .001$ . Examining bicultural orientation, there were no significant differences in perceptions and experiences of issues related to school safety among those who identified as bicultural and those who did not. Finally, for importance of ethnic self-identification,  $F(1, 570) = 3.65, p = .056$ , respondents who viewed their ethnic self-identification as ‘*very important*’ were slightly more likely to perceive more issues related to school safety ( $M = 2.55, SD = .65$ ) than those who did not ( $M = 2.45, SD = .64$ ).



**Table 1***Means, Standard Deviations, and Intercorrelations among Continuous Variables (N = 646)*

	Range	M (SD)	1	2	3	4	5	6	7
Age	16.00-19.00	17.91 (0.76)	–	-.30***	.03	-.03	.07	-.09*	.06
Proportion of Life in U.S.	.00-1.00	.73 (0.22)		–	-.18***	.07	.13	.22***	-.02
Family Cohesion	1.00-5.00	3.47 (0.98)			–	-.05	-.11	.19***	-.22***
Perceptions	1.00-4.00	2.51 (0.65)				–	.27***	-.17***	.12**
Experiences	.00-2.00	.30 (0.36)					–	-.11*	.14**
Self Esteem	1.00-4.00	3.17 (0.52)						–	-.39***
Depressive symptoms	1.00-4.00	1.66 (0.63)							–

Note. \* $p < .05$ , \*\* $p < .01$ , \*\*\* $p < .001$

Results from hierarchical regressions are presented in Table 2. All demographic and main study variables significantly predicted self-esteem in the first regression model. Males and younger students reported greater self-esteem than females and older students. Higher rates of perceptions and experiences of feeling unsafe at school were significantly associated with lower self-esteem. Having a bicultural orientation, ethnic self-identification being important, and greater family cohesion all significantly predicted higher levels of self-esteem. However, none of the interactions were significant.

For depressive symptoms, females and older students had significantly higher levels of depressive symptoms than males and younger students. Greater perceptions and experiences that compromised school safety were significantly associated with increased experiences of depressive symptoms. Additionally, greater family cohesion predicted lower depressive symptoms though neither bicultural orientation nor importance of identity were significant. Similar to self-esteem, none of the interactions were significant.

**Table 2***Hierarchical Regression Model Examining Self-Esteem and Depressive Symptoms*

	Self-Esteem				Depression					
	B	SE	$\beta$	$R^2$	$\Delta R^2$	B	SE	$\beta$	$R^2$	$\Delta R^2$
Step 1				.02	.02*				.02	.02**
Sex	.09	.04	.09*			-.16	.05	-.12**		
Age	-.05	.02	-.10*			.05	.03	.09*		
Step 2				.06	.04***				.06	.03***
Perceptions of Feeling Unsafe at School	-.09	.02	-.16***			.06	.03	.10*		
Experiences Compromising School Safety	-.05	.02	-.09*			.09	.03	.14**		
Step 3				.11	.05***				.10	.04***

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Bicultural Self-Identification	.11	.05	.09*			-.02	.06	-.02		
Ethnic Self-Identity Importance	.13	.04	.12**			-.04	.05	-.03		
Family Cohesion	.08	.02	.16***			-.12	.03	-.20***		
Step 4				.12	.01				.10	.01
Bicultural Self-Identification X Perceptions	.06	.05	.06			-.03	.06	-.02		
Bicultural Self-Identification X Experiences	-.001	.05	-.001			-.09	.07	-.06		
Importance of Ethnic Self-Identity X Perceptions	-.02	.05	-.04			-.03	.05	-.04		
Importance of Ethnic Self-Identity X Experiences	-.05	.05	-.07			-.05	.05	-.06		
Family Cohesion X Perceptions	.03	.02	.05			-.01	.03	-.02		
Family Cohesion X Experiences	-.004	.02	-.01			.002	.03	.004		

*Note.* *B* refers to the unstandardized coefficients, and  $\beta$  refers to the standardized coefficients. Sex: Female = 0, Male = 1; Bicultural Self-Identification = 1, Monocultural Self-Identification = 0; Ethnic Self-Identity Very Important = 1, Somewhat or Not Important = 0.

\* $p < .05$ , \*\* $p < .01$ , \*\*\* $p < .001$

## Discussion

This study examined the relationship between school safety and mental health outcomes among Southeast Asian American adolescents. Preliminary analyses demonstrated sex differences where males reported greater perceptions and experiences that made them feel unsafe at school than females. These findings are similar to previous research that found Southeast Asian American males were more likely to experience violent victimization than females (Le & Wallen, 2009). Additionally, respondents who had spent more of their life in the U.S. reported having more of experiences that compromised school safety than those who had spent less of their life in the U.S. This is contrary to findings by Koo et al. (2012) who noted that immigrant youth were more likely to report victimization at school than U.S.-born participants. The conflicting findings reflect the need for more robust measures that capture the complexities of cultural adjustment associated with length of time in the U.S. Additionally, feeling unsafe at school through both perceptions and experiences was associated with lower self-esteem and greater levels of depressive symptoms.

These findings indicate the impact that feeling unsafe can have on adolescents beyond the school environment; those who feel unsafe at school experience repercussions affecting their overall mental health and well-being. A recent study found similar results on a large sample of Dutch adolescents demonstrating that feeling unsafe at school can impact broader mental health issues among youth (Nijs et al., 2014).

Guided by the developmental-systems theory (Cairns, 1979; Ford & Lerner, 1992; Magnusson, 1988), this study examined possible protective factors—bicultural orientation, importance of ethnic self-identification, and family cohesion. All three variables were significantly associated with greater self-esteem. Higher levels of reported family cohesion was also significantly associated with lower levels of depressive symptoms. However, none of these variables were significant moderators. These findings indicate that these variables may not negate the pernicious effects of feeling unsafe at school, but they do have an additive effect impacting mental health outcomes. In other words, regardless of how unsafe students felt at school, greater bicultural orientation, importance of ethnic identity, and family cohesion were related to better mental health. These findings are similar to previous research done by Ho (2008) who found that bicultural orientation was associated with reduced negative mental health outcomes in light of community violence, though it was not a significant moderator in the relationship. Considering the developmental-systems theory, greater focus on psycho-cultural factors such as bicultural orientation and ethnic identity complemented by systems factors such as family cohesion can serve as protective factors to reduce negative mental health outcomes in light of contextual stressors. Creating programs that incorporate families and promote family cohesion and foster space for students to explore their cultural identities may help to promote better mental health and well-being among Southeast Asian American youth.

### **Strengths**

This study is the first to examine experiences of school safety among Southeast Asian American youth. Though often associated with a stereotypical portrayal of Asian American success, these youth have different historical and present-day experiences from other Asian American groups and may be at-risk of school safety concerns due to varied access to resources and safe schools. Southeast Asians are a growing part of the U.S. population and greater awareness of their experiences will help foster positive youth development in light of environmental and systemic challenges they may incur. Furthermore, this study focused on factors salient to this population—bicultural orientation, strength of ethnic self-identification, and family cohesion. With growing issues related to school safety across the U.S., greater awareness of protective factors that may be used to improve mental health can contribute to a healthier student body both by helping students cope with negative experiences and reducing the likelihood that students will engage in acts that compromise school safety.

### **Limitations & Future Research**

Though this dataset captures important information about the experiences of children of immigrants and refugees, the data were collected twenty years ago. Unfortunately, few large datasets capture information specific to Southeast Asian American youth. Future research examining the experiences of Southeast Asian American youth amidst current school environments may better reflect the changing socio-cultural context of the U.S. Additionally, the

measures of bicultural orientation and importance of ethnic identity were narrow and limited. Previous research has demonstrated the protective roles of biculturalism and ethnic identity development; therefore, future research using more robust measures of these variables may aid in providing more insight into how these factors serve in protective roles for Southeast Asian American youth in spite of ongoing contextual stressors such as school violence. Future research would also benefit from greater understanding of the long term psychological effects of school safety on Southeast Asian Americans.

In the 1980s and 1990s, there was surge of literature on Southeast Asian adaptation to and experiences in the U.S. soon after their arrival. Though their numbers continue to grow in the U.S. (U.S. Census, 2014), research examining their experiences has not reflected this growth. Furthermore, Southeast Asian Americans are often lumped in with other Asian American groups despite having different historical, immigration, and social experiences. More information about the specific experiences and needs of this population can better inform prevention and intervention programs for these youth.

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