Nearly half of the Hmong population (46%) in the United States is under 18 years old.

- U.S. Census Bureau, 2006-08 American Community Survey 3-year estimates

Introduction

The United States is home to more than 170,000 Hmong immigrants; most live in Minnesota, Wisconsin, and California. Arriving over the past four decades, many Hmong immigrants have endured traumatic and violent experiences. More recent Hmong immigrants, especially youth, may have never experienced life outside a refugee camp. In the United States, they have built new lives in a world that is unfamiliar and confusing.

As is common among immigrants, the Hmong who arrive as adults have more life experience and work to hold on to the customs, spiritual beliefs, values, and roles of the traditional Hmong culture, while the youngest quickly learn English and more readily adapt to their new surroundings. For these youth and children born to Hmong immigrants, being caught between two worlds – the mainstream United States culture and the Hmong culture – often causes stress and can negatively impact their mental well-being. This is especially true as children reach adolescence.

Among Southeast Asian immigrant youth, females are more likely to experience the stress of straddling traditional Southeast Asian cultures and the mainstream United States culture (Ida & Yang, 2003). Fulfilling culturally defined gender roles and expectations is a stressful experience for Hmong female youth as they begin to explore the opportunities of personal freedom and autonomy within the United States.

This snapshot focuses on the experiences of Hmong female youth negotiating the differing expectations of two cultures, and identifies needed programming to support their emotional well-being.

Hmong daughters

Available research specifically on Hmong female youth and mental health is limited. However, literature on acculturation and mental health among the broader Asian American population and other ethnic populations is available.

Extensive research by Koneru, Weisman de Mamani, Flynn, and Betancourt (2007) and Suinn (2010) show that there are mixed findings on how acculturation, the process of changing beliefs and behaviors as a result of contact between cultures, impacts mental health. Some studies find that low acculturation to the mainstream culture predicts more psychological distress (i.e., emotions or symptoms associated with mental health issues) while others find the opposite trend. Low acculturation can isolate an individual from the
About the Hmong

The Hmong began immigrating to the United States in the mid 1970s as a result of the “Secret War.” The “Secret War” occurred during the Vietnam War, in which Hmong guerilla fighters were recruited by the United States’ Central Intelligence Agency (CIA) to fight against the Pathet Lao communists in Laos. After the Vietnam War ended, the Hmong were prosecuted for aiding the United States. Hmong families fled to refugee camps in Thailand and endured traumatic and violent experiences; many died while fleeing Laos.

Most Hmong refugees immigrated to the United States throughout the 1980s, while a recent wave of Hmong refugees resettled in the United States in the mid 2000s due to the closing of the Wat That Krabok refugee camp in Thailand. According to the United States 2008 American Community Survey, an estimated 171,316 Hmong live in the United States. Large populations of the Hmong live in California (65,831), Minnesota (45,930), and Wisconsin (31,578). The Twin Cities in Minnesota are home to the largest metropolitan Hmong community in the nation.

mainstream culture leading to psychological distress, but high acculturation can also lead to increased stress and conflict with values and norms of the non-mainstream culture. Despite mixed research findings, many studies find acculturation is associated with psychological stress, depression or depression symptoms, and suicide.

In the context of Hmong families, daughters are more likely than sons to experience increased psychological distress, while having less support in developing their cultural identity and coping with acculturation stressors. As Hmong daughters acculturate to mainstream United States, they seek out opportunities that challenge cultural Hmong gender roles and develop expectations that renegotiate and redefine the identity and role of Hmong women (Lee, 2007). However, the process and experiences of challenging traditional roles and expectations is commonly a source of stress and conflict for Hmong female youth, both internally and within the family context.

Experiencing parental conflict
As Hmong daughters challenge cultural expectations of being a “good” daughter, parental conflicts are likely to arise. Studies find that parent-child conflict around acculturation issues disrupts parent-child attachment and may lead to increased emotional problems, depression, and risk of suicide among youth (Koneru et al., 2007; Lee et al., 2009; Suinn, 2010). Conflicts between Hmong daughters and parents tend to revolve around negotiating gender role inequities, such as performing household chores (Lee, 2007). These conflicts may result in Hmong female youth perceiving a lack of parental support and understanding.

Coping with acculturation stress
The family and clan serve as the primary source of support within the Hmong community; however, Hmong youth often do not feel comfortable seeking support from their parents (Thao, Leite & Atella, 2010). They often feel that parents will not recognize and understand their issues. Hmong youth commonly confide and seek support from others in their family and social networks who have similar experiences, including siblings, cousins, and peers. Seeking support and advice
from others with shared experiences helps to mediate stress among Hmong youth.

Several coping strategies are common among Hmong daughters. Younger, elementary-aged Hmong girls tend to hide emotional issues and psychological distress (Thao, Leite & Atella, 2010). They often conceal psychological distress by being shy, quiet, and obedient in the classroom and at home, making it difficult for parents, teachers, and other school staff to identify mental health issues. However, upon reaching adolescence, they may begin to rebel against parental rules and control through engaging in risky and negative behaviors, such as running away from home, skipping or dropping out of school, and having suicidal thoughts or attempting suicide.

In addition, Hmong female adolescents and young adults are at increased risk for alcohol and substance use as a coping mechanism to manage acculturation and family conflict (Lee et al., 2009). Early marriage is another coping method as way to escape the restrictions and controls of their parents (Lee, 2007).

Appropriate mental health programming and services

To provide Hmong female youth with support in developing their identity and building healthy relationships, focused and culturally-specific mental health programming is needed.

Family interventions
Family therapies reflect the community’s high value of and respect towards family and clan structures. As the acculturation gap widens, programming for Hmong female youth should include a parent or family component to facilitate and foster communication, understanding, and interaction within the family.

School-based mental health programming
School-based mental health programming eliminates transportation and cost barriers for families. In addition, school-based mental health programming gives families a non-stigmatizing access point to services by building on established trust and relationships with the school and school staff. Furthermore, the school setting is an appropriate place where teachers, school staff, program coordinators, and parents can work together to identify and address mental health issues and needs before they become severe or before a crisis occurs.

Culturally specific group interventions
Group therapies give Hmong female youth an opportunity to share experiences and find support and understanding from each other. Learning from others with shared experiences can help reduce stressors and facilitate a bicultural identity. Group interventions should be provided in a culturally specific context, with consideration of Hmong cultural norms, expectations, and experiences in the United States.

Spotlight on supportive programming

Hlub Zoo—helping Hmong girls to “grow-well” and “love well.”
On a sunny afternoon, a group of Hmong girls (ages 10-12 years old) are gathered together to share their experiences in Hlub Zoo. Surrounded by Hmong food for lunch – the girls slowly open up about their experiences of being a Hmong girl. “Being a Hmong girl is hard because you have to help your parents and family. You have to listen to your parents and do all the chores. You have to be responsible for your brothers, sisters, and yourself,” said one of the girls. The girls also talk about how Hlub Zoo has helped them learn to be themselves and find their voice. A girl said, “I used to be shy and very quiet. I didn’t feel very important. Now, I am more outgoing. I show more of my feelings each day.” While another girl said, “I was hiding myself and now I am being who I am.”

Hlub Zoo, meaning “grow well, love well,” is a culturally-specific, school-based support program for Hmong girls that helps them build self-confidence and a strong cultural identity. The program also helps girls be connected and engaged in school and build healthy relationships with their peers, family, and community. Individual, small group, and family counseling is facilitated by a Hmong female social worker. Girls in need of more intensive and formal mental health services are referred to Wilder’s Southeast Asian Services. Hlub Zoo is a collaborative effort between the Amherst H. Wilder Foundation and Jackson Elementary School in Saint Paul, Minnesota.
Additional resources

The following resources were used in development of this snapshot:


