

**Transitions to adulthood for immigrant adolescents from developing countries:
The sexual behaviors and reproductive health of African teenagers in Montreal**

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Introduction

In recent years, a large number of studies have been published on the various transitions of adolescents as they move from childhood to adulthood, and many others have examined aspects of migrant integration into host societies (see, e.g., Gauthier and Guillaume, 1999; Lapierre-Adamcyck et al, 1995; Piché, 2003). Remarkably few studies, however, have dealt with the intersection of these two topics – the specific experiences and problems encountered by immigrant adolescents.

Migration flows from low-income to high-income areas have been high in recent decades and, while immigration is a politically controversial issue in many countries, these flows are likely to remain large in upcoming years. In many Northern cities, adolescents from immigrant families form a substantial and increasingly important part of all adolescents. Immigrant adolescents are, moreover, a comparatively vulnerable population: they frequently reside in low-income families and neighbourhoods, and they face specific problems related to their immigrant situation – these may include conflicts with parents over values and behaviours, much sharper gender roles at home than in the host society, limited language abilities, racism and other types of prejudice, inadequate knowledge, access and use of reproductive health services leading to risky sexual behaviours, etc. In addition, in the longer term, a successful integration of immigrants into the host society must be grounded in the positive experiences of immigrant youth as they grow towards adulthood and seek their place in society.

This paper has two main goals: first, to establish the importance of this largely neglected topic, and second, to present a new research project being developed in Montreal that will use quantitative and qualitative approaches to investigate how being born into an immigrant family alters and complicates the young peoples' transitions into their sexual and romantic lives. In presenting the project, the methodological approach will be briefly described, and the main issues that have emerged from exploratory interviews with “key informants” (researchers, health outreach workers, a school principal, etc.) and from an informal group discussion with mostly immigrant parents in Montreal, will be detailed.

Interest of the topic

To date, strikingly few studies in the fields of demography, sociology, economics and public health have examined the specific experiences and problems of immigrant adolescents during their transitions to adulthood. Knowledge that exists on migrant adolescents is often informal in nature – the understanding acquired by those working in the field (teachers, health outreach workers, etc.) – or contained in often relatively descriptive governmental reports (e.g. Kuntz and Hanvey, 2000); rigorous, in-depth scientific studies of this topic are largely lacking. This section starts with a discussion of the scale of immigration into high-income countries in recent years, which underlies the increasing relative importance of adolescents born into immigrant families. Second, we argue that, in the medium and long terms, migrant integration and the task accommodating the aspirations of both immigrants and the native-born will be greatly affected by the experiences of immigrant adolescents, who are the transitional generation, caught between the culture of their parents' country of origin and their new home country: the problems they encounter during their key formative years, the "identity" that they establish for themselves, and how this process leads to the decisions they make with regard to how they construct their lives. A better understanding of the attitudes and behaviors of immigrant adolescents is also of policy importance because they represent a relatively disadvantaged, high risk population in need of targeted programs and services – an issue that will be presented in detail in a later section of this paper, when the initial exploratory findings of our qualitative research are described.

Importance of South-North migration

Migrant adolescents, the group of interest for our study, are either first generation migrants –those who typically migrated with or soon after their parents (migration for family reunification) –or second generation immigrants, namely the children born into a migrant families. Given high levels of migration and the fact that immigrant families tend to have somewhat higher fertility levels than native-born populations in rich countries, the importance of this group is increasing in many countries, in both relative and absolute terms. Moreover, since immigrants tend to concentrate in certain areas such as larger cities, their relative importance and their effects on the lives of the native-born populations are more pronounced there.

Migration levels from low-income to high-income countries have been high in recent decades, and are likely to remain so into the future. Table 1 shows the importance of immigrants in selected OECD countries. The percentage of the foreign-born population of these countries ranges from 2.8% in Finland to roughly 20% in Australia, Canada and New Zealand. Net migration is also an important part of population growth in many rich countries, which are characterized by low fertility rates and aging populations. Indeed, according to the *International Migration Report 2002* of the UN, between 1995 and 2000, the more developed countries as a whole received a yearly average of 2.3 million migrants from less developed countries and, as a result, net migration accounted for approximately two-thirds of their overall population growth.

High levels of South-North migration are, moreover, likely to continue into the future. Rapid population growth in developing countries, combined with the enormous salary differentials between low and high-income countries, will motivate workers from the developing regions to try to migrate to the North. At the same time, population aging in high-income countries will soon lead to stagnating and, in some cases, declining numbers of the working-aged population. Immigration can potentially reduce some of the economic costs caused by aging and the

difficulties related to providing pensions and services to the growing numbers of elderly, and this will create a strong economic incentive for many Northern countries to maintain or even expand the amount of migrants they accept. Finally, there is no convincing reason to believe that numbers of refugees will decrease in the future, or that Northern countries will increasingly close their borders to those truly in need. The perceived costs and benefits of migration from developing countries are nevertheless highly controversial and politicized topics in many countries, and the social, political and economic questions of how best to integrate migrants from different cultures and backgrounds into host societies lead to hot debates in political circles and the media.

Table 1 Stocks of foreign-born population, foreigner inflows and the effect of net migration in selected high-income countries

Country	Stock of foreign-born population (thousands)	Percentage of population foreign-born	Inflows of foreigners (thousands)	Rate of nat'l increase (per 1000)	Population growth rate (per 1000)	Net migration /100 births
Australia	4 482.1	23.1	88.9	6.4	11.5	38
Austria	892.6	11.0	74.8	0.2	0.8	6
Canada	5 448.5	18.2	250.3	4.5	9.3	40
Denmark	321.8	6.0	25.2	0.8	3.5	21
Finland	145.1	2.8	11.0	1.7	2.5	7
France	5 868.2	10.0	141.0	3.1	3.7	5
Germany	<i>n/a</i>	<i>n/a</i>	685.3	-1.4	0.9	24
Hungary	300.1	3.0	19.5	-4.2	-4.9	-7
Netherlands	1 674.6	10.4	94.5	3.1	5.2	17
New Zealand	698.6	19.5	62.1	7.3	9.4	14
Norway	315.2	6.9	25.4	3.0	5.0	15
Sweden	1 028.0	11.5	44.1	-0.7	0.3	10
United Kingdom	4 865.6	8.3	373.3	1.1	2.7	13
United States	31 811	11.1	1 064	6.0	10.5	31
Data referring to	2001	2001	2001	1995-2000	1995-2000	1995-2000

Notes: Numbers are from UN and OECD statistical data bases, assessed over the web on 7 June 2005. Foreigner inflows are from <http://www.oecd.org/dataoecd/23/50/34641722.xls>, Table A.1.1. For Canada, Australia and the US, statistics refer to permanent inflows only. Stocks and percentages of foreign-born populations are from <http://www.oecd.org/dataoecd/23/47/34641829.xls>, Table A.1.4, in which French data are from 1999 and not 2001. Data for UK and Germany were missing from Table A.1.4. UK statistics were calculated from data in <http://www.oecd.org/dataoecd/18/23/34792376.xls>. This same table showed slightly over 6.5 million Germans with a missing place of birth (data from 1999-2002). Depending on how these people are counted (all born in Germany versus all born abroad), the percentage of German population born abroad would range from 11.1% to 19.0%. Natural and total population growth and net migrants per 100 births in the country are from <http://www.un.org/esa/population/publications/ittmig2002/locations/mainframecountries.htm>. Natural growth, unlike total population growth is based only on numbers of births and deaths, and does not take into account migration. Insofar as immigrants have higher fertility rates than the native-born population, their contribution to population growth is somewhat greater than the simple difference between total and natural population growth.

Migrant integration and adolescence

Migrant integration is a highly complex, multidimensional process, and the children of immigrant families are of enormous importance to this issue because of their position between their parents, who were raised in a foreign country and culture, and the host. Studies of immigrant success have commonly focused on educational and job-related performance as markers of migrant integration

(Potvin, 1997); indicators of social and cultural integration have proven to be more difficult to identify and measure, and thus to study. Over and beyond the standard individual and family-level characteristics (age, sex, education, etc.), to understand behaviors requires taking into account a host of critically important factors that are not easily captured by usual surveys – how do people socially define the “good life” and view appropriate behaviors; what are their attitudes, motivations, strategies, and ultimately their values and aspirations that guide their behaviors? These, in turn, may differ significantly between migrants and native-born people. Moreover, for migrants, these factors may be strongly influenced by their past lives and experiences – the reasons why they chose to move (for example, refugees fleeing violence versus labor migration), their socio-economic and educational backgrounds in their country of origin, etc. All these factors influence a migrant’s capacity to adjust and adapt to life in the host society; their ability to seek a viable accommodation with the new society in which they live.

According to Piché (2003) successful integration is often thought to occur when the differences between natives and migrant communities tend to fade over time. For both scientific and programmatic reasons, key questions include: to what degree and at what speed do attitudes, aspirations and behaviors change, both within and across generations (parents and their children), especially with respect to issues of reproduction, marriage and health? In the high-income destination countries, what are the best ways to successfully integrate migrants? What are the specific frustrations expressed by different migrants in different host societies? Which processes lead to a “ghettoization” of migrants (relative to the characteristics of migrants or of the host society) that may result in alienation, highly concentrated and polarized communities, and social conflict between migrants and natives, as opposed to their fuller integration into the existing society (for a review of these concepts see Bérubé, 2003: 9-14). More broadly, what approaches are most effective for creating a successful accommodation between the needs and aspirations of migrants and natives over time?

With respect to migrant integration, a key formative period is youth and adolescence. For adolescents, being born into a migrant family, or having migrated with their parents adds a very important complication to what is often an already difficult stage of life – the task of defining and affirming one’s own personal (and also sexual) identity during adolescence (Beck and Beck-Gernsheim, 1993; Giddens, 1991, 1992). Youth of immigrant families are, in a real sense, the transitional generation; while they may be more open, flexible to new ways of thinking and ways of life than their parents, tending to “express fluid ethnic identities” in the words of Meintel (2000), they nonetheless face the task of defining who they are and how they should run their lives. How they experience their adolescent years has enormous consequences for their long-term behaviors, their social and economic success and, ultimately, their identification as being part of the host society. What factors underlie sustainable differences in behaviors that can be transmitted across generations, and more generally to lasting divisions between these groups in society?

Researchers in the social science and public health fields have studied the various changes and transitions that occur during adolescence; among these are the growing independence of teenagers from their parents that eventually leads to leaving the family home, the development of first (and subsequent) romantic relationships, emerging sexual desires and entry into sexual life, progression through school and entry into first employment. A National Academy of Sciences panel on transitions to adulthood in developing countries (Lloyd et al, 2005: pps 3-4) listed the following criteria as reflecting a successful, overall transition to adulthood:

- *Good mental and physical health, including reproductive health, and the knowledge and means to sustain health during adulthood.*
- *An appropriate stock of human and social capital to be a productive member of society.*
- *The acquisition of prosocial values and the ability to contribute to the collective wellbeing as citizen and community participant.*
- *Adequate preparation for the assumption of adult social roles and obligations, including the roles of spouse or partner, parent, and household and family manager.*
- *The capability to make choices through the acquisition of a sense of self and a sense of personal competence.*
- *A sense of well-being.*

While these criteria were proposed for developing countries, they are sufficiently broad to be equally appropriate for high-income countries as well. That said, their precise meaning will vary greatly across social contexts and cultures, which define the norms and values that shape the different social relationships, such as gender roles (for example, the appropriate role of spouse is likely to be defined in a substantially different way in African cultures compared to the Canadian norm.). The meanings of these criteria are hence especially complicated for adolescents raised by immigrant families, for whom two cultural systems apply. As we will see in the exploratory findings section of this paper, growing up in an immigrant family can potentially affect the family environment and relations with the broader society, and thus influence the various transitions to adulthood in very significant ways. Thus, for immigrant adolescents, an additional criterion for integration should perhaps be added to the list, above:

- *Creating an identity and defining a place in society in a way that allows for a viable accommodation of the values of their parents and those of their new home.*

Research project on the sexual behaviors and reproductive health of immigrant adolescents

Project objectives

This project aims to examine one of the different aspects defining the process of transition to adulthood: the sexual and reproductive health behaviours and outcomes among adolescents born to migrant families to Canada. This issue is tightly linked to the other criteria defined by the NAS above, as it reflects the emerging values and norms of this transitional generation, thus shaping gender roles and intergenerational relationships, and longer-term family-building goals. In addition, family conflicts over teenagers' early sexual and relationship behaviors, along with the occurrence of adverse reproductive health outcomes, may have important impacts on school performance and professional integration. There are also health issues that extend beyond the migrant community *per se*, as the sexual relations of immigrant adolescents do not necessarily occur just within their ethnic group, especially in a multicultural society. Because of the often constrained social and economic situations in which immigrant adolescents live compared to non-migrant groups, they are more likely to have inadequate knowledge, access and use of reproductive health services leading to risky sexual behaviours.

The main goal of this project is to begin addressing the knowledge gap on the reproductive health problems of adolescent immigrants, with the ultimate objectives of contributing to the design of more effective, evidence-based policy and programs targeting this population, and assisting immigrant groups to better understand the problems and issues facing them and their children. Another goal is to promote the development of a set of similar studies in different countries, so as to allow for the comparative analysis of the problems encountered by diverse groups of immigrant youth into societies that may vary considerably in terms of policy and openness to different ways of life. This project includes both the analysis of existing survey data and the development and testing of qualitative data collection tools, which will entail the initial collection and analysis of qualitative data. The qualitative fieldwork will be limited to Montreal, one of the main destinations of migrants to Canada, where adolescents from three communities will be examined and compared: adolescent born into immigrant families from sub-Saharan and North Africa, and a control group of adolescents born into longer-term Quebec families.

The Canadian and Quebec contexts

Before presenting the project methodological approach and the initial exploratory results, important aspects of immigration trends and of the Canadian/Quebec context are first presented.

Immigration

Canada is one of the high-income countries most open to international migration. According to Statistics Canada,¹ 18% of the Canadian population in 2001 was foreign-born, and migrant adolescents represent an important and growing proportion of Canadian youth, especially in large cities. In 2002, over three-fourths of all recorded immigrants to Canada settled in Toronto (48.7% of all immigrants), Montreal (14.4%) or Vancouver (13.1%), with many of the remainder going to a few smaller cities (Ottawa, Calgary...). Calculations based on the newly released public use sample of the 2001 Canadian census show that the percentages of youth aged 15-19² living in these cities who were born outside of Canada, or to parents who themselves were both born abroad, were 59.6% in Toronto, 50.3% in Vancouver, and 25.8% in Montreal. While Africans accounted for only slightly over 5% of the foreign-born population in Canada in 2001, this group is rapidly growing in size. Migration from French-speaking Africa and the Middle East to Quebec has been important since the late 1980s, driven by political turmoil in various countries (Lebanon, Algeria, Rwanda...) and by Quebec's immigration policies. In 2002, about one-third of all immigrants to Montreal came from Africa and Middle East, compared to 20% for Canada as a whole.

Within Canada, the province of Quebec has a degree of independence in terms of its immigration policy and control over admission of international migrants into its territory. Concerns over low fertility rates, population aging, and the long-term viability of French-speaking society within North America have caused Quebec to favor immigration, especially from Francophone countries. Potential highly educated immigrants from Francophone countries are thus the target of publicity campaigns funded by the Quebec government, which present the province as a very open and welcoming society. As a result, many immigrants arrive with overly high expectations, believing that the absence of language barrier will allow them to integrate easily in the local job market and society.³ The Quebec approach to immigrant integration also differs somewhat from that of the Canadian multicultural policy, as Quebec tends to place more emphasis on adhesion to a common culture (Bérubé, 2003:12).

Parental aspirations and transitions to adulthood

In modern-day Canada and Quebec, in raising their children, parents tend to emphasize goals related to scholastic success and prospective careers. In the Canadian society as a whole, and particularly in Quebec, young women are taught the importance of becoming capable of ensuring their own financial autonomy; this has become an even greater priority given the frequency of broken (marital) unions and family breakdowns in recent decades. Along the same lines, because parents themselves have often experienced or witnessed conjugal and family instability, they may be less keen on transmitting the idea of parental engagement as a central goal in life. Even if young people wish to engage in a stable conjugal union, this has tended to become a secondary priority, important mostly after their professional life and financial independence has first been established. As a result, compared to the past, young Quebecois tend to establish a stable union and start having children somewhat later in life, often after a succession of romantic and sexual relationships, with more or less informal cohabitations (Charbonneau, 2005; see also Charbonneau 2003).

In contrast, immigrant parents from the developing world are likely to place as substantially more importance on family-building goals for their children, and their values and attitudes with regard to gender, sexuality and marriage may differ greatly from the Quebec norm.⁴ For this reason, immigrant parents may try to play a much more active role in overseeing their children's romantic and sexual behaviors, especially for daughters. However, the attitudes and goals of their children, who are influenced by the host society and who increasingly seek to assert their independence from parents as they pass into their teenaged years, may diverge sharply from those of their parents, and this can constitute a major source of conflict within immigrant families. While such types of conflicts are obviously not limited to just immigrant families, it seems plausible that their frequency and severity will be greater in situations where parental values and religious beliefs differ greatly from those of the broader society.

First romantic relationships and sexual initiation constitute important markers for adolescents and parents of their transition into adult life (Bozon, 2003). Most research in high-income countries has examined adolescents' sexual behaviors and reproductive health from the perspective of understanding and addressing problems, such as risky sexual behaviors that may lead to unwanted pregnancies and STIs. The nature of the first sexual experience – age at intercourse, use of family planning protection, the type of the relation with the partner, etc. – has been shown to be an important marker for the long-term well-being of young people with regard to their subsequent sexual behaviors and psychological welfare (St. Laurence and Scott 1996; Bozon and Kontula 1998). Recent studies in Canada have found an increasing prevalence of STIs among youth and increasingly early entry into sexual lives, especially in Quebec (Patrick et al, 2000; Rotermann, 2005; Garriguet, 2005). Public authorities in Quebec are seeking to heighten the awareness of parents and social institutions of risky sexual behaviours among teens and their consequences.⁵ Growing up in a migrant household can affect these transitions in a variety of ways, and the specific problems and vulnerabilities of migrant adolescents may lead to risky sexual behaviors and, occasionally, even to violence. In order to understand immigrant and non-migrant adolescent sexual and romantic behaviors, one needs to examine their attitudes, values and aspirations, which underlie the processes leading to specific behaviours, and this requires analysing them within their family and community contexts.

Project methodology and data

In Canada, research on the sexual and reproductive health behaviours of immigrant adolescents is complicated by a lack of detailed, coherent survey data on differences between the situations, attitudes and behaviors of youth of different ethnic and migrant groups (Maticka-Tyndale et al, 2000 and 2001). To address this problem, a case-study approach will be used that combines the strengths of quantitative and qualitative data, with the goal of identifying processes through which the experiences of people of different groups lead to the adoption of different attitudes and behaviors (Yin, 1984; Hamel, 1997; Roy, 2003). The qualitative fieldwork will be limited to Montreal, one of the main destinations of migrants to Canada, and will target first and second generation adolescent migrants from sub-Saharan and North Africa, compared to a control group of longer-term Quebec adolescents. We also plan to make a concerted effort to develop a network of researchers located in different provinces and countries who are working on similar issues, in order to allow for a comparative analysis of migrant adolescent experiences and behaviors and the effects of different policy options.

Quantitative research

Statistical studies will use existing survey data to describe key differences in relevant adolescent behaviors of various adolescent migrant and non-migrant groups, and to assess the importance of possible determinants of these differences. For these studies, we will use pooled data from the three main destinations of migrants to Canada – the metropolitan areas of Montreal, Toronto and Vancouver area.

Data are primarily from two sources: the National Longitudinal Survey of Children and Youth (NLSCY) and the Canadian Community Health Survey (CCHS) (Maticka-Tyndale et al, 2000 and 2001). The NLSCY has followed a cohort of roughly 25,000 children aged 0-11 in 1994/95 through 2002/03, allowing for a true longitudinal study of important changes in their lives (family composition, leaving school...) including reproductive/sexual behaviors. To date, studies using these data have not focused on migrant–non-migrant differences, and most have not employed statistical models appropriate for examining changes over time. A weakness of this survey is that it reflects the composition of the population in 1994, a time when considerably fewer Africans immigrants were present in Canada. The 2003 CCHS is a larger survey representative of the Canadian population aged 12 and above in that year, and has more detailed data on sexual and reproductive behaviours. However, it is not a longitudinal survey and its retrospective information is limited, lessening its value for the study of changes over time. For both surveys, we have concerns over data quality for some key variables. Survey questions are, at times, somewhat vaguely worded (e.g., the definition of a “sexual relationship”) and, perhaps more importantly, adolescents are thought to frequently dissimulate their behaviors on sensitive issues like their sexual experiences.

Methods. Event history and perhaps panel data methods will be used to examine key processes and transitions captured by the data. Tentatively, we plan to use piecewise exponential hazard models (for NLSCY data) and discrete-time logit hazard models (for CCHS data), both with controls for unobserved heterogeneity, to study the determinants of a key variable of our study – girls’ and boys’ ages at first sexual intercourse. Available covariates for these regressions differ on the two surveys; for the NLSCY, covariates will include time-varying variables.

Qualitative research

The second and more important component of this project is to design and test a qualitative data collection approach that is effective for the study of migrant adolescent sexual and reproductive behaviors, both in terms of the focus of the analysis (what precisely are the key issues to investigate) and defining the appropriate data collection tools. Qualitative research is of value to gain insight into the specific motivations, attitudes, values, experiences and ultimately behaviors of people from different migrant and non-migrant groups—complex issues that are difficult to study with quantitative data and which are of great importance for designing effective health interventions (Pope and Mays, 1995; see also Péladeau and Mercier, 1993).

The qualitative analysis will be limited to three groups: first and second generation youth from Francophone sub-Saharan Africa, North Africa, and a control group of adolescents from families that are long-term residents of Quebec. North and sub-Saharan Africa immigrants groups are growing in size and have yet to receive much attention from researchers. Hence, beyond their value for developing an effective data collection approach, our findings should be of immediate value for policy/programs and for assisting immigrant communities to better understand the issues facing them in Quebec.

Empirical method. In order to understand adolescents' sexual and romantic behaviours, it is essential to examine the underlying factors such as their values, attitudes, aspirations and strategies, and the context in which these factors develop and decisions are made; this requires analyzing adolescents within their families and community contexts. A funnel approach will be used to collect data, starting with broad, relatively unstructured focus group discussions and interviews with various key informants to allow for an open exploration of a variety of issues. A number of initial exploratory interviews have already occurred, as has an informal group discussion with African parents in Montreal, and a description of key ideas gained from this activity is presented in the following section of this paper. Then, as critically important issues and questions emerge, the investigation will use in-depth interviews to focus more narrowly on issues and questions seen to be centrally important to adolescent attitudes, strategies and behaviors. Since our approach will evolve as data are collected, analysed and used to refocus the investigation, it cannot be defined with precision in advance (Glaser and Strauss 1967; Laperrière 1997:322). Data will be collected from:

Adolescent girls and boys aged 16-18 – old enough to be informative in terms of relevant life experiences. Immigrant community associations and perhaps schools will be used to select respondents, and care will be taken to ensure that we have a variety of situations represented (refugee families versus economic migrants, Muslims versus Christians...) and that all three groups are similar in terms of their socio-economic mix.

Data collection will begin with a series of focus groups discussions (two sexes separately for adolescents of each of the three groups), with the goal of defining key issues and concepts (e.g., the significance of early sexual relations). After an initial analysis of these data, in-depth interviews will be held with individual adolescents, with equal numbers from North and sub-Saharan Africa, and somewhat fewer from long-term Quebec families, as they are less diverse in terms of their cultural background. These interviews will cover their life histories leading up to their first romantic/sexual relationships (to get a picture of the processes leading to their first experience), subsequent relationships and various related issues (contraceptive use, negotiations

with the partners, partner characteristics, conflicts with parents, etc.), longer-term romantic and marital aspirations and, for immigrant teens, perceptions of how their immigrant status has affected their lives. Respondents will also be asked to “map” either verbally or graphically their closest and most influential social network, whether people live in the same area or not, including family members, friends, colleagues, neighbours, even important media personalities that may influence them.

Parents of at least one adolescent or young adult child, and with other characteristics as defined above. At least three focus group discussions (one for parents from each group) will be held early on about their experiences concerning their migration and integration into Canadian society, perceptions of proper gender roles and relations between parents and children, the problems they have encountered in raising their preteen and teenaged children, and aspirations with regard to their children’s future. These discussions may be limited to women alone, as they are most often the person most directly responsible for their children’s activities. A limited set of subsequent in-depth interviews (8-10) are also planned for parents to follow up on important issues brought to light in the focus group discussions.

Qualitative data analysis. To analyze the discourses we will use the content analysis approach, which assumes that a document does not only contain information about respondents’ experience in specific domains, but also reflects a knowledge that is determined by the specificities of respondents’ social, cultural and economic backgrounds. In other words, the way people express themselves reflects the models of knowledge they are carrying, and such a perspective is particularly relevant for the study of social groups whose way of life is highly different from that of the dominant norm. This is typically the case for new immigrants, especially coming from countries where social and cultural practices are strongly differing from those of the host society (see Sabourin, 2003).

Exploratory findings

As part of the initial, exploratory phase of our qualitative research, a number of experts were interviewed to seek their views on the specific problems encountered by immigrant adolescents and what they considered to be priority issues for research. These people include:⁶

- the director and the community liaison of a primary school in Montreal, where over 90% of the student population are from immigrant families, the large majority from the Middle East and North Africa.
- several reproductive health outreach workers and health educators working with migrant communities in Toronto.
- several university-affiliated researchers in the health and social science fields in Montreal and Toronto who work in the general areas of adolescence, youth sexuality or migrant integration.
- heads of African immigrant community associations (mainly from Senegal, Congo, Togo Rwanda and Burkina Faso) in Montreal.

In addition, approximately 50 parents from Francophone Africa participated in an informal group discussion that dealt with their experiences and perceptions of raising children in Montreal.

In this section, we present the main ideas emerging from the interviews and from the group discussion. For the most part, these have focused on “micro-level” issues such as parents’ worries over how best to raise their children given their current situation, conflicts between adolescents and their parents, the reproductive health problems of adolescents, and relations between immigrant families and local schools. More “macro-level” topics such as the possible roles of immigrant communities in assisting families, or the effects of public policies that may facilitate or hinder migrant integration and thereby influence the lives of adolescents, were not generally discussed. In addition, we have yet to interview adolescents themselves, and thus the ideas expressed below do not reflect their views of how they experienced their teenage years and their perceptions of the problems that they encountered.

The topic by far most emphasized by African parents in the group discussion concerned their frustrations over their perceived inability to raise their children well and in good conditions – their feelings of relative helplessness caused in good part by problems of integration (e.g., finding a good job) and their sometimes difficult relations with their children. Issues related to these ideas were also stressed in interviews at the primary school in Montreal, by reproductive health outreach workers in Toronto and by others. Two important aspects of this topic are presented below: (1) the effects of family economic difficulties on children, and (2) parents’ values and their ability to morally guide their children, which includes questions of parental authority and control, and issues related to gender.

Effects of parents’ integration in the host society on adolescents

People migrate to seek a better life for themselves and for their children. In the group discussion, African parents (especially but not limited to men) considered problems with their children as emanating principally from problems of the family and, in particular, economic integration.

*Thus, I would say... that your study should first focus on the insertion of parents (into Montreal life). Because, if parents succeed in their integration, it is sure that the children will follow. Me, I’ve lived now 15 years in the West, and what I’ve understood is that problems occur when the parents are not well integrated from the start, thus that is what causes the problems.*⁷ [Senegalese man]

Parents feel that, in the years following their arrival in Quebec, they are often overwhelmed by the tasks of integration - establishing themselves economically (job, salary), acquiring a good home, etc. Given their often high expectations, this can lead to enormous frustrations and worries.⁸ Moreover, highly educated immigrants who find themselves relegated to relatively poor paying less qualified jobs – a not uncommon occurrence in some sectors of the economy – may feel especially frustrated. Not only do these types of problems create financial constraints, they also lead to feelings of humiliation and anger.

The economic difficulties encountered by immigrant families cause parents to have insufficient financial resources and, even more important, time and energy to provide a nurturing home environment, to educate and guide their children and to supervise their activities. In the African group discussion, a Congolese man, head of the Association of African lawyers in Canada said:

I want to insist on the lack of affection felt by children who arrive in Montreal. Generally, it is thought that, when parents are under stress, when parents are worried

over their employment, they can't transmit affection to their children, so they explode in anger with their children, that is, there is no more dialogue between parents and children, there is an extinction of dialogue between parents and children. Therefore the parents are no longer as they were before...⁹

According to a Toronto reproductive health outreach worker, severe financial constraints often result in immigrant teenagers being left unsupervised, spending a lot of time by themselves, or hanging out with friends on the street or in malls. In contrast, in her experience those from richer and more educated families are more typically enrolled in extracurricular activities, driven to these activities by parents, and more generally spend much more time in structured, supervised environments. The head of the Montreal school was of the same opinion, and mentioned a recent study in the US that showed unwanted adolescent pregnancies to be more frequent when teens have more free unsupervised time.

Another consequence of poverty and these frustrations linked to insertion is a negative home environment, which leads to an increased risk of adopting resentful and perhaps even violent attitudes, whether within one's own community or against the host society:

[...] the parent who has left his country to come here with a great deal of hope of finding something – a better life. So the problem from the start is one of insertion. How can an African parent who has arrived in a country he doesn't know, who has never had the chance to interact with Quebec people... he becomes disappointed, frustrated, and so his child automatically sees this frustration. This child, he grows up in an environment where the parent transmits negative ideas. Where the parent is always discouraged, what the child sees in this situation is parents who are beaten down, who are at a dead end, who don't know where to go; that child there becomes revolted.¹⁰ [Senegalese man]

Immigrants' perceptions, expectations and frustrations are also grounded in their pasts, in particular, the reasons why parents chose to migrate, symbolized by their immigration status (e.g., refugee versus economic migrant). In particular, if parents have left a highly conflictual political, religious situation in their home society, their anger, sadness and even aggressivity may be transmitted to their children who, themselves, become "individuals at war". The director of the primary school, for example, spoke of the conflicts between Christians and Muslims in Lebanon being transposed to relations between students in his school. In addition, parents (and sometimes children) who were traumatized by violence they witnessed in their home society may affect their relationships to other people and jeopardize their abilities of integration. For instance, a mother who observed or experienced sexual violence before migrating to Canada may find it extremely difficult to advise their daughters openly with regard to their emerging sexuality.

Parents' identity and values in Canada

Relations of authority between immigrant adolescents and their parents

Educational methods as well as the importance and meaning attributed to the different dimensions of education (obedience, success, etc.), can vary enormously from one society to another (Berry et al, 1992). In African societies, especially in francophone West Africa, children tend to grow up in an extended family context, and all family members, neighbours and close friends can play very active roles in their education. (In this section, we employ the broad French-African definition of

“education” that includes both academics and, more widely, the development of morality and appropriate ways of behaving). Moreover, according to a Toronto health educator working with immigrant parents, raising children in the African context was often a simpler, easier task, because the cultural context was more homogeneous, with fewer conflicting messages on ways to behave. For this reason, in their home countries, in the “traditional African context”, parents could more safely avoid openly discussing sexual issues with their teenaged children – the usual practice in several African societies.

In contrast, several Africans in the Montreal group discussion criticized the “banalisation” of sexuality in Canada and rejected the idea of sexual education in schools. In addition, they stressed their perception that relations between parents and children are vastly different in Africa and in Canada. In Africa, parents expect to be respectively obeyed, whereas in Canada, children are taught to make their own decisions, leading to a more egalitarian relationship with their parents. Several parents bemoaned the fact that their children flagrantly resisted the authority of their parents:

The problem that you have here, as an immigrant, is that the relations of authority in Africa and here are different. As you know, [...] there is a hierarchy in Africa, there is a respect... while here, [with] the boss, it's [more] equal-to-equal, here a child can tell off his parents, which is unthinkable in Africa. This is a problem that I have encountered myself. And then, in Africa, it's everyone who raises the child; education isn't only the responsibility of parents, it's the grandmother, the aunt, the uncle, the neighbour, all the community..., while here, education is the kindergarten ; parents, when they arrive home in the evening, they are tired, sometimes they hold down two jobs, so there are other difficulties for parents.¹¹ [Senegalese man who has lived 30 years in Quebec]

Another issue noted by everyone – African parents, school head, outreach workers, etc. – is that immigrant children tend to integrate more rapidly into the host society than their parents, and that this can undermine parental authority. Immigrant children in school tend to master the local language faster than their parents and, more generally, become more rapidly adept at interacting with the host society. This can entail a real loss of authority of parents, especially when they become dependent on their children, having to rely on them for translation or other tasks, for example. In this situation, teenagers are better able to conceal their activities from their parents, leading to less supervision over their activities. Furthermore, there is a real fear among immigrant parents that, if they try to discipline a badly behaved adolescent, then they face the risk having authorities in Quebec or Ontario their child away from them. Adolescents are well aware of this and, at times, consciously play on their parents' fears – leading to a very “unhealthy” relationship between parents and children, in the words of the Montreal school director.

According to a health educator in Toronto dealing with African communities, for a number of reasons, this loss of authority tends to be greater when adolescents arrive with their parents in Canada as preteens or young teenagers, compared to those who were born in Canada. For new immigrant adolescents, their parents are often overwhelmed by the tasks of adapting to a new society, trying to become economically secure, longing work hours, etc., meaning that they have little money, time and energy to spend on their children. For the adolescents themselves, they are fascinated by the new world in which they have come, with new possibilities, ways of thinking and behaving, along with the emotional stresses of making new friends, learning the language, and integrating into a different school system. This can be a very confusing and difficult time for

immigrant teenagers (and their parents), accentuating the “normal” stresses between parents and adolescent children.

In contrast, children born in Canada to immigrant families are already socialized in this new environment – less apt to be “blinded” by the new opportunities and ways of thinking – and their parents are generally in a less difficult situation – they have had time to become economically established, develop social networks, and integrate into their new home. A woman from Rwanda in the group discussion, however, had a different view on this issue. She immigrated with her children, the youngest being just a baby when they arrived in Montreal, and she was more concerned over questions of how to raise her youngest child than her older kids. Her older children, who had spent significant time in their home country, were more critical of the norms and values of Canada and they were thus more apt to listen to the counsel of their parents. Her youngest child was socialized from infancy in Canada, and was less open to the parents’ attempts to transmit their norms and values with respect to acceptable (African) behaviors.

Parental values and adolescents’ emerging identities

Adolescence is a time of growing independence from parents and increasing influence of peers and the broader society; when immigrant teenagers often tend to seek to adopt many of the ways of the host society. When attitudes, values and aspirations are substantially different between the immigrant family and the host society, the stage is set for conflicts between parents and children. In extreme cases, conflicts can lead to violence between parents and children, and children may be thrown out of their homes by parents who can no longer “stand them” – the case of some Ghanaian families reported by a health educator on Toronto.

Along with several African parents in the group discussion, the director of the primary school in Montreal emphasized the idea that, before immigrant parents are able to truly guide their children to define their place in Quebec, the parents themselves must first define their own place in society, both in terms of economic and social integrations, but also in terms of their own values and identity. Over the years, he said that he has fairly often observed two extreme types of behaviors among immigrant parents. First, some parents try to fully adapt into Quebec society by more or less denying their own cultural values, which is impossible; they are unable to provide for their children a coherent set of values that can guide them as they progress through adolescent. Second and at the opposite extreme, some parents increasingly affirm highly rigid norms, values and religious doctrines, in response to the “challenge” of Quebec society that is perceived as lacking in values.¹² Their children are faced by an unbridgeable gap between the culture and ways of their parents and that of the host society. For both groups, parents are unable to provide their children with a viable moral framework that can serve them as they seek to develop their own identities – one that can anchor them in a system of values and codes of behavior, but which also gives them the flexibility to develop their own identity in a way that allows for a successful accommodation of the values and attitudes (aspirations...) of their parents and that of Quebec.

Gender and sexual orientation. Conflicts between immigrant teenagers and parents may crystallize on gender relationships and the related behaviours that develop during puberty (sexual orientation and initiation, seduction attitudes, etc.). In many societies in the developing world, marriage and establishing a family through childbearing remains a central objective of life. This is certainly the case for essentially all cultures in Francophone Africa, where gender roles are typically sharply

delineated and women's role as mother remaining central to their social identity. From our preliminary interviews, distinct gender roles seem to vary by socioeconomic status and religion. For example, in interviews with people working in the field in both Toronto and Montreal, Muslim immigrants were mentioned as being a group that had greater difficulties integrating into Canadian society, leading to greater problems for their children. In both cases, "confounding factors" were also mentioned. In the Toronto interviews, the Muslim populations were immigrants from Eritrea and Somalia – countries with cultures that are atypically rigid in terms of gender roles and in which mothers generally do not discuss sexual matters with their daughters. In Montreal, Lebanese Muslims were noted as having greater problems than Lebanese Christians, who tended also to be more educated and come from the merchant class, meaning that they had more experience dealing with people outside their own milieu prior to their migration to Canada.

The importance of virginity, especially for girls, was emphasized in interviews with workers at the Immigrant Women's Health Center and by health educators, both in Toronto. To the extent that this is highly valued at home but not (or little) at school and among peers, a girl may perceive highly divergent messages with regard to her sexual behavior, at a time when she is increasingly influenced by peer and her hormones are raising their "head". If she does choose to have a sexual relation, she may prefer high-risk anal intercourse in order to avoid the physical appearance of being sexually active. Specific surveillance by parents and brothers may occur for girls to "protect their honor" leading to potential violence, as well as despise by men in their community if they stray, possibly huge problems if there is an unwanted pregnancy. For this reason, girls may carefully hide their romantic relationships and sexual activities from their families and friends, and this may limit their access to reproductive health services and information.

Along the same lines, homosexuality was noted by several researchers and outreach workers as being a very difficult issue to deal with for immigrant adolescents, especially those from origin cultures that consider it to be completely taboo. Adolescence is a period when physiological changes lead to emerging sexual desires, and when youth are seeking to construct their personal and sexual identities (Frappier et al, 1997); it is thus the time of life when homosexual tendencies become apparent. The health educator insisted that parents in many immigrant communities are in denial or are "horrified" by any homosexual urges by their offspring. In this situation, youth hide their feelings from their parents and often friends, and this can lead to a lack of information with regard to risks, anonymous oral and anal sexual relations without protection, and thus relatively high risks of contracting STIs including HIV.

Final remarks

We began this paper by making the case that immigrant adolescents' transitions to adulthood is a topic that has been largely neglected by researchers to date, despite its great importance for both policy and scientific reasons. Teenagers raised by immigrant families form an increasingly important part of the population of all adolescents in many Northern countries; they are also a relatively vulnerable subpopulation with specific problems in terms of relations between parents and the host society and potentially high-risk sexual behaviors that may affect their attitudes and wellbeing far over the rest of their lives. With respect to immigrant integration, they are also a transitional generation, situated between the values and ways of behaving of their parents and those of the host society, and the way they experience their formative adolescent years is of central importance to manner in which they define their place in their new home country.

Understanding the perceptions, attitudes, aspirations and behaviors of immigrant adolescents requires both quantitative and qualitative approaches, and we presented a project under development in Canada that seeks to do this. The early exploratory results from our qualitative research, while grounded in the Montreal and Toronto contexts, serve to highlight key issues (authority, values, gender, etc.) that are also likely to be pertinent in other situations. It is our hope that this presentation will serve to promote more research on this and similar issues, allowing us to link up with others interested in this issue and who are working with different immigrant groups in different contexts.

Finally, the unanimous reaction from everyone interviewed and who participated in the group discussion was that the specific experiences and problems encountered by adolescent immigrants is a topic of enormous importance. Often, people were asked how we should focus our investigation – issues of importance to them in their work. The health workers met in Toronto were concerned by the lack of use existing reproductive health services by migrant adolescents had no or a very poor access to the reproductive health services despite their existence. They also said that they had little information on when these adolescents start their sexual activity and in what conditions (regarding gender, prevention behaviors, etc.). This is not surprising, as to date large scale surveys have not targeted them, meaning that the samples are insufficient and questions poorly designed to address these issues. Knowing that a mix of STI infection rates is found in age span 15-24 in Canada, that Gonorrhea is common and increases greatly the transmission rate of HIV, the issue of sexual health education becomes crucial. According to DiClemente et al (2002), the extent to which adolescents have wrong ideas on the risks and the prevention methods is a fundamental individual risk factor that is too often neglected by researchers and health institutions.

A health educator in Toronto also suggested that special problems exist for dealing openly with issues of reproductive health with traditional Muslim and Catholics (both immigrants and natives), an idea that was also noted by the Montreal school director. Interestingly, if adolescents' sexual behaviours constitute an increasing preoccupation for social and health institutions, their attitudes towards romantic relationships are so poorly known that it becomes almost impossible to identify the determinants and processes leading adolescents to adopt potentially risky sexual behaviours.¹³ The same health educator also emphasized the crucial need for enabling parents and immigrant communities to deal with immigrant teenagers – better understand the local norms and context, and devise the best approach for raising their children in a way that is also acceptable in terms of their own values. This need was also directly expressed by some African parents, as illustrated by the quote below:

One thing preoccupies parents about raising their children: we do not have the structure to do it. Parents are isolated, lack of structures to assist them, the organizations working for their integration at the family level; we do not know what we should give in to [with our children], how to communicate with children... the “encadrement” [structured efforts to assist and guide] of parents is cruelly lacking¹⁴ [woman from Rwanda and head of the Association Amitiés Canada-Rwanda]

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Endnotes

¹ Unless otherwise noted, the statistics in this paragraph were culled from the Statistics Canada website in spring 2005: <http://www.statcan.ca/start.html>.

² Questions on parent's place of birth were asked only to people aged 15 and above, making it impossible to include younger adolescents in these statistics.

³ This is not always the case; see Lalonde (2003).

⁴ In addition, Kunz and Hanvey (2000) found that young immigrants in Canada are less likely than native born Canadians to combine school and jobs during their secondary or post-secondary studies, suggesting that they may typically live at home and remain financially dependent on their parents later than the native-born.

⁵ For details, see the series of articles on this topic published in the newspaper *Le Devoir* in April 2005.

⁶ The names of these people are not shown here, in order to protect their confidentiality.

⁷ *Donc je dirais que l'étude sur le point que vous avez peut être oublié, l'étude devrait porter sur l'insertion au départ des parents qui arrivent en premier. Parce que une intégration réussie d'un parent c'est sûr que ça va suivre sur les enfants. ...Moi qui ai vécu 15 ans en Occident, ce que j'ai pu déceler, c'est la difficulté c'est quand le parent n'est pas bien inséré au départ, donc c'est ça qui cause des problèmes.*

⁸ These frustrations may be accentuated by the very positive publicity made to attract qualified immigrants to Canada and Quebec.

⁹ *Je voulais insister sur la carence affective des enfants qui arrivent à Montréal. Généralement il est admis que lorsque les parents sont en stress, lorsque les parents sont en panne de certitude d'emploi, n'arrivent pas à transmettre l'affection aux enfants, donc c'est les crises de colère vis-à-vis des enfants, c'est, il n'y a plus le dialogue entre parents et enfants, il y a extinction du dialogue entre parents et enfants. Donc les parents ne sont plus comme ils étaient...*

¹⁰ *... le parent qui a quitté son pays pour venir ici avec beaucoup d'espoir comme quoi tu vas trouver quelque chose, une vie meilleure. Donc le problème à la source c'est l'insertion. ...Comment le parent africain arrivé dans un pays qu'il ne connaît pas, ne pas avoir la chance de se frotter avec le peuple québécois qui ...pour essayer de casser cette barrière, cedonc ce parent n'a pas eu la chance de ...il est déçu, frustré, donc sa frustration l'enfant le voit automatiquement. Cet enfant là grandit dans un milieu où le parent véhicule des idées négatives. Où le parent est toujours découragé, l'image de l'enfant devant cette situation, c'est de voir des parents abattus, qui n'ont aucune issue, ils ne savent pas où aller, cet enfant là devient révolté.*

¹¹ *Le problème qu'on a ici comme immigrant, c'est que les rapports à l'autorité qu'il y a en Afrique et ici sont différents. Comme vous savez en Afrique, ton patron, il y a une hiérarchie en Afrique, il y a un respect... alors qu'ici le patron c'est d'égal à égal, ici un enfant peut envoyer promener ses parents ce qui est impensable en Afrique. Donc c'est une difficulté que moi j'ai rencontrée. Et puis en Afrique, c'est tout le monde qui élève l'enfant, l'éducation c'est pas seulement le rôle des parents, c'est la grand-mère, la tante, l'oncle, le voisin, toute la communauté...alors qu'ici l'éducation c'est la garderie, les parents quand ils arrivent le soir ils sont fatigués, des fois ils ont deux emplois, donc c'est d'autres difficultés pour les parents.*

¹² After the African group discussion, we met with a participant and with one of her colleagues (from Rwanda and Congo) to follow up on some of the ideas. They emphasized their view that the frequent reference to African values and ways of life in the discussion were, to a good degree, both inaccurate – an idealized and simplified vision of reality – and a pretext for parents not to make the necessary efforts to adjust to the new society. African societies are diverse and rapidly changing and, in the time of HIV/AIDS and other problems, it is no longer safe for parents in much of Africa to continue avoiding discussing sexual matters with their teenaged children. For them, the most important problem for immigrant adolescents is their parents' inability and/or unwillingness to adapt to this new situation, whether in Africa or in the host society.

¹³ A research team at the INRS-Urbanisation in Quebec is currently working on adolescent immigrants' romantic relationships, and we know of another team in the US that is working on a related topic. These efforts are essential for better identifying needs and then formalizing targeted prevention and educative programs on sexuality.

¹⁴ *Une chose qui préoccupe pour l'éducation de nos enfants : on n'a pas la structure pour le faire; isolement des parents, manque de structures d'encadrement, d'organisations qui travaillent à l'intégration au niveau familial; on ne sait pas sur quoi ni comment céder, comment dialoguer avec les enfants. ...l'encadrement des parents manque cruellement.*