



# Is socioeconomic incorporation associated with a healthier diet? Dietary patterns among Mexican-origin children in the United States



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## ABSTRACT

With each successive generation in the United States, Mexican-origin families lose their initial dietary advantages. Focusing on children's diets, we ask whether greater socioeconomic status (SES) can help buffer Mexican-origin children in immigrant families from negative dietary acculturation or whether it exacerbates these dietary risks. Pooling data from the 1999 to 2009 waves of the continuous National Health and Nutrition Examination Survey, we test whether the association between generational status and Mexican-origin children's nutrition varies by the family's SES. When predicting children's overall dietary quality using the Healthy Eating Index (2010) and predicting unhealthy dietary patterns, we find stronger evidence of segmented assimilation, whereby greater family average SES is associated with better diets across generations of Mexican-origin children. High-status Mexican-origin parents appear able to buffer their children against generational dietary declines documented in the acculturation literature.

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## 1. Introduction

Across all U.S. ethnic groups, Mexican-origin children have the highest obesity prevalence (Ogden et al., 2012). This reveals challenges for Mexican-origin immigrant families' health. Furthermore, the risks of obesity are stratified among Mexican-origin children according to their generation status, meaning the number of generations their family has been in the United States. Mexican-origin immigrant children with immigrant parents (i.e., the "first generation") and Mexican-origin U.S.-born children of immigrant parents (i.e., the "second generation") are more likely to be overweight than their peers in Mexico and Mexican-origin U.S.-born children of U.S.-born parents (i.e., the "third generation") (Van Hook et al., 2012). We seek to understand for whom these risks of childhood obesity are the greatest within the Mexican-origin population.

Immigration theory and research note that immigrants' well-being is strongly linked to their structural incorporation into American society, meaning the extent to which immigrants receive similar treatment to native-born individuals, with equal outcomes for equal endowments (Gordon, 1964). Indicators of structural

incorporation include whether immigrants hold high-status, well-paying jobs (Portes, 1981) that translate into a higher family socioeconomic status (Gordon, 1964), have legal standing in the U.S. (Bean et al., 2011; Landale et al., 2015), and experience racial integration (Frank et al., 2010).

Segmented assimilation theory argues that assimilation is associated with better outcomes among groups that are the most structurally incorporated and poor outcomes among the least incorporated (Portes and Zhou, 1993; Rumbaut, 1994). Although originally developed to explain variations across national origin groups, the theory also led to research examining within-group inequalities (e.g., Acevedo-Garcia et al., 2010; Telles and Ortiz, 2008; Waters, 1994). As such, the health of Mexican-origin children may be stratified across generations according to their family's socioeconomic status (SES).

We explore whether Mexican-origin children's nutrition follows the patterns anticipated by segmented assimilation theory. We focus on children's nutrition because poor nutrition is a risk factor for childhood obesity (Davison and Birch, 2002; Savage et al., 2007; Ventura and Birch, 2008) and because immigrant families' diets frequently decline with increasing exposure to the United States (Akresh, 2007; Ayala et al., 2008; Batis et al., 2011; Brown, 2005; Dixon et al., 2000; Duffey et al., 2008; Guendelman and Abrams, 1995; Van Hook et al., 2015). This general pattern, termed

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“negative dietary acculturation,” also occurs among Mexican-origin immigrants (Batis et al., 2011; Van Hook et al., 2015).

Our research question is whether Mexican-origin families with greater socioeconomic resources can buffer their children against these generational, nutrition declines. To our knowledge, this study is the first to explore whether SES modifies the association between children's nutrition and generational status. Most prior studies exploring generational differences in dietary quality simply control for family SES. But given the historical concentration of Mexican-origin immigrant families at the bottom of the socioeconomic distribution (Bean and Stevens, 2003; Van Hook et al., 2013), generational differences documented in prior research are strongly influenced by the number of children with very low SES and their dietary patterns. Yet a Mexican American middle class has been emerging recently (Myers, 2007; Vallejo, 2012), especially among later generations.

We compare families' SES by generation status rather than individuals' duration of U.S. residence because immigrants' upward social and economic mobility generally occurs across generations (Bean and Stevens, 2003; Vallejo, 2012). This is especially true for educational mobility given that few immigrant adults return to school after arriving in the United States, while their children can obtain more years of schooling than their parents (Vallejo, 2012). Given this lengthy timeline for upward mobility, generational status in the U.S. is likely important for understanding the association between SES and dietary practices among Mexican-origin children.

## 2. Background

To develop our hypotheses, we draw on prior research demonstrating variation in the strength of the SES-health gradient for immigrants and other groups. Given prior research demonstrating a strong association between youth weight and family SES (Miech et al., 2006; Goodman, 1999; Gordon-Larsen et al., 2003; Martin et al., 2012; Wang and Zhang, 2006), a naïve expectation would be that Mexican-origin families' relatively low SES contributes to unhealthy diets and high childhood obesity prevalence. Yet the standard, predicted associations between family SES and U.S. children's weight and nutrition may not work well for Mexican-origin children. Termed the Hispanic or immigrant health paradox (Markides and Eschbach, 2005), the relationship between SES and health is often weaker for immigrants than the U.S.-born population (Goldman et al., 2006), such that low SES immigrants are often healthier than natives with more resources. Consistent with this research, Balistreri and Van Hook (2009) found that the association between parents' education and children's post-kindergarten gains in body mass index (BMI) was weaker for Hispanic children relative to non-Hispanic White children. Further, greater family income predicted lower kindergarten BMIs for third-generation Hispanic (and White) children, but greater kindergarten BMIs for first- and second-generation Hispanic children.

We suspect that Mexican-origin children's diet quality also may not fit the “standard” pattern, wherein children's dietary quality is hypothesized to generally improve with higher parental educational attainment (Tabacchi et al., 2007) and greater family income (Drewnowski and Specter, 2004a). As discussed in the next section, first- and second-generation Mexican-origin children in low SES families likely have better diets than their low-SES, third-generation counterparts. We question whether this generation gap is smaller among high SES families and, if so, what dietary shifts occur to narrow this gap. Is it that high-SES, Mexican-origin children, regardless of generation, have relatively nutritious diets? Or do high-SES, first-generation Mexican-origin children assimilate more rapidly to a lower-quality American diet than their low-SES, first-generation peers?

### 2.1. Research expectations

Based on theory and a limited body of prior research, we develop hypotheses about the relationship between generational status and children's diet and how it varies by family SES. We conceptualize and measure family SES as a unifying, single dimension, akin to social class, that encompasses both parents' education and family income because these SES indicators are fundamentally linked and mutually reinforcing. First, increases in education lead to greater earnings (Becker, 1964; Card, 1999) and, thus, greater family income (DeNavas-Walt et al., 2006). In fact, the correspondence between educational attainment and earnings has increased since the mid-1970s, as the economy increasingly pays a premium for high-skilled workers (Morris and Western, 1999). Second, parents' education and income jointly create and reinforce class-based differences in normative expectations, cultural values, and lifestyles, including dietary patterns (Bourdieu, 1984; Lamont, 1992). Moreover, for immigrant families, greater SES is associated with more contact with non-Hispanic Whites in peer, work, and family settings (South et al., 2005a, 2005b) by decreasing their residential segregation (Brown, 2007; Iceland and Wilkes, 2006).

Nevertheless, we recognize that parents' education and income may influence children's diets in unique ways. For example, greater educational attainment leads to both general (Becker, 1993) and specific health-related knowledge (Link et al., 1998), greater cognitive capabilities (Baker et al., 2011), a cultural orientation to pursuing information (Lareau, 2003), and a sense of control for accomplishing goals (Mirowsky and Ross, 2003). However, family income provides parents with the ability to purchase health-related goods, such as groceries, meals out, physical activity equipment, housing in better neighborhoods, and more (Cawley, 2004; Drewnowski and Specter, 2004b). Yet even these unique effects of parents' education and family income are mutually reinforcing because parents' education informs purchasing decisions. For example, families with more income can eat more meals away from home, but parental education can guide their choices on where to eat and which menu options are healthier. Thus, we expect parents' education and family income to jointly influence children's diets, as measured by the family's SES.

We next outline how SES may modify the relationship between generational status and diet.

The *Null Hypothesis – No Moderation by Family SES* – predicts consistent differences in children's diets across generations regardless of the family's SES. Prior research demonstrates that U.S. exposure is associated with unhealthy shifts in diet among immigrants and their families (Akresh, 2007; Ayala et al., 2008; Batis et al., 2011; Brown, 2005; Dixon et al., 2000; Duffey et al., 2008; Guendelman and Abrams, 1995). Immigrant families often retain their cultural preferences for non-American foods, which tend to include more fruits and vegetables and less meat, sugar, and fat. Under the null hypothesis, each subsequent generation is predicted to have a worse diet regardless of SES because children in later generations are more immersed within America's dietary culture. Fig. 1a shows the expected patterns under the Null Hypothesis; generational status has a consistent relationship with Mexican-origin children's diets, regardless of the family's SES.

*Hypothesis 1 – Family SES Produces Segmented Assimilation* – suggests that the association between generational status and children's diet quality significantly varies by SES, such that higher family SES buffers against the risks of negative dietary acculturation for children in later generations. Past research demonstrates that Mexican-origin children of immigrants have better diets than those with U.S.-born parents despite their lower SES (Batis et al., 2011; Van Hook et al., 2015). Reflecting this, Fig. 1b displays a relatively high-quality diet for the first generation at even the lowest family

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