"We are, therefore I am": Contextualizing the life and emotional wellbeing of young Nigerian-born adults living in the United States.

by

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Abstract

The number of Nigerian immigrants in the United States has been on a steady increase over the past decades. Nigerians currently make up the largest African immigrant group in the United States. Nigerian immigrants are a heterogeneous group with differences in socio-demographic characteristics. This study contributes to the knowledge and understanding of young (millennial and Generation Z) Nigerian immigrants who may differ from older generations of Nigerian immigrants. This study utilized qualitative research methods to explore how the emotional wellbeing of young Nigerian immigrants is shaped by their family of origin and by their new host country (the United States). Participants included Nigerian-born adults aged 21-35 years, who immigrated from the age of 16 and beyond, and are now living in the United States. Sense of self was identified as the overarching theme from the data analysis. Participants' age, interpersonal relationships, adjustment to being in the U.S, and the exercising of their autonomy all impacted the development of their sense of self. Having a strong sense of self contributes to increased selfefficacy, resiliency, agency, and the development of significant social relationships and support systems which all lead to better health outcomes, emotional wellbeing, and a good quality of life. Finally, this study presents implications and recommendations specific to public health for considering context when working with Nigerian millennial immigrants in the United States and suggestions for future research.

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Preface

I dedicate this thesis study to all young Nigerians, at home and in the diasporas, and to all other Black young persons who are constantly construing the meaning of their lives as they move through liminal spaces, embarking on their healing journeys, fighting to be seen and to be heard, to be alive and thrive, and to love and be loved. We move.

I would like to acknowledge and give thanks to my ancestors, my Chi, my family, my friends, and my community. Without them, I would not be here and this work won't be possible. Daalu. I want to thank the participants whose narratives made this study possible. Thank you for your time and for sharing your stories with me. I would like to thank my thesis chair, Dr. Elias, for the immense support, counsel, and mentorship provided throughout this study. I also want to thank my thesis committee members who have provided great insight and help. Lastly, I would like to acknowledge and thank the department of Behavioral Health and Community Sciences (BCHS) at the Graduate School of Public Health for providing support and resources I needed to complete this study.

1.0 Introduction

The "This is Public Health" campaign enabled us to see and understand how public health issues and concepts are all around us. The mental and emotional well-being of young (millennial and Generation Z) Nigerian immigrants in the United States is public health. Emotional wellbeing is a broad term that encompasses mental health and other domains such as self-awareness, relationships, functioning in the world, and adaptability. Emotional wellbeing is an important aspect of wellness that impacts a person's quality of life. Families of origin shape our behavioral and relational patterns and our mental and emotional wellbeing. Having an understanding of the systems that inform Nigerian sociocultural norms and the Nigerian family system, is a pre-requisite for contextualizing certain aspects of the emotional wellbeing of young Nigerian immigrants. Immigrating and adjusting to a new country may be challenging. External factors in the new country can pose new stressors or new opportunities for Nigerian immigrants that impacts their health and emotional wellbeing. This thesis will first explore the literature on the importance of family, then introduce the reader to relevant aspects of Nigerian society, followed by a review of the literature on immigration, acculturation, and emotional wellbeing. The reader will also be introduced to the theoretical lenses used in approaching the study. The thesis will then go on to describe the qualitative study designed to explore the emotional wellbeing of young Nigerian immigrants in the U.S. The findings from the study are then presented followed by discussion about the importance of the findings and its public health relevance.

1.1 Literature review

This literature review contains background information that helps in the understanding of topics necessary to contextualize issues that pertain to Nigerian immigrants. The literature review covers family, Nigeria, family in the context of Nigeria, immigration, acculturation, and emotional wellbeing.

1.1.1 Family

The family is the smallest unit of society. It is the bedrock of socialization as it is the first place where socialization begins (Uwakweh, 2014). Socialization is pervasive, consistent, self-perpetuating, invisible, and starts from the moment we are born. Socialization is the process of learning about the social norms and values that guide and govern society, the different social groups people fall into, and the ascribed roles and rules attached to different social groupings in society (Dixon, 2018).

Whether we are in a nuclear, extended, foster, or chosen family, socialization still occurs. It is in the family that we are taught to play and follow rules ascribed by society for our social groups. In families, individual members learn their place in the social organization and hierarchy of groupings that may be based on race, ethnicity, class, sexuality, gender, and nation as the family socializes its members into appropriate set of values which mirror and align with the larger societal values and norms (Collins, 1998). The socio-cultural norms and values of a society inform the marital, sibling, and parent-child relationships in the family (McHale, Updegraff, & Whiteman, 2012).

Family has the ability to impact a person's quality of life. It shapes a person's concept and perception of self and of others. It shapes one's expectations, values, and beliefs. Family impacts a person's growth and development. It provides necessary resources such as food, safety, security, and attachment needed for a person's growth and development. Behaviors are also formed in the family over generations as "behavioral and emotional patterns are repeated and transmitted over multiple generations of a family by the conscious teaching and learning of information as well as the unconscious programming of emotional reactions and behavior" (The Bowen Center, 2018). Responses to a behavior may encourage or discourage said behavior thereby making an individual adjust and modify this behavior accordingly. Behaviors are also learned as an individual, particularly children, look up to adults in the family and emulate these behaviors.

Based on a family's rules and norms, which are influenced by the sociocultural norms, members of a family develop and maintain ways of interacting with others outside of their family unit or system. Pro-social behaviors—behaviors that benefit other people—begin and are learned in the family (Versey, Kakar, John-Vanderpool, Sanni, & Willems, 2020). Concepts such as empathy are taught to children as they learn how to identify other people's emotions and feelings (cognitive empathy) and develop feelings and emotions in response to other people's emotions (affective empathy) (Versey, Kakar, John-Vanderpool, Sanni, & Willems, 2020). The proper encouragement and development of these aspects of empathy in a family can lead to an empathetic individual.

The family is the first place an individual learns to develop and maintain relationships and interact with people. Relationships in a family impact a person's quality of life as these dynamics can influence emotional and mental health and wellbeing (Coverdale and Long, 2015; Cox & Pailey, 2003). Sibling relationships, marital relationships, and parent-child relationships all have

major impact on a person's psyche. The seminal study on adverse childhood experiences showed that children who experienced and witnessed trauma and adversity had poor health outcomes later on in their adulthood (Felitti, Andra, Nordenberg, Williamson, Spitz, Edwards, Koss, & Marks, 1998). Adverse childhood experiences such as emotional abuse from parental verbal aggression can impact the wellbeing and mental health of children even into their adulthood (Polcari, Rabi, Bolger & Teicher, 2013). Marital relationships full of conflict can threaten children's sense of emotional security, which can go on to affect children's relationships with others and with the world (Cox & Pailey, 2003). Sibling bullying and aggression can lead to emotional difficulties, mental health problems, and low self-worth and competence among victimized siblings (Plamondon, Bouchard, & Lachance-Grzela, 2018; Mathis & Mueller, 2015). These adverse childhood experiences also impact family dynamics and may also impact people's attachment styles, sense of emotional security, and ways they approach conflicts later in the future. In general, families with tumultuous relationships among its members can negatively impact both the mental, physical, emotional health of its members.

1.1.2 Nigeria

Nigeria, the most populous country in Africa, is located in West Africa, with a population of about 201 million persons (The World Bank, n.d.). 76.5 percent of the population in Nigeria are 0-34 years old (Varrella, 2020). Nigeria is a multi-ethnic and multi-lingual country with over 250 ethnic groups and 750 languages (Lasebikan, 2016; Omipidan, n.d.). The three major ethnic groups in Nigeria are Hausa, Yoruba, and Igbo ethnic groups. A former colony of the British, Nigeria gained its independence on October, 1, 1960.

1.1.2.1 The Nigerian Society

Nigeria is mostly a communalistic society with people having strong ties and allegiances to their ethnic groups and communities of origin. In spite of migration out of their ethnic and ancestral communities, people still have a strong allegiance, orientation, and commitment to these communities and to their ethnic identity (Ette, 2011). People uphold the norms, beliefs, practices, and rules of their ethnic groups even outside the geographic location of these groups. Contemporary Nigeria is a mix of both modern and traditional cultures. Modern Nigerian culture embodies western culture and individualism that emphasizes personal action and responsibility while traditional culture is collectivistic in that it emphasizes interpersonal relatedness, obedience, and conformity (Salami & Oyesoji, 2007). Millennial and younger Nigerians may embody a blend of modern and traditional culture along different spectrums on different degrees. This blend can be seen in their decision-making process, values, beliefs, and life choices.

1.1.2.2 Religion in Nigeria

Nigeria is an overwhelmingly religious observant country with 49.3 percent identifying as Christians, 48.8 percent identifying as Muslims, and about 1.4 percent as traditionalists—belief and practice in ancestral and indigenous religion (Pew Research, n.d.). As such, religious institutions, particularly Christianity and Islam, have an enormous influence on the people and on the social-cultural norms as these institutions inform and uphold norms (and taboos). Religious leaders are seen as figures of authority. People seek out religious leaders for guidance and look to them as authorities on issues and questions they may have (Ezeobele, Malecha, Landrum, & Symes, 2010). Religion in Nigeria influences the views surrounding mental health disorders as most people believe that that mental health disorders are a divine punishment or are spiritual in nature and are caused by possession of evil spirits, sorcery, witchcraft (Labinjo, Serrant, Ashmore, & Turner, 2020; Lasebikan, 2016). This belief causes the stigmatization of mental health disorders in Nigeria thereby resulting in less utilization of mental health services in the country (Armiyau, 2015; Audu, Idris, Olisah, & Sheikh, 2013; Labinjo, Serrant, Ashmore, & Turner, 2020). Due to the belief in the supernatural causes of mental health, most Nigerians seek out spiritual interventions and guidance for mental health issues from their religious and spiritual leaders as opposed to mental health professionals (Lasebikan, 2016; Labinjo, Serrant, Ashmore, & Turner, 2020; Armiyau, 2015).

1.1.2.3 Patriarchy

Nigeria is a patriarchal society with white supremacist influences as a result of colonization. A patriarchal society is one that is male dominated (men holding power and authority), male centered, and male identified (Carlson & Dermer, 2016). In a patriarchal society, gender is based on a binary system with cisgender (gender identity matching sex assigned at birth) male and female gender identities being the acceptable norms (Hunnicutt, 2009; Dim & Asomah, 2019; Lorber, 1994). Social systems and institutions are organized and stratified based on gender with privilege accorded to the cisgender man (Carlson & Dermer, 2016, Dim & Asomah, 2019). Patriarchy allows for socio-cultural norms and taboos to favor and privilege cisgender men (Ekwemalor & Ezeobele, 2020; Dim & Asomah, 2019; Carlson & Dermer, 2016). Cisgender men dominate the systems and institutions in Nigeria even in historical matrilineal communities in Nigeria as men are the authority figures, hold power, control resources, and are privileged and centered (Carlson & Dermer, 2016; Nzegwu, 2006; Amadiume, 2015).

Cis-heteronormative norms are upheld in Nigeria as non-cisgender and sexual minorities (for example, lesbian, gay, bisexual, queer, transgender, and gender non-conforming persons) are

marginalized and punished for deviating from the ascribed gender and sexual identities, roles, and expressions. For instance, Nigeria signed into law the Same-Sex Marriage Prohibition Act in January, 2014. This law criminalizes the existence and support of Lesbian, Gay, Bisexual, Transgender, and Queer + (LGBTQ+) people as it prohibits same-sex unions, the officiation, witnessing, and aiding of same-sex unions, the direct or indirect display of affection by people in same-sex relationships, the provision of direct services, except healthcare services, specifically to LGBTQ+ people, and the registration, formation, and operation, of gay unions and clubs and participation in them (Adebanjo, 2015; & Sogunro, 2018). It also carries a hefty sentence of 14 years' imprisonment for people found guilty of entering same-sex unions and 10 years for formation of clubs and officiating and aiding same-sex unions (Adebanjo, 2015; & Sogunro, 2018). The indirect consequence of this legislation is that it also gives citizens permission to perpetuate violence on LGBTQ+ and adjacent people in Nigeria (Adebanjo, 2015; & Sogunro, 2018; Okanlawon, 2017; Okanlawon, 2018).

With male domination and centeredness comes male privilege and entitlement which breeds violence against gender minorities, such as rape, harassment, and domestic violence. Patriarchy in Nigeria also contributes to an environment where gender-based violence including sexual violence is prevalent. Due to their positioning in a patriarchal society, girls are at risk for sexual abuse, (forced) early marriage, domestic violence, homicide, family abuse, due to cultural, religious, and traditional beliefs that center men (Nlewem & Amodu, 2017; Azeez, 2020).

It is important to note that during the pre-colonial era, gender roles and the power relations among sexes were different. There was gender/sex egalitarianism as both sexes controlled certain spheres of society and there was no total domination of all the spheres in the society by one sex. Women owned, dominated, led, and were in charge of the market sphere in both Igbo and Yoruba communities' pre-colonization (Oyěwùmí, 1997; Chuku, 2009; Omobowale, 2019). Women were active participants in the traditional political system pre-colonization (Dim & Asomah, 2019; Chuku, 2009; Nzegwu, 2006; Amadiume, 2015; Oyěwùmí, 1997). Age (seniority) was a much important factor in the social organization of the society in pre-colonial societies than gender or sex as seniority accorded respect and authority (Oyěwùmí, 1997; Amadiume, 2015). Colonialism obscured any form of egalitarianism in Nigeria among the sexes as the British colonial policies upheld and enforced patriarchy throughout Nigeria during colonization (Nzegwu, 2006; Chuku, 2009; Amadiume, 2015; Pereira, 2005; Oyewumi, 1997). However, Nigerian women's engagement in politics and resistance movements since colonization has never ceased. Nigerian women organized and resisted colonialism and colonial policies, played active and important roles in the struggle for independence, protested military dictatorship (Dim & Asomah, 2019; Nzegwu, 2006; Nolte, 2008; Chuku, 2009; Norwood, 2013) and they continue to be at the forefront of resisting social injustice and inequities (Ndifon, 2020).

Unfortunately, Nigeria today has one of the lowest women's political participation level in the world. Women are disproportionately represented in politics and leadership as they hold lesser numbers of political positions and leadership offices compared to men (Dim & Asomah, 2019; Ezeilo, 2010). The impact that women have on the economy in African countries has been highlighted in research. Through entrepreneurial efforts, women increase their household income and alleviate poverty. This then translates into better living standards across the country (Panda, 2018; Halkias, Nwajiuba, Harkiolakis & Caracatsanis, 2011). However, women in top leadership positions in the business, industry, and civil service realm in Nigeria are few compared to those held by men (Omar & Ogenyi, 2004). Unique problems facing women entrepreneurs include balancing work and family life and gender-based discrimination in patriarchal societies (Panda, 2018). Nigerian women entrepreneurs are also affected by external labor challenges such as financing for business and access to resources, as historically banking institutions fail to provide adequate loans, if any, to women entrepreneurs (Panda, 2018; Halkias, Nwajiuba, Harkiolakis & Caracatsanis, 2011).

1.1.2.4 Class

There is a wide class disparity in Nigeria with the wealthy being extremely wealthy and the poor being extremely poor. Nigeria ranks 161 out of 189 countries and territories in income inequality (United Nations Development Programme [UNDP], 2020). People's income affects their access to education and healthcare. A person's education (and attainment level) also impacts their employment opportunities and subsequently, their income level. The Nigerian society favors individuals being highly educated as it is a means of attaining social mobilization and improving one's class status through better employment opportunities with higher income.

People are expected to take care of their families, both nuclear and extended, through the provision of material (and non-material) resources and poor persons lack the resources to do this which translates to them and their family being in poverty. Being from a low-income family means having poorer access to education as better education options are privately owned and are more expensive compared to public education (Baum, Abdul-Hamid, & Wesley, 2018; Härmä, 2016; Härmä, 2013). Securing employment with a good income is also limited if one is poor or from a low socioeconomic status (SES) as educational requirements and trainings might be needed for employment.

1.1.3 Family in the Nigerian context

The foundation of a traditional Nigerian family system is the tracing of ancestral ties to a common ancestry or ancestor (Obayan, 1995). Traditionally, polygamy, more specifically polygyny—the marriage of a man to more than one wife—is practiced among various ethnic groups in Nigeria and still exists in Nigeria (Behrman, 2019). Family structures in traditional Nigerian societies and groups have undergone changes due to the trans-Atlantic slavery, colonization, independence struggle, the Nigerian-Biafra civil war, urbanization, and rural-urban migration (Nzegwu, 2006). British colonial policies strengthened and emboldened already existing but non-prominent male-dominant view of the family which created the mechanism for female gender subordination in families. (Nzegwu, 2006). This was done through the introduction of the concept of households by the colonial administrators, which placed husbands as sovereign head of the family and female members as dependents (Nzegwu, 2006). With men as sovereign heads, the female members of the family needed the approval of the husband or father for reasons such as obtaining medical care, getting an education, and opening bank accounts (Nzegwu, 2006).

Current day Nigeria has a patriarchal heteronormative model of family with parents being of opposite genders/sex, and the man or father being the head of the household, wielding power and authority (Nzegwu, 2006; Carlson & Dermer, 2016). According to the Nigeria Demographic and Health Survey (NDHS) of 2018, 82 percent of households in Nigeria are headed by men (National Population Commission, 2019). Polygyny still exists in current-day Nigeria as 31 percent of married women surveyed in the 2018 NDHS were in polygynous unions (National Population Commission, 2019). Also, women were more likely to be divorced and separated compared to men in the 2018 NDHS (National Population Commission, 2019).

The current structure of Nigerian families can be described as a nuclear-extended family structure (Mivanyi, 2006) with the extended family system being a system of "social network relationships based on mutual dependence" (Salami, 2008). The extended families include kin members such as grandparents, uncles, aunties, cousins, nephews, nieces, and even in-laws (Nwadiora, 1996). The Nigerian family model can best be understood as interdependent. According to Kagitcibasi's interdependent family model, "an interdependent family model is one that is collectivist and does not like the development of autonomy and separation as it can pose a threat to material benefits of the family" (Kagitcibasi, 2013). Simply put, there is great dependence on family members for material benefits needed for survival and separating one's self from the family can disrupt the system. The extended family provides roles of financial, emotional, physical, and social support to their family and kin members (Obayan, 1995; Nwadiora, 1996). This allows for the exclusiveness of a family to outsiders, particularly in disclosing certain personal problems to outsiders (Obayan, 1995) as the nuclear-extended family forms a closely-knit web like structure that is sufficient and dependent on itself. Post-modern Nigerian families may have a psychological interdependent family model where there is interdependence when it comes to maintaining relatedness and close-knit family ties that include some boundaries while still having some material or financial dependence (Kagitcibasi, 2013). In other words, having some boundaries that distinguish self may be encouraged while still having some dependence on family for material and financial needs.

The structure of most Nigerian families is one where the father or another prominent male relative is the head of the family and in the absence of one or both, the mother becomes the head of the family. The father is usually the main financial provider, breadwinner, final decision maker, and custodian of laws and tradition in the family (Mivanyi, 2006). Men rarely partake in household

duties such as cooking, cleaning, child-rearing as that is the sphere delegated to the wife and other female members of the family (Ezeobelle, Malecha, Landrum & Symes, 2010; Mivanyi, 2006). In addition to fulfilling all household and care obligations, the wife (or wives) supports the husband by seconding rules and also helping to enforce said rules, decisions, and traditions (Mivanyi, 2006).

The dynamics in Nigerian families mostly follow the dynamics of a hierarchical system. Parenting styles are mostly authoritarian—high parental demandingness and low parental emotional responsiveness (Obimakinde, Omigbodun, Adejumo, & Adedokun, 2019). The father or male authority figure has the final decision, although that is negotiated with the mother (or in rare occasions and among some few families, the mother may have the final decision) (Mivanyi, 2006). Obedience by children is a highly-valued trait in Nigerian families (Mivanyi, 2006; Nwadiora, 1996) which aligns with the interdependent model (Kagitcibasi, 2013). Children are to be seen but not heard. They are not to question authority whether from parents or other elders around them. Conforming to social and cultural norms is encouraged. The autonomy of children may be encouraged but to the degree that it doesn't disrupt family ties and rules and that it conforms to sociocultural norms. Children are socialized in ways that make them respectable adults in alignment with norms through messages from parents and kin (Nwadiora, 1996). In interdependent family models, children and offspring who become adults are expected to fulfill their family obligation and duties by taking care of their parents, siblings or other extended family members (Kagitcibasi, 2013). Elders in the family play the role of mediators in resolving internal family conflicts, being custodians of family values and traditions, and teaching younger members of the family morals and values (Nwadiora, 1996).

The parent-child relationship influences different aspects of a person's life including their education, career-aspirations, choices related to relationships and marriage (such as spousal choices), their residence, and their religious identity (Salami & Oyesoji, 2007; Obimakinde et al., 2019). For instance, Nigerian parents are interested in and influential in the choice of career options of their children because they want their children to be successful and have financial stability, which will also benefit the material reality of the family (Salami & Oyesoji, 2007; Adeniji-Neill, 2012). Some Nigerian children choose career aspirations and options that align with their parent or family wishes due to their interdependence on the family: this is partly because their family (parents) are mostly responsible for covering their educational costs (Salami & Oyesoji, 2007; Mivanyi, 2006). Other reasons for alignment with parents' decisions includes a culture that emphasizes respect and obedience to authority, internalization of parents' expectations, and the threats posed by non-conformity to family. Not much is known about sibling relationships in Nigerian household as the literature on this topic is scant. However, one can assume that good sibling relationships are encouraged as this aligns with the interdependent family model and structure seen in Nigeria. However, given that Nigeria is a patriarchal society, it is also fair to assume that gender may impact sibling relationships, as roles and expectations by gender may affect the ways siblings interact, form, and maintain relationships with each other.

In a polygynous household, family dynamics are different. According to research done by Tabi, Doster, and Cheney, the relationships between the wives, children, a wife and a husband, the wives and the husband all have different dynamics that might affect the functioning of the family system and impact individual members (2010). The relationships among co-wives in polygynous marriage may be smooth due to cooperation among co-wives or rough due to rivalry among wives (Tabi, Doster, & Cheney, 2010; Vellore & James, 2016; Akresh, Chen & Moore, 2011). There may be more interfamilial conflict as wives compete for resources or attention, especially if resources are scarce due to the size of the household and external economic conditions (Behrman, 2019; Vellore & James, 2016).

Researchers have explored the impact of polygamous marriages on family dynamics. Women in polygamous marriages tend to have higher rates of mental health problems such as depression, anxiety, paranoid ideation, and emotional distress compared to women in monogamous marriages (Shepard, 2013). Higher levels of interpersonal conflict can contribute to violence in a polygynous household. Polygyny is a risk factor for intimate partner violence (IPV), with women (or wives) being the victims of physical and emotional IPV (Behrman, 2019). The alignment of the husband with hyper-masculine heteronormative norms and behaviors of establishing dominance such as through the use of violence, contributes to IPV in these households (Behrman, 2019). Polygamy was also found to be associated with poor child health outcomes in a study by Vellore & James (2016).

In some families, conflicts happen that bring in elders in the extended family or in the immediate community to resolve (Nwadiora, 1996). Children might be protected from conflict depending on their age as children are not to be concerned with adult matters. Children in polygamous marriages may internalize and externalize conflicts going on in their households. As described in a study on girls from polygamous families in Bedouin-Arab-Israeli communities, adolescent girls can internalize and take on their mother's pain, suffering and feelings of betrayal and go on to have distrust and anger towards their father (Alhuzail, 2019).

Nigerian families are constantly changing. Increase in rural-urban migration and migration out of the country changes the family structure and family dynamics (Mivanyi, 2006). Family members become separated by distance as people migrate to seek better opportunities for their selves, their families, or both. Family members that migrate may return soon, later, or they may relocate all or parts of their family thus changing family dynamics and structure again.

1.1.4 Immigration to the United States

The last quarter of the twentieth century, between 1960 and 2007, saw a 40-fold increase in the number of migrants coming from Africa to the United States (Uwakweh, 2014). According to the U.S. Census Bureau, Africans make up 9.1% (2,475,118) of the total number of foreign born people that entered the U.S. from 2010 or later (United States Census Bureau, 2020). The gender distribution is nearly equal (50.6 percent of immigrants are male, 49.4 percent are female), while the age distribution shows close to half—42.3 percent—of immigrants are between the ages of 25-44 years (American Community Survey, 2019).

Nigerian migration to the U.S began in the 1920s, with Nigerians coming to the U.S for higher education (university) purposes and returning back to Nigeria after they were done with their studies (Ogunwole, Battle, & Cohen, 2017). Communities and ethnic groups sent some of their members and financed their education in hopes that they would come back and help in the socioeconomic improvement of their people and ethnic groups and communities through the provision of material resources needed for growth and development (Ogunwole, Battle, & Cohen, 2017; Ette, 2011). The Nigerian government had also sent some of its citizens to get educated in the U.S in the hopes of having highly skilled Nigerians return to take over high-positions in government departments and industries (which were otherwise occupied by expatriates and colonizers) and to help in the creation and expansion of a robust and developed educational system (Ette, 2011). This migration pattern-Nigerians attaining higher education and returning back home-started to change following the Nigeria-Biafra civil war. The military

leadership/dictatorships that followed post-civil war in the 1970s abandoned prior endeavors to create a robust education system, thus leaving Nigerians who were in the U.S attaining advanced degrees stranded (Ette, 2011). Nigerian immigrants started to remain in the U.S rather than return home, forming the first wave of Nigerian immigrants (Ogunwole, Battle, & Cohen, 2017). The number of Nigerians who applied for residency in the United States in the decades following the civil war exponentially increased from 1500 between 1961-1970 to 8,800 between 1971 and 1980 (Ette, 2011). From 1980 to 2010, a 15-fold increase was seen in the number of Nigerian-born persons living in the United States (Migration Policy Institute [MPI], 2015).

As of 2018, about 375,800 Nigerian immigrants were living in the U.S, making Nigeria the top country where African immigrants in the U.S. came from (Pew Research Center, 2018). The states of Texas, New York, Maryland (and D.C.), Georgia, and California have the highest density or concentration of Nigerians in the U.S (Migration Policy Institute, 2015; Ogunwole, Battle, & Cohen, 2017). There are more male Nigerian immigrants than female in the U.S. and 83 percent of Nigerian immigrants are between ages 18-64 years (Migration Policy Institute, 2015). Nigerian immigrants aged 25 and above are highly educated, holding either a bachelor's degree or advanced degree, since education is a major factor for coming to the United States (Migration Policy Institute, 2015; Adeniji-Neill, 2012; Ogunwole, Battle, & Cohen, 2017). Due to levels of educational attainment, about half of Nigerian persons in the United States work in the management, business, and arts sector (Ogunwole, Battle, & Cohen, 2017). Although, even with high levels of educational attainment and participation in the labor force, around 12.8 percent of Nigerians live in poverty in the United States (Ogunwole, Battle, & Cohen, 2017).

Due to the ongoing Nigerian economic recession, high rates of unemployment and underemployment, security crisis, and dismal political situation in Nigeria, many Nigerians have left or considered and expressed interest in leaving the country. In a survey done in 2018 by The Pew Research Center, 45 percent of Nigerian adults said they plan to move to another country sometime within the next five years (Connor & Gonzalez-Barrera, 2020; Gramlich, 2020). Other reasons for current and continuous Nigerian immigration to the U.S include joining a spouse or family member currently living in the United States, educational attainment purposes, and employment with multinational companies based in the U.S (Etteh, 2011; Ogunwole, Battle, & Cohen, 2017; Nwadiora, 1996).

1.1.5 Acculturation

Migration to a different country comes with its stress. Immigration may entail a change to an environment that is culturally different from one's home culture and thus there might be stress, in navigating this new environment. Acculturation can be defined as "changes in an individual's 'cultural patterns' (i.e., practices, values, identities) resulting from sustained first-hand intercultural contact and subsequently affecting the individual's psychological well-being and social functioning" (Ward & Garret, 2016). Put simply, acculturation is the process of cultural changes that happen with contact between two or more different cultures with certain aspects of culture changing during the acculturation process at different rates and in different periods (Schwartz, Unger, Zamboanga & Szapocznik, 2010; Berry, 2019). Acculturation occurs in various cultural domains such as language, behavior, values, identity, norms, and practices.

Acculturation is a multidimensional process. Berry proposed four strategies of acculturation—assimilation, integration, separation, and marginalization—that immigrants use in his acculturation framework (Berry, 2019; Berry, 2001). Assimilation is the adoption of the new or host country's culture and discarding of one's heritage or home culture; integration is when a

person both adopts the new host culture and keeps and maintains their heritage culture; separation is the rejection of the host culture and the keeping of the heritage culture; and marginalization is the rejection of both the host culture and heritage culture (Berry, 2019; Schwartz, Unger, Zamboanga & Szapocznik, 2010).

There are different factors that impact the process of acculturation. Ethnicity is one of these factors and is an important component to explore in the acculturation of people from non-Western countries, especially for African and Nigerian immigrants. Ethnicity means "membership in a group with specific heritage and set of values, beliefs, and customs" (Phinney, 1996). Culture, another factor, means the shared meanings, referents, or understanding shared by a group of people (Schwartz, Unger, Zamboanga & Szapocznik, 2010). In addition to the culture and ethnicity of immigrants, demographic factors, the socioeconomic status of immigrants, where immigrants settle within the new country, and immigrants' fluency in the new environment's language, are factors that impact the process of acculturation (Schwartz, Unger, Zamboanga & Szapocznik, 2010; Berry, 2019). The reason for migration also impacts acculturation as asylum seekers and refugee persons displaced by war, violence, and natural disasters in their home countries have different acculturative experiences compared to voluntary migrants (people that willingly migrated on their own accord) or sojourners (immigrating for a specific period of time for a specific purpose with intention of returning back to home country after the time has elapsed such as most international students) (Schwartz, Unger, Zamboanga & Szapocznik, 2010).

Navigating this process of intercultural contact and changes during the acculturation process can produce stress among immigrants. Acculturative stress has been defined as the stress resulting from the process of acculturation, particularly, the cultural and social stressors that cause adverse effects on the health and wellness of migrants (Berry, 2019; Ndika, 2013; Schwartz,

Unger, Zamboanga & Szapocznik, 2010). Immigrants may struggle with the meaning-making of life, their purpose, their sense of identity, and belonging, in new host countries that are culturally divergent from theirs (Ette, 2011). External factors in the new society also compound and add to the stress that immigrants face. These external factors range from personal to structural issues such as problems with interpersonal relationships, racial discrimination, and unemployment or underemployment contributing to poverty or low socioeconomic status (Nwadiora, 1996; Ette, 2011).

Acculturative stress has negative impacts on the behavioral health of immigrants. Depression, anxiety, control problems, substance use disorders are all behavioral health problems Nigerian and African immigrants face with the duration of stay in the United States modifying the occurrence of these health issues (Ezeobele, Malecha, & Landrum, 2010; Ndika, 2013; Ezeobele, Ekwemalor & Ogunbor, 2019; Tshiswaka, Ibe-Lamberts, & Osideko, 2017; Ekwemalor & Ezeobele, 2020; Obisesan et al., 2017). Some of the negative psychosocial effects of acculturation on Nigerian immigrants include reduced social networks and support, parents' loss of control in rearing their children, perceived discrimination, and challenges that impact family and marital structure and dynamics (Ekwemalor & Ezeobele, 2020). The increase in alcohol consumption among Nigerian immigrants is associated with being a predictor of obesity levels with the increase in length of stay and acculturation contributing to immigrants' adoption of the perceptions and uses of alcohol (Tshiswaka, Ibe-Lamberts, & Osideko, 2017; Obisesan et al, 2017). The longer immigrants stay and live in the U.S., the more likely they are to adopt the health profile of the communities where they reside. This phenomenon has been highlighted in studies such as one done by Kaplan, Ahmed, and Musah, where Ghanaian immigrants in New York who identified the decline in their health status overtime with being in the U.S. for a longer period of time with stress—from economic pressures, changes in social structures and family life, and diminished social status—being the biggest contributor to health problems (Kaplan, Ahmed, & Musah, 2013).

Understanding the acculturative strategy and approach adapted by Nigerian immigrants provides some insight into the burden of health problems among Nigerian immigrants and immigrants in general. In a study by Ndika, assimilation and separation were the acculturative strategy most adapted and endorsed by Nigerian adults' immigrants with integration least likely endorsed (Ndika, 2013). However, another study found that Nigerian adolescents (12-17 years) and youth (18-24 years) living in Minnesota were more integrated on the acculturation categories (Akinde, 2013). This aligns with how the demographic factor, in this case age, impacts acculturation as older immigrants, who may live in ethnic enclaves, tend to fall in the separation or assimilation category compared with younger immigrants. Immigrants that adopt a "blended biculturalism"-adopt, maintain, and blend both receiving and heritage cultural practices, values, and identity-tend to have lower acculturative stress, higher self-esteem, and lower psychosocial distress (Chen, Benet-Martínez, & Bond, 2008; Schwartz, Unger, Zamboanga & Szapocznik, 2010). People with a blended bicultural approach tend to have an integrated strategy of acculturation that helps them cope more effectively with psychological and sociocultural adaption in their new country as they have access to support and resources from both cultures (Berry, 2019).

1.1.6 Emotional Wellbeing

An aspect of wellness that impacts one's quality of life is emotional wellbeing (EWB). Our emotions, including our emotional responses, affects us physically and mentally. Our emotional state can elicit physiological and psychological responses that over time can impact the quality of our health and life (Rees, 2010; Courtwright, Flynn Makic, & Jones, 2019; Coverdale, 2015). Mental health is not synonymous with EWB, but is a component of EWB. EWB is broad and multi-faceted and can be conceptualized as having four domains that impact different aspects of one's life and self. As described by Reese (2010):

The first domain of EWB pertains to independent function and includes selfawareness, emotional safety (including things like self-esteem and secure identity), executive function (ability to experience and concentration), and good mental health. The second domain concerns functioning through relationships and includes one's perception of relationships, use of relationships, and communication. The third domain relates to functioning in the world and includes one's recognition of danger without excessive anxiety, one's concept of reality, and ability to accept challenge and risk failure. Finally, the fourth domain concerns adaptability and includes regulation of stress and emotion, tolerance of change and unpredictability, resilience, and effective coping strategies.

Family influences and impacts our EWB. Family is where one learns social connection and how to be connected to others which is an aspect of EWB. Across cultures, such as indigenous and Australian Aboriginal and Torres Strait Islander individuals, family and kinship is an important domain for social and EWB as family defines the manner a person is connected with others and governs the majority of social interactions (Dudgeon, Bray, D'Costa, & Walker, 2017). High levels of family connectedness with a safe, stable, nurturing environment is an antecedent for achieving EWB in children and adolescents (Courtwright, Flynn Makic, & Jones, 2019).

Parental attachment formed during the early years of infancy provides a bedrock for EWB as the type of attachment formed with parents influences how the infant and child explores the

world during that stage (Rogers, 2016; Rees, 2010). Also, part of the parental bond established during the early years of life help infants and children soothe themselves and eventually learn to regulate their emotions as they continue to grow and develop (Rogers, 2016; Rees, 2010). Relationships in families, such as sibling relationships, impact a person's EWB (Coverdale & Long, 2015). Sibling relationships characterized by sibling bullying and aggression are linked to mental health problems such as anxiety, emotional difficulties, poorer physical health, lower social competence, and lower academic achievement among siblings that were bullied (Plamondon, Bourchard, Lachance-Grzela, 2018; Mathis & Mueller, 2015).

The importance of EWB in the quality of life and wellness has been nationally acknowledged in the United States. In 2014, the Surgeon General declared EWB as a priority for prevention strategy essential to overall health and in 2018, EWB was mentioned as a concept of importance, population health outcome, and a research priority by the National Institute of Health (NIH) (Courtwright, Flynn Makic, & Jones, 2019). Higher levels of EWB leads to "better health, decreased risk of illness, disease and injuries, improved health outcomes, and long life" (Courtwright, Flynn Makic, & Jones, 2019). Poor levels of EWB can cause stress-induced illnesses such as psychosomatic illnesses, irritable bowel syndrome, reduced immunity, endocrinal problems, increased risk of accidents and injuries, and mental health problems in children and adults (Rees, 2010).

1.2 Theory

"It is not easy to name our pain, to theorize from that location" – bell hooks

Some theories are born from trying to make sense of life, struggles, and lived experiences by the process of imagining different ways of seeing, thinking, and conceptualizing differently of the social order of the world, in order to facilitate healing. "Theory is healing, liberatory, or revolutionary when theory is directed into preforming the function of healing, liberation, or revolution and reaching these goals" (bell hooks, 1991). One of the theories I use to approach this study and my understanding of it is Womanism. Womanism provides the steps and language to identify and understand the different forms and sites of oppression in Nigeria both at the personal, communal, and societal/universal level, how they are intertwined, and how they affect the wellbeing of Nigerians, including Nigerian immigrants in the United States.

African-centered womanism centers, and is committed to the survival and thriving of, Black people on the African continent and across the world (Tsuruta, 2012). African women struggle includes struggles against patriarchy, colonialism, class issues and capitalism, nationality, religious fundamentalism, and gender related issues in the family sphere (Arndt, 2000; Norwood, 2013; Mekgwe, 2007). Therefore, using womanism, especially womanism that centers African Black women, to guide this study is important as it provides understanding to the unique and peculiar issues Nigerian-born adults may have that is borne out of being in a patriarchal society that is Nigeria.

Another theoretical framework guiding the development of this study is Bowen's Family Systems Theory. Bowen's family systems theory is used in behavioral health and it recognizes and emphasizes that our families of origin have the biggest impact on how we function and behave (The Bowen Center, 2018). Bowen family systems theory can be utilized in explaining and understanding how the complex interactions in a family's emotional unit affect members of the family and how socio-cultural values and norms passed on are present in a family (The Bowen Center, 2018). Bowen family systems theory seeks to understand emotional ties within a family as these ties affect how individuals behave and function.

Bowen family systems theory has eight concepts and four of these concepts are particularly relevant to this study and they are: differentiation of self, family projection process (parental projection), nuclear family emotional process, and multigenerational transmission processes (The Bowen Center, 2018). These concepts have been defined in the following ways by The Bowen Center (2018):

"Differentiation of self is being able to remain connected to family while maintaining independence, autonomy, and strong perception of self. Parental projection is the transmission of parents' emotional problems to children through the parent-child relationship. This can affect the child's relationships later on in life. Nuclear family emotional process is the relationship patterns that control how and where problems develop in the nuclear family. Finally, multigenerational transmission processes are how emotional patterns are repeated and transmitted over several generations through the unconscious programming of emotional reactions and behavior".

Lastly, acculturation theory guides this study as it forms the basis of the lens where we examine how the United States impacts and modifies the lives of Nigerian immigrants. Acculturation theory has been used in understanding issues unique to migrant families and persons (Ward & Geeraert, 2016). Acculturation theory helps in the understanding of how participants' health and EWB has changed as a result of being in the new host country.

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2.0 Study relevance and aim

From the literature review, we understand that families play a huge role in the growth and development of a person. The family can influence a person's emotional wellbeing, their choices, their values, beliefs, the habitual/behavioral patterns they have in response to certain stimuli including stress, and the ways they navigate relationships. As Nigerian youth and adults continue to immigrate to the United States, it becomes important to recognize, identify, and understand the sociocultural and personal values and beliefs they have, their needs, their emotional processes, and how all of these combine to shape their life here in the US and impact their wellbeing. It is important to understand how the upbringing Nigerian-born adults received influences their life in the US, if and how the US modifies this, and what the effects are on them. This study aims to explore how the emotional wellbeing of Nigerian-born adults living in the United States is shaped by their family of origin and by the United States. The study examines family structure and dynamics, life in the United States, certain aspects of emotional wellbeing such as self-awareness, use and navigation of interpersonal relationships, and stressors they encounter in their lives. This study seeks to contribute to the knowledge and literature on the emotional wellbeing of young (millennial and Generation Z) Nigerian-born adults living in the United States as there is a dearth of research in this area.

3.0 Methodology

The methodology section includes the study design, sampling and recruitment strategies used including information about the characteristics of study participants, data collection methods used, and the data analysis process.

3.1 Study design

This study uses a cross-sectional, qualitative research study design. According to Padgett, qualitative research designs help us "tap deeper meanings of human experiences and generate theoretically richer observations" (Padgett, 2017). Qualitative studies answer questions of exploratory nature of a phenomenon such as the one posed by the research topic. This design is intended to yield rich information from a small sample that gives more context to the phenomenon of EWB among adults that grew up in a Nigerian family, why the EWB of young Nigerian immigrants is important and how young Nigerian immigrants' construe and maintain EWB.

3.2 Sampling and recruitment

The target population for this study are adults aged 21–35 years who were born in Nigeria and lived there till at least they were 16 years old before immigrating to the United States. The parents of these adults are Nigerian and still live in Nigeria. The sampling method used in this study is purposive sampling because participants or respondents needed were those who had the

unique experience or characteristic of being young, born in Nigeria, and immigrated during their late adolescence and beyond. The inclusion criteria for participation in the study were the following: persons 21 - 35 years old, born in Nigeria and lived there till at least age 16, and currently living in the United States. The exclusion criteria were not being Nigerian and living somewhere else other than Nigeria before living in the United States. IRB exemption approval was obtained from the University of Pittsburgh before recruitment and data collection.

Social media platforms-Facebook, Instagram, Twitter, GroupME, WhatsApp, and LinkedIn-were used for recruitment of participants. A digital flyer was created that included the study topic, nature of the study, purpose, criteria for participation, and expectations (or ask) of potential participants and was shared on the identified social media platforms (ref Appendix C.1.1). The recruitment message included a link to a survey that collected basic demographic questions and questions pertaining to the inclusion criteria. The survey was also a means to convey more knowledge to potential participants about the study and to obtain consent from them (Ref Appendix C.1.2). The beginning of the survey had a script that talked about the nature and purpose of the study, risks that may be involved in participating in the study, and what eligible participants will be expected to do. After the script was an explicit question asking if interested persons agreed to participate in the study. Depending on the answer to this question, interested persons were led to the next set of questions or to the end of the survey. The other questions in the survey were demographic questions, contact information, and questions that pertained to the inclusion criteria such as their name, age, country of birth, age when they left Nigeria, and current place of residence (Ref Appendix C.1.3).

3.2.1 Characteristics of participants

There were eight persons participated in the study. Of the eight participants, I knew three (two closely). The mean age of participants was 26 years with the youngest being 23 and oldest 30 years. All the participants had completed a bachelor's degree. One participant was completing a doctoral degree, three participants were doing a Master's Degree, two others had already completed their Master's Degree, and one had a professional degree. The ethnic identities of participants varied: participants were from Igbo, Yoruba, Eleme, Esan, and Efik/Oron ethnic groups. All participants except one, described their place of current U.S. residence as urban and the exception resided in a rural area. Six participants identified as Christians, one as a child of Muslim parents, and another did not have a religious identity. Of the eight participants, three identified as cisgender female and the remaining five were cisgender males. All participants identified as heterosexual. Out of the eight participants, two were married and one had a child.

3.3 Data collection

Data was collected via one on one interviews, each lasting from 60 to 90 minutes. Interviews were held from December 2020 to February 2021. The interviews were all conducted over Zoom web-video conference call since the COVID-19 pandemic was well underway during this period. All of the interviews were recorded with the explicit permission of the participants. The interviews were semi-structured and an interview guide was developed that included openended questions (Ref *Appendix B*). The interview was structured along the lines of three domains, including questions on family structure (e.g. members of a participant's family in childhood and adulthood) family dynamics (e.g. relationships with parents as a child), and emotional wellbeing and acculturation (e.g. self-awareness, relationships, and stress as an adult).

3.4 Data analysis

The data was analyzed using grounded theory, a qualitative methods approach. As stated in the qualitative methods text by Padgett, "grounded theory explores the relationships between themes and categories developed from analyzing raw text data" (Padgett, 2011). In using grounded theory data analysis approach, there are no pre-identified themes, instead themes emerge from the data collected and analyzed. The intent of grounded theory is to explain a process or action by generating a theory or a general explanation from the data (grounded in the data) from participants that have experienced the process (Padgett, 2011).

The interviews conducted on Zoom were recorded and saved as an audio file and then transcribed. I transcribed the first three interviews and an external transcription service was used in transcribing the remaining five interviews. I re-listened to the files that were transcribed by an external party to make sure all information was accurately captured. I reread transcriptions, employed memo writing to record thoughts throughout the iterative process of coding. Grounded theory involves the use of coding during the analysis of the content or data. I read the first three interviews and highlighted all important and relevant textual data. Through a process of line by line coding, memo-writing, and discussion with my thesis chair, I developed and refined a code book (Ref *Appendix A*), used then to code all interviews. Sub-themes and a theme emerged through the analysis of codes and the relationships between them which are presented in the findings section.

4.0 Findings

A variety of themes emerged from the data analysis process including age, interpersonal relationships, adjustment to the U.S., and autonomy. These were most relevant to the study aim of exploring how the emotional wellbeing of Nigerian-born adults living in the United States is shaped by their family of origin and by the United States. These themes were then discovered to have an interdependent relationship with each other that impacted the development and meaning-making process of the sense of self participants, thus, making sense of self an important and central point in participant narratives. This is how sense of self became the main theme in the study. Sense of self has an interdependent relationship with the sub-themes of age, interpersonal relationships, adjustment to U.S. and autonomy relationship, with gender and distance strengthening these relationships and creating nuances (ref. Figure 1). These sub-themes together with gender and distance impact sense of self. This findings section presents more details on the relationships between the main and the sub-themes.

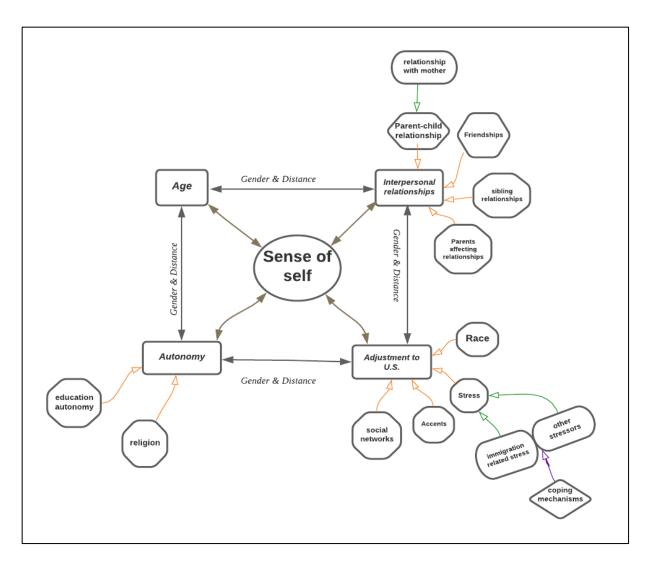


Figure 1 – Diagram showing the relationship between themes and moderating factors.

4.1 Sense of Self – Main Theme

Sense of self demonstrated the relationships between participants' upbringing in Nigeria and life in the United States and how they integrated these aspects of their lives which subsequently related to the domains in emotional wellbeing. Their age, their interpersonal relationships, the ways they adjusted to being in the U.S, and the exercising of their autonomy all impacted the development of their sense of self. In all narratives, participants were constantly in the process or had been in the process of forming their selves and making meaning out their sense of self and lives. They showed ownership and agency in their narratives and were actively participating in forging and creating their life stories and the life they wanted for themselves. The process of selfdiscovery and learning more about one's self is continuous and dynamic and participants demonstrated this continuity of this process in their narratives. These processes of understanding self and having a strong sense of self are captured in quotes below from participants:

"I'm still learning about self, even till today".

"There's different people in Nigeria but there's different people here and the measure of difference is different too because you can see that wow, there's also different shades of people, so it's like you get that stronger sense of who you are".

"I feel like okay now I really know what I want and I'm more vocal about my choices and things I like and I won't entertain things I don't like especially when it comes to things that have to do with me.....I have to put myself first and there's something I always say, 'no one is more important than I am to me'".

4.2 Age as a sub-theme impacting sense of self

As people age and grow older, they enter into different psychosocial developmental stages. These developmental stages result in changes to their perceptions, including their perception and understanding of their self. As people age, changes happen to their physical bodies, awareness, personalities, character, and even to likes and dislikes. In the study, participants attributed the changes in their sense of self to aging, growing older, and coming into their own.

According to Erikson's stages of psychosocial development, the psychosocial stage five—identity versus identity confusion—which begins in adolescence, is when people start to develop a sense of self and personal identity independent of their family (Rogers, 2016). It is in adolescence that people may start to explore their independence and sense of self. This is seen in participant's narratives. All participants mentioned or recounted an experience during their adolescence that involved them exploring their independence and sense of self. As some participants grew older, they experienced shifts in how they defined themselves and conceptualized their sense of self.

As people age, so do their emotional experiences and understanding of it change. Emotional experience is a broad term used here to mean (encompassing) the ownership, acknowledgement, and expression of emotions and feelings, including intimacy and affection, that people have and experience. As participants aged, there was a shift/change in how they conceptualized, understood, defined, and owned their emotional experiences in childhood and in adulthood.

"I think a lot of who I was growing up was defined by my parent's expectation".

"I don't think I ever really cried.....I didn't really show affection honestly, as a kid, I mean I had them but it felt like it was for peasants honestly"

4.2.1 Age and distance shaping sense of self

Distance contributed in the development of participants sense of self. Some participants mentioned that being and living away from their family helped to create an environment (or space or opportunity) for them to explore themselves, do some introspection, and learn more about their habitual behavioral patterns.

".....still learning a lot about tendencies like natural tendencies and.....sort of like the habits or the actions or the behaviors that sort of shape how I behave today.....one of the things like being away from family, if I was with family, I don't think I would necessary have time to think of these things because I will be too much like focused on things that need to be done, I feel like I will be spending more time running errands, doing things for the family. I think there's almost like no time, no like quiet time".

4.2.2 Age and gender shaping sense of self

As participants aged, the social indoctrination to gender including gender roles and expectations happened. Mostly male participants, internalized gender expectations and roles and acted in accordance with these roles and expectations.

"The guys always supposed to-- men were supposed to lead. You're supposed to be the breadwinner for your family. You got married and you provided......Leader of men. I definitely let myself......yeah...... I let myself play that role".

"You see there was always the you're the man thing, you're the only boy you have to wear the house name...... I have to take up the mantle and plan for the family...... now I have to wear the family crown because even though I don't, even though they're not asking me, I feel like they made me so I should do something..."

4.3 Interpersonal relationships as a sub-theme impacting sense of self

Interpersonal relationships (IPR) are the relationships we have with people. In this study, interpersonal relationships with parents, siblings, and friends were the most significant impacting the sense of self of participants.

4.3.1 Parent-child emotional relationship

The emotional relationship between parent(s) and the participants (parent child emotional relationship), had an effect on the sense of self of participants and contributed to their development of self. Culture impacted the emotional relationship between parents and participants, especially in childhood. For instance, almost all participants noted not explicitly hearing the words "I love you" from their parents as a child. Some noted being shocked and feeling awkward the first time they heard a parent say "I love you" to them during their teenage and early adulthood years. They described the interaction as being weird and not even returning the sentiment back out of shock. A participant even mentioned how her father never says "I love you" back, but rather says "okay" or "thank you" after being told "I love you". Love is and was implied through actions of care, presence, and provision of needs as a participant mentioned:

"I think my parents' way of expressing love is by getting me.....that they remind me of education, of healthcare, like fundamentals and things like that which are valid like things to set me up for success".

However, with physical distance created between parents and child, through moving away for school (including attending boarding school for middle and high school), most participants mentioned an increased closeness with their parents and even more verbalization of "I love you" from both parties. After all, as they say, "absence makes the heart grow fonder", so increased distance led to more appreciation and expression of intimacy and affection between parents and child thus, increasing closeness of both parties. Another way culture colored the relationship between participants and their parents was through the norm of respect and submission to authority children are always expected to have towards their parents in Nigeria. Respect is more so seen as fear of going against parents as one participant puts it: *"There is some level of fear for your parents in a Nigerian household."*. This type of respect directed the relationship participants had with their parents which was most times devoid of intimacy. A few participants also mentioned how their emotions and feelings were not expressed with their parents in their childhood because they didn't feel encouraged by their parents to do so.

"Nigerian families are, it's like okay, parents and children, there's really no like, there really isn't any friendship there, it's more like your parents tell you to do something, you do it.".

"When it comes to talking about personal things like relationships [with participant's parents], you better know to keep it to yourself because......".

"You didn't really talk about how you felt as a kid, in this situation, it's not like your opinion counted".

However, as participants got older, they mentioned having relationships where they were accorded more respect from their parents and could converse with their parents. Their opinions are acknowledged and even respected which in turn has improved relationship with their parents and fostered a sense of closeness.

"I started having conversations and less dictations." "We are able to have much tougher conversations and they take me seriously."

One participant however, did describe the relationship with one of his parents, particularly his father, as being emotionally abusive both in childhood and now as an adult. This participant reported the current relationship with his father to be distant and impersonal.

4.3.1.1 Relationship with mother as an aspect of parent-child relationship

Another important aspect of the emotional relationship participants had with their parents was the relationship with their mothers. The roles their mothers played in their lives varied across participants and even varied in participants' stories. A participant mentioned how his mother role switches or fills in different roles of sister, friend, and mother. This participant has no sisters so the ability for the mother to take on different roles and thus have a close relationship with the mother was beneficial to him. There were changes seen in the relationships participants had with their mothers over time. About two participants mentioned how the relationship with their mothers had changed as they became more understanding about the circumstances their mothers have been through and how that shaped them (the mothers). Due to this understanding they were able to be more empathetic and adjust their attitudes to their mothers, with one feeling much closer to the mother.

"Now that I'm getting older, I'm like, my mom was 23 when she had my sister. I can barely take care of myself, so I can't even imagine having four children, so I'm like, I don't know how she did that. I was like, ahhh it makes sense why she was always like, on the edge and everything.....yeah, I just think it's better now that I'm understanding, that now I can have that relationship [with mother].....".

Most participants had a more emotional relationship with their mother compared with their fathers. A participant even mentioned how the nature of the relationship with her mother was necessary to balance out the father's strictness and rules. At least three to four participants described their mother acting as a mediator between them and their fathers during times of conflict. Another participant mentioned how his relationship with his mother is helping him in his adulthood to become more emotionally sensitive and compassionate as a person, thus improving his relationship with his self, his friends, and future romantic partners. Almost all participants acknowledged that their mothers where present when needed which strengthened their relationships. However, a few participants noted having some strained and distressed relationships with their mothers. A few of these varied relationships participants had with their mothers are captured in the quotes below.

"Me and her have been talking about emotional intelligence and why my overly practical pragmatic approach to life is not the best which I love because I'm starting to see the fault in my own thought process and I love that she can tell me as my mom what she sees."

"Really, I just have a strained relationship my dad. My mom is now entangled in it. And then I think over the years, she has morphed into him too in a way".

"I have a clear understanding of where she [mother] sits in that emotional train, and I'm not going to go to my mom and express this because I already know the outcome would be, 'Oh, you're not praying hard enough. You need to fast.' I'm like, 'Ma, I don't need to fast, I just need you to listen. It's okay.' So, yeah. So, she still isn't the emotional type, yeah."

4.3.2 Sibling relationships – an aspect of interpersonal relationships

All participants reported having close and intimate relationships with their siblings. This close relationship with siblings were demonstrated in all participants' narratives with some acknowledging that their siblings were who they would go to when in distress or in dire situations. One participant even mentioned not needing too much friends because they already had a good number of siblings who they are close to and consider friends. There were a few participants that talked about physically fighting with their siblings when younger, but now resorted to using words to try and understand point of view or verbally fighting (during conflicts). Participants had

different roles they filled in with their siblings. A participant described playing the role of a therapist with his siblings, another mentioned her siblings seeking her input and counsel before making decisions, and another mentioned playing the role of mediator for his sisters and being a neutral ground during their arguments.

"So, like I'm really close to my sister. If anything happens, if I should get pregnant today, my sister knows that she's the one I'm calling to take me to Planned Parenthood."

"I've had to play therapist for a long time with her [sister] because she takes all of this anger and calls me... ...so, me and her have had that dynamic where I'm the guy trying to talk her off the ledge".

4.3.3 Friendships – an aspect of interpersonal relationships

Friendships are an important aspect of the social dimension of wellness. Friendships contribute to our sense of self as these relationships provide other needs and resources that our relationships with family and even romantic partners may not. In most participants' narratives, their friendships contributed and helped in their meaning making of self. For some participants, their friends helped draw attention to parts of themselves and even behaviors that required working on and changing. For instance, one participant mentioned how her friends told her about opening up to them when she had issues and working on being more emotionally vulnerable with her friends.

"Umm openness, vulnerability... ...my friends have complained about that, I never really let them know what's happening until like maybe after it has happened or when it's really bad and I'm like 'oh this is what's happening', so yeah, I try to be more vulnerable".

Participants also sought better fulfilling relationships whether it meant undergoing changes or being better friends and maintaining and developing better relationships. Friendships helped most participants practice strong interpersonal skills such as being empathetic and a better listener which lent to a deepened relationship with both parties. Some participants mentioned changing and moderating their dynamics with their friends by learning to ask what their friends needed.

> "My friendships started to look transactional, even when I didn't want them to be... ...I have good friendships now, they keep getting better because I'm learning to check on people I'm learning to have unnecessary conversations. So, I'm learning a different way of providing support and of providing friendships. And it feels good".

Friendships were an important social support network for all participants, especially when they were in the United States. Almost all participants mentioned how they utilized their social circles and friends to talk about their worries and concerns. One participant specifically mentioned how important his social circle is for him especially since he plays the role of emotional support and coach among his siblings. "I'm the guy that everyone [siblings] goes to. So, in any given week, I could probably get everybody [siblings] else's problems, but I don't get to tell them what my problems are I think I have enough of a, I guess, social circle in my space that I'm able to get my stuff and my heart out as well."

4.3.4 Parents affecting interpersonal relationships

Family dynamics, particularly parents' marital relationship and parent-child relationship, impacts the relationships that people have both with themselves and with others. According to Bowen's theory, parental projection is the way emotional issues or connections are transferred to children which then later go on to affect their relationships (The Bowen Center, 2018). There were instances in participants' narratives that showed how their parents (including the relationships they had with their parents) affected their relationships. Two male participants mentioned exhibiting emotional traits and behaviors like their fathers in some of their relationships. A participant talked about never seeing her parents confront each other during conflicts and noticed, through a friend's help, that she also tended to avoid confrontations in her relationships.

"We never saw our parents resolving conflicts so it's almost like when you're now turned out into society you have to sort of figure that out for yourself. I don't think I ever saw my parents like get in a conflict or fight, like most parents try to hide those things from their children" Parents also affected and influenced the romantic and friendship relationships participants had. A participant mentioned how he was encouraged to seek out friendships and even romantic relationships with people that were doing better than him. Another participant mentioned actively trying not to be like his father in his romantic relationships as he considers his father to be aggressive. Another participant mentioned finding it difficult to talk to people they didn't know as she was told not to talk to strangers and boys when growing up.

> "For the most part, I think I am myself when I'm with someone. I try to make sure, I guess, I'm not him [father] in all the relationships I'm in [by being] I guess more connected, more loving, more open, trying not to show any sign of aggression at all. Just trying not to be him in the relationships I have."

Participants also identified shortcomings in their parents and in the relationships they had with their parents. These affected their behaviors and their relational patterns with people. Most participants talked about actively unlearning some of these undesirable behaviors and conditioning they had. Some talked about the things they would different when they had children. One participant even mentioned not wanting to have children in the future for fear of becoming their parent.

> "He [father] doesn't realize it, but he has trained me to be bullied by people in the world, in his position... ... so, I'm consciously trying

- even at work, I've been trying to unlearn and be like, 'Okay, this person is a bully, this person is not my dad and doesn't deserve any of that respect that comes along with it'. I guess in my mind it's kind of connected like, 'Oh, my bully is my dad', and it's like, 'Oh, this person is bullying me maybe they deserve respect, kind of deal.' It was just trying to unlearn a couple of those things and realize, okay, this is just bad, I need to stand up for myself more."

"I think I'm going to change that in my generation, umm like get to know, like your child is thinking things right, umm they're having thoughts right, good, it's not like they wouldn't share it with you if you didn't ask them, but you sort of need to establish that... ...you need to start asking them and then they'll start feeling comfortable...... like I could see them coming to you even without you asking them but, if you don't create that environment where that child already feels comfortable about telling you the little things, when it's a big thing, they're gonna feel like they've shamed you or something...."

4.3.5 Gender and interpersonal relationships

It is important to mention the influence of gender on interpersonal relationships. Gender impacted the ways emotions were expressed or who expressed more emotion or not as most. Gender's influence in interpersonal relationships was seen in sibling relationships where the presence of sisters helped some male participants be more emotionally sensitive and aware of women issues and for others, influenced the nature of play and interactions among siblings. A female participant also mentioned having to abide by strict restrictions placed on her and her sisters when it came to relating to and interacting with the opposite sex.

The interpersonal relationships with mother is one of the prominent places where gender is seen to influence interpersonal relationships. The roles most mothers played were in alignment with the gendered roles of mothers in Nigeria. Mothers are supposed to be more emotional, affectionate, relatable. Among participants that described their fathers as being the fun ones or even more affectionate than their mothers, they also noted that part of this was due to all the responsibilities the mother had such as fulfilling most of the child-rearing responsibilities and working full time jobs which added stress and created that type of emotional dynamic. In other situations where the father was not the more affectionate parent, participants described their fathers as being more authoritarian, strict, and emotionally distant. Mothers are also expected to be mediators especially when conflict ensues between father and children, especially sons. Almost all male participants mentioned their mothers mediating conflicts between them and their fathers.

> "If I'm kind of upset with something my dad did, I can go to my mom, like, 'I don't think that was cool.' And then she will try to calm me down, try to find a nice way to tell him, 'he didn't really like it'."

> "You know like Nigerian families, like the mom is the one doing most of the work in the household, you have a full-time job then you also have a full-time job running the household. the man isn't that

stressed, so he comes home and he wants to do all of that extra romantic stuff, and she's like I just want to sleep. So, I guess that's what I thought, I probably assumed my dad was more affectionate, but it was like he wasn't stressed, he wasn't stressed out as my mom".

A noteworthy example of gender influencing mother-child relationship is in the story of one participant who described his mother as being emotionally distant. This participant recognized the external factors that contributed to his mother's personality as he talked about his mother as *"being a woman in a country that is dominated by men... ...and striving to succeed and achieve wealth"*. It is also important to note that this participant's mother is a widow and had to take on the role of sole provider for her four children when his father died in his childhood. In a society where the fathers are the main providers and the mothers, in addition to providing financially do a lot of caretaking and emotional work, women (widows) like this participant's mother, assume both parental roles of providing and caretaking. Due to stress, fear, and the will to succeed for their children, women like the participant's mother, may have little room to be emotionally present and relatable with their children.

4.4 Adjustment in the United States – a sub-theme impacting sense of self

Immigrating to another country during one's youth (an important development stage in life) does modify, to a certain degree, the development of a person's sense of self. All participants mentioned ways they had to adjust with being in the United States. This adjustment was

bi-directional. These adjustments showed how acculturation happens and are experienced by the participants. Participants narratives included areas in their lives that required adjusting when they came to the U.S. and ways their characters or personalities adjusted by being in the U.S. One participant mentioned having to adjust to doing a lot of things by oneself, which if still in Nigeria wouldn't do by their self. This correlated with the comment or sentiment another participant had about the United States being individualistic and subsequently making her more individualistic. Participants also mentioned some good aspects of adjustments that pertained to safety, learning, and building better networks.

"I used to tell people that I'm just trying to get used to this country. It takes getting used to".

"I think the U.S. has made me more individualistic because like that's how the society here is. Everyone here really [just] cares about themselves and that has just..., yeah being in the US has made me more individualistic."

"Basically, in Nigeria, if you don't hold popular opinion, you're almost like, 'why is your opinion not popular opinion'. Here, it's like you get that sense of appreciation of like uncommon people. You don't have to be crazy. Because you're not common, doesn't mean you're crazy. In Nigeria, it's like, if you're not common, you're crazy. And like acceptance of people who are not like you [here in the U.S.]. So, it's not like within Nigeria where there's this sense of nonacceptance of people not like you".

4.4.1 Race – an area of adjustment made in the U.S

An important area of adjustment most participants had to make in the United States was in the area of race. Most participants' narratives included an increased awareness and consciousness of living in a country where they were now defined by their skin color and subsequently "othered", especially coming from a country where almost all its people are Black and the construct and application of race differs. Most participants noted the increased awareness and consciousness of this new reality. Some participants did mention how the assumptions and perceptions they had about African-Americans were different and changed with them being in the U.S. as they learned more about the racial history of the country and interacted with different Black people. They noted attaining a new and better understanding of how systemic racial issues are in the U.S. A few participants mentioned encountering racist and discriminatory incidences and micro aggressions at their places of work. Another participant mentioned playing the role of helping coworkers understand racial issues and noted that his ability to do this was as a result of him having some distance from the personal intergenerational history of African-Americans. When asked how they dealt with this new reality including race-based incidents and stressors that they mentioned, most participants said they had to learn to just deal with it and to not let it stress them out a lot.

> "I was like wait, so you mean that I can be very smart, but also now I have to do with this racism thing that just throws all that away. It's like before I even speak, there's already an assumption, which was

unusual because before I could come in with my stats and people listen and now it's like I'm in a place where nobody gives a shit".

You always end up in that conversation where everybody's heated up about race, and you're kind of like, 'I'm not really sure how to feel about this,'... ...then you start to understand all the scars that travel with people over time and how deep it goes. And you're like, 'Oh, shoot, there's more to it.' So, it's definitely put me in that space of like you're in a different--you're in a different country, different place."

"I mean, of course it [racism] exists but I don't know. I've kind of found a way to ignore racist people. So, they don't stress me out. Kind of interesting, I say ignore, but can you really ignore them? But I've kind of mastered a way to live with that..."

4.4.2 Adjusting in the U.S. with a Nigerian accent

Another aspect of adjustment some participants mentioned pertained to their accents. They mentioned being frustrated and annoyed with people not understanding them even though they spoke English. For a participant, this adversely affected her self-esteem at first as she was afraid to speak in large classes. Eventually, she reported coming to a place where she didn't care or let it bother her anymore. Accents, especially accents perceived to be foreign and out of the United

Sates, draw attention to immigrants. Certain groups of immigrants may be more at risk of being victims of xenophobia and other forms of discrimination and micro-aggressions because of their accents.

"My self-esteem was down and that was just because of my accent. And I felt like in large classes, I felt like I couldn't speak up because I would have to repeat myself over and over again. And you know like, people tried not to understand you and all of all that. But after a while, I was like you know what, I don't care, I like the Nigerian accent, this, I'm a Nigerian, I was in Nigeria for 18 years, this accent isn't going anywhere any time soon and I was just like as long as I'm speaking English, everyone will be fine".

4.4.3 Adjustment in the U.S. and stress

Adjusting and living in a new country and environment comes with its share of stressors. Immigrants including participants encountered some stressors related to adjusting to being a new environment and everyday stressors that were exacerbated by their distance from home. Some of these stressors were external factors. These stressors can be seen as acculturative stress which affected participants sense of self and their wellbeing to some degree.

4.4.3.1 Immigration-related stress

An important stressor that most participants talked about was stress related to immigration status. Five out of eight participants came to the United States as international students. They all

noted the immense stress that came with being an international stress. In addition to participants having to be knowledgeable about immigration laws and policies that pertained to them, they also had to learn to deal and navigate the restrictions placed on international students by the nature of their immigration status. These participants mentioned how their lives as international students were a bit uncertain at times. One participant mentioned being tired of not having stability and constantly moving. Another expressed how international students have to always think about the future especially after post-graduation as finding employment is an ordeal as they have to work within the restrictions placed on their status. International students need certain waivers and documentation to be able to work and they also need to work within the fields of their undergraduate and graduate degrees. These participants mentioned how finding employment is hard as most employers are not willing to hire international students.

"It's kind of you graduate, and then there's all these questions. Because I came into the US with a F1 visa, so, student visa. And there's all these questions, like, 'Where are you going to go?' and jobs are harder to get, because you're an F1 visa [holder]. So, the opportunities are not as easy as everybody else"

"Most international students are futuristic and there's a need to not gather stuff because you feel very mobile, because you're not settled, you're not planted. Like you could have to move anytime, any day".

Participants who were or had been international students echoed the fear of going out of status (when current immigration documents expire) and what that meant if they didn't have

potential back-up plans. For some it meant thinking about the possibility of going back to Nigeria. Some were wary about this option as employment opportunities in their field would be much more difficult to come by for them. One participant did go back to Nigeria because they had gone out of status. This participant mentioned feeling miserable the whole time he was in Nigeria.

> "Well, number one worry of most Nigerians is getting out of status. Because I mean, for me, that kind of happened. That's kind of why I went back home."

Immigration-status was identified by most participants as being a huge source of emotional stress for Nigerian international students. A participant mentioned that he would rather go through a break-up than getting out of status. Some other participants mentioned the huge relief they felt when they had gotten their residency and work visas and how they felt much more relaxed.

"It's like, I've been through breakups. And trust me, I think that was worse [being out of status]. When you're just confused and you don't even know what's going on. Yeah, to me, that was even worse. I'll take a break-up any day".

"I just recently got a green card. So that's why I told you, lately I've decided to just be like you know what, chill. I've been under pressure like the moment I stepped into the US all the way up to feeling like I can now rest [now that they have their green card]"

4.4.3.2 Other Stressors – homelessness, sexual assault, aging parents and academics

There were other stressors participants dealt with as Nigerians living in the United States. A participant mentioned being homeless for a while when they first came to the United States. For this participant, having a sense of direction and a resolution to make their own way away from their parents' influence was how he emotionally regulated himself during that period of his life. Another participant mentioned being sexually assaulted in her first year of college. This incident changed the trajectory of her experience in college. She also had to deal with people accusing her of lying about the incident. This experience made her resolute in always speaking up against sexual violence and assault. Another source of stress and concern for some participants concerned their parents. Being far away from their parents as their parents aged and grew older worried them. The fear of something happening to your parents in another country thousands of miles away is a source of stress and anxiety. In addition to all these other stressors, participants also had to deal with academic-related stress and the pressure to succeed and excel in their fields and profession.

"I was largely on my own when I got to the US. I was homeless for a while, a lot of things happened".

"Freshman year.....I was kind of sexually assaulted. I was like groped, so, I tell my friends all the time that that particular incident changed like how my career in college went. I feel like I would have had more fun in college but because of that incident, I just became closed... ...I knew, if there are like 3 things I can talk about all day, one, friendship, two, feminism, and umm three, sexual assault".

4.4.3.2.1 Coping mechanisms used for stressors encountered in adjusting to the U.S.

Participants were asked about the ways they coped with all the stressors and worries they experienced. There were both similarities and differences in all their responses. Almost all participants mentioned having a social circle and talking to friends and family (parents, cousins, and mostly siblings) as a method of dealing with stress. Another participant mentioned being a part of an organization where the members in their chapter gather occasionally and talk about the different things happening in their lives. This participant described this as being therapeutic. Another participant mentioned having a resigned attitude of not taking things seriously, especially things out of his control. This participant and another explicitly mentioned their religious identity and faith as coping mechanisms. These two participants had polar opposite religious identities with one identifying as a Christian and the other as an atheist and child of Muslims. Almost all participants mentioned being physically active and exercising as a way they dealt with stress. Among all participants, only two mentioned having been to therapy and this was to deal with relationship-related and induced stress. One of these participants expressed going back again to therapy to help her navigate stress from being in graduate school and the other expressed only going back if his stress got to a point where he couldn't cope with it. Other different and interesting methods of coping participants used were journaling, meditation, playing the guitar, watching sports, playing video games, making to-do-lists, their pet, and reading the Bible.

> "That [playing the guitar] got me through a tough time, actually. That was actually my senior year in college. I think it was the year between grad school and that, that I picked up the guitar and it was kind of my to do thing in that period."

The key is just being an atheist, right, because at the end of the day, we're just organisms and it's not that serious... ...I literally just don't take anything seriously... ...I feel like that's my mantra, 'It's not that serious'."

"I know I've mentioned like getting in the word. 'What does the Bible have to say about it?'. There's a peace that comes from knowing that God has your back regardless of where you are or where you're going to be".

4.4.4 Social networks – an aspect of adjustment in the U.S.

The social networks that participants had and developed played an important role in their adjustment in the U.S. Their social networks consisted of their siblings, friends, and extended family members. In addition to helping them cope with stress, the social networks they had here in the U.S served as their support systems. Coming to the U.S meant being far away from family and isolated for a few participants. One participant mentioned being lonely when she came to the U.S and being able to find her "tribe" (community) helped her. Some participants reported having siblings in the U.S. but were in the different states. However, the added distance strengthened the relationships with their siblings.

"Coming here, it was then it really hit me that oh my parents are in another country, my siblings are in different states, like I'm really all by myself here... ... I found my tribe real quick. I met like my friends, I met them like freshman year, which is the first week of school, and we're still friends."

Friends were an important part of participants' support system that helped them create and establish a sense of community and belonging—a salient factor in a person's sense of self. Participants' support systems provided advice and input, support, and resources to participants and vice-versa. Some participants had an extensive friendship network that included people in different places in the U.S, in Nigeria, and even in the United Kingdom. A few participants mentioned having different friend groups that served different needs. The participant who experienced sexual assault attributed the support she had from her friends as a source of strength. Other participants mentioned consulting extensively with their social networks and support systems before making major decisions. One participant reported utilizing her support system to help and assist with childcare.

"There was a time people talked, said I lied about it [the sexual assault] but I just didn't care. I was still talking about it so yeah, that helped me and knowing that my friends were there in my corner".

4.4.5 Gender influencing stressors and adjustments in the U.S.

Gender influences adjustment in the United States, whether affecting the type of stressors people might be more likely to experience or influencing the way people react and resolve the stress or worry. An example of this is in the experience of gendered-based violence (GBV). Women are more likely to experience GBV compared to men. This corroborates with the fact that among the participants, it was only a female participant that experienced gender-based violence (sexual assault). Another influence of gender was noted in the worry that pertained to parents being older and away from participants. At least two participants, one male and one female, explicitly expressed this worry, however the way they resolved this worry was different especially for the male participant. The male participant had an underlying expectation of carrying on the family mantle and thus, decided to set up retirement accounts for his parent.

Gender also influenced how participants approached and talked about the worry of raising children in the U.S. There was a distinction observed in the nature of male and female participants' worry with raising children here in the U.S. For example, one female participant worried about parenting in the U.S and being conscious of the role and influence of child welfare and social services, whereas, the male participant worried about not being able to transfer much of his culture to his children and the next generation.

4.5 Autonomy – a sub-theme shaping sense of self

(Self) Autonomy is the ability to make decisions and choices by and for one's self. Autonomy was seen in the narratives of all participants with an increase in autonomy happening as they aged, but more so when they came to the United States. Autonomy in their narratives were seen in the form of an increase in their independence, the ability to make their own decisions, being able to act for themselves, and having more freedom from parents' control and authority in their lives. Being far away from their parents greatly increased and impacted participants' autonomy. Some participants stated that the autonomy and independence that they had now (living in the U.S), would be different and may not exist if they were still living in Nigeria with their parents. Most participants mentioned being more assertive of their decisions and choices with increased autonomy. Some mentioned being able to forge their own paths in life based on their convictions, values, and needs.

> "So, I just became more responsible for my decisions. And now it's like I can do whatever, literally do whatever. And at the very worst, I can just say whatever to my parents, just tell them whatever they feel like hearing...but I have this sense of responsibility... you're here, you're trying to make it work for yourself. Before anything else, you're trying to make it work for yourself. So that's some sense of responsibility".

4.5.1 Education autonomy – an aspect of autonomy

Education autonomy in this study refers to the ways participants exercised their autonomy in matters concerning their education. For most participants, education autonomy involved a power tussle between the adult child's (participant) autonomy and the parents' influence or decision in regards to the educational pursuit of the participant. In their childhood, participants noted that their education autonomy was non-existent as they had to maintain and abide by the rules surrounding education placed on them by their parents. However, in adulthood, and also in coming to the U.S, that dynamic shifted as most participants made their own choices and decisions about their educational pursuits and careers. The tension or tussle ensued when participants chose career paths, majors, and educational level attainments that differed from their parents plan or vision for them. Almost all participants in this category recounted that even with making their decisions, they were not completely free from side comments (and coaxing) from their parents about their choices. Some participants learned to ignore these comments. Another participant whose mother wanted him to get a PhD employed an interesting tactic in getting his mother to respect his decision of not wanting to do a PhD.

> "I don't plan on going any higher [education level attainment]. She's [mother] pushed for it. I'm like, 'listen, do you want kids [grandchildren] or do you want a PhD? Choose one'."

4.5.1.1 Education autonomy and distance

Distance greatly contributed to the education autonomy of participants. This was highlighted in the narratives of two participants who used the same approach in exercising education autonomy but had different outcomes. Both participants changed their majors in school without informing their parents. One participant, who was in the United States, only informed her parents of this change close to her undergraduate graduation. The other participant was in Nigeria when he made this change but the outcome was different for him. Due to the communal nature and fused community and social networks in Nigeria, his father found out about the change and what ensued was a tussle that caused a drift in the relationship between father and son. However, this participant's insistence, determination, and assertion made him not back down from his decision. It did result in an emotional ordeal with his family and as a result of this, he decided to leave the country and pursue his goals.

> "I had always wanted to study psychology and junior year I changed my major. I didn't let them know until I was graduating until graduation, the month of graduation, I put it in on the group chat. I was like, 'okay graduation is in 10 days guess what I studied' and they were like, 'what did you study?'."

> [when participant was schooling in Nigeria] "I actually went and retook the entrance exams for engineering so I could just change my degree without my dad ever knowing. That was my plan, so I'll just keep going to school. The plan was going well but then I scored the highest, I got the highest score and then my name got printed in the newspaper. That's when my dad found out. Someone called he didn't know what to tell them... ...that's when he came to me middle of the night in the dorm and was like just pouring his feelings out and I was just like 'it's my career'...... I understood his point of view, but I was also very adamant about he should also understand my POV. And then the whole me leaving the country thing happened and we didn't speak for a while."

4.5.2 Religion and autonomy

Religion was another area where participants exercised their autonomy. There was a noticeable shift in the use, impact, and function of religion for participants. Some participants stopped adhering to rules and practices surrounding religion their parents had. Some created new rules and practices. All participants' relationship with religion changed. For some, they engaged less with religious practices and this varied across participants in this group as some reported not going to church anymore since they've been in the U.S., and others going to church but not as often as they used to go in their childhood. Two participants identified as being atheists and non-religious (having no religious identity) which was completely different from their religious identities when younger and when they were living in Nigeria. There were some participants that had a deeper connection to their faith and religion. For these participants, their faith was instrumental in their growth and their sense of self. One participant talked about finding worth in the word of God and another participant stumbled on information that set him on a journey in better understanding his self and his relationship with people during a church program.

"I stopped going to church, and they [parents] got tired of asking me about that and they've just kind of have accepted that.

"Once I started driving, so my last year of high school [in Nigeria], I started driving, I would drive myself to church. So, I'll go less... ...now, I don't [go to church], I haven't gone to church in a while in years, almost two years or less." Parents still tried to influence a few participants when it came to their religion. One participant mentioned having a big argument with his mother over his change of churches. Another participant mentioned being sent sermons at church every Sunday by her parents. She chalked this up to her parents being bored and wanting to stay closer to her in a certain way. Again, distance helped in participants sticking to their decisions.

"I remember my second year in college joining this church and getting baptized and deciding to make that my home church and going back [to Nigeria] and then...... told my mom, I was like, 'I'm not going back to your church because there's a lot of things that don't sit right with me'. Let's just say my passport got taken, and I wasn't allowed to travel back to the States... ... [however] education was important, and she was already paying the tuition, so she let me go [back to the U.S.]".

4.5.3 Gender and autonomy

Gender impacted autonomy in certain unique ways. A participant mentioned that his parents did not want his adult sisters to come to the United States as his parents felt that his sisters required more protection which they couldn't do from far away. There was also a nuance in the messaging giving to female participants. For instance, a participant mentioned being told by her father not to do anything that will disgrace him. Another participant mentioned the different reaction and response she got from her father compared to the one her brother received when she asked to be enrolled in a driving school to learn how to drive after high school. She was told to

learn how to cook first before driving compared to her brother who was taught to drive by her father.

"My parents would never let my sisters come to the U.S. on their own because they felt like they needed to like as a guy I could survive easier on my own in this world. They recognize that they wanted to kind of be around to guide them even after they got to the workforce. Like so my dad still guides my sisters, my mom also still guides my sisters even though they're doing well. That's just their way of thinking".

"After I graduated high school, I was like 16... I told my dad I wanted to learn how to drive and my dad was like 'you should learn how to cook'. He told me that he would enroll me in a cooking class so that I would learn how to cook. Not even for myself, he wanted me to learn how to cook so that when I got married and my husband's family came that I would have something to cook for them.....and my younger brother after he graduated high school, he was at home for a bit and my dad personally taught him how to drive. So, I'm like, 'ah, so why wasn't he told to learn how to cook?'."

"When I was going to college, they were like 'focus on your studies

you're going there to study', my dad did not explicitly tell me, my dad just said one sentence and that was enough to make me understand what he meant. I think he said something along the lines of 'don't do anything that will disgrace me'."

5.0 Discussion

This study set out to explore how the emotional wellbeing of Nigerian-born adults living in the United States is shaped by their family of origin and by the United States. In examining the results and findings from the narratives of participants, the main theme that emerged was that of sense of self. Sense of self captured the process of participants integrating their upbringing, their learned experiences as adults, and their lives in the U.S. and making meaning out of it all in order to create and have a better understanding of self.

The process of meaning making and the development of a sense of self was impacted by (the sub-themes of) age, interpersonal relationships, adjustment in the U.S., the growth and exercising of autonomy as well as the moderating factors of distance and gender (figure 1 shows the relationships between these factors and the main theme). Distance played a moderating role between sub-themes as it strengthened the relationship between age and interpersonal relationships and the relationship between age and autonomy. Participants interpersonal relationships, especially with their parents, had significant changes as they got older and were separated by distance from their parents. Participants also had more autonomy as exercised this autonomy the farther away they were from parents.

As participants grew older, they attained a better understanding of their selves, their personalities, and their emotional experiences which impacted their sense of self. The more positive emotional experiences one has across their lives, the more likely their sense of self and their outlook on life would be optimistic and positive. Interpersonal relationships, namely their relationship with parents, siblings, and friends, played a role in the development of participants' sense of self. In line with the literature, family dynamics such as parent-child emotional relationship and sibling relationships, impacted participant's sense of self. Participants' parents and the relationships they had with their parents, influenced the behaviors of participants in their other relationships. Some participants were aware of this and actively sought to unlearn some behaviors and relational patterns that they deemed to be detrimental to them. The influence of parents on participants relational patterns and behaviors corresponds with the different studies (Cox & Pailey, 2003; Coverdale & Long, 2015; Rees, 2010; Plamondon et al., 2018; Mathis & Mueller, 2015; Dudgeon et al., 2017; Versey et al., 2020) and Bowens Family Systems Theory, that have shown how a person's family of origin impact how they see themselves and their relational and behavioral patterns, including health-related ones, thus impacting a person's health and wellbeing. The family is where people first learn, form, and develop relationships and relational patterns which later impacts other relationships in life. Through relationships, one develops a sense of connection and belonging in life. Relationships impact health behaviors, health status, perceptions of health, willingness to seek help when needed, and the overall quality of a person's life (Walton, Cohen & Spencer, 2012).

Autonomy is another important factor that impacts sense of self. Almost all participants noted being more autonomous and exercising this autonomy in their choices and decisions they made. Age and distance contributed to the increased autonomy that participants had. As mentioned in the literature review, in Nigeria, independence is encouraged if it aligns with family dynamics, values, and norms. Some participants echoed this norm when they talked about the requirement to submit to authority, such as authority of parents and elders. In situations where participants refused to submit completely to the authority of their parents and thereby exercised their autonomy, conflict arose. The two major areas where participants exercised their autonomy were in religion and education.

All participants demonstrated autonomy in how they approached their religious beliefs and practices. The way people construct their religious identity or spirituality is important as it impacts their sense of self and can influence how they view and interact with the world. Most participants made changes to their religious practices which greatly differed from the practices they had in their childhood. For a few other participants, their religion/religious practices and spirituality become less important or completely ceased to be important to them.

The education level attainment of all participants corresponded with the general Nigerian immigrant educational attainment level seen in the U.S, as all participants had a bachelor's degree. Most participants had exercised their educational autonomy by pursuing majors and education attainment levels that they felt best suited them. Given that education is a means whereby people move to a different socio-economic class via careers with good income, parents are very much involved in the career-decision making process of their children. Educational pursuit and subsequently career choice is an important decision that people make based on their personalities, their likes, what they feel called to do (purpose), and financial expectations. Education and career path is therefore an important personal decision that people make based on their understanding of self, and which in turn impacts their sense of self as they continue to embark on their pursuit.

Immigrating to a new country does alter, to some degree, certain aspects of a person's self, whether physically or mentally. The adjustments participants made to being in the United States demonstrated their acculturation process, played a role in the development of participants' sense of self. Most participants adopted a blended bicultural approach that helped them adapt in the United States, which is in line with the results from research on young Nigerians adopting the integration acculturation approach. A blended bicultural approach is the process of adopting, maintaining, and blending both receiving and heritage cultural practices, values, and identity

(Chen, Benet-Martínez, & Bond, 2008; Schwartz, Unger, Zamboanga & Szapocznik, 2010; Berry, 2019). This blended bicultural approach is best demonstrated in this quote from a participant:

"You get that sense of making the best out of both worlds or something that coming here has done because like I always tell people, especially for Africans who come here, the idea is not to come here and be a complete American or come here and be a complete African. The idea is to come here and pick the best out of both worlds and make identity."

There were external factors such as immigration status and racial awareness that shaped participant's sense of self, behaviors, and mental and emotional states. These factors contributed to the acculturative stress of participants as it impacted their mental and emotional states and posed threats to the wellbeing of a few participants. Immigration status created barriers in accessing employment opportunities and to some extent, impacted participants pattern of thinking about their future. Immigration status was identified as a source of stress for almost all participants. Increased racial awareness and understanding of race and racial issues also impacted participants sense of self including how they dealt with race-based incidents.

Participants utilized their supportive systems in coping with stress as they all identified talking to their friends and social circles as one of the ways they dealt with stress. Participants also played important roles in providing input, advice, and resources participants needed thus contributing to their sense of self and their wellbeing. The social networks and supportive systems participants, and immigrants in general, have in the U.S serve as protective factors as they provide

social support, social interactions, and resources that contribute to their health and wellbeing. Having a strong social support system positively impacts mental health as it helps alleviate stressors and situations such as isolation, that contribute to poor mental health outcomes.

5.1 Relating theories to findings

The use of Bowens Family System Theory (BFST), despite being a Westernfocused/Eurocentric theory, does not obscure relevant meanings of different cultural values and practices pertaining to family dynamics in Nigeria. The construct of differentiation of self (DOS) in BFST, seen in the sub-themes of autonomy and interpersonal relationships, suggests that a welldifferentiated self is separate from and connected to family. DOS impacts one's ability to maintain a strong sense of self while connecting and relating with others. The construct of DOS has been examined in different non-Western cultural contexts and in these contexts, high fusion (relatedness with family) and high DOS were not antagonistic - they coexisted and improved functioning of the family (Erdem & Safi, 2018).

Kagitcibasi provides definitions of autonomy that include having "volitional agency - being self-governing - to being separate and unique" that produce four different types of self in a non-Western cultural context (Kagitcibasi, 2013). The autonomy that participants in this study sought and exercised was that of agency—wanting to be self-governing and having independence in making decisions pertaining to their selves. This definition or perspective of autonomy does not conflict with the desire to be related and connected to others. The autonomous-related self, (one of Kagitcibasi's four types of self) is self-governing while related and connected to others (Kagitcibasi, 2013). This autonomous-related self, emerged from all participants' narratives as

their interpersonal relationships demonstrated high degrees of relatedness and connectedness while they strived for agency as they exercised the right to make their own decisions.

Using an African-centered womanism framework, reveals nuances and distinctions in the experiences of participants' expectations, differences in expression of emotion, messages received, and relational patterns along the lines of gender. Some male participants internalized and acted in accordance with gendered expectations and roles for men pertaining to being a provider and the continuation of family name and traditions. Gendered norms were noticed in parenting especially in discipline, caretaking, and expression of intimacy and affection which impacted the parent-child relationship. An African-centered womanism framework calls us to consider how participants' sense of self might be affected or differently construed, outside of the gendered expectations, roles, and norms in a patriarchal society. Also, this framework suggests that we, through future research, explore the ways that sexual and non-cisgender Nigerian-born adults, marginalized in cisheteronormative societies like Nigeria and the United States, construe their sense of self.

5.2 Sense of Self and Public Health Relevance

Having a strong sense of self has important implications to a person's life and wellbeing. A strong sense of self gives people a sense of purpose and meaning which then directs their life choices and decisions including the decisions they make towards their health and wellbeing (Adler, 2012). Sense of self also impacts one's self-esteem and self-worth which can affect a person's mental health and emotional wellbeing. A strong sense of self comprises of a solid understanding of one's personal attributes, strengths, abilities, and limits and this can impact a person's selfefficacy which is a person's confidence in their ability to (successfully) preform a task or succeed in a situation (Bandura, 1997). As noted by Sulaiman-Hill & Thompson, "high-levels of selfefficacy is also associated with lower levels of stress and psychological distress and has a positive relationship with health-related quality of life" (2013). Self-efficacy is an important construct in most public health theories and interventions because it helps to determine if people would succeed in making positive desired health changes.

Self-efficacy also impacts resiliency, which is the ability to bounce back or recover from stress and adversity (Schwarzer & Warner, 2013; Revens, Gutierrez, Paul, Reynolds, Price & DeHaven, 2021). Resiliency is a protective factor against mental health problems such as anxiety and depression. In Gutierrez's et al. study, resiliency was found to be inversely associated with psychological distress, meaning, as a person's resiliency increases, their experience of psychological distress decreases (2021). Personal resources, self-esteem, social support, optimism, and coping strategies build up a person's resilience (Schwarzer & Warner, 2013; Gutierrez, Paul, Reynolds, Price & DeHaven, 2021). When people undergo major changes or transitions in their lives, having a strong sense of self helps them process these changes and properly integrate these changes into the story of their life; through this they are able to be resilient and attain a secure mental and emotional state, thus leading to wellbeing (Adler, 2012).

A strong sense of self also contributes to a person's agency. Agency includes a person's autonomy and their ability to influence the course of their life. An increase in individual agency is associated with improvements in mental health over time (Adler, 2012). Sense of self may also impact one's self-advocacy ability. A person with a strong sense of self may be more likely to advocate for the resources and opportunities they need for their wellbeing and success in life. Significant social relationships and social support systems contribute to a person's sense of self as

they influence a person's beliefs and behaviors and can help a person feel safe enough to navigate and explore their environments and pursue their interests (Walton, Cohen, & Spencer, 2012).

5.3 Public Health Implications

University undergraduate students in developing and developed countries have high prevalence of stress, anxiety, and depression which if left untreated can negatively impact their academic performance and their overall quality of life (Mofatteh, 2021). The number of international students studying in the United States over the past decade has greatly increased. This study inadvertently contributes to the knowledge on Nigerian international student health in the United States as almost all of the participants mentioned their experiences of being an international student and the role it played in shaping their wellbeing and sense of self in their narratives. Immigration status, especially with being an international student, was an important source of (emotional) stress for participants who were and had been international students. This type of stressor can contribute to mental health issues such as anxiety and depression and can lead to poor academic and professional performance. First-year international students are particularly at risk of being isolated as they may not have any family members or social network around them and may be yet to develop a support system. Being isolated and lonely increases the risk of depression and anxiety and may also lead to poor academic performance (Boafo-Arthur, 2014).

Universities and colleges should do more to help their Nigerian (and other Black-African) international students adjust well to life in the U.S. Studies suggest ways that higher-learning institutions can support their Nigerian and other international students. Some of these strategies include the following: creating peer peer-support groups with fellow Nigerian international, Black-

African, and other international students; fostering relationships and social network building between international students and host-country (American) students; and identifying faculty and other important personnel preferably Nigerian or Black-Africans, who would help international students learn strategies to alleviate discomfort (Hendrickson, Rosen, & Aune, 2011; Boafo-Arthur, 2014; Sullivan & Kashubeck-West, 2015). Also, higher learning institutions should look into creating more job fairs with companies that hire and sponsor international students especially for upper-class (3rd year and above) international students to mitigate and reduce the stress that comes during the transition phase of last year of educational program to post-graduation.

Given that most Nigerian and other Black-African international students underutilize mental health and counseling services on campus, university counseling or mental health centers should engage in informal outreach programs and provide, advertise, and develop support groups for Nigerian and Black-African international students (Boafo-Arthur, 2014). Higher learning institutions should also ensure that mental health providers in student mental health and counseling centers are trained to be culturally sensitive including being aware of acculturative stress and immigration related issues; they should also be able to provide resources such as post-migratory information on U.S. social customs and norms (Boafo-Arthur, 2014).

The role of social support is important in helping immigrants, and people in general, cope and deal with stress and other mental health and emotional problems. According to the systematic review done by Mak, Roberts, and Zimmerman, one of the three most common strategies (labor) immigrants used in coping with migration-related stressors was the use of social support systems (2021). All of the participants in the study used their social support and networks in coping and dealing with stress. As social support continues to be an important protective factor against stress and mental health problems in immigrant communities, it becomes vital for the field of public health to promote and endorse the use of (peer) social support groups in addressing mental and emotional health problems among Nigerian immigrants in the U.S. The public health field can work to develop interventions and programs aimed at increasing the formation and utilization of peer support groups and networks for Nigerian immigrants in the U.S. populations in the U.S.

When it comes to the utilization of mental health services by Nigerian immigrants, the literature is scant, however a study by Chaumba points to the under-utilization of mental health services by Nigerian immigrants (Chaumba, 2011). This can be attributed to the stigma attached to mental health disorders and the perceptions about the etiology of mental health disorders. In this study, only two participants reported having ever been to therapy. It is important that future research explores young (millennial and Generation Z) Nigerian immigrant perceptions about etiology of mental disorders and their perceptions and attitudes about mental health services in the U.S. It may also be worthwhile to explore the factors that prompt young Nigerian immigrants to seek and utilize mental health services. For instance, researchers could explore if there is a certain threshold of stress, that becomes intolerable for Nigerian immigrants and thereby prompts them to seek and use mental health services. This research may help the public health field develop interventions to reduce this threshold of stress identified and to create targeted mental health education and messaging to reduce stigma about mental health disorders, increase accessibility to mental health services, and increase knowledge on the benefits to health and wellbeing in using mental health services when needed, specifically for (young) Nigerian immigrants.

Racism has been acknowledged as both a threat to public health and a public health issue by the American Public Health Association (APHA) and the American Medical Association (AMA) (American Public Health Association, n.d; O'Reilly, 2020). Racist-based incidents are detrimental to the health and wellbeing of Nigerian and Black-African immigrants—it increases acculturative stress and can have a negative effect on acculturative strategies (Boafo-Arthur, 2014). Previous studies on African immigrant health have demonstrated how racism can affect the health status of African immigrants by impacting their access to healthcare and employment opportunities (Viruell-Fuentes, Miranda, & Abdulrahim, 2012; Wafula & Snipes, 2014; Kaplan, Ahmed, & Musah, 2015). There is little known about how perceived racism and racist-based incidents impact the sense of self and emotional wellbeing of Nigerian immigrants and other Black-African immigrant groups in the United States. This can be an area of further exploration and research.

5.4 Limitations

This study is not without its limitations. One limitation is in the recruitment method of participants which relied on the use of social media platforms to circulate recruitment materials as this can limit persons who see the message to those who use social media. Social media platforms were specifically used because the target population is active on social media. Also, the COVID-19 pandemic made major aspects of life such as work and gatherings, become virtual. The sample size (eight participants) could be a potential limitation. However, in qualitative studies, small sample sizes are common and can be beneficial as through longer interview time, researchers can delve deeply into topic areas and thus, avoid compromising on depth and intensity of data being collected (Padgett, 2017). Lastly, sexual minorities (for example lesbian, gay, bisexual, and queer persons) and non-cisgender persons (including transgender and gender non-conforming persons) were not represented in the sample size. Having non-cisgender and sexual minorities represented in the participants would no doubt have yielded more variety of perspectives among participants

and subsequently contributed to more categories and themes or to different relationships and understanding of themes and sub-themes.

5.5 Conclusion

Immigrant health is public health and therefore, the quality of life, health and wellbeing of Nigerian immigrants are important to the field of public health. Nigerians are the largest African immigrant group in the United States (Pew Research Center, 2018). As more young Nigerians continue to immigrate to the U.S., the number of Nigerian immigrants engaging with the public health and healthcare system in the United States will increase. Therefore, it becomes increasingly important to understand the health characteristics of different Nigerian immigrant groups and the factors that contribute to their health and wellbeing.

This study contributes to the knowledge and understanding of young (millennial and Generation Z) Nigerian immigrants who are different from older generations of Nigerian immigrants in the U.S. This study explored how the emotional wellbeing of young Nigerian immigrants are shaped by their family of origin and by their new host country (the United States). By having a better understanding of these contextual factors that impact the wellbeing of young Nigerian immigrants in the U.S., we can then identify possible areas of interventions to improve their health outcomes.

Appendix A – Code Book

- 1. **Family Structure** nuclear-extended
- 2. Cultural differences {expression (of ILY), discipline, parenting (obedience, respect, opinions), elders, dating}
- 3. **REL w. mom** relationship with mother in childhood and adulthood and role/functions of that relationship in adult life
- 4. **Far fam dynamics** impact of far distance on family dynamics such as relationship with parents, conversations, etc.
- 5. **Increase closeness parent** increase in the closeness of relationship with parents especially as people age
- 6. **Parent role gender** parenting roles by gender
- 7. **Expect by gender** expectations of participants by gender (from parents, from religion, from culture)
- 8. Gender diff emo differences in affection, intimacy, and emotion by gender
- 9. Education autonomy adult child educational autonomy; adult child educational autonomy/tension
- 10. Autonomy distance and/or age impacting coming into self/sense of self, independence, autonomy
- 11. Social Net Friend use, functions, roles of friendship
- 12. **Social Net Sib** sibling relationship (characteristics of it, what it does, role it played/plays, supportive or not supportive, use in their lives)
- 13. Social Net Fam supportive extended family relationships
- 14. Religion change/shift in relationship with religion, use/impact/function in adult life
- 15. Adjustment U.S ways they had to adjust/adapt to being in the U.S or areas in their life that required adjustments when in the US now, ways their characters or personalities had to adjust because of being in the US, and things like accents
- 16. **Stress** any non-immigration status stress or worries
- 17. Immigration status stress stress related to immigration
- 18. Coping mechanism relationships, talk, therapy, health behavior (exercise, eat, sleep), other
- 19. **Parent affect REL** parental relationship influence on adult relationships e.g. (more listening less talking in being better friends (mirroring parents dictate you listen and do))
- 20. FEL emo child feelings, emotions, and intimacy as a child expression and ownership
- 21. **FEL emo adult** how people conceptualize, make sense, define, and express their feelings, emotions, including things like affection and intimacy as an adult
- 22. Parent child emo emotional relationship between parent(s) and child (young/older)

Appendix B – Interview Guide

Domain 1 - Structure of family

- 1. Describe your family when you were growing up. Prompt like who was in it
- 2. Are the members of your family still the same or are there other people you consider to be part of your family now?

Probe for

• siblings, extended or kin present

Domain 2 - Family dynamics

Thinking about the relationships with your parents and/or siblings:

- 1. What are the key things that stand out to you about your relationship with your parents and/or siblings when you were little?
 - How about now? (What stands out to you with your relationship with them as an adult?)
 - **Probe:** what about affection and intimacy?
 - **Probe**: any different now?
- 2. What were the most important rules or traditions practiced in your family when growing up?

Prompt – *rules/tradition on gender, education, feelings/emotions, relationships, religion*

o do you still observe or adhere to them and why/why not?

Domain 3 - (Emotional) Wellbeing and acculturation

- a. Sense of self/Identity (includes identity, sense of worth, self-esteem, self-awareness)
 - 1. Since you've been living in the US, are there ways in which your sense of yourself has changed? Tell me more?

Prompt - your identity, your self-esteem, your self-awareness, your values/views?

- If there have been: How do you feel about these changes? **Probe for:** any stress around these changes?"
- If you were still back in Nigeria (and living with your family) what do you think might be different?

b. Relationships

1. How would you describe yourself in your interpersonal relationships as an adult? *Prompt – For example rules you have, roles you let yourself play, how you express*

your emotions/feelings, behaviors you have

- Are there things you can think of that have influenced these?
- **Probe:** influenced by your upbringing?
- **Probe:** by living in the US?
- 2. What skills or qualities do you feel is important to have when navigating (interpersonal) relationships?
 - How did you learn these skills?
 Probe for: *if skills were learnt growing up, in the U.S. or both?*

c. Stress

- 1. What are some of the challenges you've faced as a Nigerian living in the United States?
 - a. Specific worries you've had as a Nigerian living in the US?
 - How do you manage these?
 - Prompt: like talking to friends, family, therapist,
 - Are there any other things you do to manage?

Close out questions

Demographic questions (Participants will be given the option of typing the answers to the questions in the chat box, if they'd like or prefer to).

- would you classify where you reside in the US as rural or urban?
- what ethnic group in Nigeria you belong to?
- what is your religious identity, if you have one?
- in terms of gender, how do you identify?
- in terms of sexual orientation, how do you identify?

Thank you so much for taking the time out to participate in this study and interview.

Appendix C - Recruitment Materials

Appendix C.1 – Poster for social media platforms

Call for participants!!!

Looking for people:

- age 21-35 years old
- born and lived in Nigeria till at least age 16
- currently living in the United States

to participate in a a small research study about the effects of growing up in a Nigerian family.

Participants selected for the study will be asked to do a 30-60 minutes interview on Zoom about their experiences on the topic.

If interested please fill out the very short and quick survey.

For questions - cna15@pitt.edu



Appendix C.2 – Script at the beginning of the survey (used to collect consent)

Thank you for your interest in being a potential participant in this student research study to learn about the effects of growing up in a Nigerian family among Nigerian-born adults now living in the United States. This research study is being conducted by the University of Pittsburgh, particularly by a study team that includes the graduate masters student. Eligible participants—aged 21-35 years, born and lived in Nigeria till at least age 16, currently living in the United States—will be interviewed for about 30-60 minutes over Zoom video call. The interview will include questions about your background (e.g., age, gender, sexual identity, religious identity, family background) and questions about your personal experience of growing up in a Nigerian family, and questions about your values and sense of self.

Participation in this study is completely voluntary. At any point in time, you may choose not to participate or choose to stop participating without negative repercussions or penalty. There are NO direct benefits to participating in this study: there will be NO payments, incentives, or compensations given or offered to any participant.

As personal identifiers such as names are being collected, there is a risk of breach of confidentiality, however this risk will be minimized as data containing personal identifiers will be stored in a secure and private file. No one except the study team will have access to this file. With explicit permission from you, the interview session will be recorded and saved as an audio file used to create a written transcript. No one except the study team will have access to the recording. The audio file will be saved in a secure and private file and location. The audio file will be de-identified and will not be linked back to you. Direct quotes from participants will be used in the thesis paper, but it will not be tied or traced to any participant as only non-identifiable codes will be used when referring to a direct quote. As personal questions about a person's background are being asked, there might be some undue distress caused to the participant, however, participant at any time can choose not to respond to a question or to stop participating in the interview and study.

If you have any questions or concerns, I can be reached via email at <u>cna15@pitt.edu</u> or phone at **XXX-XXX**.

If still interested and wish to proceed with this study, please complete this survey to the best of your ability by clicking on the arrow button. If you do not wish to proceed, you may close your tab to exit out of the survey.

The purpose of this survey is to collect brief demographic to determine eligibility for the study. Contact information will also be collected to communicate with potential participants and to schedule and finalize interview time for eligible participants. The survey should take between 5-10 minutes to complete.

Appendix C.3 – Survey questions

Survey for interested participants!

Do you agree to participate in this student research study?

*Please note that participation is voluntary and can be withdrawn at any time without negative consequences.

○YES (1) ○NO (2)

Skip To: End of Survey If Do you agree to participate in this student research study? *Please note that participation is... = NO

1 Name (First, last)

2 Age

3 Country of birth

4 How old were you when you moved to the United States

5 Current place of residence (city, state)

7 Phone number

8 Preferred method of communication

Email (1)

 \Box Text message (3)

9. **Provide 3 - 5 options** for when you are available for an interview (interviews are around 30-60 minutes long and will be conducted on Zoom). *Example: Option 1 - Monday, December 14, 12:00pm - 2:00pm*

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