



# Overseas labour migration of parents: Health of their left-behind adolescent children in the Philippines

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Utrecht - March 12, 2010





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Picture on the cover: View from Manila Bay  
Photographer: Rei Murakami

## **Acknowledgements**

A few years ago in the Philippines, I stayed with a ‘host family’: A grandmother, her 11-year old grandson and her adolescent granddaughter with her 1-year old daughter. Their father worked as a seafarer and their mother as a domestic helper in the Middle East. The granddaughter worked extremely hard, taking care of the house, her brother and her child. Her brother was not much of a happy 11-year old and always sat silently in a corner of the house. According to his grandmother, he missed his mother and changed a lot since she worked overseas. My Filipino friends told me that this situation is rather common; families are disturbed and left-behind adolescents and children do not do well, even though overseas migration is supposed to benefit remaining-behind families. For me, it was a great motivation to find out about the impact of overseas labour migration of parents, in particular on their left-behind children in the Philippines. I enjoyed working on this topic and my thesis very much; in the Philippines and in the Netherlands. The people with whom I got the opportunity to work had a very important role in that:

First of all, I am grateful to Margaret Stroebe, professor ‘Verliesverwerking’ at the Clinical and Health Psychology Department at Utrecht University in the Netherlands. I learned very much from her during the thesis process and I feel honoured that I got the opportunity to be supervised by her twice. I genuinely admire her passion for research, warm and open-minded personality, interest in other people, critical and experienced view on research and beautiful writing style. Maggie, I would like to thank you for your trust and support during my thesis project; from the time that it was still a research proposal until now. Our meetings, discussions and your advice have been working very motivating and inspiring for me.

Also, I would like to thank Rolf Kleber, professor ‘Psychotraumatologie’ from the Clinical and Health Psychology Department at Utrecht University, for taking the time to read and evaluate my thesis.

I am thankful to professor Conaco from the Psychology Department at the University of the Philippines – Diliman. Her knowledge on the topic of labour migration and left-behind children in the Philippines were insight-giving. Without her advice and her thesis classes, I could not have understood the unique Philippine migration situation well and could not have accomplished the study in the same manner.

In Isabela province, I would like to thank the CVPED; Cagayan Valley Programme on Environment and Development. I could not have done the data collection without their experienced knowledge and research skills in doing fieldwork in the rural Cagayan Valley area.

It was great to work together with Maricel Angolluan, my interpreter during the data collection period. Thank you Maricel; your nice character, your conversation skills and experiences as a teacher made our visits to the officials and schools highly productive and fun!

I am grateful to all the 267 high school students in Cabagan, for their time, effort and giving me insight in their personal life.

Of course my family; my father, mother and brother. Thank you.

I hope you will enjoy reading my thesis.

Chantal Smeekens



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## **Abstract**

Stressful life events are known to have severe impact on physical health. Absence of a parent could be a main source of stress for adolescents. Migratory separation from parents is a common situation for youth in the Philippines because many parents work abroad as an Overseas Filipino Worker (OFW) to improve the financial situation of their remaining-behind families. In the current study, based on the Cognitive Stress Model of Lazarus and Folkman (1984), differences in physical health between adolescents who have a parent working overseas and adolescents whose both parents live at home are investigated. Differences in outcomes between a mother or father working abroad are considered, as well as socioeconomic status and the secondary appraisal variables loneliness and avoidant coping. A questionnaire study was carried out among adolescents attending a public or private high school in rural Isabela province in the Philippines. Adolescents from the OFW group reported worse physical health outcomes compared to the non-OFW group. When mothers are absent, the poorest physical health outcomes are reported. Socioeconomic status seemed not to have an impact, and adolescents who felt more emotional lonely and more often used avoidant coping reported worse physical health outcomes as well. It can be concluded that the Stress Model could be relevant for migratory separation. Cultural aspects have to be taken into account in the interpretation. Limitations of the study as well as implications will be discussed. Attention to the physical health implications for remaining-behind adolescents in the Philippines seems highly necessary.



## **Introduction**

Stressful life events are known to have severe health implications for individuals who experience them (Barlow & Durant, 2002; Gurung, 2006; Lazarus & Folkman, 1984; Miller, Chen, & Cole, 2009). For adolescents, family issues are a main source of stress (Brodzinsky et al., 1992). Poverty, divorce of parents and the experience of loss or absence of a parent seem predictors for mental health outcomes of adolescents (Grant et al., 2006) and the experience of losing a loved person has an impact on the physical health outcomes in a person as well (Stroebe, Folkman, Hansson, & Schut, 2006). Central in the current study is the impact of migratory separation; when parents migrate and leave their children behind (Pottinger, 2005).

### **Overseas migration and the young people remaining behind in the Philippines**

In the Philippines numerous children and adolescents are living separated from their parents: Their parents are working as ‘Overseas Filipino Worker’ (OFW) in wealthier countries with the intention to financially support their family members whom they left behind. The number of young people remaining behind is estimated to be 9 million, or 27% of the total of under aged people in the country (Parreñas, 2006; Reyes, 2009). The Philippines is one of the largest migrant-sending countries in the world (Asis, 2006a; Asis, 2006b; Scalabrini Migration Center, 2004) and its OFW’s are essential for the country’s economy today (Parreñas, 2006). Financial remittances of parents could help improve their left-behind children’s health, for instance through access to health care and better nutrition (Scalibrini Migration Center, 2004; Songco, 2009; Yang, 2004). Nevertheless, there are signs that this ‘culture of migration’ does not bring solely positive effects; psychosocial and supplementary psychosomatic health consequences for youth left behind need more attention (Bryant, 2005). The current study investigated whether adolescents with a parent working overseas differ in physical health compared to adolescents whose parents both live with them at home in the Philippines.

### **The loss of a parent: Migratory separation and health**

Previous, mainly qualitative studies report ambivalent findings on health and well-being outcomes.

Diverse studies indicate that left-behind children miss their absent parent (Garcia Dungo, 2007; Scalabrini Migration Center, 2004) and perceive the absence as stressful (University of the Philippines, Tel Aviv University & Kaibigan, 2002). Some report that OFW children do not do well in daily life and have several emotional, psychosocial, risk behavioural and educational problems (Asis, 2006a; Garcia Dungo, 2007; Parreñas 2002; 2006; Scalabrini Migration Center, 2004). Others mention that the absence does not necessarily lead to severe emotional and psychological problems (Batistella & Conaco, 1996; 1998) as families are often able to adapt to the new situation (Batistella & Conaco, 1996). Support from the extended family and community, communication with the absent parent and appreciation of the (financial) reasons for parental migration make it easier to deal with difficulties (Parreñas, 2002). However, the absence of a mother has generally more emotional impact on left-behind youth and leads more often to problems (Batistella & Conaco, 1998; Garcia Dungo, 2007; Parreñas, 2006).

Migratory separation seems to have emotional impact on remaining-behind youth. However, consequences for physical health are less well-established. Philippine studies showed that children from OFW parents perceived themselves as healthier than the children of non-migrant parents did (University of the Philippines et al., 2002; Scalabrini Migration Center, 2004). Though, according to Batistella and Conaco (1998), parents are so important that remittances cannot compensate. How is the situation in other countries and separation situations? Quantitative studies show that the relationship between migratory separation and physical health of remaining-behind family members is not clearly established yet. Sometimes the migratory separation of a family member leads to poorer physical health outcomes for the left-behind in Asia (Nguyen, Yeoh, & Toyota, 2006), while in other cases, for instance in Bangladesh (Hadi, 1999; Kuhn, 2004, both in Nguyen et al., 2006), India (Gulati, 1993, in Nguyen et al., 2006), and Latin America (Acosta, Fajnzylber, & Lopez, 2007; McLaughlin, 2009) positive relations were reported. To what extent is the situation of parental labour migration stressful and could it have negative health consequences indeed for the remaining-behind adolescents in the Philippines? The current study will

investigate whether adolescents who have a parent working overseas differ in their physical health outcomes from adolescents whose parents are both living with them. The given relationship between stressors and health would lead one to assume negative outcomes for those with parents abroad.

It is not clear yet whether migration separation could be compared with other situations of parental absence and whether it is equally stressful. Fritsch and Burkhead (1981) showed a negative relation between the loss of parents by imprisonment and negative physical health outcomes in children. Also, the loss of a loved one through death is associated with negative health outcomes (Stroebe et al., 2006). A study from Jamaica suggests a relation between the separation of migrated parents and their 9-10 year old children and children's experience of stress, grief and loss (Pottinger, 2005). Nevertheless, it should be remembered that the separation of child and parent through migration is less definitive than separation through death. In situations of labour migration in the Philippines, adolescents are often still able to be in touch with their parent abroad and receive social support from them (Garcia Dungo, 2007). Following this line of argument, homesickness studies could be of relevance (Archer, Ireland, Amos, Broad, & Currid, 1998) and it is relevant to note that a positive relation between homesickness and somatic health complaints has been found. Though, in contrast to homesickness, in the current study the adolescent is not the person who moved to a different place. Fritsch and Burkhead (1981) indicated that the more negative the reason (i.e. through death, imprisonment, divorce and migration) for separation is perceived the less positive health outcomes are. Still, it remains unclear how separation through labour migration will fit in this more general literature on parental absence. Diverse moderating and mediating factors might play a role in the relation between migratory separation and physical health (Stroebe et al., 2006).

### **The other side of the coin: Financial remittances**

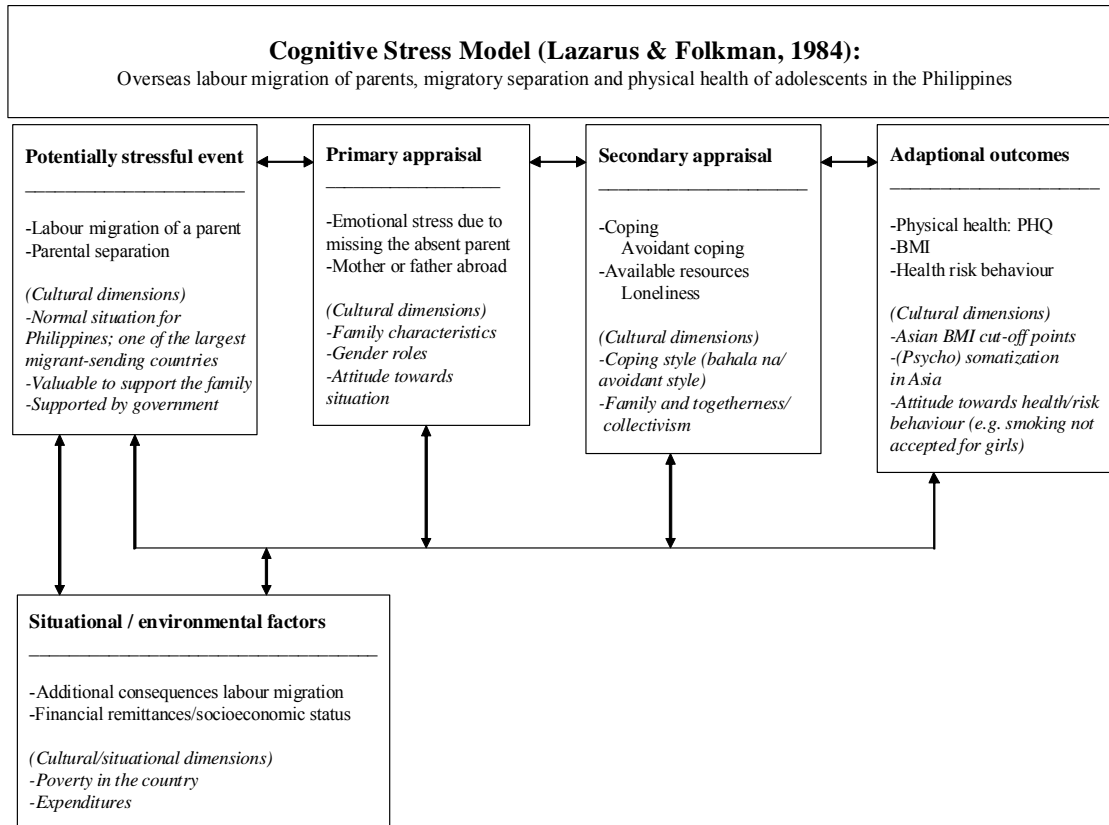
Socioeconomic status (SES) is associated with physical health (Cohen, Kaplan, & Salonen, 1999; Miller, Chen, & Cole, 2009). Cohen et al. (1999) showed a relationship between the two, those of higher socioeconomic status having better physical health. Deaton (2003) suggested that on low income levels in

particular, the impact on health is significant. In the relatively poor Philippines, the main reason for parents to work abroad is to improve the economic situation of their remaining-behind families which could make education, health care and nutritious food better accessible (Bryant, 2005; Garcia Dungo, 2007; Scalabrini Migration Center, 2004). This means that in migratory separation situations, physical health of remaining-behind adolescents might improve through financial remittances. Kanaiaupuni and Donato (1999) found that for young children in Mexico financial remittances compensated for maternal absence and provided access to better food and health. Thus, it remains crucial to consider that the final outcome in health is likely to be the result of two different components: Parental absence and income growth (Rossi, 2008).

### **The Stress Model**

Labour migration from the Philippines leads to a seemingly contradicting situation. Socioeconomic growth may lead to better physical health while the psychological difficulties of migratory separation may cause poorer outcomes. It seems essential to consider how the migration separation is evaluated by adolescents; it will only be stressful as it has been perceived or appraised as such. This is central in Lazarus and Folkman's (1984) Stress Model (see Figure 1). According to Lazarus and Folkman (1984), before a given 'event' can be marked as stressful it has to be perceived as such by an individual; stress is not the equivalent of a situation in itself and may not lead to the same physical health outcome in each individual and situation (Gurung, 2006). According to Lazarus and Folkman (1984), primary appraisal takes place, which means that the potential stressor is evaluated according to the extent to which the situation is relevant, positive and stressful. However, this does not mean that all the OFW adolescents in this study will automatically report lower health levels compared to the non-OWF adolescents; several other psychosocial factors are important in the prediction of the final health outcomes.

Figure 1.  
The Cognitive Stress Model (Lazarus & Folkman, 1984) applied to migratory separation in the Philippines



It should be noted that migratory separation might not be equally stressful, similarly appraised or lead to the same physical health outcomes in different cultures, just as this cannot be assumed across individuals. Slavin, Rainer, McCreary, and Gowda (1991) developed a multicultural model of the stress process with attention to culturally-relevant dimensions. In the Philippine setting, several cultural characteristics might play a role in health outcomes. For example, migratory separation is a common situation for youth in the country (Reyes, 2009) and therefore it is possible that the absence of a parent is less often perceived as highly stressful. Figure 1 shows the Stress Model adjusted to migratory separation in the Philippines.

### **Secondary appraisal: Coping, culture and loneliness**

Coping and, in particular, avoidant coping styles are associated with negative physical health outcomes (Ruchkin, Eisemann, & Hägglöf, 2000; Stein & Nyamathi, 1999) also in the health of adolescents (Kardum & Krapic, 2001). People can cope differently with the same potentially stressful situation, which corresponds to the secondary appraisal of Lazarus' and Folkman's Model. This process can reduce or strengthen the adaptional outcomes of stress and relates to physical health (Lazarus & Folkman, 1984).

Another key variable of relevance to the situation of adolescents with parents abroad is loneliness. Batistella and Conaco (1996) reported higher feelings of loneliness among children of Philippine migrants. Loneliness is an indicator for social well-being (De Jong Gierveld & Van Tilburg, 2006) and a 'response to the absence of a particular social provision' (Weiss, 1973). However, family members are often taking up social support, which might lead to a better adjustment in terms of loneliness (Reyes, 2009). Therefore, Weiss' (1973) division between loneliness of social isolation - the lack of provision in social integration - and emotional loneliness - a lack of attachment - is of relevance. Emotional loneliness seems particularly meaningful for the current study in Philippine perspective. The family and 'togetherness' are important in the Philippines (Medina, 2001). Perhaps social loneliness might not be common, while experiences of emotional loneliness due to the lack of attachment with their parent might have severe impact on Filipino adolescents' physical health outcomes.

### **The current study**

The current study is aimed at obtaining a better understanding of the situation of the remaining-behind youth in the Philippines due to the absence of a parent working abroad. The study addresses the issue whether there are differences in physical health between adolescents who have a parent working abroad as Overseas Filipino Worker (OFW) and adolescents whose parents are both living with them in the Philippines (non-OFW). The relation between the potentially stressful absence of a parent through overseas labour migration and the physical health of adolescents in the Philippines is not clear yet.

## Hypotheses

It is expected that:

- (a) adolescents who have a parent working abroad (OFW) will report poorer physical health compared to the adolescents whose parents live 'at home' with them in the Philippines (non-OFW).

Though, based on the Cognitive Stress Model (Lazarus & Folkman, 1984) it is expected that:

- (b) the more the adolescent (1) misses the absent parent and (2) perceives the migratory separation as stressful, the lower level of physical health will be reported.

Qualitative studies reported more problems while mothers are absent and therefore it is expected that:

- (c) adolescents whose mother or both parents are working abroad, will report lower physical health outcomes compared to the adolescents whose father is working abroad or whose parents are both at home.

Physical health is expected to relate to a number of variables associated with migratory separation.

As higher socioeconomic status is related to better physical health, it is expected that:

- (d) SES has a moderating role in physical health outcomes. Within a 2x2 design (SES x OFW category), the best physical health is therefore expected to be reported by the group of adolescents attending a private school ('high' SES) whose parents are at home (non-OFW). Adolescents with a parent abroad (OFW) at a public school ('low' SES index) are expected to be the worst off in terms of physical health, compared to the other groups.

Following the secondary appraisal theory in the Cognitive Stress Model (Lazarus & Folkman, 1984),

- (e) it is hypothesized that (1) feelings of loneliness and (2) avoidant coping have a mediating role in physical health outcomes of adolescents with a parent abroad (OFW).

Other variables, such as the attitude towards overseas labour migration and health-related variables such as health risk behaviour and Body Mass Index (BMI) will be investigated as well. If significantly correlated with physical health, BMI, sex and age will be used as control variable for the physical health outcomes.

## Methods

### *Setting*

The study was carried out at one private and two public high schools in Cabagan. Cabagan is a municipality in Isabela, which is a rural province in the northern region of the Philippines.

### **Participants**

267 adolescents who were all high school students in grade 2, 3 or 4 voluntarily filled in the questionnaire. The participants were divided in an 'OFW' group with adolescents who have at least one of their parents working overseas and a 'non-OFW' group consisting of adolescents who have both parents at home. Because 44 adolescents' home situation could not be included in these two groups (e.g. a parent was working in a different region in the Philippines, a parent deceased, parents were separated or their situation was undefined), their data were excluded from the analyses. 13 other participants' questionnaires had a large amount of missing or obviously unreliable data (e.g. 10 adolescents reported poor knowledge of the English language) and therefore these were excluded as well. In the final sample there were 200 adolescents of whom 105 adolescents had a parent working abroad (see Table 1). Within the OFW group, 35 attended a public school and 71 attended a private school. The control group consisted of 95 adolescents whose parents were both living with them in the Philippines. Among them, 70 attended a private school and 24 a public school. The participants were in the age range from 13 to 18 ( $M=14.57$  and  $SD=1.046$ ). 32% ( $N=64$ ) of the participants were male and 67.5% ( $N=135$ ) were female, equally divided over the two participant groups (OFW). From the OFW group there were 56 participants whose mother is OFW, 39 with an OFW father and 10 with both parents working abroad. Most adolescents (76%) are from Ibanag ethnic group, with Tagalog (13%) as the second largest ethnic group.



Table 1.  
*Demographic data of OFW and non-OFW respondents*

Variable	OFW (N=105)		Non-OFW (N=95)		Total	Missing data
	N (%)	M (SD)	N (%)	M (SD)	N (%)	N (%)
School type					200 (100)	
Private	70 (35)		71 (35.5)		141 (70.5)	
Public	34 (17)		25 (12.5)		59 (29.5)	
Sex adolescent					199 (99.5)	1 (.5)
Male	40 (20)		24 (12)		64 (32)	
Female	65 (32.5)		70 (35)		135 (67.5)	
Ethnic group					197 (98.5)	3 (1.5)
Ilocano	1 (.5)		2 (1)		3 (1.5)	
Tagalog	16 (8)		10 (5)		26 (13)	
Ibanag	79 (39.5)		73 (36.5)		152 (76)	
Other	9 (4.5)		7 (3.5)		13 (8)	
Sex absent parent					105 (52.5)	
Mother	56 (28)					
Father	39 (19.5)					
Both	10 (5)					
	N (%)	M (SD)	N (%)	M (SD)	N (%)	M (SD)
Age	105 (52.5)	14.60 (1.04)	94 (47)	14.54 (1.05)	199 (99.5)	14.57 (1.05)

*Note: OFW= Group adolescents with at least one parent working overseas as Overseas Filipino Worker (OFW); non-OFW= Group adolescents whose parents both live with them 'at home' in the Philippines.*

## Materials

### *Questionnaire*

A questionnaire was developed based on existing questionnaires and qualitative information. Several languages are spoken as a first language in Cabagan, since several ethnic groups are living in the area. Therefore it was decided to make an English questionnaire for all participants. English is an official language in the Philippines and one of the main languages of instruction at schools. If anything was unclear, the participants were given the opportunity to ask for a verbal translation in their own language (Tagalog, Ibanag or Ilocano). The complete questionnaire can be found in Appendix 1.

*Demographics and background information:* The questionnaire included questions about demographics (i.e. age, sex and ethnic group). Background information on living situation, adolescent-parental contact, health behaviors and household were asked [i.e. "With whom are you living in one house? (You can

circle more than one answer) (Father, mother, older sister(s), older brother(s), younger sibling(s), aunt, uncle, cousin(s), grandfather, grandmother, helper, other people)”. Some of the questions were based on the Philippine Young Adult Fertility and Sexuality Study (University of the Philippines Population Institute & Demographic Research and Development, 2002). Information on overseas labour migration was asked, for instance on overseas migration of other family members, age of the adolescent at the time the parent left and financial remittances [i.e. “How do you and your family spend this money? (You can circle more than one answer) (Hospital visit, health center visit, insurance, food, alcoholic drinks, cigarettes, fiesta, school fees, electrical appliances, bills, I don’t know, other)”. The background information was used for interpreting data and to gain insight into the migratory separation situation. Age of the child at the time the parent left to work abroad for the first time was used in additional analyses.

*English:* English language skills were asked with the question: “To what extent you can read and write English”. For both answers a 5-point Likert scale was used (‘Not at all’-‘Fuent’).

*Attitude overseas labour migration:* The general attitude of the adolescents towards overseas labour migration was measured on a 5-point Likert scale (‘Very negative’ – ‘Very positive’) with the question: “In general, what do you think about the situation that Filipino people are working abroad?”

*Socioeconomic status Index: School type & socioeconomic indicators:* In rural Isabela province, socioeconomic status (SES) is not accurately measurable by income alone as many of its inhabitants live from their own agricultural products. Moreover, most adolescents do not know the income of their parents. Therefore, school type was taken as a preliminary indicator for socioeconomic status. Data was collected from students at two different school types: Public and private. A difference in socioeconomic status is likely to exist between the adolescents who attended a private school and those who attended a public school, as school fees are higher for the private school than for the public school. In the Philippines, private schools are considered to be generally better, and financial resources are often used to send children to private schools (Bryant, 2005). Children in left-behind households have a higher probability of attending private schools, if remittances are sufficient. Furthermore, the socioeconomic status scale comprised more objective questions relating to socioeconomic status (e.g. “What appliances do you / does

your family have?") and a subjective question; "In the Philippines there are people that are rich, average or poor. How would you describe your situation?" ('Very poor'-'Very rich'). School type correlated with the amount of appliances (1-10) that families have. It did not correlate with subjective experience poverty, which could be due to perception biases. When an adolescent at a public school perceived himself as average "poor", this might be different from average poverty perceptions at a private school, which is generally attended by adolescents from richer families, see Table 4. It means that subjective feelings and stress due to perceived socioeconomic status did not play a role in the health outcomes. Therefore, school type was perceived as a reasonably valid indicator for socioeconomic status.

*Health risk behaviour:* To determine health risk behaviour of the adolescents, questions about smoking and drinking alcohol were included. A sample question is "Have you ever tried cigarette smoking, even one or two puffs?". The questions about the quantity of cigarettes and drinks were omitted from the analyses as these quantities were generally very low.

*Body Mass Index:* The participants' height was measured in centimetres by the researcher. For confidential reasons the participants determined their own weight in kilograms on the weight scale that was brought by the researcher. Afterwards the participants filled in their height and weight on the questionnaire. The BMI of participants was calculated with the formula 'BMI = Weight in Kilograms / ( Height in Meters ) x ( Height in Meters)'.

### *Scales*

*Physical Health Questionnaire:* The Physical Health Questionnaire (PHQ; Schat, Kelloway, & Desmarais, 2005) is a self-report scale that measures physical health. The scale consists of fourteen items that assess somatic symptoms, experienced in the last few weeks. Symptoms are divided over the four subscales 'Sleep Disturbance', 'Headaches', 'Gastro-intestinal Problems' and 'Respiratory Problems'. A 7-point Likert scale was used ('Not at all' – 'All the time' and for the subscale 'Respiratory Problems', '0 days' – '7+ days'). Sample questions are "How often have you experienced headaches?" and "On how many days have you had minor colds (that made you feel uncomfortable but did not keep you sick in bed or make

you miss work/school)?" Only question 4, "How often has your sleep been peaceful and undisturbed?" indicates the absence of symptoms. All questions except 4 were reversed so that higher PHQ scores indicate better physical health. Internal consistency of the PHQ is  $\alpha = .79$  for the complete scale and between .70 and .90 for the subscales (Schat et al., 2005). In the current study Cronbach's  $\alpha$  was .73 for the complete PHQ.

*Coping Scale for Children and Youth:* The Coping Scale for Children and Youth (CSCY; Brodzinsky et al., 1992) is a self-report measure of children's and youth's coping behaviour. The scale consists of 29 items that measure coping styles that children and youth may use when having a problem. The items are divided over four subscales; 'Assistance seeking' (4 items), 'Cognitive-Behavioural Problem Solving' (8 items), 'Cognitive Avoidance' (11 items) and 'Behavioural Avoidance' (6 items) and were measured on a 5-point Likert scale ('Never' – 'Always'). Sample items include "I shared my feelings about it with another person." and "I tried to get away from the problem for a while by doing other things." Cronbach's  $\alpha$  for the subscales are for 'Assistance Seeking' .72, for 'Cognitive-Behavioural Problem Solving' .81, for 'Cognitive Avoidance' .80 and for 'Behavioural avoidance' .70 (Brodzinsky et al., 1992). In the current study Cronbach's  $\alpha$  is low for 'Assistance Seeking' ( $\alpha = .50$ ) and thus this subscale was omitted from further analyses. For the subscales 'Cognitive-Behavioural Problem Solving' ( $\alpha = .81$ ), 'Behavioural avoidance' ( $\alpha = .60$ ) and 'Cognitive Avoidance' ( $\alpha = .82$ ) the internal consistency is acceptable. Only the two avoidant subscales were included in the analyses, as cognitive and avoidance-focused coping strategies in particular are relevant in collectivistic cultures with a greater secondary way of control (a strategy that is associated with trying to adapt to a situation as best one can), such as in the Philippines (Chun et al., 2007).

*Loneliness scale:* Loneliness was measured by four items on a 5-point Likert scale ('Never'-'Very often'). Two items, derived from Stroebe, Stroebe, and Abakoumkin (2005), measured 'Emotional Loneliness' (i.e. "I often feel lonely") which is related to the social provision of attachment (Weiss, 1973). The other two measured Social Loneliness' (i.e. "I have a really nice set of friends") that is related to social

integration (Weiss, 1973). Inter-item correlation of the Emotional Loneliness-items was .61. Inter-item correlation of the Social Loneliness-items was low with .24 and thus omitted from the analyses.

#### *'Migratory separation reaction'-scales*

1. Single item 'missing the parent' measure: The question "Do you miss your parent who is working abroad" was asked to indicate whether adolescents miss their absent parent. As it is expected that the adolescents generally miss their parent to a certain level and that social desirability could have impact, there are 4 answer categories 'Yes' ('Yes, a lot', 'Yes', 'Yes, a bit', 'Yes, a little bit') and one category 'No'. The answers were reverse scored so that a higher score means missing the absent parent more.

2. Adjusted homesickness scale ("Homesickness Questionnaire (HQ)"): The scale that measures migratory separation reaction is based on the Homesickness Questionnaire (HQ) (Archer et al., 1998) and consists of 16 items. Homesickness could be understood as a separation reaction which is to a certain extent similar to a loss reaction (Archer et al., 1998). The (non-definitive) absence of a significant other applies to the adolescents with a parent overseas as well. The adjusted missing the parent scale measures features associated with separation and loss (i.e. missing the absent parent, feelings of insecurity and missing the old home situation). Sample questions are "It upsets me if I am unable to contact my parent who is working in another country" and "I hate that my parent is working overseas" and are measured on a 5-point Likert scale ('Not at all' – 'Always'). Cronbach's  $\alpha$  in the original scale is .85 for the 'Strain' factor and .83 for the 'Separation difficulties' factor. Cronbach's  $\alpha$  for the current migratory separation reaction scale is acceptable ( $\alpha = .66$ ) after deletion of item 2: "I hardly ever think about my parent who is working abroad".

#### **Procedure**

Before starting the study, permission from the mayor of Cabagan, the *barangay*<sup>1</sup> captains, the local police and the school principals was requested. The adolescents were approached at their respective schools with

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<sup>1</sup> Smallest political structure in the Philippines

the question whether they would participate in a study on ‘your health, your family life and your habits’. The procedure of the study was explained and the students were asked by guidance counsellors for their voluntary participation. Those who agreed were invited to take a seat in a classroom that was reserved for the study. There, the informed consent and short instructions for filling in the questionnaire were given. Both were explained verbally in English and Ibanag and could be read in the English introduction letter (see Appendix 2) that was attached to the questionnaire. Then the participants filled in the questionnaire, which took about 30 minutes. After completing the questionnaire the participants were asked to take off their shoes, so that their height and weight could be measured, following the method described in the BMI questionnaire section. After the study the participants received a small gift.

### **Analyses**

The Statistical Package for Social Sciences for Windows (SPSS) 17.0 was used for all the analyses. Preliminary checks were performed to ensure that no assumption was violated (sample size ( $N=200$ ), normality (histogram, Skewness and Kurtosis) and multicollinearity (all  $r < .25$ ). Assumptions of the parametric tests were not seriously violated. As extreme under- and overweight were not visually reported by the researcher, outliers in the BMI scale (scores under 15 or above 30) were replaced with  $M (19.06) \pm (2 * SD (2.07))$ . Then, correlations between variables were analysed using bivariate correlation tests (Pearson’s correlation coefficient). A  $t$ -test for independent samples was used to test whether there are differences in physical health outcomes between adolescents with an OFW parent and adolescents with their parents at home. Differences were considered significant at level  $p = .05$ . A one-way ANCOVA was performed to control for the variable age. A two-way ANOVA was used to test for main and interaction effects of the independent variables school type (SES index) and absence of a parent on the dependent variable physical health outcomes. A multiple hierarchical regression analysis was performed in order to determine whether, after controlling for age, the factors ‘emotional loneliness’ and ‘avoidant coping’ were predicting the variability in physical health outcomes within the OFW group.

## Results

### Descriptives

The OFW and the non-OFW group did not differ significantly from each other on age and BMI. On average the adolescents' physical health score on the Physical Health Questionnaire was  $M = 5.28$  ( $SD = .73$ ) on a 7-point Likert scale, see Table 2. The score is rather comparable with PHQ scores in Schat et al.(2005). In the hypotheses section the significance of the difference in physical health scores between the OFW group and the non-OFW group will be tested. There was no significant difference in outcomes on the physical health scale between males and females. The mean scores on the scales and variables of the complete sample, the OFW group and the non-OFW group are presented in Table 2.

Table 2.  
*Mean scores and standard deviations on variables and (sub)scales.*

	OFW	Non-OFW	Total
	<i>M (SD)</i>	<i>M (SD)</i>	<i>M (SD)</i>
Attitude towards OFW	3.46 (.77)	3.24 (.75)	3.36 (.77)
Physical health			
Physical Health Questionnaire (PHQ)	5.44 (.66)	5.13 (.77)	5.28 (.73)
Subscale Sleep	4.87 (.97)	5.17 (1.01)	5.01 (1.00)
Subscale Headache	4.95 (1.30)	5.20 (1.17)	5.07 (1.24)
Subscale Stomach	5.19 (1.18)	5.70 (.91)	5.43 (1.09)
Subscale Sick	5.67 (1.15)	5.75 (1.27)	5.70 (1.20)
Body Mass Index (BMI)	19.25 (2.04)	18.85 (2.11)	19.06 (2.07)
Parental absence			
Intensity missing	4.62 (.95)	NA	NA
Migratory separation scale	3.00 (.63)	NA	NA
Emotional loneliness	2.62 (.92)	2.32 (.78)	2.48 (.86)
Avoidant coping			
Cognitive avoidant coping	2.84 (.68)	2.90 (.59)	2.87 (.64)
Behavioural avoidant coping	2.87 (.62)	2.75 (.59)	2.81 (.60)
Socioeconomic status			
Subjective poverty	2.83 (.62)	2.71 (.76)	2.77 (.69)
Number of appliances	5.74 (2.2)	5.44 (2.15)	5.60 (2.19)

*Note: OFW = adolescents with a parent abroad; non-OFW = adolescents with both parents at home; NA = Not applicable for the non-OFW group*

Table 3.  
Pearson's correlations between variables

	OFW	School type	Sex	Age	Body Mass Index (BMI)	Physical health (PHQ)	Cognitive avoidant coping	Behavioural avoidant coping	Smoking	Drinking alcohol	Emotional loneliness	Attitude OFW	Subjective poverty	Appliances	Missing parent	Migratory separation scale
OFW	1.00															
School type	.07	1.00														
Sex	.13	-.16*	1.00													
Age	.03	.25**	.02	1.00												
Body Mass Index (BMI)	.10	-.03	.05	-.03	1.00											
Physical health (PHQ)	-.21**	-.11	.09	-.22**	.06	1.00										
Cognitive avoidant coping	-.04	-.13	.03	.07	-.20	-.17*	1.00									
Behavioural avoidant coping	.10	-.07	.11	.14	.10	-.23**	.53**	1.00								
Smoking	.08	-.04	-.12	.14*	.10	-.15*	-.06	-.13	1.00							
Drinking alcohol	.11	.17*	-.14	.18*	.10	-.02	.13	-.05	.49**	1.00						
Emotional loneliness	.18*	.25*	.06	.18*	.21**	-.25**	-.05	.08	-.09	-.07	1.00					
Attitude OFW	.15*	.05	.01	.11	.05	-.04	.01	.00	-.10	-.15*	.14	1.00				
Subjective poverty	.09	-.08	.11	-.06	.07	.05	.04	.04	.13	-.02	.01	.16*	1.00			
Appliances	.07	-.40**	.03	-.25**	.04	.10	.01	-.06	-.03	-.10	.05	.20**	-.41**	1.00		
Missing parent	NA	.03	.23*	.18	.07	.20	-.03	.01	-.11	-.17	.22*	-.10	-.05	.04	1.00	
Migratory separation scale	NA	-.17	-.01	.03	-.06	-.18	.10	.20	-.26*	-.23*	.18	.10	.08	.26*	-.24*	1.00

Note: OFW, School type, Sex, Smoking and Drinking alcohol are categorical data.

NA=Not applicable for non-OFW group.

\*Significant at the 0.01 level (2-tailed).

\*\*Significant at the 0.05 level (2-tailed).



### Preliminary analyses

Correlations between various variables are presented in Table 3. The variables OFW, school type, sex, smoking and drinking were categorical data and dummy coded (1 = OFW, 0 = non-OFW; 0 = private, 1 = public; 0 = female, 1 = male; 0 = never tried smoking / drinking, 1 = tried smoking / drinking). The scores on intensity of missing the absent parent and the migratory separation scale are only applicable and computed for the OFW group.

#### *Physical health*

Migratory separation in the Philippines is a complex situation where several variables might have a role in individual physical health outcomes of adolescents. Various variables appeared to be related to physical health outcomes, see the correlation matrix in Table 3. Outcomes on the Physical Health Questionnaire in the complete sample were significantly correlated with age, avoidant coping, try smoking, emotional loneliness and, confirming the main hypothesis, with OFW category. Physical health scores did not correlate with intensity of missing the parent, the adolescent's sex and any of the socioeconomic status indicators school type, subjective poverty and number of appliances.

The sample ( $N = 200$ ) was divided in four groups [OFW attending a private school ( $N = 71$ ), OFW attending a public school ( $N = 34$ ), non-OFW attending a private school ( $N = 70$ ) and non-OFW attending a public school ( $N = 25$ )]. The mean scores of the four groups on the Physical Health Questionnaire were derived and can be found in Table 4. The effects of the variables OFW category and school type will be tested in the hypotheses section.

Table 4.

*Mean and standard deviations of four groups on physical health: OFW attending a private school, OFW attending a public school, non-OFW attending a private school and non-OFW attending a public school, controlled for age.*

	OFW	Non-OFW
	<i>M (SD)</i>	<i>M (SD)</i>
Private school (high SES)	5.18 (.73)	5.49 (.70)
Public school (low SES)	5.04 (.77)	5.32 (.50)

*SES index: School type*

Correlations between school type (public or private) and other indicators were investigated, see Table 3. School type correlated with the number of electrical appliances (1 - 10) that families have (see methods section). School type did not correlate with subjective poverty. Though, subjective poverty correlated negatively with the amount of electrical appliances. None of the SES variables (appliances and subjective poverty) correlated with physical health outcomes.

*Migratory separation and missing intensity*

Generally, OFW adolescents miss their absent parent a lot with a high mean score for 'missing intensity' ( $M = 4.62$ ;  $SD = .95$ ; on a 5-point Likert scale). 82.5% ( $N = 80$ ) of the adolescents from the OFW group ( $N=105$ ) reported that they miss their absent parent a lot. Only 3.1% ( $N = 3$ ) of the adolescents did not miss their parent. On the migratory separation scale, the OFW adolescents' mean score was  $M = 3.00$  ( $SD = .63$ ) with the scores normally distributed. Intensity of missing the absent parent and the migratory separation scale appeared to have a weak positive correlation,  $r = .24$  ( $p = .02$ ).

*Secondary appraisal: Avoidant coping and loneliness*

The mean score on the subscale 'Cognitive avoidant coping' was  $M = 2.87$  ( $SD = .64$ ). Behavioural avoidant coping mean scores were  $M = 2.81$  ( $SD = .60$ ). Both correlated negatively with physical health and correlated with each other, see Table 3. Following the Cognitive Stress Model, physical health outcomes on the PHQ correlated with behavioural ( $r = -.23$ ) and cognitive avoidant coping ( $r = -.17$ ) and emotional loneliness ( $r = -.25$ ). The mean score on emotional loneliness was  $M = 2.48$  ( $SD = .86$ ).

Emotional loneliness correlated with missing the absent parent, with age and negatively with physical health. A *t*-test for independent samples revealed that adolescents with a parent abroad ( $M = 2.62$ ,  $SD = .92$ ) were significantly more emotional lonely than the adolescents with both parents at home ( $M = 2.32$ ,  $SD = .78$ ),  $t(193) = -2.50$ ,  $p = .01$  (see Table 2).

## Hypotheses testing

### *(a) Differences in physical health: OFW & non-OFW*

A *t*-test for independent samples was performed to determine whether the groups of adolescents (OFW and non-OFW) differ significantly on physical health outcomes (PHQ). The group of adolescents with their parents at home (non-OFW) ( $N=95$ ) scored significantly higher ( $M = 5.44$ ,  $SD = .66$ ) on the PHQ compared to adolescents ( $N=105$ ) who have a parent working overseas (OFW) ( $M = 5.13$ ,  $SD = .77$ ),  $t(198) = 2.99$ ,  $p = .003$ ,  $\eta^2 = .043$ . OFW status explained for 4.3 % the variance in physical health outcomes which is quite a small effect (Cohen, 1988; in Pallant, 2005). Then, a one-way ANCOVA was conducted with age included as the covariate because age correlated significantly with physical health scores. The difference still remained significant after controlling for age. This means that the OFW group reported significantly worse physical health outcomes than the non-OFW group,  $F(1, 196) = 9.27$ ,  $p = .003$ ,  $\eta^2 = .045$ .

### *(b) Migratory separation and missing intensity*

Neither ‘missing intensity’ nor scores on the migratory separation scale correlated with physical health scores.

### *(c) Absent mother, father or both*

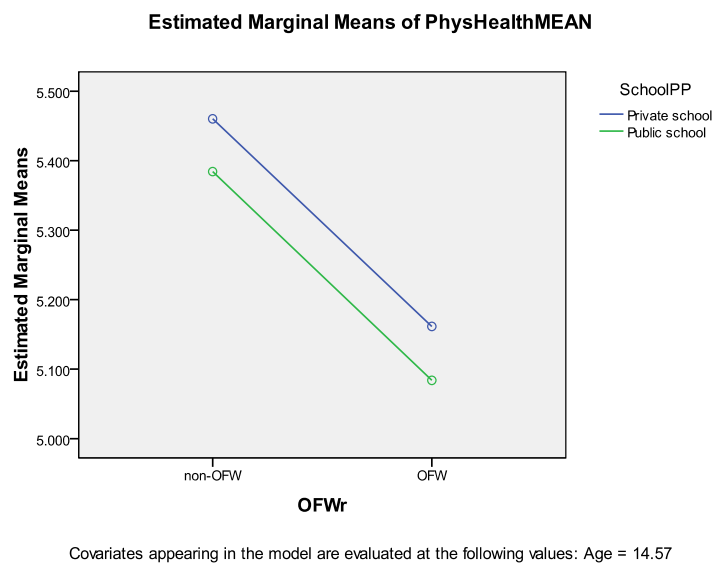
A one-way ANOVA was conducted to determine whether there was a difference in physical health outcomes between the groups non-OFW ( $N= 95$ ), OFW mother ( $N= 56$ ), OFW father ( $N= 39$ ) and OFW both parents absent ( $N= 10$ ). This difference appeared to be significant ( $p = .02$ ). Comparing the groups with the Bonferroni posthoc test, only a significant difference was found between the group OFW adolescents who have a mother working abroad and the non-OFW group ( $p = .01$ ).

### *(d) Physical health & SES index (school type)*

A two-way between groups ANCOVA was conducted to test whether the dummy-coded factors ‘OFW’ and ‘SES’ were related to the mean physical health scores of the adolescents, separately and together. Age was included as covariate. The variance over physical health scores is equal across the different groups

( $p = .17$ ). For OFW category, there is a main effect  $F(1, 196) = 6.75$ ,  $p = .01$  (see the first hypothesis). The main effect for school type was not significant ( $F(1, 196) = 1.79$ ,  $p = .18$ ); the students from the private school (high SES) did not differ significantly from the students from a public school (low SES) in terms of physical health. Thus, the non-OFW group attending a private school reported better health compared to both OFW groups, though not compared to the non-OFW adolescents attending a public school. Both the OFW groups scored significantly lower on physical health than the non-OFW groups, with no difference between the private and public OFW group. No interaction effect was found between the variables ( $F(2, 196) = .06$ ,  $p = .94$ ), see Figure 2 showing two almost parallel lines.

Figure 2. Independent categorical variables school type and OFW category on dependent variable physical health, controlled for covariate age.



*(e) Secondary appraisal: Emotional loneliness and avoidant coping*

Adolescents with both parents abroad were more emotional lonely than the adolescents with both parents at home. Also, emotional loneliness, cognitive avoidant and behavioural avoidant coping correlated significantly with physical health outcomes in the general sample, see Table 3. It means that persons who are more emotional lonely, report worse physical health outcomes. Also, persons with a high score on

avoidant coping, reported poorer physical health. It is predicted that the variables generally mediate the outcomes in physical health within the group adolescents with a parent abroad (OFW). A multiple hierarchical regression analysis was performed examining whether ‘secondary appraisal’ (Lazarus & Folkman, 1984) predicted the outcomes in physical health of adolescents with a parent abroad. The variables are entered as independent variables in a hierarchical multiple regression analysis. First, the control variable age was entered. As the primary appraisal variables missing the parent, migratory separation and attitude towards labour migration did not correlate significantly with physical health, they were not included in the regression analyses. Second, the secondary appraisal variables were entered. The findings can be found in Table 5.  $r^2 = .20$  for model 2, which means that within the OFW group 20% of the variance in physical health outcomes is explained by model 2.

Table 5.

*Outcomes of the hierarchical regression analysis for the adolescents with a parent working abroad (OFW)*

Model	<i>B</i>	<i>SE</i>	$\beta$	$r^2$
1 Age	-.20	.07	-.14	.08
2 Age	-.16	.07	-.22	.20
Emotional Loneliness	-.12	.08	-.14	
Cognitive avoidant coping	-.19	.13	-.17	
Behavioural avoidant coping	-.25	.14	-.20	

### **Additional findings**

#### *Attitude*

Adolescents ( $N = 200$ ) are generally fairly positive ( $M = 3.36$ ,  $SD = .77$ ) towards overseas labour migration. After performing a *t*-test for independent samples, the OFW adolescents ( $M = 3.46$ ,  $SD = .77$ ) appeared to be even significantly ( $p = .049$ ) more positive than adolescents from the non-OFW group ( $M = 3.24$ ,  $SD = .75$ ), see Table 2.

#### *Body Mass Index (BMI)*

Generally, Body Mass Index scores below 18 and above 25 are associated with poorer health (WHO, 2002). In the Asian population, these cut-off scores are somewhat lower (above 23 is perceived as overweight), though in adolescents from Asian descent the cut-off scores are less well-established (WHO,

2002). The adolescents were divided in three groups; with BMI 17.9 and below, BMI 18 - 22.9 and with a BMI of 23 and above. A one-way ANOVA showed that none of the groups differed significantly from the others in terms of physical health.

*Time abroad and age when the parent(s) went abroad*

Within the OFW-group, a *t*-test for independent samples was conducted to examine whether private and public school students differed in their age at the time that their parents left them to work abroad for the first time. It appeared that adolescents attending a private school ( $M = 6.39$ ;  $SD = 4.03$ ), were significantly younger ( $p = .005$ ) than the adolescents attending a public school ( $M = 9.32$ ;  $SD = 5.07$ ) at the moment that their parent left to work abroad.

## Discussion

The primary aim of the current study was to examine whether adolescents with a parent working abroad differed in physical health compared to adolescents whose parents both live with them in the Philippines. Confirming the main hypothesis, adolescents with a parent abroad reported poorer physical health compared to adolescents with both parents living with them at home. After controlling for age the difference was still significant. A major explanation for the current finding lies within the Cognitive Stress Theory (Lazarus & Folkman, 1984). Experiences of emotional stress due to parental migration may lead to worse physical health outcomes, if the situation is appraised as such. Closely linked to the stress hypothesis; the higher scores on the Physical Health Questionnaire from adolescents whose parent is absent can be attributed to somatization of psychological difficulties and emotional stress. A well-known Asian worldview is the inseparability of psychological and physical health (Kleinman, 1988). Compared to Caucasians, Asians tend to somatize psychological problems more often (Chun, Moos, & Conkrite, 2007; Ryder, Yang, & Heini, 2002; Wong, Tran, Kim, Van Horn Kerne, & Calfa, 2010).

Although the above interpretation seems highly plausible, care has to be taken in the interpretation of the outcomes. The possibility exists that the causal relation between migratory separation and physical health outcomes is the other way around. Poor physical health of children could be a reason for parents to go abroad rather than a consequence of migration. One participant, being a chronic kidney disease patient, explained that her mother is working overseas so that she is able to afford her daughter's medicines. As wages are much higher in many migrant-receiving countries, health care and healthier foods will become better accessible for OFW's. Moreover, the actual difference in mean scores on the Physical Health Questionnaire and the effect size were quite small.

Further caution is suggested in considering whether experience of emotional stress due to migratory separation really explains the difference in physical health between the two groups, which is the second aim of the study. The hypothesis that both the intensity of missing the absent parent and scores on the migratory separation scale would correlate with physical health outcomes, could not be confirmed.

While the above three arguments lead us to be cautious in interpreting the results, it would also be misleading to assume that no causal relationship between migration of parents and physical health of adolescents exists and on balance, there is good reason to favour this latter interpretation. A strong argument in favour of this can be derived from the fact that adolescents missed their absent parent a lot. This indicated that being separated from a parent due to overseas labour migration is emotionally demanding for adolescents and appraised as such by them. This ceiling effect could even be a reason why no statistically significant correlation was found between these variables. Previous studies have also been in line with this, suggesting similar interpretations of migratory separation (Asis, 2006a; Garcia Dungo, 2007; Parreñas 2002; 2006; Scalabrini Migration Center, 2004). Another strong argument in favour of this interpretation is that emotional loneliness correlated with physical health outcomes and that adolescents with a parent abroad felt significantly more emotionally lonely than the adolescents with both parents at home (see the fifth aim of the study).

Finally, another finding in the current study which could indicate a lack of causal relationship between migration and adolescents' health is the fact that adolescents did not appraise overseas labour migration as particularly positive or negative, the OFW group being slightly more positive. However, it can also be argued that, although being separated from a parent is generally emotionally difficult, adolescents may try to reconcile themselves to the situation that is considered as quite normal in the country. Chun et al. (2007) explained that people with a more collectivistic approach have the tendency to use a secondary control strategy; meaning to modify themselves to a stressful situation. This may be particularly relevant in the Philippines, where *bahala na*<sup>2</sup> is an important value. The feeling of *bahala na* makes a person accept that nothing can be done about the problematic situation, rather, it encourages the person to make the most of it (Pe Pua & Protacio Marcelino, 2000). Thus, the lack of difference in positivity between the groups cannot be regarded as strong evidence against a causal relationship.

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<sup>2</sup> Freely translated from Tagalog to English: 'Leave it up to God' (no literally English translation possible).



The third aim of the study was to examine physical health differences between adolescents with a mother working abroad, with a father abroad, with both parents working overseas and with both parents at home. Only the adolescents whose mother worked overseas reported significantly worse health outcomes compared to the other groups, namely, adolescents whose father is abroad, whose both parents are abroad and with both parents at home. According to Bowlby (1951) – and if we can generalize to contemporary society in the Philippines - the mother in particular is important for providing care and emotional support and essential in mental health. Maternal separation has a severe negative impact on children (Bowlby, 1953). Previous studies from the Philippines in fact provide support for this theory; a mother is very important for providing emotional support (Medina, 2001) and her absence could be emotionally stressful for left-behind adolescents (Asis, 2006a; University of the Philippines et al., 2002). Maternal migration separation leads more often to various problems (Parreñas, 2006); difficulties are more severe and families have to go through more adjustments than when a father migrates (Parreñas, 2006; Scalabrini Migration Center, 2004). However, this finding does only partly confirm the hypothesis. Remarkably, the physical health of adolescents whose both parents are absent did not differ from what the adolescents with their father working abroad and the group with both parents at home scored on physical health. It was expected that the absence of both parents would be equally stressful to maternal absence and therefore show a similar difference in health compared to the two other groups. However, better social support may have been provided for the left-behind adolescents than when only a mother is abroad. Care giving is not always taken up by fathers (Scalabrini Migration Center, 2004), while regularly grandmothers or aunts take care of children when both parents migrate. However, although this claim seems reasonable, it needs further empirical investigation.

Fourth, it was explored whether the categorical variable socioeconomic status moderated the relationship between overseas migration of a parent and health outcomes. The adolescents from the private school (high SES) with both parents at home (non-OFW), reported better health than the adolescents with a parent abroad. However, the physical health outcomes were not different compared to the non-OFW adolescents attending a public school (low SES). Both the OFW groups scored significantly

lower on physical health than the non-OFW groups, with no difference between the high and low SES OFW groups. These findings indicate that, unexpectedly, socioeconomic status did not relate to the health outcomes in adolescents. The findings contradict a previous study (University of the Philippines et al., 2002), which showed better health outcomes in children of Overseas Filipino Workers. This can be explained in terms of financial remittances, which could lead to poverty reduction, more nutritious food options and access to better health care (Scalibrini Migration Center, 2004; Songco, 2009; University of the Philippines et al., 2002; Yang, 2004). How could the contradicting findings between the current and previous studies be explained? First, socioeconomic status may relate more to actual bodily outcomes than to scores on the Physical Health Questionnaire if these scores reflect somatization of psychological stress rather than actual biomedical health states. Second, transnational families may not spend their remittances always wisely in terms of health and might buy luxury goods such as cigarettes and soft drinks. In the Philippines, so-called western diseases and problems such as obesity come up, in particular among people from higher income groups (Dahly, Gordon-Larsen, Popkin, Kaufman, & Adair, 2010). Third, the operationalization of socioeconomic status by using school type might have been rather weak. This will be explained further in the limitations and future research section. Lastly, it is likely that improvement in socioeconomic status, due to having an OFW parent, cannot compensate for parental absence. The current finding is in line with Batistella's and Conaco's (1998) statement that parents are so important that financial remittances cannot compensate. Although one must question whether applicable in the same manner for the Philippine migration situation in these days, highly relevant seems Bowlby's (1953) statement that maternal absence causes, more than any economic, nutritional, medical or housing conditions could do, severe problems in children.

Investigation of the fifth aim of the study confirmed the last hypothesis; the secondary appraisal variables emotional loneliness and avoidant coping predicted the final health outcomes for adolescents with a parent working overseas. If these adolescents used cognitive or behavioural avoidant coping styles, they generally scored lower on physical health, which is supported by earlier studies on avoidant coping and health (Kardum & Krapic, 2001; Ruchkin et al., 2000; Stein & Nyamathi, 1999). Almost all

adolescents missed their parent very much (see the second hypothesis). Adolescents with a parent abroad felt significantly more emotional lonely than the adolescents with both parents at home. And, when the adolescents within the OFW group experienced more severe emotional loneliness this had negative implications for their physical health. The findings of Uchida, Kitayama, Mesquita, Reyes, and Morling (2008) underline the relevance of the finding, revealing that Filipinos' perceived emotional support predicted well-being and physical health outcomes. Concluding, it seems particularly important for health outcomes that adolescents are able to cope with the situation well and feel emotionally supported while their parent is absent.

### **Limitations and future research**

The majority of, often qualitative, previous studies among left-behind children focused on either the parental absence – mental health relation (Parreñas, 2006; Scalabrini Migration Center, 2004), or the financial remittances – physical health relation as in the University of the Philippines et al. (2002) study. The current quantitative empirical study examined physical health differences between left-behind adolescent children of OFW parents and adolescents with parents living at home in the Philippines.

Naturally, several limitations arose, not in the least because of the pioneering character of the study. A main challenge in the study was the adjustment of the questionnaire to the adolescents' situation in the rural northern Philippines. Despite qualitative investigation of the topic and pre-testing of the questionnaire, some questions appeared to be inappropriate, such as the two social loneliness items that had a very low inter-item correlation, while this is high for western samples. This might have had to do with cultural interpretations. People in Asian cultures seem to perceive the self more as interdependent with the surrounding context rather than viewing the self in relation to the other, which is a more western individualistic view (Markus & Kitayama, 1991).

The questionnaire was not in the participants' first language, which could have lead to interpretation issues. An example is the interpretation of the answer categories on the Likert scales. In Filipino language there is only one word for 'often' and 'always'. From the pre-test it came forward that

the adolescents understood that the answer possibilities were in ascending order, from never (1) to always (5). Nevertheless, cross-cultural differences in interpretation of scales and questions could still remain which makes comparisons with studies from other countries difficult. Another example is the statement “I decided to stay away from people and be by myself”, from the Behavioural Avoidant Coping-subscale. This situation could be more problematic than in a western situation, because in the Philippines it is perceived as normal to be together often (Medina, 2001). The limitations in the questionnaire, mainly involving cultural issues, suggest further studies to adapt existing scales and to develop questionnaires from Philippine, as well as other cultural perspectives.

The study could only capture a small part of the society in terms of socioeconomic status as Filipinos working overseas and attending high schools are generally not from the poorest families. In the Philippines there are large differences between poor and rich. Among the poorest, socioeconomic differences might predict the largest changes in physical health outcomes. Therefore, changes in socioeconomic status might be of great significance for the health of adolescents from the poorest families in the Philippines. Though, challenges will remain as questions and methods need to be even more adjusted to their situation (e.g. translations into local languages).

Based on the current study’s findings and limitations, in particular a longitudinal study among left-behind adolescents would be of relevance to conduct in future research. Monitoring emotional stress due to the separation from a parent, the financial situation and dependent health variables would give insightful information about changes over time, in particular when data collection starts before departure of a parent. Outcomes should be compared with those whose parents stay at home, to explore whether changes are due to migratory separation and remittances. In the longitudinal study psychological, somatic, health risk behaviour and biomedical health measurements should be included, to improve our understanding of the relations between socioeconomic status, emotional stress and the various health outcomes and for further investigations of cross-cultural health beliefs and conceptualizations. Lastly, if this study would be extended over adolescents whose parents are absent due to other reasons (e.g. death

or divorce of parents), this would give valuable insights in how migratory separation could be embedded theoretically within separation studies and concepts.

### **Implications and concluding remarks**

Implications from the current study are threefold and include applied, theoretical and methodological aspects. In the Philippines, many adolescents will be affected by overseas migration of their parents, now or in the future. Parents' overseas labour migration is often inevitable. Therefore it is of great importance to recognize that this situation does not always lead to better health for left-behind adolescents. Generally, adolescents miss their absent parents very much and the results indicate that experiences of emotional stress and loneliness and poor physical health in their left-behind adolescent children need more attention, in particular when a mother is working abroad. These findings have implications for the field of applied psychology. Providing emotional support, in particular when a mother is abroad, and helping transnational families to cope with the situation seem very important. Theoretically, the study has implications for giving insights in the use of Lazarus' and Folkman's Cognitive Stress Model (1984). It provides practical use of Slavin et al.'s (1991) proposed cultural sensitivity in the interpretation of a potentially stressful situation. The conclusion that the Stress Model is relevant in the interpretation of the emotionally demanding migratory separation in the Philippines is a promising indicator for cross-cultural validation of the model. Methodological implications can be derived from the limitations in particular. These provide some preliminary insights in how questionnaires developed in the West, could have lead to interpretation problems in the Philippine setting. It reveals that qualitative insights in a non-western situation and more research on cultural issues could be important for the development of suitable questionnaires as well as in the interpretation of results.

Concluding, the current study signaled that labour migration and consequently, migratory separation from parents, is not always related to better physical health outcomes for their left-behind adolescent children. The adolescents miss their parents very much and reported worse physical health than their counterparts with both parents at home. Although this study is only at the beginning of research

on migratory separation, the insights provide a better understanding of the ambiguous character of labour migration and the difficulties that it brings for left-behind adolescent children in the Philippines.

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## **Appendices**

## Appendix I

Questionnaire number \_\_\_\_\_

Municipality \_\_\_\_\_

School \_\_\_\_\_

## Survey about your life, family, feelings and health

**This is a survey that contains questions about your life, family, the things you do, your feelings and your health.** First, 2 example questions will be given to show you how to answer the questions. Please do not fill in the 2 example questions:

Example 1 Do you have dogs at home?

1 Yes, one  
3 Yes, 3 or more

2 Yes, two  
4 No

Example 1 For example, you have two dogs at home. You circle the number that gives your answer.

1 Yes, one  
3 Yes, 3 or more

2 Yes, two  
4 No

Example 2 Do you have pets at home?

	No	Yes, one	Yes, two	Yes, 3 or more
Cat	1	2	3	4
Dog	1	2	3	4
Other, (specify)	1	2	3	4

Example 2 For example, you have one dog and two birds at home. You circle the numbers that give your answers and specify the birds.

	No	Yes, one	Yes, two	Yes, 3 or more
Cat	1	2	3	4
Dog	1	2	3	4
Other, (specify)	1	2	3 Bird	4

## Part 1: Personal information

The actual questionnaire starts here. Please answer the questions. Circle the number of your answer just like in the example questions or write down your answer next to the question.

1 How old are you? I am \_\_\_\_\_ years old

2 What is your sex? 1 Male 2 Female

3 In which barangay do you live?  
Please write your answer on the right.  
Barangay \_\_\_\_\_

4 To which ethnic group do you belong?

Illocano	Tagalog	Ibanag	Other, specify... (please write down your answer)
1	2	3	4
1	2	3	4

5 What language do you speak at home most of the time?

	Not at all	Poor	Reasonable	Good	Fluent
Read	1	2	3	4	5
Write	1	2	3	4	5

6 To what extent you can read and write English?

7 Did you go to a different high school before you were going to your current school?  
1 Yes, to a private high school  
2 Yes, to a public high school  
3 No, proceed to question 9

8 What was the most important reason to leave that school?  
1 Did not like it 2 Failure in school  
3 To help at home 4 To help earn for the family  
5 Lack of money 6 To go to a better school  
7 Other (specify) \_\_\_\_\_

9 How much is your daily school allowance?  
\_\_\_\_\_ pesos

## Part 2: Family and living situation

The following questions are about your family and your living situation. Please write down your answer next to the question or circle the number of your answer that fits your situation the best.

1 With how many people you are living in one house? (Yourself not included) \_\_\_\_\_ people

2 With whom are you living in one house? (You can circle more than one answer)

Father	1 Yes	2 No
Mother	1 Yes	2 No
Older sister(s)	1 Yes	2 No
Older brother(s)	1 Yes	2 No
Younger siblings	1 Yes	2 No
Aunt	1 Yes	2 No
Uncle	1 Yes	2 No
Cousin(s)	1 Yes	2 No
grandfather	1 Yes	2 No
grandmother	1 Yes	2 No
Helper	1 Yes	2 No
Other people (specify)		

You only have to fill in this question if (one of) your parents is not living together with you.

3 What is the reason that you are not living with your mother or father?

	Left to live with another person / family	Left my other parent	To work in another place in Philippines	To work overseas (OFW)	Died	Other (specify in the box below)	I don't know
mother	1	2	3	4	5	6	7
father	1	2	3	4	5	6	7

4 Who mostly reared you?

- 1 Father only
- 2 Mother only
- 3 Both father and mother
- 4 Grandmother only
- 5 Grandfather only
- 6 Both grandmother and grandfather
- 7 Aunt only
- 8 Father and (specify) \_\_\_\_\_
- 9 Mother and (specify) \_\_\_\_\_
- 10 Other people (specify)
  - 1. \_\_\_\_\_
  - 2. \_\_\_\_\_

5 How well do you get along with your father?  
How well do you get along with your mother?

	Not at all	A bit	Sometimes good sometimes not	Most of the time	Very well all the time
Father	1	2	3	4	5
Mother	1	2	3	4	5

6 These are some characteristics of parents / guardians in treating their children. Please rate your own father.

Father

	Not at all	Rarely	Some of the time	Most of the time	Always
Supportive	1	2	3	4	5
Strict	1	2	3	4	5
Warm (affection)	1	2	3	4	5

Mother

7 Again, these are some characteristics of parents / guardians in treating their children. Please rate your own mother.

	Not at all	Rarely	Some of the time	Most of the time	Always
Supportive	1	2	3	4	5
Strict	1	2	3	4	5
Warm (affection)	1	2	3	4	5



8 Do you get help from people when you have problems? Please rate the following people or groups on how much help they give you.

	Yes, always	Yes, most of the time	Yes, sometimes	Yes, once	No, never
Father	1	2	3	4	5
Mother	1	2	3	4	5
Siblings	1	2	3	4	5
Church	1	2	3	4	5
Friend	1	2	3	4	5
Boyfriend/ girlfriend	1	2	3	4	5
barkada	1	2	3	4	5
Other, ( specify)...	1	2	3	4	5

9 There are several possible ways in which people can help you. Please circle the ways in which these people or groups help you. You can circle more than one answer for each person or group.

	They help me when I feel sad	Give money	Talk with me	Give me advise on what to do	Talk about something nice to forget the problem	Other, (specify in the box below)
Father	1	2	3	4	5	6
Mother	1	2	3	4	5	6
Siblings	1	2	3	4	5	6
Church	1	2	3	4	5	6
Friend	1	2	3	4	5	6
Boyfriend/ girlfriend	1	2	3	4	5	6
barkada	1	2	3	4	5	6
Other, (specify in box below)	1	2	3	4	5	6

10	In the Philippines there are people that are rich, average or poor. How would you describe your situation?	1 Poor 2 A bit poor 3 Average (Sa linya) 4 A bit rich 5 Rich										
11	How would you describe the house where you live in?	1 Wood 2 Bamboo/nipa/sawali/cogon 3 Semi concrete (wood and stone) 4 Concrete (brick/stone) 5 Other (specify) _____										
12	Does your family own the house where you live in?	1 Yes                      2 No                      3 I don't know										
13	What appliances do you / does your family have? (You can circle more than one answer)	1Landline(telephone) 2Jeep/car 3Motorcycle/tricycle 4Aircon 5Own cellphone        6Dvdplayer/videorecorder 7Gas/electric stove    8TV 9Washing machine    10Refrigerator										
14	In general, what do you think about it that Filipino people are working abroad?	<table border="1"> <tr> <td>Very negative</td> <td>Negative</td> <td>Not good, not bad</td> <td>Positive</td> <td>Very positive</td> </tr> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> </tr> </table>	Very negative	Negative	Not good, not bad	Positive	Very positive	1	2	3	4	5
Very negative	Negative	Not good, not bad	Positive	Very positive								
1	2	3	4	5								

### Part 3: Habits

The following questions are about habits you can have. Please circle the number giving your answer. There are no right or wrong answers. Please note that your answers can't be related to you. You can answer the questions honestly. The answers will be kept private, we don't give any answers to other people.

1	Have you ever tried cigarette smoking, even one or two puffs?	1 Yes                      2 No, proceed to question 5										
2	How old were you when you smoked a cigarette for the first time?	<table border="1"> <tr> <td>9 years or younger</td> <td>10 / 11</td> <td>12 / 13</td> <td>14 / 15</td> <td>16 or older</td> </tr> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> </tr> </table>	9 years or younger	10 / 11	12 / 13	14 / 15	16 or older	1	2	3	4	5
9 years or younger	10 / 11	12 / 13	14 / 15	16 or older								
1	2	3	4	5								

3 During the past 30 days, on how many days did you smoke cigarettes?

0 days	1 or 2 days	3 to 5 days	6 to 9 days	10 to 19 days	20 or more days
1	2	3	4	5	6

4 During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?

\_\_\_\_\_ cigarettes

**The next questions ask about drinking alcohol (beer, wine, liquor such as rum, or gin). This does not include a few sips of wine for religious purposes.**

5 Did you ever had a drink of alcohol, even if it was just one or two sips?

1 Yes      2 No, proceed to question 10

6 How old were you when you had your first drink of alcohol more than a few sips?

9 years or younger	10 or 11	12 or 13	14 or 15	16 or older
1	2	3	4	5

7 During the past 30 days, on how many days did you have at least one drink of alcohol?

0 days	1 or 2 days	3 to 5 days	6 to 9 days	10 to 19 days	20 or more days
1	2	3	4	5	6
1	2	3	4	5	6

8 During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?

9 What is the main reason for you to drink alcohol?

- 1 Forget about problems
- 2 have fun with friends
- 3 it gives me self confidence
- 4 I was forced by friends or family
- 5 Other (specify) \_\_\_\_\_

**The next questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.**

	Not at all	1 to 3 times	4 to 6 times	1 time a day	2 times a day	3 or more times a day
10 During the past 7 days, how many times did you eat fruit?	1	2	3	4	5	6
11 During the past 7 days, how many times did you eat vegetables?	1	2	3	4	5	6
12 During the past 7 days, how many times did you drink a can, bottle, or glass of soda or pop, such as Coke, Pop Cola, or Sprite?	1	2	3	4	5	6

	Not at all	Less than 1 hour	1 hour a day	2 hours a day	3 hours a day	4 or more hours a day
13 On an average school day, how many hours do you watch TV?	1	2	3	4	5	6
14 On an average school day, how many hours do you play video or computer games, use messenger or use a computer for something that is not school work?	1	2	3	4	5	6

## Part 4: Your body and health

The following questions are about your health and how you are feeling physically. Please circle the number giving your answer. There are no right or wrong answers.

In the last few weeks...		Not at all	Rarely	Once in a while	Some of the time	Fairly often	Often	All the time
1	How often have you had difficulty getting to sleep at night?	1	2	3	4	5	6	7
2	How often have you woken up during the night?	1	2	3	4	5	6	7
3	How often have you had nightmares or disturbing dreams?	1	2	3	4	5	6	7
4	How often has your sleep been peaceful and undisturbed?	1	2	3	4	5	6	7
5	How often have you experienced headaches?	1	2	3	4	5	6	7
6	How often did you get a headache when there was a lot of pressure on you to get things done?	1	2	3	4	5	6	7
7	How often did you get a headache when you were frustrated?	1	2	3	4	5	6	7
8	How often have you suffered from an upset stomach (indigestion)?	1	2	3	4	5	6	7
9	How often did you have to watch that you ate carefully to avoid stomach upsets?	1	2	3	4	5	6	7
10	How often did you feel nauseated ("sick to your stomach")?	1	2	3	4	5	6	7
11	How often were you constipated or did you suffer from diarrhea?	1	2	3	4	5	6	7

In the last few weeks...		days						
12	On how many days have you had minor colds (that made you feel uncomfortable but didn't keep you sick in bed or make you miss work/school)?	0	1-2	3	4	5	6	7+
13	On how many days have you had sickness that was more severe than minor colds and "laid you low"? (For example flu)	0	1-2	3	4	5	6	7+
14	If you had a bad cold or flu, how many days did it typically last? Don't answer this question if you hadn't a cold or flu lately.	1	2	3	4	5	6	7+

## Part 5: What you do with problems

The following questions are about what you can do if you have a problem. Think about what you do at times that you have a problem. Please circle the number of your answer. There are no right or wrong answers.

		Never	Almost never	Some of the time	Often	Always
1	I asked someone in my family for help.	1	2	3	4	5
2	I got advice from someone about what I should do.	1	2	3	4	5
3	I shared my feelings about it with another person.	1	2	3	4	5
4	I kept my feelings to myself.	1	2	3	4	5
5	I thought about the problem and tried to figure out what I could do about it.	1	2	3	4	5
6	I took a chance and tried a new way to solve the problem	1	2	3	4	5
7	I made a plan to solve the problem and then followed that.	1	2	3	4	5
8	I went over in my head some of the things I could do about the problem.	1	2	3	4	5
9	I thought about the problem in a new way so that it did not upset me as much.	1	2	3	4	5

		Never	Almost	Some of the time	Often	Always
10	I learned a new way of dealing with the problem.	1	2	3	4	5
11	I tried to figure out how I felt about the problem.	1	2	3	4	5
12	I figured out what had to be done and then I did it.	1	2	3	4	5
13	I tried not to think about the problem.	1	2	3	4	5
14	I went on with things as nothing was wrong.	1	2	3	4	5
15	I pretended the problem was not very important to me.	1	2	3	4	5
16	I knew I had lots of feelings about the problem, but I just did not pay attention to them.	1	2	3	4	5
17	I tried to get away from the problem for a while by doing other things.	1	2	3	4	5
18	I pretended the problem had nothing to do with me.	1	2	3	4	5
19	I tried to pretend that the problem did not happen.	1	2	3	4	5
20	I hoped that things would somehow work out so I did not do anything.	1	2	3	4	5
21	I tried to pretend that my problem was not real.	1	2	3	4	5
22	I realized there was nothing I could do. I just waited for it to be over.	1	2	3	4	5
23	I put the problem out of my mind.	1	2	3	4	5
24	I stayed away from things that reminded me the problem.	1	2	3	4	5
25	I tried not to feel anything inside me. I wanted to feel numb.	1	2	3	4	5
26	I went to sleep so I would not have to think about it.	1	2	3	4	5
27	When I was upset about the problem, I was mean to someone even though they did not deserve it.	1	2	3	4	5
28	I tried not to be with anyone who reminded me of the problem.	1	2	3	4	5
29	I decided to stay away from people and be by myself.	1	2	3	4	5

## Part 6: Feelings and social relationships

These questions refer to your feelings about the quality of your social relationships. Indicate how often you have felt the way that has been described in each of the following statements during the past year.

		Never	Rarely	Some of the time	Often	Very often
1	I feel lonely even when I am with other people.	1	2	3	4	5
2	I have friends and acquaintances with whom I like to be together.	1	2	3	4	5
3	I have a really nice set of friends.	1	2	3	4	5
4	I often feel lonely.	1	2	3	4	5

## Part 7: Parents who are working abroad (OFW)

These questions are about family and parents who are working abroad. Please circle the number that gives your answer or fill in your answer next to the question.

1	Is one of your parents working abroad (in another country / OFW)?	1 Yes, my mother 2 Yes, my father 3 Yes, my father and my mother 4 No
2	Are there any other family members working abroad? Please specify in the box.  <b>If at least one of year parents is working abroad, please proceed with the next question. If not, please proceed to part 8.</b>	<div style="border: 1px solid black; height: 60px; width: 100%;"></div>
3	For how many years has your parent been away / abroad already for this job?	_____ years
4	For all jobs together, how many years your parent has worked abroad?	_____ years
5	How old were you when your parent went to work abroad?	_____ years old



6	In which place is your parent working?	1 Hongkong 2 Middle East (Oman, Dubai, Kuwait) 3 Europe 4 China / Taiwan 5 US / Canada 6 Japan 7 Singapore / Malaysia 8 Different places, as a seafarer 9 Other (specify) _____ 10 I don't know										
7	How often did your parent visit you in the Philippines since he / she is working abroad?	1 Once 2 Every two years 3 Every year 4 Every six months 5 Not at all 6 Other (specify) _____										
8	Did your parent give or send money to you and your family?	<table border="1" data-bbox="837 929 1380 1086"> <thead> <tr> <th data-bbox="837 929 949 1086">Yes, a lot</th> <th data-bbox="949 929 1077 1086">Yes, quite a lot</th> <th data-bbox="1077 929 1197 1086">Yes, a bit</th> <th data-bbox="1197 929 1276 1086">No</th> <th data-bbox="1276 929 1380 1086">I don't know</th> </tr> </thead> <tbody> <tr> <td data-bbox="837 1086 949 1153">1</td> <td data-bbox="949 1086 1077 1153">2</td> <td data-bbox="1077 1086 1197 1153">3</td> <td data-bbox="1197 1086 1276 1153">4</td> <td data-bbox="1276 1086 1380 1153">5</td> </tr> </tbody> </table>	Yes, a lot	Yes, quite a lot	Yes, a bit	No	I don't know	1	2	3	4	5
Yes, a lot	Yes, quite a lot	Yes, a bit	No	I don't know								
1	2	3	4	5								
9	Can you buy more since your parent is working in another country?	<table border="1" data-bbox="837 1153 1380 1243"> <tbody> <tr> <td data-bbox="837 1153 949 1243">1</td> <td data-bbox="949 1153 1077 1243">2</td> <td data-bbox="1077 1153 1197 1243">3</td> <td data-bbox="1197 1153 1276 1243">4</td> <td data-bbox="1276 1153 1380 1243">5</td> </tr> </tbody> </table>	1	2	3	4	5					
1	2	3	4	5								
10	How do you and your family spend this money? (You can circle more than one answer)	1 hospital visit                      2 health center visit 3 insurance                              4 food 5 alcoholic drinks                      6 cigarettes 7 Fiesta                                      8 school fees 9 electrical appliances 10 bills 11 I don't know 12 Other (specify) _____										
11	Do you miss your parent who is working abroad?	1 Yes, a lot 2 Yes, quite a lot 3 Yes, a bit 4 Yes, a little bit 5 No, not at all										

		Never	Once a year	2 to 6 times a year	Once or twice a month	Every week	Several times a week	Every day
12	How often do you call with your parent who is working abroad?	1	2	3	4	5	6	7
13	How often do you text with your parent who is overseas?	1	2	3	4	5	6	7
14	How often do you email with your parent who is overseas?	1	2	3	4	5	6	7
15	How often do you have contact with your parent who is working overseas?	1	2	3	4	5	6	7

**The following questions are about your feelings when you think about your parent who is working abroad. There are no right or wrong answers. Please circle the number giving your answer.**

		Not at all	Almost never	Regularly	Often	Always
1	I cannot help thinking about my parent who is working in another country.	1	2	3	4	5
2	I hardly ever think about my parent who is working abroad.	1	2	3	4	5
3	I get upset when I think about my parent who is working overseas.	1	2	3	4	5
4	I write, text, email or call my parent who is not here as often as I can.	1	2	3	4	5
5	It upsets me if I am unable to contact my parent who is working in another country .	1	2	3	4	5
6	I dream about my parent who is not here.	1	2	3	4	5
7	I feel restless without my parent here who is working overseas.	1	2	3	4	5
8	I settled well without my parent(s).	1	2	3	4	5
9	I hate that my parent is working overseas.	1	2	3	4	5
10	I am happy that my parent is working abroad.	1	2	3	4	5

		Not at all	Almost never	Regularly	Often	Always
11	I wish my parent never went there.	1	2	3	4	5
12	I try to make home the same as my parent always did.	1	2	3	4	5
13	I have pictures of my parent who is working overseas with me/in my room.	1	2	3	4	5
14	I am drawn towards people who also have a parent who is working in another place.	1	2	3	4	5
15	If my parent who works abroad ever comes back home I do not want him or her to go again.	1	2	3	4	5
16	If my parent who works abroad comes home I want him or her to leave again soon.	1	2	3	4	5

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## Part 8: Weight and height

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Please fill in your height and weight after the measurement.

1	Weight	_____ kilograms
2	Height	_____ centimeters

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## Part 9: Comments

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This is the end of the questionnaire. Thank you very much for your participation! If you have comments, you can write these in the box below and on the back of this questionnaire.

## Appendix II

Dear participant,

This is a list of questions that I would like to ask you. The questions are about your family, the things you do, your feelings, friends and your health.

Your answers will be used for my thesis. I am a student from ISU Cabagan in Psychology.

I would like to ask you to fill in this list. It will take you about 30 to 40 minutes. There are no right or wrong answers; I am interested in your opinion and your situation.

Don't fill in your name on this list of questions. Your answers will be kept private and no one will know what you write. Only the researcher and research assistant have this information. The answers that you will give won't be given to other people.

It is up to you to decide whether or not you want to help me with my thesis. Your grade in this class does not depend on the completion of these questions. I know that some of the questions are personal. Still I hope that you would like to fill in the complete list of questions.

Thank you very much for participating in the study!

Chantal Smeekens & Maricel Angolluan

