

Cultural Intelligence and Psychological Well-being of Indigenous Populations during Acculturation: A Comprehensive Review

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Abstract

Indigenous communities face marginalization and cultural challenges due to globalization, disrupting traditional lifestyles. Efforts to integrate Indigenous and non-Indigenous populations often fail due to systemic inequalities and a lack of culturally sensitive approaches. While research on acculturation exists, comprehensive reviews remain scarce, limiting understanding of its broader effects on well-being. This review highlights Indigenous self-determination in fostering resilience and identity preservation. Cultural intelligence (CQ) supports adaptation and reduces acculturative stress, which arises from colonization, discrimination, and cultural barriers, contributing to mental health struggles. Cultural continuity, through traditional practices, language retention, and spiritual customs, serves as a protective factor. The review also examines identity conflicts and socio-economic influences such as economic disparities, education, and healthcare access. It calls for culturally responsive interventions and community-driven solutions. Strategies like land-based healing programs, support networks, and Indigenous-centered mental health services can enhance well-being and resilience.

INTRODUCTION

Indigenous populations, also known as Tribal, Aboriginal, Adivasi, Native populations, or Scheduled Tribes, have distinct cultural identities shaped by their historical and social experiences. These communities comprise over 476 million people across 90 countries, making up approximately 6.2% of the global population and representing more than 5,000 unique cultural groups. In India, Indigenous groups are recognized as socially disadvantaged communities by the government (The NITI Aayog, 9th Plan, Chapter 14). Due to their diversity, creating a single definition for Indigenous peoples is complex; however, the United Nations (2017) describes them as the original inhabitants of a region before the arrival of external ethnic groups. Considering their unique socio-cultural identity, during the process of acculturation they experience cultural

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change involving psychological changes, among them is Acculturative stress.

Acculturative stress is crucial for the mental well-being of Indigenous communities, as adapting to cultural changes can lead to identity struggles, psychological stress, and social exclusion. Protective factors such as cultural intelligence (CQ), resilience, and strong community support help individuals navigate these transitions while maintaining their cultural heritage. As globalization continues to reshape cultural landscapes, finding a balance between cultural preservation and integration is key to sustaining mental health.

This Review Examines

- The challenges indigenous individuals with cultural intelligence face in coping with acculturative stress.
- The ways in which Indigenous communities sustain psychological well-being during acculturation.

This review focuses on resilience strategies, identity formation, and coping mechanisms, emphasizing the importance of culturally relevant interventions that address acculturative stress and promote overall well-being.

Theoretical Background of Cultural Intelligence and Acculturative Stress

Cultural intelligence (CQ) is an individual's ability to function effectively in culturally diverse settings, enabling them to navigate, understand, and adapt to different cultural environments (Ang *et al.*, 2007). On the other hand, acculturative stress (AS) refers to the psychological strain individuals experience when adjusting to a new or dominant cultural environment, often resulting in anxiety, identity confusion, and emotional distress (Berry, 1997). While these concepts have been extensively examined in studies focusing on expatriates, immigrants, and minority groups (Vines *et al.*, 2017), their specific interaction within Indigenous populations remains significantly underexplored. Indigenous communities face unique challenges due to involuntary acculturation, which often arises from historical colonization, globalization, and forced integration into dominant societal structures.

Acculturative stress occurs when individuals struggle to assimilate, integrate, or resist dominant cultural norms, leading to negative psychological outcomes (Berry, 1997). Research indicates that forced acculturation is a significant source of mental health concerns, contributing to increased rates of depression, anxiety, and identity crises among Indigenous communities (Wolsko *et al.*, 2007). Mukherjee and Awasthi (2022) further highlight that as traditional cultural support systems deteriorate, Indigenous individuals experience heightened psychological distress, making adaptation even more challenging. However, some researchers propose that high CQ may mitigate the negative impact of AS, as individuals with strong cognitive and motivational CQ may be more proficient at interpreting and managing cultural conflicts (Ang *et al.*, 2007). However, the direct empirical testing of CQ as a resilience factor against AS in Indigenous populations remains limited, calling for further research on this potential moderating relationship.

The interaction between CQ and AS in Indigenous communities presents both theoretical and empirical uncertainties. Ideally, individuals with high CQ should experience lower AS, as their adaptability enables them to integrate effectively into new cultural settings (Van Dyne *et al.*, 2010). However, studies that specifically assess how CQ influences AS in Indigenous populations are lacking. For instance, research on the Yup'ik Indigenous community demonstrated that individuals who maintained a strong cultural identity (high cognitive CQ) reported lower levels of AS (Wolsko *et al.*, 2007). However, this study failed to explore the motivational and behavioral aspects of CQ, leaving questions about how different dimensions of CQ function in Indigenous psychological adaptation. Another critical issue is the bidirectional nature of CQ and AS, which remains unclear. It is uncertain whether high CQ leads to lower AS or if persistent AS hinders the development of CQ, thereby affecting Indigenous individuals' ability to navigate cultural changes effectively. Addressing these gaps requires longitudinal and mixed-method studies that examine the long-term effects of CQ on AS and vice versa in Indigenous populations.

Despite increasing interest in cultural adaptation and psychological resilience, significant gaps

exist in the research. Firstly, Indigenous-specific CQ studies remain scarce, as most research focuses on expatriates and international students (Earley & Ang, 2003; Van Dyne *et al.*, 2010), overlooking the unique historical and socio-cultural realities of Indigenous communities. Secondly, existing acculturative stress studies lack intersectionality, primarily focusing on migrant and ethnic minority experiences rather than acknowledging the compounded effects of colonial trauma, discrimination, and cultural dissonance in Indigenous groups (Walters, 2011; Gone, 2019). Additionally, current psychological interventions to address AS are heavily Western-centric, relying on models that often fail to incorporate Indigenous worldviews and epistemologies (Derks *et al.*, 2015). Lastly, the moderating role of CQ on AS remains largely unexplored, as no substantial empirical research has established whether CQ effectively reduces AS in Indigenous contexts (Mukherjee & Awasthi, 2022).

Furthermore, Kuo (2014) examines how coping strategies shape acculturative experiences among migrants, offering insights relevant to Indigenous populations. Various adaptation models highlight how Indigenous individuals manage acculturative stress, though coping strategies differ across cultural groups (Kuo, 2014). Studies on Korean immigrant adolescents, for example, reveal that engaging in meaningful activities, seeking social support, and fostering positive emotions are effective coping mechanisms (Thomas & Baek, 2006; Kim *et al.*, 2012). These findings suggest that promoting culturally relevant coping approaches could help Indigenous individuals navigate acculturative stress. Cultural intelligence (CQ), the ability to adapt to diverse cultural settings, is particularly relevant in this context (Van der *et al.*, 2018; Templer *et al.*, 2006). Further, enhancing CQ may provide Indigenous individuals with valuable tools to manage acculturation challenges effectively (Horst *et al.*, 2018; Templer *et al.*, 2006). Specifically, Templer *et al.* (2006) highlight the positive correlation between motivational CQ and successful cross-cultural adaptation, suggesting that fostering motivational CQ could be an effective strategy for mitigating acculturative stress.

Conceptual Understanding of Psychological Well-being and Acculturative Stress of Aboriginal Population

Socio-cultural contexts influence the health effects of acculturation. Fox *et al.* (2017) emphasize that factors such as neighborhood composition, discrimination, and discrepancies between heritage and host cultures significantly shape acculturative stress experiences. Higher levels of discrimination exacerbate stress, while cultural mismatches can complicate adaptation (Fox *et al.*, 2017). This highlights the need to consider socio-cultural contexts when studying acculturation and its health implications for Indigenous populations.

Acculturative stress among Indigenous populations arises from cultural displacement, loss of traditional customs, and systemic marginalization (Berry, 1997). This type of stress often leads to significant psychological distress, including heightened anxiety, depression, identity confusion, and social isolation (Kirmayer *et al.*, 2000). Research indicates that Indigenous individuals who experience higher levels of acculturative stress are more susceptible to mental health issues. For example, a study conducted by Wolsko *et al.* (2007) found a strong association between acculturative stress and increased substance use and mental health disorders in Indigenous communities in Alaska. Similarly, Mukherjee and Awasthi (2022) highlight that involuntary cultural transitions contribute to higher rates of depression and anxiety, exacerbated by the erosion of traditional support networks.

Despite these challenges, several protective factors can help mitigate the impact of acculturative stress and support the psychological well-being of Indigenous populations. Research suggests that maintaining a strong cultural identity, along with a sense of belonging within one's community, acts as a buffer against acculturative stress (Stonefish & Kwantes, 2017). Engaging in cultural traditions, speaking Indigenous languages, and practicing spiritual customs are linked to lower levels of psychological distress and better overall well-being (Kirmayer *et al.*, 2011). Additionally, social support

systems, including family, elders, and Indigenous community networks, play a vital role in alleviating the psychological burden associated with acculturation (Romero *et al.*, 2020). However, the relationship between cultural adaptation strategies and mental health outcomes remains complex. Some studies suggest that integration—where Indigenous individuals combine their traditional cultural values with aspects of the dominant culture—leads to better mental health outcomes, while others argue that maintaining a strong cultural identity without assimilation is more beneficial for psychological well-being (Berry, 1997). These differing perspectives highlight the need for further research to determine which acculturation strategies are most effective in reducing acculturative stress among Indigenous populations.

Although research acknowledges the negative effects of acculturative stress on Indigenous mental health, several significant gaps persist in psychological studies. First, most research on acculturative stress has been conducted on migrant and ethnic minority groups, with limited focus on Indigenous populations, who have distinct historical and socio-cultural experiences shaped by colonization and forced assimilation (Gone *et al.*, 2019). Second, most studies examining acculturative stresses in Indigenous groups are cross-sectional, meaning they capture only a single point in time. This approach fails to account for the long-term psychological impact of acculturation and how coping mechanisms evolve over time (Mukherjee & Awasthi, 2022). Third, while scholars recognize integration, assimilation, separation, and marginalization as acculturation strategies (Berry, 1997), there is a lack of research evaluating which of these strategies is most effective for promoting Indigenous mental health across various cultural settings. Additionally, much of the existing research on Indigenous mental health tends to take a deficit-based approach, focusing primarily on pathology and distress rather than on resilience and cultural strengths. This approach neglects the importance of Indigenous worldviews, traditional healing practices, and the community-driven strategies that have long supported Indigenous well-being (Dudgeon & Walker, 2015). Finally, many psychological interventions designed

to address acculturative stress remain rooted in Western models, which may not align with Indigenous knowledge systems or healing practices (Usher *et al.*, 2021). There is a growing need for culturally relevant interventions that integrate Indigenous knowledge, spiritual traditions, and community-led healing approaches to provide effective support for Indigenous individuals navigating acculturative stress (Romero *et al.*, 2020).

Further, acculturation presents significant psychological challenges for Indigenous communities, largely due to historical and ongoing marginalization. Research shows a strong link between acculturative stress and poor mental health, with severity influenced by historical context and cultural interactions. The Yup'ik people of the Yukon-Kuskokwim Delta, for example, experienced increased stress and reduced well-being when adapting to Westernized lifestyles (Wolsko *et al.*, 2007). Similarly, disparities in mental health among the Māori in New Zealand emphasize the need for culturally tailored interventions (Muriwai *et al.*, 2015). In North America, Indigenous populations endure cumulative distress from systemic discrimination, economic instability, and historical trauma (Walls & Whitbeck, 2011), highlighting the need for culturally informed mental health care.

Cultural Identity and Resilience

Engaging in cultural traditions, spiritual practices, and Indigenous languages enhances psychological resilience and overall well-being (Wexler, 2009; Muriwai *et al.*, 2015). Sustaining cultural continuity fosters identity and belonging, helping mitigate stress (Auger, 2016; Wolsko *et al.*, 2007). Among the Māori, cultural self-efficacy is linked to lower psychological distress (Muriwai *et al.*, 2015). Indigenous youth who actively engage with their cultural heritage show greater resilience and mental well-being (Wexler, 2009), reinforcing the need for culturally relevant mental health strategies.

Despite challenges, Indigenous communities demonstrate resilience and survivance—active resistance against cultural erasure (Hartmann *et al.*, 2019; Kirmayer *et al.*, 2014). Resilience must be understood within historical and cultural contexts, incorporating traditional knowledge and commu-

nity networks. Survivance, or the continued practice of cultural traditions, strengthens indigenous identity and mental health (Hartmann *et al.*, 2019). Studies on Indigenous Australian children highlight their ability to thrive despite adversity, emphasizing resilience as a community-driven process (Twizeyemariya *et al.*, 2017).

Systemic discrimination remains a critical concern for Indigenous mental health. Racism contributes to social and emotional distress, cultural disconnection, and health disparities (Thurber *et al.*, 2021). It continues to impact Indigenous populations globally, including the Aboriginal and Torres Strait Islander peoples in Australia and the Māori in New Zealand (Houkamau *et al.*, 2017). Systemic inequalities exacerbate mental health disparities by reinforcing marginalization (Paradies & Cunningham, 2012). Addressing these issues requires structural changes alongside individual mental health support.

Economic disparities and limited healthcare access further challenge Indigenous mental health. Financial instability and inadequate healthcare resources contribute to poor outcomes, especially among Indigenous youth (Twizeyemariya *et al.*, 2017; Williams *et al.*, 2018). Colonization and forced displacement have increased childhood adversity, raising the risk of mental illness (Twizeyemariya *et al.*, 2017). Community-based interventions that integrate Indigenous perspectives are essential for reducing these disparities (Stewart, 2008; McCubbin *et al.*, 2013; Gone *et al.*, 2019).

To improve mental health outcomes, interventions must be culturally adapted (Muriwai *et al.*, 2015; Stewart, 2008). Programs like the Strengthening Families Program successfully integrate cultural traditions into mental health support for Indigenous youth (Ivanich *et al.*, 2020). Land-based healing, traditional medicine, and community-led programs further strengthen cultural identity and well-being (Wendt *et al.*, 2022; Walsh *et al.*, 2020). Prioritizing Indigenous knowledge and self-determination fosters empowerment and improved mental health outcomes.

Community engagement is crucial for effective mental health interventions (Rivkin *et al.*, 2013; Wendt *et al.*, 2022). Indigenous-led programs that integrate traditional practices have successfully

addressed mental health disparities (Rivkin *et al.*, 2013; Braun *et al.*, 2014). Initiatives such as traditional music and art programs enhance cultural revitalization and mental well-being among Indigenous youth (Good *et al.*, 2021). Participatory research that centers on indigenous voices ensures interventions are sustainable and aligned with community needs (Braun *et al.*, 2014).

Acculturation strategies significantly influence psychological outcomes. Berry's framework, which includes integration, assimilation, separation, and marginalization, helps explain Indigenous adaptation (Phillimore, 2011). Integration—retaining cultural identity while engaging with broader society—is linked to better mental health (Morawa & Erim, 2014). In contrast, marginalization, where individuals feel disconnected from both cultures, is associated with increased distress (Morawa & Erim, 2014). Factors such as age, gender, and community support influence the acculturation strategies Indigenous individuals adopt (Kvernmo & Heyerdahl, 2004).

Limitations and Way forwards for Future Research

This paper aims to synthesize existing research on cultural intelligence, acculturative stress, and psychological well-being within Aboriginal populations. It is important to interpret the findings considering certain limitations in current studies. A key challenge is the dominance of cross-sectional research, which hinders the ability to track changes in acculturative stress and coping strategies over different life stages (Mukherjee & Awasthi, 2022). Conducting longitudinal studies is essential to understanding the evolving nature of adaptation and the long-term consequences of cultural shifts. Additionally, much of the research relies on Berry's acculturation model, which, although widely applied, does not fully encompass alternative frameworks, such as the coexistence model observed in India (Mishra *et al.*, 1996). There is a pressing need for integrative theoretical models that incorporate cultural intelligence, resilience, and systemic discrimination (Van der *et al.*, 2018).

Moreover, studies in this field have been largely concentrated on Indigenous populations in Western nations, particularly in Canada, the USA, Australia,

and New Zealand (Wilk *et al.*, 2017). This focus has created a significant knowledge gap regarding the acculturative experiences of Indigenous communities in regions such as Asia, Africa, and Latin America (Mukherjee & Awasthi, 2022). Furthermore, most research examines individual-level stressors, including identity struggles and psychological distress, without adequately considering structural influences like government policies, legal discrimination, and socio-economic marginalization, which amplify acculturative stress (Subica & Link, 2022). Indigenous knowledge systems and traditional healing practices remain underrepresented in intervention strategies, as many approaches remain Western-centric. This oversight neglects the resilience embedded in community traditions, land-based healing, and spiritual practices (Good *et al.*, 2021). Another limitation is the insufficient application of intersectionality; data are rarely disaggregated based on factors such as gender, socio-economic status, or disability. Indigenous women and youth encounter distinct acculturative stressors and require targeted research to inform tailored interventions that address their unique needs (Mukherjee & Awasthi, 2022).

To bridge these gaps, future studies should prioritize longitudinal research to track indigenous populations over time and examine how acculturative stress evolves across different life stages. Understanding the role of cultural intelligence (CQ) in acculturation is also crucial, as it can facilitate adaptation while simultaneously contributing to identity conflicts and psychological distress (Sharma & Hussain, 2019). Research should extend beyond Western countries to examine Indigenous communities in developing regions such as India, Brazil, and Kenya, where globalization and urbanization are significantly transforming traditional lifestyles (Usher *et al.*, 2021). Additionally, more investigations should explore the influence of structural and policy-level measures, such as legal rights, land restoration, and equitable healthcare access, in alleviating mental health challenges among Indigenous populations (Subica & Link, 2022).

Future interventions should integrate both Indigenous and Western healing practices, combining traditional methods such as sweat lodges, storytelling, and land-based therapies with contemporary

psychological treatments (Mohatt *et al.*, 2011). Given the heightened vulnerability of Indigenous women and youth to acculturative stress, research should emphasize gender-specific coping mechanisms and youth-led cultural initiatives (Brown *et al.*, 2021). Lastly, adopting community-based participatory research (CBPR) methodologies will ensure that Indigenous populations are actively engaged in the research process, intervention planning, and policy-making, fostering culturally appropriate and ethical outcomes (Power *et al.*, 2020). Addressing these research gaps will lead to a more comprehensive understanding of Indigenous mental health during acculturation and contribute to the development of effective, culturally responsive interventions.

CONCLUSION

Acculturation poses complex challenges for Indigenous communities, primarily due to historical trauma, systemic discrimination, and entrenched inequalities. Although cultural intelligence (CQ) can facilitate cross-cultural interactions, the enduring effects of colonization continue to generate substantial stressors for Indigenous populations (Usher *et al.*, 2021). Preserving cultural continuity, fostering resilience through culturally relevant coping strategies, and reinforcing strong cultural identities are vital in reducing acculturative stress and enhancing well-being (Auger, 2016; Usher *et al.*, 2021).

Cultural intelligence (CQ) is instrumental in cross-cultural adaptation; however, it can also exacerbate identity conflicts and psychological distress in some individuals (Sharma & Hussain, 2019). Indigenous individuals with bicultural identities are particularly susceptible to heightened acculturative stress, especially in contexts marked by systemic discrimination, as they attempt to balance conflicting cultural expectations and experiences (Schwartz *et al.*, 2010; Romero *et al.*, 2020). Moreover, structural inequities further intensify acculturative stress, often undermining the protective benefits of high CQ and diminishing its role as a buffer against psychological distress (Siddiqui, 2022). Research indicates that integrationist acculturation strategies, which encourage cultural adaptation while preserving heritage identity, are linked to enhanced psychological

well-being, whereas marginalization—where individuals feel detached from both their original and host cultures—contributes to greater distress and adverse mental health outcomes (Choy *et al.*, 2021).

A strong sense of cultural identity and social cohesion serves as a protective mechanism against acculturative stress, which, if unaddressed, can lead to severe psychological repercussions (Paradies & Cunningham, 2012). Additionally, acculturative stress has been associated with an increased risk of PTSD, depression, and anxiety, particularly among trauma-exposed Indigenous populations, highlighting its significance as a mental health concern (Lee *et al.*, 2009). Furthermore, socio-economic stability and equitable access to healthcare are critical in mitigating psychological distress during acculturation, as they equip individuals with the necessary resources and support to navigate cultural transitions effectively (Balidemaj & Small, 2019). Culturally inclusive policies and interventions have demonstrated substantial improvements in mental health outcomes for Indigenous communities, reinforcing the necessity of culturally sensitive approaches in healthcare and social services (Eliassen, 2013).

Existing literature underlines the intricate relationship between acculturation and psychological well-being, illustrating how the adverse effects of cultural stress can be mitigated by strong cultural identity, community support, and culturally responsive interventions (Sonn & Fisher, 1998). Culturally sensitive interventions that leverage Indigenous strengths and promote self-determined solutions are fundamental to achieving health equity (Power *et al.*, 2020; Mohatt *et al.*, 2011; Good *et al.*, 2021).

Future research should explore the nuanced interconnections between cultural intelligence, acculturative stress, and health outcomes among diverse Indigenous groups. This necessitates a commitment to culturally sensitive research methodologies, community-based participatory research, and the creation of culturally validated assessment tools (Mohatt *et al.*, 2011). Attaining equitable mental health outcomes requires a fundamental shift in power dynamics, recognizing the expertise and autonomy of Indigenous communities in shaping their own futures and well-being. By fostering a collaborative and culturally responsive approach,

Indigenous populations can be better supported in navigating acculturation while safeguarding their cultural heritage and psychological resilience.

Research on Indigenous mental health must incorporate culturally appropriate assessment tools (Dingwall & Cairney, 2010) and qualitative methodologies reflecting Indigenous knowledge systems (Braun *et al.*, 2014). Given the diversity of Indigenous communities, targeted studies on distinct acculturation experiences are essential (Gone *et al.*, 2019). Research prioritizing Indigenous leadership and expertise will support ethical, effective, and culturally competent mental health interventions (Rivkin *et al.*, 2013).

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