Interdependent and Relational Tendencies among Asian Clients: Infusing Collectivistic Strategies into Counselling

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Individuals of Asian descent (including East Asians and South Asians) constitute one of the fastest growing segments of Canadian society, with the 2001 Canadian census reporting an increase of 27 percent since the 1996 census (Statistics Canada, 2001, 1996). In 2000, Asians represented nearly 10 percent of the total Canadian population. Thus it is not surprising that the demand for culturally responsive mental health services for Asians has increased. However, for many Asians, counselling and professional psychological services remain foreign concepts and are sought only as a last resort in dealing with emotional and interpersonal problems. Underutilization of mental health services among ethnic minorities, including Asians, persists despite heightened efforts to ensure greater cultural sensitivity and competency in counselling and other psychologicical interventions with these groups (Akutsu, 1997; Sue & Sue, 2003). These concerns point to the enduring scepticism of many Asians regarding the efficacy of many psychological services.

One particular dimension that has been identified as critical in understanding the service gap is the strong collectivism associated with Asians beliefs and the deeply entrenched individualistic assumptions related to the practice and the practitioners of mental health services in North America. The conflict between collectivism and individualism has frequently been noted in the multicultural counselling literature; however, discussion of the issue has included only limited, tangible suggestions for counselling practitioners. In a recent commentary, Williams (2003) highlighted the disconnectedness between our knowledge of collectivism-individualism worldviews and our understanding of how these worldviews are reflected in counselling

and psychotherapy processes. To bridge the gap, counselling professionals need practical recommendations to help them negotiate between their training in predominantly individual-centred models of the helping relationship and the needs of their clients who operate within a collectivistic framework.

In this article, I use the case of Asians to highlight the collectivistic elements inherent in Asian help-seeking patterns, problem-solving styles, and stress-coping responses. I then offer recommendations for specific counselling strategies that complement Asians' collectivistic orientation. It should be noted that although generalized observations are made about Asians for heuristic purposes, these generalizations must be considered in the context of diverse countries of origin, ethnic identity, acculturation levels, generation statuses, and migration statuses among individuals belonging to different Asian subgroups.

ISSUES

Conflicting cultural values between North American counselling and mental health practitioners and culturally diverse clients have been cited as one of the primary barriers impeding ethnic minority's access to professional psychological help (Kim, Atkinson, & Umemoto, 2001; Tata & Leong, 1994). Traditional psychological interventions are premised on the individualism characteristics of western counselling and psychotherapy (Katz, 1985; Sue & Sue, 2003). Individual clients are seen as fundamentally autonomous at the core; clients are believed to be fundamentally able to change their circumstances. These individualistic values internalized by counselling and mental health professionals, however, contradict traditional Asian collectivistic and relational views on health, wellbeing, help-seeking patterns, and coping approaches.

Reflecting this discrepancy, recent studies continue to find that Asian university students in North America resist seeking professional counselling when problems arise (Yeh, Inose, Kobori, & Chang, 2001). Many of these students see the available western-style counselling as conflicting with their group-oriented and interpersonally based problem-solving and coping strategies (Akutsu, 1997; Yeh & Wang, 2000). The resultant effects include underutilization of mental health services, premature termination of counselling, poorer short-term treatment outcomes, and lower satisfaction with therapists among Asian Americans. I submit that one remedy to the overly individualistic-focused nature of traditional counselling and psychological services is to infuse collectivism into counselling training and practice when working with relationally oriented and interdependent clients.

COLLECTIVISM AND INTERDEPENDENT SELF-CONSTRUAL

The psychologies of Easterners and Westerners have been explained in terms of the divergence between the collectivistic and interdependent orientation of the former and the individualistic and independent tendency of the latter (Heine, 2001). The growing body of cross-cultural research on worldviews and self-construals has shed light on cultural differences in behaviours, perceptions, and experiences between and within groups. Collectivism is defined as a worldview established on the belief that the need and welfare of the social group to which a person belongs take precedence over that of the individual. According to Triandis (2001), collectivists are "interdependent within their in-groups (family, tribe, nation, etc.), give priority to the goals of their in-groups, shape their behaviours primarily on the basis of in-group norms, and behave in a communal way." (p. 909).

At the individual and psychological level, collectivism is connected to the concept of interdependent self-construal, which represents a flexible, variable, and socially-defined self that has collective, contextual, connected, and relational qualities (Markus & Kitayama, 1991). The person is characterized by a "shifting self" -a self that is "integrated with one's interpersonal, not individual, responsibility and responds and changes according to various influences such as feelings, place, time, and social situation" (Yeh & Hwang, 2000, p. 423). Collectivism and interdependence characterize the deep value structure of the Asian worldview (Heine, 2001).

INDIGENOUS ASIAN PROBLEM-SOLVING STYLES AND COPING STRATEGIES

The effects of interdependent self-construal have been found to pervade the domains of cognitions, motivations, and emotions (Markus & Kitayama, 1991). Of particular importance to counselling and psychotherapy services is the way in which collectivism and interdependent self-construal are manifested in Asians' preferred manners of helping, problem-solving styles, and stress-coping responses. It has been found that coping behaviours among Asians are often communally- and relationally- based (Kuo, Roysircar, & Newby-Clark, 2004); that is, Asian coping responses often involve others (Le., family, community, peers), either as a source of assistance or a frame of reference. For example, studies have found that native Japanese undergraduate students in Japan and Asian undergraduate students in the United States adopted collective coping methods by keeping problems in the family, seeking assistance from families, friends, and social groups, and participating in social and familial activities (Yeh, et al., 2001; Yeh & Wang, 2000).

More recently, Kuo et al. (2004) tested a new coping scale developed to measure collectivistic and individualistic dimensions of coping in samples of Chinese adolescents and Asian university students in Canada. The results revealed three types of coping. Collective and avoidance coping approaches correspond to Asian values of conformity to norms, family honour (e.g., filial piety), social harmony (e.g., interpersonal conflict avoidance), emotional control, and humility. More traditional participants (Le., less acculturated Chinese adolescents and more inter-

dependent Asian university students) were more likely to resort to these strategies to deal with stress. More specifically, the collective coping strategies encompass the coper's cognitive appraisal of coping actions relative to the individual's cultural and familial norms and the behaviours and perspectives of the individual's significant others. This weighing process preceding one's response reflects social cognition and motivation stemming from Asian interdependent self-construal (Markus & Kitayama, 1991). The results are consistent with Yeh et al.'s (2001) study, which found that Japanese students' collective identity (e.g., valuing the importance of one's ethnic group, community, religion, and language) was a good predictor of the tendency to cope by seek helping from family members.

COLLECTIVISTIC COUNSELLING STRATEGIES

To optimize the relevance and efficacy of counselling and psychological services to Asians, creative adaptations of standard counselling practice are imperative. Drawing from the Asian communal and relational worldview, the following recommendations are offered with the intention to infuse collectivism and interdependency into the counselling relationship and process with Asian clients.

IMPLEMENTING DIRECT COUNSELLING APPROACH WITH THERAPEUTIC GAINS

Asian collectivism denotes an adherence to a structured set of social relationships and family hierarchy. With well-defined roles for individuals (e.g.; superiors versus subordinates), there is low tolerance for status and role ambiguity in relationships. Consequently, the implication for counselling is that the counsellor's and client's respective roles and tasks and the counselling process and goals must be clearly spelled out and explained to the client at the outset of therapy. The hierarchical and paternalistic social structure that characterizes Asian communities also implies that trust and respect are given to those who hold high social status or who

achieve expert status through training, education, and experience. More traditional Asian clients prefer counsellors who take an authority or expert role and conduct counselling with a clear directive and structure (Kim et al., 2001). Counsellors who engage clients by offering advice, suggestions, information, and solutions, and who engage clients in problem-solving are thus seen as more effective and credible than those who utilize non-directive approaches (Wong & Piran, 1995).

Moreover, the concept of reciprocity in the form of "gift-giving" is prevalent in Asian tradition. In the therapeutic context, the counsellor's gift giving in the form of imparting to the client tangible gains early in the counselling relationship is both culturally appropriate and desirable. Kim et al. (2001) note that Asian clients who adhere strongly to traditional values expect immediate therapeutic gains, such as symptom relief. Thus, for example, in the case of an anxiety laden Asian student whose struggle with career/ academic problems stems from conflict with her parents and family, the counsellor would focus early sessions on concrete tasks, such as teaching the client breathing techniques and relaxation exercises. Only after the client experiences some positive gains through counselling should the counsellor focus on the core issues of the student's conflict with the family.

INTEGRATING A MULTI-LEVEL TEAM APPROACH

Within an interdependent social system, a member in distress is likely to be offered assistance from several other members in the same community. This group orientation among Asians denotes that when an Asian family reaches out for help, it might simultaneously draw upon the resources and support of members of the immediate and extended family, trusted neighbours, credible local leaders of the community, or other professionals. Therefore, aligning counselling interventions with the Asian pattern of help seeking demands the augmentation of conventional individual counselling with a multi-level intervention. Yeh and Wang (2000) suggest that

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a team strategy is useful in working with Asian clients. For instance, in working with an Asian university student who reports psychosomatic symptoms resulting from acculturative and adjustment stress, the counsellor might take a proactive role in coordinating and/or referring the client to a physician to monitor his medical condition, a student peer program to provide additional support, an ethnocultural organization on campus that shares his linguistic and cultural background, and an academic advisor or course instructor to support his school work. Meanwhile, the counsellor and client explore personal issues and emotional difficulties arising from the client' s cultural transition at only is this multiple-level, help-seeking approach consistent with Asian beliefs in group interdependence, but it also serves pragmatic needs by maximizing the client's chances of finding one or more solutions to the problem.

FACILITATING COLLECTIVE AND RELATIONAL COPING RESPONSES

As discussed in the previous section, less acculturated and more interdependent Asians have been found to cope by appraising their stress responses with reference to their cultural and familial standards or to their important others' behaviours and opinions (Kuo et al., 2004). Asians are also more likely to use avoidance coping strategies in the forms of attention-diversion, averting stressors, and escapism. Diverting attention from stressors suggests Asians' cultural beliefs in forbearance, endurance, and nonaction (Kuo et al.).

In addition to exploring self-focused coping approaches with clients (e.g., direct action to change the stressor), counsellors should also facilitate Asian clients' consideration of relational and interpersonal strategies. These latter methods may very well be part of clients' existing coping repertoires but are often neglected in individual counselling. Clients should be encouraged to consider or develop collectivistic coping responses that might include consulting with and appealing to the wisdom and opinions of parents, siblings, extended family members, and

authority figures. Counselling may also involve cognitively referencing what these important others might do to cope with a similar stressful situation (Kuo et al., 2004). Counsellors should be particularly mindful of the fact that for acculturating new immigrants and international students, group- and value-referencing types of collective coping may be especially valuable. For these individuals in facing a new cultural environment, family, co-ethnic peers, and the ethnic community become a particularly crucial cognitive and behavioural frame of reference for their stress responses.

INC0RP0RATING FAMILY INTO THE COUNSELLING PROCESS

The profound familial influence on the self-definition and well-being of Asian individuals epitomizes their strong interdependent attitudes. In Kim, Atkinson, and Yang's (1999) study of Asian Americans, more than half of the empirically derived Asian cultural values among Asian Americans centred on familial relationships and obligations. It is therefore crucial for counsellors to quickly assess a client's individual identity in relation to his or her immediate and extended families early in counselling. Any perceived conflicts with the family or in-group, or acquiescence on the part of the client might provide clues to the role family and in-group play in the client's life. Similarly, an Asian client's presenting problems should be conceptualized within his or her family and social context. A counsellor may thus inquire what role the client's family plays in the client's current problems and in the client's efforts to resolve these issues.

Subsequently, the extent to and capacity in which the client's family should be involved in the counselling process must be determined. Wong and Piran (1995) suggest that the options for counsellors range from simply focusing more on getting to know the client's family and the client's role in it, based on the client's description, to having the family actually participate directly in some aspects of the counselling process. The observation of the client's family dynamic offers the counsellor insights into the

quality of the familial relationships. It also helps anchor the Asian client in a critical relational context. Likewise, clients should be encouraged to carefully assess the cultural ramifications and consequences of independent actions or decisions made in therapy *for* their family beyond the therapeutic context. Counsellors might inquire what the client's family might feel and how they would respond to the changes the client undergoes in counselling or therapy. Therapeutic interventions conducted in concert with Asian interdependence on family and familial values are *more* likely to be honoured by Asian clients and to be more successful than those with an exclusive focus on the individual.

CONCLUSIONS

The intrapsychic and interpersonal focuses of counselling and psychotherapy are often at odds with the relational and group-oriented values central to indigenous Asian help-seeking patterns, problem-solving styles, and coping responses. The consequences of this value clash are evident in the perennial problems of underutilizing mental health services and high counselling dropout rates among Asian clients. Recent developments in cross-cultural research regarding collectivistic/individualistic world views and interdependent/independent self-onstruals have provided valuable insights into the relationship between these cultural constructs and counselling and psychological processes. It is within this domain that a potential solution can be found to narrow the existing service gap for Asians and to ultimately improve the cultural competency of counselling services to Asians. Continuous efforts to creatively and deliberately infuse collectivism and interdependence into counselling relationships, processes, and interventions with Asian clients and into counsellor training hold promise to enhance the appeal and efficacy of counselling for this population.

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