

# SELF-ESTEEM ACROSS THE LIFESPAN

ISSUES AND INTERVENTIONS

EDITED BY MARY H. GUINDON

(2010)

 **Routledge**  
Taylor & Francis Group  
New York London

# 19

## Asian American Elders in U.S. Culture\*

BRYAN S. K. KIM AND YONG S. PARK

**M**r. Huang is a 66-year-old Taiwanese American who immigrated to the United States last year to join his daughter and her family after his wife passed away in Taiwan. Although he was initially hesitant about moving to the United States, he felt that it was the only option because he was retired from his calligraphy business and has no other children living in Taiwan; he has another daughter, but she lives in Canada. Mr. Huang also felt that by moving in with his daughter, he could see his two grandchildren, whom he has not been able to see regularly.

Although the time immediately after joining his daughter and her family was filled with happiness, Mr. Huang soon began to feel sad and lonely. He missed his life in Taiwan, his wife, and his network of close friends. In addition, he does not speak English, does not know how to drive a car, and spends most days staying home and waiting for his grandchildren to return from school and his daughter and her husband to return from work. But even when the grandchildren are home, he is unable to communicate with them fluently because the children do not speak Taiwanese very well. When Mr. Huang does venture outside his home, he finds himself feeling very nervous and scared of the strange neighborhood, where only a few people are walking on the sidewalks and there are so many cars. All of this has caused him to feel useless, without a purpose in the remainder of his life, and to experience a lack of self-esteem.

Furthermore, he has noticed that his daughter's views about the world seemed to have changed dramatically since she left Taiwan 15 years ago to attend college in the United States. For example, his daughter has asked him to help around the house by cleaning and doing the laundry, which he never had to do in Taiwan.

---

\* This research was supported in part by the Asian American Center on Disparities Research (National Institute of Mental Health grant: 1P50MH073511-01A2).

He has noticed that his daughter's behavior toward her husband seems "bossy" and very disrespectful. Given all of these experiences, he has begun to feel very frustrated about living in the United States, in addition to thinking that he might be a burden to his daughter. However, he also knows that returning to Taiwan is not an option.

As you read this vignette, what thoughts come to your mind about Mr. Huang's self-esteem? Given the difficulties he is experiencing, what do you think are his selective and global levels of self-esteem?

The purpose of this chapter is to describe the various psychological challenges that are faced by Asian American elders, which in turn affect their self-esteem. We will begin with a description of the demographic, historical, and cultural characteristics of elderly Asian Americans. Then, we will provide a discussion of how self-esteem might be conceptualized differently in Asian cultures than in the dominant U.S. culture, highlight several risk factors that might negatively impact Asian American elders' self-esteem, and describe specific intervention strategies that may be utilized by mental health professionals when working with Asian American elders to address their low self-esteem.

## DEMOGRAPHIC, HISTORICAL, AND CULTURAL CHARACTERISTICS

According to the U.S. Bureau of the Census (2004), Asian Americans comprise 12.9 million individuals, or 4.5% of the U.S. population. Among this group, 2.13 million Asian Americans, or 16.5% of the total Asian American population, are 55 years and older. Also within this group are 1.07 million Asian Americans who are 65 years and older, representing 8.3% of the total Asian American population. While these numbers indicate a large number of people who can be categorized under the Asian American elderly population, the high degree of within-group variability makes it difficult to characterize them as a homogeneous group. One of the most important indicators of this variability is ethnicity. Although Asian Americans have been classified as a single group because of their common origins in the Asian continent, they include over two dozen ethnic groups representing a wide range of geographical origins, including East Asian countries such as China and Japan; Southeast Asian countries such as Vietnam, Philippines, and Indonesia; and South Asian countries such as India and Pakistan. These groups vary significantly in language, traditions, customs, societal norms, and immigration history.

Another important within-group variable is immigration histories. Many Asian American elderly are three, four, or five generations removed from ancestors who entered the United States between the mid-1800s and early 1900s during the Gold Rush and Transcontinental Railroad eras in California and the sugar plantation period in Hawaii. Others are second-generation Americans whose parents entered the United States during World War II and the Korean War. There are also first-generation Asian Americans who entered the United States after the passing of the Immigration Act of 1965 or after the U.S. military forces pulled

out of Southeast Asia in 1975 (Takaki, 1989). Furthermore, like Mr. Huang, Asian Americans consist of individuals who arrived from various Asian countries as recently as last year or even yesterday. This diversity of the length of residence in the United States suggests that the Asian American elderly population represents a dramatic range in the degree to which they have adapted to the norms of the dominant U.S. culture or have retained the norms of the traditional Asian culture. Two constructs that represent these processes are acculturation (the process of adapting to the norms of the dominant group) and enculturation (the process of retaining the norms of one's indigenous group; Kim & Abreu, 2001). Current theories of acculturation and enculturation suggest that first-generation individuals (i.e., immigrants) experience low levels of acculturation and high levels of enculturation, whereas individuals who are several generations removed from immigration would be expected to experience high levels of acculturation and low levels of enculturation. However, there are also individuals (e.g., second generation) who could be experiencing high levels of both acculturation and enculturation, thereby representing biculturalism.

To better understand the worldview of Asian American elders, it is useful to be aware of traditional Asian values that help to shape it. In the process of developing a measure of Asian cultural values (Asian Values Scale), Kim, Atkinson, and Yang (1999) conducted a comprehensive review of the literature, a nationwide survey of Asian American psychologists, and focus groups to identify value dimensions that are commonly observed among Asians. The results yielded the following value dimensions:

1. Ability to resolve psychological problems (e.g., one should use one's inner resources and willpower to resolve psychological problems)
2. Avoidance of family shame (e.g., the worst thing an individual can do is to disgrace his or her family reputation)
3. Collectivism (e.g., group interests and goals should be promoted over individual interests and goals)
4. Conformity to family and social norms and expectations (e.g., individuals should not make waves and should avoid disrupting the status quo)
5. Deference to authority figures (e.g., authority figures are deserving of respect)
6. Educational and occupational achievement (e.g., success in life is defined in terms of one's academic and career accomplishments)
7. Filial piety (e.g., children are expected to manifest unquestioning obedience to their parents)
8. Importance of family (e.g., honor and duty to one's family are very important, more important than one's own fame and power)
9. Maintenance of interpersonal harmony (e.g., one should always try to be accommodating and conciliatory and never directly confrontational)
10. Placing other's needs ahead of one's own (e.g., an individual should consider the needs of others before considering one's own)
11. Reciprocity (e.g., an individual should repay another person's favor, that is, repay those people who have helped or provided assistance to the individual)

12. Respect for elders and ancestors (e.g., young people should never confront their elders, talk back to them, or go directly against their wishes)
13. Self-control and restraint (e.g., ability to control emotions is a sign of strength)
14. Self-effacement (e.g., it is important to minimize or depreciate one's own achievements)

These value dimensions offer insight as to how Asian American elders might formulate and interpret their sense of self-esteem.

## SELF-ESTEEM ISSUES OF ASIAN AMERICAN ELDERS

This section describes how self-esteem might be conceptualized by the Asian American elderly population and is based on traditional Asian cultural norms. Hence, it is specific to the experiences of highly enculturated and low acculturated Asian Americans (i.e., traditional Asian Americans). To the extent that individuals are low enculturated and highly acculturated, the description may not apply.

Asian Americans tend to exhibit a relatively lower rate of personal self-esteem than their European American counterparts. Interdependent self-construal (e.g., collectivistic thinking)—a trait commonly associated with Asian Americans—was found by Singelis, Bond, Sharkey, and Lai (1999) to be related to lower rates of personal self-esteem. In a more recent study, Heine and Hamamura (2007) conducted a meta-analysis of Asian Americans and European Americans in regard to various operational definitions of self-esteem, finding that among 91 cross-cultural comparisons, Asian Americans reported a lower tendency to self-enhance while European Americans exhibited a clear self-serving bias. While these research findings suggest that Asian Americans may struggle with lower rates of personal self-esteem, it is unclear whether these disparities are an outcome of unique psychosocial risk factors faced by Asian Americans, or whether the findings are an artifact of varying values and norms that Asian culture has toward self-esteem. To clarify the latter point, it could be that personal self-esteem is not as strongly encouraged or valued in traditional Asian cultures, thereby resulting in studies that suggest self-esteem disparities.

### *Asian Cultural Values and Norms Surrounding Self-Esteem*

Contrary to popular belief, cross-cultural psychologists suggest that the need to enhance self-esteem is largely a culture-bound phenomenon rather than a universal one. Heine, Lehman, Markus, and Kitayama (1999) point out that the “universal assumption” that people need to evaluate themselves positively is an artifact of Western philosophical thought and a product of research that was conducted primarily with White, North American samples. From the cross-cultural perspective, the needs and desires of the group may take priority to the needs for personal self-esteem. Asians are likely to exhibit a group-serving bias (i.e., a tendency to overevaluate one's group in positive terms; Heine & Lehman, 1997). Furthermore, in a study that examined Japanese nationals, Kitayama, Takagi, and Matsumoto

(1995) found that the Japanese participants failed to exhibit a self-serving attribution bias (i.e., perceiving self in overly competent and optimistic terms). In respect to Japanese language, Heine et al. (1999) observed that the terms *self-confident* and *self-respect*, qualities that are viewed as desirable in Western cultures, may have connotations for conceit and arrogance.

As opposed to self-enhancement, traditional Asian culture may be encouraging of a critical view of self and, in turn, value individuals who practice humility and self-effacement. The purpose of being self-critical may be consistent with the Asian cultural value placed on collectivism (Kim et al., 1999), which emphasizes the importance of fitting in and fulfilling roles and responsibilities that are ascribed to the individual by the group. From this perspective, differentiating oneself from other group members or "standing out" would not be an adaptable trait. To reinforce this value, there is a well-engrained adage in the Japanese culture that "a nail that sticks out gets hammered in."

Because belongingness and fitting in is a value and a norm in traditional Asian culture, internal attitudes, such as people's assessments of their individual characteristics and strengths (e.g., interests, skills, values, and personalities), may not have as strong an influence in defining the sense of self. Instead, self-esteem may be largely determined by external and relational factors. Several scholars (see Uba, 1994, for review) have corroborated traditional Asian Americans' propensity for having an "external locus of control"—a belief that external factors control the outcome of a person's life. Given the focus on external factors, self-esteem may be strongly influenced by how well one fulfills externally defined roles and responsibilities, and is affected by the approval one receives from others in terms of one's contribution to the group. The way success is defined in Japanese culture is largely based on how a person "fulfills consensually defined standards of excellence within a given context" (Heine & Lehman, 1997, p. 1279).

The manner in which one organizes one's sense of self and behaviors in respect to external contingencies is reflected in the concept of face. Ho (1976) provides a comprehensive definition of face: "respectability and/or deference which a person can claim for himself from others, by virtue of the relative position he occupies in his social network and the degree to which he is judged to have functioned adequately in that position" (p. 883). A key determinant of a person's esteem (or respect in this instance) is contingent on how well one functions in one's social position. In other words, self-esteem from the purview of face management may be performance driven, and thus more aligned with the competence component of self-esteem.

Along with the need to fulfill group responsibilities may be the ulterior concern for the loss of face (i.e., saving face). Based on an extensive literature review, Zane (2000) concisely defined loss of face as the "threat or loss of one's social integrity" and identified four common face-threatening situations for Asian Americans: threats to social status, acting in an unethical manner, failing to uphold social propriety, and lacking self-discipline. In the unfortunate circumstance that the person is not able to save face, shame may be the predominant emotion experienced (Ha, 1995; You, 1997). For Asian American elders, a shame response is a powerful sanction, one that may ultimately result in the person, and perhaps the whole family, being

pressured to relinquish membership from a particular social group or community of co-ethnics. Furthermore, research has shown that a shame response has strong and negative implications for a person's self-esteem (Yelsma, Brown, & Elison, 2002).

The gravity of a shame response may compel Asian American elders to do what is in their power to avoid bringing shame to themselves and to their family. One way Asian American elders can protect themselves from losing face and the concomitant shame response is by conforming to social propriety—socially acceptable conduct and speech (*Merriam-Webster's Collegiate Dictionary*, 2003). Heine et al. (1999) provide a more descriptive definition specific to traditional Asian culture: "The individual is protected by layers of insulating rituals—such as codes of formal communication; highly conventionalized forms of greetings; rules for posture, gesture, and so forth—all of which serve to prevent the exposure of the individual self to others" (p. 773). In other words, by adhering to social propriety, the person is able to maintain harmony with other group members and, as a result, not bring negative attention or shame to self. Although social propriety may protect the individual from loss of face or shame, the person sacrifices the freedom to be a unique self in the group. One no longer has the autonomy to assert individual needs and desires, and in this group context, the individuals' need for positive self-esteem may often be pushed aside for the greater goals of the collective.

### *Self-Esteem: Shifting From the Individual to the Collective*

In traditional Asian culture, personal self-esteem may play a subsidiary role to collectivism, saving face, and avoiding shame. Therefore, when working with Asian American elderly clients who adhere to traditional Asian values, self-esteem needs to be reconceptualized not as an individualist construct but as one that takes into consideration social and collective factors. This is important because for traditional Asian American elders, a "truly meaningful existence is conceivable only in relation to others" (Suh, 2002, p. 1378).

The concept of selective self-esteem (that stresses the situational and transitory nature of self-esteem) may be culturally relevant to Asian American elderly because traditional Asian culture tends to emphasize external and contextual factors of self-esteem, as opposed to intrinsic factors. More specifically, Asian Americans' evaluation of self may be largely dependent on fulfilling specific roles, positions, and tasks within varying social and situational contexts.

In addition to selective self-esteem, another culturally appropriate conceptualization with Asian American elderly clients may be the construct of collective self-esteem (CSE). Luhtanen and Crocker (1992) have argued that evaluation of self-worth is largely based on a person's knowledge of, emotional significance attached to, and role in being a member of a particular social group. They identified four domains of collective self-esteem: private CSE—how individuals privately evaluate their social group or groups; public CSE—how individuals believe others evaluate their social groups; importance to identity—the role of group membership in self concept; and membership CSE—how well a person functions as a member of his or her social group. Similar to selective self-esteem, these CSE domains depart from the individualistic and global assumptions embedded in

personal self-esteem, and give consideration to social-contextual factors that influence self-esteem. These domains may be particularly relevant for first-generation Asian American elderly who in their Asian countries of origin were held in high regard and positioned on top of the social order based on filial piety and value of respecting elders. In the United States, however, Asian American elderly are faced with challenges of navigating an ethnically heterogeneous society that may place them in a subordinate position, due to their ethnic minority and elderly status, which in turn may diminish their CSE.

Finally, borrowing from evolutionary psychology, the sociometer theory may be useful for understanding the role of self-esteem for Asian Americans. From this perspective, self-esteem is considered a sociometer or gauge of how well a person functions in various interpersonal contexts (Kirkpatrick & Ellis, 2001). Underlying the self-esteem sociometer is the psychological mechanism to which the self is socially constructed based on reflected appraisals of how others view the self (Leary & Baumeister, 2000).

## RISK FACTORS RELATED TO SELF-ESTEEM

While there may be cultural normative reasons for the lower rates of personal self-esteem that are observed among Asian Americans, research shows that lower self-enhancement may be associated with various measures of distress among Asian Americans, including depression, social avoidance, and fear of negative evaluation (Norasakkunkit & Kalick, 2002). Thus, it is important for clinicians to address unique psychosocial risk factors that may place Asian American elders at risk for low self-esteem.

### *Erosion of Family Structure and the Care for Elders*

According to traditional Asian family structure, elders are expected to control and hold authority over the younger family members. In turn, younger members are expected to respect and obey their elders. When Asian families immigrate to the United States, the family structure can be compromised when the roles of the parents and children are reversed. A prominent example of role reversal involves the issue of language. Many Asian immigrant parents, like Mr. Huang, may not be proficient in English; therefore, they may need to depend on their English-speaking children to help them navigate and function in their new cultural surroundings. Furthermore, because self-esteem may be strongly influenced by external validation and approval from significant others, Asian American elders may experience lowered self-esteem when younger, more acculturated generations are less reliant on their elders for guidance and decision making.

Additionally, the erosion of the traditional Asian family structure may result in care-taking conflicts that may further distress Asian American elderly. According to McLaughlin and Braun (1998), adult-aged Asian children are largely responsible for their elderly parents' care, which often includes living with and providing their basic care. However, when the authority and influence of Asian elders are undermined, the parents may not be able to enforce co-residence with their chil-



dren. Instead, Asian American elderly may be placed in nursing homes, further diminishing their place of authority in the family.

### *Parent–Child Family Conflict*

The 2002–2003 University of California at Davis National Latino and Asian American Study surveyed over 2,000 Asian Americans and found that Asian Americans who endure family conflict are at a threefold greater risk of attempting suicide (Sue, 2008). Family conflict may arise when traditional Asian parents implement parenting behaviors (i.e., authoritarian style) that expect their children to unconditionally obey their wishes and fulfill family obligations (Chao, 2001). These expectations may be incongruent with their acculturated children's need for autonomy. Recent studies examining Asian American college students have found that parents' Asian cultural orientation and the parent–child difference of Asian cultural values is associated with higher family conflict (Ahn, Kim, & Park, 2008; Lee, Choe, Kim, & Ngo, 2000) and conflict in the areas of academic and career, dating and marriage, and family expectations (Ahn et al., 2008). The case of Mr. Huang illustrates the psychological stressors that can arise when there is a gap between parents and children on their cultural values orientation.

### *Acculturative Stress*

On an average day, Asian Americans traverse through a multitude of social contexts, all of which have associated social norms. Although some Asian Americans are able to achieve bicultural effectiveness and successfully adapt to varying cultural situations, others may be overwhelmed by the constant negotiating of their cultural identities and values. The *Diagnostic and Statistical Manual of Mental Disorders* (American Psychiatric Association, 2000) has recognized cultural differences as a legitimate source of mental disorder, and has aptly labeled it acculturation problem. Recently, Kim and Park (2007) suggested that East Asian Americans are particularly vulnerable to acculturative stress since traditional Asian values and behaviors tend to be construed as ineffective or irrelevant in mainstream Western culture. For example, Asian Americans' tendency toward indirect communication may be viewed as passive and ineffective, in contrast to the trait of assertiveness, which includes direct and open communication (Park & Kim, 2008). With respect to self-esteem, Asian Americans may have difficulty in reconciling Asian cultural expectations to minimize self-enhancement with Western expectations of openly expressing a positive sense of self.

### *Racism and Discrimination*

Asian Americans have been subject to racism and discrimination, on both personal and systemic levels, since their first arrival to the United States. Early on, Asian American immigrants were stereotyped with derogatory characterizations such as “filthy,” “immoral,” “treacherous,” and “inassimilable aliens” (Takaki, 1989; Wong, 1995). Even Asian Americans born and raised in the United States were viewed as

perpetual foreigners, as harshly noted by General De Witt's reference to Japanese Americans during the time of World War II: "Jap is Jap regardless of birthplace" (c.f. Takaki, 1989). These negative stereotypes underscore issues of larger, systemic racism against Asian Americans that included immigration acts that excluded Asians, the discriminatory internment of Japanese citizens without due process of law, and findings that Asian Americans are less likely to be promoted and earn as much as their White counterparts when education and work experience are equal (see Leong, 1998, for review). Taken together, mental health providers need to be attentive to the effects of racism and discrimination on their Asian American elderly clients. Racism can result in lower self-esteem, learned helplessness, and depression.

### *Micro-Aggressions*

In addition to overt and systemic forms of racism, Sue, Bucci, Lin, Nadal, and Torino (2007) have argued that racism against Asian Americans has become more subtle and ambiguous. Referred to as racial micro-aggressions, Sue et al. (2007) defined this new form of racism as "brief and commonplace daily verbal, behavioral indignities, whether intentional or unintentional, that communicate hostile, derogatory or negative racial slights and insults that potentially have harmful or unpleasant psychological impact on the target person or group" (p. 72). Micro-aggression can be more harmful than overt racism. Predominant themes of micro-aggressions are: (1) alien in own land (e.g., perpetual foreigners), (2) ascription of intelligence (e.g., "all Asians are smart in math and science"), (3) denial of racial reality (e.g., invalidation of discriminatory experiences, "Asians are new Whites"), (4) exoticization of Asian American women, (5) invalidation of interethnic differences, (6) pathologizing cultural values/communication styles, (7) second-class citizenship, and (8) invisibility (e.g., being overlooked or left out).

For Asian American elderly, the micro-aggression of invisibility may be particularly salient. In their countries of origin, the elderly tend to be at the forefront of society; they are sociopolitical leaders, heads of households, and revered by the community at large. In their new social environment, however, Asian American elders may face the reality that their status is less respected or desirable. This social reality aggravates an already dire situation because their minority status and cultural differences may already alienate them from mainstream American society. Asian American elderly may be given the feedback from the broader U.S. society that they are unimportant, which in turn negatively influences their self-esteem.

### *Underemployment Upon Immigration*

Another common challenge for Asian American elders may be underemployment upon immigration in comparison to their preimmigration educational and occupational abilities. Hurh and Kim (1989) provided an analysis of immigrant educational and occupational transition, and found that the average Asian immigrant

makes the transition during his or her most economically productive years. Before immigration, a large majority had a college education, but upon immigration, they were not able to obtain many professional or prestigious occupations. Considering the traditional Asian value placed on academic and occupational achievement (Kim et al., 1999), Asian American elders' experiences with underemployment may have a negative impact on their self-esteem when their preimmigration statuses do not carry over to their new environment, especially if they previously occupied prestigious educational and occupational positions. Self-esteem can be adversely affected for Asian immigrants because it is largely performance and achievement driven. They are frustrated when they are unable to engage in careers that are commensurate with their training and abilities.

## INTERVENTION STRATEGIES

Given the risk factors described earlier, many Asian American elders are in need of psychological services. Mental health professionals should be aware of their attitudes toward seeking professional psychological help, ways to conduct culturally appropriate psychological assessment, possible usefulness of indigenous healing methods, and possible modification of conventional counseling methods.

### *Attitudes Toward Seeking Professional Psychological Help*

Research in the past three decades has found that Asian Americans tend not to seek psychological services, and even if they enter treatment, they tend to terminate prematurely (e.g., Snowden & Cheung, 1990; Kim, Brenner, Liang, & Asay, 2003). There are no particular reasons why Asian Americans, in comparison to other cultural groups, should have a lower rate of psychological problems. In fact, given the risk factors Asian American elders face, it seems reasonable to expect that the need for mental services among this group will be high. It could be that underutilization of psychological services among Asian Americans is related to Asian cultural norms. Less acculturated Asian Americans tend to have less favorable attitudes toward seeking services than their more acculturated counterparts. In terms of enculturation, studies have shown that high adherence to Asian cultural values was associated with both less favorable attitudes toward seeking psychological help and less willingness to see a mental health professional (Kim, 2007; Kim & Omizo, 2003). Consequently, mental health professionals should consider conducting more outreach services in the form of educational materials describing the potential benefits of psychological services. Mental health agencies should attempt to hire more Asian American mental health professionals to attract Asian American clientele and serve as strong self-esteem models for them. When working with Asian American elderly clients who are strongly enculturated, mental health professionals should be sensitive to collective self-esteem needs and discuss issues of shame and embarrassment about seeking help (i.e., loss of face).

### *Indigenous Healing Methods*

If traditional, highly enculturated Asian American elderly clients might not do well with conventional forms of counseling, even with the augmentation of culturally sensitive interventions, mental health professionals could consider referring the clients to practitioners of indigenous healing practices. An example of an indigenous healing method is *ta'i chi ch'uan*. *Ta'i chi ch'uan* involves an exercise that has the purpose of inducing relaxation and meditation (Sandlund & Norlander, 2000) and underscores competence-based self-esteem.

### *Modification of Conventional Counseling*

If it appears that Asian American elderly clients can benefit from conventional forms of counseling, care must be taken to modify the treatment with culturally relevant and sensitive strategies. There have been a number of research studies on therapist variables and counseling interventions that may be effective with Asian American clients. Kim, Ng, and Ahn (2009) found, based on analogue studies, that Asian American clients favor ethnically similar counselors over ethnically dissimilar counselors and counselors with similar attitudes, more education, older in age, and similar personality. Asian American clients also favor a logical, rational, and directive counseling style over a reflective, affective, and nondirective one, especially if the counselor is an Asian American. The findings also suggest that Asian American clients view culturally sensitive counselors as being more credible and culturally competent than less sensitive counselors, and judge culturally responsive counselors as more credible than culturally neutral counselors.

Studies that have employed actual counseling settings with real clients (Kim, Li, & Liang, 2002; Kim, Ng, & Ahn, 2005, 2009) are consistent with Sue and Zane's (1987) notion of gift giving. For practitioners to be perceived as culturally responsive and to reduce clients' premature termination, they should focus on the strategy of gift giving—helping clients experience immediate and concrete benefits in the initial sessions. Examples of gifts are a resolution of a presenting problem, in particular, anxiety reduction, depression relief, cognitive clarity, normalization, and skills acquisition, which have the potential to enhance self-esteem. Ethnic minorities in general and Asian Americans in particular need to attain meaningful gains early in counseling, and “gift giving demonstrates to clients the direct relationship between working in therapy and alleviation of problems” (Sue & Zane, 1987, p. 42).

Another model that can be helpful when using the modified counseling approach is the three-dimensional model of multicultural counseling (Atkinson, Thompson, & Grant, 1993). The model includes three factors—acculturation (high or low), locus of problem of etiology (internal or external), and goal of counseling (prevention or remediation)—a combination of which suggests the use of one of eight helper roles: adviser, advocate, change agent, consultant, facilitator of indigenous support systems, facilitator of indigenous healing methods, counselor, and conventional psychotherapist.

In addition to culture-based modification of conventional counseling, mental health professionals should consider referring Asian American elderly clients to organizations serving Asian Americans. For example, Korean Americans tend to seek support from church priests and other parishioners, and thus, it may be beneficial to help establish a connection between Korean elderly clients with local Korean churches in the community. Similarly, it may be helpful to refer traditional Vietnamese American Buddhist clients to temples in which priests can provide supportive services.

## ASSESSMENT

Despite the general reluctance among many Asian American elders in seeking mental health services, many of them do enter counseling. However, they may enter with a great deal of skepticism and culture-related concerns, which, if left unattended, could lead to premature termination from counseling. Hence, it is important for mental health professionals to conduct a thorough assessment of the clients at the beginning of the counseling relationship. As with any clients, mental health professionals should assess the nature, severity, and duration of the problem, and the ways in which the problem had been addressed in the past. In addition, it is very important for mental health professionals to obtain information about the factors related to clients' cultural background, which could lead to more relevant and helpful counseling relationships and interventions. Such cultural factors for assessment include (1) acculturation and enculturation levels, (2) attitudes about counseling, (3) experiences with oppression, (4) possible presence of culture-specific psychological disorders, and (5) availability of other sources of support.

## ROLE OF THE MENTAL HEALTH PRACTITIONER

The self-esteem, both personal and collective, of Asian American elderly may be improved by implementing interventions, counselor roles, and assessment strategies that are tailored to be sensitive to the cultural experiences of this population. For example, by modifying interventions to fit with indigenous ways of healing, therapists communicate that they value and view clients' cultural practices as legitimate and provide positive feedback. Furthermore, by considering alternative counseling roles, the therapist may be indirectly saving or protecting face of the elderly client. The counseling process may be demeaning to Asian American elders because counseling usually expects clients to openly share about their personal problems to a stranger. Furthermore, the counseling experience tends to be individualistic in nature, as the focus of therapy usually puts emphasis on the client's personal cognitions, emotions, and behaviors. Therefore, whenever appropriate, it can be helpful to refer Asian American elderly to indigenous or community resources that are culturally congruent with their collective sense of self.

## CASE STUDY

As Mr. Huang continued to suffer from sadness, loneliness, and low personal and collective self-esteem, his daughter decided that something needed to be done. Fortunately, she had a good friend who is a mental health professional and referred the daughter and Mr. Huang to a local mental health agency specializing in multicultural counseling and therapy with counselors that speak Taiwanese. At their first appointment, the counselor obtained information to determine whether conventional counseling could be helpful or if Mr. Huang should be referred to an indigenous healer. After a thorough assessment, the counselor decided on modified conventional counseling, indigenous healing, and additional support services in the community.

In terms of modified conventional counseling, the counselor decided to work with Mr. Huang, in the Taiwanese language, to explore his sense of grief for leaving Taiwan and particularly about being so far away from where his wife is buried. The counselor soon learned that Mr. Huang was suffering from low self-esteem partly because he felt that he was not fulfilling his role as a husband and the head of the family, and felt very guilty about leaving his wife's remains in Taiwan. The counselor encouraged Mr. Huang to visit the local Taiwanese Buddhist temple to pray for his wife's well-being in the next world. During this process, the counselor provided Mr. Huang with additional "gifts" in the form of information about the nature of the grieving process and cognitive techniques to cope with feelings of guilt and sadness. Also, the counselor helped Mr. Huang understand the processes of acculturation and enculturation that he was undergoing and how he might cope with the high level of acculturative stress he was experiencing. Furthermore, the counselor helped Mr. Huang to achieve some level of biculturalism by exploring the cultural differences between Taiwan and the United States and how he might be able to bridge the two cultures for himself. This helped Mr. Huang to feel more hopeful about overcoming the cultural barriers, which led to an improvement in his sense of competence.

In addition to this counseling work, the counselor referred Mr. Huang to a local practitioner of ta'i chi ch'uan who could help Mr. Huang to engage in physical exercise to raise his mood and experience a sense of accomplishment. This also allowed Mr. Huang to meet other Taiwanese Americans in the community, giving him opportunities to reinforce collective self-esteem. The counselor also introduced Mr. Huang to a local Taiwanese community center where he could go every day to meet other Taiwanese Americans. Given Mr. Huang's training as a calligrapher and its salience to him, the center helped Mr. Huang set up a calligraphy class where he could teach other people in this art. Having this opportunity allowed Mr. Huang to feel a sense of worth and usefulness in the community. In addition, this "work" led Mr. Huang to meet other calligraphers in the community with whom he met regularly in social settings.

After about six weeks of these interventions, Mr. Huang shared with the counselor that he felt much better and that he has a renewed sense of purpose and usefulness. He reported that he no longer felt guilty and had a more positive view of

himself and his abilities to live in the United States. These statements were strong indications that his self-esteem had increased significantly.

## CONCLUSION

In this chapter, we described how self-esteem might be experienced by Asian American elders. First, in the hope of avoiding stereotyping, we discussed important within-group variability such as ethnicity, immigration history, and acculturation and enculturation levels. Then, we described traditional Asian cultural values that might be salient for many Asian American elders and how these values might shape their worldviews and influence their self-esteem. In particular, we highlighted how self-esteem might be conceived differently by Asian American elders based on their more collective and interdependent worldviews. We then described potential risk factors, such as family conflict, acculturative stress, racism and discrimination, and underemployment, that might lead to a decrease in self-esteem. Finally, we offered various strategies that might be helpful when mental health professionals work with Asian American elders.

## REFERENCES

- Ahn, A. J., Kim, B. S. K., & Park, Y. S. (2008). Asian cultural values gap, cognitive flexibility, coping strategies, and parent-child conflicts among Korean Americans. *Cultural Diversity and Ethnic Minority Psychology, 14*, 353–363.
- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text rev.). Arlington, VA: Author.
- Atkinson, D. R., Thompson, C. E., & Grant, S. K. (1993). A three-dimensional model for counseling racial ethnic minorities. *The Counseling Psychologist, 21*, 257–277.
- Chao, R. K. (2001). Extending research on the consequences of parenting style for Chinese Americans and European Americans. *Child Development, 72*, 1832–1843.
- Ha, F. I. (1995). Shame in Asian and Western cultures. *American Behaviorist Scientist, 38*, 1114–1131.
- Heine, S. J., & Hamamura, T. (2007). In search of East Asian self-enhancement. *Personality and Social Psychology Review, 11*, 4–27.
- Heine, S. J., & Lehman, D. R. (1997). The cultural construction of self-enhancement: An examination of group-serving biases. *Journal of Personality and Social Psychology, 72*, 1268–1283.
- Heine, S. J., Lehman, D. R., Markus, H. R., & Kitayama, S. (1999). Is there a universal need for positive self-regard? *Psychological Review, 106*, 766–794.
- Ho, D. Y. (1976). On the concept of face. *American Journal of Sociology, 81*, 867–884.
- Hurh, W. M., & Kim, K. C. (1989). The “success” image of Asian Americans: Its validity, and its practical and theoretical implications. *Ethnic and Racial Studies, 12*, 512–538.
- Kim, B. S. K. (2007). Adherence to Asian and European American cultural values and attitudes towards seeking professional psychological help among Asian American college students. *Journal of Counseling Psychology, 54*, 474–480.
- Kim, B. S. K., & Abren, J. M. (2001). Acculturation measurement: Theory, current instruments, and future directions. In J. G. Ponterotto, J. M. Casas, L. A. Suzuki, & C. M. Alexander (Eds.), *Handbook of multicultural counseling* (2nd ed., pp. 394–424). Thousand Oaks, CA: Sage.

- Kim, B. S. K., Atkinson, D. R., & Yang, P. H. (1999). The Asian values scale: Development, factor analysis, validation, and reliability. *Journal of Counseling Psychology*, 46, 342-352.
- Kim, B. S. K., Brenner, B. R., Liang, C. T. H., & Asay, P. A. (2003). A qualitative study of adaptation experiences of 1.5-generation Asian Americans. *Cultural Diversity and Ethnic Minority Psychology*, 9, 156-170.
- Kim, B. S. K., Li, L. C., & Liang, C. T. H. (2002). Effects of Asian American client adherence to Asian cultural values, session goal, and counselor emphasis of client expression on career counseling process. *Journal of Counseling Psychology*, 49, 342-354.
- Kim, B. S. K., Ng, G. F., & Ahn, A. J. (2005). Effects of client expectation for counseling success, client-counselor worldview match, and client adherence to Asian and European American cultural values on counseling process with Asian Americans. *Journal of Counseling Psychology*, 52, 67-76.
- Kim, B. S. K., Ng, G. F., & Ahn, A. J. (2009). Client adherence to Asian cultural values, common factors in counseling, and session outcome with Asian American clients at a university counseling center. *Journal of Counseling and Development* 87, 131-142.
- Kim, B. S. K., & Omizo, M. M. (2003). Asian cultural values, attitudes toward seeking professional psychological help, and willingness to see a counselor. *The Counseling Psychologist*, 31, 343-361.
- Kim, B. S. K., & Park, Y. S. (2007). East and Southeast Asian Americans. In G. McAuliffe (Ed.), *Culturally alert counseling: A comprehensive introduction*. Thousand Oaks, CA: Sage.
- Kirkpatrick, L. A., & Ellis, B. J. (2001). An evolutionary-psychological approach to self-esteem: Multiple domains and multiple functions. In G. J. O. Fletcher & M. S. Clark (Eds.), *Blackwell handbook of social psychology: Interpersonal processes* (pp. 411-436). Oxford: Blackwell.
- Kitayama, S., Takagi, H., & Matsumoto, H. (1995). Causal attribution of success and failure: Cultural psychology of the Japanese self. *Japanese Psychological Review*, 38, 247-280.
- Leary, M. R., & Baumeister, R. F. (2000). The nature and function of self-esteem: Sociometer theory. In M. P. Zanna (Ed.), *Advances in experimental social psychology* (Vol. 32, pp. 1-62). San Diego: Academic Press.
- Lee, R. M., Choe, J., Kim, G., & Ngo, V. (2000). Construction of the Asian American Family Conflicts Scale. *Journal of Counseling Psychology*, 47, 211-222.
- Leong, F. (1998). Career development and vocational behaviors. In L. C. Lee & N. W. S. Zane (Eds.), *Handbook of Asian American psychology* (pp. 359-400). Thousand Oaks, CA: Sage.
- Luhtanen, R., & Crocker, J. (1992). A collective self-esteem scale: Self-evaluation of one's social identity. *Personality and Social Psychology Bulletin*, 18, 302-318.
- McLaughlin, L. A., & Braun, K. L. (1998). Asian and Pacific Islander cultural values: Considerations for health care decision making. *Health & Social Work*, 23, 116-126.
- Merriam-Webster's collegiate dictionary*. (11th ed.). (2003). Springfield, MA: Merriam-Webster.
- Norasakkunkit, V., & Kalick, S. M. (2002). Culture, ethnicity, and emotional distress measures: The role of self-construal and self-enhancement. *Journal of Cross-Cultural Psychology*, 33, 56-70.
- Park, Y. S., & Kim, B. S. K. (2008). Asian and European American cultural values and communication styles among Asian American and European American college students. *Cultural Diversity and Ethnic Minority Psychology*, 14, 47-56.
- Sandlund, E. S., & Norlander, T. (2000). The effects of tai chi chuan relaxation and exercise on stress responses and well-being: An overview of research. *International Journal of Stress Management*, 17, 139-149.



- Singelis, T. M., Bond, M. H., Sharkey, W. F., & Lai, C. S. Y. (1999). Unpackaging culture's influence on self-esteem and embarrassability: The role of self-construals. *Journal of Cross-Cultural Psychology*, 30, 315-341.
- Snowden, L. R., & Cheung, F. H. (1990). Use of inpatient mental health services by members of ethnic minority groups. *American Psychologist*, 45, 347-355.
- Sue, D. W., Bucceri, J., Lin, A. I., Nadal, K. L., & Torino, G. C. (2007). Racial microaggressions and the Asian American experience. *Cultural Diversity and Ethnic Minority Psychology*, 13, 72-81.
- Sue, S. (2008, August 18). *Suicide among Asian Americans* [press release]. UC Davis News and Information. Retrieved September 19, 2008, from [http://www.news.ucdavis.edu/search/news\\_detail.lasso?id=8738](http://www.news.ucdavis.edu/search/news_detail.lasso?id=8738)
- Sue, S., & Zane, N. (1987). The role of culture and cultural techniques in psychotherapy: A critique and reformulation. *American Psychologist*, 42, 37-45.
- Suh, E. M. (2002). Culture, identity consistency, and subjective well-being. *Journal of Personality and Social Psychology*, 83, 1378-1391.
- Takaki, R. (1989). *Strangers from a different shore: A history of Asian Americans*. New York: Penguin Books.
- Uba, L. (1994). *Asian Americans: Personality patterns, identity and mental health*. New York: Guilford Press.
- U.S. Bureau of the Census. (2004). *U.S. interim projections by age, sex, race, and Hispanic origin*. Retrieved October 28, 2004, from <http://www.census.gov/ipc/www/usinterimproj>
- Wong, K. S. (1995). Chinatown: Conflicting images, contested terrain. *MENUS*, 20, 3-15.
- Yelsma, P., Brown, N. M., & Elison, J. (2002). Shame-focused coping styles and their associations with self-esteem. *Psychological Reports*, 90, 1179-1189.
- You, Y. G. (1997). Shame and guilt mechanisms in East Asian culture. *Journal of Pastoral Care*, 51, 57-64.
- Zane, N. W. S. (2000). *Loss of Face Scale*. Retrieved September 19, 2008, from <http://psychology.ucdavis.edu/aacdr/measures/zanelof.pdf>