

## Chapter 3

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# ***ETHNICITY, GENDER, AND CROSS-CULTURAL ISSUES IN CLINICAL RESEARCH***

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The intent of this chapter is to provide an overview of the challenges we must attend to, and some solutions, to devise, implement, and interpret research in the most bias-free and valid manner possible. Although there are many ways to present these ideas, for heuristic purposes, we have decided to cover the entire research endeavor, from the formulation of research ideas and hypotheses to the interpretation of analyzed data. To some, a discussion of ethnic and gender issues in research may seem like an exercise in political correctness. After all, aren't scientific research designs and methodologies rather objective in nature, free from biases of one sort or another, and applicable to different groups and populations? The answer is "yes" and "no." It is true that hypothesis testing, controlling for extraneous variables in research designs, theory building, and so on, are important for scientific research with any population. However, which hypotheses are formulated, which variables are considered extraneous, how to control variables, and which theory to build are subject to values, priorities, and cultural orientations. Here we discuss the entire research process—formulation of research ideas, definition of variables, selection of measures, selection and sampling of a population, gaining cooperation of research participants, research design, data collection, and interpretation of analyzed data—and show how consideration of ethnicity, gender, and culture are critically important to all research. Rogler (1989) notes that research is made culturally sensitive through a continual process of substantive and methodological insertions and adaptations designed to mesh inquiry with the cultural characteristics of the group being studied. These insertions have to span the entire research process, from the planning of the study to the analysis and interpretation of data.

Our discussion does not cover general principles of research design and methodology or all topics pertinent to ethnicity and gender. Rather, we examine those issues that are more or less specific to properly addressing issues of ethnicity, gender, and culture in clinical research. The guidelines and recommendations we put forth related to ethnic, gender, and cross-cultural clinical research are really those recognized as simply "good" research. Our point is that treating issues of ethnicity, culture, and gender in clinical research as a side issue or as nuisance variables, which are only for those who are specifically investigating questions pertaining to ethnic, cultural, or gender differences, is a

serious mistake. Certainly, there are those of us who conduct specifically ethnic, cultural, and gender research and continually grapple with the difficulties of trying to conduct culturally valid, sex-fair, and bias-free research. However, attaining valid research findings and minimizing bias are essential objectives of all good research. For instance, selecting samples that are representative of the population from which the research will be applied, administering measures with metric equivalence for all respondents, and examining variables with conceptual equivalence for all participants are critical whether one is specifically studying ethnic differences in psychiatric symptom manifestation or, more globally, a school-based intervention's impact on children's self-esteem. Furthermore, given the multiethnic nature of society, it is impossible and inadvisable to avoid including research participants or subjects from more than one ethnic or racial group. Ethnicity, culture, gender, and even minority group status influence the entire research endeavor, even if these issues are not intended to be the primary foci of the research investigation.

### ASSUMPTIONS UNDERLYING ETHNICITY AND GENDER

Generally, concepts and assumptions concerning ethnicity and gender often are not explicitly stated, and we want to indicate our assumptions from the outset. First, ethnic and gender research can refer to research that is intended to better understand the groups in question (e.g., African Americans or women) or to serve as a comparison group with other groups (e.g., White American men). Second, the use of ethnic or gender terms, such as African Americans, Asian Americans, Hispanic Americans, Native Americans, White Americans, men, and women, are sometimes offensive; in using these terms, we are not suggesting that within-group heterogeneity is minimal. Third, it is important to place ethnic and gender research in the proper context. In the United States, ethnic groups and women often have minority group status; that is, they are frequently underrepresented or disadvantaged in socioeconomic, occupational, and educational mobility. Thus, the study of ethnic minority groups and women in this country can be distinguished from cross-cultural research, in which similarities and differences in individual psychological functioning, as well as the relationships between psychological variables and sociocultural, ecological, and biological variables, are examined (Berry, Poortinga, Segall, & Dasen, 1992). Culture is typically the independent variable. In ethnic minority research, the evaluations and contrasts involve not only people with different cultural origins but also those who have had years of interracial interactions (e.g., African Americans and White Americans). In addition to culture, the history of race/ethnic relations, sexism, prejudice, stereotyping, and discrimination must be taken into account. This history of interactions provides a context that is not identical to the cultural origins of the groups. Therefore, unlike cross-cultural research, ethnic minority and gender research may entail the examination of the main effects of culture and minority group status and the interaction among the variables. Finally, given our diverse society and world, understanding mental health and means to intervene with different groups is important because our knowledge base has largely been acquired on mainstream Americans. Research on these groups can also test the generality of theories or concepts. Thus, ethnic and gender research is good for science.

It is for these reasons that ethnic and gender issues have been combined. Although ethnic and gender issues are not identical—for example, women are not numerically a minority group in the United States or in the world—there are some similarities when it comes to issues of social class and opportunities for upward mobility. There are also similarities between ethnicity and gender in terms of the disproportionate exclusion of ethnic minorities and women in clinical research. It is not only the inclusion of women and ethnic minorities in research that is important but also examining issues that are pertinent to women and looking at issues from women's and the ethnics' perspectives (Reinharz, 1992; Stanley & Wise, 1993). Women have many jeopardies relating to ethnicity/race, gender, and class. Some issues particularly affect women, but there are other factors that have been disproportionately imposed on women due to sociopolitical circumstances, such as the lower status of women of color, the concept of paid work, domestic violence, rape, issues relating to the higher percentage of women below poverty level, women constituting a growing number of HIV-positive and AIDS cases, and so on. Typical clinical research designs, methodologies, and practices, when applied generically to ethnic minority and women samples, are often culturally biased and not sex-fair. Our recommended strategies for increasing the internal and external validity of clinical research reach both of these populations.

## PLANNING FOR RESEARCH

Any research that includes different racial/ethnic groups should be conceived and planned from the very outset by investigators who are culturally sensitive. Padilla and Lindholm (1995) argue that careful planning is necessary because a strong Eurocentric paradigm exists. A Eurocentric paradigm is based on a monocultural, male-oriented, and comparative approach, largely Anglo-Saxon or European in nature—an approach that utilizes research instruments and procedures widely employed for a White and generally middle-class group. Moreover, this group frequently serves as a normative population by which to judge other populations. Behaviors or characteristics that deviate from those of the normative population are often considered deviant or deficient. Padilla and Lindholm add that there is nothing wrong with the paradigm if the groups being compared are equivalent in demographic characteristics including social class, cultural background, and proficiency in English. However, in racial/ethnic and gender research, equivalency is difficult to attain.

How can the initial stages of research avoid paradigm problems? There are several steps that can be taken to assist in the planning of research. First, investigators are in a better position to conduct research with internal and external validity if they receive training in research techniques, such as ethnography. Ethnography is a means of data collection that elicits an in-depth analysis of a culture (Bernard, 1995) and covers a wide range of data collection and analytic techniques. Other areas of training should include race relations and ethnic and gender issues. Second, in research involving ethnic minority groups or women, cultural factors and background experiences should be considered in the methodology and design of the study. Some of the experiences include accounting for factors relating to the immigration and limited opportunities and resources for ethnics and women. Third, the research should include the participation

of appropriate investigators or collaborators who are familiar with the population to have points of view from cultural insiders.

## DEFINITION OF VARIABLES

One growing issue in race/ethnic research is the very definition of "race" and "ethnicity." Race has generally been defined as a subgroup of people who possess certain physical characteristics that are genetically determined and that are more or less distinct from other subgroups. Traditionally, three races have been proposed: Caucasoid, Mongoloid, and Negroid. On the other hand, ethnicity can broadly refer to a religious, racial, national, or cultural group (Gordon, 1978). Ethnicity is used as a social-psychological sense of "peoplehood," in which members of a group share a unique social and cultural heritage that is transmitted from one generation to another. Because culture is a defining characteristic, individuals in a particular ethnic group may share common behavioral patterns, attitudes, and values. Members also feel a consciousness of kind and an interdependence of fate with others in the group (Banks, 1987). Thus, Native Americans, Asian Americans, African Americans, and Latina/os may share with other members of their group beliefs about their fate or common struggles in the United States.

Racial and ethnic designations have raised a number of issues. First, differences in physical characteristics are often a matter of degree. Categorization is often difficult, especially because intermarriage among different races or biologically diverse groups has altered gene pools. In recognition of the complexities of making a racial designation, the U.S. Bureau of the Census now allows individuals multiracial self-designations. The same is true of ethnicity, where members of a particular ethnic group may share varying degrees of culture. Second, it can be argued that the recognition of three races is arbitrary. One can regroup physical characteristics of people to establish that there are only two races or more than three races. Third, psychological researchers rarely use biological markers or physical features to identify individuals from different races. Rather, they typically use social definitions of race, involving self-identification (e.g., individuals are African American if they designate themselves as such). Fourth, members of the same racial group may be different in terms of ethnicity, and members of the same ethnicity may be of different races. For example, Mexicans and White Americans may be considered Caucasian and yet be of different ethnicities. Members of different races may share ethnic identification; for example, acculturated Chinese Americans may consider themselves "American" just as Italian Americans do. Fifth, because of heterogeneity within and between ethnic minority groups, certain racial or ethnic designations may not have much meaning in predicting attitudes or behaviors. In the past, gross distinctions were made, such as between "Whites" and "non-Whites."

These issues in defining race, ethnicity, and culture have pointed to the problems in racial/ethnic research. Sometimes when trying to study race, one may actually be examining ethnicity (or vice versa). Because most psychological researchers rely primarily on self-reported designations, the reliability and validity of the designations depend on the research respondents' definitions. From a conceptual point of view, it is unclear if race or ethnicity is used as a demographic or psychological variable. When used as a demographic variable, race or ethnicity suggests that members of a group may have certain

behavioral or attitudinal tendencies. However, membership in a particular group cannot explain phenomena. Rather, the characteristics of a group influence behaviors. For example, knowing that Chinese Americans as an aggregate group are collective rather than individualistic in personality characteristics is less interesting than identifying those social, temperamental, or cultural characteristics that influence collectivism. For instance, socialization with values of interpersonal harmony and maintaining "face" may be important determinants of collectivism, and it just so happens that Chinese Americans are more likely than Caucasians to emphasize these values. It is also apparent that group membership alone may not mean that individuals are exposed to these values. For instance, a Chinese American individual may not be socialized to these values and, hence, not be collectivistic in orientation. Thus, racial or ethnic designations tend to mask the social, temperamental, or cultural heterogeneity that is often found in any group. They are often proxy variables for other variables of interest. Yee, Fairchild, Weizmann, and Wyatt (1993) have called for the establishment of a comprehensive scientific policy on race to guide research. One of their concerns is that studies of race have often been used to portray African Americans in a negative manner, such as research alleging the genetic inferiority of African Americans in intelligence when the very concept of race is problematic.

It should be noted that research on an aggregate, such as Hispanics, might be appropriate to the extent that members of the aggregate share characteristics regardless of other within-group differences. For example, if Mexican Americans, Cuban Americans, and Puerto Ricans tend to be collectivistic in orientation, then combining these groups and comparing them to noncollectivistic groups may be appropriate. This, of course, assumes that within- (Hispanic) group differences do not significantly interact with collectivism.

Because we are faced with problems associated with the definitions of race and ethnicity, we have several suggestions that may be helpful in addressing some of them. First, when racial or ethnic group individuals are included in research, investigators should explicitly state how the groups are defined. If self-report measures are used, was group membership ascertained through an open-ended question or through racial/ethnic categories? If the latter was used, what categories were employed? The question is important in helping to determine the possible limitations that may exist because of the method of defining groups. Second, researchers should try to describe as precisely as possible the characteristics of samples. Here, a number of variables may be important to consider (such as social class and education) that may be confounded with race and ethnicity. To replicate the study's findings, the subject population needs to be described with enough detail. Padilla and Lindholm (1995) have criticized previous studies that merely state that the sample was predominantly White or that the sample was composed of a certain percentage of Whites, African Americans, and so on. It would be helpful to know more detailed information on the subjects: social class, educational level, immigration experiences, the process of acculturation, social and economic stressors, and so on. Third, ideally, when racial or ethnic differences are predicted or observed, the underlying variable accounting for the results should be identified and studied. As mentioned earlier, race and ethnicity are not explanatory variables. Rather, findings from a study can usually be attributed to the characteristics associated with race or ethnicity (often determined by biological or cultural background). For example, the fact that

Asians are concerned about shame and stigma in interpersonal relationships is not attributable to being Asian; rather, Asians may be culturally socialized to values involving "face" that influence feelings of shame and stigma.

There are variables that may be defined differently by men and women, for example, the concept of work. Paid labor is the recognized or measurable economic indicator of economic viability or even in some cases of "independence." However, there are issues relating to housework, which falls under the category of unpaid labor, that are particularly pertinent in Third World rural economies. These activities are predominantly done by women and are crucial for the survival of the family. For example, gathering firewood or fetching water can sometimes take more than half a day to procure. In these situations, it is important to be explicit about the meaning of housework.

### SELECTING MEASURES AND ESTABLISHING CROSS-CULTURAL AND LANGUAGE EQUIVALENCY

When selecting or adapting measurement instruments, care must be taken to ensure that the instruments measure meaningful psychological concepts and measure them in ways that produce valid results for the population of interest (Brislin, 1993; Herrera, Delcampo, & Ames, 1993). There are several issues to address when selecting and adapting measures: (a) translation or language equivalence, (b) cultural and socioeconomic equivalence, (c) conceptual equivalence, and (d) metric equivalence. Especially for ethnic minority populations for whom English language proficiency levels may require instruments to be translated, achieving translation or language equivalence is a necessary priority. Language equivalence exists when the descriptors and measures of psychological concepts can be translated well across languages. Cultural and socioeconomic equivalence is related to language equivalence. Translated measures must take into account the cultural and socioeconomic factors of the target population to be understandable to and meaningful for that population. Conceptual equivalence refers to whether the construct being measured exists in the thinking of the target culture and is understood in the same way. For example, cultural variations may exist in the concept of maturity. In the United States, maturity often is associated with autonomy, independence, and wisdom. In more collectivistic societies, maturity may involve the ability to function and work with others to be interdependent rather than independent and autonomous. Needless to say, administering an instrument that taps aspects of maturity in the United States may not provide the most valid assessment of maturity for members of other cultures. Finally, metric or scalar equivalence refers to the analysis of the same concept and the identical measure across cultures, with the assumption that the scale of the measure can be directly compared. For example, one may consider whether an IQ score of 100 on a certain intelligence scale may be truly equivalent to a score of 100 on the translated version of the same intelligence scale.

Herrera et al. (1993) provide step-by-step procedures to achieve reliable and valid instrument translations. Their serial approach consists of essentially three steps: (a) translation into the second language, (b) back-translation to the original language, and (c) field testing for reliability and validity of the two languages. In addition, they make several specific recommendations for carrying out these steps to help prevent

some common pitfalls that may result from these conventional translation procedures. Translations that are produced should be not only accurate but also understandable and relevant to the intended population. First, translators should take into account cultural and socioeconomic factors and reading level of the target population. Skilled translators are often well educated and consequently do not always match the education levels of the intended population of study. It is, therefore, beneficial to employ translators who are not only skilled at translating but also have knowledge of which words and topics may not be very easily understood by this target population because of educational, cultural, or class backgrounds. Second, it is recommended to use a small team of translators, at least more than two, who, after completing their translations independently, convene to discuss and resolve any translation differences. Third, to ensure that the translation is relevant and understandable, focus groups or group interviews should be conducted with participants who represent the target population. Using small representative samples, investigators can identify translation and conceptual equivalency problems and make the necessary modifications at that time. Fourth, certain criteria need to be considered in the selection of back-translators. Skilled, bilingual, and well-educated translators make good back-translators. However, ironically, their valuable abilities also increase the risk of their making correct inferences from translations that may in reality be quite poor. To minimize such errors, we agree with Herrera et al.'s suggestion to employ several bilingual persons of different educational backgrounds to perform the back-translation task, or use translators from the target population. Last, when field testing the translated instruments, it is important to select a truly linguistically representative sample. That is, if ultimately the intended population is monolingual, a bilingual sample is not adequate for the field trial. Several researchers have pointed out the flaws in assuming that monolingual and bilingual samples are equivalent (e.g., Diaz, 1988).

For example, to examine the validity of a Mandarin (Chinese) translated instrument that was originally developed in English among a monolingual Mandarin-speaking sample, test-retest reliabilities should be compared to monolingual English- and monolingual Mandarin-speaking samples. High test-retest reliability among the English-speaking sample and low test-retest reliability among the Mandarin-speaking sample would indicate problems in the translated version. However, low test-retest reliability among the English-speaking sample would suggest reliability with the original English instrument itself. Furthermore, to establish the validity of this same Mandarin translated instrument among a bilingual English-Mandarin-speaking sample, two bilingual samples should be tested to control for administration order effects. In other words, one bilingual sample would be administered, the English instrument at pretest and the Mandarin version at posttest; the second bilingual sample would be administered in the reverse order. Low test-retest reliability among the bilingual sample and significant differences between the bilingual and monolingual samples most likely indicate problems with the translation.

In many cases, it is not possible to devise and validate new assessment instruments for particular ethnic populations. This is sometimes due to limited resources and availability of experienced researchers and clinicians who speak the language and understand the culture to develop new instrumentation. If one must use existing measures, see if the test or assessment instrument has been standardized and normed on

people from countries that were affected by U.S. colonialism, war, and neocolonialism, for example, Filipinos, Vietnamese, and other Southeast Asians (Lowe, 1996). Despite these diverse social histories, in most studies in the United States, Asian and Pacific Islander Americans are assessed in research, delivery of services, and policy as a single, homogeneous unit (True & Guillermo, 1996; Wang, 1995). These homogeneous units also do not account for the various types of institutionalized discrimination based on gender, race, ethnicity, and language. All these issues compound the existing socioeconomic factors such as low levels of income and education and the lack of social networks (Mayeno & Hirota, 1994). By considering the Asian and Pacific Islander Americans as a homogeneous group, we ignore sociohistorical, cultural, economic, and political diversity.

Even if we examine one particular group among the Asian American population, the heterogeneity is problematic and not encountered to the same extent by Asians in their homeland. For instance, the Chinese in the United States are more diverse than the Chinese population in overseas parts of the world. Chinese in the United States are composed of both native and foreign-born individuals who come from mainland China, Taiwan, Hong Kong, Singapore, Vietnam, and elsewhere, who speak many dialects and languages, who are exposed to varying degrees to "American" values, and who are members of a minority group. The same is true of nearly all Asian American groups—greater heterogeneity exists for their group in the United States than in their homeland. This means that measures (such as the Minnesota Multiphasic Personality Inventory II) validated with Chinese in China may not have good validity for Chinese in the United States (see Chapter 7).

Given the difficulties in finding adequate samples of certain ethnic minority populations, researchers must often resort to finding convenience samples from quite different sources. For example, the samples may come from lists of ethnic organizations, names suggested by other respondents (the snowballing technique), and universities rather than communities at large.

In some cases, it has been possible to apply sophisticated sampling techniques to study small minority groups, for example, in the Chinese American Epidemiological Study in Los Angeles County (Zheng et al., 1997). Because Chinese Americans constituted less than 3% of the total population in Los Angeles County in 1990, only those geographic areas were selected where Chinese Americans made up at least 6% of the population in a given census tract. This criterion increased the probability of locating a Chinese American household, making the survey more cost effective than conducting a random sample of all census tracts in the county. If the proportion criterion were lowered, it would significantly increase the cost of locating and screening for eligible households. In the final sample, the Chinese population in the selected tracts ranged from 6% to 72.3%. According to the 1990 Census, 149,513 Chinese lived in these tracts, which is approximately 61.1% of the 244,767 Chinese in the county. Although this sample design is the most sophisticated one used for an Asian American group to date, it has a significant limitation. It undersamples people who reside in less ethnically dense areas. These geographic areas are most likely to include wealthier, more native-born, and more long-term residents of the United States. Similar sampling strategies with some variations have been applied to sampling African Americans (Jackson & Hatchett, 1985; Smith, 1993).



Thus, it is possible to devise strategies to find adequate samples of ethnics, though these can be expensive. However, researchers must be aware of the biases and limitations that occur when certain strategies are used.

## GAINING COOPERATION FROM RESEARCH PARTICIPANTS

Regardless of the form in which data are collected, there are three basic elements necessary to solicit information from the respondent: empathy, participation, and observation (Gorden, 1980). *Empathy* is understanding how the respondent feels about issues. *Participation* in research is the ability to observe another's activity and response or by way of inference identify and record the respondent's thoughts and feelings. *Observation* is using any sensory ability that helps one to understand human behavior. These three methods are integral to all methods of studying human behavior. As such, interviewing utilizes empathizing, participating, and observing that takes place between the researcher and the researched.

Because the whole process of research can involve power relations between the researcher and the researched, the commitment to conduct research should involve the reduction of this unequal power relationship between the two parties. This may require reframing of research questions to better fit cognitively with the researched. In cross-cultural research, it is also possible that respondents are unfamiliar with the questionnaire process. Recording responses to questions and methods of asking that they do not understand can lead to anxiety among the respondents. This anxiety is heightened by their experiences of government bureaucracy and distrust of governments and by their fear that the information may be used against them. For example, in a study in Tanzania, a demographic survey led to people getting anxious because they were concerned with giving the "right" answers and were afraid of not providing all the "correct" information. In this case, the researchers used the survey as an entry point to the home of the researched and to establish rapport. However, they did not use the information gathered in the survey. Thus, by gaining entry into the homes of the people, they were able to solicit information on issues pertaining to the study by way of a dialogue between the researcher and the researched (Michau, 1998).

While conducting surveys that are sensitive and lengthy and that require in-depth information from the respondent, establishing rapport is imperative. In feminist research, the process becomes a dialogue between the researcher and the researched. As such, an effort is made to examine, explore, and clarify the topic and concepts being discussed. Through this process, rapport is established, making it possible to accomplish lengthy research agendas and explore sensitive topics. Therefore, the process of interviewing is not impersonal, and neither the subjectivity of the researcher nor the researched can be totally eliminated (Acker, Barry, & Esseveld, 1991).

In the research of cross-cultural ethnic populations and women, the interviewing process is not objectified, but there exists a two-way sharing of information. Thus, it has been argued that feminist research involves reciprocity between the researcher and the respondent (Mies, 1991). By this, researchers and those being researched are not in a power relationship but come together to understand and explain the aspects being studied in their totality. This two-way sharing of information leads to a deeper

understanding of the research topic. For example, when women's roles in Third World countries are discussed, it is impossible to exclude from the discussion the discrimination faced by women in general, be it that of the researcher or the researched. By exploring issues and experiences common to and different from each other, a new understanding of the subject emerges. Thus, when exploring issues relating to Third World countries, the role of the First World should be discussed. Similarly, when talking of women, men must be included; when exploring issues of poverty, wealth must be understood. Feminist research also emphasizes the role of affect in the creation of knowledge. This is largely an outcome of women's greater familiarity with emotions and feelings and their meanings (Gilligan, 1982).

In conducting research on mental health issues of concern to ethnically diverse populations, respondents may be reticent in answering questions on their feelings or emotions, making the process of collecting data longer than anticipated. Assessing one's emotions is thought to be a luxury in non-Western cultures, and people from those cultures do not easily respond to questions about their emotions and feelings. Offering monetary incentives to answer questionnaires may fail in societies such as India, whereas that approach may be successful in eliciting answers to lengthy questionnaires in the United States. This is largely because participation in a study in societies and cultures like India would be considered a favor to the researcher and cannot be monetarily valued. To gain access to individuals to participate in a study where personal questions are being asked requires the researcher to have a point of reference, which is achieved either by way of a formal introduction or by common knowledge in the community about the researcher. In either situation, money transactions would not be appropriate.

Issues relating to privacy and confidentiality are particularly relevant when interviewing minorities and women. Many live in large families, and extensive periods of contiguous time for an interview or dialogue may be unavailable. Respondents may seem hesitant to discuss issues openly when they fear being overheard by other members of their family and community. Other issues of privacy surround videotaping and photographing, especially when conducting research among traumatized populations cross-culturally. For example, in studies of domestic violence, videotapes or photographs of the women researched should not be used in any community awareness or outreach programs. Other than the ethical issues, there is a potential danger to the woman of being abused further by her partner, as well as feelings of shame and loss of face in the community.

Obtaining consent to participate in the research also varies among cross-cultural and ethnically diverse populations. The standard consent forms used are not always appropriate to administer in these populations. Understanding the consent is related to the respondent's cognizance of aspects such as the research process and also the respondent's language and literacy level. Sometimes, verbal consent may be more appropriate.

Because the goal of feminist and cross-cultural research is the "liberation" of the population or affecting change in the community through the research process, the involvement of people in the community is essential (Mies, 1986; Mobley, 1997). If the community in which the research is being conducted feels an ownership to the research and invested in the outcome, this can significantly increase participation of respondents, further enhancing the research agenda. For example, in her study in India, Mies tried to reconcile the research agenda with the women's movement. Though the research

project was mainly to explore the effect of market economic (capitalist) development on poor rural women, the researchers, in this case, lived in the communities and experienced the life of poor rural women. They were able to establish rapport with the women and learn about working hours, exploitation, discrimination, wages, and so on. The researchers also passed on information from their research to the women, which led to existing women's organizations organizing meetings to work on solutions to contend with alcoholism among the men and wife abuse.

## RESEARCH DESIGN AND STRATEGIES

As mentioned earlier, mainstream diagnostic concepts, theoretical orientations, and treatment models are laden with values, beliefs, and attitudes representative of the mainstream U.S. culture from which they were derived. Administering mainstream measurement instruments nonselectively across all ethnic and cultural groups in our diverse society has very limited value, and perhaps some notable risks, such as in issues relating to relevance of concepts, translation, and language equivalency.

How, then, do we establish an understanding of relevant concepts and theoretical frameworks across diverse cultures, and how do we ensure that research findings are interpreted within the appropriate cultural context? We would like to discuss two strategies that are helpful in ethnic minority or cross-cultural research: qualitative methods and parallel research. Burton (1997) believes that qualitative and ethnographic methodologies are needed to understand the meanings, patterns, rules, and behaviors that exist in ethnic minority communities. Yet, graduate programs in psychology tend to emphasize quantitative methodology. Qualitative methodology can be of great utility, especially when used in conjunction with quantitative strategies. Although the contribution of qualitative research is by no means limited to ensuring conceptual equivalence, theory development, or interpreting quantitative findings (i.e., it is not simply preliminary or supplemental to quantitative analysis), certainly these strengths are highlighted when it comes to cross-cultural research. Also, it should be noted that use of the global term qualitative research is not intended to simplify the vast number of methodologies that fall within this category. The use of the term here is to emphasize the emic (culture-specific) nature of the approach to research investigation. Nor do we intend to fuel the unproductive debate that pits qualitative research against quantitative methods. Rather, methodological choice involves assessing the level of measurement available and appropriate for a given study (Weisner, 1997). The level of measurement available from qualitative approaches is appropriate for cross-cultural clinical research by which we attempt to better understand indigenous concepts and patterns, and can be quite complementary to other quantitative strategies that are more typically employed by psychologically minded researchers.

Qualitative research encompasses numerous methodologies, too many to be adequately covered here, that have in common an emic approach to understanding human behavior and other phenomena. In conducting cross-cultural clinical research, the use of emic approaches facilitates the discovery of so-called new concepts—that is to say, new to the “outsider” who is conducting the research and indigenous to the culture of interest. There are a number of such emic approaches long known to other

social scientists that are becoming more widely accepted by psychological researchers. Two popular techniques are open-ended interviews and focus groups. Both individual interviews and focus groups have gained rapid popularity, most likely because they are efficient, minimally intrusive, and relatively systematic in implementation and data analysis. Interview and focus group techniques are useful because they provide the cross-cultural researcher the tools to explore both emic and etic (culture-general or universal) questions (for a discussion of emic and etic approaches, see Berry, 1969). Their open-ended nature allows the researcher to discover new or indigenous concepts. Yet, their semistructured format allows the researcher to examine a priori research questions as well (e.g., conceptual equivalence of a Western-based diagnostic construct such as depression). In the latter use of these methods, the researcher is using an etic perspective (i.e., does my Western concept of depression have any importance in this other culture?) but applying an emic-oriented approach to the manner of the investigation.

Another important feature of qualitative approaches generally is that qualitative strategies allow the cross-cultural researcher to access "meanings." Semistructured interviews and focus groups, in particular, enable the researcher to understand the meanings of quantitative data; for example, what a response valence of 5 on an item means to a respondent, where 5 is high on a Likert scale of 1-5. Respondents' interpretations may or may not be veridical; however, knowing their interpretation allows the researcher to place responses in a context. These techniques can provide valuable data, but careful effort must be made to ensure that the opinions represented are actually those of the targeted population. For example, if the target population is a low socioeconomic (SES) subgroup within a particular ethnic group, care must be taken to ensure that the opinions represented are not those of the highest SES members within the targeted ethnic group who are most English proficient.

Other techniques have been somewhat slower to gain recognition in the psychology research field. Ethnography, for example, despite its value for cross-cultural research, is not commonly used. Most likely, ethnographic designs are less enticing to psychological researchers due to the time involvement of the required fieldwork, as well as the questions these ethnographic methods raise in terms of objectivity. However, it is important to challenge ourselves to explore beyond our quantitative research training as psychologists. As we respond to the need to better understand diverse cultures and develop culturally responsive clinical interventions, we can greatly benefit from the use of ethnographic strategies.

Another important consideration in our discussion of research methodology is the devising of designs that yield insight into the nature of cultural or group differences. Three approaches can be used in cross-cultural research designs, as discussed by Zane and Sue (1986): (a) point, (b) linear, and (c) parallel. *Point research* refers to isolated group comparisons on one construct or set of constructs derived from one culture. For example, one may want to compare the prevalence of depression among African Americans and White Americans; though this task appears to be rather straightforward, what is unclear is how to interpret findings from this comparison. Care must be exercised in assuming that any observed ethnic or racial differences reflect actual differences according to an assumed construct. For example, Dohrenwend and Dohrenwend (1969) found that Puerto Ricans scored higher than other ethnic groups on a measure

of psychopathology, the Midtown Questionnaire. As noted later, the results do not necessarily reflect a greater degree of maladjustment on the part of Puerto Ricans because conceptual equivalence of items on the questionnaire may be lacking across different ethnic groups. In the monocultural approach using monocultural measures, alternative explanations based on cultural differences in values and behaviors are always post hoc. Thus, point research does not allow us to know if the group differences are real or why the differences exist.

To determine if differences are "real" and not simply a measurement problem, a *linear research* model has developed. Linear research involves a series of studies aimed at systematically testing the set of hypotheses predicted by the theory underlying the single construct of interest. As in point research, this construct is usually developed from a monocultural or single perspective. However, rather than one isolated study, there are two or more empirical points of reference on which to compare cultural groups. If the pattern of cultural differences (or similarities) manifests according to the construct's theory, the construct is considered to be a universal that allows for meaningful cultural comparisons.

The use of linear research can be illustrated by examining studies conducted by Dohrenwend and Dohrenwend (1969). The investigators were interested in determining if certain ethnic groups differed in psychopathology. After administering a measure of psychopathology, the Midtown 22-item symptom questionnaire, ethnic differences were found, with Puerto Ricans scoring higher in psychological disturbance than did Jewish, Irish, or African American respondents in New York City. Obviously, at this point the investigators used a point research strategy. But how did they know if the Puerto Ricans were actually more disturbed or if the findings were simply an artifact of the measure? To ascertain whether the differences were valid, patients matched on types of psychiatric disorders from each ethnic group were administered the same questionnaires. Dohrenwend and Dohrenwend assumed that because patients were matched on type and presumable severity of disorders, there should be no differences in psychopathology scores on the symptom questionnaire. However, after administering the symptom questionnaire to the patient groups, Puerto Ricans again scored higher. The investigators concluded that the higher scores for Puerto Ricans probably reflected a response set or a cultural means of expressing distress on the questionnaire rather than actual rates of disturbance.

Thus, linear approaches can help to determine if differences are real or an artifact of the monocultural measurement instrument. The limitation is that once the differences are shown to be real, we still do not know why the differences exist or whether a construct developed from an alternative perspective (e.g., an explanation derived from another culture) can better explain the phenomena under study. Linear studies do not actually balance ethnic perspectives in research. They simply test the adequacy of one perspective in the absence of the other. This is unfortunate because almost all linear research has focused on the cross-cultural applicability of constructs derived from our Western viewpoint.

To truly represent ethnic minority perspectives, research must develop separate but interrelated ways of conceptualizing the behavioral phenomena of interest, one based on a Western conceptualization, the other reflecting an ethnic minority interpretation. Essentially, *parallel research* designs consist of two linear approaches, each based on

an alternative cultural viewpoint. In parallel research, it is incumbent upon the researcher to develop *a priori* two sets of descriptive and explanatory variables. By requiring the concurrent examination of different cultural explanations, the parallel approach fosters divergent and flexible thinking. In the parallel approach, the salience of a construct is empirically tested by comparing it with another equally plausible explanatory concept developed from the ethnic group's host culture. Thus, we should increasingly employ parallel research designs to test Western versus more indigenous explanations for observed ethnic or racial differences.

## INTERPRETATION OF FINDINGS AND VALIDITY

When comparisons are made between various ethnic minority groups or between men and women, differences between the groups cannot be routinely assumed to reflect deviance or undesirable characteristics among these groups (i.e., a deficit model interpretation). Similarly, the desirability or undesirability of characteristics is frequently specific to a particular culture, and we should not make the mistake of assuming that others' deviations from one's own norms are necessarily undesirable. This is not to adopt absolute relativism in which there are no standards that cross all groups. Rather, if we have erred, it is typically in the direction of using monocultural standards.

There are other tactics that can be used to improve the ability to make interpretations. Effects of peripheral and extraneous variables (such as immigrant history, social networks, and economic stressors) to the model can be eliminated or controlled through statistical means through the use of regression or covariates. Another method of controlling for unique interpretations is stating the dependent variable as a function of either two or more scores (Berry, Poortinga, Segall, & Dasen, 1992). As noted earlier, if we find certain psychological disorders being much higher than the norm in the samples being studied, this is not necessarily due to higher rates of psychopathology in these populations. It could possibly be attributable to the scale's not being normed for the population being studied or to cultural definitions of certain psychological disorders. We suggest that researchers look at correlations of these symptoms with other pertinent variables. The same is true conversely when extremely low levels of psychological symptoms are identified. This does not mean the absence of a particular psychopathology. Here the pattern of the response of the individuals would provide more information than just the absolute score.

In qualitative research, it is sometimes suggested that the data and the interpretations be taken back to the respondent to be validated. This, it is argued, eliminates the possibility of erroneous inferences and interpretations. In general, researchers should avoid the adoption of a deficit model and use appropriate statistical techniques to control extraneous variables and explanations. Research results should be cautiously interpreted in view of the cultural backgrounds of various groups. Alternative explanations for the outcome of investigations should be considered, including those indigenous to the groups being studied. When problems in the interpretation of findings arise, investigators unfamiliar with a particular population should become aware of the literature on the population and consult with those who have expertise on this population.

In this chapter, we have tried to point to the issues involved in conducting ethnic minority and gender research. It is apparent that ethnic and gender considerations should enter into all phases of the research and that many of our suggestions are simply good general research practice.

## RESEARCH TRAINING

To enhance research training on these issues, a number of steps should be taken in training programs. Ponterotto, Alexander, and Grieger (1995) have outlined certain criteria by which training programs can be evaluated for their multicultural emphasis. They include:

1. Recruitment of a critical mass of ethnic minority students, faculty, and staff. At predominantly White campuses, the authors suggest that training programs include about 30% minority representation.
2. Teaching of ethnic and gender courses or integration of ethnic and gender issues into all courses. Programs should experiment with different teaching and evaluation methods to find strategies that are effective.
3. Exposure to clients and supervisors who come from different ethnic groups.
4. Having faculty and students who are engaged in ethnic and gender research and encouragement of such research among students.

We believe that by dealing with ethnic minority and gender issues in research, students will become better researchers because dealing with such issues requires sensitivity, ingenuity, avoidance of ethnocentrism, cultural sophistication, and a thorough knowledge of rigorous research methodology.

## REFERENCES

- Acker, J., Barry, K., & Esseveld, J. (1991). Objectivity and truth: Problems in doing feminist research. In M. M. Fonow & J. A. Cook (Eds.), *Beyond methodology: Feminist scholarship as lived research*. Bloomington: Indiana University Press.
- Asian and Pacific Islander Center for Census Information and Services. (1993). *A profile of Asian and Pacific Islander immigrant populations in California*. San Francisco: Asian/Pacific Islander Data Consortium.
- Banks, J. A. (1987). *Teaching strategies for ethnic studies*. Boston: Allyn & Bacon.
- Bernard, H. R. (1995). *Research methods in anthropology*. Walnut Creek, CA: AltaMira Press.
- Berry, J. W. (1969). On cultural comparability. *International Journal of Psychology*, 4, 119-128.
- Berry, J. W., Poortinga, Y. H., Segall, M. H., & Dasen, P. R. (1992). *Cross-cultural psychology: Research and applications*. New York: Cambridge University Press.
- Brislin, R. W. (1993). *Understanding culture's influence on behavior*. New York: Harcourt Brace Jovanovich.
- Burton, L. M. (1997). Ethnography and the meaning of adolescence in high-risk neighborhoods. *Ethos*, 25, 208-217.

- Diaz, J. O. P. (1988). Assessment of Puerto Rican children in bilingual education programs in the United States: A critique of Lloyd M. Dunn's monograph. *Hispanic Journal of Behavioral Sciences*, 10, 237-252.
- Dohrenwend, B. P., & Dohrenwend, B. S. (1969). *Social status and psychological disorder*. New York: Wiley.
- Gee, E. (1982). Issei women. In N. Tsuchida (Ed.), *Asian and Pacific American experiences: Women's perspectives* (pp. 66-87). Minneapolis, MN: Asian/Pacific American Learning Resource Center.
- Gilligan, C. (1982). *In a different voice*. Cambridge, MA: Harvard University Press.
- Gordon, M. M. (1978). *Human nature, class, and ethnicity*. New York: Oxford University Press.
- Gorden, R. L. (1980). *Interviewing: Strategy, techniques, and tactics*. Homewood, IL: Dorsey Press.
- Gynther, M. D. (1972). White norms and black MMPIs: A prescription for discrimination? *Psychological Bulletin*, 78, 386-402.
- Herrera, R. S., Delcampo, R. L., & Ames, M. H. (1993). A serial approach for translating family science instrumentation. *Family Relations*, 42, 357-360.
- Hirata, L. C. (1982). Chinese immigrant women in nineteenth century California. In N. Tsuchida (Ed.), *Asian and Pacific American experiences: Women's perspectives* (pp. 38-65). Minneapolis, MN: Asian/Pacific American Learning Resource Center.
- Jackson, J., & Hatchett, S. (1985). Intergenerational research: Methodological considerations. In N. Data, A. L. Greene, & H. W. Reese (Eds.), *Intergenerational relations*. Hillsdale, NJ: Erlbaum.
- Lowe, L. (1996). *Immigrant acts*. Durham, NC: Duke University Press.
- Mayeno, L., & Hirota, S. M. (1994). Access to health care. In N. W. S. Zane, D. T. Takeuchi, & K. N. J. Young (Eds.), *Confronting critical health issues of Asian and Pacific Islander Americans*. Thousand Oaks, CA: Sage.
- Michau, L. (1998). *Research and action against sexual coercion in Mwanza, Tanzania: The experience of the Jijenge Project*. Paper presented at the International Research Network on Violence Against Women, The Health and Development Policy Project, Washington, DC.
- Mies, M. (1986). *Indian women in subsistence and agricultural labor*. Geneva: International Labour Organization.
- Mies, M. (1991). Women's research or feminist research? In M. M. Fonow & J. A. Cook (Eds.), *Beyond methodology: Feminist scholarship as lived research*. Bloomington: Indiana University Press.
- Mobley, C. (1997). Toward a new definition of accountability: Using applied ethnography as a toll for change in the voluntary sector. *Journal of Contemporary Ethnography*, 26(1), 75-97.
- Padilla, A. M., & Lindholm, K. J. (1995). Quantitative educational research with ethnic minorities. In J. A. Banks & C. A. McGee-Banks (Eds.), *Handbook of research on multicultural education* (pp. 97-113). New York: MacMillan.
- Ponterotto, J. G., Alexander, C. M., & Grieger, I. (1995). A multicultural competency checklist for counseling training programs. *Journal of Multicultural Counseling and Development*, 23, 11-20.
- Reinharz, S. (1992). *Feminist methods in social research*. New York: Oxford University Press.
- Rogler, L. H. (1989). The meaning of culturally sensitive research in mental health. *American Journal of Psychiatry*, 146, 296-303.
- Smith, W. (1993). Survey research on African Americans: Methodological innovations. In J. Stanfield & R. Dennis (Eds.), *Race and ethnicity in research methods*. Newbury Park, CA: Sage Focus.



- Stanley, L., & Wise, S. (1993). *Breaking out again: Feminist ontology and epistemology*. New York: Routledge & Kegan Paul.
- Triandis, H. C., & Brislin, R. W. (1984). Cross-cultural psychology. *American Psychologist*, 39, 1006-1016.
- True, R. H., & Guillermo, T. (1996). Asian/Pacific Islander American women. In M. Bayne-Smith (Ed.), *Race, gender, and health* (pp. 94-120). Thousand Oaks, CA: Sage.
- Wang, G. M. (1995). Health issues for Asian/Pacific Islander women. In D. L. Adams (Ed.), *Health issues for women of color*. Thousand Oaks, CA: Sage.
- Weisner, T. S. (1997). The ecocultural project of human development: Why ethnography and its findings matter. *Ethos*, 25, 177-190.
- Yee, A. H., Fairchild, H. H., Weizmann, F., & Wyatt, G. E. (1993). Addressing psychology's problems with race. *American Psychologist*, 48, 1132-1140.
- Zane, N., & Sue, S. (1986). Reappraisal of ethnic minority issues: Research alternatives. In E. Seidman & J. Rappaport (Eds.), *Redefining social problems* (pp. 289-304). New York: Plenum Press.
- Zheng, Y. P., Lin, K. M., Takeuchi, D. T., Kurasaki, K. S., Wang, Y., & Cheung, F. (1997). An epidemiological study of neurasthenia in Chinese-Americans in Los Angeles. *Comprehensive Psychiatry*, 38(5), 249-259.