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Guidelines for Adapting Structural Family Therapy Approach for Immigrant Generation

East Asian American Families

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Abstract

The author developed detailed guidelines for adapting the structural family therapy approach for therapists who work with immigrant east Asian American families. Due to different acculturation levels among family members, immigrant parents often have conflicts with their children, which have become an important reason why Asian American families seek mental health services. The review of both traditional east Asian family-related cultural values and European American cultural values illustrates the parenting emphases that vary to a great extent between these two broad cultural groups. The widely accepted child development theories, parenting theories, and family therapy approaches were developed primarily based on European American populations. Asian American parenting approaches are often regarded as less favorable when they are evaluated using the Western parenting standards. However, many studies indicated that the traditional Asian American parenting approaches, including the parents’ emphasis on respect for elders, interdependency, self-control, and education, did not impact the children negatively. Studies suggested reduced treatment effectiveness when therapists treat east Asian families using Western developed family therapy approaches, such as structural family therapy, without adaptation. The author adapted each structural family therapy technique for immigrant east Asian family by incorporating their traditional parenting values into the standard techniques.
Introduction

Many studies (Fuligni, Tseng, & Lam, 1999; Juang, Cookston, Wang, & Kim, 2012; Phinney, Ong, & Madden, 2000) have indicated a significant discrepancy between immigrant generation east Asian parents’ perception and their US-born teenagers’ perception of parent-child relationships. For example, Asian American parents rated a higher level of warmth in their relationship with children, but the Asian American teenagers rated a lower level of warmth (Padmawidjaja & Chao, 2010). This difference in perspectives often leads to conflicts between parents and children, which has been a consistent focus of family therapy for east Asian Americans. Family cultural conflicts have been shown to be a significant predictor of mental health service utilization among east Asian Americans (Lee & Yoshida, 2005).

The current predominant family therapy approaches were developed based on Western cultures. Many of the Western parenting concepts are counterintuitive to many immigrant generation east Asian American parents due to their emphasis on interdependence, whereas independence is stressed in white American culture (Bornstein, 2005). Without parents’ cooperation, it is more likely that there will be poor treatment adherence. Thus, it is important to understand east Asian parents’ beliefs about parenting and incorporate their beliefs into the current family therapy models.

The goal of this paper is to provide specific guidelines for how to incorporate east Asian parents’ beliefs into structural family therapy. The paper will focus on parents who immigrated from the east Asian countries of China, Japan, and South Korea, since these three countries’ parenting beliefs and family related cultural values are very similar to each other and are heavily influenced by Confucian ideology (Bornstein, 2005). In addition,
given the large differences between other Asian countries’s cultural backgrounds, such as India or Thailand, and east Asian cultures, it will very difficult to discuss and adapt structural family therapy for every Asian country. I will describe the primary traditional family related values, which are the foundation of east Asian American parenting approaches.

To contrast, I will also review the cultural foundations of traditional European American parenting. Although there are variations among the four predominant white American ethnic groups, including German Americans, Anglo Americans, Irish Americans, and Italian Americans, their descendants have lived in the U.S. for several generations and their cultural values have become very similar to each other (Hess, & Hess, 2001). Many of them tend to identify themselves as “white American” (Alba, 1990). I will introduce the consistently identified cultural values that characterize white American culture. Each value affects European American parenting beliefs, child development theories, and child rearing approaches (Hess, & Hess, 2001). I will also compare and contrast the parenting differences between these two broad cultural groups.

I have chosen to focus on adapting Minuchin’s structural family theory because it “is the most influential approach to family therapy throughout the world” (Nichols, 2012, pp123). I will review major structural family therapy techniques and discuss the compatibility of these techniques when applied to east Asian American families. Most important, I will discuss how to adapt each technique to east Asian American families.

**Traditional East Asian Cultural Values**

The Confucian ideology and collectivism are deeply embedded in east Asian parenting beliefs and have shaped the east Asian parents’ emphasis on (a) filial piety and
interdependency among family members, (b) self-control, and (c) the importance of education. These three parenting emphases have been consistently identified across my three specified east Asian countries (Kim & Wolpin, 2008; Kim, 2009; Sakamoto, Kim, & Takei, 2012).

Filial Piety and Interdependency

Although today east Asian parents do not actively teach children Confucian doctrines, Confucian ethics are still deeply imbedded in their daily lives and their interactions with children (Wu, 2001). Confucian philosophers defined five key hierarchal relationships, one of which is children’s obedience and respect of parents. Confucians regard children’s reverence to parents as filial piety. Confucians believe that since children’s bodies originated from their parents, this places parents in an authoritative and superior position, and thus children are required to follow their lead. Confucians also consider filial piety as a primary code of conduct, and the concept of filial piety still pervades in Chinese, Japanese, and Korean society (Kim & Wolpin, 2008; Shibusawa, 2001; Wu, 2001).

Confucianism is an important part of the foundation of collectivistic cultures. In individualistic cultures, the individual is perceived as a separate entity with a unique personal identity. However, Confucians consider a family as “a whole person,” such that “each role in the family represents a distinct part of the human body, and together they constitute an inseparable entity” (Hwang, 1999, p. 170). In other words, each family member is in an interdependent relationship with each other. Family members rely on each other to meet their personal needs, and are expected to prioritize the needs of the whole family instead of personal needs. Rhee, Uleman, and Lee (1996) suggested that in relation
to their families, Koreans tend to emphasize interdependence and prioritize the “in-group goals” over personal goals compared to European Americans, although there was no difference found between Koreans and European American in relation to non-family members.

**Self-Control**

In Confucian societies, the practices of impulse control and self-monitoring are highly stressed and are considered preconditions for success and achievement (Ho, 1994). Self-control skills refer to the abilities to monitor desires, wants, emotions, and behaviors, thereby acting congruently with social and moral standards. Starting in early childhood, children in east Asian cultures are trained to behave properly without violating social norms and showing negative emotions (Kim, & Wong, 2002). For example, in social gatherings children are expected to take what they are offered by adults, and the behavior of asking for what they want is considered as being impolite and childish.

**The Importance of Education**

The Confucians believed that seeking knowledge is a lifelong and holistic pursuit. Furthermore, learning is a process of seeking self-cultivation and self-improvement for the sake of guiding one’s social conduct and passing on knowledge for the benefit of the society (Bornstein, 2005; Kim, 2009). In east Asian cultures, the early stage of cultivation is considered as an essential part of one’s development, and children are perceived as “white papers,” suggesting their innocence, lack of knowledge, and innate goodness. The job of making sure that children learn under proper influence and grow in the right direction is the responsibility of parents (Bornstein, 2005). Japanese parents consider child-rearing as the process of helping children cross a river from one side to another, and parents need
to walk along with them to provide necessary assistance, emotional support, and help them avoid potential risks (Chao, 1996).

East Asian parents consider education the primary method to obtain success. Their emphasis on academic accomplishment is higher than parents from European American parents (Chao, 1996; Kim, Im, Nahm, & Hong, 2012; Sakamoto, Kim, & Takei, 2012). Fuligni (1997) measured the relative impact of parental attitudes on the academic achievement of students with East Asian, European, Filipino, and Latino backgrounds. The reports from the students indicated that East Asian and Filipino parents had higher parental expectation and aspirations than parents with Latino and European backgrounds.

**Traditional European American Values and Their Impact**

Despite the differences of parenting practices among the four main European American ethnic groups (i.e., German, Anglo, Irish, and Italian), the commonly identified norms and values characterizing white American culture include (a) individualism and independence, (b) self-control, and (c) privacy (Hess, & Hess, 2001). These norms and values heavily affect family relationships and childrearing practices.

**Individualism and Independence**

Individualism is defined as “a focus on rights above duties, a concern for oneself and immediate family, an emphasis on personal autonomy and self-fulfillment, and basing identity on one's personal accomplishments” (Inglehart, & Oyserman, 2004, p. 5). European American parents expect their children to be self-reliant and develop adequate abilities to solve problems independently. These parents discourage dependence on support or resources from others for solutions. Beginning in early childhood, young European
Americans are also encouraged to develop self-sufficiency skills such as sleeping in their own bed, feeding themselves, or making choices for themselves.

**Self-Control**

Self-control is another instrumental personal characteristic that is highly prized in European American cultures, except Italian Americans (Hess, & Hess, 2001). Both adults and children are expected to control both their emotions and behavior, and they need to rely on themselves to resolve both practical and emotional struggles. Self-control is the ability to regulate thoughts, changing emotions, restrain undesirable impulses, and having optimal performance (Tangney, Baumeister, & Boone, 2004). The purposes of engaging in better self-control are to improve the autonomy of an individual and fulfill personal goals, which is very different from the self-control exercised by east Asian families in which the primary purpose of self-control is to ensure the congruency of children’s behavior with social norms. The study conducted by Tangney, Baumeister, and Boone (2004) indicated that high self-control is positively correlated with higher grades, high self-esteem, less binge eating and alcohol abuse, and better interpersonal relationships.

**Privacy**

Regarding interpersonal relationships, privacy is highly valued and is viewed as a right. People are expected to respect a clear boundary between self and others, including immediate family members. Intruding into other people’s space and business is not acceptable (Hess, & Hess, 2001) although it is unclear how current social media practices may influence this value. It’s expected that people respect each other’s personal space at home or at work, and we do not ask personal information regarding an individual’s age, income, family, and so on without permission.
The aforementioned European American values have heavily influenced the development of many widely used child development and parenting theories, such as the psychosocial development theory by Erik Erikson (Erikson, 1950, 1968), and parenting styles theory by Baumrind (1971). Erikson’s psychosocial development theory is the most influential life span development theory and has been the basis for many identity and child development perspectives (Dunkel, & Harbke, 2017). Similarly, Baumrind’s parenting model has a profound impact on parenting approaches (Sorkhabi, & Mandara, 2013). Asian American parenting is often evaluated relative to the parenting standards proposed by Baumrind.

**Erikson’s Psychosocial Theory**

Erikson (1950, 1968) proposed eight life stages, the first five covering a child’s development between birth to age 18, and final three encompassing the rest of a person’s development after age 18. The eight life stages include: Trust vs. Mistrust, Autonomy vs. Shame, Initiative vs. Guilt, Industry vs. Inferiority, Ego Identity vs. Role Confusion, Intimacy vs. Isolation, Generativity vs. Stagnation, and Ego Integrity vs. Despair. Erikson suggested that the personality development in each stage builds upon previous stages (Dunkel & Harbke, 2017). In other words, the early childhood development is crucial to a person’s success during later life stages.

In the first stage of Trust vs. Mistrust, Erikson suggested that the development of a basic sense of trust can be accomplished through having responsive caregivers and a consistent living environment. The success of acquiring basic trust in others would allow children to be hopeful when new crises arises. In the second stage of Autonomy vs. Shame, the development of independence is emphasized. Caregivers are recommended to provide
different age-appropriate opportunities to help children explore the limits of their abilities within a supportive environment that tolerates their failures. Thus, the children can gain a sense of autonomy, which can lead to acquiring self-confidence and self-control.

During the third stage of Initiative vs. Guilt, children’s initiations of goal-oriented actions increase (e.g., asking questions to gain knowledge, and initiating friendships). Helping children reach realistic goals independently can lead to the development of “a sense of purpose as opposed to feeling aimless” (Dunkel & Harbke, 2017, p. 59). The development of the sense of self-initiative is an indispensable step for the fourth stage of Industry vs. Inferiority, during which children begin to learn and hone different sets of skills (e.g., academic, social or sports), and become aware of the talents that they possess. The self-confidence in their own competence is refined through gaining approval from others and completion of self-determined goals.

According to Baumrind (1991), the fifth stage of Identity vs. Role Confusion is the most important, since during this stage the transition from childhood to adulthood takes place. Adolescents are faced with the broad challenges related to the question, “who am I?” During this life period, adolescents begin to consider their future, including career, relationships and families, and learn different roles that they will have as an adult. They typically want more freedom, explore all kinds of possibilities, and test their potentials. The success in forming the sense of self and their own identity depends on the results of their exploration and achievement of their goals.

The remaining three stages cover young adulthood, middle adulthood, and late adulthood. Erikson believed that the goal of young adulthood is a comfortable commitment to a long-term relationship. The primary focus of middle adulthood is on settling down,
being productive and giving back to society. During late adulthood stage, people look back on their life and contemplate their accomplishments over their entire life, which will lead to either a sense of satisfaction or regret.

**Baumrind’s Patterns of Parental Authority**

Baumrind (1971, 1991) identified four parenting styles, including authoritative, authoritarian, permissive, and neglecting, all of which differ on two dimensions, demandingness and responsiveness. Demandingness refers to the level of control, demands, and supervision that parents exert on children; responsiveness refers to the level of warmth, acceptance, and involvement that the parents provide to children (Aunola, Stattin, & Nurmi, 2000; Maccoby, & Martin, 1983). According to Baumrind (1971, 1991), authoritative parents have age-appropriate demands for their children and are responsive to their needs. They set clear standards for children’s conduct and are assertive with their expectations, but not intrusive or restrictive. These parents encourage children to engage in independent problem-solving and critical thinking. Authoritarian parents are demanding, but not responsive. They expect their children to obey their demands and directions without objections, which often leads to lack of opportunities for active self-exploration and over reliance on parents for guidance (Hess & McDevitt, 1984). Permissive parents are responsive, but not demanding. They behave in an accepting, warm, and affirmative manner toward their children’s behavior. They have lenient behavior standards, avoid confrontations with their children, and allow children to behave autonomously without adequate supervision. Neglecting parents are neither demanding nor responsive. They are not actively involved in childrearing responsibilities. They do not supervise children’s behavior and are not supportive.
Research has indicated that different parenting styles have varied impacts on children’s development. The authoritative parenting style has been associated with the development of optimal competence in adolescents, low externalizing problem behavior, high autonomy (Baumrind, 1991), better school engagement and high academic performance (Steinberg, Lamborn, Dornbusch, & Darling, 1992), high self-confidence, and self-efficacy (Masud, Ahmad, Jan, & Jamil, 2016; Turner, Chandler, & Heffer, 2009). The other three parenting styles have been associated with low independence, less social responsibility (Baumrind, 1971), low academic motivation, increased problem behaviors, and poor impulse control (Baumrind, 1991; Steinberg et al, 1991; Steinberg, Lamborn, Darling, Mounts, & Dornbusch, 1994). Therefore, authoritative parenting has been recognized as the most effective parenting style, which parents are encouraged by the researchers to adapt for their children.

The aforementioned development theory and parenting styles typology are based on European American cultural values, which are different from the traditional east Asian values. Although many immigrant east Asian parents have lived in the U.S. for decades and made changes to adapt to the mainstream culture, studies have shown that these parents preserve many traditional parenting concepts (Kelley, & Tseng, 1992; Shibusawa, 2001). Therefore, when mental health professionals provide treatments to east Asian American families, it will be very important to adapt western-based therapy techniques to meet their cultural needs. However, before we start discussing psychotherapy adaption, the following sections will review the differences between European American parenting and east Asian American parenting, and how the different acculturation levels between immigrant east Asian parents and second-generation children leads to conflict.
Parenting Differences Between Immigrant Asian Americans and European Americans

In comparison to European American parents, the emphases of Asian American parenting are very different. Chao (1995a) conducted a study comparing the impact of different child-rearing beliefs between Chinese and European Americans mothers. Several childrearing themes for both Chinese and European Americans were identified in this study. Loving their children was the most frequent theme identified for both groups of parents. However, the ways of expressing their love were very different between European and east Asian American parents. Consistent with Erikson’s theory (1950, 1968), the study showed that European American parents focused on expressing unconditional love through providing a consistent and structured living environment that allows their children to explore the limits of their abilities and test their potential. In addition, the European American parents highly valued the importance of helping their children build self-esteem, developing leadership skills, creating an environment for children to explore and learn, improving self-expression ability, and being independent.

In comparison, the emphasis of east Asian American parents was showing children love for building a long-lasting harmonious relationship with them. East Asian parents express their love through instrumental support (e.g., cooking for their children), devotion, active involvement in children’s education, and close monitoring rather than overt physical or emotional expressions, which are the typical presentation of western parental warmth (Choi, Kim, Kim, & Park, 2013; Wu & Chao, 2011). Previous studies also identified other Asian American parenting themes including providing a good education to ensure their
children’s success, children’s respect to parents, their ability to keep positive social relationships, and teaching their children their traditional culture values such as respect, appreciation, and humanity (Chao, 1995a; Choi, Kim, Pekelnicky, & Kim, 2013; Nguyen, Chang, & Loh, 2014; Shibusawa, 2001).

In addition to the parenting belief differences, many researchers have suggested that the Western-based parenting style typologies may not be culturally applicable to Asian American families (Chao, 1994; Sorkhabi, & Mandara, 2013). According to Baumrind’s categories of parenting styles (1971), Asian American parenting is consistent with the authoritarian style (Chao, 1994; Chao, 2000b; Chao, 2001; Herz and Gullone, 1999; Leung, Lau, and Lam, 1998). However, the findings of the study conducted by Steinberg et al. (1994) suggested that among Asian Americans authoritarian parenting had less negative impact and authoritative parenting had less positive impact on child development compared to European Americans. Their data regarding the effect of authoritative parenting on school effort showed that this type of parenting predicted higher school grades for European Americans, but not for Chinese Americans. Lastly, Chao (2001) found that a significant positive relationship between authoritative parenting and academic effort was found for European American and second-generation Chinese American, but not for first generation Chinese American.

Additionally, Asian American adolescents think that their parents’ use of control is necessary to discipline them and is a way to show their caring; therefore, the adolescents feel less angry about their parents’ strictness than their European American counterparts (Chao, & Aque, 2009). In Western culture, physical discipline is considered as emotional rejection from parents, but physical discipline is perceived as responsible parental
involvement or caring for children in east Asian cultures (Lee, 2013). Therefore, an alternate parenting approach, conceptualized as training or “Guan,” was proposed to capture the essential features of so-called parental control for Asian Americans (Chao, 1994; Choi, Kim, Kim, & Park, 2013).

The “Guan” or “training parenting” is characterized by active parental involvement, continuous monitoring and providing guidance to children to promote positive development, and prevention of inappropriate behavior while building close parent-child relationship (Wu, & Chao, 2011). This parenting style is also shared among Chinese, Korean, and Japanese Americans (Chao, 1995b). Stewart et al. (1998) found that Guan parenting was positively associated with adolescents’ health and life satisfaction.

Acculturation and Parent-Child Conflicts

Acculturation refers to adapting one’s culture specific behavior, values, knowledge, and identity to fit the norms of the new dominant culture (Tsai-Chae, & Nagata, 2008). In the U.S., immigrant parents often acculturate to mainstream culture at a slower rate than their children. Many Asian immigrant parents continue to adhere to the traditional values of their native culture, and also expect their children to maintain these values (Lee, Choe, Kim, & Ngo, 2000). However, the second generation east Asian children often have difficulty balancing traditional values and expectations with mainstream cultural values (Fuligni, Tseng, & Lam, 1999), and most of them lean towards mainstream cultural values. When the parents fear that their children would drift away from their native culture and family responsibilities, they become more rigid in practicing the native rituals and adhering to native cultures (Chung, 2001; Lee, Su, & Yoshida, 2005; Dion, & Dion, 2001). The discrepancies in cultural values and lifestyles between parents and their US-born children
also cause many of the parent-child conflicts, and intergenerational strain, such as parents’ higher emphasis on family obligation and respect to parents than did their children (Fuligni, Tseng, & Lam, 1999; Phinney et al, 2000; Chung, 2001). The high-acculturated children tend to have more conflicts with the parents who are perceived by their children as less acculturated (Chung, 2001). The different acculturation levels also have led some elderly immigrant parents to feel neglected, disrespected, and humiliated in their children’s home (Kim, Kim, & Hurh, 1991).

The common themes of parent-child conflicts among the immigrant-generation Asian American families include conforming to family norms, education, career, and marriage (Chung, 2001; Tsai-Chae, & Nagata, 2008). Conforming to family norms includes “obligations to following traditional cultural rules so as to maintain family harmony and focuses on the belief that obligations to one’s family of origin should take precedence over one’s self-interest” (Tsai-Chae, & Nagata, 2008, p. 212). In other words, obeying family norms often would be in conflict with individual wishes. Children’s education and their marriage are key parts of Asian American family norms.

Regarding education, many research studies have found that Asian American parents expect their children to have higher academic performance (such as grades and test scores) than European American parents (Chao, 2001; Sijuwade, 2001; Kim, & Ng, 2005). Asian American parents tend to see their children’s academic success as a positive reflection on the family, and believe that higher academic achievement will lead to a better career and reduce racial discrimination in the workplace (Chao, 2000; Shibusawa, 2001). Many Asian American students internalize their parents’ high academic expectations and
experience intense pressure, guilt, and shame when they have difficulty meeting their expectations (Hayashino, & Chopra, 2009).

In east Asian cultures, marriage is often regarded as fundamentally an alliance between two families. However, in Western cultures, the selection of a marital partner is generally regarded as a personal choice based on love (Ahluwalia, Suzuki, & Mir, 2009). The selection of a marital partner is a common source of family conflicts, especially between immigrant parents and second-generation children. The immigrant generation Asian Americans prefer intra-ethnic marriage and have significantly lower interethnic marriages than native-born Asian Americans (Lee, & Yamanaka, 1990). Generally, the immigrant generation Asian Americans are less acculturated than their children and select their marital partners based on the factors of one’s race, ethnicity, religion, community, and socioeconomic status to avoid possible conflicts within their families (Ahluwalia, Suzuki, & Mir, 2009). They would have similar expectations for their children, who would choose their partners based more on their personal preferences.

The reviewed parenting differences between east Asian American and European American parents and east Asian American parent-child conflicts due to different acculturation levels reflect the necessity of incorporating east Asian families’ values and their parental expectations into western-based therapeutic models. The following sections will introduce the structural family therapy approach, and then I will focus on adapting each structural family therapy technique for east Asian American families. In the last section, I will list specific guidelines for therapists who are working with east Asian American families.
Structural Family Therapy

Structural family therapy is primarily based on the work of Salvador Minuchin (Nichols, 2012). According to this therapy model, problematic interactional patterns, unhealthy boundaries between family members, and an ineffective parental hierarchy often lead to dysfunctional family dynamics and problems in children’s behavior (Minuchin, & Fishman, 1981). Structural family therapy focuses on restructuring the family interactional patterns, and “realigning boundaries and hierarchies to promote growth and resolve problems” (Gehart, 2013, p. 125).

According to Minuchin (1974), there are multiple subsystems (i.e., parents, couple, sibling) within a family, and the interaction patterns between the subsystems are regulated by interpersonal boundaries (Nichols, 2012). There are three basic types of boundaries: clear boundaries, enmeshed and diffused boundaries, and rigid boundaries. With clear boundaries, while family members maintain adequate emotional connections with each other, they also have their own space to explore individuality and develop their own sense of identity (Gehart, 2013). The enmeshed and diffused family boundaries within a family entail close interactions with each other, but at the expense of individual autonomy. In other words, the family members view themselves as one entity rather than separate individuals within a system. When family members keep rigid boundaries among each other, each individual’s autonomy is overly emphasized, but they lack emotional connections or reciprocal interactions with each other.

Before intervening, the structural therapist would assess the hierarchy between parents and children. There are also three basic types of parental hierarchies, including effective, insufficient, and excessive (Gehart, 2013). An effective hierarchy means the
parents can set clear boundaries, provide adequate guidance, and maintain emotional connection with their children. The parents’ difficulty managing their children’s behavior and frequently being permissive with the children’s disruptive behavior constitute the insufficient parental hierarchy. Under excessive hierarchy, parents set rigid rules and overbearing expectations, which often comes with ineffective and harsh consequences. The assessment of the parental hierarchy provides guidance for the therapist regarding how to intervene and adjust the family structure.

The key structural family therapy techniques include: (a) joining and accommodating, (b) structural mapping, (c) enactment, (d) modifying interactions, (e) boundary making, (f) intensity, (g) shaping competence, (h) unbalancing, and (i) challenging unproductive assumptions (Nichols, 2012). Every family has its own unique interactional pattern and every family member enters therapy with different struggles and expectations. In joining and accommodating, adapting to each family’s distinct way of interacting with others allows the therapist to effectively join the family system through conveying empathy, thereby building a positive therapeutic alliance. During the interaction with the family, a structural therapist maps its structure by assessing the functions of symptoms in the family, subsystems (as mentioned above), whether a coalition is formed between a parent and a child against the other parent, their hierarchies, everyone’s role, and the boundaries between each other. Enactment focuses on prompting the family to reenact their relational conflicts in the session. During the enactment of the problematic interactional pattern, the therapist provides guidance and directions on modifying their interactions through using intensity or shaping competency. Intensity requires therapists to increase their emotional expressiveness through changing their tone, volume, pacing, or
choice of words to break the current rigid interactional pattern. Shaping competency aims to modify the interaction pattern by reinforcing what the family is doing right.

The other techniques, including boundary making, unbalancing and challenging unproductive assumptions, are also often employed to adjust different family structural problems. Boundary making targets family members who are either overinvolved in others’ lives or distant from others to change their interactional habits. In unbalancing, the therapist temporarily takes a side with the purpose of changing the relationships within a subsystem. All families function based on their own underlying assumptions (e.g., children need to obey parents without arguments or parents need to prioritize children’ needs), some of which can create barriers to effective communications within the family system. Structural therapists often challenge these assumptions by questioning how adhering to the assumption has impacted their family system and how valid the assumptions are.

**Adaptation of Structural Family Therapy Techniques**

**Establishing a Therapeutic Alliance**

**Joining and Accommodating.** Joining is a process of learning the rhythm of a family’s interaction, accepting their values, accommodating their communication styles, including how they talk, the words they use, the tone of their voice, and so on. Colapinto (as cited in Gehart, 2013) suggested that joining is an attitude, requiring “a clear sense of connection and affiliation, and an equally clear sense of differentiation and distance” (p. 130). The purpose of joining and accommodating is to build positive rapport and a therapeutic alliance with a family. In order to achieve that, the therapist needs to accept their ways of being without judging, and their understanding of the presenting problem(s) before any active interventions. Joining is especially important when treating Asian
American families with immigrant generation parents. Within Asian American communities, seeking mental health services is generally associated with stigma and the fear of being viewed as “crazy” (Lee, Juon, Martinez, Hsu, Robinson, Bawa, & Ma, 2009).

Among immigrant east Asian American families, fathers tend to take the role of disciplinarian and take on the responsibility of instilling achievement values in their children. In contrast, mothers are more actively involved in their children’s daily lives, and they emphasize both life achievements and the development of social skills to keep harmonious relationship with others (Koh, Shao, & Wang, 2009). Within the traditional east Asian family system, a father is often considered the head of the family and final decision maker. However, depending on the father’s acculturation level, the level of a father’s involvement in a child’s life and their engagement in making collaborative decisions with the mother may vary. Nevertheless, within immigrant Asian American families, due to parents’ expectation for children to obey parents, the parents’ opinions are considered more important. Therefore, when the parents are present, I recommend observing the interaction dynamic between the parents, and greet and gather information from parents first to show respect.

Establishing professional credibility is an important part of “joining” when working with Asian American families. Many previous studies indicated that a therapist’s perceived credibility was significantly related to clients’ willingness to initiate and continue therapy (Akutsu, Lin, & Zane, 1990; Lee, 1996; Sue, & Zane, 1987). In traditional Asian cultures, people tend to ascribe credibility to a professional on the basis of the traditional measures, such as one’s educational level, age, and gender. It will be very helpful to build trust, reduce stigma, and instill hope in Asian American families through the use of professional titles,
displaying diplomas and relevant licensures, and making references to previous relevant clinical experiences (Paniagua, 2013; Yeh, 2011) during the first meeting. A study conducted by Wong, Beutler, and Zane (2007) suggested that a therapist’s understandability is an important mediating factor in perceived therapist credibility. The study indicated that when Asian American clients found it easy to comprehend the therapist when discussing and conceptualizing clients’ treatment and presenting problem, they rated therapists’ credibility higher. The results also suggested that clients who are better oriented to the counseling process reported better persistence in treatment, greater self-reported change, and higher satisfaction. Therefore, during the first meeting, I recommend assessing how much the family knows about therapy, introducing them to the counseling process, explaining the differences between counseling and medical treatment procedures, and outlining the therapist’s expectations regarding everyone’s involvement in therapeutic process.

Another key factor in increasing the therapeutic alliance with Asian American families is to protect the family dignity and prevent the parent from “losing face.” Immigrant Asian Americans who follow the traditional Asian values often have the need to keep the problem within the family and avoid family shame (Kim, Bean, & Harper, 2004; Tewari, 2009). Therefore, when the therapist is discussing the treatment plan or presenting problems, I recommend doing the following: (a) normalize their struggles by providing them psychoeducation on how prevalent the acculturation difference results in the parent-child conflicts; (b) help the family understand that their problems are no one person’s fault, but rather related to their current interaction patterns; (c) compliment the parents’
willingness to pursue therapy, and (d) positively reframe the strategies that they have already tried.

**Structural Mapping.** The primary purposes of structural mapping are to understand the interactional patterns among all family members, and the role of each family member, as well as to assess the functions of current interactional patterns. For many Asian American families, in addition to parents, grandparents are a key part of their family structure since the grandparents are often very involved in childrearing. According to a report issued by US Census Bureau (Ellis & Simmons, 2014), in 2012 14% of Asian children under age 18 lived with their grandparents compared to 7% of White/Non-Hispanic children; 78% of Asian children who lived with grandparents were also living with both parents in the same household compared to 35% of White/Non-Hispanic children. A common reason why many Asian American elders move to the U.S. is to provide childcare for their grandchildren, whose parents work full-time (Yoon, 2005). Asian-American grandparents often spend a significant amount of time with their grandchildren. Therefore, gathering information about the involvement of grandparents in a family’s daily life and what roles they play in the family system will be instrumental in assessing a family’s interactional pattern. If the grandparents play a key role in the childcare, the therapy will be more effective through working with the grandparents directly. However, many Asian American grandparents are not fluent in English and the parents will become the therapist’s messengers. Accordingly, I recommend assisting parents in explaining to the grandparents the possible interaction changes without directly challenging the grandparents’ authority in the family.
Another important factor that therapists need to consider is the different expectations that Asian American parents have for daughters vs. sons. Asian American parents tend to have higher expectations for the daughter to embody traditional cultural values compared to sons, especially in the domains of child rearing or marriage. Parents also monitor their daughters’ behavior in the domain of peer relationships and heterosexual relationships more than their son’s (Dion, & Dion, 2001). However, Koh, Shao, and Wang (2009) found that Asian American ethnic values are associated more strongly with the self-identity of sons than of daughters, despite the parents’ greater monitoring of daughters’ behavior. In the study, the ethnic values were characterized as “the importance of family, family connectedness, sacrifice for others, obligation, perseverance, self-perfection through education, diligence and hardworking” (Koh, Shao, and Wang, 2009, pp604), and the self-identity were measured in the domains of achievement and relationships. The results also suggested that the higher parental socialization pressure on daughters might lead daughters to reject traditional gender related cultural practices. In other words, it is possible that the forms of parental hierarchies between parent-son and parent-daughter might be different. Therefore, sons and daughters may have very different roles in the family system.

In addition to assessing the functions of interactional patterns within a family, evaluation of each family member’s level of acculturation can be useful for treatment planning and case conceptualization. Since the difference in acculturation level between immigrant Asian American parents and their children is a major contributing factor to their parent-child conflicts (Chung, 2001; Fuligni, Tseng, & Lam, 1999; Phinney et al, 2000), understanding the parents’ and children’s acculturation levels can help the therapist tailor
the treatment plan for the family. There are several acculturation measurement tools available for Asian Americans, including Acculturation Quick Screen developed by Collier (2000), and Suinn-Lew Asian Self-identity Acculturation Scale (SL-ASIA) developed by Suinn, Ahuna, & Khoo (1992).

**Intervention Adaptations**

**Enactment and modifying interactions.** Through these techniques, therapists aim to initiate enactment of the problematic interaction patterns, reframe the problem to help clients see the broader systematic dynamic, and intervene to change the interaction patterns. During enactment, it is very important to consider that parental control may have different meanings to immigrant Asian American parents, and their seeming authoritarian parenting style has different effects on children compared to European Americans (Chao, 2001; Steinberg et al., 1994). As described earlier, Asian American’s parenting is described as “Guan” or a “training” parenting style, which is a blend of Western authoritative and authoritarian parenting styles (Choi, Kim, Kim, & Park, 2013). For example, under a traditional Western parenting framework, parental warmth is expressed through physical, emotional, and verbal expression, such as praising and hugging, which many immigrant Asian American parents do not express since they are not compatible with their parenting beliefs. It is less likely that Asian American parents will comply with the directions that guide them to employ Western parenting methods. In addition, since the “training” parenting style does not have adverse impact on the children’s development, it may be unnecessary to work with the parents on changing their parenting beliefs.

**Boundary making.** This technique targets families who have either an enmeshed boundary (over-involvement) or a disengaged boundary (under-involvement). According
to Minuchin’s boundary definitions, east Asian American parents’ involvement in their children’s lives would be considered as enmeshed relationships. However, there are also studies indicating that in east Asian American families, “family enmeshment” is not detrimental to children’s overall functioning, but rather positively related to decreasing the child’s socioemotional difficulties (Jin, 2015; Chao, 2011). Tomiyama, & Mann (2008) indicated that although enmeshment was positively related to eating disorder pathology in non-Asian Americans, enmeshment was not related to eating disorders in Asian American participants. These research findings suggest that functional boundaries within east Asian families may be different from what Minuchin’s boundary model has suggested. When therapists work with a family on their boundaries, it will be very important to assess how Asian American parents’ active involvement in the children’s life has benefited their biopsychosocial functioning before intervening.

**Intensity.** This technique requires therapists to use provocative language, elevated tone of voice, or change body language to highlight the problematic dynamic between parents and children. The purpose is to make some changes to the family’s rigid interactional patterns. However, this technique may easily cause counterproductive effects when applied to east Asian American families. The immigrant Asian American parents expect their children to respect them and in the family hierarchy, the parents place themselves in a higher position than their children. Heightened affective statements (e.g., the therapist might say to parents that “your kid’s problem is the result of your constant criticism.”) can be perceived as a therapist’s attempt to undermine their authority, which can easily lead to premature termination.
Shaping competency. Compared to intensity, this technique could be a more effective technique to facilitate east Asian American parents’ change process. Shaping competency focuses on reinforcing the positive part of their parenting that has been beneficial to their children’s development (e.g., their devotion to the children’s education, or the close monitoring of their children’s behavior that allows the parents to provide prompt guidance for appropriate behavior), and allowing parents to take the parental role to discipline their children during therapy sessions with therapists’ assistance. Complimenting the parents’ effective parenting strategies and not taking over parents’ parental role will help reduce their resistance to taking parenting suggestions from therapists and increase their willingness to share their concerns with therapists.

Unbalancing and challenging unproductive assumptions. Unlike the previous techniques, these remaining structural family therapy techniques can be directly applied to Asian Americans with no significant modifications. The foundation of applying these techniques effectively to any clients, including Asian American clients, is the trust between clients and the therapist. In addition, as discussed in earlier sections, some of the Asian American parents’ parenting assumptions are very different from the parenting beliefs in mainstream culture (e.g., emphasis on being interdependent within the family vs. importance of teaching children to be independent). It is very important for therapists to keep in mind that distinct parenting beliefs do not always equal unproductive assumptions. The validity of their assumptions should be evaluated within their own cultural contexts.

Other general recommendations. Many previous researchers have suggested that Asian Americans prefer solution-focused approaches and seeking social support when managing family conflicts (Lee, Su, & Yoshida, 2005). They are reportedly much more
interested in practical solutions for ongoing problems than in exploring the causes (Kim, Bean, & Harper, 2004). Therefore, for all the reasons reviewed above, instead of adapting western parenting beliefs, therapists can emphasize the beneficial part of their current parenting methods, and work with them on developing additional skills to enhance the effectiveness of their parenting (e.g., while the parents closely monitor their children’s behavior, they can also be active listeners). I recommend that the treatment goals should focus on active problem management (e.g., children’s mood problems) through working with parents and children’s skill development. Additionally, while therapists are discussing the case conceptualization with parents, they can use motivational interviewing strategies to help the parents recognize how the new skills can benefit their children’s academic performance and family harmony, which Asian American parents highly value.

Summary of the Recommended Guidelines

Establishing a therapeutic alliance

When joining a family during the early stages of family therapy,

- Greet parents/grandparents in the waiting room, especially the father, before talking to the child to show your respect.

- When therapists introduce themselves during the first meeting, it is important to use professional titles, display diplomas and relevant credentials, and make references to previous relevant clinical experiences.

- Assess how much each person knows about psychotherapy.

- Explain the counseling process using simple language, including the differences between mental health treatment and medical treatment procedures, and the
therapist’s expectation regarding each person’s involvement in the therapeutic process.

- Gather information from parents first before moving on to acquire the children’s perspectives.

- While discussing their struggles, it’s important to protect the family’s dignity and parents’ authority in front of the children. Therefore, it’s important to: (a) normalize their presenting problems by providing psychoeducation, (b) help the family understand that the problem is their interaction patterns and is not one person’s fault, (c) compliment the parents’ willingness to pursue therapy, and (d) positively reframe the parents’ concern and/or the strategies that they have tried.

**While performing structural mapping,**

- Assess how much grandparents are involved in child care and the family’s daily life.

- Validate the parents’ respect for their parents and their unwillingness to go against them. Collaboratively work with parents to develop a script that they can use to explain possible interaction changes to the grandparents. The script can emphasize how much the changes can help with their grandchildren’s cognitive development and academic achievement.

- Take the children’s genders into account, since parents’ expectations for boys and girls are different. Parents’ higher pressure on daughters to follow traditional cultural values may lead daughters to be aversive to accepting their parents’ native cultural practices.
• Assess each family member’s acculturation level using measurement tools, such as Acculturation Quick Screen developed, and Suinn-Lew Asian Self-identity Acculturation Scale (SL-ASIA).

**Intervention Adaptations**

• Since Asian Americans’ “training” parenting style does not necessarily have an adverse impact on the children’s development, the therapist can focus on working with the family to develop additional skills instead of asking them to change their current parenting strategies.

• Use the Shaping Competency technique to facilitate the family’s change rather than Intensity, since Shaping Competency focuses on reinforcing the positive aspects of the parents’ current parenting strategies.

• Since Asian Americans generally prefer solution-focused approaches, the family will be more motivated to make changes if the therapist can focus on active problem management through skill development, and how the new skills can benefit the children’s academic performance and family harmony.

• Assess how much the parents’ active involvement have benefited the children’s biopsychosocial functioning before any active intervention. It’s important to remember that although by current Western society standards, many Asian American parents are overly involved in their children’s life, their style is not necessarily detrimental to their children’s overall functioning.

**Additional Considerations and Future Research Directions**

The author aimed to develop guidelines for therapists in working with immigrant east Asian American families. The recommendations are based on the common values
among three particular east Asian American ethnic groups and are not intended to offer insight for therapists when working with other Asian American subgroups, such as multi-racial families, adoptive families, families with special cultural rituals, and parents with a minority background in their native countries, among others. This limitation reflects a need for more research on mental health treatment for all Asian American subgroups.

Second, the effectiveness of structural family therapy has mostly been examined using white American populations. The guidelines proposed by the author and previous studies are based on the differences between these two particular cultural groups. The broader applicability of structural family therapy has not been empirically examined among Asian American populations. Further research on the application of structural family therapy when working with Asian or Asian American immigrant families is recommended. The effectiveness of the proposed guidelines when applying structural family therapy to Asian Americans in this paper could also be empirically studied.

Third, the guidelines focus on how therapists use the techniques differently in therapy sessions, but does not address how to incorporate the awareness of their own cultural background into therapy. Since each therapist’s cultural background can be very different, it is very difficult to provide specific implementation guidelines. Nevertheless, it is crucial that therapists pay attention to how their own cultural values affect their work in therapy.

Conclusion

The acculturation differences between immigrant east Asian American parents and their children often create conflicts between them in many different areas, including education, social life, marriage and work. The parent-child conflicts are a common reason
for them to pursue psychotherapy. Working with east Asian American families often poses challenges to therapists who are trained in Western countries because the current family therapy approaches are based on Western cultural values, which are different from east Asian cultural values. Previous studies provide general suggestions on how to work with Asian Americans using different family therapy approaches, including structural family therapy. However, no studies have previously reviewed each structural family therapy technique within east Asian cultural contexts and adapted each technique for immigrant east Asian American families. These guidelines can help therapists who are trained in Western countries provide more effective treatment, and avoid some possible missteps that can threaten the therapeutic alliance and lead to premature termination.
References


European, African, and Hispanic American, and East Asian Children. Brandeis University.


Sorkhabi, N., & Mandara, J. (2013). Are the effects of Baumrind's parenting styles culturally specific or culturally equivalent?.


