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Yeh, C., Inose, M., Kobori, A., & Chang, T. (2001). Self and Coping among College Students in Japan. Journal Of College Student Development, 42(3), 242-56.

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Self and Coping Among College Students in Japan

Christine Yeh Mayuko Inose Akiko Kobori Tai Chang

Japanese aspects of identity and coping attitudes, sources, and practices were examined among a sample of 240 college students in Japan. Participants reported that they tended to use family members and friends when coping with personal difficulties; only 4.3% of the sample, however, felt comfortable turning to a professional (i.e., counselor) for help. We also investigated Japanese college students' personal, collective, and social aspects of identity (Cheek & Tropp, 1997). We found that collective identity was a significant predictor of seeking help from family members; social identity significantly predicted using substances to cope with problems, and participants with higher personal identity engaged in artistic endeavors as a form of coping with mental health concerns. Implications for counseling college students from Japan are discussed.

In the past decade the numbers of international college students and immigrants from Japan attending college in the United States have dramatically increased. Specifically, according to the 1990 census, 866,160 Japanese immigrants were living in the United States (U.S. Bureau of Census, 1990), and 41,406 international students from Japan (Davis, 1998) were attending college in the United States. Japanese students constitute 9.5% of total international students and students from China, Japan, Korea, India, and Taiwan, constitute 41% of the total number of international students in the U.S. (Davis, 1998).

The significant influx of college students from Japan offers many potential challenges for college counseling centers. Specifically, although research indicates numerous psychological and social difficulties among international students (Sandhu & Asrabadi, 1994), many Asian cultural groups in particular have been found to avoid seeking help from professional counselors (Atkinson, Lowe, & Matthews, 1995; Atkinson, Ponterotto, & Sanchez, 1984; Tracey, Leong, & Gidden, 1986; Uba, 1994). Understanding indigenous perspectives of self and coping may illuminate culturally grounded help-seeking practices among Japanese college students in the United States. Hence, this research seeks to understand Japanese college students' aspects of identity and related coping practices and sources of support.

Conceptualizations and understandings of self (self-construals) have been described in terms of individualism and collectivism (Triandis. 1989) and independence and interdependence (Markus & Kitayama, 1991; Singelis, 1994). According to Singelis, an independent selfconstrual can be described as a "bounded, unitary, stable" self that is separate from social context and other relationships. An interdependent self-construal differs from the independent self-construal in that it is grounded in the fundamental connectedness of people to one another. Achieving interdependence requires seeing one's feelings, emotions, and behaviors as primarily determined by the feelings, emotions, and behaviors of others in important relationships (Markus & Kitayama, 1991).

Self-construals have also been conceptualized in terms of personal, social, and collective identity (Cheek, 1989; Cheek & Tropp, 1997). In particular, personal identity is defined as the importance of one's own thoughts, feelings, goals, values, and self-knowledge; collective identity as the importance of one's own family, ethnic group, community, religion, and lan-

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guage; and social identity as the importance of one's public image as presented through social roles and relations according to a study by Cheek, Tropp, Chen, and Underwood (as cited in Wink, 1997).

Many researchers have suggested that selfconstruals differ across various cultures (Cross, 1995; Markus & Kitayama, 1991; Singelis & Sharkey, 1995). In particular, East Asian individuals (e.g., Chinese, Korean, and Japanese), tend to emphasize a collectivistic sense of self, which may in turn shape social behaviors (Triandis, 1989) and methods of coping (Cross, 1995; McCarty et al., 1999; Yeh & Wang, 2000a). Hence, different aspects of an individual's identity, including personal, collective, and social identity would influence how Asian students cope with mental health concerns. To establish culturally grounded mental health services for Asian college students, their personal, collective, and social identities closely linked to their mental health coping practices and sources (Yeh & Wang, 2000a)must be investigated.

Coping attitudes are the beliefs, attitudes, and feelings associated with various strategies of managing mental health concerns. Coping sources are "specific people (counselors, family members, friends, etc.) an individual utilizes to alleviate mental health concerns," and coping practices "involve activities and practices an individual engages in to alleviate mental health problems" (Yeh & Wang, 2000a, p. 94). Information about the relationship between aspects of identity and coping sources and practices will significantly inform college counselors who work with students from various cultural backgrounds.

Specifically, Japanese self-construals have been examined by many researchers because of their highly interdependent nature (e.g., Kondo, 1990; Lebra, 1976; Markus & Kitayama, 1991; Rosenberger, 1992). Researchers have documented that Japanese self-construals are bound by relational situations (Hamaguchi, 1985; Lebra, 1976; Markus & Kitayama; Yeh, 1996). Hence, an examination of Japanese self-construal is impossible without considering the importance of interpersonal relationships.

Because self-construal is inextricably linked to important others, Japanese students would very likely use their interpersonal relationships rather than seeing a stranger such as a counselor or doctor when dealing with mental health problems.

Numerous studies, including Atkinson et al. (1995), Atkinson et al. (1984), and Tracey et al. (1986), have demonstrated that Asians and Asian Americans tend to underuse mental health services. Generally, researchers assert that Asian college students tend to have negative attitudes toward seeking help from mental health professionals (Dadfar & Friedlander, 1982). Uba (1994) and Fukuhara (1986) also suggest that Asian individuals may consider seeking help from professionals as a sign of weakness. Thus, going to a counselor for cope with a problem may be shameful and embarrassing from a cultural perspective (Homma-True, 1997).

Previous research on counseling attitudes has also been conducted on Japanese samples. Fukuhara (1986) researched attitudes towards professional counseling using a sample of 273 Japanese students in Japan. According to Fukuhara, Japanese students would hesitate to seek help from mental health professionals such as counselors, even when they recognized that they have mental health problems. Fukuhara attributed this finding to the assertion that Japanese participants are afraid of showing weakness to others by expressing their emotional concerns and may have defensive attitudes toward counseling.

The underuse of counseling among individuals of Asian descent has been explained in various ways. For example, Sue and Sue (1999) stated that Asians are unfamiliar with the very notion of mental health services. Moreover, researchers have suggested that cultural stigmas attached to emotional expression and mental illness may account for the trend (Atkinson, Whiteley, & Gim, 1990). Linguistic barriers may also contribute to underuse (Mau & Jepsen, 1988), which is especially relevant for international students who may feel uncomfortable expressing themselves in English (Sandhu, 1994).

Because conceptualizations of counseling

and psychotherapy have been grounded in Western cultural values (Sue & Sue, 1999; Yeh & Wang, 2000b), major characteristics of counseling, such as openness to others, verbal communication, and obtaining insights, may be inappropriate for people who are from non-Western cultures, particularly Asian cultures (Sue & Sue, 1999). For example, a counselor who is trained to value insights and feelings would have difficulty working with an Asian client who believes that emotions and personal information should be shared only with intimate others (Uba, 1994). In this case, the client might consider general counseling techniques (e.g., reflection of feelings, promoting self-disclosure, and making profound interpretation) to be disrespectful to his or her own privacy (Sue & Sue). Cheung (2000) also proposed that counseling, which is established on Western notions of psychopathology, needs to be deconstructed to provide effective services for people from different cultural backgrounds.

Literature examining Asian help-seeking attitudes and coping have primarily examined help seeking in terms of attitudes towards professional psychological counseling (Tata & Leong, 1994), which is problematic because individual counseling approaches are based on individualistic cultural values (Sue & Sue, 1999; Yeh & Wang, 2000b). Atkinson et al. (1990) contend that Western mental health services focus solely on individuals and the system may conflict with Asian values, which emphasizes relationships among individuals. Therefore, an individualistic model of counseling that values autonomy and personal privacy would be culturally inappropriate for many Asians. Moreover, because Asian self-construals are closely interconnected with important others such as family or friends, they may use such interpersonal relationships during difficult times. So although previous research indicates that Asians are not seeking help for mental health concerns, they may indeed be seeking help in other, culturally relevant, forms. Hence, Asians may cope with their mental health problems by using alternative resources and practices that are grounded on Asian cultural values and aspects of identity rather than

traditional counseling.

Instead of seeking professional psychological help, Yeh and Wang (2000a) determined that Asians and Asian Americans often cope with psychological problems by seeking help from families, friends, social groups, and organizations due to their strong collectivistic tendency towards important social networks. Yeh and Wang (2000a) found that Asian American students would engage in social activities, exercise, and familial activities when dealing with mental health concerns. Hence, even though Japanese students may display negative attitudes toward seeking help from professionals, they may seek help from other social networks, such as family members or friends. They may also use alternative helpseeking practices, which are embedded in a traditional Japanese notion of self.

Numerous researchers have demonstrated that women have more favorable attitudes toward seeking psychological help than men do (Cheatham, Shelton, & Ray, 1987; Kahn & Nauta, 1997; Kelly & Achter, 1995). This tendency is especially true among Asian samples (Lee & Saul, 1987). This gender difference has been strongly associated with gender role socialization. Men who are expected to be masculine are socialized to see seeking help as a sign of weakness that would conflict with traditional male gender roles (Blazina & Watkins, 1996; Robertson & Fitzgerald, 1992). Another possible explanation is that because women are more likely than men to emphasize connection with others (Markus, Mullally, & Kitayama, 1997) they may feel comfortable seeking help from close social networks. For example, Cross and Madson (1997) assert that women tend to express their feelings more openly than men, because expressing one's feelings is helpful to promote close relationships with others. Therefore, gender likely affects methods of coping as well.

To offer a broader cultural context for the current investigation, an understanding of current Japanese college counseling services is necessary. Student counseling was introduced in Japanese colleges by the American Council on Education in 1951 (Watanabe-Muraoka,

1997). Currently, approximately 60% of Japanese universities employ counselors on their campuses, and 90% of universities offer some kind of consultation center to students, such as a psychological consultation center (Monbushou, 2000). Although a Japanese consultation center is similar to a counseling center, the nature of the center (e.g., name, staff, and types of issues addressed), varies across colleges. Despite the passing of 50 years since its introduction to Japan, college counseling is not yet fully established as its own independent profession, and university counseling is provided by various professionals, including psychiatrists, clinical psychologists, teaching faculty, and general clerical staff (Watanabe-Muraoka, 1997). Watanabe-Muraoka asserted that to make counseling more available to students, college counselors need to make corroborative efforts with student affairs professionals and clerical workers who have daily contact with students.

We were especially interested in investigating college participants, because they face crucial developmental tasks during their undergraduate years. In particular, Wong and Mock (1997) asserted that several cultural factors would affect the development of Asian college students including individuation (a way of being and interacting with others that is separate from social norms) and identity formation, which entails a sense of self (Crain, 2000).

Specifically, Wong and Mock (1997) emphasized that the need for Asian college students to understand their own identity and values would likely conflict with the importance of family relations in their self-identity. For example, because an essential aspect of Asian collectivism is to maintain familial expectations, an individual's career choice can be quite stressful when it differs from that of his or her parents (Wong & Mock). Many college students will face several critical moments, such as choosing an academic major and career, and negotiating relationships with friends and significant others, which may contribute to mental health concerns for Asian college students. Consequently, college counselors need to recognize how Asian college students cope with their mental health problems.

The coping styles of Japanese college students also need to be investigated, considering the fact that a large number of international students from Asian countries are studying at universities all over the United States. Hence, college counselors are likely to meet with an international student who is experiencing mental health problems. Researchers have determined that unfamiliarity with counseling hinders international students' use of university counseling centers (Dadfar & Friedlander, 1982; Romero, 1981). Understanding their indigenous coping styles would help college counselors to reach out Asian international students.

In the current investigation, we sought to understand if personal, social, and collective aspects of identity are predictive of coping sources and practices. Based on the previous research in the areas of aspects of identity and coping, we generated two main hypotheses. First, in terms of coping sources and practices, we believed that Japanese college students would endorse coping sources that reflect collectivistic cultural values. Specifically, we believed that Japanese college students would be more likely to cope with problems by spending time with family members and friends versus seeking help from a professional, such as a counselor or doctor. Second, in terms of aspects of identity, we predicted that collective aspects of identity (Cheek, 1989) would predict coping practices that involve use of close social networks such as family and friends.

Because the research on how personal and social aspects of identity influence coping sources and practices is so limited, we also investigated which coping practices Japanese students engaged in to deal with mental health problems and how personal and social aspects of identity related to coping sources and practices.

METHOD

Participants

Participants in our study included 240 Japanese college students (48 males and 192 females)

from five universities in Japan. Four of the institutions are located in large urban cities in the eastern part of Japan, and one is located in a rural city in the western part of Japan. Institutional participation was recruited through the first author's professional contact. The institutions were very similar in terms of size, students' socioeconomic status (middle class), student-to-faculty ratio, student populations, and organization. The mean age of the total sample was 19.10 years (SD = 1.00) with an age range of 18 to 25 years. All of the students were born in Japan and at the time resided in Japan. All colleges in the study have counseling centers on their campuses. Majors were as follows: social science, 49.6% (n = 119); natural science, 21.6% (n = 52); humanities, 6.7% (n = 16); and ethnic studies, 22.1% (n = 53). Multivariate Analysis of Variance (MANOVA) indicated no significant difference across major or institution with regard to the coping practices and sources.

Instruments

To investigate, we used a Demographic Questionnaire, the Coping Attitudes, Sources, and Practices Questionnaire (CASPQ) (Yeh & Wang, 2000a) and the Aspects of Identity Questionnaire (AIQ) (Cheek & Tropp, 1997).

Demographic questionnaire. Respondents were asked to provide information about their age, gender, major, and birthplace.

CASPQ. (Yeh & Wang, 2000a). The general purpose of the CASPQ is to examine coping attitudes, practices, and sources that may be related to collectivistic Asian cultural values emphasizing social and familial connections. The questionnaire was divided into three sections: coping attitudes, coping sources, and coping practices. In terms of criterion validity, the CASPQ is related to self-concealment (Wang & Yeh, 1999a) and to help-seeking attitudes and self-construal (Wang & Yeh, 1999b). Because items from the Coping Attitudes and Sources sections are listed as separate sources, reliability coefficients were not deemed relevant and are not reported (see Atkinson et al., 1990; Tedeschi & Willis, 1993).

The first author had created the questionnaire to help understand coping from a collectivistic perspective. Items were initially developed from several focus groups with Asian and Asian American college students at a large West Coast university. In addition, ideas for items and the structure of the questionnaire were based on previous related research on help seeking and coping (Atkinson et al., 1990; Fischer & Turner, 1970; Solberg et al., 1994; Tedeschi & Willis, 1993). A pilot test was then conducted using a preliminary questionnaire to assess the relevance and appropriateness of the items. Items were altered and improved based on feedback from the pilot test.

The questions on the Coping Attitudes subscale differed from previous scales that emphasized attitudes associated only with professional help seeking (i.e., Fischer & Turner, 1970) in that we also included attitudes related to coping with mental health problems by using family and social support networks and coping alone. This subscale consists of a 10item Likert-type scale ranging from 1 (strongly disagree) to 7 = (strongly agree). We conducted exploratory factor analysis using principal axis factoring of the items of the Coping Attitudes subscale. We used an oblique rotation using direct oblimin because the factors are theoretically related. Direct oblimin is a procedure that results in an oblique rotation of factors. This means that the factors are not only rotated, but they are rotated in such a way as to allow them to be correlated with one another.

Results of the factor analysis produced four main factors: Self, Professional, Family, and Relational. The total four-factor solution accounted for 65.5% of the total variance: Self accounted for 24%, Professional accounted for 19.6%, Family accounted for 12.1%, and Relational accounted for 9.4% of the variance. The Self-Coping subscale consisted of two items relating to keeping problems to oneself. The Professional Coping subscale consisted of three items concerning attitudes towards seeking professional counseling. The Family Coping (parents, siblings) subscale consisted of two items, and the Relational Coping (friends, significant others) subscale consisted of three items.

The Coping Sources section examines how

participants cope with mental health concerns using familial, social, professional, and religious relationships. The design and content of this particular section is similar in format to the Sources of Help Scale (Tedeschi & Willis, 1993), the Sources of Support Scale (Atkinson et al., 1990) and the Sources of Help Seeking Scale (Solberg et al., 1994). Following a question, "Who do you feel most comfortable talking to about your concerns?" participants ranked coping sources. The list included friends, family members, significant others, groups or clubs, doctors, and counselors, and participants ranked these sources from 1 (most comfortable) to 7 (least comfortable). Participants were also asked if they coped with problems on their own.

The Coping Practices section of the questionnaire investigated whether or not the participants coped with mental health concerns by engaging in various recreational, social, religious, academic, and impulse (e.g., alcohol or substance abuse) activities. Following a question, "When concerns arise, which of the following activities make you feel better?" participants were asked to rank a list of activities that they may or may not use to cope. Items in the Coping Practices section include: hobbies, social, family, religious, substance abuse, exercise, academic, and artistic activities. Participants select as many items as needed to describe their typical coping practices for mental health concerns.

AIQ. The AIQ (Cheek & Tropp, 1997) is a 35-item scale using a 5-point Likert-type scale (1 = Not important to my sense of who I am to5 = Extremely important to my sense of who Iam). The AIQ consists of the following subscales: Personal Identity (10 items), Collective Identity (8 items), Social Identity (7 items), and Special Items (10 items). Special Items are used as either single-item moderator variables, demographic questions, or as unscored filler items. The Personal Identity subscale refers to the importance of one's own thoughts, feelings, goals, values, and self-knowledge. A sample item for Personal Identity is "my personal values and moral standards." Previous research conducted on the AIQ has generated a Cronbach's alpha of .80 for the Personal Identity

subscale (Wink, 1997). For the current investigation, Cronbach's Alpha coefficient was calculated as .81.

The Collective Identity subscale assesses the importance of one's family, ethnic group, community, religion, and language. A sample item for Collective Identity is "being a part of the many generations of my family." For the current research project, Cronbach's alpha coefficient was calculated as .77. Previous research conducted on the AIQ has generated Cronbach's alpha of .70 for the collective identity subscale (Wink, 1997). Finally, the Social Identity subscale refers to the importance of one's public image as presented through social roles and relations. A sample item for Social Identity is "My popularity with other people." Previous research conducted on the AIQ has generated Cronbach's alpha of .80 for the Social Identity subscale (Dollinger, Preston, O'Brien, & DiLalla, 1996). For the current study, Cronbach's alpha coefficient was calculated as .81.

Procedure

Questionnaires were distributed and completed in academic classes at the five universities in Japan. Students had the option of not completing the questionnaire, but no one chose this option. Most of the classes were psychology, sociology, and general chemistry classes; however, exact information on the type of class was not collected. Questionnaires were administered by the instructors, who read a description of the study and a participant's rights form. Students were invited to ask questions about the study or their participation.

Following translation procedures for research described by Brislin (1986), the original instruments were translated from English to Japanese, then "back-translated" (translated back to the previous language) (Brislin, 1980, 1986) from Japanese to English and finally back-translated again to Japanese following procedures to assure accuracy of terminology and meaning (Brislin, 1986). Comparing scores obtained from the three versions assessed the semantic equivalence of translated surveys. This procedure aimed to ensure and maintain the

integrity of the SCS (Brislin, 1980). Participants were not provided any compensation for their involvement in the project.

Logistic regression analyses were used to examine the impact of the aspects of identity on different problem coping styles. Logistic regression analyses can predict the presence or absence of a characteristic or the outcome based on values of predictor variables. It is similar to a linear regression model but is suited to models where the dependent variable is dichotomous. Logistic regression analyses have been used previously to investigate coping strategies (Brook et al., 1999) and Asian mental health use (Zhang, Snowden, & Sue, 1998).

RESULTS

To assess the coping sources and practices that Japanese college students tend to endorse when dealing with mental health concerns, frequency calculations were determined. The effect of gender on coping practices and sources was investigated using chi square analyses. In addition, we assessed if personal, social, and collective aspects of identity (independent variables) would predict coping practices and coping sources such as friends, parents, and counselors (dependent variables). These results were established using Logistic regression analyses to accommodate the categorical dependent variables.

In terms of coping attitudes, we found that this sample had the most favorable attitudes towards consulting with friends and significant others when they had concerns (M = 4.86, SD = 1.2). Next, the students had somewhat favorable attitudes towards talking to their families (M = 4.24, SD = 1.4), keeping problems to themselves (M = 4.16, SD = 1.6), and towards seeing a counselor (M = 3.3, SD = 1.5).

In terms of coping practices, 77% (n = 178) of the sample reported that they spend time with friends, 68.4% (n = 158) engaged in hobbies, 39.1% (n = 90) selected exercise as a mean of coping, 33.3% (n = 77) engaged in family activities, and 13.4% (n = 31) drank alcohol. 1.7% of the students (n = 4) reported seeking help in religion. Furthermore, only .9% (n = 2) of the sample reported that they talk to coun-

selors when problems arise (Table 1).

In terms of the coping sources, participants were much more likely to seek help from friends and parents rather than from professionals such as counselors, doctors, or nurses. Ninety-three percent (n = 210) of the participants tended to seek help from friends, 60% (n = 137) from parents, 40% (n = 90) from siblings, and only 4.3% (n = 10) from professionals. Furthermore, 35% (n = 81) of students reported that they prefer keep problems to themselves (Table 1).

Our study generated several significant gender differences. First, male students were significantly more likely to engage in exercise than female students in order to deal with psychological problems. Alternatively, female students were significantly more likely to depend on interpersonal relationships, such as friends and family when problems arise. This trend was consistent in coping sources, as female samples were significantly more likely to seek help from parents and friends.

In terms of coping practices, collective identity was a significant predictor of seeking help from family. However, students with a higher social identity score were more likely to cope by using substances such as alcohol and cigarettes. Students with a higher personal identity score tended to choose artistic activity as a coping practice for dealing with mental health concerns. Next, in terms of coping sources, both collective and social aspects of identity were significant predictors of seeking help from parents and personal identity was a significant predictor of seeking help from social groups.

Logistic regression coefficients can be used to estimate the odds ratio for each of the independent variables in the model. Logistic regressions examining the predictive value of Japanese aspects of identity on top 6 coping practices (Table 2) and sources (Table 3), the estimated effects (odds ratio) and significance of the predictor variable (personal, collective, and social aspects of identity) were calculated.

DISCUSSION

Our findings indicate that Japanese college students were likely to seek help from their social networks of friends, families and siblings versus professional sources as a mean of coping. This finding was consistent with previous studies using Asian and Asian American students (Atkinson et al., 1990; Fukuhara, 1989; Webster & Fretz, 1978; Yeh & Wang, 2000a). Our findings may reflect the tendency for Asians to use people in their support system (Atkinson et al., 1990) to help manage their psychological well-being instead of talking to strangers, such as counselors. In addition, this result is probably affected by the fact that this sample mostly consisted of women (80%, n = 192) who tended to seek help from social networks, including friends and family, as a coping practices.

In terms of coping practices, two thirds of the Japanese college students engaged in hobbies and over one third of them selected exercise to deal with mental health concerns. We contend that Japanese college students may choose to exercise when dealing with stress because, in Japan, exercise is not necessarily valued solely for its physical benefits, but as a social activity. The specific term for exercise used on the questionnaire, directly implies exercise as a team sport, which would support out contention that endorsement of exercise as a coping strategy may in fact reflect the Japanese social or interpersonal preference for dealing with personal problems. The term on the question-

TABLE 1. Frequencies and Percentages of Coping Practices and Sources by Gender (N = 240)

	Total %	n	Male %	Female%	χ²	p
Coping Practices						
Exercise	39.1	90	56.5	34.8	7.30	.006
Social activity	6.9	16	2.2	8.1	2.01	.133
Friends	77.1	178	56.5	82.2	13.70	.000
Counselor	0.9	2	0.0	1.1	0.50	.641
Study	10.0	23	10.9	9.7	0.53	.450
Artistic activity	16.5	38	23.9	14.6	2.33	.099
Hobbies	68.4	158	67.4	68.6	0.27	.500
Religion	1.7	4	2.2	1.6	0.66	.591
Alcohol	13.4	31	15.2	13.0	0.16	.424
Smoking	8.2	19	10.9	7.6	0.53	.319
Drug	0.4	1	0.0	0.5	0.25	.801
Family activity	33.3	77	8.7	39.5	15.70	.000
Coping Sources						
Friends	92.5	210	84.1	94.5	5.59	.027
Parents	60.4	37	47.7	63.4	3.63	.042
Siblings	39.6	90	31.8	41.5	1.40	.156
Significant others	31.7	72	34.1	31.1	0.14	.417
Keep self	35.7	81	38.6	35.0	0.21	.386
Groups	14.5	33	27.3	11.5	7.13	.010
Professors	11.5	26	6.8	12.6	1.16	.213
Doctors	2.2	5	2.3	2.1	0.00	.663
Nurse	0.9	2	0.0	1.1	0.50	.644
Counselors	1.8	4	0.0	2.2	0.98	.420

TABLE 2. Coping Practices Exp (β) –2 Log Likelihood Correlation (R)

Coping Practices	Exp (β)–2	Log	Likelihood Correlation (<i>R</i>)	
Personal Identity				
Exercise 1.02		281.336	.02	
Friend	1.02	227.154	.02	
Artistic activity	1.07*	179.632	.07	
Hobbies	1.02	263.924	.02	
Alcohol	1.01	159.871	.02	
Family relations	0.96	251.712	04	
Smoking	1.00	116.415	.00	
Collective Identity				
Exercise	0.99	281.336	01	
Friends	1.02	227.154	.02	
Artistic Activity	1.03	179.632	.03	
Hobbies	1.00	263.924	00	
Alcohol	0.92**	159.871	09	
Family relations	1.08***	251.712	.07	
Smoking	0.93*	116.415	13	
Social Identity				
Exercise	1.04	281.336	.04	
Friends	1.02	227.154	.02	
Artistic activity	0.92*	179.632	08	
Hobbies	1.02	263.924	.02	
Alcohol	1.10**	159.871	.10	
Family relations	1.00	251.712	.00	
Smoking	1.13*	116.415	.13	

Note. Smoking was included on the list because it generated significant relationships with Collective and Social Identity

naire for hobby is often associated with "circle" (sa-kuru), which is a common social activity group for hobbies among Japanese college students. Hence, selecting a hobby to deal with mental health concerns may also reflect a preference for social connection when coping with problems.

Furthermore, men were significantly more likely than women to select exercise to deal with their concerns. This can be related to the assumption that seeking help through talking would conflict with masculine gender roles positing that men are more hesitant to express their feelings explicitly than women (Blazina & Watkins, 1996; Robertson & Fitzgerald, 1992). Therefore, Japanese male students may feel more comfortable engaging in an activity instead of expressing their concerns directly to friends and family. However, as it is presumed that women are more likely to prioritize interpersonal relationships, our female sample tended to depend on friends and family more for coping

^{*}p < .05. **p < .01. ***p < .001.

with problems than our male sample did.

Furthermore, 13.4% of the sample chose alcohol for coping with psychological problems. Alcohol may have been selected as a coping practice for some Japanese college students because in Japan, drinking is not viewed as an individual act, but an interpersonal experience that is shared with others (Shimizu et al., 2000). When Japanese individuals drink alcohol with their friends and coworkers, drinking helps them to communicate social messages and personal emotions, which is usually difficult for them to express in daily life (Shimizu et al.). Although the number seems small compared to what one

would generally expect from Western college students, nonetheless the fact that Japanese college students try to deal with their mental health concerns with the aid of alcohol is noteworthy.

Next, almost a third of the college students reported that they preferred to keep problems to themselves. Because emotional expression is culturally deemphasized, sharing problems with others that are not in your close social network may also be viewed as a burden to social harmony. In other words, if Japanese college students believe that their problems could potentially harm their relationships with others,

TABLE 3. Coping Sources Exp (β) –2 Log Likelihood Correlation (R)

Coping Practices	Exp (β)–2	Log	Likelihood Correlation (<i>R</i>)
Personal Identity			
Friends	1.06	103.456	.06
Parents	1.00	272.836	.00
Siblings	1.03	273.832	.03
Significant others	1.02	260.885	.02
Keep self	ep self 0.99		01
Groups	1.09*	175.050	.08
Collective Identity			
Friends	1.00	103.456	00
Parents	1.05*	272.836	.05
Siblings	1.03	273.832	.03
Significant others	0.98	260.885	02
Keep self	Keep self 0.97		03
Groups	0.98	175.050	02
Social Identity			
Friends	1.06	103.456	.06
Parents	0.93**	272.836	08
Siblings	0.95*	273.832	05
Significant others	1.03	260.885	.03
Keep self	1.01	271.986	.01
Groups	1.00	175.050	00

^{*}p < .05. **p < .01. ***p < .001.

they may decide to keep their problems to themselves and put the needs of others before individual concerns (Henkin, 1985). In addition, keeping things to themselves is considered honorable because Japanese culture emphasizes tolerance for difficulty and willingness to sacrifice and endure in the face of adversity (Marsella, 1993).

Furthermore, less than 1% of the sample reports that they talk to counselors about their personal problems. Although all the universities where this research was conducted contained counseling centers, students seem to be reluctant to use the centers. As Fukuhara (1989) has suggested, most Japanese college students may have a vague idea of counseling as a form of consultation for those in trouble, but few know that counseling is a way for people receive guidance for psychological problems. In addition, Japanese college students may tend to see counseling negatively because they perceive it as a resource for people with severe problems (Watanabe-Muraoka, 1997). Many students in Japan are reluctant to express their own problems to others (Fukuhara, 1986) due to cultural stigmas deemphasizing emotional expression. Thus, they may be hesitant to confide in a stranger, such as a counselor, and believe that a counselor would not be able to help them feel any better.

Our findings also indicate that students with a high collective identity selected parents as a coping source. In a collectivistic society, the family is responsible to provide care for other family members' psychological concerns (Yeh & Wang, 2000a). Moreover, disclosing personal problems to others outside of the family is believed to bring shame and guilt to the entire family (Sue, 1994). Thus, Japanese college students may prefer to seek help from their family members and solve their problems within the family system. Furthermore, because the interdependent self is intertwined with and inseparable from others in important relationships (Markus & Kitayama, 1991), one could assume that students see their problems as that of their families. Our study also revealed that students with a high collective identity tended to prefer engaging in family activities as part

of their coping practices and seek help from family members as a coping source of support. Involvement in familial activities offered further evidence of the strong interdependent emphasis and strong emphasis on family relations in Japanese culture (Homma-True, 1997). The interdependent self is often characterized as part of a surrounding social relationship and one's behavior is primarily determined by what the self perceives to be the thoughts, feelings, and actions of others in the relationships (Markus & Kitayama). Thus, the self becomes most meaningful and complete when it represents the values of the family unit (Markus & Kitayama). To maintain harmonious relationships with important others, the participants may have felt compelled to consult with others when problems arose and to follow what they believed to be the best interests of the family.

Similarly, students with high social identity preferred to seek help from parents and siblings. Because people with high social identity are concerned about their public image (Luhtanen & Crocker, 1992), the participants may have been afraid of revealing weaknesses by presenting their problems to others (Fukuhara, 1986; Yeh & Wang, 2000a). However, seeking help from family members may be seen as culturally acceptable because families are not representative of public views and students are exempt from maintaining their public images in the context of other family members.

Students with a high social identity also preferred dealing with problems by engaging in impulse behaviors, such as drinking and smoking. Such behavior may occur because students with high social identity are extremely concerned about popularity, attractiveness, reputation, and mannerisms in public (Luhtanen & Crocker, 1992) and are concerned of showing signs of weakness by discussing their problems to others (Fukuhara, 1986). In addition, smoking may be viewed as socially trendy in Japan, especially for female college students because tobacco companies often promote their tobacco products by using images of attractive women on their advertisements (Gaouette, 1998). Subsequently, college-age Japanese females who are repeatedly exposed to images in these advertisements may believe that smoking can help them fit in with, and be accepted by, others in their social group.

We also found that Japanese college students with a high personal identity selected artistic activities to cope with their psychological problems. Emotional expression through artistic activities is believed to facilitate the psychological healing process especially for those who have difficulty conveying their thoughts and feelings to others (Berry & Pennebaker, 1993; Yeh & Huang, 1996). Because individuals with a strong personal identity place importance on one's own personal values, ideas, goals, emotions (Cheek, 1989; Luhtanen & Crocker, 1992) and perceive themselves as independent from others, expressing one's emotions through art would be an appropriate way to deal with their psychological problems that does not involve depending on others.

Overall, the participants preferred to use their social network or support system when coping with mental health concerns. This trend may be explained by the notion that people from collectivistic societies see their own interests as embedded in those of the group and perceive themselves as bound to important others (Erez & Earley, 1993; Yeh & Wang, 2000a). Furthermore, because interdependent selves are primarily understood in terms of other relationships, the Western tradition of seeking help from a stranger such as a counselor is culturally inappropriate (Yeh & Wang, 2000a). Instead, dealing with problems by talking to or spending time with family members, relatives, or friends is considered to be a culturally relevant form of coping.

Limitations

The current study has several limitations that should be noted. First, this sample consisted entirely of college students living in Japan. Because the sample was not representative of students in the United States, extending our findings to Japanese international students in the United States is cautioned. In addition, future studies should attempt to analyze the experiences of Japanese participants who plan to study in the United States. In spite of these

limitations, we believe that to understand the experiences of Japanese students in the United States, their aspects of identity and coping from an indigenous cultural perspective need to be understood.

In addition, the sample was predominantly female, thus, many of the findings may be more reflective of aspects of identity and coping styles that are gender based. Moreover, we did not have information on students' year in school or where participants lived (home, apartment on campus, etc.), which may have offered more depth to descriptions of this sample and the proximity of their coping sources of support.

Methodologically, another limitation should be considered. Specifically, due to a lack of culturally relevant measures, the CASPQ was developed to explore coping attitudes, sources, and practices from a collectivistic perspective. It was modeled after previous measures (Atkinson et al., 1990; Tedeschi & Willis, 1993) in a checklist format. This questionnaire, however, has not been assessed for its reliability with this cultural group, so interpretation of findings should be undertaken with caution. Due to the lack of available measures in this important area of scrutiny, we believe the CASPQ offered an excellent opportunity to explore an indigenous perspective of coping.

Implications

In spite of our methodological limitations, this research generated numerous important findings. Our findings indicated that systems of mental health services for Japanese students in college settings should be restructured to serve them more effectively. For example, college counseling services for Japanese-Americans and Japanese immigrants or international students should involve collaborative efforts among counselors and students' important social networks (such as families and social organizations). Because Japanese college students rarely seek help from counselors, counselors should consider playing an active role in coordinating the various offices of student services to offer destignatizing information and education about mental health services. Because many Japanese students are unfamiliar with

counseling (Fukuhara, 1986) and perceive the service to be reserved for severe psychological problems (Watanabe-Muraoka, 1997), this misconception must be clarified. Further, Solberg et al. (1994) and Yeh and Wang (2000a) suggested developing outreach programs for Asian students to help educate them about available college counseling services. Faculty, staff, and advisors could be trained to provide mentoring services for students to help them more effectively use their social support networks. Because college counseling has not been recognized yet as a valid profession in Japan (Watanabe-Muraoka, 1997), counselors can help make appropriate referrals to university counseling centers and help to promote Asian students' more positive conceptions and attitudes towards mental health services (Yeh & Wang, 2000b).

We also suggest establishing culturally relevant programs for dealing with student

problems. Student organizations or Japanese social or exercise clubs could work closely with college counseling centers to provide peer advisement and mentoring programs in a socially relevant context. Such programs will strengthen student support networks that are consistent with Japanese coping strategies. College counseling centers should also work to recognize the importance of collectivistic coping strategies when they working with Asian populations. Because Asians feel comfortable coping within their social networks, counselors' collaborative efforts with relevant social groups will minimize Japanese students' emotional stigma towards self-disclosing personal problems to counselors.

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