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## Acculturative stress, challenges, and experiences of asian international students in the United States

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Acculturative Stress, Challenges, and Experiences of Asian International Students in the United  
States

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A research project submitted to the Graduate Faculty of

JAMES MADISON UNIVERSITY

In

Partial Fulfillment of the Requirements

for the degree of

Educational Specialist

Department of Graduate Psychology

May 2023

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## **Abstract**

Within the United States, many international students may experience the process of acculturation. Acculturation exists when an individual, or group of individuals, from one culture, encounters another culture. Within that context is the experience of acculturative stress (AS). AS is the negative outcome resulting from the pressure and unsuccess of acculturation. In the psychology (and sociology) literature AS is measured among many international communities for many more host countries. Within the United States, Asian International Students (AIS) especially have been seen to have higher rates of AS and a greater hesitation to pursue therapeutic intervention to mitigate the symptoms and related outcomes of that AS. Additionally, the resources offered do not always meet the unique needs of the AIS community. This paper explores the concept of AS as it relates to the AIS community, the assessments used to analyze the effects of AS among AIS, the unique challenges experienced by AIS while studying in the United States (including language barriers, perceived discrimination, academic pressure, and social isolation), best practices established within the counseling community to help combat AS therapeutically and through advocacy, and provides a sample training resource that counselors might use to improve their effectiveness with AS.

## **Introduction**

According to the United States State Department, 948,519 international students were enrolled in higher education institutions from the academic year 2021 to 2022 in the United States (as cited in Open Doors, n.d.). Within higher education, the nearly one million international students (not to mention countless migrants not seeking higher education) are likely to encounter acculturation (defined below). Within this experience of acculturation there often arises the stress of adjustment to that new culture, known as Acculturative Stress (AS). The purpose of this paper is to explore counseling approaches to AS for Asian International Students (AIS) according to several common subcategories used in AS assessments: language barriers, perceived discrimination, academic stress, and acculturative pressure/social isolation.

### **Acculturative Stress**

Acculturation is known as the process of cultural (and psychological) change when a person or group of people enter and exist in another culture (Castillo et al., 2015a; Lumley et al., 2018). It should be noted here that acculturation merely describes the encounter itself, not the results or effects of such an encounter.

Acculturative stress (AS) is defined as the negative side effect of acculturating. These effects usually include physical, psychological, and social health problems (Bai, 2012). When discussing AS in the United States, what has often been measured is the following: personal and institutional discrimination, learning and becoming competent in a new language, leaving family and friends behind in the country of origin, pressure to adopt new cultural values and behaviors, and pressure from heritage culture members to not become “Americanized” (Castillo et al., 2015a). In one study, the researcher found that minority-status stresses were not as predictive of distress after controlling for all

variables. Rather, acculturative stress was more predictive of distress after accounting for additional variables (Rodriguez et al., 2000).

### **Asian International Students' Experience of Acculturative Stress**

Literature on AS examines both the measurement of the stress itself compared to other symptoms and the intergroup differences in experiencing AS. This section will cover the assessments used to measure the effects of AS, as well as introduce the specific outcomes for AIS as they experience AS.

#### **Assessments for Acculturative Stress**

Assessments for AS were in use since 1994 and continue to be updated for different populations and in other languages (Castillo et al., 2015a; Jibeen & Khalid, 2010; Rodriguez et al., 2002; Sandhu & Asrabadi, 1994). Below are two samples of key assessments used within the AS literature.

#### ***Acculturative Stress Scale of International Students***

The Acculturative Stress Scale for International Students (ASSIS) is a 26-item assessment created by Sandhu and Asrabadi (1994) and has 6 factors: perceived discrimination, homesickness, perceived hate/rejection, fear, stress due to change, and guilt. In its original study, the ASSIS was found to account for 70.6% of the total explained variance among participants (Sandhu & Asrabadi, 1994). This assessment has continued to be used by counselors and researchers in the AS field (Ma, 2021; Zhang & Jung, 2017).

#### ***Multidimensional Acculturative Stress Scale: A Modification of the Multidimensional Acculturative Stress Inventory***

The Multidimensional Acculturative Stress Inventory (MASI) was originally developed for the Mexican American population in the United States (Castillo et al., 2015a; Jibeen & Khalid, 2010). This assessment measures 5 categories of acculturation concerns: discrimination/marginalization, threat to ethnic identity, lack of opportunity for occupational and financial mobility, homesickness, and language barrier using 36 items (Lumley et al., 2018). Castillo et al. (2015b) also used MASI to measure 4 subscales: Spanish competency pressures, English competency pressures, pressure to acculturate, and pressure against acculturation. Although this assessment was not developed for AIS, it would later be restructured into another assessment specifically used for Asian populations. Jibeen and Khalid (2010) modified the MASI into a 5-factor and 24-item survey called the Multidimensional Acculturative Stress Scale (MASS) which was developed to measure the acculturative stress of Pakistani immigrants in Canada. Additionally, Lapkin and Fernandez (2018) utilized the MASS when studying senior Asian Indian women migrating to Australia. Overall, the MASS was found to be a useful and reliable assessment for female Asian Indian immigrants (Lapkin & Fernandez, 2018).

### **Acculturation and Asian International Students**

The AIS population was selected as the group of interest due to both the increased need for mental health services (as recorded in the literature) and reported barriers to those mental health services. AIS seem to face more acculturative stress but are least likely to use mental health resources compared to American and European international student peers (Ra & Trusty, 2017). In some of the literature, Asian immigrants and even Asian American college students consistently scored higher AS levels than their peers (Castillo et al., 2015a; Kim et al., 2011). Even international counseling students in the

United States experienced high levels of AS and lacked mental health resources, despite general counseling education and knowledge of mental health services (Li et al., 2018). This experience also seems to exist outside of the United States. When measuring the acculturative stress of 140 Chinese international students studying in Canada, Flynn (2013) recorded that acculturative stress occurred without correlation to age or length of stay in the host country. In a study of 384 Asian international students in Australia, a direct association was found between AS and increased depression symptoms (Huang & Mussap, 2018). Another study, conducted in Wuhan, China, found that AIS (and African international students) scored higher in their acculturative stress than other international students studying in Chinese universities (Yu et al., 2014).

China, India, and South Korea were the leading countries of origin for international students studying in the United States. China made up 31% of all international students, India made up 21%, and South Korea made up 4% (Open Door, n.d.). It should be noted that the majority of AS literature seemed to explore the Chinese international student experience. South Korean international students and their AS experience were also found several times in the AS literature. Regarding Indian (also called Asian Indian) international students, the literature did not explore as much. Rice et al. (2012) argued that “acculturation stress among Asian Indian students may be relatively less of a concern compared with stress encountered by other international student subgroups” (p. 580). Rice et al. (2012) compared AS levels among Indian international students with United States domestic students (especially in reference to English mastery) noting that they seemed comparable. When examining AIS, this paper



(as well as much of the literature) will focus on Chinese and South Korean international students.

### ***Language Barriers***

When assessing AS among AIS, language barriers related to English proficiency were seen to increase stress. Lumley et al. (2018) found a strong correlation between English proficiency and adaptation. Low English language proficiency was seen to elevate AS. Limited English proficiency was also cited as a major barrier to mental healthcare (Kim et al., 2011). The following are quotations from interviews with two Korean international students studying in the United States. Hyuk (age 23) recounted the following:

I thought I was good in English because I had good grades in Korea in English courses. But it was my first time actually speaking with American, so they spoke very fast, and it was very hard to catch what they were saying. (Cho, 2018, p. 51)

Cho (2018) detailed similar experiences among the Korean international students interviewed. Another student, Joongi (age 27), stated, “When they studied Shakespeare, I had no idea what the hell was going on...I think I got a ‘D’...I think that was the hardest point of my exchange student year.” (Cho, 2018, pp. 51-52).

### ***Perceived Discrimination***

In addition to language barriers, AIS also reported experiencing perceived discrimination while studying abroad. In their original work with the ASSIS, Sandu and Asrabadi (1994) recorded that among participants, perceived discrimination accounted for the highest percentage of variation at 38.3%, concluding that it was the key factor. It should be noted that perceived discrimination can consistently be correlated with

experiencing language barriers. Sun et al. (2021) found that Chinese international students were likely to experience language-based discrimination, where discrimination arose because English was not the speaker's primary language or it was spoken with an accent. Perceived discrimination included not only language barriers but also included other forms of overt discrimination. Out of 11 Asian international students interviewed for a study, 3 reported overt discrimination including racial slurs and other students refusing to work with them (Slaten et al., 2016). Mental health outcomes were also found to be linked with perceived discrimination. Sun et al. (2021) found that Chinese international students' perception of discrimination significantly predicted negative mental health outcomes. Perceived discrimination still predicted worse mental health outcomes, for a number of the participants, 3 months later in a follow-up interview from the original study (Sun et al., 2021).

### ***Academic Pressures***

AIS also recounted experiencing AS through academic pressure. Whether it was culturally different styles of learning or increased pressure to succeed, AIS disclosed experiencing stress from their studies. Among university students, a sense of belongingness was reported to increase both cross-cultural interaction and academic grades (Slaten et al., 2016). Yet, Slaten et al. (2016) noted that about half of AIS interviewed stated that they felt a lack of belongingness due to poor academic performance. Within academics, AIS described experiencing a new set of challenges to the American system of education. In one study, a sample of Korean international students, studying in the United States, described feeling great difficulty in adjusting to academic challenges due to changes in academic format and language used in class (Cho,

2018). Similarly, Ching et al. (2017) noted that classroom discussion and curriculum design were reported to contribute to the pressure and stress felt by Chinese international students. When asked, Slaten et al. (2016) found that AIS generally endorsed feeling that if they did not do well academically, AIS students believed that the university community (including teachers and students) did not want them at the university. One Chinese student interviewed noted stress over academic performance from family:

To make my parents happy and proud, I work very hard to ensure I always perform to the best of my abilities on all examines. As a result, I always feel stressed out, especially after I came to the United States. (Yan & Berliner, 2009)

Furthermore, Yan and Berliner (2009) observed that challenges in adjusting to the classroom discussion and American style of education were seen to contribute to increased stress and decreased perceived achievement. This stress to perform (with a subsequent decrease in performance) was also linked to poor mental health outcomes. Maladaptive perfectionism was found in one study to predict AS, and thus depression (Huang & Mussap, 2018).

### ***Acculturation Pressure/Social Isolation***

AS can also include acculturation pressure and social isolation for AIS. Ra and Trusty (2017) noted that counselors may often be unaware of the unique concerns experienced by AIS, including visa and immigration issues. Zhang and Jung (2017) found in their study that social support was significantly and negatively correlated with perceived discrimination, fearfulness, stress due to change, and guilt. The correlative appears to be that lack of social support (viz. social isolation) can often be strongly connected with AS and related mental unwellness. In one study, Chinese international

students reported experiencing decreased levels of “communion” once they transitioned to studying abroad, even as levels of agency and general distress remained unchanged (Qi et al., 2018). Although AIS may have reported the availability of social support, that did not mean that they utilized that social support (Ma, 2021). Regarding coping skills and being able to adjust, Zheng (2018) interviewed 119 mainland Chinese international students. In those interviews, maladaptive coping skills and acculturative stress were significantly and positively associated ( $r = .34, p < .01$ ). Qi et al. (2018) also noted that students with higher levels of interpersonal distress tended to encounter higher levels of AS as well. In a study with 74 Korean international students studying in Pittsburg, many of the students reported “feeling lonely”, “nervousness or shakiness inside”, and “feeling blue” (Lee et al., 2004). Cho (2018) noted that 7 of 12 participants, in a study of Korean international students, described feeling lonely, isolated, and depressed as a result of losing their social support. Myers-Walls et al. (2011) surveyed Asian graduate students and their spouses, finding that many reported feelings of isolation and detachment from social relationships. Many of the international students endorsed feeling that their lack of English language proficiency limited their social interactions (which was especially noted, by the study, for non-student spouses) (Myers-Walls et al., 2011).

### **Therapeutic Interventions**

Within the literature, the unique problems of AS were not only discussed, but authors also described possible solutions and interventions. In this section, several suggested therapeutic interventions and points of advocacy will be discussed.

Within counseling interventions for AIS experiencing AS the literature recommended several general approaches or strategies. These interventions, which were often tested with study participants, were seen to be effective in trials.

## **Social Support and Coping Style**

Social support and coping style appeared to have an impact on AIS' AS levels as well as general wellness. Although Lee et al. (2004) in their study found that social support did not necessarily directly affect stress symptoms, they did find that it had the potential to buffer the effects of stress on the individual. This finding is further explained by another study which distinguishes between the availability of support, and its actual use. Even as social support and academic help were found to provide some benefits, Lumley et al. (2018) nonetheless acknowledged that higher perceived social support did not significantly correlate with reducing psychological distress, nor did it seem to moderate acculturative stress. Lumley et al. (2018) instead found that coping styles (specifically problem- and emotion-focused styles) seemed to help influence and mitigate stress. Additionally, maladaptive and avoidant coping styles (including self-distraction, denial, substance use, behavioral disengagement, venting, acceptance, and self-blame) were recorded as the strongest predictors of both depression and anxiety among 148 Bhutanese refugees surveyed (Lumley et al., 2018).

## **Directiveness and the Therapeutic Alliance**

Within the cultural context of counseling Asian populations, the approach of the counselor can affect the outcome. Wang et al. (2021) noted that prior research indicated that Asian Americans preferred directive therapies to non-directive therapies. Even with this acknowledgment, a strong therapeutic relationship was seen to be most effective overall (Wang et al., 2021). Specifically, Wang et al. (2021) interviewed 120 participants (60 Asian American and 60 European American participants). Each participant was interviewed for 20 minutes by a master's level psychology graduate student at a

university clinic. The therapist would use directive strategies such as guiding the conversation, giving instructions, clarifying for specific details, and making interpretations. Non-directive strategies included allowing participants to guide the conversation, probing for affect, reflecting emotions, and restating (Wang et al., 2021). The researchers found that directiveness strategies seemed to help with depression symptoms across ethnic groups. Additionally, a strong working alliance (assessed by the Working Alliance Inventory) was also seen to be a significant mechanism across all participants regardless of ethnic or cultural identity (Wang et al., 2021). Although directiveness may be effective with Asian American clients, the therapeutic alliance also seemed to help with issues of AS.

### **Resilience and Meaning-Making**

The literature also seemed to indicate that not only AIS but the Asian population, in general, benefited from the development of resilience, meaning-making, and problem-solving within the counseling session. Kim and Cronley (2020) compared the risk of binge drinking for international students with AS against the students' "resilience" as measured by their positive perception of self, positive perception of the future, social competence, structured style, family cohesion, and social resources. Students with higher levels of acculturative stress were found to be more likely to experience depression. In contrast, higher levels of resilience appeared to lead to a decreased likelihood of AS and binge drinking (Kim & Cronley, 2020). Within the counseling session, techniques and theories related to resiliency and cognitive therapy might be utilized to help mitigate the harmful effects of AS and also decrease related risks. Lumley et al. (2018) noted that active problem-solving appeared to be preferred among Bhutanese refugees sampled

compared to emotion-focused problem interventions. This seems to indicate that increased agency and solution-oriented counseling may prove more effective. Flynn (2013) found that among 140 Chinese international students studying in Canada, meaning-making was reported by the majority of participants to help with AS. Within the literature, students who did the following: being more active, getting advice from others, obtaining emotional support, expressing negative feelings, learning from one's situation, and using prayer and meditation reported managing acculturative and psychological stress more effectively. (Lumley et al., 2018).

### **Ethnic and Culturally Aware Counseling**

As counselors plan interventions and policies of advocacy for their AIS clients, developing greater effectiveness and competence will matter. Specifically, ethical compliance with ACA guidelines should be considered. Section C.2.a and C.2.b of the ACA guidelines note that counselors must practice within their education, training, and experience. Furthermore, if practicing a new specialty area, counselors must ensure competence through appropriate education, training, and supervised experience (ACA, 2014). Yet, the literature noted that counseling students and counselors themselves often were not trained or aware of culturally-specific needs and challenges facing international students (Li et al., 2018; Ra & Trusty, 2017). When considering unique needs, counselors and schools may wish to invest in appropriate approaches. For example, Qi et al. (2018) recommended that universities and organizations might want to provide preliminary assessment and support for Chinese international students. Zheng (2018) also noted that universities should begin interventions upon arrival at the campus, offer bilingual resources, and practice culture-centered interventions.

Furthermore, within the literature, clients tended to strongly prefer counselors who shared their own cultural and ethnic backgrounds. These clients may have different priorities and preferences than most Westerners when seeking counseling. Li et al. (2016) found that among Chinese international students, a stronger Chinese ethnic identity appeared to lead to a decreased likelihood of seeking mental health services. Similarly, a correlation was noted in one study between South Asian students and American Indian students who endorsed less favorable attitudes toward counseling and the likelihood that they would more strongly identify with their ethnic, national, and tribal identity (Li et al., 2016). Falgas-Bague et al. (2019) emphasized that patients often preferred therapists who shared their ethnicity. Additionally, Zheng (2018) recommended peer-to-peer counseling as well as support groups. Despite this, there is a possibility that AIS will benefit from counselors who do not share their ethnicity (and thus a need might arise for training non-AIS counselors to help within this population). Falgas-Bague et al. (2019) reported that after their survey, individuals who reported higher barriers to counseling were more likely to adhere to treatment than those who did not. Mistrust due to prior treatment was also positively associated with the completion of therapy. Falgas-Bague et al. (2019) also highlighted that their services for the participants of this study used several culturally appropriate strategies: including greater flexibility in scheduling, providing services over the phone or in community settings, administering treatment in patients' preferred language, and using extensive follow-up procedures. Thus, counselors who are not AIS or Asian may still prove useful within the field of AS counseling.

### **Advocacy**



Beyond the counseling session, there were additional opportunities and considerations for counselors. Below are several practical points of consideration when counselors shift towards advocacy for their clients.

### **Social Support**

Despite some conflicting data about social support within the literature, there may still be some useful points of advocacy. Lee et al. (2004) found that the most impactful support systems for the Korean students studied were parents, Korean friends, religious organizations, academic advisors, school services, and Korean student organizations. In another study, of 12 Korean international students interviewed, 5 participants mentioned that being part of a student club or organization was helpful, and 6 participants mentioned that meeting people through their Korean religious community was helpful (Cho, 2018). When studying international student involvement with student organizations and leadership roles, Orlova (2022) found that student involvement had a significant relationship with the international student's sense of agency. However, it should be noted that discretion is still required when advocating for increased social support. Xu and Chi (2013) noted that negative interactions with friends or relatives among Asian immigrants could further exacerbate acculturative stress and depression, but that social support from friends and relatives could decrease one's vulnerability to such stress and depressive symptoms. Social support through peer mentoring programs and social activities was still highly recommended in the literature (Cho, 2018; Huang & Mussap, 2018). Students who sought social support and coping strategies had decreased levels of acculturative stress (Ra & Trusty, 2017; Zhang & Jung, 2017).

### **Institutional and Language Support**

Mental health tends to be underutilized by international students often affected by language barriers and cultural stigmas (Li et al., 2016). Some of the very clients that might best be served by counselors are often the least likely to use those resources. For the students that do receive help, counselors may wish to provide care and resources matching the unique needs of those clients. Regarding institutional support systems, Zhang and Jung (2017) noted that in their study of 262 Chinese international students studying in the Northeastern United States that perceived family support (without high levels of perceived school support) was positively correlated with AS. In another study, family support was also not seen as an effective buffer to mental health concerns as the quality of instruction, facilities, and curriculum used (Lee et al., 2004). Ra and Trusty (2017) noted that social support could be essential to reducing AS. Lumley et al. (2018) also recommended providing resources for English proficiency while meeting the psychological needs of international student clients.

Even when social support helped the student adjust and acculturate, positive results were mainly present when there was a high level of acculturation in the English language (Lee et al., 2004). Chinese students more comfortable with the English language seemed to experience less AS (Zhang & Jung, 2017). English proficiency level appeared to contribute significantly to predicting a student's ability to adapt to and cope with their AS (Zheng, 2018). Foreign language anxiety can also affect a significant part of international students' academic abilities. In one study foreign language anxiety seemed to account for 33% of the variance among international counseling students in their effectiveness measures (Li et al., 2018). Myers-Walls et al. (2011) recommended that in addition to normal programs targeting stress management, universities should

develop programs that include multi-lingual professionals to target certain language groups. Kim and Cronley (2020) also suggested that universities provide services in multiple languages and provide mentoring programs for international students. A comprehensive attempt to help with English proficiency and help AIS avail themselves of university resources were repeatedly recommended within the literature.

### **Acculturative Stress Training**

A resource packet, such as the one found in Appendix A (which was delivered to counseling students at James Madison University on February 14<sup>th</sup>, 2023), may help provide counselors with the necessary training to better help AIS experiencing the effects of AS. Basic information about international students was included due to the indication that many counselors are unaware of practical considerations experienced by this population (Ra & Trusty, 2017). Assessments were included as these measurements have been used by the counseling community to define and track not only the severity of AS but also the effectiveness of interventions (Bai, 2012; Castillo et al., 2015a; Jibeen & Khalid, 2010; Qi et al., 2018; Sandhu & Asrabadi, 1994). Best practices were selected from studies within the literature (Cho, 2018; Falgas-Bague et al., 2019; Flynn, 2013; Huang & Mussap, 2018; Kim & Cronley, 2020; Lee & Sales, 2004; Li et al., 2018; Lumley & Statham, 2018; Orlova, 2022; Ra & Trusty, 2017; Wang et al., 2021; Xu & Chi, 2013). Including resources was also informed by the literature (Kim & Cronely, 2020; Li et al., 2018; Myers-Walls et al., 2011). Case studies were also used by the literature to explain counseling techniques and interventions (Farrell & Gibbons, 2019). This training was designed to reinforce some of the necessary lessons gained from the literature.

### **Role of the Training**

The AS training was developed so that counselors in training might progress from Bloom's Taxonomy category of understanding to application. This training would help accomplish that by providing best practice guidelines and case studies (see Appendix A) for counselors to practice with. Students were provided an initial exposure to the field of AS. As mentioned in previous literature, many counselors do not have the training or knowledge concerning unique difficulties that international students experience and are often unequipped to plan an effective intervention (Li et al., 2018; Ra & Trusty, 2017). The training seemed to offer students a basic understanding of AS and how they (as the counselor) might plan culturally relevant interventions with hypothetical clients.

### **Content of the Training**

The training was designed to provide counselors with a basic understanding of AS. This basic understanding of AS included current assessments utilized in the field, select recommendations from the literature about best practice guidelines that could help shape counseling interventions, several local resources (for Harrisonburg, VA) with contact information in case counselors sought to advocate for international clients locally, and two case studies designed to allow group and classroom discuss among counselors about how best to treat clients with AS.

Regarding assessments, the training provided a brief look at resources that future counselors could use to measure AS as well as what types of assessments they could refer clients to. Additionally, counselors were provided with several specific approaches to interventions (e.g., directive therapy, resiliency and meaning-making, etc.) which they could become further proficient in so that they might be more effective counselors in this area. Students were given local resources (which will need to be modified for other

locations) so that they could advocate effectively for their clients and help meet the unique needs presented in the session. Finally, counselors discussed two case studies where they were challenged to consider how they might intervene for that particular client. The class was divided into smaller groups and asked to consider not only presenting problems and possible interventions but unique considerations that were culturally relevant.

### **Significance of the Training**

Cultural competency has been seen to be an important part of counseling becoming a core competency within psychology as well as being included in federal policies (DeAngelis, 2015). Hook et al. (2017) stated that culture in therapy has become increasingly important since the first major model of multicultural competency was developed in the early 1980s. Cultural identity is very likely to come up and should be engaged with in an understanding way (Hook et al., 2017). Similarly, DeAngelis (2015) assessed one meta-analysis of 21 studies concluding that culturally adapted interventions seemed to lead to better outcomes (it should be noted, though, that other meta-analyses were seen to be inconclusive). However, DeAngelis (2015) concluded that more work in this field seems necessary and that counselors should continue to develop the field of cultural competency.

The training serves as a basic instrument in shaping a counselor's understanding of AS and the relevant symptoms as well as improving cultural competency. Additionally, the training introduced the international student population (and AIS in particular) as a subcategory of clients with unique needs. Within the training, both the numeric (almost one million students) as well as the severity of stress among

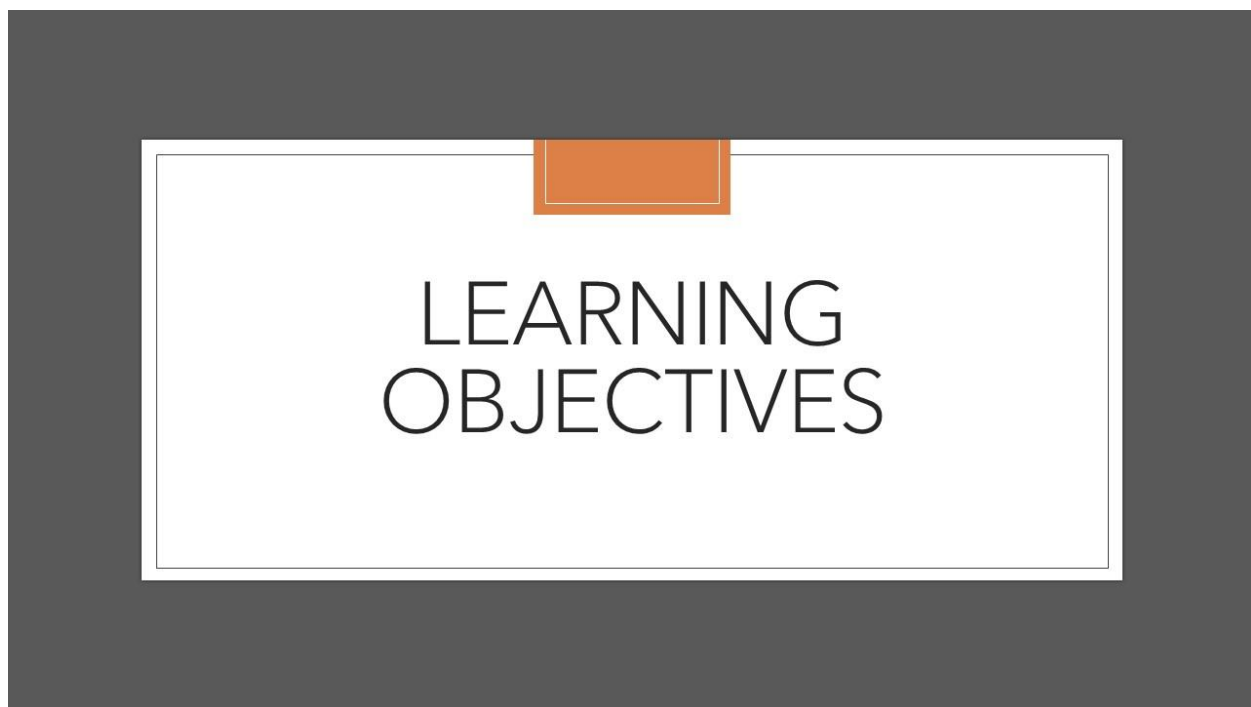
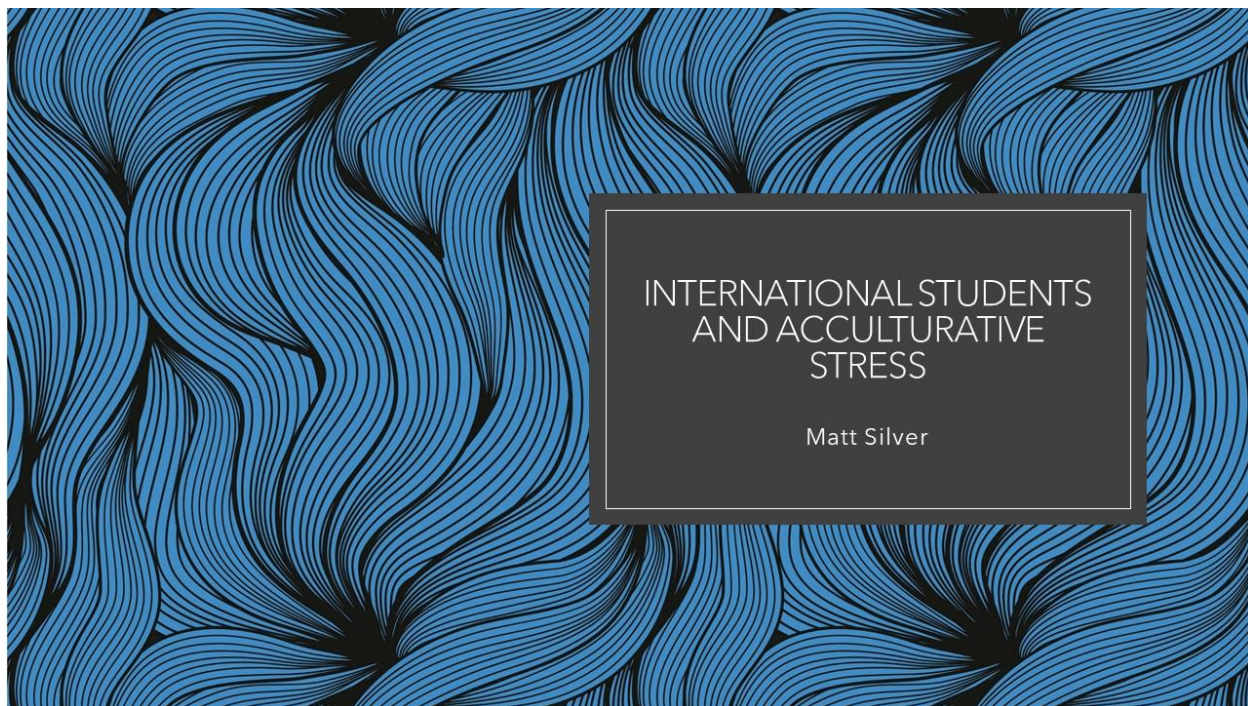
international students were explained. The population is considerable and seems to have significant psychological relevance. Counselors were also trained to know the best practices (as seen through the AS literature) so that this population could possibly be most effectively served. The training introduced the population, explained some of the relevant psychological issues, and examined several effective ways to possibly intervene. This particular training was delivered in a multicultural course for counselors, intended to supplement training already received in that course.

### **Conclusion**

AS appears to persist among AIS across various factors. These factors have been assessed and measured for quite some time by the counseling field. Within the AIS community, correlations between mental unwellness and high levels of AS continue to be tested and confirmed (as seen in the surveys and studies). AIS tend to face cultural and linguistic barriers, making the new campus around them very difficult to navigate. Perceived discrimination also functions as a possible barrier to success and an associated factor of AS. Academic stress seems to contribute to AIS fears and feelings of being out of place. Social isolation and cultural pressure to acculturate also appear to deter AIS from accessing helpful resources and leaving them with untreated psychological concerns. Counseling may be able to help mitigate many of these concerns. With culturally informed approaches, practical advocacy, and increased training, counselors will hopefully find the tools they need to help these clients. Additionally, adjusting university resources to meet specific AIS needs may go a long way in helping reduce AS. Basic AS training (as presented in this paper) might be utilized with new counseling students and trained counselors to help cultivate the appropriate mindset and utilization of existing tools to better help the AIS community. Counselors can be exposed to the

assessments used as well as best practices within therapeutic intervention and advocacy to meet the needs of AIS and maintain a professional and ethical level of expertise.

Appendix A





**At the end, you will:**

1. Know the basic research about acculturative stress.
2. Understand some of the best practices for international students and migrants with acculturative stress.
3. Gain experience through analyzing two case studies.



## LITERATURE ON ACCULTURATIVE STRESS

**948,519**

international students enrolled in higher education from academic year 2021 to 2022 in the United States.

(U.S. State Department as cited in Open Doors, n.d.).



## Acculturation

The process of cultural and psychological change when a person or group of people come into contact with another culture.

(Castillo et al., 2015; Lumley et al., 2018).

# Acculturative Stress

Negative side effect of acculturation, occurring when it causes problems as a result of acculturation for the individual. This often includes physical, psychological, and social health problems

(Bai, 2012, p. 5).

## Multidimensional Acculturative Stress Inventory (MASI)

Developed in 2002

36-item

### Subscales:

- 1 Spanish Competency Pressures
- 2 English Competency Pressures
- 3 Pressure to Acculturate
- 4 Pressure Against Acculturation

3 months, fill in the circle that represents HOW STRESSFUL the situation has been for you. If you have not experienced the situation during the past 3 months fill in the circle under "Does not apply" and go to the next item.

Please fill in only one answer for each statement.

English version	Spanish version					
	0	1	2	3	4	5
During last three months:	Does not apply	Not at all stressful	A little stressful	Somewhat stressful	Very stressful	Extremely stressful
1. I have had a hard time understanding others when they speak English.	0	1	2	3	4	5
2. I have had a hard time understanding others when they speak Spanish.	0	1	2	3	4	5
3. I felt pressured to learn Spanish.	0	1	2	3	4	5
4. It bothered me that I spoke English with an accent.	0	1	2	3	4	5
5. It bothered me that I spoke Spanish with an accent.	0	1	2	3	4	5
6. Since I didn't speak English well, people treated me rudely or unfairly.	0	1	2	3	4	5
7. I have been discriminated against because I had difficulty speaking English.	0	1	2	3	4	5

**Multidimensional  
Acculturative Stress Scale  
(MASS)**

Developed 2010

**24-item**

**Subscales:**

- 1 Discrimination
- 2 Threat to ethnic identity
- 3 Lack of opportunities for occupational and financial mobility
- 4 Homesickness
- 5 Language barrier

Item	Item description
1	Canadians treat me like a foreigner.
2	I am treated differently b/c of my race or skin color.
3	I am constantly reminded of my minority status.
4	I think that many opportunities are denied to me because I am Pakistani.
5	I think that Canadian society discriminates against me just b/c I am Pakistani.
6	I feel that Canadians do not treat me with respect.
7	People from other ethnic groups try to stop me from advancing.
8	I worry that my children/next generation will become very broad minded.
9	I feel as if I am divided between Pakistan and Canada.
10	I worry that my children/next generation will not adopt follow Pakistani beliefs and customs.
11	I feel that I am neither Pakistani nor Canadian.
12	I am losing my Pakistani identity.
13	I feel sad when I do not see my cultural roots in this society.
14	My job/my work is uncertain.
15	I have few opportunities to earn more income.
16	My job is below my experience and qualifications.
17	I am disappointed that my standard of living is not what I hoped for before coming to Canada.
18	My job experience and education in Pakistan have not been recognized at work.
19	I miss my country and my people.
20	I am living far away from my family members, relatives and friends.
21	I miss my family members, relatives and friends.
22	I think that my family responsibilities have increased after coming to Canada.
23	I have difficulty understanding English in some situations.
24	Due to language differences, it is difficult for me to express my ideas.

**Acculturative Stress Scale  
for Chinese Students  
(ASSCS)**

Developed 2012

**32-item**

**Subscales:**

- 1 Language insufficiency
- 2 Social isolation
- 3 Perceived discrimination
- 4 Academic pressure
- 5 Guilt toward family

Acculturative Stress Scale for Chinese Students

This scale describes some stressful situations that might occur to you after you come to the U.S. Please circle the number that BEST describes your experience, using following scale: 1=never--2--3=sometimes--4--5=often--6--7=all the time.

1. I hesitate to participate in class discussion and seminar.
2. My social circles shrank after I come to the U.S.
3. I feel that I receive unequal treatment.
4. I feel helpless.
5. I feel a lot of academic pressure.
6. I am treated differently because of my race.
7. It is hard for me to follow the lectures and conversations in classes.
8. I cannot express myself very well when using English.
9. I do not have many friends in the U.S.
10. I don't feel a sense of belonging (community) here.
11. People from some other ethnic groups show hatred toward me.
12. I worry about my parents.
13. I feel nervous to communicate in English.
14. I feel that others are biased toward me.
15. I often have to work overtime in order to catch up.
16. I feel bored here.
17. I feel that my people are discriminated against.
18. I feel frustrated that I am not able to participate in class discussions.
19. I feel guilty to leave my family and friends behind.
20. I am not used to the English way of thinking.
21. I have limited social life.
22. I feel angry that my people are considered inferior here.
23. I lack confidence when I have to do presentations in English.
24. The intensive study makes me sick.
25. I feel guilty that I cannot take care of my parents.
26. My vocabulary is so small that I always feel short of words.
27. I feel lonely in the U.S.
28. I feel some people don't associate with me because of my ethnicity.
29. It is a big pressure for me to publish academic paper in English.
30. I shy away from social situations due to my limited English.
31. I do not have new social network here.
32. Academic pressure has lowered the quality of my life.

It was found that acculturative stress played an even bigger role in psychological wellbeing than minority status (Rodriguez et al., 2000, p. 1544).

Additionally, due to issues of ethnic identity and cultural differences, international students may be less likely to seek help from mental health institutions (especially among Asian international students) (Li et al., 2016).

## BEST PRACTICES

Directive therapy (such as CBT) seems to help Asian clients (Li et al., 2016).

Narrative therapy has been seen to help with Latin American college students (Farrell & Gibbons, 2019).

Having clients connect with a student organization can also help (Orlova, 2022).

**A note about cultural competency:**

- ❖ Farrell and Gibbons (2019) provide a case study where a client named Jaun is constantly told, “ten cuidado” [be careful] because he will not be accepted in the United States as a Latino man. When describing his own narrative, Juan mentions “soledad” [loneliness] as an element of his narrative. (p. 91).
- ❖ In China, I remember being told about jiǔ-jiǔ-liù, 9-9-6 (or the idea that a corporate employee may face a 9 am to 9 pm work schedule 6 days a week).

## Helpful Links (Harrisonburg Specific)

Student Organizations: <https://www.jmu.edu/multicultural/studentorganizations/index.shtml>  
(Chinese student association can be found on Facebook).

JMU International Student Center: <https://isc.jmu.edu/international-study-center>

EMU's English program: <https://emu.edu/iep/>

Refugee and Immigration Services: <https://cwsharrisonburg.org/> 540-433-7942

Literacy Program: <https://www.skylineliteracy.org/> 540-433-0505



# CASE STUDY

### Wan's Fear

Wan Li (Li Wan in Chinese) is a cisgender heterosexual female international student from Suzhou China. She is 18 years old and has come to JMU for a business degree. However, Wan is unused to the American style of teaching.

While in session with you, she talks about how it is very difficult to understand the professors ("they talk too fast") and Wan feels embarrassed to ask professors to repeat themselves. Now Wan is doing a group project and does not know how to do her part of the assignment. She is worried that she will fail, and her parents will be ashamed that she is doing poorly.

#### Discuss:

1. Identified Needs of the client.
2. Presenting problem(s)
3. Interventions/techniques you would consider.
4. What unique considerations come into play when you think about Wan Li as a female and the fact that she is Chinese?

### Abdul's Frustration

Abdul AL-Reiffee is a 25-year-old cisgender, heterosexual, married male student from Saudi Arabia. He and his family (his wife, Nadia, and his two sons, Mohammed and Ebrahim) are living in Fairfax, VA while he gets a degree in economics from George Mason University. Mohammed and Ebrahim are 4 and 2, and Nadia (23) mostly stays at home with them while Abdul attends classes. Only Abdul speaks English, and he admits that it still takes a lot of effort.

While telling you about his week, Abdul reveals that his son Mohammed threw away an electricity bill and Nadia did not realize what it was. Now Abdul has to figure out how to make a payment in-between classes. He feels very frustrated and wants to know how to cope with the stress of all these responsibilities.

#### Discuss:

1. Identified Needs of the client.
2. Presenting problem(s)
3. Interventions/techniques you would consider.
4. If you felt the need to counsel and advocate for Abdul and his whole family, what cultural factors would you take into consideration?



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