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DON'T WORRY, I AM FINE: A QUALITATIVE ANALYSIS OF FAMILY COMMUNICATION AND DEPRESSION IN CHINESE INTERNATIONAL STUDENTS IN THE US

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IN THE US

For the degree of _Master of Science_____

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DON'T WORRY, I AM FINE: A QUALITATIVE ANALYSIS

OF FAMILY COMMUNICATION AND DEPRESSION IN

CHINESE INTERNATIONAL STUDENTS IN THE US

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ABSTRACT

Jin, Lan. M.S., Purdue University, May 2014. Don't Worry, I am Fine: A Qualitative Analysis of Family Communication and Depression in Chinese International Students in the US. Major Professor: Lalatendu Acharya.

Depression and associated mental health problems are increasingly a critical health issue for Chinese international students in the U.S. (Lyubomirsky, Kasri, & Zehm, 2003; Cheung, 2011; Liu, 2009). Recent studies in different U.S. universities found a 32% to 47% rate for depression symptoms among Chinese international students (Cheung, 2011; Wei et al., 2007). The statistics suggest that Chinese students face a high prevalence of depression problems (Han et al., 2013). To address the depression problems, family communication provides substantial support for Chinese students (Liu, 2009). However, little is known about family communicative practices of this population (Wei et al., 2010). Extant studies and reviews show that there is a strong need to study depression and family communication in Chinese international students to better respond to their needs (Xing et al., 2010).

This research aimed to explore the meanings of depression and parental communication practices in Chinese international students in the U.S., and find recommendations for developing family communication interventions that address depression. The participants were recruited through convenient sampling and purposive sampling method in the Chinese communities at Purdue. The data was collected by

interviews and focus groups, and further transcribed and translated from Chinese into English. The software NVivo 10 was used to support data analysis, and grounded theory method was employed (Glasser & Strauss, 1967).

Thematic analysis of the data developed the following themes: (1) meanings of depression: psychological, physiological and social disorder, (2) selective depression communication with parents, (3) positive and negative feedback of parents influence depression communication, (4) different communication styles of mothers and fathers, (5) childhood experiences influence depression communicative practices, (6) interdependence and conflicting expectations restrain depression communication. This study of depression communication contributes to the large field of emotion communication within the family, providing implications into family training programs, health professional practice, and university administration to better understand the needs of Chinese international students, and offer effective support to cope with depression.

Keywords: depression, Chinese international students, family communication

CHAPTER ONE: INTRODUCTION

Introduction

Depression is viewed by the National Institute of Mental Health as a common but serious illness. Depression is defined as a psychological disorder that results in problems of emotions, thoughts, behaviors, and relationship with others (Sadock & Kaplan, 2007). Ballet (1908) indicated that the depressing emotions are all kinds of sorrow and disquiet, such as vexation, anxiety, sadness, emptiness, and disappointment, which cause nervous exhaustion. In particular, the symptoms of depression are negative or abnormal functioning, such as irritability, anorexia, desperation, sleep changes, and losing control on adverse emotions (NICE, 2009). Depression has been seen as the leading cause of disability in the nonfatal medical diseases in the U.S. (Guthman et al., 2010).

The amount of recent research on depression in diverse groups such as adolescents and older adults has been rising, but depression among college students has not attracted much attention (Winter et al., 2011; Springer, Rubin, & Beevers, 2011). Depression of this young population not only has harmful effects on personal life, but may also threaten the security of campus and society. Depression of college students is related to anxiety, substance abuse, poor academic performance (Hysenbegasi, Hass, & Rowland, 2005), weak relationships with peers (Whitton & Whisman, 2010), suicide, violence and crime (Jeon, 2011). In particular, suicide is reported to be the leading cause of death for college students in the U.S., and students who suffer from depression are

more likely to attempt suicide than ones who don't (Haas et al., 2008). In addition, depression at an early age has long-term effects on well-being, leading to a number of negative consequences associated with weak interpersonal abilities, and poor work achievement (Harvey et al., 2011; Ibrahim et al., 2013). Ettner et al. (1997) reported that both males and females with depressive symptoms and psychiatric disorders experienced lower employment, work hours and income.

Research noted that depression has been a critical health issue for college students (Lyubomirsky et al., 2003). Understanding depression in college students is pivotal for the students. They are susceptible to depression because of environment change, economic stress, and uncertainty of future career (NIMH, 2003). Rates of depression in college students have risen tremendously, from 34% in 1998 to 41% in 2009 (Goebert et al., 2009; Bayati, Beigi, & Salehi, 2009; Garlow et al., 2008; Guthman et al., 2010). Therefore, there is a growing need for mental health attention on college students (Hunt & Eisenberg, 2010).

This is underlined by the fact that, the number of international students in the American universities has rapidly increased. Global reports from 2008 show that there were approximately 3.3 million international students and nearly 19% (819,644) attended universities in the United States (OECD, 2010; IIE, 2013). Studying abroad created various difficulties for international students (Hyun et al., 2007), including stress caused by academic pressure, cultural adaptation, lack of social supports, and discrimination (Berry, 2006; Liu, 2009). These could be constituted as risk factors for depression among international students (Constantine, Okazaki, & Utsey, 2004; Wang & Mallinckrodt,

2006). Hyun and colleagues (2007) reported that 44% of international students responded that they had experienced depression problems within the past year.

Among these, Chinese international students have become the largest population in the U.S., followed by students from India and South Korea (Cheung, 2011). In 2013, there were 235,597 Chinese students in the United States (IIE, 2013). Due to the huge challenges of cultural adjustment to a new social and school environment, Chinese international students are at great risk of depression and mental health problems (Han et al., 2013). Recent studies in different US universities found a 32% to 47% rate for depression symptoms among Chinese international students (Cheung, 2011; Wei et al., 2007). These statistics suggest that Chinese students face a high prevalence of depression and mental health problems (Han et al., 2013).

Le and Liu (2007) reported that problem-solving and looking for social support are two effective coping skills that Chinese students should develop for dealing with depression. Especially, family communication provides substantial support for the Chinese students, as Chinese culture considers family as the central social network (Gao, Ting-Toomey, & Gudykunst, 1996). However, little is known about the family communicative practices of this population (Wei et al., 2010). Family in Chinese culture means parents, spouses, siblings, and grandparents. In particular, parents play an important role on the development of individuals (Chao, 1994). In this study, we specifically looked at the meanings of depression and parental communication practices between Chinese international students and their parents, which constituted a primary source of social support for the Chinese students (Liu, 2009).

Purpose of Study

The meaning of depression has been assumed to vary across cultures (Ying et al., 2000). Culture influences the expression and recognition of depression. For example, in American culture, depression is thought to be a mood disorder, which indicates that the body and mind are separable in Western psychiatry (Jenkins, 1994). Conversely, in Chinese culture, the mind and body are integrated and influence each other, so depression is associated with illnesses of both psyche and soma (Ying et al., 2000). So to understand the meanings of depression in different cultures is salient for individual help-seeking behavior and treatment success (Fabrega, 1982; Kleinman, 1986; Sue & Zane, 1987).

Previous research has recognized the causes of depression among Chinese students, as well as the importance of family support in coping with depression; however, the ways in which Chinese students communicate depression with family were not clearly distinguished (Wei, 2007; Liu, 2009). This study specifically focused on the meanings of depression amongst Chinese students in the U.S. and their communicative practices with parents in coping with depression. The findings of the study provided appropriate recommendations to develop family communication interventions addressing depression.

Research Questions

Therefore, the following two research questions were proposed:

1. What does depression mean to Chinese international students in the U.S.?

2. What are the communicative practices with their parents in coping with depression?

Summary

This chapter introduced the critical depression problem that Chinese international students encounter in the U.S. A high prevalence of psychological distress indicates that more research on depression is required. The purpose of the study was then clarified and implications of the study were further explained. Finally, the research questions were proposed.

CHAPTER TWO: LITERATURE REVIEW

Studies have demonstrated that depression is a critical health problem for Chinese international students in the United States (Hwang et al., 2005). This chapter in particular reviews literature of beliefs about depression in China; risk of depression for Chinese international students; the causes of their depression; their depression coping strategies; social support, and family communication; and their interdependent family relationships. It has been recognized that family communication, especially parental communication, plays an important role in providing support to address depression (Wang & Mallinckrodt, 2006). However, research about depression communication between Chinese international students and their parents is limited. Little is known about how parental communication involving depression can be beneficial and supportive for Chinese students.

Beliefs about Depression in Chinese Culture

Chinese cultural values, norms and practices influence individuals' overall behaviors (Ma, 1999). Cultural beliefs about self and depression shape the way in which people perceive and react to depression. In Chinese culture, individuals are interdependent with others in the social context. Healthy emotional conditions refer to self-control, and moderation of emotional expression to keep interpersonal harmony (Tsai & Chentsova-Dutton, 2002). Additionally, traditional Chinese culture believes that

mental illnesses result from emotions disturbance or evil energy (Kramer et al., 2002).

Further, psychological and physical conditions are integrated and mutually constitutive

(Chun et al., 1996). In this way, patients may disclosure distress as interplaying physical

and psychological states (Tsai & Chentsova-Dutton, 2002). In terms of emotion

expression, collectivistic tradition prevents open communication about emotions, such as

joy, anger, sadness, and depression, emphasizing personal control and maintaining

harmony of family and community (Lee, 1990). In the interpersonal context, depression

patients are constituted as a shame for the family, who cannot live a normal life and are

marginalized by the society. Thus, communicating about depression - a display of

personal drawbacks - puts the individuals at risk of losing face due to social stigma

(Tseng, 1975). In this sense, patients who have depression problems may be reluctant to

discuss it with their families to avoid embarrassment and save face (Kramer et al., 2002).

Stigma has been found to relate to help-seeking attitudes and behaviors for Chinese

international students (Uba, 1994). It is important to note that Chinese students are not

willing to express negative feelings about self, because they want to keep family honor

and self-esteem (Shin, 2002).

<center>Risk of Depression in Chinese International Students</center>

Chinese international students have been found to struggle with a number of

difficulties, including mental health problems, while studying abroad. Their mental

health-related problems have called for attention and research (Cheung, 2011; Liu, 2009;

Wei et al., 2007). International students from Asia are likely to face more mental health

disorders and sociocultural pressure than students from Western countries due to cultural

differences (Cheng, Leong, & Geist, 1993; Poyrazli et al., 2004). For example, Asian culture emphasizes collectivism, while Western culture values individualism (Liu, 2009). It means that Asian international students tend to strive for group honor and belonging, such as to family, friends, community, or country. They are assumed to suppress their individual needs for the sake of the group (Singh & Pereira, 2005). In this sense, Asian students may feel more depressed because personal failure is perceived as a family issue and even a country issue (Fritz, Chin, & DeMarinis, 2008). They have to spend tremendous energy and time fighting challenges of culture shock, language barriers, homesickness, racial discrimination, academics stress, and financial problems (Hyun et al., 2007; Mori, 2000). These stresses place them at a higher risk for depression, and thus we need to have better understanding of the Asian students' mental health experience (Zhang & Goodson, 2011).

Chinese students may be at even greater risk of mental disorders than their Asian counterparts (Han et al., 2013). For one example of specific issues for Chinese students, since 1979, China has imposed a strict "one-child policy," and thus most Chinese students are the only child in the family. This has resulted in personal development problems such as dependency on parents, less sibling support, and higher parent expectation of academic achievement (Settles et al., 2012). Furthermore, Chinese students with no religious support were found to be at higher risk of depression than peers with religious beliefs (McCullough & Larson, 1999). Many Chinese students do not have a religious orientation because the ideology of the Chinese Communist Party dominates education and prevents religious beliefs (Han, 2013).

Causes of Depression among Chinese International Students

It is important to have a deep understanding of the causes of depression and mental problems among Chinese international students because their coping strategies and communicative practices with family members would be influenced by the causes of depression (Liu, 2009). A range of studies has investigated the causes of depression. Specifically, Chinese international students responded that their mental health problems and depression are associated with Social Interaction, Communication Difficulties, Parental Expectations, Language Barriers, and Homesickness (Liu, 2009; Mallinckrodt & Leong, 1992; Mori, 2000; Pedersen, 1991; Yeh & Inose, 2002). These are discussed below.

Social Interaction

Various cultural values and norms in the United States are quite different from those in China, such as individualism versus collectivism (Sue & Sue, 1990). Chinese students in the United States encounter more difficulties than other international students when attempting to adjust to Western social norms. The process of adaptation takes not only time but also energy, which brings more stress to these Chinese students, especially for new students who have stayed in the United States for one year or less (Wei et al., 2007). Therefore, facing conflicting cultural values along with limited English proficiency, Chinese students have to deal with problems in social interaction with Western students and professors (Liu, 2009). For example, it is difficult to build a deep relationship with others and also creates stress for acculturation (Mallinckrodt & Leong, 1992).

Communication Problems

In addition, the researchers reported that Chinese international students are likely to be depressed, frustrated, and irritated due to communication difficulties (Yeh & Inose, 2002). This results from the unfamiliar norms and cultural beliefs that conflict with Chinese culture, such as cooperation versus competition and collectivism versus individualism (Liu, 2009). The cultural differences may lead to confusion and discomfort and less communication with American peers (Sue & Sue, 1999). English competence also contributes to the communication problems of Chinese students (Huang, 1997). Many are not confident talking with native English speakers. Furthermore, the beliefs and tenets of Confucianism in Chinese culture that value self-control make it difficult for these students to express their emotions and feelings because they are required to be self-disciplined and not bother others (Lee & Zhan, 1998).

Parental Expectations

The relationship between parents and children in Chinese culture is different from Western culture. In Western culture, independence of family members is highlighted, although parents are respected. In Chinese culture, children's obligation to parents is emphasized (Hus, 1953). Chinese children are educated to have "filial piety" (Gao et al., 1996). Filial piety means that children should respect the parents, take care of them, and make all efforts to meet the expectations of the parents. In American, the nuclear family is emphasized (Liu, 2009; Sue & Sue, 1990). Even after children have been married, they still carry the pressure of parental obligations. In this case, their individual desires may be

in conflict with the construct of "filial piety." Bourne (1975) reported that Chinese students were at risk of being depressed due to parental expectations.

Language Barriers

Abu-Ein (1995) reported that Chinese students in the United States encountered more challenges in the English language than other international students. Furthermore, a lower level of fluency of English language was found to be associated with more difficulties in social interactions and greater depression among international students (Pedersen, 1991; Yeh & Inose, 2003). Low English competency also may influence students' academic performance and thus lead to psychological problems (Mori, 2000). In addition, Chinese students with low English language skills may lose the opportunity to receive teaching assistantships due to communication difficulties. This could be another source of depression for Chinese international students, since their self-esteem and financial support are affected (Lin & Yi, 1997).

Homesickness

Homesickness is another challenge that international college students in the United States have to contend with (Fisher & Hood, 1987). This new experience is challenging both socially and intellectually (Thurber & Walton, 2012). Chinese culture includes a strong tie with family members and thus intensifies homesickness among Chinese international students (Liu, 2009). The Chinese students tend to rely on the support of family members, and the shift from living at home to living abroad is a major change. The separation from home can lessen emotional and instrumental support from family members, leading to feelings of helplessness and emptiness. When the students are

suffering from complicated problems in the United States, a low level of perceived

support might especially sharpen depressive symptoms (Wei, 2007). The Chinese

international students, in turn, face significant differences of cultures between Chinese

and American university settings, leading to complex adjustment problems, inducing

intense homesickness (Han et al., 2013).

Depression Coping Strategies among Chinese International Students

To tackle these stresses and depression problems, Chinese students may utilize

different coping strategies (Berry, 1997). Coping strategies are methods that individuals

use to adjust to depression and stress (Endler & Parker, 1999). Typical coping strategies

include planning, family support, avoidance or taking no action, and religious coping

(Wei et al., 2010). Chai et al. (2012) suggested that international students use more self-

blame and disengagement strategies than domestic students. Additionally, seeking social

support by asking for suggestions is an important problem-oriented strategy that

international students tend to use (Amponsah, 2010; Sapranaviciute, Padaiga, & Pauzienė,

2013).

Chinese students' coping strategies are divided into positive and negative

categories (Jin et al., 2009). The positive styles include use of informational social

support, positive interpretation, and venting of emotions (Sapranaviciute et al., 2013).

More importantly, research has demonstrated that family communication such as asking

for advice and emotional support from family significantly reduces depressive symptoms

in Chinese students (Wei et al., 2010). In contrast, negative coping ways, especially

denial of depression and avoidance of facing depression, are linked to worse depressive

symptoms of Chinese students (Liu et al., 2004). Because they lack knowledge of the mental health services and feel a stigma toward mental disorders, Chinese students tend to avoid seeking professional help or discussing mental problems (Pedersen, 1991). Chinese students in the United States also reported that their mental health service needs were not sufficiently met by their institutions because of inadequate staff and cultural differences (Hsieh, 2006). Wei and colleagues (2007) suggested that health service providers should be sensitive to mental health problems when reporting physical illnesses and develop cultural programs to improve the students' awareness of resource availability (Mallinckrodt & Leong, 1992). It points at the fact that Chinese students need more interventions that are culturally relevant and incorporate different methods of social support, such as family communication (Liu, 2009).

<div align="center">Social Support and Family Communication</div>

Social support is an important factor in the onset and development of depression (Robinson & Garber, 1995). Garber and Flynn (2001) suggested that the impact of social support was highlighted in young people who were at the risk of depression. A higher level of social support that individuals perceived was considered to be associated with lower level of depression (Procidano & Walker, 1997). People with a lower level of perceived social support are more likely to suffer from a high level of depression (Cohen & Wills, 1985). Goodman and Gotlib (2002) reported that the mental disorders of young people could be decreased through social support from peers and family, including parents, siblings, and spouse.

Particularly in Asian cultures, family plays a central role in people's lives and is assumed to be an important supportive system for young people (Inman & Yeh, 2007; Kim, Li, & Ng, 2005). Within the context of family, individuals build personal beliefs, values, and behavioral patterns (Gecas, 1992). In this sense, family communication could influence individuals' personality and knowledge developments in the long term (Chaffee, McLeod, & Wackman, 1973). Supportive family communication is an effective way to manifest the availability of emotional support, which might reduce the effects of depression on young people (Cohen & Wills, 1985; Landman-Peeters et al., 2005) and encourage them to cope with depression (Ying et al., 2000).

The Interdependent Relationship between Chinese Students and Parents

Despite the important role of family support, studies have illustrated that conflict between parents and students increases risk for depression (Hwang et al., 2010). Furthermore, cultural norms would affect the relationship among family members and the way in which individuals communicate with parents (Gudykunst, 1997).

The relationship among family members strongly influences the patterns of family communication (Hwang et al., 2010; Xing et al., 2010). In traditional Chinese culture, the family relationship is interdependent and reliant (Gao et al., 1996). Family members are regulated by obligation of different generations and ages. Each individual in the family has the responsibility to support each other's needs. Individuals' role, duties, and power within the family context are defined according to their position in the family. It is commonly held that the elderly are superior to young people. The basic principle in the Chinese family, filial piety, is that children should please, respect, and be subordinate to

their parents (Hsu, 1971). Children must make efforts to fulfill the desires of parents, such as that they succeed (Ying, Coombs, & Lee, 1999). Meanwhile, parents should make all efforts to provide strong support, especially economic and informational, for the development of children (Lam, 2005; Gao et al., 1996).

The obligation of Chinese students in the family applies a great deal of pressure on them. Many Chinese parents additionally regulate the children strictly and put heavy expectations on them, which might clash with students' thoughts and needs (Liu, 2009). More important, the family conflict between parental expectation and students' needs presents obstacles to family communication. This immense pressure of expectation not only makes the children susceptible to depression, but also prevents family communication (Vangelisti, 2004). The failure of positive interaction between students and parents contributes to a negative perception about both the families and the relationship (Barbee, Rowatt, & Cunningham, 1998). Determined by this perception, the affective attachment with family is weakened. When the parents are not responsive to the needs of the students, the students are inclined to reject or avoid seeking help from parents (Bowlby, 1988). This is one factor that makes Chinese students reluctant to talk about their depression problems with parents (Liu, 2009). Also, depression is considered a stigma in Chinese society, and thus expressing depression may threaten the self-esteem of students (Wang & Mallinckrodt, 2006).

Therefore, there is a strong need for more research into describing the experiences of depression in Chinese students and their family communicative practices (Xing et al., 2010), so that we can inform practice strategies dealing with depression. The study results could provide recommendations for establishing supportive family communication.

Summary

Studies have reported that depression is a critical mental health problem for Chinese students in the United States (Hwang et al., 2005). As mentioned previously, although the importance of family support to address depression has been recognized, research about depression communication between Chinese international students in the United States and their parents still is limited. In this study, we aim to understand the ways in which Chinese students communicate about depression with parents and to provide implications that will improve family communication on depression.

CHAPTER THREE: THEORETICAL FRAMEWORK

<u>Interdependence Theory</u>

This study aims to explore the meanings of depression among Chinese students in the United States and their communicative practices with parents to cope with depression. To explore the communicative practices built on the interdependent relationship and interaction between Chinese students and their parents, the study used interdependence theory (Kelley & Thibaut, 1978) as a theoretical framework. Interdependence theory is a comprehensive model of interpersonal processes (Kelley et al., 2003; Kelley & Thibaut, 1978; Thibaut & Kelley, 1959; Rusbult & Van Lange, 2008). The theory suggests that individuals experience shared outcomes during interaction with a partner while they also gain individual outcomes that reflect own emotions, motives, and behavior related to the interaction (Kelley & Thibaut, 1978). The independence theory has been utilized to investigate family communication, family conflict and parenting (Johnson & Huston, 1988; Vangelisti, 2004). Thus, the interdependence theory can be used in this study to guide and verify the depression communication between Chinese students and the parents in which partners share the joint outcome of interaction. In addition, the application of theory in the study could expand the scope in the field of family communication. This chapter describes the dimensions of interdependence situations, the key principles of the theory, and implications for interpersonal processes.

Interdependence theory describes various dimensions including level of interdependence, mutuality of interdependence, correspondence of interests, basis of control, temporal structure, and information certainty (Holmes, 2002; Kelley et al., 2003; Rusbult & Van Lange, 2008), to understand interpersonal relationship within situation structure, the interpersonal reality, in which motives are activated, cognition is oriented, and processes are adapted (see Table 1). In particular, the central idea of interdependence in the theory refers to the manner in which partners influence one another's experiences, or in other words the fact that the interaction affects the individual's preferences, emotions, and behaviors (Lewis, DeVellis, & Sleath, 2002). In this study, it refers to the family relationship in which Chinese students and parents rely on each other, to obtain support for themselves and meet partner expectations. Based on the mutuality of interdependence dimension in the theory, the characteristics of a relationship influence the communication outcomes of the partners. For example, closeness in the family relationship between students and parents may facilitate depression communication and promote a sense of understanding and emotional support. As to the correspondence of interests, it is the level of agreement about the shared outcomes in the relationship between the student and family. The degree of correspondence indicates how much conflict the partners have in their relationship. In other words, if the Chinese student and parents are able to compromise when conflict occurs and achieve a mutual understanding on depression, they tend to reach the desired outcome. Basis of control suggests that the extent of individual's influence on the partner depends on the partner control or joint control (Rusbult & Van Lange, 2008). It refers to the difference between exchange and coordination because interaction involves promise, or threat, or initiative in mutual

control action (Holmes, 2002). In the case of Chinese students, basis of control means whether they are submissive to the parents, and whether they have less control than parents over the interaction would impact how much they are influenced by family support. The fifth dimension, temporal structure, depicts the dynamic process of interaction. Through interaction, some actions yield immediate outcomes, while some behaviors and situations continue to the future. For example, the Chinese students may seek parental support with more interdependence based on the early experience. Information certainty, as the last dimension, describes the extent of certainty about the influence of one individual's action on the partner's outcomes, the expectations and motives of each other, and what the future would be (Rusbult & Van Lange, 2008). For instance, the students engage in open self-disclosure and information exchange while interacting with the parents to achieve better understanding of each other and to deal with the depression problem (Collins & Miller, 1994).

Matrices and transition lists are two tools of interdependence theory used to explain the ways in which individuals can influence the partners' outcomes during interaction (Kelley, 1984; Kelley & Thibaut, 1978). The interaction depicts the thoughts, motives, and needs of the partners (e.g., a Chinese student and his or her parents) that relate to one another in the situation of interdependence. The specific situation explicates how the two partners depend on and affect one another with respect to the joint outcomes. In this sense, it is important to consider the situation they encounter (e.g., whether one has stronger power than the other) and two partners' (a Chinese student and parents') values, attitudes, and needs in relation to dealing with decisions in the particular situation.

Thus, the interpersonal interaction between the partners is determined by the situation along with their relevant dispositions (Holmes, 2002; Kelley et al., 2003).

Table 1

Situations Dimensions of Interdependence Theory (adopted from Holmes, 2002; Rusbult, & Van Lange, 2008)

Situations dimensions	Interpersonal disposition	Function of rule	Depression communication
1. Level of interdependence	Comfort/discomfort with interdependence	Increase/reduce dependence on parents	Increase/reduce communication on depression with parents
2. Mutuality of interdependence	Comfort/discomfort with responsibility		
3. Correspondence of interests	Cooperative/ competitive	Promote mutual/self-interested goals	Talk effectively/ineffectively
	Trust/distrust of family motives	Expectations toward parents	e.g. suggestion, comforting, emotional support etc.
4. Basis of control	Dominant/submissive; Assertive/passive	Control via exchange or coordination	Parents dominants Chinese students/talk equally
5. Temporal structure	Dependable/unreliable	Promote immediate or long-term goal seeking	Stick with parental communication/less interdependence
6. Information certainty	Ask for certainty/openness; Optimism/pessimism	Cope with uncertainty of information or future	Sharing information actively/avoidance of communication or help

The accurate outcomes of an interaction depend on whether the important needs are satisfied or not by the aspects of interpersonal interaction, such as security, self-esteem, and trust (Fraley & Shaver, 2000; Kenrick & Trost, 2000). Both the short-term and long-term outcomes are developed by the interaction. In other words, interaction not only forms concrete outcomes/immediate experience such as pleasure, but also symbolic outcomes/broad experience such as trust (Holmes, 1981; Kelley, 1979). For example, if

the parents don't understand the Chinese student Yan's depression and difficulties in the United States but the parents listens patiently to him and provides specific suggestions, Yan not only is comforted by the family's warm words but also perceives that parents care about his feeling.

Therefore, interdependence theory provides a suitable explanatory framework to examine the meanings and communicative practices related to depression among Chinese students in the United States and their parents. The theory as a framework in the study facilitates the understanding of the communication that occurs within a family interaction.

CHAPTER FOUR: METHODOLOGY

To explore participants' perspectives of depression through descriptions of their experience, grounded theory was used (Glaser & Strauss 1967, Strauss & Corbin 1998). Glaser and Strauss (1967) first developed grounded theory to aid researcher elicit qualitative data to identify descriptive categories (Burck, 2005; Glaser & Strauss, 1967; Guba & Lincoln, 1994). During the last decade, grounded theory has been widely used in health care research, including medical education, nursing, marginalized population health, etc. (Dutta-Bergman, 2004; Hutchinson, 2001; Jeon, 2004; McCann, & Clark, 2003). It has been illustrated that grounded theory can be an effective avenue to advance the discourse on data analysis for health research (Harris, 2003; Tavakol et al., 2006). In this study, specifically, grounded theory is applied to discover participants' experiences of depression, including their understanding of depression, the ways in which they deal with it and their communicative practices with their parents in coping with it.

Grounded theory fits well with this study because it focuses on how people interact with the phenomenon, which is in relation to the interest of the study that aims to identify parental communication processes on depression problems in Chinese international students, ways to cope with depression, and parents response (Denzin & Lincoln, 2011). Moreover, as Henwood and Pidgeon (1996) argued, grounded theory enables the researcher to conduct contextually sensitive research, allowing to interpret what is happening in the context and analyze how and why it happens (Denzin & Lincoln,

2011). It helps in understanding how the complexity of their depression communication with parents takes place (Bruck, 2005).

<center>Data Collection</center>

<center>Participants</center>

In this study, participants were Chinese international students (undergraduate and graduate) at Purdue University who were older than 18 and self-identified as being of Chinese ethnicity. The researcher approached local communities and churches as channels to recruit participants. Recruitment also was conducted by distributing flyers on campus to approach more potential participants. Twenty-four participants in interviews and eight participants in two focus groups, a total of thirty-two participants, were recruited. The sampling proceeded until the number of interviews and focus groups enabled the researcher to reach saturation (Glaser & Strauss, 1967). Theoretical saturation was considered to have occurred when the researcher could not spot the emergence of any new codes and the categories were developed to the point where any subcategories were clearly integrated (Strauss & Corbin, 1998).

<center>Sampling</center>

The sample was chosen through a convenient sampling and purposive sampling method within the Chinese communities at Purdue. The advantage of convenient sampling lay in its accessibility and proximity. Since the study focused on conducting interviews/focus groups to understand participants' experience and perceptions, this sample provided with a direction (Adams, Bezner, & Steinhardt, 1997). Purposive

sampling was used to expand diversity of the sample aiming to help the researcher find answers to the research questions. To gain broad insights, experience with, and perspectives relating to depression communication, I recruited both undergraduate and graduate students.

Procedure

The study and protocol were approved by the Human Subjects Institutional Review Board at Purdue University. The researcher approached the Chinese communities and churches on campus, explaining purpose and procedure of study to the local informants. Afterwards the informants sent the flyers describing the study to the community members by email. The flyers also were distributed on campus. An appointment for the interview/focus group was made for those who responded to participate. The participants were asked to attend either individual interviews or focus groups. The interviews and focus groups were conducted in a comfortable place of choice for the participant, such as participant's office, study room, and conference room. The purpose, procedures, benefits, research participants' rights and responsibilities, and risks of participating in the study were explained to the participants before the interview/focus group. After reading and signing the consent form, all participants were interviewed by the researcher or attended the focus group, and then each was asked to complete the Center for Epidemiologic Studies Depression Scale (CES-D Scale) and a demographic questionnaire (Cheng & Chan, 2008; Ying, 2000). Last, the researcher gave each participant a copy of the information about availability of mental health services on campus with a brief explanation of the services after their participation. All of the

interviews and focus groups were conducted in Chinese as per the participants' preference and audio-recorded with their consent. Each interview/focus group lasted 50–60 minutes. Participation in this study was voluntary. There was no compensation for the participants. Privacy of interviews and confidentiality of the information were assured to participants, and only the researcher had access to the information provided by the participants.

<div align="center">Interview</div>

The focus was to study the participants' meanings of depression and experience of depression communication with parents; thus, in-depth interviews provided data to explain and achieve this goal (Turner, 2010). The interview process also enabled follow-up questions to enrich the data and description quickly (Marshall & Rossman, 1989). Twenty-four interviews were conducted to identify the participants' unique meanings of depression, the ways in which they communicate depression with their parents, reactions of parents, their perceived outcomes of depression communicative practices with parents, expectations toward depression communication, and views of improving family communication on depression. The framing of questions in the interviews was directed by the research questions and by the interdependence theory as a theoretical framework. At the same time, the researcher respected how the participants structured the responses (Marshall & Rossman, 1989). As a Chinese international student, the researcher was sensitive to create an appropriate atmosphere for the participants to share their experience and insights.

Focus Group

In addition to individual interviews, two focus groups with four people each were conducted. Focus groups are an effective qualitative methodology to explore phenomena that have psychosocial aspects (Morgan, 1993). In addition, interaction among participants in the focus groups generated insights that did not appear through other methods (Morgan, 1997). Specifically, the investigators analyzed the interview data, and those insights informed the focus groups (Orvik et al., 2013). As depression is a relatively sensitive topic, the researcher cut the size of each focus group to four participants, based on to the participants' suggestion. The participants indicated that they were more comfortable with a small focus group, and they had more opportunities to express their voice. Thus, the participants were motivated to share thoughts in a comfortable climate.

The CES-D Scale

To measure if any of the participants had experienced depression currently, the study used the Center for Epidemiologic Studies Depression Scale (CES-D scale) (Radloff, 1977). The scale had been tested and widely used to measure depressive symptomatology in the general population, including Chinese college students in the United States (Radloff, 1977; Ying et al., 2000). This self-report scale was useful for this study to evaluate the level of depressive symptoms in Chinese international students in the United States, and it enhanced the quality of data analysis and interpretation. For the CES-D scale, the score is the sum of 20 questions involving unhappy feelings, hopefulness, fear, sense of worthlessness, loneliness, sadness, somatic symptoms, and social interaction problems. The participants were asked to report the frequency of the

symptoms with the scale of "less than one day," "1–2 days," "3–4 days," and '5–7 days'

within the last week. The possible range was 0 to 60. In particular, the scores ranging

from 15 to 21 are considered to be mild to moderate depression; scores over 21 show the

possibility of major depression, which may need professional treatments (Radloff, 1977).

The study used a Chinese version of CES-D that had been adopted and assessed in

previous studies targeting the Chinese population (Boey, 1999; Ying, 2000). Although

the depression measurement of the CES-D scale was not necessarily viewed as a

diagnosed disease, the participants' level of depression might shed light on the state of

family interaction referring to depression problems. For the participants who scored high

on the CES-D scale, I particularly looked at ways of family communication and analyzed

the underlying pattern. This was important because conclusions can be drawn from that

subgroup regarding their communicative practices and used while building

recommendations for a communication intervention.

Memoing

The researcher used memos in the study to enhance the quality of grounded

theory research. Memos included insights of the researcher on the data and analysis of the

data (Birks & Mills, 2011), being the records of thoughts, reflections, and feelings related

to the study. Memoing enabled the researcher to articulate and question the

interpretations as engaged with the data (Birks, Chapman, & Francis, 2008). The earlier

insights were essential data because the analysis was raised to a higher conceptual level.

The researcher looked at the record, revisited the earlier thoughts, and then reoriented

herself in the research as the analysis became complex (Corbin & Strauss, 2008).

Memoing was used from the time the study was first conducted and continued at every stage. Specifically, the researcher established a habit of memoing during coding as insights emerged, and after some data collection events (Glaser, 1978).

<div align="center">Data Analysis</div>

<div align="center">Theoretical Sensitivity</div>

Theoretical sensitivity referred to the ability of the researcher to develop theoretical insights through recognizing what is meaningful and significant in the data (Glaser & Strauss, 1967; Strauss & Corbin, 1998). In grounded theory, we needed to rely on our own theoretical sensitivity to build relevant categories from the data to conceptualize the data and relate the categories (Dey, 1999; Glaser, 1978). To promote theoretical sensitivity, we read and used the literature to compare the coded data with theoretical concepts (Strauss & Corbin, 1998). In addition, several analytic tools were used as specific mechanisms to increase theoretical sensitivity, such as questioning, thinking about the multiple meaning of words, and looking at expressed emotions and their contexts (Corbin & Strauss, 2008; Strauss & Corbin, 1998).

<div align="center">Comparative Methods</div>

The grounded theory adopted comparative methods, emphasizing interaction with data through analytic comparisons (Charmaz, 2006). The analysis started to identify descriptive categories as soon as data collection had begun (Glaser, 1992). These categories influenced the development of following interviews so that the emerging concepts might be explored more thoroughly (Guba, & Lincoln, 1994). The constant

comparison facilitated to validate, modify, or reject the researcher's prior analysis,

controlling the risk of inducing biases into the study (Dey, 1999). Additionally, asking

analytic questions of the data help developed more openings for integration of

participants' texts (Dutta-Bergman, 2004).

Coding

The researcher used NVivo 10 to support data analysis. Utilizing grounded theory,

open coding, axial coding, and selective coding were used specifically (Glaser & Strauss,

1967; Strauss & Corbin, 1998). Interviews/focus groups were audio-recorded after the

participants gave informed consent and were transcribed verbatim and analyzed line by

line, using open coding to code as many categories as possible from the data (Allan,

2003). Starting with open coding, the analysis attempted to identify discrete concepts that

could be sorted first (Glaser, 1992). The data were examined sentence by sentence to

develop the concepts (Flick, 2002). After that, the discrete concepts that related to the

same categories were grouped (Charmaz, 2000). Subsequently, axial coding was used to

formulate relationships within and among the categories (Martin, 1986). Last, I used

selective coding to integrate these categories (Strauss & Corbin, 1998).

Reflexivity

As categories emerged from the coding, reflexive memos also were used to keep

track of the emerging themes and record analytic ideas on the relationship between codes

and theoretical questions (Glaser & Strauss, 1967; Strauss & Corbin, 1998). Being

reflexive in the qualitative research is a central skill that requires researchers to be aware

of their own responses and beliefs and put themselves in the research process because the

subjectivity of the researcher partly produces outcomes of the research (Harrison & Lyon, 1993; Hertz, 1997). The researcher made a number of reflexivity memos while conducting the study, being aware of the ways in which the researcher influenced both the process and outcomes (Liamputtong & Ezzy, 2005). Reflexivity allowed the researcher to put self in the field and learn from the process (Reinharz, 1997). It was an ongoing interaction with the experience when engaging in the research process (Hertz, 1997), which is considered as the essence of sensitive research (Dickson-Swift et al., 2008).

Flow Chart

In addition, concepts and ideas were mapped out in a flow chart, which ultimately resulted in the creation of a large mind map (Savin-Baden, 2013). The following flow chart (Figure 1) describes the process of theme development's referring to the two research questions. First, depression was viewed as a psychological, physiological, and social disorder, as the participants stated. Further, they coped with depression according to their conceptualizations of depression. In particular, the participants utilized self-adjustment and social support to address psychological disorder. For physiological disorder, they coped through physical activity. The participants also engaged in social interaction to tackle social disorder. Among these, social support, especially receiving family support through family communication, was the salient approach they used to cope with depression. To a further level, the feedback and outcomes of family interaction influenced depression communication, as well as other themes that are discussed later. This visual representation, together with the reflexive memos, helped in moving from a
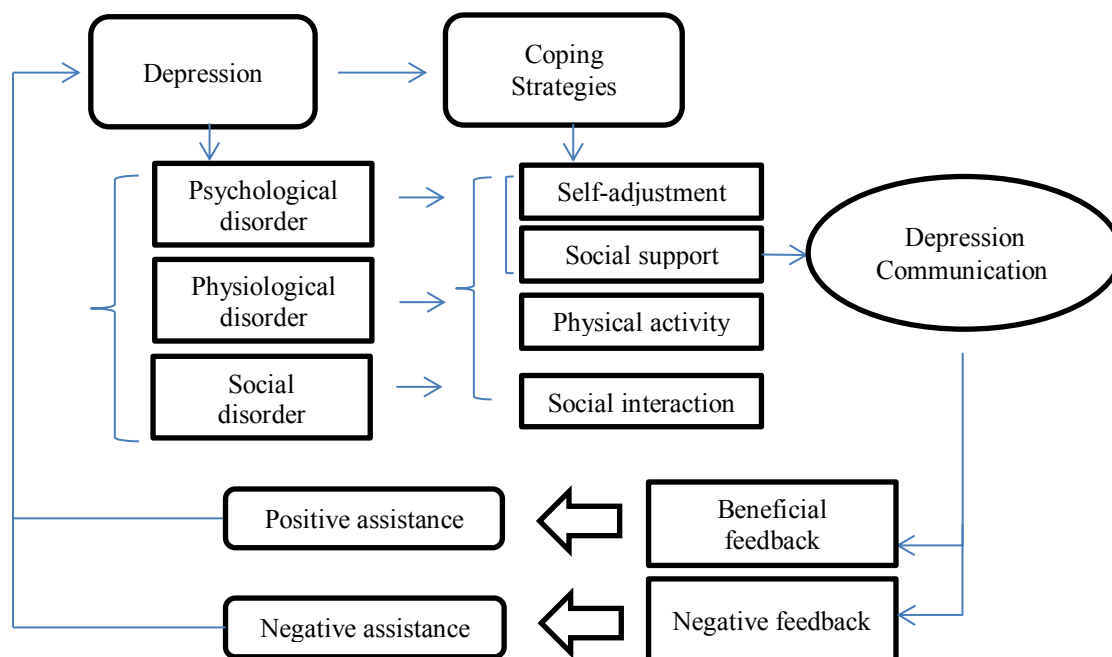
Figure 1. <u>Family Communication on Depression in Chinese International Students</u>.

descriptive level of analysis to a more conceptual level, and the themes took shape

through the codings, constant writing, sorting, and rewriting of memos and mind maps

(Charmaz, 2000).

Translation

The interviews/focus groups were conducted with transcription, translation, and

data analysis by a native Chinese speaker who was qualified to translate because her

Chinese background allowed her to work in a way that was culturally sensitive and

contextually complex (Turner, 2010). The translation from Chinese to English of the

interviews/focus groups was further checked by a second translator, who had grown up

speaking both English and Chinese (Burck, 2005). Divergence in translation was resolved

by further discussion and modified depending on agreements between the two translators

(Turner, 2010). This would facilitate validation of the data (Lincoln & Guba, 1985; Allan,

2003). Transcription of the interviews/focus groups was conducted together with translation into English and data analysis, which enabled the researcher's self-reflexivity on the interviews/focus groups and revising questions (Dutta-Bergman, 2004). The researcher took memos linking categories and recorded emerging theoretical reflections (Flick, 2002). In this sense, the reflections facilitated the process of the analysis transparent, as well as kept a self-reflexive stance (Frey, Adelman, & Query, 1996).

Member Check

At the conclusion of the study, member check was used to improve the accuracy, credibility, and fitness of the qualitative research (Lincoln & Guba, 1985). All of the findings were shared with some participants after the themes and conclusions were finished, with the purpose of receiving open feedback (Creswell, 2009). The researcher required the participants to evaluate the results engaging their experience and asked for any thoughts and questions openly. Bronfenbrenner (1976) suggested feedback to informants as a tool to achieve "phenomenological validity." Guba (1981) assumed member check could be utilized to assure the "conformability" of the findings. The logic of member check relied on the assumption that culture members had the right to know the findings of the study, and furthermore they were able to evaluate the descriptions that the researchers had written referring to their practice and thoughts (Lindlof & Taylor, 2010; Miles & Huberman, 1984).

Conducting Sensitive Research

Talking about depression experience during the interviews caused several participants to show uncontrolled emotion. Others expressed frustration, helplessness,

and sadness. The study was on a sensitive and emotional topic, so it was important to investigate more than the consequences of the study (Dickson-Swift, James, & Liamputtong, 2008). To achieve in-depth understanding of the sensitivity aspect, it was necessary to examine the methodological issues from the standpoint of researchers and participants (Lee, 1993). Such qualitative research was suited to this study since it allowed the participants to express their stories, and it attempted to understand the participants' lives (Lee, 1993). This methodology looked at the participants in social contexts, and the research agenda was formed by both the researcher and participants (Dickson-Swift et al., 2008).

More importantly, the researcher herself as a Chinese international student had the advantage of better understanding perspectives of the participants. At the same time, the researcher must be aware of own biases that may influence the consequences of the study (Maykut & Morehouse, 1994). It is suggested that the insider researcher, who is a member of the group, should keep the eyes open while collecting data, but assume that she knows nothing about the studied phenomenon (Asselin, 2003). As Rose (1985) argued, subjectivity is inevitable, but the point is that the researcher should be greatly aware of own biases. As a member of Chinese international students, the researcher's personal knowledge and cultural background enhanced her understanding of the experience of participants, and the process of conducting the research inspired the researcher to think deeply about her own experience of communicating with parents. In the meantime, the researcher was aware of avoiding leading the participants, or sharing personal experience, opinions and perceptions with the participants, to minimize researcher biases (Dwyer & Buckle, 2009). The researcher, being an insider, didn't

assume to be a better or worse researcher in the qualitative study, but a more sensitive researcher, who engaged in talking with the participants and self-reflection. Furthermore, the researcher attempted to be careful while dealing with emotional moments during the in-depth interviews, in which the participants showed strong affective response. When the participants couldn't stop crying, the researcher felt sympathetic due to similar experience and tried to react properly - not only presented empathy, but also controlled the conduct of the interview, which was discussed in reflexive notes. In addition, the researcher did enjoy conducting the study on depression and family communication, which topic was very important for her.

As a moral and sensitive researcher, it was pertinent to weigh the benefits of conducting depression research against the risks of engaging in sensitive research because it might make participants more vulnerable (Liamputtong, 2007). The participants who revealed personal details about depression might be vulnerable because their own emotions, such as sadness, were stirred through attending the research (Barnard, 2005). For example, some participants were choked with emotion in the interviews. The researcher needed to be empathetic and reflexive to do qualitative research (Liamputtong & Ezzy, 2005). Even so, the participants could receive some positive benefits by being involved in the research. For example, they had the opportunity to tell stories that they might not be able to tell in daily life (Cutcliffe & Ramcharan, 2002). In addition, it could be an empowering process because someone was interested in and listening to their depression experience, which also might inspire deeper insights (Campbell, 2002; Morse & Field, 1995). In the study, many participants indicated that they appreciated the chance to tell their stories face-to-face, which could be a relief for them.

Summary

In summary, the participants were recruited by convenient sampling and purpose sampling method. The approaches for data collection included one-on-one in-depth interviews and focus groups (Turner, 2010; Morgan, 1993). Thirty-two participants in total were recruited. The interviews/focus groups involved narratives - about the meaning of depression, and their experiences, struggles and challenges on depression communication with parents - with the audio taped interview being directed by protocol and grounded theory was employed to analyze data (Glaser & Strauss, 1967). The length of each interview/focus group was approximately 50 to 60 minutes. In addition, field notes after the interviews and self-reflective notes were taken to assist in moving from a descriptive level of analysis to a more conceptual level (Strauss & Corbin, 1998). The CES-D scale was used to measure the level of depression of the participants (Radloff, 1977).

CHAPTER FIVE: RESULTS AND DISCUSSION

Results

Demographics

A demographic picture of the sample revealed that men (41%) and women (59%) participated in the interviews and focus groups. On average, they were 26 years old (SD=3.27). 81% of the respondents were graduate students. All participants spoke Mandarin, while 94% of them came from mainland China and 6% came from Taiwan. Among them, 66% had no religion, 28% were Christian, and 6% were Buddhist. As to living conditions, 19% of participants lived alone, and 81% lived with a friend. Also, 69% of the participants were single, and 31% were in a non-married relationship. As to the CES-D scale, the mean score was 10.97 (SD=7.99). In particular, twenty-three (72%) participants indicated little depressive symptom currently, six (19%) participants were assessed as at mild to moderate levels of depression (scored from 15 to 21), and three (9%) had the possibility of major depression (scored over 21). The study sample characteristics were described in Table 2 (appendix).

Themes

Analysis of interviews and focus groups uncovered six key themes which engaged the research questions on the meanings of depression for the participants, and communicative practices with parents in coping with depression: (1) meanings of

depression: psychological, physiological and social disorders; (2) selective depression

communication with parents; (3) positive and negative feedback of parents influence

depression communication; (4) different communication styles of mothers and fathers; (5)

childhood experiences influence depression communicative practices; (6)

interdependence and conflicting expectations restrains depression communication. The

themes revealed that depression of the Chinese student participants was a multi-aspect

disorder. Further, the participants tended to communicate depression implicitly, not being

willing to talk openly due to consideration of parental worry and negative feedback. Thus,

the outcomes of family interaction, whether beneficial or not, influenced how the Chinese

students asked for support. Additionally, the ways in which the fathers and mothers

interacted with the Chinese students were different and were rooted in early childhood

experiences. Finally, the interdependent relationship between Chinese students and the

parents brought barriers to depression communication. In particular, the theme (1)

engaged the research question (RQ), "What is the meaning of depression for the Chinese

students in the U.S.?" The rest of themes discussed the second RQ, "what are their

communicative practices with family in coping with depression?" These themes are

further analyzed below in detail, along with voices of the participants. It is necessary to

note that all the names are pseudonyms given to conceal identity of the participants.

<u>Meanings of Depression: Psychological, Physiological and Social Disorders</u>

   The meaning of depression for the participants referred to a variety of elements

involving mental health and self. Specifically, feelings and emotions of depression, status

of depression, influences of depression, personal expectation towards mental health, and

their coping strategies shaped the conceptualization of depression. These insights

impacted the individuals' focus on health and life, their expectations, tendency of

behavior, and self-efficacy of coping with depression. Park and colleagues (2011)

suggested that if the individuals perceived that their expectation is not fulfilled, they are

likely to adopt according behavior to reach the goal. Their help-seeking behaviors thus

are motivated by the perceptions of depression and its effects, perceived self-control, and

the perceptions of the effectiveness of coping strategies (Adams, Bezner, & Steinhardt,

1997).

The following participants, who considered depression as "negative feelings" and

"psychological disorder", emphasized that their depression was mainly caused by

academic pressure and discouragement in the life in the U.S.

> Shen (CES-D: 28): depression… physically, mind is disorder… at the
> appearance, the mood is not good. You cannot feel happy for more than
> two weeks. You feel life is gray. There is nothing can make you happy. I
> think it is a long-term negative feeling.
>
> Bai (22): depression… it really makes me want to cry. I have a lot of work
> to do, and I am worried that I cannot finish the work on time. I feel much
> stressed.

In particular, many participants related depression with stress and pressure. They

believed if they couldn't cope with stress well, they would suffer from emotional distress

and depression to varying degree. In addition to stress, the participants also highlighted

the feeling of loneliness, anxiety, confusion, loss of energy, and helplessness.

> Yu (17): …maybe loneliness… I am lonely… er… and I am confused... I
> am worried about my future… It is hard to perform well as an

international student here… life… is lonely… spiritual world as well… I live in solitude… and I am anxious for the future.

Feng (2): depression is that you are feeling down. You feel no energy. You don't want to do anything.

Bai (22): I feel more depressed when there is no one discussing with me. I feel the direction of my future is vague, both in the life and in the study.

Further, the negative feeling might cause more radical thoughts if it deteriorated

further. Participants talked about their suicidal thoughts when they were deeply depressed.

Yan (8): the mood is unhappy for a certain time… Sometimes I may doubt the meaning of my life… I didn't know why I existed in the world, and I was thinking to end my life.

Mi (16): depression means the mood is repressed… I don't mind the end of world as long as anything can stop the depression. When I am depressed I can understand why so many people kill themselves. As long as I can stop depression, I don't care anything.

Apart from the psychological feelings, the physiological disorder was another

aspect of meanings of depression for the participants. The participants responded that

when depressed they encountered sleep disturbance, appetite changes, and irritability.

Yin (15): It would definitely influence your health if the depression lasts for a long time. For example, if you can't sleep well at night, you are easily getting down. I think it is common.

Bai (22): when I am depressed, I eat a lot of food, and sleep a lot.

Yu (17): I suffer from sleeplessness. I don't have good approach to cope with it. I tend to fidget. I am inpatient, and irritable.

The participants also considered social and interpersonal disorder as depression. In particular, self-isolation, loss of interest in social activities, and avoidance of social interaction were the main manifestation of depression for the participants.

Hu (13): if your feeling is too bad and you just want to isolate yourself, you cannot live regularly, and behave oddly, I think the person should be treated by the professionals. For example, you don't go to attend the class, hiding in the home. You don't have any interaction with people for a certain time… I think it may be serious if you don't talk to others at all for three days.

Shen (28): I think it (depression) also influences interaction with others. You would have feeling of inferiority, treating things passively… in addition, depressed person perceive others have a negative attitude towards him/her. It is a two-direction perception. You have a passive attitude towards yourself. In the meantime you think others have a passive attitude towards you.

Shu (6): I came here without preparation and my English skills were weak. At that time I was bashful, and I didn't want to talk to others. I even rarely talked to my roommate. She was very nice, but I was not confident on my English skills. I feared talking to others. I even avoided meeting my roommate. She was an American. She may feel I was odd. I couldn't explain. I feared talking with her.

Furthermore, they perceived these psychological, physiological, and social disorders as a dynamic interplay, in which states could influence each other.

Yin (15): I think not sleeping well and depression could form a circle… Not sleeping well can lead to worse mood. Also, depression can cause the sleeping trouble. These two states can impact each other, or result to each other.

Wei (15): I would be anxious when I am depressed. The quality of sleep is not good. I can hardly get asleep… exercise is a healthy way to relieve depression. I go to the gym and do all kinds of physical activities. As long as I feel refreshed physically, it is good for my sleep as well. In addition, I would have a sense of achievement if I consist doing exercise. In this way,

I gain confidence and relieve my depression problem. Then I have more energy to engage into social activities.

As they believed the psychological, physiological and social disorders were intertwined, they tended to relief physically through exercise to relax the mood, and increase passion in social activities. In addition, the perceived level and duration of depression also constituted one dimension of meaning of depression, which was related to the influence of depression and coping strategies. The participants stated that low level of depression as an emotional state might be adjusted and addressed by self and thus it was not necessary to talk with parents. Besides, depression could be categorized as short-term depression and long-term depression. Short-term depression was viewed as normal, and long-term depression could threaten health. Thus, some participants avoided seeking help from family when they perceived a lower level and short term of depression.

Hu (13): depression can be diagnosed as a disease according to evaluation of the level. You may be depressed in the feeling. I think it is a kind of emotion. But if depression influences your normal life, I think it is a disease which needed be treated… It may be serious if you don't talk to others at all for more than three days.

Yao (1): lately my depression is caused by stress, which may disappear soon so it is not necessary to tell my parents.

Yin (15): I think for human being, a certain level of depression for a certain time is normal. You can solve on your own without family's help. It is necessary to cope with depression, pulling yourself out from depression. It would definitely influence your health if the depression lasts for a long time.

In particular, the participants indicated their depression level was influenced by the length of staying in the U.S. They got depressed when they first came to the U.S.,

because they could hardly engage into the environment, or could not stand the academic

stress. However, as time went through, they got to know and accepted various approaches,

such as seeking for professional help and exercise, to relieve depression.

> Feng (2): at the beginning I was depressed when I was preparing for the
> prelim. And I visited the counselor. The counselor said I would get better
> after the prelim. It didn't matter. I usually used a lot of resources in the
> university. I was not willing to tell others about my problems, neither my
> family. They didn't understand, and couldn't help… After all I had to
> address the problems on my own…Thus if I had problems on academia I
> asked the professor, and asked the counselor on other problems. I did yoga
> every day, and it helped.

> Zheng (1): When I first came to the US in 2008, I would be depressed if
> there was a deadline for assignments. At the beginning I thought it was
> normal until 2011. In 2011, I had to take the qualification test. I realized
> that I had been depressed for quite a long time. I didn't want to sleep. I
> didn't want to study. At that time my friends told me there was resource
> available, and I went to visit the mental health counselor… and then…
> and… then… I was diagnosed as depression. The counselor suggested me
> to take medicine, and talk a rest regularly, and exercise… I found it was
> helpful. I got much better.

Additionally, the ways in which the participants perceived depression contributed

to their coping strategies. The following participants, who described depression as a

stressed feeling suffering from "maladaptation" and acculturative stress, tended to use

self-criticism to face depression. They stated that they couldn't engage into the

mainstream American culture, feeling uncomfortable and embarrassed. This

conceptualization of depression contributed to self-blame and avoidance, rather than

seeking for social support.

> Yu (17): depression means dismay, stress… it is feeling stressed… and
> maladaptation. It is being marginalized, standing out of the mainstream
> society.

Shu (6): I would have a sense of self- aversion. I would be unwilling to face depression. I escaped. I disliked the environment, disliked talking to others, and I couldn't adjust to it. In the meantime I disliked myself because I couldn't adjust to it. It was a bad cycle.

The participants tended to use self-criticism to cope with depression, rather than seek social support, because they viewed depression as a stigma and personal weakness. They lost confidence to interact with people.

Yu (17): I have to adjust by myself… The process is suffering. I don't know the approach to cope with it. What's more, I blame myself. I think I am neither good at this issue, nor at that issue. After a long time of pondering, I become less and less confident. I am not confident so I don't talk to others. They may have a negative attitude toward me. They may think I am odd.

Conversely, the following participant emphasized that depression was a repressed feeling that could be controlled when the level was low. She took advantages of numerous resources to cope with depression, including talking with parents and doing physical exercise, to get relief mentally, physically and socially.

Feng (2): depression is that you are feeling down… There is short-term and long-term depression. Sometimes you can recover in several days. It depends on how deeply you are depressed… I think we can control depression through various approaches before it is too serious… Don't be trapped by the negative feeling. It is not all your fault, so don't isolate self. Talking with family is one way to relief, as well as with the professional counselor. There are also other ways to cope with depression, such as exercise. I find physical activities and some prior scientific ways, for example, meditation, adjusting breath, really work well. Talking with family, friends, and doing yoga are very useful.

Therefore, the participants held multiple meanings of depression, integrating depression as a psychological disorder, physiological disorder, and social disorder. It

reflected the ways in which the participants viewed the self and the social interaction. Unique meanings of depression additionally triggered the participants' coping strategies utilization. As the participants perceived depression as an interacting process of mental, physical and social states, they tended to use a comfortable approach to deal with one dimension of depression first, such as physical exercise, and then to improve other attributes. In the meantime, some participants indicated they are not willing to express negative feelings with parents and peers because they considered depression as a stigma. In this sense, it may be more acceptable for the participants to express and relieve depression through physical activities. Further, the particular family communication patterns on depression are embedded in their meanings of depression, depending on the perceived level of depression and perception about self.

<u>Selective Depression Communication with Parents: Express Only the Good Rather than the Bad</u>

Selective depression communication was another theme that emerged from the narratives. The participants either talked little about depression with parents, or talked indirectly. This participant indicated she tended to "report only the good rather than the bad" to parents. In other words, she merely talked about good things with parents, and concealed negative problems such as depression.

> Shen (28): I don't talk with my friends about my depression. I keep it in my mind… I don't talk with my parents neither. I am the person who "*bao xi bu bao you* (report only the good rather than the bad)".
> Interviewer: what are the reasons that you think it is not necessary to talk with others?
>
> Shen (28) …because my friends are all very talented... Also, they are all very busy on their study. I think they have no time to listen to me... They

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are all outstanding. I am not as outstanding as them… so… don't bother
them… I am not willing to share what I am thinking deeply… Both of my
parents are outstanding. They don't express what expectation they have
towards me verbally. But I think in fact they have very high expectation on
me. In their mind I am a pretty good student.

The participant was reluctant to tell the parents she was depressed as the parents

would be disappointed with her "confusion" and "failure".

Yu (17): I won't talk with my mother. I "report only the good rather than
the bad". I am afraid that she will worry about me… because the decision
of studying aboard was made by my own, and I have been spending the
money of my family to achieve the goal. I am fearful that they may be
more worried about me… because my parents… they seem to be very
proud of me. I am afraid to tell them about my confusion… I don't want
them to think that I fail. I don't want to make them down.

This term "report only the good rather than the bad" appeared repeatedly in the

narratives. We reflected in our journal notes.

Why did the participant only talk about good things? The participant
claimed that the people around her were more excellent than her. She was
reluctant to interrupt others with her depression. In addition, her family
had expectation towards her. In this way, was "not reporting bad things"
due to sense of self-esteem, and because she didn't want to make the
family disappointed? Disclosure of her depression may indicate she was
not doing well. Was it related to the cultural attitude of saving face among
Chinese?

The following participants argued that "not revealing bad" were what the people

around do naturally. People are eager to share good news but do not share bad news so

easily. This argument further reflected the cultural norms of saving face. Saving face

means the individuals are not willing to exposure negative states or personal weakness

due to social stigma, which is an important attitude for many Chinese (Kramer, 2002).

People tend to maintain good appearance in the community, group and family, for the sake of harmony and honor.

> Wei (15): …People tend to show their good side and good things to others. For example, I had a party yesterday, I just got an internship, and I was happy today. The status of people on the social media is always positive and good. We may ignore that everyone could have bad time, could be unhappy…. Perhaps it has already been a habit of people in the society. I think little people post sad picture in Facebook.

> Yin (15): I rarely talk to my parents when I am depressed… I think it is related to the Chinese culture. There is an old saying in China, "*bao xi bu bao you* (report only the good rather than the bad)". This saying has been distributed for a long time in the society. The children should be independent… If you talk to others, it indicated your setback. It means you are not strong enough. It may indicate you are not outstanding enough… We all enter an excellent university. We are studying abroad. I think I am outstanding in front of family. So I am not willing to let them see my depression… If I tell them about my depression and difficulties, I will uncover my disadvantages…

Thus, expressing depression or other negative emotions might reveal individuals' shortcoming, threaten the public image as a competent person and lose face, which would limit depression communication with parents and others (Burleson & Goldsmith, 1998).

In addition to saving face, filial piety was another reason why the participants didn't talk about bad things such as depression with parents. According to Confucian beliefs in Chinese traditional culture, filial piety was viewed as the root of the Confucian values and moral rules. It was an attitude of devotion and care given by children to the parents and elderly in the family (Gao et al., 1996). Children were assumed to fulfill the great expectation of family. What's more, the children have the responsibility to get rid of parents' worry, since the negative emotions may affect their health.

Ting (17): it makes me sad to see they worry. They already are exhausted with earning money for the family. I am their daughter. It hurts my heart if I distract their attention or consume their energy. I am filial so I don't want them worry.

Qiang (17): telling them is not a good thing. It doesn't help but gives them pressure.

Yin (15): it is kind of Chinese culture… children should be filial to get rid of worry of parents. It is not filial if children make parents anxious. It is a load for parents.

Thus, the participants were concerned that their negative emotions might be spread to their parents and make them worry and anxiety. Interestingly, there was another participant who argued that she talked less with friends than with parents, because talking about depression with friends may bring negative feelings to the friends.

Yan (8): except for my family, I also talked with some of my friends. But we didn't talk too much… I think if I talk with friends too much (when I am depressed), it may affect our friendship. When I talk with them, I am in a negative mood. I put all my negative thoughts on my friends. It is unfair to my friends.

We made reflective notes here.

So why did she talk to parents rather than friends if listeners may be influenced by negative thoughts? The participant additionally explained that conveying negative emotions might affect the relationship with friends. Friends may get annoyed if you keep talking about depression with them. So she would rather to talk to parents. Was it because the relationship with family was more stable and solid? As the participant narrated, her relationship with the parents was open and she could get helpful advice from parents.

To dig down deeper, we raised the question of why choose either friends or parents to talk with in the following interviews, and the participants explained as followed.

> Qiang (17): I talk more with friends than with parents… Anyway you are equal with your friends. You… you don't have expectation towards your friends, and they don't have expectation towards you. You don't have stress when you interact with your friends… What's more, we have similar experience and thoughts. We can understand each other. We are willing to help each other. We don't have to be careful as with family…The relationship is free and flexible…. (On the other hand), my parents are more likely to push me to work harder rather than console me when I tell them I am depressed. In this way, their words don't work for me. They give me more pressure, rather than relieve my pressure…their expectation makes me more depressed.

The participant demonstrated that compared with relaxed relationship with friends, the parents tended to exert pressure on him, since the parents had expectations. Besides, depression of the Chinese students could be an unnecessary load for the parents.

> Qiang (17): the parents don't know the life in the U.S. They don't know our pressure. So it is hard for them to understand. What's more, my depression may bring them pressure. They think their children are not doing well in the U.S., but they can't do anything to help. In this sense, telling them is not a good thing. It doesn't help but gives them loading. In addition, the parents always hope the children can be successful. They have high expectation towards children.

In this case, different participants coped with depression differently; some chose friends, and some chose parents to communicate, depending on the relationship they share. In addition, the negative feedback would be the point that the participants tried to avoid and considered on who to talk with about depression. Furthermore, whether the participants would obtain positive or negative feedback was related to the relationship

between family members – whether intimate or not, whether interdependent or independent and whether equal or not. The impacts of feedback on depression communication and the relationship are discussed in the later themes.

Furthermore, long distance from the parents was another reason that the Chinese student participants didn't talk about depression with parents. The participant narrated that she would not talk about depression until she met with parents face to face. Then she explained that she couldn't hide her emotions including depression in front of parents.

> Yu (17): I don't want to talk with my parents. I am afraid that they would be worried about me…also, I am afraid they are disappointed (bitter smile). I just tell them I am busy. But I would tell her face to face when I come back home. I tell her what I have experienced, because I can't hide. They can recognize whether I am doing well or not, right? I don't tell them I am doing badly when we are separated. I only say I am doing well…very well…(bitter smile)

> The researcher made notes:

> Therefore, whether does the long distance restrain family communication on depression? How does it limit? Long distance, on one hand, may increase the sense of helplessness. The sense of helplessness could intensify depression. On the other hand, distance may limit sufficient communication.

This narrative about long distance emerged repeatedly in the following interviews. Some participants stated that long distance may increase parental worry towards children because parents can hardly help. In this sense, the Chinese students didn't want to talk about depression with parents, and tried to hide emotions from the family. In addition, it was hard to eliminate parents' worry due to the long distance.

Ting (17): I may tell them later when I calm down, but I would not tell them the details. Since I am so far away from them, I don't want them to be too worried. If they are worried, it is hard to eliminate their worry, because I am not with them. For example, as soon as I tell them I am depressed, they would be worried for a long time; however, for me the depression may disappear soon.

Bai (22): to my parents, I "*bao xi bu bao you* (report only the good rather than the bad)", because they are far away from me. Telling them cannot address anything but makes them worried. So I would rather to conceal… It is better for me to address the problem by myself.

By contrast, the participants believed good news would make parents happy due to optimistic attitude.

Wei (15): I would talk a lot of positive things with them. They also may be unhappy occasionally. I would like to tell them positive thoughts. I say, we are lucky now. We own the things that others do not own. I have so good opportunity to study at Purdue, get known so many friends, and have a good job at Purdue. I let them feel that we are lucky through telling them good things. We are happy. Mainly they are happy that my thoughts are positive.

The participant further indicated the positive mind was partly related to religious beliefs, which played a role as a motivation to be optimistic and talking about good things with the parents.

Wei: In the church I felt a sense of peace. I gained the courage to face the difficulties in front of me… I got known more friends through the church and got more support… even though I had problems or depression, I would consider it as a challenge from the God. I would face it positively. When I am depressed, I seek a variety of help, such as exercise and talking to friends at the church. In this way, I realize that there are people supporting me. That's why I can always keep talking about good things and my positive mind with my parents.

As analyzed above, many participants tended to hide depression in front of parents. Besides, implicit communication was notable in the narratives. That was, the Chinese students communicated little about emotion with family, or communicate indirectly and implicitly. The narrative "when I am depressed, I want to talk to my family, but I don't know how to talk/I am not used to talk about emotion with the family" emerged continually among participants.

> Shu (6): I don't talk deeply about my emotion with my family. I would feel shy. We are not used to. It seems children should keep a distance with parents. I think for me it is not normal if I express my emotions to the family. I feel shy to express my emotion, and open my heart to my family. It is odd for me. Although I don't say, I am worried about them… We are not friends. If we were friends, I could speak whatever to them. But as they are my parents, I think it is not appropriate to talk about emotions with them.

The participant also indicated that he would reduce seriousness of depression when he talked with the parents.

> Lu (19): I may tell them a little about emotion, but I would control my emotions. If I am very depressed, I would pretend it is not serious. I mean I would not tell them I am very depressed. After all, I "report only the good rather than bad".

In addition, not talking about emotions seemed to be a social norm as the participant narrated.

> Shu (6): I think I am influenced by the deep social norms in China. People around are all the same with me. We all don't talk a lot with parents. We hide our emotions in front of them. It would be odd if one is very talkative with parents. It is hard to break. It would be strange to break the roles.

The norm of not talking about emotions was linked to *Hanxu* (implicit communication) in Chinese culture. *Hanxu* refers to a communication pattern which is implicit, reserved and indirect – not expressing everything. Influencing by the norm of implicit communication, emotions such as love, anger, sadness and depression are hidden, rather than expressed verbally, because it is assumed meanings of emotions and feelings are limitless and cannot be expressed directly (Gao et al., 1996). This implicit pattern limited depression communication with parents, since the participants felt embarrassed verbalizing depression. For example, the following participant found it difficult talking about depression with parents, struggling with the problems on family communication.

> Zhen (8): my parents rarely express their emotions or encourage me. But they usually tell the friends I am doing well in the U.S. I feel that they are proud of me… (Her eyes were wet with tear)… I have got used to talk little with them since my childhood… so it may be okay if it doesn't change... I am used to talk little… and it is hard for them to change… occasionally they impose their thoughts upon me. I dislike that… so… I think… people are hard to change… so… (the participant nearly in tears)…

Nearly at the end of the interview, the participant couldn't stop crying when we talked about the implicit communication in her family. She was struggling and indicated it was hard to talk about deep emotions and feelings with parents. The researcher made notes right after the interview as follow.

> I slowed down the pace of interviewing, and gave her time to relax. However, as we finished the interview, she started to cry. I turned off the recorder to make her comfortable. And then I asked her, are you missing your parents since we talk about this topic? She didn't reply but cry. I was just waiting for her and didn't ask anything. After ten-second silence, she shook her head, and said no. I didn't ask for her explanation but nodded and kept quiet, since she would tell as soon as she felt comfortable. Then

she slowly said, she didn't know why she cried in the interview, but she recalled that her emotions towards parents were really complex and hard to express. She loved her parents of course, but at the same time, she felt sad that parents seldom encouraged her or expressed their love. Finally, she said she wanted to talk more with parents, but it was too hard to make a change, because implicit communication has been a habit of her.

This reflexive notes not only indicated that the researcher attempted to be sensitive to the emotions of the participant, but also built a bridge for understanding the influence of implicit pattern on depression communication between the participants and family. Implicit communication deeply restrained depression communication. The family members didn't express their emotions explicitly. However, the participants expected to communicate about emotion and depression with parents deeply, strengthening the family relationship. Their struggles underlined the difficulties that the participants encountered during implicit communication about depression with parents.

The participant narratives also showed that there existed a strong family bonding amongst the members but still that did not translate into freely sharing emotions among them. The process of communication about depression was still very selective with the focus being expressing only the good rather than bad with their parents. Interdependence theory suggests that not sharing information and emotions with the parents would reduce information certainty; less openness may result in less shared outcomes between the students and parents (Holmes, 2002). It meant the students could hardly receive expected support due to inadequate communication.

The next theme further explores the influences of different reactions of parents when the participants talked about depression with them.

Positive and Negative Feedback of Parents Influence Depression Communication

Interdependence theory suggests that individuals attempt to maximize the benefits and minimize the disadvantages in an interpersonal relationship (Guerrero, Anderson, & Afifi, 2007). Similarly, the study found that the ways in which the Chinese students communicate depression with parents were characterized by pursuing rewards and avoiding costs. Thus, a positive feedback is constituted as a reward while a negative feedback is a cost.

Beneficial Feedback Promotes Depression Communication

Informational rewards that parents provided were a fundamental benefit in the depression communication. The participants specifically valued the suggestion that parents offered.

> Li (6): I call my mother for help (laugh) when I am depressed. I tell her I am fretting, and my mood is bad recently. I ask for her help. I tell her what the problem is, or why I am depressed. And then she would help me unscramble the problem. Although sometimes her suggestion doesn't work, I feel much better.
>
> Yang (1): I think normally depression is caused by some problems. I would describe the problems to them and listen to their opinion. They help me analyze the problems and offer me suggestions.
>
> Yan (8): Sometimes I might talk with my family asking for some advice. They helped me to address my depression. Otherwise, within that bad situation, I might do some extremely bad things. On the other hand, the family may be clear-minded, and give you some suggestions, making you not so radical.

Some parents usually gave specific advice to the participants. The advice not only helped the students clear their mind and identify a direction to address their depression,

but also indicated that family support was available. More importantly, the students were

empowered in the process since they gained the right to take their independent decision,

rather than being dominated by parental suggestion. This empowerment enabled the

Chinese students to increase self-efficacy and courage to face depression and related

difficulties. Besides the above, confirmation from the family was also an empowerment

resource for the children, which infused confidence and strength and motivated the

Chinese students to surmount what they encountered.

> Mei (21): I need their suggestion. For example, they can suggest me to
> choose which school, while I have some options which have
> disadvantages and advantages. But they let me to determine finally. They
> always give the freedom to make decisions… I feel less stressed after
> communicating with them, because I know there is someone supporting
> me. It helps me release my depression.
>
> Li (6): although my mother is my parent, she shouldn't restraint me. If she
> restraints me, I would have a conflict mind, and not willing to listen to her
> words. I would do conversely as she tells me. If she treats me like friends,
> and give me freedom to choose and determine, I would feel easy to
> communicate with her. I would like to listen to her.
>
> Mi (16): I have my personal insights, and I expect others' confirmation
> and support, especially from the people who I love. It is important for
> them to understand what I require.
>
> Feng (2): I frankly told my father what I wanted. I said I just needed a
> listener, rather than a speaker who told me what to do. In fact, I knew what
> I should do. But I need my family to support me, listen to me, and let me
> know my decision is a good decision.

The participants additionally acquired informational rewards from the experiences

of parents. The term "parents are more experienced than me" appeared repeatedly. We

made a reflexive note here.

How did parents' experiences influence family communication? The participants mentioned the rich experience of parents could persuade them to believe the difficulty they were facing was not serious, and therefore reduce their depression. Their experiences meant information and knowledge. The participants required more information to mollify the depressive emotions, since their depression was basically caused by stress of taking things too seriously. More knowledge and information could help them reduce the pressure. The following narratives supported the assumption.

Hai (4): ...I think the elderly has more experience than us. They have encountered a lot of challenges and problems. They know what we face is not a big deal. For us, the problem we have may be a big one now, but we may think about it differently a couple years later, as we accumulate more life experience. A big problem may be viewed as a small stuff in the future.

Qiang (17): … when I listen to their previous experience, I realize that their life has been very tough since their childhood. I am very lucky to live in the new time and have a lot more opportunities than them. When I think about that, I recognize that I don't have to be depressed because of trivial issues.

Other than informational rewards, interdependence theory states that emotional rewards are pertinent in a close relationship as well. The participants in the study especially emphasized emotional support of parents, such as encouragement, trust, comforting, care and love. The emotional support can reduce emotional upset through distraction, sense-making (MacGeorge, Feng, & Burleson, 2011; Burleson & Goldsmith, 1998; Priem & Solomon, 2009), lessening sense of loneliness (Segrin, 2003), and reinforcing family bonding.

Fan (8): we talk every day. I think it is also a way to address my anxiety for me. I mean… talking with them distracts my attention from the problems that make me depressed. It can make me ignore the problem temporarily... I hope they can say some words that I want to listen to…

Li (6): …I think my mother can give me emotional support when we talk. It makes me believe no matter what happens there is someone loving me. I

feel I am not lonely. In this way, I can calm down, and let it go. Family communication can make you express the feeling and thoughts, and unscramble the problem, and let you know how to face the problem.

Dong (0): The bonding between families is strong. They let me believe no matter what I do, and how I do, there are always my families who would be with me and support me… I think for parents, they should show their love to the children, making children feel they are loved.

Yang (1): I am satisfied. I can get their emotional support…What I want to do is to express the problems and my thoughts. What I want them to do is to listen to me.

Especially, the participants stressed trust from parents. The trust of parents was the glue that tied members together. The parents expressed confidence and respect towards the Chinese students, enhancing their self-esteem (MacGeorge, Feng, & Burleson, 2011).

Dong (0): they respect me and the decision I make, and understand me. They support my decision, and trust me. I really appreciate it. They respect my decision, and believe I am doing correctly. They would not force me to accept their opinion. It is a great encouragement and support for me… Their trust is really important to me. They believe I can make good choice. Of course sometimes they are worried, but they respect me. They listen to me, and give me proper suggestion. Finally they understand and support my decision… They didn't give me specific suggestions, but their trust and care were the biggest support for me.

Zheng (9): I hope they can say, I understand that you are working hard, and there are a lot of challenges; I know what you are facing; I trust you, and I will do my best to help you to cope with depression.

Comforting is a social support behavior that helps people to alleviate emotional distress (Burleson & Goldsmith, 1998). The participants mentioned the parents comforted them through evaluating the problem related to depression. In this way, the participants opened a broader perspective on the depression (Elliott, 1985).

Hai (4): last semester I was worried about my English certificate. If I could not get the certificate I would have to pay the full tuition. I was afraid that I was not able to pass. My mother said it is not a big deal. Just do your best. As long as you make all your efforts, the result is not important. It doesn't matter if we pay full tuition. Don't worry. Then I felt much relaxed.

Wong (5): I think they also know they can't help me address the problem, so they just ask me to relax. Our conversation makes me realize the depression I face is not a big problem. That is how they can help me.

Xing (6): they comfort me, rather than giving more pressure. They say that if I can't, just go back home (laugh). It is their way to comfort me.

The climate of affection, care and love in the family was highlighted as an important emotional support to maintain self-worth of the participants (Cramer, 1994; Holmstrom & Burleson, 2011; MacGeorge, Feng, & Burleson, 2011).

Huan (34): after all they are my parents. I should communicate with them regularly, keeping tight bonding. I talk to family is based on our family relationship. We care about each other. They want to know how I am doing. I am willing to share what happens around me. What I expect is emotional care. I don't expect to get their actual support. I regularly talk to them, which makes me feel I am living with them together. We are tied… what I expect is emotional care and harmony with family; they trust me.

Qiang (17): What I want from the communication is receiving their care and love… Talking with them makes me recall the happy memory of childhood spending with them. I don't have to talk about depression, and then I feel what I have is valuable. I don't need to be depressed. I know my family love me and care about me. So I get positive energy through that.

Hu (13): I just expect they can show they care about me. Actually I call the family every time as I want to know how they are doing. I feel at ease if I get know they are doing well. I think it is a big consolation for me if I know they care about me, and they are doing well. Thus I just hope they are good and care about me.

The following participant shared that because he and his parents were Christian , they had similar perceptive towards depression, and thus they could better understand each other and achieved an open communication.

> Dong (0): I think communication is mutual. The most important thing is care and love between family members… my families are all Christian. I think that is why we have very similar sense of value and thoughts. Therefore our relationship is harmonious… I think family members should understand each other better. No matter parents, or the children, they all have difficulties, even though they don't speak out. You should stand on the other one's point and consider their difficulties.

Negative Responses Constraint Depression Communication

As explained above, benefits that the Chinese student participants received in depression communication motivated them to disclosure with parents. Conversely, negative responses in many families restrained interpersonal interaction. The participants were reluctant to communicate in order to avoid negative feedback. In Chinese families, the parents hold a heavy expectation and hope the children to succeed. The participants described that they didn't talk about depression with parents, since it indicated failure, problems, and caused disappointment for parents.

> Yu (17): I won't talk with my mother… my parents… they seem to be very proud of me. I am afraid to tell them about my confusion… I don't want them to think that I fail. I don't want to make them down.

> Shen (28): In fact my grades were not good last semester. And then pressure from my parents increased. Thus I was more depressed. I had the feeling that my parents gave me stress and I made them disappointed… they always thought I was doing great on the study... I want to improve myself. But I am not able to do it. I let my parents down. I let myself down… (came near to weeping)

Furthermore, the parental disappointment may threaten the relationship between the Chinese students and their parents. The negative response of parents made the students frustrated and undermined the intimacy of relationship. As a result, the students would not be comfortable talking about sensitive emotional distress with parents.

> Dan (14): I think my father is disappointed with me… I didn't fulfill his expectation to enter the best college, or work in the large company. And I won't be able to do it in the future. I think he must be disappointed. I recalled that we quarreled before I entered the college. I said you must be disappointed with me since I was not admitted to the best school. He replied that I am surprised that you can enter a college! I was really sad at that moment. His expectation and disappointment influences our relationship. I am not close with him as with my mother. You won't talk to a person who is not close to you. I am reluctant to tell him about my feelings and thoughts, of course including my depression.

In addition, parents' blaming attitude created further problems. The participants illustrated they were discouraged by blame of parents, generating worse feeling about self. Besides, they felt disappointed with parents, who didn't respond to students' needs. Blame feedback put the students on a position of powerlessness, which was contributed by depression, conflict, and unhelpful response, constraining communication in the long term.

> Qiang (17): When you tell them you don't do something well, they may think it is because you don't make enough efforts, you are not working hard. So they may say you have shortcomings rather than comfort you. They are more likely to push me, rather than console me. In this way, their arousal doesn't work for me. They give me more pressure, rather than reduce my pressure.

> Shen (28): I know their purpose is good. But their words seem to blame me. They keep jawing. It causes me to reject… Although I can see them I don't feel they are with me.

Mei (21): …If I tell them, they may magnify the issue. For example, they would blame me and say it is my fault. They think I am not matured enough to deal with the relationships with others, so they may blame me if I have problems on it… It makes me more frustrated… so I don't talk to them since I know they would jaw.

The participants also stated that parents tended to moralize on their depression. It meant the parents repeatedly asked the participants to change behaviors as they wanted. In Chinese culture, the parents are assumed to provide supervision, guidance, and support to the development of children. However, the moralization discouraged the students to talk, because the parents merely spoke from their own perception, ignoring the needs of students.

Shen (28): I think they don't understand my depression. If I tell them, they just educate me more, and their suggestions do not work. Telling them only leads to more jaw. They thought I didn't take action to solve problem…Their attitude made me sad. I felt a sense of grievance.

Mi (16): I tell my mother not to jaw… she keeps saying what she wants me to do. I am distracted by their jaw, and be more anxious.

The participant demonstrated the parents didn't think depression was a problem, and kept moralizing her to work hard, which made the participant upset. This negative feedback weakened the connection between students and parents because of lack of understanding.

Dan (14): I rarely talk about depression with family… they tend to moralize… they say the depression you are suffering now will be beneficial to you in the future. You don't have to be bothered by the problems. You just need to work hard… it makes me upset. They think my depression is not a problem… They educate me as they are experienced people, and the problems are not problems. I feel upset, because the

depression is a problem for me. What I need is not moralization. I need their consolation and support.

The following is the reflexive note that we took.

So, what were the differences between moralization and suggestion of the parents? The participant further indicated she expected her parents to console her and provide emotional support, in order to help her relieve depression. In this way, parents' moralization here meant denying her depression as a critical problem. The response that denied, ignored and challenged feeling of depression were not sensitive and lack of understanding, leading to sense of helplessness of the participant. Moralization, a common parenting style in Chinese families, is built on the root of parents' responsibility. The parents are obligated to supervise the development of children, and moralize as long as children's behavior is improper or stray away from parental expectations (Chao, 1994). On the other hand, suggestion should be a general or specific direction which is based on sympathy, trust, and empowering the students to determine, as the participant Yan stated below.

Yan (8): I find if I communicate my depression with my family, they could give very good advice. So I think it is good for me to listen to families' suggestion. Although I need to cope with these problems by myself, I would tell my family how I cope with. They listen to me carefully, and would respond that whether I am doing well. They encourage me and say my approach is good. Sometimes they also suggest me to use another way to cope with the problem, and hurt myself less.

The participant stated she needed her parents' supervision to motivate her to perform better in study, because she was not mature enough. The parents tended to monitor the students' study and expand parenting beyond school, overcoming the long distance. However, she also felt more depressed since her parents were overly concerned about her. On one hand, she realized that parents' supervision was necessary for her. On the other hand, she resisted the over-concern of parents. It might provide implication of appropriate strategies involving supportive communication.

Shen (28): Last semester I called them once per month. So this semester they realize they should change and call me every day. And it causes another anxiety for me. They call you every day because they realize that we have talked little with each other. That's why my academic performance last semester was worse without the monitoring of parents. I think I am not mature enough. I still need parents' prodding. Without their supervision I was slack.

In addition to the negative feedback and moralizing, other passive reactions of the family, such as asking to give up, showing no support and interest, diluted the sense of being loved and cared. It discouraged the students' passion and energy to cope with depression and difficulties.

Hu (13): I expect their positive encouragement. I am already stressed, so I don't want their passive attitude. I know they are for the sake of me, but… I am anxious with the academic stress, and I really want to overcome it, but you keep asking me to give up… they repeatedly say that which makes me more upset… I expect them to say good job, go ahead, you can do it… That would be enough.

Mi (16): I hope they can provide me positive feedbacks. For example, once I asked my mother whether she could practice the interview procedure with me. I knew that she couldn't really help because she couldn't speak English, but what I expected was that she could say she believed I was well prepared. It would offer me a lot of confidence. But she never says that. She said, go for other people; she said she can't help me… I felt disappointed.

Yin (15): I hope my parents can show some interest. Otherwise I will not have the mood to talk. They don't have any response to what I say. I am the only one who is talking.

Unsurprisingly, many participants in the study who indicated trustworthy, affective, and warm family interaction were basically tested at low risk of depression. For example, the participants who had relatively open communication with parents were assessed to be at low level (less than 15 points) of depression currently (e.g., Yang, Hai,

Wong, Li, Dong, and Fan). Conversely, the students with negative family climate –

blame, disappointment – were measured to be at a relatively high level (15 points and

higher) of depression (e.g., Ting, Qiang, Bai, Shen, and Yu).

<u>Different Communication Styles of Mothers and Fathers</u>

As the previous theme explained, the negative family communication interactions

of the participants strongly implicate the students' emotional management (Dunsmore &

Halberstadt, 1997). This study further found that the communication styles and

interactions differed between mothers and fathers. Their differing responses engaged the

Chinese international students' depression issues differently. According to

interdependence theory, the participants perceived they had less right to control family

interaction than the fathers had, who were the leaders in the family, and thus the students

were reluctant to discuss depression with fathers due to their submissive position

(Rusbult & Van Lange, 2008).

The following participants stressed the suggestions from mothers, and indicated

that their fathers rarely got involved in emotional expression.

> Dan (14): My family… especially my mother can give me some
> suggestions. As to my father… he rarely addresses my issue. Despite, he
> knows most of my problems because my mother tells him all. However, he
> rarely expresses his thoughts to me.
>
> Mi (16): The topics I talk with my father are limited; we just communicate
> the issues in the life and study, rather than emotions.

The participants illustrated that they tended to talk about different topics with

mothers and with fathers. They were used to talk with fathers about important issues

which need a decision, whereas talking about sensitive and private issues with mothers. They indicated that mothers were more sensitive and patient with conversations about emotions, while fathers did not encourage those conversations and operated more as the final decision takers when there was a need to take important decisions.

> Hai (4): I always talk about sensitive issues with my mother, whenever I am happy or unhappy, since she is interested and always patient. And I talk about big issues with my father... like choosing universities, and studying abroad. Also, where I should find a job, what kind of job I can look for. It has been a habit since I am young. My father mainly is the decision maker in the family.

> Li (6): I merely communicate with my father when I request his advice; for example, when I chose the school… I asked my father which country I should go to - some general questions. Otherwise I don't talk to him when I am depressed. It doesn't help.

In several participants' families, the fathers usually played a role of mentor, while the mothers often provided touching comforting. In this way, the participants may easily receive pressure from education of father, and thus prefer to communicate about depression with their mothers, who make them comfortable.

> Yao (1): in fact my father has educated me and my mom since I was very young (laugh). Sometimes I was annoyed. But my mom is different… My father would like to infuse his thoughts on me, and says you should do this. On the other hand, my mother says in the same situation she would do in this way. Her communication style makes me feel comfortable. She is tender. Conversely, my father is strict. He always says, you must do this, otherwise…

> Interviewer: which one do you prefer?

> Yao (1): of course my mother (laugh). I think the communication with mother and with father is different. I talk about life issues with mother, and talk about study and career with father. They have different positions

in the family. It would be odd if I talk about private matters with father (laugh).

Yao further said,

Yao (1): I can imagine that if I tell them I can't get asleep because there would be an interview tomorrow, they would respond differently. My mother would say, take it easy, don't worry. On the other hand, my father would say, go to prepare for the interview more... (Laugh). Their reactions are really different (laugh).

Hai (4): my father doesn't provide any valuable information... (laugh)... I would rather to tell my mother. If I tell him I have a very push instructor and I feel stressed, he will ask me to work hard. He says it is your great opportunity to work more. In this way you can learn to improve yourself... He indicates it is good for me to revise the assigned work repeatedly (laugh). His answer really is not what I want (laugh). And then I feel much better until I talk with my mother.

Ting (17): My father is like… care about my study and education. My mother focuses on my life… So I feel more relaxed talking to my mother. Some topics I tend to speak to my mom, rather than my dad. For example, when I am depressed in the life, my mother would give me some advice.

In addition, it seemed that mothers were proactive to gain new information to understand the life of the Chinese international students. This understanding shortened the communication distance between the Chinese students and mothers. In interdependence theory, increasing information certainty through sharing information could improve developing a close relationship between the partners (Holmes, 2002).

Li (6): I have been talking with my mother when I am depressed. I think my mother's thoughts and ideas are really new and fashionable. She can understand new things and matters. She is not the same as my father, who holds the old ideas of last century. Her thoughts are very similar with me. I may be influenced by her. I think we can communicate freely, and she understands what I am thinking.

Ting (17): my mother is open-minded. I think this point is really good. We are much closer than friends… based on the love of family and

understanding, we can talk with each other more. And also my mother starts to use social media, and she knows more about young people's world. I would be more willing to talk to her.

On the other hand, the fathers' lack of understanding of the problems and depression of the students prevented further depression communication, and created communication distance.

Interviewer: how does your father respond when you are depressed?

Li (6): he says, you are too young to be depressed. You don't have to be depressed... He can't understand I am depressed. He thinks it is not a big deal.

Interviewer: what do you feel when he responds like this?

Li (6): I think, all right…I won't talk to him next time when I am depressed, since it doesn't work. He can't understand my depression. Also, I think his thoughts are old. He can hardly accept new things. He has no interest to accept new things.

Furthermore, as the participants described, mothers and fathers had distinct and complementary obligations in the family. The duties of fathers in Chinese families often lie on earning money and providing financial support, as well as moral instruction (Chao & Tseng, 2002). The social identity of the fathers is more serious than the mothers, and thus they are less likely to offer warm feedback than mothers for the participants. In contrast, mothers basically are expected to develop a loving and intense relationship with the children. Thus, mothers are more likely to encourage and comfort the children than fathers (Chao, 1994).

For example, the fathers satirized or laughed at the students when they talked about depression. The fathers in the Chinese families held the hope that the children

should be strong and depression displayed the weak personality of children. In this way, the fathers often discouraged their children from showing weakness.

> Mi (16): My father said my thoughts were merely daydream. I got angry. I said you didn't have thoughts! It didn't mean I had no thoughts! I said a lot of words that hurt their hearts. My father always satirizes me. I don't why he does this. He says I am not able to work hard; I can't do anything. He always says that… I didn't know why…my father never expresses his emotions. He has expectation towards me, so he thinks I can bear his sarcasm.

> Zheng (9): I think talking to my father is tougher. He really sticks to his opinion. I feel easier talking to my mother. She can accept my thoughts more than my father does. My father even laughs at me when I cry. He says I am weak when I tell him I am depressed. I think my father is used to hide his emotion. He actually is worried about me, but he uses irony to motivate me. He says, why are you crying for this trivial thing? It is not necessary. He doesn't encourage us express our emotions, so I don't talk to him. In terms of mother, she is very worried about my sister, so I would like to talk to her. My dad's personality is harsher.

Therefore, the different roles of the Chinese fathers and mothers in the family influenced their distinct styles of communication and reactions to the participants' depression. It was related to social norms involving parenting in Chinese culture. The Chinese father in the family often is the leader, and assumed to be harsh and play the dominant role in the family, expressing less emotion; whereas the mother is responsible to encourage the children and provide empathic reactions. These cultural roles influenced the depression communicative practices. It was also needed to notice that many female participants described that they interacted with mothers more often than with fathers; while the male participants showed little preference. It may shed light on future research on investigating the gender differences about depression communication with parents.

Childhood Experiences Influence Depression Communicative Practices

In addition to the differing communication styles of the parents with the participants, the communicative practices were also deeply rooted in childhood experiences. The participants indicated that their childhood experience influenced what they talked about with parents, and how they talked. The dimension of temporal structure in interdependence theory illustrates that as the students depend on the parents or not in the early age, they would shape a long-term relationship consistently. For example, one participant Hai stated that she was less likely to talk about emotions with her parents when she was young.

> Hai (4): I think it is because I was raised by my grandmother when I was very young. After several years, I was brought back to my parents' home. I was not quite familiar with that home. Sometimes when I was unhappy, I just said I want to go back to "my home" (laugh). So at the beginning our relationship might like friends. Before I went to the college, study was primary. I merely told them my performance at school, rather than my emotions, or my thoughts. I just talked about my emotions with my friends. So they may not know how my emotions change from children to now. They just know my study performance. I don't tell them how I feel, what I think. I don't tell them who I like. I feel embarrassed.

> Then after the interview the researcher took reflexive notes as followed.

> How would it influence communication in later life? She further explained that she felt embarrassed when talking about emotions such as marriage issues with family. Also, marriage issues were the main pressure she received from the family, who pushed her to marry soon. However, the participant previously said she would like to tell the family about her depression that was caused by stressors from the study environment. Was it a discrepancy? Was it because depression caused by marriage issues was created by family, while depression caused by stress from study was from academic performance? For the prior one, she felt more depressed by talking to her family who she regarded as the creators of her depression. It also reflected the communication pattern established since her childhood. The parents merely focused on academic performance and ignored the emotional experiences of the children.

Furthermore, the participant mentioned that due to lack of adequate communication in childhood, the parents were less confident with her ability of dealing with emotional issues such as marriage when she grew up. That was one of the reasons the parents were especially concerned on this topic.

> Hai (4): They have been not concerned about whether I study hard, what job I can find since my childhood, because they believe me, they believe I can control and do well. Conversely, as to emotional issue, they want me to have a boyfriend and get married soon, but they think I have little experience, so they are worried about me. They believe I can do well on the prior issue, but they don't believe I can handle the latter one. They ask me a lot of things repeatedly. It brings me more depression. They are too worried.

Besides, talking little about emotions appeared to be natural which was formed in the childhood for several participants.

> Shu (6): I talked to them with a cold attitude. I briefly answered their questions. For example, I am fine; I have money; the study is okay. That is it… nothing else to talk. It was more like a report. I didn't want to express my emotions. We didn't talk about specific topics… because I was not used to talk to them since I was young. I didn't have the habit before. The life when I was a little child was simple. I didn't have emotions to express. I think it was odd to speak out my emotions. I felt we had distance. I didn't talk to them when I had problems on emotions.
>
> Qiang (17): it is hard to become friends with my parents, since I have been getting used to the relationship for these years. We have been used to talk little since my childhood.
>
> Shen (28): I have been living alone since the high school and college. it looks like we have paid little time on talking with each other since my childhood.

With regard of the reason that they didn't talk a lot since childhood, the participants indicated that it was because they lacked their parents' company since

childhood. In this sense, parents were not available when the children wanted to share

emotional experience. The people who accompanied with the students in the young age

were more likely to build an intimate relationship with the students.

> Yin (15): My parents were busy when I was young. They didn't
> accompany me quite often. They had economic pressure. Although the
> economic situation became much better when I was in high school, parents'
> company was not enough. We were not so close.

> Ting (17): It is related to my childhood experience. My father was too
> busy to see me frequently when I was very young. I was not close with my
> father. I was basically raised and accompanied by my mother. I spent most
> of time with my mother. Most of my life habits are educated by my mom.
> My father rarely speaks.

By contrast, the following participants demonstrated that his family

communication pattern was formed since childhood, which was open to any topic, and

consistent to their older age.

> Yang (1): I think the way we talk now is formed since childhood.
> Especially when I was a teenager, I didn't have serious conflict with my
> family. In this way, our family relationship is kind of harmonious. At least
> our relationship is equal. There is no authority in my family. I don't have
> to speak to my family carefully as other families. I think we obtain some
> benefits through communication like this… I see some friends who are
> very careful talking with elderly in the family. I feel that they are not close.
> They seem to be not familiar with each other. I think it is a hint that you
> are not close to them if you talk very carefully. So I prefer the way we talk
> like friends. We are close and equal.

> Hu (13): I think my family is the biggest treasure for me. My family
> affects my characteristics, and my personality. I am very optimistic. I am
> not concerned about others' thoughts to me. I am confident. My
> confidence is not based on others' opinions or my academic performance.
> No matter what do, I know my family would definitely support me. I am
> sure about that.

Thus, the family climate and parenting practice formed in the childhood constructed the ways in which the children express the emotion, as well as located the family relationship on alienation or intimacy orientation. It influenced the depression communication in the long term.

Interdependence and Conflicting Expectation Restrain Depression Communication

The interdependent relationship in the participants' families emerged as they stated the family communication experience. Interdependence here referred to the relationship in which the participants depended on parental support, while the parents required the students to meet their expectations. It was based on the cultural norms that the individuals' desires should be submissive to the authority and interests of parents (Gao et al., 1996). In particular, the participants mentioned they were supposed to respect the parents and prevent them from worry.

> Dan (14): we look like friends, so we can talk freely. However, at the same time we are not friends. If I speak inappropriately, they would be angry, and show their authority as parents to me. They say I can't treat them like that since they are parents. I can't "*mei da mei xiao* (ignore respect to the elderly in the family)".

> Mi (16): we are friends. We talk a lot. I never quarrel with my parents, because I would feel unhappy quarreling with them even though I am right. So I always follow their thoughts. For example, I followed their suggestion to proceed to Master's program. What's more, I would not say the words that may enable them to upset or worry.

> Bai (22): I think we are like friends… We can chat like friends, but I don't talk about depression is because of the limitation of distance. They can't help me. I have to address depression on my own. I don't want them to worry.

The participants emphasized that they could talk with parents like friends, but at the same time they should respect the parents with a good manner. The researcher made reflexive note here.

> So, did it mean the participants valued parents' understanding and equal relationship as an adult? At the same time, the children still were required to behave properly to show their respect to the parents. Therefore, how did this relationship influence the family communication on depression? The consequence may be that they talked freely and they felt comfortable, although they should follow the social norms in China and avoid explicit conflict with family, which emphasize parents' authority.

The next participant further indicated that social norms influenced family communication between her and her parents. The participant stated that her mother's thoughts were affected by people around her, who claimed that the daughter should be with parents and take care of parents. The social norm that her mother held conflicted with the thoughts of the participant, who attempted to stay in the U.S. Their different thoughts influenced the family communication and triggered depression of the participant. The participant avoided communication to avoid conflict.

> Yu (17): I think family communication also is influenced by people who are around my parents. They influence my parents' thoughts. And thus it influences interaction between my parents and me. My parents' thoughts are shaped by their environment and people around; my thoughts are changed as well. These changes lead to the change of our communication, our communication pattern. I don't know how to communicate with them... We don't believe we can understand each other now... I feel more depressed when I think about that... I don't want to talk with them. We talk less.

The emotions among close relationships, such as liking, loving, warmth, form the intimacy of the social network, through attaching individuals to one another based on

sharing resources (Andersen & Guerrero, 1998). Interdependence theory suggests that sharing emotions and information between the partners would promote information certainty, resulting in a closer relationship (Holmes, 2002). In this sense, the participants who didn't share information with parents or presented warmth failed to foster the intimacy of family relationship. Trust is prominent for the communication of negative emotions, which is largely dependent on connection, interaction, and disclosure (Burleson & Goldsmith, 1988).

Furthermore, the level of interdependence – one dimension in interdependence theory – argues that if students feel less comfortable with interdependence, the less they would communicate with parents (Rusbult & Van Lange, 2008). Unsurprisingly, the senior position of parents in the family widened the sense of distance between Chinese students and parents. The children had to listen to the senior parents, and had less right to determine. The junior would be not willing to talk, and found difficult to talk.

> Qiang (17): I think it is hard to become friends with my family. My parents are in the senior position in the family. They have suggestions and requirements for me. When I have some difficulties I may ask for their help, but sometimes may not. I can't talk to them freely. We are more like seniors and juniors. Their position is higher than me.

> Shu (6): following parents' words gave me a sense of distance. I felt we were not close. I was not willing to tell them what I was really thinking. I would feel embarrassed if I told them about my emotions. Mostly I just followed without communicating my thoughts. I was reluctant telling them my deep insights.

Additionally, parents in the Chinese families were likely to look after the children continually even though the Chinese students may be independent when they are adults.

That was deeply based on the Chinese culture that parents are responsible to provide all support and monitor to the children, to maximize the development of children.

> Zhen (8): I think… parents tend to think their children are still kids, although children are adults. They don't believe children can cope with depression and problems well. It is also because parents are used to take care of the children since they are young. It is a trait in the Chinese family… we are independent when with friends, whereas we are interdependent with family. So family is more likely to worry about me.

The above analysis leads to deeper exploration of the interdependent relationship in Chinese families. The term "filial piety" appeared repeatedly in the narratives. The following participant revealed that the value of filial piety in Chinese families leads to interdependence of family relationship. Children are requested to take care of parents, and in the meantime they rely on parents to get support. Children and parents are interdependent. Both of them expect to get rewards from family communication. Therefore, the process of communication is required to be mutual. The children hope to receive parents' suggestion and emotional support. Parents expect children to live a good life, exhibit the ability of independence, and take care of parents. Correspondence of interests in interdependence theory notes that if the two partners' expectations are not met by one another and don't match, the conflict would appear and brings difficulties to the communication (Holmes, 2002).

> Yu (17): The conflict between us (self and parents) is really large… I think the filial of children influences relationship with parents. Children have to be filial because they can get benefits from parents. Parents can help you take care of your baby. They can cook for you. They can support you at any time you need even though you are an adult. The reward that parents receive is elderly care given by the children. If you want to get support from parents, you should be filial. I think it is really sad if I say

this. But it is true. …It is an exchange which forms harmony. ..Chinese family relationship is interdependence… I dislike this relationship in which one person is very careful facing the other partner.

Qiang (17): what I want is not what they want… if this relationship has been formed for a long time, I will think they can't understand what I need. So I will not tell them what my dream is, what my depression is, what my life is. It is a long-term influence.

Yu (17): My parents support my decision. No matter what I do, my parents support me unconditionally. It's true. But actually they have expectation in their minds. I know they have. If I behave overly bad, they won't support me. They support within the boundary of their expectation.

The participant Yu said her parents supported her as long as her decision is within the expectation of parents. The parents require the child to meet their expectation. Therefore, the relationship between support and expectation may lead to more pressure as it is underlined by the unsaid stricture that not meeting expectation would result in no support.

The following participant indicated that she didn't talk about depression with parents directly, but she would be disappointed if the parents didn't notice her depression, because it might mean parents didn't care about her enough. She didn't talk directly, because she was afraid that if she told her parents, they would be overly concerned, which brought more pressure to her. This narrative further indicated the interdependent relationship between students and their parents.

Hu (13): I do not tell them I am depressed, but I may hint that I am unhappy. My words showed my mood was not good. I was annoyed… I may do that consciously to attract their attention. I want them to notice my depression. I hope my family can support me. When I am feeling down, although I am impatient if family want to talk with me, in my deep mind I hope I can get family's support. I would be disappointed if they don't respond to my depression. If they don't recognize it means they don't care

about me. I expect they can notice and provide me emotional support. I hope they are sensitive but not exaggerate. Their over-care is the source of my pressure.

Additionally guilt and blaming oneself also restricts interactions. In this following narrative, the participant thought that she was not filial and blamed herself and cried. The participant stated that she didn't meet the expectation of the parents, and she was not worth of their support. This guilt may restrain further interaction.

> Yu (17): I feel like I am occupying the sources of my siblings… and I am spending family's money… I feel very guilty (sigh)…oh I know I am not filial if I think in this way…But I…I think I am not worth of it. I am not worthy of it… (the participant was nearly tearful)… I don't know what to do… I can't take it for granted…Perhaps a lot of pressure is exerted by self. Once a time I feel very stressed. I told my family I was confused what I should do in the future… I got more upset after communicating with them…I told my mother I am afraid to let you down; what if I can't find a job… I said what if you are not satisfied with the job I look for… My mother was upset. She said, it is your life! Why are you thinking about us? You should think about what life you want! She was very angry. She said you are thinking too much. We don't expect as you do. I knew I should be responsible to my life, but I didn't want to let you down. My mother said, we are not able to take care of you for your whole life; that is your life!... we both felt upset. Later on we talked less and less.

The sense of guilt due to non-filial piety deeply influenced her thoughts and parental communication on depression. Talking about depression indicated that she didn't meet parents' expectation. In this way, parental communication on depression may create more pressure, guilt and negative feelings on her. As a result, she avoided talking to her parents when she was depressed. As discussed earlier, interdependence theory emphasizes if the participants felt uncomfortable talking about depression due to guilt, they were less likely to communicate with parents.

In addition, the participant was going to cry when she was talking about her guilt towards her parents. The researcher made notes about the emotions expressed by the participant.

Her emotions in the narrative impressed me a lot. The expression of emotions indicated that she was really suffering from the difficulties on family communication. At this moment, what should I do as a researcher? I realized how important sensibility is for a researcher. When the participant was choked with emotion, to be honest, I had tears in my eyes. It was impossible not to be sad once the person in front of you got sad. Her story also reminded me of my own personal experience. I looked at her eyes, indicating that I was listening to her and I could understand her feeling. We had a five-second silence. On one hand, I wanted to give her some time to release. On the other hand, the silence is a process for me to absorb the emotion, and think about the next action. I felt that showing emotion was an important part of a research. I could feel that I had connected in an emotional way with the participant and the story she told. She told it so well that I could feel her pain and had reached the essence of her story. In the meantime, I appreciated her trust that she expressed her emotion openly to me. This sensitivity of researcher facilitated a depth understanding of participants' lived experience. In this sense, the interpretation in the results and findings captured the perspectives of participants.

The interdependent relationship tied the family members together. However, the conflict on each other's expectations was inevitable. In order to create harmonious family, the Chinese student participants were likely to avoid talking about emotional distress or difficulties they encountered with the parents.

Discussion

The experiences that the Chinese student participants narrated in the study provided a broad understanding of the ways in which they communicated depression with parents. The findings echoed the central role of family communication, which is deeply

rooted in the Chinese culture. The themes emphasized unique meanings of depression for participants, selective depression communication, positive/negative reactions of parents, distinct communication styles of parents, childhood experiences, and interdependent relationships that formed depression communication practices between the Chinese students and their parents.

Beliefs about depression have direct implications for coping strategies and help-seeking behaviors, especially in shaping how Chinese student participants treat depression to protect themselves and how they seek support from parents, friends, and other social networks. The participants described depression as an integrated negative state that afflicted them for different time periods, and emphasized physical symptoms without disclosure of psychological symptoms. This engaged the RQ, "What is the meaning of depression for the Chinese international students in the U.S?" Many responded that depression was a state of stress, anxiety, shame, maladjustment, confusion, helplessness, unhappiness, and loss of energy. In addition to the psychological state, the physiological and social disorders were highlighted. The participants presented symptoms such as eating disorders and sleep disturbances as manifestations of a depressive state. What is more, depression was considered by the participants to be associated with less interest in social interaction, increased self-isolation, and even less confidence and more distress in their social life. It also was necessary to notice that they believed these psychological, physiological, and social states interacted intimately and could influence each other. As a result, the participants were likely to adopt a comfortable way to address one aspect of depression primarily, such as relief physiological disorder through exercise. Afterwards, psychological and social disorders were influenced by improved physical

condition. Also, as depression was viewed as a stigma for some participants, open display of negative feelings were avoided. This may provide insights for the parents, universities, and health professionals, who should be sensitive to the emotions of students, at the same time, should offer assistance starting from the physical disorders of the students. The participants further demonstrated that the perceived level and duration of depression established another aspect of meanings of depression. They assumed that a low perceived level and short-term depression could be adjusted by themselves, so they didn't need parental help; whereas high level and long-term depression could threaten health and thus needed treatment.

Additionally, the study explored their depression communication with the parents rooted in these conceptualizations of depression, discussing the RQ, "What are their communicative practices with parents on coping with depression?" First, the study found that the participants tended to express depression with parents selectively. It meant they either did not talk about depression at all or just talked about it briefly. Primarily, the participants attempted to prevent parental worry and disappointment through not telling bad news or discussing their depression. They also demonstrated a desire to show their independence by not seeking help in order to maintain self-esteem (Shapiro, 1983). In addition, the lack of understanding of parents toward the American environment made it difficult for parents to provide informational help. This concern restricted depression communication because the participants considered that expressing their depression was useless.

In addition, in a Chinese family, the participants tended to express their emotions in an implicit manner. It is related to *Hanxu* (implicit communication) in Chinese culture.

The deeper philosophical roots of implicit communication of Chinese may be found in Taoism: "The Tao (Way) that can be told of is not the eternal Tao; the name that can be named is not the eternal name" (Chan, 1963:139). Traditionally, in the communication process, the Chinese believe that "the number of words is limited, but the idea it suggests is limitless" (Fung, 1966:12). The communication style since childhood in many families is reserved and indirect. The family members care about each other, but communication of emotional expressions such as love, joy, and depression are normally kept covert. The family members seldom verbalize their love, but express love through helping each other (Gao et al., 1996). However, the problem is that the implicit communication pattern in Chinese families may restrict communication on emotional distress such as depression. On the one hand, the Chinese students felt embarrassed expressing depression directly, which increased the risk of lowering their self-esteem (Chesler & Barberin, 1984). On the other hand, the parents were not sensitive enough to recognize the students' depression due to lack of communication. The participants had the desire to communicate with parents to cope with depression and other stressors, but the found it difficult to break the cultural wall of implicit communication in Chinese families.

Second, many participants' parents tended to adopt a more controlling and less responsive communication style, which represented the authority of parents in the family; the students were subject to the parents. For example, parents were likely to raise expectations and requirements rather than respond to the needs of the students. If the students expressed that they were depressed due to difficulties and frustration in academia, parents appeared to be disappointed and responded negatively because this did not meet their expectations. In this sense, the powerlessness and helplessness of the

students yielded a sense of distance with parents and thus prevented deeper communication on negative emotions and depression. Instead, some participants' parental feedback that provided instrumental and emotional support—such as solution suggestion, comfort, trust, respect, care, and love—would strengthen the students' emotional competence by improving their ability to regulate depression and address the problem, diverting attention to other stimuli from depression and receiving care from parents. As the CES-D scale measured, the depressed students in the study were mostly distinguished by a family communication climate of emotional disengagement.

Third, it was important to recognize the distinct communication styles of Chinese mothers and fathers. In Chinese culture, mothers and fathers play different roles in the family (Wolf, 1970). It has been a social norm that mothers in Chinese families play the role of comforting and encouraging children, being sensitive, and nurturing, while fathers are considered to behave aggressively, be serious, and criticize children to control the whole family (Vangelisti, 2004). As additionally described by the participants, their mothers had spent more time with them since childhood, establishing a foundation for supportive communication. This consistent company not only enabled mothers to be available when children experienced emotional distress, but also strengthened the ties with children when young (McElwain, Halberstadt, & Volling, 2007; Vangelisti, 2004). Meanwhile, fathers provided financial support and moral instructions and were not noted to indulge children emotionally (Jankowiak, 1992). Restricted by their traditional role, fathers were not used to expressing love to the children. As a result, the participants tended to talk more about depression with mothers rather than with fathers, and those conversations became an important part of their coping strategy. The warmth and

emotional support of mothers strongly affected children's negative emotions (Fosco & Grych, 2013).

Fourth, the family climate and experiences of childhood largely influenced family communication at an older age. The depth and frequency of interaction with parents at an early age, along with the quality of relationship, contributed to the climate of family in the long term (Fosco & Grych, 2013). Research has noted that a cohesive and warm family climate in childhood facilitates the learning process of sharing emotional experiences; in contrast, negative climate discourages the children from seeking help when they experience emotional distress (Thompson & Meyer, 2007). This was aptly reflected in the participants' responses. The family bond that was established in childhood through positive interaction would build a family relationship in the long term (Bowlby, 1988). In the study, the participants who described an active interaction with parents in childhood usually had a relatively open communication on depression when they were older. Conversely, the ones who were not used to expressing emotions or depression to the family at an early age often avoided talking about private emotional experiences with family. The pattern of family expression on one's affective state at a young age builds a rule that contributes to the depression communication in the future (Halberstadt, 1991).

Fifth, the parents emerged as the central social network for interdependence for Chinese people, who emphasized collectivistic culture. The structure of a traditional Chinese family is hierarchical, in which individual interest, especially the younger generation's interest, is held inferior to the family interest (Koerner & Fitzpatrick, 2002). Communication on a range of topics is thus limited in these cohesive families because

family interactions emphasize harmony and interdependence of family members, and conflict is usually avoided (Koerner & Fitzpatrick, 2002). For example, parents have the power to be the decision makers for the family, and the children are expected to behave as the parents require (Koerner & Cvancara, 2002). To achieve harmonious atmosphere in the family, it is possible that the children do not talk to the family when they do not meet parents' desires, including the hopes of success, security, and happiness of their children. Further, in Chinese families, parents and children are mutually reliant, as each one takes responsibility at different ages. In this study, many participants indicated that their parents took the responsibility to take care of them even though they were adults. In the meantime, the participants relied on parents for both financial and emotional support. However, this interdependent relationship brought obstacles to depression communication. The Chinese parents expected the students to perform well in academia, which was related to the hope that their children would be successful and become able to support the aging parents and the whole family. Additionally, parental sacrifice is a unique feature in Chinese culture (Chao & Kaeochinda, 2010). The parents subordinate their personal interests for the benefits of children (Lam, 2005). They work hard and provide financial support for the higher education of children with the hope that their children will live a successful life. These high expectations and sacrifice of parents create strong pressure for the Chinese students, which, as we saw, resulted in their unwillingness to share negative affective experience such as depression. Sharing or communicating about depression supposedly construed that the Chinese students did not take their responsibility well, which also led to more stress and a sense of guilt. Further,

the Chinese students were discouraged because they felt that their parents did not understand or react to their needs.

The study thus identified six themes that strengthened the understanding of meanings of depression among Chinese international students and their communication practices about depression with parents. Interdependence theory provided insight into understanding how and why Chinese students communicate about depression with their parents. The theory suggested that the students attempted to seek positive feedback and avoid negative reactions of the parents. What's more, as the students gain the power of controlling interaction with parents, and parents are sensitive and respond to the needs of students, the students will perceive strong family support (Holmes, 2002; Crane et al., 2005). This supportive family communication helped the students gratify their needs and improved long-term outcomes of building close and trustworthy family relationships (Rusbult & Van Lange, 2008). Therefore, addressing their negative emotions required that both the Chinese students and their parents take actions to meet students' needs through family communication. Sharing emotions creates a sense of cohesion and tightens the family bond and helps develop a trustworthy relationship in the long term. As a result, the students and parents are interdependent to a high degree; in the meantime more shared outcomes are achieved through reaching each other's expectations. The interdependence theory was employed to analyze the family communication experience related to depression, and the utilization of the theory in the study expended the application of the theory in the field of family communication.

The scores in the measurement of the level of depression using the CES-D scale reflected the family communication pattern of the participants. Among the Chinese

students who scored 15–21 (mild to moderate depression) and over 21 (possibility of major depression), many had relatively limited communication with their parents. They tended to be reluctant to talk about depression with the parents or found it difficult to receive expected support from them. Exploring their communication practices, as captured by the themes, could provide insight into the future family strategies on improving supportive communication.

Last, it is important to notice the cultural norms that shape communication practice in Chinese families. These cultural contexts construct people's beliefs, attitudes, values, and influence the way in which people interact with families (Olson et al., 2012). More importantly, the deep cultural roots, such as stigma, implicit communication, parenting styles and filial piety, make open family communication difficult to be accomplished. Specifically for highly depressed people, who tend to isolate self, avoid seeking help and not change thoughts and behaviors, it is harder to disclosure depression problems to family and friends (Chentsova-Dutton, Ryder, & Tsai, in press). Therefore, communication intervention should take the cultural beliefs into account. For example, the social support system, including family, friends, and university faculty, needs to be aware of the cultural norms, be sensitive to the negative states of Chinese students, and actively responsive to their needs, such as providing suggestions and care. In this way, interdependence theory indicates that it would benefit for developing a close relationship and encouraging students to self-disclosure (Anderson & Guerrero, 1998; Holmes, 2002). Furthermore, more research is required to focus on the depressed group, not only exploring effective interventions, but also the ways in which culture constructs

depression. These works are important for development of effective treatments for depressed patients (Chentsova-Dutton, Ryder, & Tsai, in press).

<div align="center">Limitations</div>

The study collected primary data regarding the experience of depression communication with the parents. However, the study has several limitations. First, taking the perspectives of parents into account might broaden the scope of the field in family communication. This study focused only on Chinese students for practical reasons. Further research investigating the perception of parents would provide a more complete picture of depression communication. For example, study could evaluate what reactions of Chinese students to the family support are expected to persist in the current effort.

In addition, the study was limited to the parents–children tie. It did not capture depression communication with other family members, such as spouses, who may play a pivotal role in interpersonal interaction on depression topics. Future research considering the influence of spouses and other family members might facilitate a comprehensive understanding of family dynamics in depression communication.

Last, the study collected primary data exploring participants' meanings of depression and their depression communication experience with their parents qualitatively in detail, which was hard to access through quantitative research method. However, the sample size was limited to 32 participants, including 24 individual interviews and two focus groups. Further data collection might expand the current findings. The result of the study may not be generalized because it highlighted the experience of this particular sample, and the representativeness is left to the readers.

Additionally, some Chinese students in the focus groups might have hesitated to express their opinion and experience on depression due to social stigma. This may influence the depth of the data from focus groups.

<div align="center">Future Direction</div>

Future studies may aim at evaluating the effectiveness of different family communication styles in coping with depression in different populations. For example, which communication pattern would be more effective for depressed females, or for males can be one topic of inquiry.

In addition, future studies can focus on the cultural factors and cultural beliefs regarding experience and expression of depression. Filial piety is one cultural norm that plays a very important role in family relationship and communication in Chinese families, which is highlighted in this study. This could be explored further. Also, Chinese who are depressed may fail to express their depression and feelings openly due to cultural norms (Tsai & Chentsova-Dutton, 2002). More research is needed to explore the deep root of Chinese culture that influences family communication about depression, to understand the ways in which depression is culturally shaped, and how the depressed group can receive social support through communication based on cultural patterns.

<div align="center">Conclusion</div>

Families are entities in which we exhibit our needs through emotional expression. However, family life is filled not only with love, happiness and support, but also involves struggles, conflict, and disappointment (Olsen et al., 2012). Understanding how family

communication practices are shaped, both positively and negatively, warrants further investigation.

The study demonstrated that the Chinese student participants viewed depression as a multi-aspect negative state, emphasizing physical symptoms, and depression communication with parents exhibited several patterns that reflected Chinese family relationships and interaction. In the context of family, it is proposed that expression of emotion is a central trait of mutual relationships, as family members are responsible to help fulfill each other's desires and in the meantime expect that others can share reciprocal outcomes (Clark, Fitness, & Brissette, 2001). The interdependence theory suggests that, if the parents can understand depression of students and meet their needs, such as with informational and emotional support, and the students are empowered to control depression communication, they may feel more positive about themselves and their family relationships (Barbee et al., 1998). In the long term, the close family relationship is established and contributes to deeper family communication that provides strong support. This supportive family communication, in turn, would promote a closer relationship consistently, and then lead to a positive perception about self and family, helping cope with depression.

<center>Parents as Support Providers</center>

Because the Chinese students may not express depression directly, their parents should be sensitive to the students' emotional change and negative affective state. Students who are depressed may not be able to hide their emotion completely, but there are several clues that the parents could notice to recognize depression. For example,

depressed students speak less, hesitantly, and with a low voice; they may be more verbally aggressive and engage in self-blame; there might be reduced eye contact with the family due to loss of energy and feeling of inferiority; they may have a less happy expression or facial animation; and they may exhibit less gesturing and nodding (Breznitz & Sherman, 1987; Fossi, Faravelli, & Paoli, 1994; Gaebel & Wolwer, 1992; Pope et al., 1970). Overall, the various communicative behavior changes may distinguish depressed from non-depressed students. As the depression state of students can be recognized verbally and nonverbally, frequent communication through video chat and phone chat is encouraged to counter the limitation of long distance.

Apart from recognizing depression hints, the parents should listen more and moralize less, encourage more and criticize less, comfort more and worry less. Based on the interdependence theory, the Chinese students generally aim to elicit beneficial feedback from the parents through depression communication. Negative arousal of the parents, conversely, leads to more conflict and avoidance of communication.

Besides, the parents could make use of a variety of approaches, for example new social media, to be exposed to information of the new generation, and get familiar with the American environment to better understand depression of Chinese international students. Considering the standpoint of the Chinese students, the parents are expected to show sympathy, understanding, and respect for the students' insights and feelings.

Student as a Support Seeker

The Chinese students also should communicate actively with the parents and request support, whether they are depressed or not. It is proposed that directly seeking

emotional and informational support contributes to active reactions such as comforting and solution suggestions (Folkman & Lazarus, 1985; Gulley, 1993; Roth & Cohen, 1986;). By contrast, it is likely for individuals to perceive a low level of social support and be passive to seek support if they hesitate to express emotions or depression (Emmons & Colby, 1995).

Further, the Chinese students need to keep an open mind in family communication. As discussed earlier, parents were likely to regulate and control the students' behaviors that restricted family communication because the participants thought their families pushed them for the sake of their expectation. As a result, family suggestions are overlooked and rejected. An open mind here suggests that the students positively accept family support to stimulate open conversation. For example, they could verbally appreciate the effort of parents who attempt to provide help, and show pleasurable facial expression. The acceptance of the students, in turn, increases the willingness of the family to be supportive (Barbee et al., 1998).

Family communication about depression expresses the students' needs, desires, and hope to the parents, with the expectation that the parents is concerned about their needs and desires more than anyone else (Fitness & Duffield, 2004). The results of the study suggest that family communication rooted in cultural contexts should be taken into account to address mental health problems of Chinese students. Furthermore, the complex characteristic of interdependence among family members indicated that their expectations may conflict with each other, following various positive and negative outcomes on depression communication (Fitness & Duffield, 2004). To alleviate effectively depression of the Chinese students, parents need be educated to understand

better the students' struggles, frustrations, and achievements. In addition, Chinese

students should be encouraged to share and communicate their experiences with their

parents. It also is suggested that parental emotion coaching is needed early in the

socialization process. In this sense, parents and Chinese international students could learn

to collaborate to solve conflicts and deal with depression issues.

The study focusing on depression communication contributed to the large field of

family communication, providing implications for family training programs, health

professional practice, and university administration to better understand the needs of

Chinese international students and offer effective support to cope with depression. For

example, the parents, professional counselors, and university should be sensitive to the

unique meanings of depression to the Chinese international students, such as emphasizing

physical symptoms (e.g. loss of energy and fatigue), which might be one appearance of

depression (Chentsova-Dutton, Ryder, & Tsai, in press). In contrast, emotional aspect of

depression is a taboo which is relatively de-emphasized due to social stigma, and thus

should be talked about appropriately or indirectly (Lee, 1990). With growing scholarly

interest in emotional communication within a family, it is our aim that understandable,

supportive, and active family communication will benefit Chinese international students

coping with depression and mental health problems, and the whole family as well.

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APPENDIX

APPENDIX

Table 2A

<u>Sample Characteristics</u>

Characteristics	n	Mean (SD)	Min	Max
Age		25.59 (3.27)	21	37
Sex	13			
Male				
Female	19			
Nationality				
Mainland China	30			
Taiwan	2			
Religion				
None	21			
Christian	9			
Buddhist	1			
No Response	1			
Education Level				
≤ High school graduate	6			
Four year college degree	11			
≥ Master's degree	15			
Marital Status				
Single	22			
Non-married relationship	10			
Family Members				
Only parent(s)	26			

Characteristics	n	Mean (SD)	Min	Max
Both parents and siblings	6			
Living Status (N)				
Alone	6			
Friends	26			
Living in the U.S.				
Less than 2 years	15			
2 to 5 years	14			
More than 5 years	3			
Annual Household Income				
< $20,000	24			
$20,000~$29,999	6			
$30,000~$39,999	2			
CES-D Scale Score		10.97(7.99)	0	34
Less than 15	23			
15-21 (Mild to Moderate Depression)	6			
Over 21 (Possibility of Major Depression)	3			

Note. Center for Epidemiologic Studies Depression (CES-D) Scale is a screening test tool for current level of depression.