

Innovations in Counseling: Exploring Lived Experiences Through the History and Culture of Asian America

Webinar Follow-up Question and Answer Session with Lawrence Richardson, MS, NCC, LPC

Question from Stephanie Fedor-Joseph:

How does this group compare with others with respect to high risk for suicide? **Answer from Presenter**

According to the <u>American Psychological Association</u>, the suicide rate for AAPI individuals is about half that of the national rate. Although we may have a belief that suicide is acceptable in certain AAPI identities and cultures, having a strong ethnic identity can be a protective factor against suicide attempts. Some of the following facts were pulled from the same page:

- Suicide was the 8th leading cause of death for Asian-Americans, whereas it was the 11th leading cause of death for all racial groups combined.
- U.S.-born Asian-American women had a higher lifetime rate of suicidal thoughts (15.9 percent) than that of the general U.S. population (13.5 percent).
- Asian-Americans college students were more likely than White American students to have had suicidal thoughts and to attempt suicide.

Question from Ebony May:

What are your thoughts on how we minorities as a whole can start merging our efforts?

Answer from Presenter

We need to remember that we have shared a common history: white supremacists colonized our cultures and countries and displaced us across the world. We need to call each other out when our language and behaviors support the issues of white supremacy. We need to have conversations that focus on working together and collaborating on goals, rather than playing the oppression Olympics.

Question from Allen Vosburg:

What more do you believe that CACREP can do to further progress the advancement of Asian Americans?

Answer from Presenter

I believe that CACREP can continue to promote and reach out to AAPI populations, perhaps connecting with AAPI high school and undergraduate organizations. CACREP can be more inclusive by promoting counseling as a global profession, which is related to ongoing efforts that ACA, CACREP, and NBCC have done. If we can obtain more faculty and leadership that represent minorities as a whole, it can diversify the profession and eventually decision-makers. CACREP and graduate programs need to be more aggressive in their minority-recruitment process. Furthermore, I think integrating career development in K-12 schools would be helpful in exposing not just AAPIs but all minorities to the counseling profession.

Question from Allen Vosburg:

Self-defeating behaviors cross all cultures, how do you see this problem with Asian Americans clients?

Answer from Presenter

Shame is typically a strong force/external locus of control for AAPI individuals. Self-defeating behaviors could be internalized as shame, which results in "not enough-ness." When AAPI clients start to internalize shame, a variety of things could happen. The first one, which may not be a surprise, is the behavior of over- or under-functioning. A second one, which may need more research and support, is the experience of internalized oppression. When shame is an overwhelming force in AAPI individuals, they may start to resent the fact that they're Asian or Asian American and will attempt to do everything they can to remove themselves from the cultures/identities. As such, internalized oppression may result in risky behaviors, such as drug use, hypersexuality, and/or self-harm.

Question from Claudia Reiche:

There is the concept of a "tiger mom." How can we distinguish that from Borderline Personality Disorder?

Answer from Presenter

<u>Tiger parenting</u> believes that "arming children with in-demand job skills such as mathematical and scientific proficiency, strong work habits, and inner confidence prepares them best for the future." The Wikipedia link highlights common characteristics of tiger parenting: harsh regime, demands, psychological and behavioral control, high expectations and commitment to excellence, exam-oriented education, and views on success and achievement. <u>Borderline personality disorder</u>, on the other hand, has criteria related to identity, abandonment, trauma, unstable relationships, etc. Is it possible to have both? Yes. I believe that tiger parenting differs from BPD based on intention and goals. Tiger parenting focuses on the child as a potential successor, while it appears that parents with BPD focus on the child as a potential problem.

Question from Andrea Westkamp:

What would you describe as pastoral counseling needs of Asians?

Answer from Presenter

I will be forthright that my knowledge of pastoral counseling is very limited, if anything at all. From what I can recall, pastoral counseling integrates modern counseling practices with traditional religious beliefs. Depending on the AAPI's religious identities, they may need support on entering an interfaith relationship. They may need to explore culture and religion. Some cultures have principles that ancestral spirits will guide and inform people, while certain religions may make that type of practice forbidden or unforgiveable. If you are trying to do outreach, then having information in different translations would reach a wider audience.

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