CULTURAL INFLUENCES ON THE FORMATION OF THE THERAPEUTIC ALLIANCE:
A CASE STUDY WITH WESTERN-TRAINED CHINESE COUNSELLORS

by
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The underlying assumptions of Western counselling and psychotherapy are based on Western European values such as individualism and autonomy. How applicable then are the goals and practices of Western counselling and psychotherapy when applied to non-Western cultures?

This research study interviews eight Western-trained Chinese counsellors/psychotherapists who have experience with counselling both Western European clients and Chinese clients. It was found that the establishment of rapport using traditional Western counselling theories has varying amounts of success depending on a. the familiarity of the client to Western values, b. the familiarity of the counsellor/psychotherapist with Chinese values, c. the awareness to not apply knowledge of a client’s culture in a stereotypical way, and d. the willingness of the counsellor/psychotherapist to be open, flexible, and patient in negotiating a process that fits comfortably with BOTH the particular counsellor/psychotherapist’s cultural bias and the particular client’s cultural bias.
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CHAPTER ONE

The first act of a teacher is to introduce the idea that the world we think we see is only a view, a description of the world... But accepting it seems to be one of the hardest things we can do; we are complacently caught in our particular view of the world...(C. Castaneda, 1974, p. 230)

Rigidly adhering to the culturally-specific diagnostic practices and intervention strategies of Western-European models of counselling in the face of increasing cultural diversity will inevitably lead to feelings of dissatisfaction with, and alienation of, clients who are of a non-Western European background. It is in culturally ethnocentric to assume Western-European models of counselling/therapy are "real" counselling/therapy and other, perhaps more historical and culturally-specific forms of healing, are "folk therapies." As counsellors, understanding our own cultural biases and respecting ways of thinking and behaving that may differ from our own view are the essential first steps in meeting the expectations and needs of a culturally diverse population.

Only when we come to realize the context-determined roots of our values can we shift to a systemic view of ourselves as part of a helping context (McGoldrick, Pearce & Giordano, 1982, p. 25).
The cultural development of a worldview is inseparable from our personal development. From the moment of birth we interact with our environment in relationships of mutual influence. Chess, Thomas and Birch's studies of personality profiles in babies (in Diller, 1991) concluded that the average baby is born with a set of temperamental characteristics which make him or her an active participant in the family dynamics from the very beginning. "Goodness Fit" was the term they used to describe the positively matched characteristics of the baby with the temperament, energy, and capabilities of the parents. From infancy onward, individuals revise their identity based on their recurrent relationships with others, including the social and cultural forces that dictate much of their contextual understanding of themselves, their relationships and their view of the world.

Allen Ivey (in Marsella & Pedersen, 1981), in a similar vein, places the therapeutic encounter in counselling and therapy into the classic interpersonal model (Lewin, 1935) in which behavior is expressed as the function of both the person influencing the environment and the environment influencing the person: \( B = f(P, E) \). Such a "person-environment interaction" is extremely complex and becomes even more so when the therapist is of a culture different from that of the client.

Many writers on multicultural counselling emphasize the importance of being aware of the biases and assumptions of one's
own culture. This is, however, not an easy process as many of these ingrained cultural values are unknown consciously to ourselves. Luft and Ingham (Luft, 1984, p. 2) designed a model called the Johari Window (see Figure 1) which describes the process of relationship interaction as one in which each person, the self and the other, have parts of themselves which are "known" and parts which are "unknown." Through the process of self-disclosure (sharing what we know) and feed-back (listening to the other's response to our self-disclosure) a trusting relationship, as well as self-awareness, develops and grows. Information is exchanged through self-disclosure and subsequent feedback which leads to the creation of a new, expanded self-awareness. A four-quadrant grid illustrates the exchange and flow of information in any interpersonal contact. Given this theoretical conceptualization, the relationship between client and counsellor in a therapeutic setting follows the same patterns as other interpersonal relationships: information from the client to the counsellor and feed-back from the counsellor to the client create a trusting environment in which the relationship can grow and develop.
In order to give accurate, empathetic feedback, however, counsellors need to understand how their own cultural biases affect both the information that they share with the client and the interpretation of the information that the client shares with them. Awareness of the "hidden" aspects of our cultural biases and a willingness to discover and share "hidden" aspects of our cultural identity can create a positive and collaborative environment in which counselling and therapy can take place:

Counselling and psychotherapy must be recognized as cultural phenomena. Methods of helping another person vary from culture to culture and setting to setting. An increasing awareness that culture in its broadest definition pervades and undergirds the helping process is imperative (Ivey, Ivey & Simek-Morgan, 1993, p. 303).
Furthermore, it is often only in relationship to others who hold a different perspective that we become clear about our own assumptions and biases. Many cultural values are so ingrained that they come into focus only in contrast to another value system. Quadrant IV of the Johari Window grid illustrates this "unknown" area, and represents the potential for growth that is inherent in it. Edward Hall (1976) eloquently expresses the dynamic of the fourth quadrant:

...the great gift that the members of the human race have for each other is not exotic experiences but an opportunity to achieve awareness of the structure of their OWN system, which can be accomplished only by interacting with others who do not share that system (p. 44).

There are aspects to any culture which are known to an individual from that culture, and aspects which are as yet undiscovered or "hidden" from our self-awareness.

Assumptions and Bias in Western European Counselling Theory and Practice

We have no insight into our own culturally learned ideas and values. They sit within us quietly, unconsciously, providing the baseline against which we make value judgments but never themselves coming into judgement...What needs to be stressed is how
important our culturally learned ideas and values are in forming an unconscious mold, shaping later ideas and values. When we fully realize this as therapists, then we will realize that we are indeed culture-bound (Torrey, 1972, p. 20).

Many writers on multicultural counselling (Ivey, Ivey & Simek-Morgan, 1993; Pedersen, 1988; Sue, 1977; Sue & Morishima, 1982; Sue & Sue, 1990) have attempted to expose some of the "known" Western European cultural values and beliefs. One of the strongest and most pervasive of these values is the emphasis on individualism. Most Western European theories of human development equate maturity with autonomy, individuation and rather than with interdependence. Erickson's eight stages of development, for example, describe progressive steps which move the individual towards the desired goal of independence and autonomy. Self-identity is achieved APART from one's family (Ivey, Ivey, & Simek-Morgan, 1993, p. 148-150). Erickson's emphasis on autonomy as characteristic of a healthy adult has been extensively criticized by feminist theorists (McGoldrick, Anderson, & Walsh, 1989; Greenspan, 1993) for its lack of recognition of the value of more "female" qualities such as emotional/intuitive reasoning and interdependence with others. Erickson could also be criticized for being ethnocentric in omitting other culturally-different models of human development, as the positive attributes given to individuality are certainly
not universal (Sue & Sue, 1990):

...not all cultures view individualism as a positive orientation; rather, it may be perceived in some cultures as a handicap to attaining enlightenment, one that may divert us from important spiritual goals. In many non-Western cultures, identity is not seen apart from the group orientation (p. 35)

Of course there are many other "culture-bound" values, and Sue and Sue (1990) have derived a comprehensive list of prevalent Western European values to be considered by Western-trained counsellors and therapists:

- use of Standard English
- individual-centered
- verbal/emotional/behavioral expressiveness
- insight (introspection), leading to behaviour change
- self-disclosure, leading to openness and intimacy
- ambiguity and abstraction across contextual situations
- cause-and-effect, linear orientation
- clear distinction between mental and physical functioning

Western European culture's focus on the individual - either on the intrapsychic emotional and cognitive experiences, or on the interpersonal interactions with the environment or with others - as well as the other culture-bound values listed above, have been reflected in the developmental history of Western counselling/psychotherapeutic theories and are reflected,
often implicitly, through the process of counselling.

Sigmund Freud (1856-1939) created a psychotherapeutic model in which he emphasized intrapsychic motivations behind each individual's behaviour and emotions (Cormier & Cormier, 1991; Corsini & Wedding, 1989). According to psychoanalysis, it is not others who influence us but our own ideas about those others, our own projections (Zohar, 1990). Self-awareness of underlying intrapsychic dynamics and innate human drives would, Freud believed, enable an individual to begin making "rational" responses to objective reality rather than responding "automatically." The therapist was the impassive "expert" who decided on what rational, normal behaviour was, and who interpreted the client's experience in relation to this norm.

Adler (1870-1937) took a slightly different turn in his psychoanalytic theory by deemphasizing the importance of unconscious influences and stressing that "people cannot be studied in isolation, but only in their social context" (Corsini, 1989, p. 73). "Social Interest" was the expression Adler gave to the concept that "happiness and success are largely related to...social connectedness" (Corey, 1991, p. 140). Successful interaction with family and society was considered essential to mental health. However, Adlerian Psychotherapy was still basically an individually focused approach to understanding human behaviour, and in fact has been also called Individual Psychology (Corey, 1991), which stresses the individual taking
responsibility for their own feelings, thoughts and actions.

Humanistic psychology, as defined by Carl Rogers (1902-1987), introduced somewhat of a change in the therapeutic relationship. It took away the idea of the therapist as the "expert," with the intent of allowing clients to access their own capacities to heal themselves given a supportive and nurturing climate. The only necessary and essential ingredient was the therapist's ability to provide empathy, unconditional positive regard, and congruence (Corsini, 1989; Corey, 1991). Roger's psychotherapeutic model, sometimes called "person-centered", obviously also reflects the Western European values of individualism, autonomy and self-actualization and adds that of egalitarian democracy.

According to Fritz Perls (1893-1970), the initiator of the Gestalt therapy movement, the goal of therapy was "to make you understand how much you gain by taking responsibility for every emotion, every movement you make, every thought you have - and shed responsibility for anybody else" (Perls, 1969, p. 65). Gestalt therapy focused not on unconscious intrapsychic conflicts but on here-and-now feelings and behaviour. Responsibility was now delegated solely to the individual, and any attempt to look at wider influences was seen as avoidance, or resistance (Corsini, 1989; Perls, 1969). Such an approach again reflects Western European culture's reverence for autonomy and self-actualization; as well, the intense release of emotions.
(catharsis) encouraged in Gestalt therapy reflects the Western European value of emotional, behavioral expressiveness.

The premise of Cognitive-Behavioral therapies, such as Rational-Emotive therapy developed by Albert Ellis (1973), is that "our emotions mainly stem from our beliefs, evaluations, interpretations and reactions to life situations." An individual is "taught" by the counsellor how to change internalized beliefs which lead to emotional upset or depression by using logic and self-talk and/or Behavioral strategies. Cognitive therapies discourage dependency and urge clients to become self-reliant and to use self-discipline (Corey, 1991, p. 362).

However, not all cultures respect individual decision-making as does Western European culture. In some cultures the group (family or community) is the unit of identity and is, therefore, inextricably involved in any individual decision. Therapists who are unaware of or who do not respect alternative cultural definitions of identity may create extreme conflict for a client by placing deeply-held cultural values into question. Furthermore, a counselling emphasis on individual responsibility can disregard wider societal pressures, such as economic hardship and discrimination, which may face an individual from a particular cultural group (Sue & Sue, 1990).

Even family therapies, although taking a more systemic view of the individual by placing them within the family context, have generally tended to ignore the larger cultural system in which
family systems are embedded. Emphasis is still on the individual obtaining a "differentiated" identity, which is defined as having a sense of self apart from one's family and being able to "transcend" not only one's own emotions but also those of the family system. Overidentification with the family, on the other hand, is defined as "undifferentiated family ego mass" or "fusion" (Becvar & Becvar, 1993, p. 148). Family therapy also focuses on the traditional family life-cycle of Western European culture in which adults separate from their family of origin, choose to marry and start a new nuclear family (usually within the same Western-European culture). Children from this marriage then grow up and "launch" their own new, separate family leaving the elderly parents alone at home. As Ivey, Ivey, and Simek-Morgan (1993) point out:

> It is particularly important that you be aware of your own cultural expectations regarding these developmental stages. For example, imagine the issues of a counsellor of Swedish background imposing his or her values on the Italian or Chinese, or vice versa. Healthy family functioning in one culture may be viewed as potentially pathological by another (p. 336).

The Western European counselling model which focuses most predominantly on the counsellor-client relationship, or the therapeutic alliance, is Rogers' non-directive, or person-centered, theory. As Rogers approach is currently embedded in
most Western European models of counselling, it is useful to look specifically at how Rogers potentially incorporates a culturally biased perspective. Rogers is discussed in an article by Claire Usher (1989) as an example of "potential pitfalls when embracing any theoretical perspective used in cross-cultural counselling situations" (p. 62). Usher's analysis places Rogers' theoretical orientation within the framework of Paul Pedersen's well-known article Ten frequent assumptions of cultural bias in counselling (1987).

1. Assumptions regarding normal behaviour: A common measure of "normal" behaviour, typical of Western European counselling theories, assumes that "normal" means the same thing regardless of social, economic, or political backgrounds. Rogers, by eliminating the "expert" role of the therapist, places the locus of evaluation within the client to make their own diagnosis and decisions around counselling direction, thus allowing "normal" to be defined by the client's own cultural context.

2. Emphasis on Individualism: As previously discussed, Western-trained counsellors most often place the focus of counselling on the individual rather than on family, community or society. This focus can go so far as ignoring the political, historical, or cultural factors that may impact on an individual and devaluing possible strong interdependent ties with family and community in favour of autonomy and individual interests. Rogers' person-centered approach to counselling strongly reflects this Western
cultural bias. An effective therapeutic relationship is described as one in which the development of the person is paramount (Rogers, 1980, p. 115). Rogers not only devalued a client's potential sense of obligation to family and community, but believed that dependency on the family was a potential barrier to individual growth (Rogers, 1980).

3. Fragmentation by academic disciplines: Although Rogers was trained as a Minister and a Social Worker, perhaps giving him a somewhat broader perspective on human psychology, his main influences as a counsellor were nevertheless drawn from Western European psychology (for example, Freud and Adler). Pedersen recommended that counsellors attempt to go beyond their limited perspective of counselling or psychology and "examine the problem or issue from the client's cultural perspective" (p. 18). By this he is referring again to the counsellor gaining enough knowledge to be able to place the individual and the individual's psychological/emotional state within the context of that individual's culture (including social, economic, spiritual and political factors). Knowledge from a sociological, political or economic perspective could help to broaden the counsellor's understanding of the impact of an individual's cultural association.

4. Dependence on abstract words: Pedersen expressed the belief that Western-trained counsellors are dependent on abstract words which reflect the "low-context" culture in which they live. A
low-context culture, described by Hall (1976), is one in which abstract concepts carry their own meaning with them from one context to another, whereas in a high-context culture abstract words and concepts depend for their meaning on reference to a specific context. Rogers' counselling theory incorporates many abstract words and concepts that could be easily misunderstood, or even considered offensive, from another cultural perspective: for example, "self," "self-actualization," "self-awareness," and "self-direction." Many of these words reflect not only the previously-mentioned Western emphasis on the individual, but a definition of Self which is not present in all cultures. For example, the personal pronoun "I" in the Japanese language does not seem to exist; the notion of "altman" in India defines itself as participating in unity with all things (Sue & Sue, 1990, p. 35).

5. Over-emphasis on independence: An extension of Western European emphasis on the individual is the belief that the individual should be autonomous, that is "differentiated" (not dependent on others) as opposed to "enmeshed" (intertwined emotionally with others). Rogers' counselling theory does not provide an exception to this Western European cultural bias, and its premise is to encourage the client to move towards autonomy and self-direction (Rogers, 1961, p. 170). Furthermore, according to Rogers, family and community ties could prevent the individual from moving in this direction and thereby achieving insight
"self-awareness"). The goal of insight is in direct opposition to many cultures' values in which the strength of the family and community is promoted above the self, and attachment to the family and community is maintained at an intimate and involved level throughout an individual's life-time.

6. Neglect of client's support systems: Pedersen points out that Western European culture compartmentalizes the counselling relationship, and seldom works in collaboration with the natural support systems such as family and community which may surround the client. Not only does this, once again, ignore the contextual influences on the client, but it devalues and does not take advantage of the natural support systems readily available to the client. Rogers tended, as did other Western-trained counsellors, to avoid focusing on outside influences except as they may affect the client's move towards separation and adjustment. According to Usher, however, Rogers in his later years began to encourage community support groups as a way of leading to "a greater sense of cooperation, of community, of ability to work together for the common good, not simply for personal aggrandizement" (Rogers, 1980, p. 332).

7. Dependence on linear thinking: The linear, cause-and-effect, thinking of Western European culture stems from Western historical development in which logic and reasoning were placed on a pedestal of wisdom (Socrates and Descartes, for example epitomized the search for "truth" through logical reasoning). As
Pedersen (1987) points out, the scientific method for measuring and evaluating things stems from Western European cultural history, and became embedded in the counselling process through the testing and measurement of constructs such as "depression" or "adjustment." Rogers held a high regard for research and scientific methods as applied to human development and behaviour. However, in practice, according to Usher, Rogers demonstrated an openness to non-linear (or what she calls "circular") thinking. He chose to follow the client's lead in terms of feelings and reasoning, for example, via paraphrasing and reflection, rather than directing the client's process, and he allowed for free association and intuitive insight during the counselling process.

8. Focus on changing the individual, not the system: By focusing on the individual and neglecting the client's surrounding political and cultural systems, Pedersen (1987) asserts, Western-trained counsellors can be accused of "taking the side of the status quo in forcing individuals to adjust or adapt to the institutions of society" (p. 68). If the institution or society is oppressive to the client and the counsellor ignores the impact of this and continues to focus on the client's adjustment, the counselling process could in fact be acting against the client's best interest. Rogers perpetuated the belief that it was the individual, not the system, that needed to change if there was a conflict. By doing so Rogers, albeit unintentionally, perpetuated attitudes that allowed the continuation of racial and
societal constraints against particular groups within our society.

9. Neglect of history: An historical context of an individual is often necessary to correctly determine motivation and expectations underlying the individual's behaviours and feelings. For example, as Usher points out, cultures such as the American Indians may "perceive themselves to be intimately connected to their ancestors, and thus their current problems cannot be fully understood without consideration of their histories" (p. 69). Counsellors who focus only on the "here-and-now" may furthermore be seen to lack respect for traditional, time-tested ways in which a particular culture has dealt with personal problems and to see Western counselling as the "only" way to provide help for the client (Pedersen, 1987, p. 23). Rogers was typical of Western-trained counsellors in this regard. He focused on the immediate situation, and not the individual's personal or cultural history (Rogers, 1942, p. 29).

10. Dangers of cultural encapsulation: Pedersen's final example of Western-European bias is a plea for counsellors to not assume that they are aware of all their cultural values and biases, but to remain open to challenges to their own assumptions. Rogers (1951) believed that his person-centered approach could be used with individuals regardless of culture because its focus on the individual could "transcend to some degree the limitations or
influences of a given culture" (p. 5). Perhaps the challenge and limitations of a desire to "transcend" culture by ignoring it altogether are best expressed by Edward Hall (1976):

...the future depends on man's being able to transcend the limits of individual cultures. To do so, however, he must first recognize and accept the multiple hidden dimensions of unconscious culture, because every culture has its own hidden, unique form of unconscious culture (p. 2).

In conclusion, a major premise of Rogers' person-centered counselling is the belief in individual self-actualization and responsibility for self-growth. The counsellor role is to focus on the client's perspective with "unconditional acceptance" so as to be able to understand and reflect the client's experience and feelings accurately (Corey, 1991; Corsini & Wedding, 1989; Egan, 1986). However, it is not possible to understand the individual client's perspective without first understanding the culture which surrounds and permeates the client's interpretation of themselves and others. An understanding of how cultural bias permeates all counselling theories is necessary in order to be able to begin to challenge the universality of the basic assumptions underlying Western European counselling.

All counselling is, to a greater or lesser extent, cross-cultural. As counsellors increase their contact with other countries and other cultures they can expect
to learn a great deal about themselves. They can expect to challenge more of their unexamined assumptions about themselves and the world around them. They can expect to move beyond the parochial concerns and perspectives of a culturally limited perspective to look at the world in a new, more comprehensive perspective (Pedersen, 1987, p. 23).

**Purpose of the Study**

The objective of this research study is to look at the relativity of Western European values and assumptions in counselling, as expressed through the initial therapeutic alliance formation, when contrasted with a non-Western European cultural perspective. I have attempted to do this by talking to counsellors who are themselves attempting to bridge the gap between a non-Western European cultural background (and accompanying world-view) and a Western European training in counselling, who are experienced and familiar with working with clients of a non-Western European cultural background, and, more specifically, who are of the same cultural background as the counsellor. The reason for "matching" cultural backgrounds is to concentrate the strategies, conflicts, and approaches on the gap between traditional Western European approaches and a specific non-Western-European culture - in this case, Chinese culture.

I have chosen to focus on one particular culture partly due to time considerations and also to reduce the complications of
data analysis and reliability/validity concerns created by too many interacting factors. However, the intent is not to describe an approach to working with a specific cultural group, but to open up curiosity and enthusiasm for the discovery of cultural variability inherent in the counselling process.

I have chosen the Chinese culture for my research study because it is one of the largest and most rapidly growing immigrant groups in Western Canada. According to research on immigration trends by Statistics Canada, the Chinese since the 1960's have been one of the largest streams of immigrants into Canada. Over the past two decades, the country of origin of immigrants to Canada has shifted from mainly European countries to Asian countries: "Hong Kong was the major country of birth of landed immigrants who came to Canada between 1981 and 1991, followed by Poland and the People's Democratic Republic of China." The most recent statistics (First Quarter, 1995) show the same trend: "The majority (76.5 per cent) of immigrants came from Asia" and "Hong Kong is...the leading source of immigrants to British Columbia." Even more specifically, the Vancouver area has been the focus for the migration to Canada from Asia. In 1994, 33,609 immigrants landed in the Vancouver area as opposed to 3,807 in the rest of British Columbia; and in the first quarter of 1995 (January-March) 6,426 immigrants landed in the Vancouver relative to 857 immigrants in the rest of British Columbia.

Such a large increase reflects, according to Chiu (1994)
both the changing of Canada's immigration regulations and the political and economic situations in Asia (p.24). The coming take-over of Hong Kong, currently a British colony, by China in 1997 has created uncertainty and a strong incentive for many Hong Kong Chinese to immigrate. Canada's new five-year Immigration Policy was released on November 1, 1990, with the intent that from 1991 to 1995 the intake of immigrants would be increased to a total number of 250,000, and in the expectation that many of these immigrants would arrive in Vancouver and many would be from Hong Kong (Chui, 1994, p. 10). The new Immigration Policy eliminated the previous "point" system for qualification to immigrate, and instead allows immigrants to enter under the class of "family," "refugee," or "independent." This, in effect, eliminates racial criteria as immigrants are instead selected on the basis of qualifications such as education, work experience, and family connections. Canada has also encouraged the immigration of professional entrepreneurs or business people from Hong Kong who, through their investments, can stimulate the Canadian economy. In the light of increasing immigration from Asian countries, in particular Hong Kong and the People's Democratic Republic of China, it makes sense to look at possible impacts on the interaction between a Western European (as reflected in traditional psychotherapy) and a Chinese worldview.

Previous research has shown the therapeutic alliance to be an essential feature of Western counselling/psychotherapy (Truax
& Carkhuff, 1967; Horvath & Greenberg, 1994) without which effective counselling/psychotherapy cannot proceed. I have, therefore, narrowed the focus of this research study further by concentrating on the initial formation of the therapeutic alliance.

My research study examines Western counselling assumptions regarding the formation of the therapeutic alliance in relation to traditional Chinese culture. The value of looking at Western counselling assumptions in relation to another cultural set of beliefs and assumptions is that it is often only through cultural interaction and comparison that the relatively of cultural values and assumptions become clear. As Edward Hall (1976) explains:

...the great gift that the members of the human race have for each other is not exotic experiences but an opportunity to achieve awareness of the structure of their own system, which can be accomplished only by interacting with others who do not share that system (p. 44).

I have, therefore, chosen to interview Western-trained Chinese counsellors/psychotherapists who are themselves, both personally and professionally, attempting to bridge the gap between two cultures.
CHAPTER TWO
REVIEW OF LITERATURE

History of Multicultural Counselling and Psychotherapy

Any counselling/psychotherapeutic model inevitably incorporates the values and assumptions of the culture from which it stems. However, Western European counsellors often appear to assume that there was never such a thing as "counselling and psychotherapy" until it was "invented" by Western European culture, and do not recognize the ability of therapeutic helping to take many forms which, although they may appear quite different, are no less effective or legitimate (Sue & Sue, 1990, p. 8). This cultural bias is eloquently described by Torrey (1972), in his comprehensive analysis of cultural healing and therapeutic approaches:

A psychiatrist who tells an illiterate African that his phobia is related to a fear of failure or a witchdoctor who tells an American tourist that his phobia is related to possession by an ancestral spirit will be met by equally blank stares. And as therapists they will be equally irrelevant and ineffective. (p. 16).

Multicultural counselling does not have a long history. Karen Horney was one of the first Western European psychoanalysts, as early as 1937, to recognize that the individual and the individual's problems were "incomprehensible
apart from their cultural context" (McGoldrick, Pearce, and Giordano, 1982):

Thus the term neurotic...cannot be used now without its cultural implications...One would run great risk in calling an Indian boy psychotic because he told us that he has visions in which he believed...The conception of what is normal varies not only with the culture, but also within same culture in the course of time."
(Horney, K., 1937, p. 14).

Early nineteenth century anthropologically-oriented accounts of "native healing," such as Devereux's (1951) account of his attempt to do psychoanalysis with American Plains Indians, tended to view healing processes in other cultures as "curiosities" (Marsella & Pedersen, p. 14) and to compare diagnosis of mental illnesses and treatment processes to Western European practices. Culturally-oriented psychiatrists (Kiev 1964/66; Prince 1976/80) also began documenting cultural healers as "instances of effective psychotherapy in different cultural milieus" (Marsella & Pedersen, 1981, p. 14) and demonstrated a willingness to go beyond curiosity with indigenous healing methods and consider integrating some of these culturally-diverse practices and skills into Western European counselling and psychotherapeutic practise.

In 1972 E. F. Torrey, in what has been described as a "whimsical and engaging formulation of therapeutic universals"
(Draguns, 1981, p. 14), described and compared concepts of mental health and healing of various cultures around the world. Torrey suggested that Western psychotherapy may have something to learn from the healing methods of "witchdoctors" (native healers), and further pointed out that cultures themselves frequently change across time. ("It was only a few years ago in Western cultures that mental illness was thought to be caused primarily by witches." Torrey, 1972, p. 23).

However, in general, research on psychotherapeutic healing in cultures other than Western European culture has proceeded from the generic framework which assumed that all counselling theories could be effectively used with all individuals regardless of cultural variation (Ridley, et al, 1994). There was strong resistance to the notion that traditional Western European counselling theories may not be generalized across cultures. This resistance hinged on the strong belief that traditional Western European theories (for example Rogers's Person-centered model and Erickson's Stage development model) transcended culture because they were based on universal experiences common to all human beings, and that these experiences were stronger and more relevant than culture-specific experiences (Scott & Borodovsky, 1990). Such an approach echoes the concept of the "melting pot" which overemphasized the common or universal aspects which individuals share at the expense of acknowledging unique cultural perspectives.
Wrenn in 1962 warned counsellors of the danger of cultural "encapsulation," and the subsequent "imposition of culturally alien goals, values, and practices upon counsellees" (Draguns, 1981, p.15). Paul Pedersen (1991) in a similar vein echoes that the danger of "relying on one truth" is that the counsellor can become "trapped in one way of thinking that resists adaptation and rejects alternatives."

Multicultural counselling signifies a "condition or concern for understanding the interaction of people of different cultural backgrounds - a deliberate attention to differences AND similarities" (Sundberg, 1981, p. 30). The danger of this approach is that it can create stereotypical responses to clients based on generalized information about the cultural background of the client. "Inflicting cultural perspectives (stereotypes) on the client based on membership in a certain group would be unethical" (Ibrahim, 1990). In fact, within-group (idiographic) variations can be as great, or greater, than between-group (nomothetic) variations. It is important, therefore, to stress that any attempt to delineate and compare group characteristics within a culture does not over-ride the need for determining individual differences. However, each individual's unique situation and perspective needs to be viewed within the context of their cultural worldview. Effective multicultural counselling starts with an awareness of cultural differences (and within-culture differences) before considering individual variations on
those group characteristics. Such an awareness has been termed "cultural intentionality" (Allen Ivy, 1987).

Paul Pedersen, whose work has been one of the major influences on the field of multicultural counselling, acknowledges the complexity of cultural interaction by proposing a broad definition of the term "culture" which would include within-group as well as between-group differences. To some extent, according to this definition, all mental health counselling is multicultural (Pedersen, 1990, p. 94). This marks a radical shift from the traditional view of culture (Kroeber and Lusckhom, 1952; Sue and Morishima, 1982) which emphasizes ethnographic variables such as nationality, ethnicity, language and religion. A broad definition of culture adds additional demographic variables such as age, sex, and socioeconomic status, and recognizes that these factors also help to create, in part, our cultural values, biases and assumptions. A broad definition further recognizes that culture itself is dynamic and can change over time in response to environmental circumstances, and may even vary from individual to individual ("The same culturally-learned behaviour may have very different meanings for different people and even for the same person across time and situations," Pedersen, 1991, p. 6). For example, although women in Western society experience relative to other cultures a great deal of independence, opportunity and freedom of choice, it is well to remember that women were only legally declared persons in Canada
in 1929. Measures of cultural identity and influences are always, therefore, approximate. Kluchohm (1962) expressed this continually transforming nature of culture when he wrote: "culture systems may, on one hand, be considered as products of action, and, on the other hand, as conditioning influences upon future action" (p. 73). Culture is, in other words, not a passive force acting upon us, but a reality that is constantly influencing and being influenced by the individual. Ivey, Ivey and Simek-Morgan (1993) further include in this construction of culture the "dialectic relationship" between client and therapist:

We are not just culture bearers, we also have the capability to create and change culture. Just as therapist and client can change each other, so can both affect the environment and culture that led to our perceptions. We are part of a "multiplicity in One" (p. 129).

There are several important factors which have influenced the counselling profession, over the past two decades, to increase focus on culture and its impact on the counselling process. First, "cultural sensitivity" has become an imperative within the counselling/psychotherapy profession since 1974 when the Vail Conference on Clinical Psychology, sponsored by the American Psychological Association, suggested that lack of cultural sensitivity, knowledge and awareness were unethical in
counselling practice (Draguns, 1981, p. 16). In 1986, the American Psychological Association meeting in Washington, D.C. made specific recommendations for changing A.P.A. Ethical Guidelines so they reflected the recommended "cultural sensitivity." The first two additions to the A.P.A. Ethical Guidelines are of the most relevance to my research topic, and are as follows:

**Principle One: Responsibility** - Psychologists have a responsibility to intentionally, constructively, and appropriately adapt their methods to culturally different populations, recognizing the different ways that cultural factors shape human behaviour.

**Principle Two: Competence** - Psychologists should indicate and further develop their competence about the cultures of persons they are studying or serving.

Secondly, "Multiculturalism" became a policy of Canada in 1973 when Prime Minister Trudeau and the Liberal government introduced multiculturalism as a state policy. The concept of multiculturalism, as a plurality of cultures understanding and accepting one another is in dramatic contrast to concepts of cultural unanimity, such as the United States "melting pot" metaphor. In 1981 Multiculturalism became enshrined in the Canadian Constitution's Charter of Rights and Freedoms, and in 1988 the Multiculturalism Act was affirmed as a national policy by an act of parliament (Chiu, 1994, p. 28).
In part, the Canadian Multiculturalism Act states:

It is hereby declared to be the policy of the government of Canada to...recognize and promote the understanding that multiculturalism reflects the cultural and racial diversity of Canadian society and acknowledges the freedom of all members of Canadian society to preserve, enhance, and share their cultural heritage (Berdichewsky, B., 1988, p. 28).

And thirdly, Canadian immigration policies have continued to increase the number of immigrants, and the diversity of cultural groups, entering Canada. Canadians, therefore, will inevitably come into contact with, and interact with individuals from many cultural backgrounds other than their own. In regard to the counselling/psychotherapy profession, increasing cultural diversity refers not only to the client population, but to the counsellor/therapist population as well. The intent of this thesis is not to make cultural generalizations about a specific culture based on limited information, but rather to confirm the relevance of our own values and beliefs as Western-trained counsellors/therapists, and to instill a curiosity and enthusiasm regarding the complex cultural variabilities inherent in the counselling process:

What is essential for clinicians is to develop an attitude of openness to cultural variability and to the relativity of their own values (McGoldrick, 1982, p. 27).
Current Theory and Research in Multicultural Counselling

Recent research on cultural differences in mental health conceptualization and healing interventions has focused on recognizing the influence of one’s own cultural worldview on the counselling process and on the strength and uniqueness within a particular culture, rather than focusing on comparisons to Western-European models of health and healing (Tata and Leong, 1994).

A fundamental objective for Multicultural Training is for trainees to develop an awareness of the particular value system underlying their helping theory and corresponding intervention strategies (Sue et al., 1992, p. 5).

Over the past two decades researchers and practitioners have struggled with a shift from the theory to the practice of sensitive cross-cultural mental health care (Ivey, 1987; Pedersen, 1991; Ponterotto, 1994; Sue, 1991). Kagawa-Singer and Chung’s 1994 article, "A paradigm for culturally based care in ethnic minority populations" (Journal of Community Psychology, 22, p. 192-208), mentions the need for counsellors/therapists to broaden narrow concepts of mental health and restrictive styles of intervention in order to accommodate and incorporate interpretations of reality affected by different cultures. The article emphasizes the negotiation process of therapeutic interaction, in which the counsellor needs to understand and
respect the client's objectives: "...the counsellor needs to use knowledge of his/her own culture AND information of the client's culture to succeed" (p. 198). Kagawa-Singer and Chung never underestimate the complexity of the interaction between counsellor, counsellor's culture, client, and client's culture. They also stress emphatically as do others (Pedersen, 1988, 1981; Ponterotto, 1988; Sue & Sue, 1990, 1981) the danger of overgeneralizing to the individual from a superficial knowledge of culture.

Pedersen (1990) adds a further dimension to the complexity of cultural identity by suggesting that an individual may belong to as many as one thousand cultures, or roles, at any given time (See Figure 2). He is, of course, broadening the definition of culture to include the categories of race, marital status, parental status, gender, socioeconomic status, religious affiliation, and geographical affiliation. These categories, according to Pedersen, interact and overlap with each other to create a complex and unique individual perspective. An example demonstrating the cultural complexity of an individual's self-conceptualization is the case example of "Mrs. Clark" given by Ridley, Mendoza, Kanitz, Angermeyer, and Zenk (1994). Mrs. Clark is not only African-American, but married, a mother, a Baptist, a woman, middle-class, a native of southern Alabama, and a product of her family and societal experiences. Each aspect of Mrs. Clark's identity interacts with the others to compose the total
individual identity and world perspective.

Figure 2. An idiographic approach to client conceptualization: The case of Mariah Clark.

When one adds the complexity of the counsellor’s cultural context to that of the client’s, the task of establishing a common understanding and rapport between counsellor and client becomes formidable:

Figure 3
The counselling process is a delicate balance between awareness of cultural differences and the ability to transcend categorization in order to focus on the uniqueness of the individual (Draguns, 1981; Ivey, 1981). The challenge for counsellors practising within a multicultural context is to "switch from one frame of reference to the other; to combine the two" (Draguns, p. 13) which requires knowledge and skill.

Current theory and research in the area of multicultural counselling is focused on recognizing the diversity within a cultural population (Sue, 1990; Pedersen, 1988); emphasizing the strengths and existing coping strategies or intrinsic healing systems of a culture (Ivey, Ivey & Simek-Morgan, 1993; McGoldrick, Pearce & Giordano, 1982; Marsella & Pedersen, 1981; and Sue, 1990); and developing adequate cross-cultural training for counsellors (Brislin, 1990; Miranda & Kitano, 1986; and Pedersen, 1988). The research proposal presented here addresses itself to one of the specific aspects of the counselling process: the initial relationship-building, or "joining," between counsellor and client, with the intent of supplying useful knowledge for counsellors considering the influence of culture on the counselling process:

Our future will depend on the ability to go beyond individualistic assumptions in co-ordinating the relational perspective of other cultures with our own criteria of good mental health (Pedersen, 1981, p. 326).
The Therapeutic Alliance

Theoretical and conceptual background. Greenson (1967/65) introduced to psychotherapy the term "Working Alliance," which has since become a widely used therapeutic concept referring to the "skilful aspects of the patient's collaboration that are directed toward the tasks of therapy." The working alliance, as Greenson defined it, included both "the patient's cognition capacity to self-observe" AND "his non-distorted, friendly attraction to the analyst" (Gaston & Marmar In Horvath & Greenberg, 1994, p. 86). The "therapeutic alliance" refers more specifically to the affective aspects of the client's relationship with the therapist, and is based originally in Freud's early papers on Transference, where he wrote that the first aim of treatment was "to attach the person of the patient to the person of the therapist" (Gay, P., 1989, p. 375). Freud further stressed that therapeutic work could not begin until "proper rapport" had been established, and that "positive transference" would automatically happen if the therapist showed sincere interest in the patient (Hougaard, 1994). The effectiveness of traditional psychotherapy lay in the therapist's skilled use of the interpersonal relationship itself for the benefit of the client's growth and change.

Otto Rank, an early student and later colleague of Freud's, emphasized more specifically the "therapeutic effectiveness of the therapist's warmth, empathy and genuineness" (Truax &
Carkhuff, 1967, p. 590), a definition remarkably similar to the current definitions of the therapeutic relationship. Alfred Adler, in the same vein, talked about the therapist having to "temper his warmth and encouragement with understanding of the special problem of the patient" (Truax & Carkhuff, 1967, p. 509).

Sullivan’s theory of Interpersonal Introjection introduced to Western psychotherapy the idea that not only is the creation of a strong therapeutic relationship or alliance an essential aspect of therapeutic effectiveness, it is a sufficient agent for therapeutic change. Underlying this statement is the concept that individuals learn attitudes about themselves and others through interpersonal patterns and messages received early in life (Sullivan, H.S., 1953). Further, if one accepts that the therapeutic relationship is an interpersonal interaction, then the primary therapeutic task becomes "the therapist’s metacommunication with the client about these messages, their impact, and their relationship to disordered interpersonal patterns" (Henry & Strupp In Horvath & Greenberg, 1994, p. 64). Taking the concept of interpersonal interaction in psychotherapy a step further, Stanley Strong (1968) suggested that

The extent to which counsellors are perceived as expert, attractive, and trustworthy would reduce the likelihood of their being discredited by the client...In the first stage, counsellors enhance their perceived expertness, attractiveness, trustworthiness, and clients' involvement
in counselling. In the second stage, counsellors use their influence to precipitate opinion and/or behaviour change in clients. (in Egan, 1986, p. 17).

Interpreting the alliance as interpersonal process suggests that both client and counsellor/therapist contribute to the on-going relationship - and do so in ways largely dictated by each participant's interpersonal history (Henry & Strupp In Horvath & Greenberg, 1994), including the enormous influence of culture.

Carl Rogers' (1957) model of Client-centred Therapy agreed with the concept of the alliance as a necessary and sufficient factor in therapeutic change, and went on to define the specific qualities of a therapist needed to create and maintain a positive alliance. The attributes which were considered by Rogers to form the core of the therapeutic relationship were: genuineness, unconditional positive regard (or non-possessive warmth), and accurate empathetic understanding of the client. (Corsini & Wedding, 1989, pp.155-189). These three qualities are complex concepts and will be defined and analyzed later in this chapter, so that they can be operationalized more effectively.

Current psychotherapy confirms the importance of a positive therapeutic alliance as a prerequisite for effective counselling process. (Egan, 1982; Cormier & Hackney, 1993). Research seems to suggest that the initial alliance is formed within the first few
sessions (sessions one to three) and that this is a "critical period" in either forming or failing to form a positive therapeutic alliance (Henry & Strupp, 1994; Horvath & Greenberg, 1994); and, further, that forming a "good enough" alliance is necessary before the therapeutic work can proceed (Horvath & Greenberg, 1994, p. 3). For these reasons, I have narrowed the focus of my research study to the elements of the initial alliance formation.

Bordin (1979) contributed a generic working model of the therapeutic alliance. It included three stages: agreement on the goals of psychotherapy; agreement on the tasks of psychotherapy; and the development of a relationship bond between the therapist and client (Duncan, Solovey, & Rusk, 1992, p. 40). According to Bordin these stages are central to all psychotherapies, yet might develop differently in different forms of therapy. It is the third stage of Bordin's model, the "bond," that is the focus of my research study.

Bordin went on to distinguish clearly between the unconscious projections of the client (transference) and the client's "positive collaboration with the therapist against the common foe of the client's pain and self-defeating behaviour," the latter being the therapeutic alliance (Horvath & Greenberg, 1994, p. 110).

The bond aspect of the therapeutic alliance, according to Bordin, contains both the transference and the collaborative
aspects of the client/therapist relationship. The relationship provides the context in which successful therapy can occur. Therapeutic interventions ("goals" and "tasks") are only as effective as the meaning that is ascribed to them by the client, and that meaning is acquired in the interactional context of the client-therapist relationship. "Intervention, then, becomes the behavioral manifestation of the relationship" (Duncan, Solovey & Rusk, 1992, p. 32).

Transference, in Bordin's model, is viewed as natural and not necessarily pathological. In traditional psychoanalytic theory the patient's early-life conflicts, particularly parental relationships, are neurotically projected onto the current client-therapist relationship. More recent interpretations of transference refer to it as a natural phenomenon which occurs in ALL psychologically meaningful relationships. "To the extent that relationships form the foundation for the self, one might say that the therapist-patient relationship would function as a crucible of the self" (Cashdan, S., 1988, p. 28). The "bond" aspect of the alliance, therefore, includes both the affective and psychodynamic aspects of the relationship between the client and the therapist. (Pinsof, in Horvath & Greenberg, 1994). In terms of the affective component of the "bond", Bordin refers to the client's feeling trusted, respected, and cared about by the counsellor/therapist.

Another important aspect of Bordin's definition of the
"bond" aspect of the therapeutic alliance is the emphasis on the "bond" being bidirectional. That is, the therapist will also attribute meaning to the client's behaviour (Pinsoff, in Horvath & Greenberg, 1994). The view of the alliance bond as an interactive process, or a "partnership," in which client and counsellor/therapist work together to achieve a common goal focuses on the mutuality of the relationship.

Empirical evidence for an association between the alliance and outcome. The direct association between the therapeutic alliance and psychotherapeutic outcome has been supported by considerable empirical evidence (Bachelor, 1991; Hartley & Strupp, 1983; Horvath & Greenberg, 1986; Luborsky, Crits-Christoph, Alexander, Margolis & Cohen, 1983). The importance of the "common factors" (warmth, empathy and genuineness) in producing positive outcomes was also supported empirically by the failure to find differential outcomes in studies comparing a number of different psychotherapies (Horvath & Symonds, 1991).


Lambert (1992) estimated that the therapeutic relationship contributes as much as thirty percent to outcome in psychotherapy, making it a far more critical factor than either therapeutic technique or expectancy.

Research studies have also reported that clients' retrospective accounts of their therapeutic experience focused on positive therapist qualities (such as empathy, warmth, respect, interest) and linked these to successful outcome (Strupp, Fox & Lessler, 1969; Truax & Carkhuff, 1967). Gurman, following a comprehensive research review (Gurman, A., "The patient's perception of the therapeutic relationship" in Gurman & Razin,
eds. (1977) reported that consistent support for the therapeutic effectiveness of such counsellor traits as accurate empathy, nonpossessive warmth, and genuineness were conditional on the use of the client's own perceptions, rather than the therapist's perceptions, as data.

**Operationalization of the definition of therapeutic alliance.** Research on the therapeutic alliance has moved from establishing that it is important to defining how it is important, and to narrowing down the common factors or processes of the alliance or relationship to a more operational definition (Henry & Strupp in Horvath & Greenberg, 1994; Truax & Mitchell, 1971).

Certain interpersonal skills of the therapist have been identified as significant in forming a positive therapeutic relationship across a wide variety of psychotherapy models. These skills, as mentioned previously, are the qualities of empathetic understanding, unconditional positive regard (nonpossessive warmth), and genuineness (Truax & Mitchell, 1971) "All schools of therapy accept the notion that these...variables are important for significant progress to occur and are in essence fundamental in the formation of a working alliance" (Duncan, Solovey, & Rusk, 1992, p. 32).

...therapists or counsellors who are accurately empathetic, nonpossessively warm in attitude, and genuine, are indeed effective. Also, these findings seem to hold with a wide
variety of therapists and counsellors, regardless of their training or theoretic orientation, and with a wide variety of clients or patients...Further, the evidence suggests that these findings hold in a variety of therapeutic contexts and in both individual and group psychotherapy or counselling (Truax & Mitchell in Handbook of Psychotherapy and behaviour change, Bergin & Garfield, 1971, p. 310).

A more detailed description of the three essential therapist characteristics/qualities follows:

a. ACCURATE EMPATHY. As early as 1912, Freud spoke of the "curative effects of warmth or positive affect." In a discussion of transference and the therapeutic relationship, he specifically advocated the therapist's use of "warmth and its role" (Truax & Carkhuff, 1967, p. 35).

According to Carl Rogers, who emphasized in his psychotherapeutic model the empathetic qualities of the therapist, empathy entailed first of all the ability "to sense the client's bewilderment, anger, love or fear as if it were the therapist's own feeling" (Truax & Carkhuff, 1967, p. 286) - in other words, to perceive and to appreciate the client's feelings and experiences and the meaning of those feelings and experiences from the client's perspective. Another crucial aspect of empathy is the ability to communicate, accurately and with sensitivity, the perception of both the client's feelings and experiences and the significance and meaning behind those feelings and
experiences (Truax & Mitchel, 1971).

The ability to convey empathy in a culturally consistent and meaningful manner may be the crucial variable to engage the client. Understanding of client worldviews and cultural identification and having a clearer comprehension of client concerns can greatly facilitate empathetic understanding and responding.


b. UNCONDITIONAL POSITIVE REGARD (or NONPOSSESSIVE WARMTH).

Unconditional positive regard reflects an attitude of the therapist towards the client which is positive, nonjudgemental, and accepting. The therapist does not attempt to control, interpret or force conclusions upon the client, but, rather, without criticism lets the client "be himself even if this means that he is temporarily regressing, being defensive, or even disliking or rejecting the therapist himself" (Truax & Mitchell, 1971, p. 46).

c. GENUINENESS (OR CONGRUENCE). Genuineness implies that the therapist is willing to be open and non-defensive with the client about who he/she is as a person in the moment and to avoid "the temptation to hide behind a mask of professionalism" (Rogers & Sandford, 1985, p. 1379). A crucial aspect of genuineness is the therapist's recognition of the client's being the expert on their own experiences and feelings, so that the therapist approaches the client and the client's concerns with an attitude of
"cautiousness and tentativeness" (Duncan, Solovey, & Rusk, p. 36).

**The cultural context of the therapeutic relationship.**

Viewing the alliance as an interactive interpersonal process assumes that the family and cultural histories of both the patient and the therapist are highly relevant to the positive formation of the therapeutic alliance. Both client and therapist/counsellor have a unique interpersonal history that affects their perceptions and the meanings they make of their experiences, including that of the interpersonal dynamics within the therapeutic relationship.

Many counsellor educators claim that universal attributes of genuineness, love, unconditional acceptance, and positive regard are the only things needed. Yet the question remains, how does a counsellor communicate these things to culturally different clients? While a counsellor might have the best of intentions, it is possible that his or her intentions might be misunderstood. (Sue and Sue, 1990/81, p. 89).

If our goal as therapists/counsellors is to achieve and demonstrate accurate and non-judgemental understanding of the client’s experiences and meaning system, it is imperative that we first understand the value system of the client’s culture. Not doing so may lead to ethnocentrism: assumptions and conclusions about behaviour based on a cultural background which does not fit
with the client’s history.

The core conditions of an affective alliance (empathy, genuineness, and unconditional positive regard), as we have discussed earlier, are only effective if they are perceived to be present by the client. Each client will experience the core conditions, demonstrated in behavioural terms by the counsellor, differently. The complex interpersonal interaction between therapist and therapist’s culture, and client and client’s culture, can lead to misunderstanding or alienation and inability to develop a positive therapeutic alliance.

During the relationship, the interactants are assessing each other. They take note of what is said and how it is said (Clement Vontress, 1971, p. 12).

Kagawa-Singer and Chung (1994) suggest that when attempting to establish rapport with a client from a different cultural background, the therapist/counsellor needs first to know the rules of social interaction of the client’s culture with regard to respect, social etiquette, verbal and nonverbal communication styles, degree of self-disclosure by therapist or by client, age appropriate behaviours, and gender rules of interaction. The therapist/counsellor then has the opportunity to interact in ways that are consistent with the client’s experiences of empathy, genuineness, and unconditional positive regard.

Accurate empathetic reflections...demonstrate that the counsellor understands the complexity and nuances of
the client's feelings. Accurate empathetic reflections and interpretations require practice and, also, full understanding of a client's culture. True, the counsellor never knows precisely how any individual client feels, since each person's life and subjective experiencing are unique; but the more the counsellor knows about a client's cultural, social, and familial environment, the more accurately the counsellor can picture the client's role and attitudes and the more sharply focused will be counsellor feedback. (Marsella & Pedersen, 1981, p. 205).

Sue (1977) suggests that different cultural groups require different communication processes. Because the psychotherapeutic process can be viewed as an interpersonal interaction, the counsellor/therapist and the client must both be able to communicate appropriately and accurately by sending and receiving both verbal and nonverbal messages:

The counsellor needs to accommodate a wide range of therapist and client roles, integrating them with the client's worldview without at the same time losing his or her own cultural integrity. (Sue, 1977)

Furthermore, the counsellor/therapist's facilitation of the therapeutic alliance is a balance between awareness of cultural differences and the ability to transcend cultural categorization in order to focus on the uniqueness of the individual client. In
other words, although it is important to identify cultural
differences in communication processes it is equally important to
recognize that a client, to feel genuinely understood, cannot be
confined to a stereotype of his or her culture. As George Kelly
(1955) expressed, so well:

...the cultural approach should never be more than a
preliminary step in the understanding of (the) client,
the first in a series of approximations which bring the
client into sharp focus in a complex matrix of
psychological dimensions.

Conclusion

Both the counsellor and the client bring a set of cultural
values and expectations to the counselling relationship.
Formation of a common understanding and acceptance of the style,
goals and limits of the relationship is necessary for effective
psychotherapy to proceed. Counsellors/psychotherapists first
need to have an awareness, therefore, of how their own cultural
assumptions and biases impact on the formation of the
relationship, and an acceptance that there may be more than one
way to establish the necessary conditions for a therapeutic
alliance to develop. Secondly, a knowledge of the client’s
cultural values, beliefs and expectations, along with an ability
to convey such knowledge in a culturally appropriate way, is
essential in enabling the client to feel understood and accepted.
A counsellor/psychotherapist may be able to avoid the dangers of applying general cultural knowledge of a client in a stereotypic fashion by a. maintaining an awareness that differences between subgroups within the client's culture may be large, b. remaining open to questioning their own biases and assumptions when confronted with a different perspective, and c. remaining open to the client's own unique combination of cultural identities. The focus of this research study is on the experiences of counsellors/psychotherapists attempting to put the above requirements into practice.
CHAPTER THREE
RESEARCH DESIGN

Theoretical and methodological perspectives

The research design of the study was a qualitative approach using a semi-structured interview format as described by Schumacher and McMillan (1993). I chose this design for several reasons. First, there are many advantages to an interview format when dealing with such a complex issue as the interaction of cultural worldviews. Guba and Lincoln (1981) have expressed one of the major strengths of the interviewing research approach as being that "the interviewer is likely to receive more accurate responses on sensitive issues, and the interview itself is likely to provide a more complete and in-depth picture than other forms of inquiry" (p.315). Areas of interest or confusion can be explored and "probed" to gain the maximum possible information. Another strength of the interview format pointed out by Guba and Lincoln, and of particular relevance to my study, is the "allowance for the respondent's own words and terms, his natural language" (p. 315). As my study focuses on culture, subtle differences in language can be an important indicator of underlying meaning and orientation. Secondly, far from attempting to be a neutral, objective evaluator of the phenomenon under study, I am engaging in an interactive dialogue, collaborating with the interviewee in a search for understanding and meaning.
Significance in qualitative, or "ethnographic," research is derived "socially, not statistically, from how ordinary people in particular set-ups make sense of the experience of their everyday life" (Jaegar, p. 191). The interview format is, therefore, particularly appropriate in understanding how Western trained Chinese counsellors apply knowledge of their training and their culture to specific counselling situations (in the case of this research study, that of working with a client of a similar cultural background). Thirdly, Ponterotto (1988) in a meta-analysis of fifty-three research articles relating to multicultural factors in counselling found that there was an over-reliance in the research on paper-and-pencil outcome measures (for example, Counsellor Rating Scales and Self-Disclosure Questionnaires). This over-reliance can be a danger, Ponterotto has suggested, when used with cultural groups who highly value respect for and deference to authority, because the responses to scales and questionnaires may be so biased as to "render the results virtually uninterpretable" (p. 415). As I wanted my interpretation and analysis to be grounded in the subjects' construction of reality, I chose a qualitative research approach in which, traditionally, the researcher attempts to "construct the social world through the interpretation of, and interaction with, other human actors" and "understand the world through the subjective perceptions and meanings of its human actors" (Chiu, 1994, p. 61).
Finally, my study takes into consideration Ponterotto's recommendation that research in the area of multicultural counselling concentrate on the strengths and similarities of specific cultures, rather than stressing the differences. I have incorporated an interview format with professionally Western-trained and experienced counsellors/therapists which looks for what works in counselling with a specific cultural interaction rather than what does not work, and looks at why people stay with counselling, rather than why they do not come. David Wing Sue (1994), in a more recent article, also recommends the development of a more culture-centred approach to research, and acknowledges that helping roles evolve within a cultural context and are, therefore, culture-bound. Sue suggests that research might be best directed at identifying the traditional or intrinsic healing systems within a culture which could then provide a balance to Western models of mental health counselling. My study is an attempt to discover culturally-preferred methods of Western-trained Chinese counsellors in creating an initial counsellor-client therapeutic alliance. The intent is to provide counsellors with the concept of using a more collaborative and flexible approach when working with clients of a culture different from their own.

Research Instrument

Data for this study was obtained by the use of the semi-structured interview as described by Schumacher & McMillan (1993)
and Sproull (1988). I chose the interview as the instrument for data gathering because it is most consistent with the intent or purpose of the study, which is to understand the interview participants' conceptual meaning: how counsellors from a particular culture would theoretically conceive of and, given a preference, go about creating a professional working alliance with their client.

An interview schedule (see Appendix A) consisting of open-ended questions was used for data collection. Following the interview guide suggested by McMillan and Schumacher (1989), topics were selected in advance, but the sequence and wording of the questions was decided on during the interview. The interview, for conceptual as well as analytic purposes, was divided into eight major topic areas. These areas were based on prior research on the topic of therapeutic alliance formation (Horvath & Greenberg, 1994; Hougaard, 1994; and Truax & Carkhuff, 1967). Interview questions were meant to be a guideline for covering the topics of interest to the researcher; however, subjects were encouraged, through probing and prompting, to expand their answers as much as possible so that information attained would be as full and rich as possible and capture the unique responses of each subject. The interview topic areas to be covered were:

- physical setting
- involvement of others in the counselling setting and process

(for example, friends, family, other professionals)
- making initial contact
- establishing credibility and trust
- self-disclosure of the counsellor
- introduction to specific client problem or concern
- communication style (verbal)
- communication style (nonverbal)

**Pilot Interview**

The interview schedule underwent a pre-test, with a participant matching the study participants' criteria, to ensure that the instrument was appropriate in style and that it elicited the kind of content information looked for in the research study. The length of the interview was also assessed through the pilot interview process. Minor alterations to reduce ambiguity of questions and to allow for the inclusion of ommitted areas of concern to the participants were made before the interview schedule was used in the sample interviews.

**Selection of Interview Participants**

Eight Western-trained counsellors/therapists were interviewed for the study. All of the respondents were first or second-generation immigrants from Hong Kong with experience counselling clients from Hong Kong and/or Mainland China. Because I speak only English, and clear communication was necessary for accuracy of understanding, I decided to chose to
select participants who spoke English fluently. I did not choose to use interpreters, because translation can involve a change in the meaning of a communication, and an intermediary could detract from the establishment of rapport between the interviewer and the participant interviewees (see Appendix F for further information about interview participants).

As it turned out, the participants were divided equally in terms of gender (four women and four men), although this was not a planned criteria for selection.

The initial contact was through a previous connection made at a Workshop on Multiculturalism and Mental Health sponsored by the Greater Vancouver Mental Health Association (March 23, 1995). From there, a network or snowball sampling approach was used (French, 1993; McMillan & Schumacher, 1993). Following this procedure, the initial contact was asked for suggestions of other appropriate and potentially willing people to interview for the study. Subsequent interview participants were also asked for recommendations of people to contact regarding the study, and so forth. There are drawbacks to the snowball sampling method (which I will discuss further under validity constraints) due to the non-randomization of the sample. However, one of the advantages is that participants are selected from knowledgeable and informed recommendation. The final interview participants came from a wide range of agencies including S.U.C.C.E.S.S. (The United Chinese Community Enrichment Services Society), Family Services, MOSAIC,
and Greater Vancouver Mental Health Services. All of the participants were very open and willing to discuss the subject of the study and to share their personal counselling-related experiences and learning with me.

Three interviews were also conducted with "key informants" (Goetz & LeCompte, 1984). These interviews were not used as part of the data for analysis as they did not fit the criteria of the eight sample interview participants. However, the information from these interviews was used to provide background information and additional reference information for the data analysis. The three interviews were conducted with a. a Chinese psychiatrist working in mental health, and an avid educator on Chinese culture and mental health, b. a doctor from Mainland China using the traditional Chinese medicine approach to healing, and c. a Ph.D student from Mainland China studying Counselling Psychology.

**Interview Procedure**

Each of the eight interview participants was contacted initially by letter (Appendix D) and then by follow-up phone-call to set up an interview time and place. All interviews were scheduled at the convenience of the participants. Each participant chose to be interviewed at their place of work.

Before beginning the interview, the participants were asked to read and sign a consent form regarding their willingness to be interviewed for the research study and to have the interview
audio-taped, and confirming that their confidentiality and anonymity would be maintained (Appendix B). Each of the eight interviews lasted about one hour and was audio-taped for later transcription. Two of the interviews had to be re-taped, with the consent of the interviewee, due to technical difficulties.

I began the interview by reviewing briefly the subject of the research study, the purpose of the interviews. A standardized definition of "therapeutic alliance formation" to be used throughout this study was then clarified: that is, the aspect of the therapeutic alliance focusing on the first one to three meetings with the client, including the initial contact, in which the counsellor/therapist attempts to build a sense of rapport with the client. There was also an opportunity at this stage for the participants to ask me any questions they had regarding my study, my credentials, or the interview process itself.

The main part of the interview followed using the Interview Schedule (Appendix A) as a general guide. As much as possible, however, participants were encouraged to share and prioritize their experiences and concerns in their own way. All interviews were conducted in English as this is the only language in which I am fluent. There were shortcomings, as well as advantages, to using English for communicating cultural concepts; I will discuss these advantages and disadvantages further under validity constraints.

All eight interviews were transcribed verbatim from the audio-taped sessions as soon as possible after the interviews.
Data Collection

Since the research was exploratory in nature, I used the method of "triangulation" (McMillan & Schumacher, 1989) in which several data collection methods verify the primary interview data. The data collection methods used for triangulation were:

a. to familiarize myself with the history and experience of Chinese immigrants in Canada (see Chapter Four);

b. to educate myself on past and current themes and approaches in multicultural counselling (see Chapter One), in particular the experience of Western counselling used with Asian clients (Sue & Sue, 1990; Ivey, Ivey, & Simek-Morgan, 1993; and McGoldrick, Pearce & Giordano, 1982).

c. to interview "key informants" who had valuable information relating to the experience of Chinese clients within the mental health or medical profession. These "informal" interviews were used to gather information which would add to the general understanding of the phenomenon under study. An interview schedule was not used, and although the interviews were audio-taped, they were not transcribed. Notes on the key points and concepts were taken down so as to be used later in supplementing and corroborating the "formal" interview results.

Finally, the eight semi-structured interviews were arranged, audio-taped, and transcribed verbatim. The information from these interviews was the primary data source for the study.
Data Analysis

Following the procedure for data analysis described by Guba and Lincoln (1981) and French (1993), each interview transcript was read through carefully and each separate theme or specific subject content area copied onto a three-by-five card. The cards were referenced to a particular interview and page number so that the context of the item could later be retrieved if useful or necessary. All content data from the eight transcribed interviews were coded in this way. Each coded item of data was "mutually exclusive" (no item was recorded more than once) and "exhaustive" (no item was omitted).

To ensure internal reliability of these "themes" or "codes," an independent rater was asked to go through a copy of the eight transcripts and repeat the process of identifying and labelling the content of the interviews. Agreement between the co-rater and my own original content categories was very high and areas that differed were reviewed and modified until a mutual agreement was obtained (Guba & Lincoln, 1981; French, 1993). Further to this independent rating, a copy of the appropriate interview transcript, with the coded categories labelled, was sent to each of the interview participants. The participants were asked to make any comments, additions, suggestions, or clarifications that they wished to make in regard to both the initial transcript information and the coding categories.

When this process of content analysis was completed, the
coded cards of content information were sorted into similar categories, and each category was titled according to the main identifiable theme. For example, comments, concerns, or conflicts around client differences in country of origin, immigration status, age, and generation were compiled and labelled under the title "within-group differences." Each piece of carded information was sorted into this pile or set aside as a potential new category; and the process repeated until all the cards were exhausted. The final piles or broad categories were then reviewed for internal consistency. At this stage of the data analysis a second rater, or "auditor," reviewed the final category piles to ensure that they were both internally homogeneous (similar in content theme) and externally heterogeneous (as different as possible from category to category).

Finally, each of the category piles was analyzed and written up according to the general themes and concepts and underlying meaning emerging from the data (Appendix C). The data was simultaneously cross-referenced with and corroborated by information ("evidence") gained from the "key informant" interviews and from the previous literary research on the relevant subject areas.
CHAPTER FOUR
CHINESE CULTURAL CONTEXT

In order to understand the expectations, reactions and experiences of traditional Chinese clients towards the Western counselling process, it is necessary to have some knowledge of traditional Chinese philosophy and history. By providing a base of background information in these areas, my intent is to "set the stage" for the subsequent analysis of interview information (Chapter five and Chapter six).

History of Chinese Immigrants in Canada

First Arrivals (1858 - 1884) to Western Canada

There are accounts of Chinese people arriving in British Columbia (Meares Island) as early as 1788 to help build ships (Hardwick & Moir, 1975):

They were B.C.'s first Chinese immigrants and they came on the ship of British fur trader John Meares. The year was 1788, and the Chinese were taken to Nootka Sound on Vancouver Island, where Meares intended to establish a colony. The Spanish took over the British ship and the Spanish took the Chinese workers hostage....It's still a mystery what happened
Unconfirmed documents have them intermarrying with the native Indian population, taken to the Spanish colonies by their captors, or returning to China (Dolan, 1991).

However, it was in the 1850's and 1860's that thousands of Chinese immigrants arrived in British Columbia from California or directly from China in response to the Cariboo gold rush. Another wave of Chinese immigrants arrived in the early 1880's with the construction of the Canadian Pacific Railway. The Canadian government, needing a large volume of cheap labour, recruited Chinese people. According to Barman (1991), "between 1881 and 1884, over 15,000 Chinese labourers were imported to work on the CPR (p. 82)."

China by the late 1800's had suffered years of famine, war and economic hardship. The bulk of Chinese labourers recruited for emigration were men from a poor rural farming district of Kwangtung province in Southeastern China. Agents from Hong Kong would go from village to village to recruit labourers for shipment from Hong Kong to Canada (Hardwick & Moir, 1975). Like other immigrants, the Chinese came to Canada to escape from conditions at home and to seek a better life. Most believed that they would stay temporarily as "sojourners," work hard, and make lots of money to take back with them to China. However as they were paid little (1/3 to 1/2 less than Europeans, according to Barman, 1991, p. 133), it was difficult to repay the money for
travel which had been advanced, and their difficulty prolonged the time in which they could save enough money to return to China. Most also had received little education in China, did not speak English, and did not understand Western culture. These factors, plus increasing racial hostility, contributed to the Chinese immigrants making little effort to integrate into Canadian society.

Between 1881 and 1884 as many as 17,000 Chinese came to British Columbia. Over half came directly from China; a substantial portion of the rest from the United States. About 1,500 died of disease or accidents, an unknown number crossed illegally into the United States, and many (about 1,000 in 1885) returned to China (Roy & Tan, 1985, p. 7).

With the completion of the railway in 1886, many remaining Chinese labourers were poor, undernourished and without family support. Some set up small businesses, others took on jobs in canneries, lumber-mills, or mining.

Restricted Entry (1886 - 1923)

Between 1886 and 1903, the government of Canada, under heavy political pressure from white union workers in particular who feared the Chinese as "unfair competition" for jobs because they were willing to work long hours for little pay, imposed a series of head taxes on all incoming Chinese: first $50.00, increased in
1900 to $100.00 and then three years later to $500.00.

However, in spite of the heavy tax and strong discrimination, Chinese immigrants continued to enter Canada. The anti-Chinese movement became wide-spread and Chinese immigrants suffered from racist attacks and discrimination. As Sue and Sue (1990) explain:

The Chinese were especially vulnerable as scape-goats because of their "strange" customs and appearance; that is, they wore their hair in queues (pigtails), spoke in a "strange tongue," and ate "unhealthy" food (p. 193).

My father was one of the first Chinese in Canada to cut off his pigtail, or "queque". That meant he could never return to his native land. Three hundred years before, when the Manchus conquered China, they forced all Chinese to wear pigtails to show that they were a vanquished people. Later the Chinese made the "queque" a badge of honour but reminders of its shameful origin remained - In China, anyone caught without a pigtail was beheaded (Lim, S., 1979, p. 5).

In 1873 an Anti-Chinese Society was formed in Victoria to "Keep Canada white," and in 1878 the Working Men’s Protective Association initiated a policy of not hiring Chinese or patronizing Chinese businesses and agreed to "neither aide nor
abed Chinamen." Chinese were frequently killed, beaten, or "hosed down" (Hardwick & Moir, 1975). Such open racism came to a head with an eruption of violence, known as the "Anti-Asiatic Riots," which broke out in Vancouver's Chinatown in 1907.

I was born in 1915. We lived on the fifth floor of a huge building on Pender Street. One wing stretched down Shanghai Alley and the other down the railroad tracks. In the centre was a courtyard called Canton Alley.

Eight years earlier, rioters had smashed all the windows in the Chinese district and then gone on to attack the Japanese. The new building was meant to protect us in case of future riots. It had only one entrance with an iron gate that could be closed in an emergency, like a prison or a fort (Lim, S., 1979, p. 14).

During the First World War China was an ally of Canada. Chinese labourers were recruited to dig trenches, and Chinese battalions fought along side Canadians against Germany.
About twenty single men lived in the apartment below us... They talked of the thousands of Coolies from Northern China who were kept locked up in boxcars on the rail-road tracks alongside our building. They were being taken across Canada and sent on to France to dig trenches during World War 1. (In 1916-1917, more than 200,000 passed through Canada this way). People from our building would go down, talk to the frightened men, and pass food into the cars (Lim, S. 1979, p. 15).

Exclusion (1923 - 1947)

After the First World War Canada experienced an economic slump. Returning soldiers were often unemployed and factory workers were laid off. Racism soared as white workers again blamed the Chinese for taking away their jobs and in 1923 pressured the Canadian federal government, under Prime Minister MacKenzie King, into passing The Chinese Immigration Act, or Exclusion Act, which successfully prevented Chinese immigrants from entering the country from 1924 to 1947 (Lai, 1988; Barman, 1994).

Under the Exclusion Act people of Chinese origin were prohibited from coming into Canada unless they were "exempted classes such as consular officials, children born in Canada,
merchants and students (Lai, 1988. p. 56)." There was a sharp
decline in the Chinese population during this time due to the
severe immigration restrictions ("During the period of exclusion,
only twelve Chinese were admitted to Canada as Immigrants." Lai,
1988. p. 56); to the fact that many left the country which they
found hostile and unsupportive ("Between 1921 and 1930, a high of
nearly 59,000 Chinese registered to leave." Lai, 1988. p. 56);
and to the low birth rate because of the low number of Chinese
women in Canada.

Women were not as mobile as men in China...Women
were nei-ren or "inside people"... This stereotype
emanates from centuries of Confucian philosophy which
defines women's ideal place in the domestic sphere.
While many men borrowed money from relatives for the
passage to the New World, women were expected to stay
at home to take care of aged parents and children,
waiting for their husbands to send money home (Chiu, 1994,
p. 15).

Post-War Selective Entry (1947-Present)

During the Second World War, China was, again, an ally of
Canada, and Chinese-Canadians volunteered for active duty and
raised money to finance the war. Chinese-Canadians began
lobbying against the Chinese Exclusion Act, and they were
successful in 1947 when the Canadian parliament finally repealed
the act. Men holding Canadian citizenship were allowed to bring in their wives and unmarried children under the age of 18 (Barman, 1991, p. 311). There continued, however, to be restrictions on Chinese immigration until the Canadian government changed its immigration Policy in 1967. After the new policy was introduced immigrants of Chinese descent "quadrupled to almost 100,000" (Barman, 1991). Arrivals tended to concentrate in the Greater Vancouver area to such an extent that by 1981 Vancouver contained "almost 90 per cent of B.C. residents whose mother tongue was a Chinese language" (Barman, 1991, p. 311). Post-war Chinese immigrants came from many different areas aside from Mainland China: Hong Kong, Taiwan, S.E. Asia, Britain and the U.S. Unlike the poor, unemployed, and often uneducated Chinese "pioneers," many of the new immigrants are educated professionals with English skills and exposure to Western culture. Growing numbers of immigrant arrivals from Hong Kong reflected, and continue to reflect, the uncertainty and concern over their economic and political situation when China takes over the now-British colony of Hong Kong in 1997.

In 1971 Prime Minister Trudeau first introduced a Canadian policy of Multiculturalism (see Appendix E), and in 1978 a new Immigration Act was passed in which Chinese immigrants, especially those who could generate employment in Canada, were encouraged to settle in Canada. Meanwhile, the Chinese government relaxed its emigration restrictions so that Chinese wives and
families (mostly farmers or farm labourers with no English) could be reunited with their family member in Canada. Canada also opened its doors to a large number of Southeast Asian refugees from mainland China and Vietnam (Statistics Canada 1981b). As a result, between 1978 and 1981, Asians accounted for 43.8 per cent of all immigrants to Canada (Statistics Canada 1981b). There is obviously tremendous diversity among recent Chinese immigrants to Canada:

Socio-economic status among immigrants varies from well-to-do families who bring their lifelong savings to invest in Canada, to low income refugees who have to work long hours to support their families. Educational background also ranges from professionals who are university educated to people with no education who are illiterate in both English and their home language.

(Waxler-Morrison, Anderson & Richardson, 1990. p.72)

Traditional Chinese Values and Beliefs

Many traditional Chinese values stand in distinct contrast to traditional Western-European values. However, it is important to keep in mind that the values inherent in any culture are constantly changing. Many long-held Western values and beliefs, as described previously in Chapter One, such as the emphasis on
autonomy and self-reliance and the respect given to linear, "logical" thinking over that given to intuition, have been challenged by political/social groups within the culture (McGoldrick, Anderson, and Walsh, 1989). Similarly, many of the traditional Chinese values are being challenged by differing generational perspectives and inter-group experiences:

...the struggles of immigrants in the late 1800’s and early 1900’s are likely to be different for new immigrants....the presences of fifth and sixth generation Asian Americans and of new immigrants will raise even greater issues of group identity and solidarity; the presence of the children of interracial marriages will also raise major issues of group identity, acceptance, and solidarity (Sue & Morishima, 1982, p.187).

However, understanding the underlying historical roots of a culture provides a necessary basis for understanding the overall context of an individual’s values. This section, therefore, looks at some of the Chinese values, assumptions, and beliefs that underlie Chinese culture.

The predominant philosophical perspectives within Chinese history which have shaped Chinese culture are Confucianism, Taoism, and Buddhism.

Confucianism

Confucius (whose Chinese name was Kung Fu-tse) was a teacher and philosopher who lived in the Northern Chinese province of Lu
from 552 - 479 B.C. This was a time of war and upheaval in China, and Confucius philosophy reflects a desire to return to and maintain harmony and stability. (Das, 1987). How one achieved such harmony, according to Confucius, was through strict and proper adherence to certain rules of interpersonal conduct. In contrast to the Western-European conception of man as an individual autonomous being, Confucius saw man as a relational being: "In the Confucian human-centred philosophy, man cannot exist alone; all actions must be in a form of interaction between man and man" (King & Bond, 1985, p. 31). The individual was, therefore defined and shaped by a relationship context, and each relationship had a "proper" set of behaviours (a "role system"), called Li, set out by Confucius: Li, which can be conceptualized as the grammar of relationships, lays out the guidelines for harmonious interpersonal relationships (King & Bond, 1985; Shon & Ja; 1982).

In the Confucian social system, the family occupied a place of central importance. It was considered the primary social group as well as the prototype for all social organizations. A hierarchy of relationships status and structure was defined according to sex (the father-son bond being of highest importance); age (both generational and chronological); and kinship proximity. Obedience to the rules of proper behaviour, according to these lines of hierarchy, entailed subordination of the self to the family group:
The family, as the primary social reality for Chinese, was chiefly responsible for socializing its members to function within these restraints to achieve harmony. Often this harmony was purchased at the price of individual interests, despite the considerable emphasis on individual development and cultivation. (Tseng & Wu, 1985, p. 37).

Restraint of emotions were expected throughout one’s life to achieve the goal of moderation, balance and harmony as prescribed by Confucius (King & Bond, 1985).

From childhood, Chinese are trained to control emotions that are considered adverse and disruptive to harmonious social interactions (Tseng & Wu, 1985, p. 10).

As a result, Chinese people are sometimes considered emotionally reserved by Western-European standards: Chinese people have some character traits that are utterly different from those of Westerners. For example, Chinese are emotionally more reserved, introverted, fond of tranquility, overly considerate, socially overcautious, habituated to self-restraint, and so forth (Tseng & Wu, 1985, p. 53).

In Southern China the family grouping was extended to that of a "lineage," which included "a group of male relatives and their households living together in one village of about one
thousand people. A lineage would include both rich and poor members, all with the same last name" (Riddach, S., 1979, p. 285). The lineage council arranged marriages, made decisions regarding the groups property management, decided who would be educated and who would emigrate, and provided protection and assistance to members who could not work or were ill.

The emphasis on kinship relational patterns was extended to friends outside of the family:

What is probably a distinctive characteristic of Chinese friendship is that its nature is always couched in kinship terms. That is, relations among friends are constructed along the pattern of elder brothers and younger brothers (Tseng and Wu, 1985, p. 38). However, nowhere, according to Tseng and Wu does Confucius discuss relations among strangers, and discomfort with new contacts can be the result:

In the case of the Chinese, the individual's discomfort with strangers lies partly in the fact that he is unable to relate to strangers through any lun prescribed by Confucian ethics (Tseng & Wu, 1985, p. 39).
Tongs were family or clan organizations. We belonged to the Lim tong (sometimes spelled Lam or Lum), one of the largest in Canada. The tong helped members with money problems and protected them from outsiders. At the meetings complaints were heard against any member who had not acted rightly.

There were many tongs or family associations in Vancouver's Chinese community. One of the most colourful was the Gee Gung Tong, or the Chinese Free Masons. It started as a secret society and haven for nationalists who hoped to free China from the rule of the Manchu dynasty. They called themselves Free Masons because it made them sound like a legitimate secret society to Westerners, although they were not recognized by the true Free Masons. After the Manchu dynasty fell in 1911, it stopped being secretive and members wore the Chinese Free Mason insignia buttons on their lapels. Even today, the society is very active in local Chinese affairs (Lim, S., 1979, p. 50).

Taoism

Traditional Chinese medicine is based in Taoist philosophy which aims to achieve balance and harmony between life forces within the body and between the body and the universe. This is achieved through behaving in ways which conform to the laws of nature: "... (man) will be reunited with the whole (Tao), if he
will yield his egoism so that the whole may be preserved (Li, K. C., 1987)." Traditional Chinese medicine is based on Taoist philosophy which, does not separate mental and physical processes:

According to the Nei Ching (an ancient text of Chinese medicine), man is inseparable from his universe, which is viewed as a vast, indivisible entity. All of man and nature are related to each other in a harmonious balance. Individuals must adjust themselves wholly to the environment and maintain this balance, since imbalance brings illness. Five elements - wood, fire, earth, metal, and water - form the universe (Waxler-Morrison, Anderson, & Richardson, 1990, p. 78).

Taoism conceptualizes two major life forces: Yin (which is negative, female, darkness, night, moon, cold) and Yang (which is positive, male, light, day, sun, warmth), both circulating throughout the body’s "meridians." The unimpeded flow of Yin and Yang produces good health, a blockage of flow produces disease (Li, K.C., 1987).

The human body is viewed as a gift from parents and forebears, and should be well cared for and preserved. Chinese...medicine bases many of its ideas on classical sources, but the concepts may hold different meanings. "Hot" and "cold" are often substituted for Yang and Yin, although harmonious balance must be maintained between
the two opposing forces (Waxler-Morrison, Anderson, & Richardson, 1990, p. 78).

Both Confucianism and Taoism stress the importance of proper interpersonal relationships and the social consequences of behaviours. Social factors, rather than intra-psychic factors such as insight, are considered the most important element in the causation or resolution of emotional disturbance.

According to the Taoist (as well as Buddhist) perspective, a presenting problem may reflect a punishment from "God" for a violation of a moral norm committed by any member of the family, including ancestors.

**Buddhism**

Buddhism originated in India around 500 B.C. and later spread to other Asian countries, including China. Buddha (the founder of Buddhism) created a philosophy to transcend human pain and suffering, which he saw as an inevitable part of human life: "frustrations and suffering are the result of craving or desire for things human want and fear of things they want to avoid" (Tseng & Wu, 1985, p. 38). Buddha stressed, therefore, avoidance of overindulging oneself, on the one hand, and a relaxation of self-denial, on the other.

Buddhism is split into two major divisions: the Thervada form which stresses personal salvation through self-discipline (This stream is primarily concentrated in Sri Lanka, Burma, and
Thailand); and the Mahayana form in China, which emphasizes universal salvation and compassion for all. The Theravada ideal is the "arhat," one who has severed all ties to family, friends and possessions to become totally free of this world. The Mahayana ideal is the "bodhisattva," which means the "enlightenment-being". The bodhisattva is a highly compassionate being who has vowed to remain in this world until all others have been freed from suffering. An individual human being can ask for help from one of the "bodhisattvas." Zen Buddhism is a major offshoot of the Mahayana.

According to Mahayana Buddhism, knowledge and wisdom are passed down through the Buddhist teacher from one generation to the next. Deeds of this life, good or bad, can affect the lot of future generations, just as deeds of past ancestors can affect one's current life situation. One's actions have consequences far beyond the immediate and personal. (K.C. Li 1987). Proper worship of ancestors, therefore, is an important part of showing respect for one's family.

Buddhism encompassed a holistic perspective in which the individual is considered part of the larger family and indeed is part of an even larger cycle of past and future; fate and destiny play a large part in the events of one's life.

A Chinese family included dead as well as living members. One of the most important duties was that of ancestor worship. It was very necessary to carry out
these ceremonies in the proper way. Departed ancestors could help bring about the family's prosperity here on earth. If the family rituals were not conducted in the prescribed fashion, bad luck might follow...The preparation for death might begin years...before a parent actually died (Riddach, 1979, p. 286).

This example of "circular" thinking about actions, behaviour and events is in direct contrast to Western European linear thinking which stresses a straight cause-effect chain of events in which one is led to believe that one can be in charge of the events of one's life and direct one's own fate.
Chapter five discussed the data obtained from the content analysis of the eight interviews. The interview data revealed an immense amount of consistent responses from the interview participants. Although the general topic areas were suggested by the Interview Guide (Appendix A), certain experiences and topics took on more importance than others for the participants based on their own experiences. Chinese family structure and dynamics, for example, created its' own theme due to the frequency and level of importance given it by the participants. Overlapping responses between the eight interviews on similar topics provided the basis for the thirty categories which arose from analysis of the interview transcripts. The categories were then combined into nine broader themes or patterns (see Appendix C for a detailed description of the topics, categories and themes). The data information will be discussed under the headings of these nine broad themes, which are:

1. A need for counsellors to be aware of the complex and evolving nature of culture.
2. A need for counsellors to have or to obtain knowledge of traditional Chinese family structure and dynamics, and the implications of these structures and dynamics for counselling.
3. A need for counsellors to understand the expectations of the counsellor role held by traditional Chinese clients, and how these expectations might conflict with the counsellor role in Western counselling.

4. A need for counsellors to understand cultural differences in traditional Chinese concepts of counselling and psychological processes, and how these contrast with Western concepts of counselling and psychological processes.

5. A need for counsellors to be aware of the potential negative effect of the traditional Western counselling setting, and to consider possible culturally appropriate alternatives.

6. The need for counsellors to be aware of cultural differences affecting the clients expectations of self-disclosure by themselves and by the counsellor, and to be flexible in the level of self-disclosure they provide for the client and the level of self-disclosure they expect from the client.

7. The need for counsellors who do not speak Chinese to be aware of the variations in meaning and interpretation of verbal communication between languages.

8. The need for counsellors to be sensitive to how their non-verbal communication may create a distance between themselves and a traditional Chinese client, and to be cautious in interpreting the non-verbal messages of Chinese clients.

9. Suggestions for counsellors working with Chinese clients, based on the interview participants' experiences of blending Western counselling training with traditional Chinese values.
I will now proceed to describe each of these themes in more detail.

**Awareness of The Complex and Evolving Nature of Culture**

This theme contains comments about the diversity within any cultural group. References were made to this diversity by all of the interview participants. The importance of not making general assumptions about an individual client based solely on generalized cultural information was stressed. For example, although all the counsellors interviewed were from a Chinese culture (Hong Kong), they made a point of not speaking for the experience of all Chinese clients. As one counsellor (A.C.) put it:

"I'm from Hong Kong myself. If I'm dealing with someone from China sometimes I don't understand the educational background they came from...or some of the things they went through during the political upheaval of their country. And the reason why they suddenly quit school, for example, was perhaps because of political reasons not because of their own lack of academic abilities."

There is, as another interviewee put it, "no homogeneous culture" (J.H.). The difference between people from Mainland China, Hong Kong, or Taiwan was a frequent distinction:

The Mainland Chinese are more traditional, so they still keep most of the Chinese values like respect of authority, that type of thing. The Hong Kong Chinese are much more
Westernized, like equality, respect, freedom, these kind of things. I would say that Taiwan Chinese are right in the middle, okay? They have some exposure to the Western culture, however they are not as Westernized as the Hong Kong Chinese.

The "westernization" of Hong Kong Chinese was mentioned often, and was taken to mean that there had been an incorporation of the Western-European values of individualism, competition, and achievement while "the traditional value of Zhi Zu (contentment with one's lot) has been abandoned by many of the Hong Kong Chinese" (Tseng & Wu, 1985. p. 199).

However, although country of origin is important, within-cultural distinctions go far beyond that and are, as one interviewee expressed it: "much more subtle" (J.H.). Other important factors include:

Are they first generation, second generation, third generation? Which part of China did they come from? What is their dialect?, what is their language?, and how schooled are they in their first language?...I want even more to distinguish, especially the second generation, whether they are born here, at what age they come. If it's before ten, or after ten, or after seventeen, that's very different. Because if you come at nine, you may have two or three years adjustment there before you graduate from High School...you're able
to say "I grew up in Vancouver"....If you come at seventeen, you know that you’re not grew up in Vancouver, you know that you are an immigrant. You do have a second language, (but) you have enough Chinese to be able to continue to read in Chinese and be able to talk in Chinese for the rest of your life....but, in between that, twelve to fifteen, you don’t have enough Chinese to read and write. Your English is not good enough to read and write at that point. And you have a hard time catching up (L.C.).

The cultural influences of an urban background or rural background were frequently mentioned by the interviewees as important aspects of the client’s culture to consider as well:

That’s why you have to ask when a person comes from China, WHERE in China? The person is very different in the countryside, in the city, or in a large metropolitan town like Shanghai. Very different (L.C.).

An understanding of client’s specific cultural background affects the counsellor’s ability to understand and to empathize with the client’s experience and with the ability to gain the client’s trust. As C.A explains:

...in working with clients coming from Mainland China, because of the political system there and also because of some of the social upheavals over there...the trust among people is very small. I
find it a bit more difficult to gain their trust...
And as a group I think they have more experience in
betrayals, hurts, bad experiences in growing up during
the Chinese Cultural Revolution (1965 to 1975)...
For people from Mainland China I have to take that into
consideration.

Another interviewee (E.H.) expressed it in this way:
If you’re comparing a person coming from Hong Kong
to someone who’s coming from Viet Nam...Hong Kong
being a very affluent, quite Westernized, information
free-flowing, enterprising kind of place where people
might be able to give you more information freely
without thinking...than a person who came from a
previously war-torn, communist kind of oppression, if
you could use that word, kind of country where people
need to be more protective of things that they need to
disclose, you know, information disclosing.

The major recommendation for counsellors/therapists made by
the interviewed counsellors was to not make assumptions about an
individual client based on one’s own cultural perspective or on
generalized information about the client’s culture. Interviewees
were very aware of NOT making assumptions. S.W. explained:
I won’t say "Okay, you are Chinese, then you are this
and they won’t have those"...I won’t make any assumptions
unless the client say something first, or unless it’s
quite obvious.
E.H. expressed this same sentiment by stating:

You really need to see the person as an individual first...not that this is a Chinese person or a Caucasian person or an Indian person, you know, so that’s important. That’s the foremost.

The dangers of assuming are, of course, that one’s own cultural perspective may distort or mislabel a client’s feelings or behaviour, thus creating distance and mistrust of the counsellor by the client. Cultural interpretations of feelings or behaviours are not universal:

...in the Caucasian culture it might look like, you know, "oh, this person is really psychotic," such as, maybe, you know, seeing spirits, seeing Gods, or whatever. But in an Asian culture, if they come from a village background, that might be an appropriate response. It might be real or it might not be real (E.H.).

The interviewees had several suggestions for avoiding making cultural assumptions. First, check it out with the client. Many interviewees, such as S.W., pointed out that:

You can ASK clients, say "Is it this way?", "Have you been thinking about this?", "Is it because of this?" You can ask that.

E.H. repeated the same sentiment:

If you feel that there are things during the interview that you don’t quite understand and you wonder if it’s a
cultural thing or not...ask them. You know, "I don't quite understand this," or "Can you explain a little bit more about this?" "Why did this happen?"

And once again, from A.C.:

I find it helpful, if I'm not sure, to actually ask specifically. You know, "What has happened? Is that normal in your culture?" Show them that I have some cultural sensitivity that there ARE cultural differences.

J.H. perhaps explained most clearly the need for a counsellor to ask the client for clarification if a certain message the client is sending is not understood:

Every bit of behaviour has their family culture and ethnic culture heritage, and it varies so much. So, I would rather like to understand what that means to that person than reading my understanding of that culture into the person...But we always work with assumptions, so I try to feel out a situation. If I don't understand, then I'll ask.

The second suggestion, made by several interviewees, was to ask for input or clarification from someone with expertise in the client's culture:

If you still feel perplexed...try to see if you have a colleague or some other people, multicultural workers or other professional people, from that particular (cultural) background that you can actually CONSULT with and try to clarify some points (E.H.).
And, thirdly, the interviewees encouraged counsellors to educate and open themselves up to learning more about the client's culture, through reading books, taking courses, and consulting with colleagues who may have more knowledge about this cultural group. This increased knowledge was seen to benefit both the client and the counsellor:

The more knowledge you have about the cultural background of that certain...group I think the more you also feel comfortable working with this clientele (E.H.).

Specifically, the interviewees mentioned recognizing and respecting important cultural events, such as Chinese New Year. A counsellor needs to respect, and make adjustments for the fact that, for example, some Chinese clients may refuse to see a doctor during Chinese New Year or on their birthday as they believe it brings bad luck.

Quite a lot of Chinese people they don't want to come to see a doctor on Chinese New Year. They will...need to see a doctor for the rest of the year....So change that, juggle around. You can ask "That day is Chinese New Year. Do you mind coming back then, or do you want it to be changed?"...Sometimes, Chinese New Year, they may be busy with their own families, which is a very good sign, too. I say "Do you mind coming? Do you have time to come?" (S.W.).

The interviewees also mentioned checking the immigrant status,
the legal status, of the client as a way to understand and show consideration for the client’s experience, thereby building a bridge to rapport:

My local-born colleagues have no idea of the difference even between an immigrant and a citizen...and if a person is a refugee. I always try to check what they went through, find out if the person is a refugee versus a landed immigrant. So I think those kind of things help (A.C.).

And, finally, many interviewees suggested counsellors learn about important cultural beliefs specific to the client’s culture. An example of an important belief of traditional Chinese culture was that of Hot and Cold foods (based on the Taoist philosophy).

Quite a lot of Chinese, they are revealing...some of the foods they eating is called HOT food, some of the food they eating called COLD food, and some of the food they eat they would call WIND food. For example, one of the food called HOT food is some deep-fried things, and spicy and chili things, and these so-called HOT food give them a dry mouth or sore throat, and then quite a lot of these psychotropic medication would give them side-effects of dry mouth. So, a lot of them they would say, "That is HOT food," and then, they’re not taking the rest of the HOT food. So we may have to explain to them, "Okay, this is a side-effect of the medication, and maybe one solution is to suck HOT candies, drink more waters or some more juice."
Juice is what they call COLD food, anyway (S.W.).

The importance of such cultural awareness lies in being able to assess if the client's actions, words, and feelings fit into the norm or are an extreme variation. S.W. gives an example of an extreme variation of the desire to balance HOT and COLD foods within the body.

Quite a lot of people are not eating the watermelon. They think watermelon is COLD...and COLD food will make them weak. They won't eat these. So it's quite a lot of people believe in these, okay?...But if the client becomes too extreme, you start wondering where do you draw the line? Sometimes some client say "I'm not eating anything my husband is making, because he's only making COLD food. So I'm not eating anything at home". So then I decide what is too extreme or delusions, and what is the normal cultural beliefs (S.W.).


Although many traditional Chinese values stand in distinct contrast to the traditional Western values discussed previously (Chapter Four), it must be kept in mind that culture, including Western-European culture, is a continually dynamic and changing
phenomenon. Just as many of the long-held values and beliefs of Western European culture, such as autonomy, self-reliance, and authoritarianism are being challenged by political/social groups within the culture, such as Feminism, so many of the traditional Chinese values are being challenged by differing generational perspectives and intra-group experiences due to emigration and exposure to Western European culture. Furthermore, the individual and a culture are inseparably intertwined. Both the individual and the culture are constantly evolving in response to their dynamic relationship.

...the essential thing is the life of the individual. This alone makes history, here alone do the great transformations take place, and the whole future, the whole history of the world, ultimately spring as a gigantic summation from these hidden sources in individuals. In our most private and most subjective lives we are not only the passive witnesses of our age, and its sufferers, but also its makers. We make our own epoch (Zohar, 1990. p. 198).

A Need for Knowledge of Chinese Family Structure and Dynamics, and the Implications for Counselling

The need to understand traditional Chinese family structures, in particular the implications of the Chinese family's interdependency as contrasted with Western counselling's
focus on individual autonomy (or "differentiation"), was stressed by all the counsellors interviewed. Without such an understanding, it was pointed out, counsellors could inadvertently place the traditional Chinese client in direct confrontation with traditional Chinese culture and create conflict within the family system. Within the traditional Chinese philosophy of Confucianism, the individual is seen in a relational context (Chapter Five), which is quite different from the ideal autonomous self of Western-European culture (Chapter One). In traditional China the family, not the individual, is the primary important social unit:

The family as the primary social reality for Chinese, was chiefly responsible for socializing its members to function within these restraints to achieve harmony. Often this harmony was purchased at the price of individual interests, despite the considerable emphasis given by Confucian teachings to the need for individual development and cultivation (Tseng & Wu, 1985, p. 37).

Therefore, it is understandable that, given a traditional Chinese background, as one interviewee put it, "anything that your parents or extended family say is usually weighted more heavily than other things" (L.C.). A demonstrated understanding of the importance of input and direction from the family in a Chinese-client's decision-making process can help to build rapport:

understanding the role the family play...I can
actually ask: "What does your father think of it?"
So showing that I understand the dynamics and practice of making a decision is not just what YOU want to do, but what does your father think of it, what does your family think of it, to make sure that I bring in all the support to follow through on a decision. And I think that’s helpful...for the client to know that someone understands what’s involved in his making a decision, that there are other factors that could change his mind (A.C.).

There is a danger in a Western-trained counsellor misjudging the close family connections within a traditional Chinese family as unhealthy or abnormal:

   Western cultures may see Chinese families as enmeshed
   but...it (is) quite normal within Chinese culture (S.W.).

Many interviewees described the dichotomy between the Western counselling goal of individuality or differentiation, and the traditional Chinese family structure. For example:

   ...in a Chinese culture it’s very very normal for children, especially if they’re not married, to live with their parents even when they’re thirty or forty years old. So it’s not necessarily pathological behaviour which a lot of Western-trained colleagues think (A.C.).

This observation is quite consistent with research done in
Mainland China (1994) in which it was found that ninety percent of mental health clients lived at home. Western-trained counsellors may, it was believed by the interviewees, lack awareness of the traditional Chinese culture’s emphasis on the family as a collective concept, and of the individual’s behaviour as representing the collective qualities of the family, including ancestors (Tseng & Wu, 1985). Without such an awareness, counsellors may react inappropriately to the needs of the traditional Chinese client and family.

I’ve seen Western-trained colleagues [without an awareness of Chinese culture] encouraging the client to move out of the parents’ home or some individuation, separating from the parents...sometimes they would diagnose it as being a problem, indicative of problems, and encourage the person to move out as a sign of making progress (A.C.).

It was recommended that counsellors working with traditional Chinese clients be aware of the family potential as a major client resource, while also being aware of the possibly limiting effects of tolerant and interdependent family involvement on the client’s sense of self-reliance:

Family members really have been quite tolerant towards the client. They may be keeping the client at home, treating the client, tolerating the problem ...they may give some kind of support to the client
emotionally or physically as well as supporting the
(by providing) a lot of resources for the client. So,
some of the clients are not sure whether they are able
to function, to leave home and live on their own (S.W.).

An evaluation of the parents level of involvement, therefore,
needs to include an understanding of the client’s culture so as
to be able to judge what behaviour or circumstances are within
the "normal" range for that culture, and what is extreme. Such a
decision is further complicated by the within-group differences
of Chinese families, such as whether the family came from
Mainland Chinese (and is probably, therefore, much more
traditional) or whether the family came from Hong Kong (and is,
therefore, much more exposed to Western European values of
independence, achievement, autonomy). The differences created
between generations and within families can be immense. One
interviewee poignantly expressed the cultural remoteness created
between himself and his mother:

...a Hong Kong born Chinese person like me could have
education in Canada, and then...I’m pretty cross-cultural.
...My parents - my mother keeps saying that I’m weird.
she says, "Oh, you’re so Canadian." I don’t exactly
understand what she means (L.C.).

A major point stressed by the interviewees was the need for
awareness of the impact of immigration on Chinese family
structure. Canadian-born Chinese may have little knowledge about
the experiences or values of the older Chinese born in Mainland China. In traditional Chinese families, parents are expected to make decisions for their children; children demonstrate respect for their parents by not questioning or contradicting them; a husband supports and makes decisions for the wife and family; and male family members are given priority over females. Such values can come into conflict with exposure to modern Western European values in which children are encouraged to make decisions for themselves, women are, in theory, valued equally to men, and a wife expects to contribute equally to decisions which affect the family.

Inter-generational conflicts between parents, who are strongly attached to a traditional value system and children strongly influenced by Western-European values are common, and harmony and stability within the family becomes threatened by misunderstanding:

In traditional Chinese culture the emphasis on study and discipline is very heavy. And for the traditional parents, it's sometimes very difficult for them to grasp that that can occupy a lesser percentage and less importance. So, very frequently, you will see Chinese parents hoping to steer the kids 90 percent of the time to study, and not very understanding...So many Chinese parents feel: "Oh, the kids waste time here, seems to be happy-go-lucky, not taking serious nature, not taking
serious outlook on life, not disciplined enough, or wanting to enjoy life too much"...So, I think this is a very major difference in the philosophy of life (P.C.). Another major source of misunderstanding and potential conflict arises between the values of collective interdependency that traditional Chinese parents try to instill at home and the values of individual development and achievement that Western schools, and Western culture in general, encourage. As Ivey, Ivey and Simek-Morgan (1993) put it:

Children in Western society are encouraged to excel on an individual basis, be it in sports, school, charm, or physical looks. Children in China are encouraged to excel in co-operative activities that benefit first the community, then the family, and then the self (p. 335).

Many of the counsellors interviewed recommended approaching such cross-generational conflicts slowly and sensitively, being aware of the enormous gulf in cultural values that has threatened the traditional Chinese family structure in which harmony and stability are so sought. Several of the interviewees went further in describing how they begin to bridge the gulf that exists by, first, accepting each person's feelings as valid:

(With) the parents...you have to accept the feelings first, "All these are true, valid, no doubt about it". ...we don't just tell them "Since you're here you
should follow the Canadian culture." We accept all these feelings... And, on the other hand, when we talk to the youngsters we also accept their feelings, the kind of pressure they are facing (K.N.).

Secondly, the counsellors attempt to allow each person to look differently at the situation by putting themselves "into the others' shoes" (K.N.):

Then gradually we explain to the parents "Now, if you are the son, in a situation in which all your schoolmates are doing the same, what would you do?" And let the person think: "Oh, yes, there may be some difficulty." ...When we talk to the youngsters... then we would say "Imagine, using that Miracle Question, imagine that you are your father," or "Tell me about your father's past." And the person would "Blah, blah, blah." "Imagine if you are your father what would you say when you face such a situation?" And that way you increase the understanding.

The marital relationship can also come under stress due to immigration to Canada and subsequent exposure to Western European values. The traditional Chinese family structure is a male-centered heirarchy, with the husband being responsible for the family decisions, and the wife being subservient to him. Women had little autonomy and few rights in traditional Chinese culture (McGoldrick, Anderson, & Walsh, 1989). (It is important to note here, in case the Western-trained counsellor begins to feel
somewhat smug about Western culture, that women in Canada only received suffrage in 1917, and were only legally declared persons in 1929!). Referring back to within-group differences, it must also be remembered that a family emigrating from Mainland China, for example, will be very different than a family emigrating from Hong Kong. However, the process of immigration will disrupt many of the traditional roles within Chinese families. Women will likely be exposed to more independent, assertive roles for women which may make them dissatisfied with their traditional roles:

Many wives, having experienced the rewards of economic independence and a greater degree of freedom, are reluctant to accept their traditional submissive roles (McGoldrick, et al, 1989, p. 184). This may add to the husband's sense of loss of control over the family dynamics, thereby creating further stress and conflict within the family:

Sometimes it's quite difficult for the man to understand "What the hell are the women doing? How come all these years you are okay and then, now you are bucking me and articulating all these kinds of discontent?...So the changing role of the women and the awareness of the woman as an individual, as a person who may have been denied equal rights, is sometimes quite a significant factor in some of these couple relationships (P.C.).
Because traditional Chinese culture believes in dealing with problems indirectly, avoiding confrontation and conflict and solving problems within the family, it can be difficult for the family, particularly the male head, to reach out for help during this disruptive period of adjustment.

It’s our training that we should try and engage the most powerful person, most influential person, at an early stage. But in fact in the Chinese family, as you know, it’s usually the male, the bread-winner, the head of the family. And so when we try to do this we meet with a lot of difficulties because the Chinese male, they’re not trained in terms of...we were trained to show a lot of responsibility, not to talk about our problems in front of strangers. Especially, "I’m the head of the family. I have to be a role-model. So, I should be the person who is being asked about problems, not you outsiders." And so...it’s really very difficult to engage the male (K.N.).

Although the counsellors all recognized the need to collaborate with the client’s family and to involve them in the counselling process as much as possible the decision about level of family involvement was given to the client. Some clients and families, it was reported, "assumed" that the family would be involved in the counselling, especially if the client was a younger person still living with the parents, and not meeting these expectations
could be a barrier to successful relationship-building:

I can turn off the family by refusing to talk to them...
I’ve seen some colleagues of mine they actually tell the
family member to wait in the waiting room and they just
bring the client in and talk to the client first. ..I can
see how that may turn off a family being that they would
feel that they’re not wanted or, especially if they
disagree with the doctor or therapist, they would feel
that the therapist is taking the side of the client (A.C.).
The counsellors interviewed often preferred some individual
time with the client, probably because of their Western-training,
but also expressed openness to increased family involvement if
the client and the family so desired:

There are times I will see the client alone and I will
see the family members alone and then I will see them
together...It all depends. So, overall, I prefer some
rapport with the family members and the clients (S.W.).

In summary, the expectations of traditional Chinese families to
have access to the counselling process were met whenever
possible:

Western-trained colleagues do feel that the client is
the primary person that they’re dealing with and they
should always take their side. And I again stress
sensitivity towards the (Chinese) client’s closer
relationship with the family (A.C.).
At the same time, it was found that family members were often reluctant to talk to "outsiders" about family problems and did not always want to be involved, even though family involvement and access to the counsellor is welcomed by the counsellor:

A lot of times family don't want to be involved. They see the client as the person having the problem, so the client should be here seeing the doctor (A.C.).

This attitude was especially common if the counselling issue was related to the children:

Sometimes, quite a lot of struggling. They'll be kind of surprised or wondering "What the hell are you doing, because it's the kid’s problem." They feel it’s the kid’s problem. "You should see only the kid, I’m not involved. You don’t need to see me. I have already told you all my problems." And so when I ask them, can I see BOTH of you, then I need a lot of explanation (P.C.).

Another barrier to family involvement referred to by several of the counsellors was "loyalty issues" to the family. Because of the sense of shame in having to go to someone outside the family for help with their personal problems, it may take great courage to involve other family members:

Because sometimes they may be afraid if they bring other people, those people may blame him or her, the client. "Why do you have to involve me?...You’re bring shame to the family," that kind of thing (C.A.).
Traditional Chinese philosophy is the basis for the belief in keeping problems within the family. As Sue and Sue (1990) put it:

Central to Asian belief is the fact that the best healing source lies within the family (Ho, 1987) and seeking help outside (like counseling and therapy) is nonproductive and against the dictates of Asian philosophy (p. 132).

Interviewees had several recommendations to consider when working with, or trying to engage, traditional Chinese family members in counselling. The first factor to keep in mind was the need to be very flexible in terms of the family sub-system involved

So we do have to be very flexible. We don’t insist that you will have to bring in everybody in the first session. If we insist that, as what family therapy usually would suggest, then we definitely won’t be able to start even the first session. So we are very flexible in terms of the family sub-system. You and the daughter come, fine. You and the son come, fine. Gradually, if they can demonstrate some change in the family, it’s likely that they can bring in the husband (K.N.).

The second factor to keep in mind was the need to explain Western counselling and Western counselling goals, which may be new and unclear to the family, and may, therefore, create fear or doubt about becoming involved in the process. An example would be:

Very often I will really explain to them that I understand that they are really very concerned about
the child; they have been trying their best in the way that they can do, and so it’s essential that the kids feel like they have their continued support, and so their involvement ensures that things will come out better, rather than work with the kid himself (P.C.).

And, finally, most counsellors suggested that it is important to show understanding of and sensitivity to the courage needed for traditional Chinese family members to attend counselling. One way to demonstrate this would be to leave the contacting of family members to the client. As one counsellor explains:

Like, I say "I would like to talk to your husband. Would you like to ask him first to see if he’s willing to come in?" So instead of me calling to ask him directly, I would ask the client to try to do that. And, in fact, most of them would prefer that, they doing it first, approaching...Usually they have their own ways of going about it (C.A.).

Another way of showing sensitivity would be by being patient and supportive of family members’ fears and stresses:

Family members also need support, recognition of their burdens and stresses. Let them know you do not force family members to reveal if they’re not ready. Be patient. Spend time building rapport with them first, otherwise they (will not) come back, without telling you why (S.W.).
Understanding how the expectations of the Counsellor Role Held by Traditional Chinese Clients may Conflict with the Counsellor Role in Western Counselling

This theme refers to cultural differences that the interviewees had noticed between traditional Chinese clients and tradition Western counselling regarding the role of the counsellor. Generally it was found that the Chinese-Canadian clients needed to place the counsellor into a familiar social context. The reason for this was explained well by A.C.:

Because counselling is such a new concept in the Chinese culture...so they have to put the counsellor, sort of, in comparison with some other roles that they are familiar with...And I guess they need to place the counsellor in some kind of context whether they’re relating to a daughter or they’re relating to a sister or they’re relating to a Mother (A.C.).

Of course counsellors were cautioned again not to generalize this expectation to all Chinese clients:

It depends on...the educational level of the client and the exposure to counselling in the past. Now for people coming from, say Hong Kong, those who received University education overseas, when they come to you they have a more realistic expectation (K.N.).

Nevertheless, it was very commonly mentioned by the interviewees that in their experience there was an expectation from
traditional Chinese clients to have a more personal relationship with the counsellor, and to be able to see the counsellor as a "real" person, not just a professional. According to A.C.:

It’s not the traditional type of therapy where the therapist is a totally anonymous person...There’s a relationship where they can relate to me as more of a real person. And I think that’s usually the kind of relationship the Chinese clients are used to...they’re much less likely to sort of spill their guts to a stranger, someone who remains totally, hides behind a screen...is totally unknown, who is just there as a professional person (A.C.).

One of the interviewees explained the role confusion which sometimes results in this way:

Sometimes (it’s) hard for them to consider that it’s a more formal relationship, because they are talking about all these personal things with you (P.C.).

One interviewee (C.A.) considered that the inability of a Chinese client to see the counsellor as part of the "expanded family" concept, and therefore an "insider," would entail the biggest hindrance to the counselling relationship. Other interviewees agreed that it is obviously important to bridge the gap from "outsider" to "insider," with the successful client-counsellor relationship being similar to a "friend." And yet, because the counsellor-client relationship is not really a friendship, but
primarily a professional relationship, it can be extremely confusing to clients who are trying to place the relationship within their own cultural framework:

They have some difficulty with perceiving that we are really kind of a very cut-and-dried person...
The distinction of you as a "friend" versus a "professional" is not very distinct to some of them (P.C.).

It was generally acknowledged that being open to a broader, more personal, relationship with traditional Chinese clients was useful:

I think it's important to establish rapport to allow them to perceive me some part as a friend, or whatever -you know, a sister, depending on that transfer relationship. I think it helps a lot (A.C.).

However, the potential professional dilemmas arising from such a relationship were also recognized. Clients may want the counsellor to become more involved in their lives than the one hour a week, for example, the counselling session allows:

Sometimes they will feel that you should come to the house and observe, and also you should visit them, they feel freer in their own environment...Sometimes they will hope that they can show appreciation through giving gifts, personal gifts, so sometimes difficult to handle (P.C.).
Many of the interviewees recommended that counsellors be flexible and adapt to the traditional Chinese client's expectations somewhat by spending more time on the social aspect of the relationship and showing interest in the client as a person, not just as a client. They also recommended self-disclosing (see Theme #6) personal information when it is comfortable to do so, and especially when the counsellor shares historical, cultural, or social commonalities with the client. Such openness would, it was felt, show the client that the counsellor is not merely putting on a facade of caring and is not just a professional who is there to help in a half-hearted way. At the same time, almost all the counsellors interviewed said that they found they spend more time clarifying the counsellor role with traditional Chinese clients than with Western-European clients:

If I see a client, I will try to tell them who I am, what my role is, where I am from, and then probably ...normally, I could show the client I do care...(I am) someone who is able to help and they can talk to (S.W.).

An explanation of the professional as a "helping role" may not always be clear enough, however, and, as several interviewees pointed out, it can even lead to further confusion regarding the counsellor-client relationship. Clients, for example, may not understand where the limits of counsellor assistance and support are, and, knowing the counsellor is in a helping role, may begin
bringing more and more problems to the counsellor, expecting the counsellor to "fix" the problems. K.N. gives an example:

"My husband he's not sensitive enough to all my needs and he's...gambling or taking drug and alcohol...you are male, I am female, when I talk to him just ignore me. You tell him he will have to change his behaviour."

Finally, traditional Chinese clients, it was noticed, were less likely to question the authority of the counsellor even when they were not in agreement:

Questioning authority is not that easy, or it's not a usual practice for the older generation. They might mumble behind you, okay? They might mumble instead of making it open to question, "Why (are) you doing this?" (J.H.).

Another interviewee described the experience of Chinese clients' indirectness in the following way:

They don't give feedback directly. I'm seeing the wife and the wife tells me: "My husband felt that the terms you used were not that appropriate." That kind of thing. ...The Chinese are very indirect in the way they give their feedback, so you hear from other resources. They will tell the receptionist, not you (C.A.).

An avoidance of direct confrontation is a reflection of traditional Chinese philosophy (see Chapter Four) which places high value on harmonious interpersonal relationships.
Counsellors who are aware of the traditional Chinese emphasis on harmony may avoid labeling a Chinese client's lack of direct feedback or assertion as laziness, avoidance, or resistance. As McGoldrick, Pearce, and Giordano (1982) put it:

Because harmonious interpersonal relationships are so highly valued, direct confrontation is avoided whenever possible. Therefore, much of the communication style of Asian groups aims at being indirect and talking around the point... There is a reliance on the sensitivity of the other person to pick up the point of conversation (p. 216).

Understanding Cultural Differences in Concepts of Counselling and Psychological Processes (Western-Trained Counsellor and Chinese Client)

One of the broader themes that arose out of the interview data was that of cultural clashes arising from differences in concepts of psychological processes and expectations of counselling. The traditional Western-European value system views human development as a progression towards autonomy and self-actualization (see Chapter One). However, individual freedom of choice and "differentiation" are very much in contrast with many Asian cultures, including traditional Chinese culture, in which a persistent push towards autonomy is considered selfish and insensitive to the needs of the family and community as a whole. Personal decisions, it is believed, need to be made with the input of the family and with consideration of the possible
consequences of an individual choice on the family or community. (see Chapter iv).

I guess again with my Western bias, I would always lean toward the individual choice...I always tell my clients: "You can only be responsible for what you do, you can't change the other person." And it's very difficult for someone not of a totally Chinese cultural viewpoint to understand that Chinese culture is much more sort of close-knit, interactive. We have a much more collective identity. It's hard for them to understand: "I can't change my son" (A.C.).

However, having said that, the counsellors interviewed were also avid in expressing the need to be aware of the within-group differences (such as level of education and exposure to Western culture) which could affect the Chinese client's understanding and acceptance of traditional Western-European counselling goals and processes.

Usually, I think it's still relatively taboo for them to say: "Oh, I have to expose myself and if I have to meet that other problem, it's a shame." And out of the three groups (Mainland China, Taiwan, and Hong Kong) Mainland China would be the most shy of all...They are the ones who are most reluctant to come. But the Hong Kong Chinese would be more approachable, I would say. They accept the concept of counselling more, relatively (C.A.).
It is important, as many of the interviewees pointed out, for counsellors to keep in mind that while going to see a counsellor or therapist is a common and understandable practice for many Western-Canadian individuals today, for traditional Chinese clients coming to talk about their problems to someone outside the family is often a "last resort" when all other resources have been exhausted:

The problem is that very often the Chinese client (doesn't) come to you unless it's very late...unless it's a really big crisis, and they have nowhere to turn to...They will turn first to their friends, relatives, even to neighbours. So the last resort would be to us (P.C.).

The major cultural difference in attitudes toward and expectations of counselling, a difference which was mentioned over and over again by the interviewees, is the Western counselling focus on "insight" and "internal processing" versus the traditional Chinese client's focus on practical, immediate solutions to concrete problems.

When a Chinese person come in they usually expect very concrete type of help, assistance. Most of them don't come in expecting to have an appointment with me, a meeting, just to talk about their problems (A.C.).

The lack of value placed on "talk therapy" reflects the Chinese
culture's values of Taoist philosophy in which serious illness, emotional or physical, is seen as a result of disharmony or imbalance of the body's vital energy (qi). A strong relationship is believed to exist between past behaviours, (including the individual client, relatives and deceased ancestors) and the current imbalance of qi (yin and yang, positive and negative). Harmony can be created through consumption of a balance of "hot" (yin) and "cold" (yang) foods, and a reduction in interpersonal conflict, particularly within the family system. Counselling, or "just talking," may not be seen as a useful or practical solution to the rebalancing of qi energy. In fact, counselling can be seen by traditional Chinese clients as destructive to harmony and good health if it focuses on conflict rather than reducing the symptoms of that conflict. (Waxler-Morrison, Anderson, & Richardson, 1990). The attitude towards the effectiveness of counselling will vary within the Chinese population:

Depends on the educational level, depends on where they come from, but I would say that most of them don't have the sort of tradition in seeking counselling. So this is something very foreign. And to them it's a kind of "talk therapy," so just talking and trying to help you relieve some tension. That's it. So they basically do not have a very high regard of what counselling is all
about, especially if you - those goals, objectives or approaches quite abstract, then it is really a problem for the Chinese population (K.N.).

The lack of perceived value in the counselling process is sometimes reflected in the Chinese client's reluctance to pay for services. As one counsellor explains:

...they have an idea they can always get some ears full from friends, from family, from things like that. So they understand that: "All I do is unload something to you, and you need me to pay for it?" (K.N.).

The need to pay for services which do not seem of value to the client is another barrier which keeps people from using counselling services.

On the other hand, clients may not mind paying for services if they can see immediate, concrete results: They don't mind paying extra amount of dollars, as long as we give them the answers. Say hundred dollars, that's fine; two hundred dollars, that's fine. ONCE...

"(If) I'm able to have a solution, a satisfaction, I'm willing to pay you two hundred dollars, that's okay. But just once" (L.C.).

Traditional Chinese clients, it was found, when they did come for counselling wanted practical help right away. If this was not forthcoming they would most likely not come back:

If they feel that you are not helping them, if you
cannot give them practical suggestions... sometimes they feel: "You are not helping me," or "You're useless, not help to me." Sometimes I find people not coming back because of that reason. They say: "Oh, I don't get that much practical advice from the counselling session" (C.A.).

For Western-trained counsellors the results of therapy may not be immediate. The process of internal change is as important as the outcome. For traditional Chinese clients, on the other hand, the outcome is very important. This difference in conceptualization of psychological processes and the subsequent expectations of counselling was seen, by the interviewees, to impact on the counsellor-client relationship formation in several ways.

First, it can be a challenge for the Western-trained counsellor to link the client's need for immediate results with the Western counselling goal of long-range change. An example given by one of the interviewees follows:

...with quite a number of Chinese clients their goal to come for counselling about the relationship is to see whether they can mend the relationship. Once if they feel that: "We cannot mend it," then that's the end of the counselling sessions. They don't see any further than that. And we're not (being) able to reconcile for them, the relationship is often seen as
a failure...It's very hard to persuade them to realize that there's still something more that you can work on even though you are separated (P.C.).

With knowledge of the traditional Chinese values of stability and harmony as desirable a counsellor can better understand how change can be a potential source of disruption.  
...there is an activist orientation implicit in Western values that change is preferred to no-change when given a choice between the two alternatives.

When confronted with a problem where the solution is ambiguous, the Westerner will be likely to DO something. Under the same conditions, persons from any non-Western cultures would have been socialized to restrain themselves and avoid a direct response as the favoured mode of dealing with the problem. A foreign student returned home to his non-Western family and, seeking to justify the expense of their sending him abroad, spoke at length about how much the experience had changed him. His more traditional family was horrified (Marsella & Pedersen, 1981, p. 328).

This cultural emphasis on stability can also go a long way in explaining the traditional Chinese client's preference for fast solutions to conflict. This can create a difference, between counsellor and client in the perception of what is happening in the counselling session. As one interviewee explains:

For the Chinese client, the outcome is very important.
So even though they may feel that there's some change in feelings, but they don't see the immediate results being well-defined then they might not see that as improvement...And so, sometimes, even though the counsellor feels or sees that there's improvement, but the client will not see it, because they don't see any drastic or significant improvement in the areas that they'd hoped. Of course, down the road there might be, but in the short term, there may not be (P.C.).

The second impact on the counsellor-client relationship that was mentioned by the interviewees is that there is often an expectation from traditional Chinese clients for the counsellor to be more directive than is typical in Western counsellors. This can be uncomfortable for Western-trained counsellors:

...so that there's a constant pull on me to feel that somehow I need to, ideally, have some ready-made improvement, sometimes, which is beyond my control (P.C.).

Another interviewee pointed out that the clients might not be comfortable if the counsellor, as per Western training, reflects back to them the responsibility for personal choices and for decisions around counselling direction:

I think many Chinese expect some kind of a directive from the...treatment professional...and they may not be comfortable if I give them the choice. I think they
would feel uncomfortable. I think when they come in here they expect that the professional person knows what to do and they want advice from a professional (A.C.). Experiences counsellors have had in attempting to blend the needs of traditional Chinese clients with the Western counselling process are further discussed in the following theme section.

Another culturally-determined concept relating to the counselling process is that of TIME. While Western-trained counsellors expect scheduled, time-limited appointments with clients, for example, traditional Chinese clients may expect a less-structured or time-limited meeting with the counsellor:

...so they would like us to do a telephone interview and give them answers over the phone. We usually say, "No, I can’t do that. Would you like to come in and talk?"... so they say: "Yes, come in." But they don’t want you to structure an hour; they want you to structure whatever time is necessary. "Mine is the problem, I’m in crisis." So when they say "two o'clock"...they don’t have an idea that at three o’clock time to get them out. They have to come again in a week or so, and another hour. They want us to talk as long as necessary to get everything done.

...they want to continue (L.C.).

Edward Hall (1976) labels the Western and non-Western perspectives of time as, respectively, "monochronic" and "polychronic," and describes each of them as follows:
Monochronic-time (M-time) emphasizes schedules, segmentation, and promptness. Polychronic time (P-time) systems are characterized by several things happening at once. They stress involvement of people and completion of transactions rather than adherence to preset schedules (p. 17).

However, once again, awareness of within-group variation needs to be applied, in this case to the Chinese client's view of time - in particular, to the scheduling of appointments. Chinese clients with exposure to Western-European culture (for example, many younger Hong Kong immigrants, or second-generation Chinese-Canadians) understood the need for counsellors, because of demand for services and busy schedules, to book appointments ahead of time and to stick to the allotted time. Chinese clients with a more traditional Chinese orientation would seldom see the need to make appointments, and would just show up and wait to see the counsellor. Clarification and negotiation around scheduling was, therefore, needed to ensure that these clients did not interpret an inability to see them when they dropped by as neglect or dismissal:

...people from Hong Kong, especially, they are used to the appointment system. They usually...will phone you to make appointment before they come in. But for the Mandarin-speaking group, especially those from Taiwan, especially in the initial stage, they would expect that
...when they’re a need they would just come in...just drop by, come in to your site and will see whether you’re there (K.N.).

Because of these major conceptual differences between Western counselling and traditional Chinese culture, most of the interviewees discussed the need for outreach education to the Chinese community regarding counselling services to overcome resistance towards coming to counselling.

Some would rather go to a fortune-teller than to a counsellor, because they want advice, they want to have their fortune changed. So...sometimes we have to rival with these people. So helping them to understand the process of counselling is a great challenge (P.C.).

Educational outreach programs mentioned included workshops on Family Life Education in the community, Parenting Skills Programs in the community and in the schools, articles in Chinese newspapers, and talks on Chinese radio and Chinese television. Much of the education centred around dispelling misconceptions and fears around counselling services:

Their understanding about counselling and their fears of talking about these personal things to a stranger, their fear of disclosing to people. Actually this is a very unfounded fear because we are more confidential than many of their friends and relatives. So I think it’s a lack of understanding about who we are and what we do (P.C.).
A noticeable increase in the number of Chinese clients voluntarily attending counselling services over the past few years was attributed to the positive effects of community outreach and education, and to the increase in number of new immigrants:

...for three years...the number of families or persons seeking direct help from us, phoning in or dropping in, increase tremendously...especially for immigrants. They are quite isolated...when they face some problems in the family they can really have no where to turn to (K.N.).

Another aspect of community education and outreach that was discussed by a number of the interviewees was the need for collaboration with other professionals and social service providers in the community to overcome barriers for traditional Chinese clients needing services. One of the barriers mentioned was lack of cultural sensitivity to differences in cultural values:

In some of the child abuse cases the social worker would just ignore the parents' feelings, and when they intervene in the initial stage, when the parents come to explain to them: "That's too bad. Since you're here you will have to follow the Canadian values"...Some social workers are very culturally sensitive, they did a good job. But for some social workers they tend to, sort of "That's the law," and they tend to ignore the parents' feelings. I feel
frustrated too. I try to explain to the social worker about what's happening...you'll have to address the feelings first (K.N.).

Language barriers are another major factor mentioned by the interviewees which limited accessibility to services and resources for traditional Chinese clients. The interviewees often found themselves being frustrated by the lack of community services available in the client's language:

One thing that we find most difficult is the lack of resources for people who have a language and cultural accessibility problem...All the groups outside they speak English...Parents In Crisis groups, they all in English. They have got many good programs...all these brochures, but they're useless (K.N.).

Interviewees often found themselves in the position of acting as interpreter and/or intermediary for clients with community services:

I play a lot of role of being the interpreter, again, because of the language barrier that many of my clients face....the only service provider in client's life who is bilingual. So (I) end up being somewhat of an advocate, case-manager, because the clients bring all the problems they have in communicating with other agencies to me (A.C.).

However, several of the interviewees also mentioned they support
and encourage clients, whenever possible, to contact community resources themselves:

Many of the Chinese clients like me to act on their behalf, or to talk with the schools, to talk to the doctor... Many of the Chinese clients were kind of scared of reaching out to those agencies. So, if I feel that they really have great difficulty in doing that, I would help them to do it... But if I assess that they can have the (language) ability to do that, I would rather coach them and help them to do it themselves. I think it's part of the empowering process... I will spend many hours with them to help them see how to get their points across, get them to really learn the process (P.C.).

The issue of language in counselling, and in the formation of the counselling relationship, is discussed in more detail in Theme #seven (Verbal communication between Chinese clients and Western-trained counsellors).

Consideration of the cultural appropriateness of the counselling setting

This theme covers the issues related to home and/or office visits raised by the interviewees. Home visits provided the counsellors with the ability to see the client in "context" and to meet and build rapport with and assess the client's main support system, the family
I would do home visits mostly to access the home situation, to see if the person has adequate housing, to see if the person lives alone, to make sure that he’s up-keeping the place properly...And if the family is not willing to come in for a visit it gives me a chance to observe the interaction between the client and the family members, as much of it as possible (A.C.).

Many interviewees believed that traditional Chinese clients often preferred the counsellor to visit at home:

Quite a number of clients will feel quite surprised that I’m not going home to visit them. Quite a number of them expect that you come home - come to their home, visit them, and chat, maybe have dinner with them (P.C.).

Much of the literature on multicultural counselling also suggests that home visits may sometimes be more appropriate for clients:

Home visits are another outreach tactic that has been used traditionally by social workers. Counsellors who use this ploy would be meeting the needs of minority clients (financial difficulties with transportation), allowing the counsellor to see the family in their natural environment, making a positive statement about their own personal commitment and involvement with the family, avoiding the intimidating atmosphere of large, informal and unfamiliar institutions and perhaps allowing the counsellor to directly
observe the environmental factors that are contributing to the family’s problems (Sue & Sue, 1990, p. 135).

Sometimes, it was noticed that younger clients also felt uncomfortable coming into the office setting:

Teenagers and youths, I found that they, quite often they don’t feel comfortable with coming in. They may feel more comfortable if you...go along with them in their natural environment and they feel kind of awkward to sit here and face me and talk (P.C.).

Some, but not all, interviewees were willing to accommodate this whenever possible:

If they feel that they would...needed a neutral place or at their home, then I would try to accommodate them as much as I can...A neutral place might be a suggestion if, while you’re talking with them, you sense some sort of reluctance when you’re proposing either the office or the home (E.H.).

However, time considerations, as well as complexities of coordinating visits with other professionals involved (such as nurses, doctors, financial workers) often limited the counsellor’s ability to be able to visit the clients at home. An office setting also was seen as an advantage by the interviewees in being a potentially less distracting, and more private, environment to work in:

It’s not really our practice to go out and visit...
We can’t spare the time. And the second reason is about being distracted. I have less distraction here and it’s within my control much better, because if I go out and visit them it’s very hard for me to control. They may be watching the television, or have somebody, or have some phone calls, so it’s very hard to do the work (P.C.).

The privacy of an office visit would, it was believed, appeal to some clients who would NOT welcome a home visit, because of the issue of confidentiality.

Some clients would feel intimidated if you visit them right away, because they feel that you’re infringing on their privacy, you know, their home (E.H.).

Several interviewees mentioned paying special attention to the office set-up so as to create a comfortable environment for the traditional Chinese client. Examples included, a poster which showed a fun, light side to the counsellor, and a small, round table placed between the client and counsellor to create a more informal, social atmosphere which allows the client to see the counsellor in a more personal, informal way:

...I always keep the, you know, fun-looking pictures (posters) to show that I am a pretty relaxed and - person to relate to, and then a plain background so I can focus on listening to the client...Well, I think it’s good to have a cabinet and the bookshelves, so they know I’m serious, more than just a poster person
And see those certificate(s) and some information here to show that I'm serious too. So, I think Chinese clients need to see that you are a nice person to relate to (J.H.).

Awareness of Possible Cultural Differences Affecting Client and Counsellor Self-Disclosure

There were two aspects to the issue of self-disclosure which arose in the interviews: the first was self-disclosure by the counsellor, the second was self-disclosure by the client.

In the first case, almost all the counsellors interviewed expressed some level of conflict in determining how much to self-disclose. Based on their Western-training, and sometimes on their cultural or personal preference, the counsellors wanted to maintain professional boundaries:

I am aware of my boundary as a professional person, from the training I have. And also actually from myself being a person that really is quite reserved about revealing...telling about my own personal things to other people...It's a struggle sometimes (E.H.).

Yet, perhaps because of their own Chinese background, they were sympathetic with the traditional Chinese client's need for knowing more about the counsellor as a person, and, as mentioned in Theme #seven (Expectations of the counsellor role), the need to build a more personal relationship with the counsellor. As one interviewee explained:
It makes it not a sort of a two-way street for them, so that they feel that "Oh, I'm telling them a lot about myself. I'm opening my door, my family door, the house or the home or myself, to this therapist, but at the same time I'm also getting to know my therapist more as a person not just as a professional counsellor (E.H.).

One interviewee clearly described the desire for self-disclosure by the therapist from the cultural perspective of the client:

Chinese people don’t have a...the concept of the professional boundary. So they...a lot of time they don’t see anything wrong with asking me personal questions. In fact, to them it’s an ice-breaker, it’s what they do...on a social basis when they meet someone new. They start to chat about these things, and so they don’t see anything wrong...I guess it’s sort of a good sign that they’re interested in knowing about me rather than couldn’t care less (A.C.).

Most of the interviewees were willing, based on the needs of the client and the recognition that revealing something personal of themselves would help to "gain rapport much quicker with Chinese clients (E.H.)," to self-disclose personal information, but tended to keep it as general as possible, so as to protect their own privacy. For example:
I guess I’m not as comfortable disclosing. I do disclose recognizing that I’m dealing with someone from a different cultural background and it’s hard for them to understand why I’m so secretive about my own background... So, I would do that. (But) I generally don’t go into a lot of depth about my personal background (A.C.).

One area, however, in which self-disclosure appeared to not be limited by the counsellors, was the sharing of personal information and history that demonstrated a commonality with the clients (such as the immigration experience), the sharing of which helped the counsellors to build a rapport with traditional Chinese clients. This concept relates, again to Theme #three (Expectations of Counsellor Role) in which the traditional client’s willing to self-disclose was based on seeing the counsellor as an "insider":

So sometimes I say, you’re from China, okay, I’ve been to China a few times, my family came from China. I was born in Hong Kong, but my father was born in China. To people from Taiwan I say: "Oh, yeah, I’ve been to Taiwan a few times, and my brother-in-law is now working in a hospital in Taiwan"... Because I think the concept of families (is) very important among the Chinese. And if they can see me as part of family, they can expand the concept of family: "you know people
from my village, you know people from my province, people from the Southern part of China, or people from China"...

All those are important features (C.A.).

Knowing where to place the counsellor in terms of "insider" and "outsider" can inform the client as to how much the counsellor understands about their background, and how much they may need to explain:

Chinese clients are very likely to ask me personal questions about my background...it’s maybe because they want to know if I would understand where they’re coming from...So knowing where I’m from they sort of know how much they need to explain and how much they can just assume that I know (A.C.).

The immigration experience was mentioned by several of the interviewees as an example of the counsellor’s being able to disclose shared personal experiences to the client in order to bridge a gap and build rapport:

Being an immigrant can be very isolating and solitary; they don’t mix with others, so many of the clients, these immigrant clients, they’re looking for sharing, looking for support, and usually I think they want also to get some affirmation, some sharing about processes and so that’s why I think a number of them may be interested to see how I myself go through these processes. So at times, if I feel it’s a need and it’s relevant, I will do it (C.A.).
The second aspect of self-disclosure was that of client self-disclosure. Traditional Chinese clients were noted to be very reluctant in self-disclosing personal or family history (such as financial or medical information). This was attributed by the counsellors to two factors, the first being guilt and shame associated in the Chinese culture with talking about problems to an "outsider," a "stranger."

...When you listen to the message you have to be very sensitive, supportive, and assume that confidentiality is there...There's a family saying that: "Talking about family problems to the outsider is actually a family shame, that's shame to the family." So they would be very cautious. And it really takes courage for a person to share his or her concern, depending on the type of problem, to somebody else (K.N.).

The second factor limiting the traditional Chinese client's self-disclosure was the difficulty in talking about feelings...it is a tradition for Chinese clients not to express their emotions. And we tend to receive some training, I mean some subconscious training, from the past generations not to disclose our feelings (K.N.).

As a result of these factors (sense of shame in talking about problems and difficulty in talking about feelings) interviewees cautioned against trying to get too much personal information
from clients too quickly.

We don't know how to control once it come out, I would say. So...when the client comes to you, and in the first beginning stage if you allow ...all the emotions (to) come out, flooded with emotion, and if you encourage that without good finishing, good closing, then you're bound to have problems. That person will feel very guilty because: "I express all my emotion. Oh, my God! And why? That's only a stranger, I don't know him well." So we tend to...go with the client at a very natural pace without trying to encourage the client to go too deep at the first, in the first initial session....Because if we do, then sometimes the client will be very regretful, because the rapport is not there, the trust is not there (K.N.).

Another interviewee mentioned that a feeling of safety in expressing personal feelings also implied not being criticized, as this was a possible fear that could prevent client self-disclosure:

The second meaning about the use of "safe" is they are very afraid of being criticized, or being judged. ...They are afraid that if they reveal themselves, they will be criticized and judged...I think this has something to do with the Chinese background. Parents used to criticize, the Chinese people teach by
criticizing, so I think many people are afraid of that. So they...have to feel safe by knowing that whatever he says won’t be criticized or judged. Okay then, they feel comfortable to talk (C.A.).

Interviewees also cautioned against rushing into discussion of topic areas which could be potentially sensitive for the client. Knowing about cultural "taboos" would help avoid emotional clashes for the client. Sex would be one of these potentially sensitive topic areas, as would medical history, alcohol and drug problems, history of mental illness in the family, and financial difficulties. As one interviewee explained it, in the traditional Chinese culture each member of the family reflects on the family as a whole:

Some of my clients might...even deny initially that there (is) a family history of mental illness...A lot of times it’s because there are a lot of family connections and when members of the family are getting married it means a lot that the other family wants to know, and sometimes do consider, the health and the mental health of the family as a whole (E.H.).

And, finally, interviewees cautioned against labelling traditional Chinese client’s possible reluctance to self-disclose as deliberately being "resistent":

If you do feel that sometimes maybe you really need to know something and then you’re hitting, and you
ask the question and you hit a brick wall, then maybe you need to try again later on, rather than just right off hand thinking that this person is evasive or very secretive (E.H.).

A client's willingness to self-disclose is viewed from a Western counselling perspective as a sign of openness and maturity. However, in many cultural groups, including traditional Chinese culture, the expectation of disclosing intimate personal information to a "stranger" may not be considered appropriate behavior:

Among many (cultures) intimate aspects of life are shared only with close friends. Relative to white middle-class standards, deep friendships are developed only after prolonged contacts. Once friendships are formed, they tend to be lifelong in nature. In contrast, white Americans form relationships quickly, but the relationships do not necessarily persist over long periods of time. Counselling seems to also reflect these values. Clients talk about the most intimate aspects of their lives with a relative stranger once a week for a fifty-minute session. To many culturally different people who stress friendship as a precondition to self-disclosure, the counselling process seems utterly inappropriate and absurd. After all, how is it possible to develop a friendship with brief contacts once a week? (Sue & Sue, 1990, p. 40).
Awareness of Cultural Variations in the Meaning and Interpretation of Verbal Communication Between Client and Counsellor

The theme of verbal communication in the interviews covered both the choice of language used in counselling and the style of communication as affected by the language used.

Choice of language was based on a number of factors, with the client’s preference being given priority. Several counsellors mentioned that using the client’s language of choice helped to build an immediate rapport and trust between client and counsellor.

They feel that there is an affiliation right away because they know that you speak the same language, you may have come from the same area of the world and, therefore...they feel that they don’t have to explain a lot more than they have to (E.H.).

Of course, this flexibility in choice of language was only possible if the counsellor was able to speak the particular Chinese dialect (such as Cantonese, Mandarin or Toisan) of the client. otherwise, the session would be conducted in English.

In cases where the client did not speak fluent English, or spoke a different dialect than the counsellor, writing was sometimes used to supplement the verbal communication because the written Chinese language is the same across dialects:

There may be some other Chinese client who may speak in a different dialect, so there are times I do write,
writing...in Chinese (all dialects) are the same. So
it's one way to communicate, or else to supplement the
verbal language. For example, the client may speak in
a different dialect and there's a particular word...
you're not quite sure, you write it (S.W.).

However, as the interviewees pointed out, it cannot be
generalized that all Chinese clients want to speak in their
native language. In fact, as one interviewee explained,
sometimes the assumption that they would not want to speak in
English could be taken as an insult:

In many cases, my first question would be: "What
language do you feel most comfortable with?" Whether
people speak Chinese, well, Cantonese or Mandarin, or
English. So this is almost the first question I ask,
because I know some people feel more comfortable using
Chinese. However, there are people who feel some kind
of insult - you know, they want to speak in English and
I speak Chinese to them, they would have the feeling that
I don't respect them or have the misconception that they
don't know how to speak English...They have the fear that
if they don't speak English, (they) might not have the
respect from me (C.A.).

Some interviewees found that English was most commonly used if
the client was bilingual:

Some of them speak Cantonese only, some Mandarin only,
some a mixture of English and Chinese. That's quite common for people from Hong Kong, especially the educated ones. Also, the second generation Chinese all English...If Cantonese is the only language they know, then no choice. But for people who speak English, they tend to use English (K.N).

A decision on choice of language was, according to the interviewed counsellors, influenced greatly by the client's ability to discuss some problems and concepts more clearly and in-depth in their own language. For instance, in some situations, such as cross-cultural marriages, the counsellor might consider it most appropriate to speak English. However, in clarifying cultural meanings or concepts, the counsellor and clients might often refer back to the Chinese language. A direct translation of a concept in English is not always accurate or meaningful in a Chinese language:

Sometimes...I first get concept in Western Culture in English and if I just translate it directly to the Chinese, they find it to be so odd and sometimes they feel that I'm too distant. So...I have to find a similar term which is indigenous Chinese, which may not be an exact meaning...For example, with "energy." If I just use the word "energy," the literal translation, they kind of "What does that mean?" If I use a similar term, which actually means "spirit" in Chinese, they can accept the term more and they can feel more related (C.A.).
Another interesting example of the influence of language on meaning which was mentioned by another interviewee was the use of metaphors. Although some of the difficulty experienced by Chinese clients in getting into imaginary roles or stories was attributed to the more pragmatic nature of many Chinese clients (They will feel that: "Why are you asking me to do this?...I have to deal with daily problem" A.C.), this interviewee also suggested that the actual choice of metaphors could create a cultural barrier:

...I think maybe if we can use some of the metaphors... (which are) more in tune with our own culture, metaphors or fables from our own story or history, and folklore, that may work for our clients...So in a way I think it's a different use of metaphors or folklore. Whereas with Caucasian clients, the imaginative role will be quite handy and the client will find it quite interesting to get into that mode. And also the connection between the ideas and the body may be quite easily felt...I think for Chinese clients (to) just have these wild ideas may not work very well. But, I need to go into cultural stories. The metaphors that have been passed along all these generations, and that may bring better value to the client. ...In a way our culture always looks back - so from generation to generation we pass along folklore, many stories that are supposed to be educational...So we really
need to..get a feel (for) those folklore and then I think
the client will feel more familiar, more adapted (P.C.).

Wong (1995) describes a successful incorporation of Chinese
metaphor into a Chinese client’s discussion of emotional
experience:

Chinese clients’...expression of intense inner
experiences through metaphors, which are embedded in
Chinese idioms or poems, reflect another communication
style and possibly a more holistic approach to one’s
experience (Nguyen, 1992). An example of such a metaphor,
expressed in a group of Chinese clients, is included in
the following idiom: "A mute boy eats yellow lotus seeds
(a bitter taste), nowhere could he express his grievance."
The pain and frustrations of the client who cited this
metaphor were conveyed to the counselling group in a
powerful way (p. 110).

It was noticed by the interviewees that it was often easier for
traditional Chinese clients to talk about sensitive or very
emotional, or "taboo" subjects in English, because the use of a
language other than their mother tongue could provide emotional
distance from what they’re discussing:

Sometimes when I have clients talking about their
sexual problems, then when you talk about the
genitals or sexual organs, then they use English...
And when they, sometimes when they feel angry, they
will use the foul language in English language. It seems to be more distant, less offensive, that way (P.C.). On the other hand, one of the major disadvantages that interviewees mentioned in regard to counselling and the Chinese language was the limited range of emotional vocabulary. A number of the counsellors referred to the "narrow pool" of verbal vocabulary for describing feelings:

...we don't have too much vocabulary in Chinese in terms of our emotion. They are quite foreign to us. Say something like: "I really feel very, very, very depressed;" "I feel bad," things like that. In Chinese it's difficult to...narrow it down (K.N.).

The limited range of emotional expression in the Chinese language could sometimes create confusion as well in the dialogue between counsellor and client:

Sometimes if I ask a feeling question they don't understand. Again, it may have something to do with the Chinese language itself...I can give you an example. If I ask you "How do you feel?" in English, you know what I'm asking, but in Chinese if I ask you "How do you feel?" that can be a question about opinion rather than feeling. In Chinese, you can just ask Li got gak ging yao?...The term got gak can be a feeling word, "How do you feel?" or it can be "What's you're opinion?" (C.A.). Counsellors recommended avoiding confusion by trying to ask for a specific feeling, rather than asking in a general way:
I try to avoid this question: *Li got gak ging yao?*. I would ask it in a different way. Instead of asking "How do you feel?"...I would make it into a WHAT question and they have to pinpoint the feeling (C.A.).

A lack of emotional expression is quite consistent with traditional Chinese philosophy which encourages modesty and harmony in all things:

In the Chinese family open expression or discussion of emotion is generally not encouraged, except in certain ritualistic situations, such as funeral when the women are supposed to cry loudly to demonstrate their grief. The Chinese believe that excess emotion endangers health. For example, losing one's temper is described in Chinese as the discharging of spleen element (*fa pi qi*). The common belief is that it is a result of too much fire element in the liver (*gan huo shen*). An overt expression of emotion, such as anger, may cause inner organ damage and, therefore, ought to be discouraged (Tseng & Wu, 1985, p. 100).

One of the reasons given by several interviewees for the lack of emotional vocabulary in the Chinese language is that the emotions are described in a more physical way, the "physical sensation," rather than in a "psychological" way. For example:

Like in HAPPY, the word "happy" in Chinese literally means "my heart is open"...Like SAD, right? In
Chinese it literally means "hurting heart." The word heart has to be there, something physical...The Chinese language attaches physical symptoms to feelings (C.A.). Using the vocabulary of physicality to describe feelings is quite consistent with the traditional Chinese philosophy (see Chapter Four) of Taoism, which stresses the unity of "the whole":

Traditional Chinese medicine is based on Taoist philosophy, which includes clear and calm awareness of all cosmic phenomena, including the diverse functions of the human personality. Taoists do not separate mental and physical processes (Das, 1987, p. 35).

Another recommendation for discussing emotional feelings with traditional Chinese clients was, therefore, to use the language of physicality to further describe and narrow down the feeling:

I would try to focus on their emotion, but I would try to link it up with their physical feelings, their physical symptoms. Sometimes what they say, they describe their feeling which I'm not sure, I would ask them to describe their physical sensation at that time. For example, if the client says: "I'm feeling sad" then I say "What do you mean by that?", "How does your body feel when you say you are sad?" (C.A.).

Many of the interviewees discussed the influence of the Chinese language on the style of communication between counsellor and client. In particular, several interviewees mentioned the
inherent directness of the Chinese language:

Sometimes the Chinese language itself is structured such that you say things differently than if you are speaking in English. So things just come out more direct. Either it's totally discrete, or it has to be very direct (A.C.).

How this directness of language might impact the relationship, particularly in terms of client feedback and in expectations from traditional Chinese clients for a directive approach from the counsellor, are discussed respectively under Theme #3 (Expectations of the counsellor role) and Theme #9 (Blending Western-counselling with traditional Chinese culture)

And, finally, interviewees mentioned the expectation of traditional Chinese clients for a certain "formalness" of language in line with the expected professional role of the counsellor. A more informal approach, such as the use of humour during the session, could result, if used incautiously, in losing the respect and rapport of the client:

I would try to cultivate a casual atmosphere...but... the words I use have to be careful in the sense that I cannot be too casual with some of the terms, or slang, or jargon I use because, again, I would say in the Chinese people's mind they cannot accept professional people being so careless with their language. Like using the language of the lower class,
so to speak. So I have to be careful about that. Sometimes some clients cannot even use the use of humour. The Caucasian clients are more accepting of... you say a few jokes with them or use a sense of humour. I would be very careful about that with Chinese clients (C.A.).

Sensitivity to Possible Cultural Differences in Non-Verbal Communication Between Client and Counsellor

Non-verbal communication of Western-trained counsellors working with traditional Chinese clients was a difficult topic for most of the interviewed counsellors to talk about because, as one interviewee put it, so much of non-verbal behaviour is unconsciously ingrained or "automatic." However, counsellors were able to talk about some of their nonverbal responses to what they saw as the client's preference for physical reserve and distance in the relationship.

With couples, Caucasian couples may be more intimate, physically intimate, in front of me. Whereas Chinese couples will be...more reserved in that way (P.C.). It was assumed that traditional Chinese clients would not feel comfortable touching someone unless it was someone they knew: I don't think they expect that kind of thing...unless it's someone they've known for years and it's a special occasion (A.C.).
Physical contact was generally limited to a handshake:

Well, handshake are quite good. Like initially when I meet the client for the first time, very often I will shake hands with them and I think the clients feel comfortable with that (P.C.).

Even here, however, some counsellors were cautious in initiating physical contact:

I would not shake the person’s hand if the person doesn’t extend his hand. I would greet the person by a slight bow, or just acknowledge the person, make a point of it. So, any person that shakes hands with me, usually the person has their hand ready, then I would extend it...to the client (L.C.).

The only other physical contact mentioned was sometimes a light pat on the shoulders given by the counsellor:

Sometimes (I) give someone a pat on the back or something, a very light touch (A.C.).

Several of the interviewees attributed some of their physical restraint to their own Chinese background as well:

I don’t touch. That may be my own Chinese upbringing. I generally don’t touch anyone, and I think that, I don’t know, but I think that probably is compatible with my Chinese clients. Most of them were probably raised the same way (A.C.).

In terms of proxemics, the preference of the majority of
counsellors interviewed was to keep a considerable spatial distance out of respect for the client.

In terms of Chinese clients, spatially I would not pull up. I would give more space. You would never see two Chinese clients speaking to each other face-to-face with just one foot in between them...I would not pull up. I would be at least seven feet away from the client...And, when the client stands up and they're leaving the session, I am very much aware. I will not go so near to the client. I will wait till the client moved a little bit before I would come up any further. I would stand up when the client comes and when the client leaves, but I would not move in to a distance which is an...upset for the client (L.C).

To create a more comfortable physical space between counsellor and clients, several of the interviewees mentioned the use of a small round table across which the dialogue took place. It was the impression of these counsellors that the small table created a "safer," and more "informal" setting for the session, more like a conversation between friends:

...with the table in between (taps table)...that has made clients feel more comfortable, they feel less exposed. It’s a safe buffer in between (C.A.).

Non-verbal behaviours of traditional Chinese clients which were noted to affect counselling included less eye contact than
Western-European clients and limited facial expression. The noticeable lack of eye contact was mentioned by many of the interviewees as being a cultural indication of polite attention:

I think there's less eye contact in Chinese culture. Actually there is...It's just a cultural thing. It's not polite to look at someone's eyes for too long...
So, sometimes when I look at a client, she would be talking to the shelf ninety percent of the time, or even the whole time (J.H.).

However, it was also mentioned that generational differences and differences in country of origin have affected this behaviour so that it is no longer as prevalent:

Some people say that Chinese people don't look at me in the eye, because in the past, a long long time ago, I think there's the saying that if you look at people in the eye, you are impolite. But I don't think that works any more...Maybe for some more traditional Chinese people, they will still not look at you intensely for concern that they are being too interested; they are impolite. But I think gradually things have changed, and I look at clients in that way, and they also look at me in the eye, so not so much difference (C.A.).

Several of the counsellors responded to the perceived reserve in traditional Chinese clients by exaggerating their own facial expressions as a kind of "role-modelling" and to make sure that
the counsellor acceptance of the client was received by the client:

One thing I’ve noticed...usually the Chinese people are less expressive, less facial expression, as if they are more uptight and they are trying to hide their feeling. And sometimes I, as a demonstration, I would amplify my facial expression to show them, as an example, or as a demonstration. So sometimes I intentionally exaggerate my facial expression in order to make them feel more comfortable in doing the same. Their face can be stone, or plain for the whole session. They can talk about very tearful issues, but face won’t show it (C.A.).

Nonverbal demonstrations of respect by the counsellor for the client were also sometimes shown by exaggerated facial or bodily expression. For example,

...for Chinese clients, when I agree with them, again, I will exaggerate a little bit more, like nod my head heavy enough for them to notice whereas for Caucasian clients, I would just not my head "Oh, yeah, good, okay." So will stress it to show it to them. Again when I work with my Chinese clients I want to convey more of the positive feelings...with proof of my acceptance to them. By exaggerating a little bit, I want to make sure that they caught it. So my expression is more explicit, rather than subtle (C.A.).
A number of counsellors emphasized the need to demonstrate an obvious warmth and friendliness towards the client, that perhaps refers back to the discussion of traditional Chinese clients need for a more friendly, intimate relationship with the counsellor. As one interviewee put it:

   Just be friendly, like with a smile on your face or something to show that...you are a personal rather than you’re just going in to do a job (E.H.).

Another interviewee described the same approach in more detail:

   Nodding the head, smile...a gentle voice. Yes, treating them with very welcoming attitude, rather than a blank face...(not just): "Come in, sit down, what do you need today?" That’s...just not me. I’ve seen other...counsellors who are more cold than I am. That’s just not me (J.H.).

The appearance of the counsellor was frequently mentioned as an important factor affecting the traditional Chinese client’s acceptance of and respect for the counsellor as a professional.

   I think most of them will expect that you are not too sloppy, not "hippy-like." And so, basically, neat and tidy I think is the basic essentials. And not too lavishly decorated...Because if you’re too lavishly in your, decorating yourself, I think that puts people off and that creates a greater distance between you and them....Because they may feel that if
you are dressed that perfectly or sophisticatedly then you may not understand their sorrow or their pain so much (P.C.).

Appearance was considered an important step in establishing initial rapport, getting the client's trust and willingness to listen to the counsellor:

I think they will listen to you more when you are dressed professionally...My co-worker in Hong Kong, she went..to work wearing a pair of jeans and (the) client criticized her...the client’s parents: "I won’t trust my daughter with you" (S.W.).

Several counsellors also mentioned this expectation of counsellor appearance in a broader way which included not only dress, but body language and manner:

...and if you are too liberal, say in terms of our dress, for example, if I am in a t-shirt and jeans and...legs spreading out and, you know (lounging) in the chair, then they would quickly lost confidence in you. Even smoking. You know, things like that. Because you’re a role-model, in a sense, they have got certain expectations (K.N.).

It was found that older counsellors gained respect more easily, as did male counsellors over female counsellors. One interviewee discussed his difficulty in being accepted as a professional because of his youth:
They know that I have a couple of degrees to back me up, and how many years of experience behind me, they (usually) respect me. But sometimes when they walk in and see: "Who is this young kid with long hair?", it was quite a bit longer, and then they would doubt, and if they don't have a need bigger than the doubt, then they would start showing some signs of questioning it...Maybe their facial expression would show the doubt. Maybe something they say, or would say: "Have you dealt with these kind of thing before?" (J.H.).

Gender also influenced the counsellor-client relationship, with traditional Chinese female clients preferring a female counsellor, and traditional Chinese male clients tending to prefer a male counsellor. A female counsellor has experienced lack of trust from Chinese male clients because of her gender:

I'm not sure how many men, male client(s) will trust me...whether they will tell me anything in depth or what is wrong...Quite a lot of older Chinese men, they will think the woman (does) not think, only the man knows better. They trust men more than they trust women (S.W.).

It may be difficult for men to reach outside the family for help, and especially to ask for help for personal issues from a woman:

I think for men to come in and tell their problem to a woman is very challenging, and, especially for
Chinese men, because they’re not used to talking about their feelings. It’s difficult for them. And so, to talk about these inner things with a woman takes a lot of courage and a lot of — great letting go of the shame, the sense of embarrassment (P.C.).

On the other hand, traditional female clients may find it easier to talk to a female counsellor:

They tend to...say that: "Well, you are just another man who would probably side with my husband" (K.N.).

Consideration of Suggestions by Counsellors Experienced in Blending Western Counselling Training with Traditional Chinese Client Expectations

All of the Western-trained counsellors interviewed for the study were of a Chinese background and had experience working with traditional Chinese clients. Based on their experience in blending Western training with Chinese client expectations, they had a number of strategic recommendations for counsellors working with traditional Chinese clients.

The most challenging and frequently mentioned dilemma mentioned by the counsellors was the need to meet the expectations of traditional Chinese client for direction and advice while using the usual non-directive and insight-focused approach of Western counselling training. Several interviewees recommended meeting the client’s initial need for concrete direction and behavioral focus, before leading in to deeper, more introspective issues:
So in the first session, what we usually do is that we try to identify something concrete because they would expect you to give them advice...If you don't do anything concrete in the first two or three sessions then you quickly would lose your client (K.N.).

Demonstrating a willingness to meet the client's concerns as presented allowed a trust to develop between counsellor and client:

In working with the Chinese clients, usually for first session or second session I would focus more on issues rather than their own personal feelings or their personal issues. For example, the presenting problem might be the child behaviour. So usually for the first two sessions I would spend more time talking about the child, or the child's behaviour and less on the parenting style they have...because, again, I'm afraid that might be too personal, and they may take it as a criticism. So I have to be with them in the concerns and make them feel that I'm seeing things, or at least I'm trying to see things, from their perspective first instead of going to the issues which I think are the core issues (C.A.).

If the initial concrete concerns of the traditional Chinese client were met, interviewees found that clients felt confident in the counsellor's abilities, were more willing to trust that the counsellor could help them, and would listen to the
counsellor’s suggestions:

For example, if they’re not sure about the educational system here, why it’s so vague, what’s happening in the class, if you can find some material (to) explain to them that’s what’s happening in the school or you can make a phone-call for them, do some interpretations or go with them to a meeting with the "head-master," they will feel a sort of: "Oh, this person can really help, with all this concrete support," and they would have some sort of trust in you (K.N.).

Once the trust was built between client and counsellor, the interviewees would begin to reframe the presenting issue, and move into deeper, more core concerns:

So initially, after hearing some of their perceptions about how things are or what their perception of the problem is, I may give some idea of how I feel about the situation...I will maybe in the middle or near the end (of the session) or at the beginning, give a "rap-up", kind of a statement on how I see their problem and where we are going with that...So in that way they might feel that they have a handle on how the situation is (P.C.).

An example given by one of the interviewees was:

Don’t ignore what they put forward...They talk about their son and you "It’s not your son’s problem, it’s somebody else’s problem." They would...quickly (lose) trust in you
and they would just go away, walk away. So we sort of say, for example: "Perhaps you could try this and that with your son and see what would happen tomorrow. When you come back probably you would expect some improvement." ...They would try out and they come back and: "Oh, it works"...So sometimes you would suggest one or two techniques of communication, role-play, then they try it at home. Then they come back: "It really work." But it may not be the core of the problem. It may be a problem with the family communication. So gradually we would bring in the family picture (K.N.).

Several counsellors pointed out that moving from solution-focused to insight-focused counselling, although initially not an expectation of many Chinese clients, seemed to be, in the long-run, more satisfying for the client.

...on the surface they want some advice from me, they want some direction, they want to be told what to do, like asking a doctor to advise them, but very often even if I gave advice to them they will spell out all kinds of difficulties and things that challenges, not very overtly, that your method won't work...I think very often they come here, of course they want the solution, but they want THEIR solution...And so if they find that this therapist is giving them a different solution then they will think that it doesn't work and will compile all the difficulties, and
then ask if you have any OTHER solution...In a way, sometimes it's a trap...on one hand I feel the need for them to have an expert to guide them, but I know inwardly that if I do that it will not work very well (P.C.).

However, as was also mentioned by a number of the interviewees, moving into self-reflection and introspection was sometimes difficult and confusing for the traditional Chinese client:

If I concentrate on a way that will work with Caucasian clients, like asking them stimulating (reflective) questions, quite a number of times they kind of feel lost and they will feel: "Why asking me these questions? I came here for answers, not for you to ask me...So what is it that you are doing?" (P.C.).

Several interviewees discussed how the "psychological framework," or cultural worldview, of the client could be focused differently in traditional Chinese clients than in Western-European clients:

We're (Chinese) not very used to that kind of psychological framework...we're more emphasis on behaviour practice. Like, a Chinese parent will be very emphatic on the kid is behaving good at school, has good marks and concentrating on study, being polite, being obedient. But..."What is the importance of having good self-esteem as related to that?" And somehow not very easily grasped...The emphasis is more on "I hope that we can encourage him to work harder, to be more
polite, more on track, and be a good citizen, be loyal to family, respectful." The emphasis is more on the behaviour patterns. Whereas maybe with Caucasian clients, they will be more emphatic on hoping that the child can have good self-esteem, a sense of being empowered, and then they feel that things will be different that way. So, the emphasis may be a bit different (P.C.).

Most importantly, as in Theme #1, counsellors mentioned the need to be aware of within-group differences and to check out cultural assumptions of client expectations:

We would see that this client probably he or she would accept more of a non-directive approach, then we would go for a more very Western style of giving counselling. But if a person is...a typical example is a forty year old woman coming in telling, complaining about the son and the daughter's education level...Just finish about six years in education only, that's all she got, no language ability, new immigrant. Then basically you would know this person would expect something very concrete and they would, they are very vocal in asking you: "Tell me what I should do," "Tell me..," keep on urging you to do that (K.N.).

With traditional Chinese clients, therefore, it was considered most effective to do something "concrete" in the first two or three sessions to gain the client's trust and confidence.
Counsellors also tended to move slowly to the "core" issues, because moving too quickly to intimacy, or failing to demonstrate a willingness to be of practical help to the client, could mean losing the client altogether. Many of the interviewees expressed a willingness, therefore, to give the client time to adjust and feel comfortable in the counselling setting:

Chinese clients may need more time to get themselves... to feel that they fit in the situation. And I think the whole counselling setting is very foreign to them. So, to begin I mainly spend some more time sharing, maybe some relatively social or personal things with them, like where do they come from...and how do they come here. So this kind of social chit-chatting really may last a bit longer...

With Chinese clients I think I need a longer time to really make them feel comfortable, that they are in the right place and that they will not be interrogated...So the initial period of social joining will be a bit longer (P.C.).

The initial client contact was considered by many of the counsellors to be a crucial factor affecting the traditional Chinese client's attitude towards counselling services. It was found that having someone greet the client in their own language whenever possible was helpful. Counsellors found it most successful to greet the traditional Chinese client personally whenever possible, especially if they were the only staff member able to speak the same language:
If I know that they do not speak English then I would say: "Just ask for me" and give my name...and have them practice my name, and then I would also inform the receptionist just before the client would come that...so and so will be coming at one-thirty or something...watch out for that person and just call me out as soon as they arrive (E.H.).

It was also important, the interviewees stressed, to be able to understand that the shame or guilt, for a traditional Chinese client, in talking about problems could create an indirect initial-problem statement from the client, and, therefore, necessitates the ability of the counsellor or initial contact person to "read between the lines" of the client's request for assistance.

So I would say that the initial phases of reception is really important. That means the one who pick up the phone, and that person would start using some excuse: "I have got a friend who is feeling sad" or some would try to...project the problem to somebody else. So you will have to learn (to)...read between (the) words. That means when you listen to the message you have to be very sensitive, supportive, and assure that confidentiality is there (K.N.).

And, finally, the interviewees referred to the initial information-gathering, and recommended using a more informal,
less structured approach to obtaining personal information from traditional Chinese clients:

...you should not, I think, follow some kind of a format that you have...Let's say you have twenty questions that you want to ask, you try to work on asking those twenty questions during the interview but maybe not in the order that it's been listed on your piece of paper. And in the end you would still have all the information, or most of the information, but then it's not so structured that it would look kind of unnatural. So you want it to be as comfortable as possible for the person as if they're talking (E.H.).

This "informal" method of interacting with traditional Chinese clients was often even extended to the setting of appointments:

Even if I schedule for them, regular appointments, I would do it in some more informal way. I would chat with them a little bit about their daily life (A.C.).

Conclusion

In summary, the interview participants were in agreement in stressing a number of areas which they believed to be crucial in establishing the therapeutic alliance with Chinese clients:

a) knowing or learning about the values and beliefs of the Chinese culture and how these might impact on the building of a
therapeutic alliance, b) applying this general cultural knowledge in a specific way according to the individual client’s personal and social history, and c) remaining flexible, when building the therapeutic alliance, to possibly adapting or changing the usual assumptions and practices of Western counselling so as to best meet the needs of the Chinese client. Each of the counsellors interviewed differed somewhat in their approach to integrating Western counselling theory and practice with Chinese cultural values, but all agreed that some revision of traditional Western counselling was essential to build a therapeutic alliance with traditional Chinese clients. Being of the same cultural background as the client was no guarantee of immediate rapport between counsellor and client, as there was often wide differences in terms of educational level, in terms of subgroups within the culture, and in terms of understanding and acceptance of Western counselling values. However, from the interview results, it appears that Western counselling can be used effectively with traditional Chinese clients if the counsellor is willing to remain flexible in negotiating a working relationship that fits comfortably with the cultural values and beliefs of both the counsellor and the client.
CHAPTER SIX
DISCUSSION

Theoretical Implications

This research study has demonstrated that cultural differences exist in the effectiveness or appropriateness of Western counselling approaches to establishing rapport. In this regard the research study results are consistent with and confirm prior research findings and theoretical literature on multicultural counselling.

By looking at the interaction of Western counselling assumptions around the alliance formation in relation to traditional Chinese values, a number of broader issues related to the universal applicability of Western counselling have arisen. Most importantly, it appears that applying Western assumptions of alliance formation regardless of sensitivity to the appropriateness or inappropriateness to a particular client's cultural worldview can result in a client who feels misunderstood, mistrustful or distant to the counsellor. The danger of not gaining and applying knowledge of the client's culture is in failure to build a therapeutic alliance and, therefore, losing the client altogether. It seems from the results of this study that it is necessary for the Western-trained counsellor/psychotherapist to be aware of their own cultural values and how they might impact on those of the client. The process of establishing an alliance becomes, with this
awareness, one of counsellor and client dynamically creating a mutual understanding of the role of the counsellor, the boundaries of the relationship, and the rules for working together.

Practical Implications

Due to the small sample size and specific qualities of the sample interviews, results are not generalizable. However, there are a number of practical suggestions for counsellors that can be drawn from the research study. These are described in the following section.

First, it is a responsibility of the counsellor/therapist to educate themselves (through training, research, or consultation) on the culture of the specific client they are counselling so as to understand the background experiences and cultural beliefs and values which influence the client’s perspective. Cultural knowledge can then be used as a framework from which to begin defining the individual characteristics. Sue and Sue (1990) describe this framework as a "background from which the figure emerges" (p. 48).

For instance, if we know that a man is from North India and we know that area, we can guess with a certain probability that he has dealt mostly with people from his caste, that he has had to contend with very crowded
buses, that he has seen a variety of people at work as he walked through the town's narrow lanes, and that he has been expected to be obedient to his parents and at the proper time submit to their choices for his occupation and marriage partner (Marsella & Pedersen, 1981, p. 30).

It is important for counsellors to not apply cultural information in a stereotypical way. Sue and Sue (1990) describe stereotypes as "rigid preconceptions we hold about ALL people who are members of a particular group...The belief in a perceived characteristic of the group is applied to all members without regard for individual variations" (p. 47-48). To avoid stereotyping individuals within a particular culture, and to begin to perceive the individual variations unique to a particular client, it is necessary for counsellors to be aware of within-group differences that may be present. Finally, if a counsellor is confused or unclear about a client's cultural beliefs, values, or expectations and whether or not these are influencing the client's situation or the counselling process, it is useful to ask the client for clarification.

One must be careful not to apply cultural information in a stereotypic manner. Ishisaka, Nguyen, and Okimoto (1985) point out that cultural difficulties, such as the degree of assimilation, socioeconomic background, family experience, and educational level, impact each individual in a unique manner. Knowledge of cultural values can help generate
hypotheses about the way an Asian might view a disorder and his or her expectations of treatment, but it must not be applied in a rigid fashion (Sue & Sue, 1990, p. 197).

The assumptions of Western counselling, and the underlying Western European values, may need to be challenged as to their appropriateness with particular cultural groups. For example, the assumption that counselling is a move towards greater autonomy and self actualization may not be comfortable for all cultural groups. As Ivey, Ivey and Simek-Morgan (1993) point out autonomy/self-actualization assumes an "individual" identity of self in which the locus of responsibility lies within the individual. Such a belief may be in direct opposition to culture which assumes a "collective" identity of self in which the locus of responsibility resides in the family and the community.

Autonomy and self-actualization sound like wonderful ideas with which no one could truly disagree. However, an exclusive focus on the self would be considered selfish and even and indicative of mental disorder in much of Asia, South Pacific, and African culture. As another example, American Indian culture has long focused on the relationship of the individual to the group and to the environment. The Sioux Nation talks of *mitakuge ogasin* - "all my relations" (Ivey, Ivey, & Simek-Morgan, 1993, p. 13).

Western counsellors who are unaware of the variations of cultural
definitions of the self, may, as Sue and Sue (1990) point out, ascribe negative attributes or motives to clients from a "collective" culture:

(There are) a number of individuals who describe Asian clients as being dependent, unable to make decisions on their own, and lacking in maturity. Many of these analyses are based on the fact that many Asian clients do not see a decision-making process as an individual one. When an Asian client states to a counsellor or therapist: "I can't make that decision on my own; I need to consult with my parents or family," he or she (may be) seen as being immature (p. 36).

Another focus of Western counselling is insight and self-reflection, rather than practical, immediate solutions to concrete problems:

Traditional psychotherapy is typically insight and feeling oriented. Therapists help clients explore their feelings and understand their problems. Asians, on the other hand, frequently perceive therapists similarly to medical doctors. They seek concrete advice, structure, guidance, and directions to deal with their problems. Indepth personal questions by therapists may cause intense discomfort and disillusionment (Lefley & Pedersen, 1986, p. 201).

However, counsellors interviewed in my research study found it
essential, if rapport was to be established with traditional Chinese clients, to demonstrate a willingness to meet the client's initial concerns as presented. Once trust was established, the counsellor could begin to reframe the issues and move to deeper levels of understanding at a pace comfortable for the client. Western-trained counsellors may, therefore, need to evaluate the directness and pacing of their approach to the deep internal issues and conflicts of the client.

Confrontation and conflict are assumed in Western counselling to be part of the struggle towards desired change and growth. However, the values of harmony and stability in certain cultures, such as traditional Chinese culture, may override the desire for change and growth. Without knowledge and sensitivity to cultural values around conflict and stability, a counsellor may create undue stress between a client and the client's cultural values:

Asian Confucian philosophy...stresses a set of rules aimed at promoting loyalty, respect, and harmony among family members (Sue & Morishima, 1981; Yamamoto & Kubota, 1983). Harmony within the family and the environment leads to harmony with the self...Asian cultures tend to accommodate and/or deal with problems through indirection...it is believed better to avoid direct confrontation and to use deflection (Sue & Sue, 1990, p. 126).
Western-trained counsellors also need to be aware that cultural differences exist in attitudes towards time. Western counselling assumes a linear, cause-and-effect orientation to time. Misunderstanding a client's cultural conception of time could affect the establishment of rapport with the client. Edward Hall describes two distinct cultural concepts of time, which he labels "monochronic" time and "polychronic" time:

American time is what I have termed "monochronic", that is...prefer(ing) to do one thing at a time, and this requires some kind of scheduling..."polychronic" systems are characterized by several things happening at once. They stress involvement of people and completion of transactions rather than adherence to preset schedules (Hall, 1976, p. 17).

Western counsellors' concept of time as a limited commodity, necessitating the scheduling of appointments, and the limiting of the length and frequency of meeting times may, therefore, clash with clients from a different time system. Counsellors may need to be less rigid in their scheduling, and perhaps negotiate a way of meeting that is comfortable for both counsellor and client.

Counsellors may, therefore, need to move towards intimacy and client self-disclosure at a pace that is comfortable for the client, and may be slower than the Western-trained counsellor is used to:

An American-Indian family who values "being in the
present," and who values the "immediate experiential reality of being," may feel that the counsellor lacks respect for them and is "rushing them" (Lewis, 1981; Red Horse et al., 1981) while ignoring the quality of the personal relationship. On the other hand, the counsellor may be dismayed by the "delays," "inefficiency," and lack of "commitment to change" among the family members...The result is frequently dissatisfaction among the parties, lack of establishing rapport, misinterpretation of the behaviours or situations, and probably discontinuance of future sessions (Sue & Sue, 1990, p.128).

It is important for counsellors to understand that Western counselling’s expectation of the counsellor role may not be the same across cultures. In Western counselling the role of the counsellor is generally understood to be that of a professional who provides objective, facilitative encouragement and support to assist the client to make personal changes. It may be difficult, but necessary, for the counsellor to change counselling styles to meet the expectations of a specific client for a different type of working relationship. For example, the traditional Chinese client may expect a more personal, informal relationship in which they would get to know the counsellor as a person, not just a professional; and may expect a more directive rather than facilitative role from the counsellor.

It is necessary for the counsellor to not assume a common
understanding of the counsellor role. Clarification of the role of the counsellor in Western counselling may be necessary, and, as well, the counsellor needs to remain flexible in negotiating a therapeutic alliance which is comfortable for both the counsellor and the client.

Higginbotham (1977) indicates that many people from other cultures expect an active authoritarian role on the part of the therapist while the patient takes a passive, dependent role. Obviously, these "images" of certain clientele must be checked out against the real behaviour of individuals and groups...Still...the therapist should expect that, in a pluralistic society, cultural backgrounds may contribute to role expectations, and it will be his or her responsibility to be aware of these and to take them into account in therapy (Marsella & Pedersen, 1981, p. 45-46). Another implication of the research study is that it is important for counsellors to be aware that traditional family structures vary from culture to culture, and that the family experience and context is crucial to understanding an individual's behaviour and expectations.

Although the Family Therapy field has tended to ignore the larger context, it is increasingly obvious that family relationships cannot be separated from the wider culture that defines the types of relationships which are possible in families and who is available to
participate in those relationships... We must move to assume a truly systemic perspective, one which takes into account all system levels, from the microbiologic to the sociopolitical structure of society (McGoldrick, Anderson, & Walsh, 1989, p. 12).

For example, although the traditional Western model of the family developmental life cycle views "separation from family" as part of Young Adulthood (Ivey, Ivy & Simek-Morgan, 1993, p. 337) in the traditional Chinese family an individual is expected to live at home until they marry, and perhaps remain living with the parents even after marriage.

Conflicts within the family system are dealt with according to cultural expectations and, therefore, need to be viewed by the counsellor from a perspective of cultural understanding of the family system. For example, traditional Chinese families in which harmony is paramount may want to avoid parent-child conflicts if at all possible; traditional Western families may want to be more direct about confronting such conflict. Counsellors need to be aware, also, that in immigrant families intergenerational conflicts can arise because of the drastic clash of cultural values and the subsequent impact of these values on the family system.

It is important, finally, for counsellors to recognize the constantly shifting variations in family structures and dynamics in response to political, economic and societal changes such as
The clinician working with immigrant families...should obtain information regarding the following: How many times did the client move in the past? From where to where? With whom? What were the reasons? Which family members are still behind? What was the order of migration? Were these voluntary or involuntary migrations? To what political and economic systems was the family exposed?...Have family members experienced upward or downward mobility since immigration? How did they cope with all the new changes? (McGoldrick, Pearce, & Giordano, 1982, p. 531).

Western counselling generally takes place in the privacy of a formal office setting; home visits are infrequent. When working with cultures which are not familiar with or comfortable with a formal setting for counselling, the counsellor may have to be flexible in terms of the meeting place and consider other alternatives: the client's home, a neutral place (for example a quiet restaurant), or the outdoors. Without presuming, the counsellor can ask the client where they prefer to meet, and attempt to accommodate their preference. The formal process itself may need to be adjusted to meet the comfort level of the client, and a more informal process put in place, such as the client and counsellor participating in an activity together where
they can get to know each other on a more personal and informal level. The set-up of a counselling office is something that the counsellor may need to consider, as well, because the traditional office setting may be intimidating for clients from some cultures. Perhaps allowing for the personality of the counsellor to come through by creating a more relaxed, personal environment may encourage clients to feel a sense of trust with the counsellor and the counselling process.

In Western counselling it is presumed that the client will willingly self-disclose intimate details to the counsellor within the first two to three sessions. The counsellor, on the other hand, maintains strict "professional" boundaries regarding the sharing of personal information. Disclosure by the counsellor is limited to very general information and recommended only as it pertains to specific client issues.

Most forms of counselling and psychotherapy tend to value one's ability to self-disclose and to talk about the most intimate aspects of one's life...The converse of this is that people who do not disclose readily in counselling...are seen as possessing negative traits such as being guarded, mistrustful, and/or paranoid (Sue & Sue, 1990, p. 39-40).

Again, an implication of the research study is that it may be necessary for the counsellor to recognize that culture may affect the level and pace of self-disclosure by the client, and the
client’s expectation of self-disclosure by the counsellor.

Verbal communication is one of the essential ingredients of the Western counselling process. Counselling is considered an interpersonal relationship in which the counsellor influences the client to change:

The counsellor establishes a power base, or influence base, with the client through the three relationship enhancers of expertness, attractiveness, and trustworthiness. This influence base enhances the quality of the relationship and also encourages client involvement in counselling (Cormier & Cormier, 1991, p. 42).

In order to actively influence the client to change Western counsellors initially use a combination of verbal and nonverbal messages to convey "attractiveness, expertness, and trustworthiness." During the initial, or rapport-building, stage of the counselling relationship counsellors rely heavily on verbal communication to demonstrate consistency, congruency, attentiveness, ability, caring and openness (Cormier & Cormier, 1991). During this initial stage, Western-trained counsellors also traditionally negotiate agreement on the role of the counsellor, what the counselling process will entail, and agreement on outcome goals (Cormier & Cormier, 1991). A reliance on verbal communication, if the native language of the counsellor and the client is not the same, may create dissonance in what is meant and what is understood. The intent of the counsellor’s
verbal expression may not be what is actually transmitted to the client. Counsellors also need to be aware that what they assume is meant by the client's statements may not be what is actually meant. Direct interpretation of words into another language does not always result in the same concept or meaning. Therefore, it is important for the counsellor to clarify whenever possible that messages being sent and received are the same.

English may not be (the client's) primary language, (therefore) they may have difficulties using the wide complexity of language to describe their particular thoughts, feelings and unique situation. Clients who are limited in English tend to feel that they are speaking as a child and choosing simple words to explain complex thoughts and feelings. If they were able to use their native tongue, they would easily explain themselves without the huge loss of emotional complexity and experience (Sue & Sue, 1990, p. 46).

Western counselling furthermore assumes a comfortableness with "talk therapy," verbally communicating one's feelings and experience. This is not always the case with all cultures.

The primary medium of communication is verbal (talking - especially in standard English)...A person who is relatively nonverbal, speaks with an accent, or uses nonstandard English may be placed at a disadvantage. The lack of bilingual counsellors makes this fact even more glaring (Sue & Sue, 1990, p. 29).
Also, directness of verbal, emotional and behavioral expression is considered in Western counselling to be a sign of genuineness and congruence. However, as Sue and Sue (1990) point out:

In many traditional Asian groups, subtlety is a highly prized art, and the traditional Asian client may feel much more comfortable when dealing with feeling in an indirect manner (p. 88).

It needs to be kept in mind by the Western-trained counsellor that nonverbal cues may not have the same meaning across cultures. Typically, in Western counselling nonverbal cues are given to transmit the counsellor's expertness. These might include displayed certificates and licences, titles, reputation, size and location of the office. These nonverbal cues may be even more important for clients from a culture, such as traditional Chinese culture, which is more hierarchical in nature than Western culture and, therefore, put more trust in a counsellor who has demonstrated an "expertness" or "authority."

Nonverbal cues, such as physical appearance, dress, hygiene, posture, are also used by clients as a measure of the counsellor's attractiveness especially in the early stages of counselling (Cormier & Cormier, 1991). These nonverbal factors, according to the interviewees in my research study, may be even more crucial to clients from certain cultures. Furthermore, what appearance and behaviour is considered "attractive" and "trustworthy" may vary from culture to culture.
It is important for counsellors to be aware that their appearance (including their age and sex) and their nonverbal behaviour may be interpreted differently depending on the client’s cultural perspective.

Similarly, the nonverbal behaviour of the client may have different meaning than the same behaviour in another culture. Clients from a traditional Chinese background, for example, may be more reserved physically than clients from Western-European culture, and may prefer more distance between themselves and the counsellor:

Research on proxemics (Susman & Rosenfield, 1982; Wolfgang, 1985) leads to the inevitable conclusion that conversational distances are a function of the racial and cultural background of the conversants (Sue & Sue, 1990, p. 53).

Conclusion

In summary, one of the basic assumptions in Western counselling is the need for the counsellor to demonstrate to the client an empathetic understanding of the client’s perspective and experience. Without an understanding of the client’s cultural values and beliefs, however, the counsellor may believe they are being empathetic when in fact their words or behaviour is being interpreted as uncaring or insensitive from the client’s cultural perspective.
Clients must be confident that their speech and actions are being decoded by the counsellor accurately and that their messages are received as intended (Westwood & Ishiyama, 1990, p. 166).

To avoid misunderstanding and miscommunication, the counsellor needs to a) be aware of both their own and the client’s cultural values and beliefs, b) be willing to question their own cultural assumptions, and c) remain flexible in establishing a relationship and counselling process which is respectful of both the counsellor and the client’s culture.

Limitations of the Research Study

My own cultural perspective, Western European, was both a disadvantage and an advantage in interpreting and analyzing information from the research interviews. The major disadvantage stems from my being an "outsider" to the culture under study (Chinese). It is possible, and even probable, that information about the Chinese culture was distorted or devalued when interpreted from my cultural perspective, and that I may not have understood the subtleties of culture or language issues as raised by the interviewees. Such cautions have been raised by Alcoff (1981) as follows:

How what is said gets heard depends on who says it, and who says it will affect the style and the language in which it is stated, which will in turn affect its perceived significance (p. 13).
I tried to minimize personal bias as much as possible by clarifying words and ideas often with the interviewees, and by being aware of the possible effects of my presence as a young Western European woman on the respondents' "rapport" with me and on the answers given to interview questions.

Another disadvantage to being an "outsider" is that individuals from a traditional Chinese culture can be less open to sharing experiences and feelings with "outsiders" than are Westerners:

In general, the Chinese view of human encounters follows the family network. Within the network, the encounters are seen as affiliational. As the Chinese feel that relatives are most trustworthy and dependable, they often extend kin relationships to nonkin and form pseudokin ties...The people one knows who have been made pseudokin are classified as zi ji ren (own people), and all strangers wai ren (outsiders). (Hsu in Tseng & Wu, 1985, p. 101).

I found all the interviewees, however, to be extremely forthcoming in their sharing of counselling and cultural experiences with me. Perhaps the commonality of our Western counselling training and the interviewees' knowledge and involvement in Western culture helped to create a bridge.

Being an "outsider," although potentially restricting and distorting of research data, the distance and objectivity can also be an advantage:
Ordinarily an outsider to the group being studied, the ethnographer tries harder to know more about the cultural system he or she is studying than any individual who is a natural participant in it, at once advantaged by the outsider's broad and analytical perspective, but, by reason of that same detachment, unlikely ever totally to comprehend the insider's point of view (Wolcott, 1987, p. 189).

According to Schumacher and McMillan (1993) the preferred research role is that of "a person who is unknown at the site or to the participants" (p. 386). Furthermore, they state "a researcher who is a participant or already has status within the social group being observed limits reliability" (p. 386). A level of objectivity, in other words, is provided by the outsider role. It is difficult for anyone to look objectively at their own culture, and although many of the counsellors interviewed had thought and discussed the issue of Western counselling as applied with traditional Chinese clients, they were not always able to verbalize to me their cultural bias, values or motivation as counsellors working with Chinese clients. As one interview participant expressed it:

I tend to be more directive with some of my Chinese clients. And that is a pretty automatic thing. I don't deliberately...think "Oh, this is a Chinese client, I should speak like this, or take this approach"...I don't
know if there are things, I wonder sometimes if there are things I do unconsciously (A.C.).

Reliability of the data analysis was increased by a) having two co-raters independently code the interview data, and b) having each of the interviewees review a transcribed and coded copy of their own interview. Interviewees were encouraged to make any comments, changes, or additions at this point.

A major threat to internal validity came as a result of the "snowball sampling" method of selecting participants. Because each interview participant was referred by someone who knew them, there is the possibility of a biased sample of like-minded participants, and data cannot, therefore, be generalized to a wider population. Also, because the interviewees volunteered to participate in the research study, they might have been more motivated than a random sampling of participants, and they might have responded differently to the questions than a non-volunteer group might have.

External validity of the research findings is limited due to the small sample size and the narrow pool from which sample participants were drawn. However, my research study does not aim to generalize results of the findings, but rather to add to the understanding for counsellors/psychotherapists of possible cultural variations in the initial formation of the therapeutic alliance.
Research Implications

It would be necessary to duplicate the research study with a larger sample of participants to see if the findings hold true.

It would be interesting, as well, to replicate this research study across cultures to see if the general conclusions hold true, and thus to confirm the validity of the research findings. It can be implied from these research findings that the specific aspects of the counselling alliance formation might vary from culture to culture, and that knowledge of these variations could be useful to the counsellor.

It appears that the wider the repertoire of responses the counsellor possesses, the better the helper he/she is likely to be. We can no longer rely on a very narrow and limited number of skills in counselling. We need to practice and be comfortable with a multitude of response modalities (Sue & Sue, 1990, p. 170).

It would be most valuable, I believe, to replicate this research study with a non-ethnic cultural group, such as socio-economic status or sexual orientation, to determine whether the definition of culture can indeed be broadened as some writers have suggested. Paul Pedersen (1978), for example, has suggested that all counselling is cross-cultural:

If we consider the value perspectives of age, sex role, life-style, socio-economic status, and other special affiliations as cultural, then we may well conclude
that all counselling is to some extent cross-cultural (Pedersen, 1978).

A broad definition of culture might encourage counsellors to move away from an us-them mentality, and instead view both themselves and the clients as complex cultural beings.

**Conclusions**

The crucial implication drawn from this research study is the need for Western-trained counsellors to accept that theoretical aspects of the Western counselling process, such as the alliance formation, are not universally applicable. Counsellors need to have knowledge their own and their client's cultural biases in order for an effective alliance to be created. Simply applying cultural knowledge stereotypically, however, can be insulting to the client, and potentially damaging to the formation of the therapeutic alliance. By being willing to be flexible in response to the unique cultural variations of each clients, counsellors can not only be more effective, but can better understand their own cultural biases:

The best cure for bias is to try to become increasingly aware of our own biases and how they slant and shape what we hear, how they interfere with our reproduction of the speaker's reality (Guba & Lincoln, 1981).
References


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Odell, M., Shelling, G., Young, S., Hewitt, D., and L’Abate, L. (1994). The skills of the marriage and family therapist in


Wong, Oye-Nam Christine and Piran, Niva. (1995). Western biases and assumptions as impediments in counselling traditional


Appendix A

Interview Schedule
INTERVIEW GUIDE

THIS INTERVIEW WILL FOCUS ON THE THERAPEUTIC ALLIANCE FORMATION: BY WHICH I MEAN THE INITIAL CONTACT AND FIRST ONE TO THREE SESSIONS WITH THE CLIENT DURING WHICH A RAPPORT AND LEVEL OF TRUST AND RESPECT IS BUILT BETWEEN YOURSELF AND THE CLIENT.

GIVEN THAT YOU ARE WORKING WITH A CLIENT OF THE SAME CULTURAL BACKGROUND AS YOUR OWN, COULD YOU PLEASE ANSWER THE FOLLOWING QUESTIONS ACCORDING TO YOUR PREFERRED OR IDEAL COUNSELLING STYLE:

1. In regard to PHYSICAL SET-UP, tell me what you would consider optimally conducive to building a positive relationship with your client? For example, where would the counselling take place? at home or in an office? inside or outside? What are the seating arrangements? the decor? Why are these important?

2. How would you go about making the INITIAL CONTACT? (i.e., setting up the meeting time and place, greeting the client).

3. Given a preference, how would you go about establishing CREDIBILITY with a client? How would you build on this initial contact to gain the TRUST of your client? What factors might HINDER this and why?

4. How would you preferably go about leading up to and ISOLATING THE SPECIFIC PROBLEM or concern of the client?

5. Would you prefer, and WHY, if given the opportunity, work ALONE OR IN COLLABORATION with the client's family, and other professionals (such as Western Doctors, Community Agencies, or Chinese Herbalists).

6. In regards to VERBAL COMMUNICATION with your client, what do you think are some of the important factors to keep in mind? How might these help or hinder the counselling process and why?

7. In regards to NON-VERBAL COMMUNICATION with your client, what do you think are some of the important factors to keep in mind? How might these help or hinder the counselling process and why?

8. When working with a client from your cultural background, what do you think are some of the main cultural attitudes, values and beliefs which might impact on the initial counselling relationship?

IS THERE ANYTHING ELSE YOU WOULD LIKE TO ADD?
Appendix B

Consent Forms
CONSENT FORM

I, __________________________, agree to be interviewed by Coral Arrand, a Graduate student at The University of British Columbia, for the purposes of her Thesis on Cultural variations in the creation of the therapeutic alliance.

I understand that the interview will be taped and take approximately one hour.

All information will remain confidential, and access to the names of the interviewees and to the specific interview data will be available only to the student researcher and the University of British Columbia Faculty Thesis Supervisors. All information will be coded and the original tapes erased and transcripts destroyed so as to ensure anonymity.

______________________________  __________________________
(SIGNATURE)                    (DATE)

IF YOU WISH TO RECEIVE A TRANSCRIPT OF THE INTERVIEW AND/OR A SUMMARY OF THE FINAL RESULTS OF THE RESEARCH PROJECT FINDINGS, PLEASE PRINT YOUR NAME AND ADDRESS BELOW:

NAME: __________________________

ADDRESS: __________________________
          __________________________
          __________________________
Appendix C

Data Analysis: Topics, Categories, and Themes
DATA ANALYSIS FROM INTERVIEWS WITH EIGHT WESTERN-TRAINED CHINESE COUNSELLORS

<table>
<thead>
<tr>
<th>TOPICS</th>
<th>CATEGORIES</th>
<th>THEMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>first, second, or third generation immigration</td>
<td></td>
<td>INTER-GENERATIONAL DIFFERENCES WITHIN THE CHINESE COMMUNITY</td>
</tr>
<tr>
<td>parent-child cultural conflicts due to Western influence on expectations of family dynamics and parenting role</td>
<td></td>
<td>THE COMPLEX AND EVOLVING NATURE OF CULTURE</td>
</tr>
<tr>
<td>differences due to country of origin</td>
<td></td>
<td></td>
</tr>
<tr>
<td>differences due to urban or rural up-bringing</td>
<td></td>
<td></td>
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<tr>
<td>differences due to socio-economic status</td>
<td>WITHIN-GENERATIONAL DIFFERENCES IN THE CHINESE COMMUNITY</td>
<td></td>
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<tr>
<td>age at time of immigration</td>
<td></td>
<td></td>
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<tr>
<td>differences due to whether immigrant or refugee status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>not making assumptions regarding cultural attributes: sensitivity to individual uniqueness</td>
<td></td>
<td>RECOMMENDATIONS FOR COUNSELLORS</td>
</tr>
<tr>
<td>checking out assumptions with clients and asking client about their personal history</td>
<td></td>
<td></td>
</tr>
<tr>
<td>educating oneself on the implications of client’s cultural, social, and political history</td>
<td></td>
<td></td>
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<tr>
<td>educating oneself on client cultural beliefs and values</td>
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</tbody>
</table>
neither Western-trained Chinese counsellor or Chinese client comfortable with touching
  no hugs or handshakes unless client initiates
eye contact less in Chinese clients
Chinese client tendency to be less expressive between
exaggerated facial expressions and head nodding
smiling, leaning forward to show caring
slight bow on introduction
spatial distance: Chinese clients' preference for distance
creation of informal atmosphere through placement of table
Chinese expectation of counsellor appearance in terms of professionalism
Age: increased respect with increase in age of counsellor
Gender: higher respect for male counsellor
giving the choice to the client

Western-trained counsellors’s preference for individual focus

collaboration with client’s family on client’s perspective

right of access to counselling process

Traditional-Chinese bias of the family being the priority, not the individual

reluctance of the male head to come in

reluctance of traditional Chinese family to talk about problems to "outsiders"

counsellor’s need to be sensitive to feelings of shame; to recognize courage in coming to counselling

need for counsellor to be flexible in terms of the family system involved

WHEN TO INCLUDE THE CHINESE FAMILY IN COUNSELLING

CHINESE FAMILY EXPECTATION OF INVOLVEMENT IN COUNSELLING PROCESS

ENGAGING THE CHINESE FAMILY
<table>
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<tr>
<th>TOPICS</th>
<th>CATEGORIES</th>
<th>THEMES</th>
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</thead>
<tbody>
<tr>
<td>expectation of concrete support and practical assistance</td>
<td>TYPE OF SUPPORT EXPECTED BY TRADITIONAL CHINESE FAMILY</td>
<td></td>
</tr>
<tr>
<td>expectation of counsellor as advocate or intermediary or interpreter with other community agencies/resources</td>
<td>CHINESE FAMILY STRUCTURE AND DYNAMICS: COUNSELLING IMPLICATIONS (CONT.)</td>
<td></td>
</tr>
<tr>
<td>Western concept of differentiation, fusion and enmeshment conflicting with collective identity and interdependency of traditional Chinese families</td>
<td>TRADITIONAL CHINESE FAMILY STRUCTURES</td>
<td></td>
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<tr>
<td>recognizing family as client resource and support; while also being aware of impact of family tolerance and caring for on clients', independence and self-reliance</td>
<td></td>
<td></td>
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<tr>
<td>shifting dynamics between parents and children</td>
<td>NEED FOR AWARENESS OF THE IMPACT OF IMMIGRATION ON TRADITIONAL CHINESE FAMILY</td>
<td></td>
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<tr>
<td>power shift within immigrant families</td>
<td></td>
<td></td>
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<tr>
<td>impact of immigration on the marital relationship</td>
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<tr>
<td>TOPICS</td>
<td>CATEGORIES</td>
<td>THEMES</td>
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</tr>
<tr>
<td>conflict between cultural preference and Western training</td>
<td>professional boundaries</td>
<td>SELF-DISCLOSURE BY WESTERN TRAINED CHINESE COUNSELLOR</td>
</tr>
<tr>
<td>sharing commonalities with client to build rapport</td>
<td>gender differences</td>
<td>SELF-DISCLOSURE BY CHINESE CLIENT</td>
</tr>
<tr>
<td>need of traditional Chinese client to see the counsellor as a person, not just a professional</td>
<td>guilt and shame in talking about problems to an &quot;outsider,&quot; a &quot;stranger&quot;</td>
<td>reluctance to disclose culturally sensitive or &quot;taboo&quot; subjects</td>
</tr>
</tbody>
</table>
counsellor as "real" person not just "professional"

counsellor as a "supplement" to medical or other professional services

Chinese client expectations of counsellor being solution-focused, advice-giving

counsellor as a general advocate, generalized assistance

within-group differences in understanding of the counsellor role

placing the counsellor into familiar role context

clarifying Western-trained concept of the counsellor role

spending time on social relationship; showing interest in client as a person, not just a client
TOPICS

use of same language to build rapport/trust
client preference; client choice
language reflecting expression of concepts/meanings
client ability to discuss problem more clearly and in-depth in own language may be easier to talk about sensitive or "taboo" subjects in English

appropriate use of language by counsellor, as perceived by client
directness of the Chinese language; potential impact on communication
use of writing to supplement verbal communication
limited emotional vocabulary of the Chinese language
use of physical descriptions to describe feelings
cultural variations in abstract concepts and metaphor use

CATEGORIES

THEMES

CHOICE OF LANGUAGE USED IN COUNSELLING

VERBAL COMMUNICATION BETWEEN CHINESE CLIENT AND WESTERN-TRAINED COUNSELLOR

STYLE OF COMMUNICATION
<table>
<thead>
<tr>
<th>TOPICS</th>
<th>CATEGORIES</th>
<th>THEMES</th>
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<tr>
<td>asking questions of</td>
<td>DEMONSTRATIONS OF TRUST BY CHINESE CLIENT</td>
<td>VERBAL COMMUNICATION BETWEEN CHINESE CLIENT AND WESTERN-TRAINED COUNSELLOR (CONT.)</td>
</tr>
<tr>
<td>the counsellor</td>
<td></td>
<td></td>
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<tr>
<td>willingness to</td>
<td></td>
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<tr>
<td>talk more and to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>reveal more</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TOPICS

COUNSELLING SETTING: CULTURAL CONSIDERATIONS

HOME VISITS

advantages/disadvantages of home visits for counsellor
advantages/disadvantages of home visits for client

OFFICE VISITS

advantages/disadvantages of office visits for counsellor
advantages/disadvantages of office visits for client
physical set-up in office to create a comfortable atmosphere for Chinese clients
offering tea
<table>
<thead>
<tr>
<th>TOPICS</th>
<th>CATEGORIES</th>
<th>THEMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western-European bias towards individual choice and responsibility</td>
<td>CULTURAL CONCEPTS RELEVANT TO COUNSELLING PROCESS</td>
<td>CULTURAL DIFFERENCES IN CONCEPT OF COUNSELLING AND PSYCHOLOGICAL PROCESSES (WESTERN-TRAINED COUNSELLOR AND CHINESE CLIENT)</td>
</tr>
<tr>
<td>Individual identity (Western European) versus collective identity (traditional Asian)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>counsellor awareness of within-group differences which affect client understanding and acceptance of Western counselling</td>
<td></td>
<td></td>
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<tr>
<td>scheduling</td>
<td>CONCEPT OF TIME AS IT AFFECTS COUNSELLING</td>
<td>TRADITIONAL CHINESE CLIENTS’ EXPECTATION FOR IMMEDIATE, CONCRETE SOLUTIONS TO PROBLEMS</td>
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<tr>
<td>arriving on time</td>
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<tr>
<td>outcome orientation of traditional Chinese client versus process orientation of Western counselling</td>
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<tr>
<td>counselling seen as &quot;last resort&quot; for traditional Chinese clients</td>
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<tr>
<td>courage needed to come to talk to &quot;stranger&quot; about problems</td>
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outreach to Chinese community

changes in attitudes within Chinese community regarding counselling services

working in collaboration with other professionals and community resources

increased recognition in Western counselling for the need for culturally "matched" or culturally "sensitive" counsellors

fee charging

CULTURAL DIFFERENCES IN CONCEPT OF COUNSELLING AND COUNSELLING PROCESSES (CONT.)
TOPICS
repercussions to accepting Chinese clients' preference for direction and advice
ask leading questions or "stimulating" questions
need to do something "concrete" in the first two or three sessions or may possibly lose client
move gradually, slowly to core issues ("pacing")
awareness of within-group differences in traditional Chinese clients' acceptance of non-directive counselling style (i.e., education, exposure to Western culture)
"informal" rapport building so client can see counsellor as "real" person
ask about client as a person, not just a client (i.e., immigration status personal history)
sharing commonalities of social/personal history
less formal information gathering
sensitivity to culturally sensitive topics

CATEGORIES

THEMES

STRATEGIC RECOMMENDATIONS FOR WESTERN-TRAINED COUNSELLORS

EXPERIENCES OF BLENDING WESTERN COUNSELLOR TRAINING WITH TRADITIONAL CHINESE CLIENT EXPECTATIONS

ESTABLISHING TRUST WITH TRADITIONAL CHINESE CLIENTS
same language helpful

giving client time to adjust and feel comfortable in the counselling setting; initial joining is longer

greet clients personally

sensitivity to Chinese client's shame and guilt in talking about problems to a "stranger"

receptionist needs to "read between the lines" of Chinese clients' initial message, problem statement

EXPERIENCES OF BLENDING WESTERN COUNSELLOR TRAINING WITH TRADITIONAL CHINESE CLIENTS EXPECTATIONS (CONT.)
Appendix D

Correspondence with Interview Participants
Dear

I was in attendance at the Greater Vancouver Mental Health Workshop on March 23, and had the opportunity there of hearing you speak on the issue of multiculturalism and Mental Health. I found your speech, and the workshop content in general, very informative and also relevant to my focus of Graduate study.

I am a Masters student in Counselling Psychology at The University of British Columbia. The title of my thesis project is CULTURAL FACTORS WHICH MAY SUGGEST ALTERNATIVES TO THE WESTERN-TRAINED COUNSELLOR’S APPROACH TO INITIAL RELATIONSHIP BUILDING WITH CLIENTS. The purpose of the study is to explore alternatives that may allow counsellors to be more culturally sensitive when working in a cross-cultural counselling situation. In a world that is becoming increasingly multicultural, counsellors/therapists may have to change the idea of therapy as conceived of and institutionalized in Western Canada, and embrace additional styles of intervention. The therapeutic relationship, specifically, may have to be redefined to resemble the client’s own culture. By learning, therefore, about alternative approaches to the traditional Western approach to relationship building, the counsellor/therapist may be better able to adjust his/her style to meet the needs of the client.

It is important to stress that an attempt to delineate group characteristics between cultures does NOT override the need for determining individual differences. However, each individual’s unique situation and perspective can be understood only when viewed within the context of his/her own culture. We hope that
Appendix E

The Multiculturalism Policy of Canada
The Multiculturalism Policy of Canada

Whereas the Constitution of Canada provides that every individual is equal before and under the law and has the right to the equal protection and benefit of the law without discrimination and that everyone has the freedom of conscience, religion, thought, belief, opinion, expression, peaceful assembly and association and guarantees those rights and freedoms equally to male and female persons;

And whereas the Constitution of Canada recognizes the importance of preserving and enhancing the multicultural heritage of Canadians;

And whereas the Constitution of Canada recognizes rights of the aboriginal peoples of Canada;

And whereas the Constitution of Canada and the Official Languages Act provide that English and French are the official languages of Canada and neither abrogates or derogates from any rights or privileges acquired or enjoyed with respect to any other language;

And whereas the Citizenship Act provides that all Canadians, whether by birth or by choice, enjoy equal status, are entitled to the same rights, powers and privileges and are subject to the same obligations, duties and liabilities;

And whereas the Canadian Human Rights Act provides that
every individual should have an equal opportunity with other individuals to make the life that the individual is able and wishes to have, consistent with the duties and obligations of that individual as a member of society, and, in order to secure that opportunity, establishes the Canadian Human Rights Commission to redress any proscribed discrimination, including
discrimination on the basis of race, national or ethnic origin or colour;

And whereas Canada is a party to the International Convention on the Elimination of All Forms of Racial Discrimination, which Convention recognizes that all human beings are equal before the law and entitled to equal protection of the law against any discrimination and against any incitement to discrimination, and to the International Covenant on Civil and Political Rights, which Covenant provides that persons belonging to ethnic, religious or linguistic minorities shall not be denied the right to enjoy their own culture, to profess and practise their own religion or to use their own language;

And whereas the Government of Canada recognizes the diversity of Canadians as regards race, national or ethnic origin, colour, or religion as a fundamental characteristic of Canadian society and is committed to a policy of multiculturalism designed to preserve and enhance the multicultural heritage of Canadians while working to achieve the equality of all Canadians in the economic, social, cultural and political life of Canada;
1) It is hereby declared to be the policy of the Government of Canada to:

a) recognize and promote the understanding that multiculturalism reflects the cultural and racial diversity of Canadian society and acknowledges the freedom of all members of Canadian society to preserve, enhance and share their cultural heritage;

b) recognize and promote the understanding that multiculturalism is a fundamental characteristic of the Canadian heritage and identity and that it provides an invaluable resource in the shaping of Canada's future;

c) promote the full and equitable participation of individuals and communities of all origins in the continuing evolution and shaping of all aspects of Canadian society and assist them in the elimination of any barrier to such participation;

d) recognize the existence of communities whose members share a common origin and their historic contribution to Canadian society, and enhance their development;

e) ensure that all individuals receive equal treatment and equal protection under the law, while respecting and valuing their diversity;

f) encourage and assist the social, cultural, economic and political institutions of Canada to be both respectful and inclusive of Canada's multicultural character;

g) promote the understanding and creativity that arise from the
interaction between individuals and communities of different origins;
h) foster the recognition that appreciation of the diverse cultures of Canadian society and promote the reflection and the evolving expressions of those cultures;
i) preserve and enhance the use of languages other than English and French, while strengthening the status and use of the official languages of Canada; and
j) advance multiculturalism throughout Canada in harmony with the national commitment to the official languages of Canada.

2) It is further declared to be the policy of the Government of Canada that all federal institutions shall:

a) ensure that Canadians of all origins have an equal opportunity to obtain employment and advancement in those institutions;
b) promote policies, programs and practices that enhance the ability of individuals and communities of all origins to contribute to the continuing evolution of Canada;
c) promote policies, programs and practices that enhance the understanding of and respect for the diversity of the members of Canadian society;
d) collect statistical data in order to enable the development of policies, programs and practices that are sensitive and responsive to the multicultural reality of Canada;
e) make use, as appropriate, of the language skills and cultural understanding of individuals of all origins; and

f) generally, carry on their activities in a manner that is sensitive and responsive to the multicultural reality of Canada.

(Excerpts from the Canadian Multiculturalism Act, in Berdichewsky, B., 1988, p. 27-30).
Appendix F

Background Information on the Interview Participants
INTERVIEW PARTICIPANT #1

SEX: female
AGE: between 40 and 50 years of age
PLACE OF BIRTH: Hong Kong. Immigrated to Canada at age seventeen.
LANGUAGES SPOKEN: Cantonese, Mandarin, and English
TRAINING: M.A. in Educational counselling (Washington State University)
RELATED PROFESSIONAL EXPERIENCE: community worker with the Downtown Women's Centre; Counsellor with S.U.C.C.E.S.S.; counsellor with Family and children in Hong Kong; adult primary therapist, senior mental health worker, and acting director with one of the Greater Vancouver Mental Health Services Care Teams.
CULTURAL IDENTITY: thinks of herself as a "marginal person," in that she can "pretty much jump into one side or the other, is very aware of Western values that she "treasures" and has "integrated into the Chinese part of me." Has always been interested in people who are culturally different (i.e., has had international pen-pals, was on the international committee at University.)
INTERVIEW PARTICIPANT #2

SEX: Female
AGE: between 30 and 40 years of age
LANGUAGES: Cantonese, Mandarin, and English
PLACE OF BIRTH: Hong Kong. Immigrated in 1978 to Canada.
TRAINING: Bachelor of Social Work from Simon Fraser University, Diploma in Educational Psychology from the University of Calgary, and Master of Social Work from the University Hong Kong.
RELATED PROFESSIONAL EXPERIENCE: Multicultural worker at the Calgary Cultural Centre, Psychiatric Social Worker (in Hong Kong and in Vancouver, Multicultural Mental Health Liaison with Greater Vancouver Mental Health Services.
CULTURAL IDENTITY: She feels that Chinese culture is an important everyday part of life, both professionally and personally. as is Canadian culture.
INTERVIEW PARTICIPANT #3

SEX: Male

AGE: Between 30 and 40 years of age

PLACE OF BIRTH: Hong Kong. Immigrated to Canada in 1991.

LANGUAGES SPOKEN: Cantonese, Mandarin, and English

TRAINING: Bachelor of Arts from the University of Hong Kong,
Master of Social Work from the University of British Columbia.

RELATED PROFESSIONAL EXPERIENCE: Student counsellor with the Politec University in Hong Kong, Director of Program Services for S.U.C.C.E.S.S. Family and Youth
Counselling Services (includes clinical case-load, liaison with Chinese community, supervision of the Family and Youth counsellors, education and coordination and consultation with community agencies and the Ministry, and cross-cultural training for agencies working with Chinese families).

CULTURAL IDENTITY: Family life is very involved with the Chinese culture (seniors living at home, speaks Cantonese at home), most of friends are Chinese.
INTERVIEW PARTICIPANT #4

SEX: Female
AGE: between 40 and 50
PLACE OF BIRTH: Hong Kong, Immigrated to Canada in 1988.
LANGUAGES SPOKEN: Cantonese, Mandarin and English
TRAINING: Bachelor of Social Sciences in Psychology at the University of Hong Kong, Master of Educational Guidance and Counselling at the University of Toronto (Oisie), and training in Family Therapy with the Pacific Coast Family Therapy Association.
RELATED PROFESSIONAL EXPERIENCE: Case Worker in Hong Kong, Family and Youth counsellor and Supervisor for Family Counsellors, taught Social Work at the University of Hong Kong (City Polytechnic), Program Director of the Family and Youth counselling department of S.U.C.C.E.S.S., Family Counsellor with Vancouver Family Services.
INTERVIEW PARTICIPANT #5

SEX: Female
AGE: between 30 and 40
PLACE OF BIRTH: Hong Kong
LANGUAGES SPOKEN: Cantonese, Mandarin, and English
TRAINING: Bachelor of Arts in Psychology at the University of Illinois, Masters in Counselling and in Family Studies at Arizona State University.
RELATED PROFESSIONAL EXPERIENCE: Counsellor in mental health setting in Seattle (working exclusively with Chinese clients), mental health worker with the Greater Vancouver Mental Health Services.
CULTURAL IDENTITY: the Chinese culture is a very important part her life, speaks Cantonese at home, volunteer in the Chinese Church, most of her friends are Chinese.
INTERVIEW PARTICIPANT #6

SEX: Male
AGE: between 40 and 50
PLACE OF BIRTH: Hong Kong, immigrated to Canada in 1988
LANGUAGES SPOKEN: Cantonese, Mandarin, and English
TRAINING: Master of Arts in Counselling Psychology, and Master of Social Work from the University of Hong Kong.
RELATED PROFESSIONAL EXPERIENCE: Child Welfare Officer, Probation Officer, taught Social Work at University, Mental Health counsellor with the Health Department (Mental Health Centre) primarily with children and families.

CULTURAL IDENTITY: feels his professional life is "fifty percent Chinese and fifty percent Canadian", and his personal life is "seventy-five percent Chinese."
INTERVIEW PARTICIPANT #7

SEX: Male
AGE: between 50 and 60
PLACE OF BIRTH: Hong Kong, lived in China from 1942 - 1945, immigrated to Canada 1988
LANGUAGES SPOKEN: Cantonese, Mandarin, Toisan, and English
TRAINING: English Boarding School in Hong Kong, College (Engineer) in Taiwan, School of Theology in the Philippines, Master of Theology from Hong Kong, Master of Social Work from Michigan
RELATED PROFESSIONAL EXPERIENCE: Parish Priest, Chaplaincy at the University (counselling University students), taught Social Work at the University of Hong Kong, therapist with New Westminster Family Services.
CULTURAL IDENTITY: very rapid social change within one generation of his family (grandparents and parents are very traditional. His education was primarily in English, worked within the Anglican Church, he says he still counts in Chinese. His current work is the first time he has worked with non-Chinese clients.
INTERVIEW PARTICIPANT #8

SEX: Male
AGE: between 30 and 40
PLACE OF BIRTH: Hong Kong
LANGUAGES SPOKEN: Cantonese, Mandarin, and English
TRAINING: Bachelor of Arts in Religious Studies, Bachelor of Social Work (both from University in Ontario)
RELATED PROFESSIONAL EXPERIENCE: currently working as an advocate and counsellor for Chinese clients with MOSAIC, Multicultural Services Society in Vancouver.