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Eching Ho

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The Effect of Acculturation on Parental Perception of
Child Psychological Assessment among Chinese Americans

APPROVED BY SUPERVISING COMMITTEE:

Supervisor:	
	Deborah J. Tharinger
	Stenhanie W. Cawthon

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by

Eching Ho, B.S.S.

Report

Presented to the Faculty of the Graduate School of
The University of Texas at Austin
in Partial Fulfillment
of the Requirements
for the Degree of

Master of Arts

The University of Texas at Austin
December 2010

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Eching Ho, M.A.

The University of Texas at Austin, 2010

Supervisor: Deborah J. Tharinger

Psychological assessment has a long history to be used for diagnostic purposes for all ages. This traditional model of assessment has been common for decades, but has not emphasized some important aspects of best practice (Brenner, 2003). To address the limitations of the information gathering model of assessment, collaborative and therapeutic approaches to assessment have been developed over the past several decades (e.g. Finn & Thonsager, 1997; Fischer, 1970). Therapeutic Assessment (TA) emphasizes the opportunity to provide positive changes in the client and their system by involving the client throughout the assessment process, and establishing a meaningful and collaborative relationship between assessor and client (Finn, 2007). The TA has been found to produce many positive impacts on client's assessment experiences in mainstream American culture. It is important to note how these positive impacts transfer to clients of different cultures. Thus the purpose of this study will be to investigate the effect of acculturation on Asian American parents' perception of existing models of child assessment. This study will examine the relations between acculturation and perception of assessment models (information gathering model versus Therapeutic Assessment) among Chinese American parents.

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CHAPTER ONE: INTRODUCTION

To address the limitations of the information gathering model of assessment, collaborative and therapeutic approaches to assessment have been developed over the past several decades (e.g. Finn & Thonsager, 1997; Fischer, 1970). Therapeutic Assessment (TA) holds that psychological assessment can produce benefits beyond collecting information and decision making purposes. It emphasizes the opportunity to provide positive changes in the client and their system by involving the client throughout the assessment process, and establishing a meaningful and collaborative relationship between assessor and client (Finn, 2007). Clients are encouraged to engage collaboratively with assessors throughout the assessment process. They guide the focus of assessment through co-constructing the assessment questions and providing input for the interpretation of test results. Clients also are supported to integrate assessment findings, and generate new and meaningful ideas about problems in living (Finn, 2007).

Research on TA has shown to have many positive impacts to clients. Adult and adolescent clients are found to possess greater self-knowledge and an increased sense of self-efficacy (Finn & Thonsager, 1997), as well as stronger therapeutic alliance and engagement in later psychotherapy after the assessment has been completed (Ackerman, Hilsenroth, Baity, & Blagys, 2000). Positive outcomesincluding higher treatment acceptability, significantly decreased child symptomatology, and enhanced family functioning are also reported upon finishing therapeutic assessment with children and their families (Tharinger, et al., 2009). In sum, the TA has been developed to make psychological assessment a positive and

meaningful experience for clients and has been shown to be psychologically beneficial to clients.

The TA has been found to produce many positive impacts on client's assessment experiences in mainstream American culture. It is important to note how these positive impacts transfer to clients of different cultures. Studies suggest that ethnicity and culture greatly influence individuals' perceptions of mental health, and experiences and attitudes toward using psychological services (e.g., Sue & Sue, 1987; Yeh, Eastman, & Cheung, 1994).

For instance, Asian Americans demonstrate a pattern of psychological services utilization rate significantly lower than what would be expected given the population proportion (Bui & Takeuchi, 1992; Sue, Sue, Sue, Sue, Takeuchi, & Zane, 1991). One of the reasons purposed for the underutilization is that there is limited culturally appropriate psychological services for Asian Americans adults (Yang & WonPat-Borja, 2006). Furthermore, there is no prior research examining the role of culture on one's perception of psychological assessment. Therefore, it is necessary to investigate how Asian American parents perceive the existing models of psychological assessments.

In general, many Asian cultures consider the display of emotion or psychological concern as a significant weakness and feel that this would bring shame to one's family (Sue & Sue, 2008). In addition, it has been found that they expect the therapist to play the role of a teacher or expert (Ma, 2000). These characteristics of Asian culture values impact the experience towards psychological assessment among Asians. As introduced above, TA involves substantial collaboration between client and assessor. Clients' input is essential and valued throughout the assessment process. However, the collaborative and self-disclosing

nature of the TA model might not necessarily fit with Asian American families with traditional Asian values. Thus, Asian Americans may tend to self-conceal emotional concerns and may find the collaborative nature of TA less favorable than traditional assessment that poses a more directive and expert approach.

Acculturation status is one important indicator of the degree to which children and their families adhere to more traditional Asian value systems, as opposed to more Western value systems (Leong, Levy, Gee, & Johnson, 2007). Previous research has examined the role of acculturation in openness to seeking professional psychological help among Asian Americans. For example, one study has suggested that less acculturated individuals will hold more negative help-seeking attitudes and the degree of acculturation may influence one's attitudes towards mental health help-seeking (Tata & Leong, 1994).

Much has been written about the role of acculturation on help-seeking attitudes and behaviors, and it is interesting to see how it might influence one's perception for psychological assessment process. If a relation exists between acculturation of Asian Americans and their perception on the existing child psychological assessment models, it would be necessary to pay attention to the level of acculturation of Asian American clients before doing child psychological assessment.

Thus the purpose of this study will be to investigate the effect of acculturation on Asian American parents' perception of existing models of child assessment. This study will examine the relations between acculturation and perception of assessment models (information gathering model versus Therapeutic Assessment) among Chinese American parents. Specifically, the study will explore whether acculturation plays a role in Chinese American parents' perception of

assessment with or without therapeutic components. It is ultimately important for mental health profession to understand how acculturation might affect one's perception of psychological assessment. Through revealing the role of acculturation plays in Asian American's perception on assessment models, mental health professionals could modify the TA-C or the information gathering model, or combine both models to create the best fit for Asian Americans according to their level of acculturation, in order to ensure positive experiences during the assessment process.

CHAPTER TWO: INTEGRATIVE ANALYSIS

Overview

Psychological assessment has been commonly used for diagnostic purpose across all ages. Yet, there is limited research focus on the appropriateness of existing psychological services for ethnic minority, in particular for children and their families. The aim of this study is to examine Asian Americans' perception of current models of child psychological assessment, namely the information gathering model and the Therapeutic Assessment with children (TA-C) model. It is important to ultimately be able to modify the current models of assessment or combine the two to match with the cultural needs of Asian Americans. The major components of these two models of child assessment will be reviewed, followed by a detailed discussion of how the assessment process of TA-C differs from the traditional model of assessment. Research on TA-C and its limitation will then be presented. Given the possible limitations of TA-C in applying to Asian culture, some of the major Asian culture values and their implications on psychological services are also examined. Finally, theory of acculturation as a variable that may influence Asian Americans' perceptions of psychological services will be explored.

Psychological Assessment of Children

Currently, the psychological assessment of children is commonly used to address cognitive/intellectual, academic, behavioral, social and/or emotional concerns, as well as to provide diagnostic formulation and recommendations for

educational and/or psychosocial interventions. A comprehensive psychological assessment of children typically includes interviewing the child, parents and teachers, reviewing records and relevant information, testing the child, aggregating and integrating information, preparing the report and providing feedback to the parents, the child and the referral source (Smith & Handler, 2007).

The clinical practice of assessment with children is different from that with adolescents and adults. There are unique challenges in the assessment of children (Smith & Handler, 2007). Children are less able to comprehend and verbalize their feelings and experiences. It is rather difficult to use traditional interviews in the assessment process. Thus, choosing appropriate testing and/or activities are crucial in working with children and their families.

Information Gathering Model of Assessment

The practice of psychological assessment has been grounded in the natural science perspective of the mental health professions(Fischer, 1970; Fischer, 1972). It emphasizes the use of techniques and protocols to collect "accurate" data (Finn & Thonsager, 1997). Traditionally, the goal of assessment is to describe and diagnose individuals accurately in order to facilitate communication between professionals and to make decisions about clients. Finn and Tonsager (1997) have called this the "information gathering" model of assessment. In order to collect "accurate" data, objectivity of the testing must be maintained. Within this information gathering model, the assessor typically follows the standardized testing protocols, interprets norm-based data, and derives a valid conceptualization of the client. Through this process, the assessor completes the assessment with little collaboration with the

client. Feedback is relatively test-oriented and "unilaterally presented" (Fischer & Finn, 2008). The assessment report is typically written test-by-test on different constructs in conceptual terms that may not make sense to people other than psychological professionals. In summary, the focus of the information gathering model of assessment is on the test scores and the decisions to be made based on the scores in order to ameliorate the referral problems. The role of assessor is to be an objective expert who should have minimal influence on the data collected, to ensure its accuracy.

Fischer's Model of Collaborative Assessment

Over the last several decades, psychologists have started shifting the psychological assessment model from a traditional natural science perspective to a human science paradigm, thus promoting a more collaborative and individualized approach to assessment (Fischer, 1970; Fischer, 1972). This collaborative approach highlights the collaboration between the assessor and client to reconstruct meaningful understanding during the assessment process. In this approach, the clients' life experiences are considered as the primary data (Fischer, 2000). In other word, clients and their families themselves are the experts of their life experiences, while the assessors are experts on psychology and the assessment tools. Thus, the assessor and the client must collaborate to make sense of the client's life and challenges and develop individualized intervention plan that works best. In this model, the value of testing is not necessarily to examine test scores with appropriate norms; instead testing is a tool to be used with the clients in order to explore their life and challenges. The assessment report is individualized and is written in an

accessible language. In summary, the focus of collaborative assessment is on the collaborative process and to help clients to better understand their life and challenges in their own context. The role of assessor is to be a facilitator to promote engagement of clients throughout the assessment process.

Finn's Model of Therapeutic Assessment

According to Finn (2007), collaborative assessment can be loosely structured or semi-structured. Therapeutic Assessment (TA) is the semi-structured collaborative assessment approach developed by Finn and colleagues (Finn, 2007; Finn & Thonsager, 1997). It is based on the belief that the goal of psychological assessment goes beyond making accurate diagnostic classification of clients for decision making, it also strives for therapeutic change (Finn & Kamphuis, 2006). In contrast with the information gathering model, clients are regarded as collaborators whose input is valued throughout the assessment process. Assessors are viewed as "participant-observers" who actively shape the assessment process to provide a safe environment and opportunity for the client to explore their own life and experience positive change (Finn & Kamphuis, 2006; Finn & Thonsager, 1997). In this model, clients are encouraged to engage collaboratively throughout the assessment process, including setting the focus of the assessment by formulating their own assessment questions of interest, and providing input for accurate interpretation of results.

Different from collaborative assessment, the TA's ultimate emphasis is to help clients directly by leaving client positively changed at the end of an assessment (Tharinger, Krumholz, Austin, & Matson, in press). Specifically, clients are supported

to reconstruct a "new" story by connecting assessment findings with their own life in a meaningful and concrete way. This is achieved by the ongoing productive dialogues between the client and assessor and by providing hands-on experiences to try out possible steps to ameliorate life challenges.

Research on Therapeutic Assessment

Therapeutic Assessment, although is a relatively new model of psychological assessment, there is a growing body of literature showing that the TA is an effective hybrid of psychological assessment and brief intervention. Clinical reports, single case studies have suggested the efficacy of Therapeutic Assessment with adults and adolescents (Finn & Kamphuis, 2006; Newman & Greenway, 1997). Further, a study has compared traditional and therapeutic assessment among adults. Findings suggested that adults who received the therapeutic assessment experienced a stronger alliance with their assessors and were also less likely to drop out from treatment again medical advice than those who received the traditional assessment.

Other than studies assessing the efficacy of the TA with adults and adolescents, there are also findings suggesting the efficacy of the TA-C with children and their families. Particularly, a study was conducted to study the efficacy of the TA-C with 14 children and their parents in a university clinic setting. It found that both children and their mother reported positive outcomes, including higher treatment acceptability, decreased child and parental symptomatology and better family functioning after participating in the TA (Tharinger, et al., 2009). Furthermore, mothers reported a significant increase in positive and decreased in negative emotions toward their child.

In addition, different techniques used in the TA-C were also investigated for their potential positive impact both the child being assessed and also the systems in which they are embedded. For instance, collaborative approach to translate assessment findings through both feedback session and individualized fable and parent letter is found to be promising for providing assessment process that is more engaging and authentic (Tharinger, Finn, Wilkinson, et al., 2008). Providing meaningful feedback is also able to enhance the likelihood of following through the recommendations provided.

Therapeutic Assessment with Children (TA-C)

The TA-C model is guided by the same underlying principles of the TA, but the clinical protocol has been modified to use with children and their families. The goal of the TA-C is "to help parents understand their child in new ways, become more empathic towards their child, and shift their interaction with their child to foster positive development in the child and the family" (Tharinger, et al., in press).

THE ASSESSMENT PROCESS OF THE TA-C. In the TA-C model, there are six major steps of the therapeutic assessment process (Tharinger, et al., in press). In brief, the six steps include: 1) the assessment question gathering phase, where the assessor helps the parents and the child to formulate their own assessment questions of interest; 2) the standardized testing phase, where the child is tested while the parents are invited to observe and discuss the on-going testing session with another assessor; 3) the family intervention phase, in which the child and the parents are guided to engage in family activities that aims to test out the typical and new ways of interacting with each other; 4) the summary/discussion phase, in

which the assessor meets with the parents to share and discuss the assessment findings collaboratively to ensure the "fit" of interpretation of the results, and then the child is presented with verbal and written feedback, with the parents present; 5) the written communication phase, where individualized written feedback is presented to the parents. Below, the assessment process of TA-C is described in more detail, with contrast to traditional child assessment (See Figure 1).

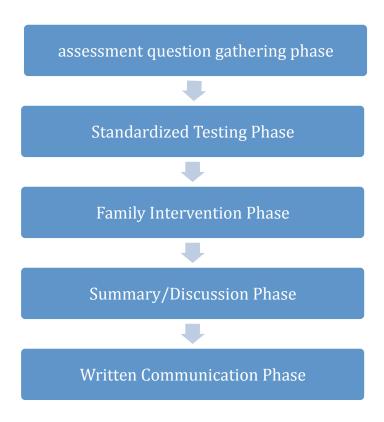


Figure 1: Flow Chart of the Assessment Process of the TA-C

The Assessment Process: Comparing the TA-C Model with the Information Gathering Model of Child Assessment

THE INTRODUCTORY PHASE OF THE TA-C MODEL: GATHERING ASSESSMENT QUESTIONS. The TA-C begins by inviting parents to co-construct individualized assessment questions of interest and collecting relevant background information in the context for each assessment questions raised. The assessor actively helps the parents to understand the purpose of gathering assessment questions and also facilitates them to translate their concerns into assessment questions to be answered. These assessment questions are helpful to create a clear expectation of the focus of assessment for both the parents and assessor. Many parents feel better when they put their life challenges into words and thus feel less anxious to know that those problems will be addressed (Finn, 2007). This promotes the curiosity and engagement of the parents throughout the process. The assessment questions are also useful for the assessor to choose appropriate test and activities that could help answer assessment questions best, rather than administering a standard battery. This enhances the value of assessment and provides a more useful product for the clients (Brenner, 2003).

The parents also are couched by the assessor to prepare for introducing their child into the assessment. They are asked to share one or two of their own assessment questions. The child is also encouraged to generate his or her own

assessment questions at any time during the assessment. An addition session is usually scheduled for more background information and family history.

THE INTRODUCTORY PHASE OF THE INFORMATION GATHERING MODEL: GATHERING BACKGROUND INFORMATION. In the information gathering model of assessment, a clinical parent interview is conducted to obtain necessary background information, for example development history, medical history, current challenges and functioning, family system function and extrafamilial system functioning (Winters & Pumariega, 2007). The focus of assessment is typically the referral concerns from the referring sources. Common referral concerns include academic and/or behavioral functioning from schools or teachers, emotional concerns from parents and so forth. The referral concern is usually vague and broad. Unlike the TA-C, parents are less involved in the assessment process. They are typically responsible for bringing in the child and have less interaction with the assessors. Further, there is no gathering of assessment question from the parents or the child in information gathering model of assessment.

THE TESTING PHASE OF THE TA-C MODEL: PARENTS OBSERVING TESTING SESSIONS. During testing sessions of the TA-C, parents are accompanied by another assessor to observe in an observation room behind a one-way mirror or in an adjacent room with a live video feed. The child is aware that his or her parents will be observing for the testing process. During the observation, the assessor invites parents to discuss their reactions to the way they perceive their child. The assessor also responds to the parents' questions if any. This process does not only help parents to understand the information their child is providing through the tests and probably discover answers to their questions, but also potentially informs the assessor about parental readiness for change and feedback (Finn & Thonsager,

1997; Tharinger, Finn, Wilkinson, & Schaber, 2007). In addition, assessor may suggest parents to be tested as part of their child's evaluation, if the assessor believes that the information gathering from parental testing would help parents to better understand their child and answer their assessment questions (Finn, 2007).

THE TESTING PHASE OF THE INFORMATION GATHERING MODEL: STANDARDIZED TESTING SESSIONS. In the information gathering model of assessment, a set of standardized test batteries are generally used to collect data to address particular referral concern(s) from the referring party and also to inform the decision to be made after the assessment. During the testing sessions, parents are asked to wait in a waiting room, while the child works with assessor individually. The assessor typically has little contact with the parents during the testing phase. On the other hand, the assessor generally maintain a distant relationship with the child in order to uphold a standardized environment for stability, reliability and validity of the test results (Finn & Thonsager, 1997).

THE FAMILY INTERVENTION SESSION OF THE TA-C MODEL. In the TA-C model, family intervention session is usually planned and included upon the completion of the testing sessions. The family session is carefully planned to is to allow the assessor better understand the child and test results in a family context, actively test out family influences on the child's behaviors, try out possible intervention options and provide the family a positive experience of being together (Tharinger, Finn, Austin, et al., 2008). In a family intervention session, the child and his or her parents are invited to work together to achieve some tasks in a supportive environment that guided by the assessor. Semistructured play, family drawing, and consensus TAT are some of the many methods for use in family sessions.

In the traditional model of assessment, feedback is usually given to parents and/or child following the completion of the testing sessions. In this model, parental involvement is less expected throughout the assessment process and there is no particular session dedicated to family intervention.

THE FEEDBACK PHASE OF THE TA-C MODEL: PARENT FEEDBACK. In summary and discussion session of the TA, each of the parents' assessment questions which posed at the beginning of the assessment is addressed. The assessor begins the feedback with findings that are most congruent with or verify parents' typical perception of their child and family (Level 1 finding), followed by findings that modify or amplify client's existing ways of thinking about their child and family (Level 2 finding). Lastly, the findings that conflict with the parents' typical understanding of their child and family are presented (Level 3 finding) (Tharinger, Finn, Hersh, et al., 2008). During this process, the assessor pays close attention to help the parents to provide input, to get the sense of "fit" and to change their existing "stories" about their child and family (Finn, 2007). This is achieved by engaging the parents and actively asking them to agree, disagree, modify and/or giving real-world examples of interpretations of the assessment findings. Parents' input is highly encouraged and valued for the close fit of the assessment findings to parents' own experience of their child and family. Recommendations are also introduced in the process of giving feedback and answering parents' assessment questions.

Other than oral feedback, some form of written feedback is also presented to the parents. In the TA-C model, a tailored letter using first person and everyday language is usually written to summarize the assessment findings for the parents. The findings are organized by assessment questions and presented in the same order as during the oral feedback session. This parents' letter helps to provide a more useful and comprehensive written feedback for future reference. Technical report may also be prepared if necessary.

THE FEEDBACK PHASE OF THE INFORMATION GATHERING MODEL: PARENT FEEDBACK. In information gathering model of assessment, oral feedback to parents is organized by constructs being tested. The assessment findings is typically unilaterally presented (Fischer & Finn, 2008). Unlike the TA-C model, assessor rarely discusses the results with the parents during the testing process, rather the assessor provides a summary of the testing results in the feedback session. During the process, the assessor is usually viewed as the expert of the assessment findings and parental input is not expected. Written feedback is usually directed to the referring professional as a technical report for decision making and treatment planning purposes.

THE FEEDBACK PHASE OF THE TA-C MODEL: CHILD FEEDBACK. Historically, assessment finding is not shared to the child, with the belief that finding is too complex to understand or even threatening to the child (Brenner, 2003). In the TA-C, however, it is believed that child feedback is essential to facilitate transformative change of the child. Since it is overwhelming for the child to take in and process assessment finding that is presented in a direct manner, therapeutic assessor delivers child feedback by using individualized and metaphorical fable that is tailored to the emotional readiness of the child. Using the fables can assist the children to reconstruct new "story" about themselves and their families, as well as to help them to feel understood and validated (Tharinger, Finn, Wilkinson, et al., 2008). Parents are invited to be with the child during the child feedback session. The child is invited to choose who will read the fable. After the fable has been read,

the child is invited to revise the fables if he or she wants to. The fable is given to the child as a form of written feedback, as such, the child can read it as many times as he or she wishes and this helps internalizing the new "story".

THE FEEDBACK PHASE OF THE INFORMATION GATHERING MODEL: CHILD FEEDBACK. In the gathering information model of assessment, assessor typically presents the assessment finding in age-appropriate language, with minimal child and parents involvement. During the feedback, parents usually wait in the waiting room, while the child works with the assessor individually. Written feedback is typically not prepared for the child.

Limitations of Research on Therapeutic Assessment

Research supports that the TA-C is a beneficial and probably efficacious child and family psychological intervention. Yet, there is no research investigating its generalizability to populations of different cultures. Collaboration and parental input is highly emphasized and is regarded as essential in promoting the transformative changes as the ultimate goal of the TA. However, parents from a different culture may not value the collaborative construct of psychological assessment as much. In other words, there might be certain characteristic of clients from a different culture that value or prefer a more "expert –directed", straight forward and solution-focused model of assessment or the information gathering model. Therefore, it is necessary to explore the effect of culture on one's perception of psychological assessment.

The Diverse Population of Asian Americans

Asian American as a whole is one of the fastest growing ethnic group in the United States for the last two decades (U.S. Census Bureau, 2001). Asian Americans although is commonly seen as a single group, is actually a very diverse ethnic group. Among the Asian Americans, Chinese Americans are the largest Asian American ethnic group, making up 22.6% of the total Asian Americans population (U.S. Census Bureau, 2000). Therefore, this paper will be focus on Chinese Americans as a sample of Asian Americans.

Use of Psychological Services among the Asian Americans

In general, Asian Americans demonstrate a pattern of psychological services underutilization. Many services utilization studies have been conducted to compare psychological service use among Asian Americans with that of European Americans (e.g. Matsuoka, Breaux, & Ryujin, 1997; Snowden & Cheung, 1990; Virnig, et al., 2004). Findings consistently showed that the use of inpatient and outpatient psychological services among Asian Americans adults and youths is significantly lower than what might be expected given the population proportion (Bui & Takeuchi, 1992; Sue, et al., 1991). The underutilization of psychological services appears to indicate that there is a reluctance to use psychological services. One of the reasons purposed for the underutilization is that there is limited culturally appropriate psychological services for Asian Americans adults (Yang & WonPat-Borja, 2006).

Despite the fast growing population of Asian Americans, there is not sufficient study examined the appropriateness of existing psychological services for Asian Americans, particularly with children and their families. Therefore, it is necessary to investigate the appropriateness of existing model of psychological assessments for Asian American children and their families.

Traditional Asian Cultural Values and their Implications for Psychological Services

The question of how psychology as a product of individualistic cultures is applied to people from a collectivistic culture has always been a topic in the applied psychology. Researchers have provided insights for practitioners into working with Asian Americans in clinical setting based on their specific ethnic identity and culture in the last several decades. But, there is less focus on the influence of traditional Asian cultural values on psychological services process and outcome with Asian Americans (Leong, Chang, & Lee, 2007). The following discussion of Asian culture as a whole does not intend to ignore the differences between Asian ethnic groups, but instead to examine some important Asian cultural values that might be related to or even affect their perception of psychological assessment.

THE IMPORTANCE OF FAMILY. Asian individuals tends to hold a family and group orientation (Sue & Sue, 2008). They place the welfare of the group before their own interest. Interdependence is an important family value. Spending time with others is preferable to spending time by oneself. Since family is the basic unit of society, close bonding between family members is emphasized and to maintain family reputation and harmonious relationships are two primary concerns (Tseng,

Chang, & Nishizono, 2005). As family reputation is important, individuals is actively avoiding family shame. Manifesting mental health problems and seeking mental health profession, however, are viewed as a sign of weakness and can disgrace a family (Kim, Atkinson, & Umemoto, 2001). Asian American adolescents appear to hold on to the responsibility to assist and support their family even after exposing to a culture emphasizing autonomy and independence (Fuligni, et al., 1999).

IMPLICATIONS. The importance of family in Asian culture suggests that it is important to understand clients in the family context. Research has suggested the positive impact of using family system approach to assessment when working with Asian Americans clients by including their family in the assessment and treatment process (Kinoshita & Hsu, 2007). In general, the TA-C is a model of child assessment that values collaboration between assessor, child, parents, as well as other significant family members. Thus, TA-C is a potentially beneficial model of child assessment for Asian Americans families that it can go beyond individual assessment and address Asian American clients' concerns in relevant familial contexts. However, as mentioned before, seeking psychological service is regarded a sign of weakness and is a shameful act. In other words, although the family system approach to assessment of TA-C model might be able to address the concerns of Asian Americans within familial context which are primarily important to Asians, it might be emotionally difficult for Asian parents to share their concern about their own children and their families with the assessors. It is important to note that however, this concern does not only apply to the TA-C model, but in general all kind of psychological services that require sharing of familial concerns and relevant information.

In sum, the TA-C model might be a robust model of assessment for Asian children and their families. It is, however, important to make sure the methodology used in the assessment acknowledges and minimizes the shameful feelings that might encountered by the clients.

HIERARCHICAL RELATIONSHIP. Traditional Asian families tend to be hierarchical in structure, in which older individuals or authority figures have a higher status in society (Sue & Sue, 2008). Asian child is expected to defer to adults. The child should not question or talk back to his or her parents and teachers (Kim, et al., 2001). Obedience to the parents is always emphasized and expected. Similarly, to be respectful, in the presence of authority figure, one should be less expressive and should not question the authority. In a sample of high school students, second generation Chinese American appears to place a higher priority on filial piety and obedience to parents and authority than do their American peers (Feldman & Rosenthal, 1990).

In term of parenting style, Asian parents are likely to be more directive and authoritarian. There is a tendency for parents to exclude their child in the decision-making process. Expressing feelings, preferences and opinions by the child may be considered as disrespectful. A study conducted by Rhee, Chang and Rhee (2003) examining openness in communication with parents among Asian and Caucasian American adolescents. The finding suggests that Asian adolescents tend to be less expressive and less assertive than do their American peers. They also reported greater difficulty in communicating with the parents, especially with their fathers.

IMPLICATIONS. As a result of the hierarchical relationship being stressed, Asian clients in general expect the mental health professional to be a "teacher" (Ma, 2000)or an "expert" (Mau & Jepsen, 1988). They are expected to be educated and

directed by the professionals. In addition, in the study by Mau and Jepsen(1988), Asian students expressed their preferences of treatment. They prefer "a direct, concrete answer" to their presenting concerns. They also would like the counselor to make decision for them. In sum, Asian individuals appear to prefer a more structured and directive approach of mental health services. Since Asians tend to be more solution-focused regarding psychological services, the goal of the TA-C as to produce transformative change might fit well.

However, the TA-C model of assessment might be problematic because of its highly emphasized collaborative nature. Since Asian parents usually perceive the role of assessor as an expert that provides directive instructions, it might be difficult for them to view themselves as a collaborator or in a horizontal relation with the assessor during the process. Other than the difficulty in engaging Asian parents to collaborate, it is also challenging to gather genuine data from the child when parents are observing testing sessions. One of the goals to invite parents to observe the testing sessions is to provide opportunity for a new understanding of their child. However, Asian children are in general less disclosing when they are in front of their parents. They might feel uncomfortable or unsafe to reveal themselves. It is considered disrespectful to discuss about one's parents with others, it would be even harder to talk about emotions and/or familial issues when the child knows that his or her parents are watching. On the parents' side, however, Asian parents as relatively more directive and authoritative in term of parenting style, they might welcome the observation of the testing session of their own child. They even might find it as a way of monitoring their child.

EXPRESSION OF EMOTION. In Asian culture, the inability to control emotions is a sign of weakness and immaturity (Rhee, et al., 2003). Expression of strong

emotion is discouraged, regardless of it being positive or negative. In Asian families, fathers usually play a distant role and do not involve emotionally with his children or display his emotions in front of their children. Mothers generally are more responsive to the emotional need of their children. One of the reasons for suppressing emotions is to avoid losing face, especially in public. Loss of face occurs when an individual unable to fulfill his or her familial or social role (Hall, 2007). Disclosure about negative aspect of self, personality, intimate relationship is found to be associated with loss of face in Asian culture. In addition, disclosure in psychotherapy is also regarded as lose of face to oneself and even to significant others in the family (Zane & Mak, 2003).

IMPLICATIONS. As Asians tend to be unwilling to reveal affects to others, psychological services become challenging. In psychological assessment, assessor might find it difficult to gather necessary information from Asian individuals. It is suggested in the literature that Asian clients prefer brief and solution focused psychological services, rather than those with insight and growth oriented approaches (Berg & Miller, 1993). Also, exploration of feelings tends not to be valued by Asian clients. In term of the TA-C model, assessor would probably find it tough to engage Asian parents not only giving basic information, but also to collaborate and providing input throughout the assessment process. Parents might lose face by telling the assessor how they brought up their child and also feel shameful for being evaluated on their parenting skills.

Summary of Asian Cultural Values and their Implications for Psychological Services

In summary, the TA-C model adopts a family approach to assessment that is appropriate for the Asian Americans who should be understood in a family context, as they in general identify themselves with their families and they value interdependence within a family. In addition, the goal of the TA-C model as bringing in transformative change might accommodate the preference of psychological services as being solution-focused among Asian Americans. In particular, Asian parents tend to be more directive and authoritarian. Thus, they might welcome the observation of the testing session, as they could 'monitor' their own child during the testing sessions.

Yet, the extensive collaboration between assessor and parents as a crucial element for the TA-C model may be challenging for some Asian Americans due to the belief of mental health professionals as experts and rather than collaborators. Since the expression of negative emotion is a sign of immaturity and seeking psychological services is regarded as shameful to family, it is also rather difficult for some Asian Americans to self-disclose their emotional weaknesses and/or dysfunctional family dynamics to the assessor. This also contributes to the challenges for the TA-C model applying to Asian American children and families.

Theories of Acculturation

Asian Americans consist of individuals with diverse lengths of residence in the United States and diverse levels of contact with country of origin. The diversity of Asian Americans suggests that they have adapted to the dominant culture of the United States and retained the Asian cultural values and practices to a very different extent. Acculturation is a construct that helps to describe the process of adapting to the dominant culture.

Acculturation is a term first described by sociologists and anthropologists. Early conception of acculturation focused on a group-level cultural pattern changes following continuous first-hand contact between groups of individuals from different cultures (Redfield, Linton, & Herskovits, 1936). This approach of acculturation was later modified into two influential model, unidimensional and bidimensional models. The unidimensional model of acculturation was described by Gordon (1964). In this model, acculturation is viewed as a linear process of change with individuals toward the direction of the mainstream culture. However, it has been under "critical scrutiny" and been replace by the bidimensional models (Van de Vijver & Phalet, 2004). Berry and his colleagues proposed a two-continua model of acculturation (Berry, 1980; Berry & Sam, 1997). The two separate continua in Berry's bidimensional model of acculturation are "contact and participation" and "cultural maintenance". The former represents the extent an individual involved in other cultural groups; while the latter refers to the extent an individual maintains cultural identity and characteristics of one's indigenous culture (Segall, Dasen, Berry, & Poortinga, 1999).

According to Berry's model of acculturation, there are four acculturation attitudes or ways for individuals to associate their native culture with the mainstream culture, depending on their position on both the original culture's and the new culture's value (Segall, et al., 1999). Integration occurs when individuals are highly acculturated and highly enculturated. People with this attitude become

'bicultural' by acquiring characteristics of the dominant culture while retaining their own native culture. Assimilation refers to the attitudes that an individual that is identify solely with the dominant culture while not adhering to their culture of origin. Separation, on the other hand, occurs when individuals do not identify themselves to the dominant culture, but maintain their own culture. Finally, marginalization refers to the attitudes of an individual shows no interest in maintaining or acquiring neither the dominant nor the indigenous culture. Of all four attitudes, integration is the most desired acculturation attitude, as it allows individuals to be functional in both the mainstream and indigenous culture, as well as to have resources to resolve conflicts that may arise between the two different culture (Kim, 2007).

Research on Acculturation

There has been a growing body of research studies on the relations between acculturation and perceptions of psychological services among Asian Americans. Attitudes toward seeking psychological services and treatment process are the two major related outcomes that have been investigated.

ATTITUDES TOWARD SEEKING PSYCHOLOGICAL SERVICES. To examine the relations between acculturation and attitudes toward seeking psychological services, Atkinson and Gim (1989) surveyed 557 Asian Americans college students. Their findings indicated that individuals who are highly acculturated tended to be more likely to recognize their need for psychological services, more tolerant with the associated stigma and more open to discuss their problem with service providers. Several more recent studies also replicated the findings of Atkinson and

Gim. Tata and Leong (1994) and Zhang and Dixon (2003) surveyed 219 Chinese Americans college students and 170 Asian International students respectively. They both found a positive relation between level of acculturation and attitude toward seeking professional psychological help. In other word, the more acculturated individuals are, the more positive attitude they have toward seeking psychological services.

Other line of research investigates the adherence to Asian cultural value and attitudes toward seeking psychological help. Kim and Omizo (2003) examined the relations of adherence to Asian cultural values, attitudes toward seeking professional psychological services and willingness to see a counselor among 242 Asian American college students. The results suggested that adherence to Asian cultural values was negatively related to both attitudes towards seeking psychological help and willingness to see a counselor. The more one is to retain their indigenous culture individuals are, the less positive their attitudes toward seeking help and the less willing they are to see a counselor. This result is also consistent with those of Gloria, Castellanos, Park and Kim (2008). Their result revealed that low level of acculturation predicted help-seeking attitudes for women and second generation students. This suggests that gender and the length of residence might play a role in mediating the effect of the acculturation.

In sum, these studies suggest that acculturation has an important implication on Asian American's attitudes toward seeking psychological services. Yet, it should be note that the samples of these studies were all college students. This limits the generalizability of the findings.

TREATMENT PROCESS. A study compared the experiences of 78 Asian Americans in career counseling with a European American female counselor who

either used solution focused approach or insight attainment approach (Kim, Li, & Liang, 2002). Also, clients who worked with counselor using solution-focused approach reported stronger working client-counselor alliance than clients who worked with counselor using insight attainment approach. Another similar research studies the effects of counseling approach and level of adherence to Asian cultural values on the career counseling process among Asian Americans (Li & Kim, 2004). It was found that clients who were assigned to a directive approach of counseling rated the counselor as more emphatic and more culturally competence, and also reported a stronger client-counselor alliance when compared to clients who were assigned to a nondirective approach of counseling, regardless of their level of acculturation. A more recent study investigated the relations between acculturation and counseling experiences among Asian American volunteer clients (Kim, Ng, & Ahn, 2005). The results suggested that acculturation is positively associated with client-counselor working alliance. In sum, there is support for the significant effect of acculturation on the treatment process.

To conclude, level of acculturation has significant influence on Asian American's perception and experience of psychological services. It is important to also examine their effects on perception of assessment or intervention practices for Asian American children and families. Thus, research is needed to examine whether people of different adopting levels of European American values moderates the experiences of different types of assessment or intervention practices.

CHATPER THREE: PROPOSED RESEARCH STUDY

Statement of Purpose

Research suggests that degree of acculturation influences Asian Americans' attitude toward psychological help-seeking. This finding suggests that the degree of incorporation of mainstream culture may affect one's perception, openness to and engagement with psychological services. Although much has been written about the role of acculturation on help-seeking attitudes, there is no prior research about their influences on psychological services for children and their families. The scarce amount of research in this area has left a gap in literature. Understanding the role of acculturation on one's perception of comfort level of the current assessment models among Asian American parents has the potential to help the mental health professionals to modify current assessment models and ensure positive experiences for Asian American children and families in the assessment processes. Thus, the purpose of the proposed study is to investigate the perceived comfort level of the steps in collaborative/therapeutic child assessment, as constructed with steps in traditional assessment among Asian American parents. This study will examine the relation between the acceptance of mainstream (U.S.) culture with the perception of traditional and therapeutic assessment models among Chinese American parents. Specifically, the study will investigate whether acculturation plays a role in Chinese American parents' perception regarding the child psychological assessment processes with or without therapeutical techniques. If acculturation has a significant effect on the perceived comfort level of assessment processes, mental health professionals should consider assessing level of acculturation before providing psychological services in order to ensure positive experiences and good cultural fit of the services provided. In addition, to ensure positive experience of assessment process among Asian American parents, mental health professionals could also modify the TA-C or the information gathering model or combine both models to form the best fit model for Asian American children and their family according to their degree of acculturation.

Research Questions and Hypotheses

Research Question 1: Does acculturation have any effect on the perceived comfort level of the introductory phase of the TA-C model among Chinese American parents?

Hypothesis 1: After controlling for gender of the participant's child, acculturation will be found to have a statistically significant effect and will predict the perceived comfort level of the introductory phase of TA among Chinese American parents. The higher the level of acculturation among Chinese American parents, the higher the perceived comfort level toward the introductory phase of the TA-C model of assessment.

Rationale: Previous research suggested that highly acculturated Asian American individuals tended to be more open to discuss their problem with mental health professionals (Atkinson & Gim, 1989). It is hypothesized that acculturation plays a significant role on the perceived comfort level of the introductory phase of the TA-C model. Also, it is hypothesized that the higher acculturated Chinese

American parents would be more open to discuss with the assessor in gathering assessment questions, thus a higher perceived comfort level.

Research Question 2: Does acculturation have any effect on the perceived comfort level of the testing phase of the TA-C model among Chinese American parents?

Hypothesis 2: After controlling for gender of the participant's child, acculturation will not be found to have any statistically significant effect on the perceived comfort level of the testing phase of the TA-C model among Chinese American parents.

Rationale: Traditional Asians' parenting style tends to be more controlling and authoritarian (Sue & Sue, 2008). Being able to observe their child during the testing sessions will be perceived as more appealing to less acculturated Chinese Americans, as they are able to monitor their child and observe his/her interaction with the assessor during the testing sessions. On the other hand, highly acculturated Chinese American parents will also perceive a higher comfort level to be involved in their own child assessment processes. Thus, level of acculturation will not be found to have any significant effect on the perceived comfort level of the testing phase of the TA-C among Chinese American parents.

Research Question 3: Does acculturation have any effect on the family intervention session of TA-C among Chinese American parents?

Hypothesis 3: After controlling for gender of the participant's child, the level of acculturation will be found to have any statistically significant effect and will predict the perceived comfort level of the family intervention phase of the TA-C model among Chinese American parents. The higher the level of acculturation, the

higher the perceived comfort level of the family intervention session of TA-C will be found among Chinese American parents.

Rationale: The level of acculturation is positively associated to the level of openness in discussing with psychological service providers among Asian Americans (Atkinson & Gim, 1989). Furthermore, Asians usually view the inability to fulfill his or her familial role as shameful (Hall, 2007). Thus, less acculturated Chinese American parent will perceive the family intervention session of the TA-C model less comfortable, as they might feel shameful to be evaluated or observed about their parenting skills. Highly acculturated parents will likely to perceive the family intervention as less threatening and they are more open to discuss familial concern, thus a higher perceived comfort level.

Research Question 4: Does acculturation have any effect on the perceived comfort level of the feedback phase of the TA-C model among Chinese American parents?

Hypothesis 4: After controlling for gender of the participant's child, acculturation will be found to have a statistically significant effect and will predict the perceived comfort level of the feedback phase of the TA-C model among Chinese American parents. The higher the level of acculturation among Chinese American parents, the higher the perceived comfort level toward the feedback phase of the TA-C model of assessment.

Rationale: The level of acculturation is positively correlated to the level of openness in discussing with service providers about psychological concern among Asian Americans (Atkinson & Gim, 1989). Also, Asians usually view the assessor as an expert rather than a collaborator (Mau & Jepsen, 1988). Collaboration, however, implies the horizontal relationship between an assessor and clients. Thus, less

acculturated Chinese American parents will perceive the collaboration between the assessor and them during the feedback session of the TA-C model less comfortable, while highly acculturated parents will perceive it as relatively more comfortable.

Research Question 5: Does acculturation have any effect on the perceived comfort level of the parent letter feedback of the TA-C model among Chinese American parents?

Hypothesis 5: After controlling for gender of the participant's child, the level of acculturation will be found to have a statistically significant effect on the perceived comfort level of the parent letter feedback of the TA-C model among Chinese American parents. The higher the level of acculturation among Chinese American parents, the higher the perceived comfort level toward the parent letter feedback of the TA-C model of assessment.

Rationale: Asians usually view assessor-client relationship as hierarchical, in which mental health professionals are seen as teachers or experts (Ma, 2000; Mau & Jepsen, 1988). Thus, less acculturated Chinese American parent might perceive the parent written feedback as less professional as it is written in a form of letter using first person and in everyday language. Highly acculturated parents will perceive it as more comfortable, as they view the assessor as more of a collaborator.

Research Question 6: Does acculturation have any effect on the perceived comfort level of the child written feedback (tailored fable) of the TA-C model among Chinese American parents?

Hypothesis 6: After controlling for gender of the participant's child, acculturation will not be found to have any statistically significant effect on the perceived comfort level of the child fable feedback of the TA-C model among Chinese American parents.

Rationale: Asians usually suppress their emotion and tend not to display their own emotion in front of their children. The individualized fable serves a function for the Chinese American parents to deliver the important messages of the assessment findings to the child without their emotional involvement. Thus, Chinese American parents probably view the child fable feedback fit well to their traditional Asian values.

Research Question 7: Does acculturation have any effect on the perceived comfort level of the introductory phase of information gathering model among Chinese American parents?

Hypothesis 7: After controlling for gender of the participant's child, acculturation will be found to have a statistically significant effect and will predict the perceived comfort level of the introductory phase of information gathering model among Chinese American parents. The lower the level of acculturation among Chinese American parents, the higher the perceived comfort level toward the introductory phase of the information gathering model of assessment.

Rationale: Previous research suggested that highly acculturated Asian American individuals tended to be more open to work with mental health professionals (Atkinson & Gim, 1989). It is hypothesized that acculturation plays a significant role on the perceived comfort level of the introductory phase of the information gathering model. Also, it is hypothesized that the less acculturated Chinese American parents would be less open to work with the assessor and thus will perceive a more directive information gathering model more comfortable.

Research Question 8: Does acculturation have any effect on the perceived comfort level of the testing phase of information gathering model among Chinese American parents?

Hypothesis 8: After controlling for gender of the participant's child, acculturation will not be found to have any statistically significant effect on the perceived comfort level of the testing phase of the information gathering model among Chinese American parents.

Rationale: Traditional Asians' parenting style tends to be more controlling and authoritarian. Less acculturated Chinese American parents will likely to perceive it bothering if they are unable to know what happen to their child during several testing sessions. On the other hand, highly acculturated Chinese American parents will perceive it to be uncomfortable for not being involved in their child assessment processes. Thus, level of acculturation will not be found to have any significant effect on the perceived comfort level of the testing phase of the information gathering model among Chinese American parents.

Research Question 9: Does acculturation have any effect on the perceived comfort level of the feedback phase of information gathering model among Chinese American parents?

Hypothesis 9: After controlling for gender of the participant's child, the level of acculturation will be found to have a statistically significant effect on the perceived comfort level of the feedback phase of information gathering model among Chinese American parents. The higher the level of acculturation among Chinese American parents, the lower the perceived comfort level toward the feedback phase of the information gathering model of assessment.

Rationale: The level of acculturation is positively correlated to the level of openness in discussing with psychological service providers Asian Americans (Atkinson & Gim, 1989). Also, Asians usually view the assessor as an expert and will make decision for them (Mau & Jepsen, 1988). Thus, less acculturated Chinese

American parent will perceive the feedback session of the information gathering model more comfortable as the feedback session does not usually encourage parental input, while highly acculturated parents will perceive it as relatively less comfortable.

Research Question 10: Does acculturation have any effect on the perceived comfort level of the parent written feedback of the information gathering model among Chinese American parents?

Hypothesis 10: After controlling for gender of the participant's child, the level of acculturation will be found to have a statistically significant effect on the perceived comfort level of the parent written feedback of the information gathering model among Chinese American parents. The higher the level of acculturation among Chinese American parents, the higher the perceived comfort level toward the parent written feedback of the information gathering model of assessment.

Rationale: Asians usually view assessor-client relationship as hierarchical, in which mental health professionals are seen as teachers or experts (Ma, 2000; Mau & Jepsen, 1988). Less acculturated Chinese American parent might perceive the written feedback in a form of formal report as more appealing and professional, thus a higher perceived comfort level. Conversely, highly acculturated parents will perceive it as less comfortable, as they might view the formal report as too rigid and difficult to comprehend.

CHAPTER FOUR: METHOD

PARTICIPANTS. A total of 136 Chinese American parents with children between the ages of 6 and 12 years old will be recruited. Only one parent from each family will be recruited. The gender of parent recruited will be controlled to ensure equal number of fathers and mothers participate in the study. There is no exclusion criteria, participants will be recruited regardless of their generation status, experiences on psychological services, and their child's disabilities and gender. The participants will be recruited from local churches for Chinese Americans and also local Chinese community at Austin, Texas.

Instruments

DEMOGRAPHIC INFORMATION FORM. Demographic information including age of parent, gender of parent, age of child, gender of child, parental generation status, prior knowledge on psychological services and prior experience on psychological assessment will be collected (see Appendix A). Generation status refers to whether the participant or the participant's parents were born in or outside the United States. Generation status includes three response categories: 1st generation (refers to the participant was born outside the U.S.), 2nd generation (refers to the participant was born in the U.S. but at least one parent was born outside the United States), and 3rd+ generation (refers to the participant and both parents was born in the U.S.).

THE EUROPEAN AMERICAN VALUES SCALE FOR ASIAN AMERICANS-REVISED (EAVS-AA-R). The EAVS-AA-R is a 25-item self report measure of acculturation developed from the original EAVS-AA, assessing Asian American's adherence to European American values (see Appendix B). EAVS-AA is originally a 18-item scale to examine the construct of values acculturation (Wolfe, Yang, Wong, & Atkinson, 2001). The items were based on mainstream U.S. values, including self-confidence, autonomy, marital behavior, and child-rearing practices. Since EAVS-AA had limitations in term of low reliability and unclear factor structure, it was revised using Rasch model. The final 25-item of EAVS-AA-R was found to be an instrument that has a unidimensional factor structure and a coefficient alpha of .78 (Hong, Kim, & Wolfe, 2005).. Participants are asked to rate each item on a 4-point Likert scale that ranges from 1 (stronger disagree) to 4 (strongly agree). Higher scores represent higher adherence to European American values, thus a higher level of acculturation.

THE PERCEIVED COMFORT LEVEL SCALE OF ASSESSMENT PROCESSES. The instrument is newly constructed for the proposed study and other potential future follow-up studies. The Perceived Comfort Level Scale of Assessment Processes consisted of a total of eight vignettes, simulating the steps of the assessment processes of the information gathering model and the TA-C model of child psychological assessment. For the information gathering model, four vignettes will be written based on four scenarios that cover four different areas of referral concerns, including academic, social, emotional and behavioral concerns (See Appendix C for background information of the four scenarios for the vignettes). Likewise, four other vignettes will be written based on the same four scenarios for the TA-C model.

The perceived comfort level scale for the TA-C model is divided into six subscales, including the introductory phase, the testing phase, the family intervention session, the feedback phase, the parent written letter feedback, and the child written fable feedback (see sample set of vignettes of the TA-C model in Appendix D). The perceived comfort level scale for the information gathering model is divided into four subscales, including the introductory phase, the testing phase, the feedback phase, and the parent written report feedback (see sample vignettes of the information gathering model in Appendix E). For each subscales, participants are asked to rate their perceived comfort level based on three questions asked regarding the particular assessment process. The three perceived comfort level rating will be summed, resulting a total score for the subscale. To better stimulation, there are two versions of vignettes, the boy and the girl version. If participant has a son, a boy version of vignette will be given. Likewise, if participant has a daughter, a girl version of vignettes will be given.

Each participant will be given either the vignettes of the TA-C model or the vignettes of the information gathering model randomly. Half of the participants will be given the vignette of information gathering model, while the other half participants will be given the vignette of TA-C model. Participants will be asked to read the given vignettes, and to provide rating on how comfortable they think the assessment process would be for them if they are asked to go through it as a parent. The scale is on a 7-point Likert scale that range from 1 (strongly disagree) to 7 (strongly agree).

Procedure

PROTECTION OF PARTICIPANTS. This study will be conducted in compliance with the ethical standards designated by the American Psychological Association, and the standards of the Institutional Review Board (IRB) at the University of Texas at Austin. All participating parents will sign IRB-approved consent prior to participation in this study.

DATA COLLECTION. Participants will be invited to come to The University of Texas at Austin to complete the study. After signing an IRB-approved consent form, participants will complete a demographic information sheet, the EAVS-AA-R, and the Perceived Comfort Level Scale of Assessment Processes. Each participant will be given either the vignette of information gathering model of assessment or the TA-C model of assessment randomly. Trained researchers will be available throughout the study to ensure participants complete all measures and to answer any questions that arise.

Statistical Analyses

POWER ANALYSIS. To determine the appropriate sample size for the proposed study, G*Power, Version 3.0.10 was used (Faul, Erdfelder, Lang, & Buchner, 2007) to conduct power analysis. The sample size required for a multiple regression analysis to achieve power of .80 in order to detect a medium effect size of 0.15 with a significance level of .05 for two-tailed tests was calculated. The result from G*Power indicated that the sample size needed for multiple regression is 68, with one fixed predictors (level of acculturation) and one controlling variables

(gender of participant's child). Since participants are asked to respond to either the perceived comfort level scale of the TA-C model or the information model, a total of 136 Chinese American parents will be required (See Table 1).

Table 1: Distribution of the 136 participants recruited

	Conditions	
Gender of participants	Information gathering model	TA-C model
Mothers	34	34
Fathers	34	34
	68	68
	Total	: 136

PRELIMINARY ANALYSES. Prior to testing research hypotheses, descriptive statistics (i.e., means, standard deviation, and minimum and maximum values, bivariate scatterplots) will be examined. Additional preliminary analyses will determine whether the assumptions of each of the statistical tests that will be use have been met. To meet the assumptions of multiple regression analysis, the measures used in the purposed study will be considered to ensure that all variables are measured with high reliability. All observation in the purposed study will be independent. To assess whether the dependent variables are normally distributed and whether there are outliners, frequency distributions of dependent variable for each group will be inspected. Plots of the standardized residuals by the regression standardized predicted value will be examined to assess the relations between the independent and dependent variables. Plots will also be examined visually for the assumption of homoscedasticity. A linear relation is assumed for standard multiple regression.

TEST FOR RESEARCH HYPOTHESES. Simultaneous multiple regression will be used to test for the effect of acculturation on the perceived comfort level of assessment models. The perceived comfort level rating will be regressed on the level of acculturation and gender of the participant's child will be entered as controlling variables.

To test for hypothesis 1, the perceived comfort level of the introductory phase of the TA-C model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

To test for hypothesis 2, the perceived comfort level of the testing phase of the TA-C model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

To test for hypothesis 3, the perceived comfort level of the family intervention session of the TA-C model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

To test for hypothesis 4, the perceived comfort level of the feedback phase of the TA-C model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

To test for hypothesis 5, the perceived comfort level of the parent letter feedback of the TA-C model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

To test for hypothesis 6, the perceived comfort level of the child fable feedback of the TA-C model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

To test for hypothesis 7, the perceived comfort level of the introductory phase of the information gathering model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

To test for hypothesis 8, the perceived comfort level of the testing phase of the information gathering model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

To test for hypothesis 9, the perceived comfort level of the feedback phase of the information gathering model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

To test for hypothesis 10, the perceived comfort level of the parent written feedback of the information gathering model will be regressed on the level of acculturation, with the gender of the participants' child as the controlling variable.

Expected Results

It is hypothesized in the present study that the level of acculturation will have statistically significant effects on the perceived comfort level on the introductory phase, the family intervention session, the feedback phase and the parent letter feedback of the TA-C model. On the other hand, it is hypothesized that the level of acculturation will have statistically significant effects on the perceived comfort level on the on the introductory phase, the feedback phase and the parent written feedback of the information gathering model. In general, the higher the level of acculturation, the higher the perceived comfort level on the assessment process of the TA-C model, the lower the perceived comfort level on the assessment process of the information gathering model.

CHAPTER FIVE: SUMMARY AND IMPLICATIONS

It is important that ethnic minorities are provided with psychological assessment that they find comfortable with. The TA-C model of child assessment provides a potentially good fit of Asian children and their family as the model emphasized the importance of family system plays in the child's functioning. Yet, despite the robust impacts of the TA-C model, there is no prior research investigating the transfer of these positive impacts to children and families of other cultures. It is thus essential to investigate how Asian Americans parents perceive about the child assessment processes, and eventually develop a model or modify existing models to accommodate Asian American children and their families of different levels of acculturation.

Previous research has shown that level of acculturation influences help-seeking attitudes and behaviors. Yet, there is no prior research examining the influence of acculturation on psychological services for children and their families. As such, the proposed study aims to examine if levels of acculturation have any effect on Asian Americans' parental perceived comfort level of the steps in the child psychological assessment with or with therapeutic components. If results indicated that the levels of acculturation has a significant effect on the perceived comfort level of different child assessment models among Asian American parents, it is important for practitioners to assess levels of acculturation of Asian American parents before conducting child psychological assessment. The parental level of acculturation could be used to determine which assessment models should be employed to provide

positive experiences and a good cultural fit of the services provided for Asian American children and their families.

CHAPTER SIX: LIMITATION AND DIRECTIONS FOR FUTURE RESEARCH

Two major possible limitations in the proposed study include: the study sample and the validity of the Perceived Comfort Level Scale of Assessment Processes. The proposed study sample of Chinese American parents is relatively homogenous. Asian Americans is a very diverse population. Using only Chinese American parents as the sample of the study helps determining the true effect of acculturation on perceived comfort level of the assessment models, without having cultural values of other Asian groups affecting the result. However, the homogeneity of sample limits the generalizability of the results to other Asian American groups. In other word, the results of the study may only be applied to Chinese Americans.

Another limitation is the lack of evidence of validity of the Perceived Comfort Level Scale of Assessment Processes. The Perceived Comfort Level Scale of Assessment Processes is a newly constructed scale in measuring the parental perceived comfort level of assessment processes. It is a preliminary measure for the perceived comfort level by using vignettes that simulate the steps of the assessment processes. One benefit of it is that the parental perceived comfort level can be measured without the parents actually go through the assessment processes. It helps to collect data in a relatively short period of time. However, the vignettes may not be descriptive enough to simulate the actual assessment process for measuring the true comfort level. Besides, there are many different components and steps in a psychological assessment. It is possible that the current scale could not truly reflect all the components and steps that are important to the population. On top of this, the current version of the Perceived Comfort Level Scale of Assessment Processes is

in English. This may limit the participation for Chinese American parents who are not English-proficient.

With the limitations of the proposed study, some future directions of research are discussed below. In order to increase external validity of the study result, samples of other different Asian American groups e.g. Korean Americans, Japanese Americans, Indian Americans should be recruited. In term of the study design, instead of using vignettes to simulate the steps of the assessment processes, future research using case study design could be employed. Since the measure of perceived comfort level is a single method, a self-report questionnaire, it is preferable to use multi-method approach to get a more comprehensive understanding of parental experiences on the assessment processes. A combination of rating scales, interviews, and naturalistic observations could be employed with Asian American parents during and after their child completes the TA-C model or the information gathering model of child assessment to better investigate their true experiences of the assessment model. Beyond the study design, additional independent variables could be included in the study. For example, level of enculturation could be included to examine how level of adhering to traditional Asian culture affects the parental perception of child assessment processes.

Despite whether acculturation significantly influence the perceived comfort level of Asian American parents on the child assessment processes, future research should continue focus on the transferability of potential positive impacts of existing assessment models to ethnic minorities. It is important for mental health professionals to provide comfortable and positive experiences for children and parents of ethnic minorities who go through a psychological assessment, thus, any

further research that uncover factors related to the experiences of clients of ethnic minorities should be conducted.

APPENDIX A: DEMOGRAPHIC INFORMATION FROM

Background information	
Gender:	
Age:	
Check if the following person <u>was born</u> in the United States: yourself your mother your father	
How many children do you have?	
Age and Gender of your child/children:	
Do you have any prior knowledge about psychological services?	Yes / No
Do you have any prior experience on psychological assessment?	Vac / No

APPENDIX B: THE EUROPEAN AMERICAN VALUES SCALE FOR ASIAN AMERICANS-REVISED

The 25-item scale is answered on the following 4-point scale: 1 = strongly disagree; 2 = disagree; 3 = agree, 4 = strongly agree.

- 1. I think it is fine for an unmarried woman to have a child.
- 2. Sometimes, it is necessary for the government to stifle individual development.
- 3. You can do anything you put your mind to.
- 4. Single women should not have children and raise them alone.*
- 5. I prefer not to take on responsibility unless I must.*
- 6. I do not like to serve as a model of others.*
- 7. It is OK if work interferes with the rest of my life.*
- 8. It is OK to allow other to restrict one's sexual freedom.*
- 9. No one is entitled to complete sexual freedom without restriction.*
- 10. A woman should not have a child unless she is in a long-term relationship.*
- 11. I follow my supervisor's instructions even when I do not agree with them. *
- 12. The world would be a better place if each individual could maximize his or her development.
- 13. Partners do not need to have similar values in order to have a successful marriage.*
- 14. I cannot approve of abortion just because the mother's health is at risk.*
- 15. It is OK for a woman to have a child without being in a permanent relationship.
- 16. Friends are very important.
- 17. Faithfulness is very important for a successful marriage.
- 18. Monetary compensation is not very important for a job.*
- 19. A student does not always need to follow a teacher's instructions.
- 20. Luck determines the course of one's life.*
- 21. Cheating on one's partner doesn't make a marriage unsuccessful.*
- 22. Greater emphasis on individual development is not a good thing.*
- 23. I have always enjoyed serving as a model of others.
- 24. Being humble is better than expressing feelings of pride.*
- 25. Faithfulness is very important for a successful marriage.*

APPENDIX C: BACKGROUND INFORMATION OF THE FOUR SCENARIOS FOR THE VIGNETTES

Background information of the four Scenarios for the Perceived Comfort Level Scale of Assessment Processes

Scenario 1 (academic)

Chen is an eight-year-old boy, attending third grade at Rose Elementary School. Chen has been struggling with math since second grade started. His teacher reported that Chen is motivated to learn and willing to pay extra effort, but he still struggles with simple calculations. At home, Chen cries and feels frustrated when he does his math homework. Chen's parents spend up to two hours every evening to go through math homework with him. Recently, he struggles to get out of bed and is unmotivated to go to school. Chen's parents decide to seek professional help and take him to psychologist for an assessment.

Scenario 2 (social)

Cheung is a nine-year-old boy, attending second grade at Orchid Elementary School. Cheung has no significant friends at school. He has a harder time making friends and maintaining friends compared to peers his age. Cheung's teacher reported that he is very quiet and fail to cooperate with his peers. His parents expressed concern on Cheung's social skills and his ability to make friends at school and in the neighborhood. They reported that Cheung never take initiative to interact with peers his age. He prefers interacting with adults and playing with dogs. Cheung's parents decide to seek professional help and take him to psychologist for an assessment.

Scenario 3 (emotional)

Li is a ten-year-old boy, attending fifth grade at Tulip Elementary School. Li loved to go to school until his grandmother passed away last year. It has been a struggle for Li's parents every morning to get Li out of bed and go to school. His teacher reported that Li is not motivated in learning and is extremely quiet. At home, Li usually hide in his room and often cry. He also has a hard time falling asleep at night. Recently, he also suffers from nightmare. He refuses to sleep by himself. Li's parents decide to seek professional help and take him to psychologist for an assessment.

Scenario 4 (behavioral)

Wong is a seven-year-old boy, attending fourth grade at Jasmine Elementary School. His parents and teachers both reported that he throws tantrum when thing does not go his way. Wong had six behavioral referrals within the past two week at school. At home, when he is mad, he kicks walls, shouts at his siblings and parents, and

sometimes he throws objects at others. Wong's parents feel very helpless in controlling Wong's overwhelming emotions. They decide to seek professional help and take him to psychologist for an assessment.

APPENDIX D: SAMPLE OF THE TA-C MODEL VERSION OF THE PERCEIVED COMFORT LEVEL SCALE OF ASSESSMENT PROCESSES

Please read the following while imagining yourself as Chen's parent.

Vignette 1

Scenario 1

Chen is an eight-year-old boy, attending third grade at Rose Elementary School. Chen has been struggling with math since second grade started. His teacher reported that Chen is motivated to learn and willing to pay extra effort, but he still struggles with simple calculations. At home, Chen cries and feels frustrated when he does his math homework. Chen's parents spend up to two hours every evening to go through math homework with him. Recently, he struggles to get out of bed and is unmotivated to go to

Chen's parents come for the initial parent interview with the assessor. During the session, Chen's parents are invited to work with the assessor. The assessor first reviews the procedures of the assessment. She then assists them to generate question(s) that they would like to be answered by the assessment. These questions will then be the focus for the assessment. The assessor also gathers background information to inform the context of each questions of interest. Two questions were generated by Chen's parents. ("Why my child keeps failing in Math, even with our help?" "How could we motivate him to go to school?")

A child interview is scheduled a few days after the parent interview. During the child interview, Chen's parents are asked to introduce Chen to the assessment, explain the process of the assessment and share one or two of their questions of interest. The assessor and the parents worked together to address any questions and concerns raised by Chen. Chen also is invited to generate his own questions of interest that will be answered by the assessment. From this session, he comes up with two questions, "Why do I suck in math?" and "Why aren't my parent helping me with my homework?".

Imagine that you were Chen's parent. Please indicate your comfort level of the above assessment process by circling the appropriate number on the scale following the questions.

1-extremely comfortable

2-comfortable

3-slightly comfortable

4-neutral

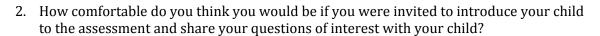
5-slightly uncomfortable

6-uncomfortable

7-extremely uncomfortable

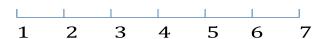
1.	How comfortable do you think you would be if you were asked to generate your
	assessment questions of interest that guide your child's assessment?







3. How comfortable do you think you would be if you child was asked to generate his own question of interest for the assessment?



Three assessment sessions follow the initial interviews. Chen's parents are invited to observe all the assessment sessions behind a one-way mirror. Chen is aware that his parents are watching behind the mirror. During the assessment sessions, another assessor sits with Chen's parents and discusses the process of assessment. Cognitive testing is done to assess Chen's overall intellectual functioning in the first testing session. Achievement testing is done in the second testing session to assess his academic functioning and math ability. During the third session, further testing is administered for better understanding Chen's emotional functioning.

Imagine that you were Chen's parent. Please indicate your comfort level of the above assessment process by circling the appropriate number on the scale following the questions.

1-extremely comfortable

2-comfortable

3-slightly comfortable

4-neutral

5-slightly uncomfortable

6-uncomfortable

7-extremely uncomfortable

4. How comfortable do you think you would be if you were invited to observe your child's assessment process behind a one-way mirror?



5. How comfortable do you think you would be if you were invited to discuss your child's testing process with another assessor behind a one-way mirror?



6. How comfortable do you think you would be if your child is aware that you were observing him behind the mirror during the testing process?



Following the completion of the testing session, a family intervention session is held. The session is individually designed to target the need of Chen's family. During the family session, Chen and his parents are guided by the assessors to interact in a structured family activity. Basically, Chen and his parents are asked to complete some tasks together. Through the intervention session, the assessor could understand better about the parent-child interaction and test hypotheses. Another aim is to provide Chen with a new experience of his parents and the family interactions.

1-extremely comfortable

2-comfortable

3-slightly comfortable

4-neutral

5-slightly uncomfortable

6-uncomfortable

7-extremely uncomfortable

Imagine that you were Chen's parent. Please indicate your comfort level of the above assessment process by circling the appropriate number on the scale following the questions.

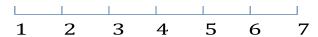
7. How comfortable do you think you would be if you were asked to attend a family intervention session?



8. How comfortable do you think you would be if you were asked to complete tasks as a family your child and also with the presence of the assessor?



9. How comfortable do you think you would be if you were advised on some technique in interacting with your child during the session?



Chen's parents are invited to provide input and are encouraged to ask questions during the feedback session. The findings of the assessment are organized into levels. Findings that are highly consistent with how Chen's parents already thinks about Chen and themselves will be discussed first (i.e. Chen is qualified for a learning disability in Math calculation), followed by those that are somewhat surprising to the parents (i.e. Chen is upset almost all the time and affect his motivation in learning). Recommendations are given for Chen's parents throughout the sessions to help with Chen's challenges in math and his sadness.

A week later, Chen and his parents are invited to meet with the assessor for child feedback. The major findings of the assessment are presented to Chen in a form of an individualized fable/story assimilating the concern of the child. The assessor will ask if Chen wants the fable to be read by her, his parents or by himself. Through reading the fable, Chen understands himself and his family in a more concrete way. The assessor also invites Chen to discuss any change that he would like to make to the fable.

Imagine that you were Chen's parent. Please indicate your comfort level of the above assessment process by circling the appropriate number on the scale following the questions.

1-extremely comfortable

2-comfortable

3-slightly comfortable

4-neutral

5-slightly uncomfortable

6-uncomfortable

7-extremely uncomfortable

10. How comfortable do you think you would be if you were invited to provide input and ask questions during the feedback session?



11. How comfortable do you think you would be if you were invited to have the child feedback session with your child and the assessor?



12. How comfortable do you think you would be if you were invited to read /listen to a fable assimilating the concern of your child?



Please read the following excerpt of a written parent feedback while imagining yourself as Chen's parent.

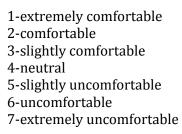
Dear Mr. and Mrs. Chen,

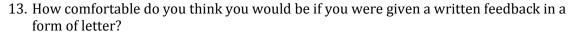
Chen filled out some questionnaires and did some activities (drawings, sentence completion and story-telling) that allowed me to learn about his social and emotional functioning. From these, it seems that Chen worries a lot. He has a feeling of insecurity. In the drawing activity, Chen drew a house that was located very close to a police station and fire department, as well as equipped with many kinds of security features. I also learned that Chen worries about math homework completion. On the sentence completion task, he said, "When I have several math assignments to do, I panic." Although Chen experiences difficulties in completing math homework, he wants to get better grades and he believes you two can help him best. He reported that when you two are out of town, he feels stressed. This suggests that he likes to have you two around and feels more capable with your help.

Chen also seems to feel sad. In the story-telling activity, Chen told stories in which most of the main characters were victims who experienced a huge sense of hopelessness and helplessness. In the drawing activity, Chen's drawings showed a theme of withdrawal. These findings about depression were also supported by the elevated scores on a depression scale that Chen filled out. In sum, Chen is experiencing a general mood of unhappiness.

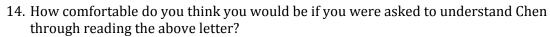
Yours sincerely, The Assessor

Imagine that you were Chen's parent. Please indicate your comfort level of the above letter feedback by circling the appropriate number on the scale following the questions.

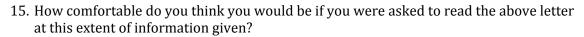














Please read the following excerpt of a written child fable feedback while thinking of imagining yourself as Chen's parent.

When Danny was a puppy, he lived in a mansion with a huge backyard and a swimming pool with his mother, father and older brother. They all enjoyed playing doggie ball in the backyard and going for hikes together during the weekend. Danny especially liked to play hide and seek with his brother. Danny and his family were very happy and he felt loved when his family was around.

When Danny was about six, things started to change. His family moved to a new district. Danny got into a new school near his new home, but he missed all his friends in his old school. Danny had a difficult time making friends in the new neighborhood and in his school. Some boys in his class even made fun of him. They said Danny was not good at counting and laughed at him. Danny felt different from other dogs; he also felt different from his family occasionally. His mommy and daddy were very good at math, and his brother won many medals for his ability to do mental calculation, but he had a hard time with these things. Danny thought there was nobody who could understand him. He felt lonely and sad. And he did not like going to school anymore.

Danny felt stressed about his many assignments. Without mommy and daddy's help, Danny had a hard time focusing on his homework and sometimes, he could not turn in his work on time. It was especially hard for him to finish his math homework, when his parents were out of town because they can always help him best.

Danny really wanted to do better in school. He wanted to get better grades and he wanted to do as well as his brother. He never wanted to let his parents down. So Ms. Eagle came to Danny. She works with doggies to better understand them and figure out how to help them. She worked with Danny and his parents to learn more about Danny. After Ms. Eagle understood what was going on with Danny she shared what she learned with mommy, daddy, and Danny.

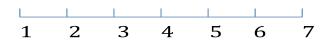
From talking with Ms. Eagle, mommy and daddy learned more about Danny. They realized that Danny was not lazy about doing homework. He just needed some help from them to organize his thoughts (You know, Danny is always a thinker) and to concentrate better. So mommy and daddy tried their best to spend more time with Danny and to help him. They also showed their care and love through doing something fun with him during weekends.

Danny also knew more about himself. He now understood why he sometimes got really sad. And most importantly, he knew he would not have to face anything alone.

Imagine that you were Chen's parent. Please indicate your comfort level of the above child fable by circling the appropriate number on the scale following the questions.

1-extremely comfortable
2-comfortable
3-slightly comfortable
4-neutral
5-slightly uncomfortable
6-uncomfortable
7-extremely uncomfortable

16. How comfortable do you think you would be if your child was given the above fable as a form of written feedback for the assessment?



17. How comfortable do you think you would be if your child was asked to read the above fable as a way to understand himself?



18. How comfortable do you think you would be with the extent of information provided in the fable for your child?



APPENDIX E: SAMPLE OF THE INFORMATION GATHERING MODEL VERSION OF THE PERCEIVED COMFORT LEVEL SCALE OF ASSESSMENT PROCESSES

Please read the following while imagining yourself as Chen's parent.

Vignette 1

Scenario 1

Chen is an eight-year-old boy, attending third grade at Rose Elementary School. Chen has been struggling with math since second grade started. Teacher reported that Chen is motivated to learn and willing to pay extra effort, but he still struggles with simple calculations. At home, Chen cries and feels frustrated when he does his math homework. Chen's parents spent three hours in the evening to go through math homework with him. Recently, he struggles to get out of bed and is unmotivated to go to school.

Chen's parents come for the initial parent interview and are introduced to the assessor. During the session, they are asked to share the developmental history of the child and discuss their current concern regarding Chen. The assessor then asks some follow up questions based on the referral concern (i.e. failing grade in math) and also answers the parents' questions about the assessment process.

A child interview is scheduled a few days after the parent interview. Chen's parents bring in Chen to the initial child interview. The parents are asked to sit in the waiting room, while the assessor meets with Chen individually. During the child interview, the assessor introduces herself to Chen and briefly explains the goal and process of the assessment. The assessor asks Chen questions regarding attitudes towards school, peer relationships, interest and hobbies and so on.

Imagine that you were Chen's parent. Please indicate your comfort level of the above assessment process by circling the appropriate number on the scale following the questions.

1-extremely comfortable

2-comfortable

3-slightly comfortable

4-neutral

5-slightly uncomfortable

6-uncomfortable

7-extremely uncomfortable

1. How comfortable you are if you were asked to share the developmental history and concern of your child?



2. How comfortable you are if you were asked to have your child meeting with the assessor on his own?



3. How comfortable you are if you were not invited to be involved in the child interview?



Three assessment sessions follow the initial interviews. Chen's parent(s) bring in Chen to work with the assessor, while they are spending time in the waiting area. In the first session, the assessor works with Chen on cognitive testing. It is to assess Chen's overall intellectual functioning. Achievement test is done in the second session to assess Chen academic functioning. Further testing in math is administered for better understanding Chen's math ability and emotional functioning if necessary during the third session.

Imagine that you were Chen's parent. Please indicate your comfort level of the above assessment process by circling the appropriate number on the scale following the questions.

1-extremely comfortable

2-comfortable

3-slightly comfortable

4-neutral

5-slightly uncomfortable

6-uncomfortable

7-extremely uncomfortable

4. How comfortable do you think you would be if your child were invited to work with the assessor alone for the testing sessions?



5. How comfortable do you think you would be if you were not informed about what has been happening during the testing sessions?



6. How comfortable do you think you would be if you were invited to spend time in the waiting area during the testing session?



A week after the last testing session, Chen's Parents are invited to the feedback session. The findings of cognitive testing and achievement testing are first presented to address the 'failing grade in math'. Assessor discusses the strengths and weaknesses of Chen and informs them that Chen has a learning disability in math. Then, the assessor will talk about Chen's emotional concerns. Recommendations are given at the end for Chen's parents to help with their son both academically and emotionally.

A week later, Chen and is invited to meet with the assessor for child feedback. The feedback session is conducted in an age-appropriate way. During the feedback, the assessor first acknowledges his hard work during the assessment process and then informs him that he has a harder time in doing math compared to peers his age. Also, the assessor tells Chen that the challenges that he is going through has been making him sad.

Please indicate your comfort level of the above assessment process by circling the appropriate number on the scale following the questions.

1-extremely comfortable

2-comfortable

3-slightly comfortable

4-neutral

5-slightly uncomfortable

6-uncomfortable

7-extremely uncomfortable

7. How comfortable do you think you would be if the parent feedback delivered according to the referral concerns?



8. How comfortable you are if the assessment finding was discussed with your child without your presence?



9. How comfortable do you think you would be if the child was provided with a relatively brief overview of the assessment findings?



Please read the following excerpt of a written parent feedback while imagining yourself as Chen's parent.

•••

Drawings

Chen completed a series of drawings. Chen enjoyed the drawing task and he was engaged in discussing the drawings. The theme of isolation stands out from the drawings. In the Kinetic Family Drawing, Chen excluded himself from the picture. He said he found it difficult to fit himself into the picture because he is not getting good grades. The second theme is insecurity. Chen drew a house that is located close to the police station and fire department and that is equipped with numerous security features.

Sentence Completion

Chen completed a series of projective sentence completion items. His responses suggest that he tends to desire interpersonal closeness as he responded "I feel insecure when I am alone". But he feels happiest to be with his family. In addition, Chen expressed a strong negative emotion toward homework. He responded that 'when I have several assignments to do, I panic'. It appears that he is worried about homework completion and finds it difficult to finish all of his homework assignments. Although Chen has a hard time completing his homework, he said "what I need to change is my grades", suggesting he wants to do better in school.

Thematic Apperception Test

Thematic Apperception Test is a story-telling activity that required Chen to tell a story after viewing a picture. In this task, Chen told ten stories and in eight out of the ten he described at least one character in the picture as a victim. Many victims feel hopelessness and helplessness in his stories. This may suggest Chen's general mood of unhappiness.

...

Imagine that you were Chen's parent. Please indicate your comfort level of the above report feedback by circling the appropriate number on the scale following the questions.

1-extremely comfortable
2-comfortable
3-slightly comfortable
4-neutral
5-slightly uncomfortable
6-uncomfortable
7-extremely uncomfortable

10. How comfortable you are if you were given the above report as a form of parent written feedback?



11. How comfortable do you think you would be if you were asked to understand Chen through the above report?



12. How comfortable do you think you would be if you were asked to read the above at this extent of information given?



REFERENCE

- Ackerman, S. K., Hilsenroth, M. J., Baity, M. R., & Blagys, M. D. (2000). Interaction of therapeutic process and alliance during psychological assessment. *Journal of Personality Assessment*, 75(1), 82-109.
- Atkinson, D. R., & Gim, R. H. (1989). Asian-American cultural identity and attitudes toward mental health services. *Journal of Counseling Psychology*, *36*, 209-212.
- Berg, I. K., & Miller, S. D. (1993). Different and same: Family therapy with Asian-American families. *Journal of Marital & Family Therapy*, 19(1), 31-38.
- Berry, J. W. (1980). Acculturation as a varieties of adaptation. In A. Padilla (Ed.), *Acculturation: Theroy, models and some new findings* (pp. 9-25). Boulder, CO: Westview.
- Berry, J. W., & Sam, D. (1997). Acculturation and adaptation. In J. W. Berry, M. H. Segall & C. Kagitcibasi (Eds.), *Handbook of cross-cultural research* (Vol. 291-324). Beverly Hills, CA: Sage.
- Brenner, E. (2003). Consumer-focused psychological assessment. *Professional Psychology: Research and Practice, 34*(3), 240-247.
- Bui, K. V., & Takeuchi, D. T. (1992). Ethnic minority adolescents and the use of community mental health care services. *American Journal of Community Psychology*, 20(4), 403-417.
- Faul, F., Erdfelder, E., Lang, A. G., & Buchner, A. (2007). G*Power 3: A flexible statistical power analysis program for the social, behavioral, and biomedical sciences. *Behavior Research Methods*, 39, 175-191.
- Feldman, S. S., & Rosenthal, D. A. (1990). The acculturation of autonomy expectations in Chinese high schoolers residing in two western nations. *International Journal of Psychology*, 25, 259-281.
- Finn, S. E. (2007). *In our clients' shoes: Theory and techniques of therapeutic assessment* Mahwah, New Jersey: Lawrence Erlbaum Associates.
- Finn, S. E., & Kamphuis, J. H. (2006). Therapeutic assessment with the MMPI-2. In J. N. Butcher (Ed.), *MMPI-2: A practitioners guide* (pp. 165-191). Washington, D.C.: APA Books.
- Finn, S. E., & Thonsager, M. E. (1997). Information-gathering and therapeutic models of assessment: Complementary paradigms. *Psychological Assessment 9*, 374-385.
- Fischer, C. T. (1970). The Testee as a co-evaluator. *Journal of Counseling Psychology*, 17, 70-76.
- Fischer, C. T. (1972). Paradigm Changes which allow sharing of results. *Professional Psychology*, *3*(4), 364-369.
- Fischer, C. T. (2000). Collaborative, individualized assessment. *Journal of Personality Assessment*, 74(1), 2-14.
- Fischer, C. T., & Finn, S. E. (2008). Developing the life meaning of psychological test data: Collaborative and therapeutic approaches. In R. P. Archer & S. R. Smith (Eds.), *Personality Assessment* (pp. 379-404). Routledge, New York Taylor & Francis.

- Fuligni, A. J., Burton, L., Marshall, S., Perez-Febles, A., Yarrington, J., Kirsh, L. B., et al. (1999). Attitudes toward family obligations among American adolescent with Asian, Latin American, and European backgrounds. *Child Development*, 70, 1030-1044.
- Gloria, A. M., Castellanos, J., Park, Y. S., & Kim, D. (2008). Adherence to Asian cultural values and cultural fit in Korean American undergraduates' help-seeking attitudes. *Journal of Counseling and Development*, 86, 419-428.
- Gordon, M. M. (1964). Assimilation in American life: The role of race, religion, and national origins. New York: Oxford University Press.
- Hall, G. C. N. (2007). Empirically supported therapies for Asian Americans. In F. T. K. Leong, A. G. Inman, A. Ebreo, L. H. Yang, L. M. Kinoshita & M. Fu (Eds.), Handbook of Asian American Psychology (2 ed., pp. 449-468). Thousand Oaks, CA: Sage Publication, Inc.
- Hong, S., Kim, B. S. K., & Wolfe, M. M. (2005). A psychometric revision of the European American Values Scale for Asian Americans using the Rasch model. *Measurement and Evaluation in Counseling and Development 37*, 194-207.
- Kim, B. S. K. (2007). Acculturation and enculturation In F. T. K. Leong, A. G. Inman, A. Ebreo, L. H. Yang, L. M. Kinoshita & M. Fu (Eds.), *Handbook of Asian American Psychology* (2 ed., pp. 141-158). Thousand Oaks, CA: Sage Publications.
- Kim, B. S. K., Atkinson, D. R., & Umemoto, D. (2001). Asian cultural values and the counseling process: Current knowledge and directions for future research. *The Counseling Psychologist* 29, 570-588.
- Kim, B. S. K., Li, L. C., & Liang, C. T. H. (2002). Effects of Asian American client adherence to Asian cultural values, session goal, and counselor emphasis of client expression on career counseling process. *Journal of Counseling Psychology*, 49, 342-354.
- Kim, B. S. K., Ng, G. F., & Ahn, A. J. (2005). Effects of client expectation for counseling success, client-counselor worldview match, and client adherence to Asian and European American cultural values on counseling process with Asian Americans. *Journal of Counseling Psychology*, *52*, 67-76.
- Kim, B. S. K., & Omizo, M. M. (2003). Asian cultural values, attitudes toward seeking professional psychological help, and willingness to see a counselor. *The Counseling Psychologist*, *31*, 343-361.
- Kinoshita, L. M., & Hsu, J. (2007). Assessment of Asian Americans: Fundamental issues and clinical applications. In F. T. K. Leong, A. G. Inman, A. Ebreo, L. H. Yang, L. M. Kinoshita & M. Fu (Eds.), *Handbook of Asian American Psychology* (2 ed., pp. 409-428). Thousand Oaks, CA: Sage Publications, Inc.
- Leong, F. T. K., Chang, D. F., & Lee, S.-H. (2007). Counseling and psychotherapy with Asian Americans: Process and outcomes. In F. T. K. Leong, A. G. Inman, A. Ebreo, L. H. Yang, L. M. Kinoshita & M. Fu (Eds.), *Handbook of Asian American Psychology* (2 ed., pp. 429-448). Thousand Oaks, CA: Sage Publications.

- Leong, F. T. K., Levy, J. J., Gee, C. B., & Johnson, J. (2007). Clinical assessment of ethnic minority children and adolescents. In S. R. Smith & L. Handler (Eds.), *The clinical assessment of children and adolescents: A practitioner's handbook* (pp. 547-576). Mahwah, New Jersey: Lawrence Erlbaum Associates, Inc.
- Li, L. C., & Kim, B. S. K. (2004). Effects of counseling style and client adherence to Asian cultural values on counseling process with Asian American college students. *Journal of Counseling Psychology*, *51*, 158-167.
- Ma, J. L. C. (2000). Treatment expectations and treatment experience of Chinese families towards family therapy: Appraisal of a common belief. *Journal of Family Therapy*, 22, 296-307.
- Matsuoka, J. K., Breaux, C., & Ryujin, D. H. (1997). National utilization of mental health services by Asian Americans/Pacific Islanders. *Journal of Community Psychology*, 25(2), 141-145.
- Mau, W. C., & Jepsen, D. A. (1988). Attitudes toward counselors and counseling processing: A comparison of Chinese and American graduate students. *Journal of Counseling and Development*, 67(3), 189-192.
- Newman, M. L., & Greenway, P. (1997). Therapeutic effects of providing MMPI-2 test feedback to clients at a university counseling service: A collaborative approach. *Psychological Assessment*, *9*, 122-131.
- Redfield, R., Linton, R., & Herskovits, M. J. (1936). Memorandum on the study of acculturation. *American Anthropologist*, *38*, 149-152.
- Rhee, S., Chang, J., & Rhee, J. (2003). Acculturation, communication patterns, and self-esteem among Asian and Caucasian American adolescents. *Adolescence*, 38(152), 749-768.
- Segall, M. H., Dasen, P. R., Berry, J. W., & Poortinga, Y. H. (1999). *Human behavior in a global perspective: An introduction to cross-cultural psychology* (2 ed.). Boston: Allyn & Bacon.
- Smith, S. R., & Handler, L. (2007). The clinical practice of child and adolescent assessment. In S. R. Smith & L. Handler (Eds.), *The clinical assessment of children and adolescents: A practitioner's handbook* (pp. 1-15). Mahwah, New Jersey: Lawrence Erlbaum Associates, Inc.
- Snowden, L. R., & Cheung, F. K. (1990). Use of inpatient mental health services by members of ethnic minority groups. *American Psychologist*, 45(3), 347-355.
- Sue, D., & Sue, S. (1987). Cultural factors in the clinical assessment of Asian Americans. *Journal of Consulting and Clinical Psychology*, 55(4), 479-487.
- Sue, D. W., & Sue, D. (2008). *Counseling the culturally diverse: Theory and practice* (5 ed.). Hobeken, New Jersey: John Wiley & Son, Inc. .
- Sue, S., Sue, D., Sue, L., Takeuchi, D. T., & Zane, N. (1991). Community mental health services for ethnic minority groups: A test of the cultural responsiveness hypothesis. *Journal of Consulting and Clinical Psychology*, *59*(4), 533-540.
- Tata, S. P., & Leong, F. T. K. (1994). Individualism-collectivism, social-network orientation, and acculturation as predictors of attitudes toward seeking

- professional psychological help among Chinese Americans. *Journal of Counseling Psychology*, 41(3), 280-287.
- Tharinger, D. J., Finn, S. E., Austin, C., Gentry, L., Bailey, K. E., Parton, V. T., et al. (2008). Family sessions as part of a child psychological assessment: Goals, techniques, clinical utility, and therapeutic value. *Journal of Personality Assessment*, 90(6), 547-558.
- Tharinger, D. J., Finn, S. E., Gentry, L., Hamilton, A., Fowler, J., Matson, M., et al. (2009). Therapeutic assessment with children: A pilot study of treatment acceptability and outcome. *Journal of Personality Assessment*, 90, 1-7.
- Tharinger, D. J., Finn, S. E., Hersh, B., Wilkinson, A. D., Christopher, G. B., & Tran, A. (2008). Assessment feedback with parents and preadolescent children: A collaborative approach. *Professional Psychology: Research and Practice, 39*(6), 600-609.
- Tharinger, D. J., Finn, S. E., Wilkinson, A. D., & Schaber, P. M. (2007). Therapeutic assessment with a child as a family intervention: A clinical and research case study. *Psychology in the Schools*, 44(3), 293-309.
- Tharinger, D. J., Finn, S. E., Wilkinson, A. D., Tamara, D., Parton, V. T., & Bailey, K. E. (2008). Providing psychological assessment feedback to children through individualized fables. *Professional Psychology: Research and Practice*, *39*(6), 610-618.
- Tharinger, D. J., Krumholz, L. S., Austin, C., & Matson, M. (in press). The development and model of Therapeutic Assessment with children: Application to school-based assessment.
- Tseng, W.-S., Chang, S. C., & Nishizono, M. (2005). Asian culture and psychotherapy: An overview. In W.-S. Tseng, S. C. Chang & M. Nishizono (Eds.), *Asian Culture and Psychotherapy: Implications for East and West* (pp. 1-20). Honolulu, HI: University of Hawaii Press.
- U.S. Census Bureau (2000). American FactFinder fact sheet. Retrieved July 18, 2009:

 http://factfinder.census.gov/servlet/SAFFIteratedFacts? event=&geo_id=01000U

 S& geoContext=01000US& street=& county=& cityTown=& state=& zip=& lang=en& sse=on&ActiveGeoDiv=& useEV=&pctxt=fph&pgsl=010& subme nuId=factsheet 2&ds_name=DEC_2000_SAFF&ci_nbr=012&qr_name=DEC_2

 000_SAFF_R1010®=DEC_2000_SAFF_R1010%3A012& keyword=& industry=
- U.S. Census Bureau (Producer). (2001, July18, 2009) 2001 Statistical Abstract of the U.S. Podcast retrieved from http://www.census.gov/prod/www/statistical-abstract-02.html.
- Van de Vijver, F. J. R., & Phalet, K. (2004). Assessment in multicultural groups: The role of acculturation. *Applied Psychology: An International Review, 53*(2), 215-236.
- Virnig, B., Huang, Z., Lurie, N., Musgrave, D., McBean, M., & Dowd, B. (2004). Does Medicare managed care provide equal treatment for mental illness across races? *Archives of General Psychiatry*, 61, 201-205.

- Winters, N., & Pumariega, A. (2007). Practice parameter on child and adolescent mental health care in community systems of care. . *Journal of the American Academy of Child & Adolescent Psychiatry*, 46(2), 284-299.
- Wolfe, M. M., Yang, P. H., Wong, E. C., & Atkinson, D. R. (2001). Design and development of the European American values scale for Asian Americans. *Cultural Diversity and Ethnic Minority Psychology*, 7, 274-283.
- Yang, L. H., & WonPat-Borja, A. J. (Eds.). (2006). *Psychopathology among Asian Americans* (2 ed.). Thousand Oaks, CA: Sage Publications.
- Yeh, M., Eastman, K., & Cheung, M. K. (1994). Children and adolescents in community health centers: Does the ethnicity or the language of the therapist matter? *Journal of Community Psychology*, 22, 153-163.
- Zane, N., & Mak, W. (2003). Major approaches to the measurement of acculturation among ethnic minority populations: A content analysis and an alternative empirical strategy. In K. M. Chun, P. B. Organista & G. Marin (Eds.), *Acculturation: Advances in theory, measurement and applied research* (pp. 39-60). Washington, DC: American Psychological Association.
- Zhang, N., & Dixon, D. N. (2003). Acculturation and attitudes of Asian international students toward seeking psychological help. *Journal of Multicultural Counseling and Development*, 31, 205-222.

VITA

Eching Ho was born in Hong Kong SAR, China. After receiving the degree of Bachelor

of Social Science from the University of Hong Kong in 2007, she entered the

University of Texas at Austin for her master degree in educational psychology.

Email: echingho@mail.utexas.edu

This thesis was typed by Eching Ho.

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