



Using a cultural and RDoC framework to conceptualize anxiety in Asian Americans[☆]



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ABSTRACT

Asian Americans are one of the fastest growing minority groups in the United States; however, mental health within this population segment, particularly anxiety disorders, remains significantly understudied. Both the heterogeneity within the Asian American population and the multidimensional nature of anxiety contribute to difficulties in understanding anxiety in this population. The present paper reviewed two sources of heterogeneity within anxiety in Asian Americans: (1) cultural variables and (2) mechanisms or components of anxiety. Specifically, we examined four cultural variables most commonly found in research related to anxiety in Asian Americans: acculturation, loss of face, affect valuation, and individualism-collectivism. We also discussed ways to parse anxiety through a Research Domain Criteria (RDoC) framework, specifically focusing on sensitivity to acute and potential threat, constructs within the Negative Valence System. Previously unpublished preliminary data were presented to illustrate one way of examining ethnic differences in anxiety using an RDoC framework. Finally, this paper offered recommendations for future work in this area.

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1. Introduction

The United States is becoming increasingly diverse and understanding differences in mental health within minority groups is critical. Asian Americans are one of the fastest growing ethnic minority groups in the U.S. (Hoeffel, Rastogi, Kim, & Shahid, 2012; Stepler & Lopez, 2016); however, their mental health remains significantly understudied relative to other ethnic groups (Vega & Rumbaut, 1991; Sue, Cheng, Saad, & Chu, 2012). Limited research in Asian American mental health may be due to the *model minority myth*, a view that Asian Americans are high achieving, well-adjusted individuals, and thus experience minimal mental health problems (Sue, Sue, Sue, & Takeuchi, 1995). More systematic research is therefore needed to identify risk factors and processes implicated in mental problems among Asian Americans.

Basic descriptive data about Asian American mental health is mixed, particularly for rates of anxiety disorders, with studies reporting conflicting prevalence rates of anxiety disorders for Asian

Americans (see review by Sue et al., 1995). Several independent, large-scale epidemiological studies report that Asian Americans exhibit lower 12-month and lifetime prevalence rates of anxiety disorders than other ethnic groups in the U.S. (Asnaani et al., 2010; Smith et al., 2006; Takeuchi et al., 2007), suggesting that Asian Americans may be relatively protected from developing anxiety disorders. However, studies with Asian American college students have consistently shown higher levels of anxiety compared to Whites (Okazaki, 2000; Okazaki, Liu, Longworth, & Minn, 2002). Additionally, research has shown evidence of an “immigrant health paradox,” a phenomenon in which U.S. born Asian Americans have higher rates of psychiatric disorders relative to their foreign-born counterparts, despite having higher socioeconomic status (John, Castro, Martin, Duran & Takeuchi, 2012; Lau et al., 2013). Taken together, these findings illustrate the difficulties in drawing firm conclusions about Asian Americans as a group and highlight the importance of identifying more meaningful individual difference factors that contribute to anxiety in Asian Americans to improve early identification strategies and targeted interventions.

The Research Domain Criteria (RDoC) initiative proposed by the National Institute of Mental Health (Insel et al., 2010) outlines a dimensional approach to understanding anxiety disorders among Asian Americans. The RDoC initiative seeks to move beyond studying single categorical diagnoses (or diagnostic classes like ‘anxiety disorders’) and identify transdiagnostic constructs that reflect more

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basic mechanisms of psychopathology as well as reflect *increased risk* for psychiatric disorders. Examining transdiagnostic constructs related to anxiety can provide objective measures of individual differences in anxiety processes and elucidate potential ethnic differences in anxiety.

In the current review, we seek to review two sources of heterogeneity within anxiety in Asian Americans: (1) cultural variables related to Asian American ethnicities and (2) mechanisms or components of anxiety. Regarding the former, this review will examine four cultural variables relevant to anxiety in Asian Americans that have most frequently been examined in the literature: acculturation, loss of face, affect valuation, and individualism–collectivism. Regarding the latter, this review will use an RDoC framework to parse the heterogeneity within anxiety by focusing on two Negative Valence constructs: sensitivity to acute and potential threat. Given the limited work thus far on ethnic differences in RDoC constructs, we will present previously unpublished preliminary data to illustrate one method of parsing anxiety by its mechanisms. Lastly, this review will discuss and propose several recommendations of ways to integrate cultural research into an RDoC framework.

To conduct this review, literature searches were conducted using PubMed, Web of Science, and PsycINFO. Initial search terms included “Asian,” “Asian American,” “anxiety,” “acculturation” and “culture.” Subsequent literature searches included substituting “Asian” and “Asian American” with individual Asian ethnicities as well as author searches using the names of authors found in the articles from the initial search.

2. Heterogeneity of Asian Americans

Institutions such as the National Institutes of Health (NIH, 2016) and the American Psychological Association (APA, 2003) have proposed ethnicity as an important individual differences variable in research and clinical work. Ethnicity is frequently operationalized as the categorical group that an individual belongs to based on cultural background variables such as language, beliefs and other contributors to one’s cultural *identity* (Helms & Talleyrand, 1997). However, this definition fails to fully capture the multi-dimensional nature of ethnicity and, depending on how it is operationalized, can conflate ethnicity with race (a term generally used to classify a person based on their outward appearance (Helms & Talleyrand, 1997; Jensen, 1980; Phinney, 1996)). The overlap with race is problematic as there is little evidence to suggest that observed traits such as skin color or facial features accurately define distinct racial groups (Yee, Fairchild, Weizmann, & Wyatt, 1993). Thus, when race or ethnicity is used in psychological research, the field is often left with highly overlapping, imprecise variables with limited explanatory power.

Importantly, Asian Americans are a heterogeneous group that encompasses many ethnic groups, languages, nativity, and countries of origin. This heterogeneity makes it difficult to draw conclusions about Asian Americans as a unitary group. Instead of studying each subgroup independently (e.g., Korean-Americans, Chinese-Americans, etc.), it may be more fruitful to examine socio-cultural variables that can be studied across all (or at least many) subgroups of Asian Americans. This approach also would allow for the study of how ethnic identities, which can be fluid (Tsai & Fuligni, 2012), change as a function of experiences and time. In other words, instead of assuming common cultural values or identities within ethnic groups, it is likely to be more beneficial to directly assess particular cultural variables related to ethnicity that may play a role in anxiety-related phenotypes among Asian Americans. In the next section, we review the literature on four cultural variables related to anxiety among Asian Americans – acculturation, loss of face, affect valuation, and individualism–collectivism. While this is not a comprehensive list of cultural variables that relate to anxiety,

they are the ones most frequently investigated in the literature on Asian Americans and anxiety.

2.1. Acculturation

Acculturation, the process of adopting the cultural practices of the host society (e.g. language, beliefs, behaviors) and the internalization of cultural values (Schwartz, Unger, Zamboanga, & Szapocznik, 2010), is one factor that may contribute to mixed findings regarding the prevalence of anxiety among Asian Americans. Evidence from epidemiological surveys support the potential relationship between high acculturation to U.S. culture and increased rates of anxiety in Asian Americans. Asian Americans who were born in the U.S. (and are thus more acculturated to U.S. culture) demonstrate a two-fold increase in anxiety prevalence relative to those born outside the U.S. (Breslau & Chang, 2006). Additionally, age of immigration and duration of residence in the U.S. have been shown to lead to increased risk for anxiety (Breslau & Chang, 2006). Furthermore, U.S.-born Asian Americans are more likely than their immigrant parents to have anxiety disorders and other forms of psychopathology (Takeuchi et al., 2007). These data are consistent with the phenomenon known as the “immigrant health paradox,” in which U.S.-born Asian Americans demonstrate higher rates of psychiatric disorders relative to their foreign-born counterparts, even when controlling for socioeconomic status (John, Castro, Martin, Duran & Takeuchi, 2012). Additionally, studies that have reported higher rates of anxiety in Asian Americans have largely relied on samples of Asian American college students (e.g., Lau, Fung, Wang, & Kang, 2009), who tend to be more acculturated to the dominant U.S. culture than the general Asian American adult population.¹ Taken together, studies suggest that acculturation may be an important feature among Asian Americans that leads to higher rates of anxiety.

Although prior research has indicated the potential link between high acculturation and increased anxiety in Asian Americans, it remains unclear why this association exists. Research on ethnic differences in anxiety rarely measures levels of acculturation directly (and if so, typically do so with convenience rather than nationally representative samples), making it difficult to assess the specific effect of acculturation. Similarly, the relationship between acculturation and cultural variables specific to Asian American populations needs further examination. For example, differences in cultural values and norms may help explain the relationship between high acculturation to U.S. culture and higher levels of anxiety. Thus, examining potential pathways and mechanisms between acculturation and anxiety may be critical in understanding mental health disparities for Asian Americans.

2.2. Loss of face

One phenomenon unique to many Asian cultures is loss of face (LOF; Zane & Yeh, 2002). LOF has been defined as a loss of social image and social worth (for the self and others) that is garnered based on one’s performance in an interpersonal context. LOF can occur when one acts outside of the expected social norm, or under conditions of perceived criticism, ridicule, and non-cooperation

¹ There are several possibilities as to why Asian American college students are more acculturated to U.S. culture than the general Asian American population. First, most universities and colleges in the U.S. have entrance requirements (e.g. ACTs/SATs, admissions essays) that necessitate a certain level of proficiency in English, and language is a major component of acculturation (Schwartz et al., 2010). Second, U.S. colleges and universities frequently model Western thought, culture, and tradition (e.g. democratic student government, encouragement of independent thought), which implicitly (or explicitly) encourages acculturation to western culture.

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