ABSTRACT: On the basis of personal experience and understanding of the Chinese culture as a native of the People's Republic of China, the author gives some of the reasons why Chinese-Americans under-utilize mental health facilities and addresses issues that might arise in marriage and family therapy with people from China. Sub-cultural differences and variables such as the place of origin, intra-racial or inter-racial marriage, that need to be considered in the assessment phase are stressed, along with treatment interventions that are or are not culturally compatible. Behavioral, structural, and brief therapy models are recommended. The experiential model should be used with caution with Chinese clients.

In the past two decades, for various historical and political reasons, many Chinese have immigrated to the United States. They constitute one of the major minority groups in the US. Yet compared with the black and Hispanic minority groups, little study has been done on the family relations and dynamics of American-Chinese families.

Due to the lack of research-based information and the misleading descriptions of Chinese families provided by the media, both lay and professional persons often have many misconceptions about Chinese
families. They frequently consider Chinese families either mysterious, or as a "model minority" which is very self-sufficient and not in need of social support or mental health service. Yet a study done by Sue and Sue (1974) on Minnesota Multiphasic Personality Inventory (MMPI) comparisons between Asian-American and non-Asian university students showed that Chinese and Japanese students possessed more pronounced MMPI scale elevations and exhibited problems involving somatic complaints, family discord, and social introversion, but under-utilized clinic services.

As a result of lack of information, mental health professionals often find it difficult to provide services to the Chinese families who apparently need help. The Chinese families in turn frequently feel neglected by the social service and mental health institutions and complain that American professionals do not understand the stress of those who grew up in an oriental cultural background.

A stunning and highly publicized example occurred in January, 1991, when a Chinese mother in Los Angeles committed suicide and killed her three sons and her daughter by driving her car into the ocean. All her children had been considered excellent students and the family had been considered a model family in the community. This mother had lived in the US since age 15 and had never adjusted to the society. She had been to psychologists and complained that they did not understand her problems as a Chinese.

This paper is based on the author's personal experiences and understanding of the Chinese culture as a native of the People's Republic of China (PRC), not on empirical data. It is not intended to be a recipe but an attempt to draw attention to the special issues which arise when American therapists work with Chinese families.

CUTURAL DIFFERENCES: ALL CHINESE ARE NOT ALIKE

When doing therapy with Chinese families, special attention should be paid to the subculture differences of the Chinese. Variables that need to be assessed are place of origin, length of residence in the US, education level, social economic status, degree of assimilation, intra-racial or inter-racial marriage, and voluntary or court-ordered therapy.