



Chapter 8

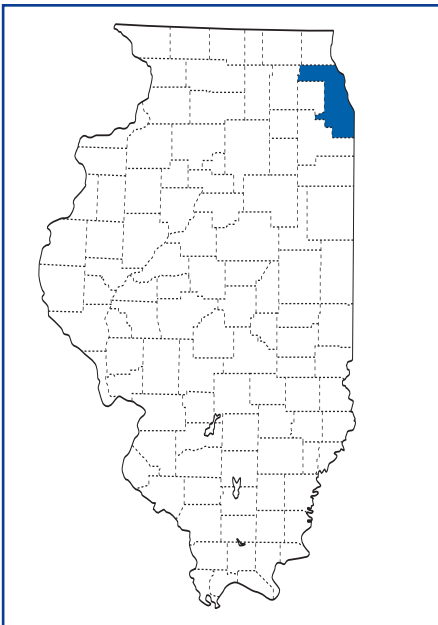
Building Community-Based Connections with the Asian American Community

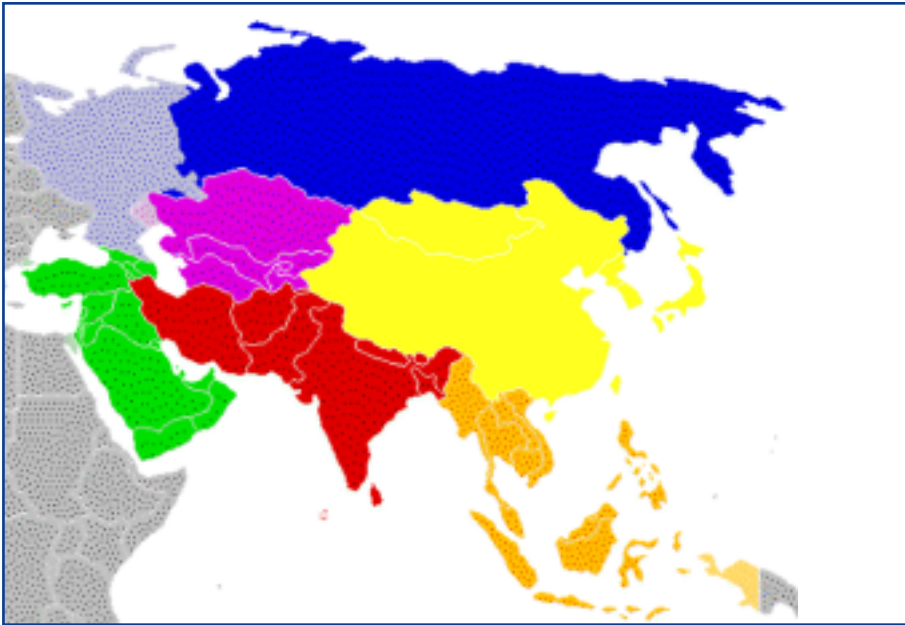


Introduction

Asian Americans in Illinois are becoming more important as subjects of research, especially in the context of vocational rehabilitation (VR). Since 2000, the state's Asian American population has grown by 39% to about 587,000 individuals; Asians comprise 10% of Cook County's population (*India Tribune*, 2010). Given the size and diversity of this group, it is apparent that its cultural factors must be taken into consideration. Ignoring these characteristics does a disservice to what is now a rather large population and can be hurtful to the diverse communities that comprise it.

In general, no significant statistical database is available that focuses on pan-Asian Americans. They are often lumped together in surveys and studies as "other," a designation that prevents interested parties from drawing conclusions about the needs and strengths of individual ethnic groups (Chin, Mio, & Iwamasa, 2006). This incomplete qualification has deleterious effects on the Asian American community as a whole and, from a policy or systems perspective, can lead to a lack of initiative if this population's needs, strengths, and weaknesses are misunderstood or ignored.





The colored countries on this map comprise the United Nations' definition of Asia.

Asians Are Not a Homogeneous Group

For outreach purposes, ADOPT uses the United Nations' broader definition of Asia, which includes 48 countries, over 3.9 billion people, and hundreds of spoken languages and dialects. In each Asian country, there is great diversity that is often misunderstood and even entirely overlooked in the West. In the U.S., when large studies misidentify characteristics of the Asian American population, the harmful impacts can be far-reaching and long-term because government policy is often crafted from such studies. Because culturally adapted outreach and VR services are also based on demographic characteristics, inaccuracies may affect people's quality of life and work.

The Impact of Race on Research

The first step in promoting culturally competent outreach in a research setting is understanding one's own biases, values, and culture (Palafox et al., 2002). Service delivery and policies should incorporate pan-Asian cultural norms and values; however, several key differences between Western and Eastern research styles are currently preventing the attainment of this goal. For example, the East often prefers knowledge that is passed down orally from respected elders within the community. Traditionally, only such “gatekeepers” could maintain specialized knowledge (e.g., methods of healing, coping or rehabilitation) and could not share it freely.

This lack of free flow, which is part of the Asian American cultural heritage, may present conflicts with dominant Western paradigms. Some research studies contain fatal design flaws such as comparative bias. In studies with this shortcoming, Asians are often compared to Whites, which creates artificial population representations and characteristics that exclude linguistic and cultural factors. For example, a particular characteristic found to be different in Asians and Whites would be discounted as an inherent trait, and a proper explanation (based on bio-psychosocial factors such as level of education) would not be found. In short, differences are not always deficiencies but are too often interpreted as such.

Among Asian Americans, within-group differences are often greater than between-group differences.



Unique Considerations

One unique facet of minority research is that within-group differences are often larger than between-group differences (Sue & Sue, 2002). The immigration status of subjects must also be considered because a first-generation immigrant has a different experience and milieu than an established fourth-generation member. As mentioned previously in this section, disaggregated Asian data are critical but lacking.

Two key criteria should be used in comparisons across cultural groups (Sue, Kurasaki, & Srinivasan, 1999). First, it's important to ensure that translated measures have the same meanings across all languages, which means that translations should be done by native and trained or certified speakers of both the language of origin and the language of translation. The second important consideration is metric equivalence, which takes into account the reliability of test scores across populations. When a doctor asks a patient how the pain is on a scale of 1 to 10, for example, a Buddhist may respond differently from a Hindu based on cultural meaning of pain alone, without bringing individual differences into the equation. To counteract this issue, multiple scales should be used.

Transitioning to Community-Based Work

Because community participation is often a unique and important feature of minority-based projects such as ADOPT, providers and researchers must recognize the presence of bias in their actions as they work with the community. Local researchers in sync with a particular community should be involved as often and as much as possible, and results should be discussed with the participants whenever possible to obtain insider insight. In other words, community-based research should go beyond community outreach by allowing community members to participate beyond simple data collection and to be true stakeholders in the initiative.

Introducing Community-Based Initiatives

Community-based participatory research (CBPR) and service delivery is the combined result of unique considerations: it involves key stakeholders in the community, who serve as active project members. ADOPT champions this research method through success by example. CBPR is important in valuing the role of participants for their accumulation of methodological knowledge. Not only does CBPR improve the strengths and resources of a community, it also provides a long-term mechanism for sustaining change and building capacity. It is particularly useful for studying Asian Americans because of their tendency to live in ethnic communities or enclaves.

The Chicagoland communities in Chinatown, Devon Street, and Argyle are prime examples of this tendency. Most studies employing CBPR as a research tool focus on specific ethnic communities. For Asian-specific research, California is most commonly studied, followed by New York City, Massachusetts, Hawaii, Seattle-Tacoma, Houston, Philadelphia, the District of Columbia, and Chicago (Myers, 2000). ADOPT's most frequently used methods of community engagement included consulting with and getting feedback from community representatives, as well as partnering with community-based organizations (CBOs), other stakeholders, and Asians with disabilities. A formal advisory board composed of people from the community is also helpful, as is involving community members in setting the research question and monitoring outcomes.

ADOPT recommends that VR professionals/counselors take the following key steps when conducting CBPR, as proposed by Myers (2000):

- Create an equitable partnership throughout the research process.
- Identify gatekeepers.
- Build in time to nurture partner relationships.
- Support co-learning relationships.

Generating Community Stakeholders

Although working with partners is critical, it may be difficult for a community to actively contribute to the project. Therefore, efforts must be made to find ways to encourage participation. In the current economic climate, CBOs likely operate on low budgets. Their time is precious, so their contributions should be accepted with grace and appreciation. In working with local partners, researchers often ignore sustainability and policy change.

Research initiatives can play a critical role in forming ties to the community; if they become permanent practices, all the better. Given grant-funding issues, however, such permanence is often an illusion. Nonetheless, steps should be taken to ensure sustainability as much as possible by encouraging partner agencies to include disability in their existing work practices. Policy change should also be sought when research projects discover systemic issues that are beyond the control of community members and stakeholders.

Challenges and Barriers to Successful Outcomes



Partnership with communities, especially predominantly Asian ones, involves grassroots outreach and direct engagement.

In working with the Asian American community, VR counselors may encounter some unique challenges. Language and culture pose the biggest barriers. "A language" or "a dialect" spoken by one group in a country may not be understood by those in a neighboring province or state (India is an example). Cultural norms influence decisions and dialogue, which may further obfuscate outcomes.

The focus and objectives of partner CBOs can make a big difference in research outcomes by enhancing the research findings with their knowledge of cultural issues and beliefs. Immigration status can impose limitations on CBPR studies, because a "bridge person" may need to become involved with those who are undocumented or forced to return to their home countries.

Last, these studies lack generalizability to other populations, even within other Asian American communities. Such particular and difficult challenges often discourage disability professionals from pursuing this line of work, which has resulted in an even greater need for CBPR interventions in Asian American communities. The studies that already outline such interventions must carefully consider sustainability and long-term policy changes as well.

CBPR methodologies can also be applied to core VR concepts; they are intended as a natural addendum to any project. CBPR has its challenges within VR teams, too. Resistance, defined as "the failure to recognize bias and tendency to challenge the legitimacy of multiculturalism," can slow service delivery efforts (Chin, Mio, & Iwamasa, 2006).

Reasons for objections to research results include: the fact that cultural differences are hard to pinpoint; guidelines for pinpointing are not specific; cultural competency cannot be understood because a baseline understanding of the prevailing cultural norm is required; and requiring cultural competency is reverse discrimination.

Responding to subscribers to such arguments is difficult. People with these views, however, should acknowledge that science is not a completely objective process. For that matter, VR providers (and researchers) are compelled to study only what's relevant to their work or interesting to them as workers/scholars in their field. When culturally competent approaches to VR are undertaken, their results possess instantaneous real-world applicability.

Final Considerations

We hope the reader finds it obvious that all of these recommendations should align with the specific needs of the given research project. For example, in a study about family contributions to college, the “typical” Asian experience may simply differ from that of Whites because of the collective view of family and decreased emphasis on the individual in Asian cultures.

As a result, it may be found that Asian parents, on average, contribute more financially to the family (nuclear and extended) than their White counterparts do. This does not mean that Asians are better people, nor should it provide an argument supporting the model minority myth: it is simply a cultural difference.

Including minorities in VR outreach is not enough to achieve cultural competence within service systems such as DRS; it is also critical to include Asian Americans in sampling methods, especially when designing sample tools. Ethnic responses vary in surveys because the way information is presented within the question can result in different answers.

Care must be taken to ensure that the survey is readable, understandable, simple, unambiguous, and inoffensive. If findings are presented during the course of the project in focus group discussions, case interviews, and secondary analyses of VR data, results are enhanced by community participation. ADOPT has taken these views and models into consideration in its outreach efforts; we hope that you will too.



Engagement with local Asian businesses, community members, faith-based organizations, and chambers of commerce can encourage Asian American communities to promote disability awareness.

Cultural Competency Is an Ethical Obligation

Ethical considerations are highly important because they are the research industry norm. The APA Ethics Code, which was last revised in 2002, indicates that psychologists and other disability professionals must make attempts to be culturally competent providers of care, as should VR counselors. This role clearly extends beyond disability professionals to researchers as well. Awareness, sensitivity, and willingness to change go a long way in achieving cultural competency in research, service delivery, and policy. ADOPT has revealed an urgent need for such transformations within DRS; we hope that similar projects will sprout up around the world in the coming years.

Chapter 8 References

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