

## **VALUE DIMENSIONS IN AMERICAN COUNSELING: A TAIWANESE-AMERICAN COMPARISON**

LICHIA SANER-YIU and RAYMOND SANER-YIU  
*Columbia University, Teachers College, New York*

### **Abstract**

This paper is a discussion of prevailing American value dimensions in counseling theory and practice in general and a comparison of Taiwanese-Chinese and American counseling value dimensions in particular. Whereas most studies on cross-cultural issues to date have focused on American majority-minority value conflicts, this paper discusses a new level of value conflict, that between cultures, between nations.

Part I discusses differences in cognition and affect between American and Taiwanese-Chinese. We have found that despite decades of American influence on Taiwanese culture, strong value differences persist between both countries, which leads us to believe that culture values are non-negotiable, structural elements of human existence. These basic differences in values influence perception, cognition, and behavior of American and Taiwanese culture bearers and result in predictable cross-culture conflicts.

Part II presents a conceptualization of culture values and further discusses the American values embedded in counseling practices. To understand this influence we have identified (using Geert Hofstede's four culture value dimensions) cultural characteristics unique to Americans and Taiwanese-Chinese.

Part III specifically discusses the impact of American individualism on counseling theory, and how the strong American belief of the universality of individualism can lead to an inability to validate collectivist cultures.

We conclude by suggesting that more longitudinal and historic analysis could generate more in-depth information about culture values. This in turn could make a truly international and inter-cultural theory and practice of counseling a more likely possibility.

## Introduction

The goal of our presentation is to address the value dimension of American counseling theory and counseling practices. We will discuss how hidden or unaware values could influence the assumptions we all might have regarding our understanding of mental health and regarding the ways we work with non-American clients.

In the past, discussions on cross-cultural counseling focused primarily on the stereotypical perceptions that American counselors and American minority clients might have vis-à-vis each other. These studies have investigated the extent to which biased perceptions could hinder the counseling relationship and to what extent such barriers could be overcome via cross-cultural awareness and culturally sensitive techniques and methods (Johnson and Vestermark, 1970; Bloombaum et al., 1968; Anant 1972.)

Some of the studies focused on the difference in psychological mindedness between majority and minority groups. Minorities were found to be less psychological minded, less available for intrapsychic processes, and therefore less fit for counseling and psychotherapy (Calia 1966).

The majority-minority issue is further complicated since American therapists prefer young, attractive, verbal, intelligent and successful clients (Schofield's YAVIS syndrome, Schofield 1964) who are motivated toward seeking and getting help, an attitude Wolkon and Moviwaki (1973) found positively correlated with social class. In other words, YAVIS type clients from middle and upper class backgrounds show a more positive orientation toward counseling, and are more likely to receive it, since they fit the ideal client profile of the average American counselor or therapist.

Majority therapists prefer majority clients and vice versa. This is further reinforced by what Kessel and McBrearty (1967) called the importance of matching therapists and patients in terms of values. Similarity of values increases interpersonal attraction, effective communication, and influence of therapist over patient. Since values seem also correlated with ethnic background (Szalay and Deese, 1978), it is easy to understand why Caucasian middle-class therapists and counselors end up with Caucasian middleclass clients and patients. They match better due to similar values and similar socioeconomic and ethnic backgrounds.

A majority-minority match creates value tensions that could impede the therapeutic process. Asian American clients for instance terminate mental health services prematurely much more frequently than white clients (Sue, 1977). The value clash and the socio-economic tension increases even more when American therapists meet Non-American clients and vice-versa.

The reason for this increase in value conflict lies in the different level of interaction. Most studies on cross-cultural issues so far have focused on American majority-minority value conflicts. A different conflict level exists when Americ-

ans interact with non-Americans as in the case of an American client being treated by a Taiwanese-Chinese counselor in Taipei or a Taiwanese-Chinese client being treated by an American counselor in the United States. This new level of value conflict between cultures, or between nations, is the focus of this paper. We will discuss this influence of nation-values on psychological theory, and particular, the effect of American values on counseling theory.

### **Part I: Differences in cognition and affect between American and Chinese in general and Taiwanese-Chinese in particular**

Despite several decades of American influence on Taiwanese culture, strong value differences persist between both countries, which makes us believe that culture values are non-negotiable, structural elements of human existence. Different coping mechanisms, different role definitions of client and counselor and different expectations regarding outcome of counseling services exist. These basic differences in values influence perception, cognition and behavior of both culture bearers and result in a predictable cross-cultural conflict.

Kleinman (1980) writing on the cultural construction of illness states:

... our model states that affects occur as universal psychobiological states, but that they are cognized before they take on the form of perceived, felt, labeled, and valued experiences recognized as emotions. The individual learns to employ culturally constituted cognitive coping mechanisms for managing affective experience. Culture has its major influence on affects, therefore, through the influence of beliefs and norms on cognition.

Different cultures engender different cognitive coping processes, which in turn influence the way people experience and live reality. Different cognitions result in differently experienced affects. These different cognitions might actually contribute to the experience of culture idiosyncratic affects. Kleinman writing on Taiwanese-Chinese states:

Depressive feelings, then, are not simply suppressed by Chinese and expressed by Americans, but rather are different feelings.

Taiwanese-Chinese culture for instance values interpersonal relations, familial bonds, and group identification. Individual expression of feelings are disvalued. As a result of such a value preference, Taiwanese Chinese lack the experience of precisely defining, labeling and communicating affects. Pain and discomfort is cognized and communicated as somatization, externalization, and situational relativism. A Taiwanese-Chinese client will communicate his or her state of being via descriptions of internal bodily functions. Effective treatment within a Taiwanese-Chinese context would have to take the bodily reality of illness into

consideration, accept it at face value and focus on biological concerns as well as on interpersonal and familial relationships. Therapeutic effectiveness would therefore be evaluated on the basis of improvement of biological signs and symptoms as well as on the betterment of relationships.

Americans on the other hand value the expression of feelings and the communication of individual characteristics. Familial, ethnic, and religious affiliations are downplayed if not disvalued. Americans verbalize their distress. Psychologization, differentiation, and internalization are culturally encouraged ways of experiencing life. Americans learn early how to label experiences with psychological and existential idioms. Treatment within an American context would therefore focus on internalizations and the expression of feelings and therapeutic effectiveness would largely depend on the client's own personal-existential meaning and self-evaluation. In general, Americans feel good or bad, Taiwanese-Chinese are sick or healthy.

Marsella (1981) further elucidated the difference between Chinese and Americans. He suggests that 'psychologization' in the contemporary West and 'Somatization' in the traditional Non-Western world are brought about by a series of psychocultural dichotomies such as: Diffused versus individuated self-structures, metaphorical versus abstract languages, imagistic versus lexical mediations of reality, subjective versus objective definitions of reality boundaries, externally perceived loss of control versus internally perceived locus of control, and use of linear versus non-linear causal thinking.

Chinese accordingly tend to have diffused self-structures, talk in metaphoric languages, and cognize in imagistic mediations of reality. Chinese reality boundaries are defined subjectively, the locus of control is perceived externally, and logic is characterized by non-linear, circular structures.

Kleinman and Marsella emphasize the influence of cognitive processes on the shaping of affects. A cultural difference exists between Chinese and Americans in terms of quality and intensity of secondary (cognized) affects. Once affective experiences are cognized and labeled as for instance 'anger', 'sadness', or 'huo-chi-ta', the affects differ for Chinese and Americans. Thus the labeling of clinical phenomena according to American Western constructs introduces confusion, if not cross-cultural conflict.

American values are implicit in counseling theory constructs and explicit in the practice of American style counseling. Values are not culture-free. They reflect specific cognitive processes, coping mechanisms, and communication style.

## **Part II: A conceptualization of cultural values in general and of American value embedded in counseling practices in particular**

From the previous discussion, we suggest the following two conclusions:

1. Affective disorders are strongly influenced by culture variance. For instance, masked depression with somatization in Chinese patients may not represent substitution or displacement of a universal dysphoric affect, but represent rather a totally different type of affect altogether, an affect type that Kleinman suggests to classify as vegetative state disorder.

2. Cognitive coping mechanisms influence experience, cognition, and communication of affects. Cognitive coping mechanisms in turn are influenced by culture norms and values. Chinese clients for instance focus on relationship issues, and kinship concerns not because of an avoidance of intrapsychic process but because their experienced reality is relational, situational and not atomistic, existential.

In order to understand how much American values influence existing counseling theories and practices and how much these in turn influence the cross-cultural counseling process, we need to identify the cultural characteristics that are unique to the American and Taiwanese-Chinese context. A pioneering effort in identifying culture values across many countries has been offered by Geert Hofstede (1980). Hofstede's extensive empirical data showed value difference on four culture dimensions. The four culture value dimensions are: power distance, uncertainty avoidance, masculinity versus femininity, and individualism versus collectivism. We will briefly summarize the features of Hofstede's dimensions and highlight some of the cross-cultural differences between Taiwanese-Chinese and American values.

*Power distance* indicates the extent to which a society accepts unequal power distribution within its institutions. In cultures with a high power distance, hierarchy is viewed as an existential given. Cultures with low power distance prefer a power distribution that is based on convenience and negotiable role assignments. Taiwanese score high on power distance, Americans on the contrary score medium when compared with the average score of the 40 countries surveyed. Taiwanese-Chinese clients expect their counselors to be dependable authority figures. Collaborative or participatory counseling, which is effective in America, is incomprehensible and less effective in a Taiwanese-Chinese context.

*Uncertainty avoidance* indicates the extent to which a society feels threatened by ambiguous and uncertain situations. Societies with high uncertainty avoidance are characterized by formal rules, by a belief in expertise and absolute truths. Cultures with high uncertainty avoidance are more anxious, more aggressive, more hard working and less willing to take risks. Taiwan and the United States scored one Standard Deviation above and below the average country mean. Taiwanese-Chinese are higher on uncertainty avoidance. During counseling sessions, Taiwanese prefer a structured interpersonal process to an open ended and less directive counseling style, which fits more with an American counseling situation.

*Masculinity versus femininity* relates to performance and quality of life, respec-

tively . Taiwanese prefer femininity values. They are more concerned about relationships with other people than about performance. Sex role differentiation is less important and career ambitions are less pronounced. Americans score higher on the masculinity role of this dimension. Performance, money, things, and assertiveness are valued higher than human interdependence and quality of life. American clients might search for the right therapist or counselor, 'get what they want', Taiwanese clients in contrast share their concerns and worries with very close friends and family members only, and follow up their suggestions rather than pursue their own leads.

*Individualism versus collectivism* relates to the dynamic tension between individual and society. An individualistic society provides a loosely knit social framework within which people are expected to take care of themselves. The opposite is true for a collectivist society where people are part of groups. Identity is therefore based on either the self (individualist) or the group (collectivist). Taiwanese and Americans differ most strongly on this dimension. Of all the 40 countries, America is by far the most individualistic culture. Taiwan on the other hand scores on the other pole of the continuum. Taiwanese are collectivist. Building on Kleinman's and Hofstede's work, we assume that American individualism influences an American client's perception, cognition, and expression of affect in a positive sense since American counseling practices provide a mirror effect for its culturally congruent clients. In the same way of reasoning, we assume that collectivist Taiwanese would respond better to counseling practices that reflect their own Taiwanese value preferences. On the other hand, a cross-over of American counseling theory and practice with Taiwanese clients and vice-versa results in a culture incongruence that could create irreconcilable cross-culture confusion and conflicts.

### **Part III: Impact of American individualism on counseling theory**

American culture has influenced psychology, psychotherapy, and counseling to such an extent that it has become almost impossible to speak of an internationally valid theory of counseling. Instead, we find ourselves in a situation where American contributions are taken almost as prototypical truths. The basic assumptions are rarely questioned or even less challenged.

Ardila (1982) points in a similar direction:

Contemporary psychology shares all the characteristics of Anglo-Saxon culture: emphasis on adaptation, emphasis on function more than structure, dynamism, operationalism, evolutionism. Psychology is conceived in English, is written in English, and for the most part considers problems relevant to Anglo-Saxon culture, specifically to North America.

Using Hofstede's data and concepts, as a means to analyze contemporary counsel-

ing and psychotherapy made in the United States we can identify culture bias implicit in current practice. Individualism will be the focal point of our discussion here, since the U.S.A. shows the world's strongest score on the individualism dimension. We will concentrate on five of the eleven features of Hofstede's individualism dimension to illustrate the embedded bias, namely, 'I' consciousness, self-orientation, universalism (value standards should apply to all), individual initiative and achievement (leadership ideal), and right to private life and opinion.

*'I' consciousness:* Individualism stresses 'I' consciousness in contrast to the 'we' consciousness of collectivism. It was in the United States where ego-psychologies found their most receptive environment. This was partially due to the dominant influence of American Behaviorism but also partially due to the unique situation of the 'melting pot' where past identifications had to be dropped in favor of a new 'here and now' reality. The overemphasis of 'I'ness might be responsible for the increases in borderline and narcissistic personality disorders, since the value put on independence interferes with the need for genuine human dependence also called intimacy. American counseling encourages 'I' consciousness through its emphasis on the client's expression of feelings, which we have shown above is culture-bound.

*Self-orientation:* Maslow's self-actualization theory tremendously influenced clinical and organization psychology in the United States. According to his theory, people naturally strive for the highest need, namely self-actualization, provided the lower needs are met. Little is said about moral choices and even less is said about collective goals of the actualization of collective community needs. Since higher needs can only be achieved once lower needs have been satisfied, it comes as no great surprise to find few self-actualizers among the lower socio-economic classes. Maslow's mistake was to disengage the individual's development from his larger environment. YAVIS type clients promise more self-actualization to counselors of similar socio-economic and ethnic background. Both are upwardly mobile, intent on leaving Maslow's need level of belonging behind themselves. Many non-American societies though rank social needs higher than individual achievement needs. Few counselors trained according to United States value orientations would accept social needs on an equal basis as self-actualization needs.

*Universalism (value standards should apply to all):* Cultures with a strong sense of individualism, such as the American culture, project their exaggerated sense of self onto the rest of the world. The assumption is that what's true for me is also true for you. American values lose their culture relativism and instead are turned into false universalisms. Collectivist cultures, in contrast, perceive clear boundaries between 'us' and 'them', indicating a tendency toward particularism. The tendency toward universalistic values might explain the difficulties of cross-cultural psychology. How can an American counselor see a difference when the difference is perceived as a simple variation of the same?

*Individual initiative and achievement (leadership ideal):* American culture strives on the image of individual initiative. One does one's own thing may that be via free trade, free speech, or free lifestyle. To be a follower can be equated with being a loser. The belief is prominent that everybody could and should become president or a millionaire if such opportunity should arise. The spirit of individualism has also affected the helping profession. There is no country in the world with roughly 100 separate different schools, institutes, groups etc. of therapy and counseling as was counted for in the United States (Harper, 1959, 1975). Collectivist cultures value belonging and membership with an organization. To help the organization (family, clan, company, country) achieve its goal is as fulfilling to a Taiwanese as starting his own company or school is to an American. Many Taiwanese relate to the organization within which the counselor offers his services, as much as they relate to the counselor herself. Many non-Taiwanese counselors expect their Taiwanese-Chinese clients to demonstrate initiative without realizing that they are projecting American values onto their client.

*Right on private life and opinion:* This feature of Hofstede's individualism dimension relates to self-disclosure. According to American understanding, self-disclosure indicates an individual's ability of letting himself be known. Jourard (1971) states that self-disclosure, especially disclosure of feelings, correlates highly with mental health. In other words, the ability to be transparent is understood to be essential for an individual's psychological well being. To disclose oneself in America has a different meaning than in Taiwan. In an individualistic society, such as the American society, every one is entitled to his right to express personal opinions and act on them. The same is not true for a collectivist society.

In a collectivistic society, harmonious arrangement of one's interpersonal relationships is considered more important than one's psychological status (Kleinman, 1980). During their primary socialization, individuals in Taiwan learn that their personal feelings, especially strong and negative feelings, should not be openly expressed (Hsu, 1949, 1971; Tseng and Hsu, 1969; Solomon, 1971).d

In collectivist cultures, group needs intrude open individual needs. Out of the need to have some distance, Taiwanese for instance would prefer to keep their thoughts and feelings to themselves instead of making them public. American counseling practices emphasize the importance of self-disclosure whereas the cultural norms in Taiwan demand the opposite.

Looking at the relationship between assimilation and self-disclosure, Yiu (1978) has found that Chinese-American college students disclose less than their Caucasian counterparts regardless of their degree of assimilation. Her findings support the contention that Chinese-American students prefer a structured, directive, and task oriented counseling approach rather than an affect oriented, reflective, and psychodynamic form of counseling. The same is even more true for 'authentic' Taiwanese-Chinese.



## Conclusion

We have seen that differences in culture are linked with differences in cognition which in turn are linked with differences in experiencing and expression of affects. One of the major culture differences between America and Taiwan e.g. lies in the polar opposition between American individualism and Taiwanese collectivism. We have assumed so far, that culture values remain unchanged over time. Such a static perspective is insufficient and needs further investigation of the cognitive coping mechanisms and value characteristics which have changed within the larger Chinese cultural environment.

Singaporean and Hong Kong Chinese, for instance, show a much lower uncertainty avoidance score than their Taiwanese counterparts. One might speculate that recent historical developments and political climates have strongly influenced culture values. How strong these external factors are in shaping different value preferences needs to be investigated in the future.

More longitudinal and historical analysis might generate additional data that could inform us about the pliable nature of culture values. American values seem to be undergoing changes as well. Knowing more about the changes of values would let us better understand the complexity of the linkages between culture values, cognition, perception, affect, societal norms, and environmental development.

Once we know more about these linkages, we should have more accurate information about culture variables. Once we have more in depth information about culture values a truly international and inter-cultural theory and practice of counseling could then become a more likely possibility.

## Biographical note

Lichia Saner-Yiu, Ed.D., is currently a research fellow at Columbia University's Teachers College. She received her doctoral degree in counseling psychology from Indiana University. Lichia has taught at Chinese Culture University and has practiced psychotherapy in Taipei. She has founded the first, and only psychodrama training institute in Taiwan for counselors and trainees who are interested in learning Gestalt Therapy and psychodrama. Her work in utilizing large audience (up to 1000) sociodrama has made significant impact on the well-being of the handicapped and their families. She has also published books on *Gestalt Therapy*, *Introduction to Psychodrama*, and *How to be A Counselor*. She also published many articles in Taiwanese psychological journals.

Raymond Saner-Yiu, Ph.D., is a Swiss Psychologist who works in private practice in New York City. Raymond is an associate member of the New York Institute for Gestalt Therapy and has been an associate professor at Lesley College's

graduate school for counseling psychology and expressive therapies in Cambridge, Massachusetts. He has written in *Gestalt Theory Journals* on the cross-cultural factors of counseling and psychotherapy and teaches Gestalt Therapy workshops in Southeast Asia and Europe.

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