Summer 2021

ASIAN AMERICAN PSYCHOLOGIST

The official newsletter of the Asian American Psychological Association



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Asian American Psychological Association Newsletter Disclaimer

Asian American Psychologist is the official newsletter of the Asian American Psychological Association (AAPA) and is published three times annually to provide a forum to inform members of news and events.

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PRESIDENT'S COLUMN

NELLIE TRAN, PH.D. AAPA PRESIDENT (INTERIM)

It is with such mixed emotions that I find myself writing this presidential column. Two concepts that are perpetually on my mind these days are "imposter syndrome" and "self-care," both highly individualistic concepts that seem to be making life more difficult than I care to admit. When we succumb to needing to feel worthy or good enough to serve our community and to do the work, I fear that we are focusing on the very people who are least deserving of our time and mental energy. We lose sight of the community that surrounds us, cheering us on, and knowing our success serves us all. I'm remembering that our founders and authors of our bylaws intended that the responsibility of upholding our AAPA would never fall on the shoulders of few, but rather that we would all feel both ownership and belonging and have a desire to show up for one another. This has been an unprecedented year in countless ways, and we continue to set the precedence!

As though the global racial and COVID-19 pandemics were not enough, I had my second child in April 2020 and then came into the AAPA presidency the following year. To say that these have been difficult times would be an understatement. It is difficult for me to find the right words to express my gratitude for all of my friends and colleagues who supported AAPA during these uncertain times. I am forever grateful for the ways that our executive committee and our elders (past, present, and those in-training) have set the stage for us to share in our vulnerabilities and strengths and to ask for help or grace in our times of need. Thank you to everyone for the space you have given me and our executive committee to work as quickly or as slowly as necessary to achieve what we can, while simultaneously attempting to maintain our own personal wellness and stability.

With permission, here's an update on our dear friend, colleague, and president, Richelle Concepcion. I thank you all for allowing me to share a somewhat ague and cryptic email in those early days when information was scarce, and we were all still trying to figure out what Richelle's recovery and our transitions would look like. I can share with you all now that Richelle had a stroke. I have been in regular contact with her during this time. She is doing well as one could

hope with much recovery left to be had. She sends her eternal gratitude for the love, support, and healing energies you all have sent. She has especially appreciated the messages through all the different media and welcomes you to continue to reach out to her in those many ways.

This past year's events bring forth the need for self-care to begin with physical and psychological care and to extend beyond the self to community care. We show up for ourselves, one another, and our community. We accept that we may come imperfect, or even a little beat up, and it's okay to give or take as one needs. I find myself missing the rejuvenating effect that our convention spaces provided me. I had not realized what an annual tradition it had become, one that my soul became accustomed to. I'm looking forward to seeing all of your whole and broken selves under the Banyan Tree at our upcoming convention.



Nellie Tran Interim AAPA President

FINANCE REPORT

JAN ESTRELLADO, AMANDA BREEN & MICHELLE MADORE CO-FINANCE OFFICERS

AAPA's Co-Finance Officers (FOs) Jan Estrellado, Amanda Breen, and Michelle Madore are happy to report that AAPA's bank accounts are in good condition. Our total combined balance from ETrade and PayPal is \$363,946.24 as of July 27, 2021. Subtracting fiscal agent accounts and AAPA Division balances, AAPA's main account has \$268,092.54 in working capital.

The FOs are pleased to share the following updates with the AAPA membership:

- **Finance Assistants.** Two graduate students, Sophia Sablan and Stephanie Ong, are currently serving as finance assistants to help with administrative tasks.
- **AAPA Convention 2021.** The FOs are working closely with the 2021 Convention co-chairs to set ticket prices and pay vendors.
- **Donations.** AAPA has been fortunate to receive generous donations recently. Because our 501(c)3 status is not yet finalized, donations to AAPA are not yet tax deductible.
- Alliance Project Funding. The FO team is working on wrapping up the fiscal portion of the COVID-19 Communities of Color (COC) Needs Assessment project, headed by Dr. Anne Saw.
- **Reincorporation.** The FOs, along with the presidential leadership team, filed federal and state paperwork (CA) to reincorporate and is in the final stages of re-establishing its 501(c)3 non-profit status. A lawyer has been retained and will file the paperwork by the end of the summer.
- **Bank account consolidation.** As soon as 501(c)3 non-profit status is finalized, Matt Lee has graciously agreed to finalize the bank account move from E*Trade to Chase Bank. This process will allow for more efficient fiscal tracking and transactions, including for division finances.
- **Increasing available resources.** The FO team is now using Quickbooks as a financial management software that will help ease the transition of information to new FOs.
- **AAPA Website Development Project.** Under the leadership of Communications Officer Dr. Ming-Che Tu, the FO team is part of the EC project team to re-vamp the AAPA website.

MEMBERSHIP REPORT

KAVITA K. ATWAL, PH.D. *MEMBERSHIP OFFICER*

Dear AAPA Members,

We are happy to announce that the AAPA Membership Team now consists of two Co-Membership Officers and two Student Membership Assistant Volunteers. Carla Pamela Cortez and Oscar Lau are AAPA's Student Membership Assistant Volunteers. They are working with Dr. Amanda Waters and Dr. Kavita Atwal (Co-Membership Officers).

Please contact us with any membership related questions or issues at membership@aapaonline.org.

Carla and Oscar have been wonderful additions to the Membership Team. Along with helping with large membership related tasks, they have led the efforts in creating new membership updates that will be sent out through the listserv. Carla and Oscar will also be reaching out to members to gather information to include in member spotlights. Look out for emails containing the first membership update, as well as requests to be featured in future updates!

AAPA's overall membership continues to steadily grow. The Asian American Psychological Association currently has a total membership count of 1,573 members. This is an overall increase of more than 70 members since April 2021. Student members continue to comprise the majority of our membership.

As a reminder, you can edit your AAPA membership through our website at www.aapaonline.org. If you are having difficulty logging into your account, there is an option to reset your password online. You can also sign up for Division memberships through your account online.

Thank you for your continuing support of AAPA!

Best Wishes, AAPA Membership Team





Ziyi Xiu is a 5th-year clinical psychology doctoral student from William James College. She is currently doing her APA internship at the Brenner Center for Psychological Assessment & Consultation and will stay on as a postdoctoral fellow. She provides neurodevelopmental and psychological assessment for children and adults from diverse backgrounds.

LOVING KINDNESS

About the art: This is a piece of art made from handmade Dongba paper by the Nakhi people of Southwest China. Because of its handmade nature. each paper is uniquely patterned with plant fibers that inspired my creation. 1 used watercolor on paper and did some final touches on an iPad. As a member of the AAPI community, I am mourning the lives lost during the COVID-19 pandemic while embracing healing through connection. My work represents a kind and loving Ox (a.k.a. the year of the Ox) extending his hoof for solidarity in the midst of turbulence. The sacred lotus symbolizes rebirth and the plum blossom behind symbolizes perseverance and hope, which are often depicted in traditional Asian paintings.

DIVISION NEWS:

DoSAA Event Series

Led by: Co-chair Dr. Sruthi Swami. (This piece is also written by Co-chair Dr. Sruthi Swami)

DoSAA has been very excited and thankful for the push from our community to talk about issues of interest to us. In March, Dr. Anjali Gowda Ferguson spoke about the relationship between stigma expectations in South Asians and the relationship to anti-Blackness and racial trauma; in May, Dr. Ami Popat-Jain led a dialogue on mental health beliefs and the impact on treatment seeking in Asian Indians; and in July, Dr. Ami Shah led a discussion on family well-being and relationships among South Asian Americans. We are excited for our future speakers and also invite those of you interested in speaking, particularly on topics related to less visible South Asian identities, to contact us. Our next event will be in September, featuring Dr. Ramani Durvasula, who will speak about narcissism and South Asians.



DoSAA Healing space: In Solidarity with the Farmers of India!

Led by: DoSAA Membership Chair (Pratima Pathania, M.S)

DoSAA has been holding a space in solidarity with the Farmers' protests in India. The farmers have been protesting at the borders of Delhi for over 7 months. The farmers are asking the Indian government to repeal the 3 farm laws that were passed last year during the pandemic. DoSAA has had 2 events so far and we hope to continue providing this space for the diaspora as our communities back in India are fighting for just and fair laws. We want to thank everyone who has participated in these conversations around farmers protests and all the sociopolitical factors related to the protests. We will soon announce our next event date. Please feel free to reach out to Pratima Pathania (Membership Chair) if you would like to get involved or have any questions about this event.

DoSAA healing space: *Grieving Together*

Led by: DoSAA Chair (Pooja Mamidanna, LMFT), DoSAA Student Representative (Himadhari Sharma MA, BSB, Doctoral Candidate) and DoSAA Co-Chair (Dr. Sruthi Swami).

This piece below has been written by DoSAA Chair: Pooja Mamidanna, LMFT

The DoSAA EC held a healing space on grief and grieving for our members and the broader community on July 19th, 2021. We came together in solidarity to support one another, to process together with the grief, loss, and trauma faced by our communities related to the Covid-19 pandemic, social injustices with hate crimes happening in the United States, as well as in other types of grief faced in our South Asian communities.

Through this event, we offered a safe space to share what is in our hearts and minds right now, to be listened to profoundly, coming together in solidarity to share our collective experiences.

Some of the themes we explored during this space were:

- 1. What is the process of grieving, and what are the Stages of Grief?
- 2. What are the different types of Grief?
- 3. What does grief look like within South Asian Cultures?
- 4. Reflected on the stigmatization and taboo of talking about Grief in South Asian Cultures and the field of academia, psychology, and mental health.
- 5. What has not been helpful during the grief process?
- 6. What has been helpful during the grief process? (Honoring our losses, people, experiences & opportunities)
- 7. We ended with gratitude meditation honoring our Grief and the healing we have gotten from this.



The DoSAA EC moderators of the Grieving Together Healing Circle.

Left: Dr. Sruthi Swami (Co-Chair) Right: Pooja Mamidanna, LMFT (Chair) Middle below: Himadhari Sharma (DoSAA Student Representative MA, BSB, Doctoral Candidate)

2021 AAPA CONVENTION CO-CHAIRS DR. MAXMILIAN TOKARSKY AND DR. CALVIN SIMS

Interview by Mele Kramer



AAPA Convention Co-Chairs Max Tokarsky, Psy.D. & Calvin Sims, Ph.D.

Thank you for taking the time to interview for the AAPA newsletter. We are super excited to have both. Thank you and welcome!

Can you talk to us about your career specialty and how you came to be this year's Co-chairs of the convention?

Dr. Tokarsky: I am a clinical psychologist who focuses on children and immigrant families. I practice in English and Spanish and

have somespecialized training in integrated healthcare and developmental disabilities like Autism and ADHD. I come from a generalist program, so I actually have clients across the lifespan. I became co-chair because I volunteered. I knew I wanted to serve, and I had the foresight to know that as I mature into my career that I will have less time to offer. I seized the opportunity, and I am finding it extremely rewarding.

Mele: Thank you for sharing. What an incredible career you have already, and we are glad you are taking on this considerable leadership responsibility as Convention lead Cochair. **Dr. Sims, can you tell us about your career specialty and how you came to be this year's Co-chairs of the convention?**

Dr. Sims: Yes! Thank you, I am glad to be here. I am a developmental psychologist. I have researched the intersection of culture and education. I am very interested in how teachers bring in their own culture within the classroom and their interactions with students of different cultures. Specifically, how teachers perceive and understand the actions and reasoning behind what children do. The research looks at how teachers reward and punish students, and their decision-making processes. I also looked at how teachers understand and interpret certain emotions students give. For instance, we know from the literature, teachers are likely to make a mistake when it comes to African American children and many interpret emotions of fear as emotions of anger. I am interested in why that happens and what we can do to mitigate and understand this better. I am also becoming increasingly interested in bi-racial identity development and how individuals understand their place in the world where they are split between two different cultures. How they make decisions on which cultures are adhered to and how they inform identity in that way. As for becoming a Co-chair, I have been with AAPA for several years now. I served on the Mentoring Committee, the Banquet Committee, and the

Volunteer Committee. I saw the call for Cochairs, and since I love the organization, I threw my hat in to be able to help the organization that has been so good to me. For some reason, they said YES! I am learning under Max's tutelage, to have a growing voice and get some "behind-thescenes" knowledge of what goes into creating the convention. He has been very patient with me, and I appreciate that.

Mele: Wonderful, and thank you both for all you are doing for sharing your backgrounds and how you became involved as Co-chairs for the convention.

Can you tell us the dates of this year's convention and the significance of this convention theme?

Dr. Tokarsky: The convention will take place Friday through Sunday the first three days of October. Our theme, "Expanding our banyan branches: Unity, inclusivity, and intersectionality in scholarship," is intended to build upon last year's theme of cultivating of the future our organization by incorporating solidarity into the issues that affect us. We talked about where we are headed in our future as we cultivate our tree, nurture through self-care, and grow into the future. We wanted to build upon that. And incorporate the idea of solidarity, while asking the questions, how do we continue to grow and expand. We also are highlighting what is happening in current events. It is not just Asian issues that are important. Everything is interrelated, which is why we chose this theme.

Thank you! This theme is important and very timely. Is there anything you would like to add Dr. Sims?

Dr. Sims: Yes, I think that a lot of individuals in and out of this organization aren't as aware of the excellent collaboration that is taking place between the Asian American community and other communities. In the 1960s, Asians were on the front line fighting for Civil Rights for African Americans. I would argue a lot of

people do not know this history. Being a part of the organization has been very important for me because as Max said, Asian issues aren't just Asian issues. They affect Black issues, Hispanic issues; and they affect the whole country. We are all interrelated. With everything we have seen within the last year in terms of movements such as Black Lives Matter and Stop Asian Hate and other such movements, it was important for us to have a Convention theme that showed this collaboration both scholarly and community-wide. For me specifically, being in this position is very important. There is a responsibility that goes with that because I want to be able to show, through the creation of this convention, that we are aware of these issues. Collaboration needs to take place for all of us to rise and get ahead. So, for me, this theme is very personal and also very scholarly.

Mele: Beautiful. Thank you both! Yes, the personal journey and collaboration is important. Having the scholars sharing their research brings clarity to the community throughout the convention. The Banyan tree is a perfect symbol and metaphor that represents growth and expansion outward. For the second year, the convention will be virtual. What do members need to know about registration and the technology to ensure they are set prior and during the convention?



Reporter/ Interviewer Mele Kramer

Dr. Tokarsky: We are all chomping at the bit to get back out into the world, but we have also significantly increased our competency in functioning in virtual spaces. Basically, if you can use Zoom, Google, and YouTube, you are all set for the convention. If you are presenting, of course, there are added tricks that may serve you, but the everyday user will be able to navigate with ease just like last year. Also, we have also switched the host of our virtual services to a company called Whova. In our experience, it is much more user-friendly, and we are excited about the upgrade. The typical user experience should remain mostly the same.

Dr. Sims: We are heavily using social media now and as we get closer to the convention we will be posting more frequently. Register early and be sure to follow us on Facebook, Twitter, Instagram, etc., As long as you know how to downloaded and update your Zoom. The Whova convention platform is user-friendly. When you register, you will receive guidance on logging in and viewing the convention schedule, sessions, and other colleagues registered into the conference. So be sure to register early!

What have you found interesting about being Co-chairs this year, and what are some takeaways to others wishing to become involved as chairs?

Dr. Sims: One of the things I have learned is that it is a very collaborative process, and there are always people willing to help you. One thing we learned from the beginning is, communication is very key to success. If you miss emails or jump ahead and the right hand does not know what the left hand is doing, it can cause problems that then cascade into bigger issues. So, I think for anyone looking to join us and help us,

communicate and be clear on what you can do, and what your limitations are, so we know from the start. That helps everyone out a lot. The second thing I learned about being a co-chair, from my perspective, is two-fold. I am learning the role in a virtual setting, but I am also looking at how this translates to when we go back to live at a venue and face-to-face sometime in the future. This is an interesting and unique perspective in this unique time. As I am learning the ropes, I don't think I knew fully how many wheels are turning behind the scenes and seeing all the hard work Max is putting in to get us going and ready for that weekend.

Dr. Tokarsky, is there anything else you would like to add?

Dr. Tokarsky: We have the Convention Co-Chairs (us), and we also have Committee Chairs. Don't be intimidated by the workload as a Committee Chair because you are splitting the work on a team of 3-5 people. AAPA is full of great people, and you will be surprised how easy they make it to do your job. If you are thinking about serving as chair of the convention, then come talk to us about it. We will tell you the truth. A tip is: Know yourself and your leadership style. You will find your growth edge whether it is being too controlling or too flexible. The job of the chair is simply to lead, NOT to do it all. Our role is to manage the moving pieces, which means we can't be in charge of everyone's else's wheels. We support each committee team. To be in this role, you have to know your leadership style and honor your personal growth edges because they will find you for sure, and you will be working through them. With challenge comes growth. I would suggest, do the committees first, which is the natural progression, so you are learning the small pieces of it before taking on the big tasks.

Mele: Thank you both for sharing your wisdom. You are both like the conductors Symphony Orchestra! Each of а committee does their part, and you are directing all the committees of the convention symphony. Thank you for sharing your insights! You two are cultivating the environment of positive collaboration. Thank you for all you do! Can you share more of the process for AAPA members wishing to get involved in the Convention committee now or in the future. and what are the committee obligations?

Dr. Sims: The process starts with an notification about mid-year email announcing our convention planning. The announcement describes what each of the convention committees are and the responsibility of the many committees. We usually have full committees filled by May. From there, we have our new committee members welcome meetings, and then have monthly meetings for all committee members. As we get closer to the convention, the meetings become more frequent to make sure everybody is on the same page. Many wheels are moving in the individual committees and the larger convention planning in committee, so everyone has to be informed and updated throughout.

Mele: So, to recap, members should be looking for the announcement email midyear and request to be on a committee. Once all the committees are selected and complete, around mid-May/June, the convention shell plan and timeline are shared at monthly meetings and the status of each committee are updated each month to ensure ongoing tasks are addressed and completed. A couple of months prior, the meetings become more frequent until the convention begins.

Dr. Sims: Yes, and I want to be clear,

this is a two-year commitment. The first year is for new committee members to learn, the following year to take on the leading and teaching role for the new members coming in. This preserves the continuity of knowledge and everyone knows what everyone is doing.

Is there anything you would like to add, Dr. Tokarsky?

Dr. Tokarsky: Yes, Next year, we are going back to in-person under Calvin's leadership. I would suggest those interested to contact us so we can begin earlier this year. We are aiming to start planning right after this convention is over for next year's convention. Starting in November and meetings by January would likely be our goal. In-person has more details such as venue, hotel, meals, and other logistical details that we don't encounter when it is a virtual convention. So, if members have experience with conventions or want to have experience working on the convention, please reach out to us at convention@aapaonline.org immediately and let us know that you are interested. We love people with enthusiasm. That is what it takes, having the enthusiasm to step in and having the heart to serve. We appreciate and welcome all volunteers wishing to join the convention committees.

Any parting messages to the AAPA community?

Dr. Tokarsky: We love you, and we hope we have given you something meaningful. The convention is a beautiful thing. Reflect on what you can give during the experience and then commit to being a part of our growing team. We have many professional members who are interested in mentorship, and you have the capacity to mentor right here on our committee. One thing I want to add is how rewarding it has been to work with Calvin. He has stepped up to his role, and he's brought good energy into it. He has stepped up to his role, and he's brought good energy into it. He has been positive the whole way through. I think Calvin and my collaboration is being reflected in the theme of the Convention. That's a beautiful thing because Calvin cares about expanding the AAPA. He cares about Asian issues, and here he is, put-in-proof! Big thank you to Calvin.

Dr. Sims: Thank you very much. This convention is truly a labor of love for Max and me. I see it as a prelude to what I hope can be even bigger energy for our proposed return to meeting face-to-face again next year. We want everyone to have a good time this year. Then after the convention ends, as Max said, we have got to get right back to work for next year. I am planning that already. We hope you get the very best from both of us and see the love, compassion, and commitment we have for AAPA at the Convention this year.

Mele: Thank you both, Dr. Tokarsky and Dr. Sims. There is no doubt it is going to be a great convention. Both of you have mutual respect for each other and a harmonious synergy. Your organization, focus your attention to detail, and the heart you both put into your work is a blessing. No doubt, it is going to be a meaningful experience for AAPA members. Thank you again for your service to the AAPA organization and for taking the time to interview today; we look forward to seeing you and our AAPA members at the convention!

About the AAPA Convention Co-Chairs:

Max Tokarsky, Psy.D. is a Clinical Psychologist from Dayton, Ohio who works in integrated primary care settings. His mother immigrated from Thailand at 17 years old and all four of his paternal great-grandparents immigrated from Poland via Ellis Island. Max decided to pursue psychology after a career in education helped him to realize he was more passionate about supporting youth in need than he was about conjugating verbs in Spanish. His professional areas of expertise are in treating children and immigrants. In his free time, he enjoys playing dodgeball, studying Bhakti yoga, and immersing himself in social and cultural connections. People are typically intrigued to learn that after undergrad at Ohio State, Max taught English in Bangkok, Thailand, and spent a month in a Theravadan Buddhist Temple as an ordained monk.

Calvin Sims Ph.D. currently works at the University of North Texas as а Developmental Psychologist. His current research interests include the intersectionality of culture and education with a specific focus on how teachers' cultural values and biases influence their teaching of and responses to minority children. Additionally, Dr. Sims is interested in Biracial identity development and how Biracial children and adolescents come to understand their unique place within their families and communities, as well as what skills they use to reconcile the different ethnic histories and values of their complex family histories. His other research interests include teacher compassion burnout and its effect on teaching, parents' socialization of hope in children, and the interaction of childhood obesity and depression in adolescents. Dr. Sims has served as a member of the Mentor/Mentee and the Banquet committees for the AAPA Convention, and this is his first year serving as Convention Cochair. Dr. Sims strongly believes that Asian issues do not affect only the Asian diaspora but have a profound on other communities impact with consequences both nationally and globally. Collaboration with our Asian colleagues is important for understanding, equality, and success for all of us.

IN MEMORY OF ALICE CHANG

A wonderful member of AAPA and an outspoken advocate for all of us

ALICE F. CHANG, PH.D.

Alice F. Chang, Ph.D., is a scientistpractitioner and founder of the Academy for Cancer Wellness, а nonprofit benefiting organization individuals diagnosed with cancer, and their relatives and friends. Chang is also the author of "A Survivor's Guide to Breast Cancer," which is both a memoir and professional guide to diagnosis, treatment and survival. She received her undergraduate degree from the University of California, Los Angeles in 1968 and earned her doctorate degree from the University of Southern California in 1973. Chang started her career in academia at the University of Arizona as an assistant professor. While serving as an assistant professor, she established the Marana Community Mental Health Clinic, which serves Yaqui Indians, migrant workers and indigent people in the rural communities around Tucson. Arizona.

Chang relocated to Kansas City, Kansas, in 1975 to become a staff psychologist and assistant professor with the University of Kansas Medical Center. While in Kansas, Chang created a model licensure law for psychologists and a continuing education criterion for licensure, which the Kansas legislature adopted and enacted into law. After 15 years in Kansas City, Chang moved back to Arizona, returning to Tucson, Ariz. with vast knowledge and expertise in the medical setting.

In addition to serving in academia and establishing a private practice, Alice F. Chang has served on numerous boards and committees. She served on the APA Council of Representatives as a state representative/ liaison from 1985 until her election to the APA Directors. She has Board of been secretary/treasurer of the council's Ethnic Minority Caucus (1990-92), treasurer of the Kansas Psychological Association (1979-85), president of the Kansas **Psychological** Foundation (1986-92) and treasurer of Div. 31 (State Psychological Association Affairs, 1994-95). In addition, she has been elected to the Board of Directors of the Asian American Psychological Association and the National Academy of Practice in Psychology.

Chang's contribution to the field has been recognized on both local and national levels. In 1994, she was the recipient of APA's Karl F. Heiser Presidential Award for outstanding professional accomplishments on behalf of psychology. In 1996, she received the APA Distinguished Professional Contributions to Public Service Award and the Div. 18 (Psychologists in Public Service) Harold M. Hildreth Award.



TRIBUTE

Dick Suinn, Ph.D. Alice F. Chang is a remarkable woman who is frequently described as courageous and determined. But when I think of Alice, I see someone whose achievements are at the higher level of "inspirational." She was raised by parents who were political refugees from China, and the odds for life success were not good. Yet she survived a poor early directionless environment, including being a dropout, to finish her undergraduate degree at U.C.L.A. and earn her Ph.D. at Southern California. After several successful years in the health/medical world in Kansas, she returned to Arizona. Here she was elected to the APA Board of Directors becoming the first Asian American

and ethnic minority woman to serve. Ironically, she also was diagnosed with breast cancer. She publicly shared her personal and professional experiences with coping in a book to help future patients, while she courageously continued her BOD duties. I clearly remember your appearances, Alice, wearing your gold slipper symbolic of your 'never give in' attitude. Throughout your career you have been passionate about several issues on which you were influential. Among them are:

- being a community leader and advocate; examples-instrumental in passing Kansas licensing legislation; serving as a voice for states on APA's Council of Representatives; lobbying for continuing education for licensure.
- providing services to underserved and ethnic minorities; examples-serving as secretary/treasurer to the APA Council of Representatives Ethnic Minority Caucus; establishing the Marana Community Mental Health Clinic.
- supporting cancer advocacy; examples- cofounding the Academy for Cancer Wellness; publishing "A Survivor's Guide to Breast Cancer"; enabling the development of the Alice F. Chang Cancer Wellness Grant.

August 2021



Richard M. Suinn, Ph.D, 1999 President, APA. Alice, I have enjoyed knowing you for many years, You were rightfully viewed as courageous and determined - and definitely inspirational, And by the way, for a would-be organic chemist, you made an outstanding psychologist.

Stanley Sue, Ph.D. Alice has obviously demonstrated leadership in all of her endeavors and prestigious positions. Other colleagues, of course, have

specifically delineated Alice's amazing accomplishments. I want to address her characteristics. personal Alice is personable with a good sense of humor. But what impresses me the most is her directness, incisiveness, and courage. When Alice sees injustice or unfairness, she does not mince words. One event for me characterizes her forcefulness. As I recall, at an APA convention, the APA President had promised that would use his Presidential Address to credit Asian Americans for going to extreme lengths in helping to secure a distinguished and highly-sought speaker for the convention. When the President gave his convention Address, he failed to even mention Asian Americans and their major coup in landing the speaker for APA. Many of us were angry and appalled over his slight of Asian Americans. Alice had the moxie to call out the President at an APA Board meeting. She brought to everyone's attention his lack of decency in failing to follow through with his promised commitment to Asian Americans. This is Alice! (Incidentally, just to be clear, the President in question was obviously not Richard Suinn.)

Alice, your legacy is in making extraordinary accomplishments, serving as a role model for others, and giving all of yourself in countless ways to promote professional practice/mental health welfare, Asian Americans, women, and breast cancer survival.

Michi Fu, Ph.D. I remember Alice when I was a student. She was a firecracker. She saw a need for a Division on Women and made it happen. She decided APA needed an Asian American female president and ran. She mentored students like myself to



believe that there's a seat for us at the table. She also did an excellent job of role modeling the importance of self-care when her personal needs took precedence over professional opportunities. I am indebted to Alice for being an excellent mentor and leader over the course of my professional development and wish to thank her for being accessible and a pillar of the Asian American Psychology HERstory.

Reiko Homma True, Ph.D. Throughout her career, Dr. Alice Chang has distinguished herself as a leader and as a scientistpractitioner psychologist. I am one of the many psychologists who were mentored by her and owe her a great deal in my development minority female as а psychologist. Using her experience as APA's member of the Board of Directors and in many other APA governance boards and committees, she gave me much guidance when I was elected AAPA's president. During presidency she my also spearheaded the creation of a division on women and provided funding for it. There

was much opposition against creation of any division among the AAPA leadership at the time, but she strongly advocated and opened doors to focus on areas needing special attention and support within the AAPi communities. She has provided courageous leadership in many other areas, including support for cancer patients and families, mental health services for Native Americans, migrant workers and others. I trust others will discuss her contributions in these areas.

Karen Suyemoto, Ph.D. Alice was a groundbreaker and an activist for social justice and equity in many arenas, including AAPA. Personally, Alice was a wonderful mentor to me when Kunya Desjardins and I took on the first co-chairship of the Division on Women. Alice had (I understood), founded the Division the year before, taking action to address gender inequity within Asian American Psychology and empower AAPI early professional women. As we worked to figure out what it meant to even have a Division in AAPA (DoW was the first), Alice was always generous with her time and her insightful wisdom. In my view, Alice's vision and investment is the foundation that all of the AAPA Divisions are built upon. And she is certainly one of the major catalysts for my own involvement with AAPA, and so is one of the pebbles that started any ripples of effects I may have had for the organization and its members. She modeled to me what it means to be a mentor within professional organizations and what it means to effectively organize and build community to address inequity. Alice was unfailingly validating, enthusiastic, and encouraging. And she had such a warm and infectious smile :-)

Gayle Y. Iwamasa, Ph.D. Alice Chang was an amazing pioneer of Asian American psychology. Indeed, when I first met Alice, she was one of only a handful of psychologists doing ground-breaking work in what is now known by all as Health Psychology. She was a true pioneer! I also recall her regular periodic guidance to me regarding leadership activities. Although I wouldn't call it mentoring, as we did not have a formal mentor-mentee relationship, I always appreciated hearing Alice's sage perspective. Alice has been such a leader and fierce advocate of Asian American psychology, spanning decades and organizations! I could not imagine Asian American Psychology where it is now, without the impact and impressive work of Dr. Chang. Thank you, Alice, for all you have done for us.



GRADUATION ANNOUNCEMENT

Alyssa Hufana (she/her/siya) graduated from the University of California, Santa Barbara with her Ph.D. in Counseling, Clinical, and School Psychology (Counseling emphasis) in Summer 2021. Alyssa's dissertation explored the intersection of ethnicity, gender, and immigrant generational status among 2nd generation Filipina/o/x American women emerging adults



through original artwork, photography, and interviews.

Alyssa will begin her Postdoctoral Residency in Health Service Psychology at the University of California, San Diego Counseling and Psychological Services. As a postdoc, Alyssa will have the opportunity to emphasize in outreach and consultation focusing on student success and development as well as wellness from a holistic and cultural lens. Alyssa extends her deep gratitude to the DoFA and larger AAPA family for their constant support and becoming a professional home for her.

CULTIVATING CONNECTION THROUGH VIRTUAL HEALING SPACES

DR. CHRISTINE CATIPON & DR. MICHI FU *REPORTER: MAICA PORCADAS*

Maica: Hello Dr. Catipon and Dr. Fu! Thank you both for taking the time to talk to me about the recent Virtual Healing Space Event/Benefit for COVID-19 Relief in India. Can you tell me a bit about the event as well as the

inspiration behind it?

Dr. Catipon: I think what started it all was the crisis that was happening in India with the COVID outbreaks out there. Many of our AAPA family and colleagues were impacted by not knowing what was going on with their family and friends. AAPA wanted to show solidarity and support, as well as perhaps raise some money that we could send as a fundraiser. We thought about it first as a healing space because we have had them prior due to the shootings in Atlanta. That event was such a success because we realized the value of being together and sharing. We split our event into two parts: the first hour was the healing space where we invited people in leadership to speak, then the second half was a talent show. We had performers, cultural dances, and small breakout groups

for sharing our concerns and questions about how to help. It was so inspiring to see how people stepped up and shared themselves with everyone. I think of healing spaces as unique to each person because everybody is going to be bringing in their own level of grief and their own level of sadness. I think this spoke to how collective we all are in sharing this grief of what is happening to our community.

Dr. Fu: Yes we actually were an extension of the response to the Anti-Asian Hate in Atlanta — that was actually the impetus. That event was supposed to be a two-hour event and people ended up staying on and on and on, and at the three hour mark, the participants were requesting a follow up of that. So Christine had responded to the call for a follow-up event and somewhere along the way, [COVID in] India blew up. I believe it was Richelle Concepcion Concepcion who put India's struggle forward and we agreed to do something to benefit them. We also wanted people to just have fun and socialize. For me, AAPA has always been one huge social family. As it has grown and morphed over the years, I have still been able to enjoy some of that and wanted virtually for us to have a place to gather.

Maica: After the conclusion of the Virtual Healing Space, were there any new insights you both took away whether about AAPA in general, the members, or even about event planning?

Dr. Fu: For me, I was pleasantly surprised that AAPA members have actually got talent! I think we just have not really provided a lot of spaces for people to showcase or just to share. Some of the more unassuming folks that may not actually grab the microphone at our banquet or past events, came out of the woodwork so I was very grateful for that. I also feel like AAPA is a place where nerds rule. It is very much geared towards What I loved about this event was the openness and learning about the generosity and kindness of people, which you do not always get to learn about in professional organizations.

academics, so it was nice to be able to offer a space for creatives. Then just to be able to see how generous members are. A lot of folks were saying, "I don't identify as South Asian," or "I don't have personal family members that have been affected, but I just don't like seeing this pain in the world and I want to be part of that healing."

Dr. Catipon: What I loved about this event was the openness and learning about the generosity and kindness of people, which you do not always get to learn about in professional organizations. Secondly the talent, like wow! Then thirdly, it does not take much to feel connected to people in this organization. Part of me wanted to do this so people could get to know me. I want to help wherever I can and so this was a lovely byproduct, but really this was about us coming together and showing solidarity and support. We also want it to be known that Chris Liang was also our third co-chair. He initially was helping us as our tech person, and I feel like he went above and beyond.

Maica: I love that. Regardless of the physical distancing precautions in place, you both were able to hold a space for folks to feel a sense of comfort and connection with one another. Moving forward, what else can members do to

support COVID-19 relief in India, or even within our own communities?

Dr. Fu: You can step up and host an event or attend the next one. Hosting an event is a lot of work, but it is great fun. There is so much to gain when you volunteer for this particular organization. I volunteer for a lot of other organizations and they may not be as rewarding or fun, so I would encourage people to get more involved with AAPA.

Dr. Catipon: As far as this specific cause, get the word out and remind people that [COVID] is still a problem. I think, just for people to start contributing if they can, keep attending healing spaces, attending anything where they can show solidarity and really checking in with our



Thank you both Dr. Fu (left) and Dr. Catipon (right) for the time and dedication you put into hosting this event.

The Virtual Healing Space/Benefit raised over \$3500 and the proceeds will be donated to Ambedkar International Mission.

Thank you to all who attended and those who have donated! If you would like to donate, payments can be sent via Venmo to Dr. Fu at @Michi-Fu or via Zelle at 562-355-9276. For other payment methods please contact Dr. Fu at drmichifu@gmail.com. South Asian brothers, sisters, and siblings. There is so much happening that you do not need to be on the Indian subcontinent to experience the significant grief, loss, or worries of families and everything. I would just check in with your colleagues, offer any support if they need a person to talk to, grab coffee, be a shoulder to cry on, or an ear to listen. Those small acts of kindness can do wonders, and it does not have to be with specific communities. The whole world is hurting in so many ways right now, so anything we can do to support one another and to just be kind.

AAPA MEMBER SPOTLIGHT: DR. BRYAN KIM

From Asian American identity in Hawaii to counseling psychology editorship REPORTER/INTERVIEWER: MICHAEL P. HUYNH

Michael: Could you first tell me a little bit about your educational and research journey that led you into becoming a psychology professor today?

Bryan: There's a well-known theory called the theory of happenstance, how opportunities present themselves which, at that moment, may not appear to be opportunities, but if you're open to exploring, it could lead you to pathways

in life. I'm a 1.5-generation Korean American, so I immigrated when I was nine years old, and I grew up in Hawaii. When I went to college, I majored in chemistry, but I couldn't see myself working in a lab all day dealing with chemicals. I happened to get a job in the College of Education at the University of Hawaii at Manoa, and that's where I opened my eyes to education, so I thought I'd be a chemistry teacher. I enjoyed talking with students about non-academic, interpersonal issues, so that led me into the counseling field. During my master's level training, I met professors who helped open my eyes to different me opportunities. I saw what professors did and thought it's great autonomy to choose the research they want to do, and they also get to spend time with students and teach. Those opportunities coalesced together to have me pursue my PhD in counseling psychology. From my first day in my PhD program at UC Santa Barbara, I told my advisor that I wanted to follow the academic path! I never thought that I would be a counseling psychologist when I started undergraduate school, but it led me here, and I'm very grateful that I got to meet wonderful people who supported and mentored me to become who I am now.

Michael: What inspired you to not only go into psychology but specifically Asian American psychology?

Bryan: As an immigrant, I've always been interested in cross-cultural interactions. Hawaii is unique in that there is a very large percentage of Asian Americans, but I still had to deal with cross-cultural interactions in terms of local culture in Hawaii vs. the culture that I came from. I wanted to focus on Asian Americans who are immigrants like me or who live in places where there are not a



Dr. Bryan Kim University of Hawai'i at Hilo

lot of Asian Americans and how they cope or interact with people of different races and ethnicities. That really crystallized when I moved to Santa Barbara. We [my Asian American graduate friends and I from UCSB] went to Chicago for an APA conference, and a couple of folks asked, "Oh, where are you guys from?" "Santa Barbara." "No, where are you really from?" We read these stereotypes that Asian Americans experience about the perpetual foreigner, but l got to experience it firsthand, so that was eyeopening. Being who I am and my background as an immigrant having to deal with cross-cultural exchanges, that naturally led me to study Asian American psychology.

Michael: Thank you for sharing! I'm curious to know what has been a research article you've published that you're most proud of?

Bryan: It's my first doctoral article that I published back in 1999, the Asian Values Scale article in the Journal of Counseling Psychology! When I went to Santa Barbara, I wanted to learn about the

counseling process and how that may differ for Asian Americans, but I knew that among Asian Americans, there's a lot of within-group differences. Someone who's a 6th-generation Asian American will be different than someone who's a 1stgeneration, recent immigrant in terms of the way they see the world. I found that there was not an instrument to assess values and orientation among Asian Americans, so I spoke to my advisor and mentor, Dr. Don Atkinson, and he said, "Why don't you create an instrument to assess it?" My motivation led me to learn what I had to learn (e.g., psychometrics, statistics). It's an article that reports on the development of the Asian Values Scale, and since its publication, I've often gotten requests for researchers to use the instrument. That's an article that tipped off my career, and I use that instrument to assess variations in Asian Americans and how these people might interact or react differently to different counseling styles.

Michael: This makes me interested to read that article myself! With your background as an Asian American who grew up in Hawaii, what is your perspective on the umbrella term of Asian American and Pacific Islander (AAPI)?

Bryan: That term AAPI was developed as a political way to bring together Asian Americans and Pacific Islanders. Even just talking about Asian Americans, let alone Pacific Islanders, there's such variation. Asian Americans who grew up in Hawaii are different from Asian Americans who grew up on the continent. European Americans, Native Hawaiians, and Asian Americans make up about a third [each], but there are also a lot of multiracial individuals in Hawaii. You don't see the kinds of oppression and mistreatment of Asian Americans in Hawaii that you might "There's a lot of variability on how Asian Americans behave... and what type of representation Asian Americans were in those communities."

see on the continent. When I moved to the continent and people would stereotype, it didn't affect me. When I lived there for about 10 years with repeated experiences like that, I've become much more sensitive, so I could imagine someone who was born and grew up in the continent experiencing that daily to become slowly traumatized with racism. There's a lot of variability on how Asian Americans behave and what their worldview is depending on what kinds of communities they grew up in and what type of representation Asian Americans were in those communities.

Michael: That's a great way to understand differences that can occur within and between groups we define. What was your experience like as an editor for the Asian American Journal of Psychology?

Bryan: Being an editor as the gatekeeper of scholarship was valuable. I enjoyed reading submissions and interacting with authors as well as reviewers who give their time freely to review submissions. I really wanted to do my best to cultivate the journal, and I was honored to be the editor for five years. Editorship can be challenging; you go through a lot of manuscripts in a short period of time, but it can be very rewarding when the issue is published. As we know, when you publish, it helps the person's career, so I never took editorship lightly

Michael: What are your duties as a current editor for The Counseling **Psychologist (TCP)?**

Bryan: We have a system to process submissions and assign action editors. For the submissions that I handle, I typically invite three people to review a paper, and they submit a critique of the submission. When the reviews come in, I make a decision whether to ask for a revision or reject it. I also get to do some other fun things; I do a podcast with authors of articles that are going to come out, and many of them agree to do it! I'll interview the author and talk about the article that they worked on. This year, I instituted the TCP Reviewer Mentorship Program. This is advanced where graduate students who've passed candidacy and early career professionals who recently got their PhD apply, and for those who are chosen, I pair them up with current editorial board members. When an editorial board member receives an assignment, they review the paper together, so it's a good learning experience for the participants, and my hope is that will create more potential editorial board members in the future.

Michael: It's great to not only know that you're spearheading the TCP mentorship program but also see how beneficial it is to students who want to take on that leadership role. Do you have any last tips or general wisdom that you'd like to share to our readers?

Bryan: When I went to study counseling psychology, I thought that was sufficient for me to be a counseling psychologist, but in terms of being an Asian American counseling psychologist who understood the issues of Asian American individuals,

there weren't many opportunities to learn that in the counseling psychology curriculum. At UCSB, there is the Department of Asian American Studies, and Dr. Sucheng Chan was the chairperson during my doctoral training. I asked if I could learn Asian American history from her. She did informal seminars with me and another graduate student, where we were assigned books to read by her, and we went to her house in the evenings to discuss what we read and to learn more about Asian American history. There are different migration periods for Asian Americans, and it informed me about who Asian Americans are, where they're from, and why they might be the way they are now in the United States. It is more work, but it's helpful to your career and personal understanding by expanding your circumference of knowledge so that you get a good grasp of the population that you're going to serve.

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In this episode of The Counseling Psychologist podcast series, Editor Bryan Kim interviews Dr. Patty Kuo, Dr. Zac Imel, and Dr. Karen Tao, cc of the TCP article "An Experimental Analogue Evaluation of Asian and Asian Americans" Immediate Reactions to Therapist Microaggressions"

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MENTAL HEALTH STIGMA IN THE SOUTH ASIAN DIASPORA

PARITOSH JOSHI, SHERRY SARA OOMMEN, & ARADHANA SRINAGESH

Mental health is a topic that has become more socially acceptable to discuss within the United States. As more people become open about how they experience anxiety, depression, or other mental health issues, discomfort surrounding the topic has lessened. However, within Eastern culture and the Asian American community, especially within South Asian culture, there is a strong stigma around mental health problems; unfortunately, it remains a pertinent force in hindering serious conversations about the matter.

To begin, it is critical to define the concept of stigma itself. Stigma, according to sociologist Erving Goffman (1963), is defined as appearing in three ways: abominations of the body, blemishes of individual character, and tribal stigmas of race, nation, and religion. For South Asians in the United States, stigma often manifests itself in the form of adherence to community norms; hence, mental health problems act as a "blemish of individual character" and negatively reflect one's family to the rest of the social circle because they go against traditional practices (Goffman, 1963). Furthermore, because South Asians encounter a unique set of problems that contribute to mental health stigmatization, it is critical to understand the intersectionality of their identity and structural barriers that contribute to these discrepancies.

This article focuses on three specific challenges that contribute to mental health stigma among South Asians:

- Managing the Dual Identity of Living in Eastern and Western Culture
- Lack of Mental Health Literacy in the South Asian Community
- Limited Representation/Knowledge in the Mental Health Profession about South Asian Mental Health

Managing the Dual Identity of Living in Eastern and Western Culture

South Asians are caught navigating in between two identities, as they have to balance the need to acclimate with Western culture while also maintaining their own cultural identity; these two clash, requiring reconciliation. For example, Eastern culture teaches selflessness and collectivism, while Western culture teaches selfishness and individualism. The former values communalism, while the latter values "The American Dream." South Asians are told to prioritize themselves second, leading to excessive people-pleasing. More importantly, South Asians experience constant pressure about how others will perceive them, particularly as they are taught to take the "safe path" (e.g., doctor, engineer, lawyer) and discouraged from a world of possibilities. These norms force South Asians to constantly balance the need to satisfy their family, society, and themselves.

Hence, given these incompatibilities, the rise of progressive mental health views in Western culture is usurped by shame and guilt as motivating factors among South Asians. For instance, those who experience mental health problems may be told to conceal their disorders or have their conditions denied by others. Instead, their mental health issues are trivialized and subject to gaslighting. Conversations about mental health vulnerabilities and treatment options are discouraged out of derision from other community members. Subsequently, these feelings become normalized and internalized, preventing help-seeking and promulgating fear of their family. This stigma is weaponized to impose social conformity, especially because individuals are taught to value obedience to authority figures.

Lack of Mental Health Literacy in the South Asian Community

Cultural barriers alongside institutional dismissal of South Asian needs leaves little room for mental health literacy (MHL) development and more for stigma. Evolved from health literacy, the construct of MHL is fulfilled by both individuals and institutions, having significant impact on population health. The degree to which a person understands mental disorders, treatment, maintaining "positive mental health," and institutions can decrease stigma. For South Asians, barriers such as the duality of leading family-centered lives in an individualistic world, shame, guilt, and gender roles make self-management of such disorders difficult, hindering MHL (Kutcher et al., 2016).

Additionally, the model minority myth (MMM) provokes an internalized suppression of mental health and wrongfully justifies the lack of Asian-focused treatment. Instead of seeking mental health care, South Asians may somaticize their symptoms or disregard them altogether (Karasz, 2019). Providers have been found to undermine presentation of Asian patients' symptoms, biased by MMM and lack of cultural competency. Cultural characteristics of South Asian communities and MMM starve MHL development and nourish stigma around comprehension of mental health, resulting in treatment underutilization. Data from the National Survey on Drug Use and Health demonstrated that Asian Americans were more likely than other racial groups to need treatment and still not feel like or seek treatment (Lipari, 2013). And yet, death by suicide among Asian Americans is a preventable statistic, suppressed internally by the community.

Limited Representation in the Mental Health Profession

South Asians are known to evade mental health services compared to other groups. Cultural, socioeconomic, and institutional factors have contributed to underutilization of mental health services. Culture plays a pivotal role in individual behavior, making cultural competency crucial among mental health professionals. Furthermore, it informs understanding of distress and help-seeking behavior. Currently, clinical training is inundated with norms and values of non-dominant cultures. In their review, Prajapati & Liebling (2021) found that among British South Asians who sought mental health services, powerlessness and alienation were common due to providers' dismissal and lack of understanding of cultural identity.

The mental health workforce consists of varying levels of education, and due to a nonlinear path, there is no data that solely identifies the racial/ethnic breakdown of the mental health workforce. However, according to an American Community Survey, 4% of psychologists are Asian (American Psychological Association, 2018).

Proposed Solutions

1. Deconstructing the Culture of Competition and Encouraging Vulnerability:

South Asians rely on competition, encouraging conversations that display dominance while discouraging weakness. Changing the perception of mental health allows someone to be their whole self. Moreover, denying anyone their humanity delays internal discordance, while implying mental health remains taboo.

2. Address the Provider-Patient Pipeline South Asians, the fastest growing demographic, have unique cultural characteristics and must be taken into consideration when providers create treatments. Addressing stigma is fundamental in eradicating barriers.



From left: Paritosh Joshi (Research Assistant, Northwestern University), Sherry Sara Oommen (Master of Public Health Candidate, Icahn School of Medicine at Mount Sinai) & Aradhana Srinagesh (Clinical Psychology Doctoral Student, University of Rhode Island)

STUDENTS' REFLECTION ON BLACK LIBERATION AND ASIAN AMERICAN COMMUNITIES

PAIGE SODONA, SANIKA SHAH, & BENJAMIN CONNER BATES COLLEGE

Academics for Black Survival and Wellness (A4BL) is a personal and professional development initiative for Non-Black academics to honor the toll of racial trauma on Black people, resist anti-Blackness and white supremacy, and facilitate accountability and collective action. A4BL also is a space for healing and wellness for Black people. Academics for Black Survival and Wellness provided anti-racist training in 2020 and 2021 for non-Black academics to honor the toll that anti-Black racism has on the Black community and their colleagues.

The "Level Up! Non-Black Asian Americans Continuing to Fight for Black Liberation" session as a part of Academics for Black Survival and Wellness focused on how the AAPI community can center Black liberation in our fight for racial justice. On July 1, 2021, the session featured five Asian American psychologists as panelists, including Drs. Grace Chen, Anne Saw, Gloria Wong-Padoongpatt, Monique Shah, and Mattew Miller. Each panelist shared personal experiences about advocating for Asian liberation without decentering Black liberation. They discussed anti-Blackness within Asian communities, activism burnout, racial solidarity, and cultivating community. The panelists emphasized the necessity of interrogating and owning how we've learned and internalized anti-Blackness. Overall the session highlighted the need for racial solidarity in the fight against white supremacy, understanding that liberation comes when the most marginalized are free.

When police killed Hmong teenager Fong Lee in 2006, Black people were the first to stand up and fight. When Malcolm X was shot, Yuri Kochiyama held him as he died. These are famous examples of solidarity between Asian and Black American communities, which we see more frequently today, as we stand up for



each other on social media. Our solidarity dates back to the civil rights movement when the work of Black activists led to the reversal of The Chinese Exclusion Act and The Creation of the Nationality Act of 1965. These laws were the key to the ability for Asians to immigrate to the United States. Some might say that we are indebted to the Black community.

While we see increased solidarity between groups, we are also more aware of the tension. This is no accident. White Americans intentionally created divisions, using Anti-Black rhetoric and laws to make Asians seem "better." White supremacy created segregation, policing, the model minority myth, and scarcity of resources, of the American Dream. The myth is both extremely harmful to the Asian American community and other communities of color. Constructed by white people, the stereotype homogenizes the diversity of lived experience within the AAPI community. The model minority myth perpetuates anti-Blackness ranking racial by groups, maintaining white supremacy, and granting privilege based on proximity to whiteness. During the Civil War and Reconstruction era, plantation owners brought in Chinese people to replace enslaved people. They used divisive rhetoric such as "docile, submissive, and hardworking unlike African-Americans" to create competition between the two groups. After World War II, Chinese

"White supremacy created segregation, policing, the model minority myth, and scarcity of resources, leading to much of this tension [between the Asian American and Black communities]."

leading to much of this tension. We still see white supremacy winning today, as Asian liberation became centered when white people wanted to quiet down Black liberation, especially during the #StopAsianHate movement. In moments like this, we should remember our long history of solidarity, and recognize that it includes validating and recognizing the differential ways that the groups are racialized, rejecting the zero-sum game mindset. We must remember that so much of what we face is due to Anti-Blackness, and Asian Americans will not be liberated until Black Americans are.

The pervasive "model minority myth" frames Asian Americans as hardworking, economically successful, and emblematic Americans distanced themselves from Black communities to become "honorary whites." Dismantling the model minority myth is essential in centering Black liberation within Asian American communities.

Asian Americans exist in limbo,

simultaneously described as the "Yellow Peril" and the "model minority." Both white supremacy and anti-Blackness shape identity formation for Asian Americans. Their positionality as "in-between" the Black/white divide emphasizes the necessity of understanding intersecting systems of oppression. As mentioned above, Black and Asian solidarity involves understanding how these systems oppress us by highlighting white supremacy as the underlying issue and rejecting the zero-sum game mindset.

Internalized narratives create mistrust between two groups, framing one group's success at the expense of the other. As Asian Americans, we are allowed to fight for our own communities and Black communities, while critiquing our own communities at the same time. Furthermore, we must acknowledge that Black Asians exist, and it is anti-Black to talk as if they do not. Centering Black liberation involves respecting and reclaiming stories and narratives, and understanding differential lived our experiences which can be linked via solidarity against white supremacy.

Anti-Blackness runs deep within Asian American communities, both in and outside of the United States. Asians living in the United States watch, read and are influenced by white media, which depicts African Americans as uneducated, poor, violent criminals that one should be wary of. In more recent times, regarding the rise in hate crimes towards Asian Americans amidst the pandemic, national news organizations featured Black men as suspects in some of the attacks, reigniting and reinforcing an within anti-black narrative the AAPI community. While it is true that Asian Americans are not responsible for enslaving Black people, that does not mean that they are innocent in perpetuating racism and anti-Blackness.

There are countless ways for us to stand in solidarity with the Black community. Acknowledging the previous work from and making space for Black voices is crucial when addressing the oppression that non-black people of color face. It is important to be aware that the lived experience between the two may have similarities, but they are not the same. We need to stop equating them, and center racial solidarity and those who are marginalized the furthest. As non-black Americans, AAPI identifying people are actively benefiting from systems of white supremacy solely focused on harming Black

people. We must use our privilege to advocate for Black people, especially within our own communities and spaces. We have to remember that we face the common enemy of white supremacy, and that white supremacy is the reason for colorism and the tensions between our communities. That being said, we also have to grapple with and acknowledge our own internalized anti-Blackness. We cannot expect or demand Black trust. acceptance, or even solidarity. Black people do not "owe" us anything. By committing to these action steps, we can work towards pushing for liberation with the Black community, not against them, and dismantling and reforming the structures built upon the foundation of white supremacy.



Paige Sonoda Bates College



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A DIFFERENT WAY TO DESCRIBE PSYCHOTHERAPY TO FELLOW SOUTH ASIAN AMERICANS KAVITA PALLOD SEKHSARIA

Let's be honest – most Asian languages have limited vocabulary to discuss mental health issues. Personally, I speak Hindi, but I don't think my experience is unique. In Hindi, there is no real word for "depression," while "anxiety" is often replaced with words diminishing the person's experience of distress. Even when we're having a conversation in fluent English, the limitations of our mother tongues can add to the challenges being faced.

There is a great deal of research indicating that Asian American attitudes about mental health both prevent and minimize the seeking of psychological help from many Asian Americans. This experience occurs due to experiencing shame and guilt, the minimizing of personal pain and suffering, concern about the impact of seeking treatment on the larger group, and devaluation of the benefits of treatment. Together, these contribute to the experience of stigma regarding seeking psychotherapy, and even decreases the likelihood of asking for help from supportive others.

What are we supposed to do about this? Addressing this has been challenging, as are many issues around mental health, due to the complicated and layered nature of the problem. For a while, the use of the medical model was helpful. Most people do not experience shame around seeing physicians or taking medication for physical reasons, such as blood pressure control or diabetes. Perhaps if mental health concerns such as depression were seen as being biological, then perhaps there would be less stigma to seeking help.

From 1996-2006, researchers explored the idea of reducing mental health treatment stigma through education around the biological basis of mental illness, similar to other physical illnesses. Over time, focusing on biology rather than blaming family members or personal weaknesses began to be more prevalent. Despite this change, researchers found that results did NOT indicate less prejudice and discrimination towards those with mental illness.

Instead, highlighting the biological roots of mental illness actually led to increased concerns in the public that persons with mental illness were dangerous and unpredictable. While the medical model research is still developing, recent results indicate that conceiving of mental illnesses purely as biological problems has not reduced the stigma around seeking help. Instead, use of the medical model has created additional problems.

Given this complexity, it becomes even more challenging to discuss mental health and psychotherapy with an Asian American population. However, I would like to offer an analogy which I hope addresses some of the difficulties encountered in explaining the phenomenon of mental health, benefits of therapy, and being honest about personal distress. Psychotherapy, for many, is like physical therapy. When we injure a body part, often the remedy is visits to a professional specializing in studying the human body, how it works, and what would be needed to foster healing. The professional assesses and evaluates the injury, how it is limiting us, and what kind of activity level we want to return to. Then we are guided through the therapy process, rebuilding strength, flexibility, and resilience. Their expertise guides us, but the patient is the one working the actual muscles and regaining the full use of their bodies. The physical therapist provides a safe

Psychotherapy, for many, is like physical therapy...we are guided through the therapy process, rebuilding strength, flexibility, and resilience.

place and needed reassurance that any pain experienced is a part of healing, and not further damage. Physical therapy is hard work, but makes us stronger. Working with a knowledgeable and competent physical therapist is crucial to our healing. Patients already know that having an injury and seeking help to restore wellness doesn't make us weak. Rather, it's evidence of our desire to be fit and whole.

Psychotherapy can also be construed in this manner. Rather than seeking treatment as a "copout from doing the work," or that relying on those outside family and friends is "weakness or indulgence," psychotherapy is reframed as an assistive process. Likewise, minimizing troubles, "because others have it worse" or as "no big deal" can be obstacles to preventive care and treating ourselves with fairness.

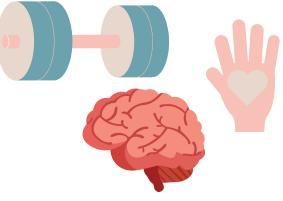
There are times when people realize that emotional and psychological pain is stopping us from meeting goals and completing our dreams. At such times, finding a nonjudgmental professional trained to help us in a safe place so we can tap into personal resilience is invaluable. In psychotherapy, we can share our problems with a trusted other who has more distance and doesn't bear the weight of familial attachments. While family and friends can care deeply, their potential to help us can be limited by those same attachments and obligations.

Psychotherapy does not stop us from "toughening up" or make us dependent on the therapist. Instead, the opposite is true: we find a safe place to be vulnerable, to heal, and to grow. We don't go to therapy because we are weak, but rather because we know we have the capacity to be strong.

My physical therapy analogy will not work for everyone. It may even be limiting for those clients who do find reassurance and validation in having their distress rooted in biology. However, for all of us working to make help more accessible to those who could benefit, my hope is that this way of framing can be helpful, and that healing and growth aren't diminished if seeking professional mental health assistance.



Kavita Pallod Sekhsaria, Psy.D.



APIDA (ASIAN PACIFIC ISLANDER DESI AMERICAN) HATE IN THE U.S.

LILA MATHUS

Right now, millions of people cannot safely walk the streets alone, solely based on their ancestry. They are targets of racism, defined as "a belief that race is a fundamental determinant of human traits and capacities and that racial differences produce an inherent superiority of a particular race" (Merriam-Webster). In the United States (US), racism has been present for a long time. All minority groups have been targeted. Making up only 5.7 percent of the population, APIDA (Asian Pacific Islander Desi American)-identifying people are definitely in this minority. However, in 2020 alone, 3,800 hate crimes against Asian Americans were reported. crimes Hate ranged from verbal harrasment to murder, such as the killing of Pak Ho (Ho). The repetition of this pattern includes the 1882 Chinese Exclusion Act, WWII Japanese incarceration camps, and the recent rise in pandemicrelated racism; it is clear that this is a recurring theme. In addition. this discrimination is extremely harmful to individuals' mental health, sparking conditions such as anxiety and depression. Overall, these facts demonstrate that racism against Asian Americans has been so deeply ingrained into US history that it

has negatively impacted the overall health of the APIDA-identifying community.

Anti-Asian racism has been prevalent in the US since the country's birth. Asian Americans have been living in the US for over 160 years. When large numbers of Chinese immigrants arrived in the US in the 1860s, the racist trope of "Asians are stealing White jobs" began immediately. However, this argument was weak, since the jobs, such as working on the Transcontinental Railroad, were undesirable to most White people, who preferred less labor intensive jobs. As a the less demanding Chinese result. individuals were hired first, which led to racists labeling them a threat. In 1882, the government passed the Chinese Exclusion Act, which banned Chinese immigration for 60 years. This was the first time the American government excluded a specific racial or ethnic group (Brockell). Finally, after the Japanese bombing of Pearl Harbor in 1941, about 120,000 Japanese Americans on the West Coast were forced to sell their belongings and property and relocate to incarceration camps (Kuiper, et al.). Although most of the Japanese individuals were US citizens, they were feared as being potential spies. These

instances demonstrate that Asian American racism persisted throughout US history, with people often "othering" them because of their ancestry. Asian hate has been present for a long time in the US, even as our society advances and our judicial systems evolve.

Without a doubt, the pandemic has had a huge impact on Asian hate. Over the past year, violent acts towards members of the APIDA community have risen by 150 percent. Former President Donald Trump inflamed the situation by calling it the "Kung Flu" and the "China Virus," giving racists motivation to actively target Asians. prior to the pandemic, Asian While Americans had the lowest unemployment rates, Asian Americans now have among the highest unemployment rates. Discrimination has stretched into businesses, another consequence of Asian hate (The Conversation). In addition, in early March 2021, Pak Ho was shoved to the ground and robbed in Oakland, California's Chinatown. He died two days later of injuries (Ho). Oakland is a very diverse city, so the fact that these violent crimes have stretched to this area is guite concerning; this implies that Asian hate is much more vast than the general public is aware of. These points illustrate that Asian hate is still much at large, with Asian Americans wrongly being accused of things based on their ancestry and targeted for violent hate crimes. In brief, the rise of the pandemic has brought to light Asian hate.

Finally, anti-Asian sentiment has also impacted the mental health of individuals and communities who are targeted. Depression is the most commonly reported condition by Black, Indigenous, People of Color (BIPOC). When people experience racial discrimination, stress hormones are released. This can lead to physical conditions, like low blood pressure and heart disease, as well as mental health

disorders, such as anxiety and depression (MHA). One study found that victims of COVID-19 discrimination experienced higher levels of anxiety and depression, which is strong evidence that racism is impacting the mental health of Asians. The Asian American Federation also shows that Asian Americans have some of the highest rates of suicide and depression, which can stem from racism (Reja). Mental health is a huge factor in overall happiness, so for individuals who are targets of racism, the impact can stretch deeper than one might think. In summary, racial discrimination can and has had a huge impact on the mental health of Asian Americans. Understanding this may help to shape our future.

"...victims of COVID-19 discrimination experienced higher levels of anxiety and depression, which is strong evidence that racism is impacting the mental health of Asians."

The past year has shed a lot of light on the ugly truth regarding hatred toward Asian Americans. Here in the US, we have passed laws that oppress Asians and stereotypes. cultivated harmful Even today, people continue to commit hate crimes against our fellow Americans. Still, there is hope. In April 2021, the Senate overwhelmingly passed a bill against anti-Asian racism. The bill, brought forward by Senator Mazie Hirono of Hawaii, and supported 94-1, shows the impact that we can have when all groups, political and racial, work together. The bill reviews hate

crimes, establishes statewide hotlines, and trains law enforcement in recognizing racism (Edmonson). The US is evolving. The history of Asian hate will no longer be buried in textbooks. In fact, many organizations have been advocating for more Asian content in school curriculum, such as the 180 Pledge brought forward by AAPI Youth Rising, which lobbies for at least one day of APIDA history to be taught in schools (AAPI Youth Rising). Even though racism against Asian Americans is firmly rooted in our past and present, and affects the overall health of Asians, the future is bright as we acknowledge the horrible truth and work to move forward.



its surrounding communities. Today, its K-8 program includes close to 400 students all learning together on a 4-acre campus in the heart of Oakland.

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HONORING MY GRANDMOTHER NOVEMBER IS NATIONAL ADOPTION AWARENESS MONTH

MELE KRAMER, M.S.

When we think of inspirational women, we may think of Ruth Bader Ginsberg, Michelle Obama, Kamala Harris, or Malala. What women have inspired you over the years? Who is your Hero? Although I admire all of the above, my biggest hero is my grandmother. She was the woman who inspired me to be the best person I can be.

At the tender age of thirteen, she escaped communist Poland. Alone, frightened, and unable to speak English, she risked her life to escape imminent war, persecution, and other atrocities of post-war occupation in Poland. She came to America terrified and forced into an arranged marriage where she had six beautiful daughters. She cleaned homes to survive and survived an alcoholic husband who was also frightened and trying to make ends meet during the post-war depression. She was later abandoned by him and raised her six girls alone. My grandmother made sure all of her daughters were educated. Five of the six daughters became nurses. Some of her daughters became military nurses, one serving on the president's hospital boat. All daughters thrived. My grandmother provided a road for the American "Melting Pot" Dream for my mother and Aunts. I did not know any of her stories until her death. What I remembered is a grandmother who shared great Polish culture. We sang songs, danced the Polka, and ate wonderful food like perogies and cold beet soup. I spent hours in her garden learning her secrets to growing award-winning squash. She won the California state championship more than once for her organic fruit and vegetables. She taught me to smile in the face of adversity and keep going. I was not her biological granddaughter. She did not want me to be adopted into the Irish/Polish family at first. She was very prejudiced and did not want foreigners in the family. I never knew this growing up. In fact, I felt like I was her special grandchild. After her death, a family member told me she mentioned that having me in the family changed her world. I was told as a child I was always by her side. In reality, she was my whole world. Love dissolves the barriers of prejudice and lifts bias to form inclusive environments. She was a person of pure blood and was not exposed to other cultures until she came to America. She ran from all she knew in Poland and came to the U.S. as a refugee hoping for a safe haven from the horrors of her war-torn country. She chose to open her arms and make me part of her world.

Inclusion is vital since it is the foundation of the American "melting pot" society. We may take for granted what we have, and we may not know how much power our diverse country carries. In a world creating fear, we need to stand strong for ourselves and speak up for each other to prevent "divide and conquer" tactics that are barriers to unity, harmony and productivity. According to Healy and Stepnick (2017), "Of the challenges confronting the United States today, those relating to minority groups continue to be among the most urgent and the most daunting. Everyone in our society is, in some sense, an immigrant or a descendent of immigrants. Each wave of newcomers has altered the social landscape of the U.S." (p. xvii). We are all immigrants or descendants of immigrants. Remembering our unity in diversity is what makes us the beautiful Melting Pot America we were meant to be. I have a unique background that affords a perspective from the dominant majority and minority cultural perspectives wherein I can see both sides of the coin. All points of view are significant if we want to be true as we pledge: "One Nation Under God, indivisible, with liberty and justice for all."

I am grateful today and always for my Polish grandmother, who remains my hero today. In honor of National Adoption Awareness Month, I share her story and impact on me as a trans-racial adoptee (TRA). Sense of belonging and inclusion are essential psychological influences on the co-construction of racial and ethnic identities. Sense of belonging is the experience of personal involvement in a system so that people have a sense of valued involvement, fit between themselves and the system (Hagerty, Lynch-Sauer, Patusky, Bouwsema, & Collier, 1992), and legitimacy (Shotter, 1993).

The TRA population often feels "in-between' worlds. Not white and not always included in Asian American communities and having neither group genuinely understanding how to support us. Bicultural and biracial individuals (those who identify either with two cultures or two races) are often denied membership in the groups they identify with, an experience referred to as identity denial (Albuja et al., 2019). We need to be included in the visibility dialog as well. Many TRA's don't share that they are adopted in their adult lives to avoid the questions and platitudes such as: "you are so lucky you were chosen" or questions such as "have you tried to find your birth family?" This is in addition to being asked, "where are you really from?"

What people don't know is many TRA's have never seen their authentic birth certificate, and many of the documents they are given are inaccurate. We don't grow up with someone who looks like us. We don't have a parent who compares their eyes, nose, or mouth to ours or us. Since many were raised in all-white communities, there were no Asian role models. Most do not have a name that reflects our history, culture, or ancestry. However, a significant advantage we have is a perspective of what it is like to live in the dominant culture, how they think, act, and their attitudes about many world concerns, national, and social issues. We have learned how to navigate in a world through the dominant majority's viewpoint. Even though we don't quite "belong." We are great seekers of truth, knowledge, excellence and strive to succeed and become meaningful contributors. We are at our best when we can be our authentic selves. In my Diversity & Inclusion Leadership studies, my professor points to many researchers discussing the importance of inclusion and emphasizes belonging. "In order to be your authentic self, one must feel included" (Paradiso, 2020). Inclusion is accepting another person's authenticity and providing an environment of belonging for them.

One way to advocate for diversity is through education. Education can be accomplished within our community and all populations and advocate for inclusion and equity training in our schools, workplaces, and organizations. We may think "others" issues do not affect us. However, anytime there is discrimination and abuse against one person, one race, or one community, it affects all people, races, and communities. We need to speak up for each other and think about inclusion and justice for all before it's too late. Inclusion begins with "I," Unity

starts with "U." Maybe if we all asked, what can I do to help YOU feel included? We can all thrive as "TEAM U.S.A."Only then may we see the American Dream ideal come true.

In terms of prosperity, inclusion practices also lead to profitability on a larger scale and within organizations. According to a Deloitte Diversity report, "Companies with inclusive talent practices in hiring, promotion, development, leadership, and team management, generate up to 30% higher revenue per employee and greater profitability than their competitors. Without a strong culture of inclusion and flexibility, the team-centric model comprising diverse individuals may not perform well." Lastly, it is essential to have a mindset that we are all one nation together. Our diversity makes us who we are as Americans and reminds us of the consequences of hierarchical superiority from a message on a plaque on the National Museum of History in Washington, D.C.; I am sharing this in the hope that we do not repeat mistakes from our history.

I thank my Polish grandmother for showing

"First, they came for the socialist.
I did not speak out because I was not a socialist.
Then they came for the trade unionists.
I did not speak out because. was not a trade unionist.
Then they came for the Jews.
I did not speak out because I was not a Jew.
Then they came for me, and no one was left to speak for me."

~ Pastor Martin Niemoller - Died in a Jewish prison camp. (He was initially a Nazi supporter). The monument is at the National Museum of History -Washington, D.C.

me acceptance. She made me feel included in a dominant culture and world where I did not fit in. I strive to do the same in my personal and professional world for others now too.

RECRUITMENT FOR DISSERTATION STUDY

JENNIFER J. OH

For the purpose of a qualitative research study, we are seeking practicing psychologists who identify as racial/ethnic minority immigrants who are interested in sharing their perspectives in working with racial/ethnic minority immigrant clients. Requirements for Participation:

- Currently licensed, practicing psychologist in the U.S.
- Self-identifies as a racial/ethnic minority individual
- Self-identifies as an immigrant individual
- Have provided psychotherapy/counseling services to racial/ethnic minority immigrant clients within the past 12 months.

Your participation in this study will entail one in-depth video or phone interview with the possibility of a follow-up interview. The interview is expected to last 60-90 minutes.

As a part of your participation and upon completion of the interview, a \$20 donation will be made to the National Immigration Law Center.

The Institutional Review Board at Radford University has approved this doctoral dissertation research project. For more information, please contact Jennifer Oh at Radford University's Counseling Psychology Department at joh8@radford.edu. Please pass this invitation to other clinicians who may be interested in sharing their experiences and participating.

RESEARCH FUNDING OPPORTUNITY

The University of Pennsylvania Positive Psychology Center, with support from the Templeton Religion Trust, is pleased to announce the Primals Research Awards. Our goal is to promote new empirical research exploring how primal world beliefs ('primals') are formed, maintained, change, or influence nontrivial outcomes or psychological processes. As recently introduced (Clifton et al., 2019;

https://tinyurl.com/y4m62r7k), primals are basic perceptions of the general character of the world as a whole, such as the world is dangerous and the world is interesting, that correlate with many behaviors and wellbeing-related variables. We are awarding one \$250,000 award and two \$125,000 awards that will be administered over 24 months (July 1, 2022 to June 30, 2024) to Principal Investigators proposing to examine primals from any of the following eight disciplinary perspectives:

- 1. Clinical Psychology
- 2. Positive Psychology
- 3. Health Psychology
- 4. Organizational Psychology
- 5. Political Psychology
- 6. Personality Psychology
- 7. Social Psychology
- 8. Developmental Psychology

Project leaders are Dr. Jeremy Clifton and Dr. Martin Seligman. Advisors are Dr. Crystal Park and Dr. Alia Crum. Letters of Intent (2 pages max) are due Sept 26, 2021. See full details here: https://tinyurl.com/b3mma5c3