Chapter 2

Counseling Chinese Communities in Malaysia: The Challenges and Needs in Mental Health Service Deliverance

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ABSTRACT

This chapter presents the experiences of Chinese in Malaysia (CIM), in the context of mental health services. As the second largest ethnic group in Malaysia, CIM is diverse in its dialectic subculture, education, generation, geography, and degree of assimilation to the mainstream culture. The chapter introduces the ecological characteristics of CIM and how they shape the unique psychological challenges. Though CIM are known for their multilingual ability, strong work ethics, emphasis on education, and family piety, the clashes between tradition and modern values, the marginalized position in the Malaysian political arena, the stereotype of overachiever in education, and the “brain drain” movement of young elite CIM, have all caused a strain in CIM families as well as individuals. Moreover, they face both external and internal barriers in getting quality mental health care. It is therefore imperative to promote a mental health discipline that is open to serve CIM, as well as being sensitive to its cultural and historical backdrop.

INTRODUCTION

In the recent two decades, the discipline of psychology in Asia is arriving at its golden age of development due to waves of globalization, modernization and westernization. Since the publication of the Handbook of Chinese Psychology (Bond, 1996), Chinese psychology is deserving much attention in the arena of cross-cultural psychology and cultural psychology. In 2010, there is an updated edition on the Handbook and the chapters expanded from 32 to 40 (Bond, 2010). Many recent empirical researches

on the Chinese population have been included in the handbook, which demonstrated that psychological research among this population could confirm, verify and be adapted from certain existing theories from Western psychology. Nevertheless, most of the studies cited in those chapters were based on Chinese populations from Hong Kong and Taiwan, as these regions have a longer history in establishing local psychological disciplines. Overall, there is a scarcity of psychology publications and literatures on Chinese immigrants or diasporas in other regions or societies.

The Chinese people have a long history of migrating overseas. Due to acculturation and assimilation, overseas Chinese espouse multiple identities that add to the richness in manifestation of Chinese personalities. The diverse and multidimensional identities among overseas Chinese can be explored through identity conflict and integration in the experiences of acculturative stress and socio-cultural adaptation, cultural competence mediated by coping strategies, personal and situational factors, social support (i.e. in the context of ethnic communities & host cultures), and the roles and interpersonal relationships within the foundation of the Chinese family (i.e. the concepts of family harmony and filial piety) over time and generations (Ward & Lin, 2010). The voices of Chinese immigrants speak of the evolvement of Chinese culture in new lands, as well as their hybridized identities as overseas Chinese. As a pioneering effort, the authors of this paper endeavor to expound upon the experiences of Chinese in Malaysia (CIM), in the context of mental health services. In comparison to Hong Kong and Taiwan, psychology practice is considered to be in its infancy stage in Malaysia. While academic psychology has existed since the late 1970s, applied psychology disciplines have surfaced only in the past 30 years (Ng, Teoh & Haque, 2003).

The Chinese as the second largest ethnic group in Malaysia with a population of 6,650,000 (23.4%) (Department of Statistics, 2016), is also diverse in its dialectic subculture, education background, generation gap, residential areas, and exposure to the amalgamated mainstream Malaysian culture. The aim of this chapter is to introduce the ecological characteristics of CIM and how they shape the unique needs of mental health among CIM. The objective is to empower mental health practitioners to be culturally sensitive and competent in providing services to the CIM community. Due to their unique migration history and settlement in Malaysia, CIM are known for their multilingual ability, strong work ethics, emphasis on education, and family piety. Their relative absence in the political arena, ethnic identity crisis, mistrust towards governmental system, and lack of solidarity have made them vulnerable to psychological stressors. In recent years, there is a rise in awareness of mental health issues among CIM in the public arena through promotional efforts of NGO services, religious groups, para-counselors, and social media. However, there is still stigma towards mental illness that creates barriers for CIM to seek help, especially among the less Westernized and urbanized populations. Since not all lower class CIM could afford private mental health services and deem such services as priority, many CIM rely mainly on family network or strong relational ties as emotional support. From the practitioners’ standpoint, many trained counselors or service providers are not fluent in using Mandarin or other Chinese dialects in providing counseling. Moreover, even when there is an ethnic or language match between the counselors and counselees, the former often found that translation of Western psychological concepts a challenge in the counseling room with CIM, and do not necessarily possess multicultural competency. The uncritical transposition of the Euro-American values embedded in Western psychology also contributes to potential cultural clashes in the counseling room with the more traditional CIM (e.g. assigning labels such as “over-enmeshment” to CIM families). This struggle is quite obvious as Malaysia is an ex-colonized country struggling to find its multiracial-multicultural identity after 60 years of claimed independence from British influence. It is therefore imperative to produce a mental health discipline that is open to
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