Exploring Whether a Collage Art Intervention Enhances Levels of Resilience in Asian Americans Who Have Experienced Emotional Suppression

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Exploring Whether a Collage Art Intervention Enhances Levels of Resilience in Asian Americans Who Have Experienced Emotional Suppression

by

Casey Soto

A culminating thesis submitted to the faculty of Dominican University of California in partial fulfillment of the requirements for the degree of Master of Arts in Art Therapy

Dominican University of California
San Rafael, CA
2023
Abstract

Emerging research has shown cross-cultural differences when coping with negative emotions (Yoshie & Sauter, 2020). The Asian American population uniquely experiences both western and eastern cultures, which have different ideologies around expressing negative emotions. In Eastern Cultures, it is common to suppress negative emotions, while Western cultures find it more accepting. Suppressing emotions is a form of emotional dysregulation and can cause a negative effect on one’s psychopathology. This mix-methods study explores whether collage art-based intervention enhances levels of resilience with Asian Americans who have experienced emotional suppression. The theoretical orientation, Acceptance Commitment Therapy (ACT), was used as a guide for participants to aim for psychological flexibility. Although the results found within the study do not support the hypothesis of collage art intervention enhancing resilience, the use of ACT demonstrates its effectiveness with the Asian American participants. With the results from this study, the student researcher aims to cultivate awareness regarding mental health stigmas as it is still prevalent within the Asian American population. Contributing to Asian American research may assist in normalizing and discovering different outlets of therapy.
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Chapter I: Introduction

Emotions influence almost every element of human cognition, behavior, and social structure (Turner, 2007). As individuals grow, they may learn emotional dynamics that affect one's behavior and reaction. However, emotional suppression can also be learned and can inhibit the expression of current emotions (Srivastava et al., 2009). The conceptualization of emotional suppression differs between individualistic and collectivistic societies. Individualistic societies tend to discourage emotional suppression because it becomes detrimental to one's psychological well-being and life satisfaction (Kwon & Kim, 2019). For instance, those in individualistic societies believe that communicating one's emotions, goals, and needs are necessary for one's autonomy and independence (Boiger et al., 2013). Alternatively, interdependence and goals centered on the group as a whole, rather than individual ambitions, are more important in a collectivistic society. (Boiger et al., 2013). Therefore, whether communicating one's emotions is seen as negatively or positively, it can still be discouraged because it causes imbalance to social harmony and interdependence (Kwon & Kim, 2019). Since collectivistic societies tend to work in groups, as the group grows, the next generation is influenced by the relationships that are built. For this reason, the interdependence between each member of the group shapes the behaviors and personal identities of the new generation.

Asian Americans

The unique life experiences of Asian Americans, which incorporates both aspects of individualistic and collectivistic cultures, was the population of focus for the current study. Asian American are those who had at least one immigrant parent when they were born in the country (Perkins et al., 2014). While Asia is a region that is categorized as a collectivistic society, the United States is categorized as an individualistic society. As families migrate from Asia to the
United States it may be easier to acclimate to a new environment by incorporating their culture, values and traditions due to familiarity. Because the collectivistic culture influences the behaviors of the new generation, this also applies to how one processes their emotions. As emotional suppression is more prominent in the collectivistic society, there is a higher chance that this emotional regulation strategy will be mirrored. This can pose an issue to one's mental health.

**Asian Culture and Mental Illness**

There remains a stigma against mental illness in the Asian culture. When one is seen with a mental health issue, it can be associated with lack of determination, insubordination, and also family shame (Yoon & Jang, 2021). Because the collectivistic ideology requires every member of the group to contribute to their goals, poor mental health can negatively affect the social harmony of the group. This stigma can influence members of the group to suppress their emotions and this behavior is passed down to future generations. This can be an issue with those who are struggling with trauma or other mental health issues. As emotional suppression exists in the Asian culture, it may be difficult for one to seek further help and express their emotions or negative experiences to mental health providers. This may be detrimental to one's well-being and satisfaction in life.

**Emotion Regulation Strategies**

Although this generational behavior has been implemented in Asian culture, there are ways to discover and develop healthy emotion regulation strategies. The traditional definition of emotion regulation is a learned behavioral response to control one's emotions when encountering an emotion-inducing situation/stimulus and potentially altering the behavioral response to the emotion (Carruthers, et. al, 2022). There are two main processes of emotional regulation
strategies: cognitive reappraisal and emotional dysregulation. Cognitive reappraisal refers to how individuals view and respond to an emotional stimulation or incident (Pan, et. al, 2018). This allows them to monitor, control and change their reactions based on the situational demands (Cole et. al, 1994). This can include how one initiates and maintains the intensity and duration of the emotion (Carruthers, et. al, 2022). On the other hand, emotional dysregulation refers to impaired ability to regulate an negative emotional response or distress (Dvir et al., 2014). A study done by McLaughlin et al. (2011), found that emotional dysregulation contributed to multiple mental health disorders. Meaning, emotional dysregulation has its negative effects if not addressed. However, there is a new outlook on emotion regulations strategies.

According to Gratz and Roemer (2004), emotion regulation may also involve becoming aware, understanding and accepting emotional distress rather than controlling the response to emotions. The idea of this new perspective is not to control the emotional response such that it may appear individuals are avoidant of the current emotions (Carruthers, et. al, 2022). By avoiding current emotions, it is possible that individuals may not learn the appropriate emotional regulation strategies to cope with negative emotions.

As individuals grow, they learn and develop healthy skills to regulate their emotions from their home and environment. However, emotional dysregulation is the adverse effect of cognitive reappraisal, which can also be learned. Gross and Jazaieri (2014) defined emotion dysregulation as using ineffective ways to regulate negative emotions, rather than effective emotion regulation strategies. It is possible external factors or experienced trauma during adolescence and adulthood may interfere with learning healthy emotion regulation strategies during early stages of development. By continuing this maladaptive behavior, this may result in the persistence of unwanted negative emotional states over time (Linehan, 2014).
In relation to emotional suppression, it can be categorized as a form of emotion dysregulation. For this particular reason, emotional suppression is a response modulation which inhibits an ongoing emotion-expressive behavior (Gross, 1998). There are negative effects of continuing emotion suppression throughout one's time, and this form of emotion dysregulation may be a leading cause of psychopathology and other mental health disorders.

Gratz and Roemer’s (2008) view on emotion regulation strategies implements mindfulness, which can bring awareness and understanding of the generational behavior response to emotions that has been engrained in the Asian culture. There may be some Asian Americans who are not aware of this innate behavior. By providing literature on emotional suppression, this may bring awareness to healthy emotional regulation strategies and how it may benefit the Asian American community.

**Art Therapy**

Art therapy is a form of creative/expressive therapy. In art therapy, involvement with art media can result in spontaneous expression of emotions (Lusebrink, 2004), such that it can be beneficial for individuals who have difficulty expressing cognitive emotions. Because emotional suppression is ingrained in children within collectivistic societies at an early age, it may be simpler for them to inadvertently repress feelings instead of expressing them. However, art therapy creates a pathway for vocalizing their past experiences and emotions without actually speaking (Pifalo, 2002). Therefore, utilizing art interventions with the Asian American population may provide an outlet to communicate, express, and understand emotions that have been stored inside for years. Art therapists are aware of how creative metaphors may bring abstract concepts to life and provide unexpected insights into reality (Chilton & Scotti, 2014). It should be noted that it is incredibly helpful for those who experience emotional suppression to be
in a non-judgmental environment, which may decrease feelings of anxiety, rumination, and fear of shame.

**Collage as an Art-Based Intervention**

Collage art is one of many art interventions used in art therapy. Collages are visual artworks which involves selecting images from a magazine and/or textured paper; cutting, tearing, or altering the selected pieces and arranging and gluing them on a support (eg. cardboard or paper) (Chilton & Scotti; 2014). By personally selecting the elements for each collage, this allows the client to experience creative outlets for self-expression and also textile sensory stimulation (Price & Swan, 2020). Reynolds (2002) found that textile art may be a powerful outlet for symbolic expression and achieving a renewed and strong sense of self. As collage making can be considered textile art, this can aid individuals to unlock their creative expression, self-discovery and the release of internal stress. Embodied cognition in the form of collage develops new metaphors, and it may be one of the unique ways that art may be used as a tool of discovery. (Chilton & Scotti, 2014)

Furthermore, not everyone is skilled in art. Those who are not competent or proficient in art may find creating art daunting. However, collage making is a popular art intervention among art therapists (Meguro et. al, 2009), who have found it to be beneficial for persons who are apprehensive about creating their own representational drawings or paintings (Reynolds, 2002). It is possible for clients or patients to experience stress or anxiety when working with mediums they are not familiar with or have difficulty controlling. Through collage art, there is a possibility that the client or patient will feel less intimidated, in comparison to other mediums, such that it does not require the skills to draw (Stallings, 2010). Meguro et al. (2009) used collage art
technique to analyze artwork done by patients with Alzheimer’s disease and found that these patients did experience some difficulties in collage making, but it appeared easier than drawing.

The student researcher kept in mind that not all participants will be skilled in art making. The purpose for utilizing collage art in the current study is to lower the possibility of stress or anxiety emerging within the participants as it would detract from the focus of this research. According to past research, when other art-based media are used, stress or anxiety levels may appear to be higher (Meguro et al. 2009; Stallings, 2010).

As the current study took place during the COVID-19 pandemic, it is important to bring awareness to accessibility and affordability of art supplies. It is common for quality art supplies to be costly. Although some individuals may experience financial hardship, collage art materials (i.e. glue, magazine images and scrap paper) are generally accessible and many individuals can cut, tear, and glue selected images together to create a collage (Chilton & Scotti, 2014).

Acceptance Commitment Therapy

One may have difficulty dealing with negative feelings or emotions around thoughts associated with an experience, (Walser, & Westrup, 2006) therefore; it may seem easier to become avoidant to them. Acceptance Commitment Therapy (ACT) (Hayes, Strosahl, & Wilson, 1999) is a theoretical orientation that encourages one to face their negative thoughts, feelings and emotions. In addition, ACT utilizes personal values and mindfulness practice as a guide for one to commit to behavioral change. Utilizing ACT with the Asian American community can be a common ground between the therapist and the client during practice (Hall et al., 2011). ACT addresses internal experiences of acceptance as well as behavior modification that is consistent with values, significant relationships, and other facets of life (Wharton et al., 2019). As the ACT based approach brings awareness to negative thoughts, feelings, and
emotions, it may seem challenging to incorporate this approach to the Asian American community. However, this approach may resonate with Asian American life experiences, norms and values (Hall et al., 2011). Therefore, this was used in the study Acceptance Commitment Therapy approach as it may have positive implications to the participants.

**Defining Resilience**

There has been an ongoing debate on properly defining resilience (Masten & Reed, 2005). Munoz et al. (2017) discussed the many ways resilience can be defined and the necessary components needed. Moeller-Saxone et al (2015) described resilience as a process in which psychological, social, environmental, or biological factors affect an individual at any phase of one's life to develop, maintain or regain one's mental health regardless of experienced adversity. Another study defined resilience with two critical conditions: exposure to significant threat or significant adversity and the altering the negative effect on the developmental process by achieving a positive adaptation (Luthar et al., 2000). Although resilience can be interpreted differently, there are common factors. Most definitions include a group of concepts, related to self, that motivate goal-directed behavior in the face of adversity (Masten & Reed, 2005).

For the study, the student researcher will utilize the definition by Moeller-Saxione et al (2015). As mentioned earlier, emotional suppression may have a negative effect on one's mental health, and by discovering healthy emotion regulation strategies, eg. art interventions to help overcome emotional suppression, a person may increase their life-satisfaction and wellbeing.

**The Current Study**

The current study addressed the question whether using a collage art intervention will enhance levels of resilience in Asian Americans who have experienced emotional suppression. A mixed-methods approach utilizing quantitative measures and arts-based interventions was
conducted. The student researcher used Acceptance Commitment Therapy (ACT) as the theoretical orientation to invite mindfulness and reflect on the unique life experiences growing up Asian American. From this, the objective is to cultivate awareness of the importance of maintaining good mental health, becoming mindful of generational behaviors, and discovering different outlets of therapy to the Asian American community.
Chapter II: Literature Review

The purpose of this thesis is to learn more about how emotional suppression is used as an emotion dysregulation strategy and the harmful effects it has on mental health. As emotional suppression is common in the Asian American community and stigmas associated with the lack of help-seeking behaviors for mental health care, literature will be provided. To gain a better understanding, the student researcher explains about the origins of emotional suppression in Asian culture to better understand the cultural context. The following topics will be discussed in the literature review: immigrants in America, second-generation Asian Americans, mental health stigmas in Asian Americans, cultural barriers related to help seeking behaviors, the negative effects of emotional suppression, brain processes and emotion regulation, associations between the brain and art therapy, the relation between art therapy and emotional suppression in the Asian American population, how to build resilience, and ACT used among Asian Americans. With the provided literature this may help broaden the understanding about Asian Americans and emotional suppression. The student researcher hopes by conducting the study, bring awareness and advocate for the importance of mental health in the Asian American population.

Immigrants in America

Individuals who immigrate from one nation to another, also referred to as first-generation (Perkins et al., 2014), go through the process of psychological acculturation, which is the process of being exposed to a culture different from their country of origin (Doucerain, 2019). When individuals move to a new society, they adapt to the new culture's lifestyle, social norms, and values. As a result, immigrants must determine how much they want to adapt to mainstream culture (eg. American culture) and how much of their own heritage (eg, Asian culture) they want to maintain (Doucerain, 2019). This process is also referred to as assimilation, which refers to the
process by which individuals and groups with different cultures learn and adopt the fundamental values, attitudes, and way of life of another culture (Rumbaut, 2015).

Considering the collectivistic and individualistic ideologies, immigrants in America need to make a choice about how to integrate or adapt to the individualistic culture. However, Asian immigrants in the United States tend to preserve their value system from their countries of origin (McCord & Raval, 2015) meaning, it is possible to implement collectivistic ideology in the individualistic society. Furthermore, individuals think about the extent to which emotion suppression is valued in their own cultures when deciding how much to suppress their emotions (Nam et. al, 2017). If an individual's collectivist ideology is strongly valued and is carried over to a new culture (e.g., the United States), the concept of emotional suppression may persist.

**Second Generation Asian Americans**

Second generation Asian Americans, who had at least one immigrant parent when they were born in the country (Perkins et al., 2014), grow up experiencing enculturation, which is the degree to which a person adopts the values and behaviors of an indigenous or ethnic culture (Piedrasanta, et al, 2021). While immigrant parents hold more of their country of origin’s values and traditions, it is very likely the parents will pass down their familiar sociocultural norms to their own children (McCord & Raval, 2015). The second-generation Asian Americans are now exposed to two different cultures: Asian culture and American culture.

Sociocultural norms may differ from one person to the next. If the parents have a collectivist ideology, the concept of collectivism may be instilled to the child from an early age. The first generation of Asian American children are taught to avoid expressing negative emotions in order to maintain social harmony (Kwon & Kim, 2019). Maintaining social harmony can mirror some of the traits of the "model minority". This is a concept that refers to
Asian Americans being portrayed as the ideal minority group due to achieving greater than that of other racial minority groups (Parks et al., 2022). Some stereotypic behavior can be identified as having willpower, interdependent, submissive, and obedient (Lee et al., 2009). Therefore, when an attribute is not seen by an individual, in the lens of the Asian culture, they are considered disrespectful or defiant. According to Sue and Morishima (1982), Asian Americans being categorized and stereotyped as the “model minority” creates the preconceptions of assuming there are very few social and psychological problems. For this particular reason, it is likely among Asian Americans to refuse help seeking behaviors and as a result, Asian Americans continue to demonstrate a wide range of mental health concerns (Leong & Lau, 2001).

**The Stigma and Barriers behind Mental Health in Asian Americans**

Asian Americans tend to be concerned about the stigmatization of mental health treatment which prevents help-seeking behaviors (Leong & Lau, 2001). In the Asian culture the stigma stems from the conceptualization of an individual's inability to contribute to family or collective society. As mentioned previously, there is shame, a lack of determination, and insubordination associated with those with mental health issues (Yoon & Jang, 2021). These concepts fuel the stigma in the Asian American community reinforcing the lack of help-seeking behavior regarding mental health. This may pose an issue for those who struggle with traumatic experiences or other mental health issues.

From a different standpoint, family members of those with mental illnesses may feel guilty and experience shame (Tung, 2011), and this can be a stressful situation due to the mental health stigma in the Asian culture. There is a possibility that the cognitive process of “self-blame” may transpire due to experiencing a stressful event through guilt, shame, and contempt towards oneself (Zahn, et al., 2015). For this particular reason, it is likely that the family
member(s) may show hesitation and refuse to admit and recognize publicly family members who suffer from mental illness (Tung, 2011). The stigma associated with mental illness among Asian Americans, in addition to the collective obligation to avoid causing shame to one's family, has resulted in a delay in obtaining adequate mental health services (Leong & Lau, 2001; Tung, 2011). The concern of stigmatization hinders the willingness of the help-seeking behavior, and reinforces the belief of avoiding treatment for mental health among Asian Americans (Leong & Lau, 2001).

Aside from the stigma of mental health among Asian Americans, there are other barriers that may be a factor when seeking treatment. Treatment credibility, which is defined as the general belief that therapy is helpful and effective, may play a role in help-seeking behaviors among Asian Americans (Zane et al., 2005). Kim & Zane (2016) examined help-seeking intentions between Asian Americans and Caucasian American students experiencing psychological distress. The researchers discovered treatment credibility is positively associated with self-disclosure utility and general intentions of therapy among Asian American students. It is possible Asian Americans may believe that therapy is not a credible technique to deal with emotional difficulties or mental health illnesses, which reduces the value of therapy thus becoming a barrier to help-seeking behaviors. This brings emphasis on how important it is to contribute to Asian American research. As more studies are done revolving around mental health and its benefits, it may bring more credibility to therapy.

Leong and Lau (2001) discussed barriers based on the Asian American experience through the lens of affective barriers, cognitive barriers, value-oriented barriers, physical barriers and the barriers between subpopulations of Asian Americans (Leong & Lau, 2001). The researchers examined the barriers to providing effective mental health to Asian Americans. They
discussed the cognitive barriers that may come from traditional Asian beliefs of nature, causes, and cure of mental illnesses and well-being (Leong & Lau, 2001). For example, some southeast Asian groups believe mental disorders with negative emotion are not linked with emotional disturbances (Leong & Lau, 2001). Other Asian countries only consider behaviors that distress the social group as an indicator of mental illnesses and if the behaviors are dangerous, disruptive, or psychotic, then the action of seeking professional care is made (Leong & Lau, 2001). This poses an issue for individuals experiencing internalized mental health issues (e.g., Anxiety, depressive disorder, trauma, etc.). Furthermore, the researchers discussed the elderly subpopulation within Asian Americans, as they are seen as more traditional and less acculturated, thus the likelihood of becoming more resistant to obtaining help-seeking behavior regarding their mental health (Leong & Lau, 2001). For this particular reason the elderly subpopulation continues to hold traditional cultural ideas, values, and attitudes towards mental health care (Leong & Lau, 2001). This concept supports what was stated earlier regarding acculturation. More highly acculturated Asian Americans have been found to have more positive views regarding mental health services as well as greater levels of help seeking behaviors (Atkinson & Gim, 1989; Tata & Leong, 1994; Ying & Miller, 1992). Lastly, unfamiliarity with mental health services is a possible barrier (Leong & Lau, 2001) as traditional western mental health care involves expressing emotions and feelings with professional care providers (Tung, 2011). Since traditional Asian cultures are reluctant to express and communicate feelings or discuss family difficulties, this conflicts with the western tradition of mental health care (Tung, 2011). This avoidance of mental health care services highlights the lack of knowledge and research within this field among Asian Americans. For this reason, it is possible some Asian
Americans may experience unfamiliarity with available services for mental health, symptoms, diagnosis and treatment approaches (Tung, 2011).

Therefore, it is important to understand the perspectives of individuals experiencing mental health issues and how family members experience other members of the group with mental health issues while maintaining the values of collectivist ideology. Overall, Asian Americans are one of the fastest growing groups in the United States, yet their mental health requirements for treatment continue to be unmet (Yu & Chang, 2020). With the study, the student researcher aims to contribute to Asian American research to break down barriers regarding mental health. With the findings of the study, there is a possibility that it may provide more credibility to therapy and art therapy.

**The Brain and Emotional Regulation Processes**

There is a correlation between the brain and how the negative effect of emotional dysregulation leads to future mental health issues. The parts of the brain that are most involved in this connection include the amygdala, orbitofrontal cortex (OFC), and prefrontal cortex (PFC). The amygdala is a part of the brain which involves emotional processing (Lusebrink, 2004). This information is then sent to the thalamus, where it undergoes further processing and is then sent to the OFC and the PFC (Lusebrink, 2004). The OFC is responsible for processing stimuli including somatosensory, taste, smell and abstract reinforcers (Rolls, 2004) and where emotion regulation is likely to occur (Lusebrink, 2004). The PFC is where decision making happens (Miller & Cohen, 2001), includes parts that deal with the affective working memory, and decides whether emotions are positive or negative (Lusebrink, 2004). Imaging studies have shown how these frontal areas are critical for controlling emotion-related behavior, which adds to the evidence of frontal involvement in emotion regulation (Banks et al., 2007). Specific frontal brain
regions such as the OFC, dorsolateral prefrontal cortex (DLPFC), dorsal medial prefrontal cortex (DMPFC), ventrolateral prefrontal cortex (VLPFC), and anterior cingulate cortex (ACC) are engaged in emotional suppression and reappraisal based paradigms (Banks, et al., 2007). Overall, the evidence from human brain studies indicates a connection in the amygdala-frontal as a path for emotion generation and also discusses the two processes of emotion regulation (Banks, et al., 2007).

**Emotional Suppression and Its Negative Effects**

In connection to emotional suppression, there are similarities in brain processes with emotional suppression and when individuals are experiencing mental health illnesses. According to research, individuals experiencing depression, anxiety, impulsive aggressiveness, and personality disorders show similar parts of the cortex (e.g., ACC, DMPFC, DLPFC, and/or the OFC) appearing to be dysfunctional during cognitive-emotional activities (Banks, et al., 2007).

The link between emotional suppression and mental health illnesses, as stated above, shows that similar areas are active in the brain. There is growing evidence that habitual suppression has negative psychological consequences (Berke et al., 2018; English, Lee, John, & Gross, 2016; Patel & Patel, 2019). When determining how much to suppress their feelings, people may think about how much emotion suppression is valued in their own cultures (Nam et al., 2017). It is important to be aware of the possibilities that older Asian American immigrants pass down this learned behavior to the next generation of children. If this behavior persists, the likelihood of mental health issues to emerge in the future may become greater.

As individuals grow, the ability of learning healthy emotion regulation strategies may prevent or reduce the use of emotion dysregulation, like emotion suppression. The use of emotion suppression not only affects individuals mental health, but it affects life-satisfaction and
wellbeing. According to Banks et. al. (2007), in times of distress, the ability to self-regulate negative emotion improves mental and physical well-being, whereas the loss of this skill increases the risk of psychopathology.

Effects of Emotional Regulation on Life Satisfaction

It is important to note that successful emotional regulation strategies is not a one-size-fits all approach (Jiang et al., 2022). It is individualized depending upon personality, characteristics and unique life experiences to determine the strategies used based on distinct situations (Dore et al., 2016). There are benefits to using healthy emotional regulation strategies that pertain to each person. Jiang et al.,(2022) investigated the effects of gender, social stress, and emotion control strategies on life satisfaction in emerging adults. The researchers used reappraisal and suppression as a predictor to life satisfaction, and their results indicated that reappraisal protected participants against the negative impacts of social stress on life satisfaction and a positive effect of suppression on life satisfaction when exposed to high stress levels (Jiang et al. 2022). The researchers also stated that their present findings are consistent with past research on reappraisal and how it protects emotional, physical, and social health outcomes (Jiang et al. 2022).

Associations between Brain Processes, Collage Art Intervention, and Reminiscence

Memory is incredibly complex. To process and retain different types of information, numerous brain systems and regions are involved. When clients or patients create art during art therapy sessions, it activates different pathways of the brain such as memory (Lusebrink, 2004). There are three major categories of memory: sensory-memory, short-term memory, and long-term memory. For the purpose of the study, the student researcher will elaborate on long-term memory, commonly referred to as declarative memory.
**Declarative Memory**

Declarative memory is the process of acquiring and recalling information that enables comparing and contrasting the remembered facts, events, and episodes (Coray & Quednow, 2022). One form of declarative memory is episodic memory, meaning one can consciously recall previously learned experiences throughout different time periods, which can range from minutes to years (Cacciaglia, et al., 2018). Episodic memories can be stored in the frontal cortex of the brain while the right hippocampus and the right prefrontal cortex are involved in declarative memories (Lusebrink, 2004). As the current study utilizes collage art intervention, the declarative memories will be accessed as the participants reflect on their upbringing as Asian American.

**Reminiscence**

The concept of reminiscence is defined by the process of recalling significant personal events or experiences from one's past (Lin, Dai, & Hwang, 2003). There have been many studies done on reminiscence and elderly with Alzheimer’s Disease or dementia. Stallings (2010) explored whether collage making helps patients with dementia to communicate information that they might not be able to express verbally. They discovered the patient’s interaction with the collage process served as an opportunity to reminisce, which is an important part of the life review process (Stallings, 2010). However, despite reminiscing often being associated with the elderly, it is a common habit among individuals of all ages (Dempsey et. al., 2014) and the creation of a collage seems to involve memories and symbolic associations (Lusebrink, 2004). There are similarities found with Stallings research method and the current study: utilizing the collage art intervention for Asian Americans to reflect on their childhood. As participants are in
the process of creating their collage it is possible that they will begin to recollect memories from their unique life experiences.

**Art Therapy, Emotion Suppression, and the Asian American Population**

Art can be a powerful tool for communicating, such that it can be useful in understanding one's inner experience (Carolan & Backos, 2018). Art therapy may replicate this method of non-verbal expression, making it more comfortable for Asian Americans to do so. Individuals who are suffering from mental health issues or experienced a traumatic event, may have a higher possibility of emotional dysregulation (Naff, 2014).

As emotional suppression is seen as a form of emotion dysregulation, art interventions have been used in psychotherapy and counseling (Hass-Cohen & Carr, 2008). When incorporating art interventions, the art making process has the ability to help to create a concrete representation of mind-body connectivity (Hass-Cohen & Carr, 2008). With the history of emotion suppression among asian Americans, Art may serve as a stepping stool to healing and expression. Hensel et. al. (2012) studied college students as a strategy to promote self-care and explore values and reported that students disclosed gains in relaxation, empowerment, value clarification, and self-awareness through art therapy. Students reported art therapy as an avenue for emotional release, humor, and self-exploration (Hensel et al., 2012).

When applying art therapy to the Asian population there is going to be a period where past inhibitions, fears and resistance may arise (Kalmanowitz & Chan, 2012). However, this can be seen as a part of their therapeutic healing. According to Kalmanowitz & Chan (2012), after overcoming the challenges they encounter at the beginning of art therapy, the creation of art has a transformative quality. It can also inspire a degree of creative energy (Kalmanowitz & Chan, 2012) and may encourage the flow of emotions (Shapiro & Forrest, 2004). With the help of
psychoeducation, this may help individuals become aware of human sentiments and unique life experiences that affect them deeply (Suliman et al., 2009). For the presenting study, the student researcher aims to encourage expressing their emotions through the art making process when reflecting on their Asian American experiences.

**Building Resilience**

As the term resilience has many meanings, the student researcher will be focusing on the definition by Moeller-Saxone et al. (2015) in which resilience is a process where psychological, social, environmental, or biological factors affect an individual at any phase of one's life to develop, maintain or regain one's mental health regardless of experienced adversity. It is essential to discuss and elaborate on specific components of building one's resilience to bring insight to the current research. According to the American Psychological Association, a topic on *Building Your Resilience* states there are four core components: connection, well-being, healthy thinking and meaning (Palminter, et. al., 2012).

**Connection**

Social connection refers to the feeling of acceptance within a group (Palamaro Munsell et al., 2012). According to Maslow's Hierarchy of needs, sense of belonging is one of the fundamentals to self-actualization, which is one's full potential (Maslow, 1943). Meaning, it is imperative to build meaningful relationships and similarly, social connection is an important factor to building resiliency.

It is common for those who struggle with mental health illnesses and/or trauma to isolate themselves, which can lead to psychological distress, and other mental and health issues (Palamaro Munsell, et al., 2012). When building connections, there must be a commonality between members of the group, (i.e. taste in music, fashion or hobby). Building connections can
also be applicable to one's experiences. Those who have mental health issues or have experienced trauma, may have a difficult time with friends or family to fully understand and/or empathize with them. Perhaps joining mental support groups or building friendships with people who have experienced similar experiences can create a sense of kinship. According to Palamaro Munsell, et al. (2012) those who feel connected to others have better overall physical health, less likely to obtain other mental health issues, and are better able to cope. In contrast, individuals who lack social connection are associated with low-self-esteem and interpersonal behaviors that can contribute to psychological distress (Palamaro Munsell, et al., 2012).

On the other hand, outside of mental health, a study done on GPA trajectory and introductory psychology college students, predicted that students who lacked a sense of belonging in college would benefit more from affirmation from others than those who had comparatively higher sense of belonging (Layous, et. al, 2016). The researchers discovered that there were high levels of seeking affirmation in students who have low sense of belonging, which also affected GPA trajectory. There are positive effects shown through different aspects of life. Whether it is through academics, mental health groups or simply enjoying similar hobbies, it is seen that there are benefits to building social connections with those who have commonality. With individuals who use emotional suppression as an emotion dysregulation, finding others who can empathize and can validate the same experiences with emotional expressions.

**Wellness**

Wellness is the holistic integration of healthy behaviors and practices to daily life (Stoewen, 2017). This includes a physical, mental, and spiritual approach to striving for personal harmony and enhancing well-being. An article done by Stoewen (2017) stated there are eight interdependent dimensions of wellness: physical, intellectual, emotional, social, spiritual,
vocational, financial, and environmental. All eight dimensions play a factor in enhancing life satisfaction. It is important to explore activities that are catered to certain individuals' lifestyles, such that people have different interests and priorities. According to Stoewen (2017), all eight dimensions must be observed and practiced. For this particular reason, if one dimension is not noticed, it may hinder and affect other dimensions of wellness. Being mindful of this can bring awareness to habitual behaviors that negatively affect the holistic well-being of an individual.

Fostering mindfulness and wellness goes hand in hand. Mindfulness plays an important role when individuals use emotional suppression as an emotion dysregulation strategy. Acknowledging where the use of emotional suppression stems from and understanding that expressing and communicating complicated thoughts, emotions and feelings are not always seen in a negative connotation. As the student researcher applies ACT based approach within the research, mindfulness is also incorporated. By integrating a mindfulness intervention, this may assist in becoming aware of unhealthy behavioral responses with emotions that was implemented at a young age.

**Healthy Thinking**

Altering one's way of thinking may be difficult, especially if it is a behavior that has been instilled since childhood. According to the American Psychological Association, transforming the way an individual thinks can impact how one may feel and level of resilience when facing challenges (Palmiter et al., 2012). With discovery and practice, becoming aware of the patterns when suppressing emotions, acknowledging the origin of the behavior (e.g. when experiencing emotional suppression), then deciding the best way to react during a situation shows a healthy emotion regulation strategy. This will assist in developing a positive and healthier way of thinking.


**Meaning**

People who suffer from mental health issues tend to experience a lack of interest in engaging in activities they used to enjoy, or even experience a loss of identity. This may hinder one's satisfaction in life. Yu and Chang (2020) wanted to further the understanding of three positive psychological constructs: self-compassion, relational and personal meaning in life in Asian American, and their research focused on if the positive psychological constructs can predict adjustment and wellbeing. One of the hypotheses of their research was to confirm Seligman’s (2011) claim that finding meaning in life is a critical component to wellbeing (Yu & Chang, 2020). As expected, the researchers confirmed both depressive symptoms and life satisfaction demonstrated its effects with personal meaning in life. This study highlights how important it is to discover meaning in life.

**Emotional Suppression and Resilience**

All four core components mentioned above are necessary to building resilience. By learning and implementing connection, wellness, healthy thinking, & meaning, it is possible that the participants are likely to gain healthy adaptive behavioral responses to assess and react to current or triggering emotions during a stressful situation. Since emotional suppression has its negative effects on mental health, Hwang and colleagues (2018) stated when Asian Americans do finally seek help, they present as more clinically severe. Therefore, it is important to bring awareness to the resources and benefits of mental health as it may prevent future mental health issues from emerging or worsening.

**ACT Hexaflex Model of Psychological Flexibility**

The goal of ACT is to foster rich, fulfilling, and meaningful lives (Backos, 2022). Utilizing the theoretical orientation in the study, it is important to discuss the framework of
ACTs Hexaflex model seen in *Appendix H*. The Hexaflex model involves 6 core processes to serve as a foundation for treatment. Cognitive defusion (i.e., separating oneself from ideas, opinions, memories, statements, and other judgments that may lead to distress) Experimental Acceptance (i.e., practicing non-judgmental awareness and willingness to contact internal and external events), Contact with the present moment (i.e., being in touch and aware of one’s experiences of what is happening in the here and now), Self as Context (i.e., learning to observe the tightly held beliefs and experiences about one’s self), Values (i.e., determining what is important in one's personal life; giving meaningful direction and decision making for a richer lifestyle) behavior, and Committed Action (i.e., maintaining behaviors that move toward valued goals and important aspects of life) (Rolffs et al., 2008; Prevedini et al., 2011). It's important to understand that these six processes do not stand alone but relate to one another. All six components foster and assist with developing psychological flexibility (Rolfss et al., 2018).

**ACT, Resilience, and the Asian American Population**

Both ACT and the four components to building resilience, utilize mindfulness practice as a guide for behavioral change. ACT as a theoretical approach requires individuals to be present and encourages facing negative thoughts and emotions. When it comes to building resilience, this mirrors the components of "wellness". When emotion suppression occurs, both involve a form of being present with current feelings and emotions.

In addition, it is possible using ACT may be a common ground between the therapist and the client during practice (Hall et al., 2011). ACT not only addresses the internal experience of acceptance, but also behavior change that is consistent with values, important relationships, and other life domains (Wharton et. al., 2019). This seems to resonate with the life experiences, norms and values among asian populations (Hall et al., 2011). Hayes, Muto and Masuda (2011)
suggested there are benefits to implementing cultural knowledge and adaptation to Asian Americans in Acceptance Commitment Therapy. Being culturally aware during therapy may be advantageous, and tailoring therapies to particular ethnic groups is likely to be effective (Sue, Zane, Hall, & Berger, 2009; Hayes, Muto, & Masuda, 2011). Although the research is currently sparse, the existing evidence suggests that ACT may benefit Asians and Asian Americans (Hayes, et. al., 2011).

For this particular reason, by using ACT approach in the present study, the student researcher may aid in bringing perspective through mindfulness and bringing intention prior to the art making. From this, there may be a possibility that participants discover different ways to foster healthy thinking, as this may be seen as one of the components to building resilience.

The present literature provides cultural awareness and understanding regarding the stigmas associated with mental health in Asian cultures. The student researcher wishes to explore whether incorporating ACT principles as part of the current study may help the Asian American participants become more resilient. The student researcher predicts that Asian Americans who have experienced emotion suppression will increase levels of resilience through collage making using the theoretical approach of ACT.
CHAPTER III: Methods

Restatement of Research Question/Hypothesis

The current study addressed the question whether a collage art intervention will enhance levels of resilience in Asian Americans who have experienced emotional suppression. Based on the neurological effects of emotion suppression on mental health and implementing the theoretical approach of ACT, the student researcher predicted that collage art intervention will enhance levels of resilience within the Asian American community. The objective of the study was to cultivate awareness and emphasize the importance of maintaining good mental health. This can also help others become more mindful of generational behaviors and discover different outlets of therapy to the Asian American community.

Population and Sample

The population of focus was within the Asian American community. The current study was advertised via social media (e.g., Facebook, Instagram) and provided a digital link which directed participants to a Google form. Participants were asked to first fill out the informed consent form before proceeding to the next step. Next, participants submitted their demographic information, contact information, then followed by a 42-item Asian American Value Scale. Last, participants provided a preferred email for follow up. Those who qualified for the current research, individuals must be over 18 years of age, identified as “Asian American”, and scored over 50% on the Asian American Value Scale. Individuals who scored over 50% on the Asian American Value Scale reflected values of enculturation (Kim, 2005). Participants who scored low Asian American Value Scale were sent an email stating that their scores do not meet the preset inclusion criteria, along with resources which referred to therapists, support groups, and art workshops, should they need it. Qualified participants will be contacted to proceed to the next steps of the study.
**Participant Consent Process**

Participants received details of the current study and potential risk through the informed consent form. Participants chose to engage in the current study on their own accord. If they choose to agree, possible participants continue with the next steps of the recruitment process.

**Location**

Each participant had an individualized session conducted via Zoom, a video conferencing software. The student researcher advised participants to choose a comfortable spot where they may communicate and make art without fear of being judged. Meanwhile, the student researcher conducted the individualized sessions in a private area at home to ensure confidentiality.

**Confidentiality**

Throughout the procedure of the current study and afterwards, the confidentiality of information acquired from study participants was strictly protected. The student researcher referred to participants anonymously, and their personal information was kept private. Participants' data was identified by number codes (e.g. participant 1), which was maintained separately from their consent forms. Google Drive was used to store and secure the data obtained from participants. The student researcher logged in with a secure password and Two-Factor Authentication and used their university Google account. This private Google account was used for all communication between the student researcher and participants. Names on artwork made by participants were obscured via Photoshop to maintain the anonymity of any personal identification. To protect the confidentiality of participants, all data received from them was erased once the thesis was done.
Research Design

The hypothesis for the current study was tested using a mixed-methods design and will be used with an Art-based and quantitative research approach. Through a quantitative research approach, questionnaires measured Asian American values before participants proceeded to actual research and the two constructs: Emotional Regulation strategies and Resilience was conducted during the study. The Art-Based research approach was used through collage art, which was analyzed and categorized by emerging themes of participants' artwork (i.e., the content, shape, and words), then coded.

Procedures

After recruiting qualified participants, the student researcher will send out sets of pre-cut collage clippings (containing images, patterns, and quotes), two pieces of paper, and one glue stick to the address provided. The student researcher will contact qualified participants to begin scheduling individualized sessions. Throughout each individualized session, participants will begin with answering questionnaires to measure levels of resilience. The student researcher will begin with a scripted mindfulness invitation Appendix C. Next, the student researcher will conduct the collage art intervention. Participants are asked to write positives and negative words of any size and direction on the paper describing their childhood. The student researchers will ask participants to tear the paper with words into medium size pieces. Participants are asked to reconfigure the torn paper, paste on to the second paper, and personally select and paste additional pre-cut collage clippings to create a new art piece. Once the participant has completed their final artwork, they will take another survey to measure their levels of resilience after the art making. Following the resilience survey, the participant will take another questionnaire regarding emotional regulation strategies used during the art process. At the end of the session,
the student researcher will begin debriefing regarding detailed information for the current study and resources that are available, should they need. Data collected from the questionnaires and the emerging themes of the participants will be categorized. This process will be observed by trained art therapy students which will support the current study.

**Measures, assessments, and interventions**

In the study the student researcher will begin the pre-qualification survey with the Asian American Value Scale-Multidimensional (AAVS-M). This will be a 42-item, 7-point likert scale type questionnaire to measure participants' adherence to Asian cultural values measuring five subscales: collectivism, conformity to norms, emotional self-control, family recognition through achievement and humility (Kim, 2005).

During the research session, participants will take the Five-by-Five Resilience Scale (5×5RS; DeSimone et al., 2017) which consists of 25 items to measure five dimensions of resilience: Optimism, Social Support, Emotion Regulation, Self-efficacy, and Adaptability. Their level of resilience will be measured prior to the art-based intervention and after, to determine whether their level of resilience has changed.

The last measure used in the study is the Emotional Regulation Scale-Artistic Creative Activities (ERS-ACA; Fancourt et al., 2019), it will measure the emotional regulation used during the creative process. This scale is an 18 item five-point likert scale with three subscales within the survey, which will measure their avoidance strategies, approach strategies, and self-development strategies. The ERS-ACA will be taken after the 5x5RS.

For the art-based intervention, participants are asked to create a collage. Participants will begin with writing words to describe their unique life of growing up Asian American on one of the papers provided. This will allow participants to reflect on different stages of their childhood.
Next, participants are asked to tear paper into medium sized pieces. Participants are then asked to use torn pieces of paper, pre-cut collage clippings, coloring tools and writing utensils to create a collage that reflects their unique life of an Asian American present day.

**Materials**

Art materials for the current study will consist of two blank sheets of paper, writing utensils (pencil or pen), coloring tools (i.e., color pencils or markers), pre-cut collage clippings and glue. Digital materials used will be the video conferencing platform, Zoom, to conduct individualized sessions for each participant. The student researchers will use various Google applications for the current study. Google’s form of email, Gmail, will be used as a tool for communication regarding only follow up to proceed to the next steps of the current study and available mental health resources provided. Google’s online word processor application, GoogleDocs, will contain the images, data, and other information regarding the current study. Google’s online software, Google Forms, will be used to create the surveys to measure the constructs of the study. Lastly, the data will be imputed into a statistical software suite, SPSS, to conduct simple statistical analysis.

**Data Analysis & Data Collection**

The quantitative research approach will be used throughout the questionnaires regarding the constructs of the current study: emotion suppression and resilience. As the questionnaires will be conducted via Google forms, it will automatically create an excel sheet of the results of each participant. The data will be collected and input into SPSS where the student researcher will develop the statistical data through simple statistical analysis.

For the Art-based research approach, the student researcher will ask all participants to send an image of their final art piece via email. The artwork will be observed and analyzed by
the student researcher to discover emerging themes across all artworks. Next, the student researcher will form a group of trained art therapy students to confirm the themes identified. The trained art therapy students will also include themes that were not seen by the student researcher. The student researcher will include the most common themes mentioned by the trained art therapy students.

**Risks and Benefits**

Possible minimal risk may surface from questions or art making process if participants are sensitive to emotion suppression. This may trigger unwanted thoughts, feelings or traumatic memories after participating in the study. Participants are thoroughly informed regarding the possible risks that may occur through the informed consent form and debriefing process. Mental health resources will be readily available to participants.

Though the study entails possible risks, there are benefits to the current study. One major benefit will be learning artistic ways to self-regulate thoughts and emotions. There are positive effects to creating art, especially collage making. This art process may have participants reflect on their own journey and may enhance self-awareness.

**Protection of Human participants**

The safety of the study's human subjects will always be a top priority. The California Association of Marriage and Family Therapists, the American Art Therapy Association, and Dominican University of California have all issued ethical criteria for the student researcher to follow.
Chapter IV: Results

This chapter reviews the results of the pre-qualification survey (which includes: informed consent, demographics and AAVS-M survey) taken by respondents who were interested in participating in the study. Next, there will be an overview of the results from the ERS and ERS-ACA surveys from participants who proceeded with the research. Last, the student researcher will discuss common themes found between each art piece made by the participants.

Pre-qualification survey

After advertising the study, thirteen individuals were interested and began the pre-qualification survey. Twelve individuals completed the informed consent form; however, one individual selected “no” to not participate in a zoom meeting for individual sessions, which resulted in exiting out of the survey. The twelve individuals proceeded to the demographic section.

Demographics

Figure 1 Participant Demographics
Individuals' ages ranged between twenty and thirty-two. All twelve individuals identified as Asian-American. The majority specified their ethnicity as Filipino-American (50%), with the rest identifying as Laotian-American (8.3%), Vietnamese-American (8.3%), Korean-American (8.3%), Chinese-American (8.3%), and Mixed race (16.6%). After entering the demographic section, individuals were asked to complete a 42-item likert scale survey regarding their Asian American values.

**AAVS-M Results**

<table>
<thead>
<tr>
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<th></th>
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<tr>
<td><strong>Total Score</strong></td>
<td></td>
</tr>
<tr>
<td><strong>N</strong></td>
<td>11</td>
</tr>
<tr>
<td><strong>Mean</strong></td>
<td>163.0909</td>
</tr>
<tr>
<td><strong>Std. Error of Mean</strong></td>
<td>7.03944</td>
</tr>
<tr>
<td><strong>Median</strong></td>
<td>167.0000</td>
</tr>
<tr>
<td><strong>Mode</strong></td>
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<td><strong>Std. Deviation</strong></td>
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<tr>
<td><strong>Range</strong></td>
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</tr>
<tr>
<td><strong>Minimum</strong></td>
<td>120.00</td>
</tr>
<tr>
<td><strong>Maximum</strong></td>
<td>191.00</td>
</tr>
</tbody>
</table>

Eleven out of the twelve individuals completed the survey. Two hundred and sixteen was calculated as the top score that they can receive from the AAVS-M survey. After examining the total score of each individual survey, the average score was 163.09 points. The score range was 71, with the lowest score being 120 and the highest score being 191.
AAVS-M: Emotional Self-Control

Table 2 AAVS-M Subscale Emotional Self-Control: Itemized Statistics

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<th>Missing</th>
<th>Mean</th>
<th>Std. Error of Mean</th>
<th>Median</th>
<th>Mode</th>
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<th>Range</th>
<th>Minimum</th>
<th>Maximum</th>
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<td>It is better to show emotions than to suffer quietly.a</td>
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<td>0</td>
<td>3.91</td>
<td>.67</td>
<td>4.00</td>
<td>6</td>
<td>2.212</td>
<td>6</td>
<td>1</td>
<td>7</td>
<td>43</td>
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<tr>
<td>One should be expressive with one's feelings.a</td>
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<td>0</td>
<td>6.09</td>
<td>.392</td>
<td>7.00</td>
<td>7</td>
<td>1.300</td>
<td>4</td>
<td>1</td>
<td>7</td>
<td>67</td>
</tr>
<tr>
<td>Openly expressing one's emotions is a sign of strength.a</td>
<td>11</td>
<td>0</td>
<td>6.09</td>
<td>.392</td>
<td>7.00</td>
<td>7</td>
<td>1.300</td>
<td>4</td>
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<td>67</td>
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<tr>
<td>It is better to hold one's emotions inside than to burden others by expressing them</td>
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<td>0</td>
<td>2.18</td>
<td>.277</td>
<td>2.00</td>
<td>2</td>
<td>1.250</td>
<td>4</td>
<td>1</td>
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<tr>
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<td>5</td>
<td>1.401</td>
<td>5</td>
<td>1</td>
<td>6</td>
<td>46</td>
</tr>
<tr>
<td>One should not express strong emotions</td>
<td>11</td>
<td>0</td>
<td>2.18</td>
<td>.352</td>
<td>2.00</td>
<td>2</td>
<td>1.168</td>
<td>4</td>
<td>1</td>
<td>5</td>
<td>24</td>
</tr>
<tr>
<td>One's emotional needs are less important than fulfilling one's responsibilities</td>
<td>11</td>
<td>0</td>
<td>3.09</td>
<td>.315</td>
<td>3.00</td>
<td>3</td>
<td>1.044</td>
<td>5</td>
<td>1</td>
<td>7</td>
<td>34</td>
</tr>
<tr>
<td>One should not act based on emotions</td>
<td>11</td>
<td>0</td>
<td>3.73</td>
<td>.524</td>
<td>3.00</td>
<td>3</td>
<td>1.737</td>
<td>7</td>
<td>1</td>
<td>7</td>
<td>41</td>
</tr>
</tbody>
</table>

As this study focused on emotional regulation, the student researcher evaluated eight items from the subcategory Emotional Self-Control.

Table 3 AAVS-M Subscale Emotional Self-Control: Scale Statistics

<table>
<thead>
<tr>
<th>Scale Statistics</th>
<th>Mean</th>
<th>Variance</th>
<th>Std. Deviation</th>
<th>N of Items</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>25.09</td>
<td>35.691</td>
<td>5.974</td>
<td>8</td>
</tr>
</tbody>
</table>

The top score the participants can receive for this subscale is 38. The average score of the participants was 25.09. Meaning the participants showed moderate levels of Emotional self-control.

The items with “.a” after the statement were reverse worded (e.g. “It is better to show emotions than to suffer quietly.a”).
Table 4 AAVS-M Subscale Emotional Self-Control: Item 1 Frequency Statistics

<table>
<thead>
<tr>
<th>It is better to show emotions than to suffer quietly.a</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Disagree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Somewhat Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Neutral</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Somewhat Agree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Agree</td>
<td>3</td>
<td>27.3%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>1</td>
<td>9.1%</td>
</tr>
</tbody>
</table>

For the emotional self-control item one “It is better to show emotions than to suffer quietly”. This item was evenly split with 45.5% (5) of the participants selecting “Somewhat Agree”, “Agree” and “Strongly Agree” and 45.5% (5) of the participants selecting “Somewhat disagree”, “Disagree” and “Strongly disagree”, with 9.1% (1) selecting “Neutral”.

Table 5 AAVS-M Subscale Emotional Self-Control: Item 2 Frequency Statistics

<table>
<thead>
<tr>
<th>One should be expressive with one’s feelings.a</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Somewhat Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Somewhat Agree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Agree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>6</td>
<td>54.5%</td>
</tr>
</tbody>
</table>

For emotional self-control item two “One should be expressive with one’s feelings” the student researcher found 72.7% (8) of the individuals selected either “Strongly Agree” or “Agree”, 18.2% (2) of the individuals selected ‘Somewhat Agree’, 18.2% (2) of the individuals selected “Somewhat Agree” and 9.1% (1) “Somewhat Disagree”. The majority of the participants agreed with item two.
After analyzing item three “Openly expressing one’s emotions is a sign of strength”, the results were similar to statement two. The student researcher found 72.7% (8) of the individuals selected either “Strongly Agree” or “Agree”, 18.2% (2) of the individuals selected ‘Somewhat Agree’, and 9.1% (1) selecting “Somewhat Disagree”.

<table>
<thead>
<tr>
<th>Openly expressing one’s emotions is a sign of strength</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Somewhat Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Somewhat Agree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Agree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>6</td>
<td>54.5%</td>
</tr>
</tbody>
</table>

For emotional self-control item four, the student researcher found that 81.8% (9) of the individuals selected “Strongly Disagree” or “Disagree” for the item “It is better to hold one’s emotions inside than to burden others by expressing them”. As for the remaining individuals, 9.1% (1) of the individuals selected “Neutral”, and 9.1% (1) of the individuals selected “Somewhat Agree”. Majority of the participants did not agree with the statement.

<table>
<thead>
<tr>
<th>It is better to hold one’s emotions inside than to burden others by expressing them</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>3</td>
<td>27.3%</td>
</tr>
<tr>
<td>Disagree</td>
<td>6</td>
<td>54.5%</td>
</tr>
<tr>
<td>Neutral</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Somewhat Agree</td>
<td>1</td>
<td>9.1%</td>
</tr>
</tbody>
</table>
For emotional self-control item five “It is more important to behave appropriately than to act on what one is feeling.”, 45.5% (5) of the individuals selected “Somewhat Agree”. As for the remaining individuals, 18.2% (2) of the individuals selected “Neutral”, 18.2% (2) of the individuals selected “Somewhat Disagree”, 9.1% (1) of the individuals selected “Strongly Disagree”, 9.1% (1) of the individuals selected “Agree”. Majority of the participants agreed with this statement.

Table 8 AAVS-M Subscale Emotional Self-Control: Item 5 Frequency Statistics

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Somewhat Disagree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Neutral</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Somewhat Agree</td>
<td>5</td>
<td>45.5%</td>
</tr>
<tr>
<td>Agree</td>
<td>1</td>
<td>9.1%</td>
</tr>
</tbody>
</table>

For emotional self-control item six “One’s emotional needs are less important than fulfilling one’s responsibilities.”, the student researcher found that 45.5% (5) of the individuals selected “Neutral”, while 27% (3) of the individuals selected “Somewhat Disagree”, 18.2% (2) selected “Disagree”, and 9.1% (1) of the individuals selected “Strongly Disagree”. After
analyzing the results, the participants were split between disagreeing with item six, and remaining neutral.

*Table 10 AAVS-M Subscale Emotional Self-Control: Item 7 Frequency Statistics*

<table>
<thead>
<tr>
<th>One should not express strong emotions.</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>3</td>
<td>27.3%</td>
</tr>
<tr>
<td>Disagree</td>
<td>5</td>
<td>45.5%</td>
</tr>
<tr>
<td>Somewhat Disagree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Somewhat Agree</td>
<td>1</td>
<td>9.1%</td>
</tr>
</tbody>
</table>

For emotional self-control item seven “One should not express strong emotions”, the student researcher found that the majority of the individuals disagreed with the statement by 45.5% (5). As for the remaining individuals, 27.3% (3) selected “Strongly Disagree”, 18.2% (2) of the individuals selected “Somewhat Disagree”, 9.1% (1) of the individuals selected “Somewhat Agree”. After analyzing the results, all but one participant disagreed with this item.

*Table 11 AAVS-M Subscale Emotional Self-Control: Item 8 Frequency Statistics*

<table>
<thead>
<tr>
<th>One should not act based on emotions.</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Somewhat Disagree</td>
<td>4</td>
<td>36.4%</td>
</tr>
<tr>
<td>Neutral</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Somewhat Agree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Agree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>1</td>
<td>9.1%</td>
</tr>
</tbody>
</table>

For emotional self-control item eight “one should not act based on their emotions”, the student researcher found that 36.4% (4) selected “Somewhat Disagree”, 18.2% (2) of the individuals selected “Neutral”, 9.1% (1) of the individuals selected “Strongly Disagree”, 9.1%
(1) of the individuals selected “Disagree”, 9.1% (1) of the individuals selected “Somewhat Agree”, 9.1% (1) of the individuals selected “Agree”, and 9.1% (1) of the individuals selected “Strongly Agree”. After analyzing the results, each item on the scale was selected by at least one or more participant(s). Further analysis will be done in chapter five.

Table 12 AAVS-M Subscale Emotional Self-Control: Reliability Statistics

<table>
<thead>
<tr>
<th>Reliability Statistics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cronbach's Alpha</td>
</tr>
<tr>
<td>Cronbach's Alpha Based on Standardized Items</td>
</tr>
<tr>
<td>N of Items</td>
</tr>
<tr>
<td>.461</td>
</tr>
</tbody>
</table>

As this study focuses on emotional regulation, the student researcher calculated the Cronbach alpha for the subscale: Emotional Self-Control. This suggests that the items for this subscale were relatively low ($M=3.14$, $\alpha=.46$).

Research Surveys, 5x5RS & ERS-ACA

Eleven out of the thirteen individuals who completed the pre-qualification survey proceeded to the research study. The student researcher analyzed the levels of resilience prior to the collage making as well as after.
Five-by-Five Resilience Scale

Table 13 5x5RS Prior and Subsequent to the Collage Making: Total Score Statistics

The top score the participants can receive for this survey is 125. The student researcher examined the total score of the 5x5 survey and found prior to the collage making, the average value of levels of resilience was 86.64. The lowest score being 76 and the highest score being 106. After the collage making, the average level of resilience was 78.82 with the lowest score being 65 and the highest score being 91. The results demonstrated that there was a slight decrease in resilience after the art making.
As this study focuses on emotional regulation, the student researcher evaluated five items from the 5x5RS on subcategory Emotional Regulation, prior to the art making and after. The top score the participants can receive for this subscale is 25. The average score for the subscale prior to the art making was 12.18 with the lowest score being 7 and the highest score being 20. The average score subsequent to the artmaking received an average of 11.82, with the lowest score being 7 and the highest score being 22. The student researcher also calculated the reliability statistics for the subscale Emotional Regulation. The alpha value received was .74 prior to the study. And the alpha value received subsequent to the collage art making was .89. There was a slight increase from prior to the collage making and after. This suggests that the internal consistency of each item was relatively high for both.
Following the post 5x5 resilience scale, the participants took the ERS-ACA. The top score the participants can receive for this survey is 90. The student researcher examined the total score of the ERS-ACA and found, subsequent to the collage making, the participants average value of levels of resilience was 70.45. With the lowest score being 54 and the highest score being 80.
When looking at the total scores, the majority of the participants had a total score above 70. This suggests that most of the participants used emotional regulation strategies during the art making process.

Table 16 ERS-ACA: Reliability Statistics for Subscales: Avoidance Strategies, Approach Strategies and Self-Development Strategies

<table>
<thead>
<tr>
<th>Avoidance Strategies</th>
<th>Approach Strategies</th>
<th>Self-Development Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cronbach’s Alpha</td>
<td>Cronbach’s Alpha</td>
<td>Cronbach’s Alpha</td>
</tr>
<tr>
<td>Based on Standardized Items</td>
<td>Based on Standardized Items</td>
<td>Based on Standardized Items</td>
</tr>
<tr>
<td>N of Items</td>
<td>N of Items</td>
<td>N of Items</td>
</tr>
<tr>
<td>.458</td>
<td>.883</td>
<td>.845</td>
</tr>
<tr>
<td>.482</td>
<td>.889</td>
<td>.875</td>
</tr>
<tr>
<td>7</td>
<td>6</td>
<td>5</td>
</tr>
</tbody>
</table>

Cronbach’s Alpha was calculated to see internal reliability statistics for each subscale within the Emotional Regulation Strategies for Artistic Creative Activities Scale. There are three subscales: Avoidance Strategies, Approach Strategies, and Self-Development strategies. Both Approach strategies ($\alpha=.88$) and Self- Development Strategies ($\alpha=.84$) received a reliability score above .80. This indicates good level of internal consistency across the items within the
subscales. However, the subscale avoidance strategies (α=.45) received below .50, which demonstrates low internal consistency. Further analysis will be discussed in Chapter Five.

The frequency was calculated to see the percentages of each scale the participants selected for each of the items. The items below show significant findings:

**Table 17 ERS-ACA Statement “I can shake off my anxieties in my life” Frequency Statistics**

<table>
<thead>
<tr>
<th>I can shake off any anxieties in my life</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Disagree</td>
<td>5</td>
<td>45.5%</td>
</tr>
<tr>
<td>Neither Agree or Neither Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Agree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>2</td>
<td>18.2%</td>
</tr>
</tbody>
</table>

In response to the statement “I can shake off my anxieties in my life”, 54.6% (6) of the participants selected either strongly disagree or disagree, 36.4% (4) selected either “Agree” or “Strongly Agree”, and 9.1%(1) selected “Neither Agree or Neither Disagree”. Most participants felt that they did not agree with this statement.

**Table 18 ERS-ACA Statement “I feel I am in my own bubble, away from ordinary worries” Frequency Statistics**

<table>
<thead>
<tr>
<th>I feel I am in my own little bubble, away from ordinary worries</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Disagree</td>
<td>4</td>
<td>36.4%</td>
</tr>
<tr>
<td>Neither Agree or Neither Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Agree</td>
<td>4</td>
<td>36.4%</td>
</tr>
</tbody>
</table>

For the statement “I feel I am in my own bubble, away from ordinary worries”, 54.6% (6) of the participants selected either “Strongly Disagree” or “Disagree”, while 36% (4) of the
participants selected “Agree”, and 9.1% (1) of the participants selected “Neither Agree or Neither Disagree”. Most of the participants did not agree with this statement.

*Table 19 ERS-ACA Statement “It helps me to disengage from things that are bothering me” Frequency Statistics*

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>2</td>
<td>18.2%</td>
</tr>
<tr>
<td>Agree</td>
<td>7</td>
<td>63.6%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>2</td>
<td>18.2%</td>
</tr>
</tbody>
</table>

For the statement “It helps me to disengage from things that are bothering me”, 81.8% (9) of the participants selected either “Agree” or “Strongly Agree”, while 18.2% (2) of the participants chose “Disagree”. The majority of the participants agreed with this statement.

*Table 20 ERS-ACA Statement “It redirects my attention, so I forget unwanted thoughts or feelings” Frequency Statistics*

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Neither Agree or Neither Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Agree</td>
<td>6</td>
<td>54.5%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>3</td>
<td>27.3%</td>
</tr>
</tbody>
</table>

For the statement “It redirects my attention so I forget unwanted thoughts or feelings” received 81.8% (9) selecting either “Agree” or “Strongly Agree”. While the other 18.2% (2) of the participants selected “Strongly Disagree” or “Neither Agree or Neither Disagree”. The majority of the participants agreed with this statement.
The statement “I can contemplate what is going on in my life with a clear mind” 81.1% (9) of the participants selected either “Agree” or “Strongly Agree”. The remaining 18.2% (2) selected “Neither Agree or Neither Disagree”. The majority of the participants agreed with this statement.

For the statement “It helps me refocus on what matters most in my life”, 91% (10) participants selected either “Agree” or “strongly agree”. The remaining 9.1% (1) selected “Neither Agree or Neither Disagree”. All but one participant agreed with this statement.
For the statement “It helps me come to terms with my own emotions” 91% (10) of the participants selected either “Agree” or “strongly agree”, while the remaining 9.1% (1) selected “Disagree”. All but one participant agreed with this statement.

Table 24 ERS-ACA Statement “It helps me put worries or problems I have in perspective” Frequency Statistics

<table>
<thead>
<tr>
<th>It helps me to put worries or problems I have in perspective</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Neither Agree or Neither Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Agree</td>
<td>3</td>
<td>27.3%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>6</td>
<td>54.5%</td>
</tr>
</tbody>
</table>

For the statement “It helps me put worries or problems I have in perspective” 81.8% (9) participants selected “Agree” or “Strongly Agree”. The remaining 18.2% (2) of the participants were split between “Neither Agree or Neither Disagree” and “Disagree”. Majority of the participants agreed with this statement.

Table 25 ERS-ACA Statement “It helps me understand my own feelings on things that are on my mind” Frequency Statistics

<table>
<thead>
<tr>
<th>It helps me to understand my own feelings on things that are on my mind</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neither Agree or Neither Disagree</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>Agree</td>
<td>5</td>
<td>45.5%</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>5</td>
<td>45.5%</td>
</tr>
</tbody>
</table>

The statement “It helps me understand my own feelings on things that are on my mind” received 91% (10) of the participants selecting “Agree” or “Strongly Agree”. All but one participant agreed with this statement.
For the statement “It makes me reflect on my emotions”, 100% (11) of the participants selected “Agree” or “Strongly Agree”.

For the statement “It boosts my self-esteem” 81.8% (9) of the participants selected “Agree” or “Strongly Agree” while 18.2% (2) selected “Neither Agree or Neither Disagree”. Majority of the participants agreed with this statement.

For the statement “It gives me a sense of purpose”, 81.8% (9) of the participants selected “Agree” or “Strongly Agree”. While 18.2% (2) selected “Neither Agree or Neither Disagree”. Majority of the participants agreed with this statement.
For the statement “It makes me feel stronger”, 81.9% (9) of the participants selected either “Agree” or “Strongly Agree”. The remaining 18.2% (2) of the participants selected “Neither Agree or Neither Disagree”. The majority of the participants agreed with this statement.

For the statement “It reaffirms my identity” 100% (11) of the participants selecting either “Agree” or “Strongly Agree”.

**Analyzing Themes in Art**

Participants were given a set of collage images that consisted of images, patterns, and quotes. The researcher analyzed the participants' final art pieces and identified themes. In order to confirm the themes identified by the student researcher, a group of trained art therapy students confirmed the list of occurring themes. This confirmation was conducted through Google Forms. The identities of the participants were kept confidential. The artwork was displayed with a list of the themes found by the student researcher. The trained art therapy students selected all themes
applied for each artwork. Below are the themes found by the student researcher and confirmed by the trained art therapy students.

*Figure 3 Analyzing Themes in Art: Incorporated the word “Healing”*
Figure 4 Analyzing Themes in Art: Incorporated the quote “Letting go of Comparison”
Figure 5 Analyzing Themes in Art: Images with Ladders
Figure 6 Analyzing Themes in Art: Incorporated the quote “People Pleaser”
Figure 7: Analyzing Themes in Art: Incorporated the quote “You are enough”
Figure 8 Analyzing Themes in Art: The concept of “Family”
Figure 9 Analyzing Themes in Art: Incorporated a “House”
Figure 10 Analyzing Themes in Art: Incorporated the quote “Our Culture” or references to Culture
Figure 11 Analyzing Themes in Art: Incorporated images of food
Figure 12 Analyzing Themes in Art: Incorporated images of a woman/girl
Figure 13 Analyzing Themes in Art: Incorporated image of a girl hiding
Figure 14 Analyzing Themes in Art: Incorporated images of a people with eyes closed

Figure 15 Analyzing Themes in Art: Images/words referring to time
In addition to confirming themes, the trained art therapy students were asked to list themes amongst the art that were not mentioned by the student researcher. Listed below are themes found by the trained art therapy students.

*Figure 16 Analyzing Themes in Art: Mark Making*
Figure 17 Analyzing Themes in Art: Incorporated images of "Animals"

Figure 18 Analyzing Themes in Art: Incorporated images of "Nature/Outdoor"
Figure 19 Analyzing Themes in Art: Incorporated images of “Plants”
Figure 20 Analyzing Themes in Art: Incorporated images of "Butterflies"
Figure 21 Analyzing Themes in Art: Full use of Paper
Figure 22 Analyzing Themes in Art: Images extending off page
Participant 12 Individual Case study

One participant interpreted the collage-making instructions differently than the others, basing her work on her experiences as an Asian American child. Because of this, an individual case study was done through a qualitative approach for Participant Twelve.

*Research and Collage Making* Participant Twelve began by describing her background. She commented “I really wanted my background to be solid” and incorporated tropical patterns
to represent her Asian-American/Filipino heritage. Participant twelve explained that she did not appreciate her Filipino heritage as a child due to moving to a town that was not as diverse compared to living in the Bay Area. Participant Twelve emphasized that her classmates made her “very aware that I was Asian”. She then discussed her reasoning behind incorporating an image of a girl hiding. Participant Twelve noted that it represented her childhood self and pastes the words “shy, timid, and nervous” next to it. She proceeded to the next quote “stop asking for permission”. Participant Twelve explained how her “non-Asian friends” had a difficult time understanding the “need to ask for permission”. She elaborated “in the Asian culture asking permission is a sign of respect to her parents/elders”. Participant twelve reflected on how her elementary school friends viewed her as “timid” as opposed to understanding this behavior through the lens of the Asian/Filipino culture.

Participant Twelve points to the quote “people pleaser” and commented “I wanted to include this quote because it defines me A LOT”. The words “Naive, curious and insecure” were included in her art. It reminded her of times being in the cafeteria and bringing her “Asian lunches”. She explained “being the only one eating rice, while everyone else is eating pizza”. Next to those words was a quote “What I wish I knew sooner” and underneath was “Be yourself, you don’t have to meet expectations of others”. Participant Tweleve mentioned that as a child she wished she was not so insecure about bringing her “Asian lunches” and remembering that she would ask to buy pizza and “be like the rest of the kids”. She commented “it was very apparent to me how Asian I was, and I think that why I felt so insecure as a child was because I was one of the few. But as I got older, the more appreciative I got” and “I remember thinking as a kid, ‘I want to be like everybody else, why am I so different’”

Next, Participant twelve includes the quotes “protective of myself”. She explains her past
experiences growing up Asian American and she found herself being very protective as an adult. Participant Twelve points out the word “Indecisive”, which was created with letters found in the pre-cut collage images, and explained that she tends to be indecisive as an adult. Participant twelve returned to discussing “asking for permission” and explains the quote “allowing myself” next to it. She reflected on her 3rd grade teacher and states “she was ‘non-Asian’ and got upset about [me] always apologizing and asking permission to do things, which stuck with me”. She reflected on the quote “allowing myself” as a new concept for her as an adult because she realized that she does not always have to ask for permission.

Next, Participant Twelve discusses the image of holding hands and the words “lots of family”. She stated, “family is so big growing up Asian American” and shared “I am grateful to have close family members because not everyone is close to family, very grateful as an adult to experience being with family as a child.” Participant Twelve added that she realized at a young age that not everyone has the same experience and positive feelings about seeing family due to her classmates talking about how they dread going to family gatherings.

Participant Twelve discussed the meaning behind incorporating an image of a clock and noted that as a child her parents would tell her “When you're older, when you're older”, which led to her being very impatient as a child and still as an adult. Next to the clock was the quote “keep going”. She included this to serve as a reminder and motivation to get to where she wants to be in life. She adds “impatient as I am, I just tell myself ‘Okay just keep going because eventually I’ll reach that… whatever it is’”.

Participant twelve discussed a house and described it as a “Bahay Kubo ” (stilt house indigenous to the Philippines). She incorporated fruits and tropical background because she is now very proud of her Filipino culture and heritage. As the participant finished describing her
art, she reflected on her own art piece then shared it with the student researcher “Definitely now, I am very proud of being Filipino. I never realized how much I got to experience it until I was older… I never realized how solid of a background I had and didn't want open space to emphasize that”.

Lastly, Participant Twelve reflected on her artwork and said “some of these things are like, I feel empathy for the little self of me versus now because when I was little, I was very ashamed being ‘darker skin’, I wanted to be lighter skin. But now I’m proud of my darker skin because ‘people of color’. Especially in the culture and being one of the very few Asians in the valley, being the ‘darker Asian’ there weren’t many out here and wanting to be light skin and being like everyone else. But now I'm grateful for it”.

Participant Twelve interpreted the collage art intervention differently from other participants in the study. From this, the participant reflected more on her childhood experiences growing up Asian American, rather than the differences between her childhood and adulthood. As she interpreted the directions differently, it may have evoked different thoughts, feelings, emotions, and memories compared to the other participants. This ultimately affected her score for the Emotional Regulation Strategies After Creative Arts Questionnaire.

ERS-ACA Survey Results

The student researcher analyzed the ERS-ACA results of Participant Twelve. As mentioned earlier, ninety is the top score a participant may receive for this survey. The student researcher calculated the total score of her survey, and she received fifty-four out of ninety. This demonstrated her moderate levels of utilizing emotional regulation strategies during the collage art intervention. When comparing participant twelves ERS-ACA results she received the lowest score of the eleven participants in the study.
CHAPTER V: Discussion

The findings from this study serve as an important contribution to Asian American research. The intention was to explore whether collage art making will increase levels of resilience with the Asian American population who has experienced emotional suppression with an ACTs theory approach.

Implications

In this study, the student researcher found that the participants portrayed moderate levels of adhering to Asian American Values prior to the research. When looking at the results of the subscale “Emotional Self Control”, the participants also showed moderate levels of controlling negative emotions. During the research, the participants reported their resilience prior to the art making and after, and it was determined there was a slight decrease in resilience after collage making. Next, when analyzing the results of the subscale “Emotional Regulation”, there was also a slight decrease after the art making. The result of this survey suggests that the collage making does not increase levels of resilience. Last, the Emotional Regulation Strategies -After Creative Arts results suggest that the participants' level of emotional regulation strategies used during the creative arts process was scored moderately high. Meaning the participants utilized emotional regulation strategies if they experienced negative emotions during the collage making process. The findings of this study did not support the hypothesis collage art making enhances resilience in Asian Americans who experienced emotional suppression. Research limitations were discovered within the study that may have contributed to the outcome of the study.
Limitations

Sample Size

With eleven participants completing the study, this can be viewed as a relatively small sample size. This increases the margin of error and is difficult for generalizability. There were multiple factors that contributed to the small sample size.

Social Media Algorithm. Although social media is a positive avenue for communication, connection, and education, it may have hindered the number of participants to view the advertisement of the study. As the research was advertised using various social media platforms, the advertisement may have not been seen by individuals due to the social media algorithm. Social media algorithms are feeds of images and videos tailored to the user's interests (Bellavista et al., 2019). The reality of these algorithms most likely decreased the reach of the study advertisement which may have contributed to the small sample size.

Social Media Groups. The student researcher intended to advertise the research via a Facebook group. There is a procedure for posts to be seen on the Facebook group feed, which administrators must have approval of post prior to posting in the group. In addition, Administrators can also prohibit posts to appear on the feed. Unfortunately, the study was not approved by the administrators which prevented potential audiences from viewing the research.

Mental Health Stigma. As mentioned in the literature review, there is a negative stigma within the Asian American population around mental health. It is possible individuals still adhere to behaviors influenced by this mental health stigma. This was seen as a limitation that may have contributed to the small sample size.
Art-based Research

The next limitation involves art-based research. As mentioned in the first chapter, art-making may feel overwhelming to those who do not find an interest in art. There is a possibility that when individuals show interest in the research and notice the study is art-based, they may believe that they are unqualified because they may not be “gifted in art” in order to participate in the study. Another possibility of not wanting to participate in an art-based research study, is simply the fact that it is art based. It is understood that not everyone enjoys art, therefore those who have viewed the advertisement for the study via social media, can easily swipe or scroll to the next post. Both the belief of not being qualified to participate and the simple fact that art is involved in the study may have created limitations to potential participants.

Age

The student researcher discovered that the ages reported by the participants caused a limitation within the study. With the youngest participant being twenty and the oldest being thirty-two, the bulk of the participants were in their late twenties. This makes the results difficult for generalizability towards the Asian American population.

AAVS-M

The questionnaire AAVS-M is included as a limitation and may have contributed to the outcome of the study. The AAVS-M was published in 2005. With the majority of the participants in their late twenties, the year of publication for the survey and the stage of life of the participants may pose a generational gap. Throughout the years, there is a possibility that Asian American values are depicted differently in the present day. In addition, the survey is a 42-item survey. Participants may have experienced survey fatigue when taking the survey.
With the possibility of survey fatigue, there is a chance that participants might select answers that do not reflect themselves and their adherence to Asian American Values. Both the publication of the survey and the potential encounter of survey fatigue may have compromised the results of the entire survey and validity of the subscale “emotional self-control”.

**Response Answers**

The last limitation found in the study was the fear of selecting an unfavorable answer. As the research incorporates surveys regarding adhering to Asian American values, resilience levels, emotional self-control, and emotional regulation strategies, there is the possibility that participants were not comfortable selecting answers that would present themselves in an unfavorable manner. Therefore, this makes it difficult for the student researcher to see the credibility of the answers and may have contributed to the results of the surveys.

**How to further Research**

For future research, the student researcher recommends searching for different platforms or outlets for advertisement. As the student researcher intended for the advertisement to be posted via Facebook groups, there were unforeseen obstacles that were faced. This ultimately resulted in the advertisement not getting approved by administrators. By finding other outlets and platforms to advertise the research this may aid in gaining a larger sample size with different age ranges. The various age ranges may also assist in attaining different generations of Asian Americans. Future studies can analyze differently how generations adhere to Asian American values, adhering to emotional self-control, levels of resilience, and experience of collage making. Another recommendation is searching for other surveys to apply in the research regarding values. As the student researcher used the Asian American Value Scale-Multidimensional, it may not be relevant to different generations due to the time of publication of this particular survey. By
incorporating another value scale, future researchers can analyze the different values the participants possess in comparison to how much they adhere to Asian American Values.

**Significance of this Research**

Although the hypothesis was not supported by the results of this study, there were interesting other aspects to the data. After analyzing the AAVS-M subscale “Emotional-Self Control” item eight (“one should not act based on their emotions”), participants' answers varied across the scale. Each item on the scale was selected by one or more participants. This demonstrates how emotional suppression may still have an effect on the Asian American participants.

The results of the ERS-ACA showed the majority of the participants reported that they used emotional regulation strategies during the creative process. When looking into specific statements of this questionnaire, there were three statements: “It helps me understand my own feelings on things that are on my mind”, “It helps me refocus on what matters most in my life”, and “It helps me come to terms with my own emotions”. Ten out of the eleven participants agreed to these statements. In addition, there were two statements that all participants agreed with: “It reaffirms my identity” and “It makes me reflect on my emotions”. These statements along with the mindfulness, intention, and collage interventions incorporated in the research, demonstrates how the ACT Hexaflex model is portrayed within the study.

As mentioned in the literature review, the Hexaflex model is the framework of ACT and consists of six core essential components: cognitive definition, experiential acceptance, present moment, self as context, values and committed to action.

Experiential acceptance was demonstrated during the mindfulness and intention portion when the research was conducted. As creating art may be intimidating for those who do not
consider themselves as “good”, “gifted”, or are unfamiliar with the subject, it may hinder the experience of the collage art intervention. The student researcher brought emphasis to creating a non-judgmental environment, and emphasized thinking about the process of the art making rather than the outcome of the art.

When conducting the first portion of the collage art intervention (writing positive and negative words that describe their Asian American childhood experiences), participants may have been provoked with negative thoughts, feelings or emotions. With the majority of the participants agreeing with the statement “It helps me understand my own feelings on things that are on my mind” demonstrates both experiential acceptance and cognitive defusion. This implies that they are observing the process of their own thinking revolving their feelings and emotions during the collage art making. The participants have a choice of allowing these negative thoughts or emotions to hinder their art making process or acknowledge them and apply healthy emotional regulation strategies to continue their art.

The mindfulness and collage art interventions allowed the participant to be in tune with the present moment. The present moment in the Hexaflex model is defined as the practice of becoming familiar with current sensory experiences and being grounded. The mindfulness breathing exercise allowed the participants to focus on their breathing and become grounded prior to the art making, while the collage art intervention involved cutting or tearing which activated sensory processing.

The study’s incorporation of these interventions enables participants' awareness in the present moment. With the majority of the participants agreeing to the statement “It helps me refocus on what matters most in my life” implies that the component of “values” in the Hexaflex model was used during the art making process or discussion of their art. During the art, the
participants were asked to create a collage of their Asian American adult self. The experience allowed the participants to think about the differences between their Asian American childhood self-versus their adult self. Many of the participants discussed that during their adult years they learned about what values mattered the most and contributed to who they have become.

Additionally, during this time, the component “Self as context” was shown during discussion of their art process. The definition of “self as context” involves witnessing the thoughts, feelings and actions in the current moment. As the participants were discussing their art, they were aware and mindful they may have been discussing negative experiences or expressing negative emotions or thoughts regarding their past. This may have served as an emotional release of previously held beliefs or negative thoughts they had regarding themselves.

The last component of the Hexaflex model is “committed to action” which is defined as taking the necessary steps towards valued goals. During the discussion of the artwork, all participants reported how they planned on continuing to heal themselves and their experiences as an Asian American child. The last significant contribution to the research is the statement “It reaffirms my identity”. Identity may be seen as egocentric, which does not reflect the Asian values and its beliefs on collectivism. Yet, all participants reported they agreed with this statement. It seems that all six components were demonstrated in the research which fostered and assisted with developing psychological flexibility within the participants.

According to Prevedini et al. (2008), one of the crucial aspects of ACT is that it encourages the individual to confront past and private experiences that they may avoid. As mentioned in chapter one, this may seem like an adverse approach to apply to the Asian American population. However, when implementing defusion techniques, individuals may see
these past and private experiences for what they are rather than being avoidant of them (Prevedini et al., 2011).

The implementation of defusion techniques occurred through mindfulness and experiential exercises prior to the art intervention in hopes to elicit psychological flexibility. The student researcher allowed time for the participants to reflect on their Asian American childhood experiences and how it differs to their Asian American adult self. This serves as an experiential exercise to allow participants to reflect on past behaviors or tightly held beliefs they had about themselves. The collage art intervention was used as a defusion technique to create metaphor through symbolism and creative expression. The creative metaphors shown through the participants' collage art have brought abstract concepts to their life and provided unexpected insights into their reality (Chilton & Scotti, 2014). Overall, utilizing ACT along with art therapy was demonstrated as effectiveness to participants in the study.

Conclusion

The purpose of this study was to explore whether collage art making enhances resilience in Asian Americans who have experienced emotional suppression. The results were analyzed by the student researcher and concluded that the presenting study did not support the hypothesis due to the decrease of levels of resilience found subsequent to the collage art making. Although the intention of this study was to enhance resilience levels, there were other benefits to this study. As mentioned in the literature review, ACT may have its benefits to the Asian American population. After analyzing the results of the ERS-ACA, the majority of the participants reported utilizing healthy emotional regulation strategies during the art making if or when they experienced any negative thoughts, feelings and/or emotions. Additionally, there were multiple statements that participants agreed with that mirrored the ACT Hexaflex model framework. In conclusion,
Utilizing an ACT’s theoretical framework within the study demonstrated its effectiveness on the participants. Supplementary to ACT, mindfulness breathing exercises and inviting intention prior to the art making contributed to the collage-art making experience and psychological flexibility.

It is important to continue contributing to Asian American Research to bring awareness to the barriers, break down the stigma regarding mental health and increase help-seeking behaviors in the Asian American population. As there were many limitations found in the presenting study, this can serve as a baseline for future researchers. Perhaps the decrease in resilience could be due to the stigma itself and more research is needed to discern if the change is perhaps internalized mental health stigma. With the necessary changes and preparation for unforeseen circumstances, this may improve future replications of this study.
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Appendix A: Consent for Research Participation
Consent for Research Participation

RESPONSIBLE INVESTIGATOR: Casey Soto

TITLE OF RESEARCH PROJECT: Exploring Whether a Collage Art Intervention Enhances Levels of Resilience in Asian-American Who Have Experienced Emotional Suppression

I have been asked to participate in a mixed-methods research study that explores the connection between collage art making, and Asian-Americans who have experienced Emotional Suppression. The findings of this quantitative and arts-based research project contributes to previous studies on the relevance of mental health in Asian-American communities. This will also raise awareness of generational patterns while allowing the exploration of creative arts therapeutic options.

I understand that:

- In order to participate in the study, I will be asked to provide demographic information, contact information and participate in one questionnaire.
- Whether I qualify to participate in the study will be determined by the findings of my demographic information and results from the questionnaire.
- When proceeding forward with the study, I will be asked to be a part of one research session via Zoom that will each take approximately one hour or less.
- My research session will be recorded.
- I will participate in a mindfulness exercise.
- I will be asked to participate in collage making.
- I will be asked to answer questions regarding my artwork.
- I will be asked to take one questionnaire at the beginning of the research session and two questionnaires after partaking in the art-based intervention.
- The possible psychological risks of participating in this study may include some emotional discomfort or triggers based on reaction to items on the questionnaires or during the art-based intervention. Should any feelings be elicited based on my participation in this study, I will be provided with resources of support that include referrals to therapists, support groups, and meditation apps.
- There may be benefits for me in terms of obtaining a better understanding of myself, as the outcomes of this study will help to bring awareness regarding mental health, generational trends, and alternative therapy options. I may also benefit from increasing my levels of resilience through creating art.
- The results of this study may be published, but any personal information from this study that can be identified with me will remain confidential and the data will be collected online to maintain anonymity.
• Participating in the pre-qualification survey, my name will be entered in a Raffle to win a $25 Visa Gift Card. If I move forward with the current study, my name will be entered in a SEPARATE raffle to win a $50 Visa Gift Card.

• Any questions regarding my participation in this study will be answered by Casey Soto through email (casey.galaura@students.dominican.edu). Any questions or concerns regarding this study should be addressed to the Supervisor, Dr. Erin Partridge, via email (erin.partridge@dominican.edu).

• My consent is provided voluntarily and without coercion. I have the right to refuse to participate or any part of the study and I may have the right to withdraw at any time, without prejudice or with any future contact with Dominican University of California.

• I will receive a copy of this consent form for my record sent via email.

I HAVE MADE A DECISION WHETHER OR NOT TO PARTICIPATE. Please check one:

______YES, I agree to participate in this research study and I agree to have my art as part of the study data.

______NO, I do NOT agree to participate in this research study and have my art as part of the study data.

______________________________________       _________
Signature of Participant                   Date

______________________________________       _________
Signature of Researcher                    Date
Appendix B: Consent to Use Artwork
Artwork Consent Form

**Research Title:** Exploring Whether a Collage Art Intervention Enhances Levels of Resilience in Asian-American Who Have Experienced Emotional Suppression

**Approval Date:**

I give permission for ____________________________ to use my artwork in an art therapy research project.

I understand that my name, as well as any other personal information I choose to share for this study, will remain private and confidential.

I understand that my artwork may be shown to other art therapists, but that my name will be obscured to keep my identity confidential.

I understand that my art will be photographed.

**SIGNATURE**

If you agree to allow your artwork to be discussed in this study, please sign here:

Signature of Participant ____________________________ Date ________________

Printed Name of Participant ____________________________ Date ________________
Appendix C: Mindfulness and Intention Script
MINDFULNESS AND INTENTION SCRIPT

“Before the art, let's invite mindfulness and become aware of our physical body/self. “

*Ask participants if they are familiar with box Breathing. If not*

“Box breathing is when you hold 4 seconds, hold for 4 seconds, exhale for 4 seconds and rest for 4 seconds”

“I will be leading this breathing exercise, we’re going to repeat this three times.”

“You have the option of turning off your camera if you are more comfortable doing so”

“We’re going to begin with gently place your attention on your breathing, put your left hand on your heart, right hand on your stomach.”

“We are now going to inhale, 2, 3, 4; hold, 2,3,4; exhale, 2,3,4 and rest, 2, 3, 4”

“inhale, 2, 3, 4; hold, 2,3,4; exhale, 2,3,4 and rest, 2, 3, 4”

“And now let's reflect on your childhood”

“When you reflect on your childhood, think about your unique life experiences growing up Asian American. What sensations do you have in your body and where do you feel this? What are some memories that come to mind? During this time, I am going to give you about one minute to reflect on this.”
Let's also invite some intention. When we do this self art therapy exercise, we want to practice non-judgment and acceptance. There is no right or wrong way to make art. Simply focus on expressing yourself honestly.

Paper 1 directions:

- “Write positives and negative words of any size and direction on the paper describing their childhood”
- “When participant is finished*“tear the paper with words into medium size pieces.””

Paper 2 directions:

- “I’m going to have you think about your unique life experiences as an Asian American adult. And I’m going to give you one minute to reflect on this to yourself”
- “Now, you will reconfigure the torn paper, paste on to the second paper, and personally select and paste additional pre-cut collage images to create a new art piece”
Appendix D: Asian American Value Scale - Multidimensional
ASIAN AMERICAN VALUE SCALE - MULTIDIMENSIONAL

7-point Likert-type scale ranging from strongly disagree to strongly agree.

1. The welfare of the group should be put before that of the individual.

2. One’s efforts should be directed toward maintaining the well-being of the group first and the individual second.

3. One’s personal needs should be second to the needs of the group.

4. The needs of the community should supersede those of the individual.

5. One need not always consider the needs of the group first.

6. The group should be less important than the individual.

7. One need not sacrifice oneself for the benefit of the group.

8. One should recognize and adhere to the social expectations, norms, and practices.

9. One should adhere to the values, beliefs, and behaviors that one’s society considers normal and acceptable.

10. Conforming to norms provides one with identity.

11. One need not blend in with society.

12. Conforming to norms is the safest path to travel.

13. Conforming to norms provides order in the community.

14. One should not do something that is outside of the norm.
16. It is better to show emotions than to suffer quietly. One should be expressive with one’s feelings.

17. Openly expressing one’s emotions is a sign of strength.

18. It is better to hold one’s emotions inside than to burden others by expressing them.

19. It is more important to behave appropriately than to act on what one is feeling.

20. One should not express strong emotions.

21. One’s emotional needs are less important than fulfilling one’s responsibilities.

22. One should not act based on emotions.

23. One should achieve academically since it reflects on one’s family.

24. Succeeding occupationally is an important way of making one’s family proud.

25. Getting into a good school reflects well on one’s family.

26. Failing academically brings shame to one’s family.

27. One should go as far as one can academically and professionally on behalf of one’s family.

28. One’s academic and occupational reputation reflects the family’s reputation.

29. Academic achievement should be highly valued among family members.

30. One’s achievement and status reflect on the whole family.
31. Making achievements is an important way to show one’s appreciation for one’s family.

32. One’s educational success is a sign of personal and familial character.

33. One should work hard so that one won’t be a disappointment to one’s family.

34. It is one’s duty to bring praise through achievement to one’s family.

35. Receiving awards for excellence need not reflect well on one’s family.

36. Children’s achievements need not bring honor to their parents.

37. One should be able to brag about one’s achievements.

38. One should be able to boast about one’s achievement.

39. One should not sing one’s own praises.

40. One should not openly talk about one’s accomplishments.

41. One should be able to draw attention to one’s accomplishments.

42. Being boastful should not be a sign of one’s weakness and insecurity.
Appendix E: Five-by-Five Resiliency Scale
FIVE-BY-FIVE RESILIENCY SCALE

The 25-item measure utilizes a 5-point Likert-type scale ranging from 1 = Very inaccurate to 5 = Very accurate.

1. Can switch gears easily.
2. Am open to change.
3. Don’t like the idea of change.
4. Adapt easily to new situations.
5. Dislike the unknown.
6. Experience my emotions intensely.
7. Am not easily affected by my emotions.
8. Keep my emotions under control.
9. Am very sensitive and easily hurt.
10. Get overwhelmed by emotions.
11. See difficulties everywhere.
12. Expect things to fail.
13. Look at the bright side of life.
15. Have a dark outlook on the future.
16. Am good at analyzing problems.
17. Can handle complex problems.
18. Am less capable than most people.
20. Can tackle anything.
22. Feel empty in my relationships.
23. Tend to find social situations confusing.
24. Feel comfortable around people.
25. Feel isolated from other people.
Appendix F: Emotional Regulation Strategies Scale
EMOTIONAL REGULATION STRATEGIES

Eighteen items are scored from 1 (strongly disagree) to 5 (strongly agree)

1. . . .I can block out any unwanted thoughts or feelings

2. . . .I can shake off any anxieties in my life

3. . . .I feel I am in my own little bubble, away from ordinary worries

4. . . .it helps me forget about my worries

5. . . .it helps me to disengage from things that are bothering me

6. . . .it makes me feel detached from negative things in my life

7. . . .it redirects my attention so I forget unwanted thoughts and feelings

8. . . .I can contemplate what is going on in my life with a clear mind

9. . . .it helps me refocus on what matter in my life

10. . . .it helps me to come to terms with my own emotions

11. . . .it helps me to put worries or problems I have in perspective

12. . . .it helps me to understand my own feelings on things that are on my mind

13. . . .it makes me reflect on my emotions

14. . . .I feel more confident in myself

15. . . .it boosts my self-esteem

16. . . .it gives me a sense of purpose

17. . . .It makes me feel stronger in myself

18. . . .it reaffirms my identity
Appendix G: Recruitment Flyer
BE A PART OF ASIAN-AMERICAN RESEARCH!

Volunteers needed for a graduate research exploring resilience, collage-making and the unique life experiences of growing up Asian-American

Interested?
Take the pre-qualification survey!

ALL PARTICIPANTS WHO COMPLETE THE PRE-QUALIFICATION SURVEY WILL BE ENTERED TO WIN A $25 VISA GIFT CARD. PARTICIPANTS WHO ARE QUALIFIED AND PROCEED WITH THE STUDY WILL BE ENTERED IN A SEPARATE RAFFLE TO WIN A $50 VISA GIFT CARD.

FOR MORE INFORMATION PLEASE CONTACT:
Casey Soto
Art Therapy Graduate Student
Dominican University of California
Casey.Galaura@students.dominican.edu
Appendix H: Acceptance and Commitment Therapy- Hexaflex Model
Appendix I: Participant Artwork
Participant 1
Participant 2
Participant 3
Participant 5
Participant 7
Participant 9
Participant 10
Participant 12
Appendix J: Preassembled Collage Materials
Better With Time

I've learned from living

Are you a people pleaser?

It takes strength and courage to tell the truth.
You are only confined by the walls you build yourself.
THE POWER to HARM

Poison Ivy