You're Only As Good As You Do In School: Asian American Students and the Mental Risks They Face in Higher Education

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Anne Cai always joked that, “one of these days,” school was going to drive her to insanity. A snapshot of her life begged to differ. As the oldest of three daughters in her traditional Chinese-American family, Anne, 23, was the image of success and achievement, not only for her parents and their peers, but for her sisters Jenny, 19, and Vicky, 13. She excelled in elementary, middle and at all three of her high schools—the high school moves were decided by her parents and she never questioned them, lest she burden the family with what she considered complaining. As a child, she attended a Chinese after school in Flushing, Queens, where she was taught the Cantonese dialect and how to write Chinese characters. In 2010, she was accepted into Queens College, and then Stonybrook University, a highly applauded State University of New York institution, as a transfer student two years later. She even had plans to apply to Stonybrook’s highly ranked nursing program.

Yet, one afternoon during her junior year, Anne ended up in the back seat of her silver Toyota, frantically screaming and struggling to breathe. In the passenger seat sat her phone, an email titled “General Microbiology – Course Failure” still on the screen. Each breath squeezed out of her chest, the casual rhythm of in and out now short and gasping. The heel of her beige booties had cracked the corner of the window as her body flailed incessantly through each cry. Her eyes, overrun with hot tears that blurred her vision, were ringed with dark circles from multiple semesters of running on a 9 a.m. to 4 a.m. study schedule and were stark against her pale, almost sickly, white complexion.

Even as she joked that school would push her over the edge, she’d never actually thought it would happen. Wasn’t it normal, she thought, to cry in public at the mere thought of calculus assignments? For the thought of an unattended sociology textbook to stave off all hunger and desire to sleep? To say “to hell” with all social interaction just to obtain a 4.0 GPA? To do the aforementioned, then lie in bed feeling “absolutely nothing” and receiving a 2.3 GPA instead? Anne’s panic attack, unbeknownst to her at the time, was the accumulation of untreated symptoms of generalized anxiety disorder. What she considered a “normal” college experience was, in actuality, an extreme reaction to her journey of success.

“I’ve always done what I was supposed to do as the first born,” says Anne. “And I think because of that, there was always this pressure. A lot of it was me wanting to do well and provide [a good life] for my parents. But it was always assignment on top of assignment.”

Academia-induced stress in conjunction with a lifetime of perfectionism sent Anne’s emotions into overdrive. She described them as being “in flux”: overwhelming
apathy one day decrescendoed to a quiet, but blood draining fear of failure – always felt in her small, cherubic face – the next. It was that constant change, she believes, that kept her rush of feelings of bay.

But she never said a word about it.

“And have people think I was crazy?” asks Anne. “The people at temple? My parents? My sisters? I would never do that.”

According to the Center for Collegiate Mental Health at Penn State’s (CCMH) 2014 annual study, which observes mental health in college students, 100,000 college students were living with the symptoms of generalized anxiety disorder in relation to school during the 2013-2014 school year. CCMH, which works with over 300 universities across the U.S., revealed in their report that 55 percent of students exhibited symptoms of anxiety, with depression and stress at 45 and 43 percent, respectively.

Asian and Asian American higher education students are second only to Native Americans to report the highest feelings of anxiety, depression and suicide, yet do little to nothing about it, according to the American Psychological Association.

This reluctance to seek help is because of cultural stigma towards mental health issues – caused largely by a lack of knowledge – and the “model minority” myth frequently applied to Asian Americans, according to “The Model Minority Student: Asian American Students and the Relationships Between Acculturation to Western Values, Family Pressures, and Mental Health Concerns”. Many carry the weight of academically succeeding not only for themselves, but also for their families, many of whom immigrated to the U.S. It’s because of who they are – immigrant and second generation Americans – that Asian and Asian Americans feel a unique type of stress mixed with the pressures, and eventual symptoms of anxiety or depression and/or suicidal feelings, felt by higher education.

Dr. Sumie Okazaki is a professor of counseling psychology at NYU’s Steinhardt School of Culture, Education, and Human Development, and a past president of the Asian American Psychological Association (AAPA). Her research includes the impact of immigration and race in Asian and Asian American adolescents and young adults within local and transnational contexts, i.e. higher education.

“How not knowing how to navigate the [schooling] system, not quite having cultural knowledge, not quite having the language skills, parents not having the professional degrees that carry over into middle class lifestyle; there’s internal and external pressure to try to achieve something very difficult,” says Dr. Okazaki.

Anne had transferred from Queens College to Stonybrook University largely due to the demands from her traditional Chinese parents, who had come to New York from a small village in the Fujian province of China. But Anne herself, in the back of her
mind, knew an extra push, academically, might help her land the stable job her parents wanted for her. Unfortunately, the pressures of succeeding at Stonybrook – many of which were self-inflicted – would prove to be too much for her.

In a culture that stigmatizes the acknowledgement of mental health, that has high suicide rates in the 15-24 age bracket, and that is held up to being the “model minority” in America, mentally, Asian and Asian American students are currently at risk in higher education.

Anxiety, depression and other mental health issues are not common topics of conversation in Asian families due to the stigma attached to mental health symptoms and illnesses. The mental health status of an Asian person is reflective not only of themselves, but of their families. It is largely believed in the Asian culture that mental health is a reflection of one’s immediate family as well as their entire lineage, and that any stain on the face of that lineage is a tarnished reflection on the person suffering and their family, says Dr. Okazaki.

“The image of mental health in Asian societies, and this is true here in America today, goes to the extreme: those are the ‘crazy’ people who do bad things,” says Dr. Okazaki. “Those kinds of misconceptions keep people from seeking help, because they don’t want to see themselves or be seen by others as having mental health problems.”

Mental health in the Asian culture is a repeated topic of interest in psychology journals, research papers and news stories, and for good reason. They are the racial group least likely to seek professional help when exhibiting symptoms of mental health problems, with only 8.6 percent of their total population of 14.7 million seeking out either doctors or mental health professionals, reports the 2011 International Association for Cross-Cultural Psychology report “Asian American Health: What We Know and We Don’t Know.” For nearly a decade, suicide has been the second leading cause of death for Asian Americans aged 15 to 24 and the leading cause of death for those aged 20 to 24, according to the American Psychological Association.

“We don’t say ‘I love you,’” says Anne. “My family has never been very affectionate.” The people in their Fujian farming village largely valued hard work, says Anne, and her parents came to America to provide search for better financial opportunities, build a better life for themselves and, over time, for their future family. This led to a childhood, Anne recalls, of incredibly scarce child rearing; one of no teaching and a lack of emotional tending to.

While her dad worked long hours as a laborer and her mom did manicures and pedicures, Anne played the role of parent to her younger sister Jenny, cooking her dinners, helping her with homework, and preparing her for bed. As the oldest child, Anne had been raised to be obedient, so she never questioned stepping into the parent role for Jenny. This role continued after the birth of her youngest sister
Vicky, and Anne continued to lead by example as the oldest, in the home and the classroom.

During her elementary school years, Anne was sent to a Chinese language after school program in her neighborhood of Flushing, Queens, where she was taught the Cantonese dialect and how to write Chinese characters. She was enrolled when other parents from her Buddhist temple began enrolling their children.

Higher education, or high school and beyond, was a privilege in her parents’ village; her father ended his schooling after eighth grade and her mother after tenth. When they asked a young Anne what she wanted to do as an adult, she never gave them a straight answer.

“I wanted to do so many things,” she says. “My parents didn’t like that. They wanted to hear a single answer.”

To keep her on some kind of path, Anne’s mother began telling her that she needed to be a “professional.” In many Asian cultures, it’s customary to care for one’s parents as they get older. According to Anne’s parents, that could only be done with a high-ranking job that paid a lot of money. They believed any respectable opportunity to earn a lot of money was one worth grabbing. So, in 2004, when Anne was 12 years old, the family moved to Tampa, Florida to open a Japanese restaurant with a friend of her dad’s.

The business partner, a friend of her father’s from Fujian, had been successful in other food related ventures in and around Tampa. It had always been a dream of her father’s to own his own business and he seized his chance when Nagoya was opened in 2005. Anne describes the move as her first experience with depression.

“I was heartbroken, but god forbid I showed it,” she says, thinking back on first leaving her life in New York behind. “God forbid I spoke about my sadness or even shed one tear. My parents, especially my mother, didn’t want to hear it, because I was the oldest.”

From extra math and science worksheets provided by her mother to the forbiddance of outside activities after school, Anne was forced to focus solely on school. Her mother was determined to keep her on the path of being a professional, a path that never had a clear end goal; so long as she was able to financially provide for her family, […]. The family moved again after Anne’s freshman year of high school, and again after her sophomore year, a move she blames on her parents’ eye for “bigger and better houses.” The changing of districts also caused her to transfer high schools twice in two years.

“It was a nightmare trying to keep friends. I left them a year after I met them, then couldn’t even hang out with them,” she says. She would stay up until 2 a.m. working
on mathematics and social studies worksheets provided by her mom - and lack of a social life led to a “very numb time” for her, emotionally.

“My world was spinning. I didn’t cry, I didn’t want to eat, I didn’t want to sleep. I was the only one in my world.”

The underutilization of mental health services fueled by cultural barriers, general stigma and acculturation, paired with alarming statistics for both causes of death and frequency of anxious and depressive symptoms felt, places the Asian American college age group at the forefront of concern for mental soundness.

Yuvana Chai, 20, a Chinese-American junior at Queens College, avoided starting therapy for many months when her anxiety began to get the best of her at age 16. The mere sight of academic to­do lists sent her into a panic and her work suffered as a result of self­doubt, thanks to a fear of failing the SATs. She hid her feelings from her parents and friends.

“I didn’t want to feel judged,” says Yuvana. “I was against seeing a therapist for a long time because I thought my friends wouldn’t understand.”

It was only after she mentioned the thought of suicide to a teacher - who was then obligated to tell her mother, who was a Chinese language teacher at the school - that she began therapy. She did so in a moment of casual passing and didn’t consider the consequences of her actions. She was soon prescribed Zoloft, a medication commonly used to treat panic disorders. She later admitted that she never felt a difference on the medication, though the six months of therapy sessions had put her in a seemingly good place. She was even able to announce her anxiety on Facebook at the end of that first year. When she enrolled in Queensborough Community College in 2013, however, the school work became more challenging and brought her feelings of inadequacy back.

Yuvana has been battling her anxiety on and off since beginning her college career. Perceived inadequacy on her part and perfectionism have sent her into panics and crying spells. Since transferring to Queens College in fall 2015, she says she has yet to experience any episodes.

“It might happen during finals time,” she says. “I’m used to it now, so I hope I’m able to control it even a little.”

Anne’s own depression began to subside when she transferred to her third and final high school - in New York. After four years of living in Tampa, her family returned to New York in 2008. Nagoya had gone out of business.
“My dad was really hurt; I noticed it in the tone of his voice,” says Anne. “But he wasn’t going to let that stop him from moving on the next thing [whatever it may be].”

But the failure of the restaurant stayed with her parents for over a year. Anne became a scapegoat for her parents’ frustration, she says, and was expected to receive high marks on her SATs and a variety of colleges to choose from to mask their failure.

She began college in 2010. John Bowne, a public school in Flushing, Queens had been her final high school, she had made friends and her grades were a steady stream of As and Bs. After years of constant moving, she wanted to stay in New York for college, but her mother was furious at her decision to attend Queens College.

“That trash school?” she had asked. Anne quickly pulled the acceptance letter back, eyes widening with surprise; her mother’s anger usually built up at a slower pace. She stared at her oldest daughter long and hard, brown eyes weary from the near constant sight of pedicured toes and manicured hands for 10 hours. Her dry lips pulled into a tight scowl.

“So you’re going to go to that trash school?” she had asked pointedly in Cantonese. Her voice raised an octave on “trash school.” Feeling her stomach plummet and her hands shake with rage, Anne folded the letter and sat it on the counter, under the key dish. Her father would find it when he came home and placed his keys down. “Yeah, I’m going to that trash school,” she said quietly. “I got into that trash school, so I’m going to that trash school.” In an instant, her mother stood up and slid the Queens College acceptance letter from under the tray and crumpled it. “CUNY is trash. You must be trash too.”

Anne couldn’t shake her mother’s claim of a “trash” existence at Queens College. Despite their bumping heads over enrollment, she still wanted to become a professional who could provide for her family. Anne, then a liberal arts major who still hadn’t decided on a career, began to wonder what kind of future the school could offer her. Her cousin Irene, a recent graduate of Stonybrook University’s nursing program, had just begun her career as a pediatric nurse at Harlem Hospital and loved it. The Cai family - Anne’s mother in particular - sung praises of Irene’s accomplishments.

After three semesters, Anne transferred to Stonybrook University for the spring 2012 semester to join their nursing program.

“I liked the idea of healing others and being of help to them,” she says. “That’s what I knew the best since I raised my sisters.”

Her parents, however, did play a large role in her decision. “Daddy is getting old,” her father would frequently say, suggesting that Anne would need to provide a
comfortable retirement for him. “I at least needed you to get into NYU,” said her mother during Anne’s first semester of college.

The program and school name alone would open doors and Anne would finally have the stability she both wanted and needed.

“Except that things got really bad really fast,” she says. “It’s almost kind of sad how fast things fell apart.”

She wasn’t prepared for the radical difference between Queens College and Stonybrook. The quality of work and expectations from professors were too different and she couldn’t keep up. Stonybrook failed to provide a caring support system for her; professors were cold and impatient compared to those at Queens College. Her first semester schedule of statistics, calculus, chemistry and psychology yielded final grades of C’s and D’s. The depression she felt as a high school student had come back.

“I quit my waitressing job. I cancelled plans with friends. I was staying up until 4, then 5, then 6 in the morning. But my mind was blank. I thought, oh my God, why is this happening to me?”

“It’s a stereotype that’s fairly pervasive,” says Dr. Okazaki of the model minority myth. “It started out mostly in the ‘60s during the Civil Rights era. Asian Americans were portrayed as hardworking, doing well academically and occupationally, and most importantly, not complaining, unlike other minorities who were making their voices heard.”

A stereotype and widespread myth that has withstood over five decades, the model minority myth is a double-edged sword in the Asian American community. A 2003 report published by the National Association of Student Personnel Administrators defines it as such: “The term ‘model minority’ is associated with Asian Americans because of their purported ability to overcome their minority disadvantage through personal determination, motivation, and hard work and their supposed high occupational status, higher-than-average family incomes, and lower rates of mental disorders.”

Selective policies of immigration, especially the 1965 Immigration Act, made it easier for more privileged immigrants with degrees and high educational skills - many of whom were Asian - to obtain modern social capital and a lot of skills when they came to the United States, says Dr. Okazaki. Because Asian Americans were the minority succeeding in ways that mattered to the dominant White America, they became the image of not complaining, or protesting, or joining the civil rights movement in large numbers.

“In some ways, it was a pernicious attempt by the mainstream to try to suppress the civil rights by pitting one minority group against another,” says Dr. Okazaki.
Asian Americans more assimilated to Western culture are better able to recognize the racial undertones in the model minority myth. They know, explains Dr. Okazaki, that the perpetuation of the myth erases their oppression. Older Asian Americans, however, see the model minority as a vision of greatness.

“If you don’t understand the racial history of the United States, of course you want to be seen a model minority,” she says. “They believe, ‘What’s wrong with being seen as hardworking, good at math and not having any problems?’”

When less assimilated, more traditional Asian families buy into the myth, it then becomes their standard for greatness. They now hold extremely high and many times unattainable standards of success for their children. Failure to reach those standards can manifest in overly harsh judgment and, in more extreme cases, abuse and death.

Marisha Subandi, 23, who is Indonesian-American, was physically abused by her parents when she didn’t live up to what she describes as their farfetched expectations of success.

“They would smack the glasses right off of my face,” she says. “My brother Farid had to shield me at one point and tell my dad ‘Stop hitting Marisha!’”

As a child, Marisha felt she learned at a slower pace and was easily distracted. For years, she received average grades - primarily high to low Bs - which didn’t sit well with her immigrant parents, especially her father.

“In middle school, he had to sign a test I failed one morning before I left for school. He took one look at the D on the paper, grabbed my shoulder and punched me in my cheek. My mom pulled him off after a few hits and said, ‘Stop, you’ll give her a black eye.’”

Marisha grew up knowing this was wrong but only fought back once she turned 18.

“I yelled at my father, ‘This is America! You can’t do that shit here!’ I threatened to call the police,” she says.

Her first act of freedom gave her the courage to drop out of the Borough of Manhattan Community College in 2012 and enroll in the Empire Beauty School. She moved out of her parents’ home in Forest Hills, Queens and relocated to Ridgewood. Today, she works as a freelance hairstylist. She hasn’t been home in over two years.

“My father leaves me voicemails from time to time,” says Marisha. “‘Marisha, I’m so sorry.’ And my mom goes ‘Marisha, please come home.’ But why would I go where wasn’t wanted? It wasn’t enough to be me.”
The model minority myth, whose racial background in the context of history isn’t largely known, is also a standard that younger Asian American students feel they have to live by. Referring back to the weight of perfection that comes with the myth, that weight can crush those carrying it. That was seen in the case of three Asian American students who committed suicide within four weeks of each other in 2014. All were students at high profile universities.

Andrew Sun, a sophomore at Harvard University, jumped 7 stories to his death on April 6, 2014. Kevin Lee, a sophomore at Boston University, killed himself in his dorm room on April 14. Most notably, the body of Jiwon Lee, a fourth year dental student at Columbia University, was discovered floating down the Hudson River on May 4. The Daily News reported that Lee had suffered from depression and attempted suicide before she first disappeared. It was also reported that a suicide note regarding “not being good enough” was left behind.

The model minority myth is one that continually perpetuates extreme perfectionism and causes many students their lives, both in the context of school and out. They don’t see failure as an option, and when it happens - when their feelings of insecurity build up and they suffer in silence - fatal choices are made.

Anne continued on a downward spiral from her sophomore year onward. Her grades for the nursing prerequisites were no longer substantial, though the C’s and D’s became B’s and C’s. She shifted her sights to a major in economics, the classes for which she managed to earn B’s in. Expectations set in place by others, however, continued to consume her thoughts. Her father ushered her daily to “try her best.” Her mother hissed to “keep the embarrassment of the family to a minimum.” Each day brought crying fits in public and a nervous shake she developed.

“No one knew what to say because I turned my back on everyone,” says Anne. “I couldn’t let anyone see me like that.”

“It sounds like her presentation [was] consistent with a fairly severe mood disorder,” says Dr. Okazaki when presented with Anne’s symptoms. “She sounds like she was suffering from a problem consistent with a clinically diagnosable disorder that would have benefitted from professional help.”

While help didn’t come in the form of a professional, it did come in the form of her cousin Irene, a nurse, who stayed with the Cais in 2013 while her home was being renovated.

Anne smiles at the mention of her cousin. “She would drive me to the Manhattan campus when I took winter classes. When I came home, she would be waiting outside of my door. I think she knew something was wrong with me.”

Irene pointed out during one of her first days the lack of recognition Anne’s parents gave her for her schooling. Anne says it was the first time in over a year that
someone recognized a source of her pain. Still in a fragile place, Anne never told
Irene about her subpar grades, the panic attack in her car or her subsequent feelings
of anxiety and depression.

“We did start talking about my childhood though,” says Anne. “I started to tell her
every feeling I used to have and how I carried it with me through Florida and
Queens College and then Stonybrook.”

Dr. Okazaki highlights the importance of conversation.

“It’s important to recognize that things are changing rapidly in Asia,” she says. “For
example, there’s more recognition of mental health problems in contemporary
China. The city government has decided that first through twelfth grade public
school students are going to get a mental health curriculum. They’ll learn about
coping, stress and different issues like identities.”

With the number of college students with anxiety and depression getting higher
each year and the topic of Asian American health in constant rotation, the topic of
speaking out about mental health comes at an important time. Lots of local
conversation, such as on college campuses, are happening. Emory, Cornell and
Stanford universities are only a few schools that have centers for Asian American
students dealing with mental health issues on campus.

“Along with conversations on different campuses, organizations like the AAPA
create a space for professionals from around the nation to have conversations and
dialogues around those needs,” says Dr. Okazaki.

Anne completed her major requirements for a B.S. in economics in spring 2014, but
still doesn’t have her degree because she decided to do a minor in art minor in
spring 2013. Art – another underlying interest – and everything about it took the
reigns not long after. She currently works as a secretary for a children’s clothing
company based in Koreatown and enrolled in a pattern-making course at the
Fashion Institute of Technology in fall 2015.

“I’ve started doing what I want to do,” says Anne. “I confess I do feel like a quitter
sometimes; my father is so upset that I won’t pick up my degree. I don’t think I can
go back to Stonybrook just yet though. I will say being an adult and being at my job
is helping me talk more. I’m actually learning how to share what I’m feeling.”