Culture and Social Support-Seeking Behaviors

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Abstract

While research has shown that social support is a strong buffer against mental illnesses, Asian Americans remain one of the least likely ethnic groups to speak out about mental health and seek social support. The present study proposes two mediators - filial piety and perceived parental stigma towards mental health - as possible explanations for why Asian Americans are less likely to seek social support. 340 U.S. undergraduates identifying as Asian American or White answered a writing prompt about a social stressor and questions that measured filial piety, perceived parental stigma, and likelihood of seeking social support. Results showed that Asian Americans were less likely to seek social support, have higher levels of filial piety, and are more likely to perceive parental stigma. Both filial piety and perceived parental stigma were significant mediators but had different effects on the relationship between culture and social support. Higher filial piety predicted more social support-seeking behaviors, especially among Asian Americans, whereas stronger perceptions of parental stigma were correlated with a lower likelihood of seeking social support. These findings highlight the significant influence of family, stigma, and cultural values on mental health services, emphasizing the importance of addressing these factors when encouraging support-seeking behaviors among Asian Americans.

Introduction

Culture and Social Support-Seeking Behaviors

During times of hardship, people often rely on their communities and support systems for comfort. The buffering hypothesis states that the adverse effects of stress will be lessened for those with stronger support systems (Cohen & McKay, 2020) because social support acts as a strong buffer against mental and physical illnesses (Kleiman et al., 2014) and decreases the risk of getting sick (Cohen & Wills, 1985) or depressed (Gariepy et al., 2016).

Collectivistic cultures are characterized by the prioritization of a group or community's needs over the individual, and emphasis is placed on family and group harmony (Triandis, 1989; Markus & Kitayama, 1991). One would expect that collectivistic cultures would be more likely to seek social support because of their community-centered focus, but studies have shown that this is not the case. Individuals from collectivistic cultures, such as Asian Americans, are actually less likely to seek social support compared to European Americans (Taylor et al., 2004). Since social support acts as a buffer for illnesses, this lack of support-seeking behavior is a detrimental barrier for those seeking mental health help. According to the U.S. Department of Health and Human Services, Asians were 60% less likely to have received mental health treatment compared to the non-Hispanic White population (US DHHS, 2018). This underreporting and lack of treatment has grim effects. The Center for Disease Control and Prevention published that Asian Americans from 15 to 24 years old in 2008 had significantly higher suicide rates than other ethnic groups in that age bracket (Han & Pong, 2015). Therefore, it is imperative to identify and understand underlying factors that could explain why Asian Americans are less likely to engage in social support-seeking behaviors.

Filial piety is a prominent aspect of Asian culture and is the value of respecting, obeying, and caring for one's parents (Yeh & Bedford, 2003). Due to their collectivistic culture's emphasis on honoring their parents and "saving face," it is possible that many Asian Americans do not disclose their struggles with mental health because they do not want to bring embarrassment, guilt, or shame to their parents out of filial piety (Han & Pong, 2015). In one study, "parents' emphasis on saving face" was a common reason among Asians explaining why they did not seek social support for mental health concerns (Augsberger et al., 2015). Previous studies have also shown that filial piety is significantly associated with the inhibition of self-expression (Yeh & Bedford, 2003), which could explain why Asian Americans are hesitant to vocalize their struggles. However, few studies examine the direct effects of filial piety on social support-seeking behaviors. In addition, most of the existing studies surrounding filial piety focus on its impact on parents, while few studies examine its effects on the younger generation who embodies it. Therefore, this study aims to close this gap in the literature by viewing filial piety as a mediator affecting social support-seeking behaviors among undergraduate students aged 18 to 26.

Another mediating factor that could explain Asian Americans' lack of social support-seeking behavior is their perception of their parents' stigma toward mental health and social support-seeking behaviors. People rely on their perception of norms to inform their attitudes and behaviors, even if these perceptions do not reflect the truth (Cox et al., 2019). Asian Americans often have a greater stigma

toward mental health (Han & Pong, 2015) and have an overall negative view of support-seeking behaviors (Shi et al., 2020). One study found that Asian participants, compared to other ethnicities, were more likely to view someone negatively if they sought treatment for psychological problems (Pederson & Paves, 2014). There is also evidence that Asian students' desire to meet their parents' expectations often overrides their own opinions, which was supported in a study that found that perceptions of their parents' preference for math and science majors predicted a greater likelihood of choosing these majors in college, despite their personal lack of interest (Shen et al., 2014). This suggests that Asian Americans are more likely to develop beliefs that are aligned with their perception of their parent's views, which also extends to opinions on mental health or support-seeking behaviors. If they believe that their parents have a negative view of mental health or help-seeking behaviors, this potential misperception of norms could deter them from seeking social support (Jennings et al., 2015). Indeed, one study that investigated the difference between the effects of perceived norms of peers versus perceived norms of parents and mental health help-seeking behaviors among African American college students found that, although perceived norms from both groups had a significant influence on help-seeking behavior, perceived negative family norms were the strongest predictor of a reduction in help-seeking intentions (Barksdale & Molock, 2008). Asian and African cultures both tend to be collectivistic and share many similarities in having negative attitudes toward help-seeking behaviors (Masuda et al., 2009). It is possible that Asian Americans who tend to be more collectivistic and view themselves as more connected to their parents could be more susceptible to the influence of perceived norms. There are few studies that research the effects of perceived norms on social support-seeking behaviors among Asian Americans, so this study hopes to bridge that gap. Therefore, we hypothesize that participants with more negative perceptions of parental stigma will be less likely to seek social support. Due to their sense of unity and group-conforming behavior, we believe that Asian Americans would be more affected by their parents' beliefs than European Americans.

The Present Study

The present study compares social support-seeking tendencies among Asian Americans and European Americans and examines the mediating roles of filial piety and perceived parental stigma towards mental health. We hypothesize that Asian Americans will engage in less social support-seeking behaviors, have higher levels of filial piety, and perceive greater parental stigma toward social support-seeking behavior and mental health compared to European Americans. We further hypothesize that filial piety and perception of norms will mediate the relationship between culture and social support-seeking behaviors. Specifically, Asians who have higher levels of filial piety and perceived parental stigma will be less likely to seek social support.

Method

Design

The present study used a multi-group comparison design. The quasi-independent variable was culture, in which participants identified as either Asian or White. The dependent variable was social support-

seeking behavior, which was operationalized using items from the Brief COPE Scale (Carver, 1989). The mediators were filial piety and perceived parental stigma. Filial piety was measured using questions adapted from the Dual Filial Piety Scale (Yeh & Bedford, 2003), and perceived parental stigma was measured using questions adapted from subscales of The Stigma and Self-Stigma Scale (Docksey, 2022). All questions from The Stigma and Self-Stigma Scale were modified from the topic of "mental disorders" to "challenges" to fit the study better. For social support-seeking behaviors, questions were changed to focus on how likely participants would be to seek support from their parents. To prime participants to think about a recent social stressor before surveying their likelihood of seeking social support, they were asked to complete a short writing prompt derived from Taylor et al., 2004. The study was administered using Qualtrics, delivered using Prolific, and analyzed using R.

To test the research hypothesis that filial piety and perceived parental stigma were mediators in the relationship between culture and social support-seeking behaviors, a mediation analysis was conducted. The mean scores for Asian and White levels of filial piety, perceived parental stigma, and social support-seeking behaviors were compared to see cultural differences. T-tests were used to determine whether there were statistically significant differences between these means.

Participants

Participants were recruited from Prolific, an online survey platform where participants can be compensated to participate in research studies. Eligible participants were U.S. students aged 18-26, in community/technical college and/or pursuing an undergraduate degree, Asian or White, and had an approval rate from 70-100% after completing at least five previous studies on Prolific. Participants in this study received financial remuneration and completed the study for $1.60. There were originally 363 participants who participated in the survey. However, we removed 23 participants due to failing two or more of three attention check questions, resulting in a total sample of 340 participants: 108 were male, 212 were female, 19 were non-binary/other, and 1 was unknown. The average age was 21 years old. All participants were students in the U.S. either pursuing an undergraduate degree (N=311) or in community college (N=29). There were 42 first-year students, 51 second-year students, 101 third-year students, 122 fourth-year students, and 24 fifth-year students or above. There were 135 Asian participants and 206 White participants. The average household income was $80-89,000, with most participants (N=147) having a yearly income of $90,000 or more.

Procedure

Participants first answered four validation questions about their student status, level of education, year in undergraduate study, and ethnicity. Qualifying participants continued in the study to read the consent form, which stated that they would fill out a 10-minute survey for $1.60 that investigated social support-seeking behaviors and their views on seeking social support. Consenting participants answered eight randomized questions adapted from The Self and Self-Stigma Scales (Docksey et al., 2022) about how they believed their parents would perceive their challenges and support-seeking behaviors. Then, they answered 16 questions from The Dual Filial Piety Scale (Yeh & Bedford, 2003) that gauged their filial piety. Participants were then given a short writing prompt from Taylor et al., 2004 which asked them to use two to four sentences to describe a time during the past three months when they encountered a

stressful social situation. Then, the study measured their social support-seeking behaviors by asking four questions from the Brief COPE Scale (Carver, 1997) about how likely they would be to engage in support-seeking behaviors if they were to encounter the stressor that they just described again. A randomized attention check was placed in each set of questions regarding perceived norms questions, filial piety, and social support-seeking behavior. Lastly, participants answered demographic questions about their age, gender, parental level of education, household annual income, and student status. Participants were debriefed and informed that the purpose of the study was to evaluate how filial piety and perceived parental views toward mental health affected participants' social support-seeking behaviors. Figure 1 presents a summary of the procedure.

We ran two pilot studies before collecting the main sample. The first pilot study recruited five participants to check the average time it took to complete the study and examine the measures. We added a sentence requirement to the writing task to lengthen the responses since the initial responses were too brief. We also altered one of the attention checks after realizing that its answer of "extremely likely" happened to be the same answer selection as many other questions before it for many participants. The second pilot study tested these changes with 20 participants and found improved results with clearer written responses.

Measures

Social Stressor Writing Task

We adapted a short writing task by Taylor and colleagues (2004) to prompt participants to think about a recent time when they faced a significant social stressor. Participants were asked, "As a college student, there may be some social situations that can be stressful, especially as you are navigating adulthood and transitioning to a new environment. Think back over the last three months. In 2-4 sentences, please describe a time when you encountered one or more stressful social situations (e.g., navigating relationships with housemates/classmates, dating, meeting new people, new social environments, loneliness, etc.)." The question was changed to address the present study's target population of college students and the stressors they typically experience, and a sentence requirement was included to ensure quality answers. This prompt was chosen for its conciseness and open-endedness.

Filial Piety Scale

Filial piety can be categorized as reciprocal filial piety or authoritarian filial piety. Reciprocal filial piety is defined as "emotionally and spiritually attending to one's parents out of gratitude," whereas authoritarian filial piety involves "suppressing one's own wishes and complying with one's parents' wishes" (Yeh & Bedford, 2003). The Dual Filial Piety Scale (Yeh & Bedford, 2003) was chosen to measure participants' levels of filial piety for the present study because it measures both aspects of filial piety. It is a 16-item self-report measure with a 5-point Likert scale ranging from 1 (*Extremely unlikely)* to 5 (*Extremely likely)*. The scale has eight items that measure reciprocal filial piety and eight items that measure authoritarian filial piety. The internal reliability for the reciprocal filial piety subscale is demonstrated by Cronbach's alpha values of .88, and .84 for the authoritarian filial piety subscale (Ha et al., 2020). A few of the reciprocal filial piety sample items include, "Be grateful to my parents for raising

me," and "Talk frequently with my parents to understand their thoughts and feelings" (Yeh & Bedford, 2003). Some examples of items that measure authoritarian filial piety include "Give up my aspirations to meet my parents' expectations,'' or "Take my parents' suggestions even when I do not agree with them" (Yeh & Bedford, 2003). Scores are calculated by taking the average of participants' responses. A higher score on the scale is correlated with stronger filial piety, and total scores range from 16 to 80.

The Stigma and Self-Stigma Scales

Participants' perceived parental stigma about help-seeking behaviors was measured using eight adapted questions from the Stigma and Self-Stigma Scales (Docksey et al., 2022). It is a self-report measure with 42 items across six subscales: stigma to others, social distance, anticipated stigma, self-stigma, avoidant coping, and help-seeking behaviors. For this study, eight of the scale's questions (Items 2, 3, 11, 18, 22, 32, and 37) from the anticipated stigma, self-stigma, and help-seeking behaviors sections were used. Participants indicated if they agreed or disagreed with the statement using a 5-point Likert scale ranging from 1 (*Strongly Disagree*) to 5 (*Strongly Agree*). The anticipated stigma subscale had six items that measured their beliefs about how others would react to their struggles, with a Cronbach's alpha value of .88. The self-stigma subscale reflects participants' beliefs about themselves in times of hardship and had six items with a Cronbach's alpha value of .84. The help-seeking behavior subscale measured participants' levels of comfort with seeking help for their challenges with a Cronbach's alpha value of .72.

Items were adapted to reflect perceived parental stigma toward challenges and help-seeking behaviors instead of attitudes about mental disorders. One sample item includes changing "If I had a mental disorder, I would worry other people would think that I am weak" to "If I failed to overcome my own challenges, I would worry that my parent(s) would think that I am weak." Possible scores ranged from 8 to 40. A higher score indicates greater perceived parental stigma, and a lower score indicates less perceived parental stigma. Item 3 was reverse-scored. The subscales used in this study had Cronbach's alpha values that ranged from .77 to .88 (Docksey et al., 2022).

Brief COPE Scale

Participants' likelihood of seeking social support will be measured using the Brief COPE Scale (Carver, 1997). This scale measures different coping strategies in response to stress and comprises 28 items with 14 subscales. The present study used four items from the instrumental support and planning subsections with a 5-point Likert scale ranging from 1 (*Extremely unlikely*) to 5 (*Extremely likely*). Instrumental support includes receiving help for tangible needs. Questions were adapted to fit help-seeking behaviors toward parents. Some sample items include changing "I've been trying to get advice or help from other people about what to do" to "I will try to get advice from my parent(s) about what to do," and changing "I've been trying to come up with a strategy about what to do" to "I will talk to my parent(s) to come up with something concrete about the problem." Social support-seeking behavior was calculated by taking the average score of these items. Scores had a possible range of one to five, with higher scores indicating a higher likelihood of social support-seeking behaviors. The Cronbach's alpha coefficient is .64 for the instrumental support subscale and .73 for the planning subscale.

Results

We first ran a series of t-tests to examine whether there were group differences in social support-seeking tendencies. Results showed that Asian participants were less likely to seek social support (M_{Asian}= 2.58, SD=1.23) than White participants (M_{White} = 3.18, SD=1.24), ($t(288) = 4.37$, $p < .001$). We also found that Asian participants had higher levels of filial piety (M_{Asian} = 3.39, SD = .612) than White participants (M_{White} = 3.21, SD = .58), $t(275) = -2.65$, $p = .01$. Our results also showed that Asians were more likely to have a greater perceived parental stigma towards mental health (M_{Asian} = 3.21, SD = .78) compared to White participants (M_{White} = 2.96, SD = .81), which was consistent with previous literature, t(291) = -2.84, $p = .005$. Figure 2 shows a summary of these results.

Mediator effects of filial piety and perceived parental stigma on social support-seeking behavior

Next, we ran a parallel mediation analysis with culture as the predictor variable, support-seeking behaviors as the outcome variable, and both filial piety and perceived parental stigma toward social support-seeking behaviors as mediators. As expected, Asian Americans were less likely to seek social support, $b = -.60$, SE = .14, $p < .001$, exhibited higher levels of filial piety ($b = .17$, SE = .06, $p < 0.001$), and in turn, stronger filial piety predicted higher levels of social support-seeking behaviors, $b = .90$, SE = .10, $p < .001$. There was a significant indirect effect of filial piety on the relationship between culture and social support-seeking behaviors, $ab = .16$, SD = .06, 95% CI [.04, .29]. Similarly, Asian Americans exhibited higher levels of perceived parental stigma on social support-seeking behaviors $b = .18$, SE = .07, $p < .001$. In turn, perceived parental stigma was negatively associated with social support-seeking behaviors, $b = -.43$, SE = .07, $p < .001$. There was a significant indirect effect of perceived parental stigma on the relationship between culture and social support-seeking behaviors, $ab = -.11$, SD = .04, 95% CI [-.20, -.03]. However, after accounting for all mediators, the direct effects between culture and social support-seeking behaviors increased, $b = -.65$, $SE = .12$, $p <.001$, suggesting an indirect paradoxical impact of both mediators within this model, $ab = .05$, SD = .08, 95%CI [-.10, .20]. See Figure 3 for a summary of these results.

Discussion

Our results were consistent with prior research studies (e.g., Kim et al., 2008; Dong & Xu, 2016; Sun et al., 2019). We found support for our first hypothesis: Asian Americans were less likely to engage in social support-seeking behaviors, had higher levels of filial piety, and exhibited greater perceived parental stigma toward help-seeking behaviors and mental health compared to European Americans. We found partial support for our second hypothesis, where filial piety was a mediator that affected social support-seeking behaviors and that participants with higher filial piety would be less likely to seek social support. Mediation analyses revealed that filial piety does have a significant indirect effect on the relationship between culture and social support-seeking behaviors. However, contrary to our expectations, our results showed that filial piety has a positive effect instead: participants with higher levels of filial piety were more likely to seek social support. The indirect effect suggested that filial piety may act as a

psychological buffer for social support-seeking behaviors when challenges arise, such that higher levels of filial piety reduced the negative strength between culture and social support-seeking behaviors. In other words, Asian Americans who had higher levels of filial piety were more likely to seek social support compared to Asian Americans with lower levels of filial piety.

There are several explanations for the paradoxical relationship between culture, filial piety, and social support-seeking behaviors. It is possible that participants with higher filial piety have a more intimate relationship with their parents built on mutual trust, understanding, and respect, which led them to be more likely to be vulnerable and rely on their parents in times of need. Another factor could be that those with high levels of filial piety may be more sensitive to others' desires since they were constantly attuned to their parents' wishes, which in turn, led to cultivating better interpersonal relationships and more easily obtaining social support if they sought it (Ma et al., 2022, Chen et al., 2016). In addition, there is evidence demonstrating the positive effects of filial piety. Existing studies on filial piety suggest that filial piety can act as a protective factor against depression (Ng et al., 2011, Pan et al., 2016) and suicide risk in women (Lam et al., 2022), and improves mental health among older Chinese immigrants (Cheung et al., 2022). Lastly, another possible explanation is that strong filial piety often indicates alignment with one's parents and their values, which increases children's likelihood of taking on their parents' advice and views. For example, one of the adapted items in the present study from the Brief COPE Scale (Carver, 1989) asked participants how likely they would be to ask their parents about what they would do in that situation. If participants trusted their parents' perspectives and were aligned with their values, they would be more likely to ask for support and take their parent's advice. Nevertheless, our findings alluded to the positive benefits of filial piety among Asian Americans and highlighted the need to evaluate child-parent relationships in the context of social support-seeking behavior. We also found support for our final hypothesis, where mediation analyses showed that the perception of parental stigma had a significant effect as a mediator between culture and social support-seeking behaviors. In our study, participants with high levels of perceived parental stigma were less likely to seek social support. These results were consistent with previous studies that have shown the negative effects of mental health stigma on social support-seeking behavior. Our findings supported the existing evidence that demonstrated how harmful and pervasive stigma can be, and how stigma imposes challenges for improving mental well-being by further discouraging people from seeking social support.

To summarize our findings, we found that Asian Americans were less likely to seek social support. Filial piety and perceived parental stigma are both significant explanations for the relationship between culture and social support-seeking behaviors. However, their effects are in opposite directions. Filial piety dampens the negative association between culture and social support-seeking behaviors. High filial piety encourages greater social support-seeking behaviors, whereas high perceived stigma further discourages people from seeking social support.

Limitations

Several limitations in our study could have affected these results. First, the present study was correlational. Therefore, there could have been other confounding variables that affected Asian

Americans' lower social support-seeking behaviors. One confounding variable is that participants could have faced communication barriers. Since mental health is heavily stigmatized in Asian cultures, there are many terms regarding mental health and emotions such as "anxiety disorder" or "depression" that do not exist or lack direct equivalents in Asian languages (Chu & Sue, 2011). Therefore, Asian parents may struggle to understand Western definitions of mental health, which leads to an additional barrier for those desiring support. In addition, a language barrier between first or second-generation participants who were raised in the U.S. and their parents could be another obstacle to sharing their vulnerabilities. One study found that children low in Chinese proficiency with parents high in Chinese proficiency were more likely to have poorer child adjustment (Chen et al., 2014). Therefore, it is possible that Asian American participants were hesitant to seek social support because they simply did not have the words to do so and were discouraged by the daunting additional task of overcoming the language barrier.

Another possible confounding variable is the existing gender norms among Asian communities, in which traditional cultural expectations of masculinity discourage men from expressing tender emotions, which signal weakness and vulnerability (Yeung et al., 2015). One study showed that gender was a significant predictor of mental health help-seeking behaviors, in that female students were more willing to seek mental health services compared to male students (Han & Pong, 2015). Therefore, it is possible that gender norms could have been a confounding variable as to why Asian participants in the present study were less likely to seek social support.

Another limitation of this study is that participants might not have had equal access to mental health providers. This study had participants from all over the U.S. at different campuses with varying mental health services. Since participants did not have equal access to providers, it is possible that some participants faced more obstacles than others in receiving mental health help. This includes financial costs and transportation barriers for mental health services.

Future directions

The present study employs a cross-sectional design. However, future studies could strengthen this design by adapting a longitudinal design to provide more reliable results. One way to execute this would be to follow the same set of participants throughout their college experience, such as measuring the number of times they seek social support every month. Therefore, results would be less swayed by typical fluctuations in mental and emotional states. Future studies could also incorporate or integrate a dyadic study that measures the participants' parents' views on mental health and support-seeking behaviors. It is possible that perceived levels of parental stigma did not reflect parents' true perspectives. This potential misunderstanding could have influenced the results and revealed the effects of pluralistic ignorance, so further investigating how parents truly view mental health and social support could be a potential future direction of research. Another direction for future studies would be to use additional subsets of the Brief COPE Scale to measure social support-seeking behaviors. The present study used the "planning" and "informational support" subscales, which are both under the umbrella of problem-focused coping. We did not examine the emotional aspect of social support-seeking behavior,

which could be measured using the “venting” and “use of emotional support” subscales. It would be beneficial to examine emotion-focused coping strategies, especially because filial piety is embedded within typically emotionally-charged relationships and how they function as support systems.

Conclusion

In this study, Asian Americans were less likely to seek social support, more likely to have higher filial piety, and more likely to perceive parental stigma. Results from this study demonstrated that filial piety and perceived parental stigma are both significant explanations for the relationship between culture and social support-seeking behaviors. However, they have opposite effects: high filial piety encourages greater social support-seeking behaviors, whereas high perceived stigma further discourages people from seeking social support. Although Asian Americans, in general, were less likely to seek social support, those with high filial piety were more likely to seek social support than those with low filial piety. Results from our study emphasize the importance of considering the role of parent-child relationships and parental views toward mental health when encouraging Asian Americans to seek social support and adjust their perception of stigmas. It also suggests that normalizing help-seeking behaviors and taking an active role in correcting these norms is crucial.

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Tables & Figures

Figure 1

Procedure for the Study

Figure 2

Cultural Differences in Social Support-Seeking Behavior

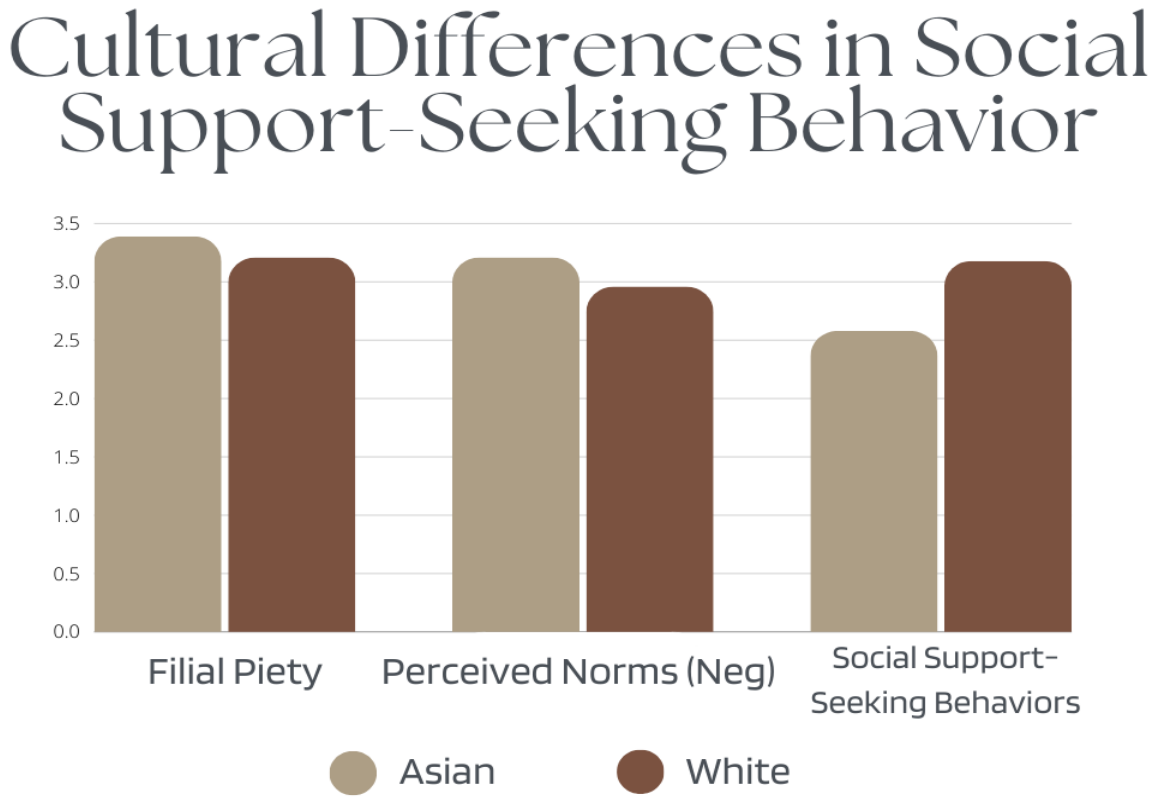

Figure 3

Mediation Model