COLUMBIA UNIVERSITY
Journal of Student Social Work
Spring 2003; Volume 1, Issue 1
Inaugural Issue
# Table of Contents

**Editorial Introduction**.................................................................Page 2  

**Editorial Board, Advisory Board**...............................................Page 4  

**The Forest and the Trees: Neighborhood-Based Clinical Social Work**  
*Erin Segal* ..................................................................................Page 5  

**Adult Korean Intercountry Adoptees: A Resource for Adoption Practice**  
*Hollie A. McGinnis* .....................................................................Page 8  

**The Utilization of Mental Health Services by South Asian Immigrant Communities in the United States**  
*Meher Singh* ................................................................................Page 15  

**A Case of Trickle-Down Feminism**  
*Kari Kendall Cameron* .................................................................Page 21  

**Social Workers of the World Unite**  
*Lesley Buck* ................................................................................Page 25
Welcome to the inaugural issue of the *Columbia University Journal of Student Social Work*! In October 2002 a group of graduate students at the Columbia University School of Social Work gathered to create an academic journal that would utilize students’ perspectives to further dialogue in the field. It was our hope that this journal would encourage students to contribute to the body of knowledge, skills, and values that shape the profession, not only as students but throughout their careers.

There has been much ado in social work literature about the evolution of the profession toward empirically-based practice (see, for example, the Centennial Issue of *Social Work*, 1998). In the wake of this movement, many fear a loss of so-called practice wisdom, a sensibility that embraces the experiences of individual social workers developed in the field. Clearly both scientific research and individual human experience have much to offer the profession, yet the latter may often be left out as practitioners feel discouraged from participating in what they perceive to be a complex, drawn-out process of submitting work for publication.

In creating the *Columbia University Journal of Student Social Work*, we are seeking to remove barriers to publication in the hopes of demystifying the publishing process. A recent study of social work practitioners who had published articles in professional journals (Staudt, Dulmus, & Bennet, 2003) examined practitioners’ perceptions of barriers to publication. In addition to limitations on time and a lack of technical skill, respondents referenced an “aura of mystic [sic]” around publication (p. 78). If their articles were accepted for publication once, however, practitioners were likely to pursue publication again.

As founders of the *Journal*, we are still new to the profession, yet feel strongly that both we and our fellow students have something valuable to offer social work scholarship. We view contributions to the knowledge base of the field not merely as peripheral activities but as a central obligation to the profession as defined in the Code of Ethics of the National Association of Social Workers (NASW, 1999).

The faculty and administration of the Columbia University School of Social Work have provided strong support for this endeavor. Still, Columbia and other schools must continue to promote, on both a personal and institutional level, publication by future practitioners. Incorporating publication into the education of students will involve a reconceptualization by faculty members of students’ capabilities to contribute to the scholarship of the field. The need to educate students about publication protocol and procedures can be integrated more fully into coursework and assignments. For example, while there is a need to protect clients and keep researchers...
accountable for their work, it is important not to limit students from publishing with a prohibitive institutional review board process that demands a time frame and expertise that is beyond the scope of most research completed for a course. This journal is our contribution to the integration of student writing for publication into the program of study at schools of social work.

As Ruckdeschel, Earnshaw, and Firrek (1994) emphasize, the original meaning of “evaluation” is “to find value.” It is in light of this principle of research that we are embarking on a unique sort of action research project wherein student submittants are both the subjects of inquiry and its authors. It is our hope that both the content of the articles and the experiment that is the Journal itself will highlight the value of student voices by exposing the profession to our diverse talents and insights.

Schools of social work are the only institutionalized settings where researchers, policy advocates, and current and future clinicians can interact. Social workers across the spectrum of the profession will benefit from an increased dialogue, and this journal is an appropriate place for such discussions to begin and flourish.

We hope you enjoy the inaugural issue of the Columbia University Journal of Student Social Work.

2003 Editorial Board
Columbia University Journal of Student Social Work

References
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Even social work—despite our unique brand of systemic, contextual thinking—falls prey to the American tendency to polarize ideas, to go to extremes. During my first year of social work graduate school, various debates (concrete services versus individual treatment, ecosystems versus medical model, community organizing versus psychotherapy) shaped my belief that our profession has strayed from its original commitment to social justice, vulnerable populations, and a person-in-environment focus. Yet I continued to feel certain that, while I applauded community organizing and case-to-cause advocacy, my talents and interests ultimately lay in casework. That was when the cognitive dissonance set in: is it possible to specialize in clinical social work without abandoning our profession’s mission and values?

I began to see that extreme positions preclude possibilities for social work practice that draws upon sophisticated clinical insights and interventions yet remains contextual and empowerment-based. For example, it is hardly useful to demonize the medical model when basic knowledge of psychopathology often sheds light on human behavior. On the other hand, it seems counter-productive to suggest that clients faced with multiple, interacting problems are best served by manualized interventions designed for clinical populations. Another polarity: by renouncing casework altogether, proponents of community organizing fail to recognize that “it might be necessary to provide skilled, patient interpersonal help to some families on a long-term basis” (Halpern, 1999, p. 244). Yet when clinical social workers insist that advocacy and concrete service provision are beyond the scope of therapy, they rarely meet their clients’ needs.

During my second year of social work school, I was lucky enough to encounter a community-based family support center that offers a “third
space” between polarities (Kemp, 2003). Like the early settlement houses, the Center for Family Life provides comprehensive, non-stigmatizing, neighborhood-based services: after-school arts programs for children, youth development, summer camp, parent education, an employment center, an advocacy clinic, and a program that meets families’ emergency needs for food, clothing, and financial support. By organizing these components around a core family counseling program, the Center also draws on the best of contemporary professional clinical social work, thus attaining a “unique combination of community rootedness and clinical sophistication” (Hess, McGowan & Botsko, 2003).

Instead of placing “bio,” “psycho,” and “social” aspects of clients’ experiences side by side, social workers at the Center for Family Life seek integration, offering students a rich—and rare—representation of systems-based practice that receives so much lip service in social work education. Not surprisingly, the clinical program’s focus is not the individual, but the family. By avoiding labels and prescriptive treatments, practitioners acknowledge the uniqueness of each family member and minimize social distance between themselves and families. Overwhelmingly, social workers believe that their role is to support and enhance family functioning throughout all phases of development. In refusing to differentiate between therapy and case management, they honor the inextricable connections between environment and psychology and recognize that therapeutic work (for example, modeling or creating a holding environment) often occurs beyond the pale of psychotherapy. Caseworkers keep abreast of social justice issues and participate in advocacy efforts undertaken by the agency. Unlike therapists in traditional mental health settings, social workers at the Center for Family Life count on in-house resources—therapeutic groups, after-school programs, an emergency food program, and housing subsidies—as they develop individualized treatment plans.

This is not to say that counseling at the Center for Family Life survives on service-brokering alone. Rather, it remains grounded in professional clinical social work values and methods. All caseworkers hold Masters’ degrees in social work. Journal articles and descriptions of continuing education circulate freely at casework meetings. Staff members are articulate and thoughtful as they discuss their work in terms of object relations, countertransference, the therapeutic alliance, group work theory, cross-cultural issues, and so on. Yet interventions are not informed by an over-reliance on a single theoretical perspective; instead, in the spirit of general systems theory, the therapeutic process is flexible and open to creativity (Janchill, 1969). Such flexibility—along with the horizontal nature of the issues at stake—hardly seems to lend itself to traditional methods of program evalu-
ation, which rely on neat, pre-determined outcomes. Nevertheless, a recent
evaluation suggests that children and families who take part in the Center’s
programs do indeed achieve positive changes (Hess, McGowan & Botsko,
2003)—a testament to the effectiveness of the Center’s staff.

I emphasize the accomplishments of Center for Family Life’s casework
staff to stress that these frontline workers are creative, thoughtful, competent
and kind. To me, it’s quite clear that clinical social work’s identity crisis—
call it “psychiatry envy” if you will—is part of a search for legitimacy in the
eyes of a society that undervalues our profession. Of course social workers
choose private practice, policy analysis, and program development over
community-based social services—note the differential in salary and presti-
tige! Yet unfortunately, our profession’s response to its identity crisis is a
retreat to polarities: at one extreme, repudiating the notion that social work
should incorporate elements of psychotherapy; at the other, relying all too
heavily on managed care’s short-term therapeutic prescriptions for alleviat-
ing human suffering. Instead of going to extremes, why not revitalize our
profession and support our frontline workers by sharing more examples,
more stories, and more dialogue about possibilities for operationalizing sys-
tems approaches to clinical social work? The Center for Family Life’s flex-
ible, comprehensive model of casework offers a marvelous point of depar-
ture.

References
Columbia University Press.
Hess, P., McGowan, B., & Botsko, M. (2003). Nurturing the one,
supporting the many: The Center for Family Life in Sunset Park,
Nurturing the one, supporting the many: The Center for Family
Life in Sunset Park, Brooklyn. New York: Columbia University
Press.

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ADULT KOREAN INTERCOUNTRY ADOPTEES: A RESOURCE FOR ADOPTION PRACTICE

Hollee A. McGinnis

The author shares a personal narrative of her efforts to establish an adult intercountry adoptee organization in New York City. These efforts coalesced with a national movement of adult intercountry adopted Koreans culminating in the Gathering of the First Generation of Adult Korean Adoptees, held in Washington, D.C. in 1999, and the Second Gathering in Oslo, Norway in 2001. The contribution of adult Korean adoptees to the field of intercountry and transracial adoption is discussed, with suggestions for how adult adopted persons can be utilized to enhance adoption prac-

Introduction

On January 13, 1903, the first Korean immigrants to the United States arrived in Honolulu, Hawaii, on the S.S. Gaelic. In commemoration, President George W. Bush issued a proclamation declaring January 13, 2003 as the “Centennial of Korean Immigration to the United States.” Throughout the year, programs, ceremonies, and activities honoring Korean immigrants and their descendants have been scheduled to celebrate the contributions of Korean-Americans over the past one-hundred years.

There was a time when I would not have identified with the millions of Koreans who risked everything for the hope of a new life in a new land. Like them, I was born in Korea and came to the United States with the hope of a better life. But unlike them, I did not travel with family or knowledge of my blood roots nor did I have to learn a new culture and language all on my own. My arrival to the United States at the age of three was eagerly awaited; I had become an American through adoption.

Trends in the Field of Intercountry Adoption

It is estimated that between 1955 and 1999, a total of 143,144 Korean children were placed for overseas adoptions worldwide (Holt Korea, 2003). Of these children, an estimated 100,008 were adopted by American families (U.S. State Department, 2003; Gathering, 1999). The first wave of Korean-born children adopted in the aftermath of the Korean war were pioneers, paving the way for the thousands of orphaned and abandoned children who are now adopted through intercountry adoption.

Currently, the practice of intercountry adoption involves the transfer of
an estimated 20,000 to 30,000 children from over 50 countries each year, with the United States receiving the largest number of the world’s children (Masson, 2001; Lovelock, 2000). According to the U.S. State Department, the total number of foreign-born children adopted by U.S. citizens has increased by nearly 40 percent, from 8,102 children in 1989, to an estimated 20,099 children in 2002 (Table 1). Since 1995, the top four countries issuing visas for children migrating to the U.S. for adoption were China (Mainland), Russia, South Korea, and Guatemala (U.S. State Department, 2003).

Table 1. World Total of Intercountry Adoptions to the U.S. (1989 to 2002)

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of children</th>
</tr>
</thead>
<tbody>
<tr>
<td>1989</td>
<td>9,102</td>
</tr>
<tr>
<td>1990</td>
<td>8,481</td>
</tr>
<tr>
<td>1991</td>
<td>7,093</td>
</tr>
<tr>
<td>1992</td>
<td>6,472</td>
</tr>
<tr>
<td>1993</td>
<td>8,333</td>
</tr>
<tr>
<td>1994</td>
<td>10,641</td>
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<tr>
<td>1995</td>
<td>12,743</td>
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<tr>
<td>1996</td>
<td>15,774</td>
</tr>
<tr>
<td>1997</td>
<td>17,718</td>
</tr>
<tr>
<td>1998</td>
<td>19,237</td>
</tr>
<tr>
<td>1999</td>
<td>20,099</td>
</tr>
</tbody>
</table>

Source: U.S. State Department: http://travel.state.gov/orphan_numbers.html


Making Connections

Although I always knew I was born in Korea and adopted, I was not always conscious of what either meant. Growing up, being Korean described my physical appearance, explained where I came from, and made me unique from the rest of my family. As a teenager, I was made more con-
conscious of looking Asian because people assumed, based on my physical appearance, that I spoke Korean or knew Korean culture. However, because I was raised by a non-Korean family I did not think of myself as Korean. I was a McGinnis. I felt that because of my appearance, people assumed I had knowledge of Korean culture. I felt like an imposter: I only knew American culture.

Despite how American I felt, my family could not tell me where I got my eyes, my artistic talents, or the shape of my face. Their love could not shield me from the questions or the puzzled faces of those who did not understand how a White couple could have an Asian daughter. Living in a society that places a primacy on biology, an adopted person cannot help but feel excluded and cheated for the lack of knowledge of his or her genetic roots. Lacking such knowledge, adopted people must find other kinds of connections.

My studies as an undergraduate connected me to the history of inter-country adoptions in the United States, which first began after World War II in response to the humanitarian needs and an altruistic response to displaced war orphans (Masson, 2001; Lovelock, 2000; Riley, 1997). Similar sentiments initially led to the adoption of foreign children after the Korean and Vietnam Wars (Masson; Lovelock). Latin America emerged as a significant relinquishing region for intercountry adoptions by the mid 1970s, followed by the former Soviet Union and China by the mid 1990s (U.S. State Department, 2003).

Also-Known-As

From my studies, I realized I was not alone. As I sought to reconcile my self-identity based on my adoption experience with the identity imposed by the racial stereotypes of my society, a conflict arose. I was only given two choices: Korean or American. The reality for me was that I was both. My Korean mother gave birth to my body, but my adoptive mother and father gave birth to my soul. The East gave me life, but the West taught me how to live it. I realized that as an individual I had little power to shift misconceptions regarding adoption, yet as a community, international adoptees could do much to shift perceptions of adoption and racial stereotypes.

In forming Also-Known-As, an organization for adult intercountry adoptees, in 1996, I wanted to gather fellow adult adoptees in order to celebrate our unique experiences and serve the younger generation of intercountry adoptees and adoptive families. Gathering as a community we could assert our unique culture as transracial and international adopted people and create a space in which we could embrace our unique identities. The name of the organization is a reflection of our self-identities and human experiences that are not apparent on the surface. I am Hollee McGinnis, also-known-as Lee Hwa Yong. In establishing the organization, I found a com-
munity outside of my adoptive family that shared a desire to make a difference with the unique lives we had been given.

Although we believed intercountry adoptees shared a common experience and sought to include adoptees from all countries, our first effort focused on connecting with Korean adoptees, who constitute the largest number of intercountry adoptees in the U.S. Our efforts coincided with previous efforts by adult Korean adoptees to establish organizations in Minnesota and Los Angeles. However, our organization was unique in that its primary goal was to establish post-adoption services informed by the experiences of adult adoptees. In addition, we were among the first organizations to utilize the Internet to connect with adopted people both nationally and internationally.

The Gathering of the First Generation of Adult Korean Adoptees

The Gathering of the First Generation of Adult Korean Adoptees, a three day conference held in September 1999 in Washington, D.C., was a momentous culmination in the development of the adult Korean adoptee community. This conference, sponsored by Holt International Children’s Services, Also-Known-As, the Korea Society, and The Evan B. Donaldson Adoption Institute, brought together nearly 400 adults adopted from Korea between 1955 and 1985, representing over 30 U.S. states and several European countries (Gathering, 1999).

This conference was unique in its purpose to provide an opportunity for adoptees to share their experiences, bringing together the past, present, and future of Korean intercountry adoptions. To gain greater insight into the experiences of Korean adoptees, as well as to plan the conference itself, The Evan B. Donaldson Adoption Institute, in conjunction with Holt International Children’s Services, surveyed the participants at the Gathering (Gathering, 1999). Participants discussed, in small groups based on birth years, topics such as reasons for participating in the conference, memories of Korea and arrival at their new home, impact of early experiences on adoptees’ lives, discrimination, identity, dating and relationships, relationship to Korea, search and reunion, and perceptions of adoption. The conference concluded in the early dawn at the Korean War Memorial and was a testament to the shared suffering of a generation of Koreans who survived a war, were transplanted from their birth culture, and built new lives on foreign soil.

Since the Gathering, Korean adult adoptees have continued to meet at “mini-gatherings” throughout the country, new organizations of adult Korean adoptees have sprung up, and a plethora of websites now connect Korean adoptees throughout the world. A second Gathering, focused on bringing together Korean adoptees from Europe, occurred in Oslo, Norway.

**Future Directions**

Despite the increase in the number of intercountry adoptions, research in this field is limited. However, a growing body of work has begun to focus on factors influencing ethnic identity formation and development in intercountry transracial adoptees (Feigelman & Silverman, 1984; Trolley, Hansen & Wallin, 1995; Huh & Reid, 2000; Carstens & Juliá, 2000; Vonk, 2001). These studies of ethnic identity formation have consistently relied on adoptive parents to answer questions regarding the racial awareness and identity formation of their transracially adopted children. Although parents can provide accurate information about much of their children's conduct, it is difficult for them to provide data on all of their children's activities and feelings (Feigelman, 2000).

In addition, current studies on ethnic awareness have relied on the experiences of young adoptees rather than adoptees who are in adolescence or early adulthood—the age at which racial identification is most salient and recognition of one's racial and ethnic identity becomes most important (Feigelman, 2000; Hug & Reid, 2000). Thus, the importance of race may be underrepresented in these studies because of the relationship between racial identification and development. Although discussion of the results of the Gathering survey is beyond the scope of this paper, it is clear that the inclusion of adult adoptees’ experiences and reflections of their identities would be invaluable to future studies on ethnic identity development over the lifespan.

Korean adult adoptees have already influenced the development of intercountry adoption practice. For example, Also-Known-As has a Speaker’s Bureau where adult adoptees share their experiences of being adopted. While we realize that the experiences of the current generation of intercountry adoptees may be different from our own, we recognize that we have insights into growing up in transracial families that are valuable for prospective adoptive families.

Research supports that the adoptive family's sociocultural milieu, including minority role models, is a significant factor affecting ethnic identification of transracial adoptees (Zuñiga, 1991; Carstens & Juliá, 2000). Thus, we offer a mentorship program for intercountry adopted youth, providing minority role models who are also adopted. Adult adoptees have been influential in establishing culture camps and culture days for intercountry adoptive families, reflecting their own desires to have had opportunities to connect with their birth cultures growing up.

Today, Korean adoptees are traveling to Korea in unprecedented waves, seeking to experience their birth culture. By sharing their experiences in...
film, memoir, and the arts, Korean adoptees are redefining what it means to be an adopted person. Adult Korean adoptees are leading experts into unexpected territories. Many Korean adoptees are actively searching for—and finding—birth parents, a prospect that many adoption professionals once assumed to be impossible.

Conclusion

Agencies need to be responsive to the life-long needs of Korean Intercountry Adoptees and can do so by partnering with adult adoptee organizations. The formation of these organizations is a response to the unmet needs of adult adoptees. Practitioners in the field of adoption often think their work is complete when the child is placed in the hands of a new family; however, this is just the beginning of a life-long journey of self-discovery.

References
U.S. State Department (2003). Immigrant visas issued to orphans coming to the US. Retrieved March 6, 2003 from
http://travel.state.gov/orphan_numbers.html

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The Utilization of Mental Health Services by South-Asian Immigrant Communities in the United States

Meher Singh

South Asians are one of the fastest growing immigrant groups in the United States. This paper identifies possible reasons why South Asians in the U. S. underutilize mental health services compared to other immigrant communities, and offers suggestions regarding how mental health services can be tailored to better meet the needs of this particular ethnic group.

Introduction

South Asians—people from India, Pakistan, Bangladesh, Nepal, and Sri Lanka—are one of the fastest growing immigrant groups in the United States. According to the Immigration and Naturalization Services (2001) the second largest number of legal immigrants to the U.S. came from India, totaling 70,290 and constituting 6.6% of the total U.S. population. This paper examines why South-Asian immigrant communities, as compared to other ethnic groups, underutilize mental health and social services. It is important to note that this paper looks at general characteristics of traditional South-Asian families; the information presented cannot be applied to all South Asians. While it is important to avoid homogenizing South Asians, it is arguable that traditional families share a common set of values, beliefs, and practices.

Due to the apparent lack of research on South Asians and mental health utilization, one can look to the research on Asian immigrant populations—which arguably hold values similar to those of South Asians—to gain a sense of how much this group utilizes services. One study looking at the utilization of outpatient mental health treatment by individuals who identify as Asian American (Futa, Hsu & Hansen, 2001) was conducted over a five-year period in the Los Angeles area. This area has a significant Asian population, yet of the 230,441 clients utilizing outpatient mental health treatment, 3.1% were Asian American, whereas European Americans constituted 43%. Asians are not only underrepresented in their utilization of mental health services, but also report being, in general, less satisfied with their therapists and reportedly terminate therapy after an average of only 2.35 therapy sessions.
Importance of Family and Family Pride

Family is arguably the single most important characteristic of South-Asian culture. Traditional South-Asian families are composed of nuclear and extended families, as well as the community in which they reside. The relationships between these three systems are extremely close-knit; each is interrelated and intertwined with the other.

A related characteristic is the value of family pride. When contemplating personal decisions, individuals are expected to make choices that will benefit—and reflect positively on—the larger family and community. Engaging in activities outside of what is culturally or socially appropriate, particularly if these behaviors negatively impact the family, is discouraged. In their discussion of child sexual abuse, Futa, Hsu, and Hansen (2001) illustrate this value, stating that the issue of abuse often remains hidden because of fear that it will shed negative light on the family.

The importance of family in South-Asian culture can influence mental health service utilization both positively and negatively. It is undeniable that strong family ties provide individuals with tremendous support, particularly in a new country. However, the importance placed on familial relationships and family pride may restrict individual choices and hinder the making of independent life decisions. Through my work with South-Asian teens, I have discovered that these youth are highly influenced by their parents’ expectations regarding career choices, favoring careers with high salaries and status.

Coping with Stress

South Asians handle life stressors differently than other ethnic groups. If an individual is faced with a problem, he or she is expected to employ the assistance of family or to cope with it on his or her own. An individual who seeks assistance outside of the family would likely be perceived as having a weak character and going against the value of family pride. In the eyes of a traditional South-Asian family, speaking to therapists about individual or family problems would bring unwanted negative attention to the family (Futa, Hsu & Hansen, 2001).

A primary reason South Asians do not seek assistance—particularly outside of the family unit—is because this is not a socially-accepted nor socially-respected means of solving one’s problems. Ow and Katz (1999) state that “secret keeping is a strategy at the other end of the disclosure continuum in the management of distressful information that may be potentially disruptive to the group” (p. 2). Although this article focused on Chinese families, the notion of protecting the family cuts across most Asian cultures.
Stigma of Mental Illness

The stigmatization of mental illness in South-Asian culture directly impacts utilization of mental health services. Because families are so concerned with hiding this problem from the community, individuals with mental illness often remain untreated. “Seeking help for psychiatric problems usually occurs only in severe cases and may start with the pursuit of indigenous treatment modalities in the community” (Ahmed & Lemkau, 2000, p. 95). Some families may first attempt to use herbal remedies and prayers prior to seeking professional help. The final decision regarding treatment, however, would most likely be dependent on the family’s religious background.

Non-Verbal Expression & Gender Roles

Interpersonal characteristics, like self-expression, impact South-Asian use of mental health services. “Although direct eye contact is highly valued in American culture as a sign of honesty and engagement, South Asians usually avoid eye contact in relationships where they feel deference and respect” (Ahmed & Lemkau, 2000, p 91). In addition, South Asians tend to swing their heads horizontally instead of nodding to mean “yes.” A practitioner’s familiarity with culturally-based communication patterns can facilitate effective work with South-Asian clients, breaking down barriers and enhancing the client’s level of comfort.

In this author’s experience, South Asians are more likely to express affection through actions than through words. For example, a father may show love for his children by providing them with a college education rather than by saying “I love you.” This lack of verbal expression makes it difficult for South Asians seeking mental health treatment to adjust to traditional modes of psychotherapy, which focus on the client’s verbal expressions and feelings.

South-Asian families have rigidly defined gender roles, with males at the top of the hierarchy in all aspects of life—familial, social, and political. Understanding this patriarchal hierarchy is relevant to mental health treatment because providers may find that South Asians prefer to receive treatment from male clinicians. Because traditional South-Asian culture views females as subservient, female clinicians may not be given the same level of respect as male clinicians.

Acculturation and Adaptation

The U.S. is becoming increasingly diverse, and immigrating to this country can be overwhelming. To cope with this stressful transition, some South-Asian immigrants choose to live in neighborhoods that are predominantly South-Asian because they provide a “safety net.” Families that have lived
in the U. S. for a longer time can provide support and information to make the transition easier.

Acculturation has an enormous impact on South-Asian immigrants. Some immigrant families come to the U. S. with the aim of making money. Many, however, soon find themselves in low-wage, unskilled jobs, struggling to make ends meet. This causes a huge strain on an individual’s health as well as on the family unit.

Children of immigrants face unique issues, as many find themselves caught between the world of their parents and that of their peers, resulting in serious intergenerational conflict. Immigrant children often assimilate more quickly than their parents because they are exposed to American culture on a day-to-day basis in school. In order to assimilate, some children may begin adopting similar ways of dressing and behavior as their non-South-Asian peers.

The stresses associated with immigration and assimilation point to some reasons why South-Asian immigrants might benefit from mental health treatment. Ahmed and Lemkau (2000) emphasize the seriousness of this issue, stating that “this culture shock is a form of transition shock, with symptoms ranging from anxiety, depression, and helplessness to full-blown physiological stress reactions, paranoia, and psychosis” (p. 92).

Utilizing the Family in Treatment

Researchers have suggested that mental health practitioners utilize a family-based approach when working with South Asians as a more appropriate method of dealing with the problems of this ethnic group. Hong (1988) suggests that having ongoing interaction with one clinician who can be looked upon as a resource to consult when a family faces difficulties has many benefits. This approach requires no actual termination of treatment; the practitioner would be available to the family indefinitely and on an as-needed basis, becoming increasingly familiar with all members of the family and gaining their trust. Furthermore, the flexibility of this treatment may not be as threatening to South-Asian families. The lack of formality in this model—the fact that there is no beginning or end to treatment—enables South-Asian families to feel more comfortable seeking help and less like they are being “treated” for an illness.

One downfall of this approach, however, is that some family members may not feel comfortable seeking the assistance of the clinician if the issue involves another family member. This could conceivably happen during times of intergenerational conflict. It would be imperative for the practitioner using this approach to discuss rules of confidentiality with the family so that individual family members feel comfortable seeking assistance. Therapists would also have to be careful not to sympathize with one family.
member over another. As Hong (1988) states, “the therapist might become overly identified with or sympathetic to a particular client and lose objectivity when other family members are seen” (p. 8).

Community-Based Services
Using a “grassroots” approach to encourage utilization of mental health services is one effective way of reaching the South-Asian community. If planned well, outreach can reduce stigma against mental illness and mental health treatment. For example, outreach should be spearheaded by someone respected in the community, such as a male, South-Asian doctor. A non-threatening method of outreach could provide the community with some kind of educational services; a physician, for instance, could provide a lecture on how the strain of acculturation can lead to depression. Normalizing stressful problems and acknowledging that many people experience similar difficulties may reduce an individual’s hesitation to seek services.

Another way to increase mental health utilization is to have community-based clinics staffed with culturally competent, bilingual providers. For some, it may feel less intimidating and less “institutional” to visit a clinic in one’s neighborhood rather than going into a large hospital.

Conclusion
The stress South Asians face as a result of coming to the U.S. clearly points to a need for mental health services. However, there are a myriad of reasons why South Asians do not utilize services as much as other ethnic groups. Mental health practitioners can increase South-Asian utilization of services by tailoring treatment to the needs of this particular group. This could mean trying new modes of therapy or starting a community-based practice. While these ideas are feasible, community outreach is arguably the most important method of increasing utilization of services. Providers need to go into the community, gain the trust of the people they are trying to serve, and slowly begin reducing stigma around mental health and mental illness.

References


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This spring, the most skilled golfers in the world met at a prestigious golf club in Georgia to play in the Masters Golf Tournament. The club, Augusta National, does not allow women to be members. Recently, the National Council of Women’s Organizations (NCWO) led a public relations campaign to shame the television network that broadcasted the event and the event’s numerous corporate sponsors into pressuring the private club to accept women as members. The NCWO (2003) has declared that these sponsors “sanction sex discrimination” and that “the Club has a moral obligation to open its doors to women.”

This attempt by the NCWO to break down a gender barrier only reinforces a socio-economic one. There is a waiting list to join Augusta National Golf Club and an undisclosed initiation fee for new members. The NCWO regards Augusta National’s policy as a symbol of how women are still denied the opportunity to participate fully in society, and of how men, namely corporate leaders and policy makers, deem this acceptable.

I take the NCWO’s initiative as a symbol of the skewed priorities of the feminist movement. This campaign embraces “trickle-down feminism,” the idea that a benefit given to the elite will trickle down the socioeconomic chute to benefit all women. Author Anna Quindlen (2002) uses the term to credit the far-reaching positive effects of feminism in this same manner. I, however, see trickle-down feminism as ineffective. The expectation that feminism will trickle down to benefit all women is unrealistic, and excludes those of lower socioeconomic status. It belies that feminism is not integrated in the lives of most women and must flow downward from the privileged top. This is precisely the problem I have with the NCWO’s campaign against Augusta National; its highbrow criticism draws energy and attention from the more appropriate goal of working to earn equality for all members of our
Social workers can appreciate the rich heritage of the feminist movement and benefit from its concrete gains. However, the natural evolution of ideas suggests that we become much more than feminists. Demanding more social, personal, and political freedom for women to make their own choices is still relevant and necessary and has been a hallmark of feminists’ aims. Yet, only one-quarter of women identify themselves as feminists (Hymowitz, 2002). Perhaps a new designation is necessary: one that is inclusive and captures the essence of the quest for fair opportunities and equitable choices for both sexes, across socioeconomic status. Those who acknowledge and respect the importance of equality in our society, as well as support policy initiatives to strengthen it, may call themselves “equalists.” The call for equalism as an alternative to feminism is beginning to gain momentum in popular culture as a means of clarifying the often contradictory and confusing connotations of the term “feminist” (Minx, 1999). For those men and women disillusioned by the association of feminism with the practice of trickle-down feminism, the concept of equalism could serve as a unifying remedy.

The NCWO’s agenda includes many legislative initiatives that aim to improve the quality of life for millions of Americans; however, the attention showered on Augusta’s policy has defined the purpose and mission of NCWO for the public at large. It is striking how much media attention the NCWO’s campaign has received and how many of the organization’s resources have been put into it. In business, wise investments generate capital and poor investments set a company back. This is also true with political capital. The NCWO has squandered resources that could be used to advance the rights of members of our society. Equalism, rather than the elitist approach of trickle-down feminism, is more in line with a utilitarian approach to facing problems that keep socioeconomic segments of our society separate. Attacking a prestigious golf club’s membership policy ultimately benefits only a handful of wealthy women.

Equalists must protect the underrepresented and underserved. Social change drawn from the spirit of equalism reflects an inherent respect for men and women in all segments of society, a level of respect that is already a part of our social work heritage. Equalist social workers know the power of labels and language. They resist labeling problems as “women’s” or “men’s.” An equalist social worker acknowledges the common etiology of a problem, draws solutions from men and women, and does not try to address social problems affecting both genders by only looking at half of the equation.

Mary Wollstonecraft (1792), the 18th century feminist philosopher, included in her book, A Vindication of the Rights of Woman, her opinion of

Columbia University Journal of Student Social Work  Volume 1, Number 1  22
national education: “It is not for the benefit of society that a few brilliant men should be brought forward at the expense of the multitude” (p. 168). Her view that educational rights should not be limited to a few also applies to the civic and social rights we wish for women to enjoy. Our clients will not realize the benefit of a female millionaire playing golf at a private club, yet we are spending precious political capital on this campaign. Our future is not at a golf course for the wealthy. In fact I, and many women, want no part of the effort. It simply has no relevance in the lives of most women.

In addition to the practice of trickle-down feminism, the pervasive notion of “women’s issues” undercuts the commonality we share as humans. We are discounting our inter-gender relationships and reinforcing a segregated world. By labeling such things as childcare, reproductive health, and welfare as “women’s issues,” we are severing men’s vested interest in these issues and, in effect, absolving men of their roles and responsibilities. Social workers know the dynamics and interconnections of male and female members of the family. We see the family in its entire ecosystem, and have a duty to present the integrated nature of problems affecting families we serve. A grieving father, brother, or son facing the loss of his mother, sister, or daughter to breast cancer would not consider it only a “woman’s issue.” Men and women are in this society together, and the struggles of one will be felt by the other.

Trickle-down feminism should be replaced by an agenda that carries the traditions of the trail-blazing feminists who contributed much to our society and touched people of all socio-economic levels. Another classic example of trickle-down feminism is the movement to ratify the Equal Rights Amendment. The agenda should instead include a long-run lobbying effort to see the confirmation of Supreme Court Justices who will rightfully interpret “all persons” as written in the 14th Amendment of our Constitution.

According to Simon (1994), “Social workers’ empowerment is, in part, contingent upon recognition by the public and its officials of the contributions being made to the social whole by members of the profession” (p. 192). As social workers, we are a crucial part of an informed debate, working and witnessing the dynamics of individuals and families in hospitals, public health clinics, foster care agencies, and countless other critical social service organizations. Our profession has the knowledge and experience to contribute to social policy instead of once again being sidelined as others dictate the direction of key policies affecting our clients. Trickle-down feminism will not perpetuate the changes necessary to advance all members in our society; moreover, it disregards those who are on the front lines of discrimination. Social workers in all capacities are critical to the promotion of equalism.

Allowing women membership in the Augusta National Golf Club will be

Cameron / A Case of Trickle-Down Feminism

23
an easy way out of responsibility for the influential men in the club. They will have offered this symbolic accommodation while continuing the clubby, restrictive culture that permeates too many companies, public agencies, and organizations. They will succeed in placating a few vocal feminists with an empty gesture void of any meaningful social change. Feminists would be no less complicit in this sham. Real social change cannot be sold for a membership card at a millionaires club.

References

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Social Workers of the World Unite

Lesley Buck

Social workers begin their professional careers in graduate school. In preparation, students need to educate themselves with regard to relevant social and political issues. The NASW Code of Ethics stresses the profession’s ethical obligation to actively work on behalf of the goals of social justice and social change. Graduate social work programs fall short of preparing students for the progressive role the profession requires. Social workers are uniquely positioned to converge various fields relevant to social change. Furthermore, social work is a political activity, as it either serves the status quo or the concerns of client populations. Students are required to reconcile the ethics of the profession and their graduate training through engaging in political and social action.

A Call To Action

Social work students are the future of the profession; we are the ones who are to effect change in society, creating a more fair and just world. Social work students, however, are ill-equipped to carry out this duty. Curricula highlighting social injustice and its effects, illustrated through our clients’ lives, fail to generate action and dialogue on social work school campuses. This political apathy runs counter to the philosophy of social work. Social structures need to be changed to remedy social ills through direct action. Social work students must turn beliefs and convictions into actions.

The Social Work Code of Ethics Requires Involvement

Social work students have not been sufficiently engaged in social action and discussion. One recent event on campus at Columbia University, billed as a discussion on the humanitarian crisis in Iraq, was attended by approximately ten social work students. What could have been an opportunity for social work students to inform themselves on issues of global, political, and social importance was, instead, a demonstration of the student body’s apathy toward learning about events outside their immediate practice focus. Many social work students are poorly informed about local, national, and international causes and their interconnections. Social work students should
realize that there is more to social work than what is being taught in graduate schools.

Social work students have an obligation to engage in social change; it is our fundamental role in society, and mandated by the profession. Social justice is one of the core ethical principles of the National Association of Social Workers (NASW) Code of Ethics. This professional code requires us to act socially and politically to guarantee all people the rights to equity and social justice (NASW, 1999).

**Educational Standards Exclude Social Change**

Social work students prepare to enter a professional career, and like all professions, social work has its own educational training (Flexner, 1915). A comparison of the Code of Ethics to the educational standards set by the Council on Social Work Education (CSWE, 2003) reveals interesting discrepancies. Social work schools are not educating their students for future careers as change leaders, as the CSWE merely requires that ethics and social justice be infused into the curriculum of graduate programs (CSWE). An ethical mission of our profession has been relegated to a non-essential component of our educational requirements.

Graduate social work education chooses to emphasize certain professional areas over others; it is clear that involvement in social and political justice has not been recognized as an important area for knowledge development (Sarri & Meyer, 1992). There is little evidence that the current social work curriculum is designed to foster critical social thinking and action. Students seldom engage in politically oriented dialogue. In fact, most students and professors take great measures to ensure that discussions are politically sanitized, with students rarely expressing any strong opinions on issues of poverty, racism, classism, or ethics. Social workers today have relinquished their roles as social critics and reformers, representing a serious concern for the profession (Sarri & Meyer).

The social work profession has a long history of active political engagement, representing a threat to the status quo. Many interested parties would hope the newer generations of the profession would abandon this commitment. In fact, Brill (2001) warned of the widening gap between ethics and practice. Students are called upon to bridge this gap, which requires more attention and critical thinking to our practice than ever before.

Social workers have a unique perspective to offer the political and social change debates. As a profession, social work draws upon and connects many fields, including political science, sociology, psychology, and philosophy. Social workers perform many duties and operate in many spheres. Unfortunately, social work schools may not be doing enough to create professionals suited for the inter-disciplinary work required of social workers.
Social work schools may be training students to take a professional role in the existing structure of society instead of fostering critical thinking and training to create a new and better social structure (Sarri & Meyer, 1992).

**Social Work Is Political**

Feminists have argued for decades that the personal is political. Social workers are positioned, unlike any other group of professionals, to connect personal issues to their social, political, and economic roots (Long, 2002). Social workers must challenge the status quo by advocating for change to address the structural, economic, and systemic problems from which clients suffer.

Social justice can be achieved through direct efforts to reform social policy. Social work students should be involved in social advocacy on behalf of their client populations. The criteria by which we measure the success of social action must be the change achieved for the deprived communities in which we serve (Figueira-McDonough, 1993).

Furthermore, many scholars have argued that social work is, a priori, a political endeavor (Abramovitz, 1993; Long, 2002; Freire, 1990). The unifying theme of social work, regardless of the unit of analysis (client interventions, advocacy, community organizing, and policy reform), is amelioration of a social problem. To claim that social work is neutral is to support the existing social structure and ideology and exempt these from diligent scrutiny. Long stated that “a decision to act apolitically is a decision to support the status quo” (p. 57). It could be further argued that social workers actually contribute to this status quo by placating the disenfranchised instead of mobilizing them and creating change. Apolitical social work absolves the rest of society from action, allowing problems to linger unchallenged. Abramovitz argued that social workers need to be educated for change to ensure that the profession does not become an agent of the status quo.

**The Emerging Professional’s Responsibility to be Informed**

Freire (1990) stated, “social workers are conditioned by the structure of the society in which they live, in which they are formed. Social workers uncover and make explicit a certain dream about social relations, which is a political dream” (p. 5). The structure of society has changed drastically in the last twenty years. Much social progress has been undone through effective political marketing, shifting attention away from domestic and social issues.

Schools of social work need to sustain an environment where divergent opinions can be expressed, and students need to take initiative to educate themselves about relevant and timely political and social issues. A fundamental problem in the political and social arenas in the United States today
is the lack of discourse. Citizens are not questioning the political system in the diligent manner that was espoused by this country’s fore founders. The proliferation of social problems in the most recent decades is testimony that many have been victimized by the political system, directly or indirectly. If social workers do not actively work for social and political change on behalf of the most vulnerable populations, who will? If the current generation of social workers fails to embrace the profession’s ethical obligation to achieve social justice, will the profession’s mission evolve to support, instead of oppose, a socially conservative and oppressive political environment?

Writing in 1953, social worker Charlotte Towle asserted, “we live in a period of scientific enlightenment and of great technical achievement which, if intelligently used, could render the life of all peoples more satisfactory that even before” (p. 1). Social work students must not rely on graduate school curricula to provide all the essential training to accomplish this. The mission and ethics of the profession require a willingness to actively confront social and political injustice on behalf of our client populations. Young professionals preparing to enter practice must realize the political nature of their work and reconcile it with the political and social reality they would like to develop.

References


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