ABSTRACT

LEE, SONG EVELLYN. Hmong Women Issues: Identity and Mental Health. (Under the direction of Sylvia Nassar-McMillan and Edwin Gerler.)

This mixed-method research investigated perceptions, behaviors, and mental health issues of Hmong women in the United States. Thirty-eight Hmong women ranging in age from 18 to 92 were given the Perception and Reported Behavior Survey and the Hopkins Symptom Checklist-25. Five of the women were further interviewed with a semi-structured interview. One of the main goals was to examine associations among mental health, perceptions, behaviors, and demographic variables. A second main goal of the study was to examine whether perceptions of the participants were similar to their reported behaviors. Lastly, another main goal was to obtain information on Hmong women’s identity formation.

The Mantel-Haenszel Chi-Square Test was utilized to capture associations among the variables, and descriptive statistics were utilized to determine whether perceptions were congruent with behaviors. Data analysis yielded some associations among mental health, perceptions, behaviors, and demographic variables, using an alpha level of .05. Perception of who should be more respected and behaviors to better one’s life were found to be associated with anxiety. Perceptions of who should be more respected, women’s role in voicing concerns, education, maintaining cultural practices, and educational level (behavior) were found to be associated with depression. The number of years in the United States was found to be associated with educational level. The number of years spent in Laos or Thailand was associated with perceptions of who should be respected, keeping cultural practices and educational level (behavior). Descriptive statistics showed that many of the participants behave in ways that are different from their perceptions. For example, only 39 percent of the participants behave similarly to their perceptions of women’s role in the home.
The triangulation process was utilized to merge the different findings to create a Hmong women identity model. Some of the emergent themes utilized to create the model are: domestic chores are allocated to women, importance of respect for husband, integration of cultural beliefs, fulfillment of traditional expectations, women duel role expectations, education as seeing, and lack of voice and recognition.
HMONG WOMEN ISSUES: IDENTITY AND MENTAL HEALTH

by

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A dissertation submitted to the Graduate Faculty of North Carolina State University in partial fulfillment of the requirements for the Degree of Doctor of Philosophy

COUNSELOR EDUCATION

Raleigh

2006

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For the two most amazing people in my life, my mother and father.
BIOGRAPHY

Song Lee was born in Laos. She and her family sought refuge in the United States in 1981 due to the Vietnam War. Song first lived in Minnesota upon arrival in the United States. She then moved to California with her family in 1984. While in California, she attended the University of California, Davis, for her Bachelor of Arts in Psychology. She continued her education at California State University, Fresno, earning her Masters of Science in Counseling, with a concentration in Marriage and Family Therapy. She also received her Pupil Personnel Services Credential from Fresno State University.

After receiving her Master of Science in Counseling in December 2000, Song worked as a residential therapist for two level-12 group homes in Fresno, California. She conducted individual, group, and family counseling with group home teenager residents and their families. She then worked as a counselor for the children and family mental health sector of Fresno County’s mental health services. She served as a counselor for children and families. She also served as a lead clinician in assessment and diagnosis for a child abuse prevention program.

After working as a mental health counselor for over two years focusing on children and family therapy, she decided to pursue her doctoral degree in Counselor Education at North Carolina State University, Raleigh in 2003. While at North Carolina State University, Song worked as a teaching and research assistance and a counselor. She taught two undergraduate courses at North Carolina State University on college survival skills for students in the Transition Program. She also assisted Dr. Sylvia Nassar-McMillan in her research on Arabs and in developing the clinical aspect of the Counselor Education Program.
She then worked at Clayton Counseling Services as a counselor focusing on individual, family, couples, and children counseling.

Song’s professional development and experiences also included teaching graduate courses in counseling, advising students, and presenting at local and national conferences. Most of her research and presentations have been on the Hmong people, identity development, and multicultural counseling. She is a member of the American Counseling Association, North Carolina Counseling Association, Chi Sigma Iota, and the Honor Society of Phi Kappa Phi.
ACKNOWLEDGEMENTS

First and foremost, I would like to thank all of the teachers in my life. Thank you to my parents, Vam Lauj Lis thiab Niam Vam Lauj Lis, my first teachers. You have taught great life lessons and the importance of my culture. I also want to thank my former professors, Dr. Kiyuna and Dr. Lucey, from Fresno State University, for encouraging me to further my education. Furthermore, I want to thank all my professors in the Counselor Education department at North Carolina State University, especially my committee members. Dr. Nassar-McMillan, thank you for your support and guidance. You have been a great role model and mentor. Dr. Gerler, you have been a great advisor. Thank you for all your assistance and for challenging my thoughts for the better. Dr. Baker, I admire you as a mentor. I hope I can someday be a professor that my students could turn to in all areas of difficulties, even personal difficulties. Thank you, Dr. Baker. Dr. Martin, you are my savior. Thank you for being a part of my committee and rooting for qualitative studies. Thank you also to Shelly-Ann Meade and Dr. Tom Gerig from the Statistic Department for your assistance with the statistical analysis. Thank you, Shelly-Ann, for your time and for teaching me how to use the SAS program.

I also want to thank all my siblings, cousins, friends, aunts and uncles that have been a great support system. I especially want to thank my brother Xue and Nyab Xue for their continuous support. Thank you to Lao, Xeng, Nyab Xeng, Lee, Pao, and Xai for being there whenever I needed you most. Also, a special thank you to my nieces and nephew, my angels: Michelle, Melanie, Makayla, Brianna, Ashley and Brian. I could always count on you angels for a smile, laughter, or hug.
Additionally, I want to thank my classmates and family here at North Carolina State University. Shamshad, Heloisa, and Heather, I could not have survived without the three of you. My birthdays were always special because you. Ms. Anne Petters, I am learning to be a better person by observing your contributions to the department and students. Thank you for being “all the above” (too long of a list to identify everything that you have done and been for me). Dr. LoriAnn Stretch, thank you for being a great role model and friend. You have also taught me to be a better person and counselor. Arlene, Brett, Jeannie, and Millie, the four new (although not anymore) doctoral students whom I grew attached to the moment I met, thank you for all the fun and laughter. Thank you to the Hmong Student Association at NCSU!! It was a joy knowing everyone.

Lastly, thank you to all the Hmong women who had shared their time and story with me for this dissertation. This dissertation would not be completed without your assistance. Also, thank you to all the research assistants and people that I consulted with for this dissertation.

If I forget to thank anyone, I do apologize. You must forgive me because after writing this dissertation, my brain no longer functions the way it should. Thank you, thank you, thank you to everyone!
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CHAPTER 1
HMONG WOMEN ISSUES: IDENTITY AND MENTAL HEALTH

One young woman states, “I think my life would be totally different in Laos. I would not have the opportunity to be like myself now because I don’t think I’d be able to ever go to school” (as cited in Garrity, 2003, p. 22). Another one states, “I really felt important when I first started this college. I was the first one in college (in her family). It really made me feel important” (as cited in Garrity, 2003, p. 23). Yet another state,

…We’re tied between the Hmong and American culture. And we’re stuck in the middle of it. And it’s kind of like a struggle to fight, you know, both cultures at the same time and to try to succeed. And most people don’t do it. Most people fail. (Ngo, 2002, p. 171)

These are voices of Hmong women, refugees from Laos, expressing their views about their life experiences in the United States. Focusing on different issues, authors recognize how the Hmong women’s experiences seemed to challenge and shape them as individuals (e.g. Garrity, 2003; Ngo, 2002). “For the Hmong women I studied, there appears to be a ‘double’ double standard” (Garrity, 2003). Garrity (2003) identifies layers of extra duties and obligations that Hmong women have to fulfill in comparison to their European American women counterparts.

Purpose

The main goals of this study are to obtain a better perspective on the identity development of Hmong women in the United States and whether their perceptions and behaviors are associated with mental health symptoms. Rather than molding a marginalized group into theories that were developed with western philosophies and westernized
populations, this study examines the identity development of Hmong women through triangulating both qualitative and quantitative data using a grounded theory approach (Glasser & Strauss, 1967) to extract themes. A model of themes and relationships obtained from the data will provide an emerging grounded theory (Heppner, Kivlighan, and Wampold, 1999). Therefore, this research does not use previous theories to guide the research. Instead, existing theories is used as a base to compare with the data and results. Using the grounded theory approach will allow the data to speak for themselves.

The present study represents a unique examination of identity development in Hmong women. For the first time, the voices of Hmong women are heard in regards to their views on being women, how they view society, and how they think society has influenced them. Furthermore, most existing identity development theories focus on the development of the self as an independent being. Like most Asian cultures, the Hmong is a collectivistic society that functions to better the group rather than the individual self. Thus, this study also examines how identity developed in this group of women who come from a collectivistic society but who live in an individualistic country.

Lastly, the present study seeks to expand on the association between identity development and mental health. Specifically, the present study focuses on the association among participants’ perceptions, reported behaviors, and depressive and anxious symptoms. It seems individuals acculturating into a mainstream culture have higher levels of depression and stress with lower corresponding levels of self esteem if their identity development includes exclusively those perceptions and beliefs of their traditional culture (Damji, Clement, & Noels, 1996).
Research Questions

Based on the research goals, the present study addresses the following research questions:

1) Is there a relationship among perceptions of being a woman, reported behaviors of being a woman, and participants’ mental health well-being?

2) Is there a relationship among selected demographic variables, mental health well-being, reported perceptions relating to being a woman, and reported behaviors of being a woman?

3) Will perceptions relating to being a woman be similar to reported behaviors of being a woman?

4) What is a model of Hmong women identity development?

Problem Statement

“Traditionally, the daughter is prepared for the next phase of her life to be the wife of another man and the daughter-in-law of another family” (Pho and Mulvey, 2003, p. 107). The adolescence stage does not seem to be stressed in the Hmong culture. A woman is a child and then becomes an adult when she is married (Walker, 1991). Hmong daughters are expected to learn how to cook, clean, and sew at a young age in order to be a worthy wife in the future (Donnelly, 1994; Pho & Mulvey, 2003).

Since coming to the United States, Hmong women have found great educational and career opportunities. As a result, many women gain greater independence, and find more voice and authority in family matters. Despite having found much success and greater equality, Hmong women are still expected to fulfill traditional gender roles (Pho and Mulvey, 2003). They are also expected to be submissive, kind, and skilled in domestic chores. In
recent interviews (Vang, 2003), most of the male and female Hmong participants of various ages describe a “good Hmong woman” as one who is obedient, submissive, respectful toward elders, not involved in gossip, patient, cheerful, quiet, attractive, not necessarily educated, and physically large enough to have “big” children. Additionally, some participants state that Hmong women must also know how to greet relatives, let men decide what to do with the family, not talk back to their husbands in front of others, not go out late with friends, and be knowledgeable about the Hmong culture.

Hmong women’s identities seem to be shaped by two concurrent cultural influences. Identity is influenced by both within and outside of one’s culture (Castells, 1997 as cited in Martinson & Chu, 2003). Both Sue and Sue’s Asian model (1973) and Berry’s (1980) acculturation theory show that as individuals acculturate into a mainstream culture, their views and values will change. Furthermore, works on identity development claim that a woman’s sense of self is derived from her social connections with others (Miller, 1976; Gilligan, 1982; Josselson, 1987). Additionally, identity in general is believed to be continuously modified by “unique patterns created by those personal interpretations, evaluations, and symbolic meanings of life experiences” (Anderson and Hayes, 1996, p. Xiii).

Current literature recognizes the differences between Hmong women and the women of the Western world, the experiences of Hmong women in the United States, and how identities change as experiences change. Yet none has examined identity development of Hmong women in the United States. Many of the existing identity models suggest that each woman may have different life experiences and interpret her experiences somewhat different, leading to different identity formation (i.e. Belenky, Clinchy, Goldberger, & Tarule, 1997;
Josselson, 1987). Therefore, those who encounter two cultural experiences at the same time, such as Hmong women, may undergo identity development in a different process than women in the mainstream society of the United States.

The process of identity development in Hmong women are examined in the present study. The Hmong women’s identity formation appears to consist of multiple social identities and acculturation experiences that existing female identity models do not take into account. On the other hand, bicultural identity models took into account the multiple cultural experiences, but do not distinguish gender differences. To understand Hmong women’s identity formation, one may need to consider the Hmong women’s culture and gender, as well as their complex ethnic identity and acculturation processes.

Need of the Study

In addition to the lack of empirical and other professional work on the identity development of Hmong women, the present study is also needed to provide information for helping professionals to understand Hmong women. The association between identity and mental health is crucial information for mental health providers in conducting assessments, diagnosing, and providing treatment. Moreover, the studies on mental health symptoms of the Hmong may be outdated (i.e. Westermeyer, 1988). Westermeyer (1988) examine the mental health issues of Hmong when they were newly arrived refugees in the 1980s. Recent examination of the Hmong’s mental health after several years of acculturation is needed.

Furthermore, understanding Hmong women’s identity development will assist professionals in providing appropriate mental health, career, and educational services and interventions that would fulfill the needs of these women. For example, understanding where they are in their identity development will assist career counselors to determine the types of
occupation and work environment for which they may be best suited. Moreover, how a woman perceives herself will greatly influence her motivation in pursuing an education and how she will battle the multiple oppressions she encounters. Lastly, it is always best to know where individuals are in their development and provide interventions that meet them at their level or at a level for which they could strive to achieve.

**Definition of Terms**

For the purpose of this dissertation proposal, the author finds it necessary to define the following terms. Definitions are provided by the author unless otherwise noted.

1. Gender identity: “a person’s concept of himself or herself as male or female” (Ross-Gordon, 1999, p. 29).

2. Womanist identity: a person’s concept of herself as a woman, an adult female.

3. Hmong: Southeast Asian tribal people from the mountain areas of Laos, who sought refuge in the United States due to fear of persecution or imprisonment because of their involvement with the United States in the Vietnam War (Mueller, 1993).

4. Clan: There are 19 Hmong Clans. Each clan consists of individuals with the same last name. Examples of clan names are as follows: Cha or Chang, Cheng, Chu, Fang, Hang, Her, Khang, Kong, Kue, Lor or Lo, Lee or Ly, Moua, Phang, Tang, Thao, Vang, Vue, Xiong, and Yang. Clan membership is obtained by birth, marriage for women, or adoption (Cultural Orientation Resource Center, 2004).

5. Acculturation: “Acculturation comprehends those phenomena which result from groups of individuals having different cultures come into continuous first-hand contact, with subsequent changes in the original cultural patterns of either or both groups” (Redfield, Linton, and Herskovits, 1936, p. 149-150).
6. Traditional culture: The culture into which the person was born.

7. Cultural Laws: Cultural rules or expectations that exists in a culture, which may or may not exist in the mainstream population of the United States.

8. Model: A model assists researchers to understand a phenomenon and guides research questions. It has not been fully developed or proven by empirical studies. With consistent data supporting the model, it may be developed and modified further to become a theory (c.f. Thomas, 2003).

9. Theory: A set of assumptions that have been confirmed by empirical studies. The bases of a theory could be a combination of models or a well developed model that has been supported by empirical studies.

10. Grounded theory: A qualitative approach to generating and developing a theory from data that are collected in a research study (Johnson & Christensen, 2004).

11. Mixed method: A research method that involves the collection or analysis of both quantitative and qualitative data in a single study. The two different sets of data are collected concurrently or sequentially, given a priority, and integrated at one or more stages in the research process. (Creswell, Plano Clark, Gutmann & Hanson, 2003)

12. Perception: A person’s opinion or view. Belief, attitude, and perception will be used interchangeably in this document.

Organization of the Study

The dissertation includes five chapters. Chapter One, as discussed above, consists of the purpose, importance, and problem statement of the present study. Definitions of terms are also included to clarify some of the key terms used throughout the dissertation. In Chapter Two, a literature review on the Hmong and relevant theoretical frameworks is
provided. The frameworks discussed are the acculturation theory and womanist identity model. Then in Chapter Three, the methods section, a thorough description of the participants and procedures is provided. A description of the instruments and research methods is provided as well. The use of triangulation is also discussed in regards to the mixed data. In Chapter Four, the results of the study are presented. Tables are used to summarize descriptive statistics and significant findings. Finally, in Chapter Five, results are summarized, evaluated, and interpreted with respect to the original goal of the study and existing literature. Additionally, limitations of the study and suggestions for future work such as application and research are discussed.
CHAPTER 2

REVIEW OF RELATED LITERATURE AND THEORIES

This chapter is divided into several sections. First, the population of interest, Hmong, is introduced. Their history, migration information, and adjustment issues are included to paint a picture of the experiences that may have influenced Hmong women’s lives and identity development in the United States. Then two relevant theoretical frameworks, acculturation theory (Berry, 1980; 1990) and womanist identity model (Carter & Parks, 1996; Letlaka-Rennart, Luswazi, Helms, & Zea, 1997; Ossana, Helms, & Leonard, 1992) are discussed. The subsequent section details research relevant to Hmong women. Due to the lack of current research examining the acculturation process or womanist identity of Hmong women, empirical studies on other populations are presented and examined. Then implications for research directions with Hmong women are discussed.

Hmong History

“After Laos fell, he fled with his family into the jungle…the family escaped into Thailand and, after four years in refugee camps, came to America” (Mote, 2004, p.10). This account of a Hmong man, describes the experience of most of the Hmong refugees in the United States. The Hmong people are refugees from Laos who started entering the United States since 1975. They are one of the largest groups of Southeast Asians to seek refuge in the United States after the fall of their country to the communist political party (Hvitfeldt, 1986). Although the total Hmong population is disputable, an estimation of four to five million Hmong are around the world (Lemoine, 2005).

Like the Hmong population, historical accounts of the Hmong before their migration to Laos are also disputable; there is a lacking in the documentation of the history of the
Hmong. The goal of this section is not to discuss the debatable time lines or historical accounts. Rather, the main goal is to provide an overview of who the Hmong are and what has been written about them in current literature.

The Hmong have a 4,000-year-old culture (Hamilton-Merritt, 1993). For thousands of years, the Hmong people have inhabited the remote mountain areas of East and Southeast Asia (Westermeyer, Bouafuely-Kersey, & Her, 1997). Their homelands in Asia range from Hainan Island, Vietnam, China, Burma, Thailand, and Laos (Westermeyer, Bouafuely-Kersey, & Her, 1997).

The Hmong culture can be traced back as far as 2679 BC in China (Koltyk, 1998). The Chinese called them “Miao,” meaning barbarian (Hamilton-Merritt, 1993; McInnis, 1990), although others have disputed that “Miao” does not have any negative connotation (Enwall, 1992; Lo, 2001). The Hmong lived in the mountain areas in South China (Hamilton-Merritt, 1993). In the 18th century, the Manchu (Han) Chinese conquered the Hmong lands, forcing many of them to migrate to bordering countries (Hamilton-Merritt, 1993; Hutchison, 1992). The Chinese tried to separate the Hmong into groups by forcing them to wear identifying clothing (Hamilton-Merritt, 1993). The force to wear different clothes may have resulted in the different types of Hmong today with dialectic and sartorial differences (Hamilton-Merritt, 1993); there are the Green Hmong, White Hmong, Black Hmong, Flowery Hmong, and Striped Hmong.

In 1644, many Hmong left China and migrated into Laos and other bordering countries due to political persecution (Hutchison, 1992) and economic reasons (McInnis, 1990). In Laos, the Hmong is a minority population that lived away from mainstream Laotian society. They lived in villages and practiced slash-and-burn agriculture in the
mountains (Chan, 1981; Hamilton-Merritt, 1993; Mouanoutoua & Brown, 1995). Slash-and-burn is burning and clearing forests to fertilize the soil before cultivating crops (McInnis, 1990). They cultivated rice for food, opium for cash, and raised livestock for meat, sale, transportation, and ceremonial sacrifices (Chan, 1981; McInnis, 1990). The Hmong migrate often to other fertile farmlands once their farmlands have been exhausted after several growing seasons (McInnis, 1990).

After 100 years of peaceful living in Laos (McInnis, 1990), the Hmong became governed by France and Japan when Laos was under their control. In 1893, Laos became a colony of France. France started collecting taxes from the Hmong, which forced them to increase their income by trading with city dwellers and growing opium for cash income (Lo, 2001). Contacts with the French were among one of the first encounters the Hmong had with the western world. During the World War II, Japan gained control of Laos for two years (Hamilton-Merritt, 1993), but France regained control after World War II and remained in control until 1953 (Hamilton-Merritt, 1993).

Laos became a free country in 1953, but soon encountered another conflict. From 1955 through 1975, a Laotian civil war broke out (Hamilton-Merritt, 1993). The civil war was between the Royal Lao government (government of Laos) and the Pathet Lao (Communist party) (Chan, 1981). The Hmong broke into two groups during this civil war. Some sided with the Royal Lao government led by Touby Lyfoung, while others sided with the Pathet Lao, led by Faydang Lor (Chan, 1981).

The Hmong people did not come into contact with the Americans until the United States’ government recruited them in the 1960s (Hamilton-Merritt, 1993; Mouanoutoua & Brown, 1995) as Central Intelligence Agency (CIA) Secret Guerrilla fighters in the Vietnam
War (Hamilton-Merritt, 1993; Koltyk, 1998; Podeschi & Xiong, 1992; Walker, 1990). They sided with the Americans against the communist party up until the United States withdrew its troops from Laos in 1975 (Lo, 2001; Podeschi & Xiong, 1992; Werner-Smith & Smolkin, 1995).

After the withdrawal of the American forces from Laos in April 1975, the Hmong guerrilla force weakened (Werner-Smith & Smolkin, 1995; Podeschi & Xiong, 1992). The North Vietnam communists then eventually took control of Laos (Lo, 2001). Any Hmong associated with the Royal Lao or the U.S. was persecuted by the communist groups (Hamilton-Merritt, 1993). The choice to surrender themselves to the communist group was not an option (Hamilton-Merritt, 1993). Many who turned themselves in were persecuted (Hamilton-Merritt, 1993). Thousands of Hmong people fled to Thailand, a neutral and bordering country. Many were airlifted to Thailand but thousands were left behind to seek their own route to safety (Hamilton-Merritt, 1993; Lo, 2001).

Thousands of Hmong who were not airlifted to safety fled to Thailand by foot. The choice to remain in Laos was not an option because the Pathet Lao targeted Hmong villages with aerial and ground attacks (Miyares, 1998). They hid in jungles and traveled by foot from various regions of Laos to Thailand (Hamilton-Merritt, 1993; Roop & Roop, 1990). On their journey to Thailand, they encountered gunshots, ambushes, poison gas, and chemical-biological toxins (Hamilton-Merritt, 1993; Lo, 2001). Many died or were wounded on their way to Thailand. They also encountered famine and illnesses (Hamilton-Merritt, 1993). Additionally, many gave opium to children to prevent them from crying due to fear of being discovered and captured, which led to some death of children due to opium overdose (Lo, 2001). Those who were fortunate enough to escape the Pathet Lao, death, famine, and illness
were able to reach the Mekong River, a river that divides Thailand from Laos (Hamilton-Merritt, 1993). Yet, reaching the border did not guarantee their safety. The Hmong crossed the Mekong River either by bamboo rafts, swimming across, or hiring boatmen (Roop & Roop, 1990; also see Hamilton-Merritt, 1993). Many died trying to cross the Mekong River as well (Hamilton-Merritt, 1993; Roop & Roop, 1990). More than 15,000 Hmong died during their journey to safety (Lo, 2001), while countless survivors witnessed their friends and family members dying (Hmong Youth Cultural Awareness Project, 1994).

Once in Thailand, the Hmong refugees faced new problems. Thai soldiers robbed them of their jewelry and belongings (Yer Lor, personal communication, April 3, 2000; Hamilton-Merritt, 1993). They were then placed in refugee camps (Hamilton-Merritt, 1993; Roop & Roop, 1990). Life in refugee camps was harsh; there was a lack in food, medicine, employment and living space (Roop and Roop, 1990). Many then sought refuge in other countries such as the United States, Canada, Australia, or France (Hamilton-Merritt, 1993). Still others were left behind or chose to stay behind in the Thai refugee camps (Hamilton-Merritt, 1993; Roop & Roop, 1990), hoping to return to their homes in Laos or fearing of the unknown in other countries. By 1990, over 150,000 Hmong were in the United States (McInnis, 1990) and about 50,000 remained in Thai refugee camps (Sherman, 1988). Eventually, most of the Hmong in Thailand sought refuge in the United States; the most current waves of Hmong refugees came in the summer of 2004. Other countries in which the Hmong are currently residing are Laos, Vietnam, Thailand, China, Australia, French Guyana, France, Canada, and Argentina (Lemoine, 2005).
Hmong in the United States

The Hmong have been immigrating into the United States since 1975 (Westermeyer, 1987; McInnis, 1990). The Hmong people are considered refugees in the United States because they fled their country to avoid persecution. The largest concentrations of Hmong are in California, Wisconsin, and Minnesota (Kitano & Daniels, 1988; McInnis, 1990; Werner-Smith & Smolkin, 1995). There is also a large concentration of Hmong in Rhode Island and Texas (McInnis, 1990). According to the 2000 Census of the United States (US Census Bureau, 2000), there are currently 186,310 Hmong in the United States. Yet, others claim the Census 2000 contain many ambiguities and that the Hmong population in the United States is 18 percent larger than the number reported by the 2000 Census (Carroll & Udalova, 2005). Therefore, the Hmong population in the United States is estimated to be 219,845 (Carroll & Udalova, 2005).

Among the various groups of Southeast Asians, the Hmong has the most difficult time adjusting in the United States because they had the least contact with Western culture and technology before entering the United States (Aylesworth & Ossorio, 1983; Rosser-Hogan & Nguyen, 1988). They are not prepared for the pace or lifestyle of the United States. Before coming to the United States, the Hmong lived in small remote villages in the mountains and practiced slash-and-burn agriculture (McInnis, 1990). Most of the Hmong were either farmers or soldiers in Laos. If they did hold any professional jobs, the status and prestige they held back in Laos is no longer recognized in the United States (Westermeyer, 1987). Moreover, learning a new language and culture is difficult, especially for the adults (Abramson & Lindberg, 1985). Therefore, the Hmong does not have any marketable skills for jobs in the United States upon their arrival (Abramson & Lindberg, 1985).
The Hmong also face cultural dissonance and social isolation (McInnis, 1991). They were being relocated throughout the United States (Lo, 2001), which prevented them from being close to their people or family members. Additionally, gender and social roles change rapidly (McInnis, 1991). Hmong women in Laos obey their husband and work at home (McInnis, 1991). In the United States, women have more rights and many work outside of the home (McInnis, 1990). Furthermore, laws and social norms in the United States are different from those of their homeland. For example, traditional parenting styles that have been practiced for generations, such as corporal punishment, are illegal in the United States (McInnis, 1991). As a result of new parenting styles that are required of Hmong parents, they feel confused and powerless (Lo, 2001; McInnis, 1991). Overall, they get discriminated against and lose the social support network, status, roots and “connectedness” that they used to have in their native environment (Hirayama & Cetingok, 1988).

*Cultural/Gender Dissonance*

One of the dissonances as a result of acculturating to the United States and a main focus of this manuscript is gender dissonance pertaining to Hmong women. “Traditionally, the daughter is prepared for the next phase of her life to be the wife of another man and the daughter-in-law of another family” (Pho and Mulvey, 2003, p. 107). Yet, many women are furthering their careers and having other goals in addition to being a wife or daughter-in-law. Men, traditionally, have the final say in family decisions and are the upholders of cultural laws (Lo, 2001; Mote, 2004). Yet, the opportunities given to women in the United States have shifted status and roles in the family and the Hmong society. For example, Hmong women who are also supporting the family financially are making family decisions jointly with the husband.
“Raise crops to prepare for famine, raise a son to prepare for old age” (Mote, 2004, p. 271), an old Hmong saying that discounts the importance of a daughter because the Hmong believe a daughter will leave and care for another family when she marries. They also believe having a son would improve their status in the village (Mote, 2004). With these cultural traditions and beliefs, one could imagine the expectations of daughters may be limited to being a great future daughter-in-law. Yet, Hmong women have defied cultural laws and gender roles by obtaining an education or working outside of the home in the United States. They have become independent, financial supporters of their families, and taken on political positions (e.g. Mee Moua, senator of Minnesota) which are positions that only men were allowed to hold in Hmong clans.

Although Hmong women have advanced and defy several cultural expectations, traditional gender roles are still being upheld in the United States (Donnelly, 1994; Pho & Mulvey, 2003; Vang, 2003). Hmong daughters are still expected to learn how to cook, clean, and sew at a young age in order to become worthy wives in the future (Donnelly, 1994; Pho & Mulvey, 2003). Early marriage, acceptable in the Hmong culture, is still found in Hmong females (Hutchison & McNall, 1994). Hutchison and McNall find that more than half of the Hmong females in the school they studied were married by their senior year of high school. Ironically, although there is a high rate of early marriages and early childbearing, high educational expectations exist and many completed high school (Hutchison & McNall, 1994).

Mental Health Risks and Resiliencies

Mental health. As a result of adjustment difficulties and cultural dissonances, Southeast Asian refugees in the United States experience psychological complaints,
adjustment difficulties, and family conflict (Lese & Robbins, 1994; Mouanoutoua & Brown, 1995). Specifically, the Hmong are also vulnerable to psychological problems due to war traumas (Mouanoutoua & Brown, 1995) and multiple losses in their lives (McInnis, 1991). Although the Hmong are susceptible to many mental health issues in the United States, one major mental health issue that the majority of Hmong in existing empirical studies appeared to have is depression (Westermeyer, Vang, & Neider, 1984; Kroll et. al, 1989).

Like other groups of refugees in the United States, many Hmong show mental health symptoms due to their experiences. The high incidences of mental health issues among the Hmong have been linked to psychosocial stressors that the Hmong have collectively experienced (Westermeyer, Vang, & Neider, 1984). For example, the older Hmong refugees suffered from culture shock: disorientation, fear, and sense of being overwhelmed by a new environment (Mouanoutoua & Brown, 1995). Their involvement in combat and other atrocities of war resulted in posttraumatic stress disorder (PTSD) (Joyce, 1990). There are also high rates of somatization, anxiety and hostility symptoms (Westermeyer, Vang, & Neider, 1984). Furthermore, some Hmong in isolated rural areas of the United States showed “folie a famille” or shared delusional disorder symptoms (Westermeyer, 1987). Additionally, marital and intergenerational conflicts were also found (Cerhan, 1990; Lin, 1986). The rate of diagnosable psychiatric disorders among the Hmong patients were 43 percent compared to the United States’ population base rate of 15 percent to 20 percent (Westermeyer, 1988).

Researchers also recognize other explanations to the high incidences of mental health. Hmong patients have high somatization and depression rates because these may be ways in which they express their distress (Beiser and Fleming, 1986). Additionally, many Hmong
seldom verbalize their feelings, which may be problematic from a Western mental health perspective (Kroll et al., 1989).

Although there is literature on the Hmong and mental health issues, recent research studies on the Hmong and mental health is lacking, therefore the usage of outdated literature should be examined and analyzed with care. Most of the studies and literature on the Hmong and their mental health well-being cited in previous sections of this manuscript are dated in the 1980s and early 1990s, only a few years of the Hmong’s arrival in the United States. There is also a possibility that researchers may have misdiagnosed the Hmong due to their lack of knowledge of the Hmong culture and the way they express themselves. Furthermore, only recently have literature on diagnosing and treating other cultures appear in professional counseling journals.

*Resiliencies.* Despite the difficulties that the Hmong face in the United States and mental health symptoms to which they may be susceptible, the resiliencies of the Hmong should also be recognized. They have great support from their family, clan leaders, and clan members (McInnis, 1990; Mueller, 1993). Furthermore, they do not exhibit high levels of family stress, instability, or parent problems often found in economically disadvantaged families (Mueller, 1993). Moreover, Hmong parents realize the importance of education and reinforce their children to do well in school (Mueller, 1993). Additionally, Hmong parents use a variety of techniques to discipline their children (McInnis, 1991) now that corporal punishment is not allowed in the United States. Low child abuse rates were also found in Hmong families (Cohen, 1990 as cited in McInnis, 1991). Furthermore, despite the short time in the United States, there are numerous Hmong professionals with college degrees and many more who have stable jobs.
Hmong Perspectives on Mental Health Issues

Due to the outdated literature and findings on the Hmong and their mental health, it is crucial to devote this section to how the Hmong view and deal with mental health issues. The Hmong do recognize that there are mental health illnesses (Bliatout, 1986), although mental illness is traditionally viewed as negative for the individual and the family (Carpenter, 1988). Unlike westerners, the Hmong associate their emotions with the liver instead of the heart (Bliatout, 1986). The following are some of the terms that the Hmong used to describe emotions:

“Siab Phem” or Ugly Liver. When a Hmong person is said to have siab phem, it usually means the person has suddenly become destructive and abusive.

“Nyuab Siab” or Difficult Liver. This usually indicates a patient who is suffering from excessive worry. Patients often become confused and cry. Many suffer from loss of sleep.

“Tu Siab” or Broken Liver. This term refers to individuals suffering feelings of guilt or grief.

“Siab Luv” or Short Liver. Patients with this problem often are those with suddenly appearing aggressive behavior, and a change from normal to extreme bad temper.

“Kho Siab” or Murmuring Liver. Those suffering from kho siab usually exhibit the development of certain nervous habits. Commonly seen are constant coughing, humming, whistling or shaking of the head. Patients often begin to talk of death and suicide.
“Lwj Siab” or Rotten Liver. Some clients who are unable to accomplish their goals or are unhappy with their present lives often develop lwj siab. Clients such as these usually exhibit symptoms of loss of memory and delusions.” (Bliatout, 1986, p. 350)

Although many of the Hmong’s mental health symptoms may be similar to those of westerners and many have changed their religious beliefs to those of the western worlds, there are still some who hold traditional belief values and attribute their emotional problems to religious beliefs (Bliatout, 1986). For instance, the Hmong believe that mental health problems are due to organic or supernatural causes (McInnis, 1991; Muecke, 1983). The Hmong believe spirits were responsible for the majority of problems or illnesses that do not respond to western and medical treatment (Hollinger, 1984).

The Hmong usually seek help from shamans and herbalists in regard to their mental health (McInnis, 1991). The shaman is a main health care provider in the Hmong community (Hollinger, 1984) who deals with spiritual healings. For example, an individual may be depressed because his or her soul may have wandered off from the body. Therefore, a shaman is called upon to perform a ritual to bring back the soul. The main difference between the shaman and herbalist is that an herbalist cures physical symptoms, while the shaman cures illness that cannot be explained by science or be cured by herbalist or physicians (Hollinger, 1984).

Relevant Theoretical Frameworks

Most of the current theories and models cannot aptly describe the experiences and identity development of Hmong women. Considering the main goals of the present study, the acculturation theory (Berry, 1980) and womanist identity model (Helms, 1990 as cited in Ossana, Helms, & Leonard, 1992) are being examined because they capture the acculturation
experiences and oppression that Hmong women encounters. Unlike mainstream European American or African American women, Hmong women undergo the acculturation process while battling the oppressions of the mainstream society and that of their Hmong society. Although there are many aspects of the identity of Hmong women, the parts that will be examined thoroughly in this manuscript are their identity as women acculturating into the culture of the United States.

Acculturation

A person of one culture coming into contact with another culture marks the beginning of the acculturation process (Berry, 2001). The Hmong people appear to be encountering numerous cultures as they make their way to the United States. The Hmong’s experiences consisted of the traditional culture, war culture, refugee camp culture, enclave culture, and the host culture of the United States (Miyares, 1998).

“Acculturation is a process involving two or more groups, with consequences for both; in effect, however, the contact experiences have much greater impact on the nondominant group and its members” (Berry, 2001, p. 616). The concept of acculturation originated from the discipline of anthropology and appeared in 1880 (Berry, 1980). One of the most widely accepted definition of acculturation came from Redfield, Linton, and Herskovits (1936). Redfield et al.’s definition of acculturation is as follows:

Acculturation comprehends those phenomena which result from groups of individuals having different cultures come into continuous first-hand contact, with subsequent changes in the original cultural patterns of either or both groups. (Note: Under this definition, acculturation is to be distinguished from culture-change, of which it is but one aspect, and assimilation, which is at times a phase of acculturation. It is also to
be differentiated from diffusion, which, while occurring in all instances of acculturation, is not only a phenomenon which frequently takes place without the occurrence of the type of contact between peoples specified in the definition given above, but also constitutes only one aspect of the process of acculturation.). (p. 149-150)

**Acculturation Theory**

Berry (1980) constructed a number of features and dimensions of the acculturation theory based on the definitions of acculturation from Redfield et al. (1936) and the Social Science Research Council (SSRC) Summer Seminar (1954). Berry (1980) constructed four features of acculturation: a) basic nature of acculturation, b) characteristic course of acculturation, c) level at which acculturation takes place, and d) issue of measurement.

In the nature dimension, acculturation requires the contact between at least two autonomous cultural groups and change in at least one of the group must take place. The dominance of one group over the other during the contact and change process may be difficult, reactive, and conflictual rather than a smooth transition (Berry, 1980). Berry (1980) believes that accommodation between the groups in contact and in conflict is not necessarily assimilation, but rather adaptation to reduce the conflict within the interacting system.

Based on the classic definitions given by Redfield et al. (1936) and SSRC (1954), Berry (1980) constructed three phases of acculturation: contact, conflict, and adaptation. Berry (1980) believes the first phase (contact) is necessary, the second (conflict) is probable, and some form of the third (adaptation) is inevitable in acculturation. The contact phase (physical or symbolic) between two groups is the core of acculturation (Berry, 1980). Without the contact phase, acculturation does not take place. Contact could occur through
trade, invasion, enslavement, educational or missionary activity, or through telecommunications (Berry, 1980). Conflict, on the other hand, does not have to occur for acculturation to take place. Yet, if there is resistance such as not giving up cultural values to accept the dominant culture, conflict may occur. In order to stabilize or reduce the conflict, adaptation has to occur. Berry’s (1980) model of adaptation will be discussed later because many have mistaken his model of adaptation for his acculturation theory.

Acculturation is a “two-level phenomenon—that of the group and that of the individual” (Berry, 1980, p. 11). Contact, conflict, and adaptation are relevant to both individual and groups. A way to measure acculturation is to measure the three phases at both the individual and group levels of acculturation (Berry, 1980). At the group level, history, persistence, purpose of the cultural contact, nature of the group conflict, and adaptations of the two groups involved should be examined. At the individual level, one should examine the interpersonal and intrapersonal conflicts and crises experienced, and the personal adaptations made to the situations (Berry, 1980). Individual psychological responses to acculturation include language, cognitive style, personality, identity, attitudes, and acculturative stress.

*Adaptation Model of Acculturation*

One of the most widely cited model of acculturation is that of Berry’s (1991) adaptation model. Berry developed a fourfold and two dimensional framework to better understand the acculturation adaptation process (see Figure 1). The adaptation process occurs to stabilize or decrease the conflicts that occur during the acculturation process (Berry, 1980). Berry’s adaptation model is based on people’s maintenance and development of their ethnic distinctiveness in society or their desire for interethnic involvement (Berry,
1991). The options, assimilation, integration, separation, and marginalization, are possible acculturation modes that groups in plural societies may encounter (Berry, 1991). Berry (1991) revised his original work (see Berry 1980) by using different terms. In the 1980 version, he used the terms, rejection and deculturation instead of separation and marginalization. An explanation of the change in terms was not found, but the definitions of rejection and separation are similar and the definitions of deculturation and marginalization are similar (cf. Berry, 1980, 1991).

**Figure 1. Four modes of acculturation (Berry, 1991, p. 24).**

**Critique of Acculturation Theory**

Berry’s (1980) acculturation theory meets the minimal requirement for a developmental theory. Berry’s theory fulfills three tasks that Miller (1989) described as essential facets in developmental theories. Like a developmental theory, the acculturation theory focuses on change in people over time, describes changes in the relationship among behaviors or aspects of psychological activity, and provides the course of development.

*Change over time.* A developmental theory changes over time in one or more areas of behavior or psychological activity such as thought, language, social behavior, and
perception (Miller, 1989). Berry (1980) identifies six psychological responses to acculturation that changes over time: language, cognitive style, personality, identity, attitudes, and acculturative stress. Although there are more to an individual than these six changes, Berry’s theory fulfills the *change over time* requirement of a developmental theory.

Other changes that affect an individual that Berry (1980; 1990) did not mention are the actual behavioral changes or actions that individuals take as a result of changes in the six psychological responses. An individual may know, think, or feel one way, but may act or behave in another way due to environmental influences or other reasons. Also, individuals may not want to maintain cultural values but may be obligated to do so due to societal or cultural demands, such as collectivistic societies. The adaptation model did not address the differences between individuals in individualistic and collectivistic cultures. Additionally, Berry also did not discuss the specific interrelated changes between the individuals and their original cultural group, although he mentioned that there are changes in the cultural group as well. This is another classic example of another theory developed in the western world that is based on individualistic views; the influence or change in the group is less emphasized than that of the individual in the acculturation theory.

Lastly, although the acculturation theory accounts for the changes over time, it did not describe the changes in any specific time. An adequate theory describes changes over seconds, minutes, and days (Miller, 1989). Yet, most developmental theory could only identify changes over months or years. Even so, Berry’s (1980) theory did not specify any set of days or years in his stages of acculturation. Future research such as a longitudinal study is needed to examine time of change.
Changes in several areas. A developmental theory describes changes in the relationships among several areas of behavior or aspects of psychological activity within one area of development and among several areas of development (Miller, 1989). The acculturation theory describes the changes among six areas of development. It also distinguishes that the change in an individual may be different from the mean change in their cultural group. Moreover, some of the changes are related. For example, an increase in education influences cognitive style as well as attitudes (Berry, 1980).

Berry’s acculturation theory only describes some changes relating to acculturation. Although it is not a perfect theory, it provides a great framework for future research. As with the first task mentioned, Berry (1980) did not discuss the changes in relation to the cultural group as a whole. Most of the changes were only identified in individuals. Berry’s acculturation theory was based on previous work and empirical findings, which only focuses on changes in individuals. The theory lacks discussion of group change or individual changes in relation to their cultural group. Future research examining individuals as well as their cultural group is needed.

Course of development. A developmental theory explains the course of development or the transitions from one state to another (Miller, 1989). Berry (1980) explained the course of acculturation fairly well. The course of development in the acculturation theory is contact, conflict, and adaptation (Berry, 1980). Behaviors and beliefs change in each stage. For example, individuals being in contact with a new culture may change their views or behaviors, which may conflict with their original cultural beliefs. The conflicts then trigger the adaptation process which describes how individuals behave to stabilize the conflicts.
Berry (1980) believes that conflicts may or may not arise. He states that crises or conflicts lead to the adaptation stage. He lacks a description of the changes in individuals who does not go through a conflict stage. Moreover, he also did not mention whether it is possible for individuals without conflicts to encounter the adaptation phases due to environmental influences.

**Critique of the Adaptation Model of Acculturation**

The most developed phase of Berry’s (1980) theory of acculturation is the adaptation phase. Berry (1980) constructed a model of adaptation, which was later revised (cf. Berry, 1990).Berry believes individuals have a choice to choose their adaptation mode. Berry dismisses the thought that individuals may not have a choice. He did not discuss difficulties that could arise in the adaptation phase for individuals who feel they do not have control of their environment or life. Individuals such as refugees, who do not have control of their environment or may feel helpless due to traumatic war experiences, may not feel they have a choice. These individuals may function on a survival mode instead. Moreover, individuals who have less information about the new culture may have difficulty choosing an adaptive mode that is most appropriate for them. Overall, individuals may choose their adaptation modes, but they may not have a choice. Further discussion of choice in making adaptation decisions is discussed later in the applicability section.

**Overall Review of the Acculturation Theory**

**Strengths.** The current acculturation theory of Berry has many strengths as well as weaknesses. The theory provided a framework to understand minority groups who have come in contact with a majority group. The acculturation theory is not perfect, which may make it a great theory. The validity of a theory should not only be confirm by data and logic,
but also is falsifiable or disconfirmable (Thomas, 2003). It does not answer every question; therefore it continues to drive research and request for development of the theory.

**Weaknesses.** Although Berry (1980; 1990; 1991) developed an adaptation model, he is missing a contact and conflict model, which may need to be developed to understand individuals in each stage of the acculturation process. Additionally, most of the acculturation research has been on how minorities acculturate into western societies. None, if not a few, of the research was conducted on how western individuals adapt in developing countries. These differences were not addressed in the framework; therefore the acculturation model cannot be generalized to all populations. Rather the acculturation theory only applies to minorities acculturating into western societies.

Furthermore, it is difficult to measure acculturation. Therefore, instruments may not be as valid as it should be. The acculturation theory is difficult to test because acculturation is complex in that it includes multiple facets. There are six areas in which an individual could have a psychological response to: language, cognitive style, personality, identity, attitudes, and acculturative stress (Berry, 1980). Moreover, Berry (1980) suggests that both individuals and their group experiences must be taken into consideration to understand those individuals' acculturation process. Multiple scales or subscales need to be developed and validated to include all facets of the acculturation process. An existing Acculturation Attitude scale (Kwak & Berry, 2001) only measures attitudes and has not been tested for reliability or validity.

**Applicability.** Berry (1990) believes a person has the choice to choose during their acculturation process. For example, Berry believes individuals choose what is important to them, whether to maintain their culture or to engage with other groups. Although people do
have a choice, they may be put in situations where they have to do what they can to survive. They may be forced to interact with others when they work or if they are placed in an environment where there are no others like them. Refugees are often times placed in different parts of the country in order to ensure resources do not get drained in one part of the country. Furthermore, children who grew up in the United States may not be exposed to their culture as much as the American culture. It may not be due to not wanting to maintain their culture, but rather the only culture they are aware of is the Western culture. If they do not understand their culture, it will be difficult for them to believe that they should maintain it. Moreover, although they have a choice to choose, the choices may be vague and thus their decisions will be biased, leading them to choose one that may represent their familiarity rather then their preference.

His theory appears to apply more to immigrants than refugees and more to minority groups than majority groups. Immigrants choose to enter the United States and choose their locations of residence. Refugees on the other hand, have less of a choice. They are brought into the United States or remain in the United States because they are unable to return to their country of origin due to fear of persecution or imprisonment. Refugees who have lost their families and homes due to war may feel less empowered to choose what they want to do with their culture. They may function on a survival mode. Moreover, the environment may influence a person to choose. Berry did not mention environmental influences on their choices.

*Recommendations for Revision of Acculturation Theory*

Although refugees may not get to choose without being influenced by their situation, Berry’s theory does help one to understand where refugees are in their acculturation process.
Therefore, this theory is helpful but may need to be revised to better understand those who were greatly influenced by the environment or who does not have a choice. Moreover, the theory also needs to incorporate a collectivistic view in addition to the individualistic view. Individualistic societies believe individuals are free to make decisions based on individual needs, as long as their decisions are ethical and legal. In collectivistic societies, individuals make decisions based on group decisions or for the benefit of their family or people. Although Berry (1990) created phases of acculturation for refugees, he has not incorporated those new phases into the acculturation theory nor has he incorporate changes in individuals based on group influences or group changes.

Lastly, like many theories, the acculturation theory did not address gender issues. Oftentimes immigrant or refugee women encounter twice the oppression than men. For example, women may be oppressed in the mainstream culture in terms of ethnicity and oppressed in their own culture in terms of gender. These difficulties may cause stagnation in their growth during the acculturation process, which Berry (1980; 1990) did not discuss. A revision to the theory to include gender factors is needed.

**Empirical Studies: Acculturation Theory**

Due to the lack of empirical study on the Hmong population with Berry’s (1980) acculturation theory, a few empirical studies using the acculturation assumptions will be examined. The first study to be examined is that of Kwak and Berry (2001) to examine findings on different Asian groups. Then Sintonen’s (1993) qualitative study on the life cycle is examined next. These empirical studies are examined to gather information about appropriate methodology to use with the present study and current information on Asians and other immigrants experiencing the acculturation process.
Kwak and Berry (2001). Kwak and Berry (2001) examined Asian groups that are undergoing the acculturation process. Their goal was to investigate the generational differences in Vietnamese, Korean and East-Indians of Canada. Specifically, they wanted to determine which aspects of kinship are maintained while undergoing the acculturation process. Kwak and Berry found that Asian groups in Canada continue to maintain strong family unity, although there was a difference in preference for intercultural contacts between adolescents and parents of the Asian groups. Additionally, there were generational differences in all the groups, although Asian groups showed difference in parental authority and children’s rights and the Anglo-Celtic groups showed differences with children’s obligations. When age and length of residence were controlled for, they found significant differences between Asian parents and adolescents in parental authority and children’s obligation but not with Anglo-Celtic parents and adolescents.

Kwak and Berry (2001) also found differences among the three Asian groups. The East-Indian adolescents who had resided longer in Canada than the other Asian adolescents showed a stronger preference for integration. Length of residence could have affected this difference; therefore future research on length of residence is needed to confirm or disconfirm its influences on adaptive processes. Overall, all of the Asian parents preferred the course of integration for their children for cultural traditions and language but preferred separationist for their child’s marriage. The researchers did not discuss whether the child’s marriage domain of the Acculturation Attitudes scale stood for allowing intermarriages or marriage ceremonies. If the child’s marriage domain stood for marriage ceremony, then it would be considered a cultural tradition as well, therefore conflicting with their finding that parents prefer integration for their children in terms of the cultural tradition domain.
Kwak and Berry’s (2001) finding confirms their assumptions that generation differences will be greater in Asian immigrants than Anglo-Celts due to the huge impact of the acculturation process. This finding also confirms the acculturation theory because Berry (1980) stated that the acculturation process will affect the minority group more than the majority group as a result of the contact between two different cultures. Overall, this study provided data that confirms the acculturation theory and increase knowledge on its facets. The study confirms that the acculturation process does cause changes in perceptions among generations. Some cultural values were also maintained by all the Asian groups and strong family unity were maintained despite the acculturation process.

Kwak and Berry (2001) did not compare data among the refugees and immigrants. Due to the different reasons for coming in contact with another culture, there may be differences among these two groups. Therefore, further research examining acculturation experiences among refugees and immigrants is needed, paying special attention to ethnic groups that have not been examined thoroughly in current literature such as the Hmong refugees. Additionally, future research comparing immigrants and refugees from individualistic societies and those from collectivistic societies is needed to determine whether these cultural values and strong family unity were maintained due to their strong believe in fulfilling the needs of the group rather than the individual. Moreover, length of residence was found to be highly correlated with acculturative attitudes. Further study to confirm this finding would elaborate the acculturation theory in terms of development in specific time periods.

Finns who migrated to Canada in the 1920s. Sintonen also viewed personal documents such as letters and diaries of the Finns who were interviewed, but he did not mention whether he used those data for triangulation. Sintonen’s (1993) goals are to examine the experiences of Canadian Finns who immigrated to Canada in the 1920s and determine their language preferences and overall Canadian ethnic interaction networks. A qualitative approach is appropriate for this study because current literature on the Finns is lacking and studies on changes over time is lacking. The qualitative study was based on a historical methodology that looks at past and current events to understand the impact of the past on the present and future, which is appropriate for the goals of this research. Furthermore, this study is not only appropriate but needed because Sintonen allowed the participants to share their stories rather than creating quantitative scales that would limit their responses.

Although the validity of the finding is in question due to the lack of triangulation and lack of description of the methodology, Sintonen’s (1993) findings are relevant to the acculturation theory and the fields that deal with the lives of Finn immigrants in Canada. This is one of the few studies that examine the changes in different periods of the lives of immigrants. Like other qualitative findings, the findings of this study cannot be generalized to other populations because the experiences are unique to the small Finn sample that was interviewed. Yet, it does show whether the participants’ experiences were similar to assumptions of the acculturation theory. Sintonen (1993) found his sample to interact more with Finns and that their English proficiency deteriorates at old age, which Sintonen claimed, is different from the assumptions of the acculturation theory. Sintonen suggested that the process of acculturation does not end at one of the adaptation states. Instead, Sintonen claim
that the adaptation process varied and took different forms during the different time periods of the lives of Finn immigrants.

*Synthesis and overall review of Sintonen.* Although Sintonen (1993) disagrees with the acculturation theory based on his findings, he may have misunderstood the acculturation theory. Rather than needing an additional stage as Sintonen suggested, the author of this manuscript believes individuals go through several similar acculturation processes because every time an individual encounters a new culture, a new acculturation process or cycle begins. Individuals will continue to meet new cultures and every culture changes over time. It appears the Finns had contacts with various cultures throughout their life time; therefore they may have gone through an acculturation process each time they encountered a culture that is different from the culture they originated from. The participants’ first cycle of acculturation started when they started working for the mainstream Anglo-Canadians when they first arrived in Canada. As the Finns aged, they moved to live closer to other Finns immigrants. The reasons for the move to other Finn communities at old age were not identified. Another acculturation cycle may have occurred once the Finns moved out of the mainstream Canadian communities to Finn communities because the culture of Finns at old age may be different than the culture of Finns in 1920 or that of the community from which they moved out. Furthermore, Berry (1990) stated that when there are no substantial relations with the larger society, individuals may choose the separation mode. Therefore, when the Finns retired from work, they may no longer have substantial relations with the mainstream Canadian society, therefore opting for the separation mode.

Sintonen’s (1993) findings and interpretations that led to disagreements with the acculturation theory could be due to either the uncleanness of the acculturation theory or due
to the downfalls of the qualitative approach. Based on Sintonen’s findings, it appears that the acculturation process is continuous, yet Berry (1980) did not make it clear whether the acculturation process could occur again in the new country of residence due to changes in the environment and changes in cultures. The acculturation theory only focuses on changes of a minority group (i.e. Finns) when exposed to a majority group (i.e. Canadians). Furthermore, Canada and the United States are becoming multicultural countries. The influence of other cultures within the mainstream culture is also neglected in the acculturation theory as well. A revision to the theory is called for to avoid misinterpretations. Ironically, these misinterpretations could be a good thing in that it points out the weakness of the theory. Theories are not perfect, but they could be revised to increase its validity.

The other reason for a disagreement between the interpretations of Sintonen and the acculturation theory is that in qualitative studies, interpretations of the researcher are subjective. There are numerous ways to interpret the findings. For example, Sintonen assumed that his data showed that the acculturation theory is incomplete and is in need of another stage. Yet, the author of this manuscript has shown above that his findings could also mean that the Finns have re-entered another acculturation cycle rather than another stage of the acculturation process.

One study, whether it be a qualitative or quantitative research, is not enough to disconfirm a theory. Further research is needed to clarify the findings of this qualitative research or validate the acculturation theory. The qualitative research of Sintonen (1993) provided findings that contribute to the acculturation theory because it showed that the acculturation theory lacks clarity and needs to clarify whether it is a continuous or fixed process.
Acculturation Theory: Synthesis in Regards to Hmong Women

From the empirical studies examined, immigrants and refugees change throughout their lives while living in a country that is different than their original country (i.e. Sintonen, 1993; Kwak & Berry, 2001). Findings on Asians found that family unity are intact but there are definitely generational differences in other aspects of life (Kwak & Berry, 2001). Studies have also found that the acculturation process is associated with mental health issues. A review of the literature found that postmigration factors appears to be more significantly correlated with mental health symptoms than premigration factors for Hmong participants (Westermeyer, Vang, & Neider, 1983). For example, employment was associated with depression, obsessive-compulsive symptoms, and anxiety. The researchers hypothesized that symptoms may be higher because their experience of their low class status and limited opportunities in the United States. For instance, two participants, a former colonel and influential civilian leader, were both working as janitors.

With time and acculturation, depression, somatization, phobia, and self-esteem symptoms of the Hmong participants improved the most (Westermeyer, Neider, & Callies, 1989). Postmigration characteristics that were associated with fewer mental or emotional problems on self-reports were remaining in one residence, maintaining on-going contact with a sponsor, absence of access to a person knowledgeable about both the Hmong and American cultures, and greater distance from other Hmong (Westermeyer, Neider, & Callies, 1989). Westermeyer, Vang, and Neider (1980) found that continuing with past activities premigration did not necessary improve mental health. In another study, strong traditional ties, older age, marital problems, and medical complaints were most associated with symptom levels (Westermeyer, Neider, & Callies, 1989). In a longitudinal study,
Westermeyer, Callies, and Neider (1990), found that Hmong welfare recipients appeared to have lower acculturation and elevated psychiatric symptom levels than those that were not on welfare.

The literature reviewed showed that there are problematic issues as well as positive outcomes that arise as the Hmong acculturate into the mainstream culture of the United States. Further study to examine the acculturation experiences of the Hmong and the differences in the genders relating to the acculturation process is crucial. The reviewed literature on the acculturation issues and experiences of the Hmong appeared outdated. The first wave of Hmong refugees has been in the United States for about 30 years. Current empirical studies on the Hmong and their acculturation experiences and issues are needed.

Identity

The concept and study of identity came about after the work of Erik Erikson on identity crises. Identity may be defined differently in different theoretical models. For the purpose of the present study, identity is the stable, consistent, and reliable sense of who one is and what one stands for in the world. It integrates one’s meaning to oneself and one’s meaning to others; it provides a match between what one regards as central to oneself and how one is viewed by significant others in one’s life. (Josselson, 1987, p. 10)

Although stable, identity is continuously refined and occurs through the life cycle gradually, incrementally, and often unintentionally (Josselson, 1987). It is a dynamic combining personalities and realities of the social world. One’s identity influences one’s decisions in life (Josselson, 1987).

There are different aspects of identity (Josselson, 1987). For example, being a woman or a counselor is an aspect of one’s identity. Thus, identity also consists of “both
visible and invisible domains of the self that influence self-construction. They include, but are not limited to, ethnicity, skin color, gender, sexual orientation, nationality, and physical and intellectual ability (Robinson, 1999). These various parts of one’s identity may dominate in self-definition in different contexts (Robinson, 1999). The aspect of identity that will be further explored in the present study is the adult women aspect of identity.

**Gender and Culture in Identity Development**

Gender identity is an aspect of a person’s identity that consists of the person’s concept of himself or herself as male or female (Ross-Gordon, 1999). Although many researchers, such as Gilligan (1982) argue that identity development are different in the two genders, other researchers such as Streitmatter (1993) found that identity patterns of change over time were similar for both genders. The difference in findings between studies may be due to different methodology and assessment tools used in each study (Streitmatter, 1993). Therefore, further examination of gender differences in identity development is needed.

Due to the lack of literature on how individuals from collectivities societies develop their identities in an individualistic culture, the author hypothesizes the process to be similar to Mahler’s theory of separation-individuation (Mahler, Pine, and Bergman, 1975). In collectivistic societies, individuals work together to better the group. When those individuals are put in a culture where the collectivistic perspectives are no longer valued or modeled, one may undergo experiences similar to infants and toddlers in Mahler’s theory. For example, infants’ ability to move around allows them to explore, while in close proximity with their mothers. This is similar to how individuals from a collectivistic society may explore the world of individualism. First, they would explore while staying in close proximity with their
cultural values. But as they are aware of the separate perspectives, they attempt to integrate their needs for closeness to their culture to their needs to be independent from it.

**Womanist Identity Model**

Most of the female identity models and theories are based on the European American population. A model that comes closest to a minority model of identity development is that of Helms’s (1990) womanist identity model (as cited in Ossana, Helms, & Leonard, 1992). The assumption of the womanist identity model of Helms (Carter & Parks, 1996; Letlaka-Rennert, Luswazi, Helms, & Zea, 1997; Ossana et al., 1992) is that healthy gender development of women derives from women defining their own womanhood from their internal definition (i.e. values, beliefs, and abilities), rather than from external or social definitions (Ossana et al., 1992). This model also assumes that all women, regardless of race, social class, or political orientation, would achieve their self-definitions the same way, through the proposed stages of the womanist identity model (Ossana et al., 1992). The womanist identity model has not been examined empirically (Ossana et al., 1992); therefore, it is still considered a model rather than a theory (c.f. Miller, 1989 & Thomas, 2003). For a model to be considered a theory, it must be confirmed by numerous empirical studies (Thomas, 2003).

The developmental stage-wise process of the womanist identity model involves moving from external definitions to internal definitions of womanhood (Ossana et al., 1992). The stages of the model consisted of attitudes concerning identification with societal definitions of womanhood as well as self-definitions. There are four stages in the womanist identity model. In the first stage, Pre-encounter, women conform to societal views (Ossana et al., 1992). Then in stage two, Encounter, women question the societal views as they
encounter new information (Ossana et al., 1992). After the Encounter stage, women undergo the third stage, Immersion-Emersion (Ossana et al., 1992). In the Immersion-Emersion stage, women idealize other women, expand their definition of womanhood, reject male-supremacists definitions of womanhood, and search for a positive, self-affirming definition (Ossana et al., 1992). Then in the fourth stage, internalization stage, women defined themselves based on internal views rather than societal views.

Critique of Helms’s Womanist Identity Model

The same guidelines used to evaluate the acculturation theory will also be used to determine qualities that the womanist identity model have or are lacking. Therefore, guidelines from Miller (1989) and Thomas (2003) will also be utilized in this section. Similar to the acculturation theory, the womanist identity model also focuses on change over time. Ossana et al. (1992) state that the womanist identity model is a developmental model. One of the main changes over time in the womanist identity model is the perceptions or attitudes of the women (Ossana et al., 1992). Other changes include thinking and feeling (Ossana et al, 1992).

Changes over time. A developmental theory describes changes over time in one or more areas of behavior or psychological activity such as thought, language, social behavior, or perception (Miller, 1989). Many believe objective observations of the changes must be recorded first in order to develop the theory. The womanist identity model describes changes in attitudes of women but did not base this change on existing empirical data. Instead, it was based on an existing model, the nigressance model of Cross (1971). Compared to other theories, the changes were not based on existing empirical data but on assumptions of another model. Moreover, this model fails to describe other changes in women in addition to
attitudes. Despite the shortage of this model in terms of changes over time, it does describe attitudinal changes over time. Yet, the womanist identity model does not specify how long or at what age the attitudinal changes occur. Therefore, it fulfills minimal requirement for a developmental model although it is an “edifice without a foundation” (White, 1969 as cited in Miller, 1989, p. 6).

Changes in several areas. Developmental theories “describe changes over time in the relationship among behaviors or aspects of psychological activity within one area of development and, ideally, among several areas of development” (Miller, 1989, p. 7). Unlike a theory, this womanist identity model focuses mostly on one area of change, perception or attitudes. Although Helms hypothesized that women will think and behave differently in each stage (Ossana et al., 1992), the changes in thoughts and behaviors were not described. The only known scale of the womanist identity model, Womanist Identity Attitude Scale (WIAS), only accounts for attitudes of women that are associated with the different stages of the model (Ossana et al., 1992). The focus on other changes in a woman has yet to be discovered. Yet, based on the model, several empirical studies have emerged to examine the relationship among several different psychological activities. For example, Ossana et al. (1992) examined whether high self-esteem is correlated with higher levels of the womanist identity model or perceptions of women. Additionally, Carter and Parks (1996) examine the relationship between mental health and the different stages of the womanist identity model. Unlike Berry’s acculturation theory, which was based on empirical findings (Berry, 1980), the womanist identity model is a framework that guides research. More empirical evidence is needed to determine other changes of women as they develop their womanist identity and moving it a step toward being a theory.
Course of development. A third task for a developmental theory is to explain the transitions from one point to another during the development that the other two tasks described (Miller, 1989). Helms believed the change from one stage to another in the womanist identity model is associated with women’s perceptions (Ossana et al., 1992). For example, if women’s perceptions of themselves are based on societal definitions then they are still in stage one. In the last stage, women have gone from defining themselves based on societal views to defining themselves based on their own views.

Although Helms provided a stage to stage progression, she was unclear on how those changes occur or what factors cause the changes. She did not identify variables that modify the rate or nature of change from one stage to another. Biological or environmental influences were not also discussed. Moreover, although behaviors and feelings were also proposed to change through the stages (Ossana et al., 1992), Helms’s description of behavioral and emotional changes is lacking.

Overall Summary and Critique of Womanist Identity Model

A model is not as developed as a theory and it may only be a part of a theory. Therefore, when analyzing the womanist identity model, it is clear that the model still needs some development and support from empirical data. Even when one is not comparing the womanist identity model to a theory, the model itself is lacking substance as well.

The womanist identity model derived from the Black racial identity model of Cross (c.f. Cross, 1971; Vandiver, Fhagen-Smith, Cokley, Cross, & Worrell, 2001). One of the major weaknesses of the womanist identity model is the lack of original resource on the model itself. Most of the empirical studies and Helms’s work on the womanist identity model referenced a paper in progress of Helms in 1990 which the author of this present study
was not able to locate. Several empirical studies of Helms were used to understand the model in this manuscript. The difficulty in locating the main source is a weakness in itself. Furthermore, this model is still new. Thus, there is not enough empirical work to validate or modify the womanist identity model.

Despite all its weaknesses, the womanist identity model is a much needed model to describe the identity of women, especially minority women. Refugee women, in particular, encounter numerous changes in their lives as they acculturate into a new culture. Their identity as a woman evolves as they encounter a culture that is different from their own. Many times the values of the new culture is different and conflicts with their own cultural values. The womanist identity model, when revised to apply to women of all populations or broken down to several models to apply to several groups, would be able to help professionals understand how women view themselves and the world they live in. This is especially crucial in mental health counseling. For counselors to provide culturally effective treatment, they must understand the views of clients. Although the model still needs to be further developed and validated, it is not one that should be ignored.

There is currently one scale, the Womanist Identity scale, to identify which identity stage women appear to be at by measuring their attitudes. Helms believed that behaviors and feelings are different in each stage as well. Modification to this existing scale to include emotional and behavioral change is needed to capture all the different changes that occur as women progress through the stages.

Two studies, Ossana et al. (1992) and Letlaka-Rennert et al. (1997) both found fairly high reliability coefficients for most of the subscales accept for the Encounter subscale. Ossana et al. found the Encounter subscale to be 43% reliable and Letkaka-Rennert et al.
found it to be only 36% reliable. The other subscales range from 55% to 82% reliable. The Encounter subscale may not provide reliability because women with this set of attitude are starting to question gender roles and societal definitions. Perhaps their attitudes have not been fixed in this stage; therefore it varies depending on what the question is asking for. Therefore, the encounter subscale may need to be modified and tested to increase its reliability and validity or the model need to provide an explanation for the inconsistency in answers of the participants for the encounter stage.

Applicability of Womanist Identity Model

The womanist identity model appears to apply to women in the United States, where women are promised the same rights as men. The society in the United States allows women freedom to discover themselves and to do what they want with their lives. Women in other countries or cultures may not have the luxury of equal rights between the sexes; therefore, moving to a higher stage on the womanist identity model may be more difficult. Moreover, the model focuses on becoming self-sufficient and based on the individualistic philosophy of the Western world. It may not apply as much to women in collectivistic societies whose main goal is to better the family and not the self. Their idea of being a women may be different then women in the United States. The womanist identity model is based on perceptions of women. Perceptions in other cultures may be different, thus the womanist identity model may make women of other cultures appear as if they are dependent on society to define them. Without knowing the perceptions of other countries, one cannot apply the philosophies of the western world to other worlds. More study is needed to determine whether this model applies to women of collectivistic cultures, other countries, and non-western cultures.
Nonetheless, refugee women who immigrated to the United States may evolve from having collectivistic views to individualistic views as they acculturate. Therefore, it may apply to refugee women in the United States but at the same time, the lower stages appears to have a negative connotation, which may not accurately describe refugee women trying to adapt to a new culture.

*Empirical Studies: Womanist Identity Model*

The womanist identity model still needs to be confirmed by empirical studies. The following sections will critique three empirical studies of the womanist identity model. Unlike a theory which has supporting empirical data of the phenomenon, a model is a framework yet to be investigated or have few empirical validations. After the analysis of the three studies, recommendations for modification of the model based on these studies will be provided. Again, due to the page limitation of this manuscript, not every fault or positive aspect of the following studies are examined.

*Ossana, Helms, & Leonard (1992).* The purpose of this correlational study of Ossana et al. (1992) is to examine the relationships among the womanist identity attitudes, perceptions of environment, and self esteem. Ossana et al. found that that “Preencounter, Encounter, Immersion-Emersion attitudes were positively related to perceptions of gender bias in the campus environment and negatively to self-esteem” (p. 406). Internalization attitudes, on the other hand was negatively associated with perceptions of gender bias and positively associated with self-esteem. Therefore, Ossana et al. concluded that the womanist identity attitudes and perceptions of environmental gender bias contribute to the prediction of self-esteem. Their findings reveal that attitudes and self-esteem appear to be associated, predicting that as women change their perception, their self-esteem may change as well.
Although this study is one step closer to revealing changes in self-esteem of women, in addition to changes in perceptions, further study is needed. Examination of changes in behaviors is also needed. Furthermore, Ossana et al. (1992) only compared data from different academic year. As they have stated, a longitudinal study is much needed to ensure the findings are accurate because women who perceived great gender bias may have dropped out before finishing their education. Moreover, a longitudinal study is also needed to examine whether self-esteem changes as the identity of women develops, looking at the time of change as well as what changes in a woman throughout their college years. Additionally, differences between the ethnicities were not identified in this study. Future research examining the differences between ethnicities and immigrants verses non-immigrants may provide further information to make this model more applicable to various groups of women.

*Carter and Parks (1996).* Carter and Parks (1996) investigated the relationship between the womanist identity attitudes and the mental health of Black and White women. They found that Black and White women were different in the way they responded to the womanist identity scale items and the mental health scale items. Helms had proposed that the womanist identity model describes identity development of women of all races but Carter and Parks (1996) found that the model may explain identity development of Black women more than White women. They found that the variability in all the scales were greater in the Black than the White sample. Yet, they found significant associations between encounter attitudes and seven types of psychological symptomology in White but found no significant relationship between womanist attitudes and mental health. Therefore they concluded that their findings were consistent with another study that found racial identity but not gender role attitude to be predictive of mental health among Black women.
Helms based her model on the nigressance model of Black identity. Although the Black population and other minority groups may experience similar oppressions, their experiences in life are different than immigrants and refugees. Carter and Parks (1996) found that the model is best suited for Black participants; further study on Asian and other groups is needed to see if the womanist identity model applies to other groups as well. Furthermore, Carter and Parks’s study did not find any strong correlation between mental health and women’s identity. Further study is needed to examine the effect of identity development, especially in immigrant and refugee women who encounter more than just oppressions.

Letlaka-Rennert, Luswazi, Helms, & Zea (1997). Letlaka-Rennert et al. (1997) examined the reactions of black South African women to gender oppression and whether the womanist identity model is useful in predicting self-related personality characteristics, especially locus of control and self-efficacy. Their findings demonstrated that internalized gender oppression contributes to South African participants’ perceptions of personal empowerment. The relationship between age and Locus of control and age and Self-efficacy were not significant. A significant negative relationship between Locus of control and self-efficacy was found. They also found preencounter and immersion-emersion attitudes to be significantly related to Locus of control.

Letlaka-Rennert et al. (1997) also discuss their findings in terms of their two hypotheses. The first hypothesis states that the womanist identity attitude will predict women with pre-encounter and high encounter scores to be positively related with external Locus of control. Their first hypothesis was not fully confirmed because only one subscale was significantly related to Locus of control. The second hypothesis predicted that
preencounter, encounter, and immersion-emersion will be negatively associated with self-efficacy but internalization will be positively associated with high self-efficacy. Although there were no significant relationship between encounter and self-efficacy, the rest of the variables were significantly related as predicted. Although significant, the strengths of the relationships were quite low. Therefore, interpretations should be made with care.

The researchers linked their findings to the womanist identity model. They found that when simple correlations were examined, women in preencounter and immersion-emersion have external locus of control which correlated with the womanist identity model; Helms believe that women in the preencounter and immersion-emersion are responding or reacting according to societal views. Yet, when using a multiple regression analysis, only preencounter is significantly related to external locus of control. Thus, they concluded that preencounter is the most important aspect of gender identity in black middle-class South African women. They also link their findings to the historical and sociopolitical aspect of South Africa in regards to black women. Despite the oppressions, some women in this study still have high self-efficacy; the only explanation the researchers gave for this phenomenon is that younger generations look forward to receiving the respect that their senior female generations received once they age. The researchers should have examined the South Africa culture more carefully. The researchers appeared to use a western philosophy that women and men must gain equal rights to do well in society and that individuals must be independent to be considered healthy. Perhaps the South African women have found their own ways to gain self-efficacy, which is different from the perception of the western world. Furthermore, what appears to be oppression to the western world may not be considered as oppression in other worlds, thus, the impact of those experiences on women may not be as
huge as if they were to see it as limiting their chances to be successful. As the researchers have mentioned, 33 percent of the representatives in parliament are black women despite all the oppressions.

Letlaka-Rennert et al. (1997) were careful or aware of the limitations when choosing instruments to be used with the South African women, but they were not as careful in making implications and drawing conclusions. Their sample is not representative of South Africa women but may be representative of college women in South Africa with similar backgrounds. They concluded that preventive work with girls in elementary and high school levels in preventing pre-encounter girls is needed. Again, they have neglected the cultural values and beliefs of the South African culture. The girls cannot change in a healthy manner if they are the only one changing and not their family members or society. Conflicts or culture clash will arise, similar to immigrant children and families in the United States who have different values. The American society has not found a solution to eliminate the conflicts between immigrant children and their parents yet; thus it would not be so wise to start changing the South African girls without educating their family and society as well.

**Womanist Identity Model: Synthesis in Relation to Hmong Women**

Qualitative studies are needed to assist in the elaboration of the womanist identity model. Quantitative scales tend to limit women to certain responses only. Perhaps with a qualitative study, we could develop a more valid scale to capture every aspect of the identity develop of women.

From the review of the three empirical studies, the womanist identity model appears to describe self-esteem and psychological well-being changes as well. These findings add to the strength of the womanist identity model being a developmental model because it
describes other changes in addition to perception. Further study is needed on other
etnicities, such as the Hmong women, and countries to increase its applicability. Moreover,
further study to investigate other changes, such as behavioral changes is also needed to
strengthen its chance as a developmental theory.

The womanist identity model is based on other minority models but it does not
address the acculturation and dual cultures that refugees and immigrants experience.
Furthermore, the Hmong, a collectivistic culture that did not come into contact with
technology or the western culture until the 1970s may experience different issues that other
refugees or immigrants in current literature lack. Due to the lack of study on the womanist
identity and on the identity development of the Hmong, a qualitative approach in
investigations would be a beneficial route in examining the identity development of Hmong
women and others similar to them.

Future Research for the Acculturation Theory

and Womanist Identity Model: Accumulated Synthesis

Although current literatures selected for review are among the most relevant to the
population of focus, none of the mentioned theoretical frameworks or empirical studies
focuses heavily on contextual or environmental influences. Future study examining different
layers of environmental influence from the participants’ ecological system as discussed in the
ecological systems theory of Bronfenbrenner (2005) is needed to determine environmental
factors that influence the changes during the acculturation process and identity development
process. The existing literatures appear to focus on the effects of the acculturation process
and identity development process rather than the causes. In order for professionals to assist
individuals in having a healthy adaptive process and identity development, they must have
knowledge of the cause as well as effects of conflicts and factors that drive people to achieve different adaptive modes or identity attitudes. Therefore, examining environmental influences would allow counselors to work with the different ecological systems of each person. Benefits of working with the system are well documented in research relating to the systems theories. Moreover, human development occurs within overlapping ecological systems (c.f. Bronfenbrenner, 2005). Additionally, more qualitative examination of both theoretical frameworks is needed to provide richer data of development.

Another area of research that is lacking is the acculturation process and identity development of illegal immigrants and sojourners such as international students. Illegal immigrants live in fear of deportation and are unsure of their length of stay in the United States. These experiences are different than those of immigrants and refugees who are granted permanent residence. Furthermore, other sojourners who know exactly how long they will be in the United States will also experience different experiences and have different needs. These differences in experiences may impact their perceptions, which may impact how they react when they come into contact with another culture and how their identity develops. Further research is needed to determine whether the acculturation theory and womanist identity model is applicable to all populations.

The list of future research ideas and needs is limitless but to create a more comprehensive theory, gender and ethnic issues must also be taken into account in both of the mentioned theoretical frameworks. Therefore research focusing on the influences of the ecological system and examining correlations between identity development of women and acculturation is needed due to the lacking of both frameworks and current literature in these areas.
Concluding Remarks

The author began this manuscript by introducing Hmong women because her interest in this population had driven her to analyze the acculturation theory and womanist identity model. Current literatures repeatedly appear to state that current theoretical framework and empirical research are lacking in examining development in women and ethnic minorities. The two theoretical framework examined are no different then the other frameworks that are lacking in examining gender and ethnic differences. The acculturation theory of Berry (1980; 1990) attempts to describe ethnic minorities but ignored gender differences. The womanist identity model, on the other hand, focuses on gender development, but lacks data from various ethnic minorities to support its assumptions. Both frameworks appear to hold the views of an individualistic society. For example, Berry assumes that individuals have a choice to choose their adaptive modes without examining the influences of their cultural group. Helms (Ossana et al., 1992) bases her model on a minority model, the nigressance model, but hypothesizes that women must become individualized and think for themselves to be healthy; those who think in terms of their society function in ways that put women down.

Healthy perceptions and mental health in a western, individualistic society may not be the same for other societies. Further research is needed to increase the applicability of these two frameworks to more populations, especially the Hmong women, a recent refugee group that face twice the oppression and multiple obstacles.

Summary

This chapter includes information about the population and theories of interest. The Hmong people were introduced and summaries of the acculturation theory and the womanist
identity model were provided. Relevant empirical studies were also provided and synthesized. In the next chapter, Method, the mixed-method research design is presented. Procedures, instruments, and data analysis methods are thoroughly described in the next chapter.
CHAPTER 3
METHOD

The main goals of this study are to provide insight on an identity model for Hmong women and whether perceptions and behaviors of Hmong women are associated with mental health symptoms. Most empirical studies on identity development examine perceptions. This study examines perceptions and reported behaviors; incongruence between the two aspects is examined. Although a mixed-method consisting of both quantitative and qualitative procedures is utilized in this study, a good portion of this chapter is utilized to describe the qualitative procedures due to the many steps needed and the rarity of this kind of qualitative studies in current literature.

In order to accomplish the goal of providing insights into a Hmong women identity model, a grounded theory research approach (Glaser & Strauss, 1967) is utilized. Rather than molding a marginalized group into theories and literature that were developed with western philosophies and westernized populations, this study examines observed behaviors, reported behaviors, and perceptions related to identity development of Hmong women through semi-structured interviews. The grounded theory approach seeks to generate a theory from the data (Glaser & Strauss, 1967) and is further discussed in a later section.

Furthermore, in order to accomplish the second goal, perceptions, behaviors, and mental health symptoms is measured and analyzed using the statistical program, SAS (SAS Institute, 2001; Version 8.2). Current literature claims there is some association between identity and mental health (i.e. Carter & Parks, 1996; Damji, Clement, & Noels, 1996) and that immigrant women are at great risk for mental health distress (i.e. Meleis, 1991). Therefore, mental health well-being is measured and used to triangulate with other data.
To be true to the grounded theory approach, the only types of information from the literature review that were taken into consideration when creating the research design are areas of identity development that still need to be further explored and the methodologies utilized in current empirical researches. The research design of this study is created to address the following research questions:

1) Is there a relationship among perceptions of being a woman, reported behaviors of being a woman, and participants’ mental health well-being?

2) Is there a relationship among selected demographic variables, mental health well-being, reported perceptions relating to being a woman, and reported behaviors of being a woman?

3) Will perceptions relating to being a woman be similar to reported behaviors of being a woman?

4) What is a model of Hmong women identity development?

Research Design

The present study utilizes a grounded theory and mixed method research design. “A mixed methods study involves the collection or analysis of both quantitative and/or qualitative data in a single study in which the data are collected concurrently or sequentially, are given a priority, and involve the integration of the data at one or more stages in the process of research” (Creswell, Plano Clark, Gutmann & Hanson, 2003, p. 212). The research design is also a grounded theory approach because the researcher seeks to inductively establish a Hmong women identity development model from the data (see Glaser & Strauss, 1967; Strauss & Corbin, 1990). The goal of the grounded theory approach is to understand the participants within their cultural context (Glasser & Strauss, 1967; Silverman,
The grounded theory is utilized to examine phenomenon that have not been examined or to examine existing phenomenon in a fresh perspective (Stern, 1994). The grounded theory is best suited for this study because the Hmong have not been examined much in empirical studies. Additionally, although identity development has been examined in other ethnic groups, it has not been examined in the Hmong population.

Data was collected from semi-structured interviews, field notes of observations during the interview, the Perception and Reported Behavioral Survey (PRBS), and the Hopkins Symptom Checklist-25 (HSCL-25; Mouanoutoua & Brown, 1995). Triangulation was used to understand the results by looking at different data sets (Silverman, 2000). The constant comparison method (Glaser, 1994) to analyze codes and themes was used in analyzing the interview and observation data. The constant comparison method identified similarities and differences between emerging categories (Strauss & Corbin, 1990). Associations among different variables were tested with a chi-square test using the Statistical Analysis System (SAS), version 8.2 (SAS Institute, Inc., 2001).

The constant comparison method, which is further discussed in the data analysis section, consists of four stages to compare items in each category of codes, establish new categories, and than comparing the categories. The four stages of the constant comparative method to analyze data and create a theory are (Glaser, 1994):

(a) comparing incidents applicable to each category

(b) integrating categories and their properties

(c) delimiting the theory

(d) writing the theory
For additional reading of the four stages and the constant comparative method, see Glaser, 1994.

Participants

Participants for this study consisted of 38 refugee Hmong women or female children of refugee Hmong women ages 18 to 92. Five of the 38 participants were interviewed further to elaborate on some of the questions on the survey that were given to all the participants. Interviewers were volunteers but effort was made to include participants of various age and length in the United States.

The Hmong have been immigrating into the United States since 1975 (Westermeyer, 1987; McInnis, 1990). The Hmong people are considered as refugees in the United States because they fled their country to avoid persecution. The largest concentrations of Hmong are in California, Wisconsin, and Minnesota (Kitano & Daniels, 1988; McInnis, 1990; Werner-Smith & Smolkin, 1995). Participants were recruited from Fresno, California, an area that is heavily populated with Hmong refugees.

Researcher as the Interviewer

The researcher is an insider, meaning she is a Hmong woman, similar in gender and ethnicity to the participants. Although there were many benefits to being an insider, there were also some issues that needed to be considered. Some of the benefits of being an insider were the researcher had access to the population and was aware of cultural taboos and traditions that may affect the data and data analysis. An issue to be aware of was that the researcher has her own experience of developing her identity in the United States. She must be aware of her own biases and ensured that they do not affect the participants’ answers.
In order to reduce biases, the researcher kept a journal to ensure that she kept track of her emotions and thoughts to avoid having them interfere with the data collection process. The journal assisted her in being aware of issues that may have affected the interviews or data analysis.

*Instruments*

*Semi-Structured Interview*

The questionnaire for the semi-structured interview (see Appendix C) was created based on current literature (e.g. Vang, 2003) and a qualitative pilot study (Lee, 2005). Additionally, assistance was sought from a Hmong teacher who had vast knowledge of the Hmong culture and traditions. The original semi-structured interview questions from the pilot study (Lee, 2005) were modified for clarity and translated into the Hmong language. A back-translation procedure was utilized to ensure the validity of the Hmong version of the questionnaire. The purpose of the semi-structured interview was to gain perspectives of the Hmong women’s identity development and acculturation experiences. The semi-structured interview questions focused on perceptions and reported behaviors relating to identity development. In order to understand the influence of the acculturation process in identity development, a time line of the lives of participants was created using their background information.

*Behavior Observation*

Writing field notes was the primary method in capturing data from participant observations and informal interviews (Dewalt & Dewalt, 2002). A tape recorder recorded the participants’ dialogue while the researcher collected field notes on non-verbal behaviors of the interviewees. For example, their affects and the ways in which they behaved toward
the researcher were noted. In writing field notes, the researcher decides what goes in the field notes, such as the level of detail and how much context to include (Dewalt & Dewalt, 2002). In this case, the researcher included details such as greetings, facial expressions, voice tones, and behaviors toward the researcher. The condensed field notes taken in the field were then typed into expanded field notes. Expanded field notes are condensed versions of the raw field note (Dewalt & Dewalt, 2002) that serves to organize the field notes. Expanded field notes may include head notes, which are observations or thoughts that were not written down in the field notes.

To ensure that field notes are accurate, a few steps were included with the field notes. Field notes taken during the interview and expanded field notes will be typed immediately after the interview to prevent loss of data due to memory loss (Dewalt & Dewalt, 2002). The researchers’ reactions to the observations were also noted to allow for reflexivity (Dewalt & Dewalt, 2002).

Perception and Reported Behavioral Survey (PRBS)

The Perception and Reported Behavioral Survey (PRBS; see Appendix D) was created based on themes that emerged from a pilot study (Lee, 2005), current literature on the Hmong, and the interview questions for this study. For example, a question on being a good woman was influenced by the study of Vang (2003), asking Hmong men and women to define a good woman. Odd items on the survey requested for participants’ perceptions while even items requested for their behaviors. Perception or attitudes were surveyed because it is one area that changes over time in the acculturation theory (Berry, 1980) and has been linked to identity development. Attitudes also change as one moves from one level of identity to the next (Helms, 1990 as cited in Letlaka-Rennert et al., 1997). Reported behaviors were
surveyed because in a pilot study (Lee, 2005), the women that were being interviewed indicated that they often had to behave in ways that were inconsistent with their perception due to the strong cultural or familial influences.

To increase the accuracy of the survey, an assistant assisted in developing the questionnaires and three raters rated the items for content-validity. Each item asked for perspectives and reported behaviors while the answer choices represented cultural values, integrated values, and alienated values. Cultural values are those perspectives that are true to the Hmong culture. The integrated values are those that are a combination of Hmong values and the mainstream western society. The alienated values are those that included perspectives that are neither part of the Hmong culture or mainstream Western culture. Three raters rated the survey to ensure that items were inquiring about perceptions and behaviors. The raters also rated answers to the item to ensure they represented either a cultural, integrated, or alienated perspective. Only items on the PRBS that were 100 percent validated by the three raters were utilized. Upon raters’ recommendation, item six regarding which gender was more respected was discarded when analyzing for behavior because it did not ask for the participants’ behavior in respecting; instead, it inquires about the behaviors of their family members. Question five on perception of “who should be respected” was utilized although question six on behaviors of respect was discarded. Upon raters’ recommendation, items five, six, nine, and ten (see Appendix D) were discarded when analyzing for the cultural, integrated or alienated perspective because not every rater agreed that the answers to these items represent the three perspectives. Although questions five, nine, and ten were not utilized to assess for the three perspectives, they were utilized to
assess behaviors and perceptions as raters agree these items accurately assess for behaviors and perceptions.

The PRBS was also translated into the Hmong language by an assistant because many Hmong women do not speak or are illiterate in English. Another assistant revised the translated version and returned to the first assistant for another revision for clarity. The researcher did a back translation to ensure the questionnaires were translated accurately.

*Hopkins Symptom Checklist*

The Hopkins Symptom Checklist-25 (HSCL-25; Mouanoutoua & Brown, 1995), Hmong and English version, was utilized to collect data on the anxiety and depression levels of participants. The HSCL-25 is a self-report symptom inventory that has shown to be effective in evaluating symptoms of anxiety and depression in Hmong and other Southeast Asians (Mollica, Wyshak, Marneffe, Khuan, & Lavelle, 1987; Mouanoutoua & Brown, 1995). Participants answer to one of four categories for each item: not at all, a little, quite a bit, and extremely. Examples of items are as follows: suddenly scared for no reason, trembling, headache, poor appetite, and thoughts of ending your life. Anxiety and depression appears to be two of the most prevalent mental health issues in the Hmong people. Therefore the instrument was chosen to identify issues common in the Hmong women refugees and to determine whether there is a link between mental health and the participants’ perceptions, behaviors, and background information.

The validity and reliability of the Hopkins Symptom Checklist are relatively high in both the English and Hmong version (Mouanoutoua & Brown, 1995). Validity or overall accuracy for the Hmong version in a sample of 159 Hmong adults is .89 (Mouanoutoua & Brown, 1995) and that of the other Southeast Asian language versions are .93 and .76
The HSCL-25 is both valid in the Hmong and English language. Those who speak fluent English were given the English version and those who can only speak Hmong or are fluent in Hmong were given the Hmong version of the instrument. Some Hmong women were illiterate so the researcher read the questions for them. This scale collected anxiety and depression symptoms of the participants.

**Scoring HSCL-25.** Scoring the HSCL-25 involves scoring each response by assigning a number to it: 0 to “Not at All,” 1 to “A Little,” 2 to “Quite a Bit,” and 3 to “Extreme.” The scores of anxiety and depression for each participant could be obtained by summing a total score for the Anxiety (from items 1 to 10), Depression (items 11 to 25), and the Total Anxiety/Depression Score (items 1 to 25) and divide the total score by the number of items (Vang Leng Mouanoutoua, personal communication, September 26, 2005). An index of 1.75 is used as a cut off score to classify symptomatic participants from normal participants (Mollica et al., 1987; Mouanoutoua & Brown, 1995; Vang Leng Mouanoutoua, personal communication, September 2005).

**Procedure**

The research was conducted in Fresno, California in December 2005. Packets including the consent-confidentiality form (see Appendix A), a background information form (see Appendix B), the PRBS, and the HSCL-25 were given to 38 Hmong women. The 38 Hmong women ages 18 to 92 were recruited from a non-profit organization, Hmong family gatherings, Hmong New Year sports tournament, and the snowball effect. The snowball effect is the process of obtaining more participants through existing participants. Five out of
the 38 women were selected to be interviewed. Interviewees were selected with various backgrounds, length in the United States, level of education, and age. The researcher conducted interviews at the interviewees’ homes. The number of participants for the semi-structured interview was limited to five participants due to the extensive interviews and observations that were being done. Consent and questionnaires were read to participants who were illiterate.

The researcher conducted semi-structured interviews using open-ended questions that were similar to those on the PRBS. See Appendix C for the interview questions. The interviews were audio taped and transcribed. The researcher also collected field notes on the participants’ verbal and non-verbal behaviors during the interview. Raw data collected from the semi-structured interviews consisted of the audio taped interviews and condensed field notes of behaviors.

Another set of data collected to increase validity of the study were journal entries of the researcher. Journal entries were written throughout the process of data collection, usually immediately after an interview session. Journal entries included thoughts, emotions, and ideas that were triggered by the interview session, participants, or the process.

Analysis

There were two types of analysis used to analyze the data. For research questions one and two, the background information, survey, and the HSCL-25 were analyzed using a statistical analysis program, SAS (SAS Institute Inc, 2001) to perform a Mantel-Haenszel Chi-Square (CMH) test. The CHM was utilized to measure the associations between the categorical variables that were ordinal (items on HSCL-25) and nominal (items on the survey). An alpha level of .05 was utilized to determine whether a finding is significant or
not. For research question three, descriptive statistic was used to determine whether participants’ behaviors were similar to their perceptions. Lastly, for research question four, triangulation of all data results were utilized. Part of the data analysis for research question four is using the grounded theory approach to analyze the semi-structured interviews (transcripts) and field notes (condensed field notes). A constant comparison qualitative analysis was utilized to extract common themes from the transcripts and condensed field notes.

Overview of Analyses for Research Questions

Research Question One and Two

The researcher used the Mantel-Haenszel Chi-Square Test to determine associations between different nominal or ordinal variables to provide results for research questions one and two. The Mantel-Haenszel Chi-Square Test was chosen to analyze the data because the data was categorical. Data from the survey and geographic backgrounds are nominal while the data from the HSCL-25 are ordinal. The Mantel-Haenszel Chi-Square tests for associations that may or may not be linear, which answers the research questions. An alpha level of .05 was used for all statistical tests to determine statistical significance. Additionally, most of the data were nominal so the Cochran-Mantel-Haenszel Statistics 2 (CHM2) was examined to determine the results. This statistic tests the null hypothesis of no association against different alternative hypotheses (SAS Institute Inc, 1999).

For both research questions, the scores of the HSCL-25 were collapsed before being tested with the Mantel-Haenszel Chi-Square Test. Answers to the HSCL-25 that were “not at all” and “a little” were collapsed into one category and answers that were “quite a bit” and “extreme” were collapsed into one category. This collapsing process was done to increase
counts in each cell of the contingency table to increase validity of the Mantel-Haenszel Chi-Square test.

Research question one. The researcher used the Mantel-Haenszel Chi-Square Test to determine whether perceptions of being a woman, reported behaviors of being a woman, demographics, and mental health well-being are associated. Using the SAS program, Mantel-Haenszel Chi-Square Test was performed on each survey questions and the HSCL-25. Each symptoms of the HSCL-25 was also tested with the Mantel-Haenszel Chi-Square Test to examine the associations between each anxiety or depressive symptom and each perception or behavior.

Research question two. This research question focuses on whether demographic variables such as age are associated with mental health, perceptions and behaviors. Using the SAS program, the Mantel-Haenszel Chi-Square Test was performed with the demographic variables and the total score of HSCL-25 and each depressive or anxiety symptoms on the HSCL-25. Additionally, the Mantel-Haenszel Chi-Square test was also used to determine whether there is an association between demographic variables and the survey answers (perception and behaviors).

Research Question Three

As discussed in the instrument section, the PRBS survey consisted of questions that asked for the participants perceptions and reported behaviors. Descriptive statistics such as means and percentages were utilized to determine whether the majority of the participants behaved in ways that are different or similar to their perceptions.
Research Question Four

The constant comparative method of analysis (Glaser, 1994), an analysis method of grounded theory, was used to examine the qualitative data from the semi-structured interviews and observations. Using the constant comparative method, the researcher continuously re-examined the data and compared themes, patterns, and categories to derive a set of themes, patterns, and categories that are different or similar in the participants. The constant comparative method is a way to increase validity of a qualitative study (Silverman, 2000).

Before coding and extracting themes, the transcripts were translated into English. All of the participants spoke some Hmong in their interviews and many only spoke in Hmong during the interview. The researcher translated the participants’ words into English as she transcribed. She consulted with a research assistance that is fluent in both the Hmong and English languages throughout the transcription and translation process to ensure that the words were captured as accurately as possible in English.

Coding and themes. Using the constant comparative method, the researcher coded the transcripts and field notes on the observations. Coding is a form of analysis in qualitative study, which reviews sets of data and dissects them meaningfully (Miles & Huberman, 1994). Codes are labels used to create meaning to the descriptive information such as words, phrases, sentences or whole paragraphs (Miles & Huberman, 1994). Once the codes have been extracted from the semi-structured interview transcripts and field notes of behaviors, the primary researcher merged the codes to create themes, which will be further discussed in the triangulation of qualitative section below. Triangulation can increase the credibility of the results (Johnson & Christensen, 2004). Once final themes were extracted from the three data
sets, a trained auditor as used in the study of Hill, Nutt-Williams, Heaton, Thompson, and Rhodes (1996) viewed the codes, themes, and the researcher’s journal to ensure validity and maintain researcher bias. Then the researcher examined the auditor’s comments and discussed with the auditor to come to an agreement for the domains and wording of the core ideas. The results included themes that the researcher and auditor agreed upon.

*Triangulation of Quantitative and Qualitative Data*

Themes of the interviews and observations were triangulated with the scores of the HSCL-25 and PRBS. Examining themes of the interview and observations will provide information about whether and to which extent Hmong women’s perceptions, reported behaviors, and behaviors are similar or different. The three sets of data were then combined to determine patterns of perceptions, behaviors, and mental health issues that are related to identity development of Hmong women.

*Summary*

This chapter includes a description of the participants, instruments, procedure, and types of analysis that was utilized to examine the data. The next chapter, Chapter 4, will include a summary of the results that answered the four research questions. A Hmong women identity model based on the triangulation process will also be presented.
CHAPTER 4

RESULTS

This chapter includes results from the categorical data statistic procedures, descriptive statistic, and the constant comparison analysis. First, descriptive statistics for the participants are presented. Third, results relating to the first three research questions are presented. Finally, themes from the semi-structured interviews and results from the triangulation method will be presented to answer the forth research question.

Descriptive Statistics

The participants for this investigation consisted of 38 Hmong women from Fresno, California. The sample included women ages 18 to 92 (39.4% ages 18-23, 34.2% ages 24-30, 26.3% ages 31-92). These age ranges were broken into equal categories of age groups for analysis. The cohort 18 to 23 is similar to the traditional college age cohort (18 to 24) defined in Hurst (2005). Most of them were born in Laos (39.4%) or Thailand (39.5%). Only 21.1 percent of the women were born in the United States. The majority of them have been in the United States for more than 14 years and most had their high school degree or college degrees. See Table 1 for a further breakdown of selected demographics.

In regards to mental health symptoms, three participants or 7.9 percent appeared to be depressed, one of the participants or 2.6 percent appeared to be anxious, and three participants or 7.9 percent appeared to have both anxiety and depression using the HSCL-25. Participants that are considered symptomatic had a score higher than the index score
Table 1

Selected Demographic Variables

<table>
<thead>
<tr>
<th>Demographic Variable</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-23</td>
<td>15</td>
<td>39.5</td>
</tr>
<tr>
<td>24-30</td>
<td>13</td>
<td>34.2</td>
</tr>
<tr>
<td>31-92</td>
<td>10</td>
<td>26.3</td>
</tr>
<tr>
<td>Place of Birth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laos/Thailand</td>
<td>30</td>
<td>79.0</td>
</tr>
<tr>
<td>United States</td>
<td>8</td>
<td>21.1</td>
</tr>
<tr>
<td>Years in the United States</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-14</td>
<td>9</td>
<td>23.7</td>
</tr>
<tr>
<td>15-24</td>
<td>18</td>
<td>47.4</td>
</tr>
<tr>
<td>25-27</td>
<td>11</td>
<td>29</td>
</tr>
<tr>
<td>Level of Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td>1</td>
<td>2.6</td>
</tr>
<tr>
<td>None</td>
<td>6</td>
<td>15.8</td>
</tr>
<tr>
<td>Some education</td>
<td>4</td>
<td>10.5</td>
</tr>
<tr>
<td>HS diploma/GED</td>
<td>6</td>
<td>15.8</td>
</tr>
<tr>
<td>Some college</td>
<td>15</td>
<td>40</td>
</tr>
<tr>
<td>College degree</td>
<td>6</td>
<td>15.8</td>
</tr>
</tbody>
</table>

Note. N/A=participant’s answer, which did not determine her level of education
of 1.75 (Mollica et al., 1987; Mouanoutoua & Brown, 1995; Vang Leng Mouanoutoua, personal communication, September 2005).

As for perceptions and reported behaviors, the mean percentage of responses that represented a cultural perception is 35.2 percent, combination of cultural perception (15.6%) and cultural behavior (19.6%). The mean percentage of responses that represented an integrated perception is 45.5 percent, which is a combination of integrated perception (25.5%) and integrated behavior (20%). The integrated category consisted of the Hmong culture and the mainstream Western culture. Only 19.3 percent of the answers given by the participants represented the alienated perception and behavior, which is a combination of alienated perception (9%) and alienated behavior (10.3%). The alienated perception

<table>
<thead>
<tr>
<th>Perception/Behavior</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cultural Perception</td>
<td>82</td>
<td>15.6%</td>
</tr>
<tr>
<td>Cultural Behavior</td>
<td>103</td>
<td>19.6%</td>
</tr>
<tr>
<td>Integrated Perception</td>
<td>134</td>
<td>25.5%</td>
</tr>
<tr>
<td>Integrated Behavior</td>
<td>105</td>
<td>20%</td>
</tr>
<tr>
<td>Alienated Perception</td>
<td>47</td>
<td>9%</td>
</tr>
<tr>
<td>Alienated Behavior</td>
<td>54</td>
<td>10.3%</td>
</tr>
</tbody>
</table>

Note. n = number of answers given that represented that perception or behavior for the whole survey.
and behavior do not include any aspect of the Hmong culture. These mean percentages showed that 80.7 percent of the answers that the participants provided include some cultural perceptions or behaviors, combination of cultural and integrated. See Table 2 for a breakdown of percentages for perceptions and behaviors.

Research Question One Findings

Is there an association among reported perceptions, reported behaviors, and participants’ mental health well-being? Only one perception and one behavior were associated with anxiety. The participants’ perception of who or which gender should be more respected was judged to be associated (p=.0092) with anxiety. What a participant is currently doing to better her life is also judged to be associated (p=.0138) with anxiety. The participants’ perception of who or which gender should be more respected is also judged to be associated (p=.0810) with depression. Opinions on women’s role in voicing their opinion and making family decisions is also associated (p=.0170) with depression, as is perception of how important education is to women (p=.0230). Educational level is also associated (p=.0350) with depression. Lastly, perception of keeping one’s cultural practices is also associated (p=.0297) with depression.

Specific symptoms of anxiety were also tested to see if they were associated with perceptions and reported behaviors at the p-value < .05 level (see Table 3). Anxiety symptom “suddenly scared for no reason” is associated with perceptions of who should be more respected and perceptions of women’s role in voicing opinions and making family decisions. Anxiety symptom “faintness, dizziness, or weakness” is associated with perceptions of who should be more respected. Anxiety symptom “heart pounding or racing,” is associated with behaviors in voicing opinions and what they are currently doing to better
their lives. Anxiety symptom “headache” is associated with perception of who should be more respected. Anxiety symptom “feeling restless, can’t sit still” is associated with education level and what they are currently doing to better their lives.

Table 3

*Association between Anxiety Symptoms, Perceptions (P) and Behaviors (B)*

<table>
<thead>
<tr>
<th>Anxiety Symptom</th>
<th>Perception/Behavior</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suddenly scared for no reason</td>
<td>Women’s role in voicing opinions (P)</td>
<td>.0258</td>
</tr>
<tr>
<td></td>
<td>Education (B)</td>
<td>.0494</td>
</tr>
<tr>
<td>Faintness, dizziness, weakness</td>
<td>Who should be more respected (P)</td>
<td>.0092</td>
</tr>
<tr>
<td>Heart pounding/racing</td>
<td>Women’s role in voicing opinions (P)</td>
<td>.0346</td>
</tr>
<tr>
<td></td>
<td>Currently doing to better live (B)</td>
<td>.0342</td>
</tr>
<tr>
<td>Headache</td>
<td>Who should be more respected (P)</td>
<td>.0100</td>
</tr>
<tr>
<td>Feeling restless/can’t sit still</td>
<td>Education (B)</td>
<td>.0035</td>
</tr>
<tr>
<td></td>
<td>Currently doing to better live (B)</td>
<td>.0268</td>
</tr>
</tbody>
</table>

*Note.* Significant at p-value < .05

Lastly, specific symptoms of depression were also tested to determine whether they are associated with perceptions or behaviors at the p-value < .05 level (see Table 4 for selected associations). Depression symptom “feeling low in energy, slowed down” is associated with perception on women’s role in voicing opinions. Depression symptom “crying spell” is associated with perception on women’s role in voicing opinions, behaviors on voicing opinions, and educational level (behavioral). Depression symptom “poor appetite” is associated with perception on women’s role in voicing opinions, perception of
how important education is to women, and educational level (behavior). Symptom “feeling hopeless about the future” is associated with perception of women’s role in voicing opinions, behaviors in voicing opinions, and perception of how important education is to women. Symptom “feeling lonely” is associated with perception of how important education is to women, educational level (behavior), perception on keeping cultural practices, and what they are currently doing to better their lives. Symptom “thoughts of ending your life” is associated with behaviors in voicing opinions, perception on how important education is to women, and perception on keeping cultural practices. Symptom “feeling of being trapped or caught” is associated with what they are currently doing to better their lives. Symptom “worrying too much about things” is associated with perceptions of a good woman, perception of how important education is to women, and what they are doing to better their lives. Symptom “feeling no interest in things” is associated with perception of how important education is to women. Symptom “feeling everything is an effort” is associated with their educational level and what they are currently doing to better their lives. Lastly, symptom “feeling of restlessness” is associated with perception of women’s role in voicing opinions.
Table 4

*Association between Selected Depressive Symptoms, Perceptions (P), and Behaviors (B)*

<table>
<thead>
<tr>
<th>Depressive Symptom</th>
<th>Perception/Behavior</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crying spells</td>
<td>Women’s role in voicing opinions (P)</td>
<td>.0040</td>
</tr>
<tr>
<td></td>
<td>Participant’s role in voicing opinions (B)</td>
<td>.0393</td>
</tr>
<tr>
<td></td>
<td>Education (B)</td>
<td>.0108</td>
</tr>
<tr>
<td>Poor appetite</td>
<td>Education (P)</td>
<td>.0114</td>
</tr>
<tr>
<td></td>
<td>Education (B)</td>
<td>.0217</td>
</tr>
<tr>
<td>Feeling hopeless</td>
<td>Women’s role in voicing opinions (P)</td>
<td>.0170</td>
</tr>
<tr>
<td></td>
<td>Participant’s role in voicing opinions (B)</td>
<td>.0193</td>
</tr>
<tr>
<td></td>
<td>Education (P)</td>
<td>.0230</td>
</tr>
<tr>
<td>Feeling lonely</td>
<td>Education (P)</td>
<td>.0056</td>
</tr>
<tr>
<td></td>
<td>Education (B)</td>
<td>.0214</td>
</tr>
<tr>
<td></td>
<td>Keep cultural practices (P)</td>
<td>.0217</td>
</tr>
<tr>
<td></td>
<td>Currently doing to better live (B)</td>
<td>.0268</td>
</tr>
<tr>
<td>Thoughts of ending your life</td>
<td>Participant’s role in voicing opinions (B)</td>
<td>.0063</td>
</tr>
<tr>
<td></td>
<td>Education (P)</td>
<td>.0008</td>
</tr>
<tr>
<td></td>
<td>Keep cultural practices (P)</td>
<td>.0129</td>
</tr>
<tr>
<td>Worrying too much about things</td>
<td>Good woman (P)</td>
<td>.0124</td>
</tr>
<tr>
<td></td>
<td>Education (P)</td>
<td>.0368</td>
</tr>
<tr>
<td></td>
<td>Currently doing to better live (B)</td>
<td>.0358</td>
</tr>
</tbody>
</table>
Research Question Two Findings

Is there a relationship among selected demographic variables, mental health well-being, reported perceptions, and reported behaviors? There were two behaviors and two perceptions that are associated with two demographic variables at p-value < .05 level (see Table 5). Length of time in the United States is associated with their current educational level (behavior). This implies that the longer Hmong women stay in the United States, the more education they receive. Additionally, the number of years spent in another country other than the United States is positively associated with perceptions of who should be more respected, their educational level, and keeping cultural practices.

Table 5

*Demographics, Perceptions (P) and Behaviors (B)*

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Perception/Behavior</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Length of time in the United States</td>
<td>Educational level (B)</td>
<td>.05</td>
</tr>
<tr>
<td>Number of years in another country</td>
<td>Who should be respected (P)</td>
<td>.03</td>
</tr>
<tr>
<td></td>
<td>Educational level (B)</td>
<td>.0001</td>
</tr>
<tr>
<td></td>
<td>Keeping cultural practices (P)</td>
<td>.04</td>
</tr>
</tbody>
</table>

Several demographic variables were found to be associated with mental health symptoms at p-value < .05 level (see Table 6). Place of birth is associated with depressive symptoms of “loss of sexual interest or pleasure” and “feeling of worthlessness.” Educational level is associated with the depressive symptom of “crying spells.” Religious beliefs are associated with depressive symptom of “feeling everything is an effort.” Who they reside with is associated with symptomatic anxiety and specifically the anxiety symptom of “feeling
restless or cannot sit still.” The number of years that they have been in the United States is associated with depression symptoms “loss of sexual interest or pleasure” and “worrying too much about things.” Lastly, the number of years spent in another country other than the United States is associated with depressive symptom “crying spells.”

Table 6

**Demographics and Specific Anxiety (A) and Depressive (D) Symptoms**

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Symptom</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place of Birth</td>
<td>Loss of sexual interest (D)</td>
<td>.04</td>
</tr>
<tr>
<td></td>
<td>Feeling of worthlessness (D)</td>
<td>.03</td>
</tr>
<tr>
<td>Education level</td>
<td>Crying spells (D)</td>
<td>.02</td>
</tr>
<tr>
<td>Religion</td>
<td>Feeling everything is an effort (D)</td>
<td>.046</td>
</tr>
<tr>
<td>Who they live with</td>
<td>Anxiety (Total A)</td>
<td>.04</td>
</tr>
<tr>
<td></td>
<td>Feeling restless (A)</td>
<td>.004</td>
</tr>
<tr>
<td>Time in the US</td>
<td>Loss of sexual interest (D)</td>
<td>.04</td>
</tr>
<tr>
<td></td>
<td>Worrying too much about things (A)</td>
<td>.03</td>
</tr>
<tr>
<td>Time in other Country</td>
<td>Crying spells (D)</td>
<td>.03</td>
</tr>
</tbody>
</table>

*Note: Who they live with is the only one that is associated with symptomatic anxiety, not just with certain symptoms of anxiety.*

**Research Question Three Findings**

Research question three examines whether reported behaviors of Hmong women are similar to their perceptions. There were 19 out of 38 participants (50%) that reportedly
behave in ways that were similar to their perception of a good woman. There were 15 out of 38 (39%) participants that reportedly behave in ways that were similar to their perception of a woman’s role in the home. There were 21 out of 37 participants (57%) that reportedly behave in ways that were similar to their perception of voicing their opinions and making family decisions. There were 22 out of 37 participants (59%) that reportedly behave in ways that were similar to their perception of education. There were 15 out of 37 participants (41%) that reportedly behave in ways that were similar to their perception of cultural practices. There were 24 out of 37 participants (65%) that reportedly behave in ways that were similar to their perception of improving their life. These descriptive statistics showed that some of the participants behave in ways that are different from their perceptions. For example, one of the participants believes that “whoever has the knowledge and abilities should make decisions,” but her behavior is “I do not provide feedback nor make decisions unless asked by the men of the family.” The mean percentage of agreement between behavior and perception is 46 percent and the mean percentage of disagreement between behavior and perception is 54 percent.

**Research Question Four Findings**

Research question four asks for an outlook of an identity model of Hmong women. In order to answer this question, the triangulation of qualitative and quantitative results was utilized. Before the triangulation process, the interviewees and common themes are introduced. Auditing examining the researcher’s journal and the emerged themes found that the researcher was aware of her own biases, therefore, limiting biases in the interviewing and analysis process.
Interview Participants

All of the women interviewed self-identified as Hmong women. Most of them were born in Laos. Their reason for leaving their country of origin is the same; all of them left Laos to seek refuge due to their war-torn country. Only one of them was born in Thailand. Most of them sought refuge in Thailand before coming to the United States. Their names have been changed in this dissertation to conceal their identity.

Pa. Pa is 59 years old. She was born in Laos in 1946 and resided in Laos until she was 34 years old. Due to the dangerous living situation in Laos during the Vietnam War, Pa and her family sought refuge in Thailand. They were in Thailand for one year before seeking refuge in the United States in 1981. She was married at the age of 16 and has nine children. One of her daughter passed away at the age of 2 briefly after reaching the refugee camps in Thailand. Two of her sons and three of her daughters were born in Laos. One of her youngest son was born in Thailand and one was born in the United States. She is currently living with her husband, three sons, a daughter-in-law, and a grandson. One unique description that distinguishes her from the rest of the interviewees is that she is a Shaman and herbalist. Although traditionally, leaders are men, Pa is a leader in her community due to her position as a healer. Her beliefs consist of the traditional beliefs of souls and ancestral spirits and the rituals of Hmong shamanism. Pa is unemployed and is illiterate in both Hmong and English. She also does not speak English. Most of Pa’s perception answers on the PRBS were incongruent with her actual behaviors. The only agreement between her perception and behavior is on whether women have rights to voice their opinions and make family decisions. Pa feels free to make a decision or voice her concerns and believes anyone who has
knowledge or abilities should be the ones making decisions. Most of her answers were either cultural related values or alienated related values.

*Ker.* Ker is 45 years old. She was born in Laos and sought refuge in Thailand in 1984. She lived in Thailand for 20 years before entering the United States in March of 2005. She married at the age of 20 and has nine children. Her oldest son is 20 years old. She has six sons and three daughters; most of them are still in grammar and middle school. She lives with her husband and eight children. Her oldest son lives in another city with relatives because she said he could not find a job in their city. Ker is unemployed and is illiterate in both Hmong and English. Ker also does not speak English and would like to attend school to acquire the English language. Ker spoke in Hmong during the interview. Ker is the only one of the 5 interviewees that was classified as depressed and anxious by the HSCL-25. She was also the only one that cried during the interview. Most of her anxiety and feelings of depression were related to being unemployed, uneducated, and lacking job skills since she has just arrived from Thailand. Most of her worries consist of not being able to provide for her children. Ker had only one set of questions of perception and behaviors in the PRBS that matched. Most of her perceptions were different from her behaviors. The only match was her belief and behaviors in voicing concerns and making family decisions. She believes that anyone with knowledge and abilities, regardless of gender should take part of the decision making in families. Most of her answers were culture oriented (60%).

*Xee.* Xee is 32 years old. She was born in Laos and entered the United States in 1978. She has been in the United States for 27 years and had resided in other countries such as Laos, Thailand, and France for a total of 5 years. She is currently a high school teacher. She is married and has 3 children. She lives with her husband, children, and mother-in-law.
She married when she was 24-years-old. She has a bachelor’s degree and a teaching credential. She is literate in both Hmong and English. Xee reportedly sees the clan and family issues more important than women issues. Only half of Xee’s answers on the PRBS agreed with one another. Therefore, half of her perceptions are different than her behaviors. Most of her answers were in the integrated category (50%).

Thong. Thong is 24 years old. She was born in Thailand. Her parents sought refuge in Thailand like the other interviewees. She was born in the refugee camps in Thailand and did not come to the United States until June of 2005 at the age of 24. She married at the age of 15 and has 3 children. She lives with her husband and children in an apartment. She is illiterate in both Hmong and English. She does not know how to speak English. She still holds traditional religious beliefs of shamanism. Thong only had two sets of answers on the PRBS that matched, meaning most of her perceptions were different than how she reportedly behaves. About 50% of her answers were in the cultural category and 40% are in the integrated category.

Nu. Nu is 40 years old. She was born in Laos and resided in Laos and Thailand for a total of 22 years. She has been in the United States for 18 years. She was married when she was 18 years old and has seven children. She lives with her husband, younger children, and father-in-law. She works as a bilingual aid instructor. She has her general education degree (GED), the equivalent of a high school degree. She is currently taking classes at a city college. Nu had always been interested in education and encourages her children to obtain higher education. Nu had to sneak to school in Thailand when she was just a child because girls were not allowed nor encouraged by their parents to attend school. When her mother discovered that she had lied about her whereabouts, she cried and begged her parents to allow
her to attend school. As a result of her begging, she was allowed to attend school in Thailand and become one of the first Hmong women to teach in the Thai refugee camps. She is literate in Hmong, Thai, and English. Most of Nu’s perceptions on the PRBS matched with her reported behaviors. Most of her answers are in the integrated category (60%), while the rest are in the cultural category (40%).

Common Themes

The themes that emerged from the qualitative data were level of husband involvement, domestic chores allocated to women, importance of respecting husband, integration of cultural beliefs, fulfillment of traditional expectations, perceptions of good women, women dual role expectations, education as seeing, lack of voice and recognition, and unfairness and oppression. Level of husband involvement is a theme that describes the level of husband involvement in the interview. Domestic chores allocated women is a theme that describes the belief that a woman is expected and should complete household chores instead of men. Importance of respecting husband is a theme describing how participants view their husbands and their level of respect for their husbands. Integration of cultural beliefs is a theme that describes the participants’ belief that they should keep their traditional culture but is also open to integrate those of the Western culture. Fulfillment of traditional expectations is a theme that describes how the participants try to fulfill traditional expectations, although some of them do not believe in the expectations. Perceptions of good women is a theme that describes what the participants believe is a good woman. Women dual role expectations is a theme that describes the dual responsibilities and expectations these participants have to fulfill. Education as seeing is a theme which describes how the participants think education benefits them and helps them to be aware of their society and needs. Lack of voice and
recognition is a theme which describes the participants’ lack of voice and recognition in the family and community. Unfairness and oppression is a theme that describes the participants’ expression of how unfair their society has been to women. Below each theme subheading in the following section are examples that describe the themes further in the participants’ own voice.

Level of husband involvement. Thong and Ker have been in the United States for about 6 months. Their responses to the interview were quite different than the other participants. Although, every one of the participants was humble and kind, only Thong, Ker, and their husbands thanked the researcher for interviewing and visiting them. Thong and Ker’s responses were short and brief. They provided responses without explanations unless they were being asked. They often say “I don’t know” before answering the questions. Their husbands often provided answers for them. Thong’s husband often times reminded her that there is no right or wrong answers when he hears Thong say that she does not know or if she pauses for a few seconds before giving her response. Thong’s husband also encouraged her by saying, “Just say it the way you know.” Ker and Thong’s husband and children were in the same room where the interview took place. At the beginning of the interview, Ker’s husband volunteered some answers for his wife but as the researcher continues making eye contact with Ker, he stopped volunteering answers but was attentive to the conversation.

Pa, Xee, and Nu were interviewed at their home but their husbands were not involved in the process. Xee and Pa’s husbands were in the house but did not join the conversations or interview. Xee’s husband greeted the researcher at the door and then had a discussion with her about the project at the end of the interview but did not interfere during the interview. Pa’s husband was at home but he was talking to other visitors so he remained uninvolved as
well. Nu’s husband was not home when the researcher arrived. None of the children or her mother-in-law interrupted the interview. Pa, Xee, and Nu all took the researcher to another room away from everyone to complete the interview.

_Domestic chores allocated to women._ All of the five participants agreed that a woman’s role in the home is to cook, clean, and care for their children. For example, Ker stated, “Being a woman, you have to take care of the children and cook for them when they return from school.” Although the participants that have been in the United States for over 17 years realize that it is unfair for women to complete all household chores in addition to working outside of the home, they realize that gender role is a part of their culture. Xee stated, “Even if we have a good job, when we get home, we still have the old traditional duties that we do everything.” It was also looked upon them negatively if their husbands do more of the domestic chores. For example, Xee stated, “If they see him doing more than that (25% of the house work), they say she must have boss him around for the husband to do that.” Nu stated that although there are changes in gender roles in the United States in the Hmong society, the men still do less household chores. Nu stated, “the men help more now (with household chores) because now women have the opportunities to learn just like the men so they work outside of the home as well. So when women go to work, men must know how to cook and clean.”

_Importance of respecting husband._ All of the participants stated that they should respect their husband. Ker and Thong, two of the most recent refugees, stated that they should respect their husband more than themselves because they are “women,” while the rest of the participants elaborated on why they believe their husbands should be respected. For example, Ker stated, “You must respect your husband more because you are just a woman.”
Thong stated, “If you’re a woman, you must respect your husband more than you.” Additionally, Xee believes a part of being a good woman is to respect her husband. Although she believes the respect for men and women should be equal, her respect for her husband is important for her to receive respect back from other people. Xee stated, “Like for Hmong, if you have a good life, you don’t have respect from other people. If you respect your husband, they will respect you. It doesn’t matter if it’s his family or yours. If they see that you don’t carry yourself well or respect your husband, they won’t respect you.”

Integration of cultural beliefs. All of them are open to include beliefs from the mainstream culture if it suits their way of life. Xee believes individuals should “believe whatever they want” and that it is important to integrate beliefs of other cultures because “if you see what they’re doing that is good, use it. If you see that it’s not good, don’t use it. So take away what you need.” Pa believes that it is important for a person to know their origins and traditional beliefs. She stated that especially professional Hmong individuals should know their traditional beliefs. Pa believes the right way of life is to have knowledge of your cultural beliefs before adding beliefs of others. She stated, “You must always remember your cultural practices and origins. If you only remember theirs (mainstream culture), they will say you are not intelligent.” Nu also spoke of the importance of keeping one’s cultural practices because it is the person’s origin, therefore it is a part of that person. She also said she integrates other beliefs that suit her life. For example, she stated, “I keep the ones that are helpful. For example, the things that help you in life, like how to be a good person.” Ker believes people must keep their cultural practices to be a good person but it is also good to know the mainstream culture. Thong’s response was, “Keep ours (Hmong cultural beliefs)
because I’m Hmong.” Yet, she also stated that because she lives in a country that does not belong to her, she must know the beliefs of that country. She stated, “You live in their country so you must take in some of theirs, but don’t forget yours.”

**Fulfillment of traditional expectations.** All of the participants appeared to be strongly influenced by traditional expectations. Although some do not believe in the expectations, they still try to fulfill them to receive respect and to show respect to other Hmong who still keeps the traditions. Although both Ker and Thong did not acknowledge the influence of society in their interviews, Nu, Pa, and Xee were cognizant of the expectations of the Hmong culture and society. Clearly, Ker and Thong appeared to be influenced by the Hmong culture because they stated that they must respect their husband because they are “women.” They also reported that a woman’s role in the home is to cook, clean, and care for the children. Nu, Pa, and Xee all stated their opinions but also added the views of the culture. For example, Nu stated, “In the home, women cook, care for children and wash dishes. In the past, these are women’s work. Now, if the men are not lazy, they will help. But before, no.” Nu reported that men’s role in Laos were chopping wood and doing heavy jobs outside of the home, jobs of which women do not have the physical strength to perform. She stated that she does not believe in these traditional roles anymore because in the United States both the wife and husband work outside of the home. Pa and Xee also disagree with some of the gender expectations of the Hmong culture. Although Pa, Xee, and Nu disagree with the gender expectations, they still talk about fulfilling those roles.

**Perceptions of good women.** There were some differences and similarities in the participants’ responses to the question of what is a good woman. Two of the women, Thong and Nu, defined a good woman as someone who performs domestic chores. Four of the
women, Xee, Nu, Thong, and Pa included caring for or respecting the husband as part of the description of a good woman. Although there were differences, all of the participants described being a good woman as caring for others.

**Women dual role expectations.** All of the woman stated that women should obtain an education and seek employment. They also stated that women should also be responsible for domestic chores. Although some of them do not agree with the set gender roles, they oblige. Xee stated, “Even though you have a profession, you have a job, your responsibilities there are not the same as the ones at home. When you come home, don’t bring your status at work to use at home because it’s not going to work.” Xee also stated, “The world outside, your profession, it’s another world then the world at home. The world in your family is another world.” Xee also talks about knowing that she could boss her husband around the house, but not when others are around.

**Education as seeing.** Three women, Pa, Xee and Nu, described education as a tool to “see.” For example, Pa stated, “Those young that are educated in this country, they can get themselves to higher positions so they see further and could catch up to others (in life).” Additionally, Nu stated, “When I learned the Thai language and went into town, I could understand what the Thais were saying and I know what every sign on the street said. So then, I realize, wow, now my eyes can see.” Nu also stated that once her parents realize the importance of education after she was able to assist them in communicating with the Thais, they allowed her sister to attend school. Xee also talked about the term “see” when she discussed education for women. Xee stated, “You take education, it take a lot of seeing it, hearing it, and see a lot that education is making it, otherwise they do not realize that.” Xee also spoke of relatives who wanted to attend college after they have seen her obtain her
bachelor degree. The other two women, who have only been in the United States for half a year, spoke of the importance of education to obtain employment, learn English, and gain independence but did not describe it as a way to see.

*Lack of voice and recognition.* Most of the women spoke of situations where they could not or would not voice their opinions because of cultural expectations. It appears as if their voice was perceived as less important than the men. Ker stated, “Even if the things I say are good, if he’s (husband) not happy with it, then I forget it. If he’s happy to do it then we’ll do it, if he’s not, then we won’t.” Xee discussed a situation where she was voted to be president of a clan organization but because the men of the organization were not happy with the vote, she stepped down from her position. Xee stated, “The men met and say that they won’t allow a woman to lead the clan. They won’t allow and created a whole story and at the end I didn’t serve the term.” Xee also stated, “You have to go along with them because if you don’t go along with the culture, they are going to reject you.” Xee recognized the unfairness of the situation, but she did not voice her concerns because she said, “Maybe I didn’t think about myself as much as I did for the whole clan. Women issues are important but keep the whole clan together is more important. Maybe the fight for women issues will be later.” Nu spoke of wanting to be a man instead of a woman because men get certain privileges and recognitions for simply being a man. She stated, “When I was young, I wanted to be a man because men get to rest more, they don’t work as hard, and they get to be put ahead, like eating first…. I want to be a man so I could be more prosperous and so they could recognize me because I am a man.”

*Unfairness and oppression.* Most of the women recognized the oppression they experienced as a result of the Hmong culture. The two women, Ker and Thong, who just
recently came to the United States did not express the unfairness of the Hmong cultural expectation but the other three women who had been in the United States for over 17 years expressed how unfair they see the Hmong society is to women. For example, Pa stated,

Now, women are still lower, they haven’t rise as high as men yet. They say men and women are equal but women still doesn’t have as much right .. except those that get higher education and they let those educated and skilled talk and discuss. According to the elders, it’s still the same, women still don’t have as much value. It’s still the same, if it has changed, it hasn’t changed much; women have not been given much right. It still seem like it stayed the same.. as in Laos. But those young that are educated in this country, they can get themselves to higher positions so they see further and could catch up to others. Those old that came from Laos and are not educated, I think this generation is still functioning the same way as the ones in Laos. There’s no change. If there’s any changes, only in their words, not in their heart.

The women also stated that they see the unfairness but are sometimes unable to resolve the situation to make it fair for women. Xee stated that the culture will reject you if you speak against the unfairness. Some participants also shared how they dealt with the oppression without being rejected by the Hmong society. Nu and Xee spoke of changing perceptions and behaviors in their immediate family in hope to change the Hmong community. Nu spoke of requesting her husband to utilize a larger table for gatherings so both genders could sit and eat at the same time. In regards to helping the Hmong society recognize women as leaders, Xee stated,

Like they always say, you must lead your family first, like in your family if you and your husband don’t work well together, they are going to see that you are not going to
be able to lead elsewhere---Hmong. I think it’s everywhere. If you can’t lead yours.. so start at home, change in the home, your children and relatives and slowly open the process. The whole big population is not ready for that.

**Triangulation**

This section triangulates the PRBS, HSCL-25, and themes extracted from the interviews to construct a Hmong women identity model. Although the primary usage of the triangulation process was to extract a model, this process also shows the importance of qualitative data. Some of the interviewed participants gave different responses to the same questions that appeared in both the PRBS and the interview. This difference in responses illustrates the importance of triangulating both qualitative and quantitative data. For example, the difference in responses may mean that they are in the process of transitioning from one belief system to another (i.e. cultural to integration) or their answer are inconsistent due to the different expectations of the dual cultures. Therefore, triangulation gave a more accurate account of the participants’ experiences.

Before constructing the model, here is a summary of the findings that will be included in the model. It appears that the number of years in the United States is associated with educational level. It also appears that the number of years spent in Laos or Thailand is associated with perception of who should be respected, educational level, and what they are doing to better their lives. Perception of who should be respected is associated with both depression and anxiety. Education is associated with depression and how they are bettering their lives is associated with anxiety. Age did not seem to be associated with any of their perceptions or behaviors, nor did it have any association with mental health symptoms. The
importance of obtaining education and work to better the family rather than the self is found to be true to most women (70%).

There were some discrepancies between the participants’ belief system and how they are behaving or living their lives. The category of who should be respected is a category where most participants (63%) believe both men and women should receive equal respect but most (63%) also saw that at home, men were more respected then women. There appears to be a discrepancy in reality and of their perception of who should be more respected. Additionally, there appears to be a discrepancy between what they believe a woman’s role should be and what they are doing at home. For example, 66 percent of the participants believed in sharing equal domestic chores at home but only 37 percent are actually sharing the chores at home. Additionally, 50 percent of the participants believed in having equal rights in voicing concerns and making decisions at home, but only 38 percent of them have a say and share equal decision making with the men in the family. Thirty percent of them reportedly will voice their concerns and make decisions only when permitted by the men. Thirty-two percent of them stated that they are free to voice concerns and make decisions when they feel they should, whether they are permitted by the men or not.

**Constructed Hmong Women Identity Model**

Based on the triangulation of data and findings, the following is the constructed Hmong women identity model. This model is based on perceptions, behaviors, relationship to others and society, length in the United States, insights on self and society, level of education, and how they view and battle oppression. The stages progress from stage one to stage four but that does not mean that the higher stage is better or healthier. The results of this study are not sufficient to declare which stage is healthier.
Stage one. Women in stage one are recent refugees, such as Thong and Ker. They are least acculturated into the mainstream culture and lacks education. They recognize the needs of their husband and children before their own. They also lack insight of the oppression that has been bestowed upon Hmong women. In this stage, they respect their husband more than themselves. They define themselves based on the definition that the Hmong society provided and does not question the definition. They define women as one who is humble and completes all domestic chores. They maintain all cultural practices, but welcome the integration of the mainstream cultural practices.

Stage two. Women in this stage, such as Pa, have been in the United States for a few years, such as over 10 years. They have been exposed to the mainstream culture. They may or may not have an education. They see the importance of education and what a person could do with an education by witnessing the successes of educated friends and relatives. They may not react on their knowledge. They recognize the oppression and unfairness but oblige because they feel the oppression and unfairness are part of the culture and that they cannot do anything about it. If they do voice their concerns, they do so only when permitted and only in non-intrusive, humble way. They define themselves based on reasons that are strongly influenced by the Hmong culture, but only choose some of the definitions provided by the Hmong society to describe them. Women in this stage maintain some Hmong cultural practices and integrate some mainstream cultural practices.

Stage three. Women in this stage have been in the United States for many years, such as Nu and Xee. They have been exposed to the mainstream culture and had obtained a high school degree or higher. They see the importance of education and had either continue on to college or obtained employment outside of the home. They recognized the oppression and
the effects of oppression on women. They either use some of their voice to battle the
oppression within their own families or they do not voice their concerns. They may try to
separate themselves from the culture by voicing their opinions elsewhere and letting the
culture be as is. They are cautious of offending the elders or the culture and still recognize
familial and clan needs as more important than individual needs. Women in this stage
maintain some Hmong cultural practices and integrate some mainstream cultural practices or
they practice mostly mainstream cultural practices.

*Stage four.* Women in this stage are similar to women in stage three in regards to
education and employment. They are also cognizant of their voice and strengths. The
difference is that they are now aware of both their needs and that of others’'. They may start
battling the oppression within their families as well as voicing their concerns and working
with the community to decrease the oppression and unfairness. Women in this stage
maintain some Hmong cultural practices and integrate some mainstream cultural practices or
they practice mostly mainstream cultural practices. They do not have fear of being rejected
by the society. They function based on their belief system rather than that of the society.

**Summary**

This chapter includes the findings of the association between mental health,
perception, behaviors, and demographic variables among the 38 participants. Research
questions are answered and a Hmong women identity model is constructed form the
triangulation of data. Next chapter, Chapter 5, will include the summary of chapters one
through four, integrate findings from this study to existing literature, implications,
limitations, and future direction.
CHAPTER 5

SUMMARY AND INTEGRATION OF RESULTS

This chapter summarizes the research goals, methodology, and results. This chapter also includes explanations for the findings, integrates findings with existing literature, includes implications of the study, discusses limitations, and discusses future direction. The purpose of this study is to gain insights into Hmong women and their issues, such as identity development. This study addresses the following research questions:

1) Is there a relationship among perceptions of being a woman, reported behaviors of being a woman, and participants’ mental health well-being?

2) Is there a relationship among selected demographic variables, mental health well-being, reported perceptions relating to being a woman, and reported behaviors of being a woman?

3) Will perceptions relating to being a woman be similar to reported behaviors of being a woman?

4) What is a model of Hmong women identity development?

In order to accomplish the research goal and questions, 38 Hmong women volunteers from Fresno, California were recruited to complete the demographic sheet, PRBS survey and HSCL-25. Of the 38, five of the women were selected to be interviewed further with semi-structure interview questions that are similar to the questions on the PRBS survey. The semi-structure interview is another form to collect information on the same issues that are on the PRBS and it also allows the participants to elaborate their answers on the PRBS survey. The CMH chi-square test, descriptive statistics, constant comparison qualitative analysis, and triangulation were all used to analyze the data.
To ensure quality and validity, several procedures were required throughout the dissertation process. The PRBS was translated to Hmong and back translated to English to ensure that those who cannot read English were answering questions that were similar to the one on the English version. Furthermore, three raters were used to determine whether items on the PRBS were perceptions or behaviors. Additionally, three raters rated the choices of the items into cultural, integrated, or alienated categories. Only items that were rated the same among raters were utilized. One item of the PRBS, six, was taken out before analyzing for behaviors because the raters did not agree on this item. Four items on the PRBS (five, six, nine, and ten) were taken out before analyzing for cultural, integrated, and alienated views because the raters did not agree. To ensure the validity of the themes extracted from the interviews, an auditor was used to ensure that the themes accurately portray the women’s answers by examining the researcher’s journal and the themes.

The transcriptions of the interviews are in English although many of the interviewers responded in Hmong. The researcher transcribed the tapes into English and consulted with a research assistant during the transcribing process to ensure the transcriptions were accurate. Although the back-translation process would have been more accurate, it was impossible to use with the transcriptions due to the multiple pages that needed to be back-translated. There were over 30 pages of single spaced transcriptions that would need to be back-translated. This research lacked the funds to complete this extra step to ensure validity.

Summary of Results

Question One

There were some associations found among reported perceptions, reported behaviors, and participants’ mental health well-being. Perception of who should be more respected and
current actions taken to better their lives were found to be associated with anxiety. Those
who did not obtain an education and view men should be more respected showed more
anxiety. Perception of who should be more respected, perception on women’s role in voicing
concerns, perception of education, educational level (behavior), and perception of
maintaining cultural practices are all associated with depression. Certain anxiety and
depressive symptoms were also found to be associated with certain perceptions and
behaviors; Table 3 summarizes this finding.

**Question Two**

Demographics of the participants were found to be associated with behavior and
perceptions but not with depression or anxiety. How long the participants have been in the
United States is associated with their current educational level. The years spend in another
country such as Laos and Thailand is associated with the perception of who should be
respected, educational level, and keeping cultural practices. Demographics were not found to
be associated with symptomatic depression or anxiety, but were found to be associated with
certain symptoms of depression and anxiety (See Table 6). For example, the number of years
spent in another country is associated with depressive symptom “crying spells.”

**Question Three**

There were almost an equal amount of people who behave in ways similar to their
perception and who did not behave in ways that are similar to their perceptions. The largest
discrepancy between perception and behavior is the response to the questions of a woman’s
role in the home. Only 15 participants or 39 percent of the participants behaved in ways that
was similar to their perception. Most of the participants (68%) believe that the women’s role
in the home should include, “share equal family responsibilities and provide financial support
for the family,” but only 37 percent of the participants are actually sharing responsibilities in the home, while 39 percent of the participants are doing most or all of the domestic chores, and 24 percent of the participants do only a few domestic chores. This finding implies that most participants believe in the integrated perception, which is a combination of a cultural and alienated perception, but 39 percent behaved accordingly to cultural perceptions and 24 percent behaved accordingly to the alienated perception. Thus, perceptions and behaviors of many of these Hmong women have diverged from Hmong cultural expectations.

**Question Four**

Some of the common themes found among the women elaborate on some of the survey questions. The common themes are level of husband involvement, domestic chores allocated to women, importance of respecting husband, integration of cultural beliefs, perceptions of good woman, women dual role expectation, education as seeing, lack of voice and recognition, and unfairness and oppression. Level of husband involvement, women dual role expectation, education as seeing, unfairness and oppression were themes that appeared in the interviews although there were no questions on the survey asking for these themes. The husbands of the two women that just recently came from Thailand were more involved in the interviews than the other husbands. It is apparent in the interview that societal influence or expectation is strong and affecting how these women live their lives. In their interviews, they spoke of dual roles that they have to fulfill such as working outside of the home and coming back to complete the domestic chores after work. Most of them recognize the oppression but do not have a way to deal with it. Some choose to deal with the oppression within their immediate family rather than the society or clan. Also, most of them recognize education as a way to recognize their needs and the world around them.
Based on the triangulation process, a model of four stages was created. The stages considered length of time in the United States, education, recognition of oppression, recognition of societal needs, recognition of own needs, and taking actions to fulfill those needs. This model is based on specific characteristics and cultural influences of Hmong women.

Integration of Findings with Existing Literature

Comparing to Existing Literature

Some of the results of this study are similar to other findings in existing literature. For example, the oppression that current authors identified in Hmong women exists within this sample of participants. The Hmong culture still has a strong influence on Hmong women despite the change in societal laws and equal rights for women. Although this study has found that Hmong women lacks voice, similar to Belenky et al.’s (1997) stages of woman’s ways of knowing, it provided insight into another term that describes these women in their own words. The Hmong women in this study did not emphasize that they do not have a voice, but rather than they did not have sight of things. Most of them described education as a way for them “to see.” Voice is important, but for these women, “seeing” societal views and what they could do for themselves and others is a healthy approach to life. It appears the women have to “see” or recognize before they could gain their voice. Furthermore, it appears that women gain voice to assist their family such as husband and children before they could assist themselves or society, such as gender equality issues. Some women will only consider their needs after their family and society is taken into consideration. Figure 2 describes this process of gaining voice for Hmong women. Belenky et al. (1997) recognized the voice and knowledge of women. The term “see” that the Hmong
women used in the interviews appears to be an accumulation of all the different knowledge that Belenky et al. (1997) described.

No education $\rightarrow$ education $\rightarrow$ see $\rightarrow$ voice $\rightarrow$ voice for need of family $\rightarrow$ voice for need of self/society

Figure 2. Process of obtaining voice for Hmong women.

Awareness (seeing) and exposure appear to be the strongest influences of the change in perception and behaviors of these women. Unlike other identity model, age was not found to be an influence in this model. Since the Hmong women identity model is describing adult females, age may not have affected the results because all of the women were considered adults and Hmong children are expected to fulfill gender and cultural expectations at a young age. A study focusing on children and teenagers may be needed to identify whether there is a difference in identity development when age is taken into consideration.

Early Marriage and Education

Education is a way for these participants to view their world and survive in their world. Education appears to be important to these women and findings are consistent with previous findings. Similar to previous findings (Hutchinson & McNall, 1994), although many of the women in this study married at a young age, only seven of the 22 married women did not have a high school degree. It is important to note that six of the participants without a high school degree were in their 20s or older when they entered the United States, which may pose additional difficulties for them to complete their high school degree or general education degree (GED). This may explain the finding that the number of years
spent in another country and the number of years in the United States is associated with educational level. Additionally, one of them is attending “adult school,” which may lead to obtaining a GED. Therefore, all of the married participants who had access to education either have a high school degree or higher. Similar findings were found in the unmarried participants of this study as well.

Relation to Acculturation Theory and Womanist Identity Model

In existing literature on acculturation, an increase in education influences cognitive style and attitudes or perceptions (Berry, 1980). Although level of education was not found to be associated with perceptions in the CMH chi-square test, the themes extracted from the interviews showed that education and exposure to others who had been educated does help the women to view life differently. Furthermore, length of time in the United States and length of time in another country are associated with some change in perceptions and level of education. Therefore, the acculturation process appears to influence one’s perception. Additionally, most of the women appeared to be influenced by both the Hmong culture and Western culture. Most of the women possess perceptions and behaviors that include both the Hmong and Western culture, an integrated perception. A large percentage of the women still kept some cultural perceptions and behaviors while only 19.3 percent have taken on either an alienated perception or behavior which does not include any aspect of the Hmong culture. These findings apply to and are similar to the four modes (integration, assimilation, marginalization, and separation) of acculturation in Figure 1 (Berry, 1991). The only difference between the findings of this study and previous literature on the acculturation theory is it examines the behavioral changes and agreement between perception and behavior.
In regards to identity development, Helms’s womanist identity model was able to portray the oppression that Hmong women has to overcome and identify the growth or recognition for one’s own needs, but it did not accurately portray the collectivistic perspective that is ingrained in the identity of Hmong women. Although the Hmong women reside in an individualistic society, they still kept some of the cultural beliefs of working to better their family and clans. Figure 2 and the new model constructed from this study illustrated that Hmong women often fulfill the needs of others before they try fulfilling their own. The needs of others are at times specified as their own needs. Specifically, unlike other models, the newly constructed Hmong women identity model portrays the collectivistic perspective that sustain in each level of identity development.

*Mental Health*

Previous studies have shown that the Hmong had high incidences of depression and anxiety due to their exposure to war, the aftermath of the war, relocation, and acculturation. This study found that although most of the women have been in the United States for over 10 years and some have been in the United States for over 20 years, there are still incidences of depression and anxiety. Most of the participants were children or teenagers during the Vietnam War and during the relocation to the United States. A total of 7 participants (18%) were found to have mental health issues. In this small sample, three of the participants were diagnosed with the HSCL-25 as depress and one is diagnosed as anxious. Three additional people had both anxiety and depression.

Qualitative field notes and descriptive statistics revealed that issues relating to acculturation may still be the cause of mental health issues. The conflict between one’s need and that of the culture is apparent and strong. Hence, many behave in ways that are similar
to cultural expectations but different from their own perceptions. The need to remain respectful to elders and the belief that one has to respect cultural expectations to receive respect is influencing many to behave in cultural ways. Furthermore, as the Hmong culture and youth changes, the elders may have difficulty adjusting. A 92-year-old woman spoke of feeling depressed and “wanting to die” because her children are not “taking care” of her. She stated that although she lives with her son and daughter-in-law, she cooks and cleans for herself. She believes her children do not love her because in the Hmong culture, children are expected to care for their parents at old age.

Limitations

Like every study, there are a few limitations to this study. One of the limitations of this study is the small sample size. This sample size may not be large enough to show the variations in perceptions and behaviors or make generalizations. Another limitation is the lack of fund to back-translate over 30 pages of transcription from English to Hmong. The researcher had translated the interviews into English during the transcription process and had consulted with a research assistant, but the back-translation process was not utilized. Another limitation of this study is that the participants are all from Fresno, California. The perceptions and behaviors of this group may be different than those women in other states or city of the United States. Therefore, some findings of this study may not be generalized to Hmong women in other states, although they will assist in understanding Hmong women who have similar acculturation and cultural experiences as the participants.

Implications and Future Research

The Hmong women came from a collectivistic society. The Hmong women in the United States are still strongly oppressed by their culture, as evidenced by the results of this
study. Using mainstream or other minority identity model to understand Hmong women may not befit. The Hmong women identity model derived from these data could help professionals gain insight into the different aspects of live that Hmong women deal with when working with individual problems or issues. This model could be used in counseling to understand where they are in their insights or knowledge. Although it may not apply to every Hmong women, it could provide insights into the differences between women from collectivistic societies and individualistic societies. The model could also provide insight into women who are balancing two sets of cultural expectations.

In order to construct theoretical assumptions and theories that describe women, research should continue to study minority women of various groups. The existing theories included participants from White and Black populations, which may not accurately portray other minority women. This study only examined adult identity development and the voice and perception of adult Hmong females. Future study is needed to examine Hmong female children and teenagers. The decision to start at the end of an identity spectrum did not allow the researcher to examine influences of childhood on identity development. Furthermore, knowing that many women in the Hmong community lack voice and awareness due to the cultural expectation and societal oppression, it is likely that children may have even less of a voice. Therefore the identity development of female children should be examined and link to the development of female adults.

Lastly, future research is needed to hone or test the model that derived from this study. Factor analysis of the constructs may determine the accuracy of each stage of the model. Furthermore, the integration of the Hmong woman identity model (Lee, 2005),
constructed by examining previous identity models, and the model derived from this present study may be able to provide better insight into the identity development of Hmong women.

Concluding Remarks

This study found mental health, acculturation, and educational issues that were similar to current literature. A few novel findings came out of this study. A Hmong women identity model was derived from the data and the term “see” was recognized more so than the term “voice” in these Hmong women. The participants appear to develop awareness or the ability to “see” before gaining voice. The Hmong women had undergone many obstacles, but appear to be functioning well. Many still maintain collectivistic perspectives in their identity development. Although some of them were found to have mental health issues, everyone had goals or the need to better their families’ lives. The researcher hopes that this study will not only provide new data, findings that confirms previous studies, but also allows the voice and views of these Hmong women to be heard.
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Hmong Youth Cultural Awareness Project (1994). *A free people: Our stories, our voices, our dreams*. Minneapolis, Minnesota: Minneapolis Public Schools.


Westermeyer, J., Neider, J., & Vang, T. F. (1984). Acculturation and mental health: A study of Hmong refugees at 1.5 and 3.5 years postmigration. *Social Science Medicine, 18 (1)*, 87-95
APPENDICES
APPENDIX A
Consent/Confidentiality Form for Participants

I, ______________________, agree to participate in the research entitled “Hmong Women in the United States” which is being conducted by Song Lee. I understand that this study is a dissertation at North Carolina State University. I understand that this participation is entirely voluntary. If I choose to be interviewed beyond completing the survey and the Hopkins Symptom Checklist-25, my interview will be audio-taped. I can withdraw my consent at any time without penalty, and have the results of the participation returned to me, removed from the experimental records, or destroyed.

1. The following points have been explained to me:
   a. The reason for the research is to explore views of the participants in regards to being a woman and of how a woman should be.
   b. Direct quotations of the interview may be used but no identifiable information will be used.
   c. To increase validity of the study, transcripts of the study will be viewed by 3 other research assistant.
   d. One research assistant will assist the researcher during my interview, taking notes on the process of the interviews.

2. The procedures are as follows:
   a. Study Participants will complete a survey and/or engage in a semi-interview. The survey will take about 10 minutes and the semi-interview is expected to take an hour.
   b. The semi-interview will be audio-taped and then transcribed by the researcher.
   c. The transcriptions will then be coded and analyzed by the researcher and a research assistant (auditor).
   d. A written report of the data will be turn in to a dissertation committee. The written report may also be submitted for publication and be used in future research.

3. There are no anticipated physical, psychological, social, or legal risks associated with this study, but you are free to skip any question that makes you uncomfortable.

4. The results of this participation will be confidential and will not be released in any individually identifiable form without the prior consent of the participant unless required by law. Alias will be used rather than participants’ legal names. Other person(s) that will have access to interview materials (i.e. audio-tape, transcript, codes, and analysis) will be the researcher’s dissertation committee. Audiotapes will be kept in a confidential storage and will be destroyed after the study.

____________________________________  ______________________________
Signature of Investigator      Signature of Participant and Date
[or authorized representative]
APPENDIX B
Background Information

Direction: Please fill in the following. Please put N/A if it does not apply to you. Please estimate if you do not have the exact information.

1. Age: _____________
2. Place of Birth: ______________
3. Year entered United States: ______________
4. Other countries you resided in before entering the United States: ______________
5. Years resided in other countries: _________________________
6. Occupation: _____________
7. Occupation before entering the United States: _______________
8. Education level: _____________________
9. Marital Status: __________________
10. Age when married? Divorced? Widowed? ____________
11. How many children do you have?: ______________
12. Who do you live with? ____________________________________________
13. Religion/Beliefs: ____________________________________
APPENDIX C
Semi-Structure Interview

Interview Questions Taken from the Survey:

1. How would you describe a good woman?

2. Are you a good woman, according to your definition?

3. What should the role of women be in the family or home?

4. What do you do on a daily basis?

5. What is the role of women in society?

6. How are women when compared to men?
   a. Who should be more respected?

7. How should women behave in front of men?

8. What is the women’s role in making family decisions? Which family matters?

9. What is your role in voicing your own opinion and making family decisions?

10. How important is education to women?

11. In your opinion, should one keep one’s cultural practices and why?
    a. Should one integrate Western culture?

12. What are you currently doing to better your life?
**Direction (English Version):**
Please circle one answer that best represents your thoughts and behaviors. There is no right or wrong answer.

1. **Which best represent your thoughts of a “good” woman? (perspective)**
   a. Must have good manners and knows her responsibilities.
   b. Must be able to provide for the family or self and share equal responsibilities in the home.
   c. Must be true to yourself and live life according to your own free will.

2. **Which of these best describes you as a person?**
   a. I have good manners and know my responsibilities.
   b. I provide for my family or self and share equal responsibilities at home.
   c. I am true to myself and live life according to my own free will.

3. **Which of these statements best represent your daily tasks at home? (self-reported behaviors)**
   a. I do most or all of the cooking, cleaning, and child rearing.
   b. I do not do all the cooking, cleaning, and child rearing because I believe everyone should take equal part in house chores.
   c. I do little cooking, cleaning, or child rearing.

4. **In your opinion, what should be the role of women in the family? (perspective)**
   a. Cook, clean, child rearing, and not necessarily have to provide financial support for the family.
   b. Share equal family responsibilities and provide financial support for the family.
   c. There shouldn’t be any specific roles or responsibilities in the home for women.

5. **Who should be more respected? (perspective)**
   a. Men should be more respected than women.
   b. Men and women should receive equal respect.
   c. Individuals receive respect not because of their gender but of their knowledge and abilities.

6. **In your home, which gender receives more respect? (self-reported behaviors)**
   a. male
   b. female
   c. Whoever has knowledge and abilities regardless of gender.

7. **What is your opinion on the women’s role in voicing their opinion and making family decisions?**
   a. Women have no say or make no decisions, unless they are asked by the men of the
family.

b. Women have as much right to voice their own opinion and make family decisions as men in family matters.

c. Whoever has the knowledge and abilities should make the decisions.

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<thead>
<tr>
<th>8. What is your role in voicing your own opinion and making family decisions? (self-reported behavior)</th>
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<tbody>
<tr>
<td>a. I do not provide feedback nor make decisions unless asked by the men of the family.</td>
</tr>
<tr>
<td>b. I have as much say and share equal decision making with the men in the family.</td>
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<tr>
<td>c. I make decisions when I feel I should.</td>
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<tr>
<th>9. How important is education to women?</th>
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<tbody>
<tr>
<td>a. Education is not important as long as women know how to cook, clean, and take care of children.</td>
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<tr>
<td>b. Women should obtain as much education as they can.</td>
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<tr>
<td>c. Education is not important for women as long as you can provide for the family.</td>
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<th>10. What is your educational level?</th>
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<tr>
<td>a. No education at all.</td>
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<td>b. Some education, or high school graduate.</td>
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<td>c. College graduate.</td>
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<th>11. In your opinion, should one keep one’s cultural practices?</th>
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<td>a. Yes, keep all one’s cultural practices.</td>
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<tr>
<td>b. Keep some but include mainstream culture.</td>
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<tr>
<td>c. It is not important to keep your cultural practices as long as you are practicing something that you believe in.</td>
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<th>12. At home, how much of Hmong cultural practices do you still practice?</th>
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<tr>
<td>a. Perform most, if not all Hmong cultural practices, such as traditional wedding, new year celebration, new-born welcoming ceremony, and shaman ritual.</td>
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<tr>
<td>b. Perform some Hmong cultural practices?</td>
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<tr>
<td>c. Does not practice any Hmong cultural practices.</td>
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<th>13. What’s most important to you?</th>
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<tr>
<td>a. Obtain education and/or work to better your family.</td>
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<tr>
<td>b. Obtain education and/or work to better yourself.</td>
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<tr>
<td>c. Education and/or work are not important to better yourself nor your family.</td>
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<th>14. What are you currently doing to better your life?</th>
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<tr>
<td>a. Obtaining education and/or working to better my family.</td>
</tr>
<tr>
<td>b. Obtaining education and/or working to better myself</td>
</tr>
<tr>
<td>c. I’m not obtaining an education or working.</td>
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</table>
**Lus Qhia (Hmong Version):**
Thov nyeem cov lus nug hauv qab no tag ces xaiv seb kab lus twg piav raws li koj siab xav tshaj los yog raws li koj pom tshwm sim tom vaj tom tsev. Cov kab lus koj xaiv no tsis muaj qhov yog los tsis yog, nws tsuas yog raws li koj siab xav xwb.

1. **Hauv qab no qhov twg hais raws li koj siab xav hais txog ib tug poj niam zoo?**
   a. Yuav tsum paub cai thiab paub nws txoj luag hauj lwm hauv vaj hauv tsev.
   b. Yuav tsum mus ua laj ua kam los pab nws tsev neeg los yog nws tus kheej thiab ua tej hauj lwm hauv vaj hauv tsev sib npaug zos ib yam li cov neeg nrog nws nyob.
   c. Yuav tsum ncaj ncees rau yus tus kheej thiab ua neej raws li yus siab nyiam.

2. **Hauv qab no qhov twg hais xws li koj tus kheej tshaj?**
   a. Kuv paub cai thiab paub kuv txoj luag hauj lwm.
   b. Kuv mus ua laj ua kam los pab kuv tsev neeg los yog kuv tus kheej thiab ua hauj lwm hauv vaj hauv tsev sib npaug zos ib yam li cov neeg kuv nrog nyob.
   c. Kuv ncaj ncees rau kuv tus kheej thiab ua neej raws li kuv siab nyiam.

3. **Hauv qab no qhov twg hais raws li koj teg dej num hauv vaj hauv tsev?**
   a. Kuv ua feem ntai los yog tag nrho tej hauj lwm hauv vaj hauv tsev xws li ua tshais ua hmo, tu vaj tu tsev, thiab tu me nyuam.
   b. Kuv tsis ua tag tej hauj lwm hauv vaj hauv tsev xws li ua tshais ua hmo, tu vaj tu tsev, thiab tu me nyuam vim kuv ntseeg hais tias tej hauj lwm no yuav tau muab faib rau sawv daws ua sib npaug zos.
   c. Tej hauj lwm hauv vaj hauv tsev xws li ua tshais ua hmo, tu vaj tu tsev, thiab tu me nyuam, kuv tsuas ua me ntsis xwb.

4. **Raws li koj xav, poj niam txoj luag hauj lwm hauv vaj hauv tsev yog dab tsi?**
   a. Ua tshais ua hmo, tu vaj tu tsev, thiab tu me nyuam; tsis tas yuav mus ua laj ua kam los pab yus tsev neeg.
   b. Hauj lwm hauv vaj hauv tsev faib sib npaug zos ua thiab yuav tsum mus ua laj ua kam los pab yus tsev neeg.
   c. Tsis tas yuav muaj ib lub luag hauj lwm hauv vaj hauv tsev rau poj niam.

5. **Raws li koj siab xav yuav saib leej twg muaj nqis dua?**
   a. Yuav tsum saib txiv neej muaj nqis dua poj niam.
   b. Yuav tsum saib poj niam thiab txiv neej muaj nqis tib yaam.
   c. Yuav tsum saib tus txawj ntse thiab muaj peev xwm muaj nqis dua, tsis tas nws yog poj niam los txiv neej.

6. **Nyob hauv koj tsev, nej saib txiv neej los poj niam muaj nqis dua?**
   a. txiv neej
   b. poj niam
   c. Saib tus txawj ntse thiab muaj peev xwm dua, tsis hais yog poj niam los txiv neej.
<table>
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<tr>
<th>Question</th>
<th>Option A</th>
<th>Option B</th>
<th>Option C</th>
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13. **Raws li koj siab xav qhov twg hauv no tseem ceeb dua rau koj?**

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<td>a.</td>
<td>Kawm kom paub ntaub paub ntawv, txawj ntse, thiab kho yus tsev neeg kom zoo.</td>
</tr>
<tr>
<td>b.</td>
<td>Kawm kom paub ntaub paub ntawv, txawj ntse, thiab kho yus tus kheej kom zoo.</td>
</tr>
<tr>
<td>c.</td>
<td>Kev kawm ntaub kawm ntawv thiab ua laj kam tsis tseem ceeb los kho yus tus kheej los yog yus tsev neeg.</td>
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14. **Koj tab tom npaj dab tsi los kho koj lub neej kom zoo tshaj?**

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<td>a.</td>
<td>Kuv tab tom kawm ntaub kawm ntawv thiab kawm kev txawj ntse, los yog ua laj ua kam los kho kuv tsev neeg kom zoo.</td>
</tr>
<tr>
<td>b.</td>
<td>Kuv tab tom kawm ntaub kawm ntawv thiab kawm kev txawj ntse, los yog ua laj ua kam los kho kuv tus kheej kom zoo.</td>
</tr>
<tr>
<td>c.</td>
<td>Kuv tsis kawm ntaub kawm ntawv thiab ua laj kam</td>
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