

**Modeling the Model Minority:
Does the Immigrant Health Paradox Apply to Asian Migrants' Mental Health?**

Diana Chao

In a Tortoiseshell: *In her paper about the immigrant health paradox, the notion that foreign born, recent arrivals of a given ethnic group typically have better health than their American born counterparts, Diana Chao positions the reader to appreciate the nuances of her argument, that the immigrant health paradox does not apply to Asian migrants, by effectively **orienting** the reader. After first providing the reader with concise definitions for **key terms** which are necessary to understand her thesis, Diana proceeds to give a comprehensive outline of the scholarly conversation surrounding her topic, which feeds directly into her motive.*

Excerpt

To effectively understand the immigrant health paradox in relation to Asian migrants, both the key players involved and topical conflicts investigated must first be specified. Given the long timeline within which one can be defined as a “migrant,” this paper will interpret Asian migrants as Asians who immigrated to the U.S. over the past five years. “Acculturation” will be understood as the adopting of American culture and norms, and U.S.-born Americans of Asian descent will be coined “Asian-Americans.” Establishing these definitions allows for a more focused investigation of topical conflict, with the most disconcerting one being that Asian migrants have great, yet also troubling, mental health relative to Asian-Americans depending on the study—and discrepancies in acculturation levels only serve to exacerbate the scholarly conflict (Nagata et al., 2017). John et al. (2012) epitomizes this by utilizing data from a national survey to find that Asian migrants’ self-reported mental health scores and rate of mental illness diagnosis contradict each other. To reconcile this, this paper compares John et al. (2012)’s conclusions to other topical research and analyzes how understandings of cultural stigma and Western/Eastern psychological symptoms differ amongst them. Doing this resulted in the discovery that John et al. (2012) ignored critical cultural idiosyncrasies. By incorporating original data analysis that accounts for these missed cultural nuances, this paper ultimately deems John et al. (2012)’s findings—and hence the broader contradictory results of positive yet simultaneously worrisome mental health among Asian migrants—methodologically skewed and reinterpretable, concluding that the immigrant health paradox does not apply to Asian migrants.

It is important to first understand how John et al. (2012) provides a baseline for navigating scholarly conflict on the applicability of the immigrant health paradox to Asian

migrants. Analyzing data from Asian respondents of the 2002-2003 household National Latino and Asian American Survey (Alegria & Takeuchi, 2002), John et. al (2012) discovered a “contradictory finding”: “Immigrants were more likely to report fair/poor mental health but less likely to have any mental disorder, anxiety or depression than U.S.-born Asians.” How could it be that these migrants would claim to have worse health, yet in actuality be healthier? Which conclusion is more reliable—their own reported health, or their diagnosed health? Following the former suggests a reversal of the immigrant health paradox, wherein Asian migrants are worse off in mental health than Asian-Americans. The latter, however, suggests the immigrant health paradox is absolutely applicable to Asian migrants. Which one is true? To solve this conflict, it becomes crucial to determine if and how other research reflect John et al. (2012)’s findings.

Alarmingly, other research on Asian migrants’ mental health deviates from John et al. (2012): they suggest that new migrants would actually be expected to self-report better mental health conditions than they did in John et al. (2012)’s findings. A key reason is cultural stigma. For one, Chinese and Vietnamese immigrants interviewees hold a common perception of mental illness as “abnormal” or “shameful”—one participant explicitly said that “[those with mental illness in the Chinese community] would rather hide it [than admit it]” (Hampton et al., 2007). Indeed, the Confucian interpretation of illness as a moral affliction may be credited for the lack of dialogue regarding mental health in many Asian communities, (Liu et al., 2008). When Conrad and Pacquiao (2005) interviewed mental health professionals, they similarly found that Asian Indians associate suffering with punishments and karma, the shame of which wards them off from seeking help early. As these beliefs derive from traditional Asian cultures and values, this furthers the idea that lower levels of acculturation into the U.S. can mean a general lack of awareness and willingness to confront mental illness in the Asian migrant community. If that is true, however, wouldn’t Asian migrants desire to downplay any inkling of mental illness? Why would they self-report worse mental health than Asian-Americans? The significance of these questions depend on whether Asian-Americans experience the same stigma towards mental illness as Asian migrants do. If yes, then it is difficult to rely on John et al.’s findings, since all survey respondents would be prone to hiding mental health concerns and thereby skew any comparisons between the two groups’ results. However, if Asian-Americans experience less stigma on mental health issues than Asian migrants, then the concern persists: why did John et al. (2012) find that Asian migrants rate themselves as having poorer health than Asian-Americans when it is expected that the migrants would try to hide mental concerns?

Author Commentary

Diana Chao

I've always had a habit of getting too wrapped up in things. This usually manifests in papers with unwavering conclusions but wobbly set-up—too familiar with the topic and too eager to get onto the analysis, I often leave my orienting in a state of “good enough.” However, even if I could somehow get away with that before, I certainly couldn't do so in my R3. The topic I chose—the immigrant health paradox—is so little known, that to not properly orient my reader would've only caused the rest of my arguments to suffer. As a result, I edited numerous drafts of the beginning to structure it in a way that both flowed logically and didn't take up so much space as to detract from the importance of my later argument.

I knew I had to accomplish three tasks in the beginning: 1) establish a connection to the reader—aka a motive, 2) clearly define key terms and concepts—aka the bulk of “orienting,” and 3) properly outline my argument without giving too many details away—aka the thesis. At first, I structured it like this: a hook, the motive, and then a few paragraphs where I intermixed orienting information with my thesis. This quickly became confusing, as aptly pointed out by Professor Allen.

By not presenting my definitions first, my motive and thesis were lost. There were too many key words thrown around, and it would've been easy to stay caught up in a quick definition of “Asian migrants” without being able to understand its implications for my argument. I wanted to show how on the small-scale, there is tremendous scholarly conflict and lack of investigation on the applicability of the immigrant health paradox to Asians. On the large-scale, I wanted to illuminate how the relevancy of this paradox should directly affect healthcare and immigration policies. However, if my definitions and thesis got too confusingly entwined in each other, then my motive would become less delineated as well.

To fix this, I decided to shake up the structure. I kept the hook, but this time I expanded the motive to be more explicit. Then, I devoted a paragraph to defining the key concepts and terms, and only after that was done did I go on to connect everything together into a thesis paragraph. This allowed me to achieve a more logical essay flow as well as ensure that what I had to conclude did not get lost in the chaos of orienting what is likely a completely foreign concept to most readers.

In general, my process involved a lot of road-mapping, delineating, and prioritization. By determining what my ultimate goal was, I could redesign my beginning to orient the reader:

both in the background of my research and in the importance of the argument I was about to make.

Editor Commentary

Nicholas Johnson

As Diana alludes to in her commentary, orienting is a complex art that many writers struggle with. Two key questions typically arise when an author is faced with the task of orienting their reader: how much contextual information must be provided to ensure that the reader comprehends the subject matter without distracting from the author's original contribution, and where would this information be ideally located?

As one becomes immersed in the research stage of producing an argumentative paper, it can be difficult to frame the findings and insights gained in a manner that can easily be digested by an individual who has not engaged in research on the topic. When transitioning to the writing phase, it is important to remember that the amount of orienting needed varies depending on the context and the expertise of the audience. Having chosen a relatively technical topic with a considerable number of terms that a typically reader would need definitions for, Diana appropriately took the time to define these terms in addition to providing a comprehensive pseudo literature review.

Diana excellently navigated the struggle of choosing where orienting information should ideally be placed in an article in relation to the article's thesis. Unfortunately, there is no golden rule for this consideration; it must be approached on a case-by-case basis. Performing all orienting before the thesis can result in the thesis being presented late in paper and the reader not knowing, towards its beginning, where the paper is going. On the other hand, presenting all orienting material after the thesis can result in the reader not being able to appropriately understand the thesis in all its complexity when it is first presented. Here, Diana's approach is effective because she first gives the necessary orienting, the definition of her key words, to make her thesis interpretable, and she leaves more detailed orienting material until after her thesis is stated. As she points out in her commentary, she recognized that she needed to define her key terms rapidly to prevent her thesis from becoming lost.

After presenting her thesis, Diana hits the brakes to orient the reader to the state of the scholarly conversation around the immigrant health paradox. What makes this section of her paper particularly effective is that she focuses on highlighting the interactions and tensions between the findings of the various scholarly articles rather than simply summarizing their conclusions. This approach allows the reader to have a better understanding of the state of the scholarly conversation. Moreover, Diana's framing of some of these tensions as questions fed elegantly into her motive as it outlined the scholarly disagreement that she would address

throughout the remainder of her paper. The excerpted passage positions readers to proceed fluidly through Diana's paper while feeling confident that they have the necessary background knowledge to understand the argument and all its nuances.

Professor Commentary

Professor Kachina Allen

In science we tend to answer motivating questions with data. Experiments or observations provide the evidence to support our arguments. Thus it can be difficult for students who are unable to perform their own experiments to write a meaningful research essay. It takes a lot of in-depth reading to find a unique motive that can be answered in an essay without new data. To produce her argument, Diana Chao did this level of reading and slowly began to see contradictions in claims by different researchers. Using conflicting sources, bringing in new information, and even re-analyzing the data presented in John et al's (2012) original work, Diana was able to answer a unique motive and produce a valuable contribution to research on immigrant health.

This excerpt shows the essay's strong orienting. To understand a motivating problem, the reader needs to understand the issues in terms of the current state of the scholarly conversation. Diana presents this information clearly and logically, in a way that a reader who is unfamiliar with the issues can still follow. But more than this, she uses this orienting section to define key terms and to build motive so that the reader can see the importance of her argument.

This is an early part of her essay, but one that lays the groundwork needed for her central thesis and indicates to the reader that her argument will be well supported and, more importantly, matters.

Works Cited

- Nagata, D. K., Wu, K., & Kim, J. H. J. (2017). Content Review of Qualitative Research on Asian American Psychological Well-Being. *Asian American Journal of Psychology*.
<https://doi.org/10.1037/aap0000088>
- Hampton, N. Z., Yeung, T., & Nguyen, C. H. (2007). Perceptions of Mental Illness and Rehabilitation Services in Chinese and Vietnamese Americans. *Journal of Applied Rehabilitation Counseling; Manassas*, 38(2), 14-23,47-48.
- Liu, D., Hinton, L., Tran, C., Hinton, D., & Barker, J. C. (2008). Reexamining the relationships among dementia, stigma, and aging in immigrant Chinese and Vietnamese family caregivers. *Journal of Cross-Cultural Gerontology*, 23, 283–299. <http://dx.doi.org/10.1007/s10823-008-9075-5>
- Conrad, M. M., & Pacquiao, D. F. (2005). Manifestation, attribution, and coping with depression among Asian Indians from the perspectives of health care practitioners. *Journal of Transcultural Nursing*, 16, 32–40. <http://dx.doi.org/10.1177/1043659604271239>

Bios

Diana Chao '21 is from the greater Los Angeles area. She is tentatively majoring in Geosciences with certificates in East Asian Studies and History & the Practice of Diplomacy. She sings with VTone and runs a global youth NGO on mental health called Letters to Strangers, of which there is a chapter on campus. She spends the rest of her time working on elevating social impact-minded art from emerging creatives at Adobe's Project 1324, dreaming about black sesame ice cream, and bothering her roommates with random questions like “if I were the tectonic plates, would I be too lazy to leave Pangaea?”

Nicholas Johnson '20 is in the Operations Research and Financial Engineering Department, focusing on Applied Mathematics and Health Care. He is pursuing minors in Applications of Computing, Applied and Computational Mathematics, and Engineering Biology. His hometown is Montréal, Québec. Nicholas is heavily involved with Princeton's Chapter of Engineers Without Borders and his work as a Writing Fellow in the University's Writing Center, and he refines his public speaking skills as a member of Speak with Style. During his free time, he loves to play basketball, work out, and play chess.